

Dr. Narendra Kinger on Mrigashira

Charu 00:00

Hello, and welcome to Mrigashira. Mr. Kinger.

00:25

Thank you Charu. It's a pleasure to be here talking to you.

Charu 00:31

Thank you for joining in. I really want to talk to you about some of those things, which, while conversationally, we've been talking about it, but I think it's time we discuss this further. And I'm going to refer back to 2017, when the President of India had affirmed that India was facing a possible mental health epidemic. Now, based on a study he had said this, which revealed that 14% of India's population suffered from mental health ailments, I mean, this could be depressive disorders, or 46 million people 49 million for anxiety disorders. How do we need to handle this next pandemic? And making?

01:11

So Charu absolutely right, that when the President spoke about 14%, there are all indications that say, one out of five, or one out of six, so when we say one out of five, almost 20%. And if you say one out of six, it is almost 14-15%, more than 15%? So, yes, definitely, there's a huge amount of mental health issues in our country. And yes, I think it's taken very, really serious epidemic kind of proportions over here. There's a real great urgency for government, for individuals, for policymakers, for corporates, for people in media for almost everybody to make mental health a priority. Because till now, we have actually neglected it and we've gotten by, and we have kind of managed to function within the chaos. But I think it's high time now that a mental health integrated response is very, very critical to functioning in our economies, and in our countries. And it shouldn't just be that, oh, corporates have to get back to work. And people have to kind of find their balance and so on. So it's not should not be just focused on financial recovery. But I think it should also be focused on emotional and mental recoveries. I think there's a huge need, that mental well being should be promoted strategically, rather than random efforts. And I think another factor, which I really feel is very critical is that poor people, those who have been hardest hit by the pandemic, their mental health really needs to be looked at, and interventions have to be developed to treat all these people who have kind of been impacted. We all need to come together. And individuals, and companies and families and small groups and large groups, everybody has to clearly talk about mental health, there have been well defined pathways in terms of assessment, and access a service. First of all, the stigma about mental health such as to go away, we all my experience largely has been Charu with that people actually hesitate to seek mental health support or mental health services. Because by and large, we it's like, we want to cover up that such a thing really exists in our country.

We really need to understand that we have to use the power of the internet, or whatever tools which are available to us today, to kind of add them as value add to mental health services. So I think it's very, very critical. I just want to highlight over here that whichever age group we are looking at. So from a clinical perspective, like I work with young children, I work with teenagers, I work with married individuals, I work

with middle aged and older populations. And almost everybody one of the things that comes up while we are talking to them is that the pandemic has really taken a toll on their physical, emotional, social, and mental well being. So I think, let's be very clear that the next five years are very, very critical. And India really needs to focus on getting this act together so that we can take care of our population.

Charu 14:23

You talked about, you know, making these services accessible to the poor. And I think that's why you set up talk to me to cater to the poor and focus on clients who cannot afford counselling and psychiatric consultations, as well as to create awareness about mental health. Commendable initiative for an equitable society. Tell us about some of the initiatives and major learnings.

14:47

So, Charu we started, talk to me in 2018. And the whole idea was that I've been impacted for many years. And I found that there are a lot of people who who kind of are unable to seek mental health services because of the financial past or because they don't have the economic wherewithal to undertake this journey. So we are exclusively catering to people who are from the deprived section of society and want services in the sphere of mental health. So we have counsellors, we have clinical psychologists, we have psychologists, psychiatrists, special educators, etc. Now while we are setting up services for the poor lot of people came up to while they connected with us, saying that I'm not poor, but I cannot afford the regular charges, and you'd like to pay some amount to the NGO. So then we came up with this pay as you can model where people who really can afford some money, but not the regular fees can also consult and the money which they paid to us is kind of channelized back to helping people in the community who have financial stress. Our first project was school slum schools, where there are 1800 children who stay in that slum, or around the area and various slums. Every day counsellors go talk to the children, and kind of figure out what needs to happen. And we did assessments and things like that. But due to COVID, the slum schools shut down for the period. And then we moved to working with the police. And because we found that the police were under tremendous stress during this entire COVID period, and we took on the project of working with a local police station where almost 200 plus people are working, they're almost working 24 hours a day. And that was an X project where we went to the police station, started talking to the policemen on duty, off duty with their families with their children, and kind of helped them to manage their stress and deal with the day to day grind that they're going through. We also have worked with several state run and privately managed women shelters. There are a lot of women who have undergone abuse, physical, emotional, sexual, etc, brought through the judiciary and they're taken care of, and our counsellors go there, talk to them, counsel them, assess them and those who require help those who require medication. Then also there's there are psychiatrists who are helping talk to me provide these services at a highly concessional, or practically no fee. We have also started working with an orphanage where all those 100 orphans are being taken care. And we are only focusing on providing mental health services for these orphans. We have also done a couple of projects where we worked with corporates where we done, say, three month projects where we work with their employees in terms of sessions for anxiety, depression, how to manage stress, so on and so forth. These are over zoom. And we've had really about 400 people participating in each of these workshops.

