The statement that Indian psychiatry has been eclectic is an oft-repeated one. From the days of Berkeley-Hill and Dhunjibhoy to the days of Wig and Kapur, the willingness to embrace a multiplicity of ideas has been the hallmark of Indian psychiatry. In a sense, one person who seems to embody this in independent India is Satyanand, who was the director of the Central Institute of Psychiatry from 1957 to 1963. He was one of the early teaching faculties at the All India Institute of Medical Sciences (established in 1954), where he started one of the first studies on community psychiatry; and was adviser to the Ministry of Health on psychiatry and mental health related issues. He trained in psychiatry at Edinburgh and obtained a diploma in child health from Bombay. He had also been “in charge” of training of army psychiatrists for “forward areas,” when he was an officer in the Indian Medical Service (IMS), and had served earlier as the Deputy Medical Superintendent at Punjab Mental Hospital, Lahore.

In his ideas, writings, and personal journey, Satyanand retains a multi-dimensionality, an elusive, hard to categorize quality that distinguishes him. The work of Satyanand offers a unique insight into the way 20th-century ideas in psychiatry influenced developments in India. The accompanying picture is the cover page of a book by Major Satyanand, IMS.\[1\] By then, he had trained with Owen Berkeley-Hill at Ranchi, and had taught physiology at the Amritsar Medical College, and worked at the Lahore Mental Hospital. Early in his career, he was initiated into psycho-analysis by Berkeley-Hill and acknowledges the debt. The book itself is dedicated to his parents, and his belief in the “past and future intellectual supremacy of India.”

Satyanand realized by the 1930’s (he trained with Berkeley-Hill in 1934) that neuroses and dysfunctions of personality could not be “dealt with satisfactorily without psychoanalysis,” and tried to develop an amalgamated theory that included Freud, his followers and revisionists, as well as philosophical, biological insights, and religion. This early book was one of the first, of many by him, to appear. Both symptoms described and techniques used make interesting reading.

He tries to analyze dreams from Freudian, Adlerian, Jungian perspectives, as well as by extending his tools of

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FROM THE ARCHIVES

The story of Satyanand

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The frontispiece of the book
understanding to mysticism, “samadhi” states, and religious symbolism in Indian life, which he then synthesizes into the “oriental reminiscence state.” The subjects themselves are facing problems not just with personal dilemmas, but also with anxieties regarding social reform, the need to join the Indian freedom struggle, with efforts to spread socialist thinking within the Hindu population (Satyanand here uses the cooperative effort of the five villages of the Pandavas as an early example of socialist thinking). He suggests that there has been too much, and too early, an over-simplification of the concepts of psycho-analysis. The individuals who seek his help include a young professor of psychology, who is seeking self-analysis, and a young married woman who wants to reform Hinduism and join Nehru and Gandhi (against the wishes of her family); who is ambiguous about her own sexual desires and is attracted to a female friend. The second subject is hurt by a friends’ comment that she was willing to compromise with capitalism while the true path was obviously socialism. These cases suggest that to an extent, urban life in India in the mid-20th century was not quite dissimilar to the tensions in politics and society in Vienna, and more broadly, Europe.

Satyanand goes on to develop an elaborate system of dream analysis that he contrasts with Freudian methods in many aspects. An important distinction is that in Satyanand’s schema, dreams are a mechanism in the struggle for existence (and thus imbued with meaning) rather than merely a representation of suppressed Id-impulses. Rather than relying only on Freud, Satyanand uses a bewildering array of writers and thinkers from many fields, including Jane Austen in Pride and Prejudice, and Sherrington on neurophysiology, and Husserl on phenomenology. He may have been familiar with an interesting book “The Dream Problem: Many solutions in search of ultimate truth”, published in 1917, which was a collection of essays, themselves the outcome of a symposium, with contributors from India, Europe, UK and the USA. It was edited by Ram Narayan, a doctor with a licentiate degree, and an editorial by Dr. KV Khedkar on the Philosophical Explanation of Dreams. It includes a structural theory of the mind, (see attached diagram), which is somewhat analogous to that proposed by Freud. Satyanand’s mode of analysis generated contrasting responses, with one reviewer stating that “certainly this volume cannot be ignored by analysts interested in psychoanalytic theory and practice.” Another reviewer found Satyanand’s insistence on collecting responses to every detail of the dream in a search for objectivity inherently problematic, “so even after so much effort and after achieving such a comparatively limited end result, there is no complete objectivity.”

In another decade, Satyanand extends his ideas and defines modern psychotherapy as a fusion of experimental religion, philosophy, sociology, and biology. His case-notes include therapy of a teacher of literature, who derives benefit from The Confessions of St. Augustine and reading Arnold Toynbee; another person who traces his personal symbols in relation to his Christian faith as well as the symbolism of mathematics; a patient who is a Christian convert but is deeply interested in Islamic mysticism; a young man who dabbles with becoming a Sanyasi (only to be disappointed); as also a 35-year-old domestic servant, mother of five children, who is comfortable with both God and the Devil guiding her (an honest person overall, but prone to petty theft when tempted by the Devil)! He also provides vignettes of a Sufi mystic who converts to Christianity and becomes an ardent worshipper of Mother Mary but is passionately attracted to a young girl and cannot reconcile the erotic and religious sentiments in relation to women. Another devout Hindu is intrigued by the explicit portrayal of sexual activity in Buddhist monasteries. Many subjects have symptoms of distress, linked to their transgression of social and religious boundaries, and Satya Nand appears to engage with these using ideas and symbols from diverse sources.

