



ANNUAL REPORT 2019-20



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CHILD DEVELOPMENT



BEYOND BOUNDARIES

Sensitization Programme:

Over 700 heads of schools attended the sensitization programme held at 12 blocks of Goa. Participants were sensitized to the needs of learners with disabilities. It also highlighted the rights of disabilities act 201.



Samagra Shiksha resource centers:

The centres were supported to sensitize over 700 parents across Goa. Through highly engaging meetings parents were made aware of the needs, challenges and abilities of learners with disabilities, in the 12 blocks of Goa. These sessions were conducted in collaboration with the Goa Samagra Shiksha.



COMPASS

Communication-centred Parent-mediated treatment for Autism Spectrum Disorder in South Asia

COMPASS evaluates effectiveness, at scale, of a parent-mediated intervention for ASD in South Asia, delivered by non-specialists in community health settings, to investigate the cost-effectiveness of the intervention and to generate tools and evidence for policymakers to guide scale-up of the intervention.

We have trained frontline workers including ASHAs from the Delhi State health Mission and are due to commence our trial.

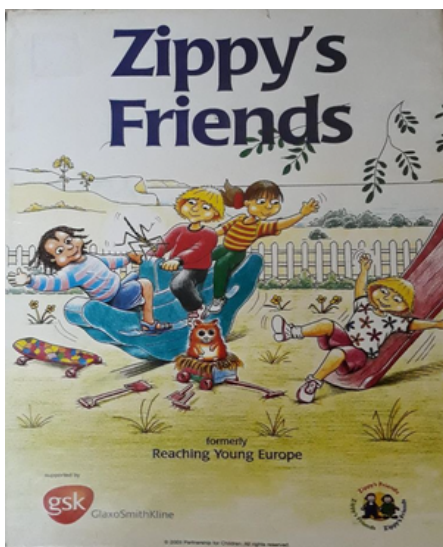
62 practice families have received the first session. 36 trial families are under the intervention arm.



ZIPPY'S FRIENDS

This program helps to build resilience skills in children of ages 5-8 years.

It has been delivered by trained teachers in 15 schools in Goa and 3 in Delhi, covering around 10000 students.



SPRING

Sustainable Program Incorporating Nutrition and Games

The program develops a feasible, affordable and appropriate intervention package to support optimal child growth and development in the first 1000 days of life.

This year we completed a complex cluster randomized control trial in rural Haryana and evaluated 1200 children for the impact of the SPRING intervention. Results show that the majority of children in the community face multiple adversities such as poverty, maternal depression and exposure to violence that impacts their growth and development.



ASPIRE

A Scalable Program Incorporating Early Child Development Interventions

The program was launched in August 2019 to design and pilot an integrated Early Child Development & Nutrition intervention promoting nurturing care in the first 1000 days of life, to be embedded into the Integrated Child Development Services scheme in Hyderabad.

We have started formative work with Anganwadi Teachers in Hyderabad following an orientation workshop with Women Development and Child Welfare Department, Government of Telangana.

03

Our brain, Our World, Ourselves

The project explores the ethical debates and opinions around use of cognitive enhancement drugs with children in low and middle income countries .

So far, we have collected data from experts scoping the literature as part of informative research, developed an interview guide of case vignettes to describe cognitive enhancement techniques. As next phase, we will be focusing on qualitative interviews with parents of children from schools with varying fee structure.

INFORM

Improving Functional Outcomes for Children with Impairments

We are designing a m-Health platform to enable community health workers to deliver evidence based strategies for children with developmental disabilities to support activities of daily living. We have developed a pilot platform with audio visual content which parents found important and engaging.

ADOLESCENT MENTAL HEALTH



PRIDE

Premium for Adolescents

The project is one of the largest adolescent mental health 5-year research initiative in a Low-and-Middle-Income country (LMIC). PRIDE is seeking to develop psychosocial interventions for school-going adolescents with mental health problems in Delhi and Goa.

