



EKALAVYA

NEWSLETTER

SCHIZOPHRENIA AWARENESS ASSOCIATION (SAA), PUNE

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Editorial

Each One Reach One

The occasion was screening of "A Beautiful Mind," followed by discussion on schizophrenia and the movie. The auditorium was almost full although it was the day when final cricket match was to be played for the World Cup. Many participants were happy as lot of their doubts were cleared and found it a worthwhile Sunday morning, learning something new.

One simple message they would have carried home from one of the speakers was his appeal, **EACH ONE REACH ONE** (EORO). He had said, by sparing some quality time for just one more mentally ill person and his family, each of us present there could restore cheer into the lives of another three hundred Puneite families.

There are numerous ways of reaching out the needy and marginalised persons and their care giver families. They may be unaware that mental illness is treatable and may not know or are afraid to ask about individuals and institutions who render required services. One can give such family information and reading material which is factual and authentic. They will welcome any tips on professional services of psychiatrists, counselors, support groups, rehab-cum-daycare centres and half-way homes.

Just passing on such information may not always be sufficient. The affected families are mostly emotionally shattered and consequently are almost resigned to their fate. Under the EORO commitment, however, one has also to use gentle persuasion with these families to make use of the given information i.e. to take suitable and swift action. When this too happens, you have reason to be happy that you indeed succeeded in sparing your quality time for a good cause.

Today's trend is having nuclear family setup and each individual of which is drowned in hectic routine

supposedly to keep one's body and soul together. Therefore, one might ask, 'Is EORO an impractical dream?' Well, isn't reaching out in itself soul-nurturing in an otherwise drab world ?

We, at SAA-Ekalavya SHSG, are delighted that EORO appeal seems to have touched the right chord. This is because we find more and more families openly coming out, seeking and finding relief through use of informed decisions and coping skills. Yet, we are aware far more needs to be done by both individuals and institutions. So, let us continue with our mini-mission, Each One Reach One.

Collective Caring, More Potent

"Take the piece of thin, single thread given to you. Now put a knot and tighten it. Well, try removing the knot." The thirty-odd participants struggled to unfasten the knot without much success. The trainer continued, "For a change, take that other piece of cord and tighten a knot into it. You know what to do next ! Try and unravel the (contd. on page 2...)

Inside This Issue

- ◆ Shubharthis, Shubhamangala *Savadhan* ! 2
- ◆ Going Beyond Self-Help 3
- ◆ Recovery Method - Personal Examples 4
- ◆ What Is Meant By... 5
- ◆ Illusion
- ◆ Take It From Me 6
- ◆ Fuss About Medication 8
- ◆ Message of 'A Beautiful Mind' 9
- ◆ Practise Effective Communication 10
- ◆ SAA's Activities In Brief 11
- ◆ Being Myself

Practise being self-led, not symptom-led.

(From page 1....)

knot." In a while all were beaming with a smile at their success, this time. After some debate on why it was easier in the second instance, the trainer concluded : "When it was a single thread it was unmanageable but with the cord, which has multiple-threads, the task was almost effortless."

So is the caring and management of a shubharthi by a family. When caring of a shubharthi is a collective responsibility of the entire family, the healing is more substantial. It benefits everyone concerned. Rewards of shared responsibilities are numerous.

If the burden devolves only on head of the family, chances are greater of his/her also needing care owing to cumulative fatigue and frustration. This is especially so as mental disorders like schizophrenia are almost a life-long concern. Every member of the family, with consensus, better takes up some specific task according to one's capability and convenience. Doesn't the world know what wonders our five fingers-so different from each other-together can achieve ?

To derive maximum from each member's potential, it is most desirable that family as a whole is also formally trained to cope with the multifarious problem. Such an empowered team tides-over better in times of crises. What is more, compassionate and dutiful attitude of the family members invariably attracts spontaneous support from the neighbours, colleagues and other relatives. Internal team-work bestirs spirited cooperation beyond the boundaries of a household, breaking any barriers of stigma. Let us definitely do our bit and experience together that quiet, indescribable inner joy of collective caring !



Shubharthis, Shubhamangala Savadhan !

In one of the discussions held recently at caregivers' meeting, a view was expressed that a shubharthi has a better chance of rehabilitation after getting married for the following reasons :

- ☞ He will have someone close to understand his emotional problems and thereby reduce his stress.
- ☞ Rewards of married life will help the shubharthi to calm down.
- ☞ Having a companion will ensure a sympathetic

listener when he wants to open up.

☞ The feeling of shouldering family responsibility can restore his confidence. Etc.

My personal view in this matter is :

☞ Marriage has no doubt it's rewards but it also calls for lots of adjustment with the spouse etc. At times this itself can be stressful. Can a shubharthi, whose mind is in a delicate balance, bear such stress as and when they arise ? None can assess for sure consequences of such situations, unpredictability being one of the characteristics of the illness.

