The sociopolitical condition in Punjab during the last two years has been the focus of attention. While there is a fairly large amount of work done in the area of wartime psychiatry (Hopkins 1943) very little work has been reported in populations undergoing civil strife. It has been reported that during periods of war, psychiatric morbidity among civilians does not increase and may actually decrease, while on the other hand during conditions like riots in Belfast (Fraser 1971), prescription of psychotherapeutic drugs increased in number indicating a possible increase in psychiatric morbidity. It is argued that during war there is strengthening of community bonds and increased national cohesion leading to decreased psychiatric morbidity while during periods of civil commotion, opposite is true.

The period starting from late 1982 has been a time of great sociopolitical disturbance in Punjab and this preliminary study was aimed at examining the effects of these sociopolitical events on the phenomenology of patients attending a general hospital psychiatric clinic.

**Material and Methods**

Consecutive new patients attending the Psychiatry department of Christian Medical College & Brown Memorial Hospital, between 1.1.83 and 31.8.84 were screened at the time of intake, to pick up cases whose main clinical presentation was a symptom which reflected the prevailing sociopolitical situation in Punjab. Patients with a past history and patients whose present illness started before 1.1.1983 were not included. Patients whose illness was attributed by the family to the sociopolitical climate but whose symptoms on detailed enquiry were unrelated to and not reflective of the sociopolitical stress were not included. Present Status Examination (PSE) was administered to these patients to further elucidate the symptomatology.

**Results**

Out of total of 1,651 new patients, 16 (0.97%) presented with symptoms reflective of sociopolitical stress. All the 16 patients were between 20-35 years of age. 10 patients were either illiterate or had education less than matric. 14 were males, and 13 patients were married. 7 patients were from rural area. 12 (75%) patients belonged to the minority religion. Out of these 12 patients, all except one started having symptoms before 2nd June, 1984 (the day army was called in Punjab). All four patients belonging to majority religion started their symptoms after the date.

Common symptoms reflective of sociopolitical stress rated positive on PSE were: excessive worrying (81.2%); autonomic anxiety (56.2%); persecutory delusions (50%); depressed mood (31.2%) and grandiose delusions (18.7%).
The ICD-9 diagnoses of these patients were as follows: Anxiety Neurosis, 4 (25%); Depressive Neurosis, 3 (18.7%); MDP (Mania), 4 (25%); Schizophrenia, 2 (12.5%); MDP (Depressed), Alcoholic Psychosis and Reactive Psychosis, 1 (6.2%) each.

Discussion

Social condition in Punjab has been disturbed during the last 2 years. Psychiatric patients are known to structure their symptoms in terms of those aspects of their environment to which they attach high psychological premium. In view of this it was surprising that so few of the patients in the present situation actually couched their symptoms in terms of the events which were apparently quite disruptive to routine life. It is difficult to be categorical about the reasons for this; part of the answer may lie in the fact that we are not dealing here with a cataclysmic event of sudden onset, gross magnitude and sudden resolution but with a chain of events which occurred periodically over a long period of time, making the people adapt to living situation otherwise grossly abnormal.

It is quite possible and probable that a large number of people did experience a normal anxiety quite different from clinically reportable symptoms. In fact during conditions of civil disturbances this "normal anxiety" is the most prominent symptom reported in literature (Fraser 1971, Lyons 1971).

Of the people who did report as patients with a symptom reflective of sociopolitical stress, commonest was anxiety, worrying and preoccupation about future in the political context. Another common symptom was paranoid delusions expressing fear of the other community or the army.

There was only one patient of reactive psychosis, whose paranoid psychosis was considered entirely attributable to the army crackdown on the village and who recovered subsequently.

Most of the patients were young male adults between 20-35 years, probably these are the individuals likely to feel more worried and responsible for their families. All the patients before the army action were from the minority religion while the patients after the army action were from the majority religion expressing symptoms relating to army.

These results and comments refer only to the conditions which occurred in the state till end of August 84 and not later on.

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