

Case study — Karuna Trust

Standeers at the bus stand in the bustling heart of Mysore city were used to the sight of a middle-aged woman, a picture of wretchedness, pacing back and forth, muttering to herself, and hurling abuses at particularly everybody. Whilst most would sympathetically pass her by as a mentally disturbed soul, a few would taunt and jeer at her condition.



The plight of this hapless, mentally ill destitute became known to a city corporator, who visited the site and subsequently referred her to the **Transit care centre** at Chikkali, run by the **Karuna Trust**, Mysore.

Sujatha (name changed) proved quite a handful to the helpline team that was dispatched to fetch her. With the help of the public, the team managed to coax a howling Sujatha, spewing expletives, and flailing her limbs like one possessed, to accompany them. The staff at the centre admitted her and at

the outset, went about cleaning her and replacing her soiled and stinking garments.

After admission, Sujatha tried to escape on two occasions. A social worker counselled her into staying on until her condition improved. She responded positively to the psychiatric and psychological treatment that she received at the centre. Within six months, she was able to furnish the address of her son, Prasad, staying at Mandya.

A staff nurse and social worker visited her home in Mandya and informed Prasad of his mother's presence at the centre. "She was suffering from a mental illness; however, instead of undergoing treatment like we suggested, she ran away from home. We thought she was lost forever," recounts Prasad, with tears of joy.

Sujatha's condition has now improved vastly with appropriate treatment, and she helps in the kitchen at the centre, besides engaging herself with some vegetable gardening.

Under its **Mental Health Initiative**, falling under the broader ambit of 'Specialised Health Care Services', the Trust has been supporting the **Karuna Trust** from January 2007, towards its Manasa Project. The programme focuses on facilitating mental health care for the homeless mentally ill, through its transit care centre, mental health Helpline, and the upgradation of the Beggars Home in Mysore. It also integrates mental health care at 25 Primary Health Centres in Karnataka to provide community-based mental health services.



The goal of the transit care centre is to provide quality residential care to mentally ill homeless women, along with medical and psychological attention, besides rehabilitating treated women with their families and communities in an expedient manner. Approximately 165 homeless mentally ill persons will receive quality care over the three-year project period, of which approximately 80 persons would be reintegrated with their families.

During the same period, the mental health Helpline would result in the rescue of 300 persons, of which an estimated 150 mentally ill homeless persons would be rehabilitated. Skill development

activities are conducted at the Centre, thereby ensuring that the inmates develop the adequate capacity to perform basic chores and household activities. Qualified psychiatrists conduct weekly clinics.

The **Trust's Mental Health Initiative** partly focuses on developing approaches to cater to the needs of destitute mentally ill persons, besides early identification of disability amongst children. Along with **Karuna Trust**, the Trust is currently supporting six other organisations within its Mental Health Initiative. Grants to **ComDeall Trust, Bangalore, Rajasthan Mahila Kalyan Mandal (RMKM), Ajmer, and the Latika Roy Memorial Foundation (LRMF), Dehradun** focus on mental disability, whilst those to **The Banyan, Chennai, Ashadeep, Guwahati and Association for Health & Welfare in the Nilgiris (ASHWINI), Nilgiris**, focus on mental illness.

The portfolio currently supports Mental Disorder as a problem of growing expanse and severity, both globally as well as in the rural and urban settings within India. It is one of the top ten causes of disability worldwide, and is one of the main causes of socio-occupational dysfunction and financial drain.

About 5 per cent of India's population suffers from some form of minor mental or behavioural disorder, and 1 per cent of the total population is considered afflicted with a serious mental disorder requiring urgent care. Homelessness is another grave issue significantly interrelated with mental illness, and it is estimated that 25 per cent of the total major mental disorder cases are homeless.

It is in light of these grim figures that the **Karuna Trust's** efforts towards rehabilitating mentally ill individuals assumes importance, thus deserving the Trust's support.