Major components of this research includes:

1. A universal sensitisation intervention designed to increase demand for school mental health services
2. An open-access digital intervention, with minimal counsellor support, for adolescents with a felt need for psychological support but who may not yet meet clinical thresholds for psychopathology
3. A brief counsellor-delivered problem-solving intervention for adolescents with elevated mental health symptoms
4. A more resource-intensive counsellor-delivered intervention for adolescents with refractory mental health problems. This represents a comprehensive extension of the original PRIDE stepped care architecture across different levels of mental health need

Trials:

Primary and secondary outcome analyses were completed for an individually randomised, parallel arm trial that compared counsellor-delivered problem solving (intervention arm), with problem solving booklets without counselling input (control arm). Our trial report concludes that problem solving remains a leading candidate as the initial element in a stepped care system of intervention delivery, since focal perceived problems are likely to drive adolescent help-seeking and retention in treatment. The accompanying cost-effectiveness analysis has informed recommendations about suitable formats for scaling up.

Intervention development and pilot studies:

A specialized intervention for adolescents who do not respond to problem-solving intervention, was extended to five New Delhi schools after initial piloting in Goa. Simplified clinical decision rules were introduced to facilitate accurate selection and efficient dosing of therapeutic elements, thereby reducing the time needed to complete a full course of treatment.

MANN MELA

A web museum of young people's mental health stories

The project brings together stories of nine young people (18-24 years of age) stories that gives audiences a glimpse into their personal experiences related to breaking stigma, finding support and recovery. Mann Mela uses art and media based story-telling to highlight how social determinants impact our mental health and the different options available for support.

The project also features awareness and psychoeducational resources through handouts and videos, a digital and travelling museum arts and technology-based media, installations and exhibits.



Reach:

7 youth advisors

89 lived experience contributors

8 outreach partner organisations

115 youth in consultations and co-design workshops

35 youth artists

SMHPP

School Mental Health Promotion Program

The project was launched in August 2019 to enhance the school climate and promote mental health, reproductive and sexual health, gender equity, substance use mitigate bullying and violence, enhancing study skills and other adverse health outcomes through school health facilitators.

Reach

- Trained and supervised School Health Facilitators (SHF) placed in schools (1:2 ratio)
- Covered 6 government and low-income schools
- Total students covered: 1430
- Total teachers covered: 120



- Improvement in school climate (indicator of quality of school environment)
 - *teacher-student relationships,*
 - *the students' sense of belonging within the school community,*
 - *commitment towards school,*
 - *school connectedness*
- Sensitivity towards mental health issues and overcoming stigma
- Decrease in bullying, violence and depressive symptoms
- Improvement in academic performance and prevention of dropouts
- Teachers equipped to handle behaviour issues in classrooms
- Referral pathway devised for seeking disability certification

- Good rapport developed with Schools, PCMC-Deptt. of Education
- Students have accepted the SHF whole heartedly
- Intervention delivered to class 5-10 students
- The class 10 passing result this year in the 6 schools has improved to a great extent in comparison to last 2 years. The HMs of schools have appreciated our efforts and contribution to this success as well.
- All interventions components delivered as planned
- Total counseling cases handled **256** and **250** follow-up sessions
- Managed to get **39** dropout students back to school as well as got **50** students to regularly attend school through individual and parental counseling

YOUNG LIVES MATTER

Started in 2017, YLM is a research study, aiming to investigate the reasons for suicide attempts in young people. Project also tries to understand the role played by a variety of factors in perpetrating as well as preventing suicide, for example: negative life events, mental health problems, social support, coping skills, exposure to suicide and social media.

So far, we have collaborated with key partners in Pune and Chennai- for example, Schizophrenia Awareness Association, YCM hospital, DY Patil hospital, SCARF, and Sneha Foundation and completed of first and second phase of the project's pilot which involved analysis and presentation of the results to partners and advisors, and preparation of all the protocols and procedures for the mail study

ASHRAMSHALAS

School Mental Health Promotion Program

The project aims to:

- develop and evaluate a mental health promotion intervention, aimed at reducing the effects of psycho-social and mental health issues among students of 22 Ashramshalas
- Demonstrate the acceptability of the intervention content by key stakeholders and feasibility of delivering the intervention through lay counsellors in the Ashramshalas
- Build capacity of staff to identify MH issues (including their own) and seek referral as and when needed
- Prepare scale-up plan to implement intervention in 1000+ Ashramshalas in Maharashtra

