



GRACEFUL LIVING

LOVE LIFE LIBERTY

ALCOHOLISM

A SPECIAL ISSUE

**What is it
all about?**

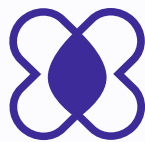
Is it a disease?

**A recovering
alcoholic speaks**

Liver
Life depends on it

Help is available

**People share
their stories**



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VIEWPOINT

You may ask why a special issue on alcoholism (now called Alcohol Use Disorder)? Answer: It is prevalent all around us but nobody likes to talk about it, moreso in India. Alcohol dependence, the most severe alcohol use disorder is a complex genetic disease. It has been known to run in families, but that alone is not sufficient to demonstrate that genetic factors contribute to risks. Studies in US and Europe state that approximately 45-65 per cent of the liability is due to genetics. It should be emphasized that while genetic differences affect risk, there is no “gene for alcoholism” and both environmental and social factors weigh heavily on the outcome. (ref. Internet ncbi.nlm.nih.gov – Howard J Edenberg and Tatiana Foroud). WHO estimates that alcohol addiction causes almost 2.5 million deaths per year.

Alcohol is widely consumed, but excessive use creates serious physical, psychological and social problems and contributes to many diseases. In this issue, we have stated the reasons why people turn to alcohol, their predispositions and how alcohol becomes the focal point in their lives. Warning signs have been listed as also the steps to be taken to reduce and then stop the consumption.

What an alcoholic needs to do is follow HOW...

H = Honesty (understand that he is an alcohol addict)

O = Open-mindedness (be accepting of the condition)

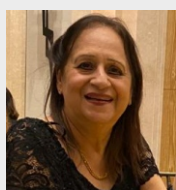
W = Willingness (to change his way of life)

While alcoholism is a chronic disease, it can be TREATED. But as statistics stand, majority of them who struggle with it, do not feel they need treatment. About 95% Americans do not feel they need treatment. In India, 16 crore Indians consume alcohol; national average for men is 29.2%. Various studies worldwide have reported a strong association between alcohol use and indulgence in high risk behavior, high risk sexual behavior, domestic violence, crime and violent acts.

In this special issue, we have Jatish Shah, a counsellor, who writes on the disease and explains the different stages: physical craving, mental obsession and spiritual bankruptcy and describes the end result as painful leading to premature death or insanity. Dr Ameet Mandot, consultant gastroenterologist & hepatologist relates liver issues created by an abusing alcoholic. But the most positive result is that of a 'recovering alcoholic' who went to a wellness centre and returned home after 13 months. He has taken on the world as a 'CLEAN' person (parlance among alcoholics for those who give up drinking completely) for the last 12 years.

People have written in (all anonymous of course) about their experiences living with the alcoholic and even an alcoholic who wants to give it up here and now.

Hope this special gives you a clearer insight into alcohol use disorder. We do need to ... not shun them, not protect them, not enable them but understand them.



Asha Gurnani Vohra

Editor



GRACEFUL LIVING – AN OVERVIEW

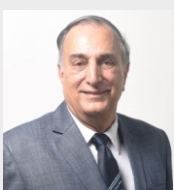
That this article appears in July – August is particularly timely. This period marks the onset of the month of Shravan when alcohol is totally banned (religious beliefs) for a period of one month. The interesting thing is that the day before Shravan commences is known as 'Gatari Amas' or the day when so much alcohol is consumed that the person is eventually found lying in a gutter totally passed out.

This is the beginning of alcoholism since one incident invariably leads to another, resulting in too many drugs. In this condition, all sections of society, of all ages, are involved and it is the root cause in many cases of family break-ups. Since alcoholism is a slow process the person is not aware of the seriousness of the problem till he is firmly in the grip of it.

