

# TALKING ABOUT MENTAL HEALTH

— ACTIVITIES REPORT 2017-19 —

IT'S OK  
TO TALK










**W**  
welcome

 **HARVARD  
MEDICAL SCHOOL**  
DEPARTMENT OF  
Global Health and  
Social Medicine

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# Introduction

## ABOUT IT'S OK TO TALK

It's Ok To Talk is an adolescent and youth-focused initiative by Sangath that aims to increase awareness about mental health and wellbeing so that more young people are able to engage in a dialogue on mental health, and seek and get help. The programme works through three key activities: community-based events, training and leadership building and social media campaigns highlighting young people's lived experiences of mental health needs. Partnerships are at the heart of It's Ok To Talk's work and these include collaboration with individuals and organisations that bring complementary expertise on community engagement, arts and social and digital media.

This programme is supported by the Wellcome Trust and implemented in collaboration with Harvard Medical School.

It's Ok To Talk is rooted in the belief that the arts and new media are powerful catalysts to improve mental health and wellbeing for young people. It is envisioned with the motto that good mental health makes life better for adolescents and young people, and aims to build spaces for dialogue on intersecting issues related to young people's mental health.

Programme activities are conceptualized and designed with young people as active participants, working together to address the stigma and gaps in awareness about mental health and wellbeing, the lack of safe spaces to engage in meaningful dialogue on mental health, and to access mental healthcare information and services.

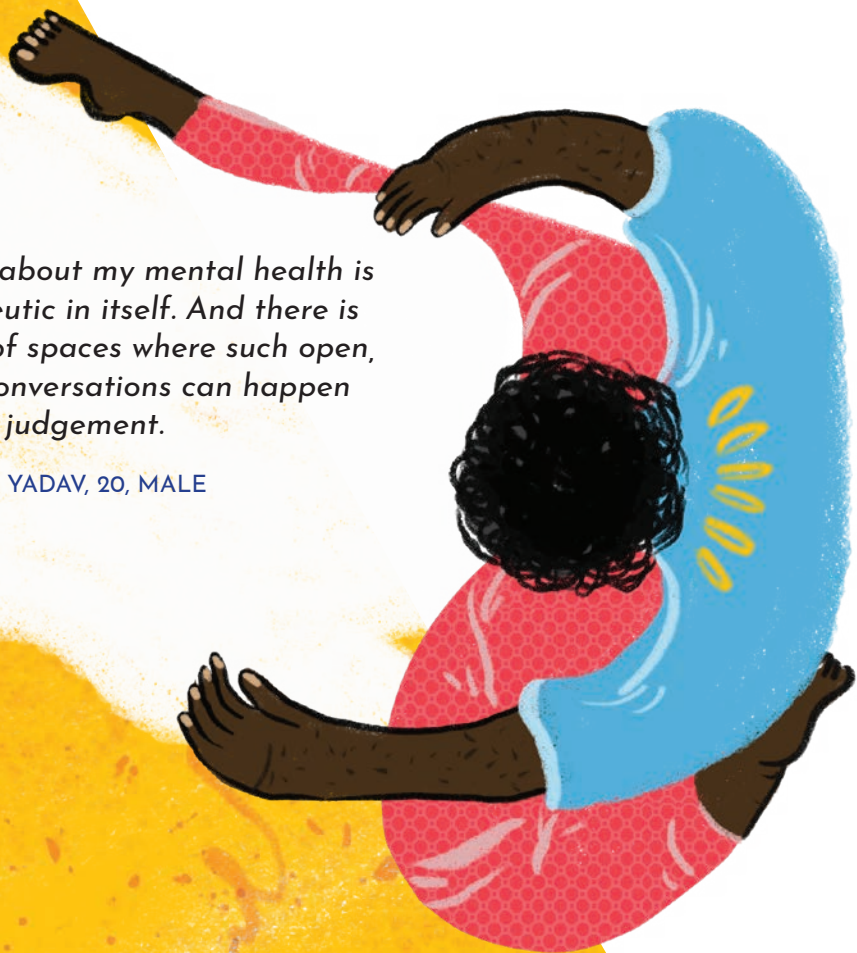
*I hope that reading my story might help others feel less alone. It is important to know that other people are fighting the same battles. This is for anyone who feels stuck, overwhelmed or hopeless. You are not alone, just try to hold on.*

