

FOUNTAIN HOUSE



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Fountain House



**A RESEARCH REPORT SUBMITTED TO
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**BACHELOR OF ART
IN
MEDIA STUDIES**

By

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DISSERTATION APPROVAL
KINNAIRD COLLEGE FOR WOMEN



Date: 12th June, 2023

I hereby recommend that dissertation prepared under my supervision by

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Registration No: F19BAMS048

Entitled

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be accepted in partial fulfillment of the requirements for the degree of

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for the
Final Examination**

RESEARCH COMPLETION CERTIFICATE

It is certified that Ms, Aamen Ijaz of B.A. Honors (session 2019-2023), Department of Media Studies have carried out this work entitled “Fountain House” which is a documentary, under my supervision.

It is assured that this thesis project is original and sufficient in terms of scope and quality of degree.

All changes suggested by examiners during defense are incorporated in this final copy.



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ANTI-PLAGIARISM DECLARATION

This final year project of the batch 2019-2023 is presented in partial fulfillment of the requirement for Bachelors in Media Studies.

I declare that this project entitled “Fountain House” is the result of my own field work. Moreover, I declare that this project is developed on the basis of my own knowledge and personal efforts. It is assured that this work, as a whole or in part, is not presented elsewhere for assessment. The similarity index of the research report is 7%. If this statement is untrue, and if I am found guilty of plagiarism, the punitive actions against me should be taken as per Kinnaird Anti-Plagiarism Policy.

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ABSTRACT

Fountain house is the world second largest mental illness rehabilitation center. In this documentary, we have depicted life of patients and the employees at Fountain house. How the patient is treated and which therapies and facilities are provided to them by the fountain house. Mental illness is considered a taboo topic in society and that is why people do not seek professional help and look for more spiritual and religious cures. This documentary will portrait that mental illness will be treated if it will be diagnosed on time. This in turn make people more capable to recognizing the importance of mental health which bring positive change in the society. This is done to bring positive change in society and to ostracize who it consider to be different.

Keywords: Mental illness, Mood disorder, depression, fountain house, therapies, exercises

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CHAPTER 1

INTRODUCTION

A documentary is a non-fiction movie that documents reality for the purpose of education or to reveal an unusual, interesting or unknown angle. Bill Nichols has characterized the documentary in terms of "a filmmaking practice, a cinematic tradition, and mode of audience reception [that remains] a practice without clear boundaries"

Mental health is something that is not prioritized by people of Pakistan to the extent that it deserves. The generational gap between the elders and the limited access to resources plays a major role in that. It is mostly considered a taboo to discuss these things in polite society because most of the times the existence of mental and mood issues is swept under the rug. The patients that are not treated within time lead to more serious conditions causing psychiatric disorders. It disturbs your thinking, behavior, and mood. It can seriously increase the risk of disability, pain and death. A large number of psychiatric disorders have been identified that includes: depression, personality disorders, anxiety disorders, schizophrenia and addictive behaviors. Examples of ongoing signs and symptoms of psychiatric disorders include: confused thinking, reduced ability to concentrate, deep ongoing sadness or feeling down, trouble handling different situations and other people, extreme tiredness or sleeping problems, strong feelings of fear, worry, or guilt, extreme mood changes, from highs to lows, often shifting very quickly, delusions and paranoia, drug or alcohol abuse, excessive anger, hostility, and violence, suicidal thinking.

This documentary has filled the gap in mainstream media regarding the discussion of mental illness. This in turn makes people more capable of recognizing the importance of mental health which leads to a positive change in the society. It is an attempt to bring a much-needed positive narrative into a society that ostracizes people who it considers to be different. This documentary is a meaningful depiction of the symptoms and effects of psychiatric disorders on the lives of the patients living in mental hospitals like Fountain House.

1.1 One Liner

To highlight the life of people with mental disorders to see how they are unique in their own way.

1.2 Basic Idea

Basically, the documentary aims to highlights the life of patients dealing with psychiatric disorders in a timespan which showcases both the manic and depressive episodes. It has dealt with the effect that mental health issues can take on a patient if it goes undiagnosed and untreated while simultaneously showing how the patients suffering from these disorders have relationships that slowly deteriorate. The documentary has focused on the importance of support by friends and family. Many people dealing with serious mental illness like bipolar disorder, depression, anxiety disorders are living in Fountain House, where their parents or relatives have left them for their treatment.

In Fountain house they receive psychiatric treatment and psycho-social rehabilitation facilities with all their self-esteem, so that they could achieve their potential and be respected as relatives, neighbors, friends, workers and members of society. We have shared their life of how they live here how they spend their time here. We have explored their creative side because there are many patients there that do paintings, different crafts and some also do poetry and singing. The documentary has tried to normalize talking about mental health and seeking of professional help and how in the long run people with psychiatric disorders can lead a normal life. It desires to change the views of society to also view them as humans and try to find good in them and to behave empathetically with them.

1.3 Need of the Project

Nasar & Rasheed (2020) report that Pakistan is a country where approximately over 15 million people are affected by mental illness. However, there

is hardly any priority placed by the people and the government on forming institutions that can help those suffering. So, by seeing that how the patients are treated very well at Fountain House, Lahore which is a private institute and it has many institutes all over the country can encourage the government and people with power and money to open hospitals for mental health treatment too. The culture of Pakistan plays a huge role in suppressing the voices of those who are in need of actual medical or psychological help because it is deeply ingrained in them to be wary of healthcare professional. Patients dealing with these disorders are also urged to go down the spiritual and religious route to help treat the issues that they are facing. A documentary on the topic can help bring the issue to the limelight as some people would see their own selves represented in the work which will further impress upon them that therapy and doctors can play a positive role in their lives and can help treat them. This will give them the strength to seek help and to also call out the governmental institutions that are doing bare minimum and also society as a whole which has vilified most who are dealing with different psychiatric disorders.

