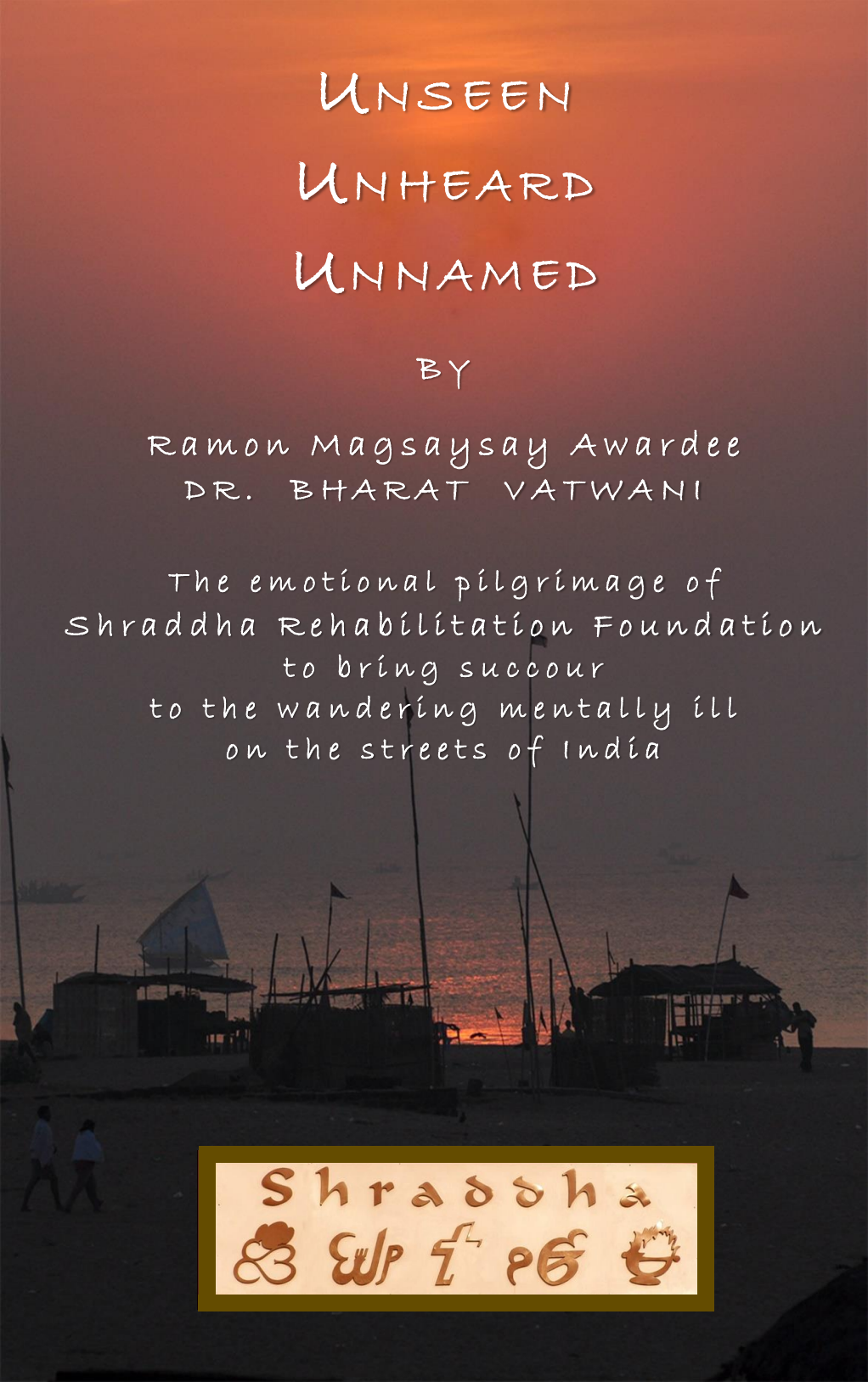


UNSEEN UNHEARD UNNAMED

BY

Ramon Magsaysay Awardee
DR. BHARAT VATWANI

The emotional pilgrimage of
Shraddha Rehabilitation Foundation
to bring succour
to the wandering mentally ill
on the streets of India



S h r a d d h a
ॐ ॐ ॐ ॐ ॐ

It is a long life,
and it is a long shore,
and we strive to reach you,
on a distant coast,
the sea stretches on
for endless sights,
and across the seas
lies my knowledge,
my wisdom &
my inner core.

We strive to reach you,
O God,
Please come home..



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DR. BHARAT VATWANI

Foreword by

Smt. Maneka Sanjay Gandhi

Drs. Prakash & Mandakini Amte

Unseen Unheard Unnamed

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Dedicated to the Gods above
and
Their last disciples on the face of this earth,
vestiges of human existence,
the mentally ill
wandering aimlessly on the streets,
in this beloved world
of ours

On the back page of a book 'The Buddha and his Dhamma' by the renowned activist and the drafter of the Constitution of India Dr B.R. Ambedkar is printed 'If you are finished with it (the book), please pass it on to others or offer it to a monastery, school or public library. Thanks for your cooperation.'

In a world where privacy of rights is enshrined and fought for, I felt that this passage was brilliant. It allowed the propagation and dissemination of a thought.

A thought cannot and should not have any reservation of rights.

While an autobiography may give importance to the journey of a person, ultimately the person passes away and so does his autobiography. All that sustains is a thought, an idea and the goodness (if at all any) within that thought and the idea.

I would like the people who read my book to treat it as such. A thought in the direction of a cause. The cause of the wandering mentally ill roadside destitute.

And I hold a personal solemn belief that if the thought has some innate inherent goodness in it, it might/will be communicated and propagated, but if the thought does not, then it deserves to die its silent death.

Ultimately, truth is Truth only when it has the capacity to stretch beyond the limits of all endurance, light is Light only when it has the capacity to pierce the darkness. There has to be a perseverance of belief to outlast all beliefs that Good and God shall prevail.

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Foreword by Smt. Maneka Sanjay Gandhi

Many years ago, a Western country giving funds to India decided to put their money into mental health. I remember the debate that followed when government servants tried to talk them out of it, saying the money should be put into “more productive” areas.

Government decides policy and money allocation. Since Independence all ministries have been divided by invisible silos into hard, soft and very soft. The money and attention, the best administrators, go to the hard areas: finance, commerce, steel, heavy industry, medium industry, aviation etc. The soft areas get the leftovers: health, education for instance and the very soft get the leftovers of the leftovers: culture, women and child development, Ayurveda, statistics. Within these soft ministries, there are soft areas: for instance, the health ministry concentrates on the eradication of specific diseases and on building hospitals. There is absolutely no attention to mental health at all. But it is the softest of the soft areas that feed into the hard. If the soft goes bad, there is no way the hard areas can do well.

Mental health problems need to be prioritized, diagnosed, prevented and treated. And those mentally ill who are destitute need to have institutions that can help them. So far, all that government offers are “lunatic asylums” which have been built during the British era and are extremely patient unfriendly and old fashioned in their treatment.

I had heard of Dr Vatwani from friends who admired his work and we started corresponding before he and I met. My heroes in India are people who do good in unusual ways, ranging from people who make seed banks,

to water restoration geniuses, forest builders, organic food promoters, animal welfarists, people who provide free legal help to the poor, people who dig out and preserve village folk cultures: the list is long but it encompasses all those who tread where government does not. Dr Vatwani is unique in what he does.

You and I have, over the years, seen many people lying unconscious on the street. Whenever I have remarked on it, the answer is invariably that they are “drunk” and to my shame, I have always let it go at that. It is Dr Vatwani’s work that opened my eyes – that these poor unfortunates were probably not sleeping off a night of binging on alcohol but needed immediate help. What they get instead is a stick on their backs from an unsympathetic policeman.

It takes a profound level of empathy to ‘see’ these ‘invisible’ people on the street, treat them and nurture them back to health. Dr Vatwani and his dedicated team at Shraddha Rehabilitation Foundation, have treated thousands of mentally-ill destitutes. They have also reunited thousands of recovered patients with their families, some after decades of separation. This is the most difficult part: as someone who has been involved for many years with institutions that reunite runaway children with their parents, I know how difficult it is to extract the necessary information that leads to the parental home.

Mentally ill and destitute – these people are considered the most valueless of all society in India. Many of them are not runaways or people who have lost their way but have actually been abandoned by their families as being a burden. Government policies ignore them and so does civil society. Dr Vatwani’s efforts and the Magsaysay Award 2018 that acknowledges its profound impact, has

gone a long way in changing our attitude and that is the true value of his work.

When I became minister for Women and Child Development, one of the first things I did was to order an enquiry into the state of women in “mental asylums”. One of the findings was that many women had not suffered from any mental health problems. They were widows with property who had been dumped there after bribing staff members. They had lived there for years, gradually losing their memories. Many women had been abandoned after an epileptic seizure (often mistaken for “Devi aa gayee”) and had undergone procedures that should not have been allowed. Many women who had had actual problems had recovered many years ago but had no idea how to leave as they had no money.

When Dr Vatwani met me, it was for an unusual request: that his team be allowed to meet the destitute female patients in government mental health hospitals. If they had recovered, could his team be allowed to help them reunite with their families? Even this request – which would have lightened the load of the mental hospitals (“lunatic asylums”) was met with grave suspicion by our bureaucrats and after weeks of quibbling, they finally gave some lukewarm meaningless acceptance. So I decided, as Minister, to write the letter to institutions and states myself. I hope it has helped these women find new lives or go back to their old ones.

We are all inspired by Dr. Vatwani’s energy and enthusiasm. If you have not met him, this book is sure to move you and galvanize you into action. Good people form a chain, a Lakshman Rekha of social change that protects all. Dr. Vatwani himself was inspired by Baba Amte, whom he met early on in his career as a psychiatrist.

This book summarizes his life, career and work in the field, the many challenges he faced and his evolution. He talks about his patients and their reintegration into society. Some have even gone on to have successful careers and are giving back to their communities. It also provides an in-depth look at the mental health situation in India. I can't think of anyone with more grassroots-level experience to write on this subject.

Anyone can suffer from a mental illness. Depression, bipolar disorder or schizophrenia is not uncommon. And these illnesses are just as real as a broken bone or a tumor. People suffering from mental health problems need as much support as those suffering from any other illness. This book dispels many of the common beliefs surrounding mental illness.

I hope the next time you come across a wandering mentally-ill person on the streets, you will take a few minutes to offer them food and water, and will call your local mental health NGO to see what help is possible. It could have been you.

Maneka Sanjay Gandhi
Member of Parliament,
Former Union Minister,
Ministry of Women & Child Development,
Government of India,
New Delhi



Foreword by Dr. Prakash & Dr. Mandakini Amte

प्रस्तावना

डॉ प्रकाश आमटे, डॉ मंदाकिनी आमटे

भरत मला भेटला ती रात्र मला चांगली आठवते. हेमलकसाला संध्याकाळी मी पेशंट संपवून अत्यंत थकलो होतो. घराबाहेर शेकोटीशी भरत बाबांशी बोलत होता. खास त्यांना भेटायला तो मुंबईहून हेमलकसाला आला होता. त्याच्यासोबत होता एक हातपाय बेड्यांनी बांधलेला आदिवासी मनोरुग्ण. हेमलकसाच्या वाटेवर हा माणूस अशा पद्धतीने रस्त्यावर सोडून दिलेला भरतला आढळला होता. भरतच्या मनात शंका होती की हा पेशंट उचलावा का न उचलावा? कारण त्यालासुद्धा आमच्याकडे आणणे भाग होते. पहिल्यांदाच तो बाबांकडे येत होता, बाबांना काय वाटेल हा पेशंट बरोबर बघून? पण भरतला राहवले नाही. त्या अनाहूत पाहुण्याला घेऊन भरत हेमलकसाला पोचला. त्या पेशंटच्या बेड्या बघून मी गलबललो. छिन्नी आणि हातोडा मागवला, अन तीन चार तास प्रयत्न करून त्या माणसाला साखळदंडातुन मुक्त केलं. भरतबरोबर माझी व बाबांची पहिली भेट अशी झाली. त्याला त्याचे काम शब्दात सांगावे लागले नाही. बाबा आणि मी त्याला हे काम करताना बघून भारावलो. भरत व स्मिताने जे काम केल आहे ते अतुलनीय आहे.

एका अर्थाने भरतच्या कामाची नाळ थेट बाबांशी जोडली जाते. अत्यंत चांगली वकिली प्रॅक्टिस चालू असताना बाबांनी जो

कुष्ठरोगी रस्त्यावर पडला होता त्याला उचललं होतं आणि आनंदवन उभे राहिले. भरत आणि स्मिताने रस्त्यावरचा सिझोफ्रेनिया पेशंट उचलला. वास्तविक आपण नेहमी अशी माणसे हातवारे करत, बडबडत, विमनस्क मनस्थितीत आजूबाजूला फिरताना बघतो. भरत आणि स्मिता मनोविकारतदन्य आहेत हे जरी खरे असले तरी अनेक अशा डॉक्टरनासुद्धा ही माणसे दिसत आली आहेतच की! भरत आणि स्मिताचे अपार कर्तृत्व हे आहे की या माणसाला बघून पुढे गेलेली त्यांची पावले परत मागे वळली. बाबा मागे वळले आणि आनंदवन उभे राहिले, भरत आणि स्मिता मागे वळले आणि श्रद्धा प्रकल्प उभा राहिला.

आमच्याकडे आला तेव्हा भरत खूपच अस्वस्थ होता. कैलास मानस सरोवराला जायची संधी त्याने केवळ दोन पेशंटना सोडून जाता आले नाही म्हणून नाकारली होती अन नेमक्या त्याच टीममधले अनेक जण हिमनग तुटून मृत्यूमुखी पडले होते.

भरत अस्वस्थ होता - निराश होता कारण त्याला या प्रश्नाने ग्रासले होते - देवाने त्यालाच का वाचवले? त्या शंकेचे उत्तर शोधायला तो बाबांकडे आला होता. बाबांनी त्याच्या पाठीवर हात ठेवत निदान केले - "हे नैराश्य नाही -- हे तर सृजनापुर्वीचे वादळ आहे, आणि या अस्वस्थतेवर एकाच इलाज आहे - आनंदवनासारखा जो एक मोठा प्रकल्प त्याची वाट बघतोय त्याकडे त्याने झेप घ्यावी!" भरत सगळ मळभ झटकून कामाला लागला आणि श्रद्धा प्रकल्प कर्जतला उभा राहिला. बाबांच्या आजारपणामुळे मला त्या प्रकल्पाचे उद्घाटन करण्याची संधी मिळाली. त्या आवारात पोचल्यावर असं वाटलं की बाबा जे

सतत म्हणत आले आहेत की अशी अनेक वेगवेगळी आनंदवने ठिकठीकाणी उभी राहिली पाहिजेत; तेच भरत व स्मिताने प्रत्यक्ष साकार केले आहे!

हे त्याचं आत्मचरित्र अत्यंत वेगाने पुढे जाते. स्वतःच्या कर्तृत्वाबद्दल खूप कमी बोलते. आणि बोलते तेसुद्धा कवितेतून.

आजसुद्धा भरत अधीर आहे, निराश आहे कारण आजही हजारो- काही लाख पेशंट भारतातल्या रस्त्यावर असे विसकटलेले फिरताहेत - जे तिथे असण्याची मुळी गरजच नाही आणि तरीही त्यांना बर करून घरी पाठवायला जवळ मायेचा हात नाही. या विदारक परिस्थितीत भरत फार तर शंभर-दोनशे पेशंटंना मदत करू शकतो; ही खंत त्याच मन अहोरात्र कुरतडत असते. बाबा त्यांच्या प्रसिद्ध कवितेत म्हणतात - “थांबला न सूर्य कधी, थांबला न वारा” -- तसा भरत थांबायला तयार नाही. भावनांची प्रचंड उर्जा आणि स्मिताची खंबीर साथ भरतचे इंजिन आहे.

बाबांनी आनंदवनमुळे जशी समाजामध्ये असलेली कुष्टरोगाबद्दलची घृणा व भीती कमी केली तसच भरत व स्मिताने, श्रद्धा प्रकल्पाने सिझोफ्रेनियाबद्दल समाजाची घृणा व भीती घालवण्याचे काम केले आहे आणि तेसुद्धा खूप महत्वाचे आहे, अतुलनीय आहे.

भरत आणि स्मिताला ही जाहिरात करणे आवडत नाही हे जरी मला माहित असले तरी सांगितल्याशिवाय मला राहवत नाही.

आपल्या एक मुलांबरोबर भरत आणि स्मिताने अजून तीन मुलं दत्तक घेतली आहेत! फार कमी जोडपी असे करतात.

भरतला मॅगेसेसे अवार्ड मिळाले आणि बाबा आणि त्याच्यामधली कडी जणू अधोरेखित झाली! श्रद्धा प्रकल्प जागोजाग उभे रहावे अशी त्याची तळमळ त्याला तसे दाते वेगवेगळ्या शहरात मिळूनसुद्धा आवरती घ्यायला लागली आहे. कर्जतच्या श्रद्धा प्रकल्पाच्या भविष्याबद्दलसुद्धा तो चिंतित आहे. मनोविकार तज्ञांची पुढची फळी त्याला मिळू शकत नाही हे कटू वास्तव या दोन्ही चिंतांचे कारण आहे. एकूणच आजच्या वैद्यकीय सामाजिक पर्यावरणात तरुण मनोविकारतज्ञ या कामाकडे वळू पहात नाहीत हा मला चिंतेचा विषय वाटतो. भरत आणि स्मिताला या त्यांच्या आत्मचरीत्राच्या प्रसारातून पुढची मनोविकारतज्ञांची पिढी मिळो आणि भरत व स्मिताचा हा करुणेचा आश्वासक स्पर्श सातत्याने या समाजातल्या हतबल अशा अभागी माणसांपर्यंत पोहोचो, ते आपल्या कुटुंबाकडे पुन्हा परतो; हीच मनापासून शुभेच्छा.

Dr. Prakash Amte

**Padma Shri & Ramon Magsaysay Awardee,
&**

Dr. Mandakini Amte

Ramon Magsaysay Awardee,

Lok Biradari Prkalp,

Hemalkasa,

Gadchiroli District,

Maharashtra

CHAPTER 1

Musings

When I was in college, as part of our curriculum, we were made to study a Literature novel called 'Lord of the Flies' written by William Golding, who apparently won the Nobel Prize for Literature for the same. While I may not be able to recount the entire book today, to my memory it described in graphic detail how a bunch of students get trapped on an island, and towards the end of the novel, finally for want of food, all of them ganged up on a single one amongst their own, and with a frenzied war cry.. 'Kill the pig, cut his throat, bash him in, spill his blood..' rendered repeatedly, actually kill the boy. It was a metaphor for the death of all that is human within humanity, all the values ever upheld and cherished. The book had apparently received a lot of press for its apparent dehumanizing of humanity. It was indeed a very depressing, disturbing book for many, me inclusive.

But I felt that a similar, though diametrically opposite dimension was shown by the lay citizens of society towards the wandering mentally ill. For days, months, years a mentally ill may lie on the same footpath or walk around on the same busy road, and hundreds, thousands, lakhs of people may walk past him, but not a soul would give him a second look, not a soul. That was tantamount to the dehumanization of humanity. The wandering mentally ill became akin to that metaphorical student of William Golding's 'Lord of the Flies' surrounded by the war cries of.. 'Kill the pig, cut his throat, bash him in, spill his blood..' It was just that there were no cries. Encompassing, hurting, everlasting silence hung in the still air and reigned supreme. And the wandering mentally ill and the boy in the novel became metaphorically the last humans standing.

To drive home this point in real life, almost ironically, I was interviewed post receiving of the Ramon Magsaysay Award by a senior journalist Devanshu Desai from Chitralekha, a very prestigious Gujarati weekly. Devanshu Desai was very well known to me, as he had interviewed me many years ago for the same Chitralekha magazine, when our NGO Shraddha Rehabilitation Foundation was in a nascent stage. Sharing some personal experiences, he recounted that when he was in school, there was a lady who was mentally unwell and moving around in his residential vicinity. He shared how when he and his schoolmates, while returning home from a late-night movie, would be apprehensive and tremulous that the mentally unwell lady might harm them. Fear of the mentally ill is predominant in the subconscious of human society. But what really got my hair to stand on its ends was that the lady still existed in the same vicinity, while the journalist was now touching 50 years of age. For so many years no one had bothered to do anything about her. She never existed for anyone. My blood curdled to think where she may have been going for her daily ablutions, what must be happening during her menstrual cycles, where she must be getting her meals/ clothes... just about everything that makes us want to believe that we live in an evolved society, that we are different from the pre-historic barbarian societies that plundered this earth. How far could an entire society go in neglecting the wounded within its own?

And I remembered William Golding and his 'Lord of the Flies'.

While I am no true philosopher to opine, but I believe that at the end of time, there are two ongoing conflicts of human existence. The survival of the fittest within life, vis-a-vis life itself. Each one of us have an option. Like the bulk of the westernised civilization, we could choose to support the

former, knowing that by doing that, we would be by default supporting our own survival instincts. Or like the ancient eastern civilizations of an era gone by, opt for the latter. I pitched my lot with the latter.

The wandering mentally ill roadside destitutes on the streets of India were to my mind and my conscience, the last people standing. Relics of a humanity long castigated to the end of existence. But they existed. With all their smothered, suffocated, smouldering emotions, they existed. Anonymous, yes, but they existed.

This book is an ode to their existence. I may/will pass away. This book too shall be/will be relegated to oblivion. But they shall remain.

And if a few actually take time out of their busy lives to browse through this book, and consequent to the browsing reach out to even one within those wandering mentally ill on the roads who exist deprived, denigrated, but paradoxically exist, then all the efforts put into compiling this book, shall be worth it.

A life matters. Life shall and should always matter.

A Dream

Sometime back, perhaps 20 or so years ago, when I was going through a very depressive phase myself and was almost suicidal, I happened to seek solace from a friend of mine.

During the course of our conversation, I was spontaneously asked by him as to whether I had ever, ever, ever had a dream? An unattained dream, a wish unfulfilled?

I could not answer him then, because I felt I did not have an answer then. Being depressed, I did not know whether there was anything worth living for, worth caring for, worth dreaming about.

But over the years, my thoughts have crystallized and the gloom of depression has given way to a dream.

And today I share this **dream** with you.

Let my name never be written in the annals of history,
Let my memory never be,
Let my thoughts never be heard, never be discussed,
Let my words be like dust scattered on the sands of time,
Let no one ever come with flowers,
flowers for my funeral,
Let my end remain unmarked, unspoken,
Let my body never be burnt, never be buried,
Let my remains never be immersed in the Ganges,
Let me never be,
Let me never be.

But if at the end of my journey, if at the end of my sojourn of non-existence, if at the end of all my struggles, the level of compassion, the level of sympathy, the level of empathy which society has towards its fellow human beings who are afflicted with mental illness was to rise,

If that level of compassion, sympathy, empathy, decency, care, concern and hope,

If that sense of justice, tolerance, equality and non-discrimination which people have for, and towards their psychiatrically traumatized brothers and sisters, parents and children was to even marginally increase in this morbid society of ours because of my efforts, then I would believe from the bottom of my heart that that would be a dream come true.

A cherished dream come true,
A cherished dream, come true.

So that, ultimately, eternally and unto infinity, my tears would mingle with the tears of the common man, and our common tears would mingle with the downpour of the common rain, to become one. To become one.

That would be my faith, my vision, my offering, my prayer, my anthem, my heaven, my nirvana, my dream fulfilled.

And towards the fulfillment and realization of that dream is this **Shraddha**...

CHAPTER 2

Childhood Angst

Having lost my father when I was just 12 years old, I grew up in a poor background and my formative adolescent years were spent in gloomy tough times, always questioning the Gods above as to 'Why did this have to happen to me?' While all my peer group seemed to be having the time of their lives, my brothers and I were without money (my mother was a homemaker) and would have to focus on both, making ends meet as well as academics without any special tutelage, purely because my father believed that solid good academics was the only way out. My brothers (named as the fabled Ram, Laxman and Bharat of the Ramayana by our parents) and I were doing odd jobs to make ends meet including selling photos of cine-stars Rajesh Khanna, Dev Anand & Shammi Kapoor to my classmates, running a circulating library (James Hadley Chase, Agatha Christie, Perry Mason, Alistair McLean were in vogue those days), and selling books door to door. I remember those were the days when HMV record-playing Gramophone was launched, and we were even operating a record circulating library (records being expensive for the young generation to purchase on their own) for some time to earn our daily bread. Scrounging our way past eternal hunger, the entrepreneurship of my elder brother Ram would show up in novel ways, he having taken his elder-brother responsibility seriously.

I remember my mother, whose hair had overnight turned white, lugging 10 kilos of wheat to the local flour mill, and overseeing the wheat-into-flour operation herself so that not even one grain of wheat was lost in translation. And finally with the ageing process hitting her physically, unable to cook proper meals for us, making one meal to last out both the lunch and the dinner time. Those were harrowing, depressing, traumatizing times.

I remember that when my dad passed away, I had just got my 7th Standard School results & I had come a 2nd rank in my class, instead of the usual 1st, which I had been procuring since the past few years. I thought that I had let my dad down and that I had to come 1st in my next school term. My dad had just finished purchasing a new flat in Bandra in Mumbai before he passed away, and my mom becoming depressed in our current flat at Sion in Mumbai, it was decided to shift en bloc to Bandra. So it was that my elder brother and I ended up in St Anne's School in Bandra. I was like a boy possessed. I studied like I had never studied before. Came the Terminal Exams & I put my heart and soul into it. Those were the days when each subject's marks were announced the moment the papers were finished checking. I and my fellow-ranker classmate were running neck to neck in the marks, sometimes he overriding me & sometimes me him. But the last paper to be declared was Math, which I knew was my trump card. I pipped him to the 1st rank with that by a mere 6 marks. But those six marks got me my place under the sun, with the entire class and my teachers acknowledging my efforts & hard labour. I had sealed my place in their hearts, and the classmate Daksesh Parikh, whom I pipped to the post, became my best friend, and in the later years of life became a fellow-Trustee of the NGO Shraddha Rehabilitation Foundation which my wife and I and my friend established for the cause of the wandering mentally ill roadside destitutes. In fact, Daksesh's dad became a surrogate father figure for me & loved me in equal measure as his own son.

Those were the days cine-star Rajesh Khanna's movie 'Kati Patang' had got released and the particular photo of his particular style of romancing sold like hot cakes. The cine star Dev Anand's 'Johny Mera Naam' was also a super duper hit at that time. The photos sold as fast as we could get them. Ram, Laxman and I were so bonded to these stars, that when Rajesh Khanna passed away, though separated by great distances (my

elder brother Ram was in Bahrain and Laxman was in Thane), the three of us brothers sat glued to our TV sets and cried our hearts out. So etched in our memories our childhood survival and sustenance ordeal had been. Years may pass, decades may pass, but nothing binds people as definitely as shared pain. The struggles of living, the pathos of almost dying. A permanent soul bonding. While I and my brothers may have some differences, we could never be too far apart from each other or for each other. We had shared too much pain together.

While the pain subconsciously etched into me camaraderie for the downtrodden, it brought into me a quality which I realised much later would be the bedrock of my functioning viz. resilience. The capacity to dig deep and stay put. The winds may blow their might out, the tears may burst their streams out, but I learnt to stay put, rooted, grounded, perhaps partially submerged, but never totally down for the count.

But looking back, subconsciously and without even realizing or acknowledging it to myself, because of the loss of a father at an early age and the subsequent hardships thereupon, I seemed to have ended up identifying with the down and out in society. I looked upon them as brethren, people whose hand I could hold & walk in silent camaraderie. Being an ardent staunch follower of Carl Jung's 'nothing happens in this Universe which is not pre-ordained or unconnected' I believe this silent identification by me with the down and out, ultimately led me to psychiatry, and ultimately chose to make me come in close primal emotional contact with the wandering mentally-ill roadside destitute. I remember how I have seen a boy of young age actually scoop canal (nullah) gutter water with his own hands, wash his face with it, and then drink it, to moisten his parched throat and quench his thirst. I remember watching a boy walking across the road to a massive huge municipal garbage bin, and remove some leftover food, all the time picking and choosing from the municipal garbage bin, as if he were having

a seven-course meal. I remember the gaunt, marasmic, skin & bones Gold Medalist Lecturer of the prestigious 150 years old JJ school of Arts and Architecture, stricken by mental illness, almost dying on the very steps of the equally famous Jehangir Art Gallery, where all the famous and not so famous fellow artists would unconsciously walk past him without acknowledging his presence. I remember the lady with schizophrenic catatonic bewilderment on her face, oblivious to the fact that her child had passed away in her arms, and the putrid stench of the rotting body causing passersby to hold their nose and avoid her while walking disgustedly by.

And I not just identified with these people, but actually acknowledged in pure humility, that there, but for the Grace of a God above, go I.

And looking back in reflection, whatever actions of help or succor I initiated for them were too spontaneous and too spinal even for me to understand vide pure logic. Neither was I that well off, nor that well established in my private practice, it was pure reaching out at the gut level. The un-screamed cry within me reaching out to touch the un-screamed cry within them. And so, it has gone on, for years.

CHAPTER 3

College Upheavals

When I had finished my schooling and had just entered college, like any youngster in the given circumstances, I wanted to choose a profession which would help me to make quick money. In those days, the original documents were not kept by the Institutions where a candidate joined, but were retained by the students themselves. So, I ended up joining First Year College in the Science stream in Jaihind College, near Churchgate & simultaneously chose to join Radio Officer's course in another St Xavier's Technical College, near Mahim, a two-year program which would put me on a ship and avail me big bucks as starting salary. Starting my day at 6 in the morning, walking (I did not have money for the bus fare) till the suburban local railway station, attending the Radio Officer College at Mahim, returning walking to Mahim to rush to Jaihind College at Churchgate, and returning walking from Bandra station back to my house (a distance of 4 kilometres), would sap me so much that I would crash on the floor bed in my house and literally pass off. My mother, poor thing, would actually physically remove my shoes and socks off my fatigued body. I finished the 1st Year of both the courses, topping both.

But somehow, Providence (and perhaps the fact that both my elder brothers had already entered Medicine) intervened and I gave up the Radio Officer's course and decided to put my heart and soul into obtaining entry into Medicine as an academic career. All my friends and colleagues were enrolled in the best of tuition classes, while I was totally broke. So, I thought that the only thing I could possibly do was put in more effort, and I ended up putting in almost 14 hours a day, like clockwork orange, for almost the entire year. My efforts paid off & I ended up securing 2nd rank in the University Board. Providence was truly smiling. I ended up getting Maharashtra State Scholarship

which was reserved for the top 100 of the State in the Board Exam. This was the sum of Rupees One Hundred per month through my medical graduation.

It was when I entered the First Year of Medical College that I hit an unusual stumbling block. It was that Medicine involved a whole lot (volumes & volumes, to be exact) of rote memory, something which I was grossly incapable of, given my proclivity to math and physics, an aspect of my aptitude which I as well as my well-wishers seemed to have missed in totality. The rote memory process seemed like a mammoth Everest standing ominously in the path to my progress. In the ensuing struggle, I blinked first, and a year down the line, ended up enrolling for an Indian Cost & Work Accountant (ICWA) post-graduate degree nearby, thinking of it as the future of my dreams. Again, the original documents being retained by the students themselves, I did not have to resign from my Medical College. I finished the first semester of both, cracking the ICWA exam, and scraping through my Medical Exam, more a Cost Accountant and less a Medico.

It was then that Fate again took over. In the 1st year of Medical, one never came face-to-face across a single patient, the entire curriculum consisting of Anatomy & Physiology, both highly theoretical (and to my mind, Greek and positively alien) academic branches. To my imbecile mind, it was plain and simple jargon, written by some part-sadistic & hi-fi medical professors, with the sole objective of giving nightmares to the medical students. But cometh the 2nd Year of Medical College, and we were face to face with the patient. And the years of pain, struggle, trials and tribulations found its mirror image in their plight. I was in Grant Medical College and JJ Hospital in those days, a prestigious institution of Bombay (now Mumbai) and the wards were chock-a-block with indoor patients. Patients were on the floors and the hospital looked like it would come off at its seams. Human suffering, exposed to the jugular, and

for a student with my own personal experiences, it was *deja vu* all over again. To say that I empathized with them would be the understatement of the moment. I literally cried and embraced them. While because of poor academics, I could never quite fathom the medical technicalities of their exact illness, but on an emotional level, I was at home with their pain. I would spend hours in the wards playing games, singing songs, jostling with them and making their emotional agony lesser. And I gave up all ideas of changing my future career directions. The emotional pain of the patients it was, and my identification with it and the ensuing catharsis therein, it would be.

In the last year of my MBBS graduation, for reasons unknown the disbursement of the Rupees One Hundred per month Scholarship came to a standstill. I would every month trudge to the College office to meet the clerk in charge to be told that the money had not come. When one year went by, I bought myself a ticket, and went to the Pune Government office from where I had received the sanctions and with tears in my eyes, I pleaded my case. Something in my demeanour and my angst touched a raw nerve in the official concerned, and he tracked down my file and said he would speed up. I did not have the guts to ask him as to why it was delayed for a whole year. You just bow your head in deference at the altar of authority & hope for the best. I got the entire arrears in the next month. I and my brothers went out to a theatre for a movie and thence to a good South Indian restaurant to celebrate.

To say that I went through the academics of the medical exams every Semester with trepidation was putting it mildly. I still shiver and have nightmares when I think about those days. I had never been through a furnace physically, but I could well imagine what the experience could be. Anyways, I cleared all my Med Exams, without flunking even one, albeit by the skin of my teeth and a lot of faith-based prayers, but clear I did.

I thought I had had enough of academics and not wanting to go for any post-graduation, I opted for becoming a General Practitioner (GP), akin to a Family Physician. I went to a place called Vasai, which was almost 90 minutes away from my place of stay in Bandra, partly because I could not raise the funds to start practice anywhere nearer and partly because I wanted to practise in a semi-rural interior setting, thinking it would fulfil my innate desire to do service for the mankind, rural areas having poor medical facilities available to them. Lofty ideals aside, at the end of almost 18 months, I had to accept the grim depressing reality that my practice had no takers and nobody was particularly keen to accept me as their Family Physician.

With my tail between my legs, and at the abject end of my morose being, I quit. My elder brother Ram who had always been the go-to man in case of an emergency and who had taken it upon himself to conjure up ideas to solve financial issues, got me a non-medical job as an Administrative Officer in one Institute of Energy Management (IEM), run by someone known to him. And I picked it up, totally disillusioned with the world & myself thinking that money was the need of the day (both my elder brothers, while in medicine, had still not cleared their postgraduate studies) and that my income would at least save all of us from subsisting on crumbs. A good six months passed in the job, with me receiving a lot of appreciation from my employer, one Mr Narisetti, for my hard work and sincerity, and I received a raise in my salary, for it to become a princely sum of Rs 1500 per month, a sum which contributed majorly to my family kitty and alleviated some of our financial existential miseries.

It was at that time that a dear friend of mine, Dr Ghanshyam Bhimani, a year senior to me in Medical College and having finished Psychiatry himself, came to me and stated that a seat for Diploma in Post-Graduation in Psychiatry was going vacant, and that perhaps I could take it up. Though no one to

dictate terms, I told him that I did not want to give up my non-medical job as my family badly needed the money and secondly, before I agreed, I would wish him to take me for a round in the psychiatry ward (something which I should have been exposed to in my undergraduate days, but which I had missed out on, for reasons not now recalled by me). On both counts, he pitched in his worth. He assured me that the Psychiatrist Mentor cum Guide Dr Sethna, under whom I would be enrolled, would turn a blind eye to my physical attendance (it truly not being an actual legal obligatory requirement) and would not hamper my desire to pursue the Diploma in Psychiatry and on the second count, he escorted me into the Psychiatry Ward of JJ Hospital, under whose aegis our Grant Medical College belonged. That exposure to the psychiatric mentally ill patients of the Ward again became the turning point of my career decisions.

While I had been exposed to pain in the Medical Wards of the Hospital earlier, this was pain at its excruciating worst. A world apart, a world disjointed, a world fragmented. The pain was palpable in every expression of every face of each and every one in the ward there. And the wandering minstrel within me came home to roost. I continued in tandem, riding two horses simultaneously (an approach to which I had previous mastery) and finished both the years of academics required for procuring the Diploma in Psychological Medicine (DPM) side-by-side to my non-medical Administrative Officer job in the Institute of Energy Management. Again, Providence and Providence alone, saw me through my Exams. I cannot describe in words the torture of medical academics.

It was then that Destiny took over again & I came to know that there was a seat vacant in Gokuldas Seth (GS) Medical College for M.D (Doctor of Medicine) in Psychological Medicine, which involved another year of effort. Since this involved 2 Semesters of actual physical presence and attendance in the

Wards, I resigned from my non-medical job and took to doing what was termed then a House-Post in Psychiatry in Cooper Hospital, which was a subsidiary attached hospital to GS Medical College, under which I had received the opportunity to do the M.D.

It was in Cooper Hospital that I came across my would-be life partner and soul-mate Dr Smitha Ganla, who though from the same batch as mine in her undergraduate days, had already finished her M.D Psychiatry (and was a Gold Medallist in her M.D exams to boot) and was my Lecturer in the Psychiatry Department. She was a very sincere caring soul, who took her job responsibilities seriously and was compassionate towards the patients too, qualities that were then (and to date) unassailable and mesmerising. Not to mention that she was a good looker and a head-turner too. While I don't know till today what qualities she liked in me, we got along like a house on fire and fell in love with one another. This affair of ours became the talking point of the season in Cooper Hospital, the Houseman falling in love with his Lecturer. I proposed to her on the midnight of December 31st 1985, the meeting set up by another dear friend and a colleague of ours in those days, a Dr Harish Shetty, who continued to be a strong well-wisher for all our future dreams, our NGO Shraddha inclusive. In fact, I was all set to meet her at the scheduled midnight hour on that momentous day in a 'lungi' (an informal piece of cloth midway between a towel and a blanket used to wrap the lower half of your body), not realizing that talks of a proposal might fructify, that dear Harish intervened and requested (nay, ordered) me to be properly attired for the occasion. He saved the day, just. Had I gone in with a 'lungi', Smitha would have thrown me out. But I went in with my best trousers on and Smitha melted like butter on fire, and agreed to have me as her future betrothed. I was over the moon.

But the romantic seeding and leanings from my side had their

negative fallout too. Never great at academics, and having lost my marbles in love, I could hardly focus on my studies. My would-be wife, poor soul, put in her best, she being even otherwise officially my Lecturer in the Department. I, on the other hand, thinking subconsciously that I was the cheshire cat which had bagged the cream and knowing that she was a Gold Medallist and that I would always have her to fall back upon for the rest of my life for theoretical knowledge, literally gave up studying altogether. What would happen was that she would be enumerating the side effects of psychiatric medication on her fingers (side effects which I was supposed to know by rote for the exam) and I would keep on looking at her fingers, obsessed by their beauty, with my imagination running riot and wondering if the ring finger would not look prettier with an actual engagement ring on it. The net outcome was that I flunked my M.D Exams first time out. My luck of scraping through with the narrowest of margins in the Medical Exams finally gave up on me.

There was an uproar all around, not the least from my would-be in-laws, who thought that their daughter had lost her moorings to fall for an academic-failure economically-unsound financially-broke guy who seemed pretty worthless on all the points that really needed to be ticked in a prospective groom for their beloved daughter, the apple of their eyes. My prospective father-in-law was the famed Dr Vishwas Ganla, the ex-Director of Medical Education and Research of Maharashtra and he could slay a horse with the gravitas in his voice. He gave me a not too thinly disguised ultimatum. Pass in your next attempt, or else.

I took to studies with a vengeance, like the horse running his last lap with blinkers on, and with not some miraculous pitching in by my true-blue-support future life-partner Smitha and my classmate fellow-souls, I cleared the exams. A colleague friend since those halcyon days, Dr Anand Nadkarni, a brilliant

psychiatrist himself, attempted to give me some tips just outside the hall at my practical exams & viva-voce. He whispered that the patient kept in the ward for my long-case examination may seem to be having Schizophrenia, but was actually suffering from Bipolar Illness and that I should not be misled. My asking him very innocently as to what was the difference between Schizophrenia and Bipolar Illness did not help matters any. If at all, I think it contributed to the initiation of his current baldness, his having lost a few hairs that day, so perturbed and upset was he by my incredulous query. But cross the finishing line, I did, albeit just barely. I put in a lot of visits to all the temples, mosques, churches and gurudwaras in my neighbourhood, not wanting to let anything go amiss in my quest for the proverbial 'Passed' stamp against my name, which happened, ultimately on April 1st 1987. We got married on the 30th of the same April month, me not wanting to take a chance at losing Smitha to some other precondition or a change of thought by anyone involved.

We have remained married since then, not just in mind, body and soul but in our outlook towards the wandering mentally ill roadside destitutes. A Carl Jung providential marriage, if ever there was one. In fact, it is this common concern for the under-privileged and the destitute which has cemented our relationship, often helping us tide over whatever differences have cropped up along the way. These wandering mentally-ill people mattered, they existed, their emotions existed & their emotions mattered.

CHAPTER 4

First Few Encounters with the Wandering Mentally ill

One day while sitting in a restaurant, I and my wife noticed a young boy who was horribly skinny, dirty, disheveled and in a really bad shape, sitting just across the road. In all honesty we had no inclination to do something for him, it was just that being psychiatrists ourselves, we could make out that he was a schizophrenic. Just while we were watching, he picked up an empty coconut shell next to him, dipped it into the nullah 'gutter canal' flowing nearby and drank the gutter water in a single shot. That was the turning point of our lives. We were so appalled and so moved by his having drunk the gutter water that before we could think rationally on our line of action, we had already spontaneously crossed the road and enquired from him as to whether he would come with us. He agreed and we assisted him to come with us (which given his weak state was very easy for us) and brought him to our newly setup private nursing home. The nursing home setting up had involved us selling all the jewelry which my wife had received as gifts in our marriage and taking loans from various banks with property hypothecation et al, but this unknown schizophrenic, spotted by us by chance, was in it, as literally the first indoor admission of our nursing home. We nursed him, treated him with appropriate psychiatric medicines and gradually he improved. In two weeks, to our utter astonishment, he started speaking in English. It turned out that he was a Bachelor of Science (BSc) Graduate, had even finished his Diploma in Medical Laboratory Technology (DMLT) & had come to Bombay to hunt for a job, and upon not getting one, had succumbed to mental illness and ended up on the roads. Those were the days of communicating by letters vide the postal service, and we wrote a letter to his father, upon getting the full postal address

from him. Again, to our absolute amazement, his father came down by flight from Hyderabad as he was desperately hunting for his son for almost a year. It turned out that he was the Superintendent of a Zilla Parishad in Cuddapah District of the state Andhra Pradesh. Not a small position to be in, by any measure. Mental illness could affect the best of the best and reduce a person to pathetically inhuman conditions. And suddenly we realized that there was no organization dealing with such people.

These were the unfortunate men & women whom you often see wandering on the roads, lost in their own world, laughing and talking to themselves, with dirty long matted hair, half naked, and skin & bones appearance. They could be just barely surviving on garbage, gutter water and whatever leftovers of food are thrown at them by passers-by. They were invariably in much worse shape than the poorest of the poor because they had no one, absolutely no one to look after them. They could be on the roads for days/weeks/months/years/decades without clothing, shelter or food. No one would give them a second glance and often no one would care whether they lived or died. They were stripped of all human dignity, but we realized that they were humans nevertheless.

Shraddha Rehabilitation Foundation was founded by me and my wife in the year 1988, to deal with the above tragedy of the homeless mentally ill destitute wandering aimlessly on the streets of India.

In 1989, extending my feelings for the cause of the wandering mentally-ill, I had offered my free services as a visiting psychiatrist to Mother Teresa's Missionaries of Charity in our neighborhood (in Borivli in Bombay) which used to pick up destitutes, quite a few of them finally turning out to be mentally ill. One day during one of my visits, I found a young boy who was semi-naked & chained. Apparently, he was very violent &

unmanageable over there, so they had chained him. I was aghast at seeing a human being in chains and requested the authorities to shift him to our private nursing home setup immediately. He was having an injury on his thigh because a truck had hit him on the highway, before the Ambulance of the Missionaries of Charity had picked him up. He was violent in our nursing home too. Despite not having any relative's consent, we on our own risk and good judgement gave him ECT's (Electro Convulsive Therapy) which in those days, because of the limitation of drugs available, was in vogue to control violent tendencies. The boy improved, and it turned out he was from a nearby province called Pune, approximately 170 kilometers away. I took it upon myself to take a photo of his (I had deciphered that his name was Gangadhar) and go on my personal two-wheeler motorcycle to Pune. Approximately 20 kilometers before his house, upon enquiry, everyone seemed to know that he was missing and questioned me as to why I was enquiring. I explained to them the circumstances and this started off on what turned out to be the first awareness campaign in favor of the treatability of mental illness. Finally reaching his home, the parents were overjoyed, but refused to come with me on the same day to Mumbai. I was a little disheartened. But the next day the whole family came in full force, touched our feet, and did religious prayers, and put culturally-traditional Maharashtrian shawls over us.

Apparently, the reason for not coming on the previous day was because they wanted to do a proper felicitation of us and were not ready to bypass their religious and traditional customs. The boy's mother as of then thought of me as her elder brother and would send me a Raakhi (a thread tied by a sister to a brother on a specific day of the calendar year implying the brother's responsibility to bestow love and affection upon the sister) for a few subsequent years.

Gangadhar and I broke off for a few years, me getting more &

more busy with my professional work, and he with his own life. But out of the blues, in Jungian synchronization he turned up and traced me out in 2006 (by which time I had changed both my nursing home and my residence). And after the preliminary greetings asks me whether we wanted anything for our Trust, he having come into some wealth in his realty business. That was just the time when we had purchased the Karjat plot for the expansion of our activities, and we needed an ambulance. Believe it or bust, he actually bought for us a Maruti Omni ambulance and as per cultural tradition, his father and his uncle came down to our Karjat Center and broke the traditional coconut on the ground in front of the ambulance and handed over to us the keys for the same. Endearing, touching moment, that. Apparently, he had donated a Maruti ambulance to Mother Teresa's Missionaries of Charity in Pune too, not having forgotten that he had been picked up off the streets by their brethren Center in Mumbai in 1989 and as a mark of appreciation for that act of kindness. Phenomenal generosity and a heart of gold, if ever there was one. As if that was not enough, he came down for the Amazing Indians series coverage of our Shraddha activities on Times Now channel in 2012 and did not shy away from disclosing his identity. Psychiatric stigma took a huge body blow that day. Gangadhar has continued to give to the cause of the wandering mentally ill through both Shraddha and the Mother Teresa's Missionaries of Charity in Pune vide donations to this day. After my being bestowed with the Ramon Magsaysay Award, the Times of India Mumbai Mirror journalist, one Murali Menon, wanted to give his coverage some human face and wondered if any one of Shraddha's recovered destitutes would mind sharing their story. I tentatively and hesitantly phoned up Gangadhar. Not only did he agree, he actually drove down all the way from Pune to Mumbai only for the interview. Real heart, this guy. Psychiatric stigma got well and truly nailed that day, with his photos and quotes making it to the inner front page of the next day's Mumbai Mirror issue.

Just about in those days of 1989, we also came upon an elderly gentleman, one Pragji Kaka who also had concern for the wandering destitutes and used to feed them, and if they would come forward with an address, would buy them the train ticket and send them to their apparent hometown. We convinced him to give the issue a professional touch, explained to him the scientific basis of the mental illness, and he thenceforth brought in the roadside destitutes spotted by him.

Gradually word began to spread amongst his circle & our circle, and well-wishers suggested we set up an official NGO (Non-Government Organization) and go in for official recognition. Shraddha Rehabilitation Foundation was registered as an Official NGO in 1991. We applied to the Income Tax authorities and received Exemption under Section 80G of the Income Tax Act in the year 1992. At that time, me, my wife Dr Smitha Vatswani and the senior close psychiatrist colleague of mine Dr Ghanshyam Bhimani were the three Trustees. In those earlier days, we used to admit the roadside destitutes in our own private nursing home along with our private patients, having mentally earmarked a few beds for them.

What started as one or two destitutes at a time gradually increased in number.

A case in 1991 brought in by the elderly gentleman Pragji Kaka was of a lady who was on the streets with a child of approximately 5 years old. She said her name was Maniben, and her kid was Dingli, and that she hailed from Gujarat. Apparently, she had been sitting on the streets with two children and the younger one had passed away in her arms (because her mental illness had nullified her senses so much that she had neglected the child's very basic feeding needs) and the smell of the putrefying body of the child had drawn passersby, this elderly gentleman being one of them. We had never taken a case of a mother & a child, but on humanitarian

grounds, we took her in. Over a couple of months, she improved, and developed a personal bonding with me and my wife. She claimed to be from Baroda, a famous city in Gujarat. Since she was with a child, I decided to go personally with her in my car to Baroda, and thought that the reunion would be a cakewalk. To my disappointment, no one recognized her. The locals drew attention to her dialect and mentioned names of nearby villages where the dialect was prominent. This taught me the value of the regional existence of different dialects. I moved around in my car for the whole of two days, but to no avail. No one recognized her. And all along, as the day passed, I could sense sorrow & depression cloud over her countenance. She was a shadow of her smiling happy-go-lucky demeanor which she had started off with, at the start of her journey.

I pulled her close to me and assured her I would not allow her to be separated from me. It was a harrowing disheartening experience and all the three of us, the lady, the child and me were close to tears. When we returned to Mumbai, the elderly gentleman wanted to take the lady and child with him to some other NGO. I and my wife refused. While our relationship with the elderly gentleman suffered an irreparable blow, the lady and the child continued to stay with us and are in our Karjat Center till date.

It also brought us face to face with the ground reality that women in rural India are often so illiterate that barring the name of their village, they have no idea of where they actually hail from. And this omnipotent truth continues to hamper our female recovered destitute reunions till today, 30 years down the line. And my wife being a woman herself, finds it difficult to part from the recovered female inmate in the event of the family not being traced out, all the time wondering whether there could be physical exploitation elsewhere, and in the process the numbers of our in-house chronic long stay female recovered inmates are increasing. We attempted formal

education of Maniben's child Dingli in a residential school near Pune, but after a few years, pulled her out, because she had borderline intelligence and was finding the going tough. Ultimately, we placed Dingli as a helping hand in one of my wife's relative's house and Maniben continued and continues to stay with us. Dingli has grown old and matured and keeps visiting her mother periodically in our Karjat Center. Maniben has developed her age-related ailments of diabetes & hypertension & still has occasional mood swing exacerbations. But she has survived. And so have we. Destinies colliding with one another and intermingling inextricably, merging into a common stream of lives lived.

Some of the earliest wandering mentally ill destitutes that we assisted off the roads had their own reunion stories etched with emotions, providing us the impetus to continue on our chosen path.

I remember we had thought of making a small 'live shots' video film on our work. My videographer friend was filming with a portable handy camera & we were scouring the street for some schizophrenics. We came across a disheveled bearded young guy with half-torn clothes walking fast on the pavement, lost in his own imaginary thoughts, the thoughts propelling him with a terrific physical momentum of their own. We were having a tough time keeping abreast of him, me and my videographer friend, when all of a sudden, he bent down into the gutter running by the side and scooping the dirty water with his cupped hands, initially washed his face with it, to finally drink many scoops of the same slush and muck. It was a heart wrenching sight for me, while in contrast my videographer friend almost puked & threw up. I instinctively reached out to the schizophrenic destitute, just put my arm round his shoulders and guided him into my Ambassador car, which I had during those days. Perhaps subconsciously recognizing a well-wisher (an innate quality which I have often noticed and

pondered upon during my encounters with them), the boy readily came with me and sat in the rear seat of the car. The videographer refused to sit by the side and chose to sit in the front seat. He queried as to how I could reach out to touch this guy and actually take him in my car after all the gutter - water that he had ingested. I did not care to reply, realizing he would not understand. In our private nursing home, we bathed him, cleaned him, gave him a neat pair of clothes & some decent food to eat. He devoured the food like there was no tomorrow. What we living citizens take as granted, for the man on the street becomes a rainbow to be soaked in while it lasts.

