

Cover Feature

TRUE INDEPENDENCE

Towards an Inclusive India



"Accessibility is the need of the hour, and it's not only for people with disabilities."

"I wish for everyone to dream big, achieve big and make our country proud. I wish to see India win as many medals as possible in sports."

"I wish that people with disabilities in India become independent and free in the true sense of it."

"My dream for India, is for her people to take pride in our varied customs, yet stay united!"

Sleep Is The Best Meditation

Sleep Hygiene

When You Can No Longer Remember

Living with Dementia

Parochial Games

In the Corporate World

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WE'D REALLY LIKE TO HEAR FROM YOU

Whether you are a person with disability,
or a parent or a friend or just someone who cares,
we look forward to getting to know you and your concerns.

You are just a [click](#) away!



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News & Notes

EARLY INTERVENTION SERVICES TAKING IT TO EVERY VILLAGE & CITY

Udisha-Portage, a simple and effective early identification and intervention service can be provided to children with disabilities, be they in a city or a remote village. Parents, Village Rehabilitation Workers (VRWs), Multi-purpose Rehabilitation Workers (MRWs), Anganwadi Workers (AWWs) and Accredited Social Health Activist (ASHA) workers can make use of Udisha-Portage. Early intervention can prevent secondary disabilities that occur due to neglect of primary conditions and make optimum use of the residual potential in the child, and thus help the child progress.

Udisha-Portage, developed by the Community Based Rehabilitation (CBR) Network, helps to identify and provide early intervention services, and also facilitate optimum and holistic development of the child (between 0–6 years) in all domains – cognition, language and communication, self-help and daily living skills, motor development and socialisation. A unique feature of Udisha-Portage is that it does not label children. Udisha-Portage is also relevant to India's diverse cultural contexts, as it allows flexibility and suggests locally available stimulation



and learning materials to make the programme affordable and sustainable. The CBR Network is keen to enable children of every state in the country to benefit from Udisha-Portage. To bring this service to your village, town or city, e-mail Dr. Indumathi Rao at ideasianetwork2013@gmail.com

Source: CBR Network

MBBS ADMISSION MCI'S GUIDELINES FOR PUPILS WITH DISABILITIES AMENDED

In a major victory for candidates with disabilities aspiring to become doctors, the Union Health Ministry amended the controversial Medical Council of India's (MCI) guidelines debarring admissions to people with specific disabilities.

Dr. Satendra Singh, who led a representation by 75 doctors with disabilities from across the country calling for framing new



guidelines, had also filed a writ petition in the Supreme Court appealing to quash these guidelines. In its response to the Supreme Court, the Union Health Ministry accepted the MCI guidelines with several amendments benefiting candidates with disabilities. It also rejected the MCI recommendation that learning disability is not quantifiable. Upholding the assessment guidelines notified earlier by the Ministry of Social Justice, the Health Ministry allowed people with learning disabilities (dyslexia) of 40% or more to pursue medical education in disability quota, who were earlier not eligible under previous guidelines.

The Health Ministry acknowledged the representation of 'Doctors with disabilities' which cited instances of individual doctors with more than 80% disability in India (many of whom were signatories) who excelled in their disciplines in spite of the disabilities.

Source: Daily News & Analysis

INTERNATIONAL DISABILITY DATA PORTAL LAUNCHED

Leonard Cheshire and the UK Department for International Development (DFID) have launched a new and internationally relevant disability data portal (www.disabilitydataportal.com). For the first time, data disaggregated by disability from multiple and diverse sources – across 16 development indicators in 40

countries – has been pooled together in one resource. Data around key development themes including inclusive education, economic empowerment, technology/innovation and stigma/discrimination is available on this portal.

The portal enables cross-country comparisons and comprehensive analysis. As new data is identified, it can easily be added. The portal is designed to be easily accessible to government officials, experts and advocates and aims to ensure that people with disabilities, including groups such as girls with disabilities, are fully considered and included in development programmes and action.

The portal provides an in-depth report to provide an overview of the objectives, methods and findings for the 16 indicators across 40 countries. The report also contains a discussion section and suggested next steps to inform future work in the field of disability data. The full report, and its extended summary, is available on this portal in Easy Read and Large Print format too. Feedback, as well as collaboration from interested organisations and partners is invited to develop and expand the portal further.

Source: Disability Data Portal

FIN! AMPHIBIOUS PROSTHETIC SWIM LEG TESTED

Researchers at Northwell Health have developed a first-of-its kind prosthetic swim leg. Current waterproof legs have limitations when it comes to swimming. This swim leg ‘Fin’ is designed to give swimmers a more natural sensation while swimming and users do not have to switch prosthetics when getting in and out of water. Kevin Vaughan, one of those who tested the prosthetic was able to swim, kicking both legs, in a way he was not able to, ever since he lost his leg seven years ago. This prosthetic leg gives users like Kevin the ability to get in and out of water and move through it with ease.



The Fin is the first amphibious prosthetic made with a 3D printer and is the creation of Dr. Todd Goldstein, Director of 3D Design and Innovation at Northwell Health. According to Goldstein, the 3D printed prosthetic swim leg is customised to the user. Researchers hope to bring the Fin to the market in three to five months. ■

Source: CBS Miami



TOWARDS AN INCLUSIVE INDIA



Suchitra
Iyappa

'Inclusion' is now a buzz word in the nation's lexicon, and disability has moved from a purely medical context to a wider social realm that advocates the empowerment of a people who have the right and power to make decisions by themselves and for themselves. First generation firebrand activists led this change and a spirited new generation of activists and achievers are carrying the baton forward. On our country's 72nd Independence Day, we at Ability Foundation asked some of these bright young achievers to share their ideas of freedom and true independence. What do they wish for their country, their community and themselves? SUCHITRA IYAPPA brings it to you.

