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## **FROM THE PRINCIPAL'S DESK**

**Dr Suman V Jain**

**Principal, Smt M M P Shah Women's College of Arts and Commerce.**

It gives me great pleasure to write this note for Psychronicle. Being a student and teacher of psychology myself, I fully understand and appreciate the very important role of psychology, both in our personal lives as well as in society as a whole. Therefore, any collection of papers and research work in this field is not just an academic exercise but a very important social achievement too, since reading such articles could be insightful to all students and staff of our institute. In today's time, the rapidly occurring changes in society are having far reaching implications on the lives of our young students. The role of psychological research is, therefore, a very useful activity and journals such as Psychronicle play an important role in having this research information reach out to everyone. Our psychology department is one of the most innovative and research oriented departments of the college. A significant credit for this goes to the Head of Department, Mrs Archana Patki and In- charge, Mrs Varsha Samant, along with all the other staff members. My heartfelt gratitude to all of them for the wonderful work that they have been doing throughout the year and for bringing out this volume of Psychronicle. We look forward to greater achievements and accomplishments from this very special department. I wish the readers of this issue a very happy reading and learning experience.

## **MESSAGE FROM THE HEAD OF DEPARTMENT**

**Mrs Archana Patki,**

**Vice Principal,**

**Head of Department, Psychology.**

It's time again to pen a message for Psychonicle, our annual publication of the department and as always, it's a time of nostalgia. Looking back it was a satisfying and eventful year. Notable achievement which comes to mind is the initiation of Certificate course in 'Basic Counselling Skills and Psychometric Assessment'. The intensive and rigorous training program was always an essential part of the preparation for our budding Counselling Psychologists. This year it has been tweaked up and modified into a Certificate program for the benefit of the students.

The faculty and students geared up and performed well in all the curricular and co-curricular activities. The Mental Health Week was a resounding success in terms of its reach and extent. The target audience covered was college faculty, students, and community at large. We won the prize in skit on the theme "Say no to suicide" from the Masina Hospital.

The students also participated and won laurels in extracurricular activities at collegiate and inter collegiate level. We are proud of the achievements of our undergraduate students too. They won the third prize at Trishool- a paper presentation competition organised by Smt P N Doshi Women's College, Ghatkopar. The paper was titled 'Internet Addiction and Gender Differences'. This year the Post Graduate students have participated in Research Projects on a host of interesting topics and I am looking forward to seeing them published in referenced journals. Students and faculty have been actively participative in our extension activities like Life Skills Programme and skits for college students and Police Colony. All in all, our humble efforts have been fulfilling small steps. However, when we take a look around for a historical view, we realise these were the very turning points in the success of our department and our college.

Finally, I owe my gratitude to students, my associate co ordinator Mrs Varsha Samant, faculty members Mrs Anuja Chavan, Ms Jyoti Parekh, Ms Vaishnavi Verma and Counsellor Ms Reshma Murali for all their efforts in making it a memorable and fulfilling year. As always the Principal, Dr Suman Jain and members of the Management provided their unstinting support and valuable guidance to make it a year that it was.

# **REHABILITATION COUNSELLING**

**Mrs Archana Patki, Associate Professor**

**Ms Vaishnavi Verma, Assistant Professor**

Ever so often we have newspaper headlines screaming at us and news channels bearing breaking news of accidents, catastrophes, and epidemics, those unfortunate incidents where people lose their life or limbs. Where a life is lost, the coping needs to be done by relatives and friends, but where a person is left with a disability, the coping with the trauma is a herculean task to be undertaken by the individual himself. It requires Rehabilitation. Rehabilitation basically involves 'rebuilding life'. The four major aspects of life being

- Physical functioning
- Psychological functioning
- Social functioning
- Economical functioning

A rehabilitative counsellor would be of great help to persons who have to cope with loss of functioning due to any injury, illness or disease.

Rehabilitation counselling focusses on helping people who have disabilities achieve their personal, career and independent goals through a counselling process. Rehabilitation counselling is one of the most challenging fields for psychologists. It is a field where there would be a great need for committed and compassionate individuals. Rehabilitation counsellors are found in private practices, rehabilitation facilities, hospitals, universities, schools, government agencies, insurance companies, etc.

Rehabilitation is a treatment designed to facilitate the process of recovery from injury, illness or disease to as normal a condition as possible. It is restoration to normal or near normal capabilities after a disabling event. The purpose is to restore some or all capacities, help cope and compensate for deficits that cannot be reversed.

Some of the commonly seen problems among clients in need of Rehabilitation counselling are:

- Poor body image
- Lack of confidence
- Depression
- Anxiety
- Inappropriate self-concept
- Lack of motivation in all spheres of life
- Loss of control
- Problems of adjustment to disability
- Loss of independence- physical, psychological, economic

- Wanting to continue status quo for secondary gains
- Inability to assess the environment correctly
- Sudden change in family dynamics and relations
- Social rejection and isolation
- Decreased or lack of sexual activity
- Impaired social and vocational role

The Rehabilitation counsellor can help the clients with disabling conditions with the following adaptive tasks:

- i. Help the client deal with pain and incapacitation stress.
- ii. Help him/her deal with negative feelings.
- iii. Help him/her regain positive self-image and sense of competence.
- iv. Help change his/her life style.
- v. Help gain independence.
- vi. Help them redefine and reconstruct relationships.
- vii. Re-educate for sexual activities and alternative.

Basically the counsellor needs to prepare the client for an uncertain future and any additional and/ or associated loss.

According to Reuben and Roessler, effective rehabilitation counsellors act as ‘sophisticated professionals’ who possess multiple skills and knowledge and have the ability to integrate these complex skills into a multifaceted system

In studies conducted by Leahy et al. the following six knowledge and skill domains were perceived by certified rehabilitation counsellors as important: (a) career counselling, assessment and consultation; (b) counselling theories, techniques, and applications; (c) rehabilitation services and resources; (d) case and caseload management; (e) healthcare and disability systems; and (f) medical, functional, and environmental implications of disability.

These sophisticated professionals perform a wide range on duties and roles as rehabilitation counsellors. Leahy et al conducted a study to examine the perceived importance of the roles and functions that underlie contemporary rehabilitation counselling practice. Results revealed the following seven major job functions as central to the professional practice of rehabilitation counselling in today’s practice environment: (a) vocational counselling and consultation, (b) counselling interventions, (c) community-based rehabilitation service activities, (d) case management, (e) applied research, (f) assessment, and (g) professional advocacy.

Counsellors participating in the Leahy et al. study rated knowledge in medical/functional and environmental implications of disability and case and caseload management as very important knowledge for rehabilitation practice.

The 21<sup>st</sup> Century Rehabilitation Counsellor in India

In the 21<sup>st</sup> century, rehabilitation counsellors need to understand the client's views of life and self. In direct contrast to Western cultures, people from India tend to have more interdependent views of self, where the social unit (group, family, community) takes primary consideration over the individual. Self-worth is measured in terms of one's ability to maintain harmony within these social units. This interdependent orientation focuses on relationships rather than on the individual, and it values tradition, the status quo, hierarchical structures as means of maintaining group harmony. The 21<sup>st</sup> century rehabilitation counsellor in India may need to examine the clients' family and assess the dynamics before focusing exclusively on the individual. Self is often understood in relationships with others, particularly one's family members. Thus particularly in India, as a consequence of our culture, incorporating the family dynamic in developing the rehabilitation plan of the client is likely to be most beneficial. The participation of the family members is not only advantageous but also essential.

Many rehabilitation counsellors may be unaware of each of the diverse religions practiced in India and the helping role that these temples and religious places play to their clients. It is suggested that rehabilitation counsellors who integrate this spiritual and religious knowledge into their plan for rehabilitation will be able to provide more effective and individualised services to their clients.

Finally, some clients appear to have difficulty separating mental problems from physical problems. The somatization of mental problems among certain clients is often considered as a denial. However, for others, the belief of "wholeness of the mind and body" may be responsible for such behaviors; therefore, rehabilitation counsellors need to be sensitive to these issues and develop appropriate counselling plans accordingly.

According to the findings of the National Sample Survey Organisation, the proportion of aged persons in India who cannot move and are confined to their bed or home ranges from 77 per 1000 in urban areas to 84 per 1000 in rural areas. Strengthening the elderly in the process of self-help must be done by means of physical, psychosocial, and vocational rehabilitation.