☞ A fore-warned spouse of a shubharthi perhaps can handle such emotional ups and downs for some time. Will periodic emotional disturbances, however, not lead to fatigue and frustration for that person ?

☞ Notwithstanding all that is said above, if at all, a decision is taken for a shubharthi to marry, this should be done in a transparent manner, keeping the other family fully informed about the illness. In fact it will be advisable to suggest to them to meet the concerned psychiatrist and discuss all the implications before a final decision is made.

☞ Mental illness is a brain disorder and therefore it has genetic implications. We know physical features and mental traits mostly get transmitted to the off-springs. This being a risk factor shouldn't positive steps be taken not to have children out of such a wedlock ?

The aforesaid are some of the thoughts of this writer and other caregivers at the discussion. As a caregiver, my conclusion is, it is better that shubharthis avoid marriage. No doubt such a suggestion sounds harsh on them but considering that any number of shubharthis' marriages ended in divorce, the so-called solution is more likely to compound the problem for several individuals. Well, let us think again, from everyone's point of view.

Raghunath Acharya

Editor's Note :

There would also be some successful and happy marriages of shubharthis. Many readers would be keen to know from concerned families. We will be only too glad to help them to share such success stories through these columns, perhaps, under the title, "Shubharthis, Shubhamangala Samadhan."



Every act of self-control leads to self-respect.

Going Beyond Self-Help

I led a perfectly normal life till 1998. One fine day in September 1999 my world came crashing down. My mood swings were diagnosed to be due to a deficiency of lithium in my brain. The name of the disorder was bipolar mood disorder (BMD). From a happy-go-lucky and cheerful person I suddenly became an introvert and circumspect. The spectre of taking medicines indefinitely and the thought of being dependent on others haunted me like a ghost. Two relapses could not be helped.

It was during the long periods of my rehabilitation that I felt the need for some kind of a support mechanism like the Alcoholics Anonymous which is for those with an alcoholic problem. Luckily I happened to learn about SAA through an article in the newspaper, Indian Express.

At the Ekalavya self-help support group (SHSG) of SAA the first and very important message of Dr. Abraham Low that impressed me was that illness is fate-appointed and not self-appointed. This changed my entire outlook and helped me to come to terms with the disorder. Only with acceptance of the diagnosis can you work out a way to try to overcome the problem. I then resolved sincerely to use the tools and methodology suggested by Recovery though I was at first not very convinced of its efficacy. I went through the literature over and over again till I absorbed its gist.

After almost ten months the ultimate accolade came my way when last week my friends and family

members complimented me for a total change in my behaviour. My mellowed behaviour now is very welcoming experience for them all.

There are a lot of things that, given a chance, I would rectify but life goes on. As I have learnt in Recovery, I no longer regretfully look into my past or fearfully into my future. Besides, my feeling of helplessness is a thing of the past because there is hopefulness ahead.

After training in use of the Recovery method the cornerstone of my philosophy is to strive for order and peace. I now have reoriented my thought process from my earlier misdirected thinking to work towards attaining innermost peace. By commanding both my speech and muscles, I have bounced back to a high level of positive energy and action.

There have, of course, been some setbacks but that is part of life, isn't it? By introspecting and analyzing I have taken corrective actions to prevent their recurrence. The SHSG weekly meetings have also helped me interact with a lot of similarly-afflicted persons. This has helped to build and strengthen my rapport with a lot of them.

I am indebted to Dr. Low's Recovery method for bringing about a sea-change in my life and for giving me enough confidence to look forward to a better future. What is more, as a token of appreciation, I volunteer my services, in whatever capacity possible, to popularize Dr. Low's teachings to those who are needy and waiting to be helped out.

Maneesh Madhavan



Sailing in same boat

Dr. Low, far in advance of his time, was becoming increasingly aware that the illness of the psychoneurotic, like that of the mental patient, had a physiological basis also. It sprang from an inborn weakness of the nervous system. It was this faulty system that caused distressing symptoms.

They were the same symptoms experienced by everyone. He had proved this by a constant, vigilant survey of his own body responses, in which he had detected the echo of almost every symptom the psychoneurotic patients had described to him. The difference lay only in degree. The psychoneurotic's symptoms were so intense that they were often bizarre manifestations that filled him with terror.

*Source : MY DEAR ONES by Neil & Margaret Rau
Recovery Inc.*

Fear feeds the symptoms and the symptoms feed the fear.

Recovery Method : Personal Examples

In our Ekalavya SHSG we have been following the Recovery method. Sharing experiences in the group is structured and, therefore, very focused. For almost three years, our members have benefited using it day in and day out, although sharing is at the Saturday meetings.

Our members have generously consented to publishing their **actual** experiences, under this feature, for the sake of our readers.

