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EKLAVYA FOUNDATION

For Mental Health

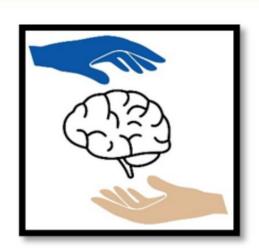


EKLAVYA
FOUNDATION
FOR
MENTAL HEALTH

NEWSLETTER IN ENGLISH

Helplessness is not Hopelessness

2023



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GLOSSARY

Term	Explanation
EFMH	Eklavya Foundation for Mental Health
Shubharthi	A person undergoing effective treatment and seeking improved
	wellness for their mental health
Shubhankar	A supporting caregiver (such as family or friend) for a person with mental illness
Support group	Self-Help support group for Shubharthi and Shubhankar
WHO	World Health Organization
Mental Illness	An illness like Schizophrenia, Bipolar, etc., but not neurological disorders like autism, ADHD, etc.
Recovery	Mental Health self-help organization founded by Dr. Abraham
International	Low, previously known as Recovery Incorporate (Recovery
	Inc)
Recovery Tools	Phrases that help restore and balance mental well-being when affected by 'temper.'
Spotting	Technique to spot your disturbing thoughts or 'temper.'
Member	Shubharthi or Shubhankar or mediator in support group meetings
Virtual Meeting	Online support group meetings
Hybrid Meeting	Meeting with participation that combines online and offline members
Temper	The state of negative judgments in the mind that is either
_	pointed inward, such as fear, or outwards, such as anger
Sabotage	When we do not do what is best for our mental health
Averageness	The understanding that most of the things we experience are
	average; many people have experienced them, and only our
	tendency to fan them makes them seem exceptional

EDITORIAL

For persons with mental illness and their family members the overall environment is not conducive for recovery. Atmosphere of misunderstanding, stigma and general neglect pervades everywhere.

The awareness that usually comes with any other illness is predominantly absent in persons with mental illness and their families. Interventions are mainly biochemical (medicinal) support options, which is necessary, but this alone cannot provide all the inputs for (multidimensional) recovery. Given this background, regenerating the lost elements and relationships of the patient and family members with other members of society is necessary. Restoring, reconstructing, and reviving are the themes of this process.

The government and policymakers expanding emphasize treatment facilities and infrastructure. However, they think this is adequate and leave some other remaining gaps such as empathizing with patients and their Therefore, family. realizing importance of bridging such gaps, the Eklavya Foundation has decided to take up this task as its goal. The Eklavya Foundation aims to reposition patients' and family members' relationships with other members of society by providing information and facts and dispelling myths through various approaches to recovery that come from sharing with patients, caregivers, and the community at large.

This goal is challenging, especially when society, families, and patients are bogged down for several centuries under the fear and stigma of mental illness. We realize that lessening the impact of this perpetuated negative environment doesn't require complicated or technologically sophisticated solutions. Instead, there is a need to change the social attitude by simple solutions generated from common sense and pursued consistently and with belief.

Considering the above things, the Eklavya Foundation has three important goals: to create awareness among patients, caregivers, and society in general; to remove the stigma about mental illness by dispelling myths; and to form self-help groups for sharing, supporting, and adopting techniques for recovery.

Eklavya The Foundation has consistently published the Eklavya newsletter since 2021. This bimonthly newsletter is mostly in Marathi, with some contributions in English. However, considering that philosophy of the Eklavya Foundation is to spread all across India, we have decided to publish our first-ever All English issue on the occasion of 24th May, World Schizophrenia Awareness Day.

One will find several contributions in this issue, articles, poems, feedback, book reviews, etc.; all of them are related to the ongoing mission of the Eklavya Foundation, which, to repeat, is to provide information, conduct self-help groups, and participate in stigma removal as the key areas for community-level work.

We would appreciate your feedback and suggestions for improving this newsletter in the future. We always see this work as God's work and look

forward to any voluntary initiative from your side.

I thank our volunteers for their excellent contributions and tireless endeavour in helping Eklavya Foundation with its mission and vision.

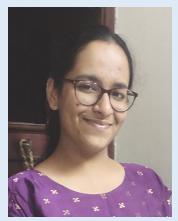
We wholeheartedly thank Ms. Aarati Kothare and Ms. Tithi Das, our young internship students from Sir Parashurambhau College, Pune. Eklavya editorial team highly appreciate their commitment, creativity and perseverance.

We wish them best of luck!

Our thanks also to Dr. R. Padmavati, Director, SCARF, Chennai, for all the support.

- Anil Vartak, PhD

Our young internship students from Sir Parashurambhau College, Pune



Ms. Aarati Kothare



Ms. Tithi Das

GREETINGS TO EKLAVYA

I feel that Eklavya Foundation has aligned with some of the most difficult components needed for development of mental health issues in the community. As highlighted on your website – 'persons with mental illness feel that Stigma is harder than the illness itself. Further, initiating and sustaining self-help groups of recovered patients and family members is also very difficult. In the long run these two are vital in issues sustaining development of mental health in the community.

As a Family Care-Giver organization, Ashadeep has been able to provide services in different contexts of mental health issues in North East India and also sustain activity for the last twenty-six years. Whereas despite many attempts, we have not been able to sustain a single support group out of the many which were initiated.

In this context, I feel the resources created by Eklavya would be valuable inputs in initiating and sustaining self-help groups.

My Best Wishes and congratulations to Eklavya Foundation for coming out with their first English Newsletter.

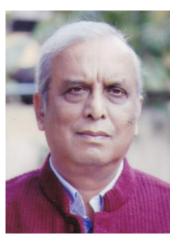
- Mukul Chandra Goswami (Ashadeep, Guwahati)

About Mr. Mukul Chandra Goswami

Achievements at National and International level - Mukul Chandra Goswami, a family Care-Giver together with his wife Anjana promoted 'Ashadeep', a mental health society in 1996 at Guwahati.

Currently the Secretary of the organization, he is also a nominated member of the State Mental Health Authority, Assam. Over the years, in the context of his involvement with mental health through Ashadeep, he was involved in various bodies at the National level.

