

YV ANNUAL REPORT

2020-2021



INTRODUCTION

2020 At a Glance

Summary

Project Burans completes the second year of MHI funded projects in the Yamuna Valley. This year came with several challenges posed by the Covid-19 pandemic and its aftermaths. The pandemic not only was a challenge rather it highlighted an eminent need for promoting gender equality, mental health and social inclusion in the communities. Burans actively worked with the community at every level which further strengthened the trust and relationship with the community members, government authorities, and the local leaders. The team managed to offer its services to more than 50000 people across 95 villages. The list of those impacted include, PPSDs, Care givers, community workers, below 18 adolescent boys and girls, people from backward and marginalised or minority communities, as well as teachers, police, and others and a long list of key community people impacted includes panchayat leaders, teachers, policemen and several others.

This year, at Yamuna Valley we identified and registered 289 people with psychosocial disability (PPSD) and continued our work on community-based rehabilitation programs

Burans was founded in 2014 as a partnership initiative of the Emmanuel Hospital Association with the Uttarakhand Community Health and Global Network (CHGN) cluster. Herbertpur Christian Hospital administers Burans.

Central to governance is the participation of the Experts by Experience group. People with lived experience of mental health problems help us set programme priorities, develop acceptable and engaging resources and build strong relationships in communities.

Activities	Beneficiaries
Total number of PPSD registered	289
No. of people with mental illness disclose their status -i.	273
e total number of people disclose status vs total PPSD in	
your project	
No. of persons with mental illness who report reduction	271
in use of abusive language in community (calling	
paagal, etc)	
No. of PPSD who are able to attend social functions such	263
as wedding, religious functions (number includes PPSD	
registered in previous years as well)	
No. Of PPSD above the age of 18 able to engage in	27
economically productive activities	
Total people who received MH awareness (include all	40,000
community meetings, World MH day etc)	
Total PPSD who started meds this year	47
Total PPSD who received counselling and family support	289
this year	
Total people who access disability pension or certificate	11
this year	
Total active DPG (or caregiver/ PPSD support) groups	29
this year	
Total young people completed youth resilience course	184
this year	
Total PPSD back to income generation work this year	265

Table 1: Summary of our key projects

REACHING OUT TO REMOTE AND RURAL COMMUNITIES-AWARENESS ACTIVITIES

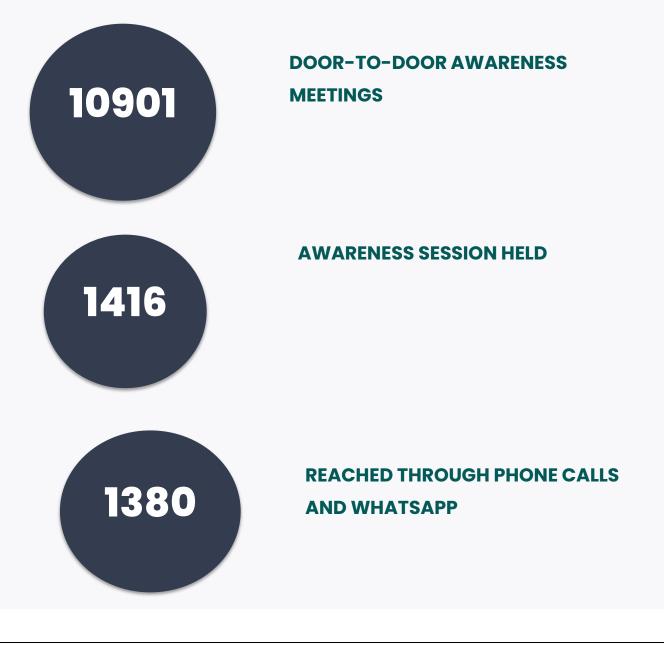
Buran works with rural, remote and vulnerable communities and hence, awareness is a crucial part of our work. Last year with lots of fear mongering and fake news around Covid-19, Burans started organizing awareness drives and brought several changes in its operations to adjust to the new normal. Large gatherings were avoided, door to door/individual meetings were encouraged and community staffs were trained to impart current scientific information around Covid-19 pandemic, those staffs were tasked with imparting correct information and knowledge to the target villages by sending WhatsApp messages to the villagers and PPSDs and phone calling. Another strategy adopted was reaching out to ASHAs, AWW, Pradhan and Block office members and shared the Burans prepared and collected resources via WhatsApp and asked them to further share it in their surroundings and families.