1.4 Scope of the Study

Psychiatric disorder is hard to distinguish for people who have no explanation for what it is. That is why without going to a doctor, there can be no complete diagnosis. Early diagnosis is the most advantageous as treatment can begin which limits the mood episodes in patients. Psychiatric disorder if left untreated can lead to drug abuse and the risk of death through suicide. In Pakistan, people need to stop looking at different avenues like spiritual and religious for healing mental health issues. It also needs to be common knowledge that people with different psychiatric disorder after treatment can live a healthy and full life. Society needs to stop ousting people who are dealing with these issues and instead offer them a helping hand so the road to recovery becomes easy. This documentary wants to achieve all these things by bringing the topic of mental health to the forefront so it can be consumed by the common people and society so the work can be done to better the conditions.

CHAPTER 2

LITERATURE REVIEW

The World Health Organization Assessment Instrument for Mental Health Systems was used to collect information on the mental health system in Pakistan. The goal of collecting this information is to improve the mental health system and to provide a baseline for monitoring the change. This will enable Pakistan to develop information-based mental health plans with clear base-line information and targets. These facilities treat 343.34 users per 100,000 general population. The average number of contacts per user is 9.31. Forty-six percent of outpatient facilities provide follow-up care in the community, while 1% has mental health mobile teams. In terms of available interventions, 1- 20% of users have received one or more psycho social interventions in the past few years.

Chaudhry & Mirza (2016) research in Fountain House, Lahore a Unique Experiment in Cross-Cultural Collaboration stated that the development of Fountain House has gone through several phases. It has embraced the clubhouse philosophy of Fountain House, York, as well as a number of cutting-edge initiatives for the treatment of mentally ill people. It produced a curriculum and an intellectual framework that complied with the religious and cultural criteria of the members by Fountain House, Lahore, via a process of continuous experimentation and review. Even in Western nations, it is becoming more and clearer that religious beliefs and practices contribute to people's well-being and stability. Religious instruction and practice have been included into every aspect of Fountain House's daily schedule in Lahore. The members are now able to pray together every day thanks to the mosque that has been built on the property. The mosque is also used for community events like Milad and debates on religious subjects. Reputable religious figures are occasionally invited to give talks for the benefit of the staff and members.

Javed & Nasar (2015) stated in paper Mental Healthcare in Pakistan (2020) that it is true mental health is given less attention in Pakistan, and this is a trend that is common in many other developing nations. Unfortunately, mental health facilities in Pakistan are underdeveloped and underfunded despite the fact that millions of individuals suffer from common mental problems. Since there are only 400 professional psychiatrists in the nation, there is around one psychiatrist for every 500,000 people. Counselling services are primarily offered by psychologists. Clinical psychologists need to be trained in a variety of psycho therapeutic techniques, which is an increasing requirement. In terms of enhancing access to psychotherapies and counselling, collaborative cooperation between clinical psychologists and psychiatrists can be quite important. The fact that certain colleges and psychiatric facilities are launching programme for nurses and other allied mental health workers is encouraging. .The training of family doctors, general practitioners, nurses, and social workers in identifying mental health issues is also crucial. It will make sense to include topics on substance misuse and drug dependence as crucial components of the undergraduate and postgraduate training systems due to the growing difficulties with drug addiction.

Bredenbee et al. (2021) research Report on Mental Illness in Pakistan provides an overview of the legal system governing mental health both globally and in Pakistan. It also looks at how the problem is still relevant in the COVID-19 world of today. Pakistan's healthcare system is underdeveloped and still stigmatizes mental illness, making it difficult for everyone to get help. During the COVID-19 crisis, which has seen an increase in mental health issues, this has further evolved. These material, physical, and mental difficulties aggravate mental health problems and necessitate state intervention and supervision. However, because Pakistan's rural areas are inaccessible and mental health is stigmatized, providing this action is still difficult. Fixing this problem entails tackling multiple fronts at once, therefore increased public awareness and engagement are required to put mental health to the forefront of legislation.

Siddiqui & Khan (2021) states in an article Barriers and Challenges to Mental Health Care in Pakistan that 1-2% of adults experience serious mental illnesses like schizophrenia and bipolar disorder, whereas 10-16% of adults experience anxiety and depression with symptoms ranging from mild to severe. 15% of them suffer from child and adolescent mental health issues. 70% of the 4 million users of illicit substances are men, with the majority of them falling between the ages of 15 and 40. There should be more resident training program in psychiatry and possibilities to earn a diploma in psychiatry. It is time to start offering fellowships in psychiatric sub specialties. Establishing mental health care facilities with specialized care units for adolescent psychiatry, rehabilitation, and other fields should receive more funding.

Amin & Gadit (2008) states that since the past few years, there has been ongoing discussion about mental health in Pakistan. In the context of rising insecurity, terrorism, economic difficulties, political unpredictability, unemployment, and breakdown of the social fabric, both the incidence and prevalence have dramatically increased. It is concerning that nearly 39% of people are now living below the poverty level. Nowadays, a lot more people visit psychiatrists, presumably as a result of media coverage that has done a wonderful job of raising awareness. Though there are many things that may be done to improve the social environment, economic progress, political concord, and other areas of people's mental health, the essential topic for discussion is how far we have come in the areas of education, service, and other related fields.

Nawab & Mughairbi (2019) the majority of people in Pakistan have little to no access to primary and secondary psychiatric services, making mental health the most underserved area of the healthcare system. Compared to other mental diseases, Pakistan has shown an alarming rise in the prevalence of schizophrenia (SCZ). Despite the fact that several research have looked into SCZ, few have addressed the problem of the Pakistani population. The researchers go over up-to-date information about the prevalence, pathogenesis, and molecular genetics of SCZ, as well as disease treatments and patient reactions to medications provided for SCZ in Pakistan. The majority of Pakistani patients react poorly to anti-psychotic

medications. Our analysis led the researchers to the hypothesis that such poor reactions may be related to genetic differences between Pakistani and Western populations. Therefore, a better knowledge of these genetic variations and the provision of individualized care may both contribute to improving the management of SCZ in Pakistan.

