

Protecting India's Demographic Dividend: The Role of Mental Health

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ABSTRACT

This perspective highlights India's risk of mental and chronic health issues in the young Indian population in diluting the advantage provided by demographic dividend. India is experiencing a severe mental health crisis that affects people's capacity to contribute to society, their productivity, and their involvement in the labor market (due to projected economic growth). When considering the long-term implications of the current mental health crisis and the pursuit of continuous economic growth by leveraging the demographic dividend, India faces enormous challenges that call for immediate action to identify, treat, and ideally prevent mental health problems. The article explores the complex relationship between mental and physical health in the context of India's growing stress epidemic and problems linked to poor lifestyle choices, which are caused mainly by the country's fast-paced modern lifestyle. The authors stress the urgent need for action by highlighting the stark disparity between demand & supply for mental healthcare and the limited focus on prevention amidst rapid economic growth that will further put stress on the young population. Mental health issues have a potential risk of diluting India's demographic dividend advantage, if not addressed and managed in a timely manner. In conclusion, the article highlights the need for India to understand and address complex issues of mental health and behavioral consequences.

Keywords: *Demographic dividend, mental health, chronic disease*

India's demographic dividend

According to an estimate, based on "median age", India with a median age of about 29 years by 2025-2030, would remain one of the youngest countries in the world, especially among the large economies. A large and relatively young workforce offers India a once-in-a-lifetime opportunity to capitalize on its demographic dividend for economic and social growth. The demographic dividend refers to the potential for economic growth that can occur when a country has a relatively significant number of working-age adults compared to non-working age adults (Hans, 2023). For perspective, average median age for G7 countries (Group of Seven largest and most advanced economies of the world) is 43.4 (Lal, 2023). G7 countries represent about 46% of the world's gross domestic product (GDP).

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India, with one-fifth of the world's population, is undergoing a shift in economic growth, health dynamics and social structure. India is aiming to be in top 3 economy in terms of her GDP-gross domestic product (despite being below 120th rank in per capita GDP). This requires disproportionate growth (compared to past few decades) in several areas such as job creation, utilization of the workforce, development of skills, high-quality education, improved well-being and quality of life, managing gender parity so that more women and more Indians across both rural and urban area participate, improvement in infrastructure, and so on. Each individual needs to contribute significantly, and more and more people, especially women, need to participate. While there are challenges to leveraging the demographic dividend, it does provide us a unique advantage to India for next two decades.

India's healthcare challenges

Unfortunately, India's health trends are alarming. While the share of infectious or communicable disease, in years lost due to premature death, decreased from 61% in 1990 to 33% in 2016, the years lost due to premature death and chronic disease, have nearly doubled from 30% in 1990 to about 55% in 2016 (Rashmi & Mohanty, 2023). For mental health, the estimate indicates that 1 in 7 Indian needs help (Trivedi et al., 2021). Mental health issues' share in total disease burden has doubled since 1990. A recent National Mental Health Survey highlights a major treatment gap, i.e. 85% of individuals did not receive treatment for depression and 86% did not receive treatment for substance use, mainly due to poor awareness and limited availability of resources (Gautham et al., 2020). There are two alarming trends in healthcare that need to be addressed:

1. As highlighted earlier, the shift in burden from communicable diseases to non-communicable diseases could potentially increase the burden of disease among the adults (Age >21) and the elderly (Age >65). For example, recent research highlighted that non-communicable diseases are spreading faster among the population and developing early, especially in individuals aged 45-54 and 55-64 age groups (Rashmi & Mohanty, 2023). The early onset, especially in individuals aged 45-54 years can lead to significant social and economic consequences, including preventable burden on the healthcare system.
2. Shifting to even younger population, the data indicates that suicide is a leading cause of death for Indians aged 15-39 years, and India's contribution to global suicide deaths increased from 25.3% in 1990 to 36.6% in 2016 among women and from 18.7% to 24.3% among men (Dandona et al., 2018). There is an increase in suicide rates for men across all educational levels and age groups 18-29, 30-44, and 45-59 years. Whereas in women, most of the suicides were in the age group 18-29. India has the highest per capita suicide rate, with 64.2% of suicides happening in the group with an annual income of less than Rs 1,00,000 (Rej & Sasi, 2023). Suicidal behavior is intrinsically linked to mental health disorders, with an overwhelming majority of suicide cases—about 90%—having a documented history of at least one mental health disorder, such as mood disorders, substance abuse, conduct disorder, anxiety disorder, or PTSD-Post-traumatic stress disorder (Gould, 2001). This connection is further solidified by a meta-analysis indicating that the presence of any mental illness may increase the likelihood of suicide attempts tenfold (Bilsen, 2018).