Such a need in our society can only be met if the community provides educational opportunities for counsellors, to equip them with the skills necessary to be effective within this specialised field. Educational institutions in Mumbai and other parts of the country have recognised this need and have begun to offer short term courses in rehabilitation counselling in order to fill this lacuna. Counselling centres around the nation should take the initiative to ensure that their counsellors are trained with the relevant skills and knowledge, specific to rehabilitation counselling when handling such clients. This will truly ensure effective treatment for those who need it the most, i.e. the victims of accidents, illnesses/ diseases who need to 'rebuild their lives'.

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# SCOPE OF PSYCHOLOGY

Mrs. Anuja Chavan, Assistant Professor.

Psychology is the scientific study of human and animal behavior with the object of understanding why living beings behave as they do. As almost any science, its discoveries have practical applications. As it is a rather new science, applications are sometimes confused with the science itself. It is easier to distinguish what is 'pure' and 'applied' in older disciplines: everybody can separate physics and mathematics from engineering, or anatomy and physiology from medicine. People often confound psychology with psychiatry, which is a branch of medicine dedicated to the cure of mental disorders.

In the conventional classification of psychology, its application was restricted as follows:

- **Clinical psychology** is an integration of science, theory and clinical knowledge for the purpose of understanding, preventing, and relieving psychologically-based distress or dysfunction and to promote subjective well-being and personal development. Central to its practice are psychological assessment and psychotherapy, although clinical psychologists also engage in research, teaching, consultation, forensic testimony, and program development and administration.
- **Counseling psychology** is a psychological specialty that encompasses research and applied work in several broad domains: counseling process and outcome; supervision and training; career development and counseling; and prevention and health. Some unifying themes among counseling psychologists include a focus on assets and strengths, person–environment interactions, educational and career development, brief interactions, and a focus on intact personalities. It encompasses 3 main roles- preventive, remedial and educative.
- **Industrial and organizational psychology** (also known as *I/O psychology*, *work psychology*, or *personnel psychology*) is the scientific study of employees, workplaces, and organizations. Industrial and organizational psychologists contribute to an organization's success by improving the performance and well-being of its people. An I/O psychologist researches and identifies how behaviors and attitudes can be improved through hiring practices, training programs, and feedback systems. I/O psychologists also help organizations transition among periods of change and development. Industrial and organizational psychology is related to the concepts of organizational behavior and human capital.
- **Educational psychology** is the study of how humans learn in educational settings, the effectiveness of educational interventions, the psychology of teaching, and the social psychology of schools as organizations. Educational psychology is concerned with how students learn and develop, often focusing on subgroups such as gifted children and those subject to specific disabilities. Educational psychology in turn informs a wide range of specialties within educational studies, including instructional design, educational technology, curriculum development, organizational learning, special education and classroom management. Educational psychology both draws from and contributes to cognitive science and the learning sciences.
- **Social psychology** is the scientific study of how people's thoughts, feelings, and behaviors are influenced by the actual, imagined, or implied presence of others. By this definition, *scientific* refers to the empirical method of investigation.

The terms *thoughts, feelings, and behaviors* include all of the psychological variables that are measurable in a human being. The statement that others may be *imagined* or *implied* suggests that we are prone to social influence even when no other people are present, such as when watching television, or following internalized cultural norms.

Today the scope has expanded and people are going beyond the above mentioned scope. With the advent of technology and spurt of growth in field the options vary in nature. Job outlooks are increasing in other spectrums which are enlisted below. As it has been read in books and seen in everyday life that psychology revolves everywhere and has evolved a lot in 20<sup>th</sup> century. The new scopes seen these days are as:

- **Media Psychology** seeks an understanding of how people perceive, interpret, use, and respond to a media-rich world. In doing so, media psychologists can identify potential benefits and problems and promote the development of positive media. Psychology is fundamental to understanding the impact on individuals and groups of the integration of media technologies in our society. This field encompasses the full range of human experience of media—including affect, cognition, and behavior—in activities, events, theories, and practices. Media include all forms of mediated communication, such as pictures, sound, graphics, content and emerging technologies.

The emerging field represented a significant opportunity to use media in new and creative ways by understanding how psychology and media work together. Psychological theories can be applied to emerging social media, e-Learning, and digital technologies in pioneering ways. Media psychology draws from multiples disciplines such as sociology, anthropology, neuroscience, political science, rhetoric, computer science, communications, and international relations.

- **Neuropsychology** studies the structure and function of the brain as they relate to specific psychological processes and behaviors. The term neuropsychology has been applied to lesion studies in humans and animals. It has also been applied to efforts to record electrical activity from individual cells (or groups of cells) in higher primates (including some studies of human patients).<sup>[1]</sup> It is scientific in its approach, making use of neuroscience, and shares an information processing view of the mind with cognitive psychology and cognitive science. In practice neuropsychologists tend to work in clinical settings (involved in assessing or treating patients with neuropsychological problems – see clinical neuropsychology), forensic settings or industry (often as consultants where neuropsychological knowledge is applied to product design or in the management of pharmaceutical clinical-trials research for drugs that might have a potential impact on CNS functioning).
- **Sport psychology** is an interdisciplinary science that draws on knowledge from the fields of kinesiology and psychology. It involves the study of how psychological factors affect performance and how participation in sport and exercise affect psychological and physical factors. In addition to instruction and training of psychological skills for performance improvement, applied sport psychology may include work with athletes, coaches, and parents regarding injury, rehabilitation, communication, team building, and career transitions.
- **Environmental psychology** is an interdisciplinary field focused on the interplay between humans and their surroundings. The field defines the term environment

broadly, encompassing natural environments, social settings, built environments, learning environments, and informational environments.

Since its conception, the field has been committed to the development of a discipline that is both value oriented and problem oriented, prioritizing research aiming at solving complex environmental problems in the pursuit of individual well-being within a larger society. When solving problems involving human-environment interactions, whether global or local, one must have a model of human nature that predicts the environmental conditions under which humans will behave in a decent and creative manner. With such a model one can design, manage, protect and/or restore environments that enhance reasonable behavior, predict what the likely outcome will be when these conditions are not met, and diagnose problem situations. The field develops such a model of human nature while retaining a broad and inherently multidisciplinary focus. It explores such dissimilar issues as common property resource management, way finding in complex settings, the effect of environmental stress on human performance, the characteristics of restorative environments, human information processing, and the promotion of durable conservation behavior.

- **Consumer psychology** is a speciality area that studies how our thoughts, beliefs, feelings and perceptions influence how people buy and relate to goods and services. One formal definition of the field describes it as "the study of individuals, groups, or organizations and the processes they use to select, secure, use, and dispose of products, services, experiences, or ideas to satisfy needs and the impacts that these processes have on the consumer and society".
- **Health psychology** is concerned with understanding how biological, psychological, environmental, and cultural factors are involved in physical health and illness. Health psychologists work alongside other medical professionals in clinical settings, work on behavior change in public health promotion, teach at universities, and conduct research. Health psychologists also focus on understanding how people react, cope and recover from illness. Some health psychologists work to improve the health care system and the government's approach to health care policy.
- **Community Psychology:** Community psychologists work to strengthen the abilities of communities, settings, organizations, and broader social systems to meet people's needs. They help people access resources and collaborate with others to improve their lives and communities. Instead of helping individuals cope with negative circumstances (e.g., trauma, poverty), community psychologists help empower people to change those circumstances, prevent problems, and develop stronger communities. Examples of community psychology interventions include improving support for hurricane victims, partnering with neighborhoods to prevent crime, collaborating with schools to prevent bullying, and helping change policies to improve health outcomes. Community psychologists blend research and practice, partnering with diverse citizens to plan and implement community changes, advance social justice, and use research to inform and evaluate this work.