EVENT	WHAT WE DID?	
International	Awareness through <i>nukkad natak</i> on mental health	
women's day (8 th	issues among women with focus on gender equality	
March 2021)	and importance of women in leadership.	
Epilepsy Day (26 th	Awareness activities and skits performances by the	
March 2021)	Nae Disha students outlining the steps to follow at	
	home during epilepsy attack.	
Mental Health Day	Covered 900 people approx. in total. Awareness	
(10 th October 2020)	activities included nukkad natak focusing on "What	
	is Mental Illness and How to seek care" and "Stigma	
	associated with mental ill health".	

OUR CELEBRATION CUM AWARENESS ACTIVITIES

COVID Challenges:

- To adhere to Covid guidelines, our team managed awareness activities through phone call and used WhatsApp messenger to share correct and relevant information.
- The field visits were restricted, however, CWs managed to meet PPSD and other villagers physically within their own villages, while the other community areas were contacted via tele-calling/ whatsapp messages. The mental health awareness campaigns were replaced by door-to-door campaigns while maintaining social distance and following other protocols.
- The Psychiatrist clinic at CHC Naugaon was put to hold, thus monthly clinic couldn't be conducted. However, our team managed to provide medicines to the PPSD.



WE BOOST RESILIENCE AMONG YOUNG PEOPLE-NAE DISHA

Last year due to COVID we started running our Nae Disha program in communities where our CWs also living instead of schools. In total, 184 young people formally registered but others joined in as well. Through 18 modules sessions they participated in various activities like, performing street play-Nukkad Natak in topics like, sanitation and cleanliness in villages, girl child education, and mental health as part of the group I CAN CREATE CHANGE program. At the end of the session students' participants described multiple outcomes such as being more confident in sharing their feeling with friends and family members and increased gender equality attitudes. Parents described that their children showed new skills in confidence, planning and that their participation was new and they supported useful; their children to be part of our Mental Health Day awareness program.



Pic 1: Nae Disha session in communities facilitated by community worker

Reached 186 adolescents through our Nae Disha program

Nae-Disha girls performed nukkad natak in communities on women's day and world mental health day and generated village wide dialogue. Community members and their families felt the need and benefits of giving more freedom and opportunities to them.

WE CARE FOR CARERS- NAE-UMEED

Nae Ummeed program was launched as an intervention for the caregivers who look after the Persons with Psycho-social Disorders (PPSDs). It consists of thirteen modules, nine of which are focussed on developing knowledge and skilfulness of the caregivers and help them in handling the PPSD cases in their families and the rest four are on dealing with financial inclusivity, managing debts.

Key Outcomes and Learning:

- 80 caregivers increased their skills in selfcare and caregiving through the 13 modules of nae Ummeed
- formed 28 Nae Ummeed caregiver groups in over 14 weeks
- completed sessions facilitated by our community workers (CWs)
- the sessions were helpful in making caregivers support group networks and the participants also reported increase in their skills in seeking support and peer friendships



Pic 2: Nae Ummed session facilitated by team leader with caregiver group

"During the session burnouts ofcaregivers were observed, sometimes women used to come with their children as they cannot leave them home alone. There were many challenges to encourage them to join the sessions, however, as the session we observed progressed, that caregivers started supporting each other and talking openly in the sessions. This created a trust and friendship among the group members and also helped in continuing sessions smoothly"-Burans CW

WE IMPROVE ACCESS TO CARE- ADVOCACY/ NETWORKING

COVID-19 created an opportunity to develop a wider range of networks and linkages online as well as with some new local partners. Burans networked with DIET and Azim Premji and Burans will train Azim Premji foundation's staff to make them able in identifying and referring PPSD clients appropriately. In Purola, we built network with president of Pradhan, BEO, CO of Police station and further to provide possible support. CO of police requested us to do mental health session with the staff so that they can learn to manage their stress due to heavy work load. We have also developed relationship with Forest Department.

Key activities:

- 226 networking meeting regarding COVID-19 (CHC, Block, Journalist, Tehsil, MOIC, BDO,SDM,Police, Tehsildar, Covid Magistrate,Teachers, Pharmacist, Ayurvedic team, Asha, Aww, DMHP Psychiatrist, CMO, MH nodal officer)
- We have networked with Garima, a project in Jakdhar which focuses on child rights and safe migration. They have engaged in conversations and are now supporting Burans to increase our focus on this with co-funding promised for the next 18 months
- We are working with SHG networks in the valley which focus on disadvantaged communities.