The schizophrenic improved. His name was Mujiber. He hailed from West Bengal. A couple of months down, he was a resurrected soul, and had given his full postal address. We had no social worker with us, so we sent a letter to his postal address, giving his details and background story and our mission of rehabilitating the wandering mentally ill etc. Two weeks down, lo and behold, his brother came down. He stayed at our nursing home, booked his return tickets and took Mujiber with him. For the sake of memory, he requested me to give him my small photo, which I willingly obliged him with. Two weeks later I received a letter from him from Birbhum in West Bengal. This was 5th August 1992. While the bulk of it was routine, the last paragraph stood out and put us on top of the moon.

'You will be very happy to hear that your passport size photograph which was presented to me is now not in my possession. The photograph is wondering door to door like a living God. Your praise knows no bound. All people are willing to take a vision of you through your photograph. They are thinking that God of heaven has stepped down to the earth. That's all. Thanking you, yours ever grateful...'

And we knew what we had done was right and it needed doing.

Another interesting case was of Sudhir Phadke, who was a qualified Civil Engineer from Victoria Jubilee Technical Institute (VJTI), a premier institute of Bombay for Engineering. Succumbing to mental illness, he was on the roads. His parents had died within a few months of each other and this was something that had taken a toll on his sensitive mind, and he had lost his moorings. His wife separated, and taking their only child with her, had sought divorce, and Sudhir slipped further into the abyss of schizophrenic mental illness. A nearby resident had seen our video film on Cable TV, and informed us about him. We picked him up and realized upon improvement that he held a job in the local Bombay Municipal Corporation and he had been duped off his home by someone who was a mere tenant. We took the help of the police and got the tenant evacuated. My brother-in-law, one Gajendra Ganla, held an important civic post and vide our conjoint personal meetings and appeals to the Director of Engineering (one Shri Kale) in the Municipal Corporation we got Sudhir Phadke reinstated in his job in the Bombay Municipal Corporation. Unfortunately, we could not reunite him with his relatives, since his parents were no more, and his wife had already officially divorced him because of the mental illness. He became one of the first permanent inmates of Shraddha. Since he did not have the papers of his residential flat, we were forced to sell it to a well-wisher for a price much lesser than market price. Sudhir was generous enough to donate the entire proceeds of sale to our Trust. However, because of negligence on our part and lack of supervision of medicines, Sudhir relapsed and the Municipal Corporation terminated his services. It was a lesson to all of us as to the importance of continuing the maintenance medication. Sudhir to this day continues to volunteer at Shraddha, having escorted many a recovered destitute-patients to their villages and families. He received his Government Public Provident Fund (PPF), an amount of Rupees 200 thousand in the year 2004, which also he graciously donated to our NGO Shraddha.

He is more a member of the extended family of Shraddha with its permanent patients, rather than a true patient. He recently suffered a heart attack, but because of providential intervention and treatment, survived and still continues to be with us. Despite the high press coverage that his case received, his wife and daughter did not bother to come forward and reconnect with him. Such was/is the stigma of mental illness.

As an offshoot to the process of identification with the down & out, after our first biological child we adopted three children from Mother Teresa's Missionaries of Charity, and my wife, God bless her soul, took the whole load of the parenting, leaving me to focus on my preoccupations with the mentally-ill destitutes.

But despite all this, like all humans with their turmoil of existence, I did go through my own personal angst, my own cup of depression. A prolonged phase of teetering on the edge of moral cliffs, questioning the very fabric of sanity-insanity, wherein I took recourse to writing poetry and published a one-off collection of my poems titled 'Alone, Isolated and Lonely'.

Dear Reader,

The names of patients in the chapter above and in all the subsequent chapters have been changed to preserve confidentiality.

In the midst of nowhere,
a stranger lost in pain,
Horizons undefined,
a search in time.
The morrow promising nothing,
the landscape,
desolate and bare,
The earth yielding no flowers,
the sun shedding no light.

The lyricist without his flute,
words searching for a meaning,
A shepherd without his flock,
the boatsman in need of a guide,
A river meandering,
the sea nowhere in sight,
A cry reaching far,
no echo to confide...

The JJ School of Arts Gold Medalist Lecturer

The next turning point came when we picked up an Ex-lecturer from the prestigious J. J. School of Arts who also apparently was a Gold Medalist in his graduation exam. Ending up on the roads outside Jehangir Art Gallery in Mumbai because of untreated mental illness, he had literally been reduced to a caricature skeleton. In fact, it was one of his students (whose father was under our private care) who approached Shraddha for help. Just the thought that a Gold Medalist Alumni-cum-Lecturer from such a prestigious Institute could be a victim of mental illness was a leveler even for us, making us realize that mental illness spares no one. I went over with my wife in our personal car & cajoled him into coming with us to our Borivli nursing home. He was gaunt, emaciated, literally skin & bones.

Again, despite not having any relative's consent, we on our own risk and good judgement gave him ECT's (Electro Convulsive Therapy). Since ECT is always given under anaesthesia (a procedure known as modified-ECT), the anaesthetist (one Dr Rajiv Kuwadekar, a great human being, who over time became a family friend, but is no more now, having succumbed to cancer a few years ago) then was mortified at the brazen risk which we were undertaking, but I assured him that we would absolve him of all responsibility in case a mishap happened. While legally we may have been in a grey zone, we firmly believed in a God Almighty & felt we were morally in the right.

One of the most difficult cases of our career, it took over five to six months for him to recover. His was a nice soul with a very pleasing, charming, the meek-shall-inherit-the-earth kind of a personality, and this had earned him a lot of well-wishers, both in his colleague faculty members and his students, who would often come down to our nursing home to meet up with him, wishing him well. Once he became better, they asked us

to go the distance and suggested that we should try and re-instate him in his job.

A personal meeting with Smt. Kumud Bansal, the then Secretary of Education, an Indian Administrative Services (IAS) officer herself, and six months of bureaucratic paper work and multiple rounds of the Mantralaya (the Government's officially functioning seat of office) saw him almost get his job back. The Dean of the J. J. School of Arts was the stumbling block and he was very reluctant to give approval to re-absorb him, because apparently under the influence of the mental illness, the Lecturer had written some nasty offensive stuff about the Dean on the walls of his college. We had to personally plead his case to the Dean and explain that whatever wrongdoings the Lecturer had done, were not of his own volition but under the influence of the mental illness & both he & I were now asking for forgiveness. We repeatedly requested the Dean to view the Lecturer in his present symptom-free condition & literally touched his feet for mercy. Ultimately, the Dean relented.

A lot of awareness, goodwill and sympathy was generated for the work that our NGO was doing. Somebody suggested that we could have a fund-raising Art Exhibition. We were taken aback and very apprehensive initially. None of us had even an iota of knowledge whatsoever about art or painting, never ever having forayed into an Art Gallery, let alone Jehangir Art Gallery. But his colleagues pooled in all their goodwill and took the onus of responsibility upon themselves to start the ball rolling. They got us the dates in Jehangir Art Gallery for the same.

Someone mentioned that a senior artist Manu Parekh from Delhi had taken a fondness for this Lecturer, often giving him meals while his own exhibition had been on at the Jehangir Art Gallery. I rang up Manu Parekh and asked him whether I could

come over to Delhi to meet him. He agreed and before I knew it, I, with the recovered JJ Lecturer in tow, were in Delhi. Manu Parekh was touched by the cause and the commitment displayed in my character, and he not only agreed to give one of his best paintings for the proposed exhibition but in turn rang up a few artists in Delhi requesting them to grant me an audience, leaving our work to speak for itself. The Delhi artists (the internationally renowned Anjolie Ela Menon and Krishen Khanna inclusive) gave me a patient hearing and succumbed to the emotionality of the cause, more so because I was accompanied by the recovered and re-instated Gold-Medalist Lecturer of the JJ School of Arts. This motivated me further and deciding on the spur of the moment, I pushed off from Delhi to Calcutta and met the senior artists there, all the names and inputs being given by Manu Parekh to me telephonically. Manu Parekh had taken it upon himself to don the mantle of the guardian angel of Shraddha and its proposed exhibition. From Calcutta, I and the recovered Lecturer moved travelling through Santiniketan, Madras, Hyderabad, Banglore and all the major cities that we could envision. The visit to Santiniketan University, the brain-child and abode of Gurudev Rabindranath Tagore, and the opportunity to sit under the shade of the same tree below which Gurudev Tagore had his open-air schooling concept fructified, were ethereal indelible moments for me. We never touched base in Bombay until we were through the whole lot of artists all over India, me having left home and hearth for this exhibition & the Lecturer having been granted ex-tempore leave to serve his own cause, so fired up were we in our zeal to pit in our best.

My wife and one Supriya Sinha (the only female social worker employed by Shraddha then, and someone who literally became a family member in times to come) manned the coordinated efforts back in Bombay, while I and Hemant went from city to city beseeching the artists to come forward with their collective might for the cause of the wandering mentally ill.

And in a collective outpouring of goodwill, over 140 artists from all over India gave their paintings/ sculptures for the cause. This included the likes of internationally renowned artists such as Bikash Bhattacharjee, T Vaikuntham, Paritosh Sen, Lalitha Lajmi amongst others. The exhibition was held in the same Jehangir Art Gallery outside which the Gold-Medalist mentally ill Lecturer had been lying like a skeleton for years. It was a resounding success, gaining us both funds and publicity. By word of mouth, the Ex-Lecturer's case was well known to the entire art fraternity of India. His gentle affable smile & his expressive twinkling eyes had endeared him to the whole art world. The Indian artists abroad too had no hesitation to give their best. S H Raza, Budikins Chawla, Krishna Reddy et al donated their worth to the cause and the exhibition. These Artists, even on personal interactions, and despite their high social status, turned out to be the most humility-personified of human beings on earth. All wished the very best for the cause.

The efforts of the Art Exhibition were highly successful & it was a runaway success. Stalwarts like GR Khairnar (the Deputy Municipal Commissioner of Mumbai then) cine-actor Jackie Shroff and Harsh Goenka (the big boss of RPG Group) graced the occasion and applauded the cause behind the exhibition. Adequate funds were collected, giving us the leverage to start thinking of expanding and moving the sheltering of the wandering mentally ill from our private nursing home setup to an exclusive institution dedicated to the cause.

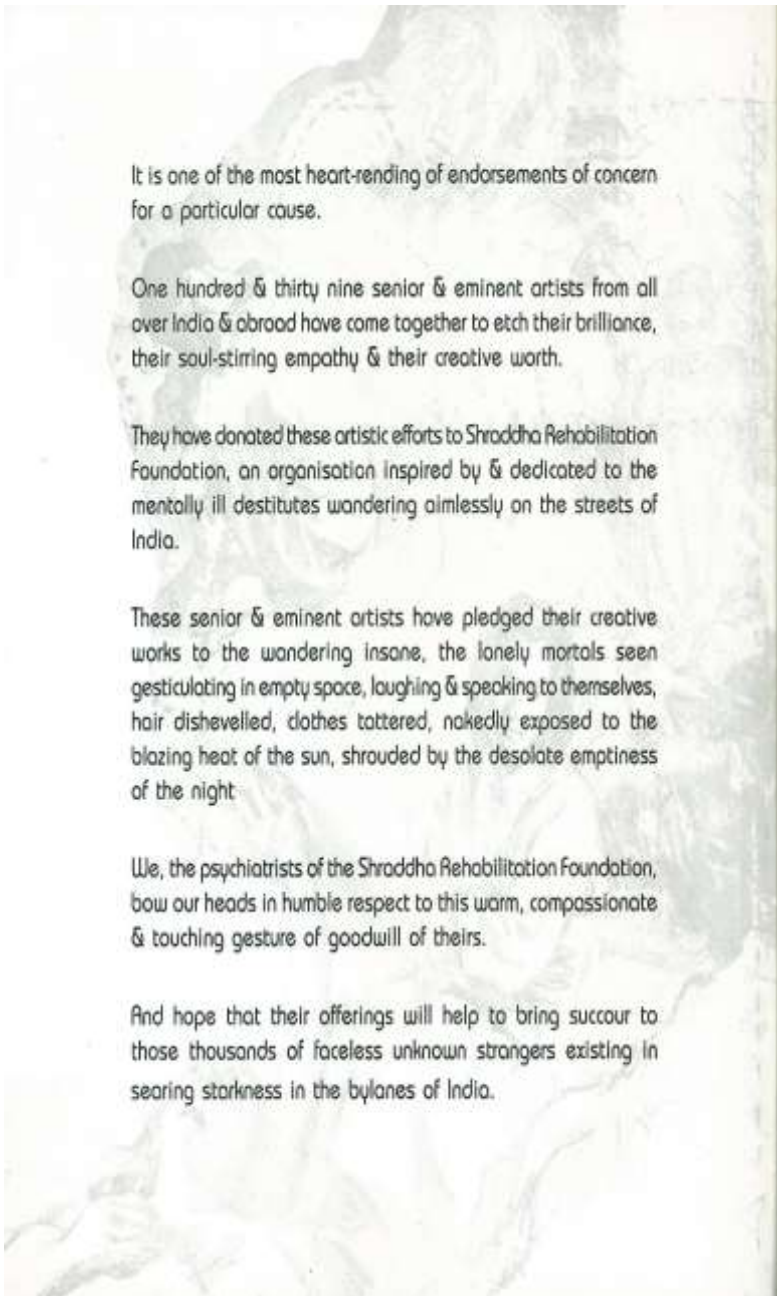
During the exhibition itself, we were introduced to an international diamond supremo, Mr. Mark Boston, Chief of H. Goldie & Company, London. He not only bought a few paintings in the exhibition, but was so moved by our cause & work, that for many, many years he sent us monthly donations from the UK, during the Foundation's critical growing years. He even came down from London to attend the inauguration function of our Dahisar, Mumbai facility in 1997.

CHAPTER 6

**The Jehangir Art Gallery Exhibition
October 1993**



Inspired by and dedicated to
the mentally-ill destitutes
on the streets of India



It is one of the most heart-rending of endorsements of concern for a particular cause.

One hundred & thirty nine senior & eminent artists from all over India & abroad have come together to etch their brilliance, their soul-stirring empathy & their creative worth.

They have donated these artistic efforts to Shraddha Rehabilitation Foundation, an organisation inspired by & dedicated to the mentally ill destitutes wandering aimlessly on the streets of India.

These senior & eminent artists have pledged their creative works to the wandering insane, the lonely mortals seen gesticulating in empty space, laughing & speaking to themselves, hair dishevelled, clothes tattered, nakedly exposed to the blazing heat of the sun, shrouded by the desolate emptiness of the night.

We, the psychiatrists of the Shraddha Rehabilitation Foundation, bow our heads in humble respect to this warm, compassionate & touching gesture of goodwill of theirs.

And hope that their offerings will help to bring succour to those thousands of faceless unknown strangers existing in searing starkness in the bylanes of India.



Come.

Be with them.

In their moment of care, compassion & concern.

For "Shraddha Samarpan" (a national exhibition of paintings, sculptures & exhibits as a tribute to the mentally ill downtrodden)

At the Jehangir Art Gallery & the Artist's Centre, Bombay

From the 18th to the 24th of October, 1993

Between 11 am & 7 pm

And extend your august presence, your revered blessings & your esteemed commitment to the cause of the mentally-ill downtrodden.

Dr. Bharat Votwani
M.D. (Psychiatry)

Dr. Smriti Votwani
M.D. (Psychiatry)

Dr. Ghanshyam Bhimani
M.D. (Psychiatry)

"Shraddha Samarpan"

(A national offering of tributes to the mentally-ill
downtrodden on the streets of India)

The Jehangir Art Gallery &
The Artist's Centre, Bombay.

18th to 24th October, 1993.

Artists who have volunteered their creative
works towards the exhibition "Shraddha
Samarpan"

Delhi Chapter

Shri Manjit Bawa
Shri Rameshwar Braoto
Shri Sukumar Chatterjee
Shri Sonkha Chaudhary
Smt Ajana Caur
Shri Biren De
Shri Jatin Das
Shri Shareshad
Shri Krishen Khanna
Shri Ravi Kumar
Smt Anjali Eia Menon
Shri Manu Parekh
Smt Madhavi Parekh
Shri Laxman Pal
Shri Anurag Patel
Shri Mickey Patel
Shri R Ramchandran
Shri Gurdharan Singh
Shri J Suaminathan
Shri Himmat Shah
Shri G R Santosh
Shri B C Sanyal
Shri Vivan Sundaram

Madras Chapter

Shri R B Bhaskaran
Shri Dakshinamoorthy
Shri Hariram
Shri Achutham Raddhar
Shri Valsan Kolleni
Shri Reddeppa Naidu
Shri Krishna Rao
Shri H Sreenivasulu
Smt Vasudha Thazhur
Shri T Viswanathan

Cholamondal Chapter

Shri H M Adimoolam
Shri Bhagwan Chavan
Shri C Douglas
Shri Gopinath
Shri Nandogopal
Shri Ravishanker
Shri Venkatesh

Calcutta Chapter

Shri Bikash Bhattacharjee
Shri Shuvoprosanna Bhattacharya
Shri Sunil Das
Shri Ganesh Haloi
Shri Wasim Kapoor
Smt Zofin Moachhala
Shri Ganesh Pyne
Shri Shyamal Dutta Ray
Shri Paritosh Sen

Santiniketan Chapter

Shri Jogen Choudhary
Shri Sanat Kar
Shri Suhas Ray
Shri H G Subramanyam
Shri Lulu Prasad Shaw

Hyderabad Chapter

Shri Laxma Gouda
Shri C Jagdish
Shri Surya Prakash
Shri P T Reddy
Shri Gouri Shanker
Shri T Vaikuntham
Shri Vidyubhushan

Bengalore Chapter

Shri Yusuf Prokhal
Smt Sheela Gouda
Smt Raina Gargi
Shri Bhaskar Rao
Shri Jasu Rawal
Shri Nataraj Sharma
Shri G S Shenoy
Shri S G Vasudev

Boroda Chapter

Shri Vasudevan Akiltham

Shri Jyoti Bhatt
Shri Sashi Dharan
Smt Rini Dhumal
Shri Ranjitsinh Gokwad
Shri Bhupen Khakhar
Shri Surendran Nair
Shri Jeram Patel
Shri Nagji Patel
Smt Jyoti Pandya
Smt Rekha Radwittiya
Shri Vinod Shah
Smt Nilima Sheikh
Shri Ghulam Sheikh
Shri B V Suresh

Ahmedabad Chapter

Shri Amit Ambalal
Shri Haku Shah

Udaipur Chapter

Shri P N Chayal

Gwalior Chapter

Shri Tushar Dighe

Bhopal Chapter

Shri Anwar
Smt Seema
Shri Akhilesh Verma

Udupi Chapter

Shri Ramesh Rao

Vishakhapatnam Chapter

Shri Ravindra Reddy

Poona Chapter

Shri Murlidhar Nangore
Shri Vijay Shinde

Bombay Chapter

Shri G S Advirekar
Smt Uma Advirekar
Shri A M Bawlekar
Shri Bodhinarayan
Shri Prabhakar Barve
Smt Chandra Chakravarty

Shri Chiru Chakravarty

Smt Suruchi Chand

Shri J K Chhillar

Smt Profulla Dahanukar

Shri M B Ingle

Smt Prayag Jha

Smt Hema Jashi

Shri Ram Keote

Shri Abhay Khatau

Shri Prabhakar Kolte

Shri Paul Koli

Smt Lalitha Lajmi

Shri Manohar Nhatre

Smt Navjat Mahomedi

Shri Altaf Mahomedi

Shri Mario Miranda

Shri Akbar Padamsee

Shri Dr Patwardhan

Shri Homi Patel

Shri Dr Gieve Patel

Smt B Prabha

Smt Rekha Rao

Shri Shyamendu Sonawale

Shri Pavid Surti

Shri Suresh Telore

Shri Hemant Thakore

Shri Gautam Waghela

Paris Chapter

Shri Narayanan Akkitham

Shri Sakiti Burman

Shri R K Dhaswan

Shri Chittrovan Mazumdar

Shri S H Raza

Shri V Vishwanathan

Munich Chapter

Shri Mohinuar Momtani

Toronto Chapter

Smt Budikins Chowla

Shri Mansaram

Smt Tarunika

New York Chapter

Shri Krishna Reddy

London Chapter

Shri Profulla Mohanti



The cause

Shroddha Rehabilitation Foundation was conceptualised five years back with the cause of the wandering insane as its sheetonchor.

An area of humanity which had always been shunned, rejected & denied,

Mortals who had been gripped in the throes of severe psychiatric illness and rendered destitute, with no shelter or roof over their head, no shoulder to cry on, no hand to hold on to, but who did have a basic intrinsic right to live with dignity.

Since its inception, over the last 5 years, Shroddha Rehabilitation Foundation has picked up & rehabilitated over 200 such roadside destitutes & pulled them back from the miasma of insanity.

Now, it intends to expand its activities by setting up a seperate 4600 sq. feet premises at Dahisar, Bombay which will be devoted exclusively to the above cause.

All the proceeds from the sales at the national art exhibition "Shroddha Samarpan" will go towards setting up the above project.

Shroddha Rehabilitation Foundation is officially registered with the Charity Commissioner's Office, Maharashtra and all donations towards the Foundation are exempt from Income Tax under Section 80 (G) of the Income Tax Act, 1961, vide No. DIT (E) / BOG / CH 297 S / 92 - 93, 1551 / TR 28775 valid upto 31.3.1995.

Shroddha Rehabilitation Foundation is presently housed at Garnet, Behind Shanti Ashram, Off Eksar Road, Borivli-West, Bombay-400 103.

Phones: 855020 / 854333 / 8012771 / 4926462

...At some point of time,
the next time we happen to meet this
lonely man on this lonely road,
with his morbid appearance
with his disheveled hair,
laughing to himself
talking to himself,
lost in his own world,
We would hesitate from shrinking away
We would hesitate from shrinking away,
which is what we may be doing today...

We would be able to look
at him eye to eye
reach out to him,
touch him,
hold him,
& tell him,
these last few words of ours
that Through shimmering pain
 through raging storms,
 through sheets of agony
 shall you pass,
 but in grief, in despair,
 in dejection,
 Rest not, O weary traveler,
 Rest not,
 for the darkness heralds
 the coming of the dawn,
 for the darkness heralds
 the coming of the dawn...

The Dahisar Project Turbulence

From the proceeds of the fund-raising Art Exhibition, land was purchased at Dahisar (a suburb on outskirts of Bombay) & an attempt to create a separate exclusive institution was initiated, dealing with the plight of the mentally ill roadside destitutes.

It was then that bad luck hit us. The plot was purchased from land owners who had some internal squabbles between themselves, and who finally refused to part with the necessary interim signatures which were required for the smooth transition of the land from them to our NGO. And the entire momentum that we had generated vide the Art Exhibition hit a downslide.

As an interim measure, some apparent well-wishers offered us some empty premises in a nearby suburb called Bhayander and we ended up establishing the Shraddha Institute there. The noted Cine-Actor Sanjay Dutt inaugurated the Center there. Unfortunately, despite dealing with a retired Commissioner of Income Tax as the premises owner, a supposed man of public life, we realized that he wanted to exploit our goodwill in society and setup a payment-based NGO in the same premises. We pulled out immediately, not wanting to tarnish our image, as right from day one, we had conceptualized Shraddha as an NGO giving absolutely free services for the exclusive category of the wandering mentally ill roadside destitutes.

A lot of effort and time got wasted, and we being young in those days, the pent-up frustration of our desires to move on was palpable in all of us.

In the meantime, we decided to expand our Trustee base and Daksesh Parikh, my schoolmate (whom I have mentioned

earlier) who was Deputy Editor of a leading business magazine called India Today and who was also actively involved in the Jehangir Art Gallery exhibition became a Fellow-Trustee. He continues to be a Fellow-Trustee to date, having switched his own job profile from India Today to becoming Executive Editor of Business India, another prestigious Indian fortnightly business magazine.

While desiring to expand our wings, we applied for a FCRA (Foreign Contribution & Regulation Act) Registration, a process that would enable us to access legally donations sent by foreign donors. This Registration was to be obtained from the Department of Home Affairs, Government of India, the offices of which were in New Delhi. Upon multiple visits there, I was finally informed (albeit informally) that we would be refused this Registration if we were to continue to have both husband and wife viz. me and Dr. Smitha as Trustees, since this would reflect more as a family Trust on paper, rather than a neutral NGO, which is what we actually were. It was an unwritten rule that Family Trusts were apparently not to be given Registration under FCRA. Ultimately my wife Dr Smitha graciously resigned as a Trustee and Ashok Mohanani, a strong donor and well-wisher, having his own real estate company was absorbed as Trustee in 1995. Ashok had been responsible for the land purchase and was with us through the thick and thin of it when it had gone awry and was equally committed to the cause of the wandering mentally ill.

Ultimately, the Dahisar land owners sorted out their squabbles and in 1995, we started construction. Our Co-Trustee Ashok Mohanani, along with the generous might of Lions Club of Juhu Gulmohar Bombay, with whom he was very actively associated pitched in for the entire construction costs.

As we were getting ready to breathe easy, with inner satisfaction of achieving a significant milestone of an identity and a great

in-patient facility for the wandering mentally ill and for the cause for which Shraddha Rehabilitation Foundation stood and had been founded for, another disaster arrived.

The neighboring population exhibited immense insensitivity to the cause of mentally ill & wanted us to give up the project, just prior to the Inauguration.

They started physically threatening me and my wife at the Hospital, did a public display of protests, put up huge banners against us all over the neighborhood & on one occasion a mob of a 100-odd residents barged into the premises, surrounded my wife and shouted out slogans and abuses against us and Shraddha. In the melee, she was pushed to the ground. A signature campaign desiring us to stop all further activities and have Shraddha ousted from their vicinity was started. Handbills were distributed to all the flats of all the neighboring buildings. A journalist of Times of India, a leading daily newspaper, who happened to be living in their midst, wrote a scathing negative article against Shraddha. The local political leaders also sided with the neighbors, for reasons best known to them.

Through one of our well - wishers Sanjiv Patel, we approached the Honorable Lady Member of Parliament, Late Smt. Jaywantiben Mehta and she in turn helped us approach The Mumbai Police Commissioner. Finally, he directed the local Deputy Commissioner of Police to station a police vehicle & constables outside the hospital to protect me and my wife from assault. This presence of the local police 24 x 7 went on for a few months. Imagine, an NGO was forced to function under police protection, for months on end. To serve society, one needed to be protected by the guardians of society, from the society itself. Paradoxical, but the bitter truth nonetheless.

The neighbors however were unrelenting and merciless and could not care less whether a Member of the Parliament was

intervening. They were so antipathetic to the cause, that finally to uproot us, they went to the Bombay High Court & filed a petition against us, hiring the best lawyers with their financial might. They filed an urgent petition attempting to prevent us from having the Inauguration Function of the Dahisar Center, just three days before the actual event, hoping to get an immediate stay order and an injunction against it. Their main argument was that we should not be allowed to have the Inauguration Function, as they thought it denoted the start of the functioning of the Center. We argued and pointed out to the courts, with proof thereof, that the Center had already started functioning a couple of weeks before. And that the Inauguration Function had been delayed merely to suit our personal convenience of dates. The Dahisar local residents lost.

The Member of Parliament Jaywantiben Mehta ultimately inaugurated the Project a few days later on 31st March 1997 and attempted to be a peace-maker, intervening systematically with her years of experience, gently persuading and counselling the fired-up neighbors, with the final outcome being that all of us actually ended up believing that the issue had been sorted out.

But the neighbor's ire & wrath continued unabated. They filed another fresh petition. The residents of Dahisar took Shraddha to court for picking up "roadside, psychiatrically disturbing elements" that they perceived threatened their families and their children with a bad influence. They hired an advocate one Dhananjay Chandrachud, a big name in the legal circle (who over the years has risen to become a Supreme Court Judge).

We put up a spirited defense, in no small measure to the grit and determination of our advocate Anand Grover (who coincidentally recently was one of the advocates fighting for the LGBT rights in the Supreme Court which ultimately saw victory) and succeeded & the Honorable Judiciary of Bombay High Court, showed utmost sensitivity to our cause. In a

landmark judgment, the much-abused section of society found its lawful place under the sun. “The mentally-ill, roadside destitutes”... emphasized the Mumbai High Court, “are as much entitled to medical help as any physically indisposed person”. Upholding Shraddha’s right to run the Center, the bench comprising Justice A C Agrawal and S D Gundewar observed that ‘since the Foundation was engaged in providing psychiatric care, food, shelter and rehabilitation facilities to destitutes free of charge, it becomes every citizen’s duty to support it in whatever way possible...’ But those were by far the worst days of our personal struggle to uphold the values which we cherished. It was a phase that lasted for well over a year, the courts moving languidly slow in their dispensation of justice, as is the wont in the courts of India. This literally tested the last sinew and nerve within our bodies. We stayed in Borivli, a good 50 kilometers away from Mumbai High Court where the case was being fought, and the travel up and down by local trains, the interminable wait outside our counsel’s office, the innumerable late night sitting with books and jotting of references (Google had not been born then), took its toll on me and my wife. The desire to throw in the towel was at its peak. If society by itself did not want us to exist, then why were we spending so much time, energy and effort on it? But on the opposite side of the road was the carcass of a man who was once upon a time a human being, and the thought that were we to leave him/her high and dry, we would never be able to look ourselves in the mirror, kept us going. The rubber band of our own sanity nearly snapped at the ordeal, just about nearly.

We believed that we did not deserve all these listed adversities, as we were specialized professionals, out with a mission, and anticipating only clinical challenges in our work. But we realized that for centuries, mental illness & the mentally ill patients had been so grossly misunderstood & mishandled, that the non-clinical challenges had by themselves become close to unmanageable, almost preventing the success of any initiative

that tries to benefit these patients.

However, with God's grace & the heartfelt blessings of our recovered and reunited mentally-ill roadside destitutes and their families, we managed to hold fort against all odds.

The Tata Institute of Social Sciences (TISS), Mumbai, came up with a strong and emotionally loaded support letter, signed by all their faculty, which was very touching and this served as a strong document in our legal favor, given TISS's reputation as a pioneer institute for endorsing social work.

Touch wood, post the High Court victory, Shraddha went into liquid flow and our efforts got streamlined. One Dr Roopa Tekchandani, who had finished her Diploma in Psychological Medicine from Pune joined Shraddha and apart from taking over the day-to-day reins of the functioning of Shraddha, also became the emotional go-to sister which I had never had in my real life. She has now become so committed to the cause as to become one of the Trustees of Shraddha.

Two cases I remember while the Dahisar Center was on, was of Sulakshana and Phoolwati, both brought by the local police. Sulakshana was apparently in a temple creating havoc because of her mental illness and the bystanders resorted to calling the police. Somehow despite all the clues we could not trace out her family or antecedents. Perhaps because she was physically there during our tumultuous times, we did not part with her. In those days, we were not collaborating with many NGOs, so even otherwise at a loss as to what to do with her. She remained and has remained till date in our Karjat Center, a lost soul epitomizing the lost souls which Shraddha represented. While she has gradually started dementing, she still reaches out to me occasionally when she is in her lucid moments and plants a kiss on my cheek. She gave a gift last year of some clothes which she had received from a visiting donor for my youngest

daughter, for whom she had taken a liking. This was archetypal schizophrenia, with the emotions & the heart intact, while the thought & the mind had gone into wilderness.

Phoolwati was brought in with a one-year-old child. Perhaps sexually exploited on the roads, she had apparently delivered the child on the roads. Somehow, perhaps as a subconscious acknowledgement of the exploitation, Phoolwati herself did not seem to have much affection for the child. Dogged as we were with our own set of legal embroils & though the girl-child was a very cute one-in-a-million kid, we decided to hand it over, after the proper paperwork, to a nearby Mother Teresa Missionaries of Charity adoption home. Phoolwati was one of those illiterate women, who did not even know that she belonged to Bihar (only we could decipher that much from her dialect), let alone give us antecedents of her district or village or post or whatever. The quintessential rural Indian woman, who perhaps did not know the name of even her country, but who existed nevertheless. God's creation living in God's country. The land of the thousand Gods with their abodes in temples, mosques, churches and gurudwaras spread all over, with her citizens worshipping the same deities but no one amongst them to house the derailed and the lost within those citizens. Phoolwati was just one such. Again, thinking that it was God's wish that she be with us, she has remained with us, till date. No doubt she does become hyper at times, but unconditional love is there. On my rounds in Karjat, she does come forward and ask me whether I want a cup of tea & makes it with her own hands if I accede to the same. If I look fatigued or unwell, she is there, enquiring about my health. Sulakshana & Phoolwati and Maniben are all eagerly waiting for me on the Raakhi Rakshabandhan day, to tie that thread round my wrist to denote eternal love & caring from a sister to a brother.

All relationships never were or are necessarily by actual blood. Many go beyond defined boundaries. Ours fell into that realm.

Strong Letter of Support from Tata Institute of Social Sciences for Shraddha

TATA INSTITUTE OF SOCIAL SCIENCES



Vinla V. Nadkarni, Professor and Head
Department of Medical and Psychiatric
Social Work (TISS) & Member of Mental
Health Authority, Government of
Maharashtra

No. MP54/VVN/010/97/

March 27, 1997

Drs. Bharat and Smitha Vathwani
Shraddha Rehabilitation Foundation
Garnet, Behind Shanti Ashram Bus Depot
Off Ekhar Road, Borivli (West)
Mumbai 400 103.

Dear Drs. Bharat and Smitha Vathwani,

We were most surprised to read in the newspapers about the movement started by the Resident Members of New Link Road Residents Association against your proposed Rehabilitation Centre to be set up by you, with the help of the Lions Club of Bombay (Gulsohar Juhu). This only exposes very clearly how ignorant many of our citizens in Mumbai are about the problems of mental illness affecting at least about 10 per cent of the population.

Today, in our cities and villages, there is a dearth of facilities for the treatment and rehabilitation of the mentally ill. No doubt there exist private psychiatrists undertaking chemotherapy, and four teaching hospitals providing treatment for the poor and low middle class in Mumbai. The Samaritans does also exist. But these are hardly sufficient to deal with the number of cases not only from Mumbai but also, as your cases show, from other States. They may come from well placed families, but due to their illness, they are treated as destitutes on the street and exploited, ridiculed, beaten or merely ignored.

We consider your service to this group of people unique. We admire your commitment and courage to pick these unfortunate persons from the streets, to treat them like human beings by providing them with basic hygiene, food, shelter and care, along with scientific means of diagnosis and treatment. We have read about the new lease of life that your centre in Borivli provides to them - that, with the help of your counsellors, you are even able to locate their families within and outside Mumbai and return the recovered individuals to their near and dear ones.

....2/-

2

In fact, we consider your work very inspiring and a model for professionals in the field of mental health. We feel that we seriously need to educate the residents of the communities around your centre so that rather than reject the mentally ill, they should come forward to help and support your cause. It is only a myth that the mentally ill are troublesome and will be a nuisance in the neighbourhood. In fact, such centres in other parts of the country like in Bangalore and Madras, and in various parts of the world, have shown that there are no such problems and the lay public is only harbouring fears which have no basis in reality.

We do hope that you will be able to overcome the hurdles being placed in front of you and you will succeed in setting up your centre and bring life to many more mentally ill individuals in our society.

With best wishes and in solidarity.

Yours sincerely,

V. S. V. V. V.

Dr. B. B. B. - Mrs. B. B. B.

Dr. S. K. P. J. - Dr. S. K. P. J.

Dr. S. K. P. J. - Dr. S. K. P. J.

V. S. V. V. V. - V. S. V. V. V.

Dr. S. K. P. J. - Dr. S. K. P. J.

(For your department)

While work was going on decent enough in the Dahisar Center, somewhere all along, I felt that whatever we were doing was really and truly inadequate and incomplete.

Lord,
To what end this climb,
this ascent into the fog,
this descent into the valley,
this search unresolved,
to what end...

Many have walked the path
before,
Many have waited
to have a glimpse of You,
many have perished in the waiting,
while I stand here,
with my hands outstretched,
with a cry in my heart,
for a vision of You,
and the thought,
to what end...

Thousands have come & gone,
only the path has stood,
resolute,
the only absolute,
in an uncertain world,
the path,
but to what end...

My Lord,
I stand,
uncertain,
unsure,
almost failed,
but before You...

Oh Lord,
give me direction
when the winds stand still,

give me hope
when the fog envelopes me,
give me strength
when the darkness sets in,
give me courage
when the dawn does not,
beckon...

Oh Lord,
help me to hold on...

Where your vision is not there,
let your blessings be,
where your voice is not there,
let your guidance be...

Oh Lord,
let me not die,
without you,
without your benevolence...

Let this not end,
with me thinking,
to what end,
to what end...

The path beckons
the mountains beckon,
the horizons beckon.
and I move forward
once again,
but to what end,
to what end...

Lord,
be there,
at the end,
at the end...

CHAPTER 8

A Personal Tryst with Destiny – August 1998

The great Psychoanalyst-Philosopher Carl Jung has spoken of Synchronization. That nothing happens in this Universe without a reason. And all events are Connected, Preordained.

One of the turning points in my entire life was in 1998. Our NGO Shraddha had already setup its first of a kind Rehabilitation Center for the wandering mentally ill roadside destitutes in Dahisar in Mumbai. Everything seemed to be going on track, if not center line. I had taken to some de-stressing sports to maintain fitness and taking to trekking, had become a very avid mountain trekker then. I had finished with the Darjeeling Sandakphu trek, the Pindari Glacier base trek and the Milam Glacier base trek, all in the Himalayas in North India and thought I had become fit enough for the mother of all treks (a trek which the common citizenry could achieve, without professional trekking gear and personnel assistance et al) which was the trekking expedition to the Kailash Manasarovar in Tibet. The mountains of Kailash Manasarovar hold deep religious significance for Indian Hindus and the trek was considered more of a pilgrimage than a trek. It needed official Indian Government permission and was a 31-day all-inclusive affair from Delhi to Delhi. You needed to be lucky to get a date as only 3000 applicants were selected from near 200 thousand applications. I applied for it through the official legal channel. When I had applied in August, I was given to understand that perhaps I would be allotted (if at all) a date somewhere in October end or early November.

But within days of my application, I suddenly received a telegram from the Government Ministry that I had been chosen to join an August end batch. I was stunned. Just in those days I had admitted two patients in my private nursing

home setup which required personal care from a male psychiatrist for a couple of months. They were both Gujarati-speaking, a regional dialect well known to me, and unknown to my wife. The parents of both the children had come to me, having great hope & expectations.

I was in a dilemma whether to follow my professional obligations or whether to opt for my sports passion and religious fervor and go for the Trek. Many advised me to go for the Trek. Somehow, divine Providence intervening, I gave importance to my professional side and thought to myself that a visit to the Gods could wait, but jeopardizing those two private patients would be tantamount to wrong-doing. And making the wrong-doing the very foundation for the entire trek, would defeat the very purpose of the trek. I sent a telegram to the Indian Government Ministry involved that I would not be able to make it and requested them to allot me another date.

As luck would have it, that particular specific batch allotted to me in August 1998 expired during the Trek. All the trekkers, all the escorts, all the ponies - every bit of life got wiped out by a mountain landslide in the dead of the night, leaving not even a figment of a trace of existence. Forget my charitable leanings, on the personal front, I had four children (three of them adopted from Mother Teresa Missionaries of Charity) the youngest of them Karmanya, being a mere 3 years old. Life would have come crash-landing on all of them and my wife. The mere thought of it still gives me the jitters. I still vividly remember being phoned to by a friend (who knew I was going for the Trek), to put on my television set at 5 am in the morning. And there, within that televised rubble, but for the grace of a God above, went I.

But after that initial shake-up, I started searching for reasons to my existence. I was definite that the Gods could not have saved

me from certain death, only for the sake of my wife and children. There had to be more. And I went berserk hunting for that reason. I did the same Kailash Manasarovar Trek a couple of years later in the year 2000. While solaced partially, the internal angst continued. I lost my mother. I must have written the maximum number of depressive poems during that phase. I happened to collate all these poems into a book of poems titled 'Alone, Isolated & Lonely', a reflection of my own inner psychological turmoil and chaos. The book was launched at Crossword at the hands of two of the most sensitive souls I have had the good fortune to meet – Gulzarsaab, the emotional poet-of-poets and the charismatic theater and screen personality Tom Alter, who unfortunately, is no more. Tom Alter was so moved by the poetry that he fused one of the poems into his theatrical creation 'Trisanga', a session of poetry, verse and music in English, Hindi and Urdu. And along with Uday Chandra, also a dear friend of mine, took the performance all over India.

Spontaneously desiring to share, I share with your good selves the preface to the collection of poems, believing that I have poured out my heart in the preface.

Preface to the book of poems – 'Alone, Isolated & Lonely'

This collection of poems has been inspired by and is dedicated to the common man in the middle of the common street, who is alone, isolated & lonely.

It is dedicated to that common man who is forlorn, lost, and troubled, who is discouraged, disheartened, disenchanted and disillusioned, who has been rejected, shunned and denied, who has been deprived of his basic human rights, who is down and out, depressed, dejected and in the throes of turmoil and agony.

That man who believes that all is lost and bereaved, who believes that the last vestige of hope has been defeated and buried.

To that obscure man on that obscure street are these poems dedicated.

I am not a natural born poet nor do I make claims to be one. But looking at all the misery, pain, torment and turbulence around me, somewhere inside, deep within me, something stirred & moved me into writing these lines and these verses.

At what point of time I stopped giving solace to the common man amidst all his suffering, and at what point of time I became a part of his harsh existential reality, and a part of his suffering, is indistinct.

To say that I have never been in the stranglehold of suffocating depression, nor ever meandered through the portals of gloom, nor ever been suicidal, would be to abstain from the truth.

But somewhere along the course of my journey, my tears mingled with the tears of the common man, and our common tears mingled with the downpour of the common rain, to become one.

And if these poems are seen as a catharsis to our common plight, our common pain, our common angst, then so shall it be and so let it be.

For if nothing else, I and the obscure unknown man in the middle of the obscure unknown street were bonded by our very own loneliness, our very own isolation, our very own solitary confinement and our very own soliloquy.

And paradoxically this very mutual loneliness and this very mutual isolation of ours prevented us from being really and truly alone.

We provided warmth to each other, consoled each other in our knowledge of each other's existence, and in the mere process of identification and compassion for each other, continued to provide ourselves with a source of some comfort and courage to continue to live our anguished lives on the face of this anguished earth.

And so shall it be, right up to our very own common, obscure, tragic ends.

Our compassion and empathy for each other.

I and the common man in the middle of those unnamed, innumerable streets, bonded by our very own estrangement, our very own fragility, our very own desolation and our very own doom.

Providing succour to each other, soothing each other's wounds.

Alone, isolated and lonely.

To the very end.

A further solid six years went by,
hunting for the reason for existence,
the internal angst continuing,
unabated.

Until I met up with the legendary social worker,
Baba Amte

THE SCHIZOPHRENIC USES LANGUAGE
TO GIVE HIM A SENSE OF SECURITY,
IN A WORLD OF STRANGERS
WHOM HE DOES NOT UNDERSTAND,
WHO DO NOT UNDERSTAND HIM,
AND OF WHOM HE IS AFRAID

THINGS HAPPEN
IN THE WORLD OF THOUGHT,
WHICH DO NOT HAPPEN
IN THE WORLD OF REALITY

A SCHIZOPHRENIC SPEAKS
TO BOLSTER
HIS OWN FEEBLE SENSE OF SECURITY,
LIKE THE MAN
WHO TALKS LOUDLY IN THE DARK,
TRYING TO DROWN OUT HIS ANXIETY
BY THE SOUND OF HIS OWN
VOICE

FROM
LANGUAGE AND THOUGHT
IN
SCHIZOPHRENIA

EDITED BY
KASANIN



1988

The first 5-bedded small Shraddha Nursing Home

SUNDAY REVIEW 3 JUNE 1990 THE TIMES OF INDIA GENTLY INTO DAYLIGHT

THE psychiatrists, Bharat and Smitha, Vatwani bent over the derelict sprawled under the pitiless sun in the asphyxiating street. "Come with us," they said. They gave him food, a wash, a change of clothes, a bed in their clinic and a new lease of life. A restoration of dignity to Vijayam, 25. "Come with us." These three words have transformed the lives of 13 homeless, mentally afflicted persons in the past year, pulled back acute psychotics from the depths of their misery.

Why do Smitha and Bharat Vatwani do it? Merely the uncoiling of an urge to reach out

mission of helping the homeless insane. "Out of 13 persons we've rescued so far," said Bharat, "ten have been restored to society. Three, unfortunately ran away."

One of their recent cases Hemant Thakare, 35, a "brilliant" ex-student of the J.J. School of Art, who was knocked off the rolls last year due to a mental breakdown. This led him to take to the streets, and collapse outside the Jehangir Art Gallery, where he stayed till his friends finally managed to hear of the Vatwanis.

They not only pulled him back but also helped get him readmitted to the J.J. School, where he later became a staffer.



The Vatwanis help the mentally insane off the streets

WAY-OUT REVATHI SIVA KUMAR

and help those too sick to ask for help.

"The wandering insane have a right to treatment, as much as others," said Smitha. And we try to give them the best therapy possible. Patient 'consent' is not necessary, for he is clearly harming 'self' or others."

For instance, Vijayam was found near a gutter, subsisting on garbage. His recovery was fast, and a month's treatment later, he dredged out his identity and address—to which he was speedily restored.

"It was like a dream when I received a telegram from a far-away, unknown place, that my son was safe and well," his father, a zilla parishad superintendant in Andhra Pradesh commented. His son whose illness had flummoxed local medics for years, is on the road to recovery—even Vijayam can write back to his saviours. "I can't forget you all my life."

The Vatwanis are no dream merchants, though, but a commonsense, down-to-earth couple quietly tackling their self-imposed, unglamorous

The dean reports that he is among the most punctual and professional of teachers. One of his paintings sold for Rs 8,000 at an exhibition two years ago. He has put up a brave and spirited fight against his affliction and has proved his capacity for a "normal" role, in society," says Bharat.

The Vatwanis work in tandem with a social worker, who usually locates the patient and then helps in the cleaning and housing of the patient in their sprawling clinic in suburban Bombay.

It is no coincidence that the patients they take in are relatively young, confesses Bharat. They deliberately choose persons who have some hope of social acceptance and rehabilitation. "Otherwise we would be saddled with recovered patients who have nowhere to go. In one instance, an elderly man was cured, but did not wish to return to his family. At a loss, they almost convined at his escape."

However, 56-year-old Pillai was an older man helped and rehabilitated by the couple. A

Kerala migrant he was found in a post office writing letters to Indira Gandhi two years after her death. His relatives were overjoyed to have him back.

Usha Rani 40, is a similar exception. Though the Vatwanis usually don't take women in, to avoid getting into legal bottlenecks, they took pity on her emaciated, broken condition. Drawn out by a Punjabi friend, her home was traced out and she was escorted to Panipat.

All the others too have been ensconced in the family life again, their antecedents painstakingly discovered by the coordinated efforts of the entire staff at the nursing home. Sharif Mohammed, a schizophrenic meandering through a dingy street, was "taken over" by the Muslim staffers, who probed the recesses of his memory by taking him on periodic visits to a nearby mosque, finally sparking a remembrance. He recalled his home in a remote pocket of Deoria, Uttar Pradesh.

"When we undertake a task like this, everybody cooperates," said Smitha. "The

chemist supplies free drugs, the staffers help to establish a link with the patients, the police tap their sources."

A CID officer of Purulia, West Bengal, helped the Vatwanis find the address of Bimal Kumar Acharya, 26. Having run away from home nine years ago after failing the 10th standard, the return of Bimal was like the redemption of a forgotten promise for his incredulous parents.

Often they get little by way of financial compensation from relatives, but they say that they can "afford" one free bed for every seven patients who "pay" for their treatment.

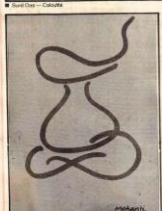
Quietly efficient, unassuming, ideally cut-out for the samaritan role, the couple seems an anachronism in today's corporate-doctor age. Their sprawling clinic takes medicare to a new dimension. For Smitha and Bharat Vatwani are not merely skilled doctors, they are practitioners in the forgotten art of healing.

Friday, October 15, 1993

With Colour Section

Afternoon

Shraddha Foundation to hold fund-raiser



SHRADDHA FOUNDATION, an organisation which works for the rehabilitation of mentally afflicted, is holding a fund-raiser at the Jehangir Art Gallery, Mumbai, on October 17.

By A Staff Reporter

The Shraddha Foundation, an organisation which works for the rehabilitation of mentally afflicted, is holding a fund-raiser at the Jehangir Art Gallery, Mumbai, on October 17.

There are many other paintings that will be on display at the exhibition. The artist, Sunil Dutt, has created a number of sculptures and paintings.

He is pick up the strands of their lives. The foundation has organised this exhibition, which is a fund-raiser for the mentally afflicted.

The exhibition will culminate in an auction and sale of some of the works on October 21, the proceeds of which will go to Shraddha Rehabilitation Foundation.

Nearly 150 pieces of art have been received from prominent artists like Vivan Sundaram, T. V. Ramesh Kumar, Krishna Reddy and Pratiksha Mehta.

INDIA'S ONLY NATIONAL NEWSPAPER

Indian Express

BOMBAY SUNDAY OCTOBER 17 1993

Art to the rescue

'SHRADDHA Samarpan' is an offering by the artist community for the cause of the mentally afflicted, manifested through the medium they know best. A week-long exhibition of their paintings and sculptures will open at the Jehangir Art Gallery on October 18. The exhibition has been organised by the Shraddha Rehabilitation Foundation, an organisation which works for the mentally afflicted.

This foundation has rescued countless mentally disturbed people from the streets and has looked after them, treated them and tried to rehabilitate them.

"The exhibition will culminate in an auction and sale of some of the works on October 21, the proceeds of which will go to Shraddha Rehabilitation Foundation," say the organisers.

Nearly 150 pieces of art have been received from prominent artists like Vivan Sundaram, T. V. Ramesh Kumar, Krishna Reddy and Pratiksha Mehta.

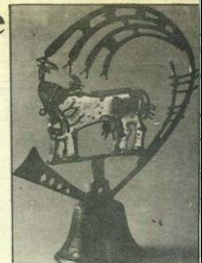
On show will also be paintings of Narayanas Akkitham, Krishna Reddy and Pratiksha Mehta from Paris, New York and London respectively. Mohanty has named one of his his water-colours for the exhibition as 'Shraddha - source of light'.

The genesis of the exhibition is interesting. Hemant Thakre, a lecturer of JJ School of Arts, was picked up by Shraddha Rehabilitation Foundation from the streets where he was roaming aimlessly after losing his mental balance. Bharat and Sumita Vaidyan, psychiatrists, took him under their wings. Once cured, he got back his job at the Art School.

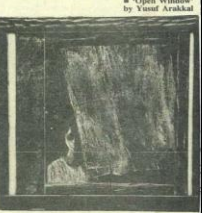
It was Hemant's idea to organise an art auction to collect funds for the expansion work of the Shraddha Foundation. The artist community responded - as they always do - and over 130 Indian painters and sculptors from India and abroad pledged their works for the cause.

