An Indian neuropsychology adventure

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In February 2018, I attended three neuropsychology-related conferences in India, as well as engaging in other activities such as helping to promote Neuropsychology there and showcasing a multimedia Gandhi exhibit. Here, I recount my ‘Indian Neuropsychology Adventure’.

Although I was born in India, I have lived most of my life in the UK, and for me a trip to India is generally a challenging adventure. When the challenge came up to attend or take part in three conferences in India that happened to take place over a two week period, I gave this some thought and then decided to give it a go and to give it all I could. I wanted not only to attend the conferences, and provide talks as appropriate, but also to use this opportunity to do what I could to promote and support neuropsychology, not only in India but also in neighbouring countries. I also wanted to use this India trip to showcase a Gandhi exhibit that I had prepared a year ago for an international conference on Gandhi that I had organised at University College London (www.uclgandhi.com).

The first port of call was Mumbai (once called Bombay), where the bi-annual meeting of the World Federation of Neurorehabilitation was held from 7–10 February. The conference was opened with a dazzling cultural display, and this included spectacular performances by groups of mentally or physically challenged individuals. The conference itself had many parallel sessions as well as poster displays. The sessions included ones dealing with traumatic brain injury and with neurorehabilitation in developing countries. There was a consensus that there should be sharing of western and eastern practices in neurorehabilitation, and that there should be ‘technology with a human touch’. However, a few centres in India seem to have taken on ‘cognitive retraining’ within their rehab...
programmes, with this training often being little more than repetitive practice, and so some talks did suggest caution in using this approach as opposed to a more functional approach that focused on specific everyday behaviours. A unique and very welcome part of this conference was a series of Public Forums, where patients and their families attended. They were able to put questions to a panel of experts, and in some cases also tell their own ‘survivors stories’ of their illness or injury. One such session I attended was on Multiple Sclerosis (MS), and it featured one of the most moving accounts I have ever heard, one that I will never forget and one that probably reduced some in the audience to tears. It was by a young girl in her early twenties who had a juvenile form of MS, which she contracted in her early teens. She came from a poor background, and her parents were both vegetable sellers; she had not only strived to overcome her disabilities but had also gone out of her way to support her parents in their occupation. She herself did not speak English as a child, but for this conference she made a special effort to learn to deliver her account in English, which she did admirably well. The gala dinner at the conference was accompanied by Bollywood dancing, which itself was quite spectacular (Figure 1). As a side-note, in Mumbai, along with some colleagues I went to a unique restaurant, Mirchi & Mime, where all the waiters are deaf and we had to communicate our orders in sign language, with relevant sign language instructions printed on the menu (Figure 2). This must be one of the first restaurants of its kind in the world, and it is great to see India taking the lead in such a great initiative.

This international rehab conference was held for the first time in India, and it was a wonderful opportunity for those in India to learn about the latest developments in neurorehabilitation. I therefore decided to sponsor (give ‘Gandhi Fellowships’) to my four principal neuropsychology colleagues in India, three of whom were past recipients of the DoN/BNS Neuropsychology International Fellowship; the four were based in Kolkata, Chennai, Pune and Bengaluru. The fellowships were worth £350 each, to cover their travel and registration, and in a couple
of cases I also paid their hotel accommodation in Mumbai. In addition, I gave Gandhi fellowships to a neurosurgeon and to a clinical psychologist from Bangladesh, to enable them to attend the conference (I had also tried to sponsor delegates from Nepal, Pakistan and Sri Lanka, but for practical reasons they could not attend). Each of the Gandhi Fellows, together with a neuropsychology colleague in Mumbai, also received from me three books, John Hodges’ *Cognitive Assessment for Clinicians*, the *Oxford Textbook of Cognitive Neurology and Dementia* by Husain and Schott, and the *International Handbook of Neuropsychological Rehabilitation* by Barbara Wilson and colleagues (Figure 3).

The next stop was Pune (once called Poona), which is both known as a garrison town, and also the place where Gandhi was imprisoned for several years by the British in the early 1940s. In Pune, I took part in a Neuropsychology workshop organised by my neuropsychology colleague Ms Farzana Mulla, who is based in Pune. Also taking part in the conference were Barbara Wilson, Jill Wingardner and Anita Rose from the UK, and Juan Carlos Arango from Spain. Two key and recurring themes not only at this conference but also the Mumbai conference were the critical role that families play in the recovery and rehabilitation process in a country such as India (with this influence often positive, but sometimes negative), and the importance of psychoeducation for patients, for families and for staff. Neuropsychology is very much a Cinderella service in India, and this is the case in Pune. I therefore liaised with Ms Mulla to help her set up a Neuropsychology Centre.

