

# RAYS OF HOPE

A collection of mental health stories



## आशाका किरण

मानसिक स्वास्थ्य कथा संग्रह



*Fullness of life for all, in a transformed Nepali society*

# INTRODUCTION

Dear Reader,

The fact that you are holding this case story compilation in your hands is a matter of special joy for us.

You are helping us demonstrate the rays of hope hidden behind clouds of stigma and discrimination surrounding the area of mental health.

These case stories have been gathered between 2012-2015, while implementing the Improving Access to Mental Health Services in Nepal project in five out of seven UMN Clusters (Doti, Bajhang, Rupandehi, Rukum, Dhading). Through this booklet we are trying to make an effort to present stories of individuals that would shed light on the treatability of mild to moderate conditions of mental illness. Alongside this, we are looking into the possibility of reintegration of those who are abandoned by family and or society and letting the rays of hope shine through the clouds.

These are true accounts of cases as narrated to the collectors by the subjects of the stories themselves. (Consent has been acquired for printing and circulation.)

Thank you.

**Shristee Lamichhane**

Programme Manager–Mental Health

United Mission to Nepal

## भूमिका

प्रिय पाठक,

वास्तवमा भन्नु पर्दा, विभिन्न घटनाका कथाहरूको यो संगालोलाई तपाईंको हात सम्म पुऱ्याउन पाउनु हाम्रो निम्ति अत्यन्तै खुसीको कुरा भएको छ । मानसिक स्वास्थ्यको क्षेत्रमा व्याप्त लाञ्छना र भेदभावको बादल भित्र लुकेर रहेका आशाका किरणहरूलाई प्रदर्शन गर्न तपाईंले हामीलाई सहयोग गरिरहनु भएको छ ।

यी कथाहरू 'नेपालमा मानसिक स्वास्थ्य सेवा प्रतिको पहुँचमा सहजता' योजनालाई यू.एम.एन.का सात मध्ये पाँच वटा क्लष्टरहरूमा (डोटी, बझाङ, रूपन्देही, रूकुम, धादिङ्ग) लागु गर्ने क्रममा सन् २०१२-२०१५ को बिचमा संग्रहित गरिएका हुन् । यो पुस्तिकामा भएका विभिन्न व्यक्तिका कथाहरूको माध्यम द्वारा, सामान्य देखि मध्यम अवस्थामा रहेका मानसिक रोगहरूको उपचार सम्भव छ, है भन्ने सन्देश पुऱ्याउन हामी हरतरहले प्रयास गरिरहेका छौं । यसको साथसाथै, हामीहरू परिवार तथा समाजद्वारा त्यागिएकाहरूलाई पुनर्स्थापना गर्न सकिने सम्भावनाहरू पनि खोजिरहेका छौं ताकि आशाका किरणहरू बादल छिचोलेर हामी माझ छरिन सकोस् ।

प्रस्तुत गरिएका कथाहरू भुक्तभोगी स्वयं द्वारा संग्रहकर्ताहरूलाई बताइएका सत्य घटनाहरू हुन् । (प्रकाशन र वितरणका निम्ति स्वीकृति प्राप्त गरिएको) ।

धन्यवाद ।

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रमेश महर्जन

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वेब साइट: [www.umn.org.np](http://www.umn.org.np)

इमेल: [umn@umn.org.np](mailto:umn@umn.org.np)

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# FOREWORD

Dear Reader,

I would like to congratulate UMN's Health Team and the Mental Health Project for their contribution in the area of mental health. An under-addressed area as it is, the efforts put forth by UMN's Mental Health Project has been commendable in enabling the poorest people living under poverty to receive mental health services from their local health facilities and raise awareness against the stigma attached to mental illnesses.

The compilation of case stories of recovery experienced by individuals living with mental illnesses have been very encouraging. It also celebrates "the helping hands" in our communities, whose small efforts have brought immense changes in the lives of people who were suffering not only from the illness but also from the stigma and the discrimination associated with it. These "helping hands" have sometimes been the health workers, Female Community Health Volunteers (FCHV) and interestingly, family members and even the previous patients trying to get others out of their suffering after having recovered themselves. It is heartwarming to read these stories of hope - Hope in mental health, hope for a happier and healthier future and hope for families. I am sure these cases of recovery will be successful in getting the wonderful message across that mental illnesses can be treated and managed. I would like to thank everyone who has contributed in publishing this booklet, including the people who have agreed to publish their stories.

I hope these stories will fulfill its purpose in bringing hope and lasting changes in the lives of people whom we seek to serve.

**Dhana Lama**

Programme Director

United Mission to Nepal

## भनाई

मानसिक स्वास्थ्यको क्षेत्रमा यू.एम.एन. को स्वास्थ्य समूह तथा मानसिक स्वास्थ्य परियोजनाले पुऱ्याएको योगदानको निम्ति म उहाँहरूलाई बधाई दिन चाहन्छु । अत्यन्तै कम मात्र ध्यान पुग्नसकेको यो मानसिक स्वास्थ्यको क्षेत्रमा यू.एम.एन.को मानसिक स्वास्थ्य परियोजनाले गरिवीको रेखा मुनि रहेका मानिसहरूलाई स्थानीय स्वास्थ्य केन्द्रहरूको माध्यमबाट मानसिक स्वास्थ्य सेवा माथि पहुँच पुऱ्याउन र मानसिक रोगसँग जोडिएको लाञ्छनाका विरुद्ध चेतना जगाउन गरेको अथक प्रयास प्रशंसनीय छ ।

मानसिक रोग लागेका विभिन्न व्यक्तिहरूका भोगाई र स्वास्थ्य लाभका कथाहरूको यो संगालो धेरै उत्साहपूर्ण छ । यसले हाम्रो समुदायमा भएका "सहयोगी हातहरू" जसका स-साना प्रयासले रोगका कारणले मात्र नभएर यस रोगसँग सम्बन्धित लाञ्छना र भेदभावपूर्ण व्यवहारका कारण पिल्सिएका मानिसहरूको जीवनमा ल्याएका ठुला परिवर्तनहरूको बखान गर्दछ । कहिले काहीं स्वास्थ्य कार्यकर्ताहरू, सामुदायिक महिला स्वयंसेविकाहरू (एफ.सी.एच.भी.) र रोचक कुरा त,

## विषय सूची

परिवारका सदस्यहरू र भुतपूर्व विरामीहरू जो आफू ठिक भइसकेपछि अरूलाई पनि यो दुःखबाट बाहिर निकाल्न प्रयास गर्छन्, उनिहरू नै यी “सहयोगी हातहरू” बनेका छन् । आशा जगाउने यी कथाहरू पढ्दा सुखद अनुभूती हुन्छ, जहाँ मानसिक स्वास्थ्यमा आशलाग्दो अवस्था, खुसी र स्वस्थ भविष्य र परिवारहरूको निम्ति आशा पलाएको देख्न सक्छौं । मलाई विश्वास छ, स्वास्थ्य लाभ पाएका यी कथाहरूले मानसिक रोगको उपचार छ र यसलाई व्यवस्थापन गर्न सकिन्छ भन्ने शुभ सन्देश सबैतिर फैलाउन सफल हुनेछन् । आफ्नो कथा प्रकाशन गर्न सहमत हुनुहुने महानुभावहरू लगाएत यो पुस्तिका प्रकाशन गर्न योगदान पुऱ्याउनुहुने सबैलाई म धन्यवाद ज्ञापन गर्न चाहन्छु ।

म आशा गर्छु, यी कथाहरूले हामीले सेवा पुऱ्याउन चाहेका मानिसहरूको जीवनमा आशा जगाउने र दिगो परिवर्तनहरू ल्याउने उद्देश्य पूरा गर्नेछ ।

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# ALCOHOL WITHDRAWAL SYNDROME DISAPPEARS

Nanda Raaj Bohara lives in Mudegaun, Doti district. He is 40 years old and a father of two sons and two daughters. He had a shop but he wasn't able to earn enough to cover its costs and things were not going well. This made him depressed and he started drinking alcohol.

Gradually he got into a habit drinking every day. He used to beat his children and lose his temper for no reason. He would start trembling and behaving abnormally if he missed his drink for even a day. He was treated for alcohol dependency, after which he was fine for some time.

However, a month later he started suffering from another strange problem. He used to hear different sounds and voices instructing him to do things. Once at midnight, he got up and went out saying that someone had called him. After a few days, again the voice came in his ear telling him to go to a jewellery shop and collect the ring his mother had ordered. He went to the shop and fought with the shop keeper about the order only to be informed by his mother that she had not placed such an order. According to him, he used to hear the voice in his ear which regularly instructed him to do odd things. This made him appear abnormal in front of the villagers, so they called him mad. He was very tensed and worried about his behaviour.



One day during his visit to the Health Post, he talked about his problem with the health worker. Upon further investigation, it was diagnosed that he had Alcohol Withdrawal Syndrome. Thanks to the Health Post in-charge who counselled and treated him, after a few days the voice disappeared and he started living a normal life. Now he is a member of the trauma healing group run by CEAD Nepal, in co-ordination with UMN.

Nanda Raaj said "After I became the member of the trauma healing group, I recovered and feel better. Now no one calls me mad."

## मदिरा सेवनका लक्षण हराए गए

नन्द राज बोहोरा डोटी जिल्ला स्थित मुढेगाउँमा बस्छन् । दुई छोरा र दुई छोरीका बाबु उनी ४० वर्षका भए । उनले धेरै लगानी गरेर खोलेको पसल पनि राम्रो सँग चलिरहेको थिएन । त्यस कारणले गर्दा उनी निराश भई मदिरा सेवन गर्न थाले ।

विस्तारै बानी बस्दै गएर उनी दैनिक रूपमा मदिरा सेवन गर्न थाले । विना कारण रिसाउने र छोराछोरीलाई पिट्ने गर्न थाले । उनका हात खुट्टा सुन्निल थाले । कुनै दिन पिउन नपाउँदा काम्ने र अस्वभाविक व्यवहार देखाउन थाले । बीचमा केही समय मदिरा निर्भरता हटाउने उपचार गराए पछि, केही समयका लागि सामान्य पनि भएका थिए ।

एक महिना पछि भने उनमा अर्को समस्या देखिन थाल्यो, उनले विभिन्न आवाज र बोलीहरू सुन्न थाले । एकपटक मध्यरातमा कसैले बोलाएको भन्दै उनी उठेर बाहिर समेत गएका थिए । केहीदिन पछि फेरि त्यो आवाजले गहना पसल गएर आमाले बनाउन दिएको औंठी ल्याउन निर्देशन दियो । त्यही कारणले गर्दा पसलका व्यक्तिसँग भगडा गरे तर पछि थाहा पाए उनकी आमाले केही पनि बनाउन दिएकी रहिनछिन् । उनका अनुसार ती आवाजहरूले उनलाई अनौठा काम गर्न लगाउँदथे र उनले त्यसै गर्दथे जसका कारण गाँउलेहरूले उनलाई पागल भन्ने गर्दथे । उनी आफै पनि आफ्नो व्यवहारबाट चिन्तित् थिए ।

एकदिन स्वास्थ्य चौकी गएको बेला स्वास्थ्यकर्मीसँग आफ्नो समस्या राखे । परिक्षण पछि उनलाई मदिरा निर्भरता भएको थाहा भयो । स्वास्थ्य चौकी प्रमुखले गरेको मनोविमर्शले गर्दा उनले ती आवाज सुन्न छाडे र पुनः सामान्य जीवन जिउन थाले । अहिले उनी यू.एम.एन. र सि.इ.ए.डि. नेपालले सञ्चालन गरेको आघात व्यवस्थापन समूहमा सदस्य पनि भएका छन् ।

नन्द राज भन्छन्, "यस आघात व्यवस्थापन समूहमा सदस्य भएदेखि पहिला भन्दा राम्रो महसुस गर्छु । अब कसैले मलाई पागल भन्दैनन् ।"

## ELDERLY, VULNERABLE, AND WAITING FOR A CURE

A review of UMN's Mental Health Programme in Majhigaun was in progress. One of the participants, an old lady, was sitting on one of the benches, and seemed completely uninterested in the programme. Perhaps it was because of old age, or maybe something else was bothering her, I guessed. Later, while people were allotted to groups to discuss the challenges, achievements and opportunities, Hema Kadayat, a lady attending the meeting, called me to come and sit near her. She wanted to seek remedies for the problem she faced, this old lady who was so distracted.

Goma Kadayat, aged about 70, has three sons and one daughter. She lost her husband some 15-16 years ago. Hema Kadayat is her daughter-in-law, speaking on behalf of old Goma. A few years ago, this grandmother started forgetting things, but her family overlooked this for a long time. But now it has passed the limit, as the results are affecting everybody including Hema. "She forgets everything, walks away even when I ask her to stay at home till I return, chains up the goats belonging to other people, takes away the utensils from home and forgets where she put them, takes away her clothes, and defecates anywhere she likes against our strict direction," explained Hema in an irritated tone. The problems she faced on a daily basis are not easy to deal without affecting the caregivers. Intending to gather first-hand information from the grandmother herself, I asked her several questions. She didn't respond to a lot of questions. But she requested in a voice difficult to comprehend: "Mukhi niko hune Okhto lyaau, niko gara" (Give me effective medicines, cure me') in Bajhangi dialect.