Where the mind is without fear and the head is held high
 Where knowledge is free
 Where the world has not been broken up into fragments
 By narrow domestic walls...

Into that heaven of freedom, my Father, let my country awake.

With Tagore's vision for India, the dreams of her poets, sacrifices of her valiant martyrs and freedom fighters and vested hopes of millions of her citizens, India marches into her 72nd year of independence. What does the future hold for each one of her citizens?

After years of being brushed under the carpet, disability is finally being acknowledged as an important reality. Discarding the shroud of invisibility, anonymity and mystery, persons with disabilities are more and more visible today, demanding their rights, gaining access to their requirements, and working hard towards creating vibrant impressions by making a mark in several walks of life.

Yes, it does seem like India is waking up, albeit late, to the potential of people with disabilities. While clearly there's much to be done, the very fact that change has slowly but surely set in is an encouraging enough start.

A few years ago, Indian Sign Language was unheard of in Indian schools. Today, institutions of higher learning like Sathyabama Institute of Science and Technology are sensitive enough to have sign language interpreters in their classrooms. Additionally, several corporates are implementing their diversity policies by throwing open their doors to employees with disabilities, by providing a level playing field for them to function. More and more companies are requesting candidates from this hitherto unexplored pool of qualified persons



with disabilities. Software engineers, bureaucrats, bank officers, entrepreneurs... *Dream it...Realise it...* is slowly becoming the mantra of many a talented young man and woman with disability in India today.

Besides, the Indian media, not to be left behind, has begun to play its part in facilitating an attitudinal change, by showcasing meritorious students and para athletes who have conquered their disabilities to shine in a highly competitive environment. Today, our country, as well as the world, knows of a Deepa Malik and Mariyappan Thangavelu as much as a Sakshi Malik or Dipa Karmakar. For instance, a decade ago, who would have imagined a football academy for the blind in India or that we would have blind female referees officiate a football competition, as they did at the Northeast Blind Football Tournament, earlier this year?

While there's no denying that accessibility continues to pose the biggest challenge, the Ernakulam Railway Station has led the way in

Discarding the shroud of invisibility, anonymity and mystery, persons with disabilities are today demanding their rights, gaining access to their requirements, and making a mark in several walks of life.

becoming the first disabled-friendly railway station in the country... Tiny ripples no doubt, but ripples nonetheless in what was earlier still waters. Indeed, things are happening and happening in our midst.

Much of this optimistic advancement has to do with the Rights of Persons with Disabilities Act of 2016, which included as many as 21 disabilities within its ambit, from the seven disabilities listed under the earlier Persons With Disabilities Act of 1995. This big leap forward has not only ushered in hope and faith but has also presented a more comprehensive disability spectrum to the general public, thereby raising collective awareness.

Predictably, 'inclusion' has now become a buzz word in the nation's lexicon. First generation activists like the late Javed Abidi, Dr. Sruti Mohapatra, George Abraham, Arun Rao, Dr. Sudha Kaul, Dr. Mithu Alur, Poonam Natarajan, Akhil

Paul and our very own Jayshree Raveendran, among others have led the way in fighting for the rights of disabled persons, as equal citizens of the country. As a result, disability has moved from a purely medical context, to a wider social realm that advocates the empowerment of a people who have the right and power to make decisions by themselves and for themselves.

These firebrand activists have further inspired a spirited new generation of role models to carry the baton. We, at Ability Foundation, thought the time was right to ask these bright young achievers to share their ideas of freedom and true independence on our country's 72nd Independence Day. What do they wish for their country, their community and themselves? Here is what they had to say...



Disability rights activist and Executive Director Designate, National Centre for Promotion of Employment for Disabled People (NCPEDP), **ARMAN ALI**, a person with cerebral palsy, has helmed the Shishu Sarothi Centre for Rehabilitation and Training for Multiple Disability at Guwahati since 2009. Arman has also played a pivotal role in consolidating the disability sector in the North East, leading campaigns and engaging the judiciary in a number of public interest litigations to uphold the rights of persons with disabilities. He wishes that “people with disabilities in India become independent and free in the true sense of the word”.



International medalist in para swimming, **SHAMS AALAM SHEIKH**, a person with spinal injury, is a world recorder holder in longest open sea swimming by a paraplegic person. Featuring in the Limca Book of records, Shams is presently focussed on preparing for the 2018 Para Asian Games at Indonesia and 2020 Paralympic Games at Tokyo. “Accessibility is the need of the hour and it's not only for people with disabilities. Pregnant women, the elderly and children too need it. Accessibility will definitely help our nation become a developed country”, says this determined achiever.



“There is so much to wish for and do; if I had to pick one, I would like to see Indian Sign Language become the 23rd official language of India,” says **DR. ALIM CHANDANI**, Director, Centum GRO Initiative and Associate Vice President, Centum Foundation, who is himself deaf. Holding a doctoral degree in Administration and Supervision in Special Education from Gallaudet University, USA, Dr. Chandani has now put his own career aside to empower deaf people in India to become successful in business as well as in the professional world through education, employment and training.



An acknowledged child prodigy, author, composer and inventor 13-year-old **A. VISHAL**, is a multi-talented personality who by his admission “is an undeterred glowing lamp that fuels itself with serene thoughts and simple science”.

