

Picture credit: Anjali and the International Institute for the Inclusive Museum



Perceptions in our everyday world are often binaries, from the good and bad to sacred and profane. There is always a liminal space in between. For millennia, from sages to scholars have endeavoured to understand this imagined bifurcation or intangible that is the gulf. Our ongoing struggle is to bridge these fault lines. How well we do it is determined by power relations. Who controls the gaze? Who frames the other?

One of the immigration learnings for me in Australia is the power of control and how it determines the dominant discourse and its realization often maintaining the status quo. Even when challenges are made by the vanguard, the elite cultural reproduction of power continues. Rarely is there a disruption. When there is one, then the question of who is an Australian is better understood. Most of my professional and policy work across the world has been to facilitate the crossings.

In many parts of the world mental health has been used as an indicator to segregate, dominate and contain the other that is not in power. Catholic in predominantly protestant contexts or vice versa, Hindu and Muslim, caste divides and so many other binaries are saturated with power relations and hegemonic cultural constructs often institutionalizing discrimination. To what extent do we understand these under toes?

Can art and museums play a role to emancipate these deep-seated prejudices? Given the capacity to curate, can they challenge us and visualize the unforgiving society that creates over time and reinforces the blindness of the majority power? There are seminal openings. Kenmore Asylum or Hospital between Sydney and Canberra, in the heart of the Marino gold or wool, the wealth of accumulation for historical Australia, reveals the complexity of colonial subjugation. It is a heritage listed property with a museum. Until recently a site of suffering and societal cruelty towards 'mentally ill and handicapped people'. Scars linger on for generations. It is as much about decolonization as healing.

For too long in countries like India, those that are born with mental illness are incarcerated and considered as children of god. While the worshipping of gods and goddesses is increasing with the wealth of the new rich and upwardly mobile middle classes, the disadvantaged children are abandoned to squalor and segregation, outcasts of a rigidly hierarchical society. Often this has become a question of shame and honour.

Girls and boys born with disabilities and mental health limitations are not sent to school for fear that other children and family

will be pitied and discriminated against, especially when it comes to marriages and dowry demands for the siblings or immediate relatives. Add intersectionality of race, ethnicity, gender, and other cultural borders, the disadvantage becomes even more complicated. What permeates the system and the literati is an overdose or diarrhoea of political correctness. More public grandstanding is either informed by using the word 'challenging' in all forms of disability and mental health and rarely people walk the talk. Education is seen as a level of awareness. But as Babasaheb Dr Ambedkar said an educated person without awareness is more of a liability than good.

Rare advocacy and activism are applauded as a job well done. But rarely does this appreciation translate into social change and affirmative programming. Money is not an issue in India. After all it is positioned as one of the fastest growing economies and in the top four rich countries of the world. Divides and fractures seem to get wider and the class differentiation seems to create new inequalities. It appears that governments are committed but often remain at the end of the stick for public beatings. What seems apparent is the lack of capacity among the service delivery personnel. Then the famine of compassion is the new malady. Rarely does a university or technical college make its visibility in the disability and mental health studies and training.

On a recent visit to Kolkata for a Look East India symposium, I had the opportunity to see how they are looking within. It was a creative intervention at the Pavlov Hospital, Kolkata. Across the Lines is a CIMA Arts award collateral event by artist Srikanta Paul and team. Curated by Sumona Chakravathy, Devanshi Rungta and Lailly Thomson, series of installations and art works permeated the work in progress but dilapidated buildings of the hospital. It is a deeply moving experience if we could immerse ourselves in the contextual presentations on site. What the viewer brings to the site from

personal and family experience leaves an indelible mark on one's conscience.

Several questions remain for the viewer. Where are the families that had to painfully part with the ones at the hospital? Are they supported by society? Would a mother let go of a child in such circumstances if her family or society supports her? Is rehabilitation only one of containments, incarceration and punishment? What about the individual stories that come through the work of the segregated in various formats of representations?

One of the fundamental questions is about what the Bhadrak of Kolkata or India have learnt from such site installations. Beyond 'I have been there' to 'wow what an amazing show' coffee house radicalism, what subsequent action and participation are demonstrated to improve the very existence of the hospital 'residents' and the 'carers'. The latter are often demonised but poorly understood. They need support too. In fact, both carry the negligence of the society at large.

One of the questions that Mother Teresa faced in the mid-1970s, when she came to work with us setting up a place for homeless people in Vijayawada, is whether they were better off on the streets or cared for in seclusion. One morning seven of us with her concluded that it is not an either-or situation. Who would then determine the choice? Compassion to understand oneself and the other enables the bridging. With the rapid growth of tourism for economic gain and for regional GDP of so many places in India, compassion has become a rare commodity. An irony for the few who understand what Buddhism is all about.

Between the Lines - Swimming to Float or Sink!



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Professor Dr. Amareswar Galla, an Indo Australian, appreciates the learning from the work of Anjali, Mental Health Rights Organisation in Kolkata

NEXT WEEK

Heritage Matters will take you to the World Arts Congress on the importance of policy driven culture in development



1 Across the Lines - creative interventions are grounded in the cultural landscapes of the Pavlov Hospital

2 Art works by the residents of the hospital

3 House of Memories. A home within a home

4 Baggage

5 Framing

6 Perched

