

Friday, February 21, 2014

A mental boost!

Happenings, Feb '14 (update 1)

Drake Fort reports on an interactive event organized by the West Bengal chapter of the Indian Psychiatric Society to clarify their stand on homosexuality

Kolkata, February 9, 2014: As I write this article I hear the trumpets of a wedding ceremony from the TV in the next room. My parents are watching their favourite Bengali TV serial *Ishti Kutum* on Star Jalsha channel, and yes, it is the story of how two lovers eventually find their way through enormous struggles against family and society. But while their love had the 'approval' of society, I know my fight is far from over. Fortunately, despite enormous setbacks, some good things do happen, which bring relief and act like a soothing balm after horrible pain and mental torture endured for long. The pain doesn't go away permanently, but the energy and vigour needed for survival receives a leg-up!

On January 18, 2014, Dr. Indira Sharma, former President of the **Indian Psychiatric Society** (IPS) made a shocking statement that homosexuality was unnatural, that Indian society did not talk about sex the way homosexuals talked about it openly (she was likely hinting at the rainbow pride walks held across the country), and that homosexuals uncomfortable with their sexuality should seek psychiatric help. She made the statement at the annual meet of the IPS in Pune, and was quoted again along similar lines in newspapers.

The IPS statement on homosexuality: Based on existing scientific evidence and good practice guidelines from the field of psychiatry, Indian Psychiatric Society would like to state that there is no evidence to substantiate the belief that homosexuality is a mental illness or a disease. IPS will issue a more detailed statement in due course of time – Dr. T. V. Asokan, President, IPS and Dr. N. N. Raju, General Secretary, IPS; <http://www.ips-online.org/>

This development attracted wide media attention and forced the IPS to issue a statement that Dr. Indira Sharma's statements were made in her personal capacity and the IPS did not consider homosexuality unnatural or a disease. This was followed by another statement of the IPS on February 6, 2014 explaining their official

stand on homosexuality on their website (see inset). Was this an attempt at being politically correct? Was it a face-saver before the international community, which had done away with diagnosing homosexuality as a disease a long time ago? I hope not, and the good thing was that the IPS' statement brought about clarity on a subject shrouded in misconceptions.

The Indian lesbian, gay, bisexual and transgender (queer) community also gained a visible ally in its struggle, especially after the Supreme Court set aside the Delhi

High Court ruling of July 2009, which after a long legal campaign read down Section 377 of the Indian Penal Code and decriminalized adult consensual sex, including same-sex sexual relations. The IPS' statement came none too soon because the Supreme Court reinstated Section 377 in December 2013 – ostensibly recriminalizing only specific sexual acts irrespective of gender identity or sexual orientation, but in larger effect recriminalizing queer people.

On February 8, 2014, the West Bengal chapter of the IPS, in response to several requests, took matters further and organized an interactive event 'Alternative Sexualities' involving mental health professionals, queer activists, NGOs and individuals. Held at the Golden Park Hotel, Kolkata, the event demonstrated that the IPS was willing to look deeper into the matter regarding gender and sexuality diversity.

The event started with a welcome note by Dr. Ujjaini Srimani, psychiatrist associated with the West Bengal chapter of the IPS. The first part of the event was a panel discussion moderated by Dr. Ranjita Biswas, psychiatrist and faculty with the School of Women's Studies, Jadavpur University. The panellists, in order of speaking, were Dr. Debashis Chatterjee, psychiatrist associated with the Indian Psychiatric Society; Kaushik Gupta, advocate with the Calcutta High Court, sexual rights activist and member of Varta; Pawan Dhall, queer and HIV activist and founder member of Varta; Anuttama Banerjee, psychologist; and Minakshi Sanyal, founder of Sappho for Equality, the only exclusive support forum for lesbians, bisexual women and female-to-male transgender persons in eastern India.

