

Why Kota Kills? A Critical Analysis of Mental Illness Also Through Select Bollywood Films

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Abstract—The news headline in *Times of India*, (13th august, 2023) read “Don’t put pressure on kids: CM to parents, expressing concern over the suicides ending their lives in Kota in the past eight months was a “matter of grave concern for us.”, after the Rajasthan CM received news of around 20 suicides by Kota Coaching institute, which over the years has gained image of a dreamland that attracts JEE and Medical aspirants. There is a heart-wrenching moment in the 2009 blockbuster Movie *3 Idiots*, when Joy Lobo, a final-year student at the engineering institute, hangs himself because he is late in completing his project and the principal tells him flatly that he will fail to graduate as a result he writes, “I quit” and chooses death. Mention of *Taare Zameen par* (2007) has to be included as this film had gained immense attention and popularity because of this path-breaking issue on Mental Health; that showcases Ishaan, a child who shows reluctance when it comes to going to school and studying. In another film *Chichore* (2019), a tragic incident which happens with Anirudh’s son who attempts suicide but gets saved, it takes him to take a trip down memory lane and reminisce his college days along with his friends, who were labelled as losers. In yet another current web series called *Adhura*, a 2023 release, a student at a Boarding school at Ooty, is abused for being a homosexual, turns a vampire in order to take revenge. The paper undertakes mental illness of children and adolescents, be it psychiatric disorders as evinced in the film *3 Idiots*, *Taare Zameen Par* or *Chichore*, when children are put under stress, as evidenced in Kota institute of students developing suicidal tendencies over failure or an adolescent in *Adhura* who because of being a homosexual, not only gets humiliated, rejected but given unnatural death, it results in his demonic form; the film addresses Adolescent sexual issues.

It is well recognized that many psychiatric disorders are strongly influenced by cultural and social factors, as endorsed by Foucault in *Madness and Civilization: A History of Insanity in the Age of Reason* (1961/1965) ‘There is rich evidence to suggest that urbanization, unemployment, overcrowding, lack of green spaces and other social determinants can contribute to psychiatric disorders. In addition, in many instances, it is the culture

which determines what is normal/abnormal or deviant thereby creating disorders based on behaviors which are approved by cultures. This has been eloquently highlighted by Foucault who describes the development of a Western idea of madness. The paper will, on the whole examine how global inequality contributes to stifling the growth of markets and of capitalism, when they expand markets to sell homogenous global products targeting young and wealthy, as well as young consumers, in return making adolescents’ part of a dissatisfied, discontented generation, constantly competing, and developing depression.

Index Terms—heart-wrenching, homosexual, vampire, psychiatric, urbanization, abnormal, madness.

I. KOTA SUICIDES & MENTAL ILLNESS

Kota to hold psychological tests in bid to stop student suicides, reports *Times News Network*, (*Sunday, Times of India*, Aug 13, 2023) It says that with the aim to check mounting suicide cases in Kota, the district administration has decided to conduct psychological tests of every coaching institute student every fortnight. It elaborates that the test will help spot suicidal tendencies among students in time and they could be provided with timely counselling. Rajasthan Chief Minister Ashok Gehlot said, he exhorted parents not to exert pressure on their children to pursue any particular course.

August 27, 2023 *Sunday, Times of India*, in its full-page coverage analyses how the “Coaching Factory Works”, with headlines like

No place for Second best in Winners’ Kota and Suicide is last step, Watch out for Warning Signs as well as

Families that Lost Children Can’t Forgive Kota
Why Kota Kills: 7 Reasons Behind Student Suicides in Coaching Town, reported, ([https:// www. the quint.com](https://www.thequint.com)) Updated: 04 May 2016, 5:07 PM IST

Aviral Virk, the reporter questions if anyone ever asked Kriti if she wanted to be an engineer. A day after her IIT JEE (Main) results were declared, she jumped from the fifth floor of her rented apartment in Kota. She had passed with 144/360 marks, way below her expectations. Bright, cheerful and ambitious – that’s how 17-year-old Kriti’s neighbours in Ghaziabad remember her. That she was depressed went unnoticed even by her parents who stayed with her for most part of the two years that she spent studying for IIT at Kota’s Vibrant Academy. Twenty-four students enrolled in one of the 130-odd coaching institutes in Kota have committed suicide in the last sixteen months. Last week, three students, aged 16, 17 and 18, who were enrolled at one of the many coaching institutes in Kota in Rajasthan, ended their lives in similar fashion. Two of them were from Bihar and stayed in adjacent rooms in the same hostel. The other student was from Madhya Pradesh. They left suicide notes and the rest is inevitable.

