

A Report on Residential Reintegration Camp for Recovering Persons with Mental Illness



**Social Welfare Agency & Training Institute (SWATI),
Paburia, Kandhamal - 762112 Odisha**



Residential Reintegration Camp for Recovering Persons with Mental Illness

Theam: Comprehensive community care and reintegration of persons with mental illness

Duration: 5 Days (From 27 September 2023 to 1st October 2023)

Organised By: Social Welfare Agency & Training Institute (SWATI), Kandhamal, Odisha

Supported by: Misereor (Germany), MHI (Mumbai), BNI (Bangalore)

Venue: SWATI Resource Center, Bandhagada, Kandhamal

Participants: 15 numbers of mental illness recovered persons, their care givers/ Family members, Coordinators and Community Organisers of the Mental Health Project, Sister Christina and Manasa from partner organisations of Karnataka.

Facilitator: Dr. Rajaram, Basic Needs India, Bangalore

Objectives: To demonstrate the practical inclusive ways of supporting the recovering PWMI.

To establish process focuses on rebuilding their life skills that they lost due to illness and generates community awareness on the challenge PWMI and their families go through.

To increase the understanding and behavioural skills among the PWMI and their family members.

Method – Participatory,

Tools – Discussion, Game, Dance, Song

Materials - Rough Papers, Gum, scissors, Sound box, Music Player for game and dance.

Day – 1

Inauguration:



First, Chief guest Dr. Purohit of Chief district medical office, Dr Rajaram, The training facilitator and Sri Pradip Swain, Program coordinator, SWATI inaugurated the session by lighting the lamp. In his speech, Sri Pradip Swain, Program coordinator, SWATI, spoke about the program and the need for this camp. The chief guest, Dr. Purohit, spoke about the treatment system for the mentally ill persons in the Government Medical Centers. He said that mentally ill people

cannot fully recover from medication alone and for this they are in urgent need of social support. A mentally ill person can recover up to 80% with medication, but the remaining 20% requires the support of family, neighbors and community people. Therefore, parents and relatives should know how to show sensitive behaviour towards the mentally ill person after he/she recovers and how to encourage him to do various activities. There is no special opportunity in the government system to do this social mobilisation or orientation work and he thanked the organisation for doing it through its own programme.

Dr. Rajaram also discussed the Psychosocial Reintegration of mentally ill persons who have recovered and for this, the family members of the person need to know how to understand his mentality and how to take steps. During the illness, the person loses the skills of daily activities, communication and social skills that he had. Medical treatment can reduce the symptoms of a person's illness, but it cannot restore the skills lost due to the illness. Often the mentally ill person gradually withdraws from the community and exhibits loneliness, isolation, and oppositional attitudes. It is necessary to rebuild their life skills that they lost due to illness and generates community awareness on the challenge PWMI and their families go through. He informed that this 5-day camp will help us to know and understand each other.

Felicitation

All the caregivers were felicitated by the organization for taking proper care of the PWMI and recovering them.

Self – Introduction

At the beginning of the second session, everyone introduced themselves. Since such a program was new to them, they seemed a bit nervous and showed some reluctance to talk about themselves. Seeing their helplessness their care givers tried to help them, but the facilitator refused them to do



so and said that they need to be given the chance to present themselves because it will increase their confidence level of expression, which they had lost due to illness. The mentally ill persons took a little longer to introduce themselves and they are looked very happy to be able to introduce themselves.



The care givers were asked to present what skills they felt the mentally ill person have lost as a result of the illness and what changes in their behaviour have occurred. All the care givers elaborated their problems and pains in treating and caring for mentally ill patients. They reported that although the mentally ill persons are recovered from illness, they are not as capable as normal people and

there is constant fear for their safety

Expectations from the camp:

The facilitator asked everyone to share what they expected from the camp. The care givers said that they hope to get counselling and advice on how mentally ill persons can return to a normal life. They expressed interest in knowing what government facilities are in place for the rehabilitation of mentally ill recovered persons. On the other hand, the mentally ill persons did not give any answers at first, but later expressed a desire to learn how to become self-sufficient.

