A famous quote goes by the saying, ‘Mental Illness is not a choice but recovery is’…Regularizing ones Activities of Daily Living is one of the important steps in recovery of persons with mental illness. Mental Health professionals often surmise on the disability, functionality and extent of recovery of a person with mental illness, based on his/her ability to perform activities of daily living. This book by Sailaxmi Gandhi, in simple language educates and provides guidelines to caregivers of persons with mental illness on the concept activities of daily living, the various activities of daily living, challenges in complying with activities of daily living and management strategies to motivate persons with mental illness to adopt activities of daily living.

At the start of the book, the two Forewords, each written by those for whom the book is targeted; a person recovered from mental illness and a caregiver, touches a chord with the readers and forms a connection between the writer and the reader. The pertinent illustrations across the book acknowledge the contribution of another recovered person with mental illness. Further, the editor elucidates the journey of this book coming into being eloquently in the preface before the book opens up into eight small chapters covering various aspects of activities of daily living and its management.

Chapter 1 provides an Introduction to the Activities of Daily Living, where the author describes the circular loop of caregivers getting overwhelmed by the symptoms of the patient; during recovery recognizing the deficits but misunderstanding the ability to indulge in ADL; and this leading to caregiver burden and expressed emotions. In this context, the chapter advocates that educating the family caregivers about initiating ADL in home and community based activities could be a small but important step in the recovery process. Chapter 2 continues explaining about the various concepts of ADL with case examples, especially about Basic Activities of Daily Living (BADL i.e brushing, bathing, combing hair, etc) and Instrumental Activities of Daily Living (IADL i.e cooking shopping, transportation etc), the benefits of ADL and the negative effect of ADL deficits on patients and caregivers.

After the first two introductory chapters, Chapter 3 moves on to talk specifically about ADL deficits observed in persons due to mental illness. The chapter also dwells on the individual (symptoms, medication side-effect, cognitive deficits, social skill deficits) and environmental factors (stigma, expressed emotions of family members) leading to impairment in ADL. Chapter 4 takes on from where the previous chapter had left and discusses the various management strategies for each of the individual and environmental factors causing ADL deficits. The chapter ends by stating that as each individual is unique, individualized plan for ADL may be the need of the hour for better outcomes.

Chapter 5 talks about management strategies to deal with specific BADL and IADL and possible reasons for one’s inability to do ADL such as reduced energy, memory deficits and lack of motivation along with solutions. Chapter 6 guides the readers on behavior techniques (with illustrations) such as activity scheduling and social skills training that can be applied to help the patient manage his ADL, along with discussing the basic principles of behavior change.

Chapter 7 discusses about how caregivers can help promote the sexual safety of their patients with mental illness. The author concludes by advocating that family members should seek the help of the rehabilitation team in handling this issue sensitively. The last chapter of the book, discusses the Role of
the Family in ADL, especially by prescribing certain Do’s and Don’ts to the caregivers to help them help themselves and help the patient with his/her ADL.

Overall the book in lucid language covers comprehensively the theoretical and management aspects of ADL. Considering the target audience of the book are caregivers whose average age could be above 40 years, the font size, spacing for reading and size of the book have been well designed. A review of the catalogue of books depicts that there may be no book published for caregivers that exclusively discusses ADL issues; often most books on nursing are focused for professionals and address the topic of ADL as one of their chapters or use theoretical models to identify activities of living and factors that affect them in context of nursing processes.

As this book is one of the first to attempts to address the issue of ADL for caregivers, it could have been written more elaborately by providing step-wise instructions in managing each of the ADL - making the content more prescriptive and less descriptive for caregivers to follow. However, this workbook sort of a format may not have been conceptualized by the editor for this book, though she reports that this book was one of the outcomes of the 12 session Domestic Skills Workshops conducted at Psychiatric Rehabilitation Services. Further, there is some repetition across chapters in discussing management strategies for ADL, possibly as different authors have independently written their chapters which have been collated into this book. Further the chapter on promoting the sexual safety of patients with mental illness does not seem to have been woven well into the linear flow of the book, though the content of the chapter per se is extremely pertinent and important in managing persons with mental illness.

Irrespective of the technical limitations, overall the contents presented in this book can act as a useful guide to caregivers, to help them manage the ADL of their patient’s with mental illness. As this was the main purpose for writing this book, I believe that this purpose has been well served and hence I would recommend this book for reading to all caregivers who are living with family members with mental illness.

**REFERENCE**