QUIT INDIA TO NEW INDIA HISTORY AND SOCIETY





QUIT INDIA TO NEW INDIA

About The Book

This book is a compilation of multi-disciplinary research papers on the various aspects of 'Quit India to Free India and Free India to New India'. presented and discussed at the National Seminar on 'From Quit India to New India: History & Society', organized by Mohan Lal Sukhadia University, Udaipur in collaboration with Indian Council of Historical Research, New Delhi. Topics of collected research papers range widely over time, from historical perspectives of Quit India Movement launched by Mahatam Gandhi in 1942 to the contemporary challenges of 21st century to make a 'New India' announced by Prime Minister Shri -Narender Modi in 2018, as well as political, cultural, social, economic studies of pre- and post-independent India. Taken together, to reaffirm the commitment towards 'New India' and to mark the 75th anniversary of Quit India Movement, studies presented in the book complement each other to provide a succinct overview of many of the key themes of historical and contemporary research on Indian history and society.

About The Editor



A prolific researcher and speaker, Dr. Pratibha is currently posted as Professor of History at Mohan Lal Sukhadia University, Udaipur. With 24 years of experience in the field of History Prof Pratibha's primary research revolves around culture, tourism, human rights and Gandhian thoughts. She is the author of two

books and has published dozens of research articles on the various aspects of society and history. Prof Pratibha has also delivered scholarly papers and lectures in a variety of professional forums in India. She is the editor of a research journal 'Lyncean: Journal of Cultural and Historical Studies and has been recipients of various grants and memberships from many international and national institutes such as the International Oral History Association, Indian History Congress etc.



OrangeBooks Publication www.orangebooks.in

Also available as an el ACADEMIC



	Printed in India
	The opinions/ contents expressed in this book are solely of the author and do not represent the opinions/ standings/ thoughts of OrangeBooks.
	Price: Rs.300.00
	ISBN: 978-93-90489-30-5
Mobi	First Edition, 2021
7	All rights reserved. No part of this book may be reproduced, stored in a retrieval system, or transmitted, in any form by any means, electronic, mechanical, magnetic, optical, chemical, manual, photocopying, recording or otherwise, without the prior written consent of its writer.
	© Copyright, 2021, Author
	vebsite: www.orangebooks.in
	Smriti Nagar, Bhilai, Chhattisgarh - 490020
HIST	OrangeBooks Publicate
Ζ)
QU	

NEW INDIA TO HISTORY AND SOCIETY

Edited by PRATIBHA

Professor Department of History hanlal Sukhadia University Udaipur (Rajasthan)





Contents

1.	Legacy Of The Quit India Movement 19421
2.	The 1942 Quit India Movement And Students : Some Lessons
3.	The Quit India Movement : Mass Participation And Role Of The Muslims 19
4.	The Year Of 1942 And The Of Perspective Of Dalits & Dalit Women
5.	Navy Mutiny Of 1946 53
6.	Role Of North East Women In The Freedom Struggle
7.	Trends Of Writing The History Of India - From Quit India To New India
8.	Role Of Aligarh Movement In Freedom Struggle And Post Independence Period
9.	A Historical Analysis Of The New Economic Policy Of India 109
10.	Dr. B. R. Ambedkar - His Vision And Mission In Making Modern India118
11.	Quit India Movement : A Leap Forward In Indian Women's Empowerment
12.	Emerging Issues Of Mental Health In New Age India



 13. Analysis Of India And Nepal Relations After India's Independence
Slump In India's Economic Growth
15. Indian Education System: What Needs To Change?
10. Rethinking Rhadi As Part Of Social Innovation
 Post Independence Historiography Of Early Medieval India: Perspectives On Political Processes
 Indian Foreign Policy: Challanges And Modi Doctrine
19. Oral History And War History In Independent India: A Difficult Dialogue
20. Conceptualizing A Folk Deity- Rajasthan And Beyond : The Study Of Baba Ramdev's Religious Tradition From Early 20th Century Till Present 252
21. Ceramic Ethnography And Material Culture 270
22. The Making Of New India: Achievements, Problem And Strength In Modern Era-With A Brief Study of Modi's 10 Step Plan
23. Globalisation And Social Development In India (1991-2001): A Case Study



Emerging Issues Of Mental Health In New Age India

Dr. Anita Manglani Dr. Kalpana Jain

After seventy years of independence, in the age of 21st century, India has been moving towards stability, socioeconomic progress, scientific and cultural achievement with rich heritage and past glories. Progress of India in fieldsof health, tourism, education, science, research, entertainment, tourism, agriculture etc. is significant. Following are the areas where India has marked its development after independence.