- **Cognitive Psychology:** Cognitive and perceptual psychologists study human perception, thinking, and memory. Cognitive psychologists are interested in questions such as how the mind represents reality, how people learn, and how people understand and produce language. Cognitive psychologists also study reasoning, judgment, and decision making. Cognitive and perceptual psychologists frequently collaborate with behavioral neuroscientists to understand the biological bases of perception or cognition or with researchers in other areas of psychology to better understand the cognitive biases in the thinking of people with depression, for example.
- **Evolutionary Psychology :** Evolutionary psychologists study how evolutionary principles such as mutation, adaptation, and selective fitness influence human thought, feeling, and behavior. Because of their focus on genetically shaped behaviors that influence an organism's chances of survival, evolutionary psychologists study mating, aggression, helping behavior, and communication. Evolutionary psychologists are particularly interested in paradoxes and problems of evolution. For example, some behaviors that were highly adaptive in our evolutionary past, may no longer be adaptive in the modern world.
- **Forensic psychology** is the intersection between psychology and the criminal justice system. It involves understanding criminal law in the relevant jurisdictions in order to be able to interact appropriately with judges, attorneys and other legal professionals. An important aspect of forensic psychology is the ability to testify in court, reformulating psychological findings into the legal language of the courtroom, providing information to legal personnel in a way that can be understood. Generally, a forensic psychologist is designated as an expert in a particular jurisdiction. The number of jurisdictions in which a forensic psychologist qualifies as an expert increases with experience and reputation.

**With these mentioned scope and job outlooks I would like my students to look at these as an opportunity. Though the relevance and courses in some of these are unavailable in India, the research and development opportunities are in abundance outside India.**

**Go and Explore...**

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# **GOLDEN RULES TO COUNSEL TEENS**

Ms Reshma Murali, Counselor.

Everything changes over time, and the same applies to parenting rules as well. Rules that applied when we were teens may no longer be relevant today. The fact is that teens today are exposed to much more outside influences, be it from TV or from the Internet where there is little censorship. It is very easy to get introduced to drugs, alcohol, and many other risky behaviors, be it at school or elsewhere.

In such circumstances, it is important for parents to reinvent and keep updated with the best parenting practices because your primary job is to raise your children to be independent and mature adults.

Here are parenting guidelines and mistakes that should be avoided when dealing with teens. Though these suggestions are for parents, they are equally relevant in educational institutions and should be followed by Teachers & Educators as well.

These are based on the latest scientific studies of adolescents, conducted by professors of psychology at various universities.

## **Differentiate between the Deeds and the Person**

Though a positive feedback always encourages a teen, there are times when certain actions, behavior and performances have to be criticized. While doing so it is advisable to criticize the performance and not the person. Though this may sound very easy, this is tricky and you could end up hurting the person. Remember to highlight the positives that will arise of the expected / improved behavior.

## **Do not Expect Blind Obedience**

It is important for you as a parent or educator to encourage children to think and reason, ask questions and not just blindly follow your instructions. On the other hand if your teen reasons a lot, do not get offended and cut them short. Explain the reasons behind your decisions and encourage the same out of them.

## **Respect the Rules of a Game**

Clearly communicate what is expected out of your teens and clearly define the consequences for breaking the rules much in advance. But even more important is that you enforce them and stick to the punishments. Don't give up easily if your teens become defiant. Be firm without losing control. Don't let your teens feel that they can get away with breaking rules.

## **Foster Independence**

Teenagers like to push for autonomy and don't like being micro-managed. Though there is nothing wrong with being independent, the best judge if your teen is behaving maturely

should be you and not your teen. You should give them the space to be self-reliant, but Do Set Limits. Relax your rules as your teen demonstrates more maturity.

### **Stay Involved**

Many parents withdraw when their child becomes a teenager, many a times because of their defiance and not because they are showing signs of becoming responsible adults. But it is just as important for you to be involved now and know what's up with the teenagers today. Even though you may have been teens at some point of time, it is important to realize that teens differ over generations. So do take the time out to know what's up with the adolescents.

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# **'MAKE PEACE WITH LIVING'**

Ms. Nidhi Borana, MA I

Here to learn,  
take pain to earn,  
bond with others,  
grow strong and nurture.

The race in on,  
for destiny beyond,  
will sail the time,  
hope with no crime.

Power can breach,  
no wisdom shall preach,  
it's left for time to teach.

Concerning for self,  
will the ego bend,  
can time make enough time-for me to repent!

Stay away from regrets,  
throw away all grudges,  
make life exciting,  
find happiness in small things,  
feel every breath.....,  
slowly.....in and out.....,  
feel peace within,  
you've made peace with living!

## **REVIEW OF THE MOVIE 'UNINVITED'**

**Ms Prattusha Chatterjee, M.A.II**

It is a story of a girl named Anna who is haunted by her mother's ghost and a few other ghosts of children who are unknown to her. After her mother's accidental death which was caused by a sudden fire, she was sent to an asylum for the emotional disturbance that she was facing. She came back home to find her father getting married to the nurse who was taking care of her mother while she was ill, she and her sister set out on an adventure, suspecting this woman of fake identity.

This movie with its twists and turns lands up in a totally unexpected climax. Initially it seems like a horror movie but at the end we realize it is a psychological phenomenon. It shows us the power of our unconscious mind. The concept of suppression is taken to the extreme; it shows us how selective attention can cause murder. Through this movie we can observe the uniqueness of human mind and the extent up to which it can go for satisfying itself.

Anna in the movie is deeply hurt to see her father having an affair with the nurse who had come to take care of her ill mother. While her mother lay ill in a small room outside the house the father was getting intimate with the nurse. For the small girl it was something that had gone beyond her imagination. In the surge of anger she was attempting to burn the whole house down but accidentally burned the small cottage where her elder sister and her mother were burned alive. The father was not aware of this incident; everyone thought that it was an accident. This memory was so harsh for Anna to take that the whole event was suppressed and she did not remember anything. While she went back to the house and found the nurse still there her hatred for her grew even more, while Anna lost complete touch with reality. Her mind made a completely new identity for the woman based on the stories that she had heard from one of the patients in the asylum. Like children make imaginary friends she imagined her sister to be alive not realizing at all that she was dead. She perceived the whole situation and even people only according to how she wanted them to be perceived and not relating to the reality at all. Her feelings of guilt, abandonment, insecurity, threat and hatred were so intense that it made her psychotic and ended up murdering an innocent lady very gruesomely.

Through this movie we can realize the impact that a faulty perception can have; the consequences of perceiving events and people incorrectly or irrationally can be seen. The impact that a small event can have on a child, the extent up to which it can create disturbances in a young mind should not go unnoticed and should be handled with care. We can also see how many times events which are labeled as supernatural can simply be a game played by the unconscious mind.

This movie can be recommended to people who like to watch psychological thrillers, go watch and make your own theories.

# **PROBLEMS OF MENTAL HEALTH IN INDIA AND AROUND THE WORLD.**

Ms. Sayali Sawant, MA I

The concept of mental health is always questioned by most people around the world. It is not necessary that one always gets an answer that he or she expects but the questions remains then and there. Dr. William Menninger rightly quotes that “Mental health problems do not affect three or four out of every five persons but one out of one.”

May be that is the only reason why it is the cause of concern. Mental health has for decades been low in the priority of health planners at state and central levels and this is well reflected in the quantity and quality of mental health services in India. The needs of patients and families far outstrip the availability and accessibility of services for those with mental disorders. India's scarce mental health resources, such as mental health specialists, are largely concentrated in some states (mainly in the south) and in urban areas and a large proportion are solely in the private sector. Over half of all inpatient beds are located in 40 odd mental hospitals, most of which were built during the colonial years. It is not surprising, then, that the 'treatment gap' for mental disorders is large all over the country, but especially so in rural areas, northern states and amongst the socially disadvantaged.

In the past, the subject of mental illness was surrounded with mystery and fear. Today, after a long struggle we have made tremendous progress in our understanding and our ability to not only understand mental illness but also the kind of treatment it requires. Mental illness is very common. Almost one fifth of Americans suffer from a diagnosable mental disorder during every given year. Similarly one fifth of school-aged children are also affected by these conditions. (Research conducted by APA, 2006). Cases of people with such disorders in India are also coming to light. Yet, the question remains the same that ‘How people face mental illness?’

Even after years of advancement people find it difficult to express their illness not only to the doctors but also to their significant others. The reasons for the same would be the feelings of shame, fear, or being labeled. The exact cause of mental illness is unknown, but explosive research findings suggest several answers for the same. Some problems are inherited, yet others trigger from the environment. Mental health problems result from a complex interaction of biological, social and psychological factors, but are still usually discussed in medical terms.

A survey conducted by the APA on more than two-thirds of American women showed that the nation's sagging economy has negatively affected their lives and that of their loved ones too. This has eventually affected their mental well being.

When someone experiences severe and/or enduring mental health problems they are sometimes described as mentally ill. However, there are certain difficulties with this term.