The reporter points at few facts: (a) Kirti’s ambition; was she asked about it or it was her parents’ wish, (b) Kirti gets depressed at not clearing hence she commits suicide. (c) Did parents notice her depression?

The picture that emerges is

1. parents’ lack of knowledge of their daughter’s aptitude
2. parents appear oblivious of daughter’s ambition/desire
3. a gateway to upward social mobility
3. inability to fulfil parents’ expectation results in depression, finally suicide.

The situation very well depicts the obsession parents have of seeing their daughter clearing the entrance exam of JEE or Medical, as that’s what Global market induced competitive culture has created, a dream, unrealistic though for both the parents, as well as for the children; their aim is to transgress their lower middle class or middle-class bracket of society, while they remain unaware of the issue of mental health of their child.

II. KOTA INSTITUTE: AN OBSESSION

E. Rajkumar, in the research “Prevalence of Mental Health problems among rural adolescents in India: A Systematic Review and meta-analysis (Nature Journal)” (2022) underscores certain facts regarding coaching institutes and says, these institutes, which on

an average charge around Rs.2.5 lakh per annum (food and lodging extra), put them through the wringer to make them achieve that hallowed goal. The grueling study schedules, relentless tests and a ferociously competitive environment are focused on a single-point agenda: realize their dreams to make to the prestigious IITs that will in addition get them out of middle class and into an upper bracket of society. What comes as most disconcerting is that the class XII board exams are incidental in this grand scheme as most of these institutes have arrangements with local schools so that students can easily concentrate instead on their engineering or medical focused training modules at the Coaching Centers.

However, Kota is an extreme distillation, a toxic microcosm, as it were, of a problem that is threatening to become severe in India. Data from the National Crime Records Bureau (NCRB) released in August this year, says that the number of students’ deaths by suicide rose by 4.5% in 2021. The writer accounts for possible reasons cited by NCRB as failures in exams and family problems. Major determinants influencing the prevalence of mental health problems in rural adolescents were age, socio-economic status, academic and family environment. While individual factors such as social media usage, physical activity, and substance use also contribute to mental health problems. As India accounts for one-fifth of the world’s adolescent population, the findings of this review can have global implications.

It is pointed that Adolescent mental health problems have been recognized as a major issue in low-income countries including India. Through a meta-analytic approach, the present review delineates the overall prevalence of each of the most discussed mental health problems among rural adolescents in India, comprising depression, anxiety disorders, generalized anxiety disorder, panic disorder, separation anxiety, social anxiety disorder, suicidality, hyperactivity, emotional problems, conduct problems and peer problems. The review also presents the potential determinants of such mental health problems. Using PRISMA guidelines, a total of thirty-five studies were finalized from databases such as PubMed, Science Direct, JSTOR, Web of Science, Google Scholar and ProQuest.

III. INCREASING INTERGENERATIONAL WEALTH INEQUALITIES

The research underscores linkage between economic hardship and poor health that has long been known, and underpins the social gradient in health and health inequalities (Marmot Review Team, Citation 2020; World Health Organization, Citation2017). The main hypothesized aetiological pathway (for many non-communicable diseases) implicates chronic stress, perceived lack of control over salient outcomes, which accumulates in less resourced populations (Black, Citation2002; Epel et al, Citation2018; Marmot, Citation 2010).

Considered over time (rather than cross-sectional), the implication is that economic downturn leads to poorer health. There is evidence that the economic consequences of the 2008 financial crash had negative impacts on population mental health (World Health Organization, Citation 2011). Increasing poverty and negative impacts on parents in turn would raise risk of negative impacts on children, for example increasing risk of suicide (Hoffmann et al. Citation2020) and adverse child experiences (Merrick et al. Citation 2019).

