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/* ----- The CSS rules offered here are just an example, you may use them as a base.
Shape your 'expand/collapse' cont so that it meets the style of your site. ----- */ #cont {
width:100%; margin:0 auto; padding-bottom:20px; overflow:hidden } .demo {
/*margin:0; padding:1.5em 1.5em 0.75em; border:1px solid #ccc; position:relative*/ }
.collapse p {padding:0 10px 1em} .top{font-size:.9em; text-align:right} #switch, .switch
{margin-bottom:5px; text-align:right} /* --- Headings --- */ .expand{padding-bottom:.75em}
/* --- Links --- */ a:link, a:visited { border:1px dotted #ccc; border-width:0 0 1px;
text-decoration:none; } a:hover, a:active, a:focus { border-style:solid;
/*background-color:#f0f0f0;*/ outline:0 none } /*a:active, a:focus { color:red; }*/ .expand a {
display:block; padding:8px 8px } .expand a:link, .expand a:visited { border-width:1px;
background-image:url(images/img/arrow-down.gif); background-repeat:no-repeat;
background-position:98% 50%; } .expand a:hover, .expand a:active, .expand a:focus {
text-decoration:underline } .expand a.open:link, .expand a.open:visited { border-style:solid;
background:#eee url(images/img/arrow-up.gif) no-repeat 98% 50%; } What
is the Recovery method?
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The Recovery method is a compilation of many simple yet practical coping techniques. To gain inner peace, shubharthis learn how to change the way they react to people and situations over which they have no control. They also learn how to identify and manage negative thoughts, feelings, beliefs, and behaviour that can lead to emotional distress and stress- related physical symptoms. This self-help technique is learned through studying the Recovery literature, regular attendance at the weekly meetings, and, above all, daily practice.

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Can the Recovery method be described as a therapy? And what is the difference between self-help and therapy?

Answer to the second part of question will help clarify the former automatically. In therapy there is a therapist-client relationship and usually the therapist plays a directive role in helping the client. In self-help, on the other hand, there is no such one-to-one relationship. The person needing help is trained in some technique, say, Recovery method, and he learns to practice and master it by himself, on his own initiative. In a self-help group there is no dependence except on the method. Thus, Recovery is not a therapy administered by a professional. Changes in the shubharthi after consistent use of this method may lead one to believe it is a therapy.

However professionals who have studied the method concede that it has the scientific basis of CBT, that is, 'Cognitive Behavioural Therapy.' All the same, we are more concerned with the outcome of internalizing the method.

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What happens at the weekly meeting?

The shubharthis meetings begin at 4.30 pm every Saturday and continue until 6.00 pm. Each meeting has a similar structure: The meeting begins with self-introductions if any new members are present.

After this members volunteer examples that describe how they have used this self-help method to cope better. Sharing is done in four steps laid down by the Recovery method, which I will explain in detail in some time. Every member gets a chance to share his/her experience. After this sharing, if time permits, some of the coping tools or recovery literature is read and discussed.

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Can you elaborate the term Recovery Method?

Dr Abraham Low, a neuropsychiatrist, introduced this method in 1937 in the US. He found limitations in the traditional methods used to treat mentally ill persons. He found that patients found more relief when they were taught simple strategies to deal with day-to-day problems. When he started introducing his method in hospital groups and mental institutions he faced a lot of resistance from his colleagues. Despite this, he was committed to provide the benefit of this method to as many patients as possible. Now, about the actual method; Shubharthis meet in a group and they share their experiences in a four-step format.

1. Briefly describe the event coped with.
2. Narrate the physical and mental symptoms experienced due to this event.
3. Which tools of Dr Low did you use to cope with this event?
4. Compare the experience before and after using the Recovery method.

In the first step, the person who is sharing has to recall a single event, which upset him. Care is taken to see that the event chosen is one specific event, not a general issue like marriage, employment etc. It should be one single thread of an event. For example, the person may have had an argument with his sibling that morning. He simply describes that specific argument without getting into his sibling's general attitude, past experiences etc.

In the next step the person shares with the group the symptoms, both physical and mental, while the event occurred. For instance, he may have felt blood rushing to his head, palpitation, throat drying up, hands trembling etc.

Now the third and a very important step: being able to recall any of Dr Low's tools at the crucial time. This is known as spotting appropriate tool to cope with the event. For example, he may have recalled the tool "My internal peace is my supreme goal." And this may have made him take a better perspective of the situation and be able to maintain peace instead of ending up in an argument.

In the last step, he tries to understand what would have been the situation had he not used the method. Perhaps, in this particular example, the person would have let the argument escalate to such an extent he could have lost control. But because he used the tool in time, the situation got resolved without any harm. After sharing the event in these four steps the person endorses himself for his effort to use the method and deal with his symptoms.

