All Will Definitely Change!

Today (24 May) is celebrated as 'World Schizophrenia Awareness Day'. On this occasion, here is an article that stresses the urgent need of organisng programs for eradication of stigma associated with mental disorders apart from the proliferation of mental health care services.



The mentally ill have to face dual challenges. They have to fight not only the symptoms of the disorder which cause an upheaval in their life but also the vicious and apathetic attitude of the society towards the condition. Due to the stigma associated with the condition, the mentally ill cow down to the societal pressure and are unable to pick the options that can lead them from illness to wellness. Therefore eradication of stigma is as important as proliferation of mental health care services. The international medical journal ' Lancet' also emphasises that the persons with a lived experience of mental illness should take a lead in this regard and take sustained efforts towards the eradication of stigma.

On 'World Mental Health Day'-2022, Lancet invited poems pertaining to stigma and discrimination from the persons with a lived experience of mental disorder, out of which a few were published in the report of the Lancet. Even though these poems are penned in English by poets from different countries, a common thread of negative experiences, pain, stigma, discrimination and resilience runs through them all, which lends them a universal significance. The chief aim of Eklavya Foundation is to eradicate the stigma associated with mental disorders and therefore it took steps to translate these poems in Marathi so that they are available to Marathi readership. This translation (in bilingual form)will be available on 24 May i.e. on World

Schizophrenia Awareness Day. (To avail a free e-copy drop a message on eklavyamh@gmail.com or WhatsApp 9096827953)

After reading these poems, one realizes that these poems express subtle, traumatic emotions of the mentally ill, in minimum possible words. For instance while voicing her experience of stigma , Camilla Fitzjohn in her poem **'My own private nightmare'** states:

Backs are turned.

Hostile stares.

No one sees the real me.
(English original)

Anne Hoffman, while admitting that the experience of discrimination is painful asserts the need to go beyond it, in her poem ' Make a Difference':

The media portrays fear

They inform the public about the tragic side

As individuals we need to make it clear

Tell people our story, achievements

What they like to hear

Make a difference

It's up to you

It can't hurt

To give your point of view

Tell the truth, how it feels to you

Change people's image and point of view

Some people get up and walk away

There's always hope it will change one day (English original)

The recipient of Ramon Magsaysay Award, Dr Bharat Vatwani emphasises that the mentally ill should not suffer in silence but take an initiative through the following poetic lines quoted in the preface:

While Stigma (Darkness)may never be dispelled,

in its supposedly, seemingly,

all-pervasive encompassing entity,

Enlightenment (Light) too can never be quelled,

in its definingly, definitely,

all-endearing ever-radiating Soulful Glory,

For the Light shall burn its brightest,

when it is held in Your Hands.

And it is held in Your Hands.

You are the Chosen One.
(English original)

Eklavya Foundation believes that these translated poems would pave the way for the eradication of stigma and discrimination that the mentally ill suffer from and serve as a beacon light in the journey of the mentally ill through the disorder.

Anil Vartak,Ph.D
(The author is the President of Eklavya Foundation for Mental Health, Pune.)
avartak@yahoo.com
+91 9503710859

Originally Published in Maharashtra Times, Pune. (24/5/2023)
English Translation by Ms. Mohini Savedkar

Graphic Support by **prithvigraphics.com**

A step towards the rehabilitation of the mentally ill



Mental illness and the mentally ill by and large, are viewed with apathy and indifference by our society. The psychological disorders are not discussed openly in the society. Due to the taboo associated with these ailments, consulting a psychiatrist and taking medication take a backseat and the disease aggravates manifold. 'Eklavya Foundation' is taking active steps to counter precisely this stigma and apathy. Here is a brief report on this foundation that is celebrating its silver jubilee this year.

The mentally ill and their care-givers have to face numerous challenges. Owing to the insensitivity, misconceptions, inattention towards the disorder and lack of insight on the part of the society in general, the condition worsens enormously and assumes alarming proportions. This is conspicuous in the society around us and we have seen and experienced this time and again. However, this state of affairs has not been much investigated and no concrete steps have been taken to ameliorate the situation. "Battling the ailment and the symptoms arising out of it is comparatively easy but battling the callous and unsympathetic societal attitude is immensely difficult" is what the mentally ill and their caregivers seem to reiterate.

Social Intervention

In case of serious physical disorders like cancer, diabetes etc. the patients receive support, informal guidance and sympathy from personal acquaintances in general and the near and dear in particular. This support system motivates the patients and goes a long way in their recuperation. Of late, we have witnessed a sea change in the attitude of the society towards ailments like Aids and Leprosy, too. Information and support are easily available now, to the patients suffering from Aids and Leprosy. However, this is not the case with mental disorders which are still shrouded in mystery. There is complete disregard and utter neglect when it comes to psychological disorders. The situation cannot be managed by increasing the number of mental health professionals alone or by upgrading the effectiveness of the medication. The patients and their kin must receive help from the immediate environment. This can be achieved by training the laymen, patients and their care-givers. Moreover, patients should not sit idly by waiting for the society to

change. Rather, the patients and their family members should initiate change in themselves and contribute actively to the societal change. This is precisely the core of the philosophy that Eklavya Foundation propagates.

Community Sensitization

World Health Organization is making great strides in this direction. It is necessary to establish such informal institutions and run them steadily, steadfastly and effectively in Maharashtra too. Taking cognizance of the fact, Eklavya Self Help Group and subsequently Eklavya Foundation were formed twenty-five years ago. In its nascent stage only a Self Help Group was formed. It was later that gradual attempts were made by Eklavya Foundation to sensitize community regarding psychological disorders, eradicate stigma associated with them etc. through various programmes organized in schools, colleges, senior citizen groups, women's clubs etc.

To date, the foundation has released various booklets, articles, bulletins regarding mental illness thereby voicing the experiences and the success stories of the patients suffering from mental disorders. In India, professional mental health services and non-government organizations related to mental health are easily available in Chennai and Bengaluru and therefore, these cities are often hailed as the ' Mental Health Capitals' of India. In the same vein, Eklavya Foundation is keen to provide basic information regarding psychological ailments, raise awareness about them, eradicate stigma, and weave a web of self help groups in Pune too. Eklavya Foundation thus aspires to make Pune the 'Mental Health Capital' of India by fulfilling its aforementioned objectives.

A Workshop for the Volunteers

To mark the silver jubilee celebration of Eklavya Self Help Group, a workshop is organized on 21 and 22 January 2023 in which renowned Psychiatrist from Miraj, Dr Arun Rukadikar will guide the volunteers. The volunteers from Ahmednagar, Goa and Mumbai apart from Pune will participate in the workshop. The foundation intends to organize many such workshops in foreseeable future at various places in order to train volunteers, to sensitize the community, eradicate stigma and form self help groups. The foundation has already started taking steps in this direction.

Anil Vartak,Ph.D
(The author is the President of Eklavya Foundation for Mental Health, Pune.)
avartak@yahoo.com
+91 9503710859

Originally Published in SAKAL, Pune.(18/1/2023)
English Translation by Ms. Mohini Savedkar

Graphic Support by **prithvigraphics.com**

TURNING A NEW LEAF - MENTAL TO NON - JUDGEMENTAL!

'Mental Hai Kya', the movie produced by Ekta Kapoor and directed by Prakash Kovelamudi is due to release around the end of July and its title has already caused a furore. Words like 'mental', 'psycho' and many more are used with a negative connotation, often to poke fun at others or to show them in poor light. Our society harbors a disrespectful attitude towards those suffering from mental illnesses. This attitude is knowingly or unknowingly fostered by numerous occurrences in our society. They are found everywhere; in electronic media, in print and definitely in the ordinary conversations. We have all known since childhood that misconceptions about mental illness have been prevalent and are spread indiscriminately in the society. Terms like 'mental', 'mad' are part of the day-to-day jokes, adages and the like.



Social disrespect is not limited towards persons with mental illness but is also aimed at the physically handicapped or the differently-abled. Since physical disabilities can be seen and gauged, poking fun at them, sarcastic remarks and derision were limited. Modern times have seen a rise in the awareness about disability rights and consequently sensitivity towards the differently-abled. Our language has gradually done away with queries like 'Langda hai kya?' (Are you lame?) 'Andha hai kya?' (Are you blind?) considering them to be in a bad taste. Any label seems harmless at first and we doubt if it matters at all. But these labels are just the tip of the iceberg. Ninety per cent of their meaning, our attitude and behavior are like the huge remainder part of the iceberg, hidden beneath the water. The seemingly innocent comments can torment the affected individual by their lingering echo within. If such behavior is meted out to members of our own society, we are indeed being very unfair and unjust to them. What right do we have to judge others? The Indian Psychiatric Society (IPS) has conscientiously and strongly objected to the use of the word 'Mental' in the title.

Mentally ill persons and their families have faced humiliation and ostracism for years together. Many have experienced acute stigma. This is why patients' families hide the illness during marriage proposals, thus risking relapse with a fury. Consequently many youngsters have to face divorce and its fallout. Therefore, should such terms be bandied about hurting the sentiments of the mentally ill and scratching at their scabs before they heal? The posters of 'Mental Hai Kya' have been published and they depict the hero and the heroine in a confused state, bloodied and messed up. The title and posters of the film will definitely increase the confusion and derision in the minds of the audience about mental illness. The title needed to be changed so that the hard work put in over the years by numerous professionals & volunteers working for the cause does not come to a naught.

Some might claim that story of the film is still unknown and may not necessarily be against the cause. Maybe the director and the producer want to convey something very different. Perhaps they just want to portray a human variety. Their aim may be to curb social censure and attitudes of disrespect towards the mentally ill. Some of these assumptions may be true but the more important one is not what the producers are aiming at but what the apparently harmless title of the movie is capable of perpetuating stigma against the mentally ill.

The recently concluded Loksabha elections saw many candidates mocking each other virulently. Unrestrained criticism had

reached a new low. Apart from words like 'mental', 'psycho' and 'crack', statements like 'Send them to Agra,' 'They need treatment,' and 'They need to be admitted' were rampantly used. When such statements receive media coverage, they affect public opinion, especially when they are repeatedly uttered by people who matter and who are in public focus. This aspect was also highlighted and reported to the Election Commission by the Indian Psychiatric Society (IPS).

In foreign countries like The United States and Australia, a watchful eye is kept on matters that promote or spread stigma among the public. There are institutions like 'Stigma Watch' that work for this cause. A chocolate manufacturer, who had named his products 'Crack', 'Nutty' and 'Loony', was made to change them under strong public objections and censure.

Film producers and directors have the right to express their creativity, but they should take care not to hurt the sentiments, prestige or rights of any part of the society. It is equally important to ensure that traditionally mistaken opinions about an ignored part of our society are not reinforced in any way. Last year, in a report made public by Deepika Padukone's LL&L Foundation, it was mentioned that even as public awareness about mental illness is on the rise, yet the feeling of stigma is still intact. Surprisingly this feeling of stigma is more prevalent in cities and the educated population. The report concluded that spreading awareness was not enough to get rid of this feeling. It is meaningless to think, let alone claim, that social stigma relating to mental illness does not exist anymore; that it has been eradicated with education and urbanization. Considering this, it is important to keep a close watch on the movie, originally titled 'Mental Hai Kya', its storyline and its social implications.