- Conferred the Padmashri Award for Social Work in 2014
- President of the All India Federation for Mental Illness, a confederation of Care Giver organizations, from 2003 to 2009.
- Member of Core Group for NGOs, Member of National Human Rights Commission, New Delhi from 2007 to 2010
- Member of Central Co-ordination Committee, Persons with disabilities Act, Ministry of Social Justice & Empowerment, Govt. Of India from 2007 to 2010
- Member of Mission Steering group, National Health mission, Govt. of India, New Delhi from 2012 to 2016.
- Presently, the Member of State Mental health Authority, Assam.



Mr. Mukul Chandra Goswami

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ACCEPTANCE OF DYSFUNCTION BY FAMILY: A DOUBLE-EDGED SWORD

"We are content with how he is now. The hallucinations and delusions have stopped. That is good enough. Don't push him. It is okay if he is not working."

Many parents and siblings of persons who have had Schizophrenia say this when someone tries to encourage the person to be more active.

This approach has both positive and negative aspects.

Most family members in India accept a person having poor occupational functioning. Therefore, they continue to care for this family member without discrimination. The family members also make sure that the person is compliant with medicines. If the affected person is reluctant to take the medication, the family members explain and cajole the person to accept it.

This acceptance of dysfunction and continued care of the person is unique to India and many developing countries. However, the same acceptance of dysfunction can be detrimental, as the families do not look for ways of making the person more functional.

Causes of dysfunction

Occupational dysfunction, after the acute symptoms of Schizophrenia have remitted, can be due to many factors. It is possible to evaluate the causes of dysfunction and manage them. The family must be urged to pursue the return to wellness of the person with mental illness.

The factors to consider are:

- The negative symptoms of Schizophrenia
- Depression following an episode of Schizophrenia
- Hormonal deficiencies or other medical illnesses
- Nutritional deficiencies
- Side effects of medicines
- Family factors

Negative symptoms of Schizophrenia

If a person with Schizophrenia is treated early, they will likely have a complete recovery and can return to complete functionality.

But, if the onset of treatment is delayed for months or years, the response to treatment will be lower. In addition, some persons develop what is known as the negative symptoms of Schizophrenia, like amotivation, apathy, blunted mood, and decreased socialization.

With increased awareness about mental health and early treatment in recent years, we are seeing fewer people with negative symptoms than in the past.

Occupational therapy is effective in making a person more functional.

Depression following an episode of Schizophrenia

As the delusions and hallucinations come down, a person with Schizophrenia realizes that he has developed a major mental illness. He reads about the illness, its prognosis, and the restrictions it places on his life. This added awareness can lead to secondary depression.

He develops sad mood, decreased interest, inability to enjoy work or

leisure activities, low motivation, and depressing thoughts.

These symptoms can lead to occupational dysfunction. Therefore, it is important to evaluate for depressive symptoms in persons recovering from Schizophrenia and manage them accordingly.

Hormonal deficiencies or other medical illnesses.

Hypothyroidism manifests as lethargy and slowness. After an episode of Schizophrenia, any occupational dysfunction is considered as due to the negative symptoms by both the family and the treating team. Hypothyroidism or other medical illnesses are often missed in persons recovering from Schizophrenia or other major mental illnesses.

Complaints of body pain or lethargy are often not taken seriously as they are considered psychogenic. However, mental illness does not make a person immune to physical disease. Therefore, every complaint of pain and lethargy has to be given careful attention and evaluated adequately.

Nutritional deficiency

Similar to physical illness, nutritional deficiencies can also be missed. For example, Anaemia is common in India. Vitamin D deficiency is also very common despite abundant sunshine.

Lethargy can lead to occupational dysfunction. Hence, Anaemia and vitamin deficiencies must be ruled out in people displaying indifference in applying themselves.

Side effects of medicines

Certain antipsychotic medicines can cause severe sedation as a side effect. Certain other drugs can cause increased tone and stiffness of the muscles, tremors, and slow movement, together called extra-pyramidal symptoms. There are medicines to prevent these side effects.

If the side effects are severe and interfering with the person's routine, the medicine has to be either reduced or changed to a different treatment.

Family factors

Some parents are overprotective of their children. They restrict their children from trying different activities, saying they are dangerous. They also make their children dependent on them.

This overprotection continues even after their children become adults. And if the adult child develops a major mental illness and recovers, the parents would become more overprotective and make them more dependent. This overprotection sometimes happens with spouses too. This behaviour by the caregiver has to be managed by counselling.

Role of support groups

Support groups can explain to the family members that the treatment of Schizophrenia does not end with control of delusions and hallucinations.

Social or occupational dysfunction can be managed well. The person can be helped to be functional and realize their full potential.

- Dr. Mohan Raj

About Dr. Mohan Raj

Dr. Mohan Raj is a Consultant Psychiatrist based in Chennai. He was trained in Stanley Medical College, Chennai (M.B.B.S) and in NIMHANS, Bangalore (M.D and D.N.B). He has two YouTube channels to spread mental health awareness - Mindscape Matters in English and Mananalam. Nalamariya aaval in Tamil.



Dr. Mohan Raj



Illustration by Tithi Das

Take the total view.

DEFINING US, UNDERSTANDING YOU- A PATH TO SELF-HELP

Twenty-five years ago, I failed miserably to set up a self-help group in Chennai. I have been searching high and low for self-help resources for quite a while since then. Then, I stumbled upon Eklavya and Recovery International through a Google search. I began participating and found a robust "method in the madness" in the conduction of sessions. The participants were forthcoming, and the mediators were warm and friendly.

Technology now enables people to be free of geographical location, and all that is needed is only a convenient time to meet. However, this is only a platform. Initially, I was stuck with finding people who would willingly participate. Then, Dr. Anil Vartak gave a simple solution to get started. It involved no advertising, social media posts, or professional endorsement. Instead, he asked me to reach out to people I knew. This approach proved an excellent way to start.

My original quest for self-help had two sides. One, to obtain help for me, and two, to obtain knowledge to help me duplicate the model in other locations. In this regard, Dr. Vartak and his team were very helpful. Their commitment and sincerity in both aspects drew me into the Eklavya and RI family.

The gradual introduction of Dr. Low's method is progressing well. We share insight with each other besides practicing the RI method. The unique nature of combining Shubharthis (Careseekers) and Shubhankars (Careproviders) in the English medium sessions allows somewhat of a bonding between the two, and to understand each other's plight.

