



HANDING OVER THE BATON

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It was seven years ago, that the Journal of Pakistan Psychiatric Society moved from Peshawar to Faisalabad, after finding its roots there. The job at hand on the replotting of JPPS was to strengthen the stem and ensure fruition. The new editorial board took up the challenge. With an unconditional support of the leadership of Pakistan Psychiatric Society, the JPPS has now established itself as a journal with an enviable standing amongst the scientists, researchers, mental health professionals, postgraduate and undergraduate students of psychiatry and psychology. It now has a wider than ever before, readership in Pakistan and abroad. We are taking this opportunity to hand over the baton, to be picked up by Karachi under a new editorial board. We hope and pray that JPPS will become a robust tree in its new soil. We sincerely hope and wish that in the years to come, JPPS will go places and find new vistas and avenues.

Over the last seven years, the current editorial board focused on themes related to mental health policy and services, academic psychiatry, newer clinical developments, and futuristic trends in mental health. The policy shifts we pleaded for ranged from increased academic collaboration between neurologists and psychiatrists, resolve for a stewardship and leadership in mental health, the role of behavioural sciences in general health care, the significance of forensic mental health in clinical and law settings, and mobilising the support for postgraduate training in child and adolescent psychiatry. In 2020, we highlighted the psychosocial aspects of Covid 19 and the role that mental health professionals can play alongside the frontline health professionals fighting pitched battles against the pandemic. The scientific and clinical themes that we touched upon included the renewed neurobiological interest in gut microbiota, psychoneuro-immunology, psychotrauma, newer interventions like EMDR in managing PTSD, therapeutic value of SGDA, geriatric psychiatry, dementia, challenges in child rearing practices, postpartum depression, psychological first aid, the enigma of borderline personality disorders, and many more.

Beyond the scientific realm, the Journal eulogized the role of its glittering stars from yester years and those alive, with the help of contributions from home and abroad. We produced special issues for each of the international psychiatric conferences held in the last seven years.

We supported the publication of research not only for psychiatrists, but also for policy makers, public health specialists, neurologists, and psychologists. This was a conscious attempt by the editorial board to make JPPS a voice that represents all and sundry, involved in mental health.

The new editorial team who will pick up the baton from here on, has multiple challenges of their own. As the lone voice of psychiatry and

mental health in this part of the world, we are still not loud enough to resound in the corridors of power. The policy makers, politicians, clergy, judiciary, educationists, all remain oblivious to the role that principles of mental health, behavioural sciences, and psychosocial care can play in providing the citizens of Pakistan with health, prosperity and happiness, that they deserve. The stigma of attaching and associating psychiatry with mental illness alone continues to shroud mental health in mystery and mystique. JPPS can play a greater role in the years to come to demystify and destigmatize psychiatry in specific, and mental health in general.

The socioeconomic challenges that the world will face in the years ahead, both during and after Covid 19 times will bring to the forefront the role of powers of mind, more than ever before. Humans will soon start to realise that vaccines of attenuated and dead viruses alone cannot lift human spirit, and confidence. As highlighted in our March 2020 editorial it will be a psychoneuroimmunological response, rooted in the prefrontal cortex of brain, the rejuvenated spirit and soul of human beings that will be required to provide an allostatic response to Covid 19. A vaccine injected may improve the antibody response of the receiver, but the morale of a nation laboring under fear, angst, depression, phobias, obsessions and hypochondriasis will not lift up with this 'shot in the arm'.

Demanding preventive measures to deal with a pandemic through cell phone messages and billboards have a place, but they cannot be the mainstay for a nation's resolve in behaving responsibly. It will always take a renewed development of human consciousness at an individual, family, and community level. This can only take place under the tutelage of a mental health team sitting in the 'Ops Room' alongside the policy makers and planners to design a wholesome futuristic preventive strategy, plan of action, and tactics at the grass roots level. The same way that the country could not have won its war against terror by soldiers alone, the nation's battle against Covid cannot be won by doctors and nurses alone. It will take a lot more. It will involve foremost, a rebuilding of the consciousness of our nation. This can be best done, if the mental health professionals rise to the occasion. They would have to climb out of their cellars, step out of the comforts of their offices and clinics, and use all possible means of communication to prevent hopelessness, haplessness, and helplessness, before it translates into increase in suicide rates, psychiatric morbidity and mortality in the years in which we fight the challenges of Covid 19 infection and its aftermath.

An immediate task at hand for the JPPS editorial board will be to promote and propagate active implementation of the newly adopted Mental Health Act by all the provinces. The legislation may sit on tables to gather dust, if the rights of the mentally ill and humane treatment to them are not ensured through constant advocacy and journalistic activism. JPPS can start to prioritise

publishing research on this aspect as much as start a section on 'Letters to the Editor,' where the patients and their families, sensitive members of the community, and human rights activists can express their concerns and the responses can address their trepidations and anxieties. Forensic mental health is at cross roads in Pakistan, too. The mental health fraternity eagerly awaits the Supreme Court of Pakistan's decision on patients of mental illnesses, laboring in jails for decades at end. JPPS has raised voice in the past on this matter. Luckily it has not fallen on deaf ears. It can continue to pursue the agenda of human rights abuses of the mentally ill.

The next priority is to promote academic and clinical research related to child and adolescent psychiatry. The second Fellowship recently started by the College of Physicians and Surgeons, Pakistan will require publication of original research as part of the requirement. If JPPS acquires the status of a journal recognized by CPSP, it will boost publications by postgraduates and trainers alike, as their first choice journal.

Same is the case of creating a happy blend of community-based health care, general hospital-based treatment, and institutional rehabilitation of the mentally ill in Pakistan. The world has already understood the follies of making 'either/or' choices between these models of health care. Today, and tomorrow, mental health care distributed over all the three models and settings of care is the way to go. The upcoming Fountain House mental health facility in Peshawar can set an excellent example for transformation of the traditional government mental hospitals in rest of the country into state of the art futuristic centres of excellence and teaching units.

Another area of concern is to review the ethics and aesthetics of clinical care, research, publication, and funding of research projects. The profession has sat on opposite benches to debate the role of pharma industry in psychiatry. As always the truth has to be midway. While the unethical relationships between the practitioners of psychiatry, and pharma industry have to be exposed, challenged, and curbed, a scientifically grounded ethical working relationship built on international guidelines needs to become the order of the day.

The new leadership of PPS will receive a healthy tradition of setting up of Special Interest Groups by the outgoing President and his cabinet. These SIGs are well conceived and all- encompassing in terms of their coverage of the specialty. JPPS can play a crucial role in publication of the guidelines developed by these groups. The debate and the research that may ensue once these publications are put into practice can become a huge agenda of research to be published in JPPS.

There is a paucity of high quality research in psychiatry in Pakistan. This is largely on account of shyness, and inhibition experienced by young psychiatrists. It might be useful for the new editorial board to hold seminars and workshops (real and virtual) for medical students, postgraduates and young researchers. These activities may aim at enhancing research skills particularly in areas like medical writing, research designs, and statistics. An early involvement of medical students in mental health research, and paper writing can sow seeds for a fine crop of research-minded psychiatrists and mental health professionals in the years to come.

The outgoing editorial board of JPPS is thankful to its advisory board, associate editors, and reviewers who have relentlessly supported us in making our arduous journey worthwhile. We are also grateful to our sponsors over the years and the unconditional support and regard of the office bearers and members of PPS.

We hand over the baton to our successors with hope and optimism. They will take JPPS to its rightful status of a frontline research journal, nationally and internationally.