Alcoholism may be caused by many reasons: loneliness, depression, loss of a spouse etc. but it is treatable. The Covid pandemic and the associated isolation was another reason for increased cases of alcoholism. Since there was no availability, people bought the liquor from private sources, paying much more and... at exorbitant rates. The effect of this disease is a devastating loss of livelihood, family relationships and finally loss of health, invariably leading to severe physical damage and even to death. Cirrhosis of the liver is a common resultant complication of alcoholism. One of the worst side effects is the break-up of the family unit and the effect it has on elderly parents. There have been cases where parents, unable to see their child's self-destruction, have collapsed... they have got into depression and got counselling or have just physically collapsed. And there is a known case where the desire to live diminished and the mother willed herself to die.

This condition can be treated if the alcoholic has sufficient self-control and will power to give up alcohol, take the help of the psychiatrist and counsellor and by being part of the worldwide Alcoholics Anonymous (AA) which follows a 12-step program and by attending their meetings regularly, the alcoholic moves along the spiritual path and puts his faith in God. There are wellness centres which have achieved 65 per cent success rate following a procedure which includes counselling, group meetings and sharing with one another. In many cases, they have made complete recovery but the danger of slipping back into drinking liquor remains. So the alcoholic has to refrain from taking even a single sip. Needless to say, support from members of the family has worked wonders.

The prime requirement for the success of recovery is the realisation by the addict himself that a problem really exists and that given the determination, it is possible to overcome it and go on to lead a normal and healthy life.



Naval Pandole
Advisor, Tulsi Trust

ALCOHOLISM

WHAT IS IT ALL ABOUT?

Why do people drink?

People start drinking alcohol for reasons such as: Pleasure to socialize, to relax, to forget worries, to get sound sleep, to manage stress - more so in the case of a broken home. The list of excuses is endless. No excuse is a good reason to consume alcohol. Out of every hundred people who start drinking for such harmless reasons, 15 become physically dependent on and mentally addicted to alcohol. They reach a state where "Alcohol becomes the centre, the governing force and the prime reality of their lives to the exclusion of everyone and everything else".

What happens when an alcoholic stops drinking?

The body becomes so accustomed to the use of alcohol over a period of time, that when they stop drinking, the "withdrawal syndrome" - consisting of symptoms such as sleeplessness, loss of appetite, anxiety, depressive feelings, nervousness, restlessness, tremors, convulsions, hallucinations, delirium tremors, etc. occur. This state is **Physical Dependence**, also called Physical Craving or Allergy. Alcohol becomes so central to their thoughts, emotions and activities that they cannot control the craving for a drink. Thinking becomes circular in nature. The alcoholic thinks about, dreams about, plans and looks forward to the next drink. This state is called **Psychological Dependence**, or Mental Obsession. This is accompanied by **Spiritual Bankruptcy**, in the form of psycho-social dysfunction and is characterized by the inability to relate to the self, the God of their understanding and others around them. Fear, resentment and dishonesty, restlessness, discontented, emotional instability and even aggression and abusiveness become hallmark characteristics of the alcoholic.



Photo by Kat Smith on Pexels

Physical and mental damage caused by alcohol:

Repeated excessive drinking over a period of time affects the following organs and tissues:



Heart unstable - blood pressure, irregular pulse rate



Pancreas - painful inflammation, **liver** swelling, hepatitis, cirrhosis



Weakness of **muscles**, loss of muscle tissue



Stomach gastritis, peptic ulcers, cancer



Nervous system tingling and loss of sensation in hands and feet



Brain cell damage resulting in loss of memory, confusion, and hallucinations



Lungs - greater chance of infections including TB



Genitals temporary impotence



Skin flushing sweating



Blood anaemia

And so much more. This is only the tip of the iceberg... mood disorders, psychosis, sleep disorders.

All caused by abusive/ addictive use of alcohol.

Additionally, there are alcohol induced disorders such as alcohol induced psychosis, mood disorders, sleep disorders, sexual disorders, memory loss and so on. All these are some of the problems caused by abusive or addictive use of alcohol.



WARNING SIGNS

- ⚠ Frequent binge drinking
- ⚠ Poor performance at work
- ⚠ Excuses for neglecting responsibilities
- ⚠ Denial of excessive alcohol use
- ⚠ Justifying/rationalizing drinking
- ⚠ Acts of abuses and violence
- ⚠ Decreased interest in life

If left untreated, alcoholism can bring about health complications, financial troubles, relationship issues and professional disruptions.