AUTHOR, 24, FEMALE



*To talk about my mental health is therapeutic in itself. And there is a lack of spaces where such open, frank conversations can happen with no judgement.*

SHIKHAR YADAV, 20, MALE



## WHY WE STARTED THIS PROGRAMME

India has the world's largest population of young people ages 10-24, and mental health problems are the leading health concern for this group. The negative impacts of youth mental health problems are starkly reflected in the strong association between poor adolescent mental health and long-term social disability, while suicide is the leading cause of death for 15-24 year-olds in India.

We launched the It's Ok To Talk story-telling platform ([www.itsoktotalk.in](http://www.itsoktotalk.in)) on WHO World Health Day (7th April) 2017 taking inspiration from the theme for that year, "Let's Talk", which emphasized the central role of disclosure in recovery from depression. The website shares personal narratives of young people's mental health, thereby highlighting important gaps in addressing young people's mental health needs while also offering a window into young people's priorities.

Through its activities, It's Ok To Talk aims to overcome some of the traditional barriers faced by adolescents and young people in talking more openly about mental health problems and seeking help. These barriers include psychosocial

challenges such as the silence and stigma around issues of gender, sexuality and relationships; violence and abuse; poverty, caste and religion; lack of safe spaces for discussion and dialogue; lack of (youth-friendly) mental health services and information, fear, stigma, embarrassment to seek help.

It's Ok To Talk has positioned itself within the thriving social networking space in urban India that provides a great impetus for social media campaigns. The website [www.itsoktotalk.in](http://www.itsoktotalk.in) was conceptualised as a safe space for young people to talk about experiences with mental health, mental illness and wellbeing. The website was also designed as 'mobile-first' with the aim of overcoming feasibility and infrastructural challenges such as low bandwidth and limited Wi-Fi and internet connectivity. Social media campaigns have focused on themes including stress related to exams, self-care practices, preventing suicide, helping friends who may be experiencing mental health needs as well as providing practical ideas for managing mental health every day.



## OUR GOALS

1. To identify strategies to address the stigma associated with mental health amongst adolescents and young people
2. To increase awareness about intersecting mental health issues amongst adolescents and young people
3. To build young people's capacities to address mental health problems

## OUR THEORY OF CHANGE

We believe that engaging with the stories of other young people's experiences of mental health needs can impact attitudes and behaviours about mental health and mental illness, break down the stigma associated with mental health and provide practical and imitable solutions to managing mental health challenges.



## OUR GUIDING PRINCIPLES

1. Mental health is a basic human right
2. Young people at the center and are agents of change
3. Young people are diverse, their voices are unique
4. Promote youth capacities to address mental health problems
5. Promote an inter-sectional understanding of mental health
6. Promote sustainability
7. Leverage science, technology, media and the arts



# Impact 2016-2019



**2.5m+**

social media viewers



**7000+**

people engaged through events,  
workshops and discussions



**270+**

Volunteers



**150**

young people shared their personal  
experiences with mental health



**50**

young people  
trained in mental  
health leadership



**77**

on ground events

*It would be beautiful to see more and more artforms being shown as ways to cope with one's mental health; through workshops and public sessions.*

MRINAL GAUTAM, 32, MALE



## OUR FOCUS IN

# 2017-2019

### *Expansion to Hindi*

The first year of the program had focused on delivering activities and content primarily in English. Expansion of activities in the second and third years included a special emphasis on working in Hindi at events and workshops, creating Hindi translated versions of materials and launching a Hindi version of the It's Ok To Talk website to reach a wider audience.