For your ready reference, the four steps of the Recovery method are : Narrate

- 1) Briefly the event coped with.
- 2) Emotional and physical symptoms experienced during the event.
- 3) Spottings of Dr. Low which helped to cope with the event, and
- 4) What would have been member's response to this event before knowing the Recovery method. This is followed by member's self-endorsement or appreciation and comments from the group members.

(A)

Step - 1

I was going regularly for my painting classes in the morning. From there I would come to the Schizophrenia Awareness Association (SAA) office to help in office work in the afternoon and return home in the evening. I was thus fruitfully occupied for at least 5 to 6 hours for 2 to 3 months. Suddenly one day I stopped the routine.

Step - 2

I started feeling guilty, hating myself for my sudden inactivity. Having insight, I knew that it was sheer lethargy. The fact that I was being an escapist, negative thoughts started entering my mind.

Step - 3

'I moved my muscles' by going for a long walk, that too, uphill ! By doing so, I 'transformed the vicious cycle of helplessness into the vitalizing cycle of self-confidence.'

'I also used the tool, 'Bear discomfort and comfort will come.'

'Try - fail, try - fail, try succeed', was another spotting that struck me, beside the 'will to effort.'

Step - 4

Had I not been attending RECOVERY SHSG regularly, my condition would have deteriorated and I would have continued sleeping for the whole day.

I endorsed myself for my success in overcoming lethargy.

Saroj

(B)

Step - 1

I have a liking for spicy food. Last Monday while returning from work I saw hallucination where faces like mine said they want to eat kachori or wada pav (Indian variety of junk food) from the sweet mart on the way.

Step - 2

As eating spicy fried food increases my weight I did not want to eat anything. The faces taunted and irritated me, disturbed my peace of mind and said they will destroy me if I did not eat that pungent stuff.

Step - 3

Maintaining my inner peace was my supreme goal as I want peace of mind and there should be no sound in my head. I broke my old habit pattern of eating pungent food. This act of self-control led to self-respect. Also I commanded my muscles not to eat the spicy food.

Step - 4

When I had not known this self help method I would have felt tempted and gone to the sweet mart and eaten the food. This would increase my weight and other side effects like sleep etc.

I endorsed myself for my successful effort.

Madhavi

(C)

Step - 1

I have the problem of hallucinations. Last Saturday morning before returning from work I saw in my mind girls having my face and who troubled me a lot. They said I should not look after my 14 month child. They also said I would not be able to do any work after I go home. I have to feed my child, give her a bath and also milk. The faces said they won't let me do all this work for my child.

Step - 2

I got tensed up immediately. I also felt depressed and knew I could not request my mother to look after my child, as she would have been tired after doing the morning chores.

Be group minded.

Step - 3

I knew the faces I was seeing were unreal and so I ignored them, using the spotting 'Feelings are not facts.' I commanded my muscles to move and carry out all the responsibilities of my daughter like feeding her and giving her bath, saying to myself 'maintaining my inner peace is my supreme goal.' As 'Thoughts can be suppressed, rejected or dropped,' I put away the negative thoughts in my mind. The tool "Try-fail, try-fail, try-succeed" made me succeed in putting negative thoughts out of my mind and do all the chores for my child.

Step - 4

In case I had not known the Recovery self-help method I would have worked myself up and become more depressed than ever. I would have cried before my mother saying I will do nothing for my child and that she should do everything for her. I would also go to sleep which would make my mother angry and she would scold me for not doing my work. I would fight with my mother saying she is not trying to understand me.

I endorsed myself for doing a good job.

Madhavi



What Is Meant By...

One of Dr. Low's tools which is often used by the shubharti's is '*Have the courage to make a mistake.*' The daily activity of an average individual consists of reading, conversing, shopping, cooking, washing, working on a job etc. The person with a settled sense of averageness does these routine chores without wasting any thought on them, without hurry or anxiety, without the troubling fear of possible failure. Considering them as routine, he or she knows they involve no danger, and is at ease, and spontaneous while engaged in the work. 'Spontaneity' means you are not self-conscious, that you are not on guard for fear of making mistakes. Spontaneity means *having the courage to make a mistake.*

In routine activities no calamity arises if a mistake does occur. This is the reason why realistic people, men and women who have avarege aspirations, go about their tasks without marked fear of making a mistake. Mistakes made in mundane jobs are trivial themselves, and their consequences are trivial too. Thus they are not to be feared. When fear is removed from the

mind decisions are made with ease and actions are undertaken without undue hesitation. All of this results in spontaneity and it in turn favors development and growth.

