



A Bilingual

# NEWSLETTER

From LGBRIMH



## Director's Message



'Dolong-the Bridge' is now four editions old. The last couple of editions have been predominantly on Covid-19 related articles. The pandemic still rages on and yet, we are slowly trying to return to normal routines without compromising on safety.

Mental health has been one of the main casualties among other things in this pandemic. We saw in the last edition the strategies we as individuals, families and communities can adopt to keep ourselves emotionally healthy during the pandemic.

This time around too our newsletter is in the digital mode with focus on women's mental health. Although the Covid-19 number has dropped considerably from before, we cannot throw caution to the winds. LGBRIMH is now functioning almost as it was prior to the pandemic and we follow all the safety precautions.

Stay Safe and follow the Government advisories on Covid-19.

Dr. S. K. Deuri

## A Woman's Mental Health:

### Does it matter?

Dr Mridula Saikia Khanikor, Former Vice Chancellor, IGTAMSU, Ziro, AP; Former Principal, VMSU, Sikkim; Former Principal, RCN, Assam

"I Miss Me! The OLD Me! The HAPPY Me! The BRIGHT Me! The SMILING Me! The LAUGHING Me! The GONE Me!"

This is how a woman sighs, at one point of her life because she is no longer 'herself'. She realizes that she did not live for herself, but for others. The deepest pain she has is, she feels that she had denied her own feelings to make everyone comfortable. She lived for her father, mother, brother, sister, uncle, aunt, husband and in-laws. Pleasing and satisfying them and postponing her own desires and comforts ever since she was a child. She is brought up in a cosy and different environment, only to be married off to a different and unknown family. She doesn't have a permanent address but has to be tagged with either her father or husband. "I have done MBA, he too did his MBA along with me, but when I got married, my in-laws expect me to take charge and manage the kitchen; I learnt MBA and not cooking". This is how every educated woman reacts to a situation such as this. "I feel there is no difference between myself and the maid servant when I am expected to perform the same tasks as her"! An uneducated woman too does not have opportunities to express her emotions. She is either a drop out from school or had never seen a school, because she had to make room for her brother. He, by virtue of being a male, has to climb the ladder and succeed in his life. A successful woman is often asked "when are you settling down"? To a society, a woman is complete only when she has a husband and a baby in her arms, as Ms Sania Mirza, the Lawn Tennis celebrity said during an exclusive

interview to the media, questioning why her husband Mr. Shoaib Malik, an equally famous celebrity was not asked this question when he was at his peak of his expertise in cricket.

This is not gender biased writing, but gender discrimination runs parallel to women's mental health. Otherwise, a girl from her tender age is never allowed to express her desires. Then what happens to her mental health if she is not allowed to think or have an opinion? In a way her men folk and her women seniors suppress her freedom to think and act on her own will. Many women enable this oppression without asking questions. They perform their womanly duties day in and day out. In the modern generation too, a working woman is expected to hold the kitchen's full responsibility in addition to her office work. The world had gone for a lock down during Corona times. But the great kitchen did not. While the world had gone on a honeymoon (in other words a break) the woman had to guard the kitchen as in normal times.

Women face these mental atrocities from others off and on but then rolls on burying the hatchet of emotion. She moves on and 'Compromise' becomes the password. Does anyone care for it?

The Times of India recently reviewed the movie "The Great Indian Kitchen". It seems to be an eye opener. Even in the modern days a woman is still judged for her cooking skills than any other capabilities. The movie doesn't talk about only the new generation women who question such unsung slavery but it is also a tribute to the women who have been silently managing the torture inside every home, for centuries. The firstpost.com further remarked it to be startling, scathing, stunning blow to patriarchy and its eternal side kick, religion.

"Kitchen is actually a hell" says Jeo Baby, the director of the movie. Jeo Baby explores the insidious nature of the patriarchy that chains women to backbreaking but thankless routine of household chores. Whoever cared for her mental aspect? Does she enjoy the work of managing a home? Does she have any desires besides her daily chores? Can she plan a holiday of her choice? Is she lacking in some aspects? Does she desire something else besides her routine? Does she want to pursue a career or her hobbies? Did anyone in general try to look at the mental status of a woman from such perspectives?

Someone at home is sick. The sole responsibility lies on the woman. An additional task creeps in. Medicines are

#### From the Editor's Desk



We come to yet another edition of the 'Dolong- The Bridge'. We dedicate this edition to women. We have two-part series on women's mental health and an article on the departments of LGBRIMH which were established by a team of women. Some of the major events and achievements of LGBRIMH during the past 6 months are also described.

Keeping the protocols to be followed during the pandemic in mind, this edition too will be a digital version of the newsletter.

Dr. Sobhana H

brought home, but the administration of it is the lady's responsibilities. Supervising cleanliness, maintaining hygiene, the special diet preparation, care and further planning is pivoted on her. Did anyone ask about HER health in the process? Did anyone check on her compliance of her own medications if any? Did anyone try to understand her state of mental health? NO!! She must've been having her dysmenorrheal days, yet she has to carry on with the additional burden silently. She is trained from her childhood to swallow poison even in the darkest of days. A spell seems to have been casted on her, so that she cannot show her emotions. Where does her mental health lie? Who cares for her mental health, in other words?

At large, men are privileged to have their tea served. This is seen in every house hold. Tea is an item in every household repeated at a particular interval. This again rests on the woman, to prepare even after she's tired of doing her stereotype work. Tea is a mood lifter to many, a break from monotony. Did anyone care to provide the mood lifter to the women of the house? There is a saying, "the buffalo takes bath every day, but the cows take bath only once a year (according to the Assamese Culture, North East India). Yet the cows are branded as superior though the purpose of domesticating the animal is same. So once in a blue moon the woman at home gets a readymade cup of tea, like a cow getting a bath in a year and that is magnified.

Women are vulnerable to mental illnesses like depression and anxiety in common. They are mostly affected due to hormonal changes especially during prenatal, premenopausal and postmenopausal times, bringing them closer to other mental disorders. Indian society still refuses to acknowledge these aspects of a woman at home and society. These are the cultural attitudes in which one is brought up in the social matrix. Gender difference in subjective well-being could therefore be related to the social matrix.