Some topics like 'comparisons' and 'uncertainties' in our lives were discussed, and Dr. Low's tools were examined appropriately. The need for regular reading of the Tools list was stressed on. The aim is to recall the tools in times of stress. Our mediator, Manjiri, put it well when she translated a Marathi adage, "In times of peace, prepare for war." Another mediator, Smita Tai's skilled spotting is invaluable.

Although we are just beginning, the foundational steps have been taken. We expect participation to grow as the word of the session's availability grows. Hopefully, the Support group will flourish and help more numbers. We are confident and have embarked on spreading the word online and offline.

I look forward to walking, shoulder to shoulder, with other members of RI and the Eklavya family, creating more success stories.

But, for now, it is still baby steps.

- Ganesh N Rajan



Illustration by Tithi Das

EKLAVYA'S ROLE IN WHO PYRAMID

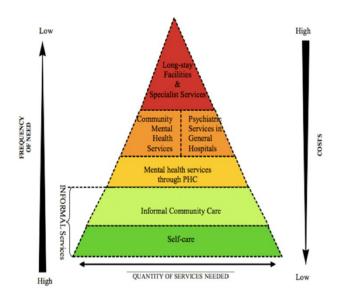
India is a developing country. It is also densely populated. A large portion of the population belongs to the low-income group. Various surveys globally, indicate that 10-15% of the population have a mental illness. It applies to India too.

The number of treating professionals is very few compared to the number of persons requiring treatment, most of which are placed in big cities. Moreover, due to various reasons such as poverty, lack of awareness, mistaken beliefs, guardedness approaching treating professionals, etc., persons with mental illness remain out of the purview of treatment.

When medical science related to Mental illness developed, the conditions were mainly treated using medication. Research related to mental health took place in the 20th century. Gradually, effective medicines more were Various theories discovered. were developed describing different methods, such as counselling, i.e., treating patients using talk therapies. These therapies gradually change a person's thinking and perspective and enable them to control their behaviour.

There is a lack of knowledge about mental health problems and available treatment methods. Most people eventually go to a doctor for treatment, as that is the only way they know. However, as the number of psychiatrists is very less, they are not readily approachable, and the treatment may not be affordable. Thus, all needy persons do not get treated.

Considering this scenario, World Health Organization (WHO) has developed the optimal mix of service's pyramid framework to guide countries in organizing services for mental health. This model shows how to distribute the burden of specialist services and limit dependency on them by increasing the basic infrastructure of mental health services so that more people will get treated.



As the figure illustrates, informal community mental health services can self-manage or manage most mental health care. Very few people having severe mental illness need to go to specialists and avail expensive treatment. People with moderate to mild mental illness can be treated locally, i.e., by Community Mental Health Centres and Informal Care services (middle and lower part of the triangle). These services can provide affordable treatment and are easily approachable in the case of emergency.

To provide such treatment, we must make mental health services available at General hospitals and primary health care centres and train family doctors, counsellors, health workers, community groups, and school teachers.

Such infrastructure availability will help bring persons with mental illness into the purview of the treatment. Treatment will be available locally by trained health workers who are easily available. These health workers can spend more time and empathize well as they know the family backgrounds and culture of the person with mental illness.

The person with mental illness will get treated while living at home, where family members will be caretakers and observers. This localizing will reduce the treatment cost and save the caregivers' energy. As caregivers will be in regular contact with health workers, their awareness of mental health will also increase, reflecting better caregiving.

Self-Help Groups (SHGs) play an important role in this infrastructure shown in the lower part of the triangle. SHG concept believes in homo-sapiens, i.e., human - who can visualize their thought process and think over it from a third person's perspective. A Human's ability to witness his thought process is a great power using which they can help themselves to overcome any dreadful situation. For example, one can use this ability to spot disturbing emotions and thoughts (self-talk) which are irrational and irritating. Then, one can think and check the reality of these irrational thoughts and replace irrational unhealthy thoughts with rational and healthy ideas, which will reduce the severity of disturbing emotions.

By thinking of thinking, one can control one's habits, e.g., eating, sleeping, behaving, etc. In a nutshell, as a Homosapien, one can observe thoughts, emotions, and behaviour, regain balance among them, and control symptoms arising out of mental illness on their own. In the Eklavya support group, we try to ignite members' minds to help themselves, i.e., self-help.

Aren't we taught this by our grandparents in the following Bhagwat Geeta verse?

उद्धरेदात्मनात्मानं नात्मानमवसादयेत्। आत्मैव ह्यात्मनो बन्धुरात्मैव रिपुरात्मनः

Meaning: Let a man lift himself by his own Self, and let him not lower himself; For he is himself his friend, himself his foe.

- Prachi B.



Illustration by Aarati Kothare

THE THREE STAGES OF MY MENTAL HEALTH

Victim:

Mental health is defined as psychological well-being and satisfactory adjustment to society and the ordinary demands of life. Mental diseases result in severe disorders in a behaviour person's or thinking. However. one must watch abnormality's frequency and intensity before declaring this an issue. If one is productive in any manner, not harming oneself or others, and able to get along, that's all that matters. There is no need to get a certificate from others that one is okay.

My symptoms started as olfactory hallucinations. These smells ranged from perfumes to garbage. This olfactory symptom was followed by hearing people talking as asides in auditory hallucinations. Then I began to grow suspicious of everyone. I could listen to the voices of people I felt were against me. They were perpetually criticizing me. I also thought I could hear other people's thoughts as if they were speaking aloud, ventriloquist style. Additionally, I began reading meaning into the gestures of the people around me.

Further, I experienced strange visitations by a cat in the middle of the night. The cat would jump onto my windowsill at the moment of arguably profound thought. I also saw the reflection of someone else, along with a strong stench of urine, when I was standing in front of a mirror, again in the dead of night, and a host of other unreal visions, including the grey outline of a huge hand flipping me off.

Survivor:

The core reasons people refuse medication are a lack of trust, a conclusion that science is still unsure, or overwhelming side effects. In the initial days of my treatment, I felt sedated, too. After that, my body learned to metabolize the meds appropriately. Then, the sedation disappeared and was replaced by a sense of poise.

I adopted a scientific temper when my doctor gave me insight by saying, "Don't debate whether whatever you smell, hear, or see is fact or fantasy... Instead, ask whether the stimulus or the thought can help you live effectively and collaboratively with others." He left it to me to decide whether what I was experiencing was normal or not. Thankfully, this nudge allowed me to reboot my mind.