### *Launching a Young Advocates training programme*

To further strengthen the youth-centered strategy, we launched the "Young Advocates" training programme to provide youth leadership and mental health advocacy training, mentorship and seed grants to young leaders to pilot their own mental health public engagement projects. In 2017 we recruited a group of 11 Young Advocates from 3 cities in India through an open application process.

### *Sharing lived experiences of mental health needs through public events*

In the first year of It's Ok To Talk, a key learning was to increase the number of and enhance the quality

of discussion spaces. Keeping this in mind, we launched a monthly discussion series titled "In My Own Words", focused on sharing personal stories about mental health, well-being, and mental illnesses.

### *Disseminating more information about self-help and help-seeking*

A consistent query from It's Ok To Talk Audiences in the first year was for information and tips on self-management and self-care of mental health challenges and help seeking options. To make this information engaging and accessible we engaged a youth illustrator supported by a small team of mental health professionals based at Sangath, to create easy to understand information education and communication materials on self-care strategies and affordable and free healthcare. These materials are distributed at all events and through programme social media channels.

*It is really good to know that there are spaces where you can come and discuss issues about mental health. I am from the North-eastern part of India, and the mental health resources there are still very poor. I have faced many issues there with my identity and mental health-but I have come very far and finally accept myself as a genderqueer person.*

UPPA, 28, GENDER FLUID



# Activities Report



## Summary

### PROGRAMME OF AWARENESS-BUILDING AND OUTREACH EVENTS

Our programme is designed to build awareness about mental health and wellbeing for young people in India. We work on this through a combination of digital campaigning and story sharing, events and workshops and training capacity building programmes for youth.

#### Public talks and performances

We organised **three public talks and performances** which ranged from informal get-togethers consisting of an open-mic, Q&A with mental health professionals, panel discussions and a theatre performance

#### Sharing personal narratives

'In My Own Words' was launched in June 2018 as a public discussion series to help facilitate a physical space for young people across the city to hear personal stories of mental health experiences and needs. We organised **five editions** of this series.

#### Puppetry shows

We worked with the Kayakalp Trust to write a puppetry show on stress and problem solving for adolescents and organised **15 puppet shows** at 10 primary and secondary schools part of the Delhi Directorate of Education (DoE), Government of Delhi and NGO-supported schools.

#### Self-care workshops

We organised mental health awareness-building workshops at 5 universities in India to enable youth participants to help participants understand mental health and its impacts, bust myths and misconceptions about mental health and illness, and teach basic self-care techniques and strategies.

#### Merchants of Madness

We supported the Merchant of Madness Festival organised by the Bhor Foundation, New Delhi, and The Red Door, Pune. The two day festival included discussions, art workshops and performances about mental health.



## TRAINING & CAPACITY BUILDING ACTIVITIES

### *Young Advocates leadership training programme*

We launched an annual youth leadership programme, the Young Advocates Group, that offered training, mentorship and seed grants to young leaders. Over 2017-19, we conducted two cycles of this training, working with 23 young people, (11 in the first year, and 12 in the second).

### *Gender, sexuality and mental health curriculum for training students*

We supported youth led-NGO the YP Foundation to design and implement a curriculum development project on gender, sexuality and mental health for young people aged 13-19 years. The curriculum spans over a number of sessions and elaborates on mental health and its intersections with sexual and reproductive health and rights. In 2018, 226 youth participants participated in sessions delivering this curriculum through **11 workshops**. This project is currently being

implemented in the NCR and Lucknow, UP.

### *Forum Theatre training for mental health topics*

We partnered with and supported Center for Community Dialogue & Change- (CCDC), Bangalore to train 12 young practitioner-participants working with adolescents and youth in local NGOs in New Delhi through arts and life-skills education to become facilitators in Forum Theatre. Participants co-created, performed and facilitated **two short Forum Theatre pieces** at in New Delhi.

