

# MENTAL HEALTH IN INDIA

**60 MILLION**

Indians suffer from some form of mental illness.



Almost **50 MILLION** have either depression or crippling anxiety.

To put it in perspective,

**1 IN 20**

Indians suffer from depression.



**0.9%**

of our population has a high risk of suicide.



Only **10%** people suffering from mental illness get help.

Nearly **10%** people suffering from a mental illness did not seek any treatment despite the presence of illness for more than 12 months because of the stigma.

There are only **0.3** psychiatrists per **1,00,000** people in India.



Only **0.06%** of our budget is allocated to mental healthcare.

According to data, **20%** of the Indian population will suffer from a mental illness by 2020.

## GULBAHAR

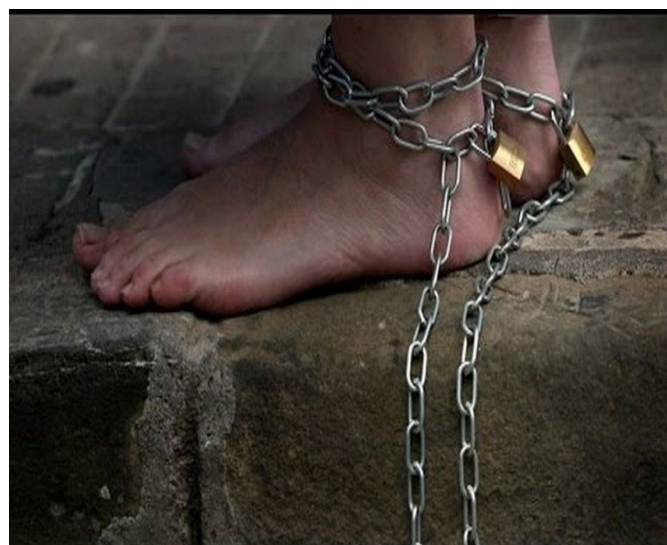
A PROPOSAL FOR IATSS FORUM ALUMNI ACTIVITY

Submitted by IATSS Alumni Association of India (IAAI)

**T**he year 2020 has witnessed a once in a century crisis with pandemic caused by COVID-19 virus. And it affects the poor and marginalized disproportionately especially the persons with severe mental illness living in a poorer state like *Jharkhand*, a state in eastern India. A large part of its population is indigenous, and 10.8% of the population suffers from Common Mental Disorders (CMD). Yet **76.1%** of these people have **no access to care** (National Mental Health Survey, 2016).

### *Mental Health Stigma*

The employment and livelihood opportunities are severely curtailed and its affect the nutritional insecurity and distress. It has been observed that persons with mental illness suffer discrimination and stigma due to which there are occasions when they are chained to furniture and locked away in their houses by their families. Because of the perceived public fear that such people may be dangerous, as well as the shame that families of the affected individuals feel, people with mental illnesses are kept away from the public. Hence, they do not receive treatment. However, in a



vicious cycle, the more someone is discriminated against, the lousier he or she will feel and this potentially increases the severity of the mental illness. Hence it is important for the community to recognize this and break the cycle.

### *Aim of the Project*

The project aims at addressing the issue of mental health through community-based activities and gardening, viz.: -

- We propose to support **75 Families with severe mental illness** to develop nutrition garden (Nutri-Garden) in their backyard to cope up in this pandemic with mental health support. It is evidence, based on observation, that gardening helps in promoting positive mental health and also, improves nutrition of





diet. **Ekjut**, a local community organization working in this area, is willing to support us in technical guidance about developing Nutri-Garden. Their livelihood Facilitators will guide the families with gardening.

- The project will reach out to the communities to open up about the discrimination and stigma faced through **Participatory Learning & Action (PLA)** meetings. These PLA meetings will also serve as **support groups** lead by **Youth Counsellors**, who will not only create awareness about mental health but also do home visits and counselling. In sum, the PLA meetings will create awareness and understanding of mental health within the community through simple participatory activities.

### *Sustainability of the Project*

After the pilot project, we expect that the community will carry on with the activities and other members will also be sensitized of the Nutri-Garden Initiative. With the success of the pilot project, we are optimistic that the local government will adopt this project and would support our initiatives in other villages.