Dr. Ranjita Biswas set the note for the discussion with an opening comment that when the Delhi High Court read down Section 377, the Indian queer community began a journey of visibility and dialogue with larger society. However, the Supreme Court's judgement again cast the issue of diverse genders and sexualities in a negative light. In this context, not just queer people but their families too were looking for answers from mental health professionals, and it was crucial for them to address the issue clearly to the public. She added that mental health services were not just meant for healing but were also supposed to impart information and knowledge to people on gender and sexuality. It was also important to note that while the Delhi High Court ruling did provide legal help, it did not clarify the meaning of the term 'unnatural sex' that figured in the text of Section 377. This is where mental health professionals needed to step in and provide clear answers.

Dr. Debashis Chatterjee first read out the statement issued by the IPS (see inset). To this he added: "Current theory states that homosexuality is not pathological but a normal variant of human sexuality. It is certainly not a disease but the main problem lies in the social attitudes towards homosexuality. There is no longer any current international debate regarding the status of homosexuality as pathology and hence there is no question of treatment. Those who come to psychiatrists seeking help regarding homosexuality should be treated only for anxiety or depression caused by the societal pressure they face because of their sexuality."

He said that in spite of the stand taken by agencies like the **World Health Organization (WHO)** and **American Psychiatric Association (APA)** on homosexuality, comments like those of Dr. Indira Sharma were damaging and had to be countered through a proactive stance.

In the course of his speech, Dr. Debashis Chatterjee also explained that there was a belief that the 1973 decision taken by the APA to delist homosexuality as a mental health disorder was based merely on a voting process that was not objective in its approach. But this belief was misplaced. The vote was taken to decide whether the scientific evidence available to delist homosexuality was adequate or not, and not on the question of homosexuality being a disease or not. The evidence that was eventually considered was itself based on long-term scientifically sound research. Mental health professionals needed to be aware about this aspect and provide accurate information on the subject of homosexuality to their clients.

The next speaker, Kaushik Gupta, spoke about how in the eyes of the law, the Supreme Court's verdict on Section 377 was fundamentally flawed. Quoting Justice B. N. Kripal's book by the name of *Supreme But Not Infallible* (Oxford University Press India, 2004), which analysed the Supreme Court's functioning in its 50th anniversary year, he said that the right to life was suspended in times of the Emergency in the 1970s and the Supreme Court supported this regressive development. Its judgement in the Section 377 matter was equally regressive. Also very recently it was the Supreme Court that went ahead with the decision to regulate who can put up red beacons on their cars and who cannot. If the Supreme Court could take a decision in a matter that other arms of the State could well have decided on, why could it not rule in a matter that concerned the very lives of the country's citizens? Why pass it to on to the Parliament for deciding?

Kaushik Gupta also criticised the Supreme Court verdict for having dismissed queer people as a minuscule minority. India's Constitution provided for protection of all its communities, irrespective of their numerical strength. The right to life enshrined in the Constitution was not the validation of mere existence but the right to life with dignity. He was also critical of the media for projecting Section 377 as a 'gay sex law', unmindful of the fact that it affected anybody practising almost any kind of non-penile vaginal sex, irrespective of sexual orientation or gender identity. It essentially gave the State the right to invade the privacy of consenting adults, and everybody should be outraged with this aspect.

Pawan Dhall thanked many of Kolkata's mental health professionals for their support for the queer movement over the years and the IPS for its initiative, but posed a few questions to ponder on. He was concerned that though the IPS had clarified its stand on homosexuality, would this be enough to ensure that all mental health professionals in India stopped treating homosexuality as something to be cured. Would the IPS statement be officially binding on them, especially since instances of aversion therapy to cure homosexuality were still heard of? He also warned that in spite of homosexuality being delisted from the WHO's International Classification of Diseases and APA's Diagnostic and Statistical Manual of Mental

Disorders, many students of MBBS possibly still studied outdated or older edition of reference books, which carried dated information on homosexuality and even issues like Section 377. He suggested that the IPS should collaborate with other sections of the medical fraternity to ensure that updated information was imparted to students of medical science.