Born with mild autism and a deep influence of dyslexia and dysgraphia, Vishal has been fighting his challenges, by setting his high standards in the field of music, literature, science and arts and making a name for himself. “My dream for India is for her people to take pride in her varied customs, yet stay united,” he says simply.





MARINA SAMUEL, a person with cerebral palsy, holds a job in a reputed organisation and is proud that she is able to support herself and her mother. Marina wishes for acceptance in a humane, non-judgemental India, and says, “I wish India to be more caring of mankind by making her people live with dignity and trust for each other”.

GAURI SHEKHAR GADGIL, who is not only a Special Olympics and national level swimmer but also an award winning actor for her role in the Marathi film ‘Yellow’. A person with Down’s syndrome, she says, “I wish for everyone to dream big, achieve big and make our country proud. I would like to see India win as many medals as possible in sports.”



MANASI JOSHI, one of India’s most dashing sports women lost her leg following an accident in 2011. Today, she has risen to rank among the world’s top three women para badminton players, and holds a bank job too. She wishes “we have more and more new opportunities created, and (we) generate more resources as a society”.



Software developer, poet and motivational speaker **SIDHARTH TANEJA** juggles his many roles with élan. He constantly pushes the boundaries created by his cerebral palsy to go trekking, cycling and the like. He is now pursuing a Master’s degree in Computer Science from the University of Cincinnati, after a five-year stint as software developer with Makemytrip.com. Sidharth believes that for India to progress, we need to stop the blame game. “Change starts with me. If I change, India will change and one day it will become my dream India”, he declares optimistically.



Responding to the questions put forth to them on the important occasion of India’s 72nd Independence Day, Arman Ali, Dr. Alim Chandani, Shams Aalam Sheikh, A. Vishal, Gauri Shekhar Gadgil, Manasi Joshi, Sidharth Taneja and Marina Samuel responded to Success & Ability (S&A) from across the country, on their hopes and aspirations for India’s future.

Q & A

S&A: What do freedom and independence mean to you?

ARMAN: To me, freedom and independence, is, when you can think and put your thoughts into action, to be able to communicate, to be able to go wherever you want, to be able to do what you dream of. I see freedom and independence as the ability to put thoughts into action without any fear or doubt.

ALIM: Freedom and Independence as a deaf person, is to have access to information and the right to choose his/her preferred language without any barrier or constraint. To be able to have the same opportunities to achieve as any other hearing individual. Equality is a magnificent cornerstone of the Indian constitution and democracy. Deaf individuals are equally human and deserve equality in all rights enlisted in the constitution.

SHAMS: I am blessed to be born in independent India, it means a lot to me. For me, my nation is always first. I love India.

VISHAL: Independence to me is being aware of the power in one's self. My awareness of the movement of my limbs is my understanding of independence. My hands and legs belong to my body. Hence, it is the ownership I have that gives me the power to use them. Unfortunately we don't enjoy as much freedom as that of the wanderers of the Stone Age. Today we are picture perfect in stature but not in state of mind.

GAURI: For me, independence and freedom mean respecting one another, respecting each other's decisions and helping one another to fulfill our goals.

MANASI: I feel freedom means access, not only to public spaces, but also to information and resources. Only when there is opportunity, do we have the freedom to choose and create things for ourselves.

SIDHARTH: Freedom means a lot to me. Life has no meaning without freedom. It is like you have the instrument but you don't have the freedom to play your own music. The sky is freedom for birds, a jungle is freedom for animals and living life to the fullest is freedom for us. Freedom simply means absence of boundaries.

MARINA: Achievement through my own ability is freedom. I was born with cerebral palsy. As a child, I always needed the help of my family to go out. As I grew up, I was allowed to go to nearby places on my own only if it was within walking distance. I was never allowed to travel alone on a bus. This was my limitation. I used to wonder how I could ever overcome this barrier. After convincing my mother to allow me to travel alone by bus with a promise that I would be safe, I returned home without a problem and won her confidence. Thereafter I started travelling alone to various places. To lead an independent life is freedom to me. I am now able to travel independently to work, my workplace is about two hours from home.

S&A: What would you wish for India on the occasion of her 72nd Independence?

ARMAN: I wish that India becomes an inclusive country, a country that leaves no disabled person or any other disadvantaged person behind. I wish to see India take disability as a development issue, such that anything done in the country is disability inclusive.

ALIM: There is so much to do to create a better livelihood for more than 18 million deaf and hard of hearing individuals in India. If I had to pick one – I would like for India to recognise Indian Sign Language as the 23rd official language of the country.

SHAMS: I wish to see India as a more developed country in the coming years.

VISHAL: Seven decades have gone by, our freedom has seen many desynchronised ideals on culture, and values fading away from the true identity of assertive patriotism. An inclusive ideology in thoughts, words and deeds is mandatory, but unfortunately, all we see is an aggressive, robust persona of a patriotic regime today.

GAURI: I wish for everyone to dream big, achieve big and make the country proud.

MANASI: The creation of more and more new opportunities and for us as a society to generate more resources is what I wish for India.

SIDHARTH: I wish infinite growth for India. In the past few years, we have seen several projects like Swachh Bharat Abhiyan, Make In India initiative, Clean Ganga Project, Pradhan Mantri Ujjwala Yojana and many more that are necessary to compete with the world. I wish India to become a truly diversified country. I wish India to become a reservation free country (on the basis of caste). I wish India to become an educated and literate country, a clean country, a poverty free country, a united country.

MARINA: I would want India to be more caring of mankind by making her people live with dignity and trust for each other. To create more opportunities for those who have been left behind and are not accepted by society. Where there is no discrimination due to religion and where disabled and non-disabled persons are accepted in society with equal dignity. I also wish that there should be sufficient food for all and that no one ever again dies of starvation.