The impacts of economic downturns on the mental health of parents and children have been apparent in economic adversity, it is likely that also those not yet affected may be stressed because of severe worry about the future. Given adverse economic trends, in the UK for example (Sowels, Citation2018), the young have expectations of less stable accommodation, and less job and financial security, compared with their parents. They are less likely than their parents to own property or to be in stable social housing, less likely to have well paid graduate professional or manual skilled work, more likely to work zero-hour contracts with little job security (instanced at the time of writing by losing work without economic protection by restrictions during the Covid-19 epidemic). The young are likely to become conscious of increasing wealth inequalities, irrespective of socio-economic class they belong to, thereby generating distress and stress. Parents are well aware of the challenges in their children's future and anxious for them to get into the right schools and get good exam results and qualifications, also reveals their anxiety in the decreasing hope of employment or stable work at local level.

Examples are evinced in individuals sensitive to expected trajectories varying by ethnic/cultural groupings. For example, children and young people in some immigrant groups, especially if well acculturated (Berry & Hou, 2016), might have expectations of upwards social mobility, being aspirational rather than anxious about their future. This hypothesis is consistent with the same UK 2017 data showing variation between ethnic groups, with much higher rates in White British children (14.9%) compared with those who were Black/Black British (5.6%) or Asian/Asian British (5.2%).

IV. FOUCAULT AND OTHERS IN 1960S

Michel Foucault observes that in the Middle Ages madness along with all else was subject to interpretation in the Christian terms of sin and redemption, whereas in the Renaissance period, madness appeared, for example in Shakespeare and Cervantes, as excess passion, familiar to us all, typically human, interwoven with our nature, associated with an ambiguity as to who is mad and who is not, alongside an ambiguity as to who has expertise on the matter. Continuing this narrative, Foucault proposes that in the Enlightenment period during the long eighteenth century, madness crystallizes as mere deficit or absence of meaning and reason. Exclusion from social epistemological space was accompanied by exclusion from geographical space into the asylums, to be managed by the mad-doctors, becoming the profession of psychiatry (Foucault 1961/1965; commentary in e.g. Still & Velody, Citation1992; Bolton, Citation2008). The 1960s were a watershed moment for psychiatry and its social representation. Foucault was among many writers around that time critiquing psychiatry, psychiatrists R.D Laing and Thomas Szasz, and social scientists such as Irving Goffman, David Rosenhan and Thomas Scheff. These critiques thoroughly problematized the social role of psychiatry and its concept of mental illness and it would be fair to say that matters have not settled down since.

V. CHANGES IN REPRESENTATION OF MENTAL HEALTH

It is imperative to consider some of the profound sociocultural changes around mental health from the

mid-twentieth century, of the cultural imaginary of merging of what used to be called ‘madness’, on the one hand, and ‘our mentally normal life’ on the other. The implications in broad terms are new conceptions of what used to be ‘madness’ but no longer is: rather, it becomes more familiar to us, more common, with porous and negotiable boundaries between what is and is not mentally problematic. The changes that Foucault aimed to capture occurred over a century or so, relatively large timescales, more familiar to the historian than mental health sciences and healthcare. Therefore, the most that we can expect to see is an emerging picture, likely to be clearer in younger generations, than in the older. Research says there is apparent rise in mental health problems among the young: in the UK and in some other if not all Western democracies: in the last few years there has been substantial increase in demand for child and adolescent mental health services and related services, together with some evidence of rising prevalence especially of the common mental health problems of anxiety and depression (Bor et al., Citation2014; Collishaw, Citation2015; Murray et al., Citation2012; Pitchforth et al., Citation2019). In the UK, for example, data from Department of Health epidemiological surveys for England (NHS Digital, Citation2018), show a steady increase in prevalence of mental disorders among 5–15 years old in England from 9.7% in 1999 to 10.1% in 2004 and to 11.2% in 2017, and of emotional disorders, increase from 4.3% in 1999 and 3.9% in 2004 to 5.8% in 2017; the 2017 survey included older adolescents and showed rates of mental disorder increasing with age from 5.5% of 2- to 4-year-olds to 16.9% among 17- to 19-year-olds, emotional disorders being the most common overall.