WHO mentions (who.int) that the gender plays differential power; control men and women over the socio economic determinants of their mental health, physical health, their social position, along with status and treatment by their society. Depression, anxiety, psychological distress, domestic violence and the increase of substance abuse affect women's mental health more than men in different settings. Women play multiple roles; hence gender discriminations, domestic and sexual violence and substance abuse by men affect the mental health of women to a great extent. These are also attributable to poverty, hunger, malnutrition and overwork. Severe life events also cause a sense of loss, inferiority, humiliation and entrapment which can lead to various mental health issues including unattended anxiety and depression.

It is a fact that at least one in every five women is subjected to rape or attempted rape during their lifetime. This affects a woman's mental health till her death. The fear, the anxiety, the trauma and her distress goes unnoticed or ignored. This leads to a sense of insecurity, and keeps her bound in chains throughout her life. Such cases in a developing country like India are highly ignored and remain unrecognized and untreated at the primary level. Studies and observations say that two third of married women in India are/were victims of domestic violence. Anyone tried to translate that trauma equivalence? One such incident is equivalent to 7 working days. They go unnoticed and the humiliation remains intact in a woman's mind.

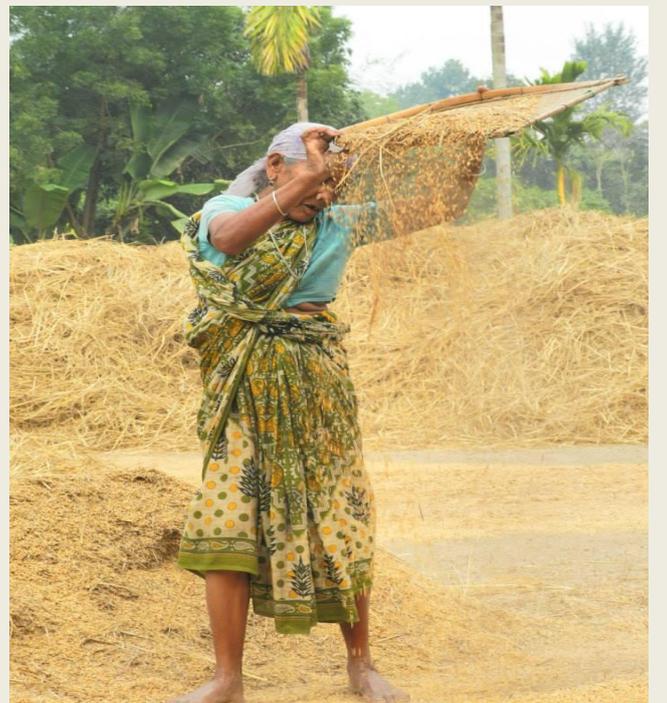
Similar mental traumas are the reproductive role she is expected to play. The consequences of infertility and failure to produce a male child, sexual coerce is linked to violence, wife battering and female suicide. This gender biased violence is devastating and accumulates to lifelong emotional distress.

Most women require psychiatric intervention, which is severely ignored especially in India. Mood and behavioural changes, associated with the menstrual cycle are not a subject to be noticed and attended to. Restlessness, irritability migraine, sadness and dysphoria and lack of concentration do occur in majority of women. Mental health is also affected during pregnancy and the post partum period where studies show that when a son was desired and the daughter-in-law gives birth to a daughter, relationships are hampered and the woman normally suffers from an inert pain which is never visible to the people around her. The wrath of dowry practices, which is a firm patriarchal family system, in most of the Indian states is another issue, where women's mental health is not a priority. The secret pain that she endures is nobody's business.

A woman's health should be incorporated with social, political and other economical and spiritual issues and not isolated. This should be consistent throughout the life cycle and not only focus very parochially in maternal and reproductive health, as has been practiced so far.

The "International Women's Day" and "Girls in Science Day" exist in papers only to be celebrated once a year without conviction. Rather, the value of respecting women and taking pride in them should be inculcated in the minds of young and the old alike. A woman with talents and abilities should not be suppressed. Given a chance she will display her confidence in her secret passion and put forth into reaching her goals and contribution to the society.

**I am woman phenomenally. Phenomenal woman, that's me- *Maya Angelou, Poet***



## নিজৰ পৰিচয় বিচাৰি...

মাৰ ঘিলা খোপাতি সাজি মই বৰ ভাল পাওঁ,  
বাইদেউৰ মেখেলা-চাদৰ যোৰ পিন্ধি, মই ফুৰ্তিৰ সীমা বিচাৰি নাপাওঁ।  
ভাল পাওঁ মই ভন্টিৰ সৈতে দ'ৰা-কইনাৰ খেল-খেলি,  
ভাল পাওঁ মই বিছকোৱৰতকৈ, বিছকুৱৰী হৈ নাচি।  
কিন্তু.....  
কিন্তু ভাল পাওঁ মই এনেবোৰ কাৰ্য্য কৰি।  
সমাজে মোক আদৰিবনে....?  
আপোনাক নে মোক মোৰ আপোনজনে....?

ভয় লাগে মোৰ...  
সমাজৰ আগত মোৰ পৰিচয় দাঙি ধৰিবলৈ।  
ভয় লাগে মোৰ...  
মোৰ নিজৰ আচল অস্তিত্বৰ চিনাকি দিবলৈ।  
মন নাই মোৰ নিজ আপোনজনৰ পৰা আঁতৰ হব,  
মন নাই মোৰ নিজ বন্ধু-বান্ধৱ, নিজ আত্মীয়জনক হেৰুৱাব।

কাৰ ভুল বাৰু...?  
কাৰণ দোষ...  
নিজৰ নে ঈশ্বৰৰ?  
নিজক নো কি বুলি দোষো?  
দোষ আছে ঈশ্বৰৰ,  
মোক এনে এক জীৱ ৰূপত সৃষ্টি কৰা,  
যাৰ শাৰীৰিক গঠনটো হে পুৰুষৰ, কিন্তু অন্তৰ-আত্মা হৈছে নাৰীৰ।

কি বুলি নিজৰ চিনাকি দিওঁ?  
পুৰুষ....নে স্ত্ৰী...?  
নাই কোনো অস্তিত্ব আমাৰ নিচিনা লোকৰ,  
ক'ত যাওঁ, নিজৰ পৰিচয় বিচাৰি...?  
কোনে দিব আমাক এটা নতুন পৰিচয়...?  
নে কটাৰ লাগিব এক যাবাবাৰী জীৱন...