It was revealed that they had sought the help from a psychiatrist at Chainpur (the district center) at a camp organised by PYS (UMN's local partner), Maryknoll Nepal and the District Health Office. But the medicines, once finished, were not available in Bajhang – not even the district headquarters – after the camp. While she was taking the medicines, under its effects she used to stay where she was, hanging her head.

I told them that I didn't have the "niko hune okhto" (the effective medicine); and as the psychiatrist had said that this case of dementia had no better prognosis, all I could do was suggest Hema, if feasible, seek advice from a psychiatrist in Dhangadhi (a major town several hours' journey away). A psychiatrist is available once a month there. But I had to tell her to take care of her like an 'old baby', considering we might be facing the same circumstances in our old age. I thanked her for her perseverance, support and the exceptional care she was providing to her grandmother. I realised it wasn't the cure they were looking for; a lot of the families in villages with similar problems are looking for a cure for the conditions like this. Sadly they will have to wait some more years before somebody can provide a proper cure in their villages.



## उपचारको पर्खाइमा एक वृद्धा

चिमाभी गाँउमा यू.एम.एन.को मानसिक स्वास्थ्य कार्यक्रमको पुनरावलोकन भइरहेको थियो । एउटा बेन्चमा एकजना वृद्ध महिला कार्यक्रममा कुनै रुचि नराखी बसिरहेकी थिइन् । मेरो विचारमा, शायद वृद्धा अवस्थाले हो वा अरु कुनै कारणले हुनसक्छ । पछि, उपस्थित सबैलाई समूहमा विभाजित गरी चुनौती, अवसर र उपलब्धिको बारेमा छलफल गर्न लगाइयो । एकजना सहभागी हेमा कठायतले मलाई उनको नजिकै बोलाइन् र बस्न भनिन् । उनी आफ्नो समस्याको समाधान चाहन्थिन् ।

गोमा कठायत ७० वर्षकी भइन् । उनका तिन छोरा र एक छोरी छन् । करिब पन्ध्र सोह्र वर्ष अगाडि नै उनको श्रीमानको मृत्यु भइसकेको थियो । हेमा कठायत, यिनै गोमा कठायतकी बुहारीले उनको सट्टामा बोलिन् । केही वर्ष अगाडि देखि यी हजुरआमाको बिसर्ने समस्या सुरु भयो तर उनको परिवारले धेरै समय त्यसबारे वास्ता गरेनन् । तर, जब उनको व्यवहारले सीमा नाघ्न थाल्यो, तब यसले सबैलाई गाह्रो पर्नथाल्यो ।

हेमाले चिहिएको आवाजमा भनिन्, "उहाँ सबैकुरा बिसर्नु हुन्छ, मैले म नआउञ्जेल घरमै बस्नु भन्दा पनि हिँड्नु हुन्छ, अर्काको बाखा बाँध्ने, घरको भाँडाकुँडा कता-कता राखेर बिसर्ने, आफ्नो लुगा निकाल्ने, जति भनेपनि जहाँ पायो त्यहीँ दिसा गर्ने गर्नुहुन्छ ।"

गोमाले दैनिक जिवनमा भोगेका समस्याहरूले स्याहारकर्तालाई पनि असर गर्दछन् । उनको बारेमा ठिक जानकारी पाउन मैले हजुरआमासँगै प्रश्न गर्नथालें । उनले धेरै प्रश्नका जवाफ दिइन् । तर उनले बुझ्न गाह्रो हुने आवाजमा बभ्काङ्गी पारामा उनले भनिन्, "मुखी निकोहुने ओख्तो ल्याऊ, निको गर (मलाई निको हुने औषधि ल्याउ, अनि निको पार) ।"

यो पत्ता लाग्यो कि उनीहरूले चैनपुर (सदरमुकाम)मा पि.वाइ.एस. (यू.एम.एन.को साभेदार) मेरीनोल नेपाल र जिल्ला स्वास्थ्य कार्यालयले आयोजना गरेको शिविरमा मनोचिकित्सकलाई समेत देखाएका थिए । तर औषधि सकिएपछि बभ्काङ्गमा कतैपनि पाईएन । औषधि प्रयोग गरुञ्जेल उनी एकै ठाउँमा शिर झुकाएर बस्दथिन् ।

मैले उनलाई मसँग "निको हुने ओख्तो नभएको बताएँ अनि मनोचिकित्सकले बाहेक अरूलाई यस बिसर्ने रोग अर्थात डिमेन्सियाको अनुमान गर्न गाह्रो हुने भएकाले मैले गोमालाई धनगढीमा मनोचिकित्सककाहाँ लैजाने सल्लाह दिएँ । महिनाको एक पटक त्यहाँ मनोचिकित्सक सेवा दिइन्छ । मैले उनलाई हामीमा पनि वृद्ध अवस्थामा त्यस्तै समस्या आउन सक्ने हुनाले हजुरआमालाई वृद्ध बच्चालाई भैं स्याहार गर्ने सल्लाह दिएँ । मैले उनलाई उनको हजुरआमा प्रति निरन्तर स्याहार र हेरचाहको लागि धन्यवाद दिएँ । मलाई लाग्यो उनीहरूले खोजेको समाधान त्यो थिएन । गाउँमा धेरै परिवार त्यस्तै समस्याको समाधान खोजिरहेका छन् तर दुःखको कुरा, कुनै विशेषज्ञले गाउँमा नै उपचार सेवा सुरु नगरेसम्म उनीहरूले अबै केही वर्ष कुनैपनि छैन ।

## FAITH IN A CURE

Nakul Koirala, 15, is a student at Palpa Bhanjyang Lower Secondary School of Murali Bhanjyang. He has two sisters and one brother. His sisters and a brother go to a private school whereas he goes to a government school. He is happy with this.

Nakul's family was happy when he was born, but one-and-a-half years later this happiness vanished. Nakul started falling unconscious, shivering and frothing at the mouth, and his parents had no idea about what these signs and symptoms were about. His problem remained untreated for 11 years. His fits grew in severity, occurring five to six times a day, and proper growth was also hindered. He used to get attacks anytime, anywhere. Therefore, his parents had to keep someone with him all the time. He was losing weight; he was losing his interest in studies.



Nakul's parents took him to traditional healers to seek treatment for him. They invested a lot of money in it. Around the same time, Jagat Jyoti Community Development Society (JCDS Nepal) implemented a project called Increasing Access To Mental Health Project (IMH) and oriented female community health volunteers (FCHVs) about it. After that two-day orientation programme, one FCHV brought Nakul to Murali Bhanjyang Health Post to see if he could be treated. In July 2013, he was sent to Kathmandu for treatment. Only after that was Nakul's case diagnosed as epilepsy, and treatment was started.

Now, Nakul is returning to a normal growth process. He is gaining height and weight according to his age. The epileptic attacks are also decreasing. Seeing this improvement in Nakul's health, his parents are happy. He is regularly taking his medicines and his parents also supervise him. Nakul is happy too. He desires to improve his studies and be successful. Nakul now understands that epileptic patients can also achieve success if they continue medication and receive their parents' support. He has faith that he will be cured.

## उपचारमा विश्वास

पन्ध्र वर्षीया नकुल कोइराला मुरली भञ्ज्याङ स्थित पाल्पा भञ्ज्याङ निम्न माध्यमिक विद्यालयमा अध्ययनरत छन् । उनका दुई बहिनी र एक भाइ छन् । उनका भाइ बहिनी निजी विद्यालयमा अध्ययन गर्छन् तर उनी सरकारी विद्यालय जान्छन् । उनी यस कुरामा खुसी नै छन् ।

नकुलको जन्म हुँदा उनको परिवार निकै खुसी थिए तर त्यसको डेढ वर्षमा नै त्यो खुसी हराएर गयो । नकुल काम्ने, बेहोश हुने र मुखबाट फिँज निकाल्ने जस्ता लक्षण देखाउने गर्दा तर उनको परिवारलाई त्यसको कारण थाहा थिएन । उनको समस्या ११ वर्ष सम्म पनि उपचार विना नै रह्यो । उनका लक्षणहरू बढ्दै गए र उनको वृद्धि विकासमा पनि समस्या पर्न थाल्यो । जति बेला जहाँ सुकै पनि लक्षण देखापर्न थाले । त्यसैकारण उनका अभिभावकले सधैं उनका साथ कोही व्यक्ति राख्ने गर्दथे । उनको शरीरको तौल र पढ्ने इच्छामा पनि ह्रास आउन थाल्यो ।

नकुलका बाबु आमाले उपचारको लागि धेरै पैसा खर्च गरे र उनलाई धामी भाँकी कहाँ सम्म पनि लिएर गए । त्यही बेला जगत ज्योती समुदायिक विकास समाजले “मानसिक स्वास्थ्यमा बढ्दो पहुँच” नामक परियोजना लागु गरी स्वास्थ्य स्वयंसेविकाहरूलाई त्यस सम्बन्धी अभिमुखिकरण तालिम दियो । दुई दिनको अभिमुखिकरण कार्यक्रम पछि एक जना स्वास्थ्य स्वयंसेविकाले नकुललाई मुरली भञ्ज्याङ स्वास्थ्य चौकीमा उपचारका लागि ल्याइन् । उनलाई छारे रोग रहेको पत्ता लागेपछि उनको उपचार शुरू भयो ।

अहिले नकुलको स्वास्थ्य अवस्था सामान्य हुँदै गइरहेको छ । निरन्तर औषधि प्रयोगले छारे रोगका लक्षणहरू पनि घट्टै गइरहेका छन् । यो देखेर नकुल र उनका परिवार निकै खुसी छन् । उनी राम्रोसँग पढेर सफल व्यक्ति बन्न चाहन्छन् । नकुलले परिवारको साथ र निरन्तर औषधि सेवनले छारे रोग निको हुने कुरा बुझेका छन् । उनलाई विश्वास छ उनी निको हुने छन् ।

# FROM A STATUE TO A LOVING MOTHER

Gita Mallah is now 39 years old and she lives in Dhakdhai, Rupandehi. She is a Community Female Health Volunteer (FCHV) by profession. She has a husband, two sons, two daughters-in-law and one granddaughter. One of her sons is in foreign employment. She has a small plot of land for agricultural activities. Gita's family was a small, happy one.

But her happiness did not remain for long. She faced what she called "invisible problems". She had frequent nightmares, restlessness, anxiety and fear. She experienced confusion in every waking moment. Being a Female Community Health Volunteer (FCHV) herself, she decided to approach the health workers at the Dhakdhai Primary Health Centre to discuss her situation. She had also heard about some similar mental health problems during the mental health project orientation. Trained staff of Dhakdhai Health centre quickly diagnosed her problem as anxiety disorder. Through the discussions in the counseling session, it was discovered that the reason for her anxiety was her husband's recent activities. He had started to work with someone who was a third gender person and Gita, being a traditional rural woman, was worried about it. She also had thoughts about her husband leaving her for someone else.

The health worker prescribed some medicine and counseling was provided. She started to take the medicine and regularly attended the follow-up counseling sessions. After three months' treatment, she gradually recovered. Now her daughter says: "My mother was like a statue before;



she would not respond at anything. But now she is very loving, and after this treatment for mental health, is now my own mother again."

Gita has now started referring other suspected cases of mental illness to the Dhakdhai Health Centre for mental health services as she goes about the community in her role as a FCHV.