- Scientific advancing India has proven progress in its space programs, which began with the launch of its first satellite Aryabhatta in 1975. Since then, India has emerged as a space power. On 22 July 2019, ISRO launched its second lunar mission Chandrayaan-2 to study the lunar geology and the distribution of lunar water.
- Agriculture Expansion of farming area and introduction of high-yielding varieties of crops were the major factors of growth in agricultural production.



Furthermore, this sector could manage to end dependency on imported food grains.

- Socio-economic progress The economic reforms came to India by policy of liberalisation, privatisation and free-market economy. Standard of living of Indians has improved. Basic facilities are in the reach of most of the people in India.
- Infrastructure The Indian road network has become . one of the largest in the world with the total road length increasing from 0.399 million km in 1951 to 4.24 million km as of July 2014.
- Healthcare A decrease in death rates is considered • one of the major achievements that came India's way in this sector. While life expectancy was around 37 years in 1951, it almost doubled to 65 years by 2011.
- Information & Technology The acquisition of • expertise in information technology has led to the generation of thousands of new jobs, which in turn increased domestic consumption and more foreign direct investments happened to meet the demands.
- Education After widespread illiteracy, India has • managed to bring its education system at par with the global standard. Schools increased significantly during the post-independence era. At independence, India's literacy rate was 12.2 % which has increased to 74.04% in 2011.

However, thepicture of development in India is not spite of these the areas. In satisfactory in all developments, India ranks 130th on human development



Ouit India To New India

index (HDI), prepared by the UNin 2018, due to having a high incidence of starvation deaths, regionalism, unemployment. educated population separatism, illiteracy, poverty and declined health explosion, index.Among the three parameters of HDI, health is reported to be fundamental for the growth, development and productivity of a society and is vital for a happy and healthy life anywhere in the world (Chisholm and Banatvala, 2014).

Health in its broader sense is defined as a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (WHO; 1946). Physical health is an essential the part of overall health of an individual, which includes everything from physical fitness to overall wellness. Mental health is defined as a state of well-being in which [an] individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community (WHO). Since mental health is substantiated as the foundation for physical well-being, and in turn individual and community well-being, it has been emphasized most in the present world.

Burden of mental illness in New Age India

Mental illness is increasingrapidly in modern India and becoming a challenge. Inspite of comforts and facilities stress and tensions can be seen in the society. According to a report (Mascarenhas, 2016)in 2013, 31 million years of healthy life were lost due to mental illness in India, which is estimated to be, 38.1 million (23% increase) by



0,9

2025. In the recent report of National Mental Health Services Survey (N-MHSS: 2016-17) 13.7 percent of the population suffering from mental disorder. Prevalence of mental disorder in India as reported in this survey is described in Table1.

Table-1

Prevalence Rate of various mental disorders in India (2017)

Mental Disorder	Per cent (%)
Mental and behavioural disorders due to psychoactive substance use (excluding F17 Tobacco)	5
Alcohol Use Disorder	4.6
Tobacco Use Disorder	13.1
Other Substance Use Disorder	0.6
Schizophrenia other psychotic disorders	0.4
Mood [affective] disorders	2.8
Bipolar Affective Disorder	0.3
Depressive Disorder	2.7
Neurotic, stress-related disorders	3.5
Phobic Anxiety disorders	1.9
Other Anxiety Disorders	1.2
Obsessive compulsive disorder	0.8



Post-Traumatic Stress Disorder

This report also highlighted the prevalence of mental illness including substance abuse, alcohol use disorder, tobacco use disorder, severe mental illness, depression, anxiety, phobia and post-traumatic stress disorder among 12 states namely Punjab, Uttar Pradesh, Tamil Nadu, Kerala, Jharkhand, West Bengal, Rajasthan, Gujarat, Madhya Pradesh, Chhattisgarh, Assam and Manipur, which is described in Table 2. These data clearly highlighting that mental health issues are emerging in all states of India.

Table 2

Prevalence Rate of Mental Disorders (ICD-10) in different States of India (2017)

State	Percent (%)
Manipur	14.1
MP	13.9
Punjab	13.4
West Bengal	13
Tamil Nadu	11.8
Chhattisgarh	11.7
Kerala	11.4
Jharkhand	11.1



Quit India T	o New India	
Rajasthan	10.7	
Gujarat	7.4	
Uttar Pradesh	6.1	
Assam	5.8	

Adverse Impact of Mental Disorder

The adverse impact associated with mental illness cannot be ignored.Effect of mental illness may be life long and affects severely the patient's personal and social life. Impacts of mental health can be seen in the following headings.