### *Theatre for Mental Health*

We supported the development and of a theatre performance on different experiences of mental health, which premiered through five shows in New Delhi. Directed by Mallika Taneja, "Aksar, Yuhin... Mehsus Hota Hai" explored the multiple silences that exist around mental health in India, laying bare the deeply rooted prejudices around mental health.

## DIGITAL & SOCIAL MEDIA ACTIVITIES

### Website

We received 67 personal stories about mental health from youth and the website reached 60,000 new users. We worked with a young person to translate stories on the website into Hindi, as well as launched a Hindi version of the platform.

We recently more closely studied the submissions received from a group of 33 young authors on this website and this is what we found. Four overarching themes were identified through the narratives:

1. living through difficulties
2. mental health in context
3. managing one's mental health
4. breaking stigma and sharing hope.

Almost all submissions contained personal experiences of distress

with the embodied experience of mental health difficulties as physically and mentally overwhelming and burdensome. Loneliness, isolation and a strong desire for connection were prominent, mirroring findings from qualitative studies of youth narratives obtained in high-income countries (8-9). The expression and sharing of such painful experiences appeared to be an important function of the website. The findings have been published in the *British Medical Journal*\* and highlight important gaps and needs in addressing young people's mental health needs. They also offer a window into young people's priorities in their own words and provide specific themes and nuanced key messages for awareness-building and service design for future efforts in India as well as other similar settings. These







kinds of stories and the key messages contained in them are very important both for promoting the mental health and well-being of those who have made these disclosures as well as on attitudes regarding meeting mental health needs in the wider community.

### *Social media campaigns*

We garnered an engaged community of people online by consistently sharing stories of young people talking about their mental health, sharing messages of support, information on how and when to seek mental healthcare as well as engaged with young people online through polls, surveys and vox pops. We used various in-built features within social networking apps, such as “stories on Instagram” and “Live on Facebook” to engage our followers in conversations on

the sites. While Instagram saw a steady increase in followers through the year, it was more challenging to stay engaged with young audiences on Facebook. We engaged two young people who are open about their lived experience of mental health needs to ideate and illustrate campaigns for our social media.

*\*Gonsalves PP, Hodgson ES, Michelson D, et al. What are young Indians saying about mental health? A content analysis of blogs on the It's Ok To Talk website. BMJ Open 2019*



# Learnings

## PARTNERS AND COLLABORATORS INCREASED OUR REACH

Working through partnership with organisations with the same constituencies including The YP Foundation, Bhor Foundation, Centre for Community Dialogue and Change, Kayakalp, helped us reach a larger number of young people and allowed us to focus on developing age-appropriate resources and materials that were shared through public events,

workshops and through the partner networks. We were able to collaborate with cultural venues and education institutions such as The American Centre, Sri Aurobindo College for Arts and Communication, and the University College of Medical Science for organising public awareness events and discussions.



## INTEGRAL ROLE OF YOUTH ADVOCATES IN ADVANCING PUBLIC ENGAGEMENT EFFORTS

The outcomes of the Young Advocates leadership training emphasized the integral role of youth led-action and activities to enhance awareness-building and

anti-stigma efforts. Through the program 17 activities were organised by 10 youth leaders and 3400 youth were reached through this effort over 6 months.

## SPEAKERS AND YOUTH WITH DIVERSE LIFE EXPERIENCES AND BACKGROUNDS MADE DIALOGUE RICHER AND MORE ROBUST

A greater inclusion and central role of young people with lived experiences of mental health needs helped us make the programme and its outreach more relatable and engaging to young people and helped bring mental health concerns, otherwise mostly written

or read about, to life. At events and discussions, young speakers who talked of their own lived experiences received many queries from youth audiences particularly about stigma and seeking mental healthcare and types of self-care methods that are helpful.