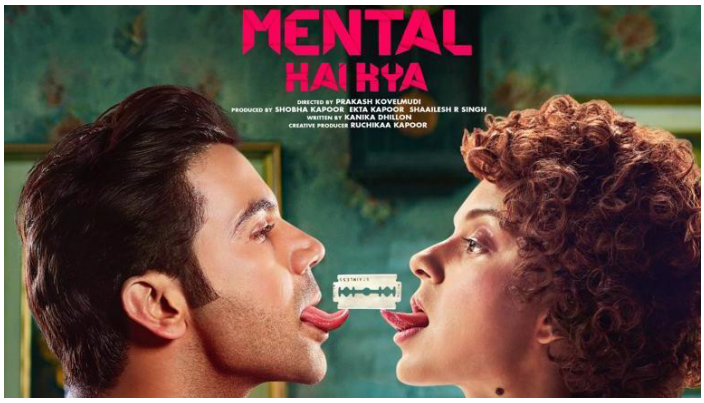
Have the mentally ill and their families ever presented a united front, publicly or otherwise? Have we seen them at a protest march, a sit-in or a rally? The united struggle against in support of the mentally ill is a very recent development. Till date, attitude towards mental illness has been one of criticism and derision as is evidenced through films, electronic mass media and colloquialisms. This has to stop and facts-based truth should be propagated by the very same mass media. Even if they cannot strengthen the struggle in support of cause of mental illness, they should at least try not to undermine it. Would this be too much of an expectation from those who wield so much of influence on the society at large through their media?

According to the latest reports, the title of the movie has undergone a change for the better. This indicates a win-win situation for the IPS, the many organizations working tirelessly in the field of mental health and even for Ekta Kapoor, the producer and Prakash Kovelamudi, the director of the film. For the sensitivity and the sensibility they have ultimately shown by changing the movie title, the ultimate winner in this ideological struggle has been the issue of mental health.

Poem:

Only one sincere request to our multi-media and film-folks:
Refrain from laughing at our expense or snubbing our existence.
None asked for weakness, mental illness or grief.
These are misfortunes we are born into.
Empathize and help us confront our sorrows.
Don't ever sin by intensifying our grief.
We've had enough of societal derision and hatred.
Together, let us rather recreate a new society
Where sensitivity is the touchstone of your profession.
Let the power of your support impart a new desire to soar
For the hitherto insensitively ostracized and marginalized.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com



Originally Published in Maharashtra times, Pune (30/06/19)
English Translation by **Ms. Dipali Lodh**
Graphic Support by **prithvigraphics.com**

Please be a positive change agent in this de-stigmatisation mission by : / sharing this article with your groups & by _/ emailing to us your own experiences & views on this important issue at saa.project97@gmail.com

Gratitude, indeed.

ON THE OCCASION OF CAME: ALL INDIA CONFERENCE OF CAREGIVERS OF PERSONS WITH MENTAL ILLNESS

Dr. Jagannath Wani is well known to the Marathi-speaking population as the person responsible for generating financial support to the lower tchelons of the society. But a lesser known yet important aspect about him is that he was a family member and caretaker of a mentally ill person, his life-partner. Dr. Wani migrated to Canada for higher studies in the sixties. From 1972, his wife, Kamalini, began experiencing symptoms of schizophrenia. Like any other devoted family man, Dr. Wani was confused at first. For the next 8-10 years Dr. Wani single-handedly faced all the ensuing uncertainty and unease.



Through this battle, he met many persons who literally became lighthouses in his stormy journey. Dr. Rocksberg told him in no uncertain terms that he was not to blame for his wife's condition. This statement brought him immense relief and ended the uneasiness in his life. Dr. Wani was inspired by Bill Jeffrey who had multiple family members suffering from mental illnesses. Jeffrey did not give in to his grief but instead channelized it into helping others. He travelled all over Canada, delivering lectures and focusing on the need for support groups of the family members of the mentally ill. One of these lectures inspired Dr. Wani to establish the 'Schizophrenia Society of Alberta'. After working in Canada, he realized the need for such groups in India as well. This noble urge made him establish Schizophrenia Awareness Association in Pune with help from his close friends-cum-college-mates.

Tenth September is Dr. Wani's birthday. On this day, SAA has decided to organize an All India Conference for family members of the mentally ill (CAME) in commemoration of Dr. Wani's contribution to the cause and to propagate his exalted work. This conference will seek and ensure participation of the well known experts from all over India as well as the founder members of the family support groups. This is an attempt to strengthen the familial participation and carry forward the legacy of Dr. Wani. To begin with, two important issues placed before this Conference are :

1 - 'Challenges that face the family members of the mentally ill.'

Family members face a turning point when serious symptoms of the illness start manifesting themselves. These challenges are uncertain, which makes matters worse. Information and the support of fellow-sufferers is invaluable, both for physical and mental illnesses. But the absence of visible symptoms in mental illnesses, the uncertainty of the symptoms and sheer lack of knowledge about the illness are the various reasons for the need of groups or institutions for the families of the mentally ill.

While facing such a situation,

the families need the support of experienced individuals and groups. On the local level, an institution comprising of parents can take up this responsibility. Of course, it is important that the local institution is strong and has able volunteers. It's also very important to focus on awareness, self-help groups, rehabilitation and the less expensive options. The number of family oriented organizations has to increase and those already in existence should expand their horizons and show qualitative improvement. Many organizations have limited themselves to a small group within families. Students from schools and colleges, senior citizens and various social organizations should identify with this problem. This will ensure that these organizations get social sanction and avoid the limitations that their narrow perspectives have confined them to.

2 - 'The success & failures of organizations for the family members of the mentally ill.'

To be united and effective India needs a federation of the local support groups for parents and such institutions that exist all over India. As in the setup of a federal government & state governments, local caregivers' groups should attend to and resolve problems they face and leave the federation to deal with problems that are pan-India. However, this seems easier than the problems that crop up. In India the number of organizations that function at the local level are neither sufficient, nor completely enabled nor effective.

Organizations working for the cause of physical illnesses have a history of over 80-90 years, while those grappling with mental illnesses are barely 30 years old. But the main problem is, the movement against mental illness is not organized. There are many different opinions and ideological differences that limit even the formation of policies and laws regarding mental health.

In India an attempt has been going on since 1995 to establish



an all India organization for the parents of the mentally ill. Many officials of SAA have been closely involved with this movement from the beginning. Many conference were organized on an all India level as well. But even today, a culture that recognizes the need for Pan India Organization has not been established. Six years' ago an organization called FAMILIES ALLIANCE ON MENTAL ILLNESS National Network (FACEMI NN), a federation for parents was started, but much more remains to be done at the national level. It is important that family based organizations also be strengthened at the state levels. This would, in turn, strengthen organizations at the national level.

Taking into account the sheer spread of our country, it would be useful to have separate zones like, say, North, East, West & South, instead of just one single national organization, operating only from a single city . This will eliminate the problems caused by distance. This will also help disseminate information effectively through audio-visual mediums about rehabilitation and other services. The separate zonal organizations will be able to work better on the local level and improve the working of the organizations. In a country like India, where there is a paucity of funds, a strong well-spread network of such organizations is a must.

This Conference planned for Tuesday the 10th September at Pune will see the participation of parents and experts from the field of mental health from various parts of the country, to review the challenges that parents and parents' organizations face. Narrating their experiences, discussion and guidance will enable these parent organizations to move and grow in the right direction. Let the 'lighthouses' that Dr. Wani dreamt of be turned into a pleasant reality so that they enlighten and guide more and more parents' organizations.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com
+91 95037 10859

Originally Published in
Dainik Herald, Panaji, Goa.
(5/9/2019)

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

DEEPIKA PADUKONE AND HER BATTLE WITH DEPRESSION

Deepika Padukone is one of the leading actresses in India. The actress, who debuted with the movie 'Om Shanti Om', has established her place in Indian cinema (Bollywood) over the last 10 to 15 years. She has won various national awards for her portrayals in movies like 'Om Shanti Om', 'Piku' and 'Bajirao Mastani'.

The mere mention of an actress's name makes us anticipate glamorous photographs, gossip and news about new film projects and the like. To step away from the enchanting world of movies and speak about oneself, one's grief or difficulties is an oddity in itself. This applies to not only actors/ actresses but also sportspersons and politicians who are successful, famous and seem to be at the top of their game. Speaking openly about their problems or illness can harm their image in society. The field that they inhabit focusses on their public image, something that they constantly try to improve, or build upon. Hence, protecting this 'image' is of utmost importance in this business.



In reality, even ordinary people are concerned about their image as their everyday life and health are dependent on it. When an actress like Deepika opened up about her battle with depression, it was evident that there is a greater goal in sight. Depression is a mental illness. Speaking openly about one's problems or struggles is not deemed important in society, but, considering the misunderstandings and associations with stigma; it is indeed novel if someone speaks openly about one's battle with mental illness in any form. The experiences of patients who have recovered from their afflictions are always inspirational accounts; that give hope and strength to others to face their own problems and seek treatment. Many former patients are hesitant to speak about their experiences. They feel that as they have recovered and the illness is a part of their distant past, it is better to forget about it instead of recalling it or focusing on their old problems. If ordinary persons feels uneasy about their experiences, it is indeed commendable that a person like Deepika Padukone; who is a fast-rising star with crores of rupees invested in her, chose to come out into the open about her mental health issues.

One morning, Deepika woke up feeling low. She had a stomach ache, lacked the strength to get out of bed and a feeling of emptiness that was inexplicable. She ignored this initially, thinking it to be a temporary feeling that would pass with time. She tried to drown herself in work but the feelings persisted. She would feel fine at times and low at others. Like any other person, Deepika tried to keep herself occupied with various things, but the feelings would return, stronger and more intense every time.

Deepika had learned to mask her emotions when in public, but her condition had started worsening. Then, one day, when her parents were visiting her, all her feelings just exploded. She confided in her mother about her condition and this proved to be the turning point in her life. Her mother had seen certain cases of depression in the family and was aware that this could be a

possibility. Thus began Deepika's journey towards treatment and betterment. In this journey, the role played by her mother and



family members proved to be vital. In most cases, the onset of any mental illness results in confusion for the patient. It is difficult to arrive at any conclusive decision and hence, at such a point, it's important how family members react to this. Treating it as a medical condition is important. Their education aside, their perspective is what determines the effect of the treatment. Deepika's mother's rational perspective enabled her to receive the treatment that she needed. As counseling was not deemed to be enough as per the advice of Dr. Chandy, she was given medication as well. It is very important that for total recovery, medication be taken as and when necessary and for as long as advised.

Deepika Padukone's journey was an unparalleled one for her, personally; but for people battling depression, her story is a representative one. The major point of difference in Deepika's story is that she chose to speak openly about it, hoping to inspire others and ensure that they seek treatment. Deepika's father, Prakash Padukone was one of India's foremost badminton players. His long experience in the field of sports led him tell his daughters that life would not always come up with roses. One should have a balanced approach towards both success and failure. This practical advice helped and guided Deepika when she was facing her problems.