S&A: *What is your dream for India of the future? How do you see your journey towards this dream, the challenges and the way ahead?*

ARMAN: I dream that the entire country should come together and work towards inclusive development. I want to put all my effort to connect with people and try to be a catalyst in bridging the gaps that may be. The challenges ahead are acute. To begin with, people with disabilities don't know their rights, and many are unable to exercise their rights. And then, there are many barriers that range

from attitudinal barriers to barriers of infrastructure, and a lack of understanding. Many people with disabilities themselves see the issues concerning them from a welfare prism and not as a rights issue.

ALIM: I have three goals to achieve for the Deaf community in India: (a) To improve the quality of education for deaf children by promoting Indian Sign Language as the primary language to teach and communicate. (b) To promote and support the provision of accessibility services at all educational institutions, workplaces, public services as well as major events and programmes frequented by the deaf citizens of India. (c) To create an innovative space to enhance creativity and find solutions to the daily challenges faced by deaf individuals – encouraging more deaf persons to become successful entrepreneurs.

VISHAL: My dream for India, is to take pride in our varied customs yet stay united as one. I wish we accommodate differences, disparities and disabilities; acknowledge honesty, sincerity, humanity and prodigious talents; and adore nature in its entire existence, God's supremacy and love as mankind's way of life.

SHAMS: My dream is to bring glory to India in Paralympics 2020. As a paraplegic person, I face many difficulties on a daily basis ranging from inaccessible transport, public toilets, schools, colleges and Government buildings, all of which make me dependent on others. Accessibility is the need of the hour and it is not only for people with disability – pregnant women, elderly people and children too need it. Accessibility will definitely help our nation become a developed country. We hope our Government implements the RPD Act of 2016, which will definitely help many people with disabilities to come out and contribute towards the betterment of our country.



GAURI: I would like India to win as many medals as possible in the field of sports. To achieve this, I would like to become a coach. My journey began with my learning basic swimming and then progressing towards advanced level swimming in the river and sea. I had to overcome various hurdles including my own physical limitations like weak muscle tone, balance, coordination, etc. But with constant support and hard work I was able to achieve this success. I am sure that I can help the next generation of enthusiastic athletes to fulfill their ambitions.

MANASI: I wish to live in a country where I can choose to have a career of my choice in any field I want, love and marry any one I choose, and to be free to roam and explore.

SIDHARTH: My dream India is where newspapers contain information, not tragic stories, where no one is uneducated, self-employment is visible,

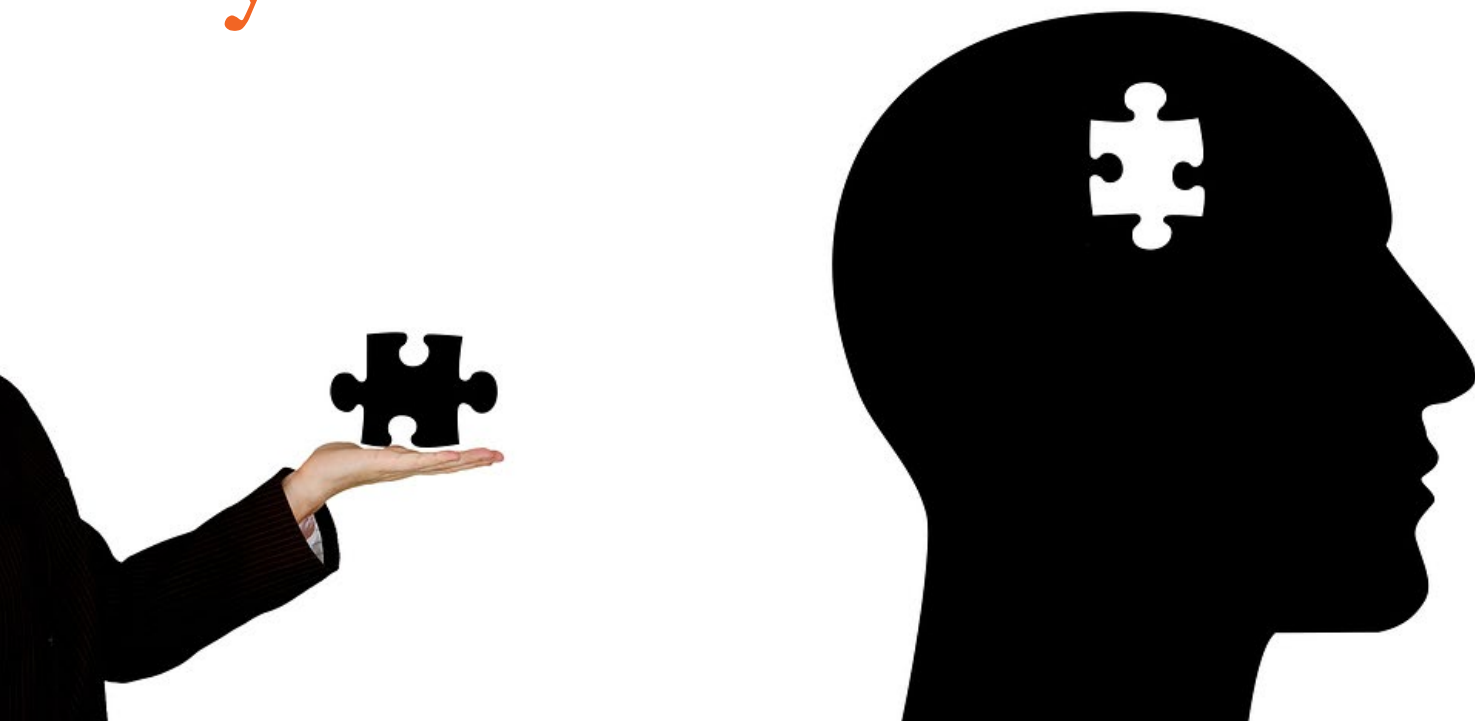
innovations are widely discussed and everyone understands what everyone else needs. If we accept our wrongdoings and decide to do something good, we can build our dream India. No blame on politics, government in power, policies, or the judiciary... Change begins with me. If I change, India will change and one day it will become my dream India.