This is different from a person who is driven by the desire to achieve perfection. To him or her every trivial task is a challenge to prove and to maintain his exceptional status. His or her life is a test to prove his distinction. He is forever on trial, and thus cannot achieve poise, relaxation and spontaneity. He cannot afford to *have the courage to make mistakes.*

Dr. Low speaks of three kinds of philosophies, which people adopt - realism, intellectualism and romanticism. The intellectualist claims superior powers of reasoning while the romanticist boasts of his capacity for feeling, sensations and impulses. Both strive to prove themselves distinct from the common man. They fear or hate to be rated as average. For a realist on the other hand, all people are simply average, including himself. They are not perfect by any means, not exceptional but simply average. He is average in thought, feeling and action. He claims no glory, glamour, excellence nor exceptionality.

Most people think of themselves as superior or being exceptional in some way or the other. They hope to be exeptional but know they are 'nothing but average.' These unrealistic ideas produce confusion in the mind, actions become tangled, and finally result in despair.

If all of us accept our 'averageness' by simply practising the procedure of 'courage to make mistakes' in trivial affairs, our lives would be healthier, more relaxed and fulfilling.

Ms. Nishreen Poonawala



Illusion

It was a dark dark night
And I was in bad plight.
The moon was covered with clouds dark
And how I wished to see the moon spark !
Then a cool refreshing breeze blew
The clouds aside like curtain drew.
Now the moon was a bright light
And, so, was my life a bright sight.

Saroj.

Fearful anticipation is worse than the realisation.

Take It From Me

(A) Writing A Diary

While living through mental illness, one's mind gets crowded with confusion, restlessness, anger and so on. These emotions are so intense that mastering these negative emotions and thinking rationally can be very difficult. In these circumstances, some way has to be found to dissipate these negative thoughts and clear the mind. Writing a diary and writing down all these negative thoughts and emotions can go a long way to reduce the stress.

The question that arises is what should be written in the diary. Simply put, it may be mentioned that "write down about the confusion in your mind, restlessness, their nature, their ups and downs. Write down about all these in detail as they arise and are experienced. You would know that these confusions etc. are not prevalent all the time. They come, stay for some time and go at times on their own. Try to observe and understand what factors cause them, intensify them and under what situations/ circumstances their intensity is reduced. Put down the results of your own analysis.

Write about, the situations encountered in your life, individuals coming in contact, your expectations from them and to what extent expectations are fulfilled or otherwise and emotional disturbance arising therefrom etc. You can also write about the objectives / goals you have set for yourself, how you plan to go about achieving them and on later review, the changes you made in goals-methods to achieve these etc., what lessons you have learnt and so on. All these can be written down in the diary. There is no fixed format, neither is there any restriction as to 'what should' or 'should not' be written. Whatever is connected with your own emotional life, your thoughts process, all that affects your own development can and should be written down in the diary.

When writing a diary a few norms need to be observed. Whatever you write has to be an honest version of what you experienced, what you felt about them, what thoughts came to your mind. In this process, even if you have made a mistake and realised it to be so, be frank and write about it. Sometimes you may feel, you need to change, but are unable to bring about that change; even this aspect should be written down. In short this diary has to be a mirror of your thoughts and emotions. You start accepting your own inadequacies

and over a period of time, you may be able to overcome these short-comings. In the absence of this frank admission and acceptance you tend to brush aside the unpalatable thoughts and emotion and in the process you may lose a golden opportunity of following right path. This writing of a diary is not only for those who have lost mental balance or are mentally sick, it is equally important and useful for every normal person. The flow of thoughts bring in continuity in life, but more than mere continuity, what is important is change and progress which can enrich your life. In the life of the ill this can bring revolution.

Some people may say that if they write down every thing, all good and bad thoughts and emotions and if someone else including family members happen to lay hands on this, one may get exposed. So what, let everyone read it. These may give some food for thought for them also, because even they would have made mistakes ! To imagine that your own case is complicated and despicable one is something that hinders your progress. To be able to write down everything frankly is a first step towards progress.

Despite this, if you still have hesitation, you can always keep the diary suitably so that nobody has access to it. As an added precaution you may put a caption - "highly personal" etc. and also can write the awkward part in a somewhat indirect way which you alone can really understand. Notwithstanding all this, even if someone else is able to lay his/her hands on your diary, what is there to be ashamed of ? Every one of us- the ill as also the normal ones - have their own inner turmoil and what you would in fact - have done is writing down the emotional turmoil in words. By this action, you would have in fact opened up new horizon to come out of the illness. This being the case, on some deep thinking, you will realise that your fears / hesitation are completely misplaced.

While writing a diary, it important to maintain continuity in the matter. For example, if you tend to get angry quickly, and if it's after effects last the whole day or even days together, disturbing your peace of mind as also that of others around, this should be put down. If you accept that this is one of the major defects in your temperament then keep reading and introspecting on this aspect, think of ways to get over this problem - evolve strategies to fight this tendency. As you go along with this self improvement programme, write where you failed and where you succeeded, what lessons you learnt. By doing

Lower your standards and performance will rise.

so your efforts will get a forward direction.

