

PRESIDENTIAL ADDRESS

USHERING IN THE 21ST CENTURY

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The 21st century is round the corner. All the professional organisations are getting ready to usher it in. The present time could be considered as the most appropriate time for this national organisation of ours, to focus its attention on planning and taking necessary actions so that 21st century becomes a welcome event and not a situation of panic and alarm. The mental health professionals and the psychiatric organisations in other countries are initiating the programmes which must be developed to stand upto the challenges, which will be thrown up by the modern technological developments of the 21st century. Our experience of the past, reminds us that the developments in the fields of science and technology are accompanied by changes in human living. It would be imperative that the sociocultural and geopolitical changes which will occur, will definitely create an accentuation of the well known psychiatric and psycho-social morbidity and also it is possible that some problems which are as yet, not known or less known may also come into prominence. As intelligent and responsible members of the society at large and psychiatry in particular, it becomes a moral obligation and responsibility to concern ourselves about these problems, not only their identification and methods of management but also strategies of pre-

venting them. Even this viewpoint can be considered as myopic because, our goal cannot be restricted to prevent an illness but it must be promotion of positive mental health.

While planning out programmes for the 21st century one has to be clear about the goals to be achieved because, only then can proper strategies be developed. Though the World Health Organisation has defined health as a sense of physical, mental and social well being, and it has also emphasised that health is not the same as an absence of illness, yet, till today, a major part of our efforts have been directed to the diagnosis, treatment and rehabilitation and in a very limited way to the prevention of illness. The national programme for mental health which is currently being implemented in our country aims to ensure availability, accessibility and acceptability of mental health facilities by the year 2000 A.D.

Mental health services are being integrated into the delivery systems of physical health. This is very essential because, the concept of health is a holistic one and it is incorrect to fragment it into the different components like the physical, mental or social health. However laudable these efforts are, yet, they cannot be considered

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adequate when the goal to be achieved is "ENRICHMENT OF LIFE", in other words, an improved quality of life free from misery and anguish.

One can try to achieve this goal in two ways – the first one is a nonscientific one. This is an approach of the Futurologist or the Crystal Ball Gazer. The scientific approach would be to review the developments of the past and in a realistic way plan for the future.

Historically, Psychiatry has been an ancient science as far as our culture is concerned. The Indian system of medicine i.e. Ayurveda has given detailed descriptions about the different types of mental illnesses, their causes and their treatments. Methods of preventing them are also described. As a matter of fact, scriptures written in Sanskrit and Tamil languages dating back to more than 5,000 years can be referred to, to derive meaningful information.

The development of modern Psychiatry began in our country with the starting of mental hospitals. These institutions were more on the lines of those which existed in Europe. 200 years ago mental hospitals (asylum) were started in the metropolitan cities of Calcutta, Madras and Bombay. In 1946, the Health Survey and Development Commission popularly known as Bhor Committee reported that, "there are 19 mental hospitals with a bed strength of 19,181. It is also observed that the majority of the mental hospitals are out of date and are designed for detention in safe custody without regard for curative treatments. There is also no proper medical and nursing staff in these hospitals and a number of them need to be demolished or rebuilt so that the benefit of modern psychiatry can be given to the mentally sick persons."

After the independence of India in

1947, the emphasis of the Government of India was more on the creation of psychiatric departments in general hospitals, both teaching and non-teaching.

But even before this change in the policy of the health administrators and health planners occurred, the first psychiatric unit in a general hospital setting in our country started in 1933 at Calcutta. However, the first full-fledged Department of Psychiatry was established 40 years ago in Seth G. S. Medical College and K.E.M. Hospital, Bombay. Since then, there has been a vary rapid development of General Hospital Psychiatry in our country. Much of the advancement in the country in mental health services and research in recent years, has been centered around teaching and other general hospitals, both government operated and private. Majority of the medical colleges in our country have psychiatric departments. The value of provision of Mental Health Services and its delivery to the masses from the general hospital is recognised both at the national and the state levels. It is appreciated that mental health can be offered to people suffering from psychological disorders in a cost effective manner, by this approach. Since these departments are situated in the heart of the community they are more easily accessible and less threatening compared to the mental hospitals. Needless to say, these units do not have the same degree of stigma which is attached to the mental hospitals. The teaching and training of psychiatry is also carried out more effectively, not only for the medical but also for the paramedical groups. A very heartening development which has occurred because of the growth and development of General Hospital Psychiatry is an integration of medicine in psychiatry and psychiatry in medicine. This has been possible because of the development of Consultation and Liaison Psychiatry. The