VI. MENTAL HEALTH AND ADOLESCENTS

(References from 6-21 mentioned later)

World Health Organization (*WHO*) defines adolescents as those in the 10–19 age-range (6). Most unidentified mental health problems develop during adolescence phase (7,8), many of which are life-long disorders (9). Empirical evidence emphasizes that adolescents are more vulnerable to recurrent anxiety, depression, mood disorders, and cognitive and behavioral issues as they grow up (10, 11) Mental health problems account for 45% of the burden and dysfunctionalities in the adolescent population

(12,13). If left unnoticed and untreated, such mental problems become more complicated with the transition of adolescents into adulthood. The most serious consequence of concern is a suicide, which has been a major predictor of the rising number of adolescent deaths (14,15). Adolescent mental health problems have been recognized as a major issue in low-income countries including India (16,17). As per the 2011 Census, 21% of the Indian population consists of adolescents, with an estimated count of 253 million. However, there exists an incongruence between the needs and services for mental issues of adolescents in India (18,19,20). The current Indian adolescent health initiatives do not acknowledge adolescent mental health with due importance. Lack of understanding about mental health problems in the country leads to adolescents experiencing their needs as incapacitated (21).

VII. MENTION OF 4 FILMS REPRESENTING EFFICACY OF MENTAL HEALTH

Swara Ramaswamy, begins with life’s negative mantra, given in the film, “Life is a race. Run fast, or you’ll be trampled upon.”

The bigger message by the main protagonists however, is a positive one, “All is well” and other life lessons learned from ‘3 Idiots’ (Dec 4, 2022) in the review refers to the most iconic line to come out of this film: “All is well.”

Rancho, the main protagonist in the film claims that while the heart gets scared very easily, it is just as easily tricked. He tells Raju, “No matter how big a problem is, tell your heart that everything is OK, and say ‘All is well.’ When Raju asks if that actually works, Rancho replies, “No, but you gain the courage to face it!”

The reviewer shares how this film impacted her.

This scene sparks a typical Bollywood song and dance sequence, where the students sing about not worrying about the future and living in the present. I know that getting your life advice from a Bollywood film isn’t exactly mainstream, but let me be the first to say that “All is well” really does work. And I can guarantee that you do it, too — although maybe not in those exact words. One of the first lessons I learned from “3 Idiots” is that no problem is insurmountable with the right amount of mental self-reassurance. These scenes in “3 Idiots” bring the conversation back to mental

health on college campuses. Think of our college campus. Our education system may not be as draconian as ICE's, but our students still feel as though they are unsupported when it comes to their mental health, and incidents are still occurring that spark this discussion over and over again at the University of Michigan. "3 Idiots" is nuanced enough to claim that while "all is well" is useful, at some point the system itself must change to see real progress.

Mental health is an important part of overall health for children as well as adults. For many adults who have mental disorders, symptoms were present—but often not recognized or addressed—in childhood and adolescence. For a young person with symptoms of a mental disorder, the earlier treatment is started, the more effective it can be. Early treatment can help prevent more severe, lasting problems as a child grows up. Mental illnesses can be treated. If you are a child or teen, talk to your parents, school counselor, or health care provider. If you are a parent and need help starting a conversation with your child or teen about mental health, find resources for families from the Substance Abuse and Mental Health Services Administration. If you are unsure where to go for help, ask your pediatrician or family doctor or visit NIMH's Help for Mental Illnesses webpage.

Above all, the film, *3 Idiots* (2009) directed by Rajkumar Hirani was adapted on Chetan Bhagat's *Five Point Someone: What not to do at IIT* (2004) cannot possibly be ignored. This film had gained immense attention as it openly critiqued India's competitive, high pressure, rote-heavy, illogical and almost cruel education system, hence a very important subject concerning Mental Health of adolescents.

The film begins with the entry of 3 friends, Rancho, Raju and Farhan Quereshi in the city's elite engineering college, beginning with the mandatory ragging sessions that introduces all to Rancho, the leader who eventually helps his friends combat several issues.