- Health Impact The close consortium ofmental disorders as precursors of awide range of acute and chronic conditions.Mental disorders claim many lives prematurely, cause massive ill health and in turn hindering human development.
- Personal & Family Impact Mental illness contributes to a significant load of morbidity and disability of person as an affect everyone, irrespective of age, gender, residence and living standards. Mental problems resultin a lifelong impact and poor quality of life for such individuals and their families.
- Cultural Impact From a cultural perspective, mentaldisorders are associated with a considerable amount of stigma in Indian society. Individuals suffering from mental problems are considered low in the society.

145

- Economic Impact Compromise economic development as the impact of mental, neurological and substance use disorders (MNSUDs) is acknowledged to be high due to the nature, duration, and impact of illness affecting growth, productivity and the earning potentials of individuals.
- Social Impact Mental health conditions cause not only lower productivity and earning potential, but also in a number of antisocial behaviours, crime, homelessness, domestic violence, alcohol and drug use.

The increased burden of mental health disorders and its adverse impact visualized the need to take mental health concern in India. To take any preventive and intervention approach one need to address its underlying factors for a specific community. The recognized factors and recovery of mental health for the Indian context are the following.

Determinants of Mental Health: Causality and Recovery

Mental disorders are caused by a complex interaction of biological, social, environmental, cultural and economic factors. The key factors that have been found to influence one's mental health include: Income and social status, lifestyle, social support networks, education and literacy, working conditions, social and physical environment, personal characteristics and behaviours (health practices), Biology and genetics, health care services, gender and culture also determine health. These determinants of health, whether physical, mental and social contribute

A.



significantly to both causality and recovery. Important factors recognized in the Indian context canbe described as follows.

Food & Diet: Healthy food to junk and fast food:

Food and diet significantly affect mental health. The shift from traditional and homemade food to western, processed and packed, fast and junk food style and dietary habits, adversely affect mental health. These dietary changes have led to clear public health challenges as not only the burden of diet-related non-communicable disorders (NCDs) but also substantiated as the leading cause of early mortality worldwide (Forouzanfar et al., 2015). Studieshave reported the significance of various nutrients in mental health (Rao et al., 2008; Jackaet al., 2014 and Khanna et al., 2019) and highlighted the potential importance of the relationship between healthy dietary patterns and positive mental health throughout life addition, various nutrition In span. and dietary compounds have been reported in the onset maintenance and severity of mental disorders.

Environment: Natural to Artificial

Nature is considered a source of healing and wisdom in our society for thousands of years. Nonetheless, in the present era, rapid urbanization and decline in human contact with nature decreased the nature connectivity.A growing body of empirical evidence reveals the significance of the natural environment for mental health.Research studiesshow, the psychological costsof artificial settings wide-ranging includes can be



Quit India To New India

disruptions of mood and sleep (Kuller et al., 2006), short. term impairment of attention and cognition, reduced academic performancein the young and greater cognitive decline in the elderly(Anthes, 2009), emotional health, and other dimensions of mental health(Gregory et al. 2019). Recognizing the significance of the natural environment in our life, measures should be emphasized and enhance opportunities for nature experience.

Lifestyle: Physical activity to lethargic

Lifestyle factors are also potent in determining both physical and mental health. Lifestylewith a lack of physical activity exerts a major impact on mortality, and "even small differences in lifestyle can make a major difference in health status" (Khaw et al., 2008). A wide variety of psychological outcomes have been studied, including effects on mood, self-esteem, cognitive functioning and decline, depression, and quality of life.In a recent study of Singh et al. (2018), physical inactivity during adolescence and youth has been reported as a potential risk factor for future mental health problems (Depression). Physical activity extends over multiple body systems. It reduces the risk of multiple physical disorders ranging from cardiovascular diseases to diabetes to cancer (Khaw et al., 2008). Since, physical Exercise is reported as a healthful, inexpensive, and insufficiently used treatment for a variety of psychiatric disorders, it offers both preventive and therapeutic psychological benefits.



Family: Joint to Nuclear family system.

+ 622n

The Family has a central role in one's life as within the family child's overall development take place. It is a primary agent of socialization. Due to rapid socio-cultural changes, the concept of familyhas also undergone an extreme change. Behere (2017) highlighted the role of family structure and its adverse effects on the mental wellbeing of children. The disadvantages of the nuclear families are: lack of support to take care of children in absence or emergency of one member, limited social interactions and close relationships, considerable erosion of traditional support systems and increased stress and pressure on family members, leading to an increased vulnerability to emotional problems and disorders, increased demands on finances to replace the traditional joint-family support systems by hiring services like concierge, crèche, etc.