## मूर्ति देखि मायालु आमासम्म

३९ वर्षीय गीता मल्ल धकधई रुपन्देहीमा बसोबास गर्छिन् । उनी पेशाले सामुदायिक महिला स्वास्थ्य स्वयंसेविका हुन् । उनका श्रीमान, दुई छोरा, दुई बुहारी र एक नातिनी छन् । उनका एक छोरा वैदेशिक रोजगारका लागि विदेशिएका छन् । उनीसँग कृषि गर्नका लागि सानो टुका जग्गा छ । गीताको सानो तथा सुखी परिवार थियो ।

तर उनको खुसी धेरै दिन रहन सकेन । उनको भाषामा भन्दा उनले "अदृश्य समस्या" भोग्नु पथ्यो । उनलाई निरन्तर नराम्रा सपनाहरू आउने, मन अस्थिर रहने, चिन्ताले घेर्ने तथा डर लाने जस्ता समस्या हुन थाले । विहान उठ्दा एक प्रकारको अन्त्योलताले घेरेको हुन्थ्यो उनलाई । उनी आफैँ सामुदायिक महिला स्वास्थ्य स्वयंसेविका भएका कारण उनले आफ्नो समस्या धकधई प्राथमिक स्वास्थ्य केन्द्रका स्वास्थ्यकर्मी माझ राख्ने निधो गरिन् । उनले यस्ता मानसिक स्वास्थ्य समस्याका बारेमा मानसिक स्वास्थ्य परियोजना अन्तर्गतका अभिमुखीकरण कार्यक्रममा सुनेकी थिइन् । धकधई प्राथमिक स्वास्थ्य केन्द्रका तालिम प्राप्त कर्मचारीहरूले उनको समस्या धेरै चिन्ताका कारण हुने Anxiety disorder नामक मानसिक समस्या हो भनी पहिचान गरे । मनोविमर्शका क्रममा भएको कुराकानीबाट उनको समस्याको कारण उनको श्रीमानको हालको क्रियाकलाप रहेछ, भन्ने निष्कर्ष निस्कियो । उनका श्रीमान् भर्खरै मात्र एक तेस्रो लिङ्गीका साथ काम गर्न थालेका थिए । गीता परम्परावादी ग्रामीण महिला भएका कारण यस विषयमा धेरै चिन्ता लिन थालिन् । श्रीमान्ले अरूका लागि आफूलाई छोड्ने हो कि भन्ने विचारहरू उनको मनमा आउन थालेका थिए ।

स्वास्थ्य कार्यकर्ताले केही औषधि दिनुका साथै मनोविमर्श सेवा समेत प्रदान गरे । उनले नियमित रूपमा औषधि सेवन गर्ने तथा निरन्तर मनोविमर्श सत्रमा भाग लिने गरिन् । तीन महिनाको उपचार पछि उनी विस्तारै ठिक हुँदै गइन् । अहिले उनकी छोरी भन्छिन् "मेरी आमा पहिले मूर्ति जस्तै हुनु भएको थियो, कुनै कुराको पनि प्रतिक्रिया जनाउन छोड्नु भएको थियो । तर अहिले धेरै मायालु हुनुभएको छ । यस मानसिक उपचार पश्चात् उहाँ फेरि हामी पुरानै आमा हुनुभएको छ ।"

अहिले गीता समुदायमा मानसिक रोग जस्ता देखिने समस्याहरूलाई प्राथमिक स्वास्थ्य केन्द्रमा उपचारका लागि पठाउने गर्छिन् । उनी अहिले सामुदायिक महिला स्वास्थ्य स्वयंसेविकाको रूपमा समुदायमा क्रियाशिल छिन् ।



## GOD IN DISGUISE

Could the evil spirit that had possessed Hari Kewat (*name changed*) could be warded off by these health workers? The traditional healers had already tried their luck and failed so many times. After having tried all means known to them, Hari's family brought him to the Dhakdhai Health Centre, with a lot of apprehension in their minds and hearts about whether the health workers could treat him.

Considering the symptoms Hari Kewat that had exhibited for the last year, it was quite understandable for the family members to be both worried and scared. He was very aggressive and in the beginning, making him take the drugs was an arduous task for the family. But thanks to his family's persistence, they made sure the medication regime was adhered to without failure and thus he gradually improved.

It's been a year now since he started taking the anti-psychotic drugs and this is what his father has to say today: "I think the person who had suggested that I take Hari to the Health Center for treatment was God in disguise. Because of him, my son is living a happy and normal life."



According to other family members, Hari used to shout at people, hit them and sometimes he even killed livestock (goats or chickens) without any reason. Now they trust him and love him because Hari also loves and respects them. He has started to work in the fields too and is involved in other tasks with the community. All family members and neighbours are happy with his recovery. They are grateful to the Dhakdhai Health Centre staff for mental health services, which are supported by SCDC-R and UMN.

Hari himself said: "I don't know what I did before. It is very hard for me to remember, but now I am feeling well. My family members are also helpful; I am taking medicine regularly and the health person has suggested that I continue treatment for a longer time."

## भगवानको रूप

के हरि केवललाई (नाम परिवर्तन) दुःख दिने यी आत्मा, स्वास्थ्यकर्मीको सहयोगले भाग्लान् त ? धामी भाँक्रीले धेरै प्रयास गरिसकेका थिए तर केही असर भएको थिएन । जानेको जति सबै तरिकाबाट उनलाई उपचार गर्दा पनि केही असर भएन त्यसैले स्वास्थ्यकर्मीले उपचार गर्न सक्लान् वा नसक्लान् भन्ने धेरै शंका र डरसँगै हरिलाई धकधई स्वास्थ्य चौकी ल्याइयो ।

हरिले विगत एक वर्षमा देखाएका लक्षण हेर्दा परिवारको शंका र डर जायज थियो । हरि सुरुमा धेरै रिसाउँदथे त्यसैले उनको परिवारलाई उनलाई औषधि खुवाउन गाह्रो पर्दथ्यो । तर उनको परिवारले दृढ निष्ठाकासाथ उनलाई निरन्तर रूपमा औषधि दिए र उनको अवस्थामा सुधार आउन थाल्यो ।

हाल हरिले मानसिक विरामीको औषधि प्रयोग गरेको एक वर्ष वितेको छ, र उनका बुवा भन्छन्, "मलाई हरिलाई स्वास्थ्य चौकी लैजान सल्लाह दिने व्यक्ति ईश्वरको रूपमा आए, उनैको कारणले आज मेरो छोरा खुशी र सामान्य जीवन बाँचीरहेको छ ।"

हरिका परिवारका अनुसार, उनी विना कारण अरूलाई कराउने, पिट्ने, खसी-कुखुरा मार्ने काम गर्दथे । अहिले उनीहरू नारदलाई माया र विश्वास गर्दछन् । हरि पनि परिवारलाई माया र सम्मान गर्दछन् । उनी खेतमा र समुदायका विभिन्न कार्यमा संलग्न हुन थालेका छन् ।

परिवारका सबै सदस्य र छिमेकी हरिको अवस्थामा आएको सुधार देखेर खुसी छन् । उनीहरू धकधई स्वास्थ्य चौकीको कर्मचारीले एस.सि.डि.सि.आर र यू.एम.एन.को सहयोगमा प्रदान गरेको मानसिक स्वास्थ्य सेवा प्रति आभारी छन् ।

हरि भन्छन्, "मलाई थाहा छैन विगतमा मैले के गरेँ । मलाई सम्झन गाह्रो हुन्छ तर अहिले म राम्रो महसुस् गरिरहेको छु । मेरा परिवारका सदस्यहरू धेरै सहयोगी छन् । म निरन्तर औषधि सेवन गर्दछु र स्वास्थ्यकर्मीले अझै लामो समयसम्म उपचार गराउन सल्लाह दिएका छन् ।"

## WHO IS HE ?

No one knows who is he, or where he came from. From his appearance, villagers guess him to be around 35 years old. He walks around Taribesi and Khare villages in Dhading, talking to himself. The local people gave him a name, Mithun. Someone said that he lived in Khahare and left the place when he started wandering around, due to his severe mental illness. The people in the community wanted to help him to find his home, but they were unable to. Mithun (*name changed*) lived in the street and ate food thrown there. Although community people talked about him and wanted to help him, they didn't know how.

UMN's partner JCDS is working in that area in mental health. It conducted various awareness programmes about mental health and illness in the community. Stakeholders and Health Facility Management Committee members learned about mental illness, and they became curious about



the condition of Mithun. There was discussion about him in the monitoring visit done by a UMN representative. It was difficult to treat him in Kathmandu, because he has no known family. So the decision was made to treat him locally. They diagnosed that he was suffering from psychosis. Food was arranged at a local hotel, through the generosity of an individual donor. The hotel owner also agreed to monitor his medication under the supervision of the in-charge of the Tripushwor health post and JCDS. After two months, his condition had improved. Now he mostly stays in one place, listens to what is said to him and is able to give answers to the questions asked by villagers. Local people are happy to see the changes in his behaviour and health. Now-a-days he looks cleaner, as he is able to maintain his personal hygiene. His daily life is changed, but he still needs higher-level consultation to make a complete recovery.

## को हुन् उनी ?

कसैलाई थाहा थिएन उनी को हुन् र कहाँ बाट आएका हुन् । उनलाई हेर्दा उनी करिब ३५ वर्षका जस्ता देखिन्थे । उनी धादिङको तारीबेसी र खरे गाँउमा आफैसँग बोल्दै हिँडेको देखिन्थ्यो । स्थानीयले उनलाई मिथुन नाम दिएका थिए । कसैले उनी खहरे गाँउको वासिन्दा रहेको र मानसिक रोग लागेपछि घर छोडेर हिँडेको बताएका थिए । स्थानीयले उनको घर पत्ता लगाउने कासिस गरेतापनि सकेका थिएनन् । मिथुन (नाम परिवर्तन) सडकमा बस्दथे र फालिएको खाना खाने गर्दथे । समुदायका व्यक्तिहरू उनलाई चाहेर पनि सहयोग कसरी गर्ने भनेर अलमल्ल थिए ।

यू.एम.एन.को साभेदार संस्था जे.सि.डि.एस. सोही क्षेत्रमा कार्यरत छ । उक्त समुदायमा त्यस संस्थाले मानसिक स्वास्थ्य र समस्या सम्बन्धी जनचेतना कार्यक्रमहरू आयोजना गरेको थियो । जब त्यस समुदायका सरोकारवाला र स्वास्थ्य सेवा व्यवस्थापन समिति सदस्यहरू मानसिक स्वास्थ्य समस्याको विषयमा सम्बन्धी सचेत भए तब उनीहरू मिथुनको अवस्थाबारे जिज्ञासा राख्न थाले । यू.एम.एन.बाट अनुगमन भ्रमण जाँदा त्यसबारे छलफल भयो । उनको पारिवारिक अवस्था अज्ञात भएका कारण उनलाई उपचारका लागि काठमाडौँ ल्याउन नमिले पछि उनलाई समुदायमै राखेर उपचार गर्ने निर्णय भयो । उनलाई मानसिक रोग लागेको निश्चित भएपछि समुदायमा एक दाताले उनलाई खानाको व्यवस्था नजिकैको होटलमा मिलाइ दिए । होटल मालिकले त्रिपुस्वर स्वास्थ्य चौकी प्रमुख र जे.सि.डि.एस. को निरीक्षणमा निश्चित समयमा औषधि दिने निर्णय भयो । दुई महिना पछि, हाल उनको अवस्थामा सुधार आएको छ । अहिले उनी एकै ठाँउमा बस्छन् र उनलाई भनेका कुरा सुन्ने र जवाफ दिने पनि गर्दछन् । उनको स्वास्थ्य र व्यवहारमा आएको परिवर्तन देखेर स्थानीय खुसी छन् । आजभोलि उनी सफा भएर बस्छन् र उनको दैनिकी बदलिएको छ । तर उनलाई अबै पनि पूर्ण रूपमा निको हुन माथिल्लो तहको उपचार चाहिन्छ ।

## HAPPY DAYS FOR A SAD MOTHER

Chiranjivi Chand lives with his mother and sister in Khalanga. He is 26 years old and for the last six years he has been losing consciousness at times, roaming around with no particular business, would not stay at home, irritated others, talked on and on and didn't care how he was dressed, even whether he was dressed or not. He used to eat whatever he got in the market, and did not go home for food. He urinated and defecated inside the room. He started getting very weak, lost weight and ended weighing up only 49 kg. He had only his mother and a younger sister in his family, no-one who could earn money, as his father had died four years ago. It was a difficult situation for his mother to supply the needs of the family and also take care of him. Because of all these problems and the resulting stress, his mother also seemed to be at risk of mental problems.

His family tried to cure his condition with all the knowledge and resources they had. They offered many goats as sacrifices, performed rituals according to the directions of different traditional healers he was taken to. They tried everything they thought would help him, but instead of being well, his situation became worse than before. The family also reports taking him to Kathmandu two years ago for medical treatment, but still there was no change in his condition.

After the Integrated Mental Health project was implemented in Khalanga, the health worker there once again assessed his condition and thereafter recommended to NPAF (UMN's partner in Rukum) that he be admitted to rehabilitation centre for intensive, targeted treatment. Thus a year ago, with the support from UMN, he was admitted to Maryknoll Nepal - Ashadeep Centre in Kathmandu, where he was treated for three months. During this time, significant improvement was seen, and thus he was discharged and sent home with the advice to continue medication without fail for complete recovery. The family was counseled on handling his condition at home.

At first his mother used to feed him medicine, but now he takes his medicine himself, cares about his dressing, takes food on time, stays at home, reads books and has started interacting with others. Currently he is motivated to engage in small jobs. His mother is very glad to see the change in him within four months, and she happily shares that her son is much better now. She says that she never expected that medicine would bring such change in him. Their neighbours love them now and it is easy for the mother to go out for wood collection and work without worrying about her son.