Iqbal et al. (2014) carried out a research in various post-graduate and undergraduate institutions of Pakistan in which 624 students had participated. Out of these students, 14.3% students, in which 43.8% were males while the rest 56.2% were females. These students were found to be on the spectrum for bipolar disorder. The frequency of BPD was found prevailing in students of the age range of 20-21, with the major reason being inheritance and family history of psychiatric illness which were in the range of about 43.8% out of the total individuals who were diagnosed, while 31.5% were diagnosed by a consultant psychiatrist.

Sarwar & Bashir (2018), the patient was a 43-year-old male from a moderate socioeconomic class who was not married and a student. The results of the assessment showed that the patient's romantic relationship ended at the age of 24 as a result of a tense inter-familial connection with his spouse. The patient is seen to be a rebellious and defiant man by his family and society at this crucial stage of his life and lacks all forms of support. The patient has strange beliefs that someone is influencing his thoughts and behavior, as well as psychotic symptoms, according to observations. It was assumed that the patient had chronic schizophrenia based on these symptoms, which included negative symptoms like hedonistic, flat affect, an unorganized speech style, and impaired socializing. The hierarchy of management was designed to identify the behavior that would have improved the patient's daily functioning and quality of life.

Razzak et al. (2013) carried out a research in Karachi, in which the participants were actually psychiatric patients admitted in Remedial Hospital, Karachi. The research included 168,135 patients that were diagnosed with different psychological disorders, such as schizophrenia, bipolar disorder, anxiety disorder

and postpartum depression. The result of the research showed that the number of patients has increased significantly from the year 2006-2010. The number of male patients diagnosed with bipolar disorder is found to be more as compared to women diagnosed with BPD. Based upon socioeconomic status, middle class was found to be prevailing bipolar disorder in a great concentration. Lower to middle class was lower middle class and then upper middle class. The concentration of rich is found to be substantially less.

Sara (2018) writes that the lack of access to mental health facilities is due to the stigma that patients are “crazy,” stereotypes about mental illness, and negative associations between the mentally ill and “Pir Babas” and “Hakim. A deep-seated barrier to mental health is our nation’s cultural belief system, which is why mental illness is often associated with supernatural forces, hence the names witchcraft, obsession, black magic, etc. Cultural factors always hinder mental health progress in Pakistan. Our society is full of myths about mentally ill people. In addition, communities are greatly affected by how the media portrays people with mental illness as being involved in criminal activity. That requires a rigorous effort to remove these taboos and initiate a positive approach to mental health. We need to treat mentally ill patients with the same respect as the rest of society. Additionally, awareness campaigns should be conducted to educate about issues such as mental illness and mental health promotion.

The Fountain House movement, an alternative rehabilitation model for people with mental health problems (2006) states that the clubhouse model is a rehabilitation strategy in which those with mental health issues organize themselves to bring about change in their life. Within the clubhouse, work is seen as the key rehabilitation tool. The study's goal was to discover how the participants perceived the rehabilitation process. Regarding moral considerations, the members were given numerous guarantees of anonymity, voluntary involvement, and confidentiality. It serves as an example of a specific thematic subculture that aims to build relationships between individuals that are marked by trust, cooperative behavior, solidarity, and

self-assumed obligations. For members and staff, the work-ordered day served as a structure and resource for intensive relationship work.

Philip (2007) present data on the global utilization of mental health services by people with anxiety, mood and substance use disorders. Their research reveals amazing insights into the treatment of people with mental illness around the world. Few people receive treatment and most are ignored. In addition, WHO recommends that a quarter of the world's population with more common mental illnesses (usually a mixture of anxiety and depression) should be treated in primary care, with specialized mental health services becoming more important should be reserved for patients with serious illnesses. . 5 But real-world practice does not follow this rational pattern. Previous studies have shown a treatment gap. A WHO review of 37 studies from around the world found that the proportion of people not receiving treatment for specific conditions was: Schizophrenia 32%, depression 56%, dysthymia 56%, bipolar disorder 50%, panic disorder 56%, generalized anxiety disorder 58%, obsessive-compulsive disorder 57%, alcohol abuse and addiction 78%.

CHAPTER 3

SIGNIFICANCE

As mentioned in the basic idea, the aim of this topic is to highlight that most people from Pakistan are suffering from mental illness that cannot be denied. The population is dealing with a large number of issues like bipolar disorder, depression, anxiety, schizophrenia etc. The knowledge to tackle these issues is not found easily since the access to mental institutions and psychiatrists is limited because many people cannot afford the treatment. There are many institutes and platforms in Pakistan that are raising their voices for mental health awareness now.

Moreover there are some schools, university that are also creating awareness about mental health among their students through classes, seminars, ted talks etc. They are giving workshop to students so that can they can found the symptoms of mental illness in themselves and how they can cure it themselves. It is believed that family history and genetics play a role in how a person can get mental disorders. The diagnosis in a patient can help them be prepared to live a normal life and also educate and recognize the symptoms in their offspring if they suffer from it. The people suffering with mental illness are considered different from normal people but actually they are same with more emotions and love for everyone.

Furthermore the documentary has highlighted the people suffering with mental illness living in Fountain house. We have shown how they are being treated and which incident led them here and what they do to spend their day and night here and what talents and skills and creative side they have and to make people realize that they are unique and beautiful in their own way and god has made them for a purpose and they have their own place in the society.