Besides these major determinants, the mounting burden imposed by mental health problems has many causes, including aging populations, rapid and unplanned urbanization, tobacco use, consumption of unhealthy food & diet, exposure to air pollution, fast-paced lifestyles, experiencing stress, complexities of living, a breakdown of support systems and challenges of economic instability.

Action need to be taken

Looking at the adverse situation and determinants of mental health in India efforts should be made to-



- Strengthensocial environment by emphasizing on . previous personal, social and cultural values
- Reforming family structure and collectivist culture . through improving intimacy and quality of relationships with family members, friends and with the community.
- Encourage adoption of healthy and effective lifestyle • by a person and society.
- Psycho-education in • Emphasize schools and community settings, to spreadawareness about mental health and mental illness at community level to remove the stigma for mental problems.
- Conduct different training and Programsto build • resilience, adaptability, self-confidence, healthy life style, stress management, social networks etc.
- Adopt previous and ancient spiritual and religious • practicessuch as meditation, mindfulness etc. to defeat daily stress.
- Build physical environment more naturalistic or close • to nature with availability of space for social interaction

Moreover, to maintain good mental health, a balance between various aspects of one's life such as social, physical, mental, economic, spiritual and emotional should be achieved.



References

- 1. American Psychiatric Association (2013). Diagnostic and Statistical Manual of Mental Disorders, American Psychiatric Association, ed. 5.
- 2. Anthes, E. (2009). Building around the mind. Scientific American Mind, 20, 52–59.
- Behere AP, Basnet P, Campbell P.(2017). Effects of Family Structure on Mental Health of Children: A Preliminary Study. *Indian J Psychol Med*, 39(4), 457– 463.
- Chisholm D. &BanatvalaN. (2014). Noncommunicable Diseases and Mental Disorders, Global Health Threats of the 21st Century. Finance and development, 51 (4), 16-19.
- Forouzanfar MH, Alexander L, Anderson HR, Bachman VF, Biryukov S, et al. (2015). Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks in 188 countries, 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. Lancet, 386(10010),2287–323.
- 6. Gregory N. B., Christopher B. A. et al. (2019).Nature and mental health: An ecosystem service perspective. *Science Advances*, 5 (7).
- Jacka FN, Cherbuin N, Anstey KJ, Butterworth P. (2014). Dietary patterns and depression symptoms over time: examining the relationships with socioeconomic position, health behaviours and cardiovascular risk. *PLoS One*, 9(1).
- Khaw, K. T., Wareham N., Bingam, S., Welch, A., Luben R., & Day, N.(2008). Combined impact of health behaviour and mortality in men and women.

The EPIC-Norfolk prospective population study. Obstetrical & Gynological survey, 63, 376-377.

- KhannaP., Chattu VK, & Aeri BT (2019). Nutritional Aspects of Depression in Adolescents - A Systematic Review. International Journal of Preventive Medicine, 10 (42), 1-14.
- Kuller, R.; Ballal, S.; Laike, T.; Mikellides, B.&Tonello, G. (2006). The impact of light and colour on psychological mood: A cross-cultural study of indoor work environments. *Ergonomics*, 49, 1496– 1507.
- 11. Mascarenhas, A (2016). Mental illness India's ticking bomb, only 1 in 10 treated: Lancet study. Article published in India express on May 19, 2016.
- 12. National Mental Health Survey of India- Prevalence, Pattern and Outcomes, 2015-16.www.dnaindia.com/health/report-finally-anational-survey-on-mental-health-disorders-in-india.
- 13. Rao S, et al (2008). Understanding nutrition, depression and mental illnesses. *Indian J Psychiatry*, 50, 77-82.
- Singh, M.; Sharma, P.; Raj, D.; Sharma, S.; Kaushal, A;, Raina, S.K. (2018). Leisure time physical activity and risk of developing depression among the youth of Kangra district, Himachal Pradesh, India. *Indian J PsycholMed*, 40, 426-32.
- 15. World Health Organization, International Classification of Diseases (World Health Organization, 2017).
- World Health Organization, Mental Health: A State of Well-Being (World Health Organization, 2014).
- 17. World Health Organization. Regional Office for Europe (1984). Health promotion : a discussion



document on the concept and principles : summary report of the Working Group on Concept and Principles of Health Promotion, Copenhagen, 9-13 July 1984 (ICP/HSR 602(m01)5 p). Copenhagen: WHO Regional Office for Europe.