"There is a God for those who have no hope," she says, and she requested that NPAF keep helping other poor and needy people like them.



## दुःखी आमाका लागि खुसीका लहरहरू

चिरञ्जीवी चन्द आमा र बहिनीका साथ खलंगामा बस्छन् । उनी २६ वर्षका भए । गएको ६ वर्ष देखि उनले आफ्नो होस हराएका छन्; केही काम विना घुमिरहन्छन्, घरमा बस्दैनन्, अरूलाई चिड्याउँछन्, धेरै बोल्छन् अनि लुगा कसरी लाउने या लुगा लाए नलाएको पनि थाहा पाउँदैनन् । बजारमा जे पाए पनि खाइदिने तथा खाना खान समेत घर जाँदैनन् । उनी कोठा मै मल मुत्र गर्छन् । उनी धेरै कमजोर भई सकेका छन् । उनको वजन घटेर ४५ किलो भइसकेको छ । चार वर्ष अगाडि बुवाको मृत्यु भएका चिरञ्जीवीका घरमा आमा र एउटी बहिनी मात्र छन् । घरमा कमाउने सदस्य समेत नरहेको परिवारमा उनकी आमालाई घरको आवश्यकता टार्न र छोराको स्याहार गर्न धेरै मुस्किल थियो । यी सब समस्याका कारण उत्पन्न भएका तनावले चिरञ्जीवीकी आमा मानसिक समस्याको जोखिममा थिइन् ।

आफूसँग भएको सम्पूर्ण ज्ञान तथा स्रोतको उपयोग गरी परिवारले चिरञ्जीवीको उपचारको प्रयास गर्‍यो । विभिन्न धामी भाँक्रीकोमा पुऱ्यायो, उनीहरूको निर्देशन अनुसार विभिन्न धार्मिक विधिहरू अपनायो, जनावरको बलि दियो । उसको उपचारमा सहयोग पुग्न सक्ने सम्पूर्ण प्रयास गर्‍यो तर दिन प्रति दिन उनको अवस्था पहिले भन्दा बिग्रँदै गयो । दुई वर्ष अगाडि उपचारको लागि काठमाडौंसम्म लगिएको पनि जानकारी परिवारले दियो । तर उनको अवस्थामा केही सुधार भएन ।

खलंगामा एकिकृत मानसिक स्वास्थ्य परियोजना कार्यक्रम कार्यान्वयन भएपछि, त्यहाँका स्वास्थ्यकर्मीले उनको अवस्थाको एकचोटी फेरि जाँच गरे र उनलाई (राष्ट्रिय जन जागरण मञ्च र यू.एम.एन.को रुकुममा रहेको) सहकर्मी संस्था)मा संस्थामा रहेको पूनर्स्थापना केन्द्रमा, लक्षित सघन उपचारका लागि भर्ना गर्न सुझाव दिए ।

अतः एक वर्ष अगाडि यू.एम.एन. को सहयोगमा काठमाडौंको मेरिनोल नेपाल-आशादीप केन्द्रमा उनलाई भर्ना गरियो जहाँ उनलाई तिन महिना उपचार गरियो । त्यहाँको उपचारबाट क्रमिक रूपमा सुधार देखिन थालेपछि उनलाई पूर्ण रूपमा निको नहुन्जेल निरन्तर रूपमा औषधि प्रयोग गर्ने सल्लाहका साथ घर पठाइयो । उनको हेरचाहका लागि परिवारलाई समेत मनोपरामर्श गरियो ।

पहिले आमाले उनलाई औषधि खुवाउनु पर्थ्यो भने अहिले उनी आफ्नो औषधि आफै खान्छन्, राम्ररी लुगा लाउँछन्, घरमै बस्छन्, समयमा खाना खान्छन् र समय समयमा पुस्तकहरू पढ्छन् । अरूसँग बातचित गर्न थालेका छन् । हालमा उनी केही काम गर्न अभिप्रेरित समेत भएका छन् । उनकी आमा चार महिनामा उनमा आएको सकारात्मक परिवर्तनले धेरै खुसी छन् र अरूसँग यस बारे खुसी हुँदै सुनाउँछन् । उनलाई औषधिले यसरी छोरो ठिक होला भन्ने लागेको थिएन । उनीहरूको परिवारलाई अहिले छिमेकीहरू पनि माया गर्छन् । उनकी आमालाई अहिले छोराको चिन्ता नगरी दाउरा सडकलन गर्न जान र काममा जान सजिलो छ ।

उनी भन्छन् "कहीं कतै आशा नदेखिएकाहरूका लागि भगवान हुँदा रहेछन् ।" उनी चाहन्छन् राष्ट्रिय जन जागरण मञ्चले उनीहरूजस्तै गरिब तथा असहायलाई सधैं सहयोग गरिरहोस् ।

# I GAINED MY LIFE AGAIN

Laxmi Khadka is a 25-year-old married woman and lives in Sanagaun Doti district, with her husband and two sons. Her husband has been working in India since 2013. Once gone, he has never returned home. She is thus worried about her husband all the time. Her worries heightened to the extent that she was not even doing her usual daily activities. She started staying alone. She used to even go to the forest to get away from everything and sit in a peaceful environment. She would not cook for the family and completely refused to interact with anyone in the entire community. She was gradually withdrawing and developing signs of depression. Seeing her changed behaviour, the neighbours started to call her mad or say that she had lost her mind.

This situation carried on for some months until one day the Female Community Health Volunteer of her ward came to know about her condition, and then convinced and helped her to visit the health facility. The health worker examined her and referred her to Kohalpur Medical College (two days' bus travel away) for further treatment. CEAD and UMN's mental health project provided for the costs. She received appropriate treatment in Kohalpur with counseling and medical care.



With proper and regular treatment and follow-up, she has regained control over her thoughts, feelings and her overall life. She has returned to her daily routine and the usual life that she lived before the illness. Her husband also contacted her, after finding out about her condition. She even attends the regular mothers' group meeting and is happy in general.

Laxmi said: "I gained my life again, and now-a-days I encourage others who are suffering like me to go to the health facility for treatment. I tell them it is treatable. I want to request others also to help people like me who are suffering from mental illness to recover their normal meaningful life."

## मैले पुनर्जन्म पाएँ

लक्ष्मी खड्का २५ वर्षीय विवाहित महिला हुन् । उनी डोटी जिल्लाको सानागाउँमा आफ्ना श्रीमान तथा दुई छोराका साथ बस्छिन् । उनका श्रीमान सन् २०१३ देखि भारतमा काम गर्ने गर्छन् । उनी पहिलो पटक गए पश्चात फर्किएका छैनन् । त्यसैले लक्ष्मीलाई श्रीमान नआएकोले धेरै तनाव हुने गर्थ्यो । उनको तनाव दिन प्रतिदिन यसरी बढ्दै गयो कि उनी आफ्ना घरका दैनिक गतिविधिहरू गर्न समेत असमर्थ हुन थालिन् । उनी एकान्तमा बस्न थालिन् । उनी एकान्त रूचाउँदै, शान्ति खोज्दै कहिले काहीँ जंगलमा गएर बस्न थालिन् । उनले घरमा परिवारलाई खाना बनाउन छोडिन्, कसैसँग बातचित समेत गर्दिनथिइन् । उनी विस्तारै सबैबाट टाढा हुन थालिन् र नैराश्यताका लक्षणहरू देखाउन थालिन् । उनको व्यवहारले उनलाई छर छिमेकले पागलको संज्ञा दिन थाले र मानसिक सन्तुलन गुमाएको भन्न थाले ।

केही महिनासम्म यो अवस्था रहिरह्यो । जब उनको वडाकी महिला सामुदायिक स्वास्थ्य स्वयंसेविकाले उनको अवस्था बारे थाहा पाइन्, उनले लक्ष्मीलाई स्वास्थ्य सेवा लिनका लागि राजी गराइन् । स्वास्थ्य कार्यकर्ताबाट उनको परिक्षण पश्चात् उनलाई दुई दिनको बस यात्रा गरेपछि पुगिने कोहलपुर स्वास्थ्य विज्ञान कलेजमा थप उपचारका लागि पठाइयो । सि.इ.ए.डी र यू.एम.एन.को मानसिक स्वास्थ्य परियोजनाले उनको उपचार खर्च प्रदान गर्‍यो । उनले त्यहाँ सही ढङ्गले उपचार पाइन् । परामर्श सेवा तथा राम्रो स्वास्थ्य स्याहार प्राप्त गरिन् ।

नियमित रूपमा भएको राम्रो उपचारका कारण उनले आफ्नो सोच, विचार र जीवनलाई नियन्त्रणमा ल्याउन थालिन् । उनी रोग लाग्नु अघिको पुरानो जीवनमा फर्किइन् । उनका श्रीमानले पनि उनको अवस्था बारे थाहा पाएपछि सम्पर्क गर्न थाले । उनी अहिले आमा समूहका बैठकमा नियमित जान्छिन् । समग्रमा उनी खुसी छन् ।

उनी भन्छिन् मैले पुनर्जन्म पाएँ । उनी अहिले अरूमा पनि त्यस्तो समस्या देखे स्वास्थ्य सेवामा गइहाल्न प्रोत्साहन गर्छिन् । उनी अरूलाई यो समस्याको उपचार हुन्छ भनी बुझाउँछिन् । उनी यस्तो समस्या भएका सबैलाई सहयोग गर्न सबैमा अनुरोध गर्दछिन् जसको कारण मानिस पुनः सामान्य र अर्थपूर्ण जीवनमा फर्किन सक्छ ।

# I THANK GOD FOR GIVING ME A SECOND CHANCE

Sopaan Damai lives in Mudegaun VDC, Doti district. He is 69 years old and has a wife and a married daughter. Sopaan has neither his own house nor his own land; he uses his brother's home. He had suffered from severe mental illness (psychosis) three years ago. However, with support from the Mudegaun Health Post In-charge and CEAD Nepal (UMN's partner), he recovered and was getting back to his normal life routines.

But unfortunately, lightning did strike twice in the same place. Last year, he relapsed into psychosis. UMN's Mental Health Programme supported his treatment, regular medication and follow-up. Now he is normal again, and is starting his old sewing profession as a means of livelihood. Mudegaun Health Post In-charge Prem Kathayet says: "Now he in regular follow-up, and is improving."

Sopaan describes his experience like this.

"I suffered from severe mental illness at the end of my life. I cannot remember anything of this period, anything that happened. My wife explains now about that time, how I used to run



naked everywhere. I came to realise that I was suffering from severe mental illness only during my treatment. I went to the Health Post regularly for follow-up and regular medicine. I even participated in the Mental Health Day celebrations in this VDC. I understood that many other people are suffering from this type of illness in the world and even in our community. Now I am getting better, I am proud of getting a new life. I am developing confidence after regular counseling at the Health Post. I have recommenced my own sewing profession for a livelihood. I can do this for some years ahead. I pray to God that it won't happen to me again. I am feeling very lucky to get such a great support from you all, and give thanks to God for giving me a second chance."

## दोस्रो मौका दिएकोमा भगवानलाई धन्यवाद

सोपान दमाई डोटी जिल्लाको मुडेगाउँ गा.वि.स. मा बसोबास गर्छन् । ६९ वर्षीय उनकी एक श्रीमती र विवाहित छोरी छन् । उनको आफ्नो घर र जग्गा नभएकोले उनी आफ्नो भाईको घरमा बस्छन् । उनलाई तीन वर्ष अगाडि जटिल मानसिक समस्या (साइकोसिस) बल्भियो । मुडेगाउँ स्वास्थ्य चौकी प्रमुख तथा सि.इ.ए.डी नेपाल (यू.एम.एनको साझेदार संस्था) को सहयोगमा उनी सन्चो भएर सामान्य अवस्थामा फर्किए थिए ।

तर फेरि दोस्रो पटक उनलाई त्यही समस्याले च्याप्यो । अघिल्लो साल उनलाई फेरि मानसिक समस्या (साइकोसिस) भयो । यू.एम.एन.को मानसिक स्वास्थ्य कार्यक्रमले उनको उपचार, नियमित औषधि तथा अनुगमनमा सहयोग गर्‍यो । उनी अहिले सामान्य अवस्थामा फर्किएका छन् र जिविकोपार्जनका लागि आफ्नो पुरानो सिलाई पेशा थालेका छन् । मुडेगाउँ स्वास्थ्य केन्द्र प्रमुख प्रेम कठायत भन्छन् "उनी अहिले निरन्तर अनुगमनका क्रममा छन् र सुधार हुँदैछ ।"

सोपान आफ्ना भोगाइहरूलाई यसरी वर्णन गर्छन् :

"मैले जीवनको उत्तरार्धमा जटिल मानसिक समस्या भोग्नु पर्‍यो । मलाई त्यो समयको केही पनि सम्झना छैन । मेरी श्रीमतीले म के गर्थेँ, कसरी सबैतिर नाङ्गै हिँड्थेँ र मेरो त्यस बेलाको अवस्था कस्तो थियो भन्ने बारे अहिले बताउँछिन् । मैले के थाहा पाएँ भने त्यस्तो जटिल समस्या औषधि उपचारको क्रममा मात्र रहयो । नियमित औषधि, उपचार, डाक्टरी जाँच र अनुगमनका लागि म स्वास्थ्य केन्द्र गइरहेँ । मैले गा. वि. स. मा मनाइएको मानसिक स्वास्थ्य दिवसको कार्यक्रममा पनि भाग लिएँ । मैले यस अवधिमा के बुझेँ भने, यो संसारमा अनि हाम्रो समुदायमा यस्ता रोग लागेका व्यक्तिहरू धेरै छन् । म अहिले ठिक हुँदैछु र नयाँ जीवन पाएकोमा गर्व गर्छु । स्वास्थ्य चौकीमा हुने नियमित परामर्शले आत्मविश्वासमा वृद्धि हुँदैछ । जिविकोपार्जनका लागि आफ्नो पुरानो पेशा सिलाइलाई अगाडि बढाउँदै छु । अब्ने केही वर्ष यो पेशा गर्नेछु । म भगवानसँग प्रार्थना गर्छु मलाई फेरि यो रोग नलागोस् । म आफूलाई भाग्यमानी ठान्छु किनकि यहाँहरू बाट यो सहयोग पाएँ । अन्त्यमा, दोस्रो मौका दिएकोमा भगवानलाई धन्यवाद दिन चाहन्छु ।"

## INFORMATION ENDS SUFFERING

Suraj Daulyal, now 12 years old, suffered from an unidentified disease from the age of nine years. He, the eldest child in a family of modest economic background, was struck down with a disease unknown and feared, with the people in society describing it as “caused by an evil spirit”, or “Bhootpret” in the local language.