Figure 3: Handing over three neuropsychology books to my neuropsychology colleague in Mumbai, Mrs Tanvi Karlekar.
Photo credit: Narinder Kapur.
at the hospital where she worked, Jehangir Hospital (Figure 4). Equipment for rehab, clinical textbooks, etc. are hard to get in India or are out of the financial reach of many healthcare professionals, so I donated equipment to the physiotherapy department in the hospital, which works closely with neuropsychology and has adjacent offices. This equipment included Microsoft Kinect and Nintendo Switch systems for ‘exergames’ in rehab. To my neuropsychology colleague, I donated two iPads for use with therapy apps. To the senior neurologist in Pune, I donated a copy of the Queen Square Textbook of Neurology, John Hodges’ Cognitive Assessment for Clinicians and the Queen Square Screening Booklet for Visual Disorders. At the Pune conference, over one of the days I showed my Gandhi exhibit. This exhibit had seven components – a virtual reality app which enables the player, using Google Cardboard and a Samsung smart-phone, to view and interact with an avatar of Gandhi at the Taj Mahal; a Gandhi knowledge quiz; a multimedia account of Gandhi’s life and principles; three interactive quizzes on Gandhian-related themes, each with a component which is informed by psychological science – altruism, moral judgments and global citizenship. I also displayed a unique tome, called Gandhi in Colour. This work has been produced by a Gandhi organisation in Germany (GandhiServe) and is an A3-format book of Gandhi’s life, with unique photographs that have been reproduced in colour.

The final stop on my Indian Neuropsychology Adventure was Bengaluru (once called Bangalore). This conference was the annual meeting of the International Neuropsychiatry Association. It was held at the National Institute of Mental Health and Neurosciences (NIMHANS) in Bengaluru, and a number of the talks and poster sessions were by staff

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Figure 4a: Inauguration ceremony for Neuropsychology Centre, Jehangir Hospital, Pune. From left to right, Dr Nusli Ichaporia, consultant neurologist and Head of Neurology Department, Jehangir Hospital, Pune; Mrs Jasmine Jehangir, wife of the hospital owner; Dr Anita Rose, consultant neuropsychologist from the Raphael Medical Centre, UK; Narinder Kapur; Dr N Kamat, medical superintendent, Jehangir Hospital, Pune; Ms Farzana Mulla, consultant neuropsychologist, Jehangir Hospital, Pune. Photo credit: Narinder Kapur.
and students of NIMHANS. Keynote speakers from the UK included Professor Semir Zeki (two talks – Subjective Truths, Vision), Professor Michael Trimble (Rhythm & Blues, What makes us Human) and Professor Julie Snowden (Frontotemporal Dementia). I myself gave a talk on Bias and the Unconscious Brain. Topics covered at the meeting included functional neurological disorders and the value of transcranial magnetic stimulation in depression. The conference ended with a nice touch – in view of the number of UK speakers, the organisers played both the British and the Indian national anthems.

Since this conference was a major event in the Indian clinical neurosciences calendar, I decided to sponsor six Gandhi Scholarships, each worth £120, and these were awarded to the delegates with the six best posters at the conference. I also donated to clinicians from five major cities in India the Hodges book and the Oxford neurology textbook noted earlier. Finally, I took this opportunity not only to repeat the Gandhi exhibit that I had shown in Pune, but also to run a ‘Gandhi Fair’, something that I had done previously in India. Thus, I sold at knock-down prices surplus clinical neuroscience books, two used laptops and the Gandhi in Colour book, and we managed to raise 50,000 Rupees (around £600), which was donated to a local medical charity that helps the underprivileged in Bengaluru. I see these Gandhi Fairs as a ‘triple whammy’ – we in the west benefit by getting rid of items we no longer need, colleagues in the developing country benefit by buying valuable items at knock-down prices, and a local charity benefits from the proceeds. The Gandhi exhibit and fair were covered by a national newspaper, The Hindu, and by a local TV station. During my time in Bengaluru, I was asked by a past Neuropsychology International Fellowship award winner, Ms Jwala Narayanan, to inaugurate a Neuropsychology Resource Centre in the hospital where she worked (Annawamy Mudaliar General Hospital), and this Resource Centre was named after me!

So, this Indian neuropsychology adventure went smoothly and from most perspectives was very successful. As always happens, my UK
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colleagues and I were thoroughly spoilt by our gracious Indian hosts. Neuropsychology in India is naturally very sparse on the ground and grossly under-resourced compared to the west, but in India we have some brilliant and dedicated clinicians who work against the odds to both deliver a high quality neuropsychology service and also try and develop their discipline. They deserve our admiration and support, and it was a privilege and a pleasure to play a small part in helping them along their journey. The whole trip cost me around £8000, but for me every penny was well spent!

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