MARINA: I dream of homes for the disabled where they can spend the rest of their lives in safety; a real home where they can have the necessary comfort, facilities and companionship; a reliable shelter for disabled people employed in different occupations but are alone; shelters that provide opportunities for residents to pursue vocations that would let them feel self-worth. I appeal to the Central Government and to all the State Governments to make this happen. This would help lighten the burdens of disabled people and provide relief for their parents and families.

Expressing hope and optimism, these brave, young voices look forward to a better tomorrow. The wheels of change have been set in motion and with heartening results. May India strive towards a truly inclusive society where every citizen can live with dignity, empowerment and confidence. To me, that would be the real essence of India's independence. ■

Dementia

Myths & Facts



You read about it in news reports, you come across health advisories on it, and you hear it said at conversations that 'x' or 'y' has this condition... 'Dementia' is something that crops up all too frequently these days.

Is dementia really so prevalent? Or is it being confused with ageing related memory loss? There is also the worrisome reality that a huge number of dementia cases go undiagnosed, thus going untreated or ill-managed. Obviously, the spectre of dementia is a perplexing one.

What exactly is dementia? Is it a disease that mainly affects the elderly? How does one recognise dementia in its early stages? How does one manage dementia? Can its progression be slowed down? As these and other questions come into our minds, Hema Vijay has a conversation with PADMA SHRI DR. V.S. NATARAJAN, who



**Hema
Vijay**

gives valuable pointers that throw insights on coping with dementia. Dr. V.S. Natarajan has pioneered geriatrics in India, setting up the country's first geriatric outpatient and inpatient wings at the Madras Medical College and Hospital. He has also established the country's first M.D. programme in geriatrics at Tamil Nadu Dr. M.G.R. Medical University in 1996, and is the author of several books and research papers.

Q: Can you please tell us what dementia is?

A: Many people confuse dementia with ageing related memory loss. The fact is, memory loss alone doesn't indicate dementia. When memory loss is ageing related, it progresses very slowly and doesn't affect the person's quality of life. This is called Minimal Cognitive Impairment (MCI) and is very different from dementia. Roughly one third of those affected by MCI develop dementia in three to five years. Reversal of MCI is possible. Ageing does not necessarily lead to dementia.

Dementia itself is of two kinds, treatable and non-treatable. Non-treatable dementia is rapidly progressive. Treatable dementia is caused by vascular issues, while non-treatable dementia is an outcome of Alzheimer's disease. There is no drug to cure Alzheimer's disease, only symptomatic treatment is available. In India, we find that mixed dementia is more common – that is, the same person has both treatable and non-treatable dementia. In the west, we find that Alzheimer's dementia is more common. In people with Alzheimer's dementia, death usually occurs seven to ten years after the onset of the disease because of aspiration pneumonia and falls that lead to head injury. Dementia is slightly more common in women than men.



Dr. V.S. Natarajan receiving the Padma Shri award

Q: What is the age group that dementia affects?

A: Usually, dementia develops after the age of 70. Only rarely does dementia develop in the younger age group, in those in their 50s. People who suffered head injury in the past, or have a family history of dementia, may however develop dementia while young, in their 50s.

Q: What are the early signs for recognising the onset of dementia?

A: The earliest symptom of dementia is a gradual loss of memory, impairing the power to concentrate. There is also loss of awareness about time and place, and on what one is doing. Dementia also hinders with one's ability to learn new activities and the capacity to analyse. The main feature of dementia is loss of memory of recent events but preservation of memory of past events – they forget about the ones who had visited them that week and/or the happenings of that day, but well remember events of the distant past.

Q: How can families distinguish between dementia and ageing related memory loss?

A: A person with MCI would himself recognise that he has memory loss, and he himself might take the initiative for a medical consultation to deal with it. In contrast, a person with dementia will not be aware that he has memory loss. He sees himself as normal. A person with MCI might call a pen a 'knife'. But once told that he is wrong and asked to think carefully and name it again, he would correct his mistake. On the other hand, a person with dementia will keep insisting that the pen is a knife.

Further, a person with dementia will not come to the point directly. For instance, to communicate that he wishes to visit the Madurai Meenakshi Temple, he might say that there is a temple in a southern district of Tamil Nadu, and then mention that he wants to visit that temple. A person with dementia will not have clarity in speech, his words will not be clear. These symptoms of dementia are progressive.

Only a geriatrician or a neurologist will be able to make this differentiation and should be consulted if a family member picks up the above clues.

Q: On what factors should general physicians be trained to handle/recognise dementia in its early stages?

A: General physicians should be trained to look out for memory loss of recent events, preservation of memory of past events, and for the slightest change in behaviour/activities of daily living. For example, if a person who has been shaving regularly stops

shaving, a person who does not button up his clothes correctly, or one who puts the left slipper on the right foot or *vice versa*, a person taking to childish behaviour, like playing with kids in the street or chasing dogs with a stone, or who becomes slack about personal cleanliness, etc.

