ABSTRACT

Mental illness is one of the most serious problems in the world today. Simply stated, it causes a living hell for both the afflicted people and those around them. Mental illness as social problem in India has received little attention from the relevant quarters owing to a host of conscious and unconscious reason. Keeping in view the present scenario the study “SOCIAL STRUCTURE AND MENTAL ILLNESS: A SOCIOLOGICAL STUDY OF GENERAL HOSPITAL, GURGAON” has been conducted in the General Hospital Gurgaon district of Haryana. The central focus of the study is to understand the etiology of mental illness in relation with the social structure of Indian society. The four fold research objectives are (i) To know the Socio-economic background of mentally ill; (ii) To unfold the etiological factors which are active in the pre-disposition of mental illness; (iii) To know societal response towards mental illness and its sufferers; and (iv) To understand the views of medical practitioner and indigenous practitioner towards the mentally ill patients. Purposive sampling technique has been used in the present study. We made the list of patients who visited during three months period (February 2012 to April 2012) and then whosoever was coming second time for their treatment was selected. In above said period 1057 new patients came to this OPD. Out of them, 399 visited OPD second time. But we could interview only 4 patients per day. It means that in three months period, we could interview 213 mentally ill patients. To know the socio-economic and etiological background of the patients, we interviewed their family members as mentally ill person are sometime not coherent in their response. We have also taken some case histories and narrations reported by their attendants/guardians. Doctors and Indigenous faith healer are also interviewed to understand their line of treatment and their views towards mentally ill.

On analysing the type of illnesses and its duration, it was found that majority of the respondents were suffered from F30- F39 type of mental illnesses and had a history of illness from 1 to 5 years followed by the respondents from same illness from 6 months to 1 year respectively. When we examined the interest of respondents in studies during school days, it was found that majority of our total respondents were not interested in studies in school days. After analyzing intellectual status of the respondents, it was found that
majority of our respondents were extremely poor and sub-normal in intellect. On examining respondents’ attitudes towards their children, it was found that the majority of the respondents had indifferent attitude towards their children. When attitude of the married respondents towards their marriage was analyzed, it was found that the majority of the respondents said that marriage has been a constant source of worries. On examining the attitudes of the unmarried respondents towards their marriage, it was observed from our data that the majority of the respondents were much anxious to marry. When we threw a light on the interest and means of recreation of respondents, it was found that the majority of the respondents were interested in watching pornographic movies. On analyzing nature of crime committed by respondents, it is obvious from the data that majority of the respondents were involved homicide crime followed by the respondents who committed robbery.

The study further reveals that regarding causes of mental illness according to attendants/ guardians, the majority were of the view that mental illness is a result of their deeds of previous life, domestic worries and wrath of god/goddess. On examining views of attendants/ guardians about neighbours’ attitudes toward mentally ill people, it was found that the majority of the mentally ill were taking mental illness as a matter of jokes and amusement to the people. They were also tortured and treated wickedly or considered victim of supernatural forces. On analyzing attendant’s/ guardians views about the mental illness as stigmatization, it was found that majority of the respondents were of the view that mental illness is a stigma in the society. When we analyze about the treatment of respondents before coming to hospital, it was found that majority of the respondents have taken medical treatment before coming to hospital. On examining treatment received by respondent immediately after the first onset of their mental illness, it was observed that majority of the respondents have taken treatment from indigenous practitioner at the time of first onset of their illness. On examining the pattern of treatment by psychiatrist in the hospital, it was found that majority of the respondents were treated only by the medicines, but a sizeable number of them were treated by the combination of medicines and psychotherapy/counseling, but a negligible number of them were treated only counseling and psychotherapy. Regarding the type of indigenous practitioners who treated the Respondents, it was found that the most of the respondents have taken indigenous treatment from ‘Siyanas’. On examining the pattern of indigenous treatment received by
respondents, it was observed that the majority of the respondents have gone to Mehndipur Balaji and Jharha phoonk for their treatment. Regarding motivational factors to consult with indigenous practitioners, it was found that the majority of the respondents have gone to the indigenous practitioner due to easy approachability, lack of awareness of psychiatric treatment respectively. On examining the views of practitioners about causes of mental illnesses, it was noticed that according to qualified doctors, heredity and organic factors and environmental and psycho-social factors are the main reasons of mental illness, while according to indigenous practitioners, the mental illness was a curse of religious factors and supernatural causes.
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