THE NEXT STEP:

The next step to stave off the inevitable harm to the physical, mental and emotional self is to STOP consuming alcohol. But that is easier said than done. Why? Primarily because of the nature of alcoholism – its obsessive, compulsive nature. The inability of the alcoholic to say NO to alcohol. And the all-pervading fear of the withdrawal syndromes. This fear manifests in the form of “If I don't get a drink, I will die”, **BUT THE TRAGIC TRUTH IS THAT IF THE ALCOHOLIC DRINKS, HE WILL DIE OR, AT THE VERY LEAST, SUFFER HARSH CONSEQUENCES.**

To stop consuming alcohol, the alcoholic has to opt for treatment and have no reservations about it.

The treatment can be divided into five stages:

1 Counselling, in which the alcoholic is motivated to stop or, if he is motivated, then strengthening that motivation. Failing this, help the alcoholic to adopt harm reduction measures such as switching to a less harmful substance or minimize the consumption for some time before he gets motivated to quit.

2 This is followed by **Detoxification** which entails the use of certain medical procedures and medication and ensures softening of the pain of withdrawals. The alcoholic goes through detoxification in a hospital under the supervision of a good psychiatrist or physician. He is given I-V solution of Glucose, Saline, Multivitamins, Thiamine (often used for certain categories of alcoholics), mild tranquilizers to keep the alcoholic relaxed, anti-depressants to help him cope with the sudden loss of alcohol, mood stabilizers and anti-psychotic pills. Other ailments that may or may not have been caused by alcohol consumption are also attended to in order to restore the alcoholic to full health.

3 De-addiction is the phase where the alcoholic, who has just done the Detoxification, gets some time to get the alcoholic fog out of his mind and his mood stabilized through counselling.

4 Rehabilitation. This is the phase where the alcoholic goes through a residential psycho-social program which empowers him to say NO to alcohol. This is the program in which he/she is given the tools of recovery to stay abstinence and be happy without alcohol and lead a disciplined, orderly lifestyle.

In the rehabilitation phase the alcoholic goes through **Behaviour Modification** - living a structured life. A period of three to four months of living life in a rehabilitation centre following a structured day with built-in inputs of wake up and sleep time, of meals time, of work and relaxation activity, of learning sharing and caring prepares him to deal with day-to-day life outside of the rehabilitation centre. He can put into practice what he has learned during rehabilitation.

He goes through **Group Therapy** so that he learns the critical aspects of what alcoholism is all about. He goes through individual counselling to help him resolve his personal day-to-day life problems and **Cognitive Behaviour Therapy (CBT)** is the mainstay in individual counselling.

The alcoholic is also given a **Relapse Prevention Program** which helps identify relapse triggers and take appropriate action to ward off an oncoming Relapse. In rehabilitation, the alcoholic is given therapeutic duties which help to imbibe responsibility and learn to share and care. During his/her stay in rehabilitation, the alcoholic learns to value family relationships and money. Family sessions are also held periodically so that the family learns of the problems that the alcoholic has through joint sessions. They also learn how to handle the alcoholic and take timely action through being taught a comprehensive relapse prevention program, which helps them to identify possible oncoming relapses before they happen.

5 **After Care and follow-up** is another essential component of treatment where the alcoholic attends periodic meetings with the counsellor and goes regularly to AA (Alcoholics Anonymous) meetings, while the family attends Al-Anon meetings which are specifically for the family members of alcoholics. Yoga and PT (Physical Training) are also essential components of recovery as they imbibe good physical health and emotional stability.

The good news is that while alcoholism is a chronic disease, it is treatable with some help from the right people. The not-so-good news is that the alcoholic has to be willing to want to quit alcohol and to stay quit. There must be no reservations of any sort.

Courtesy: INTERNET



WHEN TO SEEK TREATMENT?

The person must first recognize his/her condition and have a desire to quit drinking or the family needs to take appropriate measures to help the alcoholic.