ADULT MENTAL HEALTH

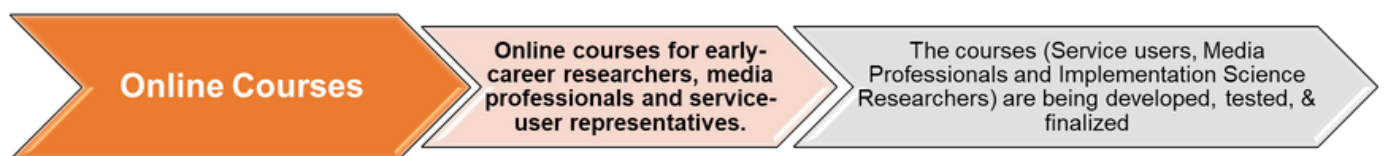


ESSENCE

Enabling Translation of Science to Service to Enhance Depression Care

The goal of the project is to generate knowledge on cost-effective implementation methods for scaling up of evidence-based interventions for mental disorders and build capacities to enhance the conduct of implementation research, the dissemination of its findings, and promote the uptake of this evidence in policy and programs.

We have conducted training trials to evaluate Digital Training interventions (DGT) compared with traditional Face-to-Face (F2F) methods for training Accredited Social Health Activist (ASHA) workers to deliver HAP in Sehore district of Madhya Pradesh. In next phase, we performed implementation trials to evaluate the effectiveness and cost-effectiveness of an enhanced implementation support (EIS) strategy to address the key barriers to the collaborative stepped care delivery of evidence-based brief psychological treatment for depression, compared with the current routine implementation support strategy, on improvement in outcomes in patients with moderate to severe depression in primary care in Sehore district



The fig. represents capacity building overview and status for ESSENCE in 2019-20

EMPOWER

Enabling Translation of Science to Service to Enhance Depression Care

The overall aim of EMPOWER is to build India's mental health workforce through a digital platform to enable non-specialist health workers (such as ASHAs, ASHA facilitators, ANMs, and other non-specialist health workers) to learn evidence-based brief psychological treatments for mental disorders, assess their competency, and assure quality as they deliver these interventions in primary care settings. Our primary hypothesis builds on what we have learned through the ESSENCE project: we anticipate that the new digital training content and adapted digital training program will be feasible and acceptable for non-specialist health workers in diverse primary care settings in India.

As part of phase 1, we contextualised the existing Healthy Activity Programme (HAP) of project ESSENCE training modules and competency assessment with non-specialist health workers for use in primary care settings in Gujarat which involved,

- Adaptation and translation of the existing content (16 ESSENCE modules + competency assessment)
- Feedback from stakeholders and users for Gujarati content
- Dubbing and subtitling of the content
- Integration of the content into the existing TECHO platform, followed by initial pilot testing of the adapted program to ensure feasibility and acceptability