Deepika Padukone has given several interviews and they are easily accessible on public domains like YouTube. Her organization, 'The Love, Live, and Laugh Foundation' (TLLF) has plenty of information available on their website.This article has been written on the basis of that information.

(First Half)

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com

Originally Published in
Dainik Herald, Panaji, Goa.
(19/9/2019)

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

DE-STIGMATISING MENTAL ILLNESS, DEEPIKA'S WAY!

...The Journey of Deepika Padukone

The symptoms of mental illness manifest in the regular busy routine of life. These symptoms slowly become more severe while family and friends start suspecting that something is wrong. Treatment starts and eventually these symptoms are brought under control. This is a journey that most patients experience. But for most their journey ends here. Like Deepika Padukone, many other actors/actresses and celebrities also have gone public about their mental illnesses.



Unfortunately, most of them come out into the open, confess and their journey ends there. Deepika, however, has been the one who has emerged stronger from her experiences and moved positively forward. She publicly and in great detail shared all the intricacies about her experience and focused on speaking about the diagnosis, treatment and the subsequent improvement in her mental health.

Her long interviews are available on YouTube which minute details about her illness are revealed. The details she gives may help others battling mental illness to face their problems with fortitude. Even if a person is a celebrity, there isn't much of a difference when it comes to mental health. All are on an equal platform is the message that is thus conveyed. If just the illness is revealed, people might think that this is an exceptional case. But finally, the battle is the same for everyone. Ample financial resources do not make the going easier. What matters are the combination of family support and the individual's own desire to improve. These are made evident through Deepika's innumerable interviews. Her celebrity status ensures that not only patients but also the ordinary populace learns about mental illnesses through their curiosity about her life.

Speaking about why she decided to go public about her illness, Deepika says, 'If anyone had told me, when I was going through my struggle, that they had experienced this themselves, it would have helped me tremendously in battling my illness and made the process easier and faster. I kept wondering if I could make things somewhat easier and better for others and this inspired me to speak out openly about my illness.'

Creating insight into the illness, realizing that one can help oneself and others, and actively moving forward towards that goal is not something that everyone can do. The person doesn't just gain control over his symptoms, but improves self-realization about one's mind, ups and downs, and the uneasiness that is a part of the illness. Conquering this, the person looks for and finds peace, satisfaction and balance in one's life. Some individuals go beyond this and try to see if they can not only uproot the problem that brought them so much grief but for one and all. Eliminating the social issues that are responsible for the delay in recovery and making the process easier for others becomes the goal for these individuals. Facing personal problems and looking for answers on the social level for the good of the common public, constant effort to further this

endeavor and presenting one's own life as an example are things which elevate one's purpose in life.

The above holds true for Deepika's journey towards self-improvement. She did not stop at just revealing her illness but carried forward her efforts by founding 'The Live, Love, Laugh Foundation'. This organization organizes various programs that work for spreading awareness and lessening the stigma associated with mental illness. The organization works with the students of schools and



colleges, the faculty, ASHA workers and the general practitioners. The organization has a very attractive and informative website. Realizing that just one Deepika is not enough for a widespread awakening of the masses, the website gives an opportunity to other Deepaks/Deepikas to talk about their struggles through their 'I'm not ashamed' initiative.

Many may say that the work of this organization is at a very highbrow level. Today, the problem of mental illness has started assuming a dire form in India and the availability of experts, governmental aid and devoted organizations is very limited. Against this backdrop, the country needs various organizations and the personal involvement of individuals to improve awareness and remove stigma. The field of mental health needs people working in their personal capacities, working with patients & their family members, holding conferences and workshops as also high profile people addressing the issue.

The range of mental health states or conditions is very broad. It is a vast continuum ranging from extreme mental unease to a high level state of mental well-being. The resolution /strategies to deal with issues also happen in a continuum. Not all problems of mental health can be resolved by one individual or one organization. It is a big step in the right direction even if the answers of certain problems are made available from certain organizations or people.

When Prakash Padukone was 16 years old, he witnessed a match of the famous Indonesian player Rudy Hartono in Jabalpur. The match convinced him that if he has to win, he would have to change his game style from a defensive to an attacking one. He acted on this decision and changed his game style completely. Immediately, he won matches in the Juniors group as well as in the Seniors group and became a National Champion. He consistently maintained his national ranking and spot for the next nine years due to this change in style that he adopted. Let us hope that similarly the decision Deepika took in 2014 continues to move, progress and succeed in the mission of her life, namely, better & stigma-free mental health for all. Deepika Padukone has given several interviews that are available on public domains like YouTube. Her organization, 'The Live, Love and Laugh Foundation' (TLLLF) has plenty of information available on it's website. This article has been written largely on the basis of that information.

(Concluding Part)

Photo Credits: 'The Live, Love, Laugh Foundation'

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com

Originally Published in
Dainik Herald, Panaji, Goa
(26/09/19)
English Translation by
Ms. Dipali Lodh
Graphic Support by
prithvigraphics.com

NEELIMA BAPAT'S CONTRIBUTION TO SOCIAL WORK

Neelima Bapat is fondly called Neelimatai by the SAA family. I recall that around the year 1999, a lady of around 60 years or so had come to attend a meeting organized by SAA (Schizophrenia Awareness Association) for the mentally ill and their family members. In the meeting she expressed her desire to work for the organization. We appreciated her offer but forgot all about it. Working with SAA is no easy task. It is not enough to just spare time and possess organizational skills. Reading from various sources about mental illness, listening and communicating with others about the same and developing skills are all necessary elements. Today, looking back, it's evident that persistence and the willingness to learn new things helped Neelimatai leave her mark on every leg of SAA's journey. Everyone in SAA appreciates her perseverance and contribution. Neelimatai had been a part of various social organizations before approaching SAA. One of these organizations is NRIPO (Non-Resident Indians' Parents' Organization). If the aims and objectives of an organization as well as the mode of operation appeal to her, Neelimatai completely devotes herself to the cause. Many people and senior citizens have time to spare but do not want to take on any responsibilities. They want to sit on the fence and watch what others do. But Neelimatai accepts responsibilities and is willing to make the necessary personal and familial adjustments to see them through. Her efforts also include learning new skills. This enables her to work and get along easily with the younger generation. Neelimatai has been steadfastly working with SAA from the time when SAA had barely 5/10 volunteers. We jokingly say that the relationships and friendships that are cultivated before marriage are special. These friends have been with us through ups and downs, have shared the good along with the bad. Such friendships last for a lifetime. The same is true for social organizations as well. When people work for an organization that has nothing but registration papers; their relationship with the organization flourishes like these friendships. The relationship between Neelimatai and all of us at SAA is based along the same lines.



Neelimatai's only son has settled abroad. Parents of such children are usually solely focused on them. The only thing on their minds is when their children plan to come to India or when they plan to visit them. This involvement usually makes them ignore any task that they have accepted here or even the needs of the society that they inhabit. But Neelimatai is different. When she's here, her total focus is on her work and when she's abroad, she's occupied with her family responsibilities. This attitude ensures that she does not lag behind in her duties, whether she's in India or America. Many women in their 60s and 70s live in a very defensive mode.

They are unwilling to learn new things or adapt. Neelimatai, on the other hand, is forever ready to learn new things. Be it learning to communicate in Hindi and English or writing in these languages, she is always willing to learn, according to her capacities. The previous generation is not well-versed with e-mail, WhatsApp and using smart phones. But a working knowledge of all these is required to work with the younger generation, to access updated information and to communicate with people. Neelimatai realized this; which is why she could continue to work effectively for so many years.

Many people face difficult situations in their lives, including health related issues. 10 years ago, Neelimatai was diagnosed with cancer. The prognosis was grim and doctors gave her only months to live. She had to undergo painful treatments and take a break from her SAA activities for a year or two. However she bravely faced her difficult circumstances with determination and will power. During her illness she wrote a book entitled 'Aata Ujaadel'. Even with her constant battle with her disease and her inability to devote time to SAA, she still wanted to be a part of the



SAA committee. She believed that her work was an important part of her will to survive. Neelimatai has proved to be a living example of how determination can overcome adverse conditions and still nurture in a person, a desire to contribute to society. We, at SAA salute her grit and drive.

Today's world is seeing a growing number of senior citizens. Age does limit one's physical activities;but experience-oriented learning, skills, maturity and a willingness to learn new things can make one's life joyous. Neelimatai is an example of how senior citizens can play an important part in the creation and working of social organizations.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com
+91 95037 10859

Originally Published in
Dainik Herald, Panaji, Goa.
(17/11/2019)

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

GURUDATT KUNDAPURKAR: AN EXEMPLARY MENTAL HEALTH VOLUNTEER

The worrisome term, 'schizophrenia' has become quite well known with constant exposure through media. But the word schizophrenia houses the word 'hope' as well; and it is equally important to be aware of organizations that work for causes like these and the priceless contribution of individuals who work for the establishment of such organizations.



Gurudatt Kundapurkar has been working with the Schizophrenia Awareness Association (SAA) since the year 2000. After retiring from his senior post in marketing at Larsen and Toubro, he decided to work for social causes without considering any kind of monetary gain. Rather, he chose to devote his time to various social causes and help wherever it was most required. Gurudatt, of course, had the vast experience working with Larsen and Toubro as his base. He had written and designed several booklets, brochures, PowerPoint presentations and also collated appropriate images and illustrations to enhance his designs. He still collects various photos, pictures and advertisements from newspapers, especially from The Times of India and has a large collection that I have personally seen.

As for his social work, the years between 2000 and 2014 were the most fruitful for Gurudatt. Social awareness and Self-Help Groups are two causes close to his heart. Many programmes on these took place under his aegis at SAA. I can vividly recall these events even today. His special focus was on planning each event in advance. He tried to eliminate the 'chance element'; sending e-mails well before time, encouraging discussions, creating a diagrammatic division of responsibilities. All this was second nature to him. I clearly remember the preparations he put into organizing programmes like 'From Depression to Recovery' by Gayatri Ramprasad, who came from Canada and the international event with Jim Crowe from WFSAD. Gurudatt's work was painstakingly organized. From files and folders to tags and detailed notes, his enthusiasm in all things is still remembered and appreciated.

Working for any organization requires commitment. The special thing about Gurudatt is that his commitment was totally without any ego; his manner, quiet and unassuming. He embodies Borkar's poem 'Jeevan Tyanna Kalale Ho', in which the poet mentions that 'the ego should dissipate from a person's life like a fruit that naturally drops when it ripens'. When Jim Crowe, the then president of WFSAD and one of the foremost mental health volunteers in New Zealand had visited Pune, he was impressed by Gurudatt's work and said that lay mental health workers like Gurudatt are the need of the times in the field of mental health. He believed that SAA was fortunate to have someone like Gurudatt associated with it.