AT A GLANCE TYPES OF TREATMENT

- 1 Counselling
- 2 Detoxification
- 3 De-addiction
- 4 Rehabilitation
- 5 After Care and Follow Up

Roughly 95 % of Americans struggling with alcoholism do not feel they need treatment.

HOW Basic Principles for an alcoholic to follow

Honesty

Open Mindedness

Willingness



IS ALCOHOLISM A DISEASE? ... YES!

Jatish Shah, Counsellor & Director, Shah De-addiction & Rehabilitation Services writes about Alcoholism and describes the craving that can ruin an individual unless timely action is taken.

Alcoholism is a disease! In 1987 the American Medical Association (AMA) & other medical organizations, including the WHO, officially termed Alcoholism: a Disease.

The WHO & the AMA defined Alcoholism as “a chronic, progressive, treatable disease in which a person has lost control over drinking so much so that it interferes with vital areas of life such as family & friends or occupation, school or health”.

AMA described alcoholics as “those excessive drinkers whose dependence on alcohol has attained such a degree that it shows a noticeable disturbance or interference with their bodily or mental health, their interpersonal relations and their satisfactory social and economic functioning”.

Alcoholism is like no other known disease. It is tri-faceted in nature having physical, mental and psycho-social dimensions.

The body becomes so tolerant to alcohol over time, that when the alcoholic attempts to stop drinking, they experience “withdrawal symptoms” such as sleeplessness, loss of appetite, anxiety, depressive feelings, nervousness, tremors, palpitations, hallucinations, etc. This state is called **Physical Craving**. Alcohol becomes so central to their thoughts, emotions and activities that they cannot control the craving for drink and go into denial in order to continue drinking. This state is called **Mental Obsession**.

This is accompanied by **Spiritual Bankruptcy** in the form of psycho-social dysfunction and is characterized by the inability to relate to self and others. Fear, resentment, restlessness and dishonesty accompanied by irrational thinking and false beliefs, sometimes with abusiveness and episodic violence become hallmark characteristics of the alcoholic.

Unless treated, the alcoholic's condition will get worse day by day. Alcohol consumption is a causal factor in more than 200 diseases and injury conditions. Drinking alcohol is associated with a risk of developing health problems such as mental and behavioral disorders, including alcohol dependence, major non-communicable diseases such as liver cirrhosis, cancers and cardiovascular diseases, disorders of the nervous system, as well as injuries resulting from violence and road clashes/collisions. **The end result is a painful, premature death or insanity.**

Alcoholism does not spare anybody, irrespective of religion, caste, creed or kind. However, the most vulnerable groups are youngsters, who like to go out and “party”, corporate executives and businessmen seeking relief from their day-to-day stressful work and/or home life and senior citizens who are lonely or depressed as the children are out at work and do not always involve them in family activities or who have underlying medical conditions like Depression, Parkinson's, Alzheimer's and other geriatric ailments. ■



PEOPLE SHARE THEIR STORIES...

“

An awful moment! You discover your son is an alcoholic! Can't believe it! Different from daily small drinkers, daily heavy drinkers, drunkards who cannot hold their drink and the big, big drinkers (they can be binge drinkers or otherwise). So an alcoholic is one who cannot stop drinking, one drink leads to some, then many.

I first tried to wean him off with love, it didn't happen. After a lot of abuses from him and some physical man-handling, I was advised to put him in a rehabilitation centre. After seven months he was out but full of rage and hatred. He went straight for a bit, maybe two years, then again fell (falling here means reaching rock-bottom, the lowest point in tolerance level). This repeated see-saw caused me so much pain. I would just lie in bed, look up at the ceiling and cry. Then I joined Al-Anon and learned there were many like me feeling this pain. My son, in his late-20s, is dependent on me. So well educated yet incapacitated. Gradually I am learning to leave him alone. Yet he comes up to me and suddenly shouts and makes demands. It makes me so angry. Recently, I even felt like jumping out of the window to end this. How long can I continue taking his nonsense? But I am a strong woman, I won't let myself down. If he chooses this path, can I do anything? I can only pray for his wisdom and strength/determination and God's will. Being a mother, I still go through a lot of sadness. It doesn't seem to end.

