EDITORIAL

Never Promised A Rose Garden

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What does one write in a first ever editorial of a new international journal! How does one identify an exciting theme to write on, if the journal is on psychosocial rehabilitation. So much is going on in this vibrant field of mental health, and there are so many topics for debate, discussions and controversies, that all such themes deserve attention of an editorial. These can form themes of subsequent editorials, but the challenge of the first editorial still haunts.

Though everybody has a view about what is rehabilitation in mental health, there are diverse opinions about what this field of intervention should be termed. When we consider 'what's in a name' we wonder the terminology for Rehabilitation in mental health. Should it be called as Psychiatric Rehabilitation or Psychosocial Rehabilitation? In current times, with the focus on cognition and behaviours should it be called as cognitive rehabilitation or behavioural modification respectively. On the other hand, a dynamic term focusing on recovery makes us consider about recovery oriented services or recovery oriented practices. There may be many other names but the focus is on return to normalcy. One can imagine the difficulty in naming a journal on an area, whose name itself is rather debatable. However, here comes the guest editorial to the rescue of this 'name complex'.

Professor Norman Sartorius has rightly drawn attention to the meaning of words in the title of the journal, endorsing that it is a good title! It is a good title as the journal aims to focus on both mental health and psychosocial rehabilitation, and invites experts in these two fields, is international in its scope and ambition, and is emerging from a developing country carry a certain message. He has thus not only resolved the controversy over the name of the journal, but justified it with a dazzle and also emphasized the importance of attention to this neglected field of mental health rehabilitation.

Professor Dinesh Bhugra, in his guest editorial, attempts to make a distinction between disease and illness in psychiatric disorders using key models, however, when applied to chronic severe mental illness, these models have to be carefully reviewed not only in the cultural context but also within polysystems approach. He also cautions about the challenge that psychiatrists need to address when attempting to manage individuals with chronic severe mental illness since the social, political, economic resources dedicated to illness do not always take mental illness by itself or as a consequence of physical illness into account.

This maiden issue has descriptions of mental health rehabilitation in two countries, Kyrgyz Republic and Hong Kong, and a review on the need of an integrated care model for mental health, from their work in the United Kingdom.

Elena Molchanova describes the status of the public rehabilitation system in the post-perestroika period in the Kyrgyz Republic; an indigenous model of 'family rehabilitation' of patients with mental disorders. The family rehabilitation is predisposed by the traditional Kyrgyz family structure and cultural attitudes towards people with unusual behaviors. There are several trends of psychosocial rehabilitation in the Kyrgyz Republic, including an integration of both communities and mental health specialists aimed at maintaining the quality of life of patients with mental disorders.

Tse and Ng examine individualistic-collectivistic values for the cross-cultural application of the mental health recovery approach. They offer a framework for providing

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culturally responsive mental health service that adequately engages service users and families.

In their paper Bhugra et al. provide a very selective review to emphasise the need for developing one-stop services where both physical and mental health needs can be assessed and dealt with. Such integrated care can also be seen as a major public health issue by destigmatising mental illness and better educating the public about health. Needless to say, such integrated care is equally important for mental health, by an integration of rehabilitation with other pharmacological and physical treatments.

There is a definite place in scientific world to learn from case reports, more so in the field of rehabilitation, where prospective longitudinal care is the essence. The rehabilitation plan is tailor made for an individual, and we can learn from such cases. That recovery oriented services extend beyond reduction of psychiatric symptoms and focus on helping individuals reconstruct their lives in a meaningful way is highlighted by the case report by Mathur et al. Their intervention for a case comprised indisupportive psychotherapy with rehabilitation, social skills training and behavioural management components. Family intervention addressed maternal criticality and over involvement. The reduction of internalized self-stigma and changes in the family interactions and dynamics helped achieve therapeutic gains. The therapeutic process demonstrates how a person's selfhood can expand beyond being defined by the illness by restoring the sense of agency and generating hope.

A pilot study by Gandhi et al. on the effect of work performance on global functioning of persons with mental illness receiving psychiatric rehabilitation services showed an increase in mean work performance as well as mean social, occupational functioning and symptom reduction. Though work performance and vocational rehabilitation continue to be the mainstay of all psychiatric rehabilitation programmes, other interventions, which are recreational and art related are equally important. This is clearly demonstrated by the short write up on art therapy by a well known artist, Mrs. Warsha Lath, who volunteers in a major mental health rehabilitation centre. She shares her own paintings which have inspired her clients, and the ones made by her students, in this case, persons with mental illnesses. Lastly, a very informative summary of a recent conference on psychiatric rehabilitation, which truly had diverse themes discussed and debated, concludes that there are no simple answers.

Thus, the inaugural issue has two inspiring editorials by the two doyens in the field of psychiatry, a review, two country scenarios, a case report, a research study, an artistic piece, and an informative conference report. Not bad. The beginning has been made, and a void filled, to encourage more research and education in the field of psychosocial rehabilitation and mental health. I am sure readers will read, and writers will write for the journal, and talkers will talk about it, and hopefully listen to the silent voices of the persons with mental illnesses and those who live with them!

