

**GOVERNMENT OF INDIA  
MINISTRY OF EDUCATION  
DEPARTMENT OF HIGHER EDUCATION**

**RAJYA SABHA  
UNSTARRED QUESTION NO. 1931  
TO BE ANSWERED ON 15.12.2021**

**Suicides in Centrally Funded Technical Institutions**

**1931. SHRI K. SOMAPRASAD:**

**DR. V. SIVADASAN:**

Will the Minister of *Education* be pleased to state:

- (a) the number of suicides by students, researchers and project staffs of each Centrally Funded Technical Institutions (CFTIs) during the last five years, the details social category-wise;
- (b) their names, year of death, age, programme of study, annual family income, social category and status of place of residence (Tier-1 city/Tier-2 city/urban/rural);
- (c) the status of internal enquiries, if any, about such deaths and their findings;
- (d) whether Government will make any steps to deal with the issue; and
- (e) whether Government has noticed that those who committed suicide were from low income and socially backward group, if so, the details thereof?

**ANSWER**

**MINISTER OF STATE IN THE MINISTRY OF EDUCATION**

**(DR. SUBHAS SARKAR)**

(a) to (e): The Government is extremely sensitive towards mental well being of the students and faculty in Centrally Funded Institutions. The Ministry has undertaken various steps such as peer assisted learning, introduction of technical education in regional languages for students in order to ease the academic stress. The Government of India initiative, named MANODARPAN, covers a wide range of activities to provide psychological support to students, teachers and families for mental and emotional well being during the Covid outbreak and beyond. In addition, institutions conduct workshops/seminars on Happiness and Wellness, regular sessions on Yoga, induction programs, extracurricular activities including sports and cultural activities and appointment of Student Counsellors for overall personality development and distressing students. Further, students, wardens and caretakers are sensitised to bring to notice the signs of depression in fellow students and faculty to the authorities so that timely clinical consultation may be provided. No centralized data on suicide cases are maintained by the Ministry.

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