কবি : ৰাজদ্বীপ দত্ত  
বিভাগ : নৈদানিক মনোবিজ্ঞান  
বৰ্ষ : দ্বিতীয় ( ২০২০-২০২১ )

## Celebration of World's AIDS Day



The Laboratory Department celebrated World AIDS Day on 1st December 2020 in the OPD Gr. Floor at LGBRIMH. It has become one of the most recognized international health days and a key opportunity to raise awareness, commemorate those who have passed on, and celebrate victories, such as increased access to treatment and prevention services.

## Activities at LGBRIMH



Webinar on “Promoting Mental health in times of Pandemic” organized by Mizoram College of Nursing on 06-11-2020. Dr. Arunjyoti Baruah, HOD, Department of Psychiatric Nursing deliberated on the topic “Emotional Wellbeing of the Health care Professionals during COVID-19

Training program for staff nurses on mental health organized by DMHP, Sonitpur district, Assam on 04/12/2020. Dr. Nurnahar Ahmed, Asst. Prof, Dept. of Psychiatric Nursing deliberated on aspects of mental health and nurses responsibilities.



E Seminar on “Health Worker’s Safety: A Priority for patient safety” organized by department of Psychiatric Nursing on 09-12-2020. Welcome address was given by Dr. Arunjyoti Baruah, Professor cum HOD, Psychiatric Nursing, LGBRIMH & followed by inaugural address by Dr. Sonia P. Deuri, HOD, PSW, LGBRIMH. Resource person were Mrs. Pinaki Bayan, Nursing Superintendent, Apollo Hospitals, Guwahati and Dr. Nurnahar Ahmed, Asst. Professor, Dept. of Psychiatric Nursing, LGBRIMH.

COVID Awareness at Jakhalabandha camp on 17.04.21 by M. Sc. Nursing (Psychiatric Nursing) students under SBM Activity. The students gave health talk regarding COVID appropriate behaviour and preventive measure, importance of social distancing, use of facemasks & hand washing.



## Reaching out to the community



COVID- Awareness at Sootea Extension clinic on 22.04.21 under SBM activities. M. Sc. Nursing 2<sup>nd</sup> year & 1<sup>st</sup> year nursing gave health talk regarding COVID appropriate behaviour and preventive measure, importance of social distancing, use of facemasks & handwashing



On the eve of International day of action for women's health on 28<sup>th</sup> May 2021, department of Psychiatric Nursing organized an e-seminar for the women inside campus. Dr. Arunjyoti Baruah, Professor & HOD gave the welcome address followed by Dr. Nurnahar Ahmed, Assistant Professor, Psychiatric Nursing spoke on promoting positive mental health during pandemic- role of women and Mrs. Chitra Bora, Nursing tutor, deliberated on the importance of care of child during pandemic. Program was concluded with vote of thanks by Ms. Sagarika Chetia, M. Sc. Nursing (Psychiatric Nursing) 1<sup>st</sup> year student

All India Radio talk show on the topic "Adolescent mental health" deliberated by Dr. Nurnahar Ahmed, Asst. Professor, Dept. of Psychiatric Nursing on 06/09/21

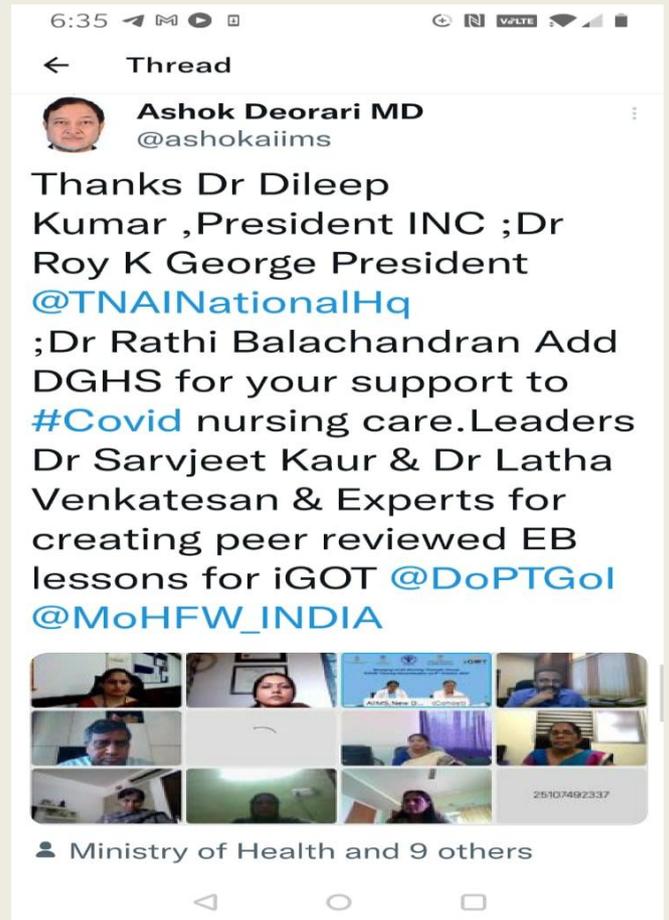


Suicide Prevention day awareness activity in OPD on 10/09/21. M. Sc. Nursing (Psychiatric Nursing) 1<sup>st</sup> year students gave a health talk on Myths and Misconception & preventive strategies of suicide



Geriatric awareness activity in community dated 18/09/21 by M. Sc. Nursing (Psychiatric Nursing)