The recurrent disease used to initiate stiffness in hands and feet, fits, and froth from the mouth that lasted one to two minutes. For three years, he with his family had to endure all the sufferings that followed by the disease, and the dilemma caused by the varied diagnoses in the community, no hope of it receding.



Three years ago, a Female Community Health Volunteer (FCHV) came to his house following the rumors she had heard from other people. The family was hesitant at first to tell her everything, for nothing had improved his situation, neither had they received any meaningful suggestions till then. But the determined FCHV, equipped with the information she received from other FCHVs in Lekgaun (where the Mental Health Programme is being implemented), asked his family to go to the Lekgaun Health Post and access the health services available there.

After three years of continuous medication, the disease had stopped visiting him. Suraj says: "I want to pursue my education," He is now studying in Grade 7.

### जानकारीले पीडा कम गर्छ

सुरज दौलियाल हाल १२ वर्षका भए । उनी नौ वर्षको उमेरबाट अज्ञात रोगबाट पीडित भएको बताइन्छ । उनी मध्यम वर्गीय परिवारका जेठा छोरा हुन् । उनलाई अज्ञात र डरलाग्दो रोग लागेको र यसको कारक “प्रेत आत्मा” वा ‘भुत प्रेत’ रहेको समुदायका मानिसले बताउँछन् ।

बारम्बार देखिने यो रोगले हातखुट्टामा कडापन आउने, बेहोस् हुने र एक दुई मिनेट सम्म मुखबाट फिँज आउने गर्दथ्यो । तीन वर्ष सम्म उनका परिवारले त्यो सबै पीडा भैलेपुन्यो र समुदायमा सुनिने विभिन्न टिका टिप्पणीहरूले भन्ने उनीहरूमा दोधार सृजना गर्‍यो र उनीहरूलाई निरास बनायो ।

तीन वर्ष अघि, एक दिन, एक सामुदायिक महिला स्वास्थ्य स्वयंसेविकाले मानिसहरूबाट सुनेको हल्लाका कारण उनीहरूको घरमा आइन् । उनीहरू पहिले त स्वास्थ्य स्वयंसेविकासँग आफ्नो कुरा राख्न हिचकिचाए किनकि उनीहरूले कहींबाट केही अर्थपूर्ण सल्लाह पाएका थिएनन् । तर दृढतापूर्वक ती महिला स्वास्थ्य सेविकाले लेकगाउँ स्वास्थ्य चौकीको स्वास्थ्य कार्यकर्ताबाट पाएको जानकारी अनुसार, लेकगाउँ स्वास्थ्य चौकीमा यस्तो रोगको उपचार उपलब्ध भएको बताइन् । तीन वर्षको लगातार औषधि सेवनले सुरजलाई यस छारे रोगबाट मुक्त गराएको छ । सुरज भन्छन्, “म निरन्तर पढ्न चाहन्छु” । उनी अहिले कक्षा सातमा पढ्छन् ।

# JOKHU'S RECOVERY

Jokhu Chaudhary is 45 years old and lives in Patkhauli, Rupandehi. He is a support staff member of the Dhakdhai Primary Health Centre. He lives with his parents, his wife and three children. In spite of only being a support staff member, his long experience of having worked at the health facility has given him a lot of knowledge about health matters. He has his own house and some land for farming.

His life was going smoothly until tragedy struck. His eldest son, 29, died due to an unexpected illness. His daughter-in-law was now widowed and his little grandson an orphan. After the death of his dear son, Jokhu's beautiful family life was completely shattered. He lost sleep and gradually started to show aggressive behaviour with people (within family and outsiders too); preferred to stay on his own, stopped eating and lost interest in all regular jobs. He has started behave very differently with the staff at the health facility too.

One day, Jokhu's friend suggested that he talk to the health workers in the health facility where he worked. He took up this suggestion and visited the health worker there, Khemraj Pokhrel, and asked for help. Khemraj is also trained in mental health. Upon assessment, Jokhu's problem was diagnosed as depression.

He was thus put on medication and also received regular counseling services. After four months of treatment, Jokhu recovered well. He also realised that it was not just him but the rest of his family also suffered because of the unexpected loss of a family member. His own condition after the incident added to their problems. Thus, he brought his wife and father also to the health centre and where they got medicine and counseling.



All of them recovered after a few months' course of medicine. Jokhu's daily life schedule has returned to as it was before his son's death. Although he still misses his son and grieves his loss, he has resumed his normal daily activities, goes to his job regularly and cares for the rest of the family members. He said: "At first, I felt like everything was gone after losing my son, who was a big pillar of hope and support in my life. Now, I am glad that I could recover with the help from mental health services at my work place, which is a blessing for me. I could not have imagined getting back to my normal routine on my own, but now I am again working, eating, sleeping and taking care of other family members. We are all happy as we could bounce back to our normal lives after such a tragic event."

## भोक्को स्वास्थ्यलाभ

४५ वर्षीया भोक्को चौधरी पटखौलि रुपन्देहिमा बस्छन् । उनी धकधई प्राथमिक स्वास्थ्य केन्द्रमा कार्यालय सहयोगीका रूपमा काम गर्दछन् । उनी आफ्ना बुबा आमा, श्रीमती र ३ बच्चाहरूसँग बस्छन् । पदले कार्यालय सहयोगी मात्र भए पनि धेरै वर्षको अनुभवका कारण उनलाई स्वास्थ्य सम्बन्धी धेरै ज्ञान छ । उनको आफ्नै घर र खेतीगर्ने सानो खेत छ ।

उनको जीवन राम्रै थियो तर २९ वर्षको उमेरमा उनको जेठो छोराको अज्ञात रोग लागेर निधन भयो । उनको बुहारी विधवा भइन् र नाति टुहुरो भयो । जेठो छोराको निधनले परिवारको खुसी तोडिदियो । भोक्को निदाउन छाडे, परिवार र अरूसँग रिसाउँथे, एकलै बस्न रूचाउँथे, काम गर्न र खान पनि छोडिसकेका थिए । कार्यालयमा पनि फरक व्यवहार देखाउँथे ।

एक दिन भोक्कोका साथीले उनलाई कार्यालयमा भएका स्वास्थ्यकर्मीसँग कुरा गर्ने सल्लाह दिए । त्यसैले उनले स्वास्थ्यकर्मी खेमराज पोखरेललाई भेटेर सहयोग मागे । खेमराज मानसिक स्वास्थ्यमा तालिम प्राप्त थिए । परिक्षण पछि भोक्कोलाई नैराशयता भएको पाइयो ।

त्यसपछि उनलाई निरन्तर औषधि र मनोविमर्श दिइयो । चार महिना पछि उनी निको भए । उनलाई लाग्यो कि उनीमात्र नभई उनको पूरै परिवारलाई दुःख परेको थियो र उनको व्यवहारले भन्नु उनको परिवारको समस्या बढाएको थियो । त्यसैले उनले आफ्नो पति र बुबालाई पनि प्राथमिक स्वास्थ्य केन्द्रमा ल्याए र उनीहरूलाई पनि औषधि र मनोविमर्श दिइयो ।

सबैजना केही महिनाको औषधि प्रयोग पछि निको भए । भोक्को छोराको मृत्यु अघि जस्तै दैनिकीमा फर्किएका छन् । छोराको मृत्युको पीडा भए पनि उनी दैनिक जीवनमा फर्किएका छन् र आफ्नो परिवारको राम्रो हेरचाह गर्छन् । उनले भने, "मेरो परिवारको ठुलो सहारा र सपना रहेको छोरो गुमाउँदा सबै सकिएको भन्नु लागेको थियो । कार्यालयबाट नै पाएको मानसिक स्वास्थ्य सेवाले मलाई निको पारेकोमा म धन्य छु । मैले पुरानै अवस्थामा फर्किन सक्छु भन्ने सोचेको पनि थिइँ तर फेरि पहिले जस्तै भएँ । त्यत्रो ठुलो घटनाबाट पुरानै अवस्थामा फर्किएकोमा हामी सबै खुसी छौँ ।"

# TEK OVERCOMES MENTAL ILLNESS

Until two years ago, Tek was considered mentally retarded by his community. People can't believe how much he has progressed since then. Now he is a tomato and vegetable entrepreneur. Tek has to carry the entire family burden, as he lost his parents in his early childhood. He moved to India in search of work, but due to his mental condition he could not stay there. When he returned from India, his illness became more serious, but he could not afford to have medicine, or consult doctors in hospitals. He was disappointed and frustrated by his mental health problems. Later, his family collected money from the community and provided treatment for him.

After treatment and regular medication, he is getting better. He is also a member of one of the groups of Barpipal Savings and Credit Co-operative (a UMN partner). He has attended several training programmes related to seasonal and off-seasonal vegetable cultivation. He was interested in trying to grow seasonal as well as off-seasonal vegetables on his land. He got some vegetable seeds and plastic to make "tunnel house" (a simple greenhouse) from Barpipal Co-operative, through the Food Security programme. He prepared his plastic tunnel house, with help from the co-operative, and then cultivated tomatoes inside. You could always find him inside the plastic



house, caring for the tomato plants. He says he doesn't want to be in groups and gatherings just to pass the time. Up to now, he has sold 500 kg of tomatoes from his land. He also produces other seasonal and off-seasonal vegetables, earning an average of NRP 50,000 (USD 500) per year.

Because of the increase in knowledge and skills developed during the project, Tek has been able to flourish in his earning. He no longer views his illness as a source of frustration and disappointment, as he did previously. This income also means he is able to have regular medication. This brings him satisfaction and self-respect, enabling him to provide for his family and contribute positively to his community.

