Summary
In 1985, the International Association of Psychosocial Rehabilitation Services (IAPRS) published the following definition of psychosocial rehabilitation as

The process of facilitating an individual's restoration to an optimal level of independent functioning in the community .... While the nature of the process and the methods used differ in different settings, psychosocial rehabilitation invariably encourages persons to participate actively with others in the attainment of mental health and social competence goals. In many settings, participants are called members. The process emphasises the wholeness and wellness of the individual and seeks a comprehensive approach to the provision of vocational, residential, social/recreational, educational and personal adjustment services.' (Cnaan et al, Psychosocial Rehabilitation Journal, Vol. 11, No. 4: April 1988, p.61)

Cnaan et al state that psychosocial rehabilitation is based on a number of assumptions, including two essential ones

- People are motivated by a need for mastery and competence in areas, which allow them to feel more independent and self-confident.
• New behaviour can be learned and people are capable of adapting their behaviour to meet their basic needs.

This has clearly been evident from the findings in this study. Subjects who were diagnosed to be severely mentally ill (psychotic) were initially given pharmacological treatment supported by a psychosocial rehabilitation programme. The psychosocial rehabilitation therapy included:

1. Occupationally Therapy - Therapeutic activities include meaningful activities with specific goals to help the mentally ill clients prevent, lessen, or adapt to their disabilities. The activities may be as basic as bathing or dressing, or as complex as operating a computer with modified control switches. For emotionally disturbed clients, the therapist chooses activities that help people learn to engage in and cope with daily life. Activities include time management skills, grooming, budgeting, shopping, homemaking, and the use of public transportation.

2. Counselling - Individuals and families are talked to and supported by the counselor with decision making, vocational training, choosing a career, social skills training, medication, symptoms, etc
3. Animal assisted therapy – It involves the use of therapy animals by a human service professional to motivate and help an emotionally distressed individual to improve various skills like social, verbal, physical, cognitive etc., and speed up the recovery process.

4. Dance therapy – It involves the use of music and movements to improve the physical and mental conditions of a distressed individual.

5. Yoga – It involves the use of pranayams, breathing, meditation and physical exercises.

6. Kitchen skills – Basic cooking skills along with table manners is a part of this therapy

7. Group work- Daily group sessions are held to discuss various issues related to the illness, medication, health, physical exercise, and social skills.

8. Recreational activities – This involves the use of games, puzzles, picnics, movies, etc.

9. Support group meetings- Support group meetings are held once in a month to give and receive feedback from the
. caregivers regularly and to educate them (psycho-education) on various issues related to handling the mentally ill.

After putting the clients through these therapies it was found that most clients were functional and improved in the following ways:

Woke up easily

Improvement in personal hygiene such as having a bath, shaving, using cosmetics etc.

Reduction in time while using the toilet, taking bath, dressing etc.

Better presentation of self that includes dressing, cleanliness, clothes, hair, feet, nails, footwear etc.

Improvement in linguistic skills and numerical skills

Improvement in body language that includes eye-to-eye contact, facial expressions, posture, etc.

Enhanced conversational skills likeinitiativeness to talk, spontaneity, reaction time etc.

Ease with traveling independently

Relative ease at handling simple tasks like finding an address, handling money, running errands, ability to handle bank or post office work etc.
Enhanced interpersonal relations

Ability to express positive emotions with ease and spontaneity

Reduced medication

Ease at understanding simple instructions and ability to do household tasks as and when assigned

Improvement in concentration, attention and motivation

Enhanced motor skills like writing, walking etc.

Reduced irritability and anger spurs

Based on the above we can say that if clients suffering from psychosis are diagnosed early and medication is administered, the positive symptoms can be controlled. Following this if psychosocial rehabilitation is given the negative symptoms too can be controlled and the individual can lead a functional life.