- There is no universally agreed cut-off point between normal behavior and behavior associated with mental illness.
- The label mental illness is highly stigmatizing, encouraging people to think of 'the mentally ill' as different.
- The term mental illness can misleadingly imply that all mental health problems are solely caused by medical or biological factors. In fact, most mental health problems result from a complex interaction of biological, social / psychological factors.
- For many people, the existing systems of categorizing illnesses do not relate closely enough to their experiences. Some people, including some professionals, prefer not to accept diagnoses which may be misleading or stigmatizing.

While the government or public services are the key providers of care for these populations, and therefore need strengthening, the NGO movement in the country has seen a steady upswing in the last two decades to fill the large gaps. NGOs are driven by a passion towards a certain cause and back it up with commitment and drive. While the reach of their work cannot parallel that of government agencies, the quality of care and their efforts in reaching out to the various stakeholders, particularly those who are discriminated against such as persons with mental disorders, gives them a distinct advantage.

The paucity of treatment facilities and psychiatrists in the Government sector has widened the treatment gap in mental health. Non-governmental organizations (NGOs) have played a significant role in the last few decades in not only helping bridge this gap, but also by creating low cost replicable models of care. NGOs are active in a wide array of areas such as child mental health, schizophrenia and psychotic conditions, drug and alcohol abuse, dementia etc. Their activities have included treatment, rehabilitation, community care, research, training and capacity building, awareness and lobbying.

The scenario in the West is however different. These days, Western science takes it as given that mental illness is rooted in biology. But this approach ignores culture's role in shaping health: simply put, different social environments create different mental health problems. Psychiatrists used to call ailments limited to particular environs "exotic psychotic syndromes" until it dawned on them that Western culture has its syndromes, too--namely, anorexia and bulimia nervosa. Now they refer to "culture-bound syndromes," though this name, too, is a bit misleading. Culture-bound syndromes are not linked to a particular culture in a particular time and place so much as to a prominent cultural emphasis. Cultures that place high importance on fertility, for example, may fuel fears of semen loss.

Though slow on the draw, the American Psychiatric Association began acknowledging the importance of culture in the fourth edition of its *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)* by adding an appendix on culture-bound syndromes. Granted, the main body of the *DSM-IV* is filled with syndromes you can only imagine happening in the West--disruptive behavior disorder, for instance, or medication induced mathematics disorder. Here are a few examples of culture-bound syndromes.

1. Koro-Origins: China, Malaysia, Indonesia      *Source: Timothy McCajor Hall, "Culture-Bound Syndromes in China"*
2. Latah-Origins: Malaysia and Indonesia      *Source: New York Times Magazine, May 6, 2001*

3. Brain fog, or brain fog-Origin: West Africa *Source: Pulse, June 3, 2002*
4. Anorexia nervosa, bulimia nervosa-Origin: North America, Western Europe
5. Amok, or Mata galap-Origin: Malaysia *Source: Manias and Delusions, Time/Life Books, 1992*

It becomes necessary for people to accept the change and it can be only done through awareness. We expect that the problems faced by the mental health now would soon disappear.

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# REFUTING PARAPSYCHOLOGY

Ms. Urmi Chhopia, MA II.

Parapsychology is the branch of Psychology which studies behavior transcending known modes of sensory cognition and motor activity. Scientific study of the so called supernatural phenomena can be said to have commenced from 1882 with the founding of the society for Psychical Research in London. Similar societies now exist in many countries. The term Parapsychology has been popularized by Dr.J.B.Rhine of the Duke University in U.S.A. The Parapsychology Laboratory was established at Duke University in 1934. There, psi phenomena were studied by means of laboratory experiments under controlled conditions. Many people therefore relate the term parapsychology mainly to this type of investigation.

There are a lot many things that come under the broad term Parapsychology. Such as **Precognition, Bi-location, Psychic Healing, Dowsing.**

**Psi capacities:** esp. - Metagomy and Precognition. Under Metagomy comes telepathy and clairvoyance.

**Psychokinesis:** Psychic healing and Black magic/sorcery.

**Spirits/Survival:** Mediumship, Possession, Out of Body Experience, Reincarnation, Near Death Experience. Apparitions- haunting, crisis, post-mortem, experimental.

**Miscellaneous:** Unidentified Flying Objects and Kirilian Photography.

Of all of these, there are a few that can be explained through psychology.

**Precognition** is the ability to foresee the events of the future. This phenomenon can be explained as a normal ability as it is similar to the saying of one of the early schools of psychology that said that things occur twice: once in the mind and then in the real world. So if this is true then there would be nothing extraordinary about this ability.

**Psychokinesis**, it is the movement or change of state caused in an object by an individual through non-physical means. In a typical experiment, the subject attempts to influence the outcome of a mechanically performed dice throw. The power of human psyche is limitless. The energy that is hidden has been portrayed time and again by different patients of dissociative identity disorder or schizophrenia. When the uncontrollable power becomes activated, the brain functions at a capacity beyond human understanding. This can be used to manipulate any object if the energy is channeled correctly. There is nothing supernatural about it.

**Clairvoyance:** This is extrasensory cognition of events and things of the past or present. This could be predicting what order a pack of cards would be laid out. This is similar to the cognitive ability in the chapter of Problem solving where one of the heuristics was of trial and error. There is also the factor of “flukes” or luck. There may not be anything paranormal about this ability in the first place.

And lastly there is something known as **Bi-location** i.e. A person being seen at two places at the same time. This is similar to Hallucinating. The stress of the day can sometimes hinder perception or the states induced by drugs and alcohol also cause hallucinations so real that this is possible. Even disorders like schizophrenia have the symptoms of delusions and hallucinations. Further human beings are suggestible creatures and if they are brain washed or lead to believe that something is there they actually see it and feel it.

So to conclude I would say that if these abilities could be explained psychologically then there really would not be anything Paranormal about them. They may not exist. However, there may have been instances where a few of them may have proven themselves

to exist. No doubt that the believers in these abilities are plenty and so I would leave it to the people to judge and decide for themselves what they wish to believe in.

## **MENTAL HEALTH DEFINED**

**Mrs Neha Purohit**

**Clinical Psychologist,**

**Freelance trainer.**

Having to write an article always makes me introspect about my own life and this time I am writing about mental health. I looked up the definition and there are quite a few of it.

**Mental health** describes a level of psychological well-being, or an absence of a mental disorder. I definitely don't have a mental disorder at this time in my life. Psychologically I feel fine.

From the perspective of 'positive psychology' or 'holism', mental health may include an individual's ability to enjoy life, and create a balance between life activities and efforts to achieve psychological resilience. I can enjoy life, balance is still a concept I am struggling with and resilience in me is something my family would be better at commenting.

Mental health can also be defined as an expression of emotions, and as signifying a successful adaptation to a range of demand. I am very adept at expressing my emotions, and can adapt but I guess with time.

So then I wonder as a counsellor am I really mentally healthy? By all definitions, there is something that just slips right through me.....

The World Health Organization defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community".

I have counselling sessions and I take clients on regular basis; clients who come to me every week in hope to get mentally better. I give my heart and soul in those sessions. I truly believe that I can and I do help them. So by the definition of World Health Organization, I am using my abilities and making a contribution to society. But then I might not be using all my abilities and I am definitely not working full time, I am not contributing as much as I can. So am I mentally healthy?

I see some people around me who are so blissfully happy. They have no apparent struggles in life. Of course they may have a cheating spouse or may have given up their interests and skills and chosen career paths others wanted them to take just to please those others, but they

seem so blissfully happy. My colleagues and students would point that out as simply power of denial. Some would say they are in stage of foreclosure, as per James Marcia's Identity Development Theory – where there is commitment without struggle. But they are happy, at least superficially. Are they mentally healthy?

Also feelings like depression, anxiety are considered unhealthy, unlike more healthy negative emotions of sadness and fear. But unfortunately I do feel depressed at times and anxious too. Fortunately for me, it's not all prevalent.

I too have my stresses and my issues to deal with. I deal with them to the best of my capacity. Am I peaceful and satisfied in my life? No I am not. My life like life of most other people is an uphill struggle. So how can I help others if I am myself struggling with issues one may ask, but my favourite author – Richard Bach, in my favourite book – Illusions, had said “You teach the best when you need to learn the most”.

When I had just passed from my college, I felt how could I ever counsel others when I have my own problems, but I later realised that if I wait for my life to become peaceful and problem free before I start helping others, I may never do any form of counselling!

So here I am with all my faults, issues, problems trying my best to be mentally healthy and at the same time promoting mental health in others.