Of special mention at the exhibition are 'Open window' by Yusuf Arakkal, 'Tatungu Women' by Vaidyan, 'Aging couple', a ceramic sculpture 'Dove' by Hemant Thakre and another ceramic and copper piece by Nandipati.

The exhibition will be inaugurated by Sunil Dutt. Prominent industrialists, social business houses, bureaucrats and a number of film industry personalities are expected to visit the exhibition and bid at the auction.



■ Ceramic and copper by Nandipati



■ 'Open Window' by Yusuf Arakkal

The Foundation proposes to open a bigger rehabilitation centre with occupation facilities at Dahisar so that more mentally afflicted destitutes can be given free medicine, counselling, shelter and a sense of purpose in life.

Mini Pant-Zachariah

Sunil Dutt, Member of Parliament Inaugurates the Fund-Raising Art Exhibition At The Jehangir Art Gallery, Bombay - 1993





**SHRADDHA
DAHISAR CENTER**

Inaugurated
By

**JAYWANTIBEN
MEHTA**

Member Of
Parliament

1997



However, not all was easy going & the residents of Dahisar put up huge resistance & took Shradha to court for picking up

"roadside, psychiatrically disturbing elements"

that they perceived threatened their families with a bad influence



In a landmark judgement, the much-abused section of society, found its lawful place under the Sun..

"The mentally-ill roadside destitutes"

emphasized the Mumbai High Court,

"are as much entitled to medical help as any physically indisposed person"

EXPRESS

EXPRESS Newsline
MUMBAI & SATURDAY & FEBRUARY 22, 1997

Residents wage war against mental hospital in Dahisar

KAAJAL WALIA
FEBRUARY 21

IRRATE residents of New Link Road colony in Dahisar (West) are threatening to force the closure of a newly opened mental hospital in their locality. Displeased with the hospital's location, the residents are agitating to shut down the institution. The hospital run by a trust 'Shradha Rehabilitation Centre' has been in operation since February 10, 1997 from a bungalow here.

Starting with a single patient, the hospital now has nine mental inmates including four women. Dr Bharat Vatwani, director of the rehabilitation centre, alleges that over 60 residents of the township tried to enter their hospital on February 12 night when his wife, Dr Simta Vatwani, was inspecting the patients.

"They tried to force their way

into the hospital but somehow, were kept in check. On February 16, the residents' association threatened to stage a dharna, after which, we sought protection from the police," he says.

Two police constables from the nearby Dahisar police station are kept on guard at the entrance of the hospital.

However, the New Link Road Residents' Association, which has 80-odd members, denies resorting to violence. "We are all middle-class working people. When would we get time for all this," they ask.

They further alleged being cheated by Dr Vatwani who had earlier promised to shift the hospital premises to a suitable location. "In one of our meetings with Dr Vatwani, it was mutually decided that the hospital premises would be shifted to another location."

He even agreed to look into our suggested alternative sites," a

member of the association informs.

"The construction work of the hospital abruptly stopped after the meeting, which naturally gave the impression that Dr Vatwani had lost interest in the project. However, a flurry of activity was witnessed towards the end of January. A fortnight later, the hospital started functioning after an inaugural ceremony was secretly performed at midnight," he disclosed.

The association, is quick to point out that they are neither against the trustees nor the mental hospital. "Dr Vatwani is doing a wonderful job. We simply want the hospital premises to be shifted to a secluded place, away from our residential area since we are worried about the safety of our members," informs N J Sane, general secretary of the association.

Dr Vatwani says, mental destitutes without a violent streak are admitted to their rehabilitation in-

stitute, which should calm the residents' fears. He further denied having ever agreed to shift the hospital premises to another location.

"We have been running a similar rehabilitation centre at Borivli for the last six years and none of our neighbours there have faced any problems. In fact, I have extended an open invitation to the association to visit my Borivli premises and speak to the residents anytime to clear their doubts," when contacted, Dr Vatwani told Express Newsline.

Shankar Pawar, senior police inspector at Dahisar Police station talking about the issue said, "We have received complaints from the residents as well as the hospitals trustees."

"We have provided police protection to the hospital after the residents' threat to stage a demonstration. However, now everything is under control."



MANOJ KUMAR SHARMA
JUNE 29

BRUSHING aside residents' fears, the Bombay High Court has upheld Shradha Rehabilitation Foundation's (SRF) right to run a rehabilitation centre for mentally ill at Kandarpada in Dahisar (W). The centre provides shelter to mentally-ill destitutes for free. It also provides for their treatment and rehabilitation.

The centre was facing stiff opposition from the Kandarpada residents who perceived a threat to their children and womenfolk from its inmates. They wanted the centre shifted to a "safer place" and had filed a petition at the Bombay High Court against the centre and the Brihanmumbai Municipal Corporation (BMC).

Upholding SRF's right to run the centre, the bench comprising Justice A C Agrawal and S D Gundewar observed that since the foundation was engaged in providing psychiatric care, food, shelter and rehabilitation facilities to destitutes free of charge, it becomes every citizen's duty to support it in whatever way possible.

The foundation had sought a licence to run the centre on March 14 from the BMC. But its application was not processed as the residents' petition was pending in the court. The bench directed the state government to appoint an inspection committee as per the prescribed norms of the Mental Health Act, 1987 within three weeks. The inspection committee will inspect the SRF centre and submit its report to the government within period of three months.

Dr Bharat Vatwani, a trustee of the SRF said, "None of the psychiatric hospitals in the state have a licence. I am running my psychiatric institute at Borivli as a nursing home."

Dr Vatwani said, "This judgment is moral victory for the mentally ill destitutes who have been rejected by the society."

About the residents' fears he said, "We have been running a similar rehabilitation centre at Borivli for the past 10 years and none of our neighbours there have faced any problems." The residents, however are far from convinced. "We appreciate the project but its location is not acceptable to us."

"There is no security in this centre and local residents would be victims of mentally ill patients who cannot be held responsible by the law," lamented another residents.



Dr. Bharat Vatwani does not have to be apologetic for not being a natural - born poet. He is a poet. A good poet. And that comes across very naturally when you read his poems. With all the anguish which is expressed in his poems, the most important element is the concern for the human being. He personalises it and expresses it so poetically.

– *Gulzar*



**Poetry Book Launch – Alone, Isolated & Lonely – 1998
with Gulzar and the late Tom Alter**

RESCUED IRANIAN NATIONAL BIDS ADIEU TO 'BEST COUNTRY INDIA'

Seyed Mohsen Mirjalili boarded his flight back home yesterday, after undergoing months of treatment for schizophrenia at a rehab centre; the man, who was holidaying in the country, had been found roaming the footpaths of Chembur in a disoriented condition

SHALESH BHATTIA
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"BEST country India... best people India." These were the parting words of Seyed Mohsen Mirjalili, as he got off the ambulance to board his Iran Air flight from the Mumbai International Airport last afternoon. The flight will take the Iranian national back home to his country, family and friends.

"My only desire was to experience India and meet its people, who were unknown to me, but no strangers, thanks to the numerous Amrabb Bachchan, Salman Khan and Shahrukh Khan movies I have seen. My dream has been fulfilled and I am blessed," exclaimed Seyed, struggling to rein in his emotions.

It hasn't been an easy journey, though. Sunday MID DAY had reported earlier how Seyed, a man in his late 30s, was

picked up from a footpath in Chembur nearly three-and-a-half months ago. Found haggard, hungry and disoriented, he was sent to a rehabilitation centre for mentally ill destitutes run by Dr Bharat Vatwani (Iranian national rescued from Mumbai streets recounts his tale, April 14). Diagnosed with schizophrenia, he was nursed back to health by Dr Vatwani and his team. The staff members of Shradddha Rehabilitation Foundation, who have developed deep ties of friendship with Seyed over the past few months, accompanied him to the airport yesterday to bid him adieu.

After arriving in India in January, 2012, Seyed travelled to Goa and some other places, before things went awry. "It was during his convalescence that Seyed revealed how he had wanted to visit India from when

NOWHERE MAN REGAINS PARADISE



he was a child. Communicating with drawings initially, Seyed conveyed to us details like his nationality and phone number, and his family back in the Iranian city of Yazd. With the help of these details, the process of sending him back home could be initiated. The process was completed thanks



ALL'S WELL THAT ENDS WELL: Staffers and volunteers of Shradddha Rehabilitation Foundation, who nursed the Iranian back to health, accompanied him to the international airport for his departure yesterday. (LEFT) SUNDAY

to the efforts of the Foreigners Regional Registration Office and the Iranian Embassy," said Dr Vatwani. Seyed's father Mirjalili is sponsoring his journey back home, as he is too old to come personally and escort his son. "We have informed the family and they shall be present at the airport, when Seyed's flight lands," said Vatwani. Denis Matthew, a counsellor

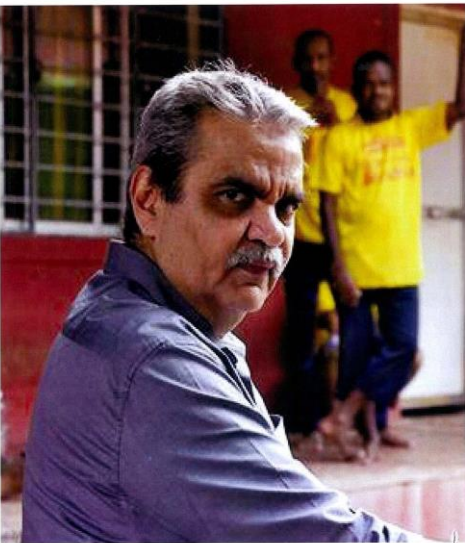
with the rehab, said that Seyed was initially unwilling to return home to his family in a sickly condition. As his condition turned around, however, his desire to return and start life afresh grew. "On Monday, we took him shopping for new clothes and he was really thrilled. In the last four months that he spent with us, Seyed has charmed everyone with his impeccable manners and

grace," he said. Ujjwala Dayaramani, a volunteer at Shradddha Rehab, said, "He would also praise Indian culture, which attracted him to come here as a tourist. In the last year and three months, Seyed said he has experienced all that he had fantasised about India, right from his childhood. He simply loves anything Indian, be it movies, food or sweets."

THE HINDU

NATIONAL

He heals the 'wanderers'



Jyoti Shelar

MUMBAI, JULY 28, 2016 02:34 IST
UPDATED: JULY 28, 2016 02:43 IST

"I always had a very low opinion of the work we do. Because, every time I see a mentally ill patient wandering on the road, I realise that I am not doing enough," says psychiatrist Bharat Vatwani who is one of the two Indians to be awarded the prestigious Ramon Magsaysay award this year.

The 60-year-old doctor hopes that the award will now bring much-needed attention to his cause of rehabilitating and reuniting the mentally ill, who have wandered away, with their families.

"We don't pick up beggars or homeless who know their way around. The mentally ill are out there on the roads because they can't find their way back. They get lost because of being delusional," says Dr. Vatwani, an alumnus of the Grant Medical College and GS Medical College in Mumbai.

The Shradddha Rehabilitation Foundation that he started with his wife Smitha, also a psychiatrist, has reunited nearly 7000 mentally ill wanderers with their families since 1997. Back then, the facility was in a small bungalow in Mumbai's Dahisar area.

By 2006, the foundation moved to Karjat, on a 6.5-acre plot that Dr. Vatwani bought with donations. He has a staff of 20 social workers, eight nurses and three other doctors. They take the patient to their hometown with minimal details and dig out more with the help of the police and locals.

What does this award mean for the work that you have been doing?

It has come as a surprise. I have always maintained a very low profile and concentrated on my work. But this recognition means awareness about mental health is increasing and my cause will get noticed even more. I hope that more people start working in this field.

What motivated you to do this work?

The first turning point came way back in the early 1990s when I and my wife spotted a young, skinny boy on the roadside drinking water from a gutter with a coconut shell. The scene was disturbing. We picked up the boy, who was diagnosed with schizophrenia, and treated him at our nursing home in Borivali. It turned out that he was a B.Sc. graduate who had wandered because of his illness. The second turning point came when I met Baba Amte at Anandwan. He

inspired me to expand my work. That was a trigger for me to move Shradddha Foundation to Karjat.

What does India lack as far as mental health is concerned?

We lack awareness about mental illness. A lot of people depend on rituals and temple visits instead of treatment. We lack mental health facilities equipped with qualified doctors.

The Meeting with Baba Amte – June 2004

Like I mentioned in the previous chapter, nothing happens in this Universe without a reason. All events are Connected, Preordained. Carl Jung's Synchronization.

The next turning point which really was the genesis of the Karjat project came by supposed fluke (but actually our unwritten destiny) when I spontaneously decided to go to Baba Amte's place for a visit. I don't know how many in this world have heard about Baba Amte. He was a legendary social worker of India, who changed the face of the leprosy afflicted with his phenomenal work. I too had vaguely heard about him, though was not a hardcore follower of his work.

My meeting with Baba Amte was under unusual circumstances, to say the least. It was the year 2004. I had in the previous three years, on my birthday, gone to the temple town of Shirdi, famous for its Lord Sai Baba deity. But in that particular year, I decided to put in a visit to Baba Amte. In all honesty, it was not my idea originally but instead was the brain-child of my social worker Arvind Shenoi, who thought that a trip to Anandwan would be worth the effort. I put in my desire to undertake the journey to coincide with my birthday, thinking of the whole event in the light of a good deed done on one's birthday, auguring auspicious tidings. Arvind coordinated the whole trip and the logistics. Carl Jung's Synchronization being what it is, I and he were booked to go by train to Warora (near where Anandwan was), when suddenly the teacher who taught Math to my children, one Rashmi Surve, got wind of my plans, and said that she was a childhood fan of Baba Amte and she was coming too. Out of respect for her, I cancelled the train tickets and opted to go by my personal car.

We went to Baba's huge sprawling Rehabilitation Center for the leprosy afflicted called Anandwan, near Nagpur (a good 1000 kilometers away from Mumbai), saw the entire set-up and were stumped by the enormity of the work. Anandwan had 2500 leprosy residential inmates, a Gram Panchayat (a village administrative facility) of their own, a bank branch and a post office within its premises. It was like a small township by itself. The scale of functioning of the NGO and the Rehabilitation Center boggled the mind and numbed one's senses. But our destiny being what it was, Baba Amte was not there at Anandwan.

Since we had our own car, due thanks to the Math teacher joining in (and this became the deciding factor to the turn of events), I rang up my wife, asking her to hold fort for a few more days, while we decided to go to Baba Amte's son Prakash Amte's Hemalkasa Center a good 350 kilometers away, where Baba was staying. It was during this journey to Hemalkasa when roughly 100 km away from his place, we came across a mentally ill schizophrenic roadside destitute who was in chains. Possibly he may have had violent tendencies and someone had chained his hands and legs and he was walking with those chains. It was a macabre sight given the fact that the road was through a dense jungle and there was not a human in sight. In all fairness, I was in two minds whether to take him in with us. Arvind asked him whether he would like to come with us. He refused. I internally heaved a sigh of relief and was thankful to him for having taken the decision out of my hands, considering his rejection as the final word. We drove further down for 15-20 kilometers, when the gathering darkness and my conscience got the better of me. I started ruminating as to how would he survive in this jungle environment, where would he sleep, what would he eat? And I did a U-turn of the car. We drove back, and upon reaching him, I with all my psychiatric acumen convinced him to sit in the car. He had been passing urine and motions in his clothes since God knows when and was reeking

filthy. We had a scissor with us. We cut off all his clothes and removed them. We had a 'chaddar' (blanket) with us, which we wrapped and put around him and finally seated him in the car. Jungian synchronization being what it is, the next song which played on my car stereo was of a movie 'Phir Subah Hogi', a song whose lyrics went as 'woh subah kabhi toh aayegi...' meaning 'that dawn shall come some time...'

Since I had no first-hand interaction with either Baba Amte or his son Prakash, I was a little bit nervous as to what would be their reaction. Not only that, they did not even know we were coming. Mobile communication was not common then and there was no way to inform them of our arrival. When we reached their place, I hesitantly and tremulously explained to them the nature of our work, the peculiar circumstances in which we had found the mentally ill destitute and requested Prakash to ask someone to relieve him of his chains. Prakash apparently had just finished his daily mammoth out-patient consulting, and looked so exhausted that I thought he would possibly pass out on the spot. Believe me, the greatness of the people whom I was meeting struck me when in all humbleness and humility Prakash called for a chisel & a hammer and a hacksaw and personally sat down with it to gently remove the chains. It was delicate work given that the chisel could have hit bone if placed wrongly. But he did it and Baba, lying on his cot nearby, silently watched the whole process. I, of course, was too dumbstruck to speak a word.

The next morning, upon waking up early, I found that Baba was awake and in tears. Upon questioning him he said that he had not slept the whole night, he had actually not slept the whole night, wondering how a man could walk with chains, and how could society do this to a human being. How could they put him in chains and leave him out on the streets? He had in fact taken the discarded chains and had attempted to walk with them and mentioned with deep anguish that it was humanly

impossible to walk with them. Such was the sensitivity of the man. After so many decades of dealing with leprosy patients, after all the awards and accolades that had come his way, his still being moved to tears at the sight of human pain was tantamount to witnessing compassion at a Godly level. His sensitivity drew me to him, and when he came to know in detail about our work, he was drawn to me. It was bonding at its emotional best. We were alone and had all the time in the world to interact, exchange thoughts and feelings. I stuck it out there for a couple of days. While appreciating my work, he chided me to do more. While parting he told me just one thing 'Bharat, what you are doing is good, but it's on a very small scale. Think big'. And when I walked out, I knew that I had to do more. He disclosed that he had come across mental illness at close quarters and that it was his dream to do something for psychiatric illness, a dream which remained unfulfilled, a dream which he wanted me to fulfil.

A couple of months down the line, since my wife had not met him, I decided to take her & our co-Trustee Ashok Mohanani & a close psychiatrist friend of mine Dr Bharat Shah to meet Baba Amte at Hemalkasa. By the time this visit materialized, the chained destitute who was rescued by us in the car in the first place had improved psychiatrically, and I decided to send him escorted by a team-member of Shraddha, also to Hemalkasa to show Baba Amte first-hand the improvement that was possible. Baba was super-duper-impressed. My wife and Ashok, upon witnessing the scale of operations and the advantages and plausibilities of scaling Shraddha became charged up emotionally and were convinced that we too should expand our NGO Shraddha along the lines of Anandwan. Upon getting back to Mumbai, we sat down with our other Trustees and decided consensually to go ahead with our expansion plans. I conveyed this to Baba on the phone.

Not content at having just inspired me, Baba went the distance.

He would call me almost fortnightly and ask as to where had the project reached? Had I found a plot? Unbelievable. The God following up on his follower, instead of the other way around. In the ensuing period, on a particular day, when for the life of me I had not found the appropriate plot and was pulling at the ends of my hair in absolute frustration, his call came. I got so flustered that I ended up telling my wife that the old man has got nothing better to do, so he is literally haranguing me. But Baba, God bless his soul, persisted. I could not fathom what it was that he saw in me. Perhaps a spark which I myself did not know existed. Perhaps nothing, he being a do-gooder per se. But persist he did. And his persistence paid through.

Never ever having glimpsed through the real estate pages of advertisement of the Times of India newspaper in my whole life, Carl Jung working overtime, on a specific day, I happened to inadvertently come across an advert for a plot of land at Karjat. I remember it was the day when one of my senior nurses Varija Salian had emotionally ended up tying a Raakhi to me. I thought the occasion and the day was auspicious, it being Rakshabandhan that day. Never having ventured into Karjat in all my life, on the spur of the moment I decided to go that day itself, and reaching there, fell in love with the plot. It was a 6.54 acre (26467 sq meters) piece of barren land, but cordoned off by protective fencing, and having a boring water pump facility with the water actually overflowing because of the high pressure of the underground stream of water, and water I felt was the most important prerequisite to buying any plot of land.

The land was purchased at Karjat and brick by brick the project was setup.

Even here, Providence pitched in. I was on my way to Alibag (where the office of the District Collector under which the province Karjat where our plot was located fell) with plans to get a mere farmhouse passed (the idea being to setup the NGO

within the farmhouse and gradually take it from there) when a mere 20 kilometers away from Alibag, I got a call from my dear friend and auditor Gautam Nayak asking me as to what was the exact size of the plot. I mentioned that it was 6.54 acres. He said that he had just that day come across a Government Notification that any plot measuring above 6.48 acres could be passed as a Medical Institution. I did a U-turn, confirmed the Government Notification, and went to meet the Collector of Alibag, with a set of plans depicting a Medical Institution. The Collector, a Bhaskar Vankhede was very, very impressed with our work for the wandering mentally-ill and while *prima facie* he approved of the concept, said that the final passing of the technical layout of the plans would have to be done by the architectural department of their jurisdiction.

I went with the plans to the architectural plan-passing department of Alibag District office. The chief over there gave me a very patient hearing and was emotionally touched by our dedication and nature of the work. He mentioned that he had been to Baba Amte's Anandwan and held Baba Amte in very high regard and was a fan of his. However, upon looking at our actual drawings which we had submitted, he remarked that there was so much space available (6.54 acres) but even then, I had put up plans of only two units. I told him that there was a paucity of funds and the construction costs of two units was all that we could muster. He said that funding may or may not come later, but while he was in his chair in his official government capacity, why could we not put-up plans for more units? He chided me that on one hand we had used the words 'For the mentally-ill on the streets of India' in our brochures and on the other hand all that we had come up with was a plan for a mere two units. I took his sagacious advice and rushing back to the drawing board, along with my contractor and friend Ajay Wadnap, came up with plans for five units, with an additional plan for a proposed cow-shed et al to boot. Literally wishful thinking, was the way I looked at the plans, but since

the architectural plan-passing department head had insisted, there they were. The architectural head was super happy and passed the plans at a single shot. The Collector upon seeing the new expanded vision of the project was equally pleased and appreciative and signed on the dotted line. The concept of a Rehabilitation Center for the wandering mentally ill as a Medical Institution, at least on paper, with official Government seal approval, was definitely on.

I was in regular touch with Baba Amte and he was also fired up about the project. As per his own words, though he had never gone for a social function in 10 years and was in self-imposed retirement, he was all exhilarated about coming for the Inauguration of our project. I pleaded to him that we had only purchased the land, there was no water, no electricity, not even a hut on the piece of land, no abode, nothing. He said he was used to staying in the jungle and I should not bother about him, but instead focus on the preparation of the event. A date was set, the 23rd of January 2005, the cards with his name were printed and they were on their way to the courier company, when I heard on TV that Baba was critical and hospitalized. I called back the cards, dropped everything and drove non-stop with my children to Anandwan, fearing that I may not see him alive. He survived. But never got back to a health good enough for him to come to Karjat. Finally, he requested his son Prakash to do the honors of inaugurating the Karjat Rehabilitation Center of Shraddha, which Prakash graciously did, on March 26th 2006, an auspicious day in the Maharashtrian calendar called Gudhi Padva.

In the meantime, we decided to sell off the existing Dahisar premises of ours, realizing that they would be of no further use to us, and the money obtained from the sale could come in handy. Here again, the involvement of Baba Amte played its own magic. The then Charity Commissioner of Maharashtra, one S.D Mohod under whose jurisdiction the matter fell, was

apparently a very strict man & a stickler for compliance of the letter. But when I went with trepidation into his cabin at his Worli Mumbai office and explained to him the whole matter, it turned out that he had the greatest of respects for Baba Amte and had visited Anandwan on a couple of occasions. After a vigilant check had been done and all the legalities smoothed out, the Charity Commissioner actually cajoled the prospective buyer into paying more, on the grounds that the money was going for a good cause. The buyer ended up giving 10 lakhs more than what was his earlier final tender bidding, purely because of the emotional persuasion of Shri Mohod. Touching going-beyond-the-call-of-duty effort by the Charity Commissioner. On one occasion I was scheduled to go to Warora Anandwan for a visit by the afternoon train from Dadar, directly after finishing my work at the Charity Commissioner's office in Worli, a short distance from Dadar. When Shri Mohod Sir got to know of this, he actually speeded up the official visit work of mine and pointing to the big clock in his office, remarked that I should hurry or else I would miss my train. Experiencing the simplicity of goodness and humility in people of power is a very humbling event.

However, the initiation of the Karjat project and its sustenance over the years have been the toughest years of my life. We were city people. For us to set up such a huge project 96 km (60 miles) away from Mumbai in a remote village in Karjat was daunting. I would break down into tears at the supposed impossibility of the hurdles. Time and again I would wonder as to what had I got myself into. And I would rush to meet up with Baba every 2 - 3 months at Anandwan to draw inspiration and rejuvenate my weary soul. And in all my depressing moments, if there was one guiding light which always, always came to the fore, it was Baba Amte. Keep going was his 'mantra' (philosophy) and it had now become our mantra. He would call me up time and again, from Anandwan and enquire about the progress of the project. Imagine, such was the

sensitivity, the humbleness and the concern of the man that he would actually ring me up to enquire about the progress.

I remember taking photos of the Karjat project on my laptop to show him, and he noticed that there was only one tree on the plot. I agreed. He said that the single tree was enough and was strong and would survive for a long time. And this just when a horticulturist visitor friend of mine had said that the tree was infected, would decay and fall soon. The tree has survived till date and continues to stand tall. The blessings of Baba continue to be with the tree and with the project.

I remember on one occasion I had put in 4-5 days in Anandwan with him and his wife Sadhanatai. While leaving, Baba saw me off at his door with a small parcel containing 'roti' (wheat bread) and 'sabzee' (vegetables). He said it was a custom that an 'atithee' (a guest) would always be given something to replenish his energy for the return journey. From a man of his stature, it was by far one of the most humbling and touching gestures I had ever come across from anyone in my life.

On a personal note, I had lost my father at a young age. Because of this I was prone to bouts of suicidal depression and would subconsciously end up hunting for a father figure in all the elders that I would meet and bond with. It was with Baba that the subconscious search ended, and it was reciprocated with that same love and affection by Baba too. He thought of me as his son and treated me as such, sharing more than a few personal life moments with me.

In one particular instance when we were exchanging thoughts and ideas with one another, he got so moved by me and my involvement with Shraddha, that he abreacted in an emotional catharsis and shared that there was a Trust set up which contained all the money (some Rs 20000 odd) that had been bequeathed to him from his family wealth, before he had given

up on all materialistic trappings of life & taken to dedicating his soul to the work with the leprosy-afflicted. And that he wanted to give part of this personal bequeathed wealth to Shraddha. I broke down at the very mention of this thought from his side. This was too, too much for me to handle. It was more than ordinary caring, ordinary bonding, ordinary sharing. We were entwined far, far beyond.

But in all these shared moments, these heart-to-hearts, I realized that what set him apart from all other human beings was his compassion for the downtrodden. His poignant tales of the leprosy afflicted travelling from all over India under inhuman conditions to seek out his shelter, narrated in his emotionally laden voice, were gut-wrenching. To find him breaking down while describing these events after so many years of their occurrence, was a reflection of his endearing everlasting empathy for their plight. His understanding of the pain of human existence and the overpowering desire to reach out and try and ameliorate it, was the guiding star of his life. He cared with his soul. And this sensitivity moved me and gave the feelings of hurt within me at the early tragic loss of my father, a direction.

In one of our visits, my wife mentioned to him that I seemed chronically depressed and somewhat confused. With a wry smile and a twinkle in his eye uniquely his own, he said that I was neither, but that I was restless and the restlessness was good for me and until the internal search ended, the process would continue. Prophetic words. It was after my meetings with him that my depressive bouts finally abated, and I found my breath under the sun. And I moved all out to be a part of the pain which existed in the plight of the wandering mentally ill. The identification with the commonality of pain became the touchstone of our lives, his and mine.

He left for his heavenly abode in February 2008.

I remember attending his funeral. I have not seen so many non-related people weep so profusely at a person's death in my lifetime. The leprosy patients, the blind, the handicapped, the deaf, the mute, they were all there, weeping for the loss of their own. Just as I was, bereft of my own Cross.

Today he is no more, but it is no small consolation that in Anandwan the place where he along with his loving wife Sadhanatai have been buried after their demise, has been named Shraddhawan (our NGO being named Shraddha).

Sharing further personal moments, I did go on my birthday a few years ago, to Anandwan and paid homage at his tombstone at Shraddhawan and broke down as only a child could at the grave of his father. While I do not know whether our efforts over the last 14 years have really created or made any difference to the plight of the wandering mentally ill, I do know that the attempt has been sincere, and the honesty and sincerity in our efforts is our offering to the departed soul of Baba Amte.

May his soul rest in peace and continue to bless our work.

All relationships are not defined by blood, some are just meant to be. Neither was he my true father, nor was I his true son, we were just that little bit far beyond. We were meant to be.

Baba Amte's mentor was the legendary God - like social worker of India, the late freedom fighter and the pioneer of the 'Bhoodan' (land donation for the underprivileged) movement in India, Vinoba Bhave. In fact, Vinoba Bhave had inaugurated the first small hut in the Anandwan shelter set up by Baba. In Baba's personal room in Anandwan I had come across a small framed inscription of Vinoba Bhave's photo along with his words.. 'Iss kuuttiya se, Satya aur Seva ki nadee ubharegi aur bahegi..' loosely translated meaning 'from this small hut shall the stream of Truth and Service sprout and flow'.

And Carl Jung ‘Synchronization’ being what it is, I looked up the list of the Ramon Magsaysay Awardees over the years. Vinoba Bhave, was the first Indian Recipient of the Award in 1958. Then his protégé Baba Amte himself got it in 1985. Then, a few decades down the line, Baba Amte’s son and protégé Prakash Amte got it in 2008. And today the protégé and adopted son of Baba Amte has received it in 2018.

And Ramon Magsaysay, having no blood relation with any one of us, entwines us all.

And Carl Jung’s philosophy that ‘Nothing happens in this Universe without a reason, and that all events are Connected, Pre-ordained’ could not have come more true.

Baba Amte's Letter

It is unfortunate that, because of ill health, I cannot be in Karjat for the Bhoomi-Pujan of 'Shraddha Farms' on the 23rd of January 2005.

I sincerely believe that Shraddha Rehabilitation Foundation is doing pioneering work in the rehabilitation of psychiatrically afflicted roadside destitutes. It was my cherished dream to work for the mentally ill destitutes during my lifetime, a dream which somehow remained incomplete but which I firmly believe Shraddha will help to realise, fulfil and complete.

Mental illness has long been a shunned, neglected and rejected aspect of society, just as leprosy was and is. By taking up the responsibility of assisting, rescuing, treating and rehabilitating schizophrenic roadside destitutes, Shraddha is performing a laudable and courageous task.

I wish them all the support and encouragement along with God's own strength, patience, perseverance and resilience in their undertaking. May their work continue to expand and help in providing succour to the thousands of psychiatrically ill destitutes on the streets of India in the years to come.

With heartfelt blessings from me and my family to the entire team of Shraddha,

Affectionately,

Baba Amte

15th January 2005

Tears of Joy

Stories of Trials, Tribulations & Emotional Reunions

Sunil Maurya –

Sunil Maurya was a very elderly male destitute found in Karjat itself near our Rehabilitation Centre, in a terribly weak debilitated state, not able to speak or communicate. Purely on humanitarian grounds, thinking he would die on the streets if he would have spent one more day there, Shraddha social workers decided to take him in. His left full arm (below the shoulder) was already amputated before he was found by us. As treatment and care started, slow improvement set in. In a very tremulous handwriting literally jerking all over the page, he had been able to just barely pen his name 'Sunil Maurya'. But within a few days he became medically critical and developed heart failure. This is where Dr Rashmin Cholera's (Director of DY Patil Hospital in Nerul, Navi Mumbai and a fellow psychiatrist colleague of mine) magnanimous words 'DY Patil is your hospital. Use it as you please for the service of the wandering mentally-ill inmates of Shraddha. Not a single rupee will be charged' came to our minds and we shifted Sunil to DY Patil Hospital. The ICU team there put their heart into it and managed to pull Sunil out of his heart failure and after two weeks, Sunil was back in Shraddha. But still unable to utter a word. But even with the limited non-verbal communication of his, his utter and final desire to be with his family was very much there and repeatedly conveyed by him. Meanwhile through our network, we had tried our best to trace all links to his relatives among the "Maurya" community in UP and Bihar to which he belonged, but all in vain. It was on a particular day on my rounds, when I was emotionally down for the count

myself and seriously contemplating shifting him to an old-age NGO, and happened to voice my thoughts aloud in anguish, that he came forward and took my pen from my hands and in a very tremulous handwriting wrote on his own file in Hindi the word 'JAU', before his feeble efforts and his writing faltered under the strain of his aging debilitating mind. Something stirred in me when he wrote that word 'JAU'. It was like a dying-ditch plea for help. The unheard cry of the wounded to be attended to, to be not left alone with his fate. His eyes seemed to be beseeching me not to go ahead with my voiced plan of transferring him to an old-age NGO. I was close to tears myself. Seeing his elderly pleading eyes, we decided to make at least one final attempt to hunt down his antecedents. I instructed my social worker from Uttar Pradesh, one Deenanath Nishad, to drop everything else and go with this single patient to Uttar Pradesh. The word "Jau" in Hindi in his tremulous handwriting seemed to us as the short form of "Jaunpur" District in Uttar Pradesh. And a full district of Uttar Pradesh is a full district of Uttar Pradesh. Literally looking for a needle in a haystack, our social worker team headed by Deenanath took Sunil with him and searched 13 villages over two days specifically among the same "Maurya" community in Jaunpur District. Many administrative heads (Sarpanchs) of villages and police personnel were met, but to no avail. It was while a similar discussion with a new group was going on, that all of a sudden Sunil's face lighted up when a word denoting the confluence of five consecutive bridges within a span of 1 kilometer was mentioned by one of them. As per the newly received clue, our team proceeded ahead and as they were nearing the first bridge one villager recognized Sunil and guided them to his home. There were no boundaries for the tears of ecstasy which were on both sides as he met with his family. His real brother turned out to be a doctor himself and found Sunil in an excellent health condition. He told us that while Sunil was at his home, he had had a neuro-paralytic attack, which had reached a state wherein his arm had to be amputated. Within a

short span of time, he had lost his voice as well & one day had finally gone missing. The searches by the doctor had gone futile and all had lost hope to see him again. But Fortune had a different say altogether, and turning the tide, Sunil was reunited with his kith & kin. Responding to his tremulously written 'JAU' became the ab-reactive turning point of his journey.

Rita Shinde –

Rita Shinde was a female destitute referred by a few college students, the photos of her lying on the footpath at Dadar sent on WhatsApp by them. She was apparently with her two small children. From the photos we thought she must be a beggar, using the children as emotional ploys, as is the wont with beggars. But our social workers confirmed that she was mentally ill. When we assisted her off the roads, she was running high grade fever. She was brought to our Karjat center, and blood investigations revealed that she was suffering from typhoid. Apart from this, she had a hernia in her abdominal wall, through which her intestine seemed to be partially protruding out. Despite the best of treatment in Karjat, her fever was unrelenting, and one day when her fever touched to 107 Degrees, we literally panicked and again sought recourse of DY Patil Hospital. Thinking that she might pass away and that before she breathed her last, we must reunite her with her family, we sent our social worker Samadan Palkar to her apparent home town in plausible Beed District in Maharashtra. The tracing of the antecedents of a destitute by the tonality of native-language pronunciations and by the sub-castes (identified vide the surname of the destitute) is a methodology which Shraddha social workers had mastered to the last dot.

Samadan managed to trace out her relatives. In the meantime, a second time around, the doctors at DY Patil Hospital rose to the occasion and not only was the fever brought under control, but finally the surgeons there did corrective surgery on the abdominal hernia too. She was in DYP for almost a month, and all along, because psychiatric treatment was also going on from our side, she improved radically on all frontiers. Through all this, our female staff helped out in the surrogate mothering of her two children who were with her at the time of pick up and who were sheltered all through these proceedings in our Karjat Center. Her relatives traced out (she had an eldest child apart from the two on the road), the parents of Rita Shinde (her husband had expired), Rita herself, and the three children, were all finally reunited and eternally grateful. Going the distance, we even got her parents examined and treated for their old age ailments of diabetes and blood pressure. Finally, all of them took off like one well-rounded family to their home in a distant Beed District in Maharashtra.

Premjeet Ghai –

One of the most unbelievable of all reunions, and the first ever such case in the chronicles of Shraddha, was of a 70-year old elderly destitute, Premjeet Ghai who was reunited with his brother and family in Jalandhar, Punjab, after a lengthy span of 54 years. This destitute was firstly rescued by Mumbai Police in a near-death state with almost-fatal head injuries and sent to a home Asha Daan run by the Mother Teresa Missionaries of Charity in Mumbai. After initially taking care of the wounds, the Missionaries found him unmanageable because of his psychiatric symptoms, and Premjeet was shifted to Shraddha for further management. Initially he was aggressive, abusive,

irrelevant and paranoid, but as the treatment progressed, good recovery was visible, in spite of his elderly age and co-existing Parkinsonism. A deep desire to meet his own blood relatives started showing up. His home town address was Jalandhar and nothing more than that. Thence started the journey of Premjeet, escorted by our social worker Shailesh Sharma, to search for his roots. Once a small town, Jalandhar had now outgrown into a huge city with no resemblance of its earlier self. The house hunt in this place was very, very exhaustive and finding Premjeet's relatives was nothing less than a miracle. But finally, reunion took place and the family had the happiest shock of their life to see Premjeet alive and well. The tears of elation had no boundaries.

Sheriamma –

An old female named Sheriamma, approximately 70 years of age was brought to Shraddha. She seemed to be suffering from a psychiatric condition which often afflicts the elderly termed as Dementia. In this kind of illness an individual tends to forget his/her entire past or a part of it, may be even the most recent happenings too. This old lady too had forgotten everything. Even the simplest of the questions were too hard/tough for her to answer. Appropriate treatment for Dementia was initiated. Over a couple of months, touch wood, some improvement set in. While all cases of Dementia do not respond, hers was the proverbial lucky one which did. The dialect and the tonality of the language which the old lady spoke was pointing to her belonging to the regions of Kakinada & Rajmandi districts of Andhra Pradesh, and the more our social worker Ramakant Doddi interacted with her, the more he felt that she belonged to the said region. Finally started the journey

from this state of Dementia-induced darkness to a search for Light. With Sheriamma aboard, Shraddha Team, consisting of Ms. Alaknanda & Ms. Manjusha as female escorts took a train from Mumbai heading to Kakinada. Upon reaching Kakinada and as the search was slowly progressing ahead, one elderly person (of almost 80 years himself) found some resemblance of a female from his village in Sheriamma. As he interacted with her more closely, he recognized her and was dumb-stuck by the surprise of his lifetime. He had seen her after such a long time. He started calling up and gathering other elderly villagers and slowly all started recognizing her. Shraddha Team humbly requested the villagers to take them to her relatives and the journey continued further. As the Team proceeded further, more and more people were joining in, amazed and excited in full galore. Within a few minutes itself, the count had surpassed 150-200 mark and this was raising the bar of surprise making the Team more and more anxious. As per Ramakant's own words – 'Since the time I joined Shraddha, I have had the opportunity to reunite many a destitutes after recovery, but this kind of a crowd and a response therein was for the first time in my life, creating ripples in my abdomen, leaving my mind absolutely clueless. I asked the same old man for the reason behind the huge crowd following us. He answered – Sheriamma is the mother of our very renowned politician'. And as the Shraddha Team neared her home, they realized that the words of the old man were true to their core. She actually was from a very high-class family and her son was a renowned politician from the ruling party. Huge posters were all around the corner. Her son was also the President of the District Library at East Godavari District. As soon as the Team reached her place there was a wave of tears and crying all around. Her son embraced her tightly & wept as a small child would upon seeing his mother after a long time. Seeing such a big & renowned politician crying like a child was a surprise never before witnessed by anyone. The social workers came to know that she had been searched by her family in every nook and

corner of every district and village in Andhra Pradesh for more than four years at a stretch. But the search had ceased, once no clues were found. Sheriamma was reunited with her family after a long span of 18 yrs. All these years she was away from all her near and dear ones. All these 18 years she was somehow surviving on the streets. Meanwhile her son was informing all the relatives about the exciting good news of his mother's return. In a culturally traditional ritual, the son washed the feet of his mother in incense-water, made her put on her traditional finery & sought fresh blessings from her in an elaborate ritual. As the social workers were still watching, the crowd strength crossed 500 in number. All were meeting Sheriamma and were simultaneously trying to figure out whether she recognized them. And to the surprise of all, she was actually calling many of them by their names. The waves of abounding joy were swelling up beyond measure. Sheriamma shared that she had left home due to altercation with her husband regarding some silly family matter/issue. But later she found herself absolutely clueless of the direction in which she was travelling, and the location where she had reached by then, was totally foreign to her. In a state of panic, she was totally lost and ended up wandering out even further. She was found on the streets of Mumbai a few months ago by an NGO called "Jeevan Jyoti". She was found in a very pathetic emaciated state and was further shifted to Shraddha. Many highly ranked officials and politicians had already lined up to meet her by then. The Shraddha Team were bestowed with all honor, best of sweets, shawl, clothes & an envelope each with Rs. 15,000/- as a gift apart from being pampered as the guests of the millennium. Ramakant happened to share the story of Sheriamma with his mother upon meeting her. She too became very emotional and was in tears. But she asked Ramakant to donate Rs. 10,000/- to Shraddha. And as per her word, Ramakant decided to donate Rs. 10,000/-, a part of the received 15,000/- to Shraddha Rehabilitation Foundation dedicating the same in his mother's name.

Wishing
that the arrow had a mark,
the pigeon its own space in the sky,
the swimmer his own waves in the sea,
the devotee his own idol to worship.

Wishing,
that the pain would ease,
the throbbing, die out,
the body finding its own earth,
mortality touch immortality.

But it was not to be,
the tears left to tell their own story,
the sobs unrelenting,
the screams rising higher and higher,
the flames enveloping,
wishes burning to a cinder,
even the ashes scattering,
leaving no trace,
never to be...

Wishing,
Wishing...

Sheru Mistry Contribution

Destiny being what it is, and Synchronization being the dominant theme in Shradha's wheel of fortune, just about the time we purchased the Karjat plot, I had been visited by a private patient in my private consulting at Borivli in Mumbai. Her relative, one Rasik Hulsogi who had accompanied her, unknown to me, had made enquiries about Shraddha. He was so taken up by hearing about the work our NGO was undertaking, that on his own, again without even me getting to know about it, he pitched our cause to one of his insurance clients Sheru Hosi Mistry from Rustom Baug, a Parsi lady who had been searching high and low for a project involving the mentally ill. She was really moved by what she heard and requested Rasik to arrange for an audience with me. Rasik called me up and giving the background, requested me to visit Sheru at Rustom Baug in South Mumbai, leaving the final decision about visiting Sheru up to me. I didn't expect anything much to come out of this but even then, I went, out of respect for the efforts of Rasik Hulsogi. Belying my expectations, Sheru was positively charged up by the work and (she confided in me later) my personal demeanor while explaining to her about the reasons for my undertaking such work. She took an instant liking to my younger daughter Kanika too, who had accompanied me. Multiple meetings and legalities sorted out, she agreed to donate the construction costs of one entire unit in our Karjat Center. And this without even having visited our Center once.

I insisted that I would accept her donation only after she and her husband Hosi came to Karjat and saw for themselves, what we had conceived. I thought that was noblesse oblige on my part. They acceded to my decision. I went personally to pick them up from Rustom Baug on the decided day of the Karjat

visit. They were swept away by the vastness & the enormity of the concept.

Realizing the ground reality that we still did not have funding for a last unit envisaged in the Center, Sheru Mistry (God bless her benevolent soul) decided then & there on the spot in our Karjat Cneter to donate money for the construction costs of a second unit too. Sheru gave a bulk of her life savings to Shraddha, dedicating one unit each to the memory of her departed father & mother.

She chose Emily Dickinson's poignant searing poem to be adorned in marble at the unit entrance.

If by my love and understanding,
 I can keep one heart from aching,
 If I can wipe another's tears,
 And with my care, smooth out his fears,
 If to one unloved, I can give affection,
 Thereby give his life, a sense of direction,
 If I could strengthen another's failing courage,
 In his hour of despair,
 Or help build a broken life,
 Once thought beyond repair,
 If I can lift another's pain,
 Make him want to live again,
 I shall not have lived in vain,
 I shall not have lived in vain....

**Sheru Mistry's own Words
were equally
Moving, Heart-Felt & Touching -**

Shraddha's mission, in spirit, resembles that of Mother Teresa's. From the time a mentally-ill destitute is picked up from the streets, till his/her reunion with their families- (who may be spread anywhere across the length and breadth of India) - not a single rupee is charged. It is ENTIRELY FREE. Those rare ones refused by their families after cure become permanent inmates of Shraddha. Despite agonizing and time-consuming efforts, those rare ones become family-orphaned for life. To such as these Shraddha becomes a "caring home" for life. They will live here frugally, but cared for in Shraddha's sheltering walls. At times Shraddha feels the last rupee will soon be over, but its vision and commitment never wavers. OF FREE TREATMENT. Of reintegrating lost lives into the productive mainstream of life. And God always comes to the rescue of Shraddha at the last moment with last minute donations. The mission goes on and on. With courage within, and God overhead. This rarity of concept and the sincerity with which it is practiced by Founders Drs. Smitha and Bharat vatwani completely won me over. For fifteen years, I searched for a rare, a one of its kind Project. I found it at last, in Shraddha. I visited Karjat many times. Interacted with patients. Admired the dedication of its staff. And the rarity of its founders.

I knew beyond doubt this was the unique project I had been searching for fifteen years. It would fulfill the lifelong dream of my mother – a project worthy of the waiting and matching her pure and noble vision. I financed two entire units humbly for Shraddha. It is my privilege to have done so. One unit is in fulfillment of my mother's life's dream of serving the poorest of the poor. The other is my tribute to my sterling and precious father whose contribution to my life is low key and immense. I am not a corporate nor a member of any Club / Association. I have limited financial funds collected over a lifetime of services and personal thrift. But I am proud to hand over a huge portion of my meager finances to Shraddha. As I said, it is my privilege to do so. I humbly suggest to anyone who comes across this appeal to contribute, big or small, to this rare and worthy project. Every donation will be immensely appreciated. It will be received gratefully and utilized completely for these Children of a Lesser God.

To end, I would like to share my thoughts in verse:

No effort is ever lost,
 Every wavelet on the ocean tossed,
 Aids in the ebb tide or the flow,
 Every kindness,
 Lessens human woe.

The Background of Shraddha as an NGO

Every human being has a moral and ethical right to treatment.

In case of mentally ill patients with relatives, the relatives can and do take the decision, whereas in the wandering mentally ill destitutes, this right is taken up by either the Government infrastructure or NGO Institutes like ours.

Shraddha is a humane experiment, perhaps the only one of its kind in India, providing treatment, protective care and rehabilitation to a neglected group of wandering mentally – ill roadside destitute and reuniting them with their lost families.

Various reasons are causative in bringing about the incidence and phenomenology of mentally ill wandering on the streets of India---

- a) Out of a total health budget of 65012 crores for the year 2020-21, only 40 crores were allotted to the National Mental Health Program. With the Indian Government spending 0.07% of its health budget on mental health, compared to 12% - 18% in other developed countries, mental illness in India has been considerably under invested in and the available services fall severely short of demand.
- b) The bulk of India is in a lower economic range.

- c) Very few numbers of psychiatrists in India. There are just 8000 odd psychiatrists in India (6 per 10 lakhs in India vis a vis 60 -200 per 10 lakhs in developed countries). Even assuming the minimum conservative requirement of 30 psychiatrists for every million population, many of the districts of all the States within India do not have a single psychiatrist. WHO estimates of 2011 indicate that 81% of people in India with severe mental disorders receive no treatment at all. Barring Epilepsy, Treatment Gap for **ALL** Mental Health Disorders is over 60%. Ironically it is in urban areas where medication and psychiatrists are available, but in rural areas medication is not available nor are psychiatrists.
- d) A Severe Deficit of Mental Health Professionals such as Psychiatrists, Clinical Psychologists, Psychiatric Nurses, Psychiatric Social workers etc. leading to lack of awareness in general public regarding Mental Health.
- e) There are just 43 government-funded Mental Hospitals in India with 18800 beds. This coupled with a meagre 10000 beds available in Psychiatry wards of Government Hospital makes an average of one bed available for 48000 population. Quite a huge percentage of the beds in the Mental Hospitals are occupied by chronic long-stay patients, drastically reducing turnover. The Primary Health Centres don't stock medication and huge populations of people with major mental illness don't have access to either treatment or to medication.

- f) According to a report submitted by NIMHANS (National Institute of Mental Health and Neurological Sciences), Bengaluru to Government of India, mental illness afflicts 13.7% of the population viz. a whopping 180 million Indians, with 1.9% of the population (25 million Indians) afflicted with severe mental disorders, which if left untreated could well result in the patient walking out under the influence of the mental illness and becoming a wandering destitute.
- g) The Population Census 2011 of India has estimated that 1.8 million Indians (0.15% of the Indian population) are homeless. Studies have shown incidence of Mental Illness per se in the homeless is 50-60%. So almost 1 million Indians are homeless & mentally ill.
- h) There is very poor awareness in India about mental illness, its scientific basis, its symptomatology, its amenability to treatment.
- i) False cultural beliefs abound in the populace of India, more so in the rural villages where cultural beliefs abound like folklore, that mental illness is caused by 'external supernatural forces' 'evil spirits' 'black magic' 'spirit possession', and 'karma'. Belief in supernatural, non - medical explanations of mental illness and the easy accessibility of traditional healing resources are important reasons for not seeking medical help for mental illnesses in India.

- j) Studies from various parts of the world suggest that individuals with mental illnesses seek non-medical explanatory models of the illness. In South Asian countries, only a handful of patients with mental illnesses receive psychiatric treatment, and the majority of them are forced to hide their ailments, even though they cause substantial distress and role impairment. As a result, individuals who have mental illnesses approach easily accessible traditional healers.
- k) In a rural village a patient suffering from schizophrenia, is assimilated within the joint family cultural system without a lot of discrimination. But when these villages become towns, there is an increase in nuclear families, care provision demands more resources and there is a corresponding decreased tolerance to these psychiatric illnesses. Gender bias aggravates problems.
- l) There is stigma, discrimination and humiliation against the mentally ill prevalent in India, making the patients as well as their relatives hesitate from seeking out psychiatric treatment. Due to Stigma Attached nearly 80% of people suffering had not received any treatment despite being afflicted by the mental illness for over 12 months.
- m) Ultimately, it becomes a catch 22 situation- the more we isolate mental health, the more we create barriers.

- n) The severely mentally ill have absolute lack of insight into their mental illness. They have nil awareness about the fact that their mental faculties have been compromised and feel that they are alright and deny illness altogether.
- o) The economic burden of mental illness contributes significantly to the treatment gap in India (Bloom et al 2014). The costs of long-term treatment, including consultation and medication costs (Sharma et al 2006), travelling costs to treatment centres (Srinivasa et al 2005; Sahoo et al 2010), and the stay in hospital (Sahoo et al 2010; Narayan and Kumar 2012), all contribute substantially to the economic burden of mental illness. The total treatment costs are significantly higher among people who are unemployed, chronically ill, disabled, and those who visit the hospital often (Chisholm et al 2000). Further, the indirect costs of mental illness are significantly higher than the direct costs (Chisholm et al 2000; Grover et al 2005). Studies in mental health economics suggest that the hidden & intangible costs are difficult to monetize & add to burden. This is because disability & disadvantage affects family members & care-givers. The expenditure of time in caregiving, the inability of the patient & caregiver to work, the social isolation, psychological stress & stigma, and a poor quality of life contribute significantly to the indirect costs of mental illness in India.