## मानसिक रोग माथि टेकको विजय

दुई वर्ष अघि सम्म समुदायको नजरमा टेक एक मानसिक सन्तुलन गुमाएका व्यक्ति मानिन्थे । त्यसपछिको समय अवधिमा उनले देखाएको सुधार मानिसहरूले विश्वास नै गर्न नसकिने खालको छ । यतिबेला उनी गोलभेंडा र तरकारी उद्यमी भएका छन् । टेकले वाल्यावस्थामा नै आफ्ना बाबुआमा गुमाउनु परेकाले गर्दा परिवारको सम्पूर्ण बोझ उनैले उठाउनु पर्छ । कामको खोजीमा उनी भारत गएका थिए तर उनको मानसिक अवस्थाका कारण उनी त्यहाँ बस्न सकेनन् । जब उनी भारत बाट फर्किए, उनको रोग भन्ने जटिल बन्दै गयो । तर उनी औषधि किन्न अथवा अस्पतालमा गएर डाक्टर सँग परामर्श लिन सक्ने अवस्थामा थिएनन् । उनको मानसिक स्वास्थ्यको समस्या देखेर उनी निरास र हतास भएका थिए । पछि, उनको परिवारले समुदायबाट केही पैसा जम्मा गरेर उनको उपचार गराए ।

उपचार र लगातारको औषधि सेवनले उनको क्रमिक सुधार भइरहेको छ । उनी बरपिपल वचत तथा ऋण सहकारी (यू.एम.एन.को एक साभेदार) समूहका एक सदस्य पनि हुन् । उनी मौसमी तथा बेमौसमी तरकारी उत्पादन विषयक विभिन्न तालिमहरूमा सहभागी भएका छन् । उनी आफ्नै हातले मौसमी तथा बेमौसमी तरकारी उत्पादन गर्नमा इच्छुक थिए । उनले खाद्य सुरक्षा कार्यक्रमको तर्फ बाट बरपिपल सहकारी द्वारा वितरित तरकारीको विउ र "सुरुङ घर" (साधारण किसिमको हरित गृह) निर्माण गर्न केही प्लाष्टिक प्राप्त गरे । सहकारीको सहयोगमा उनले प्लाष्टिकको सुरुङ घर तयार पारे र त्यहाँ गोलभेंडा रोपे । उनलाई सधैं त्यही प्लाष्टिकको घर भित्र गोलभेंडाको विरूवा स्याहादै गरेको पाउन सकिन्थ्यो । उनी भन्छन् त्यत्तिकै समय खेरफाल्न समूह र भेलाहरूमा जान उनलाई मन लाग्दैन । यो अवधि सम्ममा उनले आफ्नो वारी बाट ५०० किलो गोलभेंडा विक्री गरिसकेका छन् । उनी अन्य किसिमका मौसमी र बेमौसमी तरकारीहरू लगाएर प्रति वर्ष औषत ५०,००० रूपैया कमाइ गर्छन् ।

परियोजनाको क्रममा विकास भएको ज्ञान र सिपको वृद्धिले गर्दा टेकले आफ्नो कमाइलाई उकास्न सकेका छन् । पहिलाको जस्तो, उनी आफ्नो रोगलाई निरासा र असन्तुष्टिको उपज ठान्दैनन् । उनको कमाइको कारण उनी लगातार रूपमा औषधि सेवन गरिरहेका छन् । आफ्नो परिवारको खाँचो पूरा गर्न र समुदायमा सकारात्मक योगदान पुऱ्याउन सकेकोमा यसले उनलाई आत्म सम्मान र सन्तुष्टी दिलाएको छ ।



# PROVEN EFFECTIVENESS OF STREET DRAMA

Community people in Mudegaon VDC used to perceive mental illness as the result of sin in a past life. They believe that mental illnesses are not curable and can only be managed by traditional interventions like chants, rituals and sacrifices done by a Dharmi Jhakri, but not by medical intervention. In order to address these beliefs, raise awareness and reduce discrimination and social stigma regarding mental illness, a street drama was conducted in Mudegaon VDC in March 2015. This drama focused on making people understand that such traditional beliefs and thoughts are myths around mental illness. In total, 554 people gathered to see the drama, and there was active participation from the health facility, schools and community people, including adolescents and the elderly. The drama was conducted in a local Doteli language, and people were very motivated to observe the drama.

As a result, the health facility has been receiving more cases after the street drama was staged. The health facility in-charge of Mudegaon Health Post commented: "The street drama has made people more aware of mental illness. They are seeking treatment and counselling through the health facility now. We have treated seven mental illness cases (three women and four men) after the street drama programme. Now-a-days, mental illness cases which were neglected and not treated before are coming to the health facility from the community. To my knowledge, currently there are no severe mental illness cases in this VDC staying at home without seeking care."



The UMN Mental Health Advisor also visited the community and was impressed by the impact made by the street drama. She states: "It was interesting to note that the one thing that was reported most by the community when asked about their awareness about CEAD Nepal's activities and the mental health project being implemented in their community was the street drama. It was the one activity nobody failed to mention, and it has really shown them what mental illnesses were in reality."

## सडक नाटकको प्रभावकारिता

मुडेगाउँ गा.वि.स.का बासिन्दाहरू यस भन्दा पहिला मानसिक रोगलाई पापको परिणाम मान्दथे । उनीहरू मानसिक रोगको उपचार सम्भव छैन भन्ने सोचथे । उनीहरूलाई मानसिक रोगको व्यवस्थापन खाली धामी भाँक्रीहरू द्वारा गरिने परम्परागत प्रकृयाबाट मात्र हुन्छ र यसको औषधि उपचार हुँदैन भन्ने लाग्दथ्यो । यो सोचलाई परिवर्तन गर्न र सामाजिक कुसंस्कार विरुद्ध चेतना फैलाउन मार्च २०१५ मा मुडेगाउँ गा.वि.स. मा सडक नाटक प्रदर्शन गरियो । यस सडक नाटकले मानसिक रोग सम्बन्धी भएको यो विश्वास र सोच परम्परावादी रहेको कुरा बुझाउन सहयोग गर्‍यो । नाटक हेर्न ५५४ जनाको उपस्थिति भएको थियो जहाँ स्वास्थ्य सेवा, विद्यालय, समुदाय गरी सबै उमेर समूहको प्रतिनिधित्व यस कार्यक्रममा रहेको थियो । यो नाटक स्थानीय डोटेली भाषामा प्रस्तुत गरिएको थियो जसले गर्दा मानिसहरू नाटक हेर्न धेरै नै उत्प्रेरित देखिन्थे ।

यस नाटक प्रदर्शन पश्चात स्वास्थ्य सेवा केन्द्रमा धेरै घटनाहरू आउन थालेका छन् । मुडेगाउँ स्वास्थ्य केन्द्र प्रमुख भन्छन् "सडक नाटकले मानिसलाई मानसिक स्वास्थ्यको विषयमा चेतना फैलाएको छ । उनीहरू स्वास्थ्य केन्द्रमा आएर औषधि तथा मनोविमर्श सेवा लिन थालेका छन् । हामीले यस सडक नाटक कार्यक्रम पश्चात् सात जनाको (तीन महिला र चार पुरुष) उपचार गरिसकेका छौं । समुदायमा भएका मानसिक स्वास्थ्य समस्याहरू जो पहिला देखि वेवास्ता गरिएका थिए र उपचार भएका थिएनन् त्यस्ता घटनाहरू उपचारका लागि स्वास्थ्य केन्द्रमा आउन थालेका छन् । मेरो जानकारीमा भए सम्म हालको अवस्थामा गा.वि.स.मा मानसिक समस्या भएका विरामीहरू उपचार विना घर बसेको अवस्था छैन ।"

यू.एम.एन.का मानसिक स्वास्थ्य सल्लाहकार समुदाय भ्रमणमा आउनु भएका बेला समुदायमा सडक नाटकको प्रभाव देखेर खुसी हुनुभयो । उहाँले भन्नुभयो समुदायको सदस्यलाई सि.इ.ए.डी. नेपालको कार्यक्रम तथा मानसिक स्वास्थ्य परियोजना अन्तर्गत त्यस क्षेत्रमा हुने गरेका जनचेतनामूलक कार्यक्रमको बारेमा जानकारी लिँदा अधिकांशले सडक नाटक नै बताएका थिए ।" सडक नाटकको कारण मानसिक समस्या यथार्थमा के रहेछ भन्ने जानकारी भएको थियो ।

# SAVED FROM HAVING TO LEAVE THE VILLAGE

Shreepurjabdi is a VDC in the south-west of Sunsari District. This district was well known as a fertile agricultural area until some years ago. But the 2008, a flood covered it all over with sand, and changed it into a desert.

This case is about a 74-year-old lady who lived in a family of twelve. We'll call her Hazur Amaa, or Grandmother. She had lost three sons and three daughters quite a long time before. This had traumatised her, and the recurring thoughts of this incident were stressing her time and again.

Further problems and pain was added to her life when this innocent family were cheated by land-brokers and sold a piece of land by the river bank. When the Koshi River changed course and flooded its bank, they lost their hard-earned piece of agricultural land too. As all that was left now of their fertile farming land was a barren plot filled with sand, they had difficulties in making ends meet, which was an additional stressor in her life now.

As a result of such a chain of problems, Hazur Amaa's condition was deteriorating. She ran around from one place to another, shouted at fellow villagers, threw away things, etc, which irritated the family and the neighbours. She would not stay at one place, screamed and yelled at night and made a lot of noise. Because of this it was becoming increasingly difficult for her family to continue living in the village.

While conducting activities for psycho-social counseling to help the people traumatised by the Koshi flood, UMN's partner Participants Mobilisation Centre (PYS) came in contact with the family and learned about their circumstances. The family's situation and Hazur Amaa's problems were identified during the on-site coaching for psych-social counselors, conducted as part of the IMH project for capacity development.



As a result, Hazur Amaa was given treatment by a psychiatrist in nearby Biratnagar and is slowly recovering. Currently, her aggression has subsided and changes can be observed in her behaviour. She has started socialising with family and neighbours under normal circumstances. She is currently under medication, and is expected to need around a year to make complete recovery.

Her family members are relieved to see her behave normally. Her son explains: "Villagers were about to throw us out of the community, but now since my mother is recovering, we are saved and don't need to leave our home."

## गाउँ छोड्नबाट बचायो

श्रीपुर जब्दी सुनसरीको दक्षिण पश्चिममा रहेको एउटा गा.वि.स. हो। केही वर्ष अघि सम्म यो जिल्ला आफ्नो कृषि योग्य जमिनको लागि प्रचलित थियो। तर सन् २००८ मा आएको बाढीले यसलाई मरुभूमि भै बनायो।

यो घटना हो एक ७४ वर्षीया महिलाको जो आफ्नो १२ जनाको परिवारसँग बस्दथिन्। उनलाई हामी यो कथामा "हजुरआमा" भन्ने छौं। धेरै अघि उनले आफ्ना ३ छोरा र ३ छोरी गुमाएकी थिइन्। ती घटनाहरूले उनमा आघात श्रृजना गऱ्यो र उनलाई बारम्बार त्यही सम्झना आउने गर्थ्यो।

अझ समस्या थपियो जब जग्गा दलालहरूले उनीहरूलाई ठगेर खोलाको बगरको जग्गा बेचिदिए। सन् २००८ मा आएको कोशी बाढीले भएको त्यो खेत जग्गा पनि लग्यो। अब बाँकी रहेको मरुभूमि भै त्यो जग्गाले उनीहरूको जीवनमा भन्नु दुःख थपिदियो।

बहूदो दुःखको जालोले हजुरआमाको अवस्था भन्ने विग्रियो। उनी यता उता दौडिने, छिमेकीलाई गाली गर्ने, रातिराति हल्ला गर्ने, चिच्याउने, सामान फ्याँक्ने आदि गर्न थालिन्। उनको व्यवहारले परिवार र छिमेकी रिसाउने गर्दथे। यस्तो व्यवहार बहूदो गएर उनको परिवारलाई त्यस गाउँमा बस्नै गाह्रो भैसकेको थियो।

जब कोशी बाढीका कारण आघातमा रहेका पीडितलाई मनोसामाजिक मनोविमर्श प्रदान गरियो तब यू.एम.एन.का साभेदार संस्था सहभागी परिचालन केन्द्र (पि.वाइ.एस.) ले हजुरआमाको परिवारलाई भेट्यो र उनको अवस्था बारे जानकारी प्राप्त गर्‍यो। परिवारको अवस्था र हजुरआमाको समस्या बारे आइ.एम.एच.ले गरेको क्षमता विकास परियोजनाको मनोसामाजिक मनोविमर्शको प्रयोगात्मक कक्षामा थाहा भयो।

परिणाम स्वरूप हजुरआमालाई विराटनगरको मनोचिकित्सककोमा उपचार गरियो। अहिले उनी निको हुँदै छिन् र उनको व्यवहारमा परिवर्तन देख्न सकिन्छ। अहिले उनी परिवार र छिमेकीसँग घुलमिल हुन थालेकी छिन्। उनलाई पूर्ण रूपमा निकोहुन अझै एक वर्ष लाग्छ।

उनको परिवार उनलाई देखेर खुसी छन्। उनका छोरा भन्छन्, गाउँलेहरूले हामीलाई गाउँ निकाला गर्न लागेका थिए। तर आमाको अवस्थामा सुधार भएकोले हामी बाँच्यौं।

## SUMITRA'S HAPPY SMILE

Sumitra lives in Siktahan, Rupandehi. She is the mother of a baby. She is from a very poor background and has survived many difficulties. She was happy with her husband and baby at first. But her husband became addicted to alcohol due to increasing financial problems. He started quarrelling with his family, especially wife, and it caused turmoil in her home. Her husband scolded and abused her and sometimes hit her, which made it very difficult to stay at home so she decided to leave. Then, she started feeling that she wasn't well physically. She hadn't had any energy in her work, used to get anxious, liked to stay alone, and eventually, it directly impacted her daily functioning more and more.



She came to visit the doctor in Dhakdhai to see what could be done. She was in a very sad condition and when the health workers talked with her, they found she was suffering from depression. Health workers counseled her and suggested a 20-day prescription. When she visited the health facility again for follow up, her condition had improved. She is currently taking psychotropic drugs as per the prescription of the health worker, and shares that she is feeling trouble-free and in good health after two months.