Over a period of years I have realised that unlike physical health, mental health is more of a continuum. One can either be physically healthy or not. But mental health is not a category that way. We all are along the continuum and we may slip this side or that depending on our circumstances, and our own outlook. Also we may have periods of maximum adjustment, optimal working, and yet it is not always permanent. We may have brilliantly overcome most burdensome odds and feel a great sense of triumph and yet may find ourselves back to square one with some other difficulty.

What I feel helps though is complete commitment to reality, to be aware of myself and what are my surroundings. Trying to not use my old notions to understand new situations, and take each situation with fresh outlook. Also keeping myself updated to various methods in the field and applying to myself, talking with my colleagues and like-minded people, helps. The more I learn about myself the more I realise how much I need to change towards complete mental health,(if there is notion like that) is same proportionally, no matter how much forward I travel- like horizon- no matter how much I travel I am at the same place....

This knowledge helps me realise that I am truly equal to my clients and not superior to them.

So ultimately mental health, I feel, is not a destination but a process or even more accurately a path. As long as you are on the path you can have issues and troubles and you can be sad, depressed and anxious but still you are mentally healthy.

But I still end with Khalil Gibran's words which I truly believe, “I AM IGNORANT OF ABSOLUTE TRUTH. But I am humble before my ignorance and therein lies my honor and reward”

# **WHAT NEXT AFTER MASTER'S DEGREE IN PSYCHOLOGY?**

**R. Parthasarathi,**

**a practicing Counselor and Psychotherapist.**

**It is his vision that the next two decades would belong to  
Psychologists as the preceding decade belonged to IT & Finance  
Sectors.**

A write up was sought for the college magazine "Psychronicle". An attempt is made to make a 'presentation'. 'Counseling' is age old but this write up is meant to familiarize. It is not counsel.

Post- PG career path has two streams namely 'Theorists' and 'Practitioners'. On looking back today 50 years behind, without winking, I proclaim that 'Theorists' are Great. It is like without Mathematics, there is no engineering course. I bow before those Great Theorists represented by Ph.D /M.Phil holders and post doctoral scholars. Without their valuable input, the profession of psychotherapy, in the instant case, won't be as we see. I believe so.

## ***[i] Why to make Value Additions to Masters Degree in Psychology?***

- i. **Today Masters Degree is deemed basic to be known as a 'qualified' person.** It will suffice to apply for job if that is the sole aim of the day. It is fair enough if already employed.
- ii. **A degree of higher order is a life time achievement attached to a person in all walks of life.** It walks along till end. This is in Indian scenario. **It is writing on the forehead.**
- iii. **Going for further education is dependent upon the attitude & approach towards self.** It is also dependent upon one's capacity to wait and take off in life. It is a test of our determination.
- iv. **Going in for Ph.D/M.Phil is an act of self esteem and vision.** It projects a person to higher level in the community.
- v. **Doctoral Degree infinitely enables a person to a higher level of in depth knowledge, of clarity & precision of communication skill. It empowers to be known and seen as person of stuff. It leads to leadership stream in the community.**
- vi. **The person is presented well by this upgrade.** It places the person on the right pedestal.
- vii. **It is an investment on one self.** It is huge in terms of time and physical & mental energy. It requires a high degree of sustenance.
- viii. When it is done, it is **a completed job for the life time.**

## ***[ii] If you are a Masters in Psychology today, then you are in the 'mould' of:***

1. **An empowered person:-** as observer of behavior; analyser, theorist, researcher, diagnost

2. **A clinician:** – as effective handler of mental, emotional and behavioral disorders
3. **A cognitive and perceptual person:** as you read human mind intelligently and reliably interpret
4. **A potential community leader:** as you assemble human energy, energise and achieve
5. **A counselor:** as you enhance human resources individually, in groups & optimize performance
6. **Developer of Human resources:** as you interpret human developments vs mind enlargements
7. **Educator par excellence:** as you are the best skill developer on teacher-taught relationship
8. **Man Machine Coordinator:** as you study fatigue in man-machine equation & optimizes efficiency
9. **Environment Friendly Coordinator:** as you enhance Eco-friendly equation of man-environment
10. **Person of Evolutionary Vision:** as you study mutation- adaptation & initiate healthy thoughts
11. **Experimentalist:** as you are an ‘Event Management’ Developer including Disaster Management
12. **Forensic Advisor:** as you coordinate the law of land and prevalence of rule of law.
13. **Health Science Educator:** as you initiate psycho-bio-social factor analysis of health and illnesses
14. **Factory Health Inspector:** as you help increased productivity & healthy atmosphere
15. **Organization Coordinator:** as you train psychological preparedness to handle machines & tools
16. **Neuropsychologist:** as you study brain-behavior relationships & help preservation of emotions
17. **Psychological Data Reader:** as you enhance workers’ receptivity on upgrade of machine/tool
18. **Rehabilitation Coordinator:** as you study and help accident victims & workers welfare coordination
19. **School Psychologist:** as you assess students-teachers equation & fatigue and help in remedial education.
20. **Social Psychologist:** as you study En-mass handling of influencing factors and reach far and long
21. **Senior Citizens Friendly:** as you soothe them, prevent isolation & keep them within the stream
22. **Sports Psychologist:** as you motivate participation to achieve optimum performances

***What it means to say ‘counseling & psychotherapy?’***

- Counseling & Psychotherapy is a professional help sought for. It is not an advice given unasked.
- Counseling leads to guidance; psychotherapy takes on rehabilitation of a disturbed person
- Helps to make major changes in life for better. It helps in creation of cope up mechanism within
- Help is rendered when emotionality is in disarray and the person is in the lookout for help
- Distress, Anxiety, Depression, Panic Attacks, Suicidal feelings, Psycho somatic illnesses, Difficulties in relationships, Inability to recover from bereavement- they all

devastate persons. Psychotherapy negotiates situations; road to recovery is discovered and help-seekers are guided. It is a kind of rehabilitation technology of human mind.

### ***Is Counseling & Psychotherapy, worth a career?***

- It depends on mind set, attitude and approach to life you wish to lead
- A medical profession is of 6 years' duration and around 10 years of gestation period. It costs a fortune. Income earning potential continues to be uncertain & disproportionate to investment.
- Mental Health Profession is paramedical and its costs much less; it is a Profession of Dignity too.
- Mental Health Professional can fit in well into any manufacturing /services on variety of roles.
- It is an emerging professional profile & hopefully will hold good with ongoing techno-upgrades.

***Mental Health is a national wealth. Let us nurture & upgrade as Psychologists and help others lead a healthy life. Theorists form Think-tanks. National Growth depends on think-tanks besides technocrats. Think-tanks frame policies of national importance. They gauge & guide the nation forward.***

## **THE DEEP PSYCHOLOGY BEHIND YOUR HEALTH**

**Ms. Krina Gala, MA II**

The relationship between psychological health and physical health has long been established. Even most medical doctors today warn against the dangers of mental stress that flows from overwork, chronic family conflict, unhealthy compensating or general maladjustment to the demands of life. This is old news.

The intriguing question now is how does this relationship between mental health and physical health function? When you are stressed out, depressed or confused, how does your body react to create a state of less-than-optimal health or even disease? The answer to this question leads us down a slippery slope full of speculation and metaphor. If you're open minded, however, the ride is not only exhilarating, but enlightening.

"Cancer is a natural process that gets out of control. When you cut your skin and it begins to heal, those cells are involved in a cancer-like process. They know how to divide, grow and heal. But, they also know when to stop growing. Otherwise, you would end up with a giant growth out of your arm or wherever you cut yourself. The same is true when a woman is pregnant. The cells of the foetus are involved in a cancer-like process, a very rapid division and growth in an organized way."

Here is the fascinating piece: Cancerous tumors, when removed from the body, sometimes contain hair, teeth and organs. They don't tell people that a cancer cell in the body tries to

become a whole person. Think about that for a minute. After conception, you have a single, fertilized egg. If the conditions are right, it develops into a person. That is the way it is supposed to work. But, when you have a cancer tumor in the body, it "decides" it wants to be a whole person, too. It doesn't want to be a specialized cell, playing a small role in a larger body. It wants to be a whole body and it does not have any plans to stop dividing and spreading.

What to do with this information? Consider your life. Do you know who you are and what you stand for? Do you meander through life, confused and afraid to make strong decisions? Do you live in a house divided, with internal conflict eating at you day and night? When you lie down to sleep, are you at peace or are you harangued by stray thoughts that clutter your mind?