Knowing Each other

All this revealed that there is a lot of reluctance, isolation attitude and lack of confidence among the mentally ill recovered persons. So, the facilitator made a game – “Goat and shed” to ease them out of their hesitation. This game activated them a lot.

After that a group discussion session was held to familiarize the participants with each other. First the large group was divided into 5 smaller groups and each team chose



a leader and a reporter. The teams were asked to sit in separate places and get to know each other through conversation with their team members. It was observed that the mentally ill recovered persons did not take part in the discussion, so the team leaders were advised to give more attention and importance on them. Gradually they became involved in the discussion.

Distribution of responsibilities:



In the last session, responsibilities were distributed among the teams. A team was responsible for cleaning the compound and accommodation area and serving morning tea. Similarly, one group was responsible for cleaning the training room, one group for lunch, one group for dinner and another group for evening entertainment. In addition, it was decided that the members of each group would look after the daily routine works, physical hygiene and diet of

the members of their own group. These responsibilities were rotated daily from one team to another. Similarly, the participants were asked to choose one reporter and one time keeper each day.

Day – 2

There was a bit of chaos at the start of the second day as one of the PWMI participants insisted on going home. Seeing his behaviour, his mother also wanted to take him back home. The training facilitator collected all information about Pintu from his mother and told her not to take his words seriously.

For that 18-year-old boy Pintu, coming to such training was completely new and he had never been outside the village before. Even at the age of 18, he had the mental state of a 10-year-old child and always lived with his mother. On the first day of the camp, Pintu felt lonely as everyone didn't get sufficient chance to get to know each other. Besides, the biggest problem for him was that he was not very much acquainted with eating outside foods and he did not like to eat the breakfast provided in the camp. So, he did not take breakfast and insisted to his mother to go back home. He calmed down after the camp organizers provided him with food of his choice.

The session began with a prayer by an elderly PWMI care taker. The training facilitator then asked the whole group to sit in the small groups that had been done the previous day and discuss yesterday's discussions among themselves and also discuss each other's family situation.



The PWMI's seemed a bit more relaxed than the previous day as everyone was getting to know each other to some extent. These group discussions gave them more opportunities to get to know each other. The discussions focused on giving more opportunities to the PWMI's. After the group discussion

the group leaders presented the discussion points in whole group. The care givers presented their problems and challenges they faced while taking care of the PWMI and expressed their worries about their future life.



The facilitator Dr. Rajaram elaborated the responsibility of family members in the curing process of PWMI. He said that the care givers and family members have major role in treatment and rebuilding the skills of PWMI. The care givers should follow the instructions of doctors strictly while giving the medicine to the PWMI. There may be some side effects while taking the medicine, so without worrying about it, we should consult our doctor without

increasing or decreasing the doses of the medicines. The facilitator also described different symptoms of side effects and suggested remedies for it. After the discussion, the participants were treated to a fish and net game to relax their minds. Everyone participated with great enthusiasm.

In the afternoon session everyone was asked to draw mehndi tattoo and those who were interested in drawing mehndi were provided. They painted mehndi on other participants' hands. It was observed that 3 PWMI were painting mehndi on the hands of others and all the PMIS were enthusiastically painted tattoo on their hands. This activity was very helpful in reviving and stimulating their creativity.



Dance and cultural programs were held in the evening session and everyone participated with great enthusiasm. The PWMI were seen happily participating in the dance and song, and Pintu, who wanted to leave the camp in the morning, was looked to be very happy. He mingled with others and spent time in their company.

Day - 3



The first session of the third day began with a prayer by the youngest PWMI care taker Sibani, a 5th standard student and the daughter of a MWMI Syamsundar. Then the participant responsible for writing the report presented the report of previous day and others gave their opinions on it. Then the group selected a PWMI girl Sindhusuta

Kanhar to write that day's report. At first, she was reluctant but later agreed and a community mobilizer was assigned to assist him in this task. Similarly, another PWMI Ashish took the responsibility to facilitate the group with a game of his own. He played electric current and switch game with whole group. It was an interesting game and all the participants enjoyed a lot.