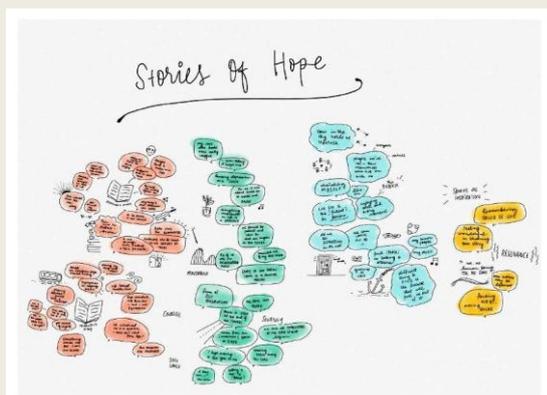
Dr. Arunjyoti Baruah & Dr. Nurnahar Ahmed were the expert panel members of the learning material on Diksha portal developed by Ministry of Health and Family Welfare on 06/10/21



An online festival of Youth Wellness Hub, Yuva Mann Meet, with the theme of 'Bridging hearts, being miles apart' was organized on 5<sup>th</sup> & 6<sup>th</sup> December, 2020. A variety of sessions were curated, focusing on community well-being, using poetry, art, music and nature for healing, as well as conversations around building hope and solidarity.

Dr. P. Abhishek delivered a lecture on 'Management of psychological issues in children' for school teachers on 23<sup>rd</sup> December, 2020, which was organized by the office of Joint Director of Health Services, Sonitpur.

Department of Mass Communication & Journalism, Tezpur University in collaboration with Youth Wellness Hub, LGBRIMH, Tezpur with support from Rajiv Gandhi National Institute for Youth Development, Sriperumbudur, organized a 3-day workshop on promotion of emotional and mental health among youth, titled, 'Pursuit of Wellness' from 6<sup>th</sup>-8<sup>th</sup> January, 2021.



❖ The World Suicide Prevention Day was observed on 10<sup>th</sup> September, 2021 by organizing a Human Library session by Youth Wellness Hub. The participants shared their stories of resilience, holding onto hope and all the emotions and conversations were captured by doodling artist, Ms. Ahana Ghosh.



❖ Mr. B. Surchandra Sharma & Mr. Deepshri Phukan, Clinical Psychologists, organized an interactive session with older persons in the community on 23<sup>rd</sup> September 2021, as part of celebration of World Mental Health Month. The session titled, 'Voices from the field: Experiences of wellness of older persons during pandemic' focused on importance of mental health during the pandemic.

**Department of Clinical Psychology, LGBRIMH, Tezpur**  
**Webinar on**  
**'Disability in the times of pandemic: what we know and can do'**  
 (Part of the month-long observance of World Mental Health Day, 2021)

**Date: 05.10.2021**  
**Time: 5.00 PM**  
**Zoom ID: 999 7904 8723**  
**Password: 784001**

**Resource Person: Mr. Lalit Kumar**  
**-Author & Prominent Disability Rights Activist**

Approximately 15% of the world population is represented by individuals living with different types of disabilities. They usually have to face several challenges in their day to day living such as difficulties in accessing public health services, public transportation and several other barriers. The COVID-19 pandemic appears to have further aggravated the already existing challenges. Therefore, it is important to understand the impact of COVID-19 pandemic on these individuals from people working in the field

As a part of the month-long observance of World Mental Health Day, the Department of Clinical Psychology is organizing a webinar to understand these crucial issues. Mr. Lalit Kumar who is an author and a prominent disability rights activist will be the resource person for this webinar. The session will focus on the needs of the individuals with disabilities and the steps needed to make the world more accessible to all in the context of the COVID-19 pandemic.

❖ An online session was organized as part of a series of celebration of World Mental Health Month on 5<sup>th</sup> October, 2021 from 5-6pm, titled 'Disability in the times of pandemic: What we know and can do'. It was facilitated by Mr. Lalit Kumar, Author & Prominent Disability Rights-based Activist.



❖ As part of Swachhta awareness, on 25<sup>th</sup> Sept, 2021, Youth Wellness Hub and Dept. of Clinical Psychology organized an art & Craft activity, titled, "Kabaad se Jugaad" converting usable things into colourful bees & caterpillars.



- ❖ DPSW, LGBRIMH, organized a One day work shop on sensitization program for police personnel on mental Health & Addiction organized by saint Clarct college Ziro and SP office in coordination with DPSW, LGBRIMH on 13<sup>th</sup> March 2021. The resource persons were Dr. Indrajeet Banerjee, Dr. Arif Ali, Ms. Mamta, Ms. Smitakhi, Mr. Abhijeet, Ms. Royina.
- ❖ Dr. Sobhana (penalist resource person) participated in a Panel discussion on 'Share Facts on drugs and Save lives' Nasha Mukta Bharat Summit organized by Ministry of Social Justice & Empowerment on 24/06/21.
- ❖ Dr. Sonia P.Deuri chaired a session on War on Drug in NE India organized by Department of Social work, Tezpur University on 30/06/21.
- ❖ Representatives from the Department of Psychiatric Social Work, LGBRIMH gave an awareness programme on Dementia on the occasion of World Alzheimer's Day on 21-09-2021, conducted by Department of Geriatric Mental Health, LGBRIMH.
- ❖ The Department of Psychiatric Social Work along with The Centre for Equity and Justice for Children & families, Centre for Health & Mental Health, School of Social Work, TISS, Mumbai organized a workshop on "Qualitative research for PSW professionals" from 12<sup>th</sup> December 2020 to 6<sup>th</sup> January 2021. Psychiatric Social Work Professionals from different parts of India participated in this workshop. The workshop had resource persons from India and USA.
- ❖ Awareness programme on World Schizophrenia Day on 24<sup>th</sup> April 2021 was conducted by LGBRIMH team.