Good psychological health implies clear values, the ability to access a state of inner calm, healthy personal boundaries (knowing your limits, when to say yes vs. no) and a general, pervasive feeling of well-being and certainty in this uncertain world. These and other essential mental health resources are fundamental. Life requires them at a minimum. Those who do not naturally possess or consciously develop these essentials of healthy character are at a distinct disadvantage in the social realm. Are they also exposed to greater health risks? The most compelling logic suggests that, yes, they are.

Imagine for a moment that your mind and body, craving the clarity, calm and certainty that comes with solid mental health and a low-stress way of being, is just not getting what it needs. Lacking direction, it lives in a state of chronic confusion, conflict and anxiety. Doesn't it make sense that some part of you at some point takes matters into its own hands? Might that entail an attempt to develop new parts of you, given the current lack of resources?

Witnessing the hair, teeth and partial organs contained in a cancerous tumor validates this logic in a very unsettling way. The moral of the story: Put real effort into your mental health! Learn to be clear, honest and certain. Know who you are and what you stand for. Develop effective communication skills and the capacity for inner peace. Give your mind and body what it needs and it won't have a reason to rebel.

# **TRAPPED!**

**Ms. Inderjeet Sokhi, Counselling Psychologist.**

I don't know if it's a dream or a waking state  
The semiconscious Talks to me  
I see a pretty garden all around with green leaves & blossomed bushes  
But the moment I get near it  
I sense it hard & Stubborn  
I try to smell the roses or appreciate its beauty  
But all it turns out beneath is cold concrete  
I run around to find a way out  
To see it from the outside  
But find myself stuck & back at the same place around  
Little did I know it was a maze  
And it was me running around in circles of craze  
Stuck between the walls of my own furry  
Of self-created doubts & suspicions that do not exist  
Closing my eyes to the windows outside  
Knocking the doors that do not open  
Seeking those who do not listen  
I take a while but realize my path  
Retract my steps to find myself at a place where I belong.

# **THE WHOLE IS GREATER THAN THE SUM OF ITS PARTS.'**

**Ms Jennifer Chandani, M.A.I**

“What?”- Well, that would be the first question to occur in any layman’s mind when he hears this statement for the first time. However, this is one of the basic assumptions that psychologists make while trying to understand any phenomenon. This statement is part of Gestalt psychology that is taught to a psychology student in his/her first year. So, then, what exactly does it mean?

According to Gestalt psychology, an individual would try to study or perceive any phenomenon as a whole or a complete picture (i.e. as it occurs to him) and not in bits and pieces. That is, a person’s experience of the entire thing as a whole is more important than, the objective appearance of the stimuli. Let’s make this simpler: the mind organizes perceptions into wholes rather than discrete parts. For eg: if one sees two straight horizontal lines, parallel to each other, one is likely to say that it is or resembles an equal to sign. (=) thus the mind tends to have a meaningful understanding of a symbol out of the way the lines are arranged. One may note, however, that these horizontal lines might have actually been a representation of railway tracks!

Okay, now how about using this Gestalt psychology in other areas of life?

For instance, say in understanding and solving problems that we face so often in our lives. Can we not relate the basic assumption of Gestalt, that is, to see the “whole”, in understanding the basic purpose or reason of a problem? For example: if I know that my boy friend is a dropout whom I have seen smoking recently, who sips vodka occasionally with friends and who constantly moves his glance from my face to my purse while talking to me, will I not be right in inferring (ie. Seeing the ‘whole’ rather than the sum of parts of information) that he is a failure and is more interested in my money than in me?

Well, that’s my perception, my subjective experience. That’s how I infer, and that would be my way of using Gestalt psychology. Another girl may think of this same boy as a being tensed temporarily, is a social drinker and who vouches for my security and belongings while he chats with me in a public place. Now what would you say to that? Haven’t we both referred to the same pieces of information but drawn different conclusions? And our behaviours are bound to be influenced by our conclusions.

So the question is who is correct? One option is to ask the boy himself but can such options be available and practical in all cases? No! The important thing is to understand and accept the fact that each individual is different and thinks differently. This individual may act in the future on the basis of his present day knowledge and perceptions ie. His “WHOLE”

Here, the concern is not on “what is?” but on “what seems to be?” In such matters the key for a psychologist is to find the exceptions of the client which will help him understand the reason behind the client’s beliefs. This can help the psychologist to reshape the client’s faulty beliefs (if any) in accordance with reality. Thus, the problem can be solved in an effective way.

In the meanwhile you can ponder over the “whole” that you have created in your lives.

# **CONSUMER CAPERS AND THAT THING CALLED A CONSCIENCE**

**Ms Sukanya Rangaraj,  
Deputy Editor,  
L'Officiel India magazine.**

“I feel guilty now”, I admitted to my best friend as we drove home after a long day of shopping. I peered into the bright, paper bags and did a quick mental analysis of what I actually needed versus what I thought I needed and the result, was well, too late to redeem. I admit, I do enjoy being ‘in’ fashion—the smell of new clothes, cracking into a new pair of heels and the all-important ritual of tearing off crisp labels and tags! And while I tried to make peace with my decadence, the guilt of the matter came racing back. “Relax!” she said. “You work hard, you deserve a little indulgence.” I smiled, nodded and went back to my moralistic, mental calculations. Was I a slave to brands and their effective marketing strategies? Was being a spendthrift my own fault? Or was it the lure of the retail boom that ultimately gets the better of every modern, urban girl?

The term consumer behaviour can be defined as the behaviour that consumers display in searching for, purchasing, using, evaluating and disposing of products and services that they expect will satisfy their needs [Schiffman and Kanuk, Consumer Behaviour 4<sup>th</sup> Edition]. To me, that definition is close to perfect. But that last word, ‘needs’ seems to cloud my personal confession of my very own consumer behaviour, rather my consumer misbehaviour. Does the sign ‘Sale’ actually imply an offer to sell my soul to the retail monster? Was Madonna at all apologetic when she sang, “Cause we are living in a material world, and I’m a material girl.”?

We are constantly surrounded by advertisements telling us our lives will be better by their products, media that’s screaming with one-of-a-kind consumerist opportunities and magazines that ride on high aspirational value by promoting a luxe lifestyle. Do we give in each time just to keep up with the Joneses? Or are we just plain and simple greedy? I decided to test myself for three months by making a list of only what I absolutely needed and realised that list was blank! At the end of the 90-day trial, I also realised I was listless and feeling a tad low. That’s when I delved deeper to understand the complex relationship between consumer behaviour and emotions. Yes, retail therapy is really a thing.

Advertisements and editorial content in magazines that play on reader’s feelings, lay emphasis on the positive emotions that one will experience through the use or ownership of a product. Sure, cognitive processes such as attention, perception, categorization, schemas and memory contribute to this equation too, leave alone attitudes and emotions. India has seen a retail boom in last ten years—shanty little shops have been replaced by boutiques, bazaars by glitzy malls, tea stalls by chic cafes and fast food carts by fashionable lil restaurants. We are learning, we are earning, we are growing.... And we want more! Our ancient scriptures tell us to go back to the basics and to find contentment in life’s little lendings. But is this emerging, growing middle-class really feeling philosophical? We work hard and expect excesses as the reward, time after time. The economic downturn was an unfortunate albeit timely leash that kept the retail hungry citizen tamed.

At the end of my 90-day trial, I decided to reward myself with a visit to my favourite designer boutique and shockingly, ended up buying nothing. My prudency and sense of

judgment had sharpened and I had learned to draw that line between what I needed and what was mere extravagance. Am I a subject of innocent retail therapy? Yes. Am I a shopping-addict with a substance-abuse problem of shoes and clothes? No. There are some things in life that are most enjoyable within mindful limits. And then there are the real joys of life such as love, family and friendships with who, investments such as emotions and time are best in excess.

## **DOWN MEMORY LANE**

- Ms. Anjana. B. Iyer, MA I.

I woke up today, or maybe two days back.

I had breakfast, or maybe lunch.

I went for a walk, or maybe I got lost.

I came to some place, where I saw my son getting ready for school.

Wait! He is my grandson.

I remember, my son now goes to work.

I wake him up every morning, so that he leaves on time.

I have breakfast with him and help my daughter-in-law with the household work.

Yes, I am active even at 75!

Then why is everyone around me always so worried?