CHAPTER 4

SCRIPT

ایک مرکز فاؤنٹین ہاؤس کا انعقاد کیا - یہ دنیا کا دوسرا بڑا ذہنی امراض کے علاج کا ادارہ ہے - یہاں مریضوں کو زندگی مختلف سہولیات فراہم کی جاتی ہیں 1971- سے لیکر اب تک تقریباً تین لاکھ سے زائد مریضوں کا علاج ہو چکا ہے اور وہ ایک مکمل زندگی گزار رہے ہیں -

فاؤنٹین ہاؤس لاہور ذہنی بیماریوں کی ٹریٹمنٹ اور یہ ایپلیکیشن ریہیبیلیٹیشن کا ایک منفرد ادارہ ہے دنیا میں 330 فاؤنٹین ہاؤس ہے لیکن یہ بہت تیزی سے بڑھنے والا ادارہ اس وجہ سے ہے کیوں کہ یہ حکم پاکستان کے لوگوں کی مدد سے چلنے والا یہ ادارہ ہے اور اس میں ایک بڑا خوبصورت گلدستہ ہے جو خاص پاکستانیت کی نشانی موجود ہے کیوں کہ پورے پاکستان سے لوگ یہاں جوب کرنے آتے ہیں

اس کا جو بیڈ آفس ہے وہ یہ ہے جہاں آپ اس وقت لاہور میں بیٹھے ہوئے ہیں یہاں پر 400 بینک آئی ہوسپٹل ہے یہاں پر 420 کا یہ ہوسپٹل ہے اس میں تین سو مردوں کی جگہ اور سو عورتوں کی جگہ ہے تقریباً یہ ہنڈریڈ پرسنٹ اوپر ڈرتا ہے بھرا رہتا ہے اس کے علاوہ ہماری دوسری برانچ فاروق آباد میں ہے جو 22 ایکڑ ہے جس میں ڈھائی سو بیڈ کا ہوسپٹل ہے اور تیسری ہماری سرگودھا ہے جو ڈیڑھ سو بیڈ تک ہاسپٹل ہے - اور ایک ہماری پائپ لائن میں ہیں

رحیم یار خان میں اور ملتان میں اور ابھی جو ہم فوری طور پر شروع کرنے والے ہیں وہ انشاء اللہ فیصل آباد میں ہے اس کے علاوہ ہم ٹرگ ایڈکشن کے پیشنٹس کو ٹریٹ کرتے ہیں جو نبی کا ہوسپٹل ہے ہمارا جو 90 بیڈ کا ہاسپٹل ہے یہاں اس کے علاوہ جو بہت بڑا کام کر رہے ہیں تو میں سمجھتا ہوں کہ ان سارے کاموں سے ہٹ کے ہے اور منفرد کام ہے ہمارے چیئرمین صاحب کی خواہش یہ تھی کہ ہم ہر قسم کے ذہنی امراض کے لوگوں کو ڈیل کریں تو جس طرح ہم اسپیشل لوگوں کے لیے کام کر رہے ہیں سائیکٹری کے لوگوں کے لیے کام کر رہے ہیں۔ ہیں بنیادی جو ہمارا مقصد ہے وہ ریہیبیلیٹیشن کا کام ہے ہمارے پاس کوئی نو سے زیادہ مختلف یونٹس ہے کہ جہاں پر ایسے امراض پر مبتلا زیادہ تر سیزو فرینک کے پیش نظر آ کے مریض ہے مختلف قسم کی بھی بیہیلیٹیشن ایکسٹرنسز یہاں ہوتی ہے تھری پیس ہوتی ہے اس میں ہمارے پاس گروپ تھری پی ہمارے پاس آرٹس اینڈ کرافٹس تھری پی میوزک تھری پی وی ہوتی ہے اسپورٹس تھری پی ہوتی ہے اور اس طرح سے مختلف قسم کی ایکٹیویٹیز یہاں پر موجود ہے جو ہمارے مریض جن کو ہم ممبرز کہتے ہیں وہ یہاں اس پہ ایکٹری پارٹیسپیٹ کرتے ہیں اور جس کی وجہ سے وہ معاشرے میں اچھا اپنا کردار ادا کر سکتے ہیں۔

یہاں مریضوں کو مختلف آرٹس سیکھائی جاتی ہیں ان سے مریضوں کو الفاظ کا استعمال کیے بغیر اپنے خیالات اور جذبات کو ظاہر کرنے کا موقع ملتا ہے - جب کوئی مریض بات نہیں کر پاتا تو رنگوں کا استعمال کر کے اپنے دکھ اور خوشی کو ظاہر کرتے ہیں -

اسلام علیکم میرا نام ندا ہے اور میں یہاں آج آرٹ تھریپسٹ کام کرتی ہو اور میں یہاں کی یونٹ انچارج بھی ہو تو یہاں پر جب ممبرز ہمارے پاس آتے ہیں سائیکالوجسٹ ان کو ریفر کرتے ہیں ان کے سیشن کے بعد میں دیکھتی ہوں ان کا انٹرسٹ کس میں ہے یا دیکھتی ہوں ان کی ایبیلیٹی کیا ہے وہ کیا کرنا چاہتے ہیں جب وہ ہمارے پاس ان کو ریفر کرتے ہیں تو میں ان کو پہلے پیپر کرواتے ہو جیسا کہ آپ دیکھ سکتے ہیں یہاں پر اور بورڈ پر پیپر ورڈ کیا ہوا ہے انہوں نے میں پھر اس کے عادی ہیں میں پھر اس کے مطابق ہیں انہیں ٹرین کرتی ہوں کچھ لوگ کیلیگرافی کرنا پسند کرتے ہیں کچھ لوگ سٹوری پسند کرتے ہیں اسٹیل ورکس کچھ ممبرز اس طرح کے ہیں جو آپ کو پتہ ہے میں مینٹی طور پر سٹیل ہے کچھ لوگ کہتے ہیں کہ ہم نے صرف کلرز کا کام کرنا ہے اور کچھ لوگ کلرز کا کام پسند نہیں کرتے تو میں ان کو اسی کے کوڈنگ انہیں ٹرین کرتی ہو اور ان سے کینوس میں کام کرواتے ہو جیسا کہ آپ نے یہ یونٹ میں دیکھا ہے کافی زیادہ ڈسپلے کیے ہوئے ہیں یہ ممبرز کے کام ہے وہ 70 سے 80 پرسنٹ کا کام کر لیتے ہیں اور میں ان کی جو