**Webinar on: BURNOUT AT WORKPLACE**

**July 9, 2021 | 10 am to 11.30 am | Google meet**

Simply put, Burnout is a state of emotional, physical, and mental exhaustion usually caused by stress. It occurs when a person, more so caregivers, feel overwhelmed, emotionally drained, and unable to meet constant demands. CHILDLINE personnel, because of the very nature of their work, face Burnout. But Burnout is usually missed by the individual and also by his/her colleagues/ seniors. As a result, the individual's performance and overall disposition at the work place comes down and numerous problems crop up at home and some of them may have very negative consequences. Appreciating the greater vulnerability of CHILDLINE personnel to Burnout during these COVID-19 times, NESPYP in association with the CHILDLINE India Foundation, ERRC and with the support of the LokopriyaGopinathBordoloi Regional Institute of Mental Health, Tezpur has decided to organise this webinar. This event also commemorates the 30<sup>th</sup> anniversary of NESPYP. It is expected that this webinar will help CHILDLINE personnel understand the various nuances of Burnout and how to identify the warning signals and how to manage the same.

Link for the webinar :

 <b>Dr Arif Ali</b> Assistant Professor, Department of Psychiatric Social Work, LGBRIMH Tezpur	 <b>Marinella Humstoe</b> Psychiatric Social Worker and research scholar in LGBRIMH, Tezpur
 <b>Sandip Kumar Mitra</b> Head, CHILDLINE India Foundation, ERRC, Kolkata	 <b>Swarup Bhatta</b> Executive Coordinator NESPYP, Guwahati

Moderator: Dr Chiranjeeb Kakoty  
Vote of thanks: Mites Singh

10:58

gzi-omdf-snh

**LIFESTYLE CAUSES OF BURNOUT**

- Working too much, without enough time for relaxing and socializing
- Being expected to be too many things to too many people
- Taking on too many responsibilities, without enough help from others
- Not getting enough sleep Lack of close, supportive relationships

Marbe is presenting

Participants: Marbe, Pritha, You, Hamduna, 92 others

**"Nasha Mukta Bharat Abhiyan: A Step to Build Abstemious Society Through Community Intervention and Promoting Healthy Habits"**

A Panel Discussion On

**War on Drugs in NE India**

**PANELIST**

 Dr. Sujan Antony (Assoc. Prof. Dept of PSW) NIMHANS	 Dr. Nilish Mohite Senior Lecturer, Psychiatric Social Work) GMCH, Assam	 Dr. Nishik Mishra (Community Psychiatrist	 Dr. Sonia Perera Dean ( Prof. & HOD ) Psychiatric Social Work ( LGBRIMH, Tezpur	 Moderator   Dr. Smitakhi Sahai Asst. Prof. Stage of Social Work   Tezpur University
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Date: 30th June, 2021  
Join with us on: <https://meet.google.com/wlj-ygw-ogj>  
Time: 2: 30 PM to 3:30 PM

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**NASHA MUKTA BHARAT SUMMIT**  
21st June - 26th June 2021

A Panel Discussion on  
**"Share Facts on Drugs, Save Lives"**

**PANELISTS**

 Inaugural Address by Mr. Rudhika Chakravarty Joint Secretary   MDSB	 Dr. Pratima Murthy Director   NIMHANS	 Dr. Sobhana H. Joshi, Prof. Psy. Social Work LGBRIMH   Assam	 Dr. Navin Gogoi Assoc. Prof. Clinical Psychology IIMAS	 Dr. Akshay Naikam Assoc. Prof. GORR, Guwahati Co-Director, SANGATH	 Moderator Dr. Sujan Antony Assoc. Prof. NIMHANS
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24th June, 2021  
Thursday  
11:30 am - 12:30 pm

Join the Discussion on our Social Media Pages

## গোপীনাথ বৰদলৈ মানসিক চিকিৎসা প্ৰতিষ্ঠানৰ সহযোগত শিশু কল্যাণ সমিতিৰ দুটি সফল ঘটনা

দিলীপ কুমাৰ বৰুৱা  
অৰুনিমা শৰ্মা

শিশু কল্যাণ সমিতিৰ দায়িত্ব লোৱাৰ পিছতে আমি সমিতিৰ সদস্য/সদস্যা সকলে অনুভৱ কৰো যে শিশুৰ কিছু মনোবৈজ্ঞানিক সমস্যাৰ ক্ষেত্ৰত আৰু অধিক সফলতাৰে কাম কৰিবলৈ ভাৰতবৰ্ষৰ এখনি আগশাৰীৰ মানসিক চিকিৎসা আৰু গৱেষণা প্ৰতিষ্ঠান, তেজপুৰৰ গোপীনাথ বৰদলৈ আঞ্চলিক মানসিক চিকিৎসা প্ৰতিষ্ঠানৰ আমি সহায় লওঁ আৰু অধিক কামৰ দক্ষতা প্ৰকাশ কৰো। চিঠি পত্ৰৰ আদান প্ৰদানৰ লগে লগে প্ৰতিষ্ঠানৰ অধীক্ষক ডঃ এছ. কে. দেউৰী মহোদয়ে আমাক প্ৰতিষ্ঠানৰ মনোবৈজ্ঞানিক বিভাগ(Psychiatry Department) ৰ সৈতে লগ লগাই দিয়ে আৰু আমি বৰ উৎসাহিত হৈ পৰো।