Q: What are the risk factors?

A: Dementia can be classified broadly into 1) primary dementia (Alzheimer's disease) for which causes and risk factors are not known, unless there is a family history of Alzheimer's disease, and 2) secondary dementia such as vascular dementia which occurs due to decreased blood supply to the brain, and some other causes such as hypertension, diabetes mellitus, nutritional deficiency hypothyroidism, depression, head injury, post stroke status, cerebral tumour, alcoholism, etc.

Q: Can one postpone the onset of dementia and minimise its progression?

A: Yes, we can postpone onset of dementia and minimise its progression through exercise, relaxation and meditation. Any form of physical exercise on a daily basis will enhance blood supply to the brain and improve the person's memory. Gardening, attending lectures, taking part in *satsang* and other spiritual activities are some more pleasant ways to relax the body and mind. Meditation will go a long way in the nurturing of mental health. Good nutrition for the brain helps. One should consume foods that nourish our brain, and this includes egg yolk, tuna fish, green tea, coffee, sweet potato, onion, strawberry, apple, rajma, raisins, etc.

Q: Is there a diagnostic test to detect this condition?

A: There is no test to confirm dementia except brain biopsy. Since that's not a possibility, the following tests can be done to identify dementia: Minimal Mental State Examination, Montreal Cognitive Assessment test, MRI and PET scan. In the Minimal Mental State Examination, if a person gets more than 25 out of 30, he is considered to be normal. If he scores between 20–25, he is said to have mild dementia. If his score is between



15–20, he has moderate dementia. A person with ageing related memory loss would be scoring 25 and above.

Q: Any methods of effective care that families can see to?

A: The person with dementia should be treated as a grown-up child with a mental impairment. There should be no argument or discussion with the person. Nor any shouting or advice. Just sympathetic, loving care. Care givers should also use positive body language like holding the hands of the person and ensuring the appropriate nutritional diet. Families should not let the person handle his/her medicines. One also needs to make provisions like railing around the bed if the patient tends to fall, night lamps in the house, a safety lock on the door to ensure that the person does not walk out of the house, etc. Music therapy or group therapy may be arranged. One must be sensitive to the person and treat him/her with love and patience. ■





S L P

Where are you?



*Troubled by sleeplessness or a lack of adequate sleep? Consultant psychiatrist **DR. N. RANGARAJAN** tells you how you can sort it out.*

What's the ultimate in pleasurable experiences? One might be tempted to give a long list of hedonistic pursuits all of which might vie with one another for the top spot. But ask a man who has faced the lack of it – he'd say that nothing can beat a good night's sleep.

We tend to take for granted the normal daily physiological events, and typically realise their value only when we miss them. The experience of lying in bed with the late night TV show on and watching everybody else comfortably in the grips of the sandman is a horror best understood only if experienced! The extent to which one would be willing to go to sort out this problem would not be surprising at all.

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An essential thing for good sleep is to adhere to the principles of sleep hygiene.
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Very often, people respond to their lack of sleep with the obvious – the “sleeping pill” and in some, alcohol! Within the first few days they are ready to write love sonnets to the pills. Such is the immediate relief that one can't help thinking that a world without these is a waste of time! But as time goes on, the devil extracts his due! More pills or a few extra pegs are the order of the day just to get some sleep.

The horror unfolds when you don't get it one day. The body trembles and twitches. Legs ache and you want to be anywhere else, except where you just are! You frantically search for the magic potion and gulp

down anything that might be even remotely helpful in inducing sleep. And so it goes on, with an intense fear gripping you that you might be caught unawares and might land up without the sleep aid!

The love story turns into a nightmare! You are left not only with a sleep problem, but also an addiction that would eat away your basic self confidence.

You might think I'm kidding you! A simple sleeping pill making you a drug addict? And remember, we are not looking at one day's sleeplessness or one single sleeping pill. When the problem is of a long duration and the apparent cure is so simple, such a scenario does quickly develop.

The sleep-wake cycle

Let us look at sleep and its problems a trifle in detail. The sleep-wake cycle is an inbuilt rhythm conducted by the hypothalamus. It closely parallels the day-night cycle and is of course influenced by it. Habitually therefore, we tend to associate sleep with the moon, stars and darkness! Adequate sleep is very essential for the body and brain to recover from the active day and also to be able to grow.

A young baby would sleep for most of the day, and as it grows older, the total time spent in sleep would reduce. A senior citizen would probably sleep only three to five hours a

day and still be active. The body's requirement for sleep seems to diminish as we age. However, it is still a very disturbing experience to be sitting up at 4 a.m. with nothing at all to do!

During sleep, the brain and the rest of the body goes through various stages. These come under two broad categories:

Non Rapid Eye movement (NREM) sleep.

Rapid Eye Movement (REM) sleep or 'Dream' sleep

NREM sleep

This goes through four stages I, II, III and IV. There is a progressive slowing of brain waves (as in the EEG) as well as a progressive relaxation of the body musculature, with a very low muscle tone and brain waves of about 0.5-2 cycles/second in the EEG, during stages III and IV which indicate the deepest sleep possible. NREM sleep forms

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about 75% of one's total sleep with stages III and IV accounting for about 15-20%.

REM sleep

About 25% of our sleeping time is in the REM sleep, during which the brain waves are at frequencies occupying from 8-15 cycles every second – which is almost at the level of activity during our waking hours. The paradox is that during this period, the muscle tone is completely zero and for all practical purposes, we are 'paralysed'. In addition, the eyeballs seem to be moving in a random way quite rapidly behind closed eyelids. And we dream. In all we dream for about 20 to 25% of our total sleep time, but in divided quantities of 10 to 30 minutes at one go.