فشننگ ہے وہ میں کر دیتی ہوں اور آپ دیکھ سکتے ہیں جتنی بھی پینٹنگ لگی ہوئی ہے یہ ممبرز سے میری ہیلپ کے ساتھ کی ہے۔ یہ جتنی بھی پینٹنگز کی ہوئی ہیں ممبرز نے میری ہیلپ کے ساتھ کی ہوئی ہے۔ مجھے ایسا لگتا ہے جو لوگ کہتے ہیں ہم سے الگ ہیں وہ لوگ بیمار نہیں ہم لوگ بیمار ہیں۔ ایک بچہ ہوتا ہے وہ ضد کر رہا ہوتا ہے تو ہم کہتے ہیں کہ ضد کر رہا ہے وہ ضد نہیں کر رہا ہوتا پرنٹس ضد کر رہے ہوتے ہیں۔

میرا نام عمیر مسلم ہے اور میں گزشتہ 17 سال سے فاؤنٹین ہاؤس میں کام کر رہا ہوں بحیثیت ایک کمپیوٹر انسپکٹر لائبریری چارج اور ممبر یہاں پر آتے ہیں کمپیوٹر سکتے ہیں ابو بریرہ پڑھتے ہیں کتابیں کتاب وغیرہ پڑھتے ہیں یہاں ان کو کمپیوٹر کے بارے میں بتایا جاتا ہے سوفٹویر کے بارے میں بتایا جاتا ہے بارڈ ویئر کے بارے میں بتایا جاتا ہے اس کے علاوہ بہت سی کتابیں ہیں سائز ہے ہسٹری ہے سائیکالوجی ہے انگلش کے مضامین ہیں اردو کے مضامین ہیں اردو ادب ہے قرآن شریف ہے اور بہت سے یہاں کتابیں موجود ہیں جو ممبرز یہاں پر پڑھتے ہیں یہاں ان کو مطالعہ کے بارے میں بتایا جاتا ہے اور اس کے ذوق کے بارے میں بتایا جاتا ہے کہ مطالعہ کرنا کتنا مفید ہے

پوری دنیا میں مینٹل ہیلتھ کے اوپر ظالم ہوا کرتے تھے اب بہت حد تک الحمد للہ جی چینج ہو چکی ہے تو ظالم کا کنسپٹ یہ تھا کہ کسی کو مینٹل النص ذہنی بیماری ہو گئی ہے تو اسے بند کر دیا جائے بالٹی رے کارڈ دیے جائے بال ٹیڑھے میرے کاٹ دیا جائے اس کو یونیفارم پہنا دیا اور بہ اینڈ بار کر دیا اور وہ اس کے اندر اپنی زندگی گزار رہا ہے اور جو ہے وہ جتنا ٹھیک ہو یا نہ ہو وہ اب اس کے اندر چلا گیا ہے اور لوگ یہ سمجھتے تھے کہ اب وہ کبھی ٹھیک نہیں ہو سکتا اور یہ بہت ہی بری بات ہے نون نائنٹین چالیس میں انیس سو چالیس میں فاؤنٹین ہاؤس نیو شروع ہوا تو وہاں کے مریضوں نے کہا ہم طرف کریں گے سوسائٹی کو کے ہم عزت کے قابل ہیں انہوں نے وہاں اور جابز کی چھوٹے چھوٹے کام کیے کرتے تھے اس گروپ میں اور انہوں نے یہ پروف کیا تو اس وقت یہ کونسلٹ ڈاکٹر رشید چوہدری کو بہت اچھا لگا یہ وہ دور ہے جس پر پوری دنیا میں نہیں ہے پر کام نہیں ہو رہا تھا تو سیکنڈ فاؤنٹین ہاؤس آف دی ورلڈ وہ یہ ہے جس میں آپ اس پر بیٹھے ہوئے ہیں تو ہمیں بہت فخر ہے کہ یہ کمیونٹی کی ہیلپ سے چلنے والا دنیا کا دوسرا بھی ہے سنٹر ہے اور وہاں پر گورنمنٹ سپورٹ ہے اور یہاں پر عام لوگ اس کو چلا رہے ہیں۔

الف سین میرا نام ہے سر اور میں یہاں 14 سال سے سروس کر رہا ہوں یہ ادارہ جو ہے اس میں کچھ کلاسیں ہیں 5 6 کلاس ہیں جس میں روز جاکر میں ان کو میں کلاسوں میں بتاتا ہوں کچھ لوگ آتے ہیں ممبرز جو ہے وہ کہتے ہیں یہ میوزک کا سلسلہ ہے یہ ان لوگوں کے لیے بڑا مفید ہے اور یہ ماشاء اللہ بڑا شوق کرتے ہیں بڑا خوش ہوتے ہیں تو میں ان کو کوشش کرتا ہوں کہ میرے سے یہ ذرا اچھا رہے فاؤنٹین ہاؤس میں مریضوں کو موسیقی کی بھی مشق کروائی جاتی ہے۔ اس سے وہ گا کر اور سر لگا کر اپنے دل کی کیفیت کا اظہار کرتے ہیں۔