Because of all of the above points of -- Lack of awareness / Economic hardships / Stigma / Lack of treatment and care / Lack of infrastructure - many schizophrenic patients from both rural and urban areas get unwittingly separated from their homes and end up as destitutes - unclothed/ unfed/ uncared/ untreated.

Thus, India without a massive mental health movement will see a lot of homeless destitute patients.

Shraddha works with these destitutes.

Shraddha does not take in destitutes brought by family members or whose family antecedents are known; the idea being to treat the lost and the wandering mentally ill and ultimately reunite them with their families.

Shraddha has focused on a single segment client definition, roadside destitutes who are mentally ill and need treatment, rehabilitation, and reunion with their loved ones. There is no known institution in India, run by practicing psychiatrists, that services these marginalized members of our society.

The Newness of Shraddha's Interventions are Fourfold -

To devote all resources to the client segment of the mentally ill roadside destitute that are invariably ignored and shunned by people, and are unfed, unclothed, uncared, and separated from their families. More than 500 of these patients are to be found aimlessly wandering in the metropolis of Mumbai alone.

An indigenously adapted approach of custodial care inspired by Baba Amte's Anandwan suited for rehabilitation which combines a compassionate approach to socialization, occupational engagement, & professional medical intervention. This approach is located in idyllic surroundings and an open field environment and provides rehabilitation through occupational participation in a range of agriculture, vegetable cultivation, dairy farming, water harvesting and other activities so that the institution treats the mentally ill with dignity, simultaneously preserving or building daily living skills.

Reuniting these patients to their families who have long thought of them as lost or even dead and entrusting their care with the ones who love these patients.

Educating the family, neighboring locals & elders, with organized gatherings involving hands-on question-answer sessions about mental illness; causation, symptomatology, treatment amelioration; dispelling myths and misconceptions about Schizophrenia.

The Objectives of The Project are -

- To rescue maximum number of mentally ill destitutes.
- To provide free shelter and food to the rescued patients.
- To provide free pharmacological treatment to the rescued patients.
- To rehabilitate them with various psychosocial interventions.
- To trace out addresses of the patients & correspond with the families.
- To facilitate reunions of rehabilitated patients with their lost families.
- To follow up with as many reunited patients as possible in order to ensure their well-being.
- To promote massive mental health awareness among rural villages, schools, families, police personnel, railway officials & general public.
- To network with other NGOs and Government Institutions and Mental Hospitals sheltering destitutes in order to generate collective efforts.

In about 90% of the destitutes recovery is possible and some can even expect full and lasting recovery.

Another human being
within the faceless masses,
Another wave frothing
on rocky shores,
Another soul trapped
in the webs of mankind,
Another dream spurned
into the darkness of the night.

A distant speck
on the horizon,
A fading star
in the twilight of life,
A comet
trailing into oblivion,
Scattered dust
in the sands of time.

A pined piper
devoid of rhythm,
Words estranged from
the mainstream of conversation,
Another scream piercing
against the rising octave of sound,
Another echo dying
bereaved of its source.

Me,
unto my melancholia...

The Distance of Life's Journey Borne

The years passed by in a frenzied flash after setting up the Karjat Center. Work was gruelling but emotionally satisfying.

Innumerable students from different colleges visited our Karjat Center. Be they as a part of a single day orientation visit or as a part of a National Social Service (NSS) camp for a whole week stay, they came in hordes. Nasik's MVP Samajache College of Social Work, Thane District Colleges Association, Raigad District Colleges Association, Satara's Yeshwantrao Chavan Institute of Social Sciences, Pune Colleges (Bhartiya Vidyapeeth, Karve Institute of Management), Mumbai Colleges (Ruia College, Vaze College, Jai Bharat College, Manjunath College, SNDT), Navi Mumbai (Yerala Homeopathy Medical college), Karjat (IBSAR, KGKC), Khopoli (KMC), Ulhasnagar (SST), Mumbra (Anjuman-E-Islam Girls College), Karnataka Shirva St Mary's College, Tamilnadu Dindigul Anugraha College, Hyderabad's Maulana Azad National Urdu University ...the list was endless. All sent their students. South Mumbai's prestigious Elphinstone College organized a NSS camp resulting in awareness of over 100 students to the plight of these destitutes. A subsequent follow up visit by 11 professors of same college resulted in even further sensitization & spontaneous donation of 25500/-.

On one occasion, two nurses from England, specializing in psychiatric nursing, came for a 3-week in-house international posting & training program and stayed in our Centre. They even escorted patients to Bhopal in the reunion trips. In the same year, 10 students from Washington University of the US, pursuing a postgraduate career in social work & accompanied by their professor, put in a full day field visit to our Centre.

Not to be left far behind, our social workers designed

awareness posters, easily decipherable language handbills of psychiatric illness, which they would distribute freely in the villages they visited, while reuniting the patient with his family. Word and awareness about the causation and the treatability of mental illness started spreading in the trains when they travelled and at the railway stations when they alighted.

Grassroot Awareness & Actual Ground-Zero Work. Awareness at its very best with all apprehensions, doubts and misconceptions about mental illness removed in totality. This nucleus of awareness propagated further by word of mouth.

Ramesh Mundhe, the local contractor of the Shraddha project, staying at nearby village Vengaoon (under whose Gram Panchayat our project fell) and who later became a very dear friend of ours, came across a female destitute just 30 kms (20 miles) away from our Center. The female was accompanied by a 4-year-old kid. Ramesh rang me up. I thought that the female must be a local laborer hanging around on the roads with her kid. He assured me she was a destitute and that her dialect was not from Maharashtra. I tried cajoling him out of it, never having dealt with a mother-child combo in our new just-barely established Karjat Center, but even my cajoling was half-hearted. In the back of my mind was that Ramesh seemed to have become emotionally moved by the sight of the lady & the kid (on hindsight I realized that Ramesh may have subconsciously identified with the lady and child because he had a 2-year-old kid of his own). Giving in to his animated plea on the phone, I consented. I asked him whether he was accompanied by a female in his car. He stated that while he did not have any female support person around, he would manage. Ramesh managed to bring the lady with the kid on his own, driving the car himself, his emotions going the distance. The lady improved and hailed from Punjab. The kid was one of those one in a million street kids who win over your heart from the moment you lay your eyes on one. Paradoxically, when the

time came for sending them off to Punjab for the reunion, we at Shraddha did not want to let them go. So bonded were we all with them. But part we did. And the lady and her kid reunited with her family in a distant village in Punjab. Ramesh Mundhe's innate proactive decency had made the covering of a distance of 1800 kms possible. Emotions could and do travel.

Steel Authority of India (SAIL) sponsored the Rs.4.82 lakh cost of Solar Water Heaters. As their slogan went, there is a little bit of SAIL in everybody's life. It finally entered the lives of the mentally ill destitutes housed at Karjat.

Police personnel became sensitized to the wandering insane and helped escort many mentally ill destitutes to our center for treatment. The police were a constant source of assistance and of phenomenal help even in tracing out the families of the patients whom we would take for reunion to distant villages. On one occasion, we had a recovered destitute who very confidently said that he was from Nanded in Maharashtra and that there was literally no need of an escort to be sent with him. And even if the escort had to be sent, the recovered patient would take his finger and lead him to his house. Giving in to his confidence, we sent a Telugu speaking social worker, one Sidhu, to escort him to Nanded. Sidhu could not speak a word of the local dialect of Marathi. To my absolute surprise, Sidhu gave me a call in the wee hours of the morning to tell me that the recovered destitute could not recognize any landmark in Nanded, and perhaps he may have been residing there some years ago. Not able to converse a word of Marathi, Sidhu was at a loss about the way forward. I asked him to go to the nearest police station and make me talk to the duty officer in charge. Sidhu did as was instructed. I explained to the officer in his native Marathi lingo briefly about our work and the predicament our social worker was in. I was myself not very sure what response my mere phone conversation would elicit, but it was the unwritten rule within our NGO not to leave any

stone unturned in our efforts and to go to the cops whenever in a difficult situation. We believed (or perhaps hoped) that the implicit truthfulness in our work would/may touch a chord within the powers that be. My hopes were realized, when the duty officer in charge started playing the genial host to the recovered destitute and gradually started the administration machinery churning. Till evening the destitute and Sidhu remained as guests at the police station. Breakfast, lunch and tea was on the house. Their story was described with a heroic touch to all the visitors to the police station who would curiously enquire about what exactly was the matter. Many of them praised the Telugu speaking Sidhu for doing this good kind-hearted act. Ultimately by late evening, the father of the boy was tracked down and shepherded from near Akola, a town some distance apart from Nanded, to the police station.

Apparently, the father was a migrant worker and had shifted residence seeking better job opportunities to Akola. A reunion which would have remained in the realms of impossibility had it not been for the proactive intervention of the police, with a well-nigh difficult job executed with their no-nonsense professional nose-to-the-ground approach. The common man's perception that the cops were an insensitive thick-skinned tribe took a nosedive that day.

It reminded me of an earlier time when the police had brought in a lady to my nursing home in the good old days of our initiation years & the destitute was actually wearing gold ornaments which seemed worth one hundred thousand rupees. When we asked the escorting police officer to put it on record, and if necessary to keep the ornaments in their custody, they said there was no need. They trusted our NGO and allowed us to keep the ornaments, knowing that we would return it to the lady when she had been recovered and reunited. Beneath their hard exterior, the police often had an emotional core and were good souls too. This has been our consistent experience.

In the year 2011 we had picked up 332 mentally ill off the streets. This was a six-fold increase in the quantum of work compared to the meagre 47 destitutes in the year 2006 when we had conceptualized and initialized the Karjat project.

One of the reunions was mind-numbing, to put it mildly. It was in Nanded where my social worker entered the house of the recovered destitute to find the photo of the destitute boy whom he was accompanying on the wall of the hall with a garland adorning it. Somehow everyone had come to believe that the boy was no more and apparently the last rites, albeit in the absence of an actual dead body, had been performed. Upon entering the house, the boy's parents and wife just could not stop their stream of tears. After literally an hour of consoling, congratulating and hugging my social worker Vikram Shelar took out his camera to take a group photo. The wife immediately shrieked in Marathi 'photo nako, photo nako..' literally meaning 'no photo, no photos..'. My social worker explained that it was routine, and only for the records. She said 'thaamb, thaamb...' meaning 'wait, wait...'. She went inside her bedroom, took a proper bath, put on her most colorful saari, adorned her best jewellery, put on her mangalsutra (what Indian women traditionally wear to connote that they are presently married), put on some beauty make-up powder, combed her hair to perfection, came out, and curling her hand proudly in her husband's arm, remarked 'aata kaadh maajha photo..' meaning 'now take out my photo..'. My social worker Vikram Shelar was so moved while describing this that both he and I broke down. The emotional magic of the Gods is only known to the Gods themselves. As the saying goes 'Bhagwaan, Aap jo karey so Aap hi jaane, Aapki Maya aur koi naa jaane' literally meaning that 'God, only you know what You are doing, the wand of magic that You weave cannot be deciphered by anyone else'.

Sensitive emotional articles about our activities in the Marathi

Anubhav and Divya Bhaskar had touched the common man and brought them out of the closet of indifference.

A statement made by Mother Teresa - 'We ourselves feel that what we are doing is just a drop in the ocean. But the ocean would be less because of that missing drop' was always there to give us the renewed vigor to continue on this daunting but destined task of ours.

In the year 2012 we had reunited 493 recovered mentally ill destitutes with their families all over India. Far surpassing our target of one reunion a day for the whole calendar year.

The really satisfying part was that 160 of these 493 destitutes were from different NGO's / Mental Hospitals all over India. Notable amongst the collaborations was Ahmedabad Mental Hospital, with direct involvement of Dr Ajay Chauhan, the Mental Health Secretary of Gujarat. These NGOs in turn had started taking in fresh wandering mentally ill off the roads, thus increasing the quantum of actual services rendered to the cause of the mentally ill manifold. The entire functioning of Shraddha has now become broad spectrum and truly pan-national.

All in all, a very strong team effort had started yielding tangible outcomes. A team of social workers leaving to reunite seven recovered destitutes in Uttar Pradesh, despite the biting cold and the fog conditions was testimony to 'the cause above self' credo adopted by the whole Shraddha Team.

On the accolades front, Times Now news channel chose our NGO as part of its ongoing Amazing Indians campaign, giving national coverage to the cause of the mentally ill.

A special thanks to a doctor collegiate friend of mine, Dr. Ali Poonawala, a Urologist by profession, who decided upon a unique way to generate funds & awareness about Shraddha and

and its activities. He happened to be a resident of Bangalore and cycled from Bangalore to Pune, a distance of 900 km, in a span of 5 days, starting on Jan 12th, and dedicated this cycling expedition ride to our Shraddha.

In the year 2013 we were able to reunite 533 destitutes, allowing us to accomplish our cherished dream of crossing the 500 reunions mark in a calendar year.

Notable amongst the reunions was a reunion in Madhya Pradesh of an elderly destitute whose son was in the army. The son had been touring the whole of Maharashtra, Karnataka and Andhra Pradesh on his motor cycle, using all his army contacts, searching personally for his missing father and on the very day our social workers brought his father to his home town, he was returning from the railway station having just booked a train ticket to some place to continue the search for his missing father. His tears knew no bounds on seeing his father, and our joy knew no boundaries.

Another cherished reunion was the 500th one. A well-wisher of ours, Akshay Bapat, had a friend of his contact him for an elderly man who was lying near the railway track at Panvel station. He had been apparently lying there for 2-3 days with no one even giving a second glance. The friend took him to a local Municipal Hospital where he was admitted, but the Hospital subsequently refused to keep him for the night claiming they had no night staff. The friend desperately contacted our Akshay, who contacted us and finally they brought the elderly destitute in ambulance to our Karjat Centre. The destitute was paralyzed on one side of his body and paradoxically had no psychiatric disturbance. Ideally our center should not have given him shelter, but given the flow of emotions, we helped out. The Gods taking heed of the positivity and the genuinity in the case, the destitute improved. From someone whom we thought might die in our center (with

the CT scan showing gross damage) he gradually started walking (with support) and talking. He turned out to be from Karnataka. And given his frail condition, we decided we send him directly by ambulance all the way to his village in Gulbarga in Karnataka. Our staff tells us that the look on his face and the tears in his eyes upon entering his village and meeting his family was worth all the hardships we had suffered along the way. And the Sarpanch and the villagers literally gave a resounding ovation to our staff. We had touched the magic figure of 500 reunions in a Calendar Year.

Again in 2013, a very unusual incident happened. I was coming back from Karjat late at night when a donor well-wisher friend of mine Ajay Shah told me that he had spotted a mentally ill destitute staying since many days near his building. It was late night and the building where Ajay Shah stayed was on my way home. I decided to pick up the destitute myself. It was dark. I was exhausted, and I helped him into my personal car without even giving him a second glance. He too did not utter a word. The mentally ill, like young non-verbal children, can sense a helping hand from far. Only when I reached Borivli (where my abode and private nursing home setup was) in Mumbai and saw the gentleman in proper light that I realized he was a foreigner. I was stumped. Anyway, since I had already escorted him to my Borivli setup, I decided to shelter him there only. He seemed to be speaking in a dialect which was similar to the Urdu/Arabic used by the Muslim community. In his case, I and my wife along with our Urdu speaking Social Worker, one Rehan Raza, had to put in a lot of ingenuity. Finally, he actually drew a telephone, an aeroplane and a home in child-like art form on blank pieces of paper. And we joined the dots. He could write his name in broken English. Since we knew he could speak a language which sounded close to Arabic, we started telling him names of different countries around the globe with a major Arabic Muslim population and upon hearing Iran, his face lighted up. Slowly, he started improving

with the anti-psychotic medication which we commonly used for schizophrenia. We wrote an official letter to the Iran Embassy and went over to them with his latest photographs, finally taking the recovered destitute to the Iranian Embassy wherein they established Iranian dialect bonding with him, took his fingerprints, and finally traced out his relatives. Phone call conversations established contact with his father, who was economically too weak to come down. With the collaboration between our NGO Shraddha Rehabilitation Foundation, the FRRO branch of the Mumbai Police (which deals with foreign visitors on Indian soil) and the Iran Embassy, finally he was technically deported from India. Our social worker, the Mumbai Police and an official from Iran Embassy saw him off at the airport. Medicines were given to him for 3 months. His father received him in Teheran, Iran. It was a truly gratifying experience. True social work knew no territorial boundaries.

Another landmark event was when we sent 25 recovered destitutes accompanied by 15 of our social workers for reunion to different parts of India on a single day in the month of May 2013. This was collaborative effort by our dedicated team of social workers at its very best.

On the donations front the noted writer Shri Russi Lala (who also happened to be Biographer of the equally legendary Shri JRD Tata) passed away and bequeathed in his Will a sum of Rs. 15 lacs for our Trust. Far beyond this amount, what will remain with us are his constant blessings and his genuine goodwill for our endeavors. His was a guiding word through the ups and downs of our Karjat project. May God bless his soul.

We were also felicitated by the Maharashtra Chambers of Housing Industry (MCHI) with a donation of Rs. 5 lacs.

Appreciation Letter by Mehta
From USA
With a donation of Rs. 1,20,000

September 9, 2014

To,
Shraddha Manasarovar,
Behind Shanti Ashram, Opposite Eskay Resorts,
Off New Link Road, Borivli - West, Mumbai - 400103, India

Respected Sir / Madam,

My brother and I are indebted to your organisation for embracing and rescuing our brother.

We have been blessed by God to grow and live in privileged circumstances. We go through life helping others who are less fortunate without thinking much. We throw a coin to a beggar; give donations to charities that knock our doors, or distribute food at the temple, believing it is what good people do. However, we are certainly not aware or choose not to be aware of the many sufferings of others or how our small contributions really help. Sometimes we even unreasonably and preposterously engage in criticizing the good work of others.

When our brother did not return from his walk, it hit home. Our family was in despair. Each day of his absence was difficult to bear. Your kindness, caring and effort to ensure his safe return was so great and so overwhelming that it leaves us speechless. It leaves us with exceptional appreciation for work your organization does.

We can never say "thank you" enough. However, we would like all workers and volunteers know that your effort is extremely appreciated from the bottom of our hearts. Your outstanding humanitarian work saves lives and returns peace to many.

We would like to help in your noble cause with a small donation. Kindly accept two cheques in the total amount of Rs 1,20,000.00 towards the Rehabilitation of Mentally Ill Roadside Destitute project.

Sincerely,

Mehta

Enclosure : Two ICICI Bank cheques for Rs 60000 each in the name of Shraddha Rehabilitation Foundation.

Dear Reader,

The name in this letter has been changed to preserve confidentiality.

One reunion in 2015 was exceptional. It happened in the village Sajaur of Bhagalpur district of Bihar a fortnight ago of an elderly destitute who had wandered out of house when he was apparently 25 years old, and now was being reunited after 40 years. He belonged to a Muslim family. The paradox of it was that his daughter-in-law had expired on the same day as the reunion & the father entered the house just an hour before his daughter-in-law's funeral procession (janaazaa) left his son's house. While grief was all around, the reunion did bring some respite and a wave of joy to the son, at having been reunited with his father after a span of 40 years. Given the fact that the Ramzaan month of fasting was going on, the moment became very poignant and took religious overtones. Our social worker Sarfaraz Ali, usually of few words, almost choked while narrating the incident. Such are the ways that human lives must untwine & darkest is the hour before the coming of the Light.

To top the Ramzaan reunion, on the very auspicious occasion of Eid of the same year, Shraddha crossed an indoor patient strength of 100 (a landmark by itself) for the first time. We had 107 patients housed in our Center. Believing in the plurality of religion, happening as it did on Eid, we felt that the Gods had truly bestowed their kindness on all of us over all these years.

Another reunion which deserves mention took place in Lumbini in Nepal, the famed birthplace of Gautam Buddha. The Lumbini local police went all out to bring about the reunion of the boy with his family. One felt blessed to reunite someone in these hallowed grounds.

The famous Babulnath Mandir Charities of South Mumbai came forward with a donation of 9 lacs for a Force ambulance. Given their long-standing reputation as a donor agency, we considered it an honor and a privilege that they had decided to join in with Shraddha.

50 students of the NSS wing of Konkan Gyanpeeth College decided to take a 3-day visit to Prakash Amte's Hemalkasa center in the remote Gadchiroli district of Maharashtra. I had the good fortune to accompany them. In fact, the students insisted that I accompany them, knowing that I shared an excellent rapport with the Amtes. Visiting Prakash Amte's center was both inspirational & almost like a pilgrimage. I came back recharged and rejuvenated. The students too got inspired and had since the visit become the extended family of Shraddha, becoming actively involved in the pickup of the mentally ill whom they would happen to spot on the roads. The seeds of charitable work had been sown and God willing some of them would become the future Prakash Amtes of India.

Heart-tugging instances worth sharing of year 2015 were:

a) A destitute who had been reunited in Uttar Pradesh 23 years back, came down specifically to Mumbai with a box of mangoes and home-made pickles and 'ghee' to trace us out and register his thanks and deep gratitude for saving his life 23 years back. He had brought his own photo of 23 years ago to show the change in him. A very tearful emotional moment. He also visited the Karjat Center (which was non-existent when his case had been taken up by Shraddha), was moved by the scale of operations and offered his services to help out in the reunion of recovered destitutes in UP.

b) The very first qualified psychiatric social worker appointed in our Karjat Center in 2005, a young lad by the name of Jinto Abraham, who put his heart and soul into his work in Shraddha for 3 years, before moving on to Australia, put in a visit to Karjat and ended up donating 50000/- to Shraddha. The once salaried-by-Shraddha social worker ended up becoming a donor-of-Shraddha and topped the act by humbly stating that the money was a mere token for all the good change that Shraddha had brought about in his life.

c) A destitute who became acutely medically critical was admitted in a nearby private nursing home. An amount close to 90000/- was spent on his treatment (some high-end antibiotics had to be used) but finally he recovered, and finally he was reunited in Bangladesh. Apparently, he had a twin brother and the entire village came out to celebrate his homecoming. The boy had become mentally unwell, coincidentally during the routine visit of the family to Panipat in India as tourists, and under the influence of the mental illness, the boy happened to get separated from the family. The family had tried high and low to trace him out, but finally disillusioned, had gone back to Bangladesh. All hope was lost, until the boy turned up in the village after a span of 5 years, recovered and in good health.

d) While escorting female recovered patients in the border area of West Bengal, our social workers team led by Ismat Jahan, were questioned by the local police, who were on the lookout for people involved in the flesh trade. Upon coming to know of our work & verifying antecedents from Karjat local police, they ended up tracing out the village of the recovered female destitutes & accompanied our staff all the way to the village. Truth truly prevailed.

e) A lady on her daily walk to her workplace noticed a mentally ill destitute in a miserable condition on the roads in Byculla in Mumbai. She sent us a mail requesting us to help out. Since all our social workers were out on trips, we requested a social worker-volunteer called Dominic (who by profession was a Telephone Operator in Sion Hospital in Mumbai) to have a look at the destitute. The leg of the mentally ill destitute was decaying because of worms infecting it (maggots). Dominic got the destitute admitted in Mother Teresa Missionaries of Charity center (Asha Daan) at Byculla. The Sisters over there started with the treatment of the badly infected leg from the word go. Finally, our Resident Medical Officer and social workers visited

the destitute in Asha Daan and initiated psychiatric treatment and began tracing out the home address of the boy. A couple of weeks later another team from Shraddha went to Andhra Pradesh and tracked out the parents of the boy. The son had been missing for 16 years and from the photos shown to the parents, they were unsure whether it was their long-lost son. A telephone call to Asha Daan and the voice of their son over the phone dispelled all their fears, and the tears of joy started flowing. Finally, the father came over to Mumbai and took his son back to his hometown near Mehboobnagar in Andhra Pradesh. The destitute never truly physically entered our Karjat Center, but the life was still saved. Good-hearted collaboration of well-meaning souls working its own magic.

Despite having a team of 24 social workers on our payroll, on any given day there were only 2 - 3 social workers physically present in the Karjat Center, while the rest were all traveling to different parts of India on separately assigned reunion trips. To say that Shraddha had a good dedicated team of workers is the understatement of the year. One of the last reunions of the year was in Himachal Pradesh, where the temperature was at a freezing two degrees.

On a very personal note, I truly wished Baba Amte was alive to see our efforts over so many years bear fruit. With the benevolent twinkle in his eyes and the trademark impish smile of his, he would have clasped his hands over mine, and having said nothing (a personal observation of mine that words often failed him when he was truly moved) would have still said it all. To which all I would have wanted to reply would have been 'Baba, Thank You for being there'. But my emotions too would have got the better of me and choking on my words, and after my respects at his feet, a heart-warming long hug would have followed. Years have passed by, the inspirational memories still remain, fresh as the morning dew. Bonding at its emotional best.

Alone & lonely.

Like the vulture sitting on the stark tree top,
Like the sliver of light creasing
the clouded landscape,
Like the wisp of smoke trailing miles away,
Alone & lonely.

No place to go,
No space left,
The snow trickling leaving the terrain bare,
Alone & lonely.

Like the skyscraper stranded
against the bleak horizon,
Like a broken-down vehicle in a traffic jam,
Like a mangled corpse in a bombed-out wreck,
Alone & lonely.

No words to mouth,
No songs to sing,
The painting waiting for the painter's dream,
Alone & lonely.

Like the tears streaming down wrinkled cheeks,
Like a man in mourning in the human sea,
Like the body buried under the weight of grief,
Alone & lonely.

Alone & lonely.

In the year 2016, Shraddha reunited 742 destitutes with their families. This worked out to a reunion rate of 2 destitutes on every single day of the calendar year.

From a reunion total of a 47 destitutes in the year 2006 (averaging a mere 4 per month) when the Karjat project was inaugurated, to have touched a total reunion rate of 2 destitutes on every single day of the calendar year, just ten years down the line, actually warmed the cockles of our hearts.

In the year 2017, in a first for Shraddha, three Ambulances brought 47 mentally-ill destitutes on a single day to the Karjat Center. These destitutes were picked up partly directly from the streets & partly from NGOs in Surat & Ahmedabad specifically instructed to pick up the mentally-ill, being informed beforehand of our Ambulances arrival. We achieved this feat on the 25th of December, being Christmas. It was our way of celebrating the true spirit of occasion & spreading cheer & joy.

In one of the most heart-rending and poignant of reunions, our social worker Shahneer Akhtar reunited a recovered destitute in Saharsa, Bihar on the same day on which his mother passed away. Apparently, she had passed away just a few hours before, because of the continuing grief and distress of having been separated from her son who had left the house under the influence of the mental illness a few months before. She had been inconsolable since the separation and had gradually withered away. The son performed the last rites of his mother and set fire to the funeral pyre with the entire village gathered and engulfed in the emotionality of the event. Each one present felt that the mother's soul would be at peace with the son having reached in time to perform the last rites. Many amongst the crowd expressed the thought that such are the ways that human lives must untwine, and darkest is the hour before the coming of the Light.

Lastly, our social workers Dilip Sutar and Ritu Verma attempted a reunion of a young boy in Satna & Rewa in Madhya Pradesh. A two-day hunt with the photos of the boy being flashed on WhatsApp and Media and in Police Control rooms resulted in nothing. But our accompanying social workers got over a dozen calls from parents who had been separated from their children because of mental illness and wanting to ascertain whether the boy which our social workers had brought to Madhya Pradesh was their child. Poignantly, when our social workers had sat in the train after their failed attempts at the reunion, one couple came running to the train with a photo of their son who had been separated from them. The couple was distraught when they realized that it was not their son with us, and broke down, sobbing. While this incident made us aware that we were initiating hope amongst the countless parents all over India who had been separated from their loved ones by mental illness, it also brought with it its own moment of Truth. Which was that with the initiation of this hope, we carried with ourselves the realization that our responsibilities were monumental, and we needed to strive harder and increase our efforts. The pathos of the incident was humbling, making us at Shraddha come to terms with the bitter truth that we still had a long way to go. The silver lining in the sequence of events was that the parents of the young boy did turn up a few days later. Paradoxically, they were in Nagpur hunting for their same son having heard a rumour that he had been sighted there.

By now, it had been 16 years since we started our Karjat project. Giving hardcore statistical figures we had picked up -

47 destitutes in the year 2006
 134 destitutes in the year 2007
 156 destitutes in the year 2008
 212 destitutes in the year 2009
 261 destitutes in the year 2010
 332 destitutes in the year 2011

493	destitutes in the year	2012
533	destitutes in the year	2013
538	destitutes in the year	2014
636	destitutes in the year	2015
742	destitutes in the year	2016
920	destitutes in the year	2017
940	destitutes in the year	2018
1114	destitutes in the year	2019
309	destitutes in the year	2020
659	destitutes in the year	2021

On a very personal level, one is never certain as to what one has done is ever, EVER, adequate. Or whether what has been done has made a difference to the quantum of the cause, given the lack of awareness & stigma which surrounds mental illness in our country. Perhaps in terms of the real harshness of the situation, very little has been done.

But this is all that we could muster & come up with, this is all that our team had to offer to the Gods above. 8026 destitutes WERE picked up, treated and after recovery, reunited with their families in different parts of India. And all the inbuilt psychiatric-illness-awareness-sessions which go hand in hand with these reunions WERE achieved.

Resulting in, perhaps & hopefully, some miniscule amelioration of the pain which exists in the families of the mentally-ill, a pain so widely prevalent and distributed all over India.

Whether the roadmap for the cause of the wandering mentally-ill was in itself lighted up, or whether the horizons of psychiatric awareness were set ablaze, or whether a single candle was lit for a single destitute, or whether nothing was lit at all, we know not. Perhaps Light prevailed, perhaps nothing prevailed at all. Being human, one is fallible, unsure and always on shaky grounds.

But an attempt was made. An honest, sincere, bottom-of-the-heart attempt WAS MADE to do just that little bit for the cause of the mentally-ill downtrodden. An attempt that has left all of us at Shraddha emotionally drained but hugely and immensely emotionally satisfied too.

The ValueLabs Involvement

Carl Jung synchronization being what it is, one day the CEO Arjun Rao of ValueLabs, one of the leading IT corporates of Hyderabad happened to see a wandering mentally ill on the streets of Hyderabad. He was emotionally moved and wished to do something. Asking his team to follow up, Krishna Reddy, their HR head googled us out and gave me a call. While this was a first for Shraddha, I thought the fact that they had been moved by the plight of a wandering mentally ill on the streets of their city must be given weightage and the spark of a desire to do something for a mentally ill should not be snuffed out. I offered that our Ambulance would come all the way from our Karjat Center to Hyderabad. I remarked that there was no point in the ambulance doing such a long journey just for the sake of a single destitute, but instead suggested that our Team be allowed to rescue as many destitutes as were possible from the streets of Hyderabad. Krishna Reddy of ValueLabs magnanimously agreed to underwrite the expenses of the entire trip. Shraddha Ambulance Team reached Hyderabad, good intentions and good hearts gelled into one and the trip was a success. All the destitutes picked up from Hyderabad recovered and were reunited with their families and ValueLabs people appraised of the same. From there began a process of having at least one trip every month to Hyderabad, albeit with all the expenses of all the destitutes rescued, right through till their reunions, being borne by ValueLabs. It was a brilliant two-way collaborative effort, both of us keeping the cause of the wandering mentally ill uppermost in our focus of discussions.

Work proceeded superbly for over a year and a half and we had rescued over 150 wandering mentally ill from our Hyderabad trips alone. ValueLabs staff would personally come for the pickup in Hyderabad city itself & wherever the reunions were in the same district, would accompany our Shraddha team there

too. In one of the trips to pick up destitutes, Arjun Rao's wife personally accompanied our staff, boosting morale no end. Krishna Reddy and others from ValueLabs put in a first-hand visit to our Karjat Center. I was requested to give a talk to address all the employees of ValueLabs, in order to up the ante within them for social work.

Ultimately, it was in one of my meetings with Arjun Rao that I decided to push the envelope a little further. I suggested that why not we set up a separate Rehabilitation Centre by itself in Hyderabad for the wandering mentally ill. A collaboration wherein all the expenses were to be borne by ValueLabs and all the workload to be managed and supervised by Shraddha. We were hoping that with inputs from local psychiatrists and local infrastructural staff, we would help in replicating an independently functioning center with only the occasional technical inputs as the need arises, from our end. Again, Arjun Rao was excited about the idea and felt that it could be used as a pilot project and even went further to mention that were it to succeed, our collaboration could result in multiple projects in multiple cities. He pointed out that ValueLabs already had a base in Hinjewadi in Pune, and next on the line post-Hyderabad would be Pune. We too were hoping to rope in other corporates in other cities and help in setting up similar independently functioning centres across India.

A Memorandum of Understanding (MOU) was signed between Shraddha and ValueLabs. We were on. A separate bungalow structure was rented out at Lingampalli on the outskirts of Hyderabad and beds and infrastructure was put in place. We appointed two psychiatrists from Hyderabad itself on our payroll. It was mandatory as per the prevailing State Mental Health Act that psychiatrists from within the State in which any Mental Nursing Home was located be appointed as the Heads of the Centre. Nursing and other ancillary staff was appointed. The required License under the State Mental Health

Act was obtained. The Hyderabad Center became operational on 25th December 2012, our penchant for choosing an auspicious day to bring in tidings of joy, holding fort. So Christmas Day it was. The first bunch of ten destitutes were rescued from the streets of Hyderabad and shifted into it. Work happened, but unfortunately and tragically, very, very slowly. There was a difference of opinions between us at Shraddha and the psychiatrists appointed on the modus operandi of the functioning. And since the License to run the setup had been issued in the name of one of them, there was no replacing them easily. Shraddha and ValueLabs trudged along, ValueLabs unable to intervene as it was beyond their professional domain, and Shraddha with both hands tied, the outsiders attempting to manage the insiders.

It could have been a great effort, a landmark effort, a pioneering role model effort, but it was not to be.

Having a foreboding of doom, one fine Sunday morning, the bottom fell out. Our male nurse over there, Pradeep, a good soul, rang me up frantically and said that an indoor patient was having breathing difficulty which had been on, progressively increasing over two weeks, and unless I personally intervened, the patient would expire in the Center. I quickly galvanised our Karjat Ambulance Team and with emergency medicines, oxygen cylinders, medical officer staff et al, sent it on a nonstop drive to Hyderabad. The Ambulance Team just barely rested for a couple of hours before turning back with the critical patient. Non-stop return driving and the patient was admitted in an Intensive Care Unit in Panvel, the nearest township having good medical facilities near our Karjat Centre. The chest Xray showed that fluid had accumulated in the covering of the lungs and the patient was having tuberculosis (an illness reasonably common in the wandering mentally ill, given their poor nutritional intake and consequent low immunity). A drain was put from the outside into the covering of the lungs & three

litres of septic tuberculous fluid, was drained out. The patient's immediate respiratory distress and agony abated. The patient improved with appropriate tuberculosis treatment and finally was reunited with his family. A life was saved, albeit just.

This incident taught us all at Shraddha a lesson. That differences in attitudes and philosophies of functioning could well endanger a life. I spoke to Arjun Rao & the others at ValueLabs. All of us felt that while a destitute may die of natural causes during his/her sojourn on the roads, dying because of differences in opinion in our Centre was just not acceptable to our conscience. There was no second opinion on the matter. We mutually decided to shut shop in Hyderabad. The large-hearted Arjun continued with his financial commitment towards Shraddha and the cause with a monthly contribution which he has continued till date. God bless his soul. But yes, the cause did take a body blow because finally the conjoint dream of ValueLabs and Shraddha for setting up such Rehabilitation Centres all over India and duplicating the rehabilitation centre model bit the dust. Man may propose whatever he may wish to, but finally destiny has the last word.



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Date: 22nd September'11

TO WHOMSOEVER IT MAY CONCERN

Subject: Information regarding the treatment and reunion of road-side destitute patients.

Respected Sir/Madam,

ValueLabs is a software development, testing and KPO company, with multi-shore delivery capabilities. ValueLabs was setup in 1997 with a vision to deliver value to clients worldwide using an effective offshore project management model in the areas of QA, Software Development and Business Processes.

At the heart of our organization, lies this realization of our responsibility towards the society that has given us our identity. As a part of our Corporate Social Responsibility program, we are partnered with Shraddha Rehabilitation Foundation and have been working with them since April'09 to help them in identifying, treating and reuniting mentally ill roadside destitute patients with their families.

Shraddha Rehabilitation Foundation at Karjat, Maharashtra is a social welfare foundation which was started for the mentally ill destitute patients through an indigenously adapted approach of custodial care inspired by Baba Amte's Anandvan combines a compassionate approach to socialization, occupational engagement, & professional medical intervention.

Shraddha Rehabilitation Foundation has helped us to pick up and reunite around 180 roadside destitute patients from Hyderabad since April'09. We get regular updates about the patients picked up and are we are also involved in their pick up and reunion process. We support them by contributing an average amount of Rs. 2,00,000/- per month towards the pick up, transport, treatment and reunion of patients.

We consider Shraddha Rehabilitation Foundation as a valuable partner in our CSR activities who have helped us a great deal by helping us in the noble cause of our mentally destitute rehabilitation program.

Shraddha Rehabilitation Foundation was chosen to be our partner in our CSR activities after extensive research about their social work. Dr. Bharat Vatswani from Shraddha is a renowned psychiatrist in Mumbai and has been very committed and helpful in working towards the noble cause of rehabilitation of the mentally destitute patients.

Sincerely,

Krishna Reddy
Head HR

**Dr Bharat Vatwani with
the Legendary Social Worker
Padma Vibhushan Baba Amte**



At Anandwan, Near Nagpur - 2004



It is unfortunate that, because of ill health, I cannot be in Karjat for the bhoomi-pujan of "Shraddha Farms" on the 23rd of January 2005.

I sincerely believe that Shraddha Rehabilitation Foundation is doing pioneering work in the rehabilitation of psychiatrically afflicted roadside destitutes. It was my cherished dream to work for the mentally ill destitutes during my lifetime, a dream which somehow remained incomplete but which I firmly believe Shraddha will help to realize, fulfill and complete.

Mental illness has long been a shunned, neglected and rejected aspect of society, just as leprosy was and is. By taking up the responsibility of assisting, rescuing, treating and rehabilitating schizophrenic roadside destitutes, Shraddha is performing a laudable and courageous task.

I wish them all the support and encouragement along with God's own strength, patience, perseverance and resilience in their undertaking. May their work continue to expand and help in providing succour to the thousands of psychiatrically ill destitutes on the streets of India in the years to come.

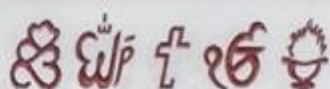
With heartfelt blessings from me and my family to the entire team of Shraddha,

Affectionately,

Baba Amte
15.1.05

With the blessings of Shri Baba Amte the Karjat centre was inaugurated by his son, Magsaysay Award winner & Padma Shri Prakash Amte in March 2006





This institution is inspired by

The Compassionate Love of Mother Teresa

The Visionary Altruism of Shri Baba Amte

The Patriotic Fervour of Shri Rabindranath Tagore

The Philanthropic Zeal of Shri J R D Tata

The Indomitable Spirit of Shri Sunil Dutt

and is dedicated

by

Shri Prakash Amte

on this auspicious day of Gudhi Padva

March 30th 2006

to

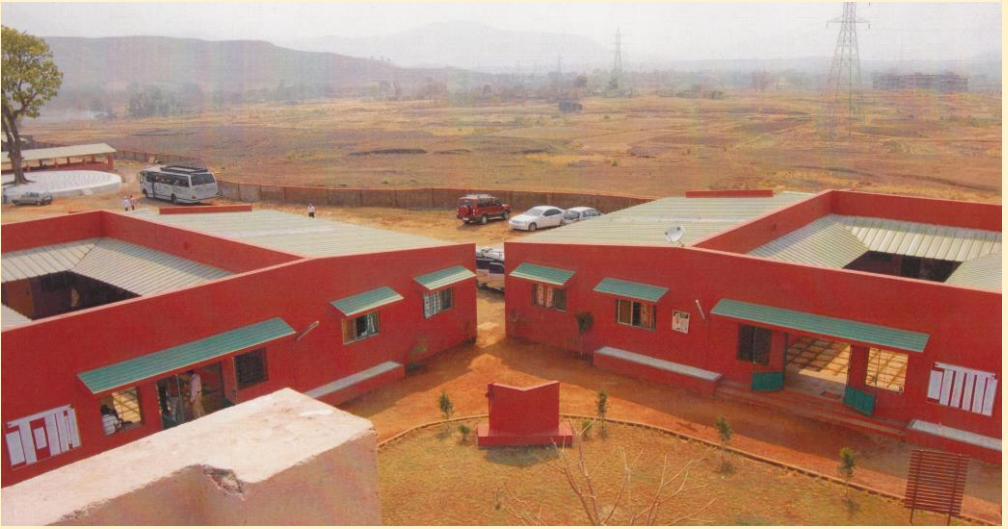
the thousands of mentally ill destitutes

wandering aimlessly

on the streets of India

May the Gods be with us in our efforts

Aerial View of the Karjat Center



AERIAL VIEW OF THE PROJECT



The Karjat Center





The Wandering Mentally Ill Destitute



The Wandering Mentally Ill Destitute





Reunions & Awareness in Villages



Shattering the Stigma of Mental Illness



**Dr. Bharat Vatwani
with
Shraddha Staff**



**Dr. Bharat Vatwani
with
Shraddha Inhouse Patients**



THE RAMON MAGSAYSAY AWARD - Background of the Ramon Magsaysay Award

“The Magsaysay awardees of 2018”, says RMAF President Carmencita Abella, “are clearly Asia’s heroes of hope, moving their societies forward through their unequivocal pursuit of the larger good. In genuine solidarity with the disadvantaged and marginalized, each one has addressed real and complex issues with bold, and creative, and pragmatic action that has engaged others to do likewise. The results of their leadership are manifest in the changed lives of the many they have influenced.” She adds, “All are unafraid to take on large causes. All have refused to give up, despite meager resources, daunting adversity and strong opposition. Their approaches are all deeply anchored on a respect for human dignity, and a faith in the power of collective endeavor. We draw much hope from the 2018 Magsaysay awardees, and much to celebrate about their accomplishments and greatness of spirit.”

The six 2018 Magsaysay awardees join the community of 324 other Magsaysay laureates who have received Asia’s highest honor to date.

The Ramon Magsaysay Award was created in 1957, the year the Philippines lost in a plane crash a President who was well-loved for his leadership and moral courage, his simplicity and humility, his passion for justice, particularly for the poor, and his advancement of human dignity. The Award was established to honor his memory and perpetuate his example of integrity in public service and pragmatic idealism within a democratic society, pursuing the mission of “honoring greatness of spirit in selfless service to the people of Asia.”

Magsaysay laureates are conferred their Awards at formal Presentation Ceremonies held annually in Manila, Philippines on August 31st, the birth anniversary of the late President.

The Ramon Magsaysay Award is given to persons, regardless of race, nationality, creed or gender, who address issues of human development in Asia with courage & creativity & in doing so have made contributions that have transformed their societies for the better.

Collectively, the Magsaysay Awardees' lives and work paint a portrait of remarkable change and achievement in areas as diverse as rural and urban development, poverty eradication, public health, the environment, governance, education, business and the economy, human rights, political reform, journalism, culture, and the arts.

In the sixty years of the Ramon Magsaysay Award's existence, Asia has made great progress, some nations more than others. Yet the region continues to grapple with problems of poverty, malnutrition, disease, injustice, and violence—as well as with newer problems that have come with economic progress itself. In continuing to recognize individuals & organizations who address these issues with extraordinary vigor, integrity, creativity, and selflessness, the RMAF seeks to honor the legacy of President Ramon Magsaysay & to place living examples of transformative leadership and inspiring service before the public.

From the Magsaysay laureates, present and future generations may draw courage, challenge, and hope.

Citation for the 2018 Ramon Magsaysay Award

BHARAT VATWANI

In few countries is the contrast between great wealth and extreme poverty as stark as in India. Of the latter, a popular image are its street people, dirty, disheveled, and famished, huddled on pavements, in train stations, bus stands, and public shrines. An estimated 400,000 of them are mentally ill, victimized not so much by poverty as by a problem society has not sufficiently understood and addressed: the problem of mental health. Stigmatized and feared, the response of many to these street persons is to pretend they do not exist.

One man chose not to pretend. Psychiatrist Bharat Vatwani was out dining in a restaurant with his wife Smitha, also a psychiatrist, when they were appalled at the sight of a thin, unkempt man drinking water from a street canal. Taking time to talk to the man, a mentally-afflicted college graduate, they decided to bring him to their clinic to be washed and treated. This show of empathy was not entirely surprising. Vatwani knew what poverty was like. Losing his father when he was only 12 years old forced him and his brothers to take odd jobs, like peddling books door-to-door. Struggling through school as a self-supporting student, Vatwani successfully completed his medical studies in psychiatry at Grant Medical College and at G.S. Medical College & Hospital, both in Mumbai.

After their encounter with the man who drank water from a canal, Dr. Vatwani & his wife started an informal operation of bringing mentally-ill street persons to their private clinic for treatment. This eventually led to the establishment of Shraddha Rehabilitation Foundation in 1988, aimed at rescuing mentally-ill persons living on the streets; providing free shelter, food, and psychiatric treatment; and reuniting them with their families.

Starting with a two-room tenement that could take only three people at a time, Shraddha drew public attention when they rescued and treated a street person who turned out to be a respected lecturer at a Mumbai art school, who had inexplicably disappeared. Learning about what the Vatwanis had done, the school's faculty and students organized a major art exhibition that drew 141 participating artists in India and abroad, and successfully raised US\$22,357. Using this seed money, the Vatwanis bought a piece of property in Mumbai for a 20-bed facility that they opened in 1997; the unexpected donation inspired them to further expand their work with the help of private donors, volunteer professionals, and social workers. In 2006, they moved to a bigger 120-patient facility in Karjat outside Mumbai, which had five buildings on a 6.5-acre land. By then, they had strengthened their three-phase therapeutic program, consisting of the rescue and treatment of mentally-ill street persons, reuniting patients with their families, and promoting awareness of mental health in communities.

Their rescue work has been aided by the police, social workers, and referrals. Shraddha's free custodial care and

treatment ranges from personal hygiene, medical check-ups, psychiatric treatment, to appropriate medication all done in the open, healing environment of the Karjat facility where patients can engage in simple farm activities and find solace in a multi-religious meditation center. The foundation tracks patients' families, arranges reunions, and uses such opportunities to spread a supportive and enlightened understanding of mental health among the families and their communities. In a one-of-a-kind mission that began in 1988, Vatwani and the foundation have by now rescued, treated, and reintegrated into their families and communities more than 7,000 of India's mentally-ill roadside destitute, with a remarkable reunion rate of 95%.

Vatwani's painstaking, humane undertaking has had to contend with numerous challenges. A deeply spiritual person, the good doctor is often beset by doubts whether he has done enough, given the magnitude of the mental health problem in his country. Notwithstanding these self-doubts, he remains confident in his faith that in the end, "Good work shall continue when there is inherent goodness in the work."

In electing Bharat Vatwani to receive the 2018 Ramon Magsaysay Award, the board of trustees recognizes his tremendous courage and healing compassion in embracing India's mentally-afflicted destitute, and his steadfast and magnanimous dedication to the work of restoring and affirming the human dignity of even the most ostracized in our midst.

My Response
To
The Ramon Magsaysay Award
(I penned this in a single ab-reactive cathartic shot)
Read Out
At The Award Ceremony in The Philippines

From the beginning of Time, the world, as we perceive it, has always been a conflict between Truth and Evil, between Justice and Injustice, between the Right and the Wrong. Ultimately, any genuine Social Worker, irrespective of his particular sphere of activities, supports and is a torch bearer of the former. And world-renowned community leaders like Abraham Lincoln, Rabindranath Tagore, Mahatma Gandhi, Mother Teresa, Nelson Mandela, Vinoba Bhave, Martin Luther King, the Dalai Lama, Baba & Prakash Amte have ended up becoming emissaries of Truth itself. Where the stone thrown into the pond of Life falls, it matters not. Often reaching far beyond this, are the implications of the ripples that the stone hitting the water has caused. And the Ramon Magsaysay Award, by recognizing these individuals from Asia, has further added to the distance of the ripples created by Asian social workers and Emissaries.

It is not individual causes that we as Awardees represent, it is the hope of a collective good within society that we represent. It is a hope that Truth and God shall prevail within all of us, within Mankind at large and that ultimately, we shall join in eternal bonding to the greater Cosmos of a God's Creation beyond.

Having said that, the cause of the wandering mentally ill roadside destitute which our NGO Shraddha Rehabilitation Foundation espouses, does deserve its place under the sun, under the larger umbrella of the unspoken tragedies that have befallen mankind. This is because the mental illness causing the destitute to end up on the roads, is not of his/her own making. The wandering mentally ill are shunned, rejected and denied. They brave the chilling winters, the searing summers and the torrential rains for days, months, years and often decades on end. And continue to be shunned, rejected and denied, to the point of non-existence. And to correct this Wrong, this Injustice, at least in India, was born Shraddha Rehabilitation Foundation.

We had thought in the good old days of its inception, like naïve believers, that in the span of our lifetimes, a lot would change for the wandering mentally ill of India.

But today, as I speak, having read a lot of literature on the psyche of social workers, both heard of and famous, and others, lesser known and not written much about, I am well aware that the laying down of one lifetime may well be inadequate for a cause. Abraham Lincoln had his bouts of deep soul-searching depression. But the cause which he fought for viz racial discrimination is still not sorted out in its entirety 150 years down the line. Rabindranath Tagore, the Nobel Laureate from India wrote 'Into that Heaven of Freedom, my Father, let my Country awake...' 75 years after his passing away, his Country is yet to realize his vision. Lincoln and Tagore and those innumerable thousands of silent strugglers all over the world, who have partaken in ideological wars over innumerable years, have taught us that Change is a Slow Process. However strong and deep rooted be the emotions, however piercing the inner outcry against social disparity or injustice, howsoever passionate the associated intrinsic desire for change, the wheels of the Gods move slowly, albeit very, very slowly.

And to silently continue on your chosen path, with your nose to the grind, like the faceless, nameless, anonymous soldier carrying the half-hoisted flag of Truth on his shoulder, becomes at some point of time, the wheel of silent revolution in your own silent unwritten destiny.

Leading one to understand the Gospel Philosophy of the Sages of Yore that truth is Truth only when it has the capacity to stretch beyond the limits of all endurance, light is Light only when it has the capacity to pierce the darkness.

In the solemn belief that good work shall continue provided there is some innate inherent goodness in the work itself, and that there has to be a perseverance of belief to outlast all beliefs that Truth and God shall prevail, I end this outpouring with a few lines from one of my earliest poems -

If Life,
could be founded on hope,
And Wisdom,
on mere understanding,
Then the horizons would be mine,
The rainbows notwithstanding,
But I had nothing,
Just this pen, paper and a few words,
And my feelings for you,
From the beginning of time.....

Thank you

THE RAMON MAGSAYSAY AWARD - MY PERSONAL OPINION ABOUT RECEIVING IT

My heart felt opinion was that I did not deserve the Ramon Magsaysay Award. All my life, I had felt that what I had done was inadequate for the cause of the wandering mentally ill. I could have done more, should have done more. The Population Census 2011 of India has estimated that 1.8 million Indians (0.15% of the Indian population) are homeless. Studies have shown incidence of Mental Illness per se in the homeless is 50-60%. So almost 1 million (10 lakh) Indians are homeless & mentally ill. All that we had done was picked up, treated, rehabilitated and reunited a mere 7000 of them till date. A fairly paltry insignificant number given the magnitude of the problem.