আমাৰ প্ৰথমটো সমস্যা হৈছিল এগৰাকী কনমানি চাৰে চাৰি বছৰীয়া কন্যা শিশুকলৈ যাক আমি হেৰাই যোৱা শিশু হিচাপে(Missing Child) আৰক্ষীৰ সহযোগত উদ্ধাৰ কৰিছিলো যদিও শিশুটোৱে ঘৰ, পৰিয়াল, থকা ঠাই আদিৰ একো বিৱৰণ দিবলৈ অসমৰ্থ আছিল। ছোৱালীজনীয়ে নিজৰ নামটোহে জানিছিল, বহুবোৰ স্বাভাৱিক ব্যৱহাৰ প্ৰদৰ্শন কৰি শিশুগৃহৰ আপদালকাৰী সকলৰ বাবেও এক সমস্যা হৈ থিয় দিছিল। শিশুটো পাঁচ বছৰৰ তলৰ হোৱাৰ বাবে বিশেষ দত্তক গ্ৰহণ(Specialized Adoption Agency) শিশুগৃহত ৰখা হৈছিল। চিকিৎসা প্ৰতিষ্ঠানৰ মনোবৈজ্ঞানিক বিভাগৰ আমন্ত্ৰণ ক্ৰমে আমাৰ শিশু কল্যাণ সমিতি সকলো সদস্য/সদস্যা আৰু জিলা শিশু সুৰক্ষাগোটৰ দুগৰাকী বিষয়া এই বিষয়ে আমি এক আলোচনাচক্ৰত ভাগ লওঁ। ইয়াৰ নেতৃত্ব লয় ডঃ দীপ্তৰূপ চৌধুৰী, ডঃ সিদ্ধেশ্বৰ, ডঃ প্ৰিয়া মহোদয়া আদিয়ে। এই আলোচনা আৰু মত বিনিময়ে আমাক বহুখিনি উপকৃত কৰিলে। আলোচনাৰ সিদ্ধান্ত মৰ্মে ছোৱালীজনী ঘনে ঘনে স্বাস্থ্য প্ৰতিষ্ঠানলৈ নিয়া হ'ল। প্ৰায় দুমাহ মানৰ পিছতে ছোৱালীজনীৰ অভূতপূৰ্ব পৰিবৰ্তন হ'ল আৰু স্বাভাৱিক ব্যৱহাৰ প্ৰদৰ্শন কৰি তাই অংগনাবাদীত পঢ়া-শুনা, ছবি অঁকা খেলা আৰম্ভ কৰিলে। আমি বৰ উৎসাহিত হৈ পৰিলোঁ। প্ৰায় ছমাহৰ পিছতে শিশুটো সম্পূৰ্ণ স্বাভাৱিক হোৱাত বিজ্ঞাপন দিয়া হ'ল পিতৃ-মাতৃৰ সংযোগৰ বাবে। শেষত কোনো পৰিয়ালৰ সন্ধান উলিয়াব নোৱাৰি শিশু কল্যাণ সমিতিয়ে শিশুটো দত্তক গ্ৰহণৰ বাবে প্ৰমাণ পত্ৰ (Legal Fit for Adoption) দিয়া হয়। অৱশেষত কাৰা বা Central Adoption resource য়ে এটা ভাল পৰিয়াল তাইৰ বাবে নিৰ্বাচন কৰিলে আৰু এইটু ব্ৰাডাৰ্ছ এন.জি.অ'ৰ এক অনুষ্ঠানত ছোৱালীজনী দত্তক গ্ৰহণৰ বাবে উক্ত পৰিয়ালক প্ৰদান কৰা হ'ল। বৰ্তমানে কন্যা শিশুটো পৰিয়ালৰ সৈতে সম্পূৰ্ণ মিলি পৰিছে।

এই বাৰ লিখিবলৈ ওলাইছে আন এগৰাকী পঞ্চম শ্ৰেণীলৈ পঢ়া ১৫ বছৰীয়া কন্যা শিশুৰ কাহিনী। প্ৰথমে কোকৰাঝাৰ শিশু কল্যাণ সমিতিয়ে শোণিতপুৰ শিশু কল্যাণ সমিতিৰ জৰিয়তে লোকপ্ৰিয় গোপীনাথ বৰদলৈ আঞ্চলিক মানসিক স্বাস্থ্য প্ৰতিষ্ঠানত চিকিৎসাৰ বাবে জিলা ছেচন ন্যায়াধীশৰ অৰ্ডাৰ সহ উক্ত কন্যা শিশুটো পঠায়। জনজাতীয় মূলৰ শিশুটো যৌন নিৰ্যাতনৰ বলী হৈ নানান মনোবৈজ্ঞানিক ব্যৱহাৰ প্ৰদৰ্শন কৰিছিল। কবলৈ গলে তাইৰ জীৱনলৈ অহা এই অস্বাভাৱিক নিৰ্যাতনে মুড্ ডিচঅৰদাৰ(Mood Disorder), ইমপলচ্ কন্ট্ৰল ডিচঅৰদাৰ(Impulse Control Disorder) আদি জটিল সমস্যাত ভুগি ট্ৰমা পৰ্য্যায়ত আছিল। পৰিয়াল আছিল অতি দৰিদ্ৰ পীড়িত। ফলত ৰোগীৰ লগত থাকিব লগা লোক নাছিল। কোকৰাঝাৰ শিশু কল্যাণ সমিতি সভাপতি গৰাকীয়ে আছিল তাইৰ অভিভাৱক। চিকিৎসালয়ত ভৰ্ত্তিৰ লগে লগে জিলা শিশু সুৰক্ষা গোটৰ তৎপৰতাত এইট্ ব্ৰাডাৰ্ছ স্বেচ্ছামূলক সংস্থাৰ পৰা তাইৰ সহযোগী হিচাবে দুগৰাকী ছোৱালী ক্ষেপ অনুযায়ী নিয়োগ কৰা হ'ল। শিশু কল্যাণ সমিতিয়ে নিজে গৈ ছোৱালীজনীৰ তদাৰক কৰিলে। স্বাস্থ্য প্ৰতিষ্ঠানৰ প্ৰচেষ্টাত প্ৰায় ১৫ দিন মানৰ ভিতৰতে ছোৱালীজনীৰ যথেষ্ট পৰিৱৰ্ত্তন হ'ল। তাইৰ মানসিক শক্তি ঘূৰি আহিল। এদিন সকলো ফালৰ পৰা আৰোগ্য লাভ কৰি ছোৱালীজনী ঘৰলৈ যাবলৈ দিব পৰা হ'ল। কোকৰাঝাৰ শিশু কল্যাণ সমিতিৰ সভানেত্ৰী গৰাকীয়ে নিজা উদ্যোগত নিজৰ পৰা খৰছ কৰি তাইক নিয়াৰ ব্যৱস্থা কৰিলে আৰু চোৱা চিটা কৰা ছোৱালী দুজনীকো কিছু আৰ্থিক মাননি আগবঢ়ালে। ছোৱালীজনী জানিব পৰামতে এতিয়া ঘৰত সুকলমে আছে।