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The classic complaints of an insomniac are, a chronic inability to find adequate sleep at night and chronic fatigue, tiredness or drowsiness during the day.

When we decide to tackle the sleep problem, the starting point is at the Doctor's desk, where an effort is to be made to check out if various medical problems which disturb sleep are in evidence. Treating these would automatically improve the quality of sleep.

The next major step is to look for any psychiatric disturbance as this can change the quality of sleep considerably. Treatment of the underlying psychiatric problem improves sleep considerably.

Two very peculiar, but disturbing sleep disorders are those related to Jetlag Syndrome faced by air travellers and those experienced by shift workers.



The starting point in tackling the sleep problem lies at the Doctor's desk, to find out if any of the various medical problems that disturb sleep are in evidence. Treating these would automatically improve the quality of sleep.



The best approach to the Jetlag Syndrome is to expose oneself to as much of bright daylight as possible instead of staying in the hotel room, and perhaps the one time use of a short acting sleeping pill that will coincide with the sleep time at night.

In the case of shift workers, organising the work schedule to a clockwise direction of shift rotation and minimising the frequency of shift rotation in such a way that the employee works for two-three weeks in the same shift, helps in improving sleep. Reduction of the number of consecutive nights at work to four or five rather than seven would also help in reducing the sleep problem.

Even after ruling out all these, there might still be a considerable number of people with sleep problems. If very much in need, sleeping pills can be used, but with a great deal of caution. It's best to use short acting sleeping pills, so as to avoid 'hangover' sedation. There should be at least a two-day gap between consecutive sleeping pills. If one takes a pill on a Monday night, the next should be only on Thursday night. This would prevent addiction from developing.

The most essential thing to do is to adhere to the principles of sleep hygiene as given below:

1. Avoid sleeping during the day.
2. Avoid using the bed for paper work, reading, etc.
3. Try to keep regular food habits.
4. Breakfast like a prince.
5. Lunch like a king.
6. Dine like a pauper – Light, low-fat dinner helps in sleep.
7. Set up a regular exercise programme and take up some relaxing hobbies.
8. Avoid tobacco, alcohol, caffeine and chocolates about 2–3 hours before bed time.
9. Don't read from a mobile phone or an e-book at bed time. The blue light from these gadgets disrupt sleep by affecting the sleep-inducing hormone melatonin. Have a refreshing bath and empty your bowels and bladder before sleeping.
10. Ensure adequate ventilation in the bed room.
11. A cup of milk before retiring helps.
12. A monotonous “white noise” such as that from a fan or the hum of the air conditioner helps.
13. Lie down in bed only when drowsy. Do not lie with eyes closed, willing sleep to come.
14. If not drowsy, sit in a chair and listen to music or read till you feel drowsy.
15. Do not feel jealous or get angry at your partner who seems to be deep in sleep, oblivious to your difficulty. This helps you through the next day. ■



GAMES

organisations



Dr. Ketna
L Mehta

Workplace politics engaged in by troublemakers, the envious, and the mediocre, to pull down motivated and high-performing employees, ultimately sidelines the organisation's growth and development, points out DR. KETNA L MEHTA, Founder Trustee, Nina Foundation.

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The corporate world is a space that's far from being a level playing field, and is highly dependent upon the philosophy, culture and leadership of the organisation.

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I am an extremely sporty kind... I have represented my school team at Gujarat's state level women's basketball events, taken coaching for badminton while in college, and participated in baseball and throwball tournaments. Playing competitive sports with true sportswoman spirit, I have keenly followed the rules of the game, respecting referees' decisions, giving my best shot, and playing with joy and full fairness!

Having said that, let me familiarise you with corporate reality – a space that's far from being a level playing field, and is highly dependent upon the philosophy, culture and leadership of the

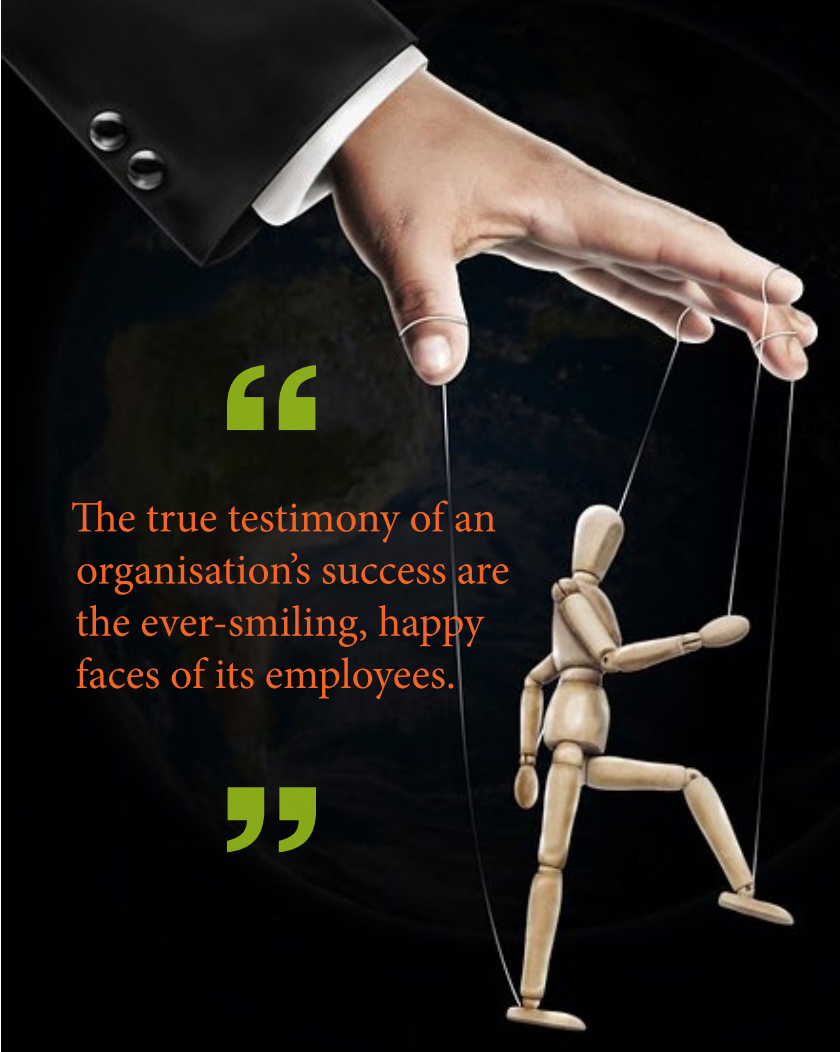
gossip channels add their own '*mirch* and *masala*' to the episode.