But despite this, I accepted the Award, because I felt it would bring focus to the plight of the wandering mentally ill not just in India, but in the whole of Asia and the world. When my wife and I went to the Philippines, we saw mentally ill wandering on the roads over there. The psychiatrists with whom we interacted there acknowledged and accepted their presence. It was ultimately a worldwide phenomenon, perhaps more in developing nations with their asymmetrical distribution of wealth, but yes, a worldwide phenomenon. And yes, because the Award carried with it its own reputation, the cause which we represented would get a much needed and long overdue fillip.

Having said that, we are confident that scaling up of our Shraddha Center at Karjat would not give the same fillip to the cause as much as the setting up of another few independent Centers all over India would. Multiple stones thrown into a pond at different places may well result in intertwining ripples spreading into varied directions, but with the gestalt of the sum total of the ripples far surpassing the sum of the individual parts. It is a proven behavioral law. Someone other than Shraddha has to take up cudgels on behalf of the wandering homeless mentally ill, albeit in the rehabilitation-reintegration model of Shraddha, and not in the lets-ward-them-into-infinity models adopted by innumerable other NGOs all over India dealing with the cause. The question is not how many wandering mentally-ill are sheltered in how many NGOs, the question is how many wandering mentally-ill find their way back home, albeit in a much better psychiatric state, as implied in the Shraddha model. The question is how many families are saved from the psychological morbidity associated with the separation from a loved one interminably, and the physical loss of a possibly alive/ possibly dead relative lost to mental illness. The question is how many wandering mentally-ill are granted their constitutional right to not just stay sheltered, but to stay with their loved ones, within their families and within their communities. It is this at stake which has to be addressed.

The survival or growth of our NGO Shraddha Rehabilitation Foundation is unimportant.

The question is how many could / can / and do take to the cause the way Shraddha has done. It is the seed within Shraddha which has to be the take-home point for all who

are exposed to Shraddha and NOT Shraddha by itself in its physicality.

Because ultimately it is not the mere factual existence of the wandering mentally ill roadside destitute which has to be empathized with, it is the pain and the agony within their existence which has to be empathized with and the emotions left behind within the relatives from whom they have been separated, which has to be empathized with.

Dear All, do give your deepest thoughts and even beyond your deepest thoughts, your deepest emotions to the issue at stake.

**Shattering the Stigma of Mental Illness
Through Empathy**

A Presentation

At Manila - Philippines

As part of the Ramon Magsaysay Award Function

STIGMA

Physical illnesses rarely carry any stigma.

Mental Illness does carry Stigma which could be :

- a) the prejudices / discriminating behavior by society towards people (and their relatives) labelled with psychiatric illness (Social Stigma)
- b) the internalizing by the patient of their perceptions of discrimination (Self Stigma)

Fallouts of Stigma –

Exclusion, low self-esteem, poor social support - Stigma causes mentally ill people to feel ashamed for something that is in reality, out of their control. There is social isolation and social loneliness.

Worst of all, Stigma prevents mentally ill from seeking the help they need.

Stigma has detrimental effect on treatment outcomes.

Stigma remains the cornerstone of stumbling blocks in the addressing of mental illness.

RAISING AWARENESS

Programs in media providing blogs, videos, articles help raise awareness of mental health.

Education programs are also effective for a wide variety of participants.

But raising awareness simply by providing information may not be a sustainable solution, since the stigma in itself is deeply entrenched over centuries of human existence.

FINAL OUTCOME

And thus, almost all over the world, perhaps more so in India, both the patient and the relatives majorly believe in the dogma of stigma.

Neither the one is ready to disclose his problems to self or others, nor the other is ready to accept the problem for himself, his mentally ill loved one or for others in society.

So ultimately, the mental illness is boxed in, closeted, riveted, festooned and plummeted. With no breathing space, the claustrophobia of thought, emotions, actions and treatment options sets in.

The illness starts multiplying internally manifold, literally becomes gangrenous in form, and at a subconscious level, ultimately manages to expunge the mentally ill from within their selves, their families and their societies. And thus, is born the WANDERING mentally ill.

The wandering keeps the mental illness within the patient, again at a subconscious level, in stagnated momentum, like a rolling stone, gathering no moss. No further additions or

subtractions are there to the thought, emotions, actions and treatment options, and the wandering becomes a way of life.

The schizophrenic man, walking and disconnecting from society, in an attempt to drown his anxiety, by the physicality of his own momentum and his own wandering.

Shraddha as an NGO addresses this physicality, this momentum and this wandering.

The key in connecting to the mentally ill is Empathy.

By voice, body language, demeanor, eye contact and above all soul contact.

Empathy is not sympathy, it is not pity, it is not largesse, it is not benevolence. It is beyond. It is the honest ability to communicate to the man on the streets that 'There, but for the Grace of a God above, go I. Therefore, I am you & you are I'.

The moment True Empathy is established, the claustrophobia of thought, emotions and actions which was festering within the psyche of the destitute, yields like a pricked balloon. The destitute agrees to get into the Ambulance of our NGO.

Or in some cases the destitute is brought to the Center by means other than Ambulance. In one instance our female social worker Farzana Ansari while travelling by train got down for refreshments at a railway platform 600 kms away from our Center, saw a male mentally ill destitute on the platform, was able to establish rapport with him to get into the train and bring him to our Center a good 10 hours of travel time away. In many instances, students of neighboring colleges who have had exposure to our work, are able to cajole the destitute walking on the street to sit on their motorcycles and bring them to our Center, a pretty long distance away. How did she/they achieve

this? The communication of Empathy. The communication of 'I am you, and you are I'.

Nobody has ever given a bath to the destitute or cleaned him up, or attended to his basic hygiene. He/she/they have never thought of it themselves, the stigma internalized against their own selves and revulsion to their own illness having set deep into their psyche, for months, years, decades. The Shraddha staff penetrate the psychic wall, and immediately take care of their hygiene. Fresh clothes are provided, the jungle of his matted hair cropped and trimmed, the outgrowths of his beard knocked off. The acceptance of him/her as human by the Shraddha staff, makes them accept themselves as humans. John Milton's Paradise Regained, albeit the glimmer of it.

The Shraddha doctors attend to his/her medical needs. Sometimes there is severe anemia (in lay terms, the oxygen carrying power of blood is less). A couple of blood transfusions are arranged. Medicines are provided to counteract maladies like fever, pneumonia, typhoid and malaria, common to the plight of the wandering mentally ill. Menstrual hygiene is attended to, in the case of female destitutes, by the attending female staff. Every act reflecting embodied care & compassion.

The patients are cajoled to, pleaded to, in gentle soothing tones to come forward with their names, their parent's names, their sister's names, the names of their husband/wife, their children, their kith and kin, the name of the village where they were born, the district to which they belonged, the school in which they studied, the movie theatre in which they saw their favorite cinemas, the festivals which they celebrated with their families, the Gods which they revered and prayed to. Questions which no one had ever asked them before, and questions the answers to which they had almost forgotten themselves. The capacity to make a wandering mentally ill destitute believe that he has an identity and that he belongs. Simple questions, no rocket

science, but interpersonal rapport at an Empathy level.

There is a routine established. Breakfast followed by the morning medicines, lunch followed by noon medicines, dinner followed by night medicines. Psychiatric medication is initiated to counter the scientific base of the psychiatric problem. All along, from day one, the patient is addressed by his name (not by a number, as is so common in confinements).

The patient is pushed gently to join group activities like yoga/ physical exercises in the open environments/ group prayer meetings in a multi-cultural setting. Coming to know of his/her specific skills, the patient is often incorporated in gardening, farming, masonry, electrical repair work, cattle attending, cooking, vegetable cutting and general cleaning within the premises. The destitute is made to believe that his contributions are unique, one of its kind, valuable and will be cherished, even after he has gone from the Center. The creation of the nuances of his/her individual inherent personality. A bygone psychic era, recreated. The balloon of Stigma, pricked further.

The doctors at Shraddha have made it a standard protocol to have all the patients present (male and female separately), while taking their rounds. Unless physical examination of the inmate demands privacy, the doctors address each one of them by name, in front of the others. The tone, body language, demeanor, eye contact communicating empathy for one, but the visual and the aural presence of it in front of the others, disseminates the Empathy to all, within the room. Every one of the destitutes present in the large room realize that here are caring, concerned people addressing each one of us, individually.

The presence of qualified professional social workers (the entire Team of social workers is present during the rounds),

hailing from different States of India, speaking different dialects of India, makes the patient belonging to a particular State/ District/ Region of India comfortable, because they are addressed to in a language and dialect which they understand, and which they have grown up with, and which has become a part of their Jungian collective unconscious psyche. This results often in an abreaction and emotional catharsis by the patients.

Citing an example, a patient, after about 2 months of treatment, once broke down and spontaneously reached out and took the pen from the doctor's hands and wrote a mobile number in his own file in his own handwriting, with tremulous hands. Since the destitute had recovered substantially, the immediate calling up on the mobile number (in front of all the other patients) and making the recovered destitute speak on the phone in an emotional gut-wrenching voice (the mobile number turning out to be of his brother), with the mobile being kept on audio 'speaker on' mode, made the whole room full of patients reverberate with empathy, empathy and more Empathy. Each one of the patients desired and wished that this fellow inmate (nay, a fellow soul mate) goes home.

Sometimes the bonding is so deep, that one recovered inmate comes forward and says that only after he has escorted safely the other two recovered destitutes (clubbed together in the same reunion trip) would he go to his own house. Till a few months ago, these same inmates were unknown to one another, but now the physical proximity had shattered the social isolation and loneliness and the ongoing recovery (facilitated by the monitored psychiatric medication) had the destitutes forging empathy bonds with each other, despite belonging to different sects and classes of society. Humans, establishing and proclaiming their rights to be human, and interpersonal emotional rapport weaving its magic.

Simple events like the doctors having their tea & a huge pile of

biscuits, during their rounds in front of all the patients, make the patients want to partake in the biscuit fest, and the request is never turned down by the doctors. Instantaneously, the doctors and the patient become equals. On occasions, the destitute reaches out and takes the personal water bottle of the doctor and drinks water from it. He is encouraged, not denied. And all this in front of the entire group of 80 odd male patients, if the doctor is taking rounds in the male ward. The worst amongst them, be they catatonic, or be they severely depressed, perceive a flickering of hope within their innermost unconsciousness. They may take months or even a year to recover, but every act of camaraderie makes them believe in Life and their own image in their own eyes, goes on the upswing. They are unchained from the shackles of Stigma, they are back from the skeletons of the dead.

Finally, comes the planning of the Shraddha reunion trips. The trips back to their homeland. Something which by now everyone of the recovered destitutes is waiting for and anticipating with bated breath, knowing that earlier to them, in every round of the doctor, averagely 2-3 patients on a daily basis, have not only been OKed by the doctor, but have actually left the Rehabilitation Center, escorted by the social workers, hailing specifically to those particular regions. They have understood by now, deep down within their beings, that their turn too, shall come. Hope re-kindled in a lost soul.

And loved ones, lost to the passage of time and forgotten because of the blunting of emotional faculties by the onslaught of mental illness, often remembered with fervor and passion. The atmosphere of men and women, remembering their children, and wondering how their loved ones and dependents must be faring in their absence, make every one of them bonded, in kindred spirit.

During the reunion trips in the train itself, since the recovered

destitutes wear Shraddha uniform, other co-passengers often enquire as to what is going on. They show compassion for the unknown destitutes, who have recovered to the point of being taken home. They wish them well. The co-passengers speak to them with respect. Sometimes, these fellow-passengers spontaneously come forward with disclosures of relatives of their own having mental illness.

Often, Shraddha Ambulance, while going on its reunion trips is provided free food for all the patients (and the escorting team) by the lodges where the Ambulance Team stop for refreshments. Everything is a spontaneous outpouring of goodwill. The Team is cheered all along, unknown people sometimes chipping in with small donations, local journalists covering their sojourn.

And all along, at every small step of the way, the Stigma surrounding mental illness is diluted & made null & void. While conjointly Empathy is created, cultured, watered & magnified. Small changes, perhaps in very small cross sections of society, but the ensuing gestalt far outstripping the sum of its parts.

Ultimately, during reunions itself, there is an outpouring of emotional catharsis, as loved ones meet loved ones, after perhaps months, years and decades of separation. Children meeting their parents, brothers meeting their sisters, each with their own story to tell. Of the pangs of separation and everything beyond. Sometimes when decades have passed, the last rites of the missing one have already been done and dusted with, photo frames of them have been hung and garlanded, and all the tears have been shed and dried. Only to find that Resurrection, Hope, Life and the Gods above have persevered. And the unabated and unbridled tears of Joy have won in the battle against separation. A separation caused because of the Stigma attached to mental illness, by both the sufferers themselves, and the immediate as well as the encompassing

peripheral caregivers within the surrounding society.

Where the tracing out of family antecedents is difficult, help is sought by social worker from local administration, the local police and from the well-meaning souls (of whom there is no dearth) of the neighborhood. Because the social worker leading the reunion trip is invariably a local belonging to that particular State, and knows the local language and dialects, interest is generated spontaneously.

Since the recovered destitute is in a psychiatrically stable condition, and being attempted to be reunited after months or years of separation, the curiosity levels generated are very high. Questions are asked to him as well as the social workers about mental illness, its causation, symptomatology and treatment. Impromptu street-corner type gatherings happen. The focus naturally and autochthonously veers towards the ‘Treatability of Mental Illness’.

On many occasions, people from amongst the crowds disclose the presence of psychiatric illness in their kith and kin, and pester the social workers for a solution. The seniors among the escorting team, carry spare basic psychiatric medication with them, and after WhatsApp discussion with the Shraddha psychiatrists, dispense these medicines accordingly. Not the best of professional consultations, but the initiation of hope and succor in lost lives, and above all mental illness is ‘out of the closet, on to the streets, and running into the open’. The myths of mental illness demystified, instantly and majorly.

Having stated the above, there have been occasions when immediate relatives have been reluctant to accept their mentally ill relatives (because of misconduct or irrational behaviour or sporadic acts of violence that they may have committed in the past during their mentally ill phase). In such cases, it is the genuine empathy and understanding of the family elders, the

village elders, the village administrative heads and the local police which has chipped in, to instill maturity into the thought processes of the immediate relatives (citing the improved mental status of the recovered destitute to drive home their point). And more often than not, wisdom and maturity has prevailed. Stigma, the demon hounding mental illness, is tossed out of the window, and an all endearing all-encompassing Empathy reigns supreme. Stigma and Empathy become inverse correlates in these meetings.

At the social-service level, Shraddha has experienced growing Empathy at different levels and different cross sections of society. Citing only two from the notable ones, the first was when 141 renowned and famous artistes from all over India and abroad donated their paintings in a fund-raising Art Exhibition at the Jehangir Art Gallery in 1993. This was a huge, huge outpouring of emotional response from them, to Shraddha having helped treat and rehabilitate a Gold Medalist Lecturer from their own fraternity school, the famed JJ School of Arts in Mumbai. There was massive public outcry and widespread media support, and the Exhibition was a runaway hit. From the funds generated, Shraddha could establish the first ever Rehabilitation Center in the whole of India exclusively dedicated to the cause of the wandering mentally ill in Mumbai in 1997. The wandering mentally ill of India had found their small place under the Sun.

The second noteworthy instance of involvement from within the social service sector was when a renowned body like the Rotary Club of Mumbai Queens Necklace began with a small sponsorship in 1994 towards the costs incurred for treating and reuniting 4 destitutes. The resultant emotional satisfaction gradually scaled their involvement upwards over the years, to them donating the cost of construction of an entire unit in our Karjat Center in 2007. And finally, the empathy levels grew further with them reaching out with sponsorship of the costs

incurred for 100 destitutes and 150 destitutes respectively in the last two years. And summed up with their Ex-President Sanjiv Mehta writing recently ‘Shraddha has become a household name at RCMQN and the intent to support has become automatic’. Now Shraddha has been invited to give a Keynote Address at the Rotary International ‘Institute’ in Chennai, India wherein 800 Rotary International District Governors from India, Sri Lanka, Pakistan, Bangladesh and Nepal will be attendees. Stigma demolished and crushed and Empathy expected to multiply a zillion fold, internationally.

So, in the final analysis, it is not a separated loved one that Shraddha reunites with his/her family. In the broader spectrum of events, it is the debunking of the Stigma that surrounds mental illness at the individual level, at the family level, and at the society level which Shraddha accomplishes, albeit in bits and pieces, in a fragmented journey across the length and breadth of India.

And it does this with an all-pervasive Compassion and Empathy for the plight of the common, grossly misunderstood, wretched, neglected mentally ill man.

And this perseverant Empathy kindles further Empathy for the mentally ill, within the sufferers themselves, their families, their villages & the surrounding societies at large.

To criticize, one may well come forward with the argument that there is no structured approach to the problem of Stigma of Mental Illness by our NGO, Shraddha Rehabilitation Foundation. One would not be far off from the Truth. But then, the genesis of Shraddha was never in Rational Thought or Logical Reason.

The genesis of Shraddha itself was in an Emotion, the Emotion of Empathy. An outcry of a few human beings reaching out

intuitively, instinctively to another human being in distress, in pain, in the nadir of agony. Reaching out to provide solace to the un-screamed cry of that unknown human being, with an outpouring of feeling from the core of one's heart that 'There, but for the Grace of a God above, go I. Therefore, I am you, and you are I'.

The Emotion of Empathy has taken us this far, and the same Emotion will take us further. Though we ourselves do not know how far, and where. In the words of the Nobel Laureate Rabindranath Tagore 'Into that Heaven of Freedom, my Father, let my Country awake....' For the tens of thousands of the wandering mentally ill on the streets of India, perhaps as far as that, and then again, perhaps not that far. But our hopes, our prayers, and our Empathy shall endure, God willing, and sustain the distance.

And John Milton's Paradise Lost might just be Regained.

To end, I would like to read out a poem depicting the plight of the wandering mentally ill, which I had penned years ago...

Nothing before,
nothing beyond,
another man on
another island.

Against the nakedness
of the day,
against the shattering
silence of the night,
against the bastions
of pain,
the tears came
crawling through.

Another broken
amongst the mass of fragments,
another wretched
in a wretched land.

Against the emptiness
of the landscape,
against the turbulence
of torment,
against the nadir
of agony,
the cold came
clawing through.

Another alone
Amongst the desolate dead.

Nothing before,
Nothing beyond,
Another man on
Another island...

Questions posed by Journalists Post Award

In all these years of rehabilitating and reuniting mentally-ill people with their families, is there any one particular incident or gesture that stayed with you or moved you immensely?

Being a strong believer in the Carl Jung philosophy of Synchronisation, a few months ago, Shahneer Akhtar, a social worker of Shraddha took a recovered destitute to his hometown in interior Bihar. A mere four hours before his arrival to the village, the mother of the recovered destitute passed away. A tragedy of sorts, given that the grief of the separation from her only child, had brought about her wilting and withering away. But after the initial cathartic emotional outbursts, there was a sense of philosophical acceptance of life, and gratification to a God above, as well as to our social worker, that the son had surfaced at just that moment and time, allowing him to fulfil his cultural obligation of lighting the funeral pyre. The cultural belief in Hindus being that the soul of the mother would go to Heaven, if the son was to complete the last rites. The villagers believed that the prayers of the mother had been heard by a God above, albeit at the very end, allowing the fulfilment of her prayers with the arrival of the mentally ill son, in a much-improved psychiatric status. Shahneer, our social worker though not conversant with Hindu rituals, he being a Muslim, was in tears while narrating the incident on the phone. I too broke down, believing that at that one single moment, the sun, the moon, the stars, the planets, our NGO, that social worker, the mother, and the son had all come into alignment, to create that one heartrending moment of pathos, grief and contradictory joy. And this was destined to

be. This was destined to be. 'Such are the ways that human lives must untwine, and darkest is the hour before the coming of the Light' - Words which I had written decades ago, almost forgotten, came alive, all over again. And the existence of a Higher Power above, hit home, with all the connotations therein.

The journey of Shraddha would never be complete without acknowledging the emotional catharsis within innumerable of the 8000 odd reunions which we have achieved till date. After I had been conferred with the Ramon Magsaysay Award, in one particular National Conference of Psychiatrists, the President of the Indian Psychiatric Association, one Dr Ajit Bhide from Bengaluru candidly and humbly remarked that despite 30 years of our existence, neither had he ever heard of Shraddha nor had he ever heard about me. He made it out that we were so silent that we bordered on the altruistic. It brought me to contemplate whether we were indeed truly that altruistic. I realised we were not. Like all humans, we too needed our psychological strokes. Just that we got our strokes from the ab-reactive joy within innumerable of those relatives with whose families we reunited the recovered wandering mentally ill.

The ab-reactive joy of a mother in a town in Hoshangabad in Madhya Pradesh who as of the day the daughter went missing, had cleaned the room of her daughter daily but kept everything back in the same place. The book was at the same angle as it was on the day of the disappearance, the bedsheet remained the same crumpled one, the slippers were in the same spot and stance, the typically strewn out clothes of any modern-day young girl in that daughter's room remained the same. She would only clean the room, dust the clothes, but finally keep the clothes at the same spot in the same strewn out manner in which they were on the day the daughter disappeared. Neither had the curtains been changed, nor had the colour of the walls been re-done, nor had the house been renovated. Five years of

the very same ritualistic behaviour, the mother firm in her belief that as and when her daughter returned, the daughter should not, NOT recognise her room. Five solid years. Finally, the reunion happened at the hands of the social worker of Shraddha. Coincidentally, almost preordained, the name of both our female social worker and the recovered daughter were the same. Aarti. Meaning in Hindi 'prayer'. It was the epitome of God's eternal justice that the prayers of everyone involved got answered. The real mother of that very real and alive daughter took both the Aartis in her life that day in the evening, in the closing hours of the sunset, to the holy river Narmada which was nearby and placing small 'diyaas' on lotus leaves, made both her Aartis and her own self release the lotus leaves into the water. A century old tradition of our Indian culture, replete with all its emotional content, topped the reunion journey. They are such moments and they are such relatives to whom Shraddha belongs.

An Award and a felicitation, while having their worth, are still perfunctory. Transient in the passages of time. But the moments such as the above remain embedded, engraved and enshrined in your memory and the collective memory of the entire Shraddha Team. To these moments, and to the Gods above who scripted these moments, do we bow our heads & our hearts & our souls in reverential gratitude.

The only reason why Shraddha has continued with its work is because of the immense, IMMENSE emotional satisfaction we get out of it. The satisfaction is literally on a spiritual level. You feel you are at one with the Gods above. An ethereal feeling.

Through this recognition, what message would you like to give to people about mental health & dealing with their own mental swings /mentally-ill family members/ friends?

We sail in the same boat. Some less mentally disturbed, some more than the others, each one of us searching for his piece of sunshine, each one of us occasionally succumbing to his iota of darkness. It is a journey of mortals, never ever to touch immortality. Barring the Apostles of Truth, such as Jesus Christ, Mahavir Jain, Gautam Buddha, Guru Nanak, Prophet Mohammed, Lord Krishna and Arjuna of the famed Mahabharat, we continue to strive for inner peace, reconciliation, but continue to exist in the same boat, small imperfect but emotional creations of an Almighty God above.

There are mood swings within all of us. This is pure personal sharing. I have been through depression myself. Been on medication myself. Been to counselling myself. Been suicidal myself. Sat a whole night with meds adequate to snuff the light out of me, and till today not 100% sure what prevented me. The mind is too, too complex to be analyzed by the best of psychiatrists, forget anyone. If a person comes out from depression or suicidal ideation, the credit does not & should not go either to the patient or the treating psychiatrist. This is because the causes of human personality and human emotions are multifold. While none can be discredited, none can be ascribed being the Gospel Truth. Right from **neurotransmitters** to **biology** to **genetics** to **early childhood experiences** to **family support** to **society support** to **medications** to **your sun-sign...** everything contributes to personality and emotions. Add to that **our proscribed fate** and our Destiny... Everything adds up. And despite all the contributions, there are variations and fluctuations in mood, thinking, attitudes. It's like the galaxy. Just when you think 9 planets and a sun and a few stars are all there is to it, along comes newer astronomical discoveries, more scientific advances. I am the same guy who picked up a chained wandering mentally ill 1000 kms away from home during my journey to meet Baba Amte at Hemalkasa. A pickup which resulted in my amalgamation with Baba Amte's soul,

made me venture into unknown territory of Karjat and start a huge Rehabilitation Center for the wandering mentally ill. This culminated in my receiving the Ramon Magsaysay Award. Vice Versa I am the same guy who has not given a second glance to innumerable wandering mentally ill closer home, both before the Award and post it. The human mind is truly unfathomable. Moods, emotions and thought processes are in a state of constant flux. And it is this, this state of flux, which is not acceptable to the majority within us. We define ourselves as successes or failures, not realizing, not accepting that both ends of the spectrum reflects us.

I came across a brilliant summation in a book '**366 Gems of Islam'** wherein a Sufi saint Ibn Arabi : **Fusus al - Hikam** has written 'All Grace comes from us (the Gods) ; and since we (the Gods) are present in all creatures, all Grace comes from every living creature. Even if particular creatures/humans do not regard themselves as belonging to us (the Gods), we (the Gods) most certainly belong to them. Thus we (the Gods) make our mystery clear to you; we (the Gods) explain it well. Odd numbers are enshrined within even.'

Sant Kabir has said "From the One Light, the entire Universe welled up. So, who is good, and who is bad?"

And within this passage is the secret to our mind, our very existence. We are all of us, each and every one of us, in the same spectrum. It's just that society gives undue importance to success and successful people. This is because the individuals within society want to tide over the perceived ignominy of not having reached a benchmark or being perceived as has-beens or washouts. These are definitions of society, the warping of their own thought processes. These are the REAL fallacies within all of us in society, the labelling of the different ends of the spectrum. In reality, we are one. Each and every twist and turn of emotions is us. Yes, me, you, us.

If someone was to ask me whether I could guarantee myself as to never become suicidal again, I would NOT guarantee this. For all my professional qualifications, wisdom, maturity, age and what have you, I know my mind is a mere phase in the spectrum. The pendulum can swing and could swing from one end to the other. It's in attributing depression and at its' extreme, suicide, as a suffering, that we actually err. While we may attempt to help each other out through our tough times & low phases (people like me, doing it at a professional level) the reality is that it is a part of our very existence. Were you and I not fallible and perishable, why would we love one another? If misery was nowhere around, why would there ever be any need for any compassion or concern? Why do we have to believe that the new moon is an aberration and the full moon to be lauded, when they are the same moon in different frames, different perspectives and different lights.

Odd numbers are well and truly enshrined within the even. Let's hold on to that reality.

Having openly disclosed about your depression yourself, what would be your advice to the current generation who are often prey to the fear-loneliness-defeated triad in their minds?

One of the most important psychological defense mechanisms to mitigate self-pain is to understand that I am not alone in my suffering, there are many others, not just in thousands but millions in numbers. Anxiety and depression affect at some point in time approximately 40% of the world population.

On a philosophical note, Gautama Buddha, the great searcher of Truth, had mentioned at the end of a prolonged sojourn with the dilemma of existence that 'All Life is Dukhaa (Sadness)'

reflective of the commonality of emotional and psychiatric problems in human existence.

Perhaps we, immersed as we were in our own self-goals, had lost sight of this existential Truth. But this acceptance in itself brings and will bring renunciation. A great deal of mental pain becomes mitigated and its sharpness dulled by realizing its all-too-prevalent omnipotence. Each one of us has to understand that he alone has not lost a loved one, has hit upon bad times or is finding it difficult to make ends meet.

All of us are sailing in the same boat.

In a 1955 Satyajit Ray classic 'Pather Panchali', the protagonist, a young girl dies at the end of the movie. In a stoicism unseen in today's times of instant gratification, the father of the girl accepts it, forfeits his home, his village and his childhood dreams to move to Kashi (present day Varanasi) to make ends meet. We have to draw inspiration from such examples.

On a personal counselling note, what more or less always works is to try to inculcate the cognitive changes in a person's negative thinking pattern and make him think broad-spectrum into "There, but for the grace of a God above, go I" modality of looking at any situation, which given a country like India with the huge, huge divide between the haves and the have-nots, and with the vast numbers of have-nots involved, is not a difficult goal to achieve.

But all throughout the journey, **to be surrounded by some rays of sunshine may make all the difference and is a must.** Actual psychiatric experiments are witness to the power of positivity. Newspapers often have columns such as Beacons of Hope. There is an outstanding inspirational, anecdotal stories filled internet newsletter called 'The Better India'. Occasional homage is paid to altruistic human behaviour on

TV screens too. But such depictions of courage & humanity are too few and too far between. There have to be many, many more. Depicting stoicism, depicting both the acceptance of the odds and the fighting against the odds. Religiosity-based teachings have to be revisited once again.

To be surrounded by some **Rays of Sunshine** may make all the Difference. Giving some examples -

- **Dr Sangram Singh Patil, an IPS Officer in Telangana** who by qualification was a doctor himself, diversified from his ascribed role and was responsible for providing medical facilities to tribal villages.

- **Nitin Kumar**, a final-year law student established an NGO, Ek Nayee Raah Foundation, that caters to coaching for free, students from low-income families. And on the banks of the Ganga, to boot.

- **Rahul Bakare**, a Pune based software engineer came back from the US to create an innovative machine which increases the quantum of rainwater entering the groundwater acquifers.

- **The Telangana Social Welfare Residential Educational Institutions Society (TSWREIS)** run around 400 schools providing free education, boarding & lodging to over 2 lakh Scheduled Castes & Tribes in difficult circumstances. Yeoman service all around.

To end on a very personal moment and a very personal example of inspiration which I came across in history - Vinoba Bhave gave talks on the Gita when he was in Wardha jail for the freedom struggle. Why? To increase the morale of all the freedom fighters incarcerated in jails. No one knew how long it would take to attain India's freedom. Until then, why not boost the spirituality of India's imprisoned freedom fighters?

That was Vinoba Bhave's greatness of thought. Coincidentally, or call it Maharashtra's great destiny, that during the same period (from 7th October 1930 to 6th February 1931) Pandurang Sadashiv Sane, popularly known as Sane Guruji was imprisoned by the British in the same jail. He was very good at long-hand writing of dictated matter. During the above period of October 1930 to February 1931, he could have been transferred from that jail to any other jail by the British. He was not. Again, this is Maharashtra's great destiny. He actually wrote down in long-hand the entire explanations of all the chapters of the Gita as professed by Vinoba Bhave and finally this was published as 'The Gitai'. And the power of goodness is such that in the year 2020 when we were surrounded by bad news of Covid all around, I read 'The Gitai' and drew inspiration from it. So, what started as a seed in 1930 by Vinoba Bhave has continued to bear fruit in the year 2020 in my soul.

Life is not about the immediate gloom that surrounds us, not about the falling and drowned economy, not about the communal passions being whipped up by many political parties, not about the massive unemployment prevalent in today's times, not about the death and mayhem caused by the Coronavirus pandemic, **life is beyond.**

Did Vinoba Bhave and Sane Guruji do what they did in the hope that we would remember them today? Not a chance. They did what they did because it was the just, the correct and the right thing to do. So, what is of importance today is whether you, me & all of us have done our duty as per our conscience, human values, morality & convictions. That should be the pedestal on which we stake our existence, our everything. Nothing more, nothing less. For you, me, all of us who care for human beings and humanity, who believe that we are God's creations (be they different Gods whom we worship and be they different religions that we follow), it is our moral, just and compassionate obligation to Indian society, that we focus on

each other's goodness, hold on to each other's arms, and swim against the current of pain surrounding us, giving each other hope and optimism for the future. We owe this to the memory of Vinoba Bhave and Sane Guruji who are sons of the soil of our hallowed India.

Immortalizing in our hearts the words 'Such are the ways that human lives must untwine, and darkest is the hour before the coming of the Light'.

What inspired you to start the Shraddha Rehabilitation Foundation (SRF)? (I read somewhere that it was because you saw a man drinking gutter water using a coconut shell) What is it about that incident that created such a deep impact on you?

It was not just the success of the first case.

Citing two of our earliest cases, both coincidentally and finally turning out to be hailing from Kashmir.

The first was of a young, really fair, drop-dead, typically-Kashmiri, good looking boy, who was eating from a garbage can when our ward-boy, Manaram, who had been out on an errand, spotted him. Offering him the lure of a good meal at a restaurant, Manaram literally brought him walking to our nearby private reasonably-newly opened nursing home. The boy's name turned out to be Raja. He improved dramatically in a short span of time. We were in our fledgling days in terms of our private practice, and forget the employment of a social worker, were just about surviving financially ourselves. But Raja came forward with a landline phone number. In those days, we had to go to a nearby commercial shop which had a facility (for a price) of doing a STD (Straight Trunk Dial) call

to another city within India. Getting the code of Srinagar in Kashmir, from wherein Raja claimed he was, I said a prayer to myself and dialed his number. My prayers answered, his mother picked up the call. She was so flabbergasted with the news that her son was alive and well that she started choking on her words on the phone. Finally, she came to believe, in disbelief, that her son was with us.

The parents had some relatives in Bombay, and that too from the film industry, and the parents along with the entire entourage of relatives trooped up to our nursing home within a few days. To say that tears flew all around was putting it mildly. After all the emotional gushing, Raja spontaneously remarked to his mother that our nurse (one Latha Raghavan from Kerala) had really looked after him well during his stay at our place. The mother in a rush of emotion, took off the gold earrings which she was wearing, and gave it to our nurse Latha. Such was the torrential force of the emotions involved.

They all went back to Kashmir, Raja bearing an enlightened look & the family clicking a lot of photos with us, the very next day. His father wrote from Srinagar in Kashmir the next month, acknowledging emotionally our services and ending with 'Dr Sahib, we repeat our sincere thanks to your good self and to Madam Dr Smitha Vawani for the benevolent action you have done for us. We are eagerly awaiting the occasion when you will find some time to visit Kashmir which though apparently is in turmoil, is still a paradise for angels like you. With best wishes and kind regards...'

The second was of a schizophrenic who took time to recover perhaps because he was inherently a shy reserved well-mannered person. He too came forward with an address of Poonch in Kashmir, almost where India's border met Pakistan's border. We shot off a letter, hoping for the best. Two weeks later, I was attending my consulting duties to my private

patients, when my receptionist informed me that someone in full military uniform had come to meet me. I was shocked, since I had never had anything to do with the Indian army. I came out and this army man, in full uniform, before I could utter a word, saluted me. He actually, truly, officially, saluted me. Me being the most ordinary nondescript citizen of India, I thought I would have a syncopal attack and faint from the gesture. Putting him at rest, I enquired as to what this was all about. He said that he was the brother of the apparently mentally ill whom we had rescued and for whom we had sent a letter to Poonch in Kashmir. He was a military man himself. Over time, he almost broke down & said 'Doctor Sir, you have not saved one life, you have saved many. We are Muslims by faith and religion. My family and I live in a village which is literally on the border of India & Pakistan. My family believed that my brother was perhaps no more, having been killed by a bullet from across the border. We were living in unspoken, unvoiced grief within ourselves. Vice versa, since the day my brother went missing, the Indian army thought that he may have, could have crossed the border and become a terrorist, he being a Muslim. In the process, our family's name was being tarnished and sullied with, with people speaking in whispers upon sighting us and referring to us as the family of the terrorist. So, you have saved the whole family en bloc, for which a salute was the very least I could have done for you. You deserve more from me, us.... his hands clutching my hands, his voice trailed off, leaving the silence to say everything. A silence which I remember to this day. A salute which I would remember unto eternity.

The emotionality of the first few cases got us to thinking that no NGO exists for these down and out. Finally, from day one till today, it has been heart over mind approach of me and my wife. To think rationally and work never leads anyone anywhere. To follow your heart, your instincts, your gut feelings, your emotions may also lead you nowhere (in the outer

context of society), but it does give you inner peace. (This replies to your question of a message for the readers). But the modern-day youngsters do a good action, post it in their Facebook page, and if not liked, go into a shell. This is not the way it works. The goodness of the action should bring about peace, renunciation and emotional closure. This propels you to further goodness, without putting any mind-blowing efforts. It just happens. The rivulets become a river.

According to the National Mental Survey 2015-2016, nearly 150 million Indians need mental health services but only less than 30 million are seeking it. Why do you think that is? Is there still a stigma attached?

I don't think stigma is as big an issue as what lay journalists or society make it out to be. Sensitivity exists within the family members towards their mentally ill. It is the lack of scientific knowledge which is the stumbling block. In the year 2007 I had a bunch of Malyaalam speaking social workers. I had gone down to Kerala, their home State for a holiday with them. One of them took me to a temple in their locality apparently famous for curing mental illness. It saw me personally witnessing 27 mentally ill being brought there in the span of 30 minutes, one of them being a young girl brought in chains. All of these were brought by their relatives, their near and dear ones. Reflecting hope, concern and compassion for the mentally ill. Albeit misdirected. Lack of awareness is the issue.

How do you feel about winning The Magsaysay Award?

In all frankness, I feel we never deserved the Award.

The 2011 Population Census of India has estimated that 1.8 million Indians are homeless. This is 0.15% of the total Indian population. Studies have shown that the incidence of Mental Illness per se in the homeless is 50-60%. **So almost 1 million (10 lakh) Indians are homeless & mentally ill.** All that we had done was picked up, treated, rehabilitated and reunited a mere 8000 of them till date. A fairly paltry insignificant number given the magnitude of the problem.

But I definitely feel that the Award will help bring the cause of the wandering mentally ill out of the closet and into the open. The number of emails we are receiving from pan-India has shot up exponentially. I recently received a very emotional one from a boy who was searching for his father lost 15 years ago. The photo accompanying was also of the father 15 years ago. In the same photo was this boy who had written the email. He was then just 8 years old. A very poignant and touching photo. It made us realize that the Award had initiated and given birth to hope. Not just in the case of this particular email writer, but across thousands of families and relatives who had been separated from their loved ones by mental illness.

Are families willing to accept them back? If they don't accept them back, what do you do?

Yes, the families are more than willing to accept them back. Were they not willing to accept, we would have shut down our NGO, a long time ago. The driving force for the entire Shraddha Team is the emotional job satisfaction, at times amounting to a huge catharsis and outpouring of emotions from the relatives, the villagers, the neighbourhoods. Averagely 7 out of the 10 reunions are good, 2 average and one below average. Not a bad statistic at all, and contrary to popular belief that the mentally ill are thrown out of their homes.

In the rare event that the relatives refuse to accept the recovered destitute (more likely when the relative is a distant relative) or when the relatives are untraceable, we are in collaboration with various NGO's who house destitutes on a long-term basis. We take into our fold the wandering mentally ill roadside destitutes picked up by them and have a quid pro quo arrangement with them. In this also the ratio of us accepting destitutes from them vis-a-vis us handing over non-reunited destitutes to them may be 50:1. Our basic motto is to try and go to the end of the wire to reunite a recovered destitute. Finally, because of the recovery and the coming in touch with his/her sensibilities, the recovered destitutes are desperate, really, really desperate to be reunited. Placing them in an NGO indefinitely is an emotionally traumatic moment for the entire Shraddha Team. And is THE last option.

The Indian film industry is trying its hand at making movies that deal with mental health issues. Moreover, prominent movies actors (like Deepika Padukone, for example) have come out and talked openly about battling clinical depression. Given how India is a country where movies and movie stars have a huge fanfare, do you think these are welcome steps? How do you think the entertainment industry and media can contribute?

I believe that ANY celebrity, not necessarily a film star, by coming forward & acknowledging that he or she has or had mental health issues, does bring mental illness out of the closet and into the streets. By acknowledgement of their mental problems, they make the common citizens, who aspire to be them and often emulate them, take cognizance of their own mental weaknesses, accept them, address them and learn to move on. It is common human psychology that celebrities serve as role models. For athletes to come out and acknowledge

a drug problem (Lance Armstrong acknowledging use of performance enhancing drugs) depicts their human frailties & ends up in their fans acknowledging frailties within their own selves.

Would you be able to give us a basic picture of how different the issue of mental health is, in rural and urban India? This is strictly for our American audience to get a better idea of the stark differences between the realities in urban and rural areas.

What steps, if any, should the government take in this regard? I understand there is a Mental Health Care Act which was passed by the Lok Sabha, that mandates insurance for mental health treatment. Do you think this is the step in the right direction? In your opinion, what other measures would be helpful?

Combo answer to the above questions -- Majority of Psychiatrists and Mental Health Professionals stay and practice close to Urban India. They believe, a belief partially based in truth, that there is greater level of psychiatric awareness in the Urban Population. The urban areas also serve as huge centralised Centers to which rural population gravitates, given the common perception in all society, that the Urban Citizen is more educated and knowledgeable and experienced than his rural counterparts.

The Govt of India launched the National Mental Health Programme in 1982 & District Mental Health Programme in 1996. But many of the Districts continue to be without a Psychiatrist, the top-rung requirement for the implementation of the Programme, for reasons which I have outlined above. So, in the true sense of the word, the Government is hard put,

not due to lack of vision, but because of paucity of human qualified personnel. Recently, there was a move to allow General Practitioners (possessing a mere MBBS degree) to allow prescribing psychiatric medicines, provided they do a 3 month training course from the NIMHANS (National Institute of Mental Health and Neurological Sciences, a prestigious Psychiatry Institute in Bengaluru). While this move may be thought to be fraught with some repercussions, I feel that the positives outweigh the negatives, more so if the curriculum of the three-month course is tailored to meet mass requirements of the psychiatric problems ailing the common Indian citizens. Not to mention that the smallest bit of cure can and does bring about a change in the Awareness levels in Society and dispels myths, misconceptions and stigma.

Yes, Insurance is very much a step in the right direction. Invariably the severely mentally ill are non-earning members of the family. Add to that, the financial burden of the treatment, which is pretty long drawn, almost renders the caretaker to go through psychiatric stress himself. One of the reasons for the relapse of mental illness is the non-affordability of treatment options. Insurance helps circumvent this problem. Of course, the step of Insurance is still in the nascent stage in so far as implementation is concerned. But at least the ball has started rolling.

I feel that the Government has to give basic grass-root training in group/individual counselling to specifically hand-picked mature elders/citizens of each village who are well aware of the nuances of individual villages to address the problem of Psychiatry, and empower them to prevent the development and guide in the amelioration of mental illness within their community. Out-of-the-box but rooted-in-the-ground solutions to address psychiatric problems. Otherwise, psychiatric mayhem may well ensue. One has to keep in mind that the truly qualified psychiatric professionals will not /may

not stay on in the country. It is human nature to seek greener pastures and more development and materialistic comforts. History is replete with such developments over time immemorial. So local sourcing of good mature citizens, good general practitioners (who often inherently have a good rapport with the family as a whole), and empowering these people with the dispensation of psychiatric guidance and ground-zero medication may well be the way forward. Ultimately communities have inherent tendencies to protect and support members within their group. This basic tendency has to be honed and capitalised upon.

I understand the stigma is not only attached to people who are affected by mental illness but also to those who work with the mentally-ill. This is pretty clear from the World Health Organization's study that put India's mental health workforce at 0.3 psychiatrists per 10,000 people. Do you think this situation is improving from what it was before?

Gross error of judgment on your part. There is no stigma attached to a mental health professional. The ratio of India's psychiatric workforce has dropped from 0.4 per 10000 in the year 2001 to 0.03 per 10000 in the year 2011, purely because of a massive brain drain and emigration of Indian Psychiatrists to (apparently) greener pastures abroad. The number of Indian Psychiatrists in both the UK and the US individually supersede the number of Indian Psychiatrists in India. A disappointing truth, but a Truth nevertheless.

Given this huge gap, do you see India's mental healthcare system catering to the needs of the growing population as required? If no, what would be an ideal solution to this?

I don't envisage India's mental health care system catering to the needs of the growing population as required, because of the simple fact that irrespective of what the Government does, if the mental health professional is allowed to leave the country (which given the democratic setup of our country, seems inevitable), there will be a chronic dearth of actual professionals. I read recently in a newspaper that All India Institute of Medical Sciences (AIIMS) in Bhopal does not have a Head of Department of Psychiatry, because no psychiatrist is available and opting for it. So, the very purpose of setting up a state-of-the-art Medical Institute was put to nought. And this ratio per 10000 from the year 2001 to 2011 has dropped for ALL psychiatric professionals (be they psychiatrists, psychiatric social workers, psychiatric nurses, psychiatric counsellors). Also keep in mind that incidence of psychiatric problems is mounting in developed countries too, so Indian mental health professionals fill the void in their systems, leaving our country to bleed psychiatrically.

How easy or difficult is it for such patients to go back to a conventional life, post treatment / reunion? Are families accepting?

No idea of how many get back to a conventional life post the reunion (we have not maintained data, as we believe it is beyond the purview of our functioning) but we have had spectacular stories. A patient picked up in 1989, is now into real estate, owns a Toyota Fortuner, and has gone for a vacation to Thailand. Majorly families are accepting. In rural India, the emotional connect is very heavily maintained, and the reunion acceptance is very high. Because the acceptance is high, the social workers continue to get job satisfaction, and stick to the job for years.

How has your family supported you in this mission?

My wife Dr Smitha Vatwani was a Founder Member Trustee of Shraddha. She had to resign, because there were issues raised about husband-wife being Trustees, making it look like a family Trust. But barring the few years involved in bringing up the children (we have 4, one biological, three adopted from Mother Teresa Missionaries of Charity) she has been equal, though silent partner. Someone suggested that were I ever to write a personal memoir, I should dedicate a separate chapter to her. I thought that would amount to demeaning her and belittling her, since she was and always will remain a part of me and a part of Shraddha.

To separate her would be to separate a part of myself. My children were/ are very supportive and the exposure has done wonders to their charitable seeding.

What are the challenges in addressing mental health in the country and your suggestions on improving the approach to the same?

Too many challenges. I have only one suggestion. Awareness, awareness and more Awareness.

How has societal attitude towards mental illness changed over the years?

Significantly yet inadequately.

The treatment facilities are popular all over the country and are being over-utilized.

Due to the shortage of psychiatrists, the total population is not being served adequately, but people are coming forward for treatment.

Social acceptance of the mentally ill is also growing. Society is recognizing the fact that the mentally ill person is not disturbed out of his own bad deeds. Society is also accepting the fact that mental illnesses are medical in nature & not due to black magic.

Family's attitude towards a mentally ill member is also undergoing transformation. Family member's intention of institutionalization of mentally ill for lifetime is not very common now. Families are making arrangements for the future well-being of their mentally ill family members.

Spouses are also more caring. Divorces on grounds of mental mental illness, are going down in numbers.

Mental health remains neglected in India with over 150 million Indians in need of short term & long-term mental health care interventions. Every sixth person in the country needs mental health help. President Ram Nath Kovind too has acknowledged that India is facing a possible mental health epidemic. Yet India spends only 0.07 per cent of its reducing healthcare budget on mental healthcare. The National Health Policy, 2017 has a target of investing a mere 2.5% of GDP on health by 2025. In such a scenario do you think objectives the new Mental Health Care Act, 2017, can be achieved.

Yes.

Alternatively, we cannot just wait & do nothing. All of us need to supplement, the efforts initiated by Government.

The private sector can do their individual minimalistic worthy contributions, the corporate sector their mega-contributions, the NGOs can do their often selective (but effective) coordination and outreach to the interiors of India, the pharmaceutical sector can do their bit by giving medicines at cost or a little above, the funding agencies can chip in, the local governing authorities can do their bit by easing rules to meet priorities, the psychiatrists can do a lot, the nursing colleges can do their bit, the social work institutes can pitch in by providing socially minded manpower, the youth organisations can add their own infectious optimistic joie-de-vivre, the print media / the electronic media / the social media can spread morale, the foreign funding agencies can pump in their super-mega-financials, the UN Agencies add their might, the intergovernmental agencies can do their own, the religious organisations can add their salvation balms, the advertising agencies their outreach programs, the HR development experts their professionalism, the CSR funds reaching out vide either the NGO branches of the individual corporates or vide other ground-zero NGOs, the tax exemption schemes drive contribution incentives, the educational institutes can do the consolidations of social foundations, the vocational guidance organisations can do their bit of counselling, the employment bureaus can re-direct appropriately suitable applicants.

While the no. of patients treated in mental asylums has increased manifold, there are not enough mental asylums in the country. Those that exist are not run well or do not function as inclusive nurturing places so as to help in improvement of an overall way of life. Your comments.

Fortunately, with many new medications for mental illness, a long-term stay is no longer required for most patients. Hence, the need for massive inpatient care on long term basis, has

correspondingly significantly reduced.

It is felt that the Mental Health Review Board proposed by the new Act to look into juridical aspects of mental healthcare may discourage not-for-profit and private enterprises from providing mental healthcare services that have legal implications. As a result of which a large number of people requiring mental healthcare could move to the public healthcare system where required and trained human resources are not available and lack investments mental health infrastructure. Your comments.

Although all the laws are invariably perceived as threatening, in reality they exist only to sustain a disciplined design in our total functioning. If our intentions are pure, then the local authorities are always supportive & if something does get stuck in a bottle neck, local courts plus High Courts & Supreme Court are always there to modify anything that is impractical. Even the government is open to amendments, when it helps the smooth functioning of the system. Therefore, the NGOs & private sectors should not feel restricted because of this perception.

It is also felt that thought the new Act takes a rights-based approach for treatment and care of mental illness, it overlooks the issue of mental health marked by social perils like inequality, hopelessness, deprivation, poverty and discrimination. Your views.

We are in the process of development. Issues of inequality, hopelessness, deprivation, discrimination and poverty are universal in nature, not just restricted to India alone. As we are

attempting to sort out these Universal Issues, we need to still protect vulnerable citizens in society and to that extent, least we can do for them is protect their rights.

Any words about the Shraddha Team?

I believe that the Shraddha Team of social workers, nurses, doctors & everyone involved are the backbone of the Shraddha success, whatever little has come over way. The most important factor being their capacity to think from the heart in any given situation. Emotions over logic has been the USP of our functioning.

Our Project Coordinator Denit Mathew has picked up roadside destitutes spotted by him & brought them to our Centre on his personal motorcycle. On one occasion, he, his wife Jyoti & his child had just come back from a vacation when on the platform of the railway station they spotted a young mentally ill destitute girl. They cajoled her and brought her with them to our Centre.

Just as another social worker of ours Farzana Ansari, who happened to get off at Sholapur station for a cup of tea while returning from Hyderabad, saw a mentally ill young man, destitute and helplessly wandering on the railway platform. Not even having the time to take out a ticket, she ushered him into the train, explained to all concerned in the train compartment about the work she was involved in, and brought the man to our Karjat Center. Everyone in the train praised her for her proactiveness in the matter.

An exposure to the innate sense of decency and sensitivity which our staff was capable of mustering in a given situation was exemplified when I once came for my rounds to Karjat and saw a near dying skin-n-bones destitute with a 5-year-old child.

I was, to be very honest, aghast at seeing him & enquired as to whose brainwave was it to admit a near dying destitute into our Centre. Our Social Worker Izhar Zaman came forward to say that during his visit to a Gujarat NGO, he came across this dying man with his child. Apparently, the man was in an advanced stage of cancer. He was so moved & anguished by the exposure, that without even bothering to consult me on the phone, he brought both of them, along with some other actual mentally-ill destitutes, by ambulance to our Center. His logic was that were the man to die in the Gujarat NGO, the child would be left at the mercy of fortunes beyond anyone's control. His sole focus for the decision of his, was to save the child. I applauded him for his decision & further asked him to actively coordinate the reunion. After a lot of pumping of intravenous fluids and vitamins, the dying man was sent to his village in Madhya Pradesh. Since he had to be physically carried, Izhar took with him a couple of our support staff. The news received a couple of days later was that the dying destitute had passed away. Perhaps the relief of seeing his son reunited with the family had caused the last embers of life within him to be extinguished. But Izhar had truly, truly saved a life, albeit not that of a mentally ill destitute, for whom our NGO had been conceptualised, but instead the life of an innocent child.