According to Satyanand, a total self-analysis is to be preferred to psycho-analysis. An immersion in the philosophical milieu is thus to be encouraged, and he off-handedly remarks that Iqbal’s poetry is Nietzschean ideas in a religious garb. By this time he wants to combine the philosophy of Samkara and Radhakrishnan, as well as Hegel and Russell, into a new design for a man. He derives his ideas of positive mental health from the famous book by Ross Ashby: Design of a Brain, which in the mid-20th century provided the first inputs into cybernetic theories and issues of cognitive neuroscience, systems theory, and consciousness. In the words of Satyanand, the crucial factor in therapy is the working through of “I am an animal” and “I want to be a god,” as represented in most religions and societies.

Another decade later, Satyanand is also developing blueprints for community psychiatry that include administrative details such as district hospitals and day hospitals, but also issues of “emotional integration” of the nation at the village level between various sub-cultures, castes, and professional groups. He is modifying Western therapy for use in India and using folk-theater to include psycho-drama. He points out that the “prevailing
politico-socioeconomic state (of the country) is caused by defective and immature community-ego development, and the low state of political, social, and economic integration causes and maintains defective, and immature community-ego.”

He defines positive mental health$^{7,8}$ as a natural derivative of Greek, Hindu and Buddhist doctrines of the Middle Way, and the goal of Detachment (of Hinduism) being an existential equivalent of being-in-time, as are atonement and self-surrender in Christian and Muslim traditions. He even finds that the psychology of Shankaracharya and psychoanalysis, as far as the principle of human dynamics is concerned (at a personal, familial, and social level), are consonant, and could serve as a template for positive mental health. Community mental health should thus focus, in his opinion, not only on developing a registry of cases, but also preventive work with children, schools, families, and addiction while ensuring that a fragmentation of care is avoided. As he points out, a “feeling of belongingness is most essential” for positive mental health.

Some other facets of Satyanand’s life and work merit attention. He was a regular contributor to both the Indian Journal of Psychiatry, as well as to neurological and medical journals, on themes of psychoanalysis. Perhaps the spaces between friends and colleagues were less stark than now! He also initiated psychosurgery at Ranchi, and reports a few cases, and designed equipment for the same. He traveled to the USA to learn psychodrama from observing Moreno and tried to incorporate it in the local milieu. The copy of the book (from which the illustration is taken) has been gifted by Satyanand to Dr. Rees, one of the founders of the Tavistock Clinic, which in its own way developed models for the application of dynamic therapy to British society. Dr. Rees, incidentally, later became (in) famous as the psychiatrist who evaluated Rudolph Hess, Hitler’s deputy, for alleged mental illness.$^{[9]}$ Politics and psychiatry seem to be rather inseparable!

Satyanand, in the notes of his own self-analysis, alludes to himself as being born to Christian parents, his father having converted from Hinduism and his mother from Islam. He spells his name in different ways at different periods of time in his life: David Satya Nand, D Satyanand, DS Nand, and Dev Satya Nand (as Professor of Psychiatry, AIIMS). Anecdotal evidence seems to suggest that this could be a reflection of his exploration of different personal identities. He himself is well informed about scriptures and practices in the Middle Way, and the constant tension between biological psychiatry and most everything else! Satyanand engages with patients’ experiences across different levels and incorporates biology, as well as politics, religion, and social upheavals into the process. He tries to work through the complexity and does not offer any condescendingly “simple” solutions, though, in essence, he goes back to “know thyself” as a mark of recovery. He anticipates the “positive mental health” of our recent past, though by now it is not stated as a political and social enterprise, in which psychiatrists need to be involved at an ideological level. The whole aim of psychiatry according to Satyanand is to build a “new man” for the new age, and India seems to be a good place to start.

Although Satyanand was unable to crystallize his worldview into any single theoretical paradigm, his ability to integrate so many different ideologies and world-views and use them in practice should be an inspiration to many psychiatrists. This is especially true for psychotherapy, where the ability to “see the other” and see the world “in the mind of the other”, as well as holistically, is the essence of a truly eclectic form of its practice.

END NOTE

In our explorations of the archives of psychiatry, there has emerged a large amount of fascinating material, which we think is certainly worthy of sharing, and in our opinion, a rich source of learning. We are deeply conscious of the fact that similar material of a historical nature would certainly be available to other readers of the journal, and we would invite these readers to share this in the section “from the archives.” In this particular case, we are certain that many other readers may have publications, reports, and memories or even remembered stories about Dr. Satyanand, and we would be delighted to hear and discuss them.

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