PSYCHIATRIC SOCIAL WORK: PROBLEMS AND PROSPECTS OF INDIA

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In many an earlier writing, I have tried to highlight the need for psychiatric social work in India. Here I propose to spotlight— as briefly as possible—a few problems that confront the growth of this nascent speciality. My emphasis is based on the following assumptions:

1. The development of psychiatric social work is inevitable in view of the internationally accepted character of modern-dynamic psychiatry.

2. The barriers that hamper the growth of psychiatric social work in India are inherent in the archaic structure of psychiatric institutions and practices. And,

3. A radical transformation is called for to reorient the entire gamut of mental health issues and policies.

(I) Problems

More than a decade ago I conducted intensive field investigations in all the three State mental hospitals in Uttar Pradesh. Realities, in and outside the massive-walled hospitals, looked gloomy then but the fact that mental health issues continue to be eclipsed to date, is far more depressing. A few points would spell out the anatomy of the problem.

1. National Priorities and Mental Health: One can easily see that mental health has been the step child of the planners. Reconstruction of mental health settings and reorientation of mental health policy have conspicuously received little attention in the developmental planning. In spite of having accepted a modern definition of "health," "physical" aspects of health have received greater emphasis in the planned development. Lack of financial resources is often presented a plea for not implementing the necessary mental health programmes. Besides certain unconscious cultural factors, there appears a politics of mental health supporting status quoism. This is the greatest stumbling block and all those concerned with mental health should launch an integrated programme rather than showing down each other.

2. Team Approach: Those who are aware of the principles of the dynamic psychiatry would fully appreciate the dire significance of the team approach in the context of mental health programmes. In fact interdisciplinary team approach is the foundation of modern psychiatry and basis for fuller development of psychiatry.
4. Personnel and Training: While it is of utmost importance to train all psychiatric personnel in unorthodox style, it is doubly relevant for psychiatric social workers to give an excellent account of their own professional role. Devoted, sharp and brilliant students have convinced even the diehards of the importance of psychiatric social work. On the contrary ill-equipped, ill-suited and unwise persons have sometimes tarnished the image of their own profession. Attractive job conditions and better prospects are necessary to invite really promising workers to this field. Not all persons are intellectually and temperamentally qualified to become psychiatric social workers. It is therefore very essential that only suitable persons—from the viewpoint of educational background, attitudes and aptitudes—join this area.

5. Negative Attitudes: The public attitudes end societal reactions toward the mentally ill have always been unkind and irrational. Negative community reactions are still rampant. No profession can grow and flourish unless the community wants it. The legislators and policy makers also reflect the society’s general feelings. As such the cause of the mentally ill remains neglected due to the widespread negative reactions. A psychiatric social worker mainly works between the patient and his community. A positive attitude is essential for the development of a profession like psychiatric social work. A wholesome societal reaction towards mental health problems will go a long way toward the advancement of dynamic...
psychiatry and related professions. This calls for the annihilation of medieval beliefs and attitudes towards mental illness.

II. Prospects

Having overcome the barriers, some of which I have just discussed, the task for the development of psychiatric social work would become easier. Lest the pessimist may win, I reasonably foresee a rosy future for all psychiatric social workers. The path obviously involves certain thorny hurdles. A comprehensive community mental health programme is necessary to cope with the institutional needs of about 8 to 10 million mental patients that remain unattended to. A network of various types of psychiatric units offering specialised therapeutic facilities to all needy people without any discrimination would require an army of skilled and devoted psychiatric social workers to combat the dark forces against mental health. A challenging opportunity awaits. The Government must immediately look into the long standing mental health issues. It is regrettable that obsolete legal statutes (Indian Lunacy Act 1912) still govern the care and treatment of the mentally ill in India. Besides its total revision, a progressive mental health policy is required.

Integration of social sciences and psychiatry is a happy development and the growth of new disciplines like “social psychiatry” is indicative of the fact that the alliances is viable and useful. Of all social scientists—I humbly venture to claim—social workers are better equipped to function in mental health settings and programmes for their professional training and education is based on sound scientific and philosophical foundation. Neglected mental health issues pose a serious challenge to the Government, particularly when our national goal is an egalitarian social order.

REFERENCES