The support of mental health services in Dhakdhai has changed her life. She says that if there was no mental health service in Dhakdhai VDC, she would never have been able to carry on with her life. She now shares and spreads the message in the community that mental disorders are curable if we visit the health facility and seek treatment in time.

She had suffered a lot before visiting the health facility, but now she has a smile on her face.

## सुमित्राको मिठो मुस्कान

सुमित्रा रुपन्देहीको सिकताहनमा बस्दछिन् । उनी एक बच्चाकी आमा पनि हुन् । उनी निकै गरिव परिवारबाट आएकोले जीवनमा धेरै संघर्ष गरेकी छिन् । उनी आफ्ना पति र बच्चाका साथ खुसी नै थिइन् । तर घरको कमजोर आर्थिक अवस्थाका कारण उनको पतिलाई रक्सीको कुलत बस्यो । सुमित्राका पति उनलाई कुटपिट तथा दुर्व्यवहार गर्दथे र परिवारमा धेरै नै झगडा हुने गर्दथ्यो । पतिको त्यस्तो व्यवहार खप्न नसकेर उनले घर छोड्ने निधो गरिन् । त्यस पछि उनलाई आफू विरामी भएको महसुस भयो । उनमा चिन्ता, एकलै बस्ने, कुनै काममा जाँगर नचल्ने जस्ता लक्षण देखिएकाले उनको दैनिक जीवनमा धेरै असर पर्न थाल्यो ।

अनि धकधइमा स्वास्थ्य परिक्षण र उपचारको लागि आइन् । त्यहाँ भएका स्वास्थ्यकर्मीहरूले उनीसँग कुरा गरेर उनलाई नैराश्यता भएको पत्ता लगाए । स्वास्थ्यकर्मीहरूले उनलाई मनोविमर्श गरेर २० दिनको औषधि दिए । उनी पुनः स्वास्थ्य परिक्षणको लागि जाँदा उनको अवस्थामा सुधार देखियो । उनी अहिले स्वास्थ्यकर्मीहरूले दिएको औषधि प्रयोग गर्दछिन् र दुई महिना पछि आफू फेरि समस्या मुक्त भएको बताउँछिन् ।

धकधइमा पाएको मानसिक स्वास्थ्य सेवाले उनको जीवनमा परिवर्तन ल्याएको छ । धकधइ गा.वि.स.मा मानसिक स्वास्थ्य सेवा नभएको भए उनी जीवन जिउन नसक्ने कुरा उनी बताउँछिन् । उनी अहिले समयमै स्वास्थ्य चौकी गएमा मानसिक रोगको उपचार हुन्छ भन्ने सन्देश फैलाउँछिन् ।

# SIGNS OF PROGRESS

Sher Bahadur BK, 24, lives in Khara with his wife and three daughters. He is a farmer.

Three years ago, he began to suffer from psychosis. According to his wife, he used to show strange behaviour towards his family, couldn't sleep at night, lived outside the house mostly and did not support his family. During this period, the family spent a lot of money on the dhama and jhakri (traditional faith healers) but did not see any progress; in fact his condition started getting worse.

They did not receive any medical treatment, because they didn't know such a thing was possible. Sher Bahadur stayed outside. He was isolated, and did not talk with others.



One year ago, UMN's partner NPAF conducted mental health awareness training in Khara for Female Community Health Volunteers (FCHVs) and mothers' groups. After that, his wife knew about treatment for mental illnesses. Also his brother, Lal Bahadur, who had shown similar signs, was taken to the health facility. Due to the complexity of his condition, he was referred to Kathmandu for further treatment. He spent 74 days in Kathmandu, at the Maryknoll Nepal centre, and returned home.

During our visit with them, he looked good and he is getting better. According to his wife, now he lives in his house. He can do his daily activities himself. He is taking regular medicine and going to the local health facility for follow up.

Now-a-days, Sher Bahadur is back living happily with his family. His wife is delighted!

## प्रगतिका लक्षण

चौविस वर्षीया शेर बहादुर वि.क. एक श्रीमती र तिन छोरीहरूका साथ खरे गाँउमा बस्छन् । उनी एक किसान हुन् ।

तीन वर्ष अघि उनी मानसिक रोगबाट पीडित भए । उनी परिवारसँग अनौठो व्यवहार गर्ने, राति निदाउन नसक्ने, घर बाहिरै बस्ने र परिवारलाई सहयोग नगर्ने जस्ता लक्षण देखाउन थाले । त्यस बेला उनका परिवारले धामी र भौंकीका लागि धेरै खर्च गरे तर केही उपलब्धि देखिएन । बरु उनको अवस्था भन् विग्रदै गयो ।

जनचेतनाको अभावले गर्दा उनीहरूले शेर बहादुरलाई कुनै स्वास्थ्य उपचारमा लगेनन् । शेर बहादुर एकलै बाहिर बस्थे र अरूसँग बोल्दैनथे । एक वर्ष अघि खरा गाउँमा यू.एम.एन. का साभेदार एन.पि.ए.एफ. ले महिला स्वास्थ्य स्वयं सेविका र आमा समूहका लागि मानसिक स्वास्थ्य सम्बन्धी सचेतना तालिम दियो । त्यसपछि शेर बहादुरकी श्रीमतीले मानसिक रोगको उपचार हुन्छ भन्ने थाहा पाइन् । उनको जस्तै लक्षण देखाएका उनका दाज्यू लाल बहादुरलाई पनि स्वास्थ्य सेवामा लगियो । जटिल अवस्थाका कारण शेर बहादुरलाई उपचारका लागि काठमाडौं पठाइयो । उनले चौहत्तर दिन काठमाडौंमा मेरीक्नोल नेपाल केन्द्रमा बसेर उपचार गराई घर फर्किए ।

उनलाई भेट्न जाँदा उनी राम्रो अवस्थामा थिए र अभै सुधारात्मक देखिन्थे । उनकी श्रीमतीका अनुसार, उनी घर भित्रै बस्छन् र आफ्नो दैनिक कार्य आफै गर्न सक्छन् । उनी निरन्तर औषधि सेवन गर्छन् र निरन्तर परिक्षणका लागि सामुदायिक स्वास्थ्य सेवामा जान्छन् ।

आजभोली शेर बहादुर खुशीसाथ परिवारसँग बस्छन् । परिणाम स्वरूप उनकी श्रीमती धेरै खुशी छिन् ।

## THE HIDDEN GIFT

For a single woman, marrying off a young daughter is a herculean task. It was no different for 46-year-old Saraswati Chaudhary, a Female Community Health Volunteer (FCHV) from Dhakhadhi VDC in Rupandehi. She has been the sole breadwinner for her family of two daughters and one son ever since her husband passed away a long time ago. Their only source of income was the produce from her farmland. As her children grew, the time finally came when the eldest daughter was of age to be married.

She had to fulfil this responsibility, and thus took a loan to meet the considerable expenses of the marriage. The wedding went well, and she felt relieved and proud for having done her duty. But her pride and relief were short-lived. She started feeling different in her body. She started having aches and pains all over her body, felt like sleeping all day and got just too lazy to move around to do the household chores or even farm work. Her relatives suggested that she see a traditional healer and so she did, but the same feelings persisted.

She pushed herself hard to perform her different roles, including that of an FCHV. One day when she somehow managed to take herself to the Health Post as part of her job, she had a chat with the health worker there. She did know that the changes in her could also be a mental health problem and thus gathered the courage to speak about the very recent changes in her feelings and mood with the trained health worker, only to explore. The health worker realised that Saraswati's problem was associated with the worry she carried about paying back the debt incurred for her daughter's marriage. Having diagnosed her with anxiety disorder, she was prescribed some drugs and put under regular observation through followups.

Thanks to her self-awareness and her willingness to share her problem, she was diagnosed at a reasonably early stage with this mental health condition and thus was able to make a quick recovery. After six months of medication she is back to her old form, perfectly managing all her household duties as well as the farming and FCHV work. She is hopeful she will be able to pay back the debt as she feels fit and ready for work. She says: "I have received a marriage gift named 'anxiety disorder' that disturbed me for around six months, but now I feel no tension for loan that will be paid back gradually. I had learnt about mental health problems; that they can be hidden, but also can be treated. Now I not only know about it but believe in this from my own experience. I have been sharing this with others as well."



## अदृश्य उपहार

एकल महिलाका लागि जवान छोरीको विवाह गर्नु भनेको फलामको चिउरा चपाउनु सरह हो । धकधई गा.वि.स. रूपन्देहीकी एक महिला सामुदायिक स्वास्थ्य स्वयंसेविका (एफ. सि. एच. भि), ४६ वर्षीय सरस्वती चौधरीको लागि पनि यो लागु हुन्थ्यो । धेरै समय अघि उनको श्रीमानको मृत्यु भए पश्चात उनी एकलैले दुई छोरी र एक छोराको परिवारको सम्पूर्ण खर्च धान्दै आएकी छिन् । उनको खेतको उब्जनी नै उनको एकमात्र आय स्रोत थियो । उनका सन्तानहरू बढ्दै गए र उनकी ठुली छोरीको विवाह गर्ने समय आयो ।

उनैले यो जिम्मेवारी पूरा गर्नुपर्ने थियो । यसो भएको हुनाले, विवाहको लागि आवश्यक खर्च पूर्ति गर्न उनले ऋण लिइन् । विवाह राम्रो भयो, उनले हलुङ्गो महसुस गरिन् र आफ्नो कर्तव्य पूरा गरेकोमा गर्व पनि गरिन् । तब उनले आफ्नो शरीरमा फरक महसुस गर्न लागिन् । उनले पीडा महसुस गर्न थालिन् र शरीरका अंगहरू दुख्न लागे । उनलाई दिनैभर सुत्न मन लाग्न थाल्यो, यताउता हिँडुलुल गर्न, घरधन्दा गर्न वा बारीमा गएर काम गर्न पनि अलछ्छी लाग्न थाल्यो । आफन्तले सुभाए अनुसार उनी धामी भौँकी कहाँ गइन् तर समस्या जस्ताको तस्तै रहिरह्यो ।

उनले सकिनसकी भएपनि एफ.सि.एच.भि अन्तर्गतका काम लगायत उनले गर्नुपर्ने अन्य कामहरू पूरा गरिन् । एक दिन उनले गर्नुपर्ने जिम्माको काम गर्न जसोतसो उनी स्वास्थ्य चौकीमा गइन्, उनले त्यहाँको स्वास्थ्य कार्यकर्तासँग कुरा गरिन् । (उनलाई थाहा थियो) उनमा आएको परिवर्तन मानसिक स्वास्थ्यमा आएको समस्या हुनसक्छ भन्ने कुरा । तसर्थ, पत्ता लगाउनका लागि भएपनि भर्खरै उनमा आएको व्यवहार र भावनात्मक परिवर्तनको विषयमा तालिम प्राप्त स्वास्थ्यकर्मीसँग कुरा गर्ने साहस बढुलिन् । स्वास्थ्यकर्मीले थाहापाए कि सरस्वतीको समस्या छोरीको विवाहमा लिएको ऋण तिर्नुपर्ने चिन्तासँग जोडिएको थियो । तनाव सम्बन्धी समस्या छ भन्ने पत्ता लागेपछि, खाने औषधि दिइनुका साथै अनुगमनको माध्यम द्वारा उनलाई लगातार निगरानीमा राखियो ।

धन्य, उनको स्वचेतना र आफूले भोगिरहेको समस्या स्वास्थ्यकर्मीलाई बताउने इच्छालाई जसका कारण उनको मानसिक स्वास्थ्यको अवस्था चाँडै नै पत्ता लाग्यो र फलस्वरूप उनी सिघ्र स्वास्थ्य लाभ गर्न सफल भइन् । ६ महिना लामो औषधोपचार पछि उनी पुरानै अवस्थामा फर्कन सफल भई पूर्णरूपले घर परिवारको दायित्व सम्हाल्न, खेतीपातीको काम र एफ.सि.एच.भि.को कार्यभार सम्हाल्न सक्षम भएकी छिन् । उनी आशावादी छिन् कि जब उनी सक्षम महसुस गर्छिन् र कामको लागि तयार हुन्छिन्, सबै ऋण चुक्ता गर्न सक्षम हुनेछिन् । उनी भन्छिन्, "मैले 'मानसिक समस्यालाई' विवाहको दाइजोको रूपमा पाएँ जसले मलाई लगभग ६ महिना सम्म पिरोल्यो, तर अब म ऋणको विषयलाई लिएर चिन्ता गर्दिन, बिस्तारै त्यो म चुक्ता गर्नेछु । मैले मानसिक स्वास्थ्यको विषयमा थाहापाएको थिएँ, यस्तो समस्यालाई लुकाउन सकिन्छ तर यसलाई निदान गर्न पनि सकिँदोरहेछ । अब त म यसको बारेमा जान्ने मात्र होइन तर आफ्नै अनुभव द्वारा यो समस्या निकोहुने कुरामा पनि विश्वास गर्छु ।"

# HELPFUL TRADITIONAL HEALERS

Right up to the present day, traditional healers and community people believe in traditional treatment, especially for mental illness. So traditional healers are still very involved in the treatment of mental illness, as mental illnesses are believed to be a result of spiritual possession. People still think that mental illness is curse from a god, caused by evil spirits. They spend a lot of money and resources on traditional treatment, which worsens the condition as it delays the time when one seeks medical service.