**GULBAHAR** requires

**NO** Additional Infrastructure  
**LOW** Financial Capital  
**HIGH** Human Capital



### Project Summary

<b>DURATION</b>	<b>3 months (April – June, 2021)</b>
<b>THEME</b>	<b><i>“OPENING UPTO MENTAL HEALTH”</i></b>
<b>PRIORITY ISSUE</b>	<ul style="list-style-type: none"> <li>▪ Mental Health</li> <li>▪ Health</li> <li>▪ Livelihood</li> </ul>
<b>GOAL</b>	<p><b>MENTAL HEALTH AWARENESS</b></p> <ul style="list-style-type: none"> <li>▪ To create awareness about mental health and, to discuss about its discrimination and stigma through Participatory Learning &amp; Action meetings.</li> <li>▪ To support 75 Families with severe mental illness by building nutrition garden in to cope with this pandemic.</li> </ul>
<b>OBJECTIVE(S)</b>	<ul style="list-style-type: none"> <li>▪ To identify and support 75 Families with severe mental illness.</li> <li>▪ To build Nutrition garden</li> <li>▪ To conduct Participatory Learning &amp; Action for meetings for creating awareness on mental issues.</li> <li>▪ To raise community participation in opening up on the discrimination and stigma of mental health.</li> </ul>
<b>LOCATION</b>	Remote villages from West Singhbhum District, Jharkhand, India
<b>ACTIVITIES</b>	<ul style="list-style-type: none"> <li>▪ Create awareness about mental health</li> <li>▪ Organize Participatory Learning &amp; Action meetings to discuss about discrimination and stigma caused by mental health</li> <li>▪ Create and facilitate Support Groups meetings</li> <li>▪ Training on making nutrition garden</li> </ul>
<b>ACTION NEEDED</b>	<ul style="list-style-type: none"> <li>▪ To make nutrition garden (Nutri-Garden) in the backyard.</li> <li>▪ To collaborate with Ekjut, a local community organization, to make the garden.</li> <li>▪ To conduct Participatory Learning &amp; Action (PLA) meetings to create awareness and understanding of mental health through simple community participation.</li> <li>▪ To reach out to communities to talk about discrimination and stigma through (PLA) meetings.</li> <li>▪ To create support groups with Youth Counsellors for providing counselling as well as home visits.</li> </ul>



# GULBAHAR

A New Approach to Sustainable Mental Health in the COVID-19 Pandemic.



<b>BUDGET</b>	2272.50 USD  (Refer to ANNEXURE- 1)
<b>M &amp; E PLAN</b>	<ul style="list-style-type: none"><li>▪ The fund will be provided in two installments.</li><li>▪ Routine report to be submitted by the Project Implementer/Manager.</li><li>▪ The IAAI will be kept abreast of the ongoing project and based on the report, adjustments, if required, will be made to ensure success of the project.</li><li>▪ The second instalment will be released only if the progress report of the project is satisfactory.</li></ul>
<b>PROJECT TEAM</b>	Dr. Sachin Barbde (MBBS, M.Med., MPH), a Community Mental Health Physician, will be the Project Implementer/Manager and will report to the IAAI on a routine basis.

**Signature:**

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PRESIDENT  
IATSS Forum Alumni Association of India (IAAI)  
India

### Annexure -1

#### *Budget Breakdown*

The Project has a Total Estimated Cost of **\$2272.50** for 3 months. All services will be at **NO COST to the community** and all funds will be raised through **IATSS Forum (\$ 2,000)** and **individual donations**.

SL. NO.	PARTICULARS	RATE (IN \$)	QUANTITY	AMOUNT (IN \$)
<b>1</b>	GARDENING KIT MATERIAL <ul style="list-style-type: none"><li>▪ Fencing wire (6/4 meter)</li><li>▪ Water can</li><li>▪ Packet of Vegetable seeds</li><li>▪ Vermicompost</li></ul>	3.5 per unit 4 per unit 4 per packet 0.25 per Kilogram	150 75 75 750	525 300 300 187.5
<b>2</b>	HONORARIUM TO LIVELIHOOD FACILITATORS (3 PERSONS)	70 per person for 3 months	-	210
<b>3</b>	HONORARIUM TO YOUTH COUNSELLORS (5 PERSONS)	100 per person for 3 months	-	500
<b>4</b>	SUPPORT GROUP MEET	20 per meeting	10	200
<b>5</b>	DOCUMENTATION	50	-	50
			<b>Total</b>	<b>2272.5</b>