Though the symptoms of my illness stopped due to medication, my negative thinking was a burden. Consequently, I went for counselling sessions, where I learned to let go of negative thoughts. In these sessions, I realized there is no such thing as an endless blue sky.

The three main insights that helped in my rebooting are:

- 1. Meet your fate: make your destiny Fate is what you meet, and Destiny results from how you meet Fate.
- 2. Realize you are unique There will never again be a collection of atoms like yourself.
- 3. Know [your] betterment in every circumstance There is some way you are inevitably getting better where all is grist in your mill.

Warrior:

When I returned to social life, I always felt a little different from others. Though I did my duties and tried to fit in, I did not share much and was dismissive of any praise that came my way. Such an outlook probably was because I felt inadequate deep down. I used to compare myself with others. I saw many everyday statements by others as attempts to be one-up on me. I thought I was putting up a façade and was genuinely productive and delivering value only later in my life and career.

The biggest snag is a feeling of inadequacy—difficulty loving oneself. Though family and friends lent support, by being non-judgmental, and not making fun of me, I could accept myself much later. Despite logically/intellectually understanding that I am unique, as are others, I often cannot emotionally experience and rejoice in that uniqueness. Nonetheless, my relationships are better, I have less inwardly directed anger, and my tolerance and patience have increased.

About eight years ago, I began to have anxiety attacks when faced with some decisions. Still, these were spaced well apart in time, hence not requiring regular medication. Instead, I was advised an additional medication to use as SOS when I felt that panic. It works wonderfully, and I haven't needed to use it often, probably averaging about once in three months. I have had nothing to report as alarming since these attacks, and I can function normally.

Sometimes, when I am overstimulated by a movie, or an intense discussion today, I experience what I call 'fringe' symptoms, auditory hallucinations just in the audible range. I am told that some people wake from sleep with these kinds of voices, which automatically subside to complete wakefulness. For me, these 'fringe' symptoms subside about five to ten minutes past the overstimulating event. I have learned how to terminate the distress with action. I bear the temporary discomfort as I know it will pass, and it does.

I was a heavy smoker and developed a taste for junk food. While I cannot say a lifestyle change was caused schizophrenia, it contributed to my decision to look after my body. I quit smoking over 15 years ago. Then, I began to watch my diet. After that, I began to exercise. My lifestyle change has altered my emotions contributed to my maturity and health. I now feel much more in control; I also sleep and rarely feel tired.

I would advise persons undergoing treatment to give at least four to six weeks before they change any therapy. Then, if distress is less, continue. If distress is more, change. If nothing has changed, try modifying it. You will know the medication is working when you experience an increased ability to enjoy, rediscover the ability to read, understand, and feel the restoration of hope.

When encountering things that remind me of my illness today, I replace distressing thoughts with effective RI tools such as "It happened by chance, not by choice." I suggest others practice detachment and reaching out as well. Endorse yourself for the effort and be patient to realize the outcome.

The serenity prayer is spot on. "God grant me the serenity to accept the things I cannot change, the courage to

change the things I can, and the wisdom to know the difference."

As my mission, I have adopted the role of being reassuring to the maximum extent, to the maximum people, for the maximum possible time. Ronald Reagan's statement inspires me," There is no limit to the amount of good you can do if you don't care who gets the credit."

Take one day at a time. Be patient. Provide regular feedback to your doctor. Keep a record of some sort. Keep in touch with professionals even if you are okay.

As another mental health warrior suggested, you may have lost a battle, but you can win the war.

Ganesh N. Rajan



Illustration by Tithi Das

EKLAVYA SELF-HELP SUPPORT GROUP

A support group is a group of people with common issues coming together to support each other. The self-help support group is a group of peers gathering to share their problems and help themselves.

A person who has mental illness fights a battle on many fronts. First, the internal turmoil due to sickness, and then, stigma adds insult to injury. Additionally, the lack of information about the condition hampers recovery. Today, a person with a physical illness gets support and sympathy. However, this is not true for the mental aspect. It still has not happened satisfactorily yet.

Professionals treat the patient with medicine, therapy, and counselling. But, as we all know, we have very few professionals compared to the number of patients. So, it is difficult for professionals to spend more time with patients for issues like self-stigma and day-to-day instances. Yet, addressing this area is important for a patient's recovery.

Eklavya Foundation for Mental Health runs self-help support groups for people with mental illness and their caregivers. There are two support groups at Eklavya, one for people with mental illness (Shubharthis) and the other for their caregivers (Shubhankars). These two groups run differently. These groups run in two locations, Pune as well as in Chennai. Our Chennai support group started 10 months ago by Ganesh Rajan.

Shubharthi, due to his illness, finds it difficult to perform simple interactions like routine tasks, socializing, and studying. These tasks create distress in them. They share this distress in the Shubharthi self-help support group in the Marathi medium in Pune. Sharing that takes place in this group is in a structured manner. This sharing allows Shubharthi to look at the situation from a distance, resulting in a rational approach. We are members of Recovery International and use a therapeutic method known as the Recovery Method in our support group.

Shubhankars (caregivers) are doing everything possible for their Shubharthi. However, caring for someone with mental illness is very taxing on someone's physical and psychological health. There are various issues apart from treatment for which Shubhankar needs guidance and Shubhankar support. This group discusses their problems and what worked for their Shubharthi with others. This group also encourages Shubhankar to take care of themselves too.

We at Eklavya have a combined meeting in English and Marathi for Shubharthi and Shubhankar. Various topics, like the importance of medicine, routine structure of Shubharthi, and the need for communication within the family, are discussed in this combined forum. In these combined meetings of Shubharthis and Shubhankars, they understand each other's viewpoint and thereby benefit mutually.

This alternate version of self-help support groups provides relief because of venting. It reduces self-stigma as they communicate with peers. It provides them with information related to recovery and promotes self-care. They understand that they are not alone in this.

We all know one quote "Pain is inevitable, but suffering is optional." Professionals deal with the pain that

comes with mental illness, and Eklavya steps in to reduce their suffering.

Manjiri C.