This is all that can be said about the diary. The diary becomes a mirror of your mind, a reference point, to introspect and to eliminate the negative aspects of your temperament thereby aiding you in your own personal improvement.

Anil Vartak

(B) Learn To Be Friends With Your Illness

It is quite natural for those who had the experience of mental illness to think "Why should this illness strike me ? Because of this illness I have had setback in my life ! I haven't been able to lead life like others : complete my education , earn a livelihood, get married and set up a family. In short, live life fully. Many of you may have lived through this illness for 5, 10 ---- 20 years or probably even more ! Can you hate or disown this illness - these years ? By hating the illness what will you gain ? You may start hating yourself. These negative thoughts can cause stress and be a drag on your progress. It is a common experience that often, by interacting and living with people one doesn't like, for long periods, one learns to accept and adjust with them. In the same manner, learn to accept your illness as something you couldn't have avoided. In any case you are not responsible for it nor are your immediate family members ! So, why not accept it and adapt yourself ? You will observe that gradually your stress, your restlessness will come down. You will start enjoying peace of mind. Once your stress, inner turmoil is reduced, you will start looking at life more positively. You will feel more energetic, your concentration will improve. In short, you will begin your journey towards progress, attaining your long-felt but held-back aspirations.

At this point, a question arises, "What is meant by getting out of mental illness ? How to straighten your disturbed life ? How to recapture all the happy moments you missed so far ?" There is no readymade formula. It is difficult to say what attitude to the illness is right or wrong. Whatever gives reduced stress, your turmoil, whatever gives you happiness and peace of mind - is the right approach. You will realise that by accepting and adapting and clearing the cob-webs of negative thoughts and emotions, you would have learnt to look at life afresh from a clear, unbiased mind. You will start discovering new meaning of all events around you. You will develop a new

outlook. You will be more enthusiastic and cheerful. You start looking at your own past life, the mistakes you made, and so on. You will start understanding those around you better. You can start critically analysing your past and come to conclusions as to how things could have been otherwise and these can be hereafter. This will help you to reduce your own stress in future. You learn how not to repeat the same mistakes. There is a chance that one who has had the opportunity of passing through difficult times has also a golden opportunity bringing in improvements and even become better persons. That way we may say that adversity is a boon. For this to happen, however, one must be able to look at one's past very objectively and in an unbiased way, as a third party.

Here are a few tips - for those who would like to come out of mental illness - for that matter - even for others :

1. Develop habit of writing a diary (and to look at it from time to time as time passes).
2. Join a self help group.
3. Take proper care of your diet and maintain a regular regime of exercise.
4. Get yourself involved in some activity - keep occupied. You can even occupy yourself in activities such as reading aloud, going for long walks.
5. Even though the activity you choose is below your potential it doesn't matter - what is important is to keep busy.
6. Try to regain your lost skills, keep experimenting, be industrious.
7. Learn to enjoy and appreciate even the smallest of your success.
8. Learn to laugh at your past mistakes.
9. While on the path of progress, you have to consciously learn to accept compromises. Everything won't go the way you wanted.
10. Do not brood on the lost past but learn to live life on a 'here and now' basis.
11. At any stage in life you can accelerate its pace. Life can be made more progressive at any stage.
12. Your brain has a tremendous capacity to learn; so acquire new skills. In actual practice we exploit hardly 10% of brain capacity.
13. Learn to avoid anger, hatred, jealousy.
14. Acquire and nurture good friendships.
15. Learn to seek happiness in small things.
16. Help others - that in itself will give you happiness.

Take the total view.

While on this path of introspection and self improvement - let us remember that

1. In the beginning progress is bound to be slow - have patience.
2. Things won't change overnight.
3. Persons around you may not come forward to help you. Don't forget they also carry a bundle of unpleasant experiences.
4. People around you are also not models of perfection. They have their own limitations - accept them for what they are.
5. For enjoying life - the life itself need not be cent percent ideal-pure.
6. While bringing in changes in your life have patience, there is no place for restlessness. Be conscious of the positive changes taking place and keep reviewing your progress from time to time.

Anil Vartak



Fuss About Medication

There are three broad ways in which schizophrenia can be treated : (1) Medication (2) Psychotherapy (3) Rehabilitation. Here, we are talking about the medication part of it.

Medication is an important part of treatment of schizophrenia. These medicines are called anti-psychotic and they are in the form of tablets and liquid.

A person diagnosed with schizophrenia has to take medicines, prescribed only by a psychiatrist regularly. To stop medicines half-way may prove to be dangerous. It may also cause a relapse. Regular intake of medicines helps brain to maintain normal functioning and reduce severe symptoms. It is necessary to complete the course of medicines to try to avoid a relapse i.e. going back to the original severe symptoms, or at least to some severe symptoms.