There is this oft repeated story of the frogs in a well, of how repeated attempts made by one young frog, striving hard to climb out of the well, was sabotaged by the other frogs. The other frogs did not want this hard working frog to excel and move up, and rather than emulate his attempt, they put their energies to stay down, and also keep the young frog at the bottom of the well.

This is what happens to an employee who is focussed on her job and strives to move towards organisational goals with passion and gusto. Unable to match this pace towards growth and excellence, a few channelise their energies to 'create' problems, issues and trouble. They are clearly mediocre minds possessing good political skills, which they use to

drag the employee into this 'game'. Generally, this naive exceller is drawn to this low level verbal duel or slanging match, diverting her focus and impacting her emotionally and professionally. And thus the trouble makers, the envious, and the mediocre sideline the organisation's growth and development. In the process, adversely playing with the health of their colleague.

Meanwhile, several companies have espoused their 'noble' side by setting up POSH (Prevention of Sexual Harassment) committees, with awareness sessions for all their employees. Extensive media coverage projects them as being 'pro-women' and gender-neutral, thus enhancing the company's image. However, an informal chat with a few committee members reveals that this is purely a



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organisation. 'Winning at any cost' is a dangerous game some organisations and people indulge in.

The word 'politics' takes on a completely new meaning in the corporate landscape! My yoga guru, Dr. Ajay Gaikwad, shares how one of his students, a highly successful, senior corporate executive in a top advertising agency in Mumbai, was going through emotional turmoil, sleepless nights, PCOD and hypothyroidism triggered by corporate politics and work stress. Indeed, a huge price to pay for corporate political games.

Such situations are 'engineered' by a group of 'chaos-makers' who play age-old tricks of miscommunication and misinterpretation, deliberately adopting indirect channels of communication. The office grapevine and



public relations exercise. Though there are the exceptions of genuinely caring companies, the ground reality is that women do not break the

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glass ceiling as they are always ‘second-rung’ to men in most organisations. The structure and culture does not encourage women to report any misbehaviour or biased ‘games’ being played!

Observation and analysis of information in the public domain leads one to discover that companies play the ‘parochial game’ quite deftly. A close look at department heads and key positions show that they all are held by a ‘favoured

community’... plum projects, international trips, big ticket training programmes, powerful positions and more. Such ‘silent games’ are difficult to tackle in the corporate field by the rest of the players, the employees.

HR portals, magazines, seminars and conferences wax eloquent on trendy initiatives like 360 degree feedback, employee experience, upskilling, organisational design thinking, inclusion and diversity, interaction focused on-demand apps, return on relationship and many more, which are adopted by several companies. These companies also proudly display the trophies, awards and certificates they receive by following the above best practices and playing effectively *vis-à-vis* their competitors in the field. However, I do optimistically believe that the true testimony of an organisation’s success lies in the ever-smiling, happy and truly satisfied faces of all its employees, without any undercurrents. Game. Set. Match. Winners All! ■

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Life is 10% what happens to you and 90% how you react to it.

Charles R. Swindoll

People may hear your words, but they feel your attitude.

John C. Maxwell

There is a difference between listening and waiting for your turn to speak.

Simon Sinek

Our greatest weakness lies in giving up. The most certain way to succeed is always to try just one more time.

Thomas A. Edison

Someone is sitting in the shade today because someone planted a tree a long time ago.

Warren Buffett

The best and most beautiful things in the world cannot be seen or even touched – they must be felt with the heart.

Helen Keller

Communities that celebrate diversity will find ways to be inclusive. They'll adapt strategies to make sure everyone can participate and be involved.

Haben Girma

The thing that doesn't fit is the thing that's the most interesting, the part that doesn't go according to what you expected.

Richard P. Feynman

If you don't know history, then you don't know anything. You are a leaf that doesn't know it is part of a tree.

Michael Crichton

Let us not pray to be sheltered from dangers but to be fearless when facing them.

Rabindranath Tagore

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Quote

Unquote

16 வகை

அனைத்தும் சிறந்த சுவை

உங்கள் உணவை மேலும் சிறப்பாக்க,
நாங்கள் ஆவக்காய், தொக்கு, எலுமிச்சம்,
பூண்டு, தக்காளி, இஞ்சி போன்ற 16
சிறந்த ஊறுகாய் வகைகள் தருகிறோம்.
அத்தனையும் ருசித்தீடுங்கள்.