RECOVERY METHOD

Dr. Abraham Low was neuropsychiatrist who was interested in patients, post treatment. This was the time before 1937. Dr Low realised that after the treatment when patient used to go to his home, his symptoms would resurface. He wondered what triggered him after the treatment was over? After many case studies he knew the causes of the same. Patient was normal in the institution as it was comfortable for him. This was not the case at his home or social atmosphere. At home or may be at workplace they had to face stressful events. Some capacities of the patients were reduced due to their mental illness. They found it difficult to with daily tasks, routine, communication with others, managing relationships etc. Those were simple tasks in everyone's eyes but patients would get distressed over it. Their symptoms would return.

This was the era of psychoanalysis. All other psychiatrists were looking at the past of the patients where as Dr. Low was wondering if anything could be changed in present. He realised that if patients exercised their will, they would be able to cope with the situation. But how to maintain and exercise will power? He discovered a method known as the Recovery method. With this method he used to train patients will which in turn would help them. This method was a self-help method.

Dr Low started a support group of the persons with mental illness. After his relentless efforts, he could see the progress in the patients. Slowly other groups started in America. People started seeing the results of their will training. In 1937 Recovery Inc, was founded by Dr Low. Recovery method

mainly focuses on patient's thoughts, how he can spot his distressing thoughts and change into calm ones. By doing this, he can maintain his mental peace. Patients used to stop doing anything which caused them distress but if they knew how to find calm despite of distressing events, they could try different things. They were ready to face situations even if they were slightly uncomfortable. This helped to increase their skills and capacities.

We at Eklavya Foundation for mental health, use this recovery method for Shubharthi's meeting. Shubharthis share their distressing events in secure and empathetic environment. We have observed that there is increase in their coping skills for distress. Recovery method is helpful for everyone not just Shubharthis.



Dr. Abraham Low

Mental illness takes toll on the person. A patient's capacities and sometimes skills are hampered. Even small distressing events or communication with others creates tension in them. But to look at the situation from distance

and think rationally towards it, is the skill developed in the recovery meeting. We call it spotting.

Here are some of the recovery method examples that were shared in Shubharthi recovery meeting:

RECOVERY EXAMPLES

Example 1

This happened on Tuesday. Everything was going great lately. My routine and study were disciplined. My exams were due soon. I was studying for my exam but then suddenly had a severe headache.

I began to work myself up. I had sweaty palms, and I got very scared. I used to have these symptoms when I was severely ill. My exams were in a few days, and I became anxious about the preparation. All the past flashed in front of me. My heart started pounding. Shortly I understood my symptoms and started spotting.

I spotted my sweaty palms and heart pounding. I reminded myself of being self-led and not symptom led. I realized my thought patterns, and I started retraining my brain. I remembered that such a situation rarely manifests. My fearful anticipation is worse than the realization.

Before my recovery training, I would not have calmed down, and it would have affected my studies. I would have been anxious for days. But after applying recovery tools, I felt peace within. I started studying shortly.

Example 2

This happened last Sunday. My mother asked me to get milk. So, I was walking



Source: Canya

to a nearby store. I was walking on the road. There was a group of three people chatting. They were walking behind me. They were very loud. Suddenly someone mentioned 18,000 rupees. I got very scared. I thought they were talking to me. I thought they were asking me for that amount of money. Then I started to begin working myself up.

My heart started beating very fast. I got disturbed and stressed. I was confused for a while about what was happening. I thought those people were asking me for money. I was scared about how I could provide them with the money. What will they do if I do not give it to them?

But soon, I started spotting. I realized that my feelings were not facts. My supreme goal is maintaining inner peace. I understood that I could change my insecure thoughts to secure thoughts. I don't have to worry about every thought that crosses my mind. I can reject, suppress or drop thoughts.

Before my recovery training, I would have run away from the road and headed home. I couldn't have brought milk from the store. But since I spotted it in time, I could finish my chore. My mother and I enjoyed tea together.

- Manjiri C.

'RECOVERY METHODS' IS SIMPLE; BUT NOT EASY

- My experience and analysis.

The contributor, a caregiver, and spouse to a person with mental illness, have attended English Eklavya Selfhelp Support Group meetings since Aug 2022. In this article they share their experience and analysis.

Attending these meetings has been helpful to us in terms of a better understanding of ourselves and the situations we find ourselves in. With the opening of new perspectives and how our attitudes could be reformed or better positioned to be prepared to deal with life's challenges, we seem to be gaining fresh insights with every meeting. The session coordinator and the moderators have been of great help in this regard.

I remember coming across a Sanskrit Shloka which says in learning and education, 25% is the intrinsic capability of the individual, 25% is what the guide/teacher contributes, another 25% is gained from fellow learners, and the last 25% is through one's practice and experience over time. I do think this is so very true to our experience with the Eklavya Self-help Support Group.

We have been familiarized with the Recovery Tools (shortlisted by Eklavya Foundation) from our earliest meetings. In every session, we try to understand the various tools to make using them easier. We recognize that we must internalize the multiple tools available to us to put them to work appropriately. In many sessions, through several live examples of situations — how the various participants attended them- we familiarized ourselves with which tools are effective for and could be used in what kind of emerging situations.

When we evaluated how we had handled a situation, it was evident that when we seemed to have dealt with the situation well, we had used the apt tools suitably and effectively. However, we often make mistakes when we are tense and do not use the tools appropriately. Of course, when we have discussions, we can recognize what tools we could have used to better handle the situation by going over the list of tools.

I have been thinking for a while that if we can recognize the tools to be used by understanding our fault lines and emerging situations better, we could put them to operate more effectively and with greater ease.

Some of the prerequisites that will substantially help our efforts in this direction are:

- 1. We ought to recognize and acknowledge the usefulness of the tools in improving our relationships and mental peace. Otherwise, we might end up justifying our actions with no relevance to the outcome of our efforts.
- 2. Be conscious of anger/ temper building up due to external stimuli (due to others and situations).
- 3. Acknowledge disappointment and resentment when you do not get what you want (when results/outcomes do not meet your expectation), and yet, keep on track.
- 4. Get familiar with your negative thought patterns and feelings thereof.

I felt when a conscious effort is there on the part of the individual to help oneself, if the recognition of the tools to be used could be simplified and made easy, the implementation by the individual might be more practicable and forthright.

The predominant negative emotions, broadly called 'temper,' are Anger, Expectation/disappointment, and Negative thinking. These negative emotions are more active as mind games when external stimuli exist (through people and situations). There are several other 'feelings,' but I restrict myself to my primary and dominant ones.