These medicines are called anti-psychotic because they try to treat psychosis or psychotic symptoms. They are not sleeping pills as sometimes shubharthis and care givers name them. Excessive sleep can be the side effect but it is not what the medicine is meant for. Your doctor will advise you the dosage, how and when to take it and when to stop it. As long as your

doctor does not tell you, do not stop the medicine on your own. Your doctor is a better judge. Irregularity in taking medicine is also harmful.

Please remember the brain, the intelligence is not affected by consuming medicines. Besides, you do not become an addict of medicines like that of alcohol. Sometimes, some patients suffer from side-effects like excessive tiredness, restlessness, slow response pattern, memory difficulties and confusion, tremors of body parts, excessive sleep, weight gain etc. But in such cases go to your doctor as early as possible and the doctor will also treat the side effects. But never stop medicines without consulting your doctor.

Now, many care-givers experience that their shubharthis do not accept their own illness and hence, are not ready to take medicine. In such cases, doctors advise them to mix medicinal tabs or liquid in some food items and give that food to shubharthi. Sometimes caregivers, on their own take such decisions. They mix medicine with tea, juice, roti etc. It helps recover shubharthi without his own knowledge that he is consuming medicine.

But the questions that arise are :

- 1) What if the care-giver goes away from his shubharthi for some or the other reason ? Then who will mix medicine for him ?
- 2) It is quite possible that a paranoid shubharthi, after knowing his food was medicated, may totally stop eating or drinking that kind of food. And that may affect his mental as well as physical health.
- 3) In some reported cases it happened that a 'roti' in which medicine was mixed for shubharthi was wrongly eaten by his mother. Once again such a roti was eaten by the driver when the family was traveling. He started feeling sleepy all the time and couldn't drive properly. His driving could have caused even an accident.

The intention behind giving medicine mixed with food is not definitely bad. The care-givers want their shubharthi's early recovery but the shubharthi is just not co-operating. How should the care-givers give him medicine without his consent and knowledge ? We find no alternative, say the care-givers.

In my pinion a care-giver should try to convince his shubharthi to first accept his illness and then to accept the role of medicines in his recovery process. It is

Be willing to bear discomfort and comfort will come.

shubharthi who is responsible for his recovery process. Hence, he himself, with full understanding, should take medicine regularly. He should not be dependent on any body else for his medication. At the same time, taking into consideration the nature of the problem, rather challenge, I can say, if at all you fail to convince him, you can use alternative method of mixing medicine with food, keeping in mind all the above dangers so that you can take all possible measures to avoid them.

Mrs. Neelima Bapat



Message of "A Beautiful Mind"

Dark recesses of mind vied for expression as psychiatrists and professionals analyzed "A BEAUTIFUL MIND" the movie to remove misconceptions in the minds of anxious relations of those suffering from schizophrenia on that Saturday the 5th April 2003. It was a memorable and also educative interaction between members of Schizophrenia Awareness Association (SAA), general public and a panel of medical professionals. The lay persons wanted to have a deeper insight into the movie which was based on the legendary life of Prof. John Nash, the Nobel Laureate mathematician, who combats delusions and hallucinations to regain his hold on reality.

No wonder, this Ron Howard directed Academy Award winner kindled hope for the near and dear ones of those suffering from this stigmatized illness. But the panel of psychiatrists, comprising Dr. Ulhas Luktuke, Dr. Shirisha Sathe and Dr. Shirish Ratnaparkhi, who addressed the gathering, had some hard talk to do.

The points that emerged from the discussion go like this.

- First and foremost is the fact which all concerned and involved in the care and treatment of persons with schizophrenia should bear in mind is that Prof. Nash was awarded the Nobel Prize in 1994 for the work done by him before he got afflicted with schizophrenia, an illness of the brain. It is wrong to assume that he got the coveted award for something which he did after becoming a schizophrenia patient. The doctors said it is necessary to understand

this particular point because otherwise the movie is likely to give the impression that a patient can develop the mental ability meriting such a recognition and thus inflating expectations from the patients and professionals.

- Prof. Nash is a schizophrenia patient with a difference and his case is unusual. Emotional deficit in every case can vary from one patient to another.

Dr Luktuke observed, "It is a story of love in the garden of schizophrenia and not a documentary on the illness. Russel Crow, the actor who played Prof. Nash, has presented the illness as subtle experience of life with various shades of delusions that become a reality for the sufferer. Prof. Nash struggles with hallucinations to arrest his own downfall. It is not expected of every patient to be as intellectually equipped as he is. Again therefore, do not push them too much."

- What needs to be understood in the positive light is that love, support and treatment (medicines) can help a patient to a great extent as shown by Alicia, wife of Prof. Nash who courageously accepts his illness. Even in the end, delusions continue to dog him as he struggles to conquer them by distancing himself from his symptoms.