”

Bindu

“

My brother was always a cause of concern. Hyper even in school, I thought he would quieten down with age. It did happen, but it came along with his alcoholism. He started drinking at the age of 18 (just a peg) and it went on increasing by the day. Till the age of 36, it involved sending him to 10 rehabs (2 months each time). One day he found himself lying on the streets oblivious to his surroundings (after 10th rehab). When he woke up, he was surrounded by strangers, totally disoriented. I was told to leave him alone so when I found out he was on the streets, I watched from afar but didn't come to his aid. **This was his awakening, his rock bottom!!!** After that, it's been no alcohol for 10 years. Today he is clean at the age of 46 and he's worked out his life. We are lucky that he has come out of this.

”

Maria

“

When I got married my husband told me he drank occasionally. But that wasn't the case. I soon realized that he preferred drinks to my company. He would drink at home or go out, but drinking was a must. Gradually, it got from bad to worse. He would invite friends at home and his addiction grew. Soon his work attendance became erratic. Money didn't come in regularly. I was working as a teacher so I would make ends meet. As his drinking grew, he was put in a rehabilitation centre.

My son had an uncomfortable childhood because of this and he started stammering. His studies got affected, his behavior also got affected and he started consuming substances like weed, LSD etc. Worst of all, he began stealing money. Meantime, my husband's health deteriorated. His liver stopped functioning. He developed pulmonary TB and within a span of four months, he died.

My request to parents: **Please don't get your alcoholic son married.**

”

Reshma

“

I have been drinking since the last 35 years. I started young as my home was an open house for alcohol. It became a habit and gradually I increased my intake and didn't realise when it became a part of my every day life. I was working and wouldn't drink at work but otherwise I was enjoying my drinks. Recently, a year or so ago, I went for a health check-up after much pressure from family and friends. The tests showed that booze had affected my liver. Could this be happening to me? I thought I was invincible. I was asked to give up alcohol completely. I did for a while but the alcohol in my body had created a craving. It's not easy to give up an addiction. The addiction has been part of me since 20 years and as you get older, it hits you hard. When I dwell on it, I fall into depression. I realise that I **HAVE TO GIVE UP DRINKING SOON**. Else it may be too late. Who wants to knowingly give up on life?

”

Anuj



(Real names withheld.)

AS TOLD BY A RECOVERING ALCOHOLIC...

I was part of a drinking household as every function meant booze. It was accepted from a young age. However, I took up a job with multinationals (two of them), and then spent 20 years doing my own business. By then I had become an alcoholic (ages 15-50). At 50, I was under pressure to get treated. I was getting panic attacks. I reached 'rock bottom' as is the parlance in alcoholism. SOMETHING HAD TO BE DONE.

So I was sent to a Wellness Centre (forced into it). The 'poison' had consumed me. You either go to a wellness centre for a longish period or you go to a rehabilitation centre and work on the 12 steps of Alcoholics Anonymous (AA). The goal to be reached is STEP 12...that is your recovery when you try helping others to give up drinking and become a sponsor.

Of course the beginning of any recovery process includes detox. This is a clean-up of the body (getting rid of the toxins) and then comes acceptance that you are an alcoholic.

So what is the downside of consuming alcohol? Just misery from every angle... destruction of the body as the liver, kidneys, abdomen all get affected. The mind set is totally disrupted... it's all about the mind.

I began to understand that there was something bigger than myself, that I had a deep-seated problem. I had always felt the solution was drinking.... And that is when the blame game starts. The alcoholic starts blaming the people around him, could be the wife, the mother, or others. EVERYTHING HAS GONE WRONG BECAUSE OF THEM. Hate sets in. He is unable to face reality. What really helps emotionally is sharing your feelings with others, mostly people who are in the same predicament as they understand each other. What the alcoholic experiences are negative thoughts about everyone else, more so about immediate family members and close friends. It is a way of self-justification. The alcoholic becomes judgmental and soon he starts telling lies when caught on the backfoot. It is an easy way out for him.