With the above thinking in mind, I tried to group the Tools shortlisted by Eklavya Foundation so that picking up the relevant tool for a context becomes easy for the genuinely interested individual. This list is obviously from

my perspective. So, you can perhaps arrive at your classification. The email id to acquire a list of tools used by members of the Eklavya Foundation is given at the conclusion.

To summarize, Recovery Tools will greatly strengthen our attitude and ability to handle the different curved balls we must face throughout our lives, such as fear, grief, sadness, shame, etc., in addition to anger and disappointments. Furthermore, we can curate and apply the long list of Tools as it appeals to us.

To acquire a list of Recovery Tools shortlisted by the Eklavya Foundation for Mental Health, please drop a line to: **eklavyafoundationmh@gmail.com**

For more information about Recovery International, see article Recovery Method in this Newsletter.

Negative emotion\	External Stimuli vs. Internal Effort
Situation	
Anger	Maintaining inner peace is my supreme goal
	 My internal peace is more important than my anger
	 Helplessness is not hopelessness
	 People do things that irritate, not to irritate us
Expectation/	 I can't control external, but only my internal environment.
Disappointment	 We can't control the outer environment, but we can control or reaction to it
	Don't look regretfully into the past or fearfully into the future Events rather than assure.
	Excuse rather than accuse
	It happened by chance, not by choice
Negative Thinking	 Commanding your muscles to move transforms the vicious cyc of helplessness into the vitalizing cycle of self-confidence
	A decision terminates panic
<u> </u>	

REVIEW OF TRIED AND TESTED

Hurrah! At last, a ready-to-use manual for mental illness in India!!

Dr. Anil Vartak, in his characteristically unassuming manner, has presented insights that help cope or pull out of mental illness in simple terms. It is clear from Dr. Vartak's booklet that although medicine is important, one cannot take medication, eat, sleep, and recover. Several insights and being proactive in self-effort are required additionally.

While it is always said one should go from a victim to a survivor attitude, Dr. Vartak suggests what many self-help groups prompt us to adopt. From his writings, we are inspired to go from victim to survivor and become a warrior for our mental well-being.

The booklet, Tried and Tested. incorporates learning from personal experience, serendipity from methods like Recovery International, practical knowledge derived from other persons with lived experience of mental health and their families. By being open, listening to opportunities for progress, and sharing skills obtained support through self-help sessions over the past two decades, Dr. Vartak has distilled the essence in an easily readable work.

The booklet is best applied by mental health journey travellers who have some control over their symptoms. It is also a resource for their support networks, like family and friends. If you read and practice these tips, the likelihood of coming to terms with your situation and managing your condition is high. Not all of it may apply to everyone, but we can take the grain and blow the chaff away.

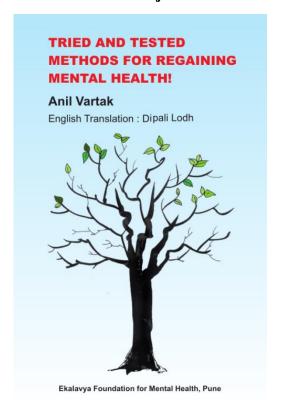
The booklet is slated to be released shortly. To receive further notifications, send an email to **eklavyafoundationmh@gmail.com.**

Free soft copies of this booklet are available.

The translation from the original Marathi is fluid and true to its roots. However, many professionals have pointed to the importance of making this work available in other languages, given India's resource-starved area of mental health support. Therefore, it would be commendable if this work can be made available in all languages while being colloquially true in its rendition.

The book is currently available in Marathi, Hindi, and English. However, if you want to volunteer to translate this work, on an honorary basis, into other languages, please drop us a line.

- Ganesh N. Rajan



Strive for peace, order and balance.

PREFACE OF TRIED AND TESTED

REACHING IN AND REACHING OUT

Dr. Arun Rukadikar, M.D., D.P.M. is the author of the book "Mental Disorders and YOU". In his preface to the booklet "Tried and Tested" by Prof. Anil Vartak, Dr. Rukadikar shares the essence of Dr. Vartak's work's invaluable contribution. The highlights of his introduction are reproduced below. The entire booklet is available on the Eklavya Foundation website.

The booklet is mainly a self-help guide for persons with mental illness. It assists in regaining stability of thoughts and emotions, brings confidence and peace of mind, and gives a feeling of well-being and a capacity to function normally in society. The author has aptly referenced the positive fallout of mental disorders in the booklet. In many cases, mental health issues provide "golden opportunity to improve (as a person) by converting an adversity to become a boon."

This booklet contains steps to be taken to get well from thought disorders. These steps have come from the author's personal experiences after thinking in depth about the challenges one faces while recovering from a mental illness to becoming a useful community member. The author must have had protracted introspection to come up with gems of wisdom contained in all chapters. For example:

"One must objectively look at one's past without judgment and with compassion as if you were another person;" "One's perseverance during the period of recovery and faith in oneself is a must;"

"Writing down negative thoughts and emotions in a regular diary can go a long way to reduce the stress;"

"Imagining that your case is hopeless and despicable is something that stops your progress;"

"Medications provide a backbone support for one's recovery by helping to control the symptoms;"

"Physical well-being maintained by regular exercise and a good diet supports mental and emotional rebuilding"

"If we decide to whole-heartedly do whatever work comes to us at a given time, then we cross an important step in our development."

"Persons in recovery need to remind themselves: 1. Ups and downs are a part of every person's life. 2. A failure need not stop one from trying again. 3. Striking a balance between capacities and expectations is a key to recovery. 4. Our mental capacities are not static-they fluctuate. 5. Patience and flexibility are tools to overcome mental illness;"

"Looking for sources of gratitude within oneself and one's surroundings, ...and expressing gratitude whenever possible, brings a renewed source of joy to you and others."

"Our physical and mental constitution is moulded over many years. How can it change overnight? Gaining social skills is important, but remember, it takes time" "Join a self-help group; A self-help support group is formed by persons facing similar problems to help overcome these with mutual support. They inspire members to exert themselves to resolve issues that arise through group sharing. In short, a self-help group motivates us to help ourselves and others like us for mutual benefit."

"Coping with and overcoming mental illness need not be only hard work. It can also be an art of creative and joyful living."