Charu 19:19

So let me on that note, ask you there can be and should be no compromise when it comes to self care. Yet we tend to sweep our stressors under the carpet. So in our day to day what are the imperatives to for a stress free or rather better managed work life?

19:39

I think this whole thing of focusing on work life balance has become more critical than ever before. I think work life balance really doesn't mean that you must have equal number of hours of work and equal number of hours of fun outlay. It's not that it's basically actually in a broader perspective, it's about prioritising things, as per their importance. So when we start prioritising, we kind of save time, energy, and employees and employers need to really understand that your own well being is very, very critical. Because when you're happier, when you're satisfied, this in turn, will impact your performance and behaviour. I think this boundary of managing your work and home is very, very critical. But today, work actually invades your personal life. Because with this whole technology, which enables constant connection, it's very important that we set up professional and personal boundaries. So what what are the outcomes of not having work life balance, one is fatigue. So when you overwork, you are actually going to be constantly tired, your ability to work productively think clearly will not be up to the mark. And this can take huge impact on your professional reputation. The second thing is poor health, physical health, mental health stress. And you can end up developing what we call as lifestyle condition, substance abuse, substance misuse use actually increases. And this can lead to lifestyle disorders, losing time with friends and loved ones. So what are some of the strategies, I think we have to all manage our time, if you have to do certain things, make sure that you have enough time to get it done. Don't try to over schedule yourself and kind of have one meeting running into the other. Second thing is learning to say no, I think we Indians really need to learn the art of saying no. We all know that in the Western world, if it's Christmas. 10 days before Christmas, the entire world shuts down. But in India, whether it's the Diwali whether it's Eid whether it's Holy people are calling and I think that really, needs to be looked at.

Charu 23:55

People are waking up to the power of saying no. And you know, there was a time many years back. It used to be like the done thing not to say no, but now things are changing. And probably that's going to help even cut down some of the other tensions, right? I mean, I'm just going to refer to a study by ICMR, which just came out a few days back and which talked about it was done by India hypertension control initiative, which indicated that one in four adults in India suffer from hypertension, and only 10% of patients have the blood pressure under control. So is there a link between mental health disorders when you think about high blood pressure?

24:31

There may not be a link but there is a connection. So what I really want to say that if you have hypertension, a lot of people who have hypertension experienced mood issues, and sometimes anxiety and depression will be occurring concurrently with people. Also when you have hypertension, which is chronic in nature, you're actually increasing your risk of heart attacks and strokes. And this can actually also put your mental health at risk because you're constantly worried like am I going to get a heart attack? Am I going to end You're going to go for multiple ECG because you suddenly find that you're getting a chest pain, which is kind of makes you anxious. So I think even getting a diagnosis of hypertension can make you anxious. We also need to understand the other way around that anxiety also leads to high

blood pressure. Because in anxiety, norepinephrine is secreted in the brain, which is, which is what actually increases arousal, and your activity and your alertness. This also leads to kind of increase in blood pressure. So we need to really focus on managing our anxiety, what classically is told is that every two hours of work, you need to just take a five minute break, so that all the anxiety that has built up in two hours of work kind of is comes a little bit under control. So I think anxiety definitely leads to blood pressure, to some extent. Now, we also know that there are emotional distress and traumatic events in everybody's life, however, you may be placed in life so and these traumatic events are emotional states that you feel angry, to feel unhappy with sad, will also kind of increase your blood pressure. So I think we need to really focus on that. One critical thing, I want to highlight Charu that we all need to pay attention to our sleep, because sleep actually helps with hormone functioning, and also regulation of stress and metabolism. So over time, lack of sleep actually leads to swinging of hormones, and that leads to high blood pressure, and higher the blood pressure, bigger the problem, that's what we need to look at. Also, blood pressure leads to inflammation in the body. And chronic inflammation actually also can impact negative. So I think, yeah, we need to really focus on handling stress. Now, this stress, the concept of stress here is any major change in your life. Now whether it's moving house, whether it's moving cities, whether it's moving jobs, whatever change now the body responds to major changes as stress, sometimes even minor. So for example, if you lose a pet, you know you have a pet, you've lost a pet. I know a lot of people who are now taking about 15 days off to mourn the death of a pet. Now a lot of people find it very humorous. But I think these are sensible people who actually have realised that even the death of a pet. You have spent 10-15 years handling that pet, will actually create stress. So death is death. And I think we need to understand so yes, managing stress is very, very critical in hypertension.

Charu 27:34

Thank you so much for joining us today on Mrigashira. Such really valuable insights and I really do hope and pray that we are able to start that chain of helping each other and work towards keeping ourselves stress free. Thank you so much.

27:48

Thank you Charu very much.