Parents and care-givers of schizophrenia patients should have a realistic, adaptive approach. They should not mislead themselves by denying the problem or downplaying the limitations caused by chemical imbalance in the brain, resulting in deterioration of mental faculties. As pointed out by Dr. Shirish Ratnaparkhi, the support from Alicia and treatment prevented further deterioration of Prof. Nash, whose ailment only becomes manageable with progressing age, facilitating his social interaction.

So, does 'A Beautiful Mind' really offer a 'ray of hope' to patients of schizophrenia? It may belie expectations but it signifies the triumph of love and compassion. This is reflected in the words of Prof. Nash in the end when he says, "I am being awarded the Nobel prize for developing the mathematical equation with practical application. But the equation which I cherish and which is beyond all intellectual comprehension is the equation of love which came my way!"

Harish Joshi

Free-lance Journalist



Feelings can be expressed with culture and control.

Practise Effective Communication

Thoughtful communication always yields better results. This is more so in families having a shubharthi. Friendly and encouraging words, coupled with gentle persuasion, have better chances of succeeding than casual and careless utterances.

The following are just a few examples from day-to-day but important situations like a shubharthi not taking medicine, not helping in domestic chores or not participating in social functions :

Casual Way :

- 1) Why didn't you take the medicine so far ?
Have I to remind you every time ? You are a grownup person now. Why not take it on your own ?
Doctor has told you. We have told you hundred times that taking medicine is a must for you.
- 2) Why are you watching that TV the whole day ?
Why don't you help out your mother ? Do something, na, instead of simply idling and putting on weight !
- 3) What's the problem, I say ? Why don't you come for Joe's party ? Then you complain that people ignore you, they don't invite you. What do you expect us to do if you behave like this ?

Effective Way :

*Hey, Sameer, the medicine dose is waiting for you.
How would like to take it ? With water or with milk ?
Oh ! You had told me that you prefer it with milk.
You are much better taking medicine very regularly.*

*Sita, Mummy is about to make those crisp samosas.
You like them with chutney, I know. Why not give her a pleasant surprise by making the chutney yourself ?
You made the tasty green chutney for the sandwiches last time. You prepare it quite well.*

It is Joe's birthday today. Can you please gift-wrap this pen for him ? Last time when you packed the gift for Mike, everyone liked and appreciated it. Handover the gift yourself. It's 5.30 now and let's leave around 6.00.

All that needs is a little more practice of conversation with empathy, tact and patience. Then peace and cheerfulness are bound to be well-deserved rewards for the entire family. 'Try-fail, try-fail, try-succeed', is what the Recovery method of Dr. Abraham Low recommends. When you indeed succeed, please share your experience through these columns, to inspire other care-givers.

You may perhaps like to brushup the tips given by Dr. Avinash Vagha in his inter-active sessions for care givers on communication skills. The more you practise, the more effective will be your communication and more lasting your relationships. In this context, let us recall Mother Teresa's observation : KIND WORDS CAN BE SHORT AND EASY TO SPEAK BUT THEIR ECHOES ARE TRULY ENDLESS.

Gurudatt Kundapurkar



Majority of the average

With a blackboard to illustrate his point Dr. Low would draw a curve and relate it to the distribution pattern prevalent in nature. "Take a hundred trees," he would say, "You would find among them a few very tall-represented by one end of the curve-and a few very short-represented by the other. The rest of the trees would be of average size.

So among human beings. Through the long span of history you would find only a very few truly exceptional figures. Most people fall in the average range, with average accomplishments and an average capacity for committing indiscretions and absurdities..

*Source : MY DEAR ONES by Neil & Margaret Rau
Recovery Inc.*

I should lower my expectations.

SAA's Activities In Brief

- About sixty caregivers, shubharthis, professionals etc. participated in the Question & Answer session on schizophrenia and the movie, A BEAUTIFUL MIND, held at the Apte Prashala, on 5/4/03. The experts' panel consisted of Dr. Ulhas Luktuke, Dr. Shirish Ratnaparakhi and Dr. Shirisha Sathe. Dr. Jagannath Wani presided over the function.
- SAA moved into its rented office at 1827 Sadashiv Peth, Pune - 30, enabling it to expand services in mental health care.
- For the first batch of volunteers, caregivers and some social workers, training programme was started on 19/4/03. This ten-session programme was conducted by Dr. Shirisha Sathe and by Dr. Nitin Dalaya on the different aspects of schizophrenia and its management.
- To spread awareness and motivate caregivers of Nashik, a public function was organised, with assistance of Nasik Psychiatric Association, headed by Dr. Shirish Sule. Experts' team from Pune consisted of Drs. Vidyadhar Watve, Mohan Agashe, Hemant Chandorkar, Sajyot Deshpande and Shirisha Sathe. SAA was represented by Mr. Oak, Mrs. Bapat and Mr. Acharya. More than four hundred attended the session which was held on 26/4/03 at the Parshuram Saikhedkar Sabhagriha.
- On 31/5/03 at the IMA Hall, Nashik, a cross section of shubharthis, caregivers, volunteers and professionals participated in a meeting organised with the coordination of Nasik Psychiatric Association for helping formation of a support group of caregivers of mentally ill persons. SAA's experience was shared, including information on how the Ekalavya SHSGs of shubharthis and caregivers are conducted. Secretary of NPA, Dr. Jayant Dhake spoke, besides Dr. Sathe, Mr. Vartak, Mrs. Bapat and Mr. Gurudatt from SAA.
- For fostering fellowship, a get-together-cum-variety-entertainment by shubharthis was

