

India, being a lower middle income country (based on 2010 World Bank criteria) with 68.84% of its population living in rural areas (Census of India, 2011) and 27% living below the poverty line (Planning Commission, 2014), the government has adopted a welfare state policy where it plays a key role in the protection and promotion of the economic and social well-being of its citizens. However the availability, accessibility and affordability of mental health care services in India is affected by the fact that a meagre 0.06% of the total health budget of India (World Health Organization, 2011) caters to around 7,22,880 of Indians<sup>1</sup> who develop one or more mental disorders in their lifetime. Further liberalization, privatization and globalization (LPG) of mental health care has caused: (1) rise in costs of medication and mental health care treatment due to medical tourism and (2) poor ratio of mental health professionals vis-a-vis patients due to brain drain. Despite the success of District Mental Health Programme (DMHP) in some states of India, accessing affordable mental health care in the community is still a challenge.

To tackle this growing issue, introduction of yoga as an alternative and complementary treatment for patients with psychiatric disorders could be an effective solution for three basic reasons: (1) yoga which originated in India, is seen to be a practical and accepted intervention for patients to practice at home, (2) the number of yoga therapists is more than the number of mental health professionals available in India, (3) yoga is cost-effective and has no side-effects as in the case of psychiatric medications. Yoga is that which integrates the personality by bringing body-mind coordination in a well-balanced way (Gharote, 2014; Satyananda, 2008) Patanjali, who is considered

*Yogah Citta Vritti Nirodhah'*

- yoga is a process of gaining control over the mind (Patanjali Yoga Sutra, 2007). The application of yoga in medicine gives it a

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