I hope I have been able to explain this method to your satisfaction. However complete understanding would come only after one actually attends the support group meetings.

After this whole cycle is completed others from the group also endorse him. Further they 'comment,' as it is called in 'Recovery' language, i.e. they express as to what other tools also he has unknowingly used in dealing with this event. Thereafter it is someone else's turn in the group to share.

Recovery self-help support group advantages:

- Helps release pent-up feelings.
- No fear of criticism or judgment.
- Breaks stigmatized isolation.
- Encourages socialization.
- Generates a sense of belonging.
- Opportunity to learn from each other.
- Promotes mutual inspiration.
- Supportive attitude of members.
- Builds sense of hope & security.
- Helps members develop insight.
- Triggers self-initiatives.

- Nurtures self-confidence.

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**Please site a few more examples of Recovery tools?
spotting tools of Dr Low.**

Some important

1. Maintaining inner peace is my supreme goal.
2. My internal peace is more important than my anger.
3. Helplessness is not hopelessness.
4. Nervous symptoms are distressing but not dangerous.
5. I can't control external but only my internal environment.
6. Setback is part of life. I am an average person.
7. Feelings are not facts.
8. People do things that irritate us, not to irritate us.
9. We can't control feelings & impulses; we can control muscles and thoughts.
10. We can't control outer environment but we can control our reaction to it.
11. Illness is fate-appointed, not self-appointed.
12. We can break old habit patterns.
13. Endorse for the effort, not just for the outcome.
14. Have the courage to make a mistake.
15. There is no right or wrong way to view trivialities of everyday life.
16. Feelings will rise and fall if we don't attach danger to them.
17. Changing our thoughts from insecure thoughts, to secure thoughts.
18. It is hard to feel comfortable in an uncomfortable situation.
19. Try-fail, try-fail, try-succeed.
20. Don't look regretfully into the past or fearfully into the future.
21. I should lower my expectations.
22. Recovery method is simple but not easy.
23. Fear feeds the symptoms and the symptoms feed the fear.
24. Every act of self-control leads to self-respect.
25. Strive for peace, order and balance.
26. Fearful anticipation is worse than the realization.
27. Be willing to bear discomfort and comfort will come.
28. Self-imposed expectations lead to self-induced disappointment and frustration.
29. Commanding your muscles to move transforms the vicious cycle of helplessness into the vitalizing cycle of self-confidence.
30. Don't measure good mental health by how you feel.
31. It is how you function, not how you feel.
32. Feelings can be expressed with culture and control.
33. Practice being self-led, not symptom-led.
34. Thoughts can be rejected, suppressed or dropped.
35. Controlling your speech muscles.
36. Take the total view.

37. Lower your standards and performance will rise.
38. Re-training the brain.
39. Do it in part-acts.
40. Excuse rather than accuse.
41. It happened by chance, not by choice.
42. Self-appointed expectations lead to disappointments.
43. Be group-minded.

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Is sharing of an experience in the group meetings compulsory? I may not feel like sharing some time?

There is no compulsion to share. You may share when you think you are ready. Being an attentive observer at the meetings is also a good learning experience. On the other hand you stand to gain much more by actual sharing in the four-step format.

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A shubharthi shares his experience, which is normally success story of coping with a disturbing situation, using the Recovery method. What does he do, if he had undergone a disturbing event, but he had not used the Recovery method?

If a shubharthi had not used the method to cope with the event but still wants to share, he simply narrates the first two steps. Then he tries to identify there itself which tools he could have used to cope while the event was going on. He skips the fourth step. Similarly, during commenting, group members identify other tools he could have used and encourage him to use the method next time he encounters a disturbing event. After all, hasn't Dr Low suggested 'Try-fail, try-fail, try-succeed' and also 'Neither look regretfully into the past nor fearfully into the future?' Is it not better to 'Excuse rather than accuse oneself also?

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At the weekly meetings of shubharthis do you have any activities other than practice of Recovery method?

Once the members finish sharing their experiences and if we still have time to spare, we read aloud some portions from Dr.Low's books. This is followed by discussions on it. At times we also discuss what is meant by specific tools, say, 'Endorse for the effort, not just for the outcome' or 'Fearful anticipation is worse than realization.' This improves our understanding and

our ability to use the tools.

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Why does the Recovery method insist on sharing experience in the four- step format only?

The simple method provides a clear, structured, and brief format. Before this method was introduced, meetings held in a non-structured fashion were not fruitful. In such a flexible form discussion was often dominated by a few members. Focus was on their problems and suffering. Another major risk is going off the track. The four-step method ensures that participants briefly narrate the disturbing event and then proceed to share success stories. Thus, the four-step structure has positive impact.

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How do you overcome the language barrier as the Recovery tools and procedures are all in English?