organised on 14/6/03, when they displayed their talent. It was an enjoyable and dignified programme in which about 35 shubharthis, caregivers and volunteers took part.

- An orientation programme on schizophrenia and its various aspects was sponsored by SAA for General Physicians with assistance from Dr. Ulhas Luktuke and Dr. Nilesh Naphade on 24/6/03 at the Arogya Kendra, Pune. About 17 GPs took advantage of this programme, while Mrs. Madhura Bhatwadekar and Mrs. Bapat of SAA also spoke on the occasion.
- Arrival of books ordered from Recovery Inc., U.S.A., has helped lending them to shubharthis and caregivers so that with the improved level of awareness, management of the illness becomes more efficient and easier.
- Another orientation programme for the GPs, numbering about 25, was held at the Parinay Karyalaya, the main speakers being Dr. Luktuke and Dr. Naphade. Mrs. Madhura Bhatwadekar coordinated on behalf of SAA when this session was held on 12/8/03.
- Release of the Marathi book, 'Schizophrenia, Ek Navi Janeev,' by Mrs. Kalyani Gadgil was organised at the hands of the Chief Guest Mr. Anant Dixit, Chief Editor of Sakal, on 17/8/03 at the Gokhale Institute of Politics & Economics. Keynote speaker was Dr. Soumitra Pathare who appealed for fresh and humane approach in treatment and rehabilitation of mentally ill (Cont. on page 12)

Being Myself

(Peep into the resolve of a mentally ill person)

Am also a rose like any other
With thorns that seem to bother.
Why then sneer and single me out
As if cactus that's prickly 'n stout ?
Bah ! Better be cactus, a nature's wonder
Known to thrive in drought 'n thunder !
Being different is natural, no sin;
Whatever, let me be myself 'n grin.

Gurudatt Kundapurkar

Temper is our worst enemy, humour our best friend.

(from page No. 11)

persons. Dr. Jagannath Wani expressed hope that this Marathi book will fulfill the need of affected families of Maharashtra.

- With the assistance of Dr. Chandorkar and Dr. Naphade entire gamut of schizophrenia management was discussed at the orientation programme for 25 Nos. GPs. Mrs. Bapat gave a brief about SAA's activities, especially the Ekalavya SHSG for shubharthis and caregivers. Coordinator Mrs. Bhatwadekar thanked the participants.
- At the Mumbai function of Marathi book release, 'Schizophrenia Ek Navi Jannev,' Mr. Vijay Tendulkar was the Chief Guest and the keynote speaker Dr. Janhavi Kedare. This function held at the Nehru Science Centre on 24/8/03 was well attended by shubharthis, caregivers, professionals, journalists etc. Mr. Oak of SAA narrated services rendered by his organisation and also thanked for the cooperation of Dr. Harish Shetty's support group Maitri.
- Dr. Avinash Vagha, a surgeon-cum-behaviour therapist, engaged caregivers separately on 23/8/03 and 24/8/03 and conducted interactive sessions on communication skills and problem-solving techniques. About 65 caregivers were happy participants of these sessions held at the Scout Hall.
- SAA's five representatives participated in the workshop organised by the Bapu Trust on alternative healing systems available for mental

health care. Ms. Nishreen, Mr. Vartak and Mr. Gurudatt made a presentation on the Recovery method, followed by a demo by shubharthis on 28/8/03. The three-day workshop covered topics like homoeopathy, dance, drumming, music, NLP, play, diet, besides Recovery method.

- 1st to 3rd Sep. 03 was a programme sponsored by Rotary Club for SNTD girl students from the Marathi stream on personality development. SAA's representatives, Dr. Sathe, Mrs. Bapat and Mrs. Godse made a presentation on mental health, support groups for caregivers and shubharthis for about 60 students.
- A modified training programme for caregivers was started by Dr. Shirisha Sathe from 27/9/03 based on the feedback received for the first such programme held earlier. This has been appreciated by 15 participants who have given additional course inputs for future inclusion.
- Attendance by shubharthis and caregivers has noticeably improved after the local press has been giving coverage to SAA's activities and services. There is also increase in the membership of SAA by caregivers.



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