SAA and its growth were always on Gurudatt's mind. In a time when even words like sacrifice and commitment have become rare, Gurudatt has been a constant,

consistent force and an asset to SAA. SAA has been blessed to be associated with a person like him. Many volunteers like Gurudatt are involved in supporting and guiding Shubharthis (patients) and Shubhankars (family members) and ensuring that their future is peaceful and healthy. All organizations should encourage volunteers like Gurudatt who contribute so much to them.



The field of mental health faces a dearth of experts, both in India and abroad. It will take a very long time for this number to increase. Against this background the World Health Organization (WHO) has stressed on the importance of volunteers. Ordinary people with a bit of training and hands-on experience can contribute to the cause. They can play an important role in disseminating information and spreading awareness about mental health, which will go a long way in limiting the consequences of mental illness and thus improving mental health. Patients and their caregivers require support and guidance which can be provided by these mental health volunteers. It would not be an exaggeration to say that Gurudatt is the ideal role model for volunteers.

Soil, which is the root of nourishment of all things in nature, plays an equally important role in the making of an organization. The strength and qualitative growth of an organization depends on this soil. Gurudatt, who worked with earth moving machinery during his tenure with Larsen and Toubro, was aware of this. During the initial days of SAA, Gurudatt was an important component of this nurturing soil. This starting phase is when the heritage and the unwritten rules of an organization are established and the building blocks are laid. Times change, organizations grow, finances grow stronger but one cannot forget the contributions of the original support systems that were present when the organization took root.

B.B.Borkar has described the beauty of Goa in many of his poems. Kundapur, a village that reminds one of Goa is where Gurudatt hails from. His nature reflects the beauty, simplicity and the grounding values of his hometown. This Saturday, the 7thof December is Gurudatt's 81st birthday. In Indian culture, we celebrate the 'Sahasrachandradarshan' in the life of an individual; considering it a landmark moment in a person's life. We honor people who have seen the full moon a thousand times in their lifetime and celebrate them; while praying for their future. Gurudatt will soon be a part of this special tribe; but what is more important is how he has brightened the lives of so many, supporting their hopes and aspirations; much like the moon itself. We are sure that his future will be blessed by these very moons and hope that he continues his work in the field of mental health with unflagging zest.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
+91 95037 10859
avartak@yahoo.com

Originally Published in Dainik Herald, Panaji, Goa. (5/12/2019)

English Translation by **Ms. Dipali Lodh**

Graphic Support by **prithvigraphics.com**

DILLI BABU AND HIS JOURNEY TOWARDS 'SELF ACTUALIZATION'

'Dilli Babu' is a bit different name for Marathi speaking people the first time one hears it. Dilli Babu is the founder and CEO of WOW, an organization working for mental health issues and based in Chennai. Every year, Dilli Babu brings out a table calendar on some aspect of mental health. Since the last 2-3 years, we at SAA have been helping him with the theme of the calendar and the content that is printed on each page. Having never met each other, we seem to have, nevertheless developed a fine sense of tuning, which amazes many people including me.



Just a month ago, I had the opportunity to visit Chennai. A meeting with Dilli Babu was on the cards and at 10.00 a.m., I was awaiting his arrival in the lobby of the Flamingo Hotel. We had been in touch for the last 2-3 years and I was aware of the extent of his work and his quick decision taking abilities. It is a very difficult task, financially and physically to print and distribute 2000 to 3000 calendars every year in a short period of time. Based on this, I had formed a mental picture of Delhi Babu as a tall, well-built person and was looking out at the road, for someone to match that description. Within 5 minutes, a person on crutches, alighted from a rickshaw and made his way towards us. Since I had seen his photo on his WhatsApp display picture, I recognized him immediately. Despite working in the field of mental health, I still associated mental agility and decisiveness with a person's physicality. I was dismayed to realize that all of us are subject to certain preconceived notions.

My conversation with Dilli Babu brought a lot of things to the fore. I wondered why he didn't work with the physically disabled. His answer was incredible. He said that mental illnesses and the subsequent problems arising out of them were more serious and troublesome than those caused by physical disability. Other disabilities are easily visible and help is more forthcoming in those cases. Mental illness, on the other hand, is not visible or noticeable and therefore patients do not get the help that they deserve. I found this logic, a little atypical. Often, people work with disabilities that they themselves have experienced or suffered through. Dilli Babu chose to work with patients of mental illness. This paradigm shift was unexpected and quite shocking for me. Dilli Babu also mentioned that he has not hired any person with physical disabilities in his organization, nor does he intend to, as this organization has not been established with this end in mind. The idea of his organization came to him through his education and experience. I immensely admired his openness and honesty while talking about his life goals and his reasoning behind his choices.

The renowned American psychologist, Abraham Maslow has stated that every person is constantly moving towards a state of self-actualization and has a hidden desire to achieve something in their lives. Realizing this desire or dream come with its own challenges. Some people get stuck in these challenges, often blaming luck or their stars for their inability to succeed. Others strive for success, proving the quote of the Marathi poet Yashwant to be true when he says that the brave do not need the blessings of the stars and destiny is their handmaid.

Venkat, Dilli Babu's friend since his college days in Loyola's says, "Our classrooms were on the first and second floors. From walking the corridors, climbing stairs to riding in buses, Dilli Babu did everything on his own; as if his disability was not part of the equation. We never considered it or discussed it. Every person faces problems or disabilities in their lives. Don't inflate the issue or make it into something big. Just move on. This has been Dilli Babu's attitude to life."I felt a bit jealous of Venkat as he had the opportunity of witnessing first hand, the journey that Dilli Babu had ventured on.



During his college days, Dilli Babu was the reigning state chess champion in Tamil Nadu.He often attributes his success in life to this game. Chess had taught him the importance of positioning his pieces on the chess board. At times the queen or the rook maybe stuck in a corner and prove useless in the game. It's not important how many pieces one has but how one uses them. This is true of the game of chess and of life as well. How we use what destiny has bestowed us with is more important than what we have. Dilli Babu's life teaches us that chess is not just a game but also imparts the philosophy of life.

The Marathi poet Kusumagraj has described the journey and aspirations of Christopher Columbus in one of his poems. The sailor challenges the ocean and refuses to turn back or admit defeat. Dilli Babu's journey is not very different from that of Columbus. As long as volunteers like Dilli Babu continue to work in the field of mental health, the surrounding darkness will surely abate and the journey towards positivity and light will continue onwards. The words of the Dalai Lama, imprinted on the wall offer further assurance;

Confidence in Yourself

Human Potential
Is the same for all..
We all have the power of thought
If you have the will-power
You can do anything..
You are your own master

(Thanks to Prof. Sandhya Vartak)

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
+91 95037 10859
avartak@yahoo.com

Originally Published in Dainik Herald, Panaji, Goa. (12/12/2019)

English Translation by **Ms. Dipali Lodh**

Graphic Support by **prithvigraphics.com**

THE PROMISING JOURNEY OF WOW IN THE FIELD OF MENTAL HEALTH

In the previous article, we were introduced to Dilli Babu and his life story. This article focuses on WOW, the organization that he founded. When asked about the reason behind establishing this organization, Dilli Babu says, "Everyone wants to do something notable in their lives. While this desire is especially strong in one's youth,one has to face many mental challenges to accomplish this. Some get tired, stressed or disappointed in this journey. It's actually possible to face these challenges, but the lack of proper guidance makes the youth give up and they lose out on many important opportunities in life. This made me uncomfortable and I wanted them to receive the appropriate guidance and encouragement. This resulted in the formation of WOW in 2007, with the help of a few associates."



Our mind is a very powerful weapon. We can harness it to accomplish almost anything, but oftentimes; we are unaware of its immense potential. The term, 'wow' has its own significance. We use it when we see something exclusive, special or appreciable. Apart from this, the long form of WOW is 'Win or Win'. 'Win or Win' is a lifestyle choice. When faced with difficulties in life, we believe that the outcome will be either a win or a loss. The end result of any act may be multifarious, but we don't seem to realize this. Being aware of these various options and choosing the best one from them is one of the greatest accomplishments of human life. WOW focusses on making people aware of this very fact.

The 12 year old organization has been making rapid progress over the course of time. What started with only 3 extremely focused volunteers and a few programs has now blossomed into an organization with more than 50 experienced psychologists, psychiatrists and mental health volunteers. Today, WOW is involved in several activities like school programs and counselling, to dealing with the mental issues of the aged. WOW has always been focused on providing easily accessible, affordable and integrated mental care to all.

Psychological testing, career guidance and counselling, marital counselling, business counselling, guidance programs for business organizations, individual counselling, parental counselling, life-work balance, treatment of mental illness, preventive measures against illness, methods to improve mental health; are some of the fields that WOW provides guidance in. This exhaustive list proves that the organization touches on and offers help in almost every aspect of life.

WOW not only celebrates only 24th May as World Schizophrenia Day and 10th October as World Mental Health Day, but also organizes various innovative programs. They have instituted a 'Parenting Excellence Award' for the parents of those whose son/daughter has overcome mental health issues and made significant progressin life. Then there is a 'Wellness Volunteering Excellence Award' for those spreading awareness about mental health and helping the mentally ill.

Another program that is equally attractive is the '365 Degrees Approach'. In this Rs.365/- are collected form each individual; one rupee for every day of the year, and the person can avail counselling or any other help 24 times a year. Such programs should be made

available by insurance agencies or government run organizations, which can easily bear the costs due to the sheer number of customers they have. Instead, this scheme is being run by WOW, a small self-funded organization. They should be lauded for their endeavor.



WOW specializes in running these innovative programs. Look at the table calendars, as an instance. Every year they choose an important aspect of mental health and generate a table calendar. Many Pharma companies also come out with their table calendars. These are usually allotted a huge budget and shot at foreign locales. But WOW takes up a new theme and a small budget to come out with their calendar. Last year WOW focused on the 'Recovery Method' as the theme for their calendar. This is a renowned method that believes that a mentally ill person can help himself/herself. The calendar was beautifully rendered and reached many mentally ill persons as well as their family members.

As an organization grows, it inevitably reaches out to other organizations and persons. WOW too has displayed foresight and has collaborated with many organizations including prominent organizations from Chennai like Scarf and the Banyan.

The progress of an organization depends on the number of activities that they run, the response they garner, and the number of people they are able to reach out to. It's easy to see that WOW is progressing in the right direction. The organization never had starry-eyed individuals to begin with and the last 12 years have witnessed the immense work that it has done. The first 10 -12 years of any organization are usually spent in figuring things out, formation and growth and dealing with various kinds of positive and disappointing experiences. WOW has used these very initial years fruitfully and the next 12 years will definitely prove their mettle further.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com
+91 95037 10859

Originally Published in
Dainik Herald, Panaji, Goa.
(26/12/2019)

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

ESSENCE AND THE PARTICIPATION OF THE PERSONS WITH MENTAL ILLNESS IN THE DECISION MAKING PROCESS

In recent years barriers associated with mental illness have considerably lessened. In the last few years, issues of the mentally ill, their rights, stigmatization, laws, insurance policies, have been the subjects of discussion. Although this is necessary and appreciable, the progress has been slower than desirable. Taking decisions about the persons affected by any problem, be it on a personal treatment level or on the system as a whole, should involve the affected persons as well. This is a commonly acknowledged norm and necessarily applies to the mentally ill as well.