ADDICTIONS RESEARCH

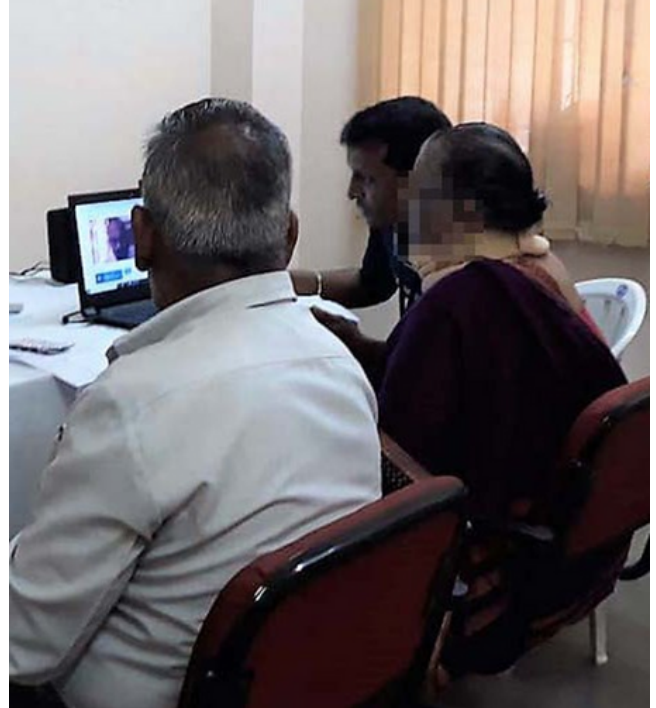


IMPACT

IIMProving ACcess Through Tele-Psychiatry

The objective of IMPACT is to test the acceptability and feasibility of mental health care delivered via tele-psychiatry in primary healthcare settings in Goa. We provide clinic-based psychiatric and psychological services in Primary Health Centres in different parts of Goa, as well as home-based services for those patients who are unable to travel to facilities for mental health care.

This project is using an innovative approach of using video calling to deliver psychiatric and counselling treatment in primary healthcare facilities to reduce the gap in mental healthcare treatment. This treatment is providing a holistic package of care including psychiatric consultations, supportive counselling and medicine prescription. Additionally, it is also providing home-based services to reduce the travel time and costs for the patients.



AMBIT

Alcohol Use Disorders - Mobile Based Brief Intervention Treatment

This study aims to develop a contextually appropriate technology-delivered intervention for a growing and important public health problem i.e. hazardous drinking in adults. This is being achieved through a range of processes including identification of the existing evidence; development of the intervention in partnership with our technology partner and utilising feedback from a range of individuals and groups including hazardous drinkers; refinement of the intervention; and testing of its preliminary impact.

This project is the first evidence-based approach using technology to overcome the treatment gap for alcohol use in the Indian context. The intervention development and delivery process uses participatory methods.

EMA/EMI

Ecological Momentary Assessment/ Interventions

The project focuses on using an innovative methodology to support assessment, monitoring and prevention of alcohol abuse in high-risk youth (aged 18-24years) in Goa. Collecting reliable data on stigmatised behaviours poses a major challenge for researchers and service providers, especially in developing countries. The problem is further magnified by the reliance on retrospective reports.

To the best of our knowledge, no substantive study has employed digital apps to measure alcohol use and provide interventions to hazardous drinkers in India. Our study will be unique in applying a structured methodology to adapt and evaluate such apps in India.



Ecological Momentary Assessment (EMA), a methodology aimed at collecting data in real time in natural settings, can in part address this issue and provide more reliable data. Building on the successful results obtained using EMA, Ecological Momentary Interventions (EMIs) have been developed to provide preventive and therapeutic behaviour change interventions to clients during their everyday life (i.e. in real time) and in natural settings, using software applications ('apps') delivered through electronic devices. There is evidence that this approach can significantly lower hazardous and harmful alcohol consumption, alcohol-related problems, or both, even though most apps have been developed without rigorous academic evaluation or grounding in existing research.

TO QUIT

Ecological Momentary Assessment/ Interventions

India is the second largest consumer of tobacco in the world; and has one of the highest mortality rates related to tobacco. The objective of ToQuit is to develop an evidence-based tobacco cessation treatment for our local context and that can be delivered to people on their mobile phones. We will do this by involving tobacco users, doctors and other medical practitioners at different levels to understand their perspectives and tailor the treatment to their needs. If found to be cost-effective, our treatment can reach millions of people in India and could be a game-changer in the field of public health.



This project is the first RCT to develop a mobile phone-delivered tobacco cessation treatment for LMICs. Since it will be a simple SMS-based intervention using messages in local languages, it can be accessible to a majority of India's population.

QAAD

Qualitative Assessment of Adolescent Drug Use in India

Evidence indicates that illicit drug use is a rising and highly stigmatised, thus "hidden" problem, yet there is a dearth of systematic research done on illicit drug use. With its emphasis on illicit drug use, this project investigates the understudied landscape of these behaviours, with the purpose of analysing the characteristics of illicit drug use in adolescents across India and to identify facilitators and barriers to care.

