## REVIVING SOCIAL COMMITMENTS

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I am indeed honored and humbled, and feel privileged to be elected to the post of the president of this august body. In twenty years of my practice as a consultant in psychiatry, I have attended most of the state meetings and have listened to most of the presidential addresses. The recurring themes were mostly with regard to creating awareness about mental illnesses among the public and reducing the stigma associated with them and their treatments. This is consistent with the scenario in most psychiatric organizations in other parts of the world, and activities which will help us achieve these goals should be carried out this year as well.

In our state, various government bodies and departments have, in many different settings, ongoing programs for patients with mental health challenges. Those programs are aimed at special population groups such as schools, rehabilitation centers and other community service centers. The state excise department provides funds for interventions in the area of substance use disorders, including de-addiction treatment programs. The social justice department has funds for people with mental illness roaming around homeless within the state. At the last count, an estimated fifteen thousand mentally challenged homeless are institutionalized at various centers in the state.

However, many organizations and institutions are providing different methods of interventions. There is effective treatment for addiction disorders, yet the majority of de-addiction centers work on a social model. Adequate psychiatric treatment and a biopsychosocial approach are essential for better

care of patients with addictions. Many in the unorganized sector do not come under the purview of most of the laws covering mental health institutions, and hence cannot be monitored, controlled or trusted to provide acceptable levels of quality care to the so-called beneficiaries. As such, we do not have an integrated program to plan, coordinate and systematically implement modern mental health care in the state.

Kerala IPS, along with World Association for Psychosocial Rehabilitation, was successful in bringing out the regulation and registration of centers looking after the homeless mentally ill. We have also been successful in getting Rashtriya Swasthya Bima Yojana (RSBY) insurance coverage for the mentally ill. We are working hard for commencement of pensions and other benefits for mentally ill and their caretakers. If we could form small focus groups from among our members and put in a concerted effort, we would be able to create better awareness about disabilities, disorders, treatment options, and available governmental and non-governmental support.

Our association has been working towards correcting and standardizing certification procedures for Learning Disorders (LD). As all of us are aware, just providing a certificate for LD does no good to anyone. We should focus on early detection, facilities for remedial education, and implementation of a scientific approach to the problem from early years of schooling. IPS will work towards convincing the authorities and bringing out these changes for the betterment of children with LD. I acknowledge the time and effort

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Dr. Smitha Ramadas has put in for this purpose. This year, we would plan and formulate methods for putting up our combined opinion and suggestions to the authorities in the government who could be influencing policies and taking decisions in this regard.

Many of our members are active in various print and electronic media. If we could coordinate at least some of these activities through the state branch, we would have a larger number of people working, promoting and implementing these programs, resulting in larger coverage. We shall strive to do justice to this program through various activities at the level of guilds and local branches. We should be using more of print and electronic media as well as the social media platforms. I would look forward to younger people in the association to take an active role in this regard.

In north Kerala, Calicut and Kannur psychiatry guilds together had formed a trust, "Swabhiman trust", to coordinate and deliver activities under these guilds. The initial plan was to have multiple units in various parts of north Kerala and to promote activities of IPS. The program went on well for the first few years, and is not active at present. We do have the required strength in numbers and experience to re-launch the program, and this program would be revived first in Kannur and in a few months in Calicut as well. This year, IPS and the local guilds are associating with various other organizations interested in similar activities, so that this program will endure long into the future. The incoming president of IPS south zone, Dr. K. Sivaramakrishnan, is from Kannur. We have discussed about this, and he has expressed his support and cooperation from IPS South Zone as well. We would be coordinating effectively and deliberately with the IPS South Zone to make this worthwhile. Making this a joint program will ensure continued growth and support from a larger membership base.

In Calicut, we have started discussions with other interested organizations which are already active and are doing well in this area. If we could associate ourselves with these local bodies and synchronize our activities, this could be taken to greater heights and could be effectively managed for longer period of time.

This year, IPS state branch would run regular free clinics for geriatric patients. We would have partial rehabilitation and day care facilities. We plan to provide training facilities for various learning disorders and provide free medicines to as many deserving patients as possible. We have discussed the possibilities of availing free as well as subsidized medicine supply with a few interested associates from the pharmaceutical industry as part of the corporate social responsibility scheme, and the results are encouraging. With continued support from the members, this program could gradually be extended to other areas of the state and could be taken over by the local branches and guilds as the case may be.

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