Members are encouraged to learn or become a little more familiar with other languages. Shubharthis take turns to translate the shared examples into Marathi, Hindi or English. Usually nobody experiences great difficulty due to language barrier. Moreover, guidelines and Recovery tools have already been translated into Marathi, the state language of Maharashtra state. Translation of Dr Low's most important book, "Mental Health Through Will Training" is in process.

At Pune we now have separate groups for Shubharthis who are comfortable with English and another one for Marathi.

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What Types of problems does Recovery help manage?

The Recovery method offers techniques to help manage a wide variety of problems such as anger, stress, anxiety, depression, exaggerated fears, compulsions, obsessions, phobias, etc. Members learn how to observe and cope with nervous symptoms such as palpitation, dizziness, shortness of breath, sweating, fatigue, headache, numbness, chest pressure, and lack of sleep.

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How will Recovery help me solve my problems?

Members learn specific strategies for coping with the stress and strain of everyday life. There are no hopeless cases. Recovery does not deal directly with past problems or analyse the causes of problems. Simple day-to-day experiences, as they arise are dealt with. This has a beautiful utility. You see, it is these small trivial issues, when not dealt with at the very moment that build up over a time. They start forming layer over layer and end up as a huge problem which we describe as anger, fear etc. The Recovery method encourages you to deal with these issues then and there.

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What do I do if I have a major problem?

Members with a major problem and wanting additional help are encouraged to seek advice from appropriate professionals.

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Is there any time when one stops coming to the Recovery group meetings? If yes, what are the reasons?

This does happen sometime. Generally to avoid embarrassment, we do not ask a member the reason. His freedom of choice is respected. As we have emphasized time and again, we want to create a free and secure environment. Many times the member himself confesses he regrets that he missed the last meeting!

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How long does one need to attend these weekly meetings?

This depends on the person, the nature and severity of his condition. The goal is for members to attend until they learn the Method well enough to function independently and efficiently. Let us remember that it takes more than a few weeks to master new skills and change old habits. After you have achieved mastery over the method, you may still choose to attend the meetings for purposes like socialization, support, endorsement, friendship and to motivate new comers.

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When can one expect improvement his/her condition?

As one starts using the Recovery stress management tools on a daily basis, one begins to experience improvement. But, the extent and quality of improvement will vary from person to person. Only understanding the method is not enough, its application in daily life is what is more important.

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Are there any books on Recovery? And where can one find them?

The main textbook "Mental Health Through Will Training"~ written by Dr Low, Recovery's founder, is available in our library. Audiotapes and other books are available for use at the SAA premises, during office hours. Sometime you may find extra copies available against payment. One can also order them through the official website.

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Does the shubharthi stop using medication when he starts feeling better using the Recovery method?

No. It is solely the doctor's prerogative whether to increase, reduce or stop medication after assessing the progress being made by his patient.

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If one takes part in the Recovery group meetings, can one stop seeing his/her health-care provider?

It is advised that one continues to see his/her professional. Group members, who are lay persons, do not diagnose illnesses or symptoms. When ones not sure if a symptom is caused from tension, strain or a physical ailment, it is necessary one sees a doctor for diagnosis.

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Does the use of the word 'recovery' create unrealistic expectations about the method when it is widely believed that schizophrenia is life-long?

Schizophrenia may no doubt last lifelong in some cases, but that doesn't mean the person needs to suffer lifelong. Just as we learn to live as comfortably as we can with other ailments like diabetes or hypertension there's nothing much different in case of mental illness. As long as you take necessary treatment and precautions and also strengthen your physical/mental self, there's nothing stopping you from feeling and being 'recovered.'

The word 'recovery' indicates progress on the path of improvement. A gradual positive change. Hence this word is applicable for a person at any level of his wellbeing. In fact persons who have attended Recovery groups have not only recovered but they also serve as facilitators or motivators. Some members of our groups can be said to be role models.

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Is there no risk in using the word 'recovery' as it is likely to give rise to false hope and consequent disappointment?

The philosophy we follow says, "There are no hopeless cases!" It is only when we believe and strive do our dreams turn into reality. We don't promise miracles when you start attending group meetings and follow the Recovery method. Another point to remember is, once you've internalized the method, even if there is a relapse, you will never return to square one. You will remain a few points higher. The power of the method lies in steady progress. And this is the experience of hundreds of shubharthis who have been using this method.

We thus don't believe the word 'recovery' is in any way misleading. In fact, it points to the true path every person with a mental illness must undertake.

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Do shubharthis feel the absence of professionals at the weekly meetings?

None has experienced it so far. In the non-judgmental and empathetic atmosphere of our group meetings, the need for a professional is unlikely to be felt. It is possible that the shubharthi is already in touch with his doctor or counsellor. Further it is not that professionals never visit our SHSG. They lecture or guide, once in a while, at our invitation.