গোপীনাথ বৰদলৈ আঞ্চলিক মানসিক স্বাস্থ্য প্ৰতিষ্ঠানৰ সহযোগত আমি সফলতা লাভ কৰা শিশু দুটিৰ জটিল সমস্যাৰ সফলতাৰ চমু বিৱৰণ উল্লেখ কৰিলোঁ। এনে কেইবাটাও সমস্যাৰ ধাৰাবাহিক চিকিৎসা এতিয়াও চলি আছে। স্বাস্থ্য প্ৰতিষ্ঠানৰ চিকিৎসক সকলৰ সহযোগ, সেৱা আৰু সহায়ৰ সহায় আন্তৰিকতা আমি পাহৰিব নোৱাৰো। শিশু কল্যাণৰ এই মানৱীয় সেৱা আৰু সহায় সংযোগ চিৰদিনীয়া হওক সকলো মানসিক সমস্যাত পৰা শিশুৰ মুখত হাঁহি বিৰিঙি উঠক।

**(লেখাটো যুগুতাওঁতে শিশুকল্যাণ সমিতি আৰু জিলা শিশু কল্যাণ গোটৰ সকলোৰে সহায় লোৱা হয়।)**

## Down the memory lane of Academics in LGBRIMH

**Dr. Aparajita Baruah, Dr. Sonia P Deuri and Dr. Arunjyoti Baruah**

The erstwhile 'Tezpur Mental Asylum', was established in the year 1876 by the British and has undergone a long journey till today. It has grown leaps and bounds to establish itself from an 'Asylum' for the "mentally sick" persons to the current state of becoming one of the three prestigious facility for mental health care in India, that has all three functions in place, namely, clinical services, academic training and research.

A major-break through in the care of the persons with mental illness and development of mental health came about in 1994. The Hon'ble Supreme Court ordered an enquiry into the condition of persons with mental illness lodged in the Jails of Assam and the LGBRIMH, Tezpur as a fallout of the famous Sheela Barse vs Union of India public interest litigations (PILs) in West Bengal. The enquiry Commission headed by Mr. Gopal Subramaniam, Senior Advocate of the Supreme Court and along with Dr S.K. Deuri, the Medical Superintendent of the 'LGBRIMH', Tezpur, toured the State for a month and envisaged wide spread recommendation for mental health services development in the State of Assam along with the up-gradation of the then 'LGBRIMH, Tezpur'. In accordance with recommendation of the Commission and Honourable Supreme Court rulings thereof, this Institution came under the interim Board of Administrators (BOA) for a period of three years, under the Chairmanship of former Judge of the Supreme Court of India, Sri K. N. Saikia.

In compliance with Supreme Court rulings, the BOA envisaged creation of teaching cadre in the existing Institute. With due process, teaching positions with dual responsibility were created for Psychiatry, Psychiatric Social Work, Psychiatric Nursing, Clinical Psychology and Pathology.



The first half of 1998 saw 4 Faculty and 2 Tutors joining the Institute, to plan and structure the academic courses at the Institute for the disciplines of Psychiatry, Psychiatric Social Work, and Psychiatric Nursing. Dr S K Deuri, Dr Aparajita Baruah and Dr K Pathak were the faculty in Department of Psychiatry. Dr Arunjyoti Baruah, was the faculty who was instrumental in starting the Diploma & MSc program in Psychiatric Nursing, along with Tutors Dr Kunjalata Gogoi and Ms Pratima Hainary. Dr Sonia Pereira Deuri was the faculty for Dept of Psychiatric Social Work and started the department to establish the training program for MPhil in Psychiatric Social Work.

North Eastern Council (NEC) took over the Institute on 17<sup>th</sup> February 1999 from the Board of Administration under the Government of Assam. The Institute was hence named the Lokopriya Gopinath Bordoloi Regional Institute of Mental Health (LGBRIMH), Tezpur. No sooner, under the tenure of NEC, Central Laboratory (Pathology, Micro-Biology and Bio-Chemistry), Radiology & Anaesthesiology were started in due course of time with recruitment of faculty and other support staff. Dr Maitreyee Dutta (late) joined the Institute as a permanent Clinical Psychologist, to start the clinical psychology services in 2004 and later went on to establish the teaching programs in the Department of Clinical Psychology.

To spearhead various teaching, training & academic activities, an Academic Committee (AC) was formed with the Director, Dr S K Deuri as the Chairperson and Dr A Baruah as the Member Secretary. Once the faculty was appointed, planning and preparing the curriculum was the priority target, apart from initiating various services to ring in the much needed change in the hospital. From 1998 to 2001, the academic departments operated from the OPD premises; each department having a single room to work from. The Psychiatric treatment services were already in place in the hospital with the existing presence of psychiatrists, namely, Dr S K Deuri and Dr Aparajita Baruah. The psychosocial services from Psychiatric Nursing, Psychiatric Social Work & Clinical Psychology, were initiated over a period of time once the departments were established. A mini-library and an examination section was also started to support the academic activities of the Institute.

The academic programs envisaged at the Institute were in line with the ones existing at NIMHANS, Bengaluru and was proposed by the duly appointed Empowered Committee of the Institute and were placed for approval in Executive Council and Board of Governors meeting.

The first academic program that got initiated was the Diploma in Psychiatric Nursing (DPN) 2001, following its approval by the Indian Nursing Council (INC) and State Nursing Council.

We all vividly recall the flurry of activities when there was an impending inspection from the Indian Nursing Council, even though permission from local Councils in the state was granted to start the Diploma in Psychiatric Nursing Course. Identification and repairing of existing facilities to create a hostel and staff to man it, was a huge task at hand alongside the impending new admissions. Concerted efforts from the administration, faculty and other support staff resulted in the INC being fairly satisfied with facilities and granting the go ahead to start the DPN course and open it to deputed persons from North Eastern states.