UMN's partner JCDS is providing orientation for traditional healers in three VDCs as part of their Mental Health project. They provide knowledge and information about the causes of mental illness, its signs and symptoms, and how they can be treated, as well as the role of traditional healers in their treatment. The way traditional healers treat mental illness was also discussed in the orientation programme. They were requested to send clients to health facilities, after providing their suggestions.



Now-a-days, traditional healers are referring mental illness cases to health facilities, providing information about health services for mental illness clients in health facilities, and helping in identification of mentally ill clients. Changes are being found in their behaviour and treatment techniques. There is increase in clients who are referred by traditional healers.

## सहयोगी धामी भाँक्रीहरु

वर्तमान परिप्रेक्षमा पनि धामी भाँक्री र समुदायका मानिसहरूले मानसिक रोगका लागि परम्परागत उपचारका विधिहरूलाई विश्वास गर्ने गरेका छन्। त्यसैले मानसिक रोगको उपचारका लागि समुदायमा धामी भाँक्री कै प्रयोग हुने गरेको पाइन्छ। मानिसहरू यस रोगलाई भगवानको श्रापका कारण खराब आत्माद्वारा भएको रोग मान्दछन्। परम्परागत उपचारमा धेरै पैसा र स्रोत खर्च गर्छन् जसले गर्दा उपचारमा ढिलाइ हुन जान्छ र स्वास्थ्य अवस्था भन् विग्रन्छ।

मानसिक स्वास्थ्य परियोजना अन्तर्गत यू.एम.एन.को साभेदार संस्था जे.सि.डि.सी.ले कार्यरत तीन वटा गा.वि.स.मा धामी भाँक्रीहरूलाई अभिमुखीकरण तालिम कार्यक्रम सञ्चालन गर्दै आएको छ। जसमा मानसिक समस्या आउनका कारण, यसका लक्षण, उपचार प्रकृतिका साथसाथै धामी भाँक्रीको भूमिकाका बारेमा जानकारी गराइन्छ। यस कार्यक्रममा धामी भाँक्रीले मानसिक रोगीहरूलाई गर्ने व्यवहार बारे पनि छलफल हुन्छ। मानसिक समस्या हेरेर सेवाग्राहीलाई आवश्यक सल्लाह पश्चात् स्वास्थ्य सेवाको लागि पठाइदिन समेत अनुरोध गरिन्छ।

आज भोलि धामी भाँक्री स्वयंले मानसिक स्वास्थ्य-सम्बन्धी समस्यालाई स्वास्थ्य केन्द्रमा आवश्यक उपचारका लागि पठाउँछन्। यस समस्याको स्वास्थ्य उपचार प्रक्रिया बारे जानकारी गराउँछन्। उनीहरूको उपचार प्रकृतियामा पनि परिवर्तन आएको छ। उनीहरूबाट पठाइएका सेवाग्राहीहरूको संख्या स्वास्थ्य केन्द्रमा दिन दिनै बढिरहेको पाइएको छ।

## RECOVERY IS POSSIBLE

Sita Pariyar (name changed) lives in Rugha, Rukum district, which is a two-hour walk from the district headquarters. She was married two years ago to a man of this place, and gave birth to a daughter, but after few months their daughter died and her husband left her. These incidents came as a big blow to her mental health, and as all can imagine led to immense stress in her life. She used to roam here and there, did not speak much but used to think a lot and talk to herself. She could not sleep at night. Her mother's family took her to the traditional healer, but that also didn't take care of her problems.

Thanks to the Nepal Public Awakening Forum's mental health awareness activities in Rugha, where FCHVs were taught about mental health, after many troubles, Sita finally got the help she needed. One of the FCHVs who had been trained in mental health suspected that Sita's behaviour showed signs of mental illness, and brought her to the Health Post. She was diagnosed and put on treatment there.



Currently, she is staying at her mother's house, and after three months' regular intake of medicine, some changes can be seen in her. She has started doing her household jobs. She is now convinced that regular use of medicine can cure mental health problems, and hopes for continuation of this kind of programme so that she can be completely cured.

### सुधार वा स्वास्थ्य लाभ सम्भव छ

सीता परियार (नाम परिवर्तन) रुकुम जिल्लाको रुघामा बसोबास गर्छिन् । यो सदरमुकाम भन्दा पैदल दुई घण्टाको दुरीमा छ । दुई वर्ष अघि यही ठाउँको एक मानिससँग उनको विवाह भयो र उनले एक छोरीलाई जन्म दिइन् तर केही महिना पछि उनीहरूको छोरीको मृत्यु भयो र उनको श्रीमानले उनलाई छोडिदिए । यी घटनाहरूले उनको मानसिक स्वास्थ्य माथि बज्रपात पायो र निश्चित रूपमा यसले उनको जीवनलाई ठुलो पिर चिन्ता तर्फ धकेलिदियो । उनी यताउता भौतारिने गर्थिन्, धेरै बोल्दैनथिन् तर धेरै सोच्ने र आफैँ सँग कुरा गर्ने गर्थिन् । उनी रातमा सुत्न सकिदैनथिन् । उनको आमातर्फका परिवारले उनलाई भाँकी कहाँ लगे तर त्यसले उनको समस्याको समाधान गर्न सकेन ।

रुघामा सञ्चालित नेपाल सामुदायिक जागरण मञ्चको मानसिक स्वास्थ्य सचेतना क्रियाकलाप अन्तर्गत महिला सामुदायिक स्वास्थ्य स्वयंसेविकाहरूलाई (एफ.सि.एच.भि.) मानसिक स्वास्थ्यको बारेमा सिकाइएको थियो । धेरै समस्याहरू भोगीसकेपछि अन्त्यमा सीताले उनलाई चाहिएको सहयोग पाइन् । स्वयम सेविकाहरू मध्येका एक जनालाई मानसिक स्वास्थ्य सम्बन्धी तालिम दिइएको थियो । सीताको व्यवहारद्वारा उनीमा मानसिक समस्याका लक्षणहरू भएको उनले पत्ता लगाए । यसकारण सीतालाई स्वास्थ्य चौकीमा ल्याइयो । उनको समस्या वा रोग पत्ता लाग्यो र उनलाई त्यहीं नै उपचार गरियो ।

यतिबेला, उनी आमाको घरमा बस्दै आएकी छिन् र तीन महिनाको लगातार औषधि सेवन पछि उनमा केही परिवर्तनहरू देखिएकाछन् । उनले घर धन्दाको कामहरू गर्न थालेकी छिन् । लगातार औषधि सेवनले उनको मानसिक स्वास्थ्यको समस्या निदान हुन सक्छ भन्ने कुरा उनले बुझेकी छिन् र उनी पूर्णरूपले निको हुनको लागि यस कार्यक्रमले निरन्तरता पाओस भन्ने आशा गरेकी छिन् ।

# VOICE OF RECOVERY

Sumitra Tharu was living happily with her son, daughter and her husband in Jhunga, Nawalparasi. Her daughter was studying in Grade 9 and her son was only four years old. She and her family earned their living as daily wage workers in the farms around their community. Whatever little things they had, they were making ends meet and living a satisfactory family life together.

But a dreadful day came. Sumitra's life was shattered when her son drowned in a nearby pond while playing near the house. Sumitra had lost sight of the boy as she was busy with household activities during this incident. When this happened, the family members blamed Sumitra for her carelessness and picked on her as the single reason behind the accident. She was badly scolded and also beaten. All the blame came upon her and even her husband treated her as if she had killed the little boy. The family completely neglected and shunned her.

Already broken by the loss of her little boy, she was devastated by being seen as the reason for his death. The physical abuse and mental torture of the family tore her down. She started looking disturbed all the time, stayed alone, had no interest in taking care of meals and other physical needs, which she had enjoyed doing so much earlier, and even stopped speaking with others. In spite of his neglect, her husband got worried when her voice was turned off. He tried some of the traditional healing practices, but nothing worked.

One day, a Female Community Health Volunteer (FCHV) met Sumitra's husband to enquire about her. The husband's explanation of Sumitra's state immediately rang an alarm bell in the FCHV's mind. It sounded as though Sumitra might need help. So the FCHV recommended that she be taken to the Dhakdhai Primary Health Centre (PHC) where there were health workers trained in mental health. So the husband brought her to the PHC, where she was diagnosed as having a mental health problem due to shock of her son's death and family's behaviour. They counseled her, prescribed some psychotropic medicine and also suggested that family members should behave positively with her and support her recovery.



Under treatment, Sumitra has recovered fairly well. Her voice has come back and she is engaged in normal household work. She has continued to take medication and counselling for the last year, and has received better support from family members as well. She appreciates the mental health project activities, saying: "Health workers and their medicines and counselling are like a God who encouraged me to stay alive even in those dark days of my life."

## स्वास्थ्य लाभका स्वरहरू

सुमित्रा थारू आफ्ना एक छोरा, एक छोरी र श्रीमानसँग नवलपरासीको भुङ्गामा बस्ने गर्दथिन् । उनकी छोरी कक्षा ९ मा पढ्थिन् र छोरा केवल ४ वर्षका थिए । उनीहरूको परिवार गाउँमै ज्याला मजदुरी गरेर जीवन चलाउँथे । जसरी भए पनि उनीहरू सन्तुष्ट र खुशी जीवन बिताइ रहेका थिए ।

अचानक उनीहरूको जिवनमा दुःख छायो जब उनीहरूको छोराको खेल्ने क्रममा घर नजिकैको पोखरीमा डुबेर मृत्यु भयो । सुमित्रा घरको काममा व्यस्त भएका बेला सो घटना घटेकाले उनका परिवारले उनलाई घटनाको दोषि ठहर्‍याए । उनलाई छोराको मृत्युको आरोपका साथै गाली, कुटपिट र नराम्रो व्यवहार पनि गरियो । उनको परिवारले उनलाई बेवास्ता गरी एक्लो बनायो । छोराको मृत्युले त्यसै टुटेकी सुमित्रालाई भन्नु आफू छोराको मृत्युको कारण भएकाले र परिवारले दिएको मानसिक र शारीरिक यातनाले थप चोट दियो । उनी एकलै बस्ने, केही कुरामा ध्यान नदिने, रूचि लाग्ने काम सम्म पनि गर्न छोडिन् । उनी कसैसँग बोल्दिन थिइन् जसको कारण उनका पतिलाई भन्नु चिन्ता हुन थाल्यो । उनले सुमित्रालाई धामीकोमा लगे तर केही काम लागेन ।

एक दिन, एकजना स्वास्थ्य स्वयंसेविकाले सुमित्राका पतिलाई सुमित्राको अवस्था बारे बुझ्नलाई भेटिन् । सुमित्राका पतिको कुरावाट स्वास्थ्य स्वयंसेविकाले सुमित्रालाई सहयोग चाहिएको कुरा बुझिन् । स्वास्थ्य स्वयंसेविकाले सुमित्रालाई धकधई स्वास्थ्य चौकीमा तालिम प्राप्त स्वास्थ्यकर्मी भएकाले त्यहाँ लग्ने सल्लाह दिइन् । त्यसैले उनका पतिले उनलाई प्राथमिक उपचार केन्द्र लिएर गए जहाँ सुमित्रालाई छोराको मृत्यु र परिवार व्यवहारको कारण मानसिक समस्या भएको देखियो । त्यहाँ सुमित्रालाई मनोविमर्शका साथै औषधि पनि दिइयो र परिवारलाई उनीप्रति राम्रो व्यवहार गर्ने सल्लाह दिइयो ।

उपचारले गर्दा सुमित्रामा राम्रो परिवर्तन आएको छ । उनको आवाज फिर्ता आए सँगै उनले घरको काम पनि गर्न थालेकी छिन् । विगत एक वर्षसम्म उनले निरन्तर औषधिको साथै मनोविमर्श र परिवारको साथ पाएकी छिन् । उनले मानसिक स्वास्थ्य परियोजना कार्यक्रमको प्रशंसा गर्दै भनिन्, "स्वास्थ्यकर्मी, उहाँको दवाई र मनोविमर्श मेरा लागि भगवान जस्तै हुन जसले मलाई ती काला दिनवाट बाहिर ल्याए ।"





यूनाइटेड मिसन टु नेपाल  
पो.ब.नं. १२६, थापाथली, काठमाडौं  
४२२८११८, ४२२८०६०  
communications@umn.org.np  
www.umn.org.np