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As sharing consists of personal details, are they treated confidential?

Confidentiality is definitely maintained. Members may choose to share their experiences, their own successful efforts using the Recovery method. Recovery support group meetings provide a safe place for members to express their feelings, what upsets or frightens them. Yet there is no compulsion to share, because you may attend the meetings and not share anything until you feel safe and ready. This helps many who find it difficult to open out quickly. Supportive atmosphere here is created because there is no judgment passed. Plus, what is discussed remains within the group.

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What if my shared experience is leaked out by members to outsiders as that could increase my suffering?

We have noticed that when persons newly join the group and are yet to get familiar with members their fear of confidentiality is high. As one becomes acquainted, comfortable and trusting of group members, gradually the fear subsides. The very basis of such a group is mutual trust. Everyone shares his/her personal problems and experiences, and thus all have equal stake. Further, as members gradually get over fear of stigma also, confidentiality will not be an issue.

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Special Recovery phrases and words are used in these meetings. Why is this so?

Recovery vocabulary allows members to objectively report and discuss their feelings, fears, experiences and symptoms. The simple but specific expressions of the tools comprise of the Recovery language. These pre-determined phrases are easy to learn and to use in daily life. At all of the Recovery meetings, members use the same format and terms. This makes it easier for a member to attend Recovery group meetings anywhere in the world. Uniformity of Recovery language eliminates chances of ambiguity.

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How do I learn to share experience in a structured way?

The facilitator will help you as you give your first example about something that upset you. You will also learn by listening to others as they share their experience. It is quite normal initially to be nervous about participating in the group. As you realize that there is no criticism or judging, you will feel comfortable to share without hesitation.

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When does one start to comment on another member's example?

When one has learned a couple of simple Recovery tools from either listening to others at the meetings or reading Recovery books, one will feel confident to do this. As part of a disciplined group one is expected to wait for one's turn to comment, as one does for sharing one's experience.

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Does the Recovery method work for shubharthis?

The Recovery method works not only for persons with mental disorders, but also for anyone else who needs some help in facing day-to-day situations. But to answer your specific question why, when trivial issues are dealt with ineffectively they build over time causing intense anger, frustration, fear, insecurity and so on. These in time go on to develop into symptoms. What Recovery method does is to nip these symptoms in the bud, so to say, so that there's no scope for an unhealthy manifestation. In brief Recovery method works effectively because it has all the essential components:

- Shubharthi learns to identify distressing symptoms.
- Learns to act by selecting appropriate tool.
- Learns to endorse/appreciate whatever little success he has achieved or effort he has made.
- Non-judgmental atmosphere provides right encouragement, which is needed.

I would like to clarify one thing here though. This method is purely psychological and so it does not address the biological cause of mental illnesses. Recovery helps deal with its symptoms. Thus, a shubharthi cannot substitute psychiatric care with this method. In fact to derive maximum benefit both have to be undertaken simultaneously.

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Does the Recovery method work equally well for all the participants? If not, why so?

Like it applies to all other facets of life, benefits and effects of this method too may vary from shubharthi to shubharthi. There could be many factors which affect the outcome. For example, the individual level of motivation, persistence in effort, intensity and duration of illness, personality, faith in the method, shubhankars' encouragement etc.

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Why is the Recovery meeting limited to once a week only? As benefit depends on one's skill in using the method, why not more often?

Everyone has time constraints. To attend support group meetings more than once a week for an hour and half could be difficult and it may actually lead to some dropouts.

On the other hand, with sufficient trained manpower two groups may decide to meet on two different days, say, on Thursdays and Saturdays. Those who want to participate more than once a week will be able to do so. Perhaps, for those for whom Saturdays are not suitable can attend on Thursdays rather than not participate at all. Today manpower is our primary constraint.

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Do the benefits of Recovery method have lasting effects or not? If not, why not?

As long as the shubharthi attends the Recovery group, practises the method meticulously and experiences its lasting effects. Quite obviously, if the person stops practising the method, whatever be the reasons, he will be unable to experience its benefits. We have heard shubharthis tell us that once they have internalised and use the Recovery method habitually it has significantly changed their lives for the better.

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Do I have to come alone to the meetings?

No, one is welcome to bring supportive adult family members or friends with him/her. In fact, many shubharthis attend the Recovery meetings while their shubhankars attend the parallel support group meetings meant for them. Shubhankars do not attend these Recovery meetings.

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Why is the Recovery method, developed more than 65 years' ago, valid today also? Have there not been any changes effected to better serve the purpose?

The method is old, no doubt; but it deals with human mind. And the basic principles of working of the mind are the same even after years. They are also applicable universally. This method was developed by Dr Abraham Low after years of studying and experimenting with numerous patients. Hundreds of Recovery support groups are in existence all over the world and popularity continues to grow.

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