In the second session the journalist forum of Phringia block participated in the camp and discussed with the participants and facilitator. They interviewed the care takers about their problems and assured them to publish all their plea in the mainstream media.

The afternoon session started with a body exercise game and the participants played the game by shaking their heads, hands, legs, hips and different parts of the body. They also tried to move their hands in opposite direction and tried to write their names through legs. After that they discussed their experiences in small groups.

The evening session was very much interesting with traditional dances and songs by the participants. It was observed that the PWMI's were very happy and joyful than other days.

Day – 4

Everyone looked fresh today. It was rained last night, causing power cut and there was lack of water for bathing and toilet. However, it was seen that all the participants went to the nearby pond and were ready by 7 am finishing their morning activities.

The morning session started with a patriotic chorus song by one of the aged caregivers and every one enjoyed the song. After that Sindhusuta, one of the PWMI's presented the previous day's report prepared by her. The report was well prepared with all details and discussion. Everyone appreciated her report and presented their own views. Most of the participants were surprised as to how the girl who was silent most of the time could prepare such a beautiful report! From this it was understood that given the opportunity, PWMI's can handle their tasks and responsibilities very efficiently. Her father, who came as a caregiver, was also very happy with his daughter's performance. Impressed by this, another PWMI took it upon himself to prepare today's report.



In the second session, the trainer discussed the mental state of the patient. When a person is in a normal state, there are many skills in him/her to continue a normal life. There are many

skills in him/her to carry out the daily works, to make relationship with others, to go out of the village, using which he achieves all the tasks. He /She understood his/her responsibilities within his/her family and could make decisions about the studies or career. But when he/she suffered mental illness then he/she experienced many difficulties and could not concentrate. So, when he/she wanted to do something, he/she didn't know how to do it and confused. Gradually he lost all the basic skills and felt isolated. So, after he/she recovers, we should help him to regain the skills he/she lost. If we don't give him any responsibility reminding her/his previous helplessness then it will take him/her a long time to recover the lost skills and he/she will be a burden on others. So, it is necessary for the caregivers and family members to help the person to recover his/her skills first.



In the afternoon session the participants made local food recipes and every one enjoyed it. The participants also participated in ball and bucket game. In the evening everyone participated in cultural program.

Day - 5



It was the closing day of the camp. During the last 5 days stay everyone got to know each other intimately and became friends. So, everyone looked a little emotional knowing they would be separated from each other today.

On this day Er. Harisankar Rout, the secretary of SWATI joined the camp. As usual the session was started by singing a song. Mr Ashis kumar, a PWMI presented the report. The participants gave their own

comments on the report and added the matters he had missed.

After that all the participants presented their experiences of the camp. Then caregivers presented their views about the camp and talked about the changes of the PWMI's from their own experiences. They also expressed their learnings from the camps. The community organisers and the coordinators also spoke about their experiences and learnings at the camp. In the last the secretary of SWATI thanked everyone for attending the 5-day camp and gaining some knowledge. He said that the family and community have the biggest role and responsibility for the well-being of the mentally ill people and everyone must support their social reintegration. Finally, everyone bid farewell to each other and the camp ended.

Learnings/Realizations

It was observed that the PWMLs were more disciplined and punctual than normal people. In the beginning the organizers thought that it might be difficult to conduct a 5-day camp with PWMLs, but that did not happen and their performance and behavior eased the worries of the organizers.

The caregivers managed their responsibilities with that of the PWMLs so diligently that within 5 days there was no complaint or illness in anyone's body.

As a result of the training, the behavior and working style of PWMLs improved day by day.

In this camp, the PWMLs and their caregivers got a chance to interact well with each other and understand each other.

Caregivers realized that it was possible for PWMLs to regain their basic skills.

In the camp, the PWMLs got an opportunity to showcase their creative qualities like drawing, writing, singing, playing games, making reports etc.

In the camp, the patients were seen paying attention to their physical hygiene and cleanness.

The caregivers realized that mental illness could not be cured by any witch craft or traditional medicine.

The caregivers realized that if the mentally ill are given a chance, they will be able to do their own activities.

The camp helped boost the confidence of PWMLs and the caregivers towards social inclusion.