Challenges:

- Building networks and monitoring work became a difficult task during lockdowns
- The focus on COVID meant advocacy for accessing medicine at CHC level at Naugaon and Purola was very challenging.
- Availability of psychiatrist and medicines became tricky as the only doctor was put up for covid duty and medicine shortages, however

the issue was solved when Jeet had meetings with CMO and was assured medicines at both CHCs in April 2021

- During second covid waves field visits to remote locations became a huge challenge as our team lead and Program officer had to travel on a daily basis
- We at Burans team had to ensure utmost care in following strict Covid protocols as we ourselves couldn't afford to become a carrier

WE COLLECT EVIDENCE OF WHAT WORKS-RESEARCH

Research and Surveys are an essential part of the work Burans does as we believe in evidencebased practice approach. Two papers were published renowned international journals like international journal of Health Policy and Management and International Journal of Equity in Health and the third paper by the team is being peer reviewed for publications in Indian Journal of Social Psychiatry. In December a

"Examining equity in mental health status, attitudes and knowledge in Purola block, Uttarkashi" covering around 60 villages and 1440 households was conducted and is expected to be published by the ned of this year. The research findings and the data collected are crucial in policy making, project formulations as well as advocacy for the mental health cause.

month-long Baseline survey titled

Published Works:

a) *"Exploring Community Mental Health Systems in the Yamuna Valley, North India – A Participatory Health Needs and Assets Assessment*" in the International Journal of Health Policy and Management b) "We have got through hard times before: acute mental distress and coping among disadvantaged groups during COVID 19 lockdown in North India- A qualitative study" in International Journal for Equity in Health.

c) *"A Qualitative study to explore meaning of mental distress and help-seeking in the Yamuna Valley, North India"* has been submitted to Indian Journal of Social Psychiatry and is expected to be published by September 2021.

WE KEEP LEARNING-CAPACITY BUILDING

Capacity Building/Training	Timeline	DETAILS
Covid Protocols and training	May 2020	To ensure relevant and correct information sharing with in our teams and doing same as part of our community awareness.
Training on use of social media and online meetings	May-June 2020	CWs/CCs were trained to use social media for communication and information spread and were familiarized with online meetings.
GBV training by SAAMA	June-Oct 2020	GBV meetings were instrumental in understanding the concepts of gender equality, gender discriminations among the CW/CCs and POs who went on to implement the same in their personal lives
Community base monitoring by Community Heath and Justice India	Nov 2020	Knowledge was shared on community base monitoring and teams started monitoring at their appointed villages where they shared and spoke about government services.
Survey and data collection training of staffs RTI filing training	Dec 2020 Jan 2021	Training equipped team to conduct hour long surveys in villages while maintain ethical concerns. Started demanding for their rights and

Following is list of capacity building activities conducted by Burans-

sessions		with the effort of one of the DPO member,
		disability camp was organised in Barkot by
		Ministry of Social Welfare and Justice.
Active listening and	Feb 2021	CW/CCs and POs were trained and
problem-solving skills		observed huge advantages in their
training		personal as well as professional lives
Mental Health Session	Feb 2021	Invited by DIET to present their work with
with, DIET		BEO (Block Education Officer) and NGOs at
		Barkot. Also, Burans had to implement Nae
		Disha in all Govt school.
Mental Health training	Jan-March	CWs/CCs were trainee regarding mental
for Purola team	2021	health and identification and referring of
		PPSD climates

Started working in new field area: PUROLA

In November 2020, we successfully started our project work in new field area Purola and hired 16 Community workers (CWs) and 3 Project Assistants (PAs). Research is an essential part of our work and we started our work in Purola with Equity survey assessing mental health needs and attitude of people in the region using a random cluster sampling approach with n=1440 households.



Pic 3: Local newspaper cutting of our Purola launching event

CRITICAL REFLECTION

- Team in YV strongly engaged and responsive to context. However, we found slower skill acquisition e.g. active listening were lacking in team instead there was advice giving counselling. The travel restrictions made it difficult to conduct physical training sessions to practice active listening.
- Progress on medicines/ NMHP was slow and disappointing.
- There is a need to strengthen measures of monitoring and evaluation. There were good outcomes anecdotally but we lack in understanding if there is increased social inclusion and reduced discrimination. Next year we focus on this aspect.