Even though the response from the NE states for admission to the DPN program was lukewarm, the course got underway with deputation of two in -service nursing personnel from the Institute on the 1st of October 2001. In the initial years the course was also opened to non-deputed candidates with GNM or BSc Nursing training, as very often seats were declined and not filled by the State Government in NE. The DPN seats were increased to 30 by the INC in the year 2011 during one of the Inspections to create more psychiatric nursing manpower for north eastern states.

Even though the academic programs in mental health, namely, M.Sc course in Psychiatric Nursing, DNB & MD course in Psychiatry, M.Phil course in Psychiatric Social Work and Clinical Psychology were approved by the EC & BOG of the Institute, the permissions and affiliations from Gauhati University seemed a daunting task. The Institute also took initiatives to explore the National Board of Examinations, New Delhi, for starting the Diplomate of National Board (DNB) program in Psychiatry.

Curriculum and syllabi were submitted to Gauhati University since 2001. With the Guwahati High Court monitoring the progress on Supreme Court rulings, it was also imperative that all other Universities of the region were also approached for affiliation in view of exploring all options for starting the training courses at the earliest. It was only in 2003-04, with the intercession of the then Honourable Governor of Assam, Shri Ajay Singh, that the Faculty of Medicine of Gauhati University looked into the matter and a Syllabus Committee scrutinised the curriculum proposed and the inspection for Mental Health courses was notified.

No sooner, an Academic Section was established in the first floor of the existing Administrative Building and a Central Laboratory was started in one half of the ground floor and the library was also set up in the 1st floor adjacent to the Academic Section. The LGBRIMH administration, headed by Dr. S. K. Deuri as Director, Dr. B. K. Hazarika, Medical Superintendent and Dr. Dulal Ch. Baruah as the Dy. Medical Superintendent, Dr. Tulsi Saikia and Dr. P. K. Sarmah along with all others in the hospital and academics, left no stones unturned to facilitate the first inspection process from Gauhati University.

The first and notable inspection from Gauhati University was led by the Dean of Faculty of Medicine and the Principal of GMCH, Dr. M. M. Deka. Even though, the team ratified and recommended all the courses to be started, it was suggested to start one course at a time during the inspection held on 26<sup>th</sup> Sept 2004.



During this intervening period, when Gauhati University was processing the affiliation related formalities, it was also decided by the Administration and the Academic Committee, to apply for starting Diplomate National Board (DNB) course in Psychiatry. On processing of all requirements of application and fulfilling all formalities and facilities, Inspection from the National Board of Examinations (NBE) was conducted on 22nd Nov 2005.

The annals of academic training were etched for posterity with the first post-graduate course of the Institute, DNB in Psychiatry, getting underway in July 2006 with two seats. In due course of time, seats were increased to 6 in 2009, and gradually when MD got initiated in 2010, the DNB program was discontinued in 2013.

On the other hand, in compliance to the suggestions of GU inspection recommendations, the M.Sc Nursing course (Psychiatric Nursing) was also finally started on 1st Jan 2006 with 2 seats initially and over a period of time the course grew to have an intake of 12 seats. The course under the Institute continues to be one of the major centres for manpower training of Psychiatric Nursing personnel.

An important and notable development in the history of LGBRIMH during this period was the takeover by the Govt. of India, as an autonomous Institute under Ministry Health and Family Welfare on 1<sup>st</sup> June 2007 from the NEC and DONER Ministry.

Yet another important development in the year 2009, was the starting of the first pre-doctoral two year M. Phil in Psychiatric Social Work with 2 seats for training of Psychiatric Social Work personnel. Over the years the course has grown to have an intake of 8 seats under the affiliation granted by Gauhati University and this training program contributes to augmentation of mental health manpower.

Another milestone development in the year of 2010 was the starting of second Post-Graduate Medical course in the Institute, the MD course in Psychiatry, with two seats. Even though approval for starting MD course in Psychiatry was received from GU in the year 2008, ratification and permission from Medical Council of India (MCI) was granted only in the year 2010. Over the years the seats were raised to 7 in the year 2017 and then to 11 in the year 2018 by MCI.

The year 2010 saw yet another important academic milestone. The second, two year pre-doctoral M.Phil course in Clinical Psychology got underway in the year 2011 with 4 seats under the recognition granted by Rehabilitation Council of India (RCI) and had the affiliation of Gauhati University. Over the years the course has an intake of 8 seats and contributes to the manpower development as Clinical Psychologists.

The Academic training and services at the Institute over the years has further moved to start regular research programs leading to PhD in all the disciplines of Mental Health. The first PhD programme got underway in the Departments of Psychiatric Social Work and Nursing in the year 2017 with 5 seats. Dept of Clinical Psychology started the PhD program in 2020. The Institute has admitted 21 Scholars for the degree leading to PhD under the approval of Gauhati University.

Vocational certificate course of 6 monthly duration in Lab Assistants Training was started by the Departments of Pathology, Micro-biology and Bio-Chemistry in collaboration with Darrang College, Tezpur from the year 2010. The third post-graduate course in the Institute called Masters in Medical Laboratory Sciences (MMLS) has also taken off for the year 2021-22 session with two trainees.

The Institute has left no stone unturned to innovate and keep up with the changing times of the IT revolution. The Institute has further progressed to start the short term digital courses for training Medical Doctors, Social Workers, Nurses and Psychologists. The digitalized courses are two–three months duration and have the aim of upgrading and augmenting basic Mental Health knowledge towards building skill for health professionals.

This historical account of academic endeavours at the Institute would not have been a reality had it not been for the vision, leadership and support provided by the Director, Dr. S. K. Deuri and the unstinting efforts of the first few faculty who joined the Institute in the initial years, namely Dr. Aparajita Baruah, Dr. Sonia Pereira Deuri, Dr. Arunjyoti Baruah, Dr. K. Pathak, Dr. Anil Ch. Sarmah, and Dr. M. Dutta (late). They set the ball rolling for laying the plinth, facilitating all the teaching programs and services in LGBRIMH.