Adding to Pawan Dhall's comments, Anuttama Banerjee said that guidelines were already in place that required mental health professionals to not project their personal values and biases on their clients. But unfortunately some professionals still had the tendency to assume that only heterosexuality was 'normal' because it seemed to be the majority phenomenon. They tended to pathologise homosexuality and make claims of curing queer people. She said that these undertones had to be addressed effectively through intensive training beyond the syllabus and sensitization of mental health professionals.



From left to right: Dr. Debashis Chatterjee, Kaushik Gupta, Pawan Dhall, Dr. Ranjita Biswas, Anuttama Banerjee and Minakshi Sanyal. Photo credit: Pranaadhika Sinha Devburman

Minakshi Sanyal's presentation was the most impassioned of all. She was asked by the moderator that as a long-time queer activist what would she take back from the IPS' statement. Tongue-in-cheek, she 'thanked' Hindu right wing parties for all the vandalism caused after the release of the film *Fire* in 1998, and the consequent attention drawn to the issues of lesbians and bisexual women. She also 'thanked' Dr. Indira Sharma for her comments on homosexuality, which had catalyzed many positive developments at considerable speed. But she rued the fact that even after a lot of activism, gender binaries were still to be broken. People failed to look at the human beings behind labels like gay, straight, lesbian or transgender, or even man and woman.

She talked about coming across several shocking cases of parents disowning their children because of their sexuality. Some of these parents were mental health professionals themselves. Sometimes even well-known psychiatrists told their clients that homosexuality was a disease. She narrated the example of a woman from Kolkata who was forcibly married to a man by her parents. The couple went off to USA, where the woman finally managed to gather courage and obtain a divorce. In fact, because of her social conditioning, it took the woman 6-7 years to realize that she was lesbian. Minakshi Sanyal concluded with the hope that the IPS' statement would genuinely help address social biases and rigidities around gender and sexuality.

In a lively audience interaction that followed, Dr. Aurobinda Chowdhury, a mental health professional, said the Supreme Court's verdict had sown many seeds of doubt about homosexuality and legalized discrimination against queer people. In

such a situation it was the responsibility of the IPS to come forward and remove myths and misconceptions around homosexuality.

Some members of the audience doubted whether aversion therapy was still practiced in Kolkata, but both Pawan Dhall and Minakshi Sanyal provided information about instances within the last few years. It was also pointed out by the panellists and other members in the audience that the situation was indeed worrisome outside big cities like Kolkata. First, mental health services were hardly available in small towns and rural areas. Second, queer support groups still received calls on their helplines from individuals who were subjected to 'treatment' for their gender identity or sexual orientation by family members and medical practitioners with suspect qualifications.

To a question whether the Supreme Court had really been wrong in passing on the matter of Section 377 to the legislature, Kaushik Gupta again stressed that the judiciary was empowered by the Constitution to rule on a matter that had not been properly addressed by the Parliament, especially if it involved the Fundamental Rights. It was, in fact, the Supreme Court's job to uphold the rights to life with dignity and freedom of expression.

A discussion ensued on the difference between criminalization and pathologisation. Something that was criminal need not be a disease. Even if it was a disease, should it be criminalized? If yes, what about diabetes and diabetics – wouldn't they have to be criminalized as well?

In conclusion, the moderator asked the panellists to make final statements. Key among the recommendations made by the panellists was the need for continued training and orientation of mental health professionals on the latest developments around gender and sexuality. The panellists also suggested greater interface between mental health professionals and their counterparts working on legal, gender, sexuality and other public health issues for exchange of information and ideas.



Drake Fort is an engineering student trying to pack in Pokemon training, gadgets, activism, love for nature, parkour and more in 24 hours!

Posted by **Varta Trust** at 22:56



 You +1'd this

Labels: **Happenings, Mental Health, Section 377**