How do I end up being the reason for their worries?

They say, I have Dementia, I tend to lose a track of time.

They say, I do not remember what day it is, I do not remember whether I had lunch or breakfast, I do not remember to come back home.

They think, I do not remember that I now have a grandson.

They say, I don't wake up my son, but startle him with my tantrums; he doesn't have breakfast, because he has to feed me, and I don't let him leave on time.

My daughter-in-law frets when I come for breakfast, as I end up throwing my food and the plates and it adds up to her already tiring household work.

They say, I may be 75, but act like a child of 5.

A lot to worry about, isn't it?

But they love me, thus, bear with me.

Someday, I am going to be left at a day care centre, or someone may be hired as a caretaker, so that they can have a life of their own, where one does not devoid them of a fun-filled life.

I am not afraid of that.

All I need is that, they forever love me.

After all, for all the tantrums and childish demands that they have put up with,

YOU know it's not easy even a bit.

I may be YOU; I may be someone you know.

It is as simple as a walk down the memory lane,

And as complicated as a maze with innumerable lanes.

## **DEPRESSION**

**Ms. Pratiksha Dixit, MA I**

*“I've been weak and I've been strong. I've been through the fire and I've been through the storm. Try to do right and I know I do wrong. Just be happy for me when my life is gone. Cause with no more hurt and no more tears, there will be no more pain and no more fears. No more people in my face who are not sincere. So smile for me when I'm no longer here”.*

‘Teenage depression, Postpartum depression, Alcoholic depression, Stress/work depression, Relationship depression’ are some of the reasons for depression.

Depression, one of the leading causes for suicides in today's world. Depression increases the number of alcoholics and drug abusers every day. What is depression? What do we exactly mean or refer to when we say "she/he is a victim of depression" "he was under depression and hence committed suicide" is this state of mind really that, severe and strong that it can cause one to end their lives, forget the world, forget people who actually love them and care for them, start finding it so difficult to cope with life that they give up and end up in this state of mind.

What exactly depression means,

Wikipedia defines depression as,

"a state of low mood and aversion to activity that can affect a person's thoughts, behaviour, feelings and physical well-being. Depressed people may feel sad, anxious, empty, hopeless, helpless, worthless, guilty, irritable, or restless. They may lose interest in activities that once were pleasurable, experience loss of appetite or overeating, or problems concentrating, remembering details or making decisions; and may contemplate or attempt suicide. Insomnia, excessive sleeping, fatigue, loss of energy, or aches, pains or digestive problems that are resistant to treatment may be present"

Depression or the state of depression has very strong, evident, serious symptoms and indications. These days the word depression is very loosely used. Any person who seems even slightly upset or sad is termed or labeled as 'depressed' or 's/he is in depression' without even knowing or understanding the meaning and seriousness of the situation and the word 'depression' .

Since people are ignorant and unaware of what phenomenon 'depression' exactly is. Due to the misuse of this word , teenagers ,adults feel disheartened and are losing their minimal threshold towards bearing pain, and any kind of sad event of one's lives causes them to reach extreme sadness. Any kind of failure is unbearable and due to this shortened threshold of pain bearing and acceptance of failure 'suicide' cases go on increasing. Even if a student is merely sad about failing in a subject is termed and labeled to be 'depressed' by his teachers and parents. Teenagers seem a little sad or lost in their world to parents, they immediately infer that their teenager is facing some relationship issue and that they are changing behavior wise and going into depression due to it. Friends also start viewing their friend who has recently lost a job or failed in some major examination, as being in 'depression'. This labeling makes one feel that may be they really are in depression, being sad itself is a vulnerable state of mind and in such a state one believes whatever is told to them.

Making people aware of what exactly depression is, its symptoms, coping methods, and what the state of depression can actually lead to, what are the physical, mental, behavioral, psychological attributes of depression, when can a person be actually termed as 'depressed' or a victim of 'depression', is very important. Once this basic awareness can be created, number of individuals viewing themselves as depressed or victims of depression can become less and the rate of suicides, lowered self esteem, lack of job performance, failed relationships, can considerably be lowered.

The Father of Psychoanalysis, Sigmund Freud says

“When a child loses the object or their dependency needs, they are frustrated and feelings of loss coexist with anger. The experience is turned inward and experienced as depression”.

## **LOVE SIMPLIFIED BY BECK**

**Ms. Madhujā Sawant, Counselling Psychologist.**

Ah, love!!! L-O-V-E- Love!!! It is one of the most complex emotions by far (at least according to me) that is just difficult to explain in one particular definition or in specific words!! It differs from person to person, culture to culture, totally subjective to our personal experiences yet relatable with many others!!! But many a times it so happens that when we actually fall in love it seems to start showing its ugly cracks!!! It is not that none of us have ever had their imperfectly perfect love-story. But one can't help wondering that what is it that turns this wonderful, joyous experience into a treacherous, miserable phenomenon?

Well, after analysing my personal experiences I am finding that it was my **‘thinking pattern’**!!!! Having studied and comprehended psychology to some extent, I got back to my psychology textbooks to resolve my love issues and came across the great **Aaron Beck** and his concept of **erroneous thinking**. Beck pointed out some erroneous (flawed) thinking patterns which could lead to or be the reason for the various problems/issues you might be facing in your life..... and your love life being an important one too. So here it goes...

### **1) All-or-nothing-thinking/Black-and-white-thinking:**

Here, people generally believe that everything is good or bad, black or white, either this or that. This is like expecting your partner to be ‘perfect’. Some of us may want a good-looking partner having the best of the qualities and even gives you the financial security and even fits in your family perfectly, but if your partner lacks any one single quality from above which might make him the ‘perfect one’ for you, you suddenly begin to believe that he/she is no more the one for you!!! Basically, if he/she has everything then only we can have a happy future or else it's going to be a mess!!!

**The solution as per my understanding-** Ask yourself whether are you a perfect person in the first place to find someone who is perfect too??? Are people perfect? Is it really logical to wait for some Prince Charming (a concept only found in fairy tales) and waste your precious time hoping to actually find one???

### **2) Overgeneralization:**

Here people might develop one negative thought leading to an exaggerated version of never-ending pattern of negative thoughts or beliefs related towards the experience/factor that created that thought in the first place. For example, you are trying to call up your partner and his phone is on waiting, you look at the clock, wonder who is he talking to for so long, why is he not receiving my call, am I not important to him, or has he found someone who is more significant than me, he probably does not find me interesting any more, oh my god he does not love me, now my marriage is over. After a while your partner picks your call and you find that he was talking to his mother!!!

**The solution as per my understanding-** Wait and breathe!!! Check your evidences, understand that one small mistake does not make your partner the villain and if you find everything's alright then bake a heart-shaped chocolate cake and enjoy it with you partner because he/she is not that bad as you thought he/she could be!!!

**3) Selective abstraction/ Mental filter:**

Here people start focussing on certain details, especially the negatives, while ignoring others. For example, you and your partner plan a date. You decide a time and place only to find that he does not turn up on time but then it was because he was busy buying you flowers, but all you think about is that he was not on time!!! You move on and go to the restaurant, have a nice time, eat good food, laugh, talk, and while returning he says that he didn't bring his car so now you have to travel by a cab, and you forget all the good time spent and end up arguing with your partner for bringing the flowers rather than his car!!!!

**The solution as per my understanding-** Be a human and give some credit to your partner for at least trying to make you happy or offering you a memorable experience in the first place. Nobody intended to offer you a dreadful experience and keep your ears and eyes wide open to see the good things coming your way; after all we are responsible for making our life what we want it to be and not our partners or parents or luck!!!

**4) Personalization:**

Personalization occurs when you hold yourself personally responsible for an event that isn't entirely under your control. For example, supposedly you are going through a very rough divorce and you say to yourself that if only I would have been a better wife, I would have still been happily married!!! Or feeling that your partner is always cribbing and complaining because you are somewhere not able to create a happier world for him!!! Or worst, saying to yourself, "If only I were better in bed, he wouldn't beat me." When one gets into this form of erroneous thinking, he is causing the most possible harm to himself as he might not even try to seek out help as he/she may come up with a belief that "I need to suffer as this is the punishment for my own wrong-doings".

**The solution as per my understanding-** Understand that you are a mere mortal, you have a mind and body just like your partner who has his/her own set of flaws.

If even the God could not create perfect human beings, how can you blame yourself for creating the imperfect relationship!!!