It is important to:

- ✧ Share with others
- ✧ Forgive oneself
- ✧ Discipline oneself
- ✧ Keep a routine - time management
- ✧ Understand that the past has to be left behind

I got comfortable after two months but was monitored all the time. Every few months I was sent home to be with the family but always with someone to keep a check on me. We had a tedious routine as is the way of most centres which includes exercises, breaks for meals, subgroup sharing, outdoor activity, sports. Soon I began getting a feeling of GRATITUDE, VERY VERY IMPORTANT TO FEEL GRATEFUL FOR ALL THAT YOU HAVE. Focus on what you have, there should be no dependency on anyone or any substance. **Life has to be lived.**

Anyway, after eight months or so, I started experiencing inner peace. I was happy. After 10 months I started working on a job. Finally, after 13 months, I went home without anyone accompanying me. For one year after that, I had to consciously be careful not go to places where there was alcohol, and avoid alcohol-ridden situations.

Today, it's been 12 years since I have abstained. I feel and think GRATITUDE. I am HAPPY not SAD. I AM POSITIVE, PLAY ON POSITIVE EMOTIONS AND I NOW FIND PLEASURE IN SMALL THINGS AND REALISE THAT THIS IS WHAT LIFE IS ABOUT.

What I continue to do is regularly talk to my support groups as there is no fear of judgement. I know that managing expectations is very important as I have no control over another person.

**The past is dead.
I have put FINISH to alcohol in my life.**

Abhay (Real name withheld)



LIVER - LIFE DEPENDS ON IT

Dr Ameet Mandot, Consultant Gastroenterologist & Hepatologist, has received special training in liver transplant and Hepatology in Paris. Here, he discusses the ailments that arise out of too much alcohol consumption.

Alcoholic liver disease is defined by three stages of liver damage following chronic heavy alcohol consumption: **fatty liver, alcoholic hepatitis, and fibrosis/cirrhosis.** Considered as one of the biggest reasons for acute liver damage, alcohol is not only life-threatening but can also cause liver failure.

Fatty Liver

Being the first stage of Alcoholic Liver Disease (ALD), it is a highly prevalent liver disease, characterized by an excessive accumulation of fat inside the liver cells. It is reversible only if alcohol use is stopped.

Alcoholic Hepatitis

The second stage of ALD, Alcoholic Hepatitis is characterized by the inflammation of the liver leading to the degeneration of liver cells quickly which can lead to life-threatening complications like liver cirrhosis and absolute liver damage. Jaundice is the most common symptom along with...

- ⚠ Nausea, Vomiting
- ⚠ Loss of appetite
- ⚠ Abdominal tenderness
- ⚠ Fatigue and weakness
- ⚠ Weight loss

Liver Cirrhosis

Liver cirrhosis is the last and final stage of Alcoholic Liver Disease where permanent scarring of healthy liver tissue occurs and is an irreversible one. A patient with liver failure has symptoms like...

- ⚠ Fluid accumulation in the abdomen
- ⚠ Spleen enlargement
- ⚠ Bleeding from veins
- ⚠ Vomiting blood or passing blood in the stool

How is alcohol-induced liver disease diagnosed?

- ✧ Blood tests. Including liver function tests, which show whether the liver is working the way it should.
- ✧ Liver fibroscan.
- ✧ Ultrasound.
- ✧ CT scan.
- ✧ MRI.