Citing another example, we are collaborating with many NGO's sheltering mentally ill roadside destitutes. Our social worker Shailesh Sharma, hailing from Uttar Pradesh, is a very affable and a good-at-public-relations soul. While the entire staff of Shraddha has sincerity of purpose ingrained in them, Shailesh could convey this better in his transactions with others. Because of this, the manager in charge of Apna Ghar, an NGO in Delhi, requested Shailesh to help reunite the elderly (aged literally over 65-70 years) inmates within them. Paradoxically, the manager never officially contacted me or Shraddha, but it was Shailesh in whom he reposed his trust and his faith. Shailesh could have very easily refused & I would/

could have been always kept in the dark. But Shailesh did not look upon the matter as beyond the purview of his duty, and realising the responsibility involved, shared the issue with me and sought guidance. Usually, we hesitate in accepting such elderly destitutes from far flung places like Delhi because the long-distance travel to Karjat and the subsequent stay within our Center is fraught with decompensation of their physical medical condition. And when Shailesh actually came forward with this proposal, we were in a quandary.

As a midway meeting of sorts, we made him send us a WhatsApp audio-video clip of all the elderly involved. Out of the 16 odd elderly, we OKed 11 of them. And all the audio-video clips revealed one common sentiment - 'hamein ghar jaana hai, please hamein ghar pahuncha do' meaning 'we want to go home, please reach us home'. Believe me, it is very heart-rending to see an elderly person become emotional and pining for his home in a video clip. At a personal level, I felt it must be a hellish nightmare to be away from home & hearth in what would seem the final days of your life. Notwithstanding all the facilities that the best of NGOs can offer, the longing for recognizable near and dear ones can be excruciatingly painful.

We started off by getting their basic medical blood tests done in Apna Ghar itself vide the social worker. We got them checked for blood pressure and diabetes. We started preliminary corrective medication in the NGO itself. And finally green signalled the reunion of these inmates.

Till date Shailesh, being an enterprising enthusiastic young guy, has finally managed to reunite 9 out of the 11 shortlisted. One of them from Nepal had apparently after separation from the family met with an accident, causing amputation of both his legs and one hand. An unbelievable agonising turn of events. Shailesh & another social worker Pulkrit Jagerwal (also from Uttar Pradesh) took turns to carry him piggy-back through the

entire train, bus and foot journey. And finally, finally reunited him with his family in Nepal. He was 12 years, 12 solid years away from home.

These destitutes did not physically enter our Shraddha Center in Karjat in the first place. Neither I nor my wife assessed them or even met them face to face. We did not even know whether they had any psychiatric illness in the first place, NGOs often accepting destitutes for reasons other than mental illness.

But despite all this, Shailesh of Shraddha responded to their pleas, purely because deep down in his heart, he felt that it was the just & the right thing to do. It became social work being done at the pure instinctive gut level. And Shailesh felt that over an association of seven years with Shraddha, these were the best reunions ever with all their cathartic emotional satisfaction literally overwhelming.

The last example is of our Deenanath Nishad. While returning from a trip, he was travelling from Varanasi to Mumbai. He noticed a young girl sitting near the toilet of the train with a dirty haversack. From his experience in Shraddha, he could gauge that she was mentally unwell. He befriended her. In a train journey spanning 30 hours, he saw to it that she received all her meals. He explained to the ticket-checking official and everyone concerned in the compartment the nature of his work and the fact that the girl was psychiatrically disturbed. Gradually he was able to cajole her into occupying the empty berth in the compartment next to his, and ultimately brought her to our Karjat Center. Without any female escort whatsoever, a young male social worker could convey that much kindness and compassion in his demeanour to convince a young mentally ill girl to come with him to our Center. The girl ultimately was found to be hailing from Bihar.

I believe that as long as such honest, caring-for-another-life

value systems continue to survive and foster within the Shraddha Team, we will always continue to receive the benevolence of the Gods above in our efforts.

Can you share a reunion that was particularly memorable or difficult to achieve?

When I was young and the NGO was just barely registered, I had taken a recovered female young girl to Warangal in Andhra Pradesh along with a recovered Telugu private patient of ours named Murali. I did not have a female staff with me then. But the girl trusted me, since I and my wife had assisted her off the road. She had stayed in our private Nursing home (at that time our Dahisar Center was also not established). I had taken her by train to Warangal. Upon reaching, I approached the Police Station. It was a Naxalite infested zone. The locals warned me that the Police would arrest me & put me behind bars for hijacking a girl etc. I did not bother. I thought to myself that the Police could never be so naïve, as to imagine that I had hijacked the girl, and now brought her back to her possible native place. I walked into the Police Station and instead of communicating to the Police, cajoled the girl destitute into telling her story. Since I could not understand the native dialect Telugu and they could barely understand English, communications were tough. But emotions and Truth won. The local police moved its machinery, and within four hours there was heard a scream. It was the mother of the girl running from far towards the Police Station. The recovered girl destitute suddenly got wings into her, jumped up and rushed out. The image of the girl and the mother in the night light, sobbing and embracing one another, would remain with me unto eternity. They both reached out to me, the mother touched my feet, and everybody around, including the Police, thanked me. While I could not understand a word of what they

were saying, since they were speaking in their native Telugu, their hearts said it all. I was over the moon.

Another reunion recently, though not done by me, was emotionally definitely rewarding, as it brought about a sea change in the perspectives of the students of a college. I could literally feel that Shraddha had planted successfully the seeds of social consciousness. It happened like this. There was an elderly lady, brought in by the police. She was having Alzheimer disease, a kind of senile degeneration of brain, where memory is badly compromised. Therefore, the scope of improvement was less. After a month or so, with appropriate medication (for whatever they were worth, medication not being definitely helpful in this condition) she mentioned 'Malad' in her ramblings. And the way she uttered the name 'Malad' it was as if it was a beacon of light in her engulfing darkness of receding memory. 'Malad' was a huge suburb of Mumbai, with a population of almost 20 lacs.

Just at that time there were 5 students (four females & one male) from Garware College of Pune. They were there for a month as part of their internship requirements for their academic pursuit. Somehow, they had bonded with this lady, perhaps because they were Maharashtrians, just as she was. Spontaneously, during my rounds, I suggested that they take the single elderly lady patient, and leave early on the next day for Malad. I gave them an idea that Malad was a huge, huge suburb and not to lose heart if they failed in their attempt. So that they keep each other's morale going, I instinctively decided to send all the five of them for the reunion trip, something which I had never done before. They left at 5 am in the morning in the Shraddha ambulance. Five students with just the elderly lady, and the proverbial prayer on their lips. I was in my consulting room that day handling my private practice patients. In all frankness, I had forgotten about their trip, so engrossed was I in my own practice.

At 4 pm evening, I got on my WhatsApp a photograph of a small diyaa (a kind of very small oil lantern) which was lighted in a room in front of a small typically Indian house-prayer-area. It was sent by one of the students accompanying the elderly lady. Apparently, they had managed to trace out the home and the reunion had happened. The photo of the 'diyaa' was important, since the day the lady had disappeared from the house, a good 3 months ago, the son and the family members had kept the diyaa on, night and day, in front of the photos of the Gods that they believed in, having taken a pledge that they would keep the diyaa burning until their mother returned. So much faith they had, in the very burning of that small 'diyaa' in front of their apparent Gods, that three months had not shaken their faith. The student, in a very emotional message on my WhatsApp, explained the whole backdrop of the diyaa.

It reminded me of a passage which I had read in Vinoba Bhave's Memoirs that the photo of a God, once invested with a huge whole amount of psychic emotional energy, no longer remains an ordinary photo. It becomes an object with an energy of its own. And the worship of that photo means a lot to the worshippers, far beyond the existence of the mere paper on which it was printed. And the family had invested their all into the photos and their pledge of the continued lighting of the diyaa till the mother returned, had taken the emotional equation to a different level altogether.

I never bothered to ask the students as to how did they manage to trace out her home and hearth. They were in an ethereal zone of their own. They thanked me and Shraddha and were dewy eyed all around. They shared the experience with their parents, families, colleagues and faculty at the college. It became a game changer for an entire section of the community.

One of the students, an Aditi Shejul, after finishing her graduation actually joined Shraddha as a social worker. All the

students would keep trooping in to our Center in the days and months to come whenever an opportunity arose.

The foundations of true emotive social work had been established.

Despite having won the Ramon Magsaysay Award, can you share any words of wisdom that have still managed to inspire you at a personal level recently?

Coincidentally some real pearls of wisdom I heard recently were at the presentation of the Ramon Magsaysay Awards concluded just recently. **Emily Abrera, the Chairperson of the Ramon Magsaysay Award Foundation** spoke some simple words summing up the absolute heart & soul of charitable work within us humans & in humanity per se.

Her words -

Where ever you find them (people who have contributed to society), you can be sure that they started their journey as ordinary people. Until they made a choice, to make a difference and that's when their journey as leaders began whether they knew it or not. Until the work they did with relentless faithfulness and passion every-day, which touched and uplifted others, eventually became their life. Somewhere along the way, having given so much of themselves, they became selfless. But because they became one with the people they wanted to help, their spirits in turn expanded and grew in awareness and understanding. And to be selfless, yet one with those you serve, serves as a good aspiration for young people. These people who have contributed to society not by wealth or power but by sheer commitment to good. The little good they do, step by step at it, by the greatness of their spirit, although they never

think of it in that way. And this cannot really come into play until we, all of us, start work.... we do our stuff.

Sometimes you come across so much of crystallization of emotional brilliance in the smallest of outpourings.

And the emotional basis of resilience within the journey was summed up very poignantly by **Steven Muncy, who was the Recipient of The Ramon Magsaysay Award.....**When he was asked by Emily Abrera 'How do you find, where do you find, how do you manufacture hope, so that you carry on? That must be, a burden to do this, day in and day out.....**Steven Muncy's Response** was touching, empathetic, compassionate and pithily moving:

You know Emily, I would be a liar if I said it doesn't hurt, I would be a liar if I said there are not some nights I can't sleep, I would be a liar if I said some-times I had no tears. All of that would be a lie. But to get to the heart of your question, how do I keep going, how do I manufacture hope. I have to say it's in the tip of what we see, the people we work with and the people who do the work. There are so many people who have suffered so, so severely yet they do not give up, they reach out, they help one another and they continue to move forward despite all odds. And that's what I see amongst forcibly displaced persons. They find a way to keep putting one foot forward, to extend one hand to help another hand, to give one smile to somebody who needs a smile. I find that very hopeful, I, I can go day after day after day after day, based on what I see from the people in these horribly difficult circumstances.

Such an unabashed, brutally frank emotive disclosure is inspirational and can convince any human being about the existence of that fundamental Truth which encompasses all of us humans viz. **We are all sailing in the same boat.** Horribly difficult circumstances & hope go hand in hand.

Speeches Post Award

Keynote Speaker Address at the Indians for Collective Action (ICA) Conclave San Francisco, US

A 2020 study from the World Economic Forum found 363 million Indians below the poverty line (BPL meaning earning less than Rs 32/day in rural India and Rs 47/day in urban India)

A Lancet study stated India had 197 million suffering from mental illness in 2017, of which a staggering 30 million had severe mental illness.

The number of disabled in India as per the New Disabilities Act of 2016 is 27 million.

110 million of the population of India is tribal.

Even on the assumption that there is an overlap between various categories, I would roughly estimate that 350-400 million people in India are underprivileged in some form or the other.

The Population Census 2011 of India has estimated that 1.8 million Indians are homeless. This is 0.15% of the Indian population. Studies have shown incidence of Mental Illness per se in the homeless is 50-60%. So almost 1 million (10 lakh) Indians are homeless & mentally ill. And how many wandering mentally ill has Shraddha helped out? A paltry 7000. Leaving behind a herculean 9,93,000 on the streets.

While the suggestion to put up as a final slide the bank details was put forward by many, I stand before you, not as Dr Bharat

Vatwani, the Ramon Magsaysay Awardee, not as Dr Bharat Vatwani, the Founder of Shraddha Rehabilitation Foundation, not as the representative of the 9,93,000 left-out wandering mentally ill of India, but I stand before you as the representative of each and every underprivileged person in Indian society, be he / she illiterate / disabled / below the poverty line / a tribal / a mentally ill. Baba Amte, my Guru started off with the leprosy afflicted, but gradually moved on to encompass the blind, the deaf/dumb/mute, the mentally retarded, the cerebral palsy and every underprivileged person in society, culminating in his immense contribution to the cause of the wandering mentally ill through Shraddha. Compassion has no beginning nor any ending, it is the ever-widening river reaching out to the sea.

So, I represent the collective hopes, the collective aspirations, the collective dreams, the collective prayers of 350-400 million of our fellow brothers and sisters who look up to you to reach out to them and provide them with your collective succor/your collective compassion/your collective empathy/your collective understanding. This is your moment of Truth. To give your heart/your soul/your collective self to the cause that you cherish the most.

To use a platform such as this to garner funds for our NGO Shraddha Rehabilitation Foundation would be downright mean/crass/and absolutely self-centered on my part. All of the NGOs/charities here are doing/attempting to do good work. All of them need your help. As a Keynote Speaker, I would go one step further. I say donate not a single dollar to Shraddha. But instead increase your donation amount by a hundred-fold and donate to the other causes that exist not just in this Conclave, but to charities that are equally honest and equally genuine and perhaps not represented in this Conference. I am confident that there must be many such in India. If the level of donation in the pond of ICA donations was to rise a hundred-

fold because of my appeal then that would be my Nirvana/my dream come true. It matters not whether Awards/Donations/Felicitations come a TRUE social worker's way.

What matters is that the quantum of goodness in society because of his or her efforts has increased partially or even minimally & the quantum of human pain & suffering within the underprivileged masses has ameliorated or diminished partially. That is important. That is what Rabindranath Tagore and Baba Amte have taught me. It matters not whether I am remembered, whether my name is written in the annals of history or whether my ashes are immersed in the Ganges. What matters was whether because of my efforts, the quantum of pain and human suffering in the sea of human suffering sweeping the length and breadth of our country went down marginally. If it did not, then honestly, I never needed to exist in the first place.

To end, I read out a poem which represents the inner cry of any TRUE social worker who has gone through his gamut of emotions and feelings for the cause that he or she has espoused. This represents those 9,93,000 left-out wandering mentally ill on the streets of India whose souls Shraddha espouses and for whom my heart bleeds till date...

If my dreams were mine,
then they would be yours,
If truth was mine,
then I would communicate it to you,
If wisdom was mine,
then you would be its' legacy,
But I had nothing,
Just this pen, paper and a few words,
And my feelings for you,
From the beginning of time.....

And if these words communicate pain,
then so were you destined,
If angst was in my voice,
then so was I destined,
Just another mortal,
who happened to meet you,
who happened to love you,
and if my love was incomplete,
then so was it defined.

Just another human being,
who prayed for you,
and if my prayers
remained unfulfilled,
then that was your fate
and mine.

For the reckoning spares nobody,
and time ultimately beckons,
and if the beckoning was untimely,
then that moment was yours
and mine.

If Life,
could be founded on hope,
And Wisdom,
on mere understanding,
Then the horizons would be mine,
the rainbows notwithstanding,

But I had nothing,
Nothing,
Just this pen, paper and a few words,
and my feelings for you,
from the beginning of time.....
and my feelings for you,
from the beginning of time.....

Excerpts from Other Speeches Post Award

I would like to point out that while an autobiography may give importance to the journey of a person, ultimately the person passes away and so does his autobiography. All that sustains is a thought, an idea and the goodness (if at all any) within that thought and the idea.

And the thought in my mind is and the key question that all of us need to ask ourselves is 'Why are we doing what we are doing?'. I believe this holds the key to life and the future of life, as we know it. Are we doing what we are doing because we want our autobiography to be written (and read by a few) or are we doing what we are doing for a better tomorrow for life in general & for some living in particular? That should be the litmus test of our existence.

Having gone through the life stories of many legendary social workers, I have come to realize that at the heart of any good social work are strong deep-rooted emotions, an inner outcry against injustice or social disparity, the associated intrinsic desire for change and last but not the least a perseverance of belief to outlast all beliefs that good and God shall prevail.

Starting off from a conversation,

a dear friend from Bangluru, one Dr Fatema Poonawala, my classmate in my medical days, in a congratulatory note said that 'Bharat, we are so happy. Your recognition has restored our faith in the goodness and humanity in general. It will inspire many. For every sung hero, I am sure there must be many unsung. Good you have been elevated from unsung to sung. God bless'. I believe that truly there is no such thing as a 'sung hero or an unsung hero'. There is only commitment. There is only great thought.

Did India get its freedom because of **Mahatma Gandhi, Jawaharlal Nehru, Sardar Patel, Maulana Azad, Lokmanya Tilak** or **Gokhale**? A resounding NO. It got its freedom because of lakhs of people believed in the cause of freedom. Were **Abraham Lincoln, Nelson Mandela, Martin Luther King** the sole people fighting the global war against racial discrimination? No. There were thousand, millions of others who did what they did because they believed in the cause. These are 'the silent unsung soldiers of life' who do what they do because they were committed to the cause. And they would readily die again anonymous, if they were to be given a second chance at the cause. That's commitment, purpose. Commitment is all that there is. These are the people with great thoughts and goodness within those thoughts.

And one has to, has to keep in mind that even amongst the known and unknown faces of Indian history, there are many who have gone beyond the culturally accepted & defined boundaries, but despite all their efforts, the causes which they represent have not been fully been addressed till today.

Namdeo Dhasal was a famous Dalit poet who won the Sahitya Academy Award & got the Padma Shri & went to Berlin for a reading of his poems...but paradoxically even till date there are instances of Dalits not being allowed to take a bath from the same pond as so-called non-caste populace of India and whatever... Look at the current struggle of the Dalits. Recently I read in a newspaper that a man was scalped in Madhya Pradesh for wearing a turban. It was considered as an insult on the pride of the non-caste populace amongst the locals there. An unheard-of affront. In a country where you have the Constitution drafted by **Dr BR Ambedkar**, a Dalit, where you have an Ex-President **KR Narayanan** who was a Dalit, and where you have the current President of India **Ramnath Kovind** also a Dalit, you still have crimes being committed against Dalits..... the struggle between Justice and

Injustice, between Truth & Falsehood is an ongoing eternal struggle. A struggle which if you are a Dalit, you cannot give up, because it is the philosophy which matters, the ideology which matters. Good people have to continue to nurture good thoughts.

I read in the Indian Express recently on Aug 2 (his birthday) that **Pingali Venkayya** was a follower and was associated with Gandhi for 50 years and designed the Congress Flag, which later became the National Flag. Who remembers him? Finally, he died in penury, literally penniless, in 1963. In 2012 his name was recommended by the Andhra Pradesh Government for the Bharat Ratna, which he finally did not receive. But if you were to meet up with him today and ask him as to whether he would readily re-live his life all over again, knowing that there would be no accolades or wealth at the end of his sojourn, the answer would be YES. That is commitment, that is purpose, that is true goodness within a divine thought.

Maulana Azad was born in Mecca in Saudi Arabia but was responsible for the establishment of the IIT's since he was the Education Minister when the IIT-concept came up and IIT Kharagpur was inaugurated by him on 18th August 1951. After Independence, till 1958, he was the Education Minister of India. National Education Day is celebrated in his name. But Muslims are still often discredited and considered unpatriotic by many in India till date.

Not just Maulana Azad, there were many others too who contributed to the freedom struggle of India.

Muhammad Iqbal coined 'Sare Jahan se accha Hindustan Hamara' - The song is played frequently as a marching song by the Indian Armed Forces.

Bismil Azimabadi - A patriotic poem written by him - 'Sarfaroshi ki Tamannah ab hamare dil me hai' – became famous as the war-cry of all Indians when engaged in battle.

It was **Hasrat Mohani** who coined the slogan 'Inquilab Zindabad' which became super-famous when the iconic Bhagat Singh echoed them before he was sent to the gallows.

True heroes who were not interested in knowing whether they are 'Sung' or 'Unsung'.

It's like you have a legendary inspirational **Abdul Kalam**, the pioneer scientist of India, the Ex-President of India being a Muslim, and you still have people demonstrating their open antipathy to Muslims. The struggle between Right & Wrong juxtaposed, relentless. While I personally will always continue to believe that Abdul Kalam was the pioneer of patriotism. He must have had multiple, multiple opportunities to go abroad. But he stuck to his roots. A dedicated, divine soul from a very humble background. With the possession of goodness within his thoughts far, far beyond the ordinary.

Annie Besant was born in London but in 1916, she launched the All India Home Rule League with Lokmanya Tilak... A British born lady launches Home Rule League with **Bal Gangadhar Tilak**... And in 1917 along with **Madan Mohan Malviya** set up the Benaras Hindu University and in the same year she became President of India National Congress.

The same **Lokmanya Tilak**, the man who initiated the later-ubiquitous Ganpati festival, uttered the famous words "The real spirit is to make the country your family instead of working only for your own. The step beyond is to serve humanity & the next step is to serve God." was in one legal matter sentenced to jail in Burma for 6 years in 1920. But the lawyer who tried his level best to free him was **Mohammed Ali Jinnah**, who

was later apparently responsible for the division of India into an India and a Pakistan, when India got its freedom from the British.

History is replete with such examples of contradictions.

In Dalhousie Square in Calcutta a particular area is named as BBD Bagh after **Benoy Basu, Badal Gupta, Dinesh Gupta**. During the freedom struggle the trio had launched an attack on the Secretariat Building in Dalhousie Square in Calcutta to kill a Simpson, the then Inspector General of Prisons and a supposedly cruel sadistic person. The trio subsequently killed themselves. The question is, did they know that a square would be named after them? No. Their single intention was to lay down their lives for the cause espoused. The freedom of their country. This is true commitment. True heroes who are not interested in knowing whether they are 'sung' or 'unsung'.

The inspirational **Nanasaheb Parulekar** who studied in Columbia University, came to India and established 'Sakal' Newspaper on 1st Jan 1932. He could have very well stayed in the US. But he came back & used Sakal Newspaper to take the movement of Gandhiji forward. One true thought and the landscape of Marathi news, nay, Indian news, was changed forever.

In any struggle, you have to realize that you have to do your bit, keep your nose to the grind & plough on because you ultimately have to join those faceless, nameless anonymous soldiers who have partaken in ideological wars over innumerable years with that half-hoisted flag of truth on their shoulders, but whose names are not mentioned on any tombstones or shrines.

Aruna Asaf Ali - Grand Old Lady of the Indian Independence - Despite being a part of Bengal's prestigious

Brahmo Samaj and related to Tagore, Aruna married a Muslim 23 years her senior, going against family resistance. Aruna Ali went to jail at the age of 21 for having taken part in the Salt Satyagraha, and became the face of the Quit India Movement by planting the Indian Flag at Gowalia Tank Maidan on the 9th August 1942. Subsequently she went into hiding for 4 years, avoiding arrest, and did not come out, until the arrest warrant for her was withdrawn.

And last but not the least, look at the **legendary Savitribai Phule**. She belonged to the Mali community, a marginalized community belonging to Other Backward Caste (OBC). She got married at the age of 9 to Jyotiba Phule, who taught her and imparted education to her. Together they decided to educate the so-called lower class to fight inequality & social oppression. Sagunabai who was Jyotiba mentor, encouraged her. At the age of 17 Savitribai Phule opened the first Women's School in Pune. Savitribai also promoted Teacher's Education. Upper class Indians, being against this idea of education for the repressed classes of India, threw cow-dung on her, on her way to school, to deter her from her goal. She was advised by Jyotiba to take an extra saree, and to change clothes, once she reaches school. Because many people complained, ultimately both Jyotiba & Savitribai were thrown out of their house. They were given shelter on humanitarian grounds by one Usman Sheikh. His sister was already educated. Fatima Begum Sheikh joined hands with Savitribai, became the first Muslim Woman Teacher. **Together, from 1848 to 1852, they opened up 18 schools across Maharashtra.** In 2015, Pune University was re-named Savitribai Phule Pune University.

Despite so much effort, women's empowerment remains a distant dream in India.

The Padma Shri and the Padma Bhushan were started in 1954. The Ramon Magsaysay Award was started in 1957. How many

of us remember the names of all the Indians who have got these Awards over the years? In the ultimate analysis, all heroes become unsung over a period of time.

Then why do we do what we do? Therein lies the key. Why did **Baba Amte** do what he did with me? Goodness can never be measured in real life terms. How come **Gurudev Tagore** inspired me? Did all those people know how far the watering of the plant of goodness at their end reach? Did they know it would reach me? Never underestimate the power of goodness. **Vinoba Bhave** – Baba Amte – Prakash Amte - Bharat Vatwani – YOU. What about all the people behind Tagore/ Vinoba Bhave/ Baba Amte? Do all these people's lives in the flow of events, not matter? They do. Even if their names are not in the limelight, their lives matter. In their own eyes, and in the eyes of a God above. A drop of water helps. One should never look at life real-time.

Speaking on another context & issue,

there have to be appropriate perspectives on goals for all of us.

Swami Vivekananda has said somewhere - Arise, Awake and stop not till the goal is reached....

But the golden question is - What happens to the man who does not reach the goal?

Rudyard Kipling - has written a poem called IF – in which he writes –

'If you can keep your head when all about you are losing theirs
& blaming it on you... If you can meet with Triumph &
Disaster & treat these two imposters just the same,
with the Last 2 lines reading thus...

Yours is the Earth and everything that's in it, And - which is more - you'll be a Man, my son...'

The golden question again is - What happens to the man who cannot keep his head and meet up with Triumph and Disaster... is he less of a Man??

As a psychiatrist dealing with human behavior, this is not what the philosophy/advice should be for the youth of today... In any struggle, woh kolhu ki bael ki tarah chalnaa hoga, kyonki yahi sangharsh hai, aur sangharsh sadaev chaltaa rahega... (like an ox moving in circles tethered to the grindstone, you will have to keep churning, because this is a struggle & a struggle continues into infinity...).

I believe that the Common Man is the Guardian of Truth.

I belong to the old school of thought which believes that the common man and his commonality are mightier than the warrior with his sword. It is unfortunate that you are not given the due recognition by society which you deserve. I believe that your contribution can change the world into a much better place to live in. With persistence and with moral courage you can create and nurture good deeds and remove the pessimism that is seeping into society. **You can light the spark in the smallest of ways, until the goodness cumulatively adds up to a huge Tidal Wave of Truth.** I personally believe that there is a lot of pain, anguish and misery in the world around us. There is no point in the discussion or assessment of the causation of pain. It is energy dissipated.

It matters not whether you are remembered or not, whether your name is written in the annals of history or whether your ashes are immersed in the Ganges. What matters was whether because of your efforts, the quantum of pain and human in the sea of human suffering sweeping the length & breadth of our country went down marginally.

What role Faith/Religion has in the process of Healing??

I believe that faith and religion have a huge role to play in any healing, be it physical or mental. Finally, all of us are incomplete, unsure and fallible. There is a higher power involved in our existence, otherwise we would not be leading such intricate lives. So, handing oneself over to the higher powers vide faith/ healing would definitely help. But again, this is not to be used as a stand-alone method. It has to be amalgamated with each and every therapeutic tool available to us. There is a poem by TS Eliot which comes to mind –

Where is the life we have lost in living?
Where is the wisdom we have lost in knowledge?
Where is the knowledge we have lost in information?

When I was young, one of my favorite songs was from a 1958 Raj Kapoor movie called 'Phir Subah Hogi' meaning 'Again the dawn shall come'. The words went like 'Maana ki abhi tere mere armaanon ki keemat kuch bhi nahi, mitti ka bhi hai kuch mol magar, insaanon ki keemat kuch bhi nahin... in bhukey pyaase roohon par, ek din toh karam farmaayegi.. woh subah kabhi toh aayegi, woh subah kabhi toh aayegi... translated meaning 'Agreed that today the value of yours and my aspirations is nothing, while the mud of the earth has some value, human beings & lives have no value.. on these hungry thirsty souls, one day destiny shall smile.... that dawn shall come someday, that dawn shall come someday..'.

Upon reflection, I felt that all human beings, at least in India, if not the whole world, have a tendency to remain hungry and undergo some sort of a 'fast' or 'upvaas' (abstaining from food) for religious purposes. The Hindus fast during their Navraatri days before Dusshera and before Ramnavmi, the Muslims fast

during the month of Ramadan before their auspicious 'Eid', the Catholics fast during the month of Lent just before Easter and the Jains fast during their holy 'Paryuushan' days. And the majority of fasting and penance is for the smiling of better dawns upon their individual selves, very rarely is the 'fast' or the 'upvaas' for the smiling of the better dawns upon the underprivileged ones within India.

How many of us humans actually strive for equality, actually pray for the hopes and the aspirations of the underprivileged in India, wishing for them the dawn of a new morning? Therein lies the emotional hub of a great thought and the genesis of true social work.

And this in a country where a 2020 study from the World Economic Forum found 363 million Indians below the poverty line (BPL meaning earning less than Rs 32/day in rural India and Rs 47/day in urban India), the number of people having mental illness is 197 million (a staggering 30 million of them having severe mental illness), 27 million Indians were disabled as per the New Disabilities Act 2016 and the population of India classified as 'tribals' was a staggering 110 million.

Dr Arun Gadre, a strong public health advocate, claimed that **62 million are added every year to BPL** (below the poverty line) **in India** because of mounting health care expenses.

Paradoxical, numbing & somewhat demoralizing, but this is human behavior, universal and omnipotent.

The country pines for its countrymen, for the patriotism within its countrymen, for the greatness of thought within them.

In one of the most stimulating passages that I have read in a long, long time is the passage from **Babasaheb Ambedkar's** 'The Buddha and his Dhamma'. The legendary activist and the

drafter of the Constitution of India Dr BR Ambedkar while pleading for humanity per se has mentioned in his book 'The Buddha and his Dhamma' that 'Men are born unequal. Some are robust, others are weaklings. Some have more capacity, more intelligence, others have less. Some are well-to-do, others are poor. All have to enter into what is called the struggle for existence. And if in this struggle for existence, inequality is recognized as the rule of the game, the weakest will always go to the wall. Should this rule of inequality be allowed to be the rule of life? Some answer in the affirmative, on the grounds that it results in the survival of the fittest. The question however is – is the fittest the best from the point of view of society. No one can give a positive answer. It is because of this doubt that religion preaches equality. For equality may help the best to survive, even though the best may not be the fittest.'

Our country is full of apparent religiosity - with multiple Gods, multiple Faiths, multiple Temples, Mosques, Churches, Gurudwaras, Synagogues, Monasteries, Agiyaris and the likes. It is paradoxical that a very small insignificant miniscule few Indians actually strive for this equality which Ambedkar has ascribed to religiosity in his book.

So ultimately **it amounts to nullifying that religiosity in itself**, that same religiosity which we deep down seem to be so sure to possess and almost pride ourselves in.

And searingly, tragically, almost glaringly, the equality component within that religiosity remains the huge drowning stone chained round our necks.

Are we as Indians doing enough?? Should this rule of inequality be allowed to be the rule of life??

I for one ask, my conscience asks, that if we as civilized society continue with this rule of inequality, wherefore is justice /

equality / brotherhood / mercy / empathy / compassion? Where is love and, most importantly, **where is the supposed God within all of us?** To negate this Rule of Inequality & the inherent Injustice inside this Rule -- **We have to continue to fight social injustice.**

Coming to mental illness per se,

people say help out the poor. But a world of a difference between a poor man with his family on the road vis-à-vis a mentally ill. I was watching a talk on YouTube by one **Dr Zarir Udwadia** on the pandemic presence of tuberculosis in India, and the morbidity associated therein. No doubting their huge statistical numbers. But all of them in their mental faculties, with cognitive functions preserved. The wandering mentally ill are bereft of the normal simple taken-for-granted power to think.

There is nothing to beat the loss of your mental facilities. These mentally afflicted downtrodden differ from the run of the mill beggars seen on the streets, in the sense that the mental illness renders them acutely vulnerable & incapable of fending for themselves. The existing of these destitutes on the streets is not an event of their own making but instead these destitutes have often wandered out of their home under the influence of the mental illness (primarily Schizophrenia) & in a state of insanity.

It is a tragedy. And it is unfortunate that the common citizen does not understand this and often asks naïve questions such as ‘Why does he not go back home?’ The tragedy is so severe that at times the destitute may be having on his body more than adequate cash money to cover the travel expenses to his native place (the common man often giving him money as alms), but does not have the faculties to use the money appropriately. Subconscious, almost embedded in the collective unconscious of Indian society, are the cultural issues associated with

schizophrenia. 'There was a movie called 'A Beautiful Mind' based on the life of the famous Nobel Laureate Mathematician **John Nash**. It depicted him suffering from schizophrenia. An actual tragic reality of his brilliantly-gifted life. Millions in India must have watched the movie. Even then they ask 'ye bimaari kaise hotee hai...?' (how does this illness happen...?) This is the collective unconscious of the Indian psyche speaking. Ultimately, I would humbly request all of you 'Don't just understand those with illness. Feel their pain too. For this could be me, this could be you, this is us. And this is me, this is you, this is us'.

Discussing points raised by audience,

many people ask us as to why does Shraddha not openly ask for donations. Why don't we have a Payment Gateway on the website, why don't we join up with Crowd-Funding platforms. We are not very active on Facebook. Ultimately the journey is of Truth. If Truth exists in our work, it will continue, if Satya existed in **Vinoba Bhave**, it continued through the stream of Baba and Prakash Amte. If Satya exists in Shraddha, it will continue. If there be no Truth, even otherwise, our NGO deserves to shut down.

After having been bestowed the Ramon Magsaysay Award, I had gone to meet the Charity Commissioner, Maharashtra just to brief him about our work. While explaining to him, at one point he got emotional, went into the back room and came back with a cheque of one hundred thousand and handed it over to me. THE Charity Commissioner of Maharashtra, whom I was meeting for the first time, one **Shivkumar Dige**, felt that the cause deserved support. There was no need for a Payment Gateway. The only Payment Gateway required was the honesty within your work, your endeavors.

Ultimately, each one of us brings with him his or her own sensibilities and philosophy into his concept of social work. I have always believed that the most important aspect, THE MOST important aspect is to try and maintain the innate decency and goodness of the work. Far beyond Awards, far beyond press and media coverage, far, far beyond autobiographies is the need for the very goodness of values, the original seeds of compassion on the basis of which the NGO was started, to be continued to be nourished and sustained. And to realise from the philosophies of past social workers that you have to continue on your chosen path, holding on to your torch, knowing that change may occur, MAY NOT occur. Your Karma (Destiny) is all that matters. Ultimately Change is a slow process. A very VERY slow process.

In any true social work, an element of depression may come about, either as the genesis of the work or somewhere along the course of your journey. How common is depression? Cross your heart & ask yourself. The maximum depressive poems of **Rabindranath Tagore** were post his Nobel Prize. **Abraham Lincoln** went through his bouts of deep soul-searching depression. I have come up from tough times. I lost my dad when I was 12 years old. I sold photos of cine star Rajesh Khanna to make ends meet. But I am not alone. Many within you who have gone through your own tough times, but have forgotten them. Perhaps come up from even more scratch. But who have not looked back at the have-nots in society. Denying yourselves the acceptance of your own tough times and depression, perhaps allowing the stigma of psychiatric illness to affect you.

Ultimately, we are the blessed few, the chosen ones, the Intelligence Quotient++ guys, the 5% who are the elite. Our **Prime Minister Manmohan Singh** setup a chain of high academic institutions called Indian Institute of Science Education & Research (IISER) focusing on pure sciences. The idea being to give the students of our India an exposure to world-class environment and academic faculty talent. But the majority of students who have post-graduated from these Institutes have gone abroad for pursuing further studies and greener pastures. Where is the sense of patriotism? Intelligence is being drained in bulk.

The number of Indian psychiatrists in both the UK & the USA, alone and individually, are more than the number of Indian psychiatrists in India. Out of the creme de la creme of the brains, the majority go abroad. I feel one should be fair to a God above who gave us/you the brains & be fair to the country of your roots. God given, we take our brains and our intelligence for granted and we use it for personal purposes and gains. How about the rest of our motherland society, how about the have-nots, who do not have what we/you have, how about sharing? Our country bleeds for its countrymen.

A journalist, post the Award commented that my photo was nowhere on the Shraddha website. In all humbleness, I had always felt that the website should depict our work and not be used as a tool to propagate one's own personal ego or of the team members.

The best compliment of my life was when someone remarked that they had heard a lot about an NGO Shraddha Rehabilitation Foundation and asked me as to how was I connected to Shraddha?

Fellow Psychiatrists have often commented post the Award that my name was unheard of, before the announcement of the Ramon Magsaysay Award and that I did not have any publication to my credit in any prestigious American / British Journal of Psychiatry / Indian Journal of Psychiatry / or presented a paper in any of the renowned International/ Indian Psychiatric Society Conferences.

It was perhaps because the river was flowing, of common shared pain, both mine and that of the wandering mentally ill. Perhaps I never got a chance/ moment to look back and ponder. It was not that I was not needing the psychological strokes. Perhaps I got it from my patient experiences and the emotional catharsis therein.

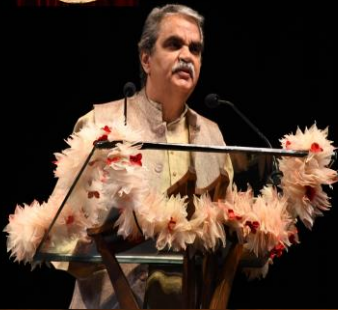
And the best stroke I received was when **Vikas Amte** (son of my Guru, Baba Amte) wrote a letter to me after Award. It read "Baba aur Taai... jinse aapne prerna lee, kaarya aarambh kiiaa... yadee aaj wo hotay toh ve aap kee peeth thap thapaate... Fuulaa nahii samaate..." (Baba Amte & his wife Sadhanatai, from whom you took inspiration, started your work... were they alive and around today... they would have patted and thumped your back... would have swelled with joy & happiness).

A social worker from Kolhapur claimed he had met **Prakash Amte**, my Guru on a couple of occasions. Another person in Neral (near Karjat) too had apparently gone many times to Prakash's Center in Hemalkasa. Both theses persons stated that they were not inspired. But I seemed to have found all my answers upon meeting Prakash Amte, despite my having not asked him a single question and despite his having spoken less than two specific sentences related to my search for answers. Ultimately the hunt for an answer often lies in the depth of the searcher.

Dear reader, to end, in true social work, ultimately you have to think from the heart – your soul – you have to defy accepted logic – because you empathize with the pain of the common man – it seeps through you – you are him, he is you – nothing else matters, nothing else should matter. And if you stay focused in your journey, far beyond what I did, or far beyond what Baba Amte did, you may well become in social work like the **Lord Arjuna from Mahabharata**, who could shoot the eye of the fish merely by looking at its reflection in the water alone, and this may well become the pinnacle of focus on social work for all time to come. Like **Moses in the Biblical tale** of yore, you may well be the chosen one who may bring about the parting of the Red Sea to save the underprivileged and downtrodden sections of Indian society, a benchmark for others to follow.

Ultimately this conversation is not to make you reach out to either me as a person or to Shraddha Rehabilitation Foundation, the NGO started by me and my wife. Not to make you reach out to the wandering mentally ill in your vicinity. Not to make you go through my published autobiography. This letter is to make you reach out to yourself, the emotions within you, the seeker within you, the alone, lonely and isolated component within you, and from there to the alone, lonely and isolated component within another and helping him, embracing him, and ultimately embracing yourself. This letter is about that. Seek, seek and seek. Yourself.

With my best wishes, love and blessings, for whatever they may be worth. You are the future of a new tomorrow, a better tomorrow, a hopefully-closer-to-a-God tomorrow.



RAMON MAGSAYSAY AWARD FOUNDATION

Ramonsaysay

Vatwani, Bharat

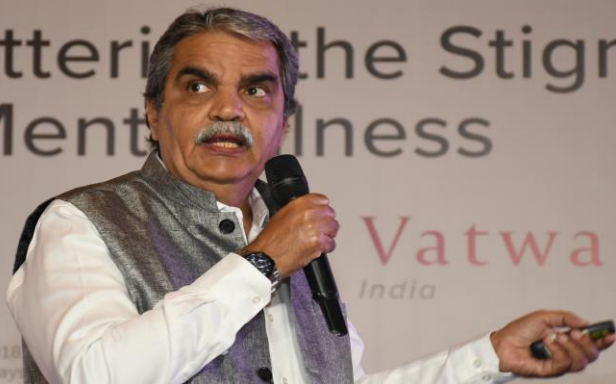
India
2018

Restoring health and dignity to troubled lives

Shattering the Stigma of Mental Illness

Vatwani
India

29 August 2018
Ramon Magsaysay



September 7, 1993

September 7, 1993

Dear Dr. Vatwani,

I am grateful to you, Dr. Smitha Vatsani and Dr. G. V. Bhimani for your kind invitation to be the Chief Guest at the art exhibition which is proposed to be held at the Jehangir Art Gallery from 18th to 24th October.

I know the good work your organization is doing in the field of the mentally ill and the destitute. Unfortunately, I have to decline your gracious invitation to join you on the 18th October. I hope you will please understand and excuse me.

With best wishes for the success of the function, and of Shraddha Rehabilitation Foundation, and renewed thanks for inviting me,

Yours sincerely,

N. A. Palkhivala

Dr. Bharat Vatwani,
Shradha Rehabilitation Foundation,
Bombay.

P.S. I am requesting the Lotus Trust to give a donation to your fine institution.



HDFC
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Dr. Bharat Vutwani
Trustee
Shraddha Rehabilitation Foundation
Garnet, Behind Shanti Ashram
Borivli - W
Mumbai - 400 103

April 20, 2005

Dear Dr. Vatswani,

Thank you for your letter dated March 03, 2005 addressed to our Managing Director Mr. Keki Mistry regarding financial assistance towards the ongoing charitable activities of the Foundation.

HDFC is glad to donate grant funds for this purpose. We have sanctioned an amount of Rs. Five lac towards the corpus of the Foundation. Enclosed please find a cheque (No.4131598) for an amount of Rs. 5,00,000/- (Rupees five lac only), favoring the "SHRADHA REHABILITATION FOUNDATION" drawn on Central Bank of India, dated 20-04-2005.

We request you to provide us with the following in due course:

1. An original stamped receipt for the donation at the earliest. The receipt should bear the number and period of validity of the 80G tax exemption certificate.
2. Any photographs, brochures etc. incidental to HDFC's support.
3. A report on utilization of the grant.

Wishing you the very best in your endeavors.

Best regards,
Sincerely,

Harish Khare
Assistant Manager – Development Finance

Value Labs
Plot #41,HITEC City,Phase II, Madhapur, Hyderabad - 500081
Ph: +91-40-8823 9000 • Fax: +91-40-8823 9100
USA Ph: +1 (770) 250 0254
www.valuelabs.com

Date: 22nd September'11

TO WHOMSOEVER IT MAY CONCERN

Subject: Information regarding the treatment and reunion of road-side destitute patients.

Respected Sir/Madam,

ValueLabs is a software development, testing and KPO company, with multi-shore delivery capabilities. ValueLabs was setup in 1997 with a vision to deliver value to clients worldwide using an effective offshore project management model in the areas of QA, Software Development and Business Processes.

At the heart of our organization, lies this realization of our responsibility towards the society that has given us our identity. As a part of our Corporate Social Responsibility program, we are partnered with Shradha Rehabilitation Foundation and have been working with them since April'09 to help them in identifying, treating and reuniting mentally ill roadside destitute patients with their families.

Shradha Rehabilitation Foundation at Karjat, Maharashtra is a social welfare foundation which was started for the mentally ill destitute patients through an indigenously adapted approach of custodial care inspired by Babu Amte's Anandvan combines a compassionate approach to socialization, occupational engagement, & professional medical intervention.

Shradha Rehabilitation Foundation has helped us to pick up and reunite around 180 roadside destitute patients from Hyderabad since April'09. We get regular updates about the patients picked up and we are also involved in their pick up and reunion process. We support them by contributing an average amount of Rs. 2,00,000/- per month towards the pick up, transport, treatment and reunion of patients.

We consider Shraddha Rehabilitation Foundation as a valuable partner in our CSR activities who have helped us a great deal by helping us in the noble cause of our mentally destitute rehabilitation program.

Shradha Rehabilitation Foundation was chosen to be our partner in our CSR activities after extensive research about their social work. Dr. Bharat Vatswani from Shradha is a renowned psychiatrist in Mumbai and has been very committed and helpful in working towards the noble cause of rehabilitation of the mentally destitute patients.

Sincerely,

Krishna Reddy
Head HR

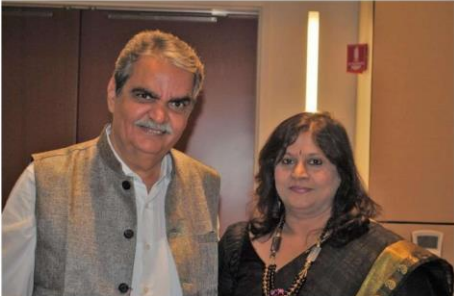
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FEATURE

Psychiatrist Bharat Watvani, Winner of Prestigious Magsaysay Award, Aims to Erase Stigma of Mental Illness

SUNITA SOHRABJI, India-West Staff Reporter



Psychiatrist Bharat Watvani, recipient of the 2018 Magsaysay Award, is shown with his wife Smitha, who is also a psychiatrist. In 1988, the Watvans launched the Shraddha Rehabilitation Foundation to help mentally ill homeless people in India with their families and to provide rehabilitation and support. "Mental illness is a biochemical response, just like any other illness," Bharat Watvani, who is hoping to erase the stigma associated with mental illness, told India-West in an interview during Indians for Collective Action Golden Jubilee celebration Oct. 20 in Santa Clara, Calif. (Sunita Sohrabji/India-West photo)

SANTA CLARA, Calif. — Psychiatrist Bharat Watvani, one of this year's winners of the prestigious Magsaysay Award — also known as Asia's Nobel Prize — hopes to erase the stigma associated with mental illness in India.

"Mental illness is a biochemical response, just like any other illness. Mentally ill people have a right to treatment and should be seen in the same way we see all others," Watvani told India-West here Oct. 20 afternoon on the sidelines of the Indians for Collective Action's Golden Jubilee celebration (see India-West story here). Watvani was a keynote speaker at the conference and received an award from ICA that evening at a gala marking the 50th birth anniversary of the organization.

In 1988, Watvani and his wife Smitha, who is also a psychiatrist, launched the Shraddha Rehabilitation Foundation in Mumbai with the aim of helping mentally ill homeless people to be reunited with their families. Since its inception 30 years ago, Shraddha has reunited 7,000 mentally ill street people with their families after providing rehabilitation and support.

Shraddha's army of volunteers find wandering mentally ill people on the streets and bring them to the first line of rehabilitation, attending to their physical needs. Many are emaciated, suffering from other illnesses, and in need of hygiene care.

"We then slowly add in psychiatric evaluations and begin a course of medication," Watvani told India-West. He noted that many people who are found without the ability to speak slowly start talking after a few days of treatment and start to remember bits of their lives. Often, patients can remember mobile phone numbers after some treatment, which eases the search for family members.

Technology has helped immensely, said Watvani, noting that Aadhar cards and biometrics can more readily identify a mentally ill homeless person. Police helping the organization use the WhatsApp mobile phone app to connect to police stations across the nation to convey information about persons found.

Shraddha has a 95 percent success rate of reunification with families. Those who are not reunited are given over to an NGO which will provide support and rehabilitation to the person throughout his lifetime.

The wandering mentally ill tend to primarily be men, said Watvani, noting they are often migrant laborers who have left their villages and come to cities in search of work. Women are housed in their communities, often without getting help and treatment for their mental illness.

There is a marked lack of psychiatrists in India, Smitha Watvani told India-West, noting there were fewer than three per 100,000 people. Speaking at the 22nd convocation of the National Institute of Mental Health and Neurosciences last December, Indian President Ram Nath Kovind noted there were only 5,000 psychiatrists and 2,000 psychologists for a country with a population of 1.3 billion.

"India does not simply have a mental health challenge: it is facing a possible mental health epidemic," he said.

Shraddha was launched after Watvani met an unkempt young man on the streets of Mumbai who was drinking polluted water and eating garbage thrown on the street. The psychiatrist took him to his clinic and started to treat him.

After a few months, the young man — Vijayam — began to remember bits of his former life before the streets, but had graduated from college with a degree in medical laboratory technology and his father was a former police superintendent in Andhra Pradesh. "It was like a dream when I received a telegram from a faraway unknown place that my son was alive and well," Vijayam's father told The Times of India in 1990.

"The wandering mentally ill deserve attention. They have feelings and emotions," said Watvani in a keynote address at the ICA jubilee celebrations. He spoke about a boy found by Shraddha social workers. Through the process of rehabilitation, the organization was able to reunite the young man with his family in time to light the funeral pyre for his mother "so that her soul could go to heaven," he said.

About 180 million people in India suffer from some form of mental illness, said Watvani in his keynote, adding that overall, 20 percent of India's population has some form of disability. "I stand before you as a representative of 250 million people who are under-represented," he said.

"Compassion is like a river, widening and widening until it reaches the sea," he said.

INTERNATIONAL NEWS COVERAGE

GULF NEWS

Restoring the dignity of troubled lives

Dr Bharat Watvani, who won the Magsaysay Award for his work in helping mentally ill homeless people, is shown with his wife Smitha, who is also a psychiatrist.

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A key element in the success of the Shraddha Rehabilitation Foundation was — "restoring the essential personality" of those it serves. That meant finding the organization's sense of purpose. That people, upon meeting it, mentally ill, homeless people on the streets often quickly change their lives. In fact, many people who are found without the ability to speak slowly start talking after a few days of treatment and start to remember bits of their lives. Often, patients can remember mobile phone numbers after some treatment, which eases the search for family members.

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GULF NEWS OF INDIA

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NATIONAL NEWS COVERAGE



of our lives," recalls Vatsani, 62.

Once Vatsani's patient had recovered, he told the psychiatrist he was a science graduate whose mental illness had begun to manifest after he failed to find employment. Vatsani wrote to his family, and saw the man's resolve strengthen when he reunited with his father. In 1968, a few weeks after this first reunion, Vatsani and his wife set up the Shraddha Rehabilitation Foundation. In the 32 years since its inception, Shraddha has rescued over 8,000 mentally ill patients found wandering the streets. Of these, an astonishing 95 per cent have all been united with their families.

Vatsani's work has always been difficult. "The destitute," he points out, "goes through extremes—starvation, sexual abuse, injuries, fractures. Often there are also issues in communication—different dialects are hard to comprehend—and, at times, the patient remains symptomatic for



Dr Bharat Vatsani (third man from the right) with the Shraddha Rehabilitation Foundation staff

months." In the event a patient is illiterate, tracing his or her address starts to seem impossible. Sometimes, despite their recovery, families refuse to accept their female relatives for fear of ostracism. On occasion, members of Shraddha's staff have even been accused of human trafficking by a distrustful public and authorities. "Also, because of a lack of awareness, donors do not have enough sensitivity."

Vatsani's perseverance won him a Magsaysay Award in 2018, but the psychiatrist feels he still has not done enough for the cause of the wandering mentally ill. He says, "My heartfelt opinion was that I did not deserve the Ramon Magsaysay Award; I could have done more, should have done more." Vatsani points to the 2011 Population Census: "It estimated that 1.8 million Indians are homeless. Studies have shown the incidence of mental illness

"I feel did not deserve the award. I could have—and should have—done much more." —Dr Bharat Vatsani

among the homeless is 50 to 60 per cent. So almost 10 lakh Indians are homeless and mentally ill. We had only picked up, treated, rehabilitated and reunited a mere 8,000 of them till date. This is a fairly paltry, insignificant number." In the end, Vatsani sees a solution in more empathy. "Don't just understand those with the illness. Feel their pain, too."