You will read about these and other insightful tips in the booklet. They are very important for a person with mental health challenges. They can help recover to being a fully functional and contributing community member. The language of the booklet is simple, and the author writes from the bottom of his heart. The idea is not only to control the symptoms of mental disorders but to improve one's well-being and positive mental outlook.

As a psychiatrist providing treatment and helping rehabilitate the mentally ill, besides championing mental health literacy for over five decades, I can confidently say this booklet is a blessing. Literature for patients to know what they must do to recover from their mental disorders is scarce in India. This booklet certainly fills that void if the mentally ill use it in the same positive spirit it has been written. The work must be translated into all official Indian languages and made available to all community treatment and rehabilitation centres, self-help groups, support and advocacy groups, schools and colleges, health centres, etc. I hope the Ministry of Health, Government of India, a NonGovernmental Organisation (N.G.O.), or some voluntary organization interested in mental health undertakes this task.

- Dr. Arun Rukadikar

About Dr. Arun Rukadikar, M.D., D.P.M..

Author of the book "Mental Disorders and YOU" (An illustrated and easy handbook of mental disorders and mental health for the mentally ill, their families and the community; with on emphasis interventions prevention of mental ill-health and for promotion of mental health) and Senior Consultant Psychiatrist, Healthy & 2, 2007. Happy Minds (Mental Health and Rehabilitation Centre, operated by the Outubuddin Gaibisab Momin Charitable and Welfare Foundation), Siraj Hospital, Miraj.



Dr. Arun Rukadikar

INTERNSHIP EXPERIENCE WITH EKLAVYA

Our journey with Eklavya Foundation for Mental Health started in February 2023. We are a group of 10 and are currently in the second year of graduation - specializing in Psychology. Our professor of psychology mentioned Anil sir's name and the Eklavya Foundation's contribution to the field of community mental health during many of our discussions in class. We were all interested in pursuing internships but were unsure whether undergraduate students get worthwhile internships. Luckily, this internship came our way, and we jumped at it.

Initially, we were a bit nervous about this internship as this was the first-ever internship for most of us. But slowly, we got used to our work and now consider ourselves part of foundation. At first, Anil sir introduced us to the foundation's work and briefed us about our role if we joined this internship. We all gladly accepted and started working under Sir's guidance. Gradually we could also meet other foundation members, like Smita Ma'am, who kindly and lovingly guided us ahead. Over time some of us could also interact with Ganesh Sir, who looks after the work of the Eklavya Self-help Group in Chennai. Gradually, with 1ike these. we mentors started developing new ideas, which we are currently working on.

We had the opportunity to work on an important issue often ignored in our society - mental health. Our work aimed to remove the stigma surrounding mental health and create more awareness about it. Our work included reading and writing different articles related to mental health. Through this, we gained a deeper understanding of the

topic and learned how to write effective and informative content. We also devised plans to tackle mental health stigma, such as organizing a workshop at our college. This workshop aimed to provide students with practical tools and strategies to support their mental health and well-being and how to treat others with mental health issues.

In addition to this, we also designed posters to create awareness about mental health. We wanted to spread the message that it's okay to talk about mental health and seek help when needed, and we shouldn't define a person with their mental illness as there is more to them than that. We used creative designs and catchy taglines to make the posters more engaging and effective. We also created an Instagram account to reach a wider audience. The designed account was to information related to mental health and reduce the stigma surrounding it. We plan on sharing various articles, tips, and motivational quotes on the page, which hopefully will receive a positive response from our followers.

Overall, our internship experience at Eklavya Foundation was an incredibly rewarding one. Through our work on mental health stigma reduction, we gained a greater understanding of the challenges faced by individuals struggling with mental health issues. We also developed valuable communication. organization, and teamwork skills, which will serve us well in our future careers. Most importantly, each of us feels proud to have contributed to an important cause and positively impacted the community. We are sure this experience will enrich

our future and make us responsible mental health care system members!

- Tithi Das & Aarati Kothare



Members of the Eklavya Foundation along with the internship students of Sir Parashurambhau College, Pune



Internship students of Sir Parashurambhau College,Pune with Dr. Anil Vartak Sir

POEMS

-by our Shubharthis

Mirror Collage

One day the mirror broke down

in many pieces!!

it shows broken me

no sleep! no hunger!! moody me!!!

It was a battle

I resist for better me

I shout, I cried, I tried

and I perceive.

My illness is not me.

My recovery is me.

I found inner me

I rejuvenate, I rejoice.

We all are the warriors in this journey...

Be together!! Be united!! Be like a 'mirror collage'

- Padma G.



Don't Fall

If ever in life you feel defeated,

Your will falling short to make an advancement,

Commanding your muscles to move will settle your predicament,

It conjures a vicious cycle into magical vitalizing cycle of progress.

Don't you put imagination to stressful situations,

Anticipate fear more than real existence, don't regret over actions taken in the past,

Nor lose your sanctity of future hissing fast.

Your internal peace is more important than your outer environment,

No anger or threat should bring you disgust & disgrace,

Keep retraining your brain to challenges & obstacles,

Keep dropping thoughts of confusion & frustration.

You face events that are difficult to feel comfort in,

You can control maximally your reaction to it,

Setback is part of life, stop fixing the situation,

Few things are better left in letting go equation.

Better said than done, Distress may be dangerous,

Helplessness may be all hopelessness,

That time do the efforts in part acts, allow feelings to rise and fall,

A decision taken at the right moment will terminate your panic call.

Don't fall in the cycle of symptoms & fear,

Bear with the discomfort & break the cycle of tears,

Spot daily sentimentalism at stake, Strive for peace, order & finally balance.

Break old habits, control your speech muscles,

Have courage to make mistakes n overlook, trivialities,

Endorse for the efforts, not just the outcome,

Changing your insecure thoughts to secure thoughts is the dictum.

When you are expressing with culture & control,

When you are self-leading with expectations low,

When you function better than what you feel,

That self-control leads to self-respect & zeal.

- Dr Pallavi Gambhir



Source: Al



Illustration by Aarati Kothare

APPEAL

Eklavya Foundation for Mental Health: Reaching out, reaching further!

Appeal for recovery story and poetry submissions from persons with lived experience of mental illness, their families, and mental health professionals.