میرا نام جویریہ ہے اور میں یہاں لائیڈ ہر پست کام کرتی ہو اور یہاں پر ہمارے میل ممبرز آتے ہیں اور ان کو میں ڈفرنٹ ٹائپ کے کام کرواتے ہو یہاں پر آپ دیکھ سکتے ہیں ڈفرنٹ ایپ کے ہینڈ میڈ چیزیں پڑی ہوئی ہے ہر چیز کے پیچھے کوئی نہ کوئی ممبر کی سٹوری ہے کی ممبر جہاں پر ایسے ہوتے ہیں جن کو کچھ سکھانے کی ضرورت نہیں پڑتی وہ آتے ہیں اور مجھے کہتے ہیں کہ میں نے یہ کام کیا ہوا ہے یہاں پر ایک ممبر تھا اس کا نام تھا احسن اس کا کار سے ریلیٹیڈ کام تھا اور آپ یہ دیکھ سکتے ہیں اس نے یہ کارڈ بورڈ سے بنائی ہوئی ہے اسی طرح یہ جو بوتل ہے

یہ جیوٹ سے بنی ہوئی ہے یہ ممبر تھا وہ کہہ رہا تھا کہ میں نے بوتل بنانی ہے آپ مجھے بوتل منگوا کے دیں اور جیوٹ منگوا کے گی یہ پھر انہوں نے خود اپنے ہاتھ سے کرافٹ کیا تھا اسی طرح آپ یہ دیوار دیکھ سکتے ہیں یہ گملے کی مٹی سے پوری دیوار جو ہے وہ تیار کی ہوئی ہے

میں پاکستان کی ایک مزید بہت شہرت یافتہ فیملی سے تعلق رکھتا ہوں میرے تایا تھے احسن بھٹی پاکستان کے فوک سنگر میرے والد کی فی ان کے چھوٹے بھائی کیفی میری والدہ غزالہ میرا چھوٹا بھائی اسد علی tv کیفی خبر وار پروگرام میں آتا ہے میرا بڑا بھائی عامر علی کیفی جو مجھے یہاں پر ایڈ کروا کے گیا ہے وہ بھی چار پانچ موویز میں آیا اور پانچ سال سے ملنے نہیں آئے اور میرا بڑا بھائی جو مجھے یہاں چھوڑ کر گیا ہے اس کا بھی اب تک کوئی کانٹیکٹ نہیں ہے جوتی کپڑا تک سب فاؤنٹین ہاؤس روایت کر رہا ہے فاؤنٹین ہاؤس میں تو چھوڑ گئے ہیں نا مجھے پندرہ سال سے میں یہاں پر ہوں چودہ سال دس مہینے آج

مجھے وہ مکمل ہوگئی ہیں یہاں پر یہ اس پر سہولیات بہت اچھی ہیں پر بس یہی ہے کہ آزادی تو پھر آزادی ہوتی ہے دل چاہتا ہے باہر نکلو اپنا کوئی کام کرو یا اپنی اسٹڈی کنٹری نہیں کرو .

دس میں سے دو افراد ذہنی امراض کا شکار ہیں اور وہ ہمارے اردگرد موجود ہیں۔ ان کے احساسات کو سمجھنا ہمارے لیے مشکل ہے کیونکہ ہم ان کے درد کو کبھی نہیں سمجھ سکتے۔ ان ذہنی امراض سے لڑنا مشکل ہے لیکن ناممکن نہیں اسی لئے ہمیں

مضبوطی اور ہمت سے کام لینا چاہیے -

نہیں مجھ کو شکایت اب کسی سے

بس اپنے آپ سے روٹھا ہوا ہوں

بظاہر خوش ہوں لیکن ایک سچ بتاؤ

میں اند

CHAPTER 5

AUDIO VISUAL BOARD

Scenes	Audio	Visuals	Duration
1	BGM-interview chunks of people in the documentary	Intro video of the documentary with little chunks of the video.	30 secs
2	BGM	Title	5 secs
3	BGM (Voiceover) 1947 سے ان کے بانی رکن پروفیسر ڈاکٹر محمد مرسی میں لاہور میں ذہنی مریضوں کی بحالی کے لیے ایک مرکز فاؤنٹین ہاؤس کا انعقاد کیا۔ یہ دنیا کا دوسرا بڑا ذہنی امراض کے علاج کا ادارہ ہے۔ یہاں مریضوں کو زندگی مختلف سہولیات فراہم کی جاتی ہیں 1971 سے لیکر اب تک تقریباً تین لاکھ سے زائد مریضوں کا علاج ہو چکا ہے اور وہ ایک مکمل زندگی گزار رہے ہیں۔	-Close up angle shot of infrastructure of Fountain house. -Extreme wide shot of a Fountain house building -Wide shots of patients -Mid length shot of female patients sitting	26 secs
4	Interview: Dr.Syed Imran Mutaza (Chairman)	- Establishing shot of Dr. Syed Imran -Close up angle shot of infrastructure of Fountain house. -Close up angle shot of Pharmacy of Fountain House. -Wide shot of people waiting outside pharmacy. -Close up shot of a Banner. -Extreme wide shot of a Fountain house building -Close up shot of female block building -Close up shot of two patients. -Wide shot of a patient scratching his head -Wide shot of Arts and craft unit -Wide shot of music room -Wide hot of patients playing Badminton	95 secs