—Shreevishwa Nivedita



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CITY

BOMBAY TIMES, THE TIMES OF INDIA

Family ties

Psychiatrists Bharat and Smitha Vatwani are proud parents of four children, three of whom are adopted

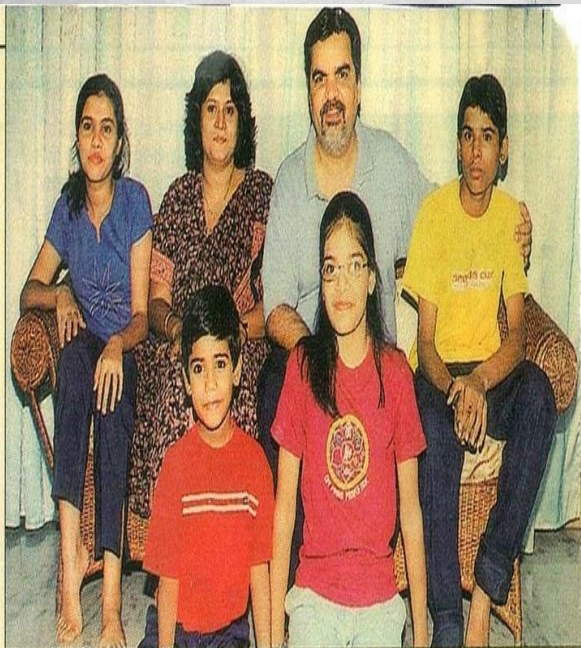
SHARMISTHA CHATTERJEE
Times News Network

For psychiatrist couple Bharat and Smitha Vatwani, adoption was something that came naturally. Having contemplated it for a long time, they resolved to go for it at the first opportunity. "We had decided before marriage that after our first child, we would go in for adoption," says Bharat. "We wanted do something good for children who are not our own."

From their four children, only Akshaa (14) is their biological child. Arjun (12), Kanika (11) and Karmanya (7) have been adopted. Caring little about social stigma and family resistance, the couple went ahead with their plan two years

after Akshaa was born. They adopted a boy and named him Arjun. Though the Hindu Adoption Act doesn't bestow parenthood on people who adopt after two children, it didn't stop them. The Vatwanis took Kanika and Karmanya under their wing and became their official guardians.

As psychiatrists, the Vatwanis had an edge over others. They let the children learn about their adoption quite early, enabling them to deal with the situation better. "My children are well adjusted," beams Bharat. "It is very important to let them know. For later in life, it could prove to be extremely upsetting and play havoc with their minds." Agrees his wife, "The earlier the



HAPPY HOME: (Sitting, top) Akshaa, Smitha, Bharat, Arjun, (sitting, below) Karmanya and Kanika at their residence

exposure the better."

Such mature handling of relationships is evident among the children, who accompanied their parents when they went for a third adoption. "Karmanya had been crying and that drew our attention," recalls Akshaa. "And the three of us told our parents that we wanted to take him home."

Such is the children's level

of orientation that snide remarks about their lineage has little or no impact on them. "I tell them you can say what you want, but they are my parents," says Kanika.

The parents' compassion has so rubbed on to the children that they insisted on taking in an abandoned puppy. The Vatwanis' efforts has indeed paid off, for their children want to follow in

their parents' footsteps. As Arjun says, "When I grow up and get married, I will adopt a child."

That's in the distant future. As of now, the doctor couple and their four children continue to raise many eyebrows. For the Vatwanis, it's a source of amusement. "It's funny," says Smitha. "But then it's all for a good cause."

The word Shraddha comes from Sanskrit meaning
'Devotion'



The Logo of Shraddha consists of
The Symbols of the Gods

On extreme left is the Hindu symbol of Lord Ganpati

Next is the Muslim symbol of Allah

In the center is the Cross of Christianity

After that is Sikh-Punjabi symbol of Ek Onkar

Lastly is the Parsi symbol of Fire

All Humanity is One,

All Faith is One,

All Suffering is One

Developments after the Award

January 2019 :

While our NGO efforts have been a fairly long journey, the work is truly catapulting exponentially post the Ramon Magsaysay Award, with calls, referrals from individuals and organisations all over India. It is like as if it has suddenly dawned on a lot of people that there is treatment and hope for the wandering mentally ill. While our in-house capacity is 120 inmates, we are constantly hovering between 140-150 inmates and still having a long list of NGO/Government Institution referrals waiting to be dealt with. We have appointed at least 10 new staff to cope with the increased load. We are seriously contemplating putting up one more additional unit to house the destitutes. While the pressure is high, the job satisfaction is higher, and the emotionality involved is positively, POSITIVELY gratifying.

Sharing good news, General Insurance Corporation (GIC-Re) has come forward to fund all expenses for 1200 destitutes from pick up thru treatment thru reunions. In fact, we have projected to them and are anticipating 1200 reunions in the year 2019, now that the workload has gone sky-high, post the Award.

Rotary Club of Mumbai Queens Necklace has continued with its tradition over the past few years of sponsorship of expenses of 160 wandering mentally ill, and has already sent their contribution for this year. They have been pillars of support over the years, even when our NGO had not got any noteworthy recognition. Their faith in the innate honesty of our efforts has been heart-warming & touching.

Sharing further good news, we met up with Smt Maneka

Gandhi, who happened to be the Union Minister for Women & Child Development. When she came to know that we are involved with the rehabilitation and reunion of the wandering mentally ill women roadside destitutes sheltered in Chennai and Gujarat Govt Mental Hospitals, she wished us to extend this service to all Govt Mental Hospitals/ Institutions pan India and gave Shraddha an authorisation letter for the same. The letter adds wings and authentication to our efforts and increases our responsibilities manifold.

All in all, the momentum generated within our Shraddha Team by the Award has been terrific. Every one of the Team has actually literally matured and has realised that people's expectations from Shraddha have increased. And every one is attempting to rise to the occasion.

While the conjoint struggle of Shraddha and all of you may not reduce substantially the quantum of the wandering mentally ill present on the roads of India (given their mammoth scale of presence), at least there is vision at the end of the tunnel for some of these destitutes, because of our joint efforts. This conjoint struggle and efforts have been going on over the years and hopefully will sustain into infinity. That is the only goalpost that really matters.

January 2020 :

We complete a memorable 2019 at Shraddha Karjat.

I remember in 2006 when we had started the Karjat Center, someone had asked me as to what was my dream. I had replied that were Shraddha to reunite one destitute every alternate day of the calendar year, that would be my personal 'Nirvana'. That amounted to 183 reunions in a year.

In the year 2019 just gone by, we have reunited 1114 destitutes

with their families across the length and breadth of India. Averaging over 3 destitute reunions every single day of the year. Six times the target for the personal 'Nirvana' which I had conjured up in 2006.

An additional 14 destitutes were reunited directly from the Government Mental Hospitals / Institutions sheltering them, without these destitutes having entered our Karjat Center.

An absolutely unbelievable achievement that warms the cockles of all of our hearts at Shraddha here. The Gods have truly been kind and benevolent.

Other notable achievements of the year were :

The destitutes referred officially by Government Institutions were 200 during the entire year from 14 different Institutions (primarily from the Government Mental Hospitals) pan India.

The destitutes referred officially by the Police were 89 during the entire year from 51 different Police Stations all over Maharashtra including far off places such as Pen / Pune / Mahad / Sinhadgad and Sindhudurg.

The destitutes referred by NGOs were a whopping 667 during the entire year from 43 different NGOs all over India, be they from Kerala, Uttar Pradesh, Tamil Nadu, Assam, West Bengal, Karnataka or Rajasthan.

An unbelievable sensitization of different Institutions for the cause of the wandering mentally ill on the streets of India.

In fact, Dr P. Poorna Chandrika, MD, the Tamil Nadu State Nodal Officer - DMHP, is pushing for a collaboration with all the 32 Districts of Tamil Nadu, hoping to transfer 5 destitutes from each District of Tamil Nadu every month to Shraddha

for rehabilitation and reunion.

In all frankness, we at Shraddha Karjat are stretched to cope with the load.

Amongst our donors, GIC-Re deserves special mention. Not only did they come up with the sponsorship of 1200 destitutes, they have agreed to fund us partially for the coming year also. Because GIC-Re is a Government Organisation, we were evaluated in detail by another external independent Government Agency SSESS (Society for Socio-Economic Studies and Services) of Kolkata. I am happy to inform you that we passed the litmus test of their scrutiny as well. In fact, SSESS went a step further and recommended that Shraddha receives further funding from GIC-Re. To quote SSESS “Institutional care in India is limited for mentally ill destitute vis-à-vis the function of Shraddha is of great importance for institutional care and rehabilitation services for those vulnerable patients. The financial support received by Shraddha from GIC – Re played a pivotal role and leveraging factor for smooth implementation of the entire exercises and created the operational efficiency of the programme for those destitute. Thus, financial grant in aid from GIC Re should be continued as per need-based contract for the sustainable implementation in near future”.

Well-intentioned work receiving its’ just endorsement.

Lastly, I have been invited to Philadelphia in the US by the American Psychiatric Association to give a talk on the wandering mentally ill roadside destitutes in April 2020. Hopefully, the cause of the mentally afflicted downtrodden shall receive the awareness and global fillip which it truly deserves.

And to add to the icing to the entire year was the reunion of a

Catholic lady on the 25th of December, the auspicious day of Christmas itself, with her family in Umred in Nagpur District after a span of 25 years. She was apparently sighted by Dr Sadhna Thakur, wife of none other than the current Chief Minister of Himachal Pradesh, in her hometown of Karsog in Mandi Zilla in October 2018 in a very rundown emaciated condition. After judicial procedure, the patient was admitted in Himachal Hospital for Mental Health in Shimla. She was transferred from Shimla to our Karjat Center on 29th November 2019 by our Shraddha team of social workers. And finally, successfully reunited on Christmas Day itself by our female social workers Jyoti Raut and Sulakshana Aher in her hometown near Nagpur. The Gods weaving their own magic in a reunion of souls. The reunion was covered by the Indian Express, a leading Indian newspaper.

Personal Thoughts

We have often been asked, over the past innumerable years, as to why do we do all this? There are thousands of destitutes out there on the streets, wandering insane. Will treating a few make any difference? How long can we cope with the requirements of food, clothing, medicines, shelter, and the difficulties involved in reaching the patient to his native place? Would our work & our efforts really matter & create that much needed change in the attitude of society towards mental illness?

These are soul searching questions to which we do not have sure answers. Being human, we are incomplete, imperfect and fallible.

But we believed when we started all this, and we believe even today, that if there exists one category of road-side destitute which needs help, it is the mentally insane. Their agony is wrought on their mud-caked faces, their story written in their tangled hair, their plea reflected from the fear in their eyes, their misery in the nakedness of their being.

Blazing heat, torrential rains and chilly winters see them through, year in & year out, and the searing

starkness of their existence pounded on us to reach out for them, which we did, which we have & which we will.

How significant are the numbers we have reached out to & helped, we know not but our work & our efforts will continue irrespective of the odds.

To us it matters not whether the mark that we leave behind is delible or indelible, or whether we leave behind a mark at all; what matters is our commitment to the plight and the cause of the mentally ill destitute, which our work embodies; A commitment which will remain, infinitely, eternally and unto the end, until death or our destinies do us and the mentally insane man on the street apart....

Whether your kind self empathizes with our stance & our cause or does not empathize, is a matter of conjecture and optimistic hope, but our work will continue, because by now, this is our unwritten destiny.

There has to be a perseverance of belief to outlast all beliefs that Good and God shall prevail.

An Ode to a Roadside Schizophrenic

One of the most touching, moving, gut-wrenching and emotional of all pick-ups was the case of an elderly lady who was lying on the pavements in front of a Gurudwara in Versova, Mumbai, being protected by none other than her pet dog. The story went that she was a well-known journalist working for a magazine and she had hit upon bad times, and the dog was a Pomeranian who was with her for 14 years. The master and her pet named Sashi were on the road in the most pathetic of conditions, with the dog barking at every passerby and protecting her master with all the instincts which only a dedicated loving pet could manage to have. Apparently, the lady's story had been covered by many newspapers and even some TV channels, and some people had even come forward to help out, but everyone wanted to take the lady in, without her pet. While paradoxically what drew my wife Smitha and both my daughters to her and her story covered by the local newspaper and touched our collective conscience was her pet dog. We had two pups ourselves then and my wife and children were all very strong animal rights activists. They believed that if there was one soul which deserved shelter in the whole traumatizing scenario, it was the pet's.

We took the elderly lady along with her pet into our Borivli center and made a small room in the stilt area of our building and provided both, the elderly lady and her pet, with absolutely exclusive space and shelter. The pet Sashi was quite old already and had to be taken by my daughter to the vet many times, and in the weeks following, was detected with cardiac failure, and although on cardiac medication, was on her last legs. But even then, if someone would dare to go near her master, Sashi would bark, albeit feebly, and render visible her protective streak. And the elderly lady on her part, realizing that her pet Sashi was in

cardiac failure and sinking, started abstaining from food & undertook fasts (upvaas) in the hope that her pet survived. Such were the emotions that the living are made of. Such were the emotions which inspired us to reach out to them.

Giving in to the passage of time and mortality, a few months down the line, the pet dog Sashi breathed her last and my wife and daughters were teary-eyed and felt bereaved at a personal level. We buried Sashi in the mound of earth within our own building compound.

While the winds may pass our way once more, for now they carried with them the sound of silence.

A couple of months later, the destitute lady too passed away. The dog Sashi having already expired, the lady was a shadow of her former self. Finally, she too left for her heavenly abode, perhaps to be with her pet, who had stood by her side for innumerable years.

While this may not be connected with our work, but my wife happened to come across an article which questioned as to where do pets go after their demise, and whether they also have their own space in Heaven. To which the reply in the article was given by the pet dog itself, a reply which I remembered when the destitute lady passed away.

The pet dog (in this case Sashi), upon her own demise communicates to her master (the pious elderly lady) –

‘I explained to God, I would rather stay here, outside the pearly gates of Heaven. I will not be a nuisance, I will not even bark, I will be very patient and wait. I will be here, chewing on a celestial bone, no matter how long you may be. I would miss you so much, if I went in alone, it would not be Heaven for me’

And so it came about that Sashi's master was reunited with her Sashi, and both hopefully were together in Heaven.

I thought I must share this with you, knowing we are all ultimately eternally bonded in the commonality of existential anguish, pain and grief.

There has to be an end,
vision at the end of the tunnel,
redemption,

a break in the blackening clouds,
the flicker of a rainbow,
redemption,

tears streaming down withered cheeks,
racking sobs relentlessly overpowering,
an end to the façade,
redemption,

escape from the mournful wails,
silence at the end of grief,
an acceptance of defeat,
redemption,

the renunciation of assumptions,
an end to misery, agony,
turmoil and turbulence,
the scorching of insanity,
the embarking of ashes,
an embrace of mother earth,
redemption.

There has to be an end,
redemption.

The Cornerstone of Shraddha

At the end of the day, what became the cornerstone of the functioning of Shraddha was to put the focus on the opposite person's internal desires, longings and emotions.

Two souls unknown and alien to each other could collide in their passages across Time. The key issue was whether one of them (in this case us at Shraddha) took cognizance of the existence and emotions of the other (in this case the wandering mentally ill). The collision of souls then could no longer be considered as a chance occurrence, but like the Carl Jung philosophy took ramifications and dimensions of its own, and all of us could not but be sucked into the whirlpool of that philosophy.

An elderly lady, gaunt, frail, severely asthmatic almost dying was noticed by our female social worker Farzana Ansari during her routine visit to Asha Daan, a Mother Teresa Missionaries of Charity setup in Mumbai. The noticing was the collision of souls. The interactions revealed that she hailed from Sholapur, a district in the south of Maharashtra. The emotional catharsis resulted in the old, frail, gaunt, emaciated lady expressing an intense desire to go home. She reached out her hands, held our social worker's face in them and uttered 'Malaa ghari jaayacha ahey...Malaa ghari gheuun jaa naa...' (I want to go home... Please take me home...). Unknown, complete strangers to one another, belonging to different communities, with an age difference between a grandmother and a grand-daughter, one almost gasping, dying & the other just come to the Missionaries Home as part of her job responsibilities. Despite all the odds, a union & amalgamation occurred. Without even bothering to seek permission from us, Farzana transferred the elderly lady from Asha Daan to our Karjat Center.

My Medical Officer Dr Nilesh Mhatre, although on paper a Homeopath, started with all the emergency asthma treatment (an arsenal of medicines familiar only to him and not to me or my wife as we were psychiatrists by qualifications) and the bonding was complete.

When I came for my rounds to our Karjat Center the next day, I was knocked for a loop to find this 80 something lady on a nebulizer machine (a device which is used for the severely asthmatic to facilitate recovery).

When I attempted to engage with her in conversation, there was a spontaneous bonding. Perhaps I saw in her my own mother, who was no more, having passed away years ago. And then again, perhaps I saw in her nobody, the whole sequence of events almost happening in a blur. But once more, despite all the odds, souls collided. All that she did was to reach out and hold my face in her hands and repeat the same plea 'Malaa ghari jaayacha ahey...Malaa ghari gheuun jaa naa...' (I want to go home... Please take me home...). It seemed like a bucket list death wish, like as if she was holding on to all her reserves of breath and energy, holding on to life itself just to reach home.

A fortnight went by, with the asthma treatment in full force, courtesy our Dr. Nilesh Mhatre with her seemingly teetering all along on the brink of death, gasping, but never truly keeling over. And her asthma settled down slowly but surely. Perhaps her recognizing internally instinctively in her own subconscious that she was within caring, concerned, compassionate souls helped. Perhaps her anxiety ebbed and abated. But she improved, to the point that we could risk taking her in an ambulance to Sholapur, a distance of perhaps 8 hours from our Center.

We sent with her another Medical Officer, two nurses, oxygen facility, a nebulizer, all the emergency life-saving drugs we could think of, and to avoid the day traffic, our Ambulance Team left at 11 pm in the night. Non-stop driving and our team were there at her village at 6 am.

The early morning light of the dawn was witness to the relief and joy on that elderly lady's face when she entered her village, her hearth and home, her abode, her very own. The family had filed a police complaint and apparently the lady had wandered out of her home under the influence of her senility, some six months back. They were overjoyed at getting their mother back. As a token of appreciation, they gave a small donation. Villagers woke up to receive the good news and glad tidings. In the rural areas of India, there is so much sharing and caring.

How many days, weeks, months or years the elderly lady must have survived since her entering her home is anybody's guess. But for those split seconds, minutes, hours and days, unconnected souls had become connected, at one with the sun, the moon, the stars, the planets and the galaxies. Farzana need never have noticed the elderly lady or be drawn to her in Asha Daan. There was no one to question Farzana's noticing or non-noticing the lady. Bringing her to Karjat was definitely way beyond the boundaries of her responsibilities since the unwritten rule within Shraddha to avoid bringing in medically critical destitutes within our facility, as we were a Psychiatric Center first, everything else later. Ultimately the elderly lady would have most probably breathed her last in Asha Daan, which was perfectly OK, given that Asha Daan was a Home for dying destitutes. But Farzana noticed the lady. Her soul collided with the lady's soul. And the trajectories of everyone involved post the collision, changed.

Reflecting in hindsight after the reunion was done and dusted with, there was no relation by blood between anyone

concerned, nor was the reunion put up anywhere on the social media by us, nor was it reported in the newspapers, nor was it put up for any gallantry award by anyone. It was reaching out, emotions to emotions, soul to soul, bonding at its eternal ethereal best.

If the elderly lady is alive today, then so be it, if she has passed away, then so be it... but from wherever she was, one could picture her reaching out, holding our faces in her wizened old hands and planting a benevolent kiss on our foreheads and placing her hands over our heads, blessing us. It was just a picture in our minds, an imaginary picture, perhaps a conjured up one at that.

Life may pass by, years may pass by, none of us may remain, but the imaginary, perhaps conjured up picture of that elderly 80 something gaunt, marasmic, frail, emaciated lady planting that benevolent kiss on our foreheads and placing her hands over our heads, blessing us, would endure and remain. Would endure and remain.

And that imaginary, perhaps conjured up picture is adequate for all of us at Shraddha to sustain the travails and the distance of life's journey borne.

The Final Ode to a Roadside Schizophrenic

They were not really, in the truest sense of the word, master and pet. Far from it.

He was a vagabond, given up on the responsibilities of life (or perhaps the responsibilities of life had given up on him) and leading his schizophrenic existence on the pavements of non-existence. Hair tousled, unkempt, unwashed since days (or was it months?), his clothes had that peculiar body odour stink which comes out of months of decadence. His was a frugal life. If you could really call it a life. To not a single soul would it have mattered, whether he was alive or dead. He existed because, well, he existed. He had never thought in terms of his own existentialism. Never truly considered the reasons for it.

The pup was a stray. Or so it would seem, given the fact that no one ever really claimed him, and he was left to his own space in the middle of the God forsaken road which could make no claim to be anywhere specific. Like the quintessential stray, he was only that good, as to be occasionally fondled and played with. No one wanted to take him in to their house, though he had never ever displayed the innate assumed ferocity associated with strays. His seemed the destiny of a stray. The pup had not exactly taken a liking to the vagabond schizophrenic man, but it seemed more a case of non-existentialism meeting non-existentialism. A kind of “likes attract” kind of a relationship. The man never offered the dog a biscuit or any of the offerings which passersby would occasionally leave behind next to him (the passersby often scooting off after the leaving, lest he became cantankerous or belligerent, as was the general belief held in lay society about the mentally unhinged). In fact, the man never really called out proactively for the dog, (as was the norm with other inhabitants of society on sighting the dog),

and vice versa the man never shooed it away. Neither the dog nor the man knew each other's name. A precariously juxtaposed non-existence. The only one idiosyncrasy they shared was that when the man went for his morning ablutions into a nearby on-the-edge of the roads tree-canopied area, the dog would follow. They would both cross the road, separated by some distance, a distance large enough for the common man to assume that they were two separate identities, and not the master and the pet. And as mentioned earlier, they were never truly master and pet. Far from it.

The sun was used to shining, it was all that it had been doing since the day it was born. It shone bright and strong that day. It was the King within its own Kingdom, nothing existed (or so it seemed) to reduce its might and glory. Till the eye could see and far beyond, all light was the benefaction of this condescending sun. A fiefdom, stretching endlessly, unbreachable. The moon had always been more timid in its demeanor and functioning. It would come out only when the sun was through its sojourn, howsoever long or short that be, or almost definitely at the fag end of it, knowing fully well that the light that it apparently emitted was not truly its own. The common man may not be aware and abreast of the scientific truths, but the moon was not so dimwitted as to not understand the nuances of his own existence. The sun's reflected light was the moon's calling card. And when the moon preened around, the common man often conceptualized poetry on this calling card of his. Had the sun not been around, no one would have ever acknowledged the moon. A dependent existence, if ever there was one.

The kid had just been learning how to drive his father's car. A fortnight in, and he was good enough to hit the road (or at least so he thought). On the sly, when his parents were asleep (after their small rounds of Ballentine whisky), he would slink the keys from atop the dressing table & leave early in the morning,

when the traffic had not yet picked up. He would get a chance then to press the throttle and kind of like the feel of the breeze in his pony-length hair. His father possessed an Audi, which purred like a kitten, when pushed to the run.

No one expected anything to happen. Neither the man, nor the dog, not the sun, nor the moon, and definitely not the kid, behind the wheel of his dad's beauty of an Audi. It was supposed to be just another day. Bright light had been sparkling through the grains of the day, as if there was no tomorrow. The sun was never one not to thump its chest and go all guns blazing. Every morning it would do that, given the chance. The sun loved itself. The man took off and started walking across the road for his daily ablutions. The dog followed. It was funny how the dog managed to give up whatever he was doing and follow the man when he crossed the road. The master (was he one? - not really) never called out for the pet (never truly a pet, in the strict grammatical usage of the word). At a safe distance, the dog started off, and not as a pet would, wagging his tail. But still followed, uncannily, as on every day. Existence teetering on the brink of non-existence. The boy (the Audi specialist) had just kicked up a little speed & his was the only car on that brightly lit road.

It was the moon that caught everyone off-guard, not the least its own self. Not even realizing the enormity of its action, it came in the way of the sun. It had never happened like this, or so it seemed to the moon. The sun was supposed to shine on and on in the world, and the last thing the moon wished for was to come in its path of earthward directed light. But like a monstrous mistake, it did. The total solar eclipse set in. The once-in-a-millennium event, being that once-in-a-millennium kind of an event, was unfathomable by anyone around. The day darkened within seconds to become grey, changing ever so fast to black, that everyone was taken aback and froze in slow, almost non-existential motion. Only the frenzied flutter and

crowding of the diurnally disturbed birds rose to a crescendo and the bats and the owls raised hell, having been untimely disrupted in their circadian rhythm siesta. The kid (driving his father's beauty of an Audi) had only just given the accelerator the much-needed push, and the car had only just literally jumped like a panther in majestic chase of the deer, that the darkness set in. The kid had never heard of a solar eclipse, (leave alone seen one). His life was games on his mobile, frenzied kissing of his girlfriend in the corners of the garden, and everything else other than academic science. The kid panicked, braked, pushed the throttle, braked, and finally pushed the throttle in the ultimate of knee-jerk reactions, not even knowing he was on a road in the middle of a just-woken up (though after the darkness of the eclipse, it looked like it had slept off) city. The Audi swerved, screeching, an animal part-loose, partly being reined in.

The man had actually almost reached the distant edge of the road, when he barely swerved and sensed the Audi through the corners of his decrepit schizophrenic, albeit alert eyes in the darkness. The boy had not managed to put the headlights of his Audi on, the thought never having entered his numbed brain. But the man saw the car hurtling through that empty street, the distance fast reducing. And he thought of the dog. Why did he spontaneously, almost autochthonously, think of the dog, he was not sure, but he did end up thinking of the dog. Perhaps it was an alignment of the forces of loneliness, but the dog became the end point of his non-existential existence. It seemed pretty sure that the car would miss him, but he was not sure of the dog. With speed and reflexes that he did not know he possessed, he turned around and took two quick steps towards where he presumed in the solar-eclipse induced blindness the dog would be.

The dog, being providentially and naturally gifted with animal hearing instincts, had heard the Audi, even before the man had.

And being a stray, was well versed with passing vehicles, of all shapes and sizes. He knew how to dodge them and never really panicked. He was thinking of the man. How and why did he end up thinking of the man, he could not surmise. The man had never really petted him or anything of that sort, never ever in the smallest of gestures acknowledged the presence of the dog. But, instinctively, almost intuitively, the dog was thinking of the man. Perhaps it was an alignment of the forces of loneliness, but the man became the end point of his non-existential existence. He was a Labrador, and though just a pup, a big one at that. He knew that one good solid push from him would get the man out of the sphere of that brute Audi. He lunged through the air towards the man with a desperate all-out ferocity and alacrity which belied even his agile might.

The master (not really the master), the pet (not truly the pet) and the beauty of an Audi ended up meeting each other head on. The Audi bore down both the master and the pet like wooden matchsticks being plundered in the floods. No living creature could have withheld the force with which the Audi hurtled on its destructive blood-curling path. It was like a vengeful demon, out to demolish the last of its victims. Blood flew, as flesh separated from bone, as life parted from life, as non-existence parted from non-existence. The master and the pet became one. Never earlier had words been exchanged, nothing was spoken even now. Nothing had ever needed to be said. It was just so, in their relationship. Everything preordained, existence had always teetered on the brink of non-existence, in a Carl Jung ethereal subliminal synchronization.

The moon shrunk back from the path of the sun, almost ashamed of its act of coming in the way. The sun bore back on his fiefdom, not allowing the small mishap to reduce his grandeur. The Audi turned turtle, its beauty destroyed by the red of the blood of its prey. The boy trembling from his head right up to his last measly toe-nail, survived the holocaust.

Only the master & the pet remained in each other's arms, swathed in their pool of shared blood, pure, simple & true.

And atop the constrictively suffocating, overbearing, stabbing silence that ensued, came from the neighboring roadside shop the strands of an old Jagjit Singh song wafting through the air 'Koi ye kaise batay ki woh Tanhaa kyun hai..' Loosely translated it meant 'How does one express as to why one is so Lonely..!'

The Aftermath. It rained heavily that night, almost mercilessly, as if the Gods wanted to remove in the torrential floodwaters, the last shred of evidence of the holocaust which had occurred in the shadow of the dawn that morning. The mystical poet, in his long flowing robes, resembling the long-lost wandering Rabbi, sat pensively on the lonely sidewalk and wrote his unspoken-unheard-unnamed soliloquy requiem for both of them.

And the rain splattered down
that day,
and crashed down into the blood
and the gash,
rivulets of red slithered about,
and gushed into the gutters
in the bend,

but the city stood in silence,
not ready to acknowledge
the master & the pet,
buildings housing thousands,
no one to receive
the dead.

And the lightning slivered the darkness,
thunder renting the air,
wails sounding far away,
while the rain mingled with the red.

The winds pierced the city,
howling through the window panes,
darkness seethed the occupants,
no moon to reduce the ache,
the clouds gathered around,
enveloping everything,
the buildings, the streets, the by-lanes,

while the master & the pet
lay still,
gushing out only the red,

and the city stood in silence,
not ready to acknowledge the dead.

The gloom compounded further,
visibility reduced to nothingness,
the downpour now with a vengeance,
each house steeped and drenched,
the thunder and the lightning a crescendo,
the occupants huddled and afraid,

while the master & the pet
withered further,
occasionally spurting out red.

The storm gathered momentum,
an eerie banshee scream piercing the air,
buildings trembled in the darkness,
the streets quaked and wept,
doom descended in sabbatical fury,
bringing destruction in its wake,

but the city stood silent,
no one to receive the dead,

and the master & the pet
crumpled in mortality,
occasionally spurting out red.

Acknowledgements

One does not know where to begin the acknowledgements and whether to truly acknowledge anyone. While this book may be my recitation of my personal journey, the truth is that the journey was never truly mine alone. It is a journey of a vast multitude of people, who believed in the cause of the wandering mentally ill. Who wished to ameliorate with all their might, the plight of the mentally afflicted downtrodden on the streets of India. Innumerable people, at times not even knowing one another, have stood shoulder to shoulder in this journey, and contributed as much as me, if not more. It is the tragedy of human social behavior all over the world that only one person is felicitated for the conjoint struggles of many. In this case, I was that chosen one, while the fact was to the contrary. Shraddha was never a singular entity, it was always plural. While me, my wife Dr Smitha Vatwani, my dear friends Dr Ghanshyam Bhimani, Daksesh Parikh, Ashok Mohanani, Dr Roopa Tekchandani and Gajendra Ganla formed the core group, Shraddha was more, much more. The whole superseding the sum of its parts.

Shraddha encompassed the giving of a whole bunch of Pune students, who upon reading an article about Shraddha in the Pune Sakal a good 30 years ago, sent Money Orders of Rupees 10 each and wished Shraddha the very best. Hand written words scribbled across pieces of paper, but with the power of the Gita and the Quran and the Bible in them.

Subhash Law from Pune saw the genesis of good work and contributed funds, when the work was just in its infancy & the Dahisar Project had not been conceptualized. He is no more, but his blessings are always with us. He is a part of Shraddha.

Shraddha was eternally at one with the innumerable artists from

all over India and abroad who donated their collective worth for the fund-raising art exhibition in 1993, from the proceeds of which we collected money to purchase our first plot at Dahisar, a suburb of Mumbai. Manu Parekh, Anjolie Ela Menon, Bikash Bhattacharjee, Paritosh Sen, Ramesh Rao, Lalitha Lajmi, Krishen Khanna, J Swaminathan, SH Raza, Prafulla Mohanti were just a few of the big names who contributed. True giving can never be measured. Zoeb Kagalwalla went beyond the call of duty and offered his office space for the entire workings & preparations of the Jehangir Art Gallery Exhibition. Sunil Dutt, the gentleman's gentleman Member of Parliament, readily came down for the inauguration of the exhibition, and actually offered a chair for a visitor. Humility was never so humble. A visitor from London, one Mark Boston, who happened to visit the art exhibition at Jehangir Art Gallery got so enamored by the cause that he donated 200 pounds every month for innumerable years thence. Nani Palkhivala, the noted legal luminary wrote lovely inspirational words & contributed vide his Lotus Trust.

Shraddha belongs to Tarun Motta, Sanjiv Patel, Rambhai Ashar, Jaywantiben Mehta (the erstwhile Member of Parliament), and of course Anand Grover (the advocate from Lawyers Collective) who fought us through the Dahisar legality holocaust, never letting go of the Truth himself, and never allowing us to let go. Shraddha belongs to the Lions Club of Juhu Gulmohar which came forward with the construction costs of the Dahisar Project.

Supriya Sinha, Neha Mehta, Arvind Shenoi along with his wife Aarti stood by as the first social workers to be associated with Shraddha, when Shraddha was in its nascent stage and nobody believed that it would go anywhere.

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Shraddha belongs to the legendary social worker Baba Amte, who not just cajoled me into broadening my vision, but actually rang me up every fortnightly from Anandwan (yes, the Baba Amte actually proactively rang me up) and asked me in his deep guttural voice 'Bharat, where has the project reached?' I remember on one particular day I had got so flustered and frustrated with his calls, that I told my wife that the old man has got nothing better to do than hound me on the phone and pester me with the progress of the project, when for the life of me, I had not even come across a plot for the project. But Baba Amte persisted. Perhaps he saw in me that spark which no one had ever seen in me, not even myself. Shraddha is encompassed by him and his giving. Baba's quote from his biography 'I have always been drawn to this fellowship of pain. I think He created pain, because without it there would be no tenderness. It is very easy for a man to love God, but it is difficult for him to follow the commandment – love thy neighbor. The herd doesn't wait for the wounded deer. Therefore, someone else must help' became the cornerstone of my personal existence. Baba's son Prakash Amte brought in his humbleness and humility to our endeavors and our project. He taught us the values of a nose-to-the-grind approach and steeled our faith in the innate goodness of our work. Shraddha belongs to them.

Shraddha belongs to Russi Lala, (the biographer of Shri JRD Tata) that genteel soul with whom I had the good fortune of having many an intellectual conversation with and who one day apart from gifting me all his personal ties in his cupboard, casually asked me the correct spelling of our NGO, to ultimately bequeath Rupees 15 Lacs in his Will for Shraddha.

Shraddha is encompassed by the words of Rotarians Ajay Parekh (of Pidilite fame), Bhavin Kothari & Suresh Rajani who upon visiting the Karjat Center came up with the words that 'Usually the catalogue of any NGO is far better than the actual visit to the project, it is in Shraddha that we see a project far

outstripping the catalogue' and then they along with the Rotary Club of Mumbai Queens Necklace embraced the project.

Shraddha is engulfed by the heartfelt goodwill of Dashrath Mahadevia, who visited the Karjat Center as a Trustee of Babulnath Mandir Charities, and ended up donating not just from Babulnath Mandir Charities but also from his own personal family Trust, so visibly moved was he by the project.

Shraddha is in the faith of my fellow-brethren medical fraternity of Borivli, Rajiv Kuwadekar (a dear, dear friend who is no more), Kirit Mehta, Bharat Pandya, Raju Kudtarkar, Bharat Shah (another dear friend who is no more), Sumati Doshi, Rajesh Shah tided us over the medical emergencies. Sanjay Shah & Mahesh Thakkar of Mulund and Rashmin Cholera of DY Patil Hospital, Nerul did their all once the Karjat Center was operational.

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Desai of Karad in Maharashtra heard about Shraddha from Prakash Amte, when Prakash had come down to Karad to be felicitated in a function. Dattatraya traced out Shraddha and has been donating every year since. At one point, Shraddha even toyed with the idea of setting up an ancillary center at Karad, financed by Dattatraya. Padma Raghunathan from Chennai has been donating over the years. Neither has she met me or visited Karjat. An elderly gentleman, one Vijay Dandekar from Pune visited Karjat along with his wife just once. And they moved on to become our regular donors. While we have never met till date, Vijay Dandekar wants me to be the Guest of Honor at his 80th birthday celebrations in Pune this October. Sarpreet Singh Chadda, who was staying in the same building as me when I was a kid, is donating from Delhi. Simple down-to-earth people, donating their Saatvik worth.

Annika Strauss of Germany not just stayed over at the Center for a few months, she even wrote a book on Shraddha in her native German language to increase awareness about mental illness. She introduced us to Akshay Bapat who took the onus of responsibility to make revised films on Shraddha to give a visual depiction of the magnitude of the work undertaken.

Rasik Hulsogi, a person who had accompanied a private patient to my clinic, was so taken up by hearing about the work our NGO was undertaking, that on his own, without even me knowing about it, he pitched our cause to one Sheru Hosi Mistry from Rustom Baug, a Parsi lady who had been searching high and low for a project involving the mentally ill. She found it in Shraddha and gave a bulk of her life savings to it, dedicating two of the units in the Karjat Center for which she came forward with the construction costs for, to her departed parents. She chose Emily Dickinson's poignant searing poem to be adorned in marble at the unit entrance.

Shraddha belongs to Nergesh Khurshedji Dady Charitable

Trust, Mehran Edulji Billimoria Trust, Amrut Vasudev Trust and the Ness Wadia Foundation, entities whose Trustees we had never met and who had never visited the Karjat Center, but who were still so convinced by the innate truthfulness in our work that they have supported us time and again, unflinchingly. Neither back then, nor now, have I ever met anyone in HDFC, but HDFC stood by us for a few solid years. Shraddha belongs to their Shraddha in us.

Arjun Rao, the head-honcho at Valuelabs at Hyderabad, saw a mentally ill destitute on the streets on Hyderabad. So moved was he by the man's plight that he moved his office into tracing us out. I cajoled his man Krishna Reddy to allow us to pick up not just this one, but all the destitutes that we could sight on the streets of Hyderabad, and to let our ambulance take back a full load of destitutes. Arjun Rao agreed and pitched in with the costing of all the mentally ill destitutes picked up by our ambulance team. Since then, a good ten years to date, Valuelabs and Arjun Rao have been with Shraddha through thick and thin. I remember in one particular six-monthly newsletter a few years ago, I had sounded very pessimistic on the financial load front. Donations had dwindled. Arjun immediately got back to me and asked me as to whether we wanted him to increase his monthly contribution. These are shoulder to shoulder moments. Redeeming one's faith in the goodness of mankind.

Prem Dariyanani has earmarked a plot at Kanephata near Pune to donate to our Trust. And this when I beseeched him to not do the same, as we are running out of steam to handle the workload. He countered me with an emotional pitch to leave it to the Gods above to provide the steam. The plot he was giving to no one else other than Shraddha.

Sandip Jariwala from the US heard about us, flew down to visit the Karjat Center and has been donating since. He lost his daughter subsequently to cancer, and while he did take up the

cause of the cancer-afflicted, he has not let go his commitment to Shraddha. Martin Pinto has been donating for the past many years from Bahrain.

Shrutika Kotkunde, a psychiatrist, flew down from abroad to donate her worth. Later on, when she settled down in Chiplun in Maharashtra, she drew inspiration from Shraddha to work for the mentally ill underprivileged in her district.

Lijo Chacko of Bangluru, whom I had met in the US, spent a full day in our Karjat Center when he happened to come down to Mumbai. So blown away was he by the work that he wrote a graphically detailed letter to his classmate at Aker Powergas Pvt Ltd. They pitched in with a couple of ambulances.

Deepak Prasad, the General Manager of GIC-Re, happened to read about Shraddha in a newspaper incidentally, while on travel somewhere. The article mentioned about my having received the Award and gave an in-depth analysis of the work of Shraddha. He immediately contacted the CSR team of GIC-Re and set into motion a funding for the treatment, right through up to their reunions, of 1200 wandering mentally ill destitutes. Time was short as the deadline for the applications for the Financial Year was approaching, but he helped us fast-track it. Shraddha and he had won each other over, and were literally on the same empathetic wavelength.

Smt Maneka Gandhi, while she was the Union Minister for Women & Child Development, penned 'Well done! I wish we had more people like you in India. Best Wishes' when Shraddha had not yet received any international accolades or recognition. She wrote in her emotional support time and again. It was giving from the heart to a cause, when none of us knew her or had even met her ever. Finally, she chipped in with a letter authorizing Shraddha to interact with all the Government Institutions dealing with the mentally ill, and to help out in the

rehabilitation of their recovered inmates.

Dr Sarada Menon, the Padma Shri ex-Director of Institute of Mental Health (IMH), Chennai, was over the moon when I received the Award. And after innumerable years of not having visited the IMH and her retirement, she made it a point, with her frail health et al, to attend the felicitation program held for me in their campus, and hugging me, blessed me no end. It was literally like her own self receiving the Award, which I too honestly felt it was.

Dr Shubha Thatte, my Professor from GS Medical College, came down to Karjat and after dissecting the project functioning in detail, gave me the much-needed morale booster pep-talk claiming that every penny spent on the project was worth it. This when everyone was breathing down my neck, making it out that I was going overboard with the expenses and should consider reduction of staff.

Dr Paresh Lakdawala, the genteel guide whose first M.D Psychiatry student I was blessed to be, held my finger and guided me through my thesis topic, which Carl Jungian style, was none other than schizopphrenia. He passed away only recently, but just before that, he made it a point to meet me and give a donation for our cause. That, was an eternal benefaction.

Shubhalaxmi Khona, my school class-teacher, who had stood by me during the tumultuous days of grief at having prematurely lost my father, came to Karjat and brought along and personally supervised the plantation of a dozen saplings, which have bloomed today into definitive tall trees. The seeds of blessed love flower through the dust, the storm & the maze.

Gautam Nayak and Suresh Agaskar of CNK have been sheet anchors in our journey over the years, apart from their professional discharge of duties in the auditing of our accounts.

Due thanks to the powers-that-be wanting to abide by the letter rather than by the spirit, the Licensing of the Shraddha Karjat Center was kept in abeyance & limbo from 2006 through 2010. It was Dr. Sanjay Kumawat who understood the spirit of the matter and streamlined the legalities involved. Upon his visit to the Karjat Center as a part of the State Mental Health Authority team, he remarked that Shraddha was not a rehabilitation center for the mentally ill, it was a 'Heaven' for them. Touching emotional endorsement, straight from the heart.

Dr Anand Nadkarni, a renowned psychiatrist & his AVAHAN team came forward voluntarily and proactively to make a brilliant documentary on Shraddha titling it 'Faith beyond Fear'. Shraddha was obligated, eternally.

Gangadhar Vinode has not just broken the shackles of the stigma of psychiatry by disclosing to all and sundry that he was an ex-recovered roadside patient picked up by Shraddha, but gone the distance in donating ambulances to both Shraddha and Mother Teresa Missionaries of Charity Center in Pune. He continues to pour his financial worth out, over the last innumerable years. I remember him having come for my daughter's wedding last year. Even then he made it a point to visit Shanti Daan and donate there. It was Shanti Daan, the Missionaries of Charity Center in Borivli which had originally picked him up from the roads a good 30 years ago. Shraddha had taken over his case from Shanti Daan. 30 years had passed by, the Shraddha still remains.

And to end, Ashok Chaugule, a dear friend of ours and a well-wisher of Shraddha passed away recently, succumbing to cancer. While he had donated some amount to Shraddha over the years, just the day before his demise, he called over his wife and told her that the one unaddressed grievance of his life was that he had not done enough for Shraddha. Saying this, he took off his gold finger ring, & instructed his wife to sell it & donate

the proceeds to Shraddha. Touching, heart-warming gesture, that. May his soul rest in peace... And it is this gesture, this Shraddha within him and within all of the innumerable others who have braved the current of the mentally afflicted on the streets of India, and stood resolute, which today, I humbly believe, deserves the applause.

The Alma Mater behind it All

For me, the ultimate of my Alma Maters was Grant Medical College. It was the college that shaped my thought processes. The college that shaped me.

There is no denying that my destined coup-de-grace was meeting Baba Amte in 2004. For only after that meeting with Baba Amte, that I, who had never truly entered a village or had ever been to a distant Karjat in my entire life, had suddenly initiated the setting up of a mammoth Rehabilitation Center for the wandering mentally ill in a remote Karjat village called Vengaoon. There is no denying that Baba Amte's inspirational - motivational skills had a lot, if not everything to do with it.

But I have always, always, wondered as to whether they would have had the same effect on a non-GMCite (GMCite was the way we, who had studied, nay, been nurtured in Grant Medical College, referred to ourselves).

Ultimately, ultimately, all these off-the-cuff, but classical GMC repertoire efforts (which I have mentioned earlier on), led to my receiving the Ramon Magsaysay Award in 2018. And if someone were to ask me as to whom would I give this credit to, I would definitely, definitely, definitely give it to my experiences in my Alma Mater, the one and only Grant Medical College. My being a GMCite had everything to do with this.

There is no stopping the exuberance and vision of a GMCite. I, who found Medicine downright tortuous, who had almost opted out of Medicine in First MBBS, had just barely scraped through Final MBBS, had crash-landed at being a General Practitioner Family Doctor, had flunked in my 1st attempt in my MD Psychiatry, but had still continued with the archetypical

spirit of my Alma Mater, the 'Chakarak-Chakarak' war-cry. For the uninitiated, Chakarak-Chakarak-Chak-Chak-Chak, Makarak-Makarak-Mak-Mak-Mak, Who are We.....GMCites, Who are We... GMCites....was the war-cry which rent the air every time we, the students of our college, won or got together as a group. It was the binding force of souls which had been brought together from different parts of India, belonged to different sects and class, but who had that one thing common which really mattered...they had Grant Medical College as their Alma Mater. Only a GMCite could even envisage this attitude towards life which I had....an attitude which allowed you (or rather geared you up) to take everything on your chin....and not falter, because finally you were a GMCite, and for a GMCite, there is no concept of either victory or defeat....it was all in an attitude....an attitude ascribed, proscribed, and inherited over generations by the alumni of Grant Medical College...the spirit of a GMCite.

Believe you me, as a psychiatrist, there is a psychological basis to this, there is a method in the madness, in the spirit of a GMCite... and this is perfectly reflected in the classic Dev Anand-Kishore Kumar-Majrooh Sultanpuri-SD Burman song of yore :

'Hum hain raahi pyaar ke, Humse kuchh na boliye,
Jo bhi pyaar see milaa, Hum usi ke ho liye....
Dard bhi humein kabool, chhaiyn bhi humein kabool,
Humne har tarah ke phool, Haar mein piro liye...

Meaning :

'I am a traveler on the roads of love, don't tell me anything,
Whosoever met me with love, I belonged to him/her,
I am ready to bear pain, I am ready to bear peace,
I have sewn all kinds of flowers in the making of the garland....

As I have mentioned earlier in the jottings of my journey, I had found medical academics very, very difficult. I still wake up with cold sweat and the heart all a-flutter when I think about those days. Anyways, I had cleared all my Med Exams, but when I say clear, I mean just about. I had been a whisker away from that capital 'F' on my answer paper or on the declared results on the board, which denoted failure. Those were the days of high religiosity and a habit was initiated (which has persisted till date), literally before every Med Exam, of going to St Michael's Church at Mahim, followed by a Gurudwara Guru Nanak darshan (visit) at Dadar, then a Ganpati Siddhi Vinayak dekkho at Prabhadevi and with the final bow at the Haji Ali Dargah (Mosque). One never knew which of the Gods did respond, but someone did, and I had got through MBBS.

What did GMC have to do with what I achieved later? GMC taught me that doing well was not the most important thing in life. Emotional friendships, formed over many years, were better at sustaining the seeds of life, rather than success. No one questioned in GMC about my rank, no one taunted me if I was down, no one made me feel that I was in a competitive rat-race. In psychiatric parlance, no one played that 'I am OK-You are not OK' transactional analysis game with me. No one gave me a complex. It was all about emotions. Invariably I was the greatest guy on earth, merely because I was a fellow GMCite. The amount of psychic energy I saved in attempting to stave off perceived ignominy and wasting my last ounce of brain in boosting my ego, I could channelize into greater productivity and emotional catharsis in my work.

And finally, I, my wife Smitha Vatwani nee Ganla, (a Gold-Medalist psychiatrist from Sion LTMC, no less) and Ghanshyam Bhimani set up Shraddha Rehabilitation Foundation.

It is my firm belief that not just me, at heart all GMCites are

true givers. The Alma Mater did that to you. It inculcated in you the habit of giving, without any outwardly obvious reasons, giving for the sake of giving. A case in point was one Rajan Garg, a year senior to me, who put in massive personal efforts into my academics in the last year of my MBBS Degree. It was not that he was my bosom pal. We were colleagues (and soulmates by default) in the same college, and just that. But he went out of his way. It resulted in me scraping through Medicine subject in my Final MBBS. Had Rajan Garg not been around, perhaps I would have never completed my academics, nor become a doctor. Rajan is no more, but wherever he is in his heaven, he would know how far his efforts have taken me.

Why did Ghanshyam Bhimani do what he did? Why did he persuade me to go for the vacancy in Diploma in Psychiatry seat available in GMC and smoothen out the attendance issues at the Psychiatry Departmental level? There was nothing in it for him. That was the GMCite in him taking over, reaching out, and persuading me to take that small step. That was the Giver within all of us GMCites, with fellow-camaraderie for all brethren GMCites.

Fellow GMCites, true to their innate GMC spirit, pitched in wholeheartedly. Shraddha was in the faith of my classmates Anju Kagal, Arun Gadre, Bharat Khandwala, Bharat Shah, Fatema Poonawala, Hemant Kotwal, Milind Shirgaonkar, Mudassir Khwaja, Nitin Pandit, Rajan Bhonsle, Rashmikanth Shah, Rohini Badwe, Sanjay Dalal, Sanjay Vaidya, Shabbir Susnerwala, Shambhu Gupta, Shivraj Desai, Sunil Otiv, Vivek Sheth, and seniors Dhanlaxmi Lalka, Bharat Gala, Vijay Vakharia, Vrajesh Udani, the senior Late Bharat Shah who cajoled me to go the distance.

The giving from the heart, from just about any GMCite that I met, continued unabated. Post the Award my classmates Arun Gadre, Rohini Badwe, Hemant Kotwal and Mudassir Khwaja

had 'special felicitations' for me on their home-turf purely to spread the word on mental illness and generate awareness. Rajan Bhonsle got a huge program organized in the very same Anatomy Hall of GMC where I had grown up. This was even before the Award.

Hemant Kotwal's felicitation event for me was such a massive hit in Nasik, that the Indian Medical Association (IMA) branch of Nasik felicitated me again in a separate function, which led to them getting so moved by the plight of the wandering mentally ill, that they have initiated setting up a similar Center in Nasik. The ripples of the true giving spirit of a GMCite spreading far and wide in society.

Innumerable of my fellow GMCites pitched in with donations.

While Sanjay Vaidya was already my go-to plastic surgeon medico for advice on all wounds and maggots-infestation in our patients, I remember meeting Sunil Otiv in Pune in an IMA meet where I was the Guest Speaker, literally 40 years after we had graduated. He immediately started pitching in with his opinion on the same, him also being a Plastic Surgeon. It was as if the 40 years had never passed. We were back exactly on the emotional note where we had left off.