Any person who has experienced illness mostly knows more about the illness, problems arising out of it and the kind of help needed. In short, they have almost become experts by experience. This is not limited to mental illness alone but encompasses all other diseases as well. This applies to those suffering from cancer, AIDS, and minority groups such as women, elderly and the marginalized. Therefore the ones who are affected by the decisions should also have a say in the decision making process.

The idea of the welfare state was adopted by several countries in the 20th century. Various socio-economic programs were planned for the development of various groups. Certain programs were also planned for the disabled. In the initial stages, the administrative machinery and experts in the respective fields only were involved in these programs created for the socio-economic development. After failure of most of these initiatives which excluded the stake-holders, the idea of involving them was vigorously put forth.

In India as well, it is now accepted that the disabled should be involved in creation of programs related to them. In case of life threatening illnesses such as cancer and AIDS, involvement of patients and caregivers in the decision making process of various committees is an accepted fact. The necessity to involve persons with mental illnesses and their caregivers has been reiterated several times. "Nothing about us without us" is the central theme in all such initiatives.

The decision making process can be in two stages. The patient, while undergoing treatment can consult experts and decide which course of treatment to follow and its duration. Similarly, the mentally ill and their caregivers should be involved in the creation of policies, plans, the local, state & central government programs, financial allocation & expenditure and reviews of implementation

The need for this kind of inclusive participation has been discussed very often on the international level. In India, the 2014 Mental Health Policy, the Mental Health Care Act (2017) both represent a good beginning but there is still a long way to go. If the procedure of involving patients and their families attains fruition, their participation at the central and

state levels would be necessary. The district level Review Board would require maximum participation. It is estimated that approximately 800 patients/family members would get a chance to participate at the central, state and district levels. For this, the patient/ family members would have to be prepared, familiarized with the different aspects of the decision making process and trained in these skills. It is to address this need of disseminating information that one course has been devised as a part of the ESSENCE project.



ESSENCE, primarily a research project by the Harvard Medical School and the Goa-based institution working in the field of mental health, 'Sangath' is being launched. Empowerment of the mentally ill and their family members is an important part of this project. This course will be available online, free of cost for patients and their family members as a part of this empowerment drive.

The responsibility of the creation of the syllabus of this first-of-its-kind in India course rests with Anil Vartak (Ph.D) of the Schizophrenia Awareness Association. Dr. Rahul Sidhaye and Priya Phadke from Pune, Mona Sharma-Rana, Shreya Sharma and Anushka Nagpal from Delhi, Dr. Anant Bhan, Sheetal Muke, Deepak Tungavat and Abhishek Singh from 'Sangath' (Bhopal), the advisory board of ESSENCE and the project heads from Nepal, Bangladesh and Afghanistan have all contributed to the creation of this course. The 5- module course includes important topics like: patients' rights, the need to involve them in the decision-making process, role of patients in research and mental health environment, the changes in the concept of 'patient involvement', the current status of this concept in India, the role of the government in the process etc.

This course will be officially inaugurated on 5th February 2020 in the third annual meeting of ESSENCE. Along with India, the course will also be available in Nepal, Bangladesh and Afghanistan and is approximately of a two-month duration. The course will initially be made available to those who have experienced mental illness, their family members and the non-government organizations that work for them. In the next phase, it will be made available to students and others desirous of pursuing it. A few who complete the course will also be offered fellowships through which they will get an opportunity to participate in a research project in the same field of study.

Of course, the process of involving patients in the decision making process is full of stumbling blocks. Two of them are the lack of self-confidence of the patients and the secondary status of the patients in the traditional medical system. The reaction and participation of experts will also be an important aspect. Despite these issues this course is a very welcome harbinger in the change that is being wrought. After all, social change is always a slow but steady process.

For more information on this course please contact Schizophrenia Awareness Association, Pune, on the following email id: saa.project97@gmail.com.

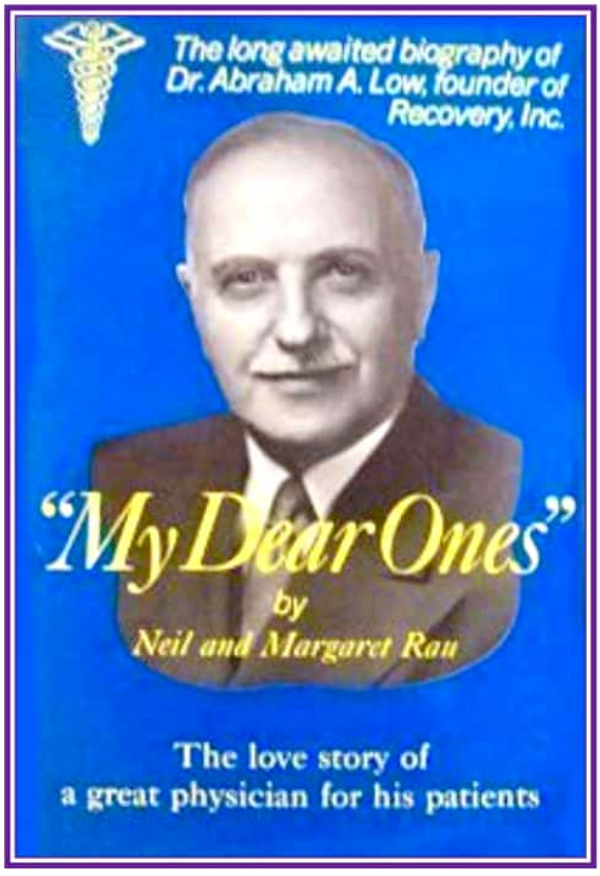
Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com
+91 95037 10859

Originally Published in
Dainik Herald, Panaji, Goa
(30/1/2020)
English Translation by
Ms. Dipali Lodh
Graphic Support by
prithvigraphics.com

DR. LOW'S ENDURING FIGHT FOR THE MENTALLY ILL

Keeping symptoms of mental illness in check and ensuring continuous improvements in the condition of the mentally ill is a long process. Psychiatric treatment helps improve conditions to a certain extent. But many find it difficult to sustain this improvement later. Based on his experience with patients, American psychiatrist Dr. Abraham Lowe developed a method to help maintain improvements. Known as the Recovery method, it continues to be used globally.

Dr. Low migrated from Poland to the United States and started practising psychiatry in a hospital in Illinois. Along with medicine he was well-versed with subjects as diverse as philosophy, psychology, linguistics and literature. This gave him insights into a person's upbringing, psychology, personality, inspiration and possibility of change which all helped him in his work with recovery self-help groups.



In the 1930s available medicines on mental illnesses were not much effective. Treatments were also limited; with shock treatment being a major course of treatment in emergencies. While practicing psychiatry Dr. Low realized that the shock treatment brought symptoms under control, and patients could resume their daily life. Patients got discharged from the hospital. However, the effects of the treatment could not be sustained in the long run. Symptoms increased as patients struggled with their daily life, ultimately leading to re-hospitalization of the patient.

Dr. Lowe was ill at ease with the patients' suffering and their ups and downs. He began experiments on how to maintain the patients' symptom free condition achieved after the hospitalization. Minute observations led him to believe that the patient is never completely helpless. Most patients can control their symptoms at least to some extent. Patients can regulate their own thoughts, control unstable thoughts and purposefully recall stabilizing thoughts and in the process help themselves. By recalling the Recovery Tools such as 'Maintaining my internal peace is my supreme goal', 'I can only control my internal environment, not my external environment' extreme manifestations of rage, anger, emotional outbursts can be controlled by oneself. Chances of relapse reduce substantially with the habitual use of Recovery tools. In this way, Dr. Low through his observations and experiments developed recovery tools which help patients achieve stability and peace.

Following these fundamental principles of Recovery, meetings in the early stages used to take place under Dr. Lowe's own supervision. In these meetings the patient used to first share the experience of mental instability. Then Dr. Lowe would analyse it piece by piece. He would explain to everyone what mistake the patient did and what would be the correct behaviour in the given circumstances. The impact of these early sessions was so profound that patients in large



numbers started attending these meetings.

These techniques however, were light years ahead of their time. It was a time fascinated by Sigmund Freud's theories. Increasing popularity of the Recovery techniques was bound to make some psychiatrists uneasy. They started opposing Dr. Low's techniques and began pressurizing him to leave the hospital. They even threatened to revoke his medical license. In the face of growing opposition, Dr. Low felt dejected and decided to shut down the recovery group. But as the patients were benefiting from this group Dr. Low decided to reconsider his decision to close down the groups.

One day Dr. Low got late in attending the Recovery meeting. When he came he saw that the patients had already begun the meeting and were running it quite well. He was extremely pleased to see the meeting run smoothly in his absence. He then thought of a new idea: to let the patients run the group by themselves. This would reduce the load on him. Bringing in improvements in their health and running the group by themselves would lead to more groups and spread of recovery ideas. To structure his thoughts on the method better, Dr. Low wrote down the Recovery principles, rules to start and also run the groups. Dr. Low's concern of who will run the Recovery group meetings, in his absence, thus ended with great optimism and faith.

In spite of being comfortably well off with his own private practice, Dr. Low was incessantly driven by the need to find ways to bring peace, stability and balance to patients through self-help. In 1956, after a life long struggle and inspiring struggle to devise self-help methods Dr. Low who called patients as his 'my dear ones' passed away. He left behind him a legacy of world-wide self-help method that is Recovery. More than 600 groups, including SAA's Eklavya SHG, continue to hold weekly Recovery meetings even today. Dr.Abraham Low can rightly be considered a pioneering professional who believed in promoting a reliable self-helpmethod in restoring the well-being, dignity and a rightful place in the community for those who are misunderstood and misrepresented for mental illness which is no fault of theirs at all. Next week's article will focus on the nitty-gritty of the Recovery method and how it benefits not only persons diagnosed with mental illness but others too under stressful circumstances.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com

Originally Published in Deccan Herald, Panaji, Goa. (25/10/2018)

English Translation by **Ms. Kalyani Vartak**

Graphic Support by **prithvigraphics.com**

UNDERSTANDING RECOVERY METHOD (PART I)

In the last article we got to know Dr. Low and his struggle to develop and establish the Recovery method. The present article will focus on how this method is used in the case of mentally ill persons (or shubharthis) as we call them in SAA.

In these meetings Subharthis sit on the floor or in chairs in a circle. There is no hierarchy in these meetings. Even the group leader shares his or her experiences in the structured format as any other group member. Thus, at these meetings no one gives advice but only shares one's response in the pre-determined format. Each one shares his or her experiences and narrates how the Recovery tools were used to cope up with their disturbing events.

How are the Recovery meetings conducted?

At the beginning of each meeting new members are introduced. Invariably, there is some light hearted banter followed by an overview of the work done so far. This takes about 15 minutes. Then the actual meeting starts. In the beginning a few paragraphs from Dr. Low's books are read. Then the structured sharing with the help of recovery techniques begins. Anyone from the group can share. However there is no obligation to share. Group members share the recent incident that they can remember in detail. Sharing takes place in the following four steps:

What was the specific event that caused the distress ?