5	Interview: Nida (Arts Teacher)	<ul style="list-style-type: none"> -Establishing shot of arts teacher Nida -Wide shot of nida sitting -Wide shot of arts and craft unit -Close up shot of paintings done by patients -Wide angle shot of patients doing paintings -Close up shot of a patient drawing a girl sketch -Close up shot of a patient copying a drawing 	65 secs
6	BGM	<ul style="list-style-type: none"> - Wide shot of arts and craft unit -Close up shot of a patient drawing on canvas -Mid shot of strokes of paints on canvas -Close up shot of paint brushes 	5 secs
7	Interview: Umair Muslim (computer Teacher)	<ul style="list-style-type: none"> -Establishing shot of Umair muslim -Wide Shot of patients in class -Close up shot of teacher writing on white board -Wide shot of teacher teaching the class 	40 secs
8	Interview: Ayesha Imran (Supervisor)	<ul style="list-style-type: none"> -Establishing shot of Ayesha Imran -Medium close up shot of a patient working - Wide shot of a group of patients sitting on benches -Close up shot a patient talking and smiling -Close up shot of a patient drinking water - Montage of shots of trans genders - Close up shot of a patient resting after playing badminton 	70 secs
9	BGM (Voiceover)	<ul style="list-style-type: none"> - Close up shot of Alif playing Harmonium -Wide shot of patients sitting in Music room <p>فاؤنٹین ہاؤس میں مریضوں کو موسیقی کی بھی مشق کروائی جاتی ہے۔ اس سے وہ گا کر اور سر لگا کر اپنے دل کی کیفیت کا اظہار کرتے ہیں۔</p>	10 secs

10	Interview: Alif Hussain (Music Teacher)	-Establishing shot of Alif hussain -Close up shot of Alif playing Harmonium -Wide shot of patients sitting in Music room	16 secs
11	Patient singing a song	-Mid Shot of patient singing a song and the teacher playing the harmonium in background	13 secs
12	Interview: Alif Hussain (Music Teacher)	- Wide shot of a patients singing a song in class	15 secs
13	BGM (Voiceover) ہاں مریضوں کو مختلف آرٹس سیکھائی جاتی ہیں ان سے مریضوں کو الفاظ کا استعمال کیے بغیر انہی خیالات اور جذبات کو ظاہر کرنے کا موقع ملتا ہے۔ جب کوئی مریض بات نہیں کر پاتا تو رنگوں کا استعمال کر کے اپنے دکھ اور خوشی کو ظاہر کرتے	- Close up shot of paintings done by patients -Wide angle shot of patients doing paintings	15 secs
14	Interview: Javeria (Allied Therapist)	- Establishing shot of Javeria -Wide shot of the unit decorated with different arts and crafts -Close up shot of Car made from cardboard -Close up shot of a decorated bottle made from jute -Close up shot of a wall made from pot clay -Close up shot of a Butterfly painting -Close up shot of a Parrot Painting	50 secs
15	Interview: Ali Kaifi (Patient)	-Establishing shot of Ali Kaifi -Close up shot of pigeons food -Wide long shot of the patients giving food to pigeons -Close up shot of pigeons in cage	65 secs
16	BGM (Voiceover) ہمارے وہ اور ہیں شکار کا امراض ذہنی افراد دو سے میں دس لیے ہمارے سمجھنا کو احساسات کے ان۔ ہیں موجود اردگرد۔ سکتے سمجھ نہیں کبھی کو درد کے ان ہم کیونکہ بے مشکل	-Close up shots of fountain house -A group of boys sitting in uniform -A boy shaking hands with his teacher	25 secs

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	<p>لئے اسی نہیں ناممکن لیکن ہے مشکل لڑنا سے امراض ذہنی ان -چاہیے لینا کام سے ہمت اور مضبوطی ہمیں</p> <p>سے کسی اب شکایت کو مجھ نہیں ہوں ہوا روٹھا سے آپ اپنے بس بتاؤ سچ ایک لیکن ہوں خوش بظاہر ہوں ہوا ٹوٹا بہت سے اندر میں</p>		
17	End Credits		10 secs

CHAPTER 6

TECHNICAL METHODOLOGY

6.1 Approach

The documentary, key approach of this topic is to get people who are dealing with different mental disorders to believe themselves as normal individuals in society who can live a full life. This documentary hopes to remove the cloak of shame regarding the discussion and urge people to seek professional help. We have interviewed psychiatrists as well and the patients who are getting their treatment from them. We have visited Fountain House where some patients live to get a deep look into their lives. We have highlighted positive and negative aspects as well. The shots include colorful and beautiful artworks, painting done by the patients. The key idea is to raise awareness about people of mental health disorders which most people lack knowledge in our society. It has aimed to remove the stigma attached to mental disorders.

6.2 Genre

The medium used to present the topic of patients living in Fountain House with psychiatric disorders is a documentary. It is informative as we had provided information regarding the illness and how it is treated. It depicts the life of a patient living in Fountain House about their struggles and their ultimate road to recovery.

6.3 Clustering of idea/ Brainstorming

The directors hit upon the idea of making a documentary on Fountain House after having a lot of exposure to the banners, flyers, pamphlets and YouTube channels of Mental illness. Mental health is not prioritized in Pakistan due to generational gap and limited access to resources, leading to psychiatric disorders. Psychiatric disorder is difficult to diagnose and can lead to drug abuse and suicide. This documentary

aims to bring the topic of mental health to the forefront so it can be consumed by the common people and society to better the conditions.

6.4 Objectives:

The objectives of the documentary are:

- To finish the stigma attached to psychiatric disorders in our society.
- To provide an overview narrative into the life of a person's dealing with psychiatric disorders in Fountain House.
- To make people understand that people with mental disorders are normal human beings too.
- To show the unique and creative side of mental disorder patients.
- To show how important is the love and empathy of family and friends is for the person dealing with mental disorders.

6.5 Target audience

Target audience of the documentary are the people of our country. This documentary has primarily target people from age 18 to 26 as these are the average years in which most people are diagnosed with mental disorders. These are also the formative years of a person's life and they are likely to learn and adapt to change. Adults are also the target audience as the documentary wants to showcase the reality of people with mental disorders and normalize them as a stable part of our society.

6.6 Shots/ Camera angles

Camera is the main device to make any electronic media based project. So we have used different angles related to documentary shooting, because the documentary is interview based so the directors planned to take mid shots, close shots and extreme close shots of the interviewees.