These are just some of the erroneous thinking patterns but some prominent ones for sure. So to conclude, analyse your thinking and sculpt your thoughts a bit each time you feel that the relationship is going downhill or the love that you most cherished is fading away. Nobody can guarantee you a 'happily ever after' but you can certainly work towards creating one, and if it is worth it then why not???

**Disclaimer: Not all the examples mentioned above are valid in my case and also the solutions are not prescribed to give you all the answers for your issues, so follow it at your own risk!!!**

## **AN OPEN LETTER TO MY TEENAGED NIECE**

**Ms Vaishnavi Verma, Assistant Professor**

I remember the day you were born. You looked like a porcelain doll. My very own. Cream skin, with hues of pink, blue-green eyes and a small round nose. You looked so fragile to me, yet you gripped my finger so tightly with your tiny little fingers. I knew it then, I would never let you go. Days passed by and I saw you growing into a bundle of energy and relentless questions. You always had this look of inquisitiveness and yearning to know more. You were growing into a little lady, matching her bows to her frocks, imitating her mother in the kitchen and taking care of everyone's needs. Then, I could sense adolescence waiting to get a hold on you, when you had your first fight with your mother. I had been dreading this moment.

Things have changed now. You may not realise it. Pink frocks have been changed for black tees and jeans. Pink bows have been replaced with perennial headphones. Your questions have grown silent over time and my questions are being answered only in monosyllables. There was a time when you used to look up to me, but that look has changed to one of contempt. In your own words, we don't seem to 'get you'. Sometimes, our love and concern 'suffocates' you. And then there are times, when you go on for days without talking to anyone, tucked in neatly into your world of Facebook and iPod. Your friends have become your home and we have become strangers of your world. I see and hear my sister crying those silent tears, wondering where she went wrong. But I know, underneath all that mocking silence is my sweet niece, with matching pink bows. But I digress. This letter is not to lament about the predictable changes that come with teenage years.

This letter is to address certain areas of your life where you may need your aunt's advice in the future. I don't claim to know all, but having burnt my fingers through the years, I have

diffidently become eligible to share certain things. I want you to remember your family. In every milestone of your life. Without their support and love, you would not have reached where you are today. They provided the scaffolding to your life and you need to keep these blessings in your heart. Tomorrow you may find some new people adding on to your life, but don't forget the old ones, who made you what you are today.

There is going to come a time, when you will start doubting yourself. I have seen you spending hours in front of the mirror criticizing yourself. I sense your concept of self developing, but I also sense the shadows you have casted on your own body image and esteem. Don't let external things determine your sense of self. Your triumphs, your struggles, your pain, your success, are yours to experience and do not require any external judgement. Be yourself. Most importantly, love yourself.

I know you have reached at a point in life when things have started confusing you. Your heart might have even started searching for the love of your life and every boy you meet, might seem like Mr Right. These coming years are going to be full of hopes, desires, love, heartbreak, and even pain. I want you to experience each one of them. But keep in mind not to sell yourself short, or settle for something you are not comfortable with. This is indeed your life, and you do get to make the decisions. Don't let anyone dictate how you should feel about things, and better still, don't let anyone dictate how you should be living your life. Do not change yourself, for the sake of someone; rather, be with someone, who loves you for who you are and not what you can be.

Lastly, talk to your mother. She is still waiting for her daughter to ask questions. She learned to be a mother because of you and she is waiting for you to help her learn more about her motherhood. She dies each time you leave her feeling ignored and unwanted. Don't take away her right as a mother to know about her darling daughter. She still awaits the time when you would come seeking advice like before. Or when you would want to match your bows to your frocks again.

My sweetest niece, I hope you take this letter in the intended spirit and learn something from your aunt's lessons. I can't wait for us to reconnect and talk about inane things like we used to. But now, I wait silently, and watch. My very own, my porcelain doll, is blossoming into a woman.

## **CHOICE: HOW MUCH IS TOO MUCH?**

Ms Jade Carvalho, M.A.I

*Too many choices, so much to lose.*

*So many choices, which will I choose?*

*Will I buy this?*

*Will I do that?*

*Should I take the risk?*

*To be where it's at?*

**- Ronald W. Hull**

Every day we are confronted with a horde of choices. From that moment, in the morning when you choose to get off your bed, to the time you choose to lay down to sleep at night, your day has been nothing but a string of choices. Most of us have grown up to believe that having more choices ensures that one will make a wiser and more informed decision. Throughout Indian history many sections of society- the poor, the social outcasts and even women have viewed 'choice' only as a luxury. Thus having a choice was associated with being wealthier, happier and wiser. Through our independence in 1947 many more choices opened up to us- the ability to choose our leaders, the ability to choose to travel freely within our country, the choice to worship the God we wanted in the manner we wanted. Logically speaking, having these choices should ideally make us happy; however a growing body of research shows that often, abundant choice makes for misery.

Although some choice is better than none, more is not always better than less. This seems hard to accept as true and goes against everything that we have been taught to believe. How can having more choices make us unhappy? Columbia business professor Sheena Iyengar, author of *The Art of Choosing*, conducted the famous jam study, to provide evidence of this idea. One day in 1995, Iyengar set up a tasting booth in a grocery store. During some hours of the day, she put out a wide assortment of 24 jams for tasting. At other times, she put out just six jams. Throughout the day, she counted the number of store patrons who visited the booth, and of those people, the number who actually bought a jar of jam. The result: While 60 percent of store patrons visited the booth displaying 24 jams, just 3 percent of those shoppers ended up purchasing a jar. And while only 40 percent of store patrons visited the table when it offered six jams, a full 30 percent of those visitors ended up buying something.

The jam study results show, that people can be much more decisive, and tend to report greater satisfaction with their decisions when faced with a limited assortment of choices rather than a flood of options. While the store patrons who saw the large assortment of 24 jams often took as long as 10 minutes examining different flavors and discussing their options with others before choosing a jar to buy, the ones who saw just six choices strode confidently down the jam aisle and picked up a jar within about 30 seconds.

It is interesting to note, that Iyengar's work was initially inspired by the work done by cognitive psychologist, George Miller who argued that the number of objects that an individual can keep in his working memory is seven, plus or minus two. Thus if an individual is presented with a greater number of items, he is likely to forget them, jumble them, and have difficulty in working with them simultaneously.

Yet another psychologist, Barry Schwartz has conducted a great deal of research on this topic. Through his findings, Schwartz made a distinction between two different kinds people "maximizers" (those who always aim to make the best possible choice) and "satisficers" (those who aim for "good enough," whether or not better selections might be out there).

Next, Schwartz and his colleagues composed a set of statements "the Maximization Scale" to diagnose people's propensity to maximize. They had several thousand people rate themselves from 1 to 7 (from "completely disagree" to "completely agree") on such statements as "I never settle for second best." Their sense of satisfaction with their decisions was also evaluated. Results showed that people who score highest on the test--the greatest maximizers--engage in more product comparisons than the lowest scorers, both before and after they make purchasing decisions, and they take longer to decide what to buy. When satisficers find an item that meets their standards, they stop looking. But maximizers exert enormous effort reading labels, checking out consumer magazines and trying new products. They also spend more time comparing their purchasing decisions with those of others.

It was found that the greatest maximizers are the least happy with the fruits of their efforts. When they compare themselves with others, they get little pleasure from finding out that they did better and substantial dissatisfaction from finding out that they did worse. They are more prone to experiencing regret after a purchase. They also tend to brood or ruminate more than satisficers do.

Does it follow that maximizers are less happy in general than satisficers? Barry Schwartz and his colleagues tested this by having people fill out a variety of questionnaires known to be reliable indicators of well-being. As might be expected, individuals with high maximization scores experienced less satisfaction with life and were less happy, less optimistic and more depressed than people with low maximization scores. Indeed, those with extreme maximization ratings had depression scores that placed them in the borderline clinical range.

Through the above research it is evident that the relationship between choice and satisfaction is a complex one. It cannot be said with certainty that having restricted choices will benefit us. Being able to choose is extremely important. However what we now know is that, as the number of choices increase, the benefits we derive from these choices start to level off and at some point may even decline. We get exhausted at the sheer number of choices, thus resulting in a much longer, less satisfying and less decisive decision making process. This finding has implications in numerous fields including those of advertising, marketing and even politics.

So, we come back to what our grandparents have repeatedly told us, “In our time we had few choices. Our life was simple, but we were happy” Guess our grandparents really do know best!

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