He gives them mantras like running after excellence and not success, questioning and most importantly, be inventive and creative, rather than cram or copy, which unfortunately is largely the flip side of our education system. The real victory of threesome lies in outdoing the principal who only preaches competition among students, and by depicting them successful, the director shows how both IQ as well as EQ are a road

to success. The film displays different facets of mental health.

The Discussion on Mental Health remains incomplete if Aamir Khan's *Taare Zameen Par* is not included. Gargi Sharma addresses 'Mental Health' and entitles it as "Dyslexia; Movie Analysis of Taare Zameen Par". She underscores, Family History incorporated the father, a successful businessman who expects like any other father, his children to outshine, the mother, a housewife is frustrated as she is unable to ensure that both her children are excellent in studies; while she finds success with the elder, she does not with the younger, Ishaan Awasthi as he suffers from a problem that is later unearthed as "dyslexia". This film had gained immense attention and popularity because of this path-breaking issue on Mental Health. Ishaan shows reluctance when it comes to going to school and studying. The film maintains every child is special and can be unique, hence some children may require differential treatment. While in former film, (but produced later,) *Three Idiots*, Aamir Khan appears the adolescent, this film produced as well as directed by Aamir Khan was greatly applauded for the sensitive issue that he depicts with great empathy and compassion. In diagnosing and treating dyslexia, he underlines the endless contribution of parents and teachers. Today, one can see a variety of researches being done on this phenomenal film, concerning Mental health.

Next film *Chhichore* is the story of Anirudh has custody of his teenaged son, Raghav who has expectations of clearing entrance exams, however, his mother comforts him the result is not as important as his intent. But Raghav unable to accept failure attempts suicide but gets saved. Then Anirudh, his father, gets back into the memory lane of his hostel life and their attempts at changing the label of 'losers'. Anirudh and his 4 friends share their life stories to help Raghav overcome his depressed state of mind.

The film directed by Nitesh Tiwary offers the ultimate homage to his college days with this film about his time as an engineering student and the lessons one learns outside of the classroom. *Chhichore* operates on two planes, the first is nostalgic, with fuzzy flashbacks to after-hours hostel life on an engineering college campus. On another plane it offers a message on pressure to make the grade, to live up to imposed expectations and be prepared for success, failure and everything in between. (6 Sep, 2019)

Next web series *Adhura* undertakes Adolescent Sexual Issues.

‘Hear me, I am not okay’: “Young India & Mental Health”, April 9, 2021, 3:19 PM IST Charit Jaggi in “Growing up is difficult.

Adolescents from Gen-Z have their own set of challenges and struggles. A twenty-first century teenager is living in a world that’s evolving, growing and changing at an unfathomable pace. Since adolescence is also the time where a child develops most of their emotional and social learning skills, being flooded with so much information coupled with how social media has come to redefine their lives, can be extremely overwhelming. Taking academics and career as an example, they continue to be amongst the biggest factors contributing to stress and anxiety in the youth. While a child in India today has multiple options and streams to choose from, it’s not always easy to make a choice due to continuous parental pressure, lack of financial support and lack of appropriate guidance, and an adolescent being seen as different or not normal can multiply his problems; the above mentioned film undertakes issues that undertakes his relation with the boy he loves, with other peers, the girl who loved him, above all, other classmates, they all punish him for being different from them. The film very touchingly depicts the trauma and humiliation and anxiety borne by the protagonist. His demonic visage is shown as he was dug while still alive, as a result he becomes a vampire, killing all such peers when these students meet in the Alumni Meet at their old school. who of improper

VIII. MENTAL HEALTH TODAY

These days ‘mental health problems’ is commonly used, though in non-health settings, ‘distress’ would probably be heard more frequently. Nowadays in London at least one hears young people discussing themselves or someone else having ‘mental health’ and how much of it is there.

Another sign of contentious shifts in representations around mental health problems are ongoing professional and public debates about high prevalence estimates of mental health problems in the community, the debates partly relating to problems of stigma and splitting, of the issue of social exclusion of a perceived dangerous minority group.