Based on the above insights, while India is likely to enjoy the demographic dividend into the early 2050s, the healthcare challenges may negatively influence middle-aged Indians (non-communicable or chronic disease) and even younger Indians below 40 (mental health). Therefore, there is an urgent need to target the entire population for the prevention and

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management of chronic disease, and, prevention and management of the mental health of the young Indians below age 40, who are core to our demographic dividend.

Mental health – a public health challenge in India

In India's young individuals (about 252 million individuals aged 15-25 years who make up the core of the demographic dividend) mental health conditions are among the leading contributors to the years lived with disabilities. India's National Mental Health Survey of 2015-16 has identified that in young adults having mental health issues, the prevalence is two-fold higher in metros compared to rural areas. The prevalence, post covid and due to increased social media usage, has further exacerbated the issue. For perspective, as per 2019 statistics, for every 100,000 individuals, the suicide death rate is higher (14.04) compared to death due to road accidents (11.9), and a 33% increase in suicide deaths among men over the past few years (Tiwari et al., 2023; Yadav et al., 2023). These numbers highlight the risk from mental health that could have an adverse impact on the productivity and social structure around the working-age population that will take the Indian economy forward over the next few decades. There is an urgent need to work across urban and rural, young and not so young, working and not working, men and women to prevent such deaths, especially suicides where mental health is often the core underlying issue.

Additionally, Adverse Childhood Experiences (ACEs)—which include abuse, neglect, and various household challenges—have been recognised as significant risk factors. Adults who have encountered four or more ACEs are 30 times more prone to attempt suicide compared to those without such experiences (Bellis et al., 2019; Felitti et al., 1998). Together, chronic disease (primarily based on the lifestyle choices as risk factors) and mental health (childhood trauma, behavioral choices and protection from parents, caregivers) are preventable. While young adults strive to establish their autonomy, pursue academic progress, navigate through existing and new relationships and explore financial stability, the transition from childhood to adulthood is marked by enormous changes (mind-body, social, etc.). Given that 3/4th of all lifetimes, mental health issues first appear by mid 20s, and that positive childhood experiences do provide buffer against the long-term risks even if the individual experiences childhood trauma, all nations need to develop and have a plan in place to address and prevent mental health problems in their young population (Bethell et al., 2019).

A global perspective on mental health

Mental health disorders, such as depression and anxiety as example, have been identified as a major problem in several countries. Based on lost productivity alone, an estimate identified the global economic burden of mental illness to be about USD 2.5 trillion in 2010 and increase to about USD 6.1 trillion by 2030 only on the basis of lost productivity (absenteeism, presenteeism) (de Oliveira et al., 2023). Beyond depression and anxiety, there are several poor outcomes of mental health such as cognitive impairment (e.g. inability to focus, distractions, intrusive thoughts) that add to the overall impact on productivity.

The role of mental health is unfortunately substantiated by the statistics from the US shared by the Center for Disease Control & Prevention, (a) unintentional injuries (opioid overdose-unintentional poisoning, vehicle crashes, suicide, homicides) is a leading cause of death in America for young people aged 1-44 years old, and (b), suicide was the second leading cause of death in this age group. Evidence over several years indicates that individuals with mental illness is an independent risk factor for unintentional injury (Wan et al., 2006). With a multi-fold budget for healthcare as compared to India, if America has these challenges,

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India needs to seriously address mental health challenges, often in an uncharted territory, more so since the primary cause of death among young Indians is suicide! Therefore, an integrated approach is needed globally, more so in India, to understand and identify the drivers of mental health and understand the links between the root causes and mental health issues.

SUMMARY

Mental health issues manifest in several ways: through what the person experiences, such as loneliness, depression, anxiety and through behavioral issues such as expressed anger, substance abuse (e.g. alcohol, drugs, tobacco) relationship issues, etc. There are several implications of the interplay between demographic dividend and disability or limitations through health issues, especially among young Indians. First, India needs young individuals to actively participate in the economic growth and this comes with additional implications including the urbanization, the need to care for young children for working mothers, etc. Second, increased participation and related challenges for young Indians, as they are more likely to experience mental health and chronic health issues. This would impact their ability to function and increase load in the country's healthcare system, and society. Third, with mental health having a stronger impact on functional impairment compared to chronic physical health issues, and more young population experiencing mental health issues, India needs to understand the risk factors for mental health, and, identify prevention and management plan. Finally, given the limited resources, including in the budget and the persisting taboo associated with mental health, India must find innovative solutions to prevent and, manage mental health issues and avoid negative implications on its demographic dividend and reduce the disease burden on the society and the country.

To summarize, increasing trends of chronic disease and mental health, especially in the young population, is likely to have a severe negative impact on India's demographic dividend – core human resource required to sustain projected economic and development growth objectives. Insights from global data and trends in India show that, if a multi-pronged approach integrating public health, preventive medicine, social science, political will and business is not prioritized, India could lose the biggest opportunity provided by the demographic dividend.

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Conflict of Interest

The author(s) declared no conflict of interest.

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