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This study identifies such contextual factors in drug use within a low-resource setting, filling the evidence gap in a lower middle-income country, by using an explanatory framework. This explanatory model of disease, introduced by Kleinman et al. in 1978 acknowledges the specific societal and cultural aspects of disease to provide perspective beyond the scope of traditional biomedical model. Providing valuable insight into patient's conception of disease, the explanatory model is beneficial in understanding their wider belief systems, allowing patients' world views to emerge and be incorporated into culturally appropriate treatment. With this particular population and health issue, using an explanatory framework will be crucial to holistically understand the complex structural and social determinants that comprise the phenomenon.



NIHR

Global Health Research Group

Our multidisciplinary group of established and early career researchers will develop a comprehensive, adaptable package of care to improve the mental health of survivors of violence against women, modern slavery, and civil conflict in resource-constrained settings in India, Sri Lanka, and Afghanistan.

These forms of violence are gendered, culturally and generationally recapitulated, and strongly associated with mental illness, particularly depression, anxiety, post-traumatic stress disorder, and suicidal thinking. Reductions in prevalence and severity of these conditions will be our target outcomes in groups whose gender and age reflect local burden of violence. Alongside psychological therapies, the range of necessary non-clinical responses includes crisis counselling, shelter, legal and financial negotiation, social work, and community support networks. In developing a package of care adaptable to different forms of violence in resource-limited settings, we will identify and review promising models, refine them contextually through user engagement, pilot and collate them.



MAV

Men Against Violence

Gender-based violence is a major violation of women's human rights and a significant global public health problem. As a result of this violence, women experience a range of immediate and long-term physical and mental health consequences, often exacerbated during the perinatal period.

This project takes advantage of an existing perinatal mental health care delivery platform to adapt, implement, and test a male-led intervention for gender-based violence in rural Rajasthan, India

Our hypothesis is that a violence primary prevention program led by self-identified reformed perpetrators that targets young husbands of expectant mothers will be both acceptable and feasible within the local context, and that the program will reduce the actual experience of violence among women and change community perceptions regarding violence. We intend to use the results of this pilot implementation study to inform a future trial in the study area.

By involving men in the process of preventing gender based violence and discrimination, this study is our first foray into working with perpetrators of violence



DATING VIOLENCE

Exploring association between dating violence and mental health among youth in India

Young people who experience violence in intimate relationships are particularly vulnerable as they are not able to openly speak about their experiences due to social norms around dating, and are unable to access good quality and affordable support for the same.

The objective of this study is to understand the challenges young people who experience violence in dating relationships face, their support needs and the sources of care available to them. We will use the findings from this exploratory study to develop a larger intervention development project that can improve the mental health of young people.

This study is using innovative techniques such as emoji flash cards and co-production sessions with young people to build data collection tools that are acceptable and interesting.



PREVENTING SUBSTANCE USE

Exploring association between dating violence and mental health among youth in India

Mental disorders, including alcohol and substance use disorders, account for a third of the burden of disease in adolescents globally, and more than half the burden of adult mental disorders has its onset in adolescence.

Effective integrated interventions that identify and target key early risk and protective factors shift children and young people onto a more positive developmental trajectory; and are relevant to the Indian context are essential.

Our study is adopting a model that seeks to address universal prevention across a population irrespective of risk, by focusing on structural determinants and encouraging all young people to adopt skills that will increase resilience against targeted health problems.

This study is using a coproduction approach to generate knowledge on which components, package and platform are most suited for a prevention intervention for substance use in India.



PUBLICATIONS



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- The prevalence, patterns, and correlates of gambling behaviours in men: An exploratory study from Goa, India. Urvita Bhatia, Bhargav Bhat, Sanju George, Abhijit Nadkarni *Asian Journal of Psychiatry*. 2019; 43: 143-149
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AWARDS & RECOGNITION

- Sangath is by far the most influential research organization on mental health care in poor countries (The Guardian, UK, 30th.Apr. 2019)
- It's Ok To Talk, India's first youth focussed mental health campaign, recognised as one of the 10 most prominent international mental health campaigns by Facebook (2019)



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