In this first step a Subharthi describes any incidence which caused him or her distress. The disturbing event then could be as ordinary as having to converse with someone, feeling anxious about performance in examination, to attending social gatherings, etc.

Which physical and mental symptoms were experienced on that occasion?

In this second step, the shubharthi describes the different forms in which stress was expressed like sweating profusely,tremors in voice, butterflies-in-the-stomach, an intense desire to flee from that place, rage, a feeling of hopelessness or helplessness, etc. All persons suffering from mental illness or emotional turmoil, experience these feelings at some point in time in varying intensities.

Which recovery tools were used to cope up at that time?

The third step in group meetings is one of the important and critical ones. Here, one narrates one or more spottings or Recovery tools that came to one's mind and helped to cope with the disturbing situation. For example, it could be 'Maintaining my inner peace is my supreme goal' or 'I am an average person' or 'Excuse rather than accuse.' If we are troubled because of others' behaviour, say, lack of understanding or arrogance, the Recovery tool, 'I cannot control my external but only internal environment' can be useful. Sometimes when one is pushed into a state of inaction the Recovery tool, 'Command your muscles'; can be very useful. Or, this spotting can also be of great support and safety in situation like : when I imagine some risk and feel like running away in the middle of a street full of traffic, I can command my muscles not to panic but stay calm and safe.

Recovery has many such helpful tools available to us through Dr. Low's writings. In his writing Doctor Abraham Low clearly elaborates why these tools are important, the thought behind these tools and the manner in which they help the patient. This is an important step in Recovery practice. Remembering Recovery tools in stressful situations is a matter of habit. This habit can be cultivated by repeated use of recovery tools and sharing of such incidences in recovery groups. The intensity of symptoms can be reduced through this method. Repeated use of these four steps

RI RECOVERY INTERNATIONAL

becomes Recovery method a part of the patients' behaviour. Recalling recovery tools becomes



a natural process.

Small improvements are a major component of the recovery process. It will be unrealistic to expect that big changes will take place in a short span of time. Giving appropriate responses to everyday challenges first deliberately and then naturally is the soul of recovery method.

What changes were observed after the use of Recovery tools?

In this fourth step the person sharing his or her experience of mental restlessness describe how their state would have been without using recovery tools.

For example, 'I screamed as a reaction to others behaviour and left that place only to repent later', 'I wasted time and I did not work', I started feeling inferior, I was restless - such feelings of failure are shared by the Subharthis. Constant emotional ups and downs becomes a pattern for many Subharthis. In recovery meetings Subharthis share how by using recovery tools they were able to maintain their inner peace, control their anger, realise that they are not responsible for the situation, and do their work quietly.

I endorse myself for using recovery method:

After the fourth step comes the important component, i.e the person sharing the experience endorses himself/herself. This step is very important because during the illness patients begin to think that there is nothing worthwhile leading to low self esteem. It is therefore important to endorse even the minute improvements that take place in their behaviour using recovery tools. This gives hope to the patients and accelerates their recovery. This is important for changes to be sustainable. After the patients sharing other group members pinpoint the other tools used by the patient. This process fortifies the patient's confidence and prepares him/her to face new challenges. Changes however small, lay the foundation of future life. In India and USA, I have seen how the recovery method benefits even those who have been extensively hospitalized, given shock treatment or are under other long term treatment.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com

Originally Published in Deccan Herald, Panaji, Goa. (1/11/2018)

English Translation by **Ms. Kalyani Vartak**

Graphic Support by **prithvigraphics.com**

UNDERSTANDING RECOVERY METHOD (PART TWO)

What does recovery method teach us?

In the last articles we learnt about the different steps of using the Recovery method. On the face of it these steps seem very simple but each step offers different advantages.The first two steps help the patient understand the incident, one's own symptoms, and increases self awareness regarding factors that trigger restlessness.

Remembering Recovery tools while facing day to day challenges becomes a habit for the patient through the third step.' Distressing but not dangerous', 'Failure is a part of life', 'Old habits can be changed through practice', 'It takes courage to commit mistakes', 'People don't irritate you, you get irritated', 'Endorse your efforts not just the outcome', and many such simple principles are suitable to cope up with day to day challenges. The ease and effectiveness of the recovery method lies in its simplicity.

These tools try to reduce the intensity of restlessness for the patient. Truth be told, these tools are effective for any persons who wish to improve themselves irrespective of their mental state. The fourth step allows the user to reflect on his or her behaviour before and after using Recovery method and realise how their efforts contribute to positive changes. This inspires one to use the Recovery tools again and again which reinforces pro-recovery behaviour.



What are the special features of the Recovery process?

Recovery method encourages one to reflect on small situations in daily life, situations that one can manage by oneself. Patients are usually in the habit of worrying about their life at large. They are naturally inclined to compare themselves with their peers, worry about their future and wonder when their lives would be like others'. This kind of thinking is an integral part of most of the families. This kind of thought process is not seen as problematic when patients are working towards improving their mental health. This leads to unrealistic expectations regarding the patients' progress. These expectations then create an undue pressure on the patient leading to a relapse.

Major issues and legal aspects such as marriage and employment are not discussed in the Recovery meetings. The meetings focus on day to day situations and how the tools can be used to deal with them. Patients tend to worry and overthink about the past and the future. Thinking about all questions at once, especially when in a fragile mental state, is of no use. It only increases the patients negativity through thoughts such as ' I can't do this, I won't be able to do it at all'. Years pass and bringing normalcy to life becomes impossible. Recovery method changes this very thought pattern. It is important to understand what we can do in day to day seemingly minor situations. Small steps can be taken by any of us. For example, stepping out of the house when feeling depressed, cleaning the cupboard or a section of it when feeling restless, controlling rage and the urge to shout at others, by remembering ' my internal peace is my Supreme goal'. Recovery method reminds one that it is

possible to do small actions even when feeling restless and remain quiet when experiencing extreme anger.

While the usual thinking focuses on the incapacity of the persons to work, Recovery method emphasizes on thoughts such as 'I can do it, I am capable, I can control my behaviour, and situation'. Recovery method helps one to move from feelings of failure, helplessness and insecurity towards hope and security. Small improvements become visible in all aspects of life, and like drops which form the ocean, the patients enthusiasm grows in leaps and bounds. Recovery method changes the patients' way of thinking and behaviour. From 'I can't do it' recovery helps patients move towards 'I can do it, I can at least try'. Patient's thinking patterns gradually changes. Recovery method is a way of thinking and a way of living.

Recovery method training through SAA:

India has human resource deficit in the field of mental health. Along with psychiatrists, there is a shortage of psychologists and mental health social workers. If self-help methods like Recovery methods become available, many patients will be able to make progress towards good mental health. Operational recovery groups at the district level could be helpful to many people. Some SAA volunteers are trained in Recovery methods in USA. Persons interested in learning the Recovery self-help techniques can approach SAA.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com

Originally Published in Deccan Herald, Panaji, Goa. (8/11/2018)

English Translation by **Ms. Kalyani Vartak**

Graphic Support by **prithvigraphics.com**

ON THE OCCASION OF CAME: ALL INDIA CONFERENCE OF CAREGIVERS OF PERSONS WITH MENTAL ILLNESS

Dr. Jagannath Wani is well known to the Marathi-speaking population as the person responsible for generating financial support to the lower tchelons of the society. But a lesser known yet important aspect about him is that he was a family member and caretaker of a mentally ill person, his life-partner. Dr. Wani migrated to Canada for higher studies in the sixties. From 1972, his wife, Kamalini, began experiencing symptoms of schizophrenia. Like any other devoted family man, Dr. Wani was confused at first. For the next 8-10 years Dr. Wani single-handedly faced all the ensuing uncertainty and unease.



Through this battle, he met many persons who literally became lighthouses in his stormy journey. Dr. Rocksberg told him in no uncertain terms that he was not to blame for his wife's condition. This statement brought him immense relief and ended the uneasiness in his life. Dr. Wani was inspired by Bill Jeffrey who had multiple family members suffering from mental illnesses. Jeffrey did not give in to his grief but instead channelized it into helping others. He travelled all over Canada, delivering lectures and focusing on the need for support groups of the family members of the mentally ill. One of these lectures inspired Dr. Wani to establish the 'Schizophrenia Society of Alberta'. After working in Canada, he realized the need for such groups in India as well. This noble urge made him establish Schizophrenia Awareness Association in Pune with help from his close friends-cum-college-mates.

Tenth September is Dr. Wani's birthday. On this day, SAA has decided to organize an All India Conference for family members of the mentally ill (CAME) in commemoration of Dr. Wani's contribution to the cause and to propagate his exalted work. This conference will seek and ensure participation of the well known experts from all over India as well as the founder members of the family support groups. This is an attempt to strengthen the familial participation and carry forward the legacy of Dr. Wani. To begin with, two important issues placed before this Conference are :

1 - 'Challenges that face the family members of the mentally ill.'

Family members face a turning point when serious symptoms of the illness start manifesting themselves. These challenges are uncertain, which makes matters worse. Information and the support of fellow-sufferers is invaluable, both for physical and mental illnesses. But the absence of visible symptoms in mental illnesses, the uncertainty of the symptoms and sheer lack of knowledge about the illness are the various reasons for the need of groups or institutions for the families of the mentally ill.

While facing such a situation,

the families need the support of experienced individuals and groups. On the local level, an institution comprising of parents can take up this responsibility. Of course, it is important that the local institution is strong and has able volunteers. It's also very important to focus on awareness, self-help groups, rehabilitation and the less expensive options. The number of family oriented organizations has to increase and those already in existence should expand their horizons and show qualitative improvement. Many organizations have limited themselves to a small group within families. Students from schools and colleges, senior citizens and various social organizations should identify with this problem. This will ensure that these organizations get social sanction and avoid the limitations that their narrow perspectives have confined them to.

2 - 'The success & failures of organizations for the family members of the mentally ill.'

To be united and effective India needs a federation of the local support groups for parents and such institutions that exist all over India. As in the setup of a federal government & state governments, local caregivers' groups should attend to and resolve problems they face and leave the federation to deal with problems that are pan-India. However, this seems easier than the problems that crop up. In India the number of organizations that function at the local level are neither sufficient, nor completely enabled nor effective.

Organizations working for the cause of physical illnesses have a history of over 80-90 years, while those grappling with mental illnesses are barely 30 years old. But the main problem is, the movement against mental illness is not organized. There are many different opinions and ideological differences that limit even the formation of policies and laws regarding mental health.

In India an attempt has been going on since 1995 to establish



an all India organization for the parents of the mentally ill. Many officials of SAA have been closely involved with this movement from the beginning. Many conference were organized on an all India level as well. But even today, a culture that recognizes the need for Pan India Organization has not been established. Six years' ago an organization called FAMILIES ALLIANCE ON MENTAL ILLNESS National Network (FACEMI NN), a federation for parents was started, but much more remains to be done at the national level. It is important that family based organizations also be strengthened at the state levels. This would, in turn, strengthen organizations at the national level.