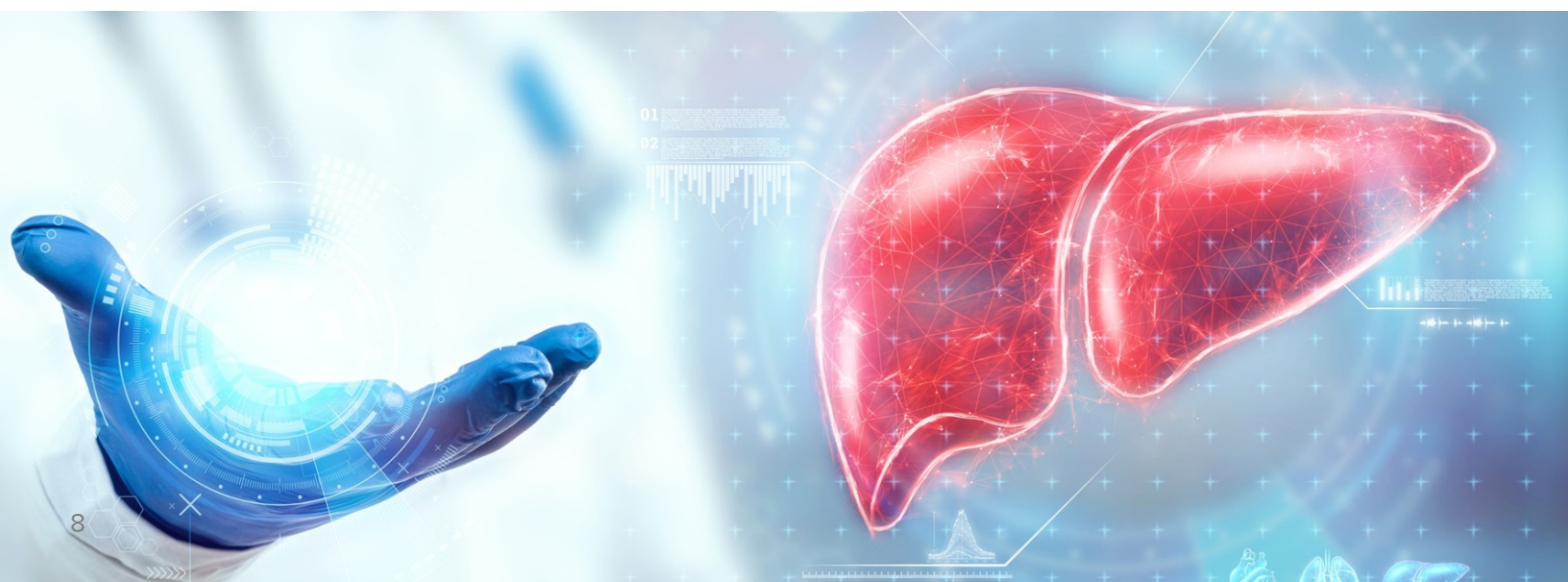
ALL ALCOHOL-RELATED DISORDERS WILL IMPROVE WITH THE CESSATION OF DRINKING.

Alcohol Withdrawal Treatment

If you feel comfortable doing so, bring up your challenges to your primary healthcare provider. Finding a therapist can also be a great starting point if you aren't comfortable opening up to your healthcare provider. Given the reluctance of patients to be open with regard to their alcohol use, biomarkers to reliably detect problematic drinking have been investigated extensively. The most sensitive and specific indicator of recent alcohol use is the blood or breath alcohol test. Motivating patients to follow this treatment regimen, monitoring their compliance, and preventing relapse remain major obstacles to the treatment of ALD and is very important too. Certainly, inpatient and outpatient rehabilitation programs have demonstrated effectiveness in assisting patients to achieve and maintain sobriety.

Referral to and communication with an addiction specialist, and encouraging active participation in Alcoholics Anonymous (a worldwide organisation) represents the best method of assisting patients with alcoholism and concomitant ALD. Recognition and treatment of co-morbid psychiatric conditions is also a useful step in assisting patients with alcohol dependence.

Given the high likelihood of chronic, heavy alcohol use, the consequent difficulty in achieving/maintaining



sobriety and the low margin for error in patients with ALD, the coordination of both pharmacotherapy and psychosocial intervention is best handled by an addiction specialist.

Other lifestyle modifications, such as smoking cessation and weight loss, if applicable, are also crucial to improving the outcome of those suffering from ALD. Smoking is an independent risk factor for advancement of hepatic fibrosis which can lead to more severe ALD, and may be linked to the development of Hepatocellular Carcinoma (HCC). Obesity, which can also cause fatty liver, non-alcoholic steatohepatitis, and cirrhosis, may be an independent risk factor for the progression of ALD.