Persons with lived experience of mental illness and their families go through serious trials and tribulations. These are often invisible to others, but severe consequences trouble many for a significant part of their Life. Yet, people around them would not have noticed their struggle, resilience, and success.

Some write about their experiences as a way of venting. While some write in prose, others find the poetic form suitable. Such work can be an important source of inspiration and guidance for those going through similar journeys while helping society understand such invisible issues.

Story form: Project Phoenix

The word "Phoenix" indicates rebirth, hope, and transformation. It begins with lifting from darkness to light and rising as a stronger and wiser version of the individual.

As a part of our endeavour, we seek stories of recovery or resilience from people with any connection to mental health. We are looking for lived-in experiences of persons who are returning to mainstream and can cope with the uncertainties of Life.

Every person is unique and has something to share about how the individual has succeeded in fighting the situation. So, the people reading each person's story will understand they are not alone. It is possible to live with illness. The readers will also discover different ways of dealing with the situation.

The narratives can be up to two pages long (around 1500 words). Examples of stories to share are reports of returning to mainstream, work stability, and succeeding in the given situation; essentially, stories of growth are the goal of this sharing.

By publishing these stories, EFMH's objective is to remove fear and stigma, provide hope and resilience and grow awareness about mental health. Besides, it aims to motivate Shubharthis and Shubhankars to learn from each other's experiences.

Note: The person writing the story can decide whether to use a real or fictitious name to maintain anonymity.

Stories can be shared in English/ Hindi /Marathi.

The story should have brief information about ...the person, the challenge, and its impact, focusing on how it solved the problem.

The stories will be published in a newsletter or eBook format.

Poetry Form: The Bahar

Eklavya Foundation for Mental Health published a collection last year of poems in Marathi and from the state of Maharashtra entitled 'Bahar,' the literal meaning of which is: The Blossom. Motivated by this experience, Eklavya Foundation now aims to collect poems nationwide.

We appeal to persons coping with mental illness, their families, and associated professionals to share their poetry. These original creations can be built on various issues related to their struggle, learning, and social stigma. A repository of such poems would prove insightful for all seekers of well-being.

Poem submissions are currently being accepted in English or Hindi in addition to Marathi. A panel of experts will select suitable poems. Selected poems will appear on the Eklavya Foundation website and may be published in eBook format.

If desired, the contributors can choose to be anonymous.

You can send your poems and stories to: eklavyafoundationmh@gmail.com

All work can be submitted any time after 1st June 2023, and the last date for the submission will be announced soon.

For additional information, please refer to https://www.eklavyamh.org/

What is your inspiration? We want to listen and share.



Source: Canva

TESTIMONIALS OF SHUBHARTHIS AND SHUBHANKARS

What caregivers have to say about Eklavya's self-help group

- * Eklavya's self-help support group has given me immense relief. I got so much information that my understanding and views have changed. I am hopeful and confident that I can help my ward lead a healthy and happy life.
- * If there is one Shubharthi in the family, the whole house is affected, and it feels like the tunnel is dark until the end. But by attending these group meetings, I have found many new ways to handle the situation to overcome. So, there is light after the dark tunnel ends.
- * "Remove your depression and live in positive notes" were other people's advice. But, how to remove these phases was not known. So, negativity circled these issues that it was impossible to come out of it. But, after joining the Eklavya support group meetings and listening to the sharing, I inculcated confidence and hope to remove depression and anxiety. It boosted my resilience.
- * We only realized how ignorant we were about the illness after attending the self-help group meetings. Lack of knowledge and stigma were the major obstacles in looking after our Shubharthi, resulting in "Isolation."
- * In the group meetings sharing, we learned the importance and benefits of medication and types of psychiatric treatments. This learning was an eye-opening experience.
- * The non-judgemental environment in the group and confidentiality is taken

care of, which gives us the courage to speak out freely and vent, which is most needed while taking care of our Shubharthi. We feel free to share our bottled-up stresses and learn the coping skills.

What care-seekers have to say about Eklavya's self-help group

- * It's like a light house for me.
- * Here are ears to hear me. I experience "sukun" in this group meeting.
- * I like the non-judgmental environment which encourages me to open up freely.
- * The confidentiality allows me to speak my innermost feelings and to get answers to my smallest queries also.
- * Through others sharing, I understand, learn and unknowingly have started analysing myself.
- * This group has improved my perceptions and motivates me to use the coping skills.
- * I have learnt the importance of selfcare and my relations with the family members and friends are improving.
- * Awareness and insight about my illness and the importance of medication and other complementary aspects, I got to know by attending Eklavya support group meetings.
- * I have regained my confidence and boosted my self-esteem. I have started my job. Thank you, Eklavya support group.

OUR TEAM OF EDITORS

Dr. Anil Vartak



Ganesh N. Rajan



Prachi Barve



Manjiri Chavan



Madhavi Inamdar



Smita Godse



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Eklavya Foundation

For Mental Health, Pune

By: Prof. Dr. Anil Vartak, A-14, Siddhant Apartments, 312, Shaniwar Peth, Pune – 411030

Email:

eklavyafoundationmh@gmail.com

Contact Number:

9096827953, 9225575432

Website: https://www.eklavyamh.org/

Social Media:

Instagram:

https://www.instagram.com/eklavyafound
ationmh/

Facebook:

https://www.facebook.com/people/Eklavya-foundation-for-mental-health/100092443674844/

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For paying the registration fees or to give donations to the foundation the details are as given below:

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Booklet of poems on Stigma & Discrimination (From LANCET Journal's report)

Stigma is a major barrier to recovery for persons in recovery for mental illnesses and their family members. The Lancet, a leading international medical journal published a report on 10th October 2022 on Stigma and Discrimination. They invited poems on the same topic by individuals with first-hand experience of mental-illnesses from all over the world. Five selected poems were published in this report. Eklavya Foundation for Mental Health, Pune decided to translate these poems in Marathi and bring out an issue in an English-Marathi format so that it will be useful for the Marathi speaking population as well as people across India. Well-known psychiatrists and thinkers have written a preface to it.

We are glad to let you know that this booklet will be ready by May end.

Those who are interested in receiving the free e-copy of this booklet please drop an email to the Eklavya Foundation at the email address: eklavyafoundationmh@gmail.com

For any additional information please refer to: https://www.eklavyamh.org/



EKLAVYA FOUNDATION FOR MENTAL HEALTH, PUNE