Long, mid, over the shoulder and close up shots are used throughout shooting the montage to give better, realistic and suspense based scenes to the viewers and to make the concept clear.

6.7 Location

The shooting of this documentary would be done in Fountain House Lahore, Punjab.

6.8 Equipment

- i. DSLR:** Sony a6500 and Nikon D5300.
- ii. Lenses:** Sony 16-50 mm and 50 mm 1.8, Nikon 50 mm 1.8.
- iii.** Sound Recorder.
- iv.** Light.
- v.** Extra batteries.

6.9 Lightening

For the shot of the documentary both natural and artificial lights have been used.

6.10 Treatment

With the help of different shots, the life of the people living in the fountain house and how they are treated according to their skills are shown. Moreover, respective members are explaining about the patients and their journey in fountain house.

The project brought awareness about the Fountain house. It had build up the positive image of life at Fountain House. This project had portrait creative side of Fountain House. This had develop understanding in the people about the mental illness and how it should be treated.

For the shots of the interviews camera is used, for the close Ups and other scenes. For the insurance of good sound quality Adobe after Effect and Adobe Premiere is used for the editing purpose.

6.11 Pre-Production Coordination

Pre- Production is that phase in which all the work before shooting or before production work is being planned and implemented. It is the phase when we planned and drafted our rough thinking for the documentary. It included the length, duration, talent, interviewees, main motive, screenplay and locations of the documentary. In order to make the montage, rough draft was made to create more suspense for the viewers.

Calls were made for interviews. After contacting the Chairman and supervisor and other staff members and teachers for interviews, the time was decided for the shoot in the respective places. The camera person was outsourced and shooting schedule and details were discussed with him. At the end, the whole schedule was formed while keeping in mind the availability of each person. Budget sheet was also estimated to prepare the rough draft regarding the cost and other expenses.

6.12 Production Coordination

The directors have decided to complete the shooting in the margin of 2-3 days in Lahore, while making sure that all the interviews have been recorded successfully. It includes the complete schedule of the time, date and day when the shooting takes place. The shooting took about 2 days to complete. Gimbal, Sound recorder and light was also used. Variations in the shoot also occurred in this phase. However, changes in the shots, sequence, questions took place due to some issues. The whole team and crew was present at the shoot locations all the time to take care of every single thing. Time was managed properly according to the shoot and raw data was handed over to the editor to give the result of final creation. In hospital the production team was be careful enough to not to disturb any person or to offend any patient with absurd questions. Every precautionary measure was taken to avoid any kind of incident.

6.13 Post Production

In the last after having all the raw data, the final footages were selected. The music was selected accordance to this genre of the documentary and voice over was also recorded. With the help of video editing software i.e Adobe Premiere, sound Forge and after effects the video and audio clips were trimmed and edited, and music and voice over was added to that final material of documentary. After going through all the editing process, the directors looked forward for the final approval of the advisor.

Along with the documentary, an awareness campaign was also designed on adobe photoshop e.g. Poster, flex, title, logo, DVD cover and other stuff to convey the main goals and objectives clearly and properly to the viewers.

CHAPTER 7**BUDGET****FINAL BUDGET PAPER****Project Name : Fountain House****Genre : Documentary****Duration : 9-10 Minutes****Language : Urdu****Shooting Location : Lahore****No. of Episodes : One Time**

Head of Accounts	Quantity	Name/Description	In House	Out Source (Spent in Rupees)
Directors	2	Aamen Ijaz / Nawwal Abid	Yes	-
Producers	2	Aamen Ijaz / Nawwal Abid	Yes	-
Pre- Production				
Fuel for Research	-	Transport	Yes	-
Production				
Camera Facilities and other Equipment	-	All Technical Facilities	-	35,000
Meal	2	2 days Shooting (Active)	-	5,000
Car + fuel	-	Car +Transport	-	6,000
Camera Person	1	2 days Shooting	-	15,000
Post- Production				
Editing	1	-	-	15000

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DVD Cover	4	4 DVD's with Cover	-	1,000
Flex+Poster	2	1 Poster + 1 Flex	-	4,000
Project Printing	3	3 Project Files	-	2,000
Miscellaneous				2,000
<i>Total Expenses</i>				85,000

CHAPTER 8

CONCLUSION

Our emotional, psychological, and social well-being are all parts of mental health. It alters our thinking, feeling, and behaviour. Mental health is important at every stage of life, from childhood and adolescence to adulthood. It also helps determine how we deal with stress, relate to others, and make healthy choices. In Pakistan mental health is considered as a taboo which help the patient to live healthy life with the early diagnosis. People take them to the religious personality instead of giving them proper treatment.

This documentary is used to create awareness in mass public about the mental illness that if it will not treated properly will lead to the substance abuse disorder, self harm or suicidal attempt. Fountain house is the centre where these type of patients are treated in very comfortable and peaceful environment.

This documentary is created to aware the people of Pakistan not to consider the mental illness a taboo. The patient should be given a proper treatment. So these people can also live healthy and normal life.

In conclusion, it is important to have empathy and break the shackles of considering mental health to be a taboo issue as it is the only way to help maintain a safer and kinder environment for those who need it the most.

CHAPTER 9

RECOMMENDATIONS

According to Our World in Data, research shows that around 0.57% of Pakistan's population has mental disorder. It is important to understand the issue hence it is recommended:

- To be more empathetic and understanding towards people's plights rather than dismissing them or making fun of them
- To spread awareness about the issue, media agencies should provide factual and relevant information
- To set up hospitals and institutes that specialize in mental health disorders, so the people of Pakistan have a way to seek effective treatment
- To create non-judgmental support networks for those people who are suffering from mental health problems especially bipolar disorder
- To offer up to date information and data online or through governmental bodies after ample research has been conducted.

CHAPTER 10

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