psychiatry departments not only cater to the treatments of well recognised psychiatric illnesses but also offer help to the patients suffering from cancer, chronic debilitating illnesses or those kept in intensive care units of medical, surgical and pediatric departments. However significant these developments have been, yet, this approach has certain limitations. Most of the psychiatric departments in general hospitals have been located in big cities which have a relatively smaller proportion of the population of our country. The mental health services have to be provided to the smaller cities and the rural areas. Realising this need, the Community approach is developing in our country.

The important feature of Community Psychiatry has been the integration of mental health facilities into the primary health care delivery systems. It is expected that, through the existing infrastructure of district level hospitals and primary health centres and sub-centres and training of the general medical doctors, the nurses and the multi-purpose health workers, patients suffering from mental illnesses in rural areas will be able to avail themselves of modern Psychiatry. Taking psychiatry virtually to the patients doorsteps is not only expected to reduce the stigma which is attached to the mental disorder, but also reduce the occurrence of nonscientific and at times, inhuman methods of caring for these patients. Despite this addition of the community approach to the mental hospitals and the general hospital psychiatry there still remains a fairly large proportion of persons who suffer from minor ailments, adjustment disorder and difficulties in day-to-day living, who do not reach the health delivery systems. Sometimes, these persons seek help from social welfare organisations but by and large, they do not get adequate help from trained mental health professionals. It is this group which

will require what can be termed as "Extended Liaison Services."

This innovation in the delivery of the mental health care system will not only restrict itself to some of the well recognised Social Welfare organisations like the Family Welfare Centres, The Child and Adolescent Guidance Clinics, The Correctional Homes of the Children but would also meet with the needs of those who are in Orphanage Institutions, Old Peoples Homes, Schools, Colleges and Industries. To achieve this objective, it would be necessary to incorporate the principles and techniques of extended liaison services into the training programmes of the psychiatrists and the parapsychiatric personnel. It needs to be emphasised, that all the above mentioned approaches, namely, the mental hospitals, the general hospital psychiatry, the community psychiatry and extended liaison psychiatry, as well as the specialised programmes for the alcoholics, drug abusers and mentally retarded etc., shall exist together and would provide a wider coverage to the mental health care delivery systems.

The present era has been characterised by emotional turmoils and mental anguish. A Philosopher like Dr. Sarvapalli Radhakrishnan has observed "Man has learnt to fly in air and to swim in water but he has not yet learnt how to walk on land." As we continue our journey into the 21st century, this deficit will become more acute unless and until, we concentrate our efforts, not only in reducing the absolute and relative increases in the incidence and prevalence rates of mental illnesses but also think of developing strategies which would promote Positive Mental Health.

In order to develop effective programmes to promote positive mental health it would be wise to bring about the synthesis of ancient insights and modern

thoughts. Charak has postulated certain rules of good conduct known 'Sadvrutta', like, respect to God, elders, teachers and priests, keeping the body clean by various hygienic means and the mind through self control. The modern thoughts would emphasise good education. This education would not be restricted to acquisition of information alone but also will stimulate pursuit of further knowledge and going even beyond that to promote the development of a sound personality and character. Dr. Rabindranath Tagore defines education as "That which Liberates". Apart from teaching these general principles of education, it would be necessary to spread the message of positive mental health to the different age groups like children, teenagers, adults and old people. This movement of mental hygiene will have to be carried out by each and every member and section of the community, if it is to succeed. It is this movement which can be expected to not only give "Shanti or Peace", but "Prashanti or Tranquillity", which is the cherished goal of the Indian Psychiatric Society.

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