What ‘it’ really is? Much has happened on this question since the 1960s. The main work has been within the diagnostic manuals, laying out clearly symptoms and syndromes for all – doctors, other professions, patients, care takers and the public at large – to see. The diagnostic manuals primarily set out syndromes that we call ‘mental disorders’ but this is not yet to define the term.

Since distress and impairment are personally and socially evaluated, so also are the definition and threshold of ‘caseness’, the thresholds of distress and impairment. Attendance at the clinic depends on personal and social evaluations of distress and impairment, along with belief that they should be and are remediable by health expertise, as opposed to being e.g. part of normal life.

With an important caveat, however, that Freud started a reverse movement, listening to ‘madness’ (Foucault, 1961/1965, pp. 277–78), it has escalated ever since, increasingly since the mid-twentieth century, with many new theoretical models and professions of psychotherapy and counselling, delivered inside and outside health-settings, and increasingly on-line including self-help apps.

IX. THE SOCIOLOGICAL CHANGES

True, the massive acceleration in use of social media and speculations in public and academic domains about adverse effects on the well-being of the young can certainly not be ruled out. There is little understanding of the relevant individual differences., but equally challenging is the issue of social cohesion and anomie. It becomes inevitable to consider disruptions in social cohesion and solidarity that may be raising anxiety and depression. The general proposal that social cohesion is a protective factor for individual level of stress is common in current social epidemiological theory (Marmot, Citation2010), but has a history since the beginning of social science in Emile Durkheim’s work on social factors in suicide (Durkheim, 1897/1952; Parsons, Citation1937). Hypothesized protective mechanisms involve stability in basic social categories and practices that enable an individual to have enough certainty and sense of control, agency or autonomy, over salient outcomes. Risk mechanisms conversely: instability leads to uncertainty and perceived lack of control, raising risk of anxiety and depression.

Cultural conflicts particularly in the liberal democracies, which have seen increasing vote-share and public profile of political populism, buttressed by social media, that multiplies and amplifies a continuous stream of voices, opinions, facts, theories and conspiracies also becomes a cause.

X. CONCLUSION

The key point however, is mental health that is broadly neglected in our country, more specifically in the case of teens and adolescents must occupy understanding and study. Seriously, our country lacks in providing support structures for monitoring mental health of children and adolescents, centers that can help children assuage their problems, their emotional psychological issues. To top it all, majority of parents are ignorant of the problems, mental conflicts, dilemmas their children are going through. The Mental health that is highlighted in the Kota institutes is a reflection of impractical and often over-vaulting ambition of parents and their excessive expectation from their children, secondly, it exhibits the sociological changes evident in severe competition faced by parents as well as children who in the rat race want to outdo each other.

It is sad that in the present Consumerist Culture-driven society, education too has become commercialized that begins very much early in the private schools from inception; education is evinced commensurate with the deep desire to be successful in life.

While the Journalist has highlighted the Kota Institute as a factory for producing prospective engineers and doctors, the society needs to relook at their act. Undoubtedly, real acts are expected of government to ensure healthy- student- teacher ratio and necessary number of counsellors on board.

Besides, Mental health should not be perceived as a synonym for madness, in the last 2 decades perhaps, people have started talking about mental health issues, even depression, stress, especially after Covid pandemic. Growing number of crimes across nations being committed by psychopaths, even juveniles is a serious issue that needs to be addressed more and more.

Plenty of steps are required to be taken in this direction to ensure that people are actually educated' the film directors' contribution especially in the last two decades is admirable as they also play an important

role in sensitizing people to important emotional, psychological and physical issues confronted by the society. There is no exaggeration in saying that global inequality has contributed to a great extent in stifling the growth of markets and of capitalism: in expanding markets to sell homogenous global products they have directly and indirectly targeted young and wealthy, as well as young consumers, in return they have and are making adolescents' part of a dissatisfied, discontented generation, constantly competing, and developing depression.

It is time that Psychiatric conditions, the different issues pertaining to mental health disorders, be it dyslexia, depression, insecurity, stress, anxiety, of children and adolescents or adolescent sexual issues, alongside parental support and those engaged in education is given prime importance.

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