Taking into account the sheer spread of our country, it would be useful to have separate zones like, say, North, East, West & South, instead of just one single national organization, operating only from a single city . This will eliminate the problems caused by distance. This will also help disseminate information effectively through audio-visual mediums about rehabilitation and other services. The separate zonal organizations will be able to work better on the local level and improve the working of the organizations. In a country like India, where there is a paucity of funds, a strong well-spread network of such organizations is a must.

This Conference planned for Tuesday the 10th September at Pune will see the participation of parents and experts from the field of mental health from various parts of the country, to review the challenges that parents and parents' organizations face. Narrating their experiences, discussion and guidance will enable these parent organizations to move and grow in the right direction. Let the 'lighthouses' that Dr. Wani dreamt of be turned into a pleasant reality so that they enlighten and guide more and more parents' organizations.

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
avartak@yahoo.com
+91 95037 10859

Originally Published in
Dainik Herald, Panaji, Goa.
(5/9/2019)

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

DR. JAGANNATH WANI: A COMPREHENSIVE CAREGIVER

Dr. Jagannath Wani is well known to Marathi speaking population as the person responsible for generating financial support to social organizations working for the lower echelons of the society. But a lesser known yet important aspect about him is that he was a family member and caretaker of a mentally ill person, his life-partner. Dr. Wani migrated to Canada for higher studies in the decade of the 60s. From 1972, his wife, Kamalini, began experiencing symptoms of schizophrenia. Like any other devoted family man, Dr. Wani was confused at first. For the next eight to ten years Dr. Wani single-handedly faced all the ensuing uncertainty and unease.



The journey was very difficult. He had three school-going children at home. Apart from their upbringing, he had his responsibilities at the University and the ups & downs of Kamalini's symptoms. He and his youngest son, Raju shared a very different relationship. On one end, the youngest child was the co-caregiver in his mother's illness and at times, when she was upset with his father, the only caregiver. Talking about his mother, Raju Wani says, 'I remember, when I was very young, one night, around midnight, my mother came out of the house and began shouting and ranting about irrelevant things. The illness had her in its grip and she did not know what she was doing. My father peacefully calmed her down, reasoned with her and brought her back inside the house. At that time, if he had over reacted, the situation would have been out of control.' In his future life, Dr. Wani was to weather many such storms with immense control.

Through this stormy battle, he met many people who became lighthouses in his journey. Dr. Rocksberg told him in no uncertain terms that he was not to blame for his wife's condition. This statement brought him immense relief and ended the uneasiness in his life. Dr. Wani was inspired by Bill Jeffrey who had multiple family members suffering from mental illnesses. Jeffrey did not give in grudgingly to his grief but instead channelized it into helping others. He travelled all over Canada, delivering lectures and focusing on the need for support groups of the family members of the mentally ill. One of these lectures inspired Dr. Wani to establish the "Schizophrenia Society of Alberta". After working in Canada, he realized that the need for these groups existed in India as well. This made him form the Schizophrenia Awareness Association in Pune.

After starting his work in the field of mental health, Dr. Wani soon moved on to working for other deprived sections of the society in Maharashtra. Dr. Wani used to say very often 'I have read stories of Sane Guruji from my childhood. It might be known as gloomy literature, but the kindness in it always appealed to me.' This stirring of kindness in me may have inculcated the desire to work for the deprived sections of the society. Every organization needs committed volunteers, but if such volunteering is supported with financial aid, it qualitatively contributes to the growth of the cause. Dr. Wani recognized and identified this need and

extended a helping hand through the Maharashtra Seva Samiti Organization and CIDA. He brought in foreign aid of around eight million dollars to help about 30 organizations working in Maharashtra. But he was always humble by describing himself only as a 'glorified telephone operator' connecting the organizations with the funding agencies.

Dr. Wani never paid attention to the ideology of people behind the organizations while offering financial support or aid. 'The organization should be Indian and do good work. That's all I can see from a distance of over 10,000 miles,' is what he would say. Many individuals are impressed by a particular ideology, stick to it using the same parameters in all situations and prefer to stay within their comfort zone. In Maharashtra, which was used to this mindset, Dr. Wani's broader outlook was welcomed like a whiff of fresh air.

Dr. Wani's support to social organizations was all-encompassing. Right from gathering funds to solving organizational and personal problems, he would willingly accept all such responsibilities. This generous attitude ensured that all the organizations he helped made progress. The visible aspect of any person's work is always acknowledged. Dr. Wani's work, like any others' work however, was like that of an ice-berg. Ninety-percent of this- efforts and perseverance for this work were invisible. Usually, the visible aspect is appreciated. But the hard work that goes into establishing so many organizations, gathering manpower, addressing them, completing the formalities of establishing a new organization, recognizing the important aspects of what the organization deals with and furthering those aspects, locating sponsors for financially aiding other organizations, using his statistical and logical skills to generate aid; are all very inspiring and unique qualities of Dr. Wani, worthy of emulation.



The Ex-President of SAA and a close associate of Dr. Wani, Mr. Yashwant Oak still gets emotional when speaking about him. He says, "I first met Dr. Wani at his residence in Calgary. As a family member of a patient, a husband, he took excellent care of his wife. He also deliberately avoided irritation, complaining to others about his difficulties and letting them affect other aspects of his life. He carefully cultivated this attitude of detachment. He accepted that tending to his wife was a very important responsibility in his life. But he was also aware of his other responsibilities. This commitment to one's responsibilities yet remaining detached ensured his success not only in his teaching profession and research but also in the various social responsibilities that he willingly undertook."

Speaking about his father's last journey, his son, Raju Wani became emotional when he said, 'My father took care of my mother till the very end. She had cancer and my father had Stage IV cancer as well. Even in these circumstances he catered to her every need. If he didn't know how to make a certain dish, he would even call up his sister in India and learn new recipes from her. Looking at his advanced stage of illness, I would tell him not to worry and that I would take care of my mother if and when necessary. But till her death, apparently he managed to stall his own demise. He was a caregiver to his wife till the very end. Till the last stage of his life, he did not forget or ignore the needs of others or lose his will to help out. In his final days he even donated two life insurance policies to two universities: to the McGill University, from where he did his PhD and to the Calgary University, where he taught. He repaid his debts to both the motherland and the land where he established himself.

Every person's life is a journey, the journey of life. Man is born with

certain innate qualities. But these may not be enough for a lifetime. Everyone has to decide the direction and speed of one's own journey. In this journey, it is very important how one responds to the incidents that occur all around and also to the people one meets. Dr. Wani always gave the example of Stephen Covey. The success or failure of any event or venture depends on the reaction, rather than the action. Ninety percent of the end result depends on one's reaction. This was the mantra that Dr. Wani followed all through his life and it resulted in an amazing body of work on the personal and social levels despite the difficulties that plagued him.

Tenth September is Dr. Wani's birthday. On this day SAA has decided to organize an All India Conference for the family members of the mentally ill to acknowledge Dr. Wani's contribution to the cause and also to propagate his work. This Conference will see the participation of well-known experts in mental health from all over India as well as the founder members of family support groups. This is an attempt not only to strengthen the familial participation but also pay a nationwide tribute to his memory by carrying forward the legacy of Dr. Wani

Anil Vartak, Ph.D
(The author is the Vice President of the 'Schizophrenia Awareness Association' **SAA** Pune.)
+91 95037 10859
avartak@yahoo.com

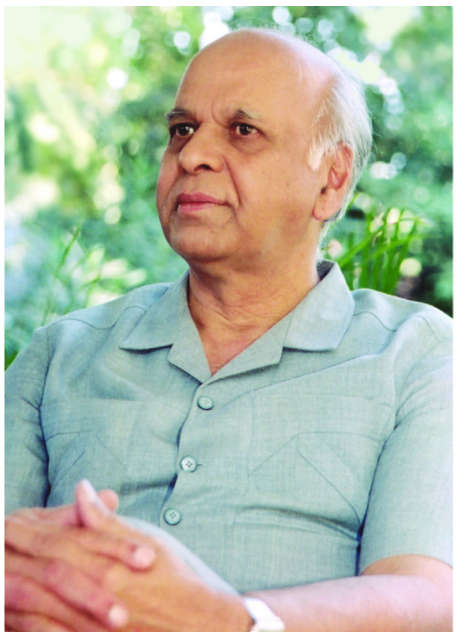
Originally Published in Maharashtra Times, Pune.(8/9/2019)

English Translation by **Ms. Dipali Lodh**

Graphic Support by **prithvigraphics.com**

Dr. Jagannath Wani: The Staunch Supporter of Social Organizations

Dr. JagannathWani, an important figure in the field of social and mental health in Maharashtra basically hailed from Dhule. He travelled to Canada to pursue higher education. He taught Statistics at Calgary University for many years. A few years after his marriage, his wife Kamalini, had to confront a major mental illness: schizophrenia. This was the decade of the 1960s. Treatments for mental illness were still in the dark. Today, in the second decade of the 21st century, treatment, medication and awareness have increased manifold.



If we imagine Dr. Wani's plight at that time, it is evident that Kamalini's illness affected him as well. His personal life, the problems that arose, the neglect his children faced, the stress of looking after the family and coping with the pressures of work, all together must have taken a toll on him. Despair and indecision must have enveloped him at various times. But when the going gets tough, the tough get going. This was true in Dr. Wani's case. Such people do not only find solutions for themselves but also try to ensure that others do not have to face such situations; and if they have to, look for ways to make the situation more palatable for them. Dr. Wani says, "Some individuals have overcome their own grief to extend a helping hand towards others. It was because of them that I was able to remain strong and achieve my dreams. There were always lighthouses to guide me through the fearful seas." And then, another lighthouse was born.

Many individuals try to accomplish what Dr. Wani did , but the perseverance, organizational skills and decision making abilities that are required for the same were qualities that Dr. Wani inculcated and cultivated. The famous journalist Kumar Ketkar says, "Dr. Wani's journey from darkness to light is full of vicissitudes and disappointments. This journey is personal but not person-oriented." This is why and how Dr. Wani channeled his personal pain and created various social organizations. A meaningful existence is never accidental; it has to be planned and executed, was the thought that Dr. Wani focused on. This gave birth to the 'Schizophrenia Awareness Association', an organization working for mental health.

One dream was fulfilled and a



new one was born. This is true of all determined and focused people. Fulfillment of a dream does not imply the end of their journey. It just enables them to follow the next dream. After 'SAA' was established, he started looking for ways to strengthen the organization. Finance is an important cornerstone for the growth of any social organization and Dr. Wani was an expert at generating funds for organizations. He was responsible for the establishment of around 18 odd social organizations in Maharashtra. Dr. Wani worked tirelessly, day and night, to send the details of the organizations to funding agencies answer their queries and improve the projects. This generated the expansion of all the projects. Dr. Wani travelled all over Maharashtra, following up on the various projects and this is the reason why all the projects have been contributing extensively to social improvements. His invaluable contribution was recognized and rewarded when the Government of Canada awarded him the 'Order of Canada', the highest civilian award.