I remember meeting up with Quresh Bandukwala at a class reunion of my elder brother, a couple of years ago. Both of them were also alumni of GMC. Their batch, though senior to me, had an impromptu felicitation of me, came up with spontaneous contributions, and made me feel on top of the world. Quresh was a psychiatrist settled in the USA. Almost 45 years had passed since we had last caught up. And again, it was not that we were bosom pals then. In fact, in all honesty, I did not even know that he had become a fellow-psychiatrist. But he immediately invited me over to the US and arranged a series of fund-raising events in Atlanta for the cause of the

wandering mentally-ill, which Shraddha represented. Not to mention, he came forward with a huge personal donation, to add to the coffers of Shraddha. This was the GMCite surfacing in him, speaking the lingo so embedded in all of us.

Ali Poonawala's dedication of his Cycling Event from Bangluru to Pune, to Shraddha, I have already written about before.

This could only happen when a medico had been through that gem, that mother of all parenting and evolving experiences, the one and only Grant Medical College, our common Alma Mater.

Tears well up in my eyes, even when I write this.

And my homage to my Alma Mater cannot be complete without mentioning my Professor in Psychiatry at GMC, Dr. Vasant Joshi, who taught me the value of being steadfast in your pursuit of a goal, without veering in any direction and/or giving in to too many opinions. 'Do what is closest to your heart, Bharat, and do what comes naturally to you. Be true in your passion and keep chipping away in your efforts'. Golden words.

When he moved on for his reserved place in the Heavens above, I had penned a poem as a requiem for his departed soul. Sharing the same with you.

**In Memoriam of My Guru, Dr. Vasant G Joshi,
Professor & Head, Department of Psychiatry, GMC**

Read out at his Prayer Meeting - - - -

And amidst the burning embers of the city,
I met him,
the gentle man,
with the gentle soul,
his gurgling laughter
encompassing his innocence,
his benevolent eyes looking on,
to reach out to me,
to touch me,
to bless me,
to be with me.

And whilst all around me churned,
the swirling crowds,
the stifling competition,
the bickering, the shouting,
the backstabbing,
he stood there,
the smile creasing his lips,
his words straighter than an arrow,
simplicity personified,
goaded me
to walk the straight path,
the true and the narrow.

And all along my journey,
when my will gave way,
he was there,
when my gait faltered,
he was there,

this gentle man,
with his gentle soul,
with God written all over him,
cajoling me on,
his hand never far from my hand,
his being never far from my being.

And today,
while he has moved on,
his thoughts still remain,
where his person is not there,
his persona still remains,
where his skin is not there,
his touch still remains,
where his lips are not there,
his words still remain,
where he is not there,
his memory still remains,
his advice still remains,
his guidance still remains,
his soul still remains.

With us, within us,
besides us, around us,
his soul still remains,
his soul still remains.

Loving, effable,
Encompassing, everlasting, ethereal
The one and only
Joshi Saab.

CHAPTER 27

More Acknowledgements

Others who are swimming with us in the river called Shraddha, in a quest for justice, fairness and non-discrimination for the wandering mentally ill, ploughing on towards a distant shore are.....

A J Mehta & Co LLP	A Shiva Subramaniam
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 Dr Himanshu Saxena (Late)
 Dream Business Ventures Pvt Ltd

Ekta Parksville Homes Pvt Ltd
 Ekta Shakti Developers
 Estate of Mr. Jehangir B Marshall

Fatema Salehbhai – USA
 Forum (Journalist)

G J Enterprises
 G. C. Exports
 Gajendra Ganla
 Ganesh Nene
 Ganga Yamuna Charitable Trust
 Gangji V Nisar
 Gaurang Bhatia
 Gayatri Rajan
 Geeta Kiran Shah
 Geetanjali (Journalist, Good Governance)
 Gel Engineering (I) Pvt Ltd
 Girish Narendra
 Glycen Binu, Bangluru
 Gopal Shetty, MP
 Gram Panchayat, Vengaoon, Karjat
 Gujarati Samaj (Gandhinagar)
 Gundecha Akshay Prakash

Hanamanth S Albal
 Hansraj Ramji Nisar
 Hari Tapes Pvt Ltd
 Harmony Charitable Trust
 Harshad Bhavsar
 Harsukh B Mehta Charitable Trust
 Hasmukh Damji Gada
 Hemendra B Shah
 Hilfswerk Fuer Ashadeep Association
 Hiranandani Keralite Association

Hirji Narayan Patel
Hiru M Jhangiani
Hitendra Haria
Hemant Thakare (Late)
Hosi Mistry

Ibrez Bandukwala – USA
IMACON 2019
Indian Medical Association, Pune
Indira Thakkar
Indu Sahoo
Inoue Jaena (Journalist)
Isha Kanhere

J B Karia & Sons
J P N Pharma Pvt Ltd
Jamnaben Karsan Devraj Chheda
Jatin Kothari
Javer
Jayanti Jethabhai Chheda
Jayashree Shastri
Jekin Chunilal Gala
Jignesh Mangukia
Jitendra Ruparelia
Joel Rupani
Jyothi Datta (Journalist)
Jyoti Shelar (Journalist)
Jyotsna Suryakant Shah

K K Telecom
Kamlesh Bhatia
Kanchana Design Studio
Kanojia (APMC, Vashi)
Karekar PSI
Kashyap D Mahadevia Charitable Trust
Kaushik Shah (Rotary)
Kavita Gul Tekchandani
Kedar Suresh Damle
Ketan Jani
Kishkinda A Divanji
Kishore Sunderji Soni
Krishna Conchem Products Pvt Ltd
Kusum Harsora

Labhshanker Jamnadas Vasu
Lakhsibhai Kheraj Chheda (Kandivali)
Lalchand Darak

Hirji Ramji Chheda
Hitesh Shivji Shah
HIV Aids Care & Research Foundation
Hoshang Irani

Ila Joshi
Indian Medical Association, Nasik
Indian Gratings Pvt Ltd
Indira Vakharia
Inglobe Exports
Intercode Solutions Pvt Ltd
Ishwar Satwani

J P Developers
Jagdish Bhojraj Nandu
Jaslok Hospital & Research Centre
Jatin Ramesh Diwan
Jayant Sanghvi (Rotary)
Jayashree Kulkarni
Jaydev Deepak Unadkat
Jigar Dholakia
Jinesh
Jivatram Hashmatrai Chandiramani
Joseph Crasto
Jyoti H Ghivalikar
Jyotsna Kanade

Kalpesh Unadkat
Kampani Charitable Trust
Kandivali Medical Association
Kanti Tripathi
Karm Ganga Pratishthan
Kaushalya Tusharendo
Kavita Dashratha Shelke
Kavita Gupta
Keki Dudhmal
Kirit Shah (ICA, USA)
Kishore Shetty
KMC College, Khopoli
Kunal Kumudchandra Shroff

Lakhamshi B Shah
Lakshmi Narayan Mahila Samiti
Lalita H Shah

Lalji Mehrotra Foundation
Lata R Kacholia
Latika Suman (Journalist)
Laxmiben Bharmal Chhadva
Leena Shanbhag
Lovely Shoess
Lions Club of Bombay Sarvoday Nagar

Lanka Satyanarayana
Latika Gulzarilal Sadana
Laxman Murthy
Laxmichand Charla
Lilavati & Maneklal Shah Charitable Trust
Lily Kudva

M B Mart
M T George
M. Veluswamy, Coimbatore
Madhav Deshmukh
Madhubala Patel – USA
Madhusudana Dama – USA
Mahavir Mens Wear
Mahendra G Shah
Mahesh R Joshi
Mahir Punit Ramnik Shah
Manasa Trust
Manav Charitable Trust
Manavseva Diagnostic Centre
Mani X Ray Clinic
Manilal Bhimsi Gada
Manisha Babulal Karsan Gada
Manoj Dress Corner
Mansi Share & Stock Advisors Pvt Ltd
Maru Xerox

M Ravindran
M V Samant Charitable Trust
Madan Krishna Kamat
Madhubala D Agrawal
Madhukanta J Parekh
Mahanand Surisavar Maharaj
Mahavir NX
Mahesh Mhatre (Journalist)
Mahesh Saney
Mamta S Gokarn
Manasi Mehendale (Journalist)
Manav Jyot Public Charitable Trust
Mangal Keshav Capital Ltd.
Maniben P Mehta
Manilal Jivraj Shah
Manju Dubey
Manoj Nihalani
Marianne Menezes (Journalist)
Matthew Reysio-Cruz (Journalist)

Matushree Ramuben Bhachubhai Bhimshi Rita Ch. Trust
Matushri Hirbai Javerbai Ramji Foundation

Matushree Zaverben Devji Sangoi
Matushri Jivitben Virji Surji Nisar
Matushri Laxmiben Dharamshi Gala

Matushree Diwaliben Malsi Nisar
Matushri Desariben Korsi Samant Nandu
Matushri Kesarben Virji Kanji Nisar
Mayfair Housing Pvt Ltd
Mayur Print N Pack
Mehmoodkhan M Pathan
Metro Laminates
Mihir Gogte
Milap Sarees

Mayur Jitkar (Journalist)
MCHI Trust
Mehran Edulji Billimoria Trust
Michelle Lobo
Milan Redkar
Milin Dattani

Millennium Herbal Care Ltd
Minaxi Kantilal Dedhia
Mirchandani Samtani Charitable Association

Minal Kalyanpur
Mishyle Adam

Mohan Lal Jain
Moolchand Gupta
Mrinal Phadnis
Mrudula P Shah
Mukesh Rupwate (Khopoli)
Munnabhai Marblewala

Mohnish Rajesh Penta
Mrigank Warriar (Journalist)
Mrudula Bhagwatlal Bhagat
Mukesh Parpiani (Journalist) (Late)
Mumtaz (Mafatlal Trust)
Murali K Menon (Journalist)

- Murali Koneru (Late)
 N M Fashion
 N. M. Sangoi & Associates
 Naman Jain
 Nandini B Naik
 Narendra Mistry (Anandwan)
 Naresh Mehta
 Naresh Shah
 National Institute of Bank Management (NIBM)
 Navin Bharmal Chhadva
 Navinchandra S Sangani
 Navpad Art
 Nazia Bandukwala – USA
 Neelam Singh
 Neptune Foundation
 Newtron Beverage Disp Sys Ind LLP
 Nikhil Mane
 Nilesh Jawahar Maru
 Nilesh Shah
 Niluben Pravin Boricha
 Nirnanjan V. Joshi
 Nirmal Harindran (Journalist)
 Nirmala Ferrao (Journalist)
 Nisha Ingrid Coutino Souza
 Nitesh Karsan Satra
 Nitin Patil (Disability Commissioner)
 Ohana Concept
 Om Enterprises
 ONGC

 P Jayagopal, Hyderabad
 P Sarkar
 P.A.H. Charitable Trust
 Pacific Graphics
 Pahuja (Michelle Boutique)
 Pankaj Keswani
 Parag Jain (Amalner)
 Paresch Navnitlal Bhagat
 PDPU (Gandhinagar)
 Phadnis (Journalist, Sakal)
 PM Shah Foundation
 Pooja Jindal (Dehradun)
 Poorbita Bagchi (Journalist)
 Popatlal Bhachubhai Nandu Ch. Trust
 Pradeep Gupta (Journalist)
 Prakash D Trivedi
 Prakash Gidwani

 Mythili
 N Sreejith (Journalist)
 Naliniben Z Mehta
 Namrata Gajendra Ganla
 Nanji Bhuralal Gala
 Naresh Harilal Nisar
 Naresh Nagindas Khandwala
 Nariman Jehangir Poonjiaji

 Navin Raysi Shah
 Navkar Infraprojects
 Nayan Ghose
 Neelam A Gupta
 Neptune Construction Phase III
 Neville Maneck Gyara
 Newzealand Gateway
 Nikunj Jhaveri (Rotary)
 Nilesh Sahita, Singapore
 Nilima Pathak (Journalist)
 Nimit Harilal Chheda
 Nirmal Gaurav Chopra
 Nirmal Shah WEBZ
 Nisha Hiranand Thani
 Nita Ramnik Gala
 Nitin Chandra
 Nyalkaran Charitable Trust
 Om Creation Pvt Ltd
 Om Prasuti Gruha
 Orbit Eye Care

 P K AnnaPatil Foundation
 P. V. Sumitra Devi
 Paaneri Exim Pvt. Ltd.
 Padamshi Kanji Shah
 Pandhi Charitable Trust
 Pankaj Vishwakarma
 Parag Karia (Arpan Foundation, USA)
 Parin
 Perin Davar Memorial Trust
 Piyush M Shah (Mulund)
 Pooja Bagkar
 Poorbita (Journalist)
 Popat Murji Boricha
 Prabhakar Pawar (Journalist)
 Pragati Fashions Pvt Ltd
 Prakash Estate
 Prakash K A

Prakash Masalia
 Prakash Vaidya (Police) (Late)
 Pramodrai P Mehta
 Prasad Bagawade
 Prashant Sarkar
 Praveen Kurkal
 Pravin H Dagha
 Pravin Satra
 Premi Khosla
 Prime Bond Industries
 Princy George
 Prithviraj Sunilrao Chavan
 Priyanka Desai (Journalist)
 Prof Pradeep (Ruia College)
 Pune Doctors Association
 Pushkar
 Pushpa N Dhambi
 Pusulury Venkata Sumithra Devi

Quaid Najmi (Journalist)

R K Lam
 R V Poredi
 Radha Kaliandas Daryanani Ch. Trust
 Rafique (Rotary)
 Rahul Chaglani
 Rahul, Rajiv & Sonu Maheshwary
 Rajan (Photographer)
 Rajat Rajgarhia
 Rajendra Thakur
 Rajesh Hanjibhai Gala
 Rajesh Mirchandani (Australia)
 Rajiben Vershi Gala
 Rajkumar Babani
 Rajnikant Pawali (Karjat)
 Rakesh Bhagat
 Ram Keswani
 Rambai H. Kamath
 Ramesh Bhagat
 Ramesh K Gala
 Ramesh Keshavji Chhadva
 Ramesh Shamdasani
 Ramnik Bhuralal Gala Huf
 Ramnikbhai Gala
 Ranjan Datar (Karjat)
 Rashmi Jagada - USA
 Rasiklal Padamsi Chhadva

Prakash Ramchandra Gogte
 Pramod Mathur
 Prantarati Bhanjan
 Prashant Gomane (Journalist)
 Pratik Pravin Maru
 Pravin Bhikhabhai Desai
 Pravin Premji Gada
 Praxie Lucy Lobo
 Premji Rana Sumbad
 Prime Colorex
 Prithpal Singh Kandhari
 Priti Tiwari (Karjat)
 Priyanka Jariwala Memorial Foundation
 Pujya Bhanji Hemraj Shah
 Purnima Milli
 Pushpa Gangji Boricha
 Pushpakumar Balwant Deo HUF

R L Jain Boarding
 Radha Construction Co.
 Rafia Salehbhai - USA
 Rahi Gaikwad (Journalist)
 Rahul Darekar
 Raj Gopalan
 Rajaramians 68-69 (Science)
 Rajen Shah (Rotary)
 Rajendra Vasant Surve
 Rajesh Jain
 Rajesh Tiwari
 Rajiv Deshpande
 Rajniben Madhavji Thakkar
 Rajnikumar Pandya (Journalist)
 Ram Gopaldas Keswani
 Ramaswamy C S (Coimbatore)
 Ramdev Construction
 Ramesh Bijlani
 Ramesh Kacholia
 Ramesh Ramrao Kulkarni
 Rameshbhai Soni (Kandivali)
 Ramnik Shivji Shah
 Rangeela Bros
 Rashmi Art
 Rashmi Surve
 Ratna Nidhi Charitable Trust

Ratna Shailja Jewellers
 Raziudin Moosajee – USA
 Relief From Cancer – USA
 Rikin Ketan Shah
 Rishi Khanna
 Rohinton Adi Madon
 Rohit Sardesai
 Roopa Devi Darak
 Rupesh Chanduhai Gheewala
 Rushabh Ramnik Gala
 Rutu Collection

Ravi Budhiraja (Rotary)
 Reliable Pen Makers
 Remsons Industries Ltd
 Rikki Ronie Developers
 Rita Shewakramani
 Rohit Dhansukh Mistry
 Ronak Shah
 Rruchita shah (Journalist)
 Rupsibhai Gada
 Rusi Shroff

S C Anandpara (HUF)
 S KrishnaKumar
 S S Bhagwat
 S.Y. Karlekar
 Sagar Jog
 Samiksha Aniket Amte
 Samit Ganla
 Sandeep Vilas Gaekwad
 Sanjay Jayant Kher
 Sanjay Kumar Jain
 Sanjay Raut (Journalist)
 Sanjiv Mehta (Rotary)
 Sarang Ganla
 Saroj Vasant Zarpakar
 Satish Vora (Rotary)
 Savitri Bharat Satra
 Sayali Ghivalkar

S K Oswal Polymers
 S L Shanth Kumar (Journalist)
 S. D. Mahod, Ex-Charity Commissioner
 Sachin Dubey
 Salgaonkar Dhananjay
 Samir Thakkar (Thane)
 Sanathan Vinchi
 Sandip S Porecha
 Sanjay Kaleunj
 Sanjay Mehta
 Sanjay Saran
 Sanjiv Vohra
 Sarmalkar G H
 Satish V Patel - USA
 Satpal Kaur
 Savla N Shah
 Shabia Walia

Shah Arvind Premchand Manav Rahat Trust

Shah Popat Karsan
 Shailesh Bhatia
 Shailesh Rajarshi
 Shakuntala Anant Sane
 Shamji Gaanji Dedhia
 Shantiben Premji Velji Nisar Trust
 Shantilal Bhikchand Kataria
 Sharad Raghunath Bhatwadkar
 Sharda K Desai
 Sharda Narendra Bapat
 Sharon Sausman
 Sheetal Khot (Journalist)
 Shiladitya Pandit (Journalist)
 Shobhadevi Satyanarayan Gupta
 Shree Jivdaya Mandal Goregaon (Mumbai)
 Shree Nandlal Devchand Sheth Charitable Trust
 Shree Nutan Trambo Visha Oswal Mitra Mandal

Shailesh (IPH, Thane)
 Shailesh Pahalwani
 Shakti Tex Coaters Pvt Ltd
 Shamdasani Foundation
 Shantaben Gaanji Shamji
 Shantilal Bachubhai Nishar
 Shantuben Dhiraj Savla
 Sharda Gajanan Rajarshi
 Sharda Milind Tambe
 Sharmila Kalgutkar (Journalist)
 Shashikala (Journalist)
 Sheetal Pawar (Journalist)
 Shivji Bachubhai Shah
 Shree Laxmi Malangnath

Shree Sadguru Wooden Interior Decorator	
Shree Vagad Jainam Charitable Trust	Shri Karia Visa Oswal Mitra Mandal
Shri Pemraj Monot Memorial Trust	Shrikant Nanavaty
Shri Matushri Monjiben Lalji Bechra Shah	Shrikant Samal, Pune
Shubha Shetty	Shubhalaxmi Khona
Shubhangi V Dandekar, Pune	Shyam Housecom Pvt Ltd
Siddharth Ceramics	Siddhesh Inamdar
Sister Lucy (Maher)	Smita Chablani
Smita Shailesh Savla	Sonal Hitesh Shah
Smt Pramilaben Manilal Gala Charitable Trust	
Smt S D Ladsariya Charitable Foundation	
Smt. Maniben Ramniklal Chhadva Charitable Trust	
Smt. Manjula Mahendra Sangoi Charitable Trust	
Smt. Pramilaben Manilal Gala Ch. Trust	Sony Plastic
Sonya Roy	Square Feet Real Estate
Srinivas Rao	St. Anne's High School
Steel Authority of India Ltd (SAIL)	Subhash Chandra Varshey
Sucheta Sahu	Suchitra Mahesh Joshi
Sudhakar Kadu (Anandwan)	Suhas Hirlekar
Suhas Shirsat	Sujata Bhatt
Sujata Ganla	Sujata Jain
Sujatha S	Sulakshana Aher
Sulsa Apparels	Sumaben Palan Bhojraj Charala
Suman Motta	Suman Rao
Sunderben Chandulal Shah	Suneeta Undapalli
Sunil Apte	Sunil Gondhali (Karjat)
Sunil Mehta – Rotary	Sunil Patel
Sunil Shastri	Sunita Sohrabji (Journalist)
Superb Traders	Surajba Charitable Trust
Surendra Mehta	Surendra Oza
Surendrakumar Jain	Suresh Acharya
Suresh Dani	Suresh Lad (MLA, Karjat)
Suresh Nair	Sushil Gupta
Sushil Path Lab (Mulund)	Sushila Prakash Dhamecha
Swastik Interiors	Synergetic Human Management Pvt Ltd
T N Raghunatha (Journalist)	Tabassum (Journalist)
Taibai A Gaikwad	Taraben Amrutlal Satra
Taraben Rasiklal Charitable Trust	Tarsadia Foundation - USA
Tata Investment Corporation Ltd	Tata Projects Pvt Ltd
Tejbai Shivji Shah	The Vacuum Forming Co Pvt Ltd
Titan Safety Vaults Pvt Ltd	Tiwari, Retd Asst Commissioner Police
Tom Alter (Late)	Toplake Commercial LLP
Toyo Engineering India Pvt.Ltd	Trambo 'Siddhi' Mahila Mandal
Trans Salgaonkar Project Management Services	
Tree of Life Foundation	Trend Setter Annex
Tusharendoo R Mistry	

U P Shenoi
Uday Chandra
Ujjwala Bagawade
Umiya Associates
Unique Stockbro Pvt Ltd
Usha Talwalkar

U Rajyalakshmi
Uday Chandra
Ujjwala Shinde
Ummed Kumar
Usha Naresh Khandwala

Vagad Paper Mart
Vaibhav Sawant (Karjat)
Vallal D – Bangluru
Vandana Deepak Yagnik
Vanessa Ellena Noronha
Vardhaman Medical Charitable Trust
Variety Trading Co
Vasanti Ashok Ankush
Veena Mistry
Velu Swamy
Vidyakar (Udvum Karangal)
Vijay Kaushik
Vijay Shah (Bhandup)
Vijayaben Sunderji Gala
Vimal Mishra (Journalist)
Vinod Bhimshi Shah
Vinod Tawde, MLA
Viraj Impex
Virji Gada
Vishal Shanbhag
Vivek Bhimanwar (IAS, Raigad CEO)
Voice Station
Vrushali Purandare (Journalist)

Vaibhav Ranjan
Vaibhav V Ranjgaonkar
Valuelabs Foundation
Vandana Kalra (Journalist)
Vanita Jayantilal Sanghavi
Vardhan Enterprises
Varsha Padamshi Shah
Vasantra V
Veetee Stationers
Vibhav Niren Parikh
Vijay Dandekar (Pune)
Vijay Mirchandani (USA)
Vijaya Birmole
Vijaylaxmi Khosla
Vinayak Timber Mart
Vinod Motwani, USA
Vipul Enterprises
Viral Enterprises Pvt Ltd
Visal Maa Bhakti Mandal, Thane
Visharia Kantilal Devshi
Vivek Mohanani
Volkart Foundation

Wadi Bunder Cotton Press Co
West Point Impex Pvt Ltd
Wise Invest Advisors Pvt Ltd

Weener Empire Plastics Ltd
White Wings INC Corporation
Wonderland Developers Pvt Ltd

Yash Art & Designer Dress Pvt Ltd.
Yogesh Ashar
Yojit Gosalia (Rotary)
Zarir Adajania (Rotary)
Zaverben Dhirajlal Bhuralal Gala
Zubin Rusi Sethna

Yes Madam
Yogesh Kumar

Zaver
Zoeb Kagalwalla

Despite this elaborate list, there must be definitely innumerable others whose names I have missed. Donors and well-wishers whose names may have faded in the recesses of my aging memory processes but their contribution is not insignificant and their absence from the above list is only testament to a human lapse on my part. Those innumerable others were, are and will always remain a part of Shraddha.

The Shraddha Team behind it All

All my life I have believed that India never got its freedom because of Mahatma Gandhi, Pandit Jawaharlal Nehru, Maulana Azad, Sardar Vallabhbhai Patel, Annie Besant or Gokhale or Lokmanya Tilak or Bhagat Singh alone. India got its freedom from the hundreds, thousands, lakhs of common citizens who believed in the cause of freedom and put their efforts and lives into that cause. Who dreamt of a morrow when India would be free of the shackles of bondage and captivity. Similarly, I am convinced that Shraddha has not got its recognition because of a handful of Trustees and well-wishers. It has achieved whatever it has, because of the burning desire within a whole bunch of doctors, social workers, nurses and ancillary staff who have given a bulk of their time, efforts and energy to a cause which has become enshrined upon their hearts and minds. Who dreamt of a morrow when India's wandering mentally ill would be free of the shackles of deprivation, neglect and discrimination. Who dreamt of a morrow when India's mentally afflicted would rise beyond the throes of their plight, to walk as one, shoulder to shoulder, with their remaining Indian brethren. As equals. To this Shraddha Team, past and present, does Shraddha truly belong.

Doctors

Dr Adil Quadri (Madhya Pradesh)	Dr Arnab Mishra (West Bengal)
Dr Ashwani Parihar (Chattisgarh)	Dr Chembeti M Rao (Andhra Pradesh)
Dr Laxmikant Shukla (Madhya Pradesh)	Dr Nilesh Mhatre (Maharashtra)
Dr Ram Kumar (Rajasthan)	Dr Srinivas More (Karnataka)
Dr. Uday Bhanu Singh (Bihar)	

Social Workers

Aakanksha Mishra (Uttar Pradesh)	Aarti Handel (Madhya Pradesh)
Abdul Azeez (Kerala)	Aditi Shejul (Maharashtra)
Ajay Ransure (Maharashtra)	Ajay Vaddi (Maharashtra)
Alaknanda Parab (Maharashtra)	Amit Kumar Das (Assam)

Aniruddha Kuwadekar (Maharashtra)	Anita Jadhav (Maharashtra)
Anjani Chaurasia (Uttar Pradesh)	Anoop KK (Kerala)
Ashok Chowdhary (Maharashtra)	Babar Basha (AP)
Balram Kenchnal (Telangana)	Bandana Ali (Punjab)
Basavaraj Chinnanavar (Karnataka)	Bikash Kumar Rajak (Bihar)
Bijoy (Kerala)	Charuta Gosavi (Maharashtra)
Chetan Diwan (Maharashtra)	Chetan Patil (Maharashtra)
Dattatray (Maharashtra)	Deena Nath Nishad (Uttar Pradesh)
Deepthi Krishnan (Kerala)	Denit Mathew (Madhya Pradesh)
Dhruv Badekar (Maharashtra)	Dilip Sutar (Maharashtra)
Dinesh Lohani (Madhya Pradesh)	Diptendu Datta (West Bengal)
Eryamma R (Karnataka)	Farzana Ansari (Bihar)
Himanshu Nath (Assam)	Irfan Malik (J&K)
Ismat Jahan (West Bengal)	Izhar Zaman (West Bengal)
Jhimli Chatterjee (West Bengal)	Jigar Jani (Gujarat)
Jinto Abraham (Kerala)	John Wesley (Andhra Pradesh)
Johnson (Kerala)	Joma Masti (Maharashtra)
Joseph Devnasan (Tamil Nadu)	Jossy Jose (Kerala)
Jyoti Raut (Maharashtra)	Jyotsna Nikalje (Maharashtra)
Kabita Tirkey (West Bengal)	Karthik (Tamil Nadu)
Kirti Abhang (Maharashtra)	Kishore Kumar (Andhra Pradesh)
Laxmipriya Bishoi (Odisha)	Leena Augustine (Kerala)
Madhan Nathan (Tamil Nadu)	Manjit Kour (Assam)
Manoranjana Mishra (Orissa)	Mansoor Rizvi (Uttar Pradesh)
Mohd Yousuf Pharas (Maharashtra)	Mohd. Akramul (Bihar)
Mukul Kumar (Uttar Pradesh)	N Sureshbabu (Tamil Nadu)
Namini Dornal (Maharashtra)	Namrata Bisht (Uttarakhand)
Narendra Gurram (Maharashtra)	Neela Shah (Gujarat)
Neeta Varma (Madhya Pradesh)	Nidhi Mehra (Uttarakhand)
Nitin Kumar (Uttar Pradesh)	Nitish Sharma (West Bengal)
Pankaj Panda (Odisha)	Poli Das (West Bengal)
Pooja Ubale (Maharashtra)	Praful Sali (Maharashtra)
Pramod Patil (Maharashtra)	Pratima Phadatare (Maharashtra)
Priya Shah (Gujarat)	Priyanka (Maharashtra)
Pulkit Jagerwal (Uttar Pradesh)	Purjeet Naidu (Maharashtra)
Rahul Jain (Maharashtra)	Rajiv Sinha (Bihar)
Rakesh Kumavat (Rajasthan)	Ramakant Doddi (Maharashtra)
Ramesh Mundhe (Maharashtra)	Ranjana Patil (Maharashtra)
Rashid Raza (Bihar)	Rashmi Uchil (Maharashtra)
Rehan Raza (Uttar Pradesh)	Ritu Verma (Madhya Pradesh)
Rubiya Sultan Chaudhari (W Bengal)	Sachin Mhase (Maharashtra)
Sadhana Gaikwad (Maharashtra)	Samadhan Palkar (Maharashtra)
Samapika Rautroy (Odisha)	Samar Basak (West Bengal)
Sangeeta Jamra (Madhya Pradesh)	Sanjeev Nayak (Odisha)
Santosh Nayak (Odisha)	Santanu Sarangi (Odisha)

Sarfaraz Ali (Chattisgarh)
Shahneer Akhtar (Bihar)
Shakeel Ahmad (Uttar Pradesh)
Shikha Maity (West Bengal)
Siddharth Sahu (Orissa)
Sikander Ali (Himachal Pradesh)
Siva Prakash (Tamil Nadu)
Soni Nishad (Uttar Pradesh)
Suchita Churi (Maharashtra)
Sunil Kumar Das (Odisha)
Swati Bhagwat (Maharashtra)
Taterao Sarwade (Maharashtra)
Vasant Kampali (Karnataka)
Vijay Bharmani (Maharashtra)
Vikram Shelar (Maharashtra)
Vishal Thakur (Maharashtra)
Waseem Ahmed (Bihar)

Nurses

Anita Misal
Asha Marade
Bhoolaxmi (Andhra Pradesh)
Chetana Nitamkar
Deepa Farat
Farhana Fakhruddin (Andhra Pradesh)
Kala D'souza
Late Aparna Masti
Madhuri Chaudhari
Manisha Bhagat
Poonam Patil
Prajakta Sonavane
Priya Vane
Sachin Ogale
Sallama Joseph
Sarang Barishi
Sonali Parde
Surekha Dike
Swamy (Andhra Pradesh)
Varsha Mesharam

Saroj Parmar (Rajasthan)
Shailesh Sharma (Uttar Pradesh)
Sheetal Mhatre (Maharashtra)
Shivani Mahajan (Maharashtra)
Sidhu K T (Andhra Pradesh)
Sinduri Guntupalli (Andhra Pradesh)
Smita Bhor (Maharashtra)
Stephen Jeshudas (Tamil Nadu)
Sulakshana Aher (Maharashtra)
Suresh Lukose (Kerala)
Swati Sable (Maharashtra)
Upasana Daryanani (Gujarat)
Vibhit Shah (Maharashtra)
Vijay Shah (Gujarat)
Vinay Kumar (Andhra Pradesh)
Vivek Narayan (Tamil Nadu)

Anushka Ingale
Bharati Bhase
Charulata Gawankar
Darshana Shelar
Dipti Deshmukh
Hema Nayak
Kalpana Gawli
Latha Raghavan
Maneesha Mohan
Minal Bansode
Pratika Randive
Pratima Sawant
Rekha Tiwari
S Pradeep Kumar (Andhra Pradesh)
Satish (Andhra Pradesh)
Shivani Gole
Supriya Paradkar
Surekha Rathie
Varija Salian

Ambulance Drivers

Abid Shaikh
Kamlesh Parmar
Narayan Khale

Ganesh Randive
Mukesh Patel
Nilesh Ghadge

Prashant Khade

Cooks

Manoj Prajapati (Rajasthan)

Tejaram Prajapati (Rajasthan)

Pathologists

Abid Khan

Ninad Shah

Pratik Jariwala

Ravindra Mane

Accountants

Asit Teraiya

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Supporting Staff

Abhayraj Mistri

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Jaideep Mehta

Jayesh Salvadi

Kashinath Tandel

Manaram Kumawat

Manoj Patil

Pushpa Dhumal

Rupesh Kadam

Sarita Deshmukh

Suresh Bachute

Vasant Wadekar

Difficulties Faced by the Shraddha Team

Difficulties faced - During Rescue

- Rescuing destitutes at the convenience of calling of the general public – restricting issues such as distance to be covered to reach the destitute, the innate wandering nature of the destitute making his location a constantly shifting one. The availability of Shraddha staff, Shraddha ambulance etc.
- Plenty of calls for rescuing mentally retarded, elderly geriatric & medically ill destitutes, for whom our Centre is not truly geared to cope with.
- Lack of public support during rescue, as at times the mentally ill destitute becomes aggressive / psychiatrically disturbed on the road.
- Rescuing destitutes from difficult, risky locations eg highways amongst speeding traffic, railway stations and railway tracks etc.

Difficulties faced - During Treatment

- The destitute goes through extremes of heat/ cold/ rain/ starvation/ sexual abuse/ Anemia/ Hypoproteinemia/ Kochs/ Enteric fever/ Sexually transmitted diseases / Seizures/ Grave body and scalp injuries & wounds/ Severe infection with Skin wounds infested with Maggots/ Fractures/ Impacted finger rings/ Massive injuries restricting us from administering appropriate treatment.

- Our Center does not have in its neighborhood good medical facilities, be it Government or in the Private sector. The doctors of different specialities are not available to allow us to have a holistic approach to all the illnesses concomitantly present in the freshly picked up destitute. The destitute has to be taken a minimum of 60 kms (approx. 40 miles) to avail decent facilities. Absence of good Physician/ Surgeon/ Gynaecologist/ Neurologist/ ICU in neighborhood. Complications such as heart attacks, malaria, typhoid, tuberculosis have to be shifted to faraway hospitals, resulting in loss of manpower and funds.
- Blood bank is not available in the vicinity. Lack of good hi-end Pathology laboratory/ Medical stores/ Xray / Sonography centres /CT or MRI Scan facility in neighborhood for emergency support.
- Because of no objective data being available, there is no background data available of duration of illness, presence/absence of epilepsy/ family history of mental illness/ history of prior episodes and treatment/ presence of concomitant medical/ neurological disease. Finally, the treatment approach becomes a sign - symptom based treatment approach. There is no known history/ validity of patient's history.
- Often the presence of co-morbid organicity (Dementia/ Paralysis/ Cerebrovascular episodes/ Epilepsy/ Borderline Intellectual functioning) adds to the difficulty in getting good improvement and clear family details and addresses.

- Often there are many language issues in communication, different dialects are impossible to comprehend, patient remains symptomatic and irrelevant for months. In case the destitute has negative symptoms of mental illness or is catatonic, it is very difficult to establish rapport. The reluctance or refusal to eat on the part of the destitute, the reluctance or refusal to take oral medicines, to allow fluid administration. The tendency towards violence because of inherent illness or lack of comprehension as to what is going on, is a stumbling block to treatment. The issues with food preferences and tastes because destitutes hail from different regional and cultural backgrounds can impede rapport development.
- Female destitutes picked up occasionally with a child, and we do not have a clue as to whether the child is of her husband or because of sexual exploitation on the roads. Recently we picked up a female destitute with two small children, with the female having severe intra-abdominal infection, consequently becoming critical, and having to be hospitalized many miles away in a private setup. Our female social workers did surrogate mothering of the two small children till their mother recovered.
- The presence of concomitant tobacco addiction (tobacco being easily available upon begging even to the mentally ill) can lead to withdrawal symptoms after admission to our Rehabilitation Facility.

Difficulties faced - During Reunions

- Tribal people (in particular female tribals) being uneducated & having poor general knowledge do not know anything beyond the name of their village. They do not know names of District, State to which they belong or even the nearest railway station. These tribals, even upon recovery, are very difficult to reunite.
- Apart from different States by themselves having different languages, there is presence of different dialects even within the same States of India. Interior tribal area dialects very difficult to comprehend.
- Difficulty in tracing out addresses when illiteracy within patients compounds the issue.
- Many villages and districts of India bearing the same name. A district by the name of Aurangabad is there in both Bihar & Maharashtra. Amaravati is there in three States of India - Telangana, Maharashtra & Karnataka.
- Transportation facilities are woefully inadequate in the interiors of rural India. Travel to remote interior villages, involving bus changes, crossing in boats, walking prolonged distances, hampers the reunions.
- The parent families shifting from villages to cities as migrant laborers, and once labor work gets completed, the parent family has moved on and has disappeared and subsequently have become untraceable.
- The recovered destitute throws a seizure or develops a medical complication during the journey such as fever/ diarrhoea/vomiting etc or accompanying social worker

himself/herself developing some medical contingency.

- The social workers having ground-zero difficulties in train ticket booking, having to stand for 24 hours prior in a train booking queue for a Tatkal availability, after which also sometimes the ticket is not obtained.
- There is lack of cooperation among passengers during journey once they become aware that some of their co-passengers were/are mentally ill.
- There is lack of safety & facilities in case of any emergency during travel.
- There is refusal on part of fellow passengers or officials for the usage of retiring/lodge rooms due to stigma.
- Recovered destitutes with a physical handicap/challenge carry with them their own set of problems often having to be dealt by the social worker hands-on.
- The social workers having to travel long distances – eg to Assam / Arunachal Pradesh.
- The social workers are stranded in remote locations with the destitutes, inaccessible because of lack of transport facilities, water logging because of torrential rains. The social workers have to traverse rivers in makeshift local boats in the interiors, where there is no other mode of transport. Social workers have to walk with the destitute for miles to tribal remote residential hamlets in forests having no transport connectivity.
- Entire reunion schedules are cancelled because of heavy rain/torrential flood/smog/fog due to pollution.

- The inherent nature and intensity of the schizophrenia illness is so fluctuating and varied from time to time, that the most cooperative docile recovered destitute can disappear and get off the train during the journey when the Social Worker may have gone to the toilet.
- The recoveries of the destitute being incomplete, so their address details and knowledge of their antecedents are also incomplete, hampering the tracing out of families & corresponding reunions.
- The non-acceptance by the relatives, more possible when the relatives traced out are distant relatives, with the near and dear relatives having already passed away.
- The chances of non-acceptance & reluctance to accept the recovered destitute are one in ten.

Our Social Workers going through some unusual difficult times at a personal level –

- A Social Worker (Dhruv Badekar) was kept house bound and treated roughly for hours by the relatives of a female recovered destitute until the credentials of Shraddha were established.
- A Social Worker (Ritu Verma) while escorting a female destitute from Apna Ghar NGO in Delhi to our Karjat Center was questioned by Railway Police & a Women's Rights Group who suspected her of kidnapping the female. Verification from Apna Ghar authorities and Karjat Police resulted in her being let off.
- Our team, led by senior female Social Worker Ismat

Jahan, while reuniting recovered destitutes, was apprehended by the West Bengal officials for alleged female human trafficking. Again, verification from the Karjat Police resulted in them being let off.

- The train in which our Social Worker (Farzana Ansari) was travelling with a recovered female patient went off the tracks. After overcoming trauma of the experience, they had to walk for miles before reaching vehicle help.
- Our ambulance team was stopped by locals a mere 50 kms away from our Karjat center, because they saw our team rescuing a destitute and suspected that we were involved in human trafficking for organ transplant. Huge crowds had gathered. Our senior Social Worker (Chetan Diwan) handled the matter with aplomb and finally the matter was sorted out after phone calls to the local Karjat Police, who verified our credentials.

Difficulties faced - After Reunions

- Supervision & sending of medicines in home towns.
- Even if a relative wants to continue treatment, medicines are not easily available in medical shops. As per current regulations, without valid prescriptions, one cannot get these medicines. An actual gap exists between relative communicating to Shraddha about medicine requirements & their hardcore couriering.
- Lack of money to purchase the medicines.
- Often relatives have a laidback attitude because of cultural norms & stops medicines with or without stock

of medicines getting over. Patient may remain asymptomatic without medication for weeks & relative believes that God or Fate has been kind. Finally, one day patient relapses & may again disappear from home.

- Families having refusal/ reluctance to accept recovered female destitutes because of social ostracization and because in the cultural milieu they will not get married (if unmarried) or if married, the ostracization that they may have been sexually exploited. Also, the maternal family believing that the responsibility of the married patient is with her husband's family and vice versa. Sometimes husbands get remarried in interim period.
- Sometimes the caregivers themselves are too elderly and cannot supervise medication and after-care. Or the parents/ immediate relatives have expired.
- Females leaving their homes under the influence of mental illness with a child and losing the child along the way. Upon recovery, huge grief at realizing the blunder.
- The children often mocked upon by their peer group either post or prior to the reunion that their mother/ father is mental and crazy.

Other Challenges faced by Shraddha as an NGO

- Local challenges on site faced by both staff and inmates. Electricity Power breaks. Extreme weather. Patients developing heat stroke or throwing a seizure. Torrential rains at times crippling functioning.

- Poor internet connectivity, especially in the rains.
- Presence of Snakes and Scorpions, occasionally leading to bites and corresponding emergency management.
- Boring water being used for consumption, sometimes leading to waterborne diseases.
- Lack of trained manpower. Our Karjat Rehabilitation Centre being in the interiors, staff is not ready to stay there. At the time of going to Press, Shraddha does not have an entry level Associate Residential Psychiatrist or a M.D Medicine Physician.
- Since the wandering mentally ill roadside destitute may belong to any part of India, it is important to have residential social workers speaking different languages. But getting them is not an easy task.
- Very few NGOs in actual existence in entire India dealing with the wandering mentally ill with whom networking can be possible.
- Getting community support for cause of mentally-ill.
- Financial constraints. Because of poor awareness, donors (individual, corporate or funding agencies) do not have sensitivity to plight of wandering mentally ill.
- Plenty of calls/emails from pan India for helping out the wandering mentally ill, many of whom we cannot reach out to.
- Load of wandering mentally-ill on streets is high in comparison to actual work being done by Shraddha.

Final Musings

In the final analysis, the journey was never one-sided. It was questionable and ultimately a moot issue, whether we contributed to the lives of the wandering mentally ill on the streets, or they contributed to our inner peace and solitude. Much more likely, it was a symbiotic existence.

Us at Shraddha and they on their roads.

And the Gods in between to bridge the gap and transform our respective lives.

Ending on poems which reflect our existentialism within one another...

Our metamorphosis because of them -

From without,
the endless tunnels of silence,
the claustrophobia of our existence,
from without,
the searing pain,
the throbbing of our own torment,
from without,
the tears & the gloom,
the descent into our own oblivion,

You,
reached out to us,
and like the spangled sparkle of a thousand stars,
cascading,
to dispel the darkness of the night,
changed the dimension of our lives,
changing forever,

Us...

Which echoed, reciprocated and reverberated in our hopes
& prayers for them -

Through shimmering pain,
through raging storms,
through sheets of agony,

shall you pass,

But in grief,
in despair,
in dejection,

Rest not, O Wandering One,
Rest not, O Weary Lonely One,

Rest not,

For the darkness heralds
the coming of the dawn.

For the darkness heralds
the coming of the dawn...

THANK YOU FOR BEING
A
PART OF THIS JOURNEY

The Modern - Day Gestalt of Urban Psychiatry

To the constitution of a human being's personality, ego and self-confidence, goes a lot of stability in the outer environment of that human being.

The moment a child is born, the first sign of life on the outside is the cry of the child. While the cry is considered as a reference that the child is healthy, it is a reflection of the separation anxiety of the child from the cocooning womb of the mother. The child is subsequently closeted, protected, buffered against all anxieties by the parents and the joint Indian family. The cries are attended to by everyone. The child is majorly the cynosure of eyes of all involved. Schooling involves less studies, more bonding, incessant chatter and the seeding of precocious dreams and fantasies. The child passes through childhood (which in a country like India lasts almost till he is 23-25 years old) totally supported, cushioned, buttressed, ensconced, with the incidence of the cries a bare minimum, if not totally zero. There is giving of psychological emotional strokes and receiving of the same.

By this time, the child has grown into a true adult, the innate maturity has developed, and the child somehow survives the rest of life on its own steam. And still continue to receive stable, positive emotional strokes. Starting from immediate family circles, going on to distant relatives, friends, the workplace, the society at large, our teachers, our mentors, our heroes, we continue to receive all the psychological strokes from just about everyone who really matter to our psyche as human beings, to make us believe that life was worth the living and that we had a special place under the sun.

There are cries along the journey, but nothing so severe that they could not be borne without professional psychiatric help.

This was the story of the archetypal Indian child perhaps 30-40 years ago.

The scenario has changed since then.

The child is no longer attended to the way he was before. The mother has transformed from housewife to working mother. Education has made the woman into an alternate competitive workforce. Work hours have stretched from the traditional 8-9 hours to 12 hours and beyond. Parenting per se has taken a massive hit, in terms of quality time. Instead of home, the child is in the creche for quite some time. Egos, both male and female, have inflated northward. Joint families have disintegrated. Separations, divorces, second marriages, single parenting are in. The school has metamorphosed from a playground to a battlefield. Every exam from kindergarten upwards is a warzone, every mark fought for. By the 8th Standard the child is put into classes which are planned to guide him through 4-5 solid years to get him that last mark which will take him past the goalpost to make him into a doctor/scientist/engineer, whatever. And if the child does get past the coveted graduation/post-graduation, the job markets are positively shrinking.

The rising population, urbanization & commuting have started taking their toll. Automation has made manpower redundant. A current article recently stated that if robotic cars come in, 1.4 billion drivers globally will be jobless. And so, life goes on. The migration of populations en bloc of entire strife-torn countries all over world contributing monumentally to the refugee influx has added to the stress all around. The human ego already fragile divides culture/ caste/ history & the geography of people into fierce likes & dislikes. People are killed on the smallest pretext, sometimes massacres happening across nations on perceived imaginary slights.

And every Dream that is ever dreamt for the future by the child, has a zillion anxieties woven into its present. And the nascent cries of the new born child have multiplied manifold. And the most vulnerable and fragile amongst the populace succumb to mental illness. A case of survival of the fittest. Those who are mentally sensitive, unfit, unwanted are out of the rat race.

Schizophrenia, depression, suicide & drug abuse are all on the up and up. WHO states that mental disorders account for 33.5% of all years lived with a Disability and estimates that by the year 2030 Depression will be the leading global disease burden and. People with Depression have a higher mortality risk of 1.5 compared to general population, belying the under-emphasis paid to these disorders at the national level. Suicides, which are also on the ascendancy, have hit a rate of 10.7 per 100000 population, with average 381 suicides reported daily in 2019.

Severe mental illness is associated with the highest rate of unemployment viz 90%. The mentally ill often become homeless or incarcerated in prisons, which only increases their marginalization and precariousness. There are gross violations of human rights of the mentally ill in India. Apart from being denied the right to work and the right to education, they are often physically & sexually abused. In India it is not uncommon to see them chained indefinitely, or beaten black and blue by bystanders.

In the ultimate final analysis, mental illness leads to a spiraling-whirlpool worsening of poverty and hinders economic development at the national level.

And with the rising insecurities of modern Indian times, the need for instant gratification having gone through the roof and with literally every man and woman desperately fending for oneself, the quintessential Tagore poem 'Where the mind is without fear...' has lost its emotional core and has turned on its head. Overt and covert anxiety and fear are all encompassing, omnipresent and in breathing distance. India stares at the demon of Mental Illness engulfing more and more lives into its many headed vestibule.

The Song of the
Unseen, Unheard, Unsaid
Schizophrenic
wandering aimlessly on the streets
in this beloved World of Ours

If I could keep the faith,
say a prayer,
hold aloft a candle,
make peace with myself,
if I could,
be a song to a tune,
be music to the flute,
make my cry be heard
by the Divine,
I would be.

But I could not,
come out,
of the fetters of my silence,
chained by the unknown,
mute,
wings tethered,
shackled to the ground,
the downpour of my tears,
mingling in the rain.

And I remained,
unheard,
castigated by my own fate,
a silent spectator
to my own nemesis,
my body unclaimed,
not even a whimper,
an unmarked grave..

BHARAT VATWANI

In few countries is the contrast between great wealth and extreme poverty as stark as in India. Of the latter, a popular image are its street people, dirty, disheveled, and famished, huddled on pavements, in train stations, bus stands, and public shrines. An estimated 400,000 of them are mentally ill, victimized not so much by poverty as by a problem society has not sufficiently understood and addressed: the problem of mental health. Stigmatized and feared, the response of many to these street persons is to pretend they do not exist.

One man chose not to pretend. Psychiatrist Bharat Vatwani was out dining in a restaurant with his wife Smitha, also a psychiatrist, when they were appalled at the sight of a thin, unkempt man drinking water from a street canal. Taking time to talk to the man, a mentally-afflicted college graduate, they decided to bring him to their clinic to be washed and treated. This show of empathy was not entirely surprising. Vatwani knew what poverty was like. Losing his father when he was only 12 years old forced him and his brothers to take odd jobs, like peddling books door-to-door. Struggling through school as a self-supporting student, Vatwani successfully completed his medical studies in psychiatry at Grant Medical College and at G.S. Medical College & Hospital, both in Mumbai.

After their encounter with the man who drank water from a canal, Dr. Vatwani and his wife started an informal operation of bringing mentally-ill street persons to their private clinic for treatment. This eventually led to the establishment of Shraddha Rehabilitation Foundation in 1988, aimed at rescuing mentally-ill persons living on the streets; providing free shelter, food, and psychiatric treatment; and reuniting them with their families.

Starting with a two-room tenement that could take only three people at a time, Shraddha drew public attention when they rescued and treated a street person who turned out to be a respected lecturer at a Mumbai art school, who had inexplicably disappeared. Learning about what the Vatanis had done, the school's faculty and students organized a major art exhibition that drew 141 participating artists in India and abroad, and successfully raised US\$22,357. Using this seed money, the Vatanis bought a piece of property in Mumbai for a 20-bed facility that they opened in 1997; the unexpected donation inspired them to further expand their work with the help of private donors, volunteer professionals, and social workers. In 2006, they moved to a bigger 120-patient facility in Karjat outside Mumbai, which had five buildings on a 6.5-acre land. By then, they had strengthened their three-phase therapeutic program, consisting of the rescue and treatment of mentally-ill street persons, reuniting patients with their families, and promoting awareness of mental health in communities.

Their rescue work has been aided by the police, social workers, and referrals. Shraddha's free custodial care and treatment ranges from personal hygiene, medical check-ups, psychiatric treatment, to appropriate medication—all done in the open, healing environment of the Karjat facility where patients can engage in simple farm activities and find solace in a multi-religious meditation center. The foundation tracks patients' families, arranges reunions, and uses such opportunities to spread a supportive and enlightened understanding of mental health among the families and their communities. In a one-of-a-kind mission that began in 1988, Vatwani and the foundation have by now rescued, treated, and reintegrated into their families and communities more than 7,000 of India's mentally-ill roadside destitute, with a remarkable reunion rate of 95%.

Vatwani's painstaking, humane undertaking has had to contend with numerous challenges. A deeply spiritual person, the good doctor is often beset by doubts whether he has done enough, given the magnitude of the mental health problem in his country. Notwithstanding these self-doubts, he remains confident in his faith that in the end, "Good work shall continue when there is inherent goodness in the work."

In electing Bharat Vatwani to receive the 2018 Ramon Magsaysay Award, the board of trustees recognizes his tremendous courage and healing compassion in embracing India's mentally-afflicted destitute, and his steadfast and magnanimous dedication to the work of restoring and affirming the human dignity of even the most ostracized in our midst.