Nutritional support

It has long been established that patients with ALD - both with severe Alcoholic Steatohepatitis (ASH) and cirrhosis - are nearly all malnourished, and the degree of malnutrition correlates with disease severity. Micronutrient deficiencies of folate, vitamin B6, vitamin A and thiamine are among the most commonly encountered.

WHEN TO MEET THE DOCTOR

You must right away rush if you:

- ✧ Start vomiting blood
- ✧ Have black, tarry stools
- ✧ Have a fever and can't stop shaking
- ✧ Suddenly become confused
- ✧ Yellowing of skin or eyes

HELP IS AVAILABLE

Al-Anon is a Support Group for family and friends of alcoholics who share their experiences with other Al-Anon members to help them deal with the alcoholic in their lives and to learn to live their own lives peacefully. The regular sharing within the group, which is anonymous, helps them gain strength to fight their battles, accept their reality, and gives them hope. This is a worldwide fellowship.

Al-Anon is not allied with any sect nor organization, and does not engage in controversy. Its main purpose: to help families of alcoholics. This is done by practicing the 12 Steps (same as in Alcoholics Anonymous).

Note: to connect with Al Anon, go to al-anon.org

THE 12 STEPS OF ALCOHOLICS ANONYMOUS

- 1 We admitted we were powerless over alcohol—that our lives had become unmanageable.
- 2 Came to believe that a Power greater than ourselves could restore us to sanity.
- 3 Made a decision to turn our will and our lives over to the care of God as we understood Him.
- 4 Made a searching and fearless moral inventory of ourselves.
- 5 Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
- 6 Were entirely ready to have God remove all these defects of character.
- 7 Humbly asked Him to remove our shortcomings.
- 8 Made a list of all persons we had harmed, and became willing to make amends to them all.
- 9 Made direct amends to such people wherever possible, except when to do so would injure them or others.
- 10 Continued to take personal inventory and when we were wrong promptly admitted it.
- 11 Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
- 12 Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.



Note: Please visit www.aagsoindia.org for further information

Ageing with Dignity and Grace

Tulsi Trust was established by the Chanrai family in 1975 with an aim to fulfil basic needs of the poor and needy. At a deeper level, it's more than indulging in physical activities. Health care, skills development and education are top priorities. It envisages a fair world for all, working with partners to improve health care and opportunities for livelihood, and education. Add to this, the capacity to understand another's needs and do this with utmost integrity.

Graceful Living (GL) is an arm of Tulsi Trust which came out of a realization of a social need for elderly care. After three active years, GL is now a recognized organization for those in their twilight years and has created an awareness through its activities and talks for senior citizens. GL has a social presence viz. Twitter, Facebook, Instagram and YouTube.

Activities of Graceful Living

In Partnership...

- Intellectual companionship and special care programs – includes companionship, counselling and care-giving for Dementia, Parkinson's and Alzheimer's when required. These services are provided through our partners:

Echoing Healthy Ageing

Parkinson's Disease and Movement Disorder Society (PDMDS)

- Physiotherapy sessions which help the elderly to improve their mobility and become more independent:
Iconic Physio with Dr Pratha Mehta and Dr Rajshri Lad
- Training candidates in 'elder care' in order to have professionals for the same:
MMP Shah College – elder companionship course for Sociology students
Aaji Care – Geriatric counselling course for post-graduate Psychology students
- Activities for the elderly :
My Safe Place: mental wellness platform
Mrs Manasi Golwalkar: technology training
- Sensitization programs for school/college students to create an awareness of the needs and issues of the elderly

Direct Intervention by GL...

- Support Group Meetings
- Webinars (Mr Manoj Gursahani)
- Guest Lectures by professionals/experts – mainly on Zoom
- Graceful Living Monthly Newsletter carrying important information for the elderly plus articles by known doctors and other professionals
- Online interviews with senior achievers called 'Sitare'
- Co-ordination by GL to create platforms for senior citizen organizations in the city.



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