The Ex-President of SAA and a close associate of Dr. Wani, Mr. Yashwant Oak still gets emotional when speaking about him. He says, "I first met Dr. Wani at his residence in Calgary. As a family member of a patient, a husband, he took excellent care of his wife. He also deliberately avoided irritation, complaining to others about his difficulties and letting it affect other aspects of his life. He carefully cultivated this attitude of detachment. He accepted that tending to his wife is a very important responsibility in his life. But he was also aware of his other responsibilities. This ability ensured his success not only in his teaching profession and research but also in the various social responsibilities that he willingly undertook."

Dr. Wani, who worked for financially enabling social organization, and travelled all over Maharashtra for over two decades, is not with us today. In a way, the sun has set on the era of Dr. Wani, but his thoughts and philosophy live on. His hard work over the years had taken roots in various soils and terrain. Much like the strong supportive oak tree that does not suddenly crop up in a flourish of trumpets but grows slowly and silently, individuals like Dr. Wani remind us that the wait for this tree is worth it.

Anil Vartak, Ph.D
Vice President, Schizophrenia Awareness Association
9503710859
avartak@yahoo.com.

Originally published in
Dainik Herald, Panaji, Goa.
(15/11/2018)

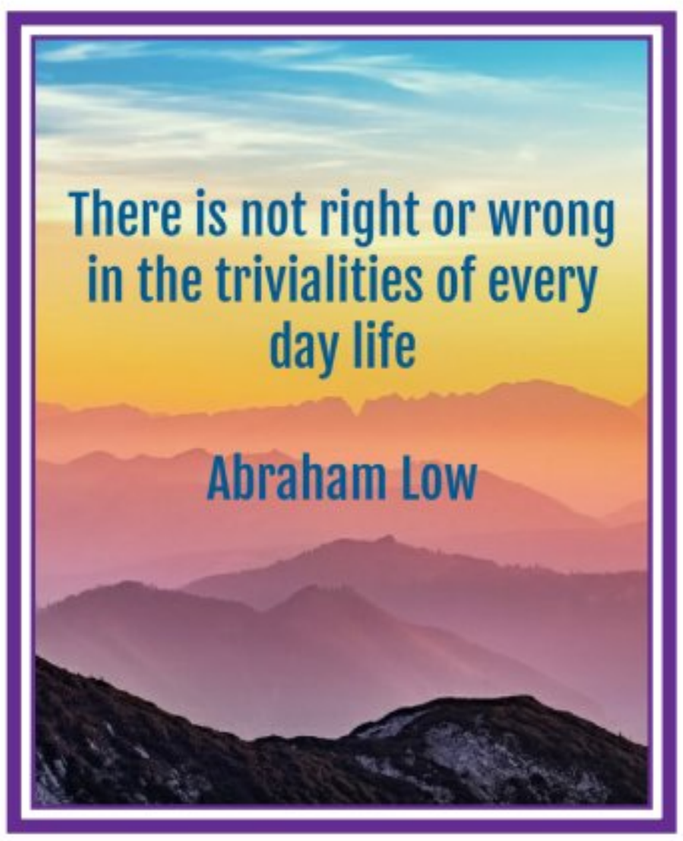
English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com

THE RECOVERY METHOD: FOSTERING HEALTHY WAYS OF THINKING FOR EVERYONE.

Introduction:

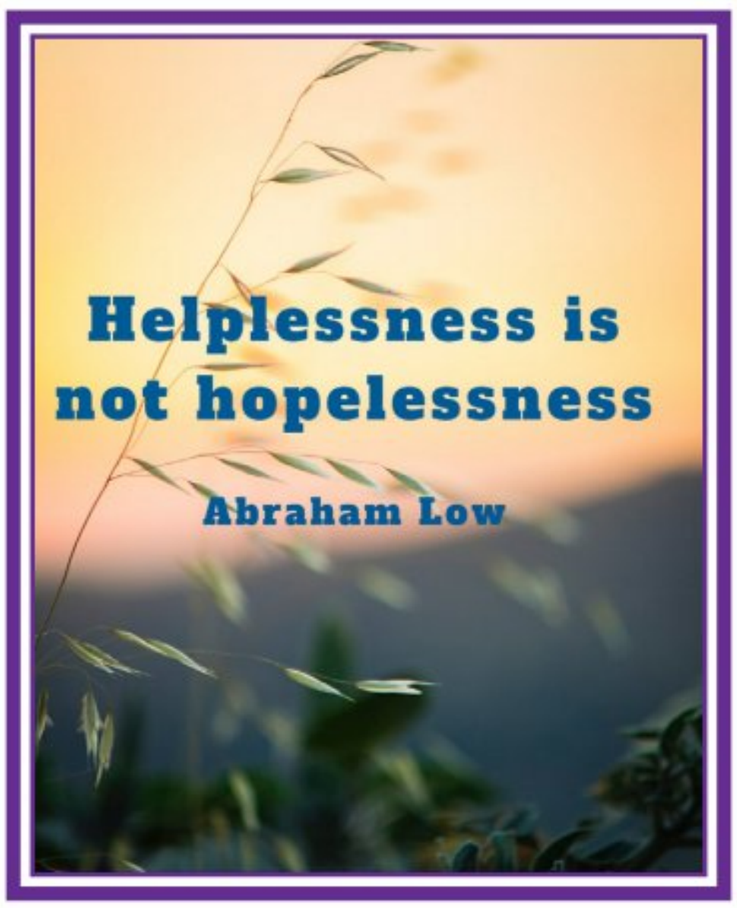
The Recovery Method originated during the times when Sigmund Freud's method of psychoanalysis was at its zenith. Psychoanalysts of the time objected vigorously to this method. Medical experts even considered rescinding Dr. Abraham Low's medical degree. Dr. Low even felt that he should stop the Recovery groups from convening. But the patients who had benefitted from the Recovery Method refused to let this happen and this in turn ensured that the Recovery Method survived and prospered. This article focusses on how the method is not only useful for the mentally ill but also for ordinary people.



Just as the Recovery Method is useful for the mentally ill, it can also prove beneficial to every person. Many may wonder how a method that's good for the mentally ill can be useful to them. But we need to remember that the mentally ill, those who do not suffer from mental illness and the mentally healthy are all part of a continuum. The symptoms of a mentally ill person can occur in any person. Feelings of hopelessness, unbearable pre-exam stress, frustration, perversion and illusion are common experiences that everyone faces. The difference is that the occurrence and severity of these episodes is much less than those of a mentally ill person.

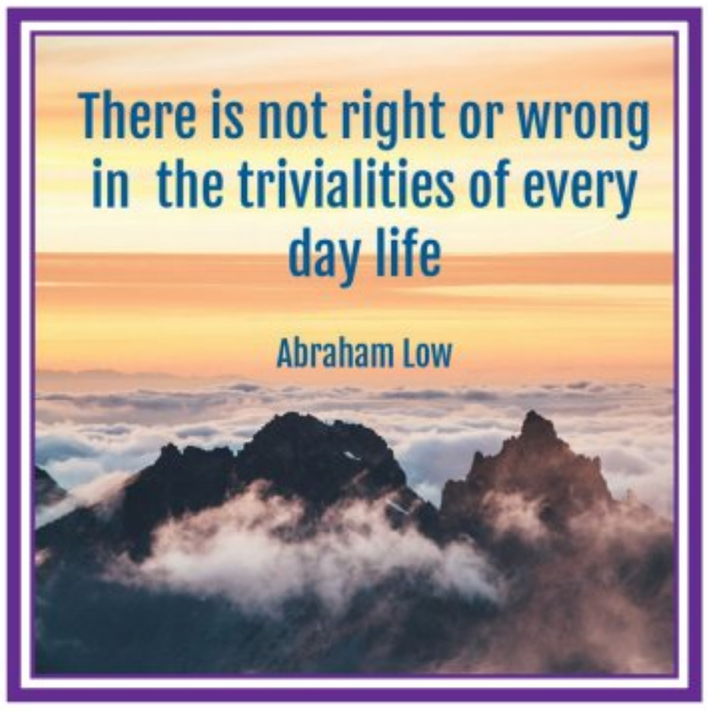
A mentally ill person may need to use the recovery tools of the Recovery Method very often. As against this, an ordinary person may not require them as frequently. In our lives, any change that we willingly adapt is an important one. There are many changes that we unknowingly undergo due to pressures of changing situations. The changes that we make willingly and in a self-driven manner lead to the true successes of our lives. Even ordinary people can also benefit from this method that can set them on the path of self-awareness, self-management and self-leadership.

To resolve any issue the recovery tool 'Do it in part acts', is an extremely important one, even though it may seem a little simplistic. For example many fear to discuss certain issues with their superiors at work or 'to face the boss'. We can divide this act into parts as well. What is the issue that needs to be presented? Which is the right day and time to approach the boss? What are the likely questions that the boss will ask? We can divide the task into part-acts and deal with it. Some of us may need to divide the act of approaching the boss



and talking to him/her into part acts as well. Maybe meeting the boss casually, chatting and humanizing him/her before actually broaching the issue could help in this regard.

In our jobs, an undertaking to



develop new skills, traveling to a different city as part of the job, presenting an issue in front of others; can cause stress and make the person avoid this task. Later, the feeling that one cannot do or perform a certain task continues to haunt the person. If one follows the above-stated principle, he/she can at least be satisfied by performing part of the task; if not the entire task at one go. Gradually, these steps will become easier and the remaining steps can also be progressively achieved.

This particular Recovery tool and few others were effectively used by Rose VanSickle. Plagued by depression and panic attacks, Rose who was housebound for a long time; successfully used the Recovery Method to slowly step out of her house, perform her chores and start studying again. Rose, who managed to change herself radically, wrote a book called, 'Peace of Body, Peace of Mind'. In it Rose writes that emotional problems are found everywhere; but unfortunately, till they do not intensify, we do not gain much knowledge about them. If we were better informed, it would be easier to deal with personal grief and loss. Every aspect of the Recovery Method provokes us to think in a healthy manner and develop good habits. It also encourages us to challenge our limits. Another interesting fact is that Rose VanSickle who was housebound at one time became the president of the Recovery Organization (International).

I recall the tales of my childhood about princes, princesses and demons. The demon's soul is usually hidden in a sealed box at the bottom of a lake, far away among the mountains of a foreign land. Reaching the soul would of course, take away the fear of the demon. Similarly, many feel that the solution to their mental health issues is not easily available and that it will require a lot of effort. They feel that their case is complicated, unparalleled and that others are to blame for their plight.

Patients and ordinary people waste their time by thinking in this manner. It does not yield anything or solve any issue or lead the way towards improvement of any sort. The Recovery Method resolves these issues by reminding us that the solution to our mental problems lies within us. The Recovery Method reminds us; we are instrumental in starting the process towards wellbeing and it is a gradual one; like the tributaries which begin as small streams and eventually come together to form a mighty river. Thus, small changes in our day-to-day habits can teach us how to assume control of our lives. This is the belief that the Recovery Method bestows upon us.

Anil Vartak

Vice-President, SAA, Pune
Group- Leader, Recovery International, U.S.A
avartak@yahoo.com
9503710859

English Translation by
Ms. Dipali Lodh

Graphic Support by
prithvigraphics.com