# Challenges

## OUR REACH HAS BEEN LIMITED TO YOUTH LIVING IN URBAN AREAS

Reaching young people in semi-urban areas and in vernacular languages has been difficult. A different strategy to reach them

online and off the ground is required and will form the basis for our activity plans for next year.

## SUSTAINED ENGAGEMENT WITH YOUNG PEOPLE ONLINE TAKES TIME AND EFFORT

It was challenging to keep young people who have joined us as supporters online engaged over a long period of time, typically during periods when there are fewer events

and workshops. Rapidly changing social media trends were also a challenge to keep up with and to re-frame mental health messaging keeping these in mind.



## LACK OF YOUTH-FRIENDLY AND AFFORDABLE MENTAL HEALTH-CARE TO ROUTE YOUNG PEOPLE TOWARDS IS A CHALLENGE

It's Ok To Talk reaches audiences online and on the ground to build awareness and directs youth to existing services. However due to the extremely limited number of

services, especially those that are youth-friendly or affordable makes public campaigning challenging as it is difficult to direct youth to a service we are sure they can access.

## MORE RESEARCH ON ATTITUDE CHANGE IS NEEDED

In the absence of large scale studies on youth attitudes and behaviours towards mental health information, understanding the

long term behavioral impact of a multi-pronged public engagement campaign like It's Ok To Talk is difficult.



# Young People's Recommendations for Youth Mental Health Programmes

*compiled by Youth Advocates*

**Basic information about mental health should be available as a resource in all major Indian languages:**

With nearly 90% of India's population not being fluent in English, it is necessary for information about mental health as well as lived experience narratives to be available in all major Indian languages.

**In-depth advocacy programs that have an intersectional, feminist approach, such that there can be a larger volume of awareness sessions across India:**

Workshops and other public engagement programmes that involve the use of art, activities to create a forum to discuss mental health, attract individuals who have not previously engaged with mental health. A larger volume of youth advocates coming from various demographics across India will

be able to take awareness campaigns to areas that have still been untouched.

**Parents, teachers and adult guardians should be included in mental health interventions:**

Young people increasingly struggle with their mental health. Even if this population is made aware, they depend largely on their adult caretakers to access help for their mental health. Unaware adults who harbour stigma can worsen a young person's mental health and prove detrimental to their progress. This is because they are the majority decision-makers in a young person's life, and their willingness to help will only increase on exposure to awareness and anti-stigma campaigns.

**Mental health should be a part of school curriculum:**

Integrating knowledge about mental health for teenage students



in schools provides a space for young people to explore the topic at an early age, acting as an early prevention tool. This also encourages emotional intelligence and development in young individuals.

### **An increase in anti-stigma and awareness campaigns that feature the voices of those with lived experience:**

The voices of those living with mental health conditions has proven to be a strong catalyst in others' understanding and accepting their own mental health struggles. It also creates a sense of community and allows young people to feel less lonely in their mental health journey. Many young people have reported that attending a mental health event that featured lived experience encouraged them seeking help for their own mental health.

### **Training for highschool and university students to form mental health clubs:**

Mental health clubs have been defined as spaces within schools where individuals can address mental health concerns, receive peer and professional support, and get more information about mental health through handouts as well as workshops and awareness sessions. Students are widely lacking the space to address mental health within their institutions, which is

where they spend a large part of their lives. Providing an intensive training as well as support for interested young individuals with the specific motive of establishing and running such mental health clubs will result in the increased well being of students in the long run.

### **Regular workshops where young people learn how to use the arts as a coping strategy:**

With formal psychotherapy still being expensive in India, an increasing volume of young people seek solace in various artforms to be able to express, understand and cope with their mental health. However, in times of extreme distress, it becomes difficult to do so. There is a necessity for more engagement events where trained individuals show young people how they can use the various arts (music, dance, writing, visual art, movement, theatre and drama) in order to understand and improve their mental health.

### **Increased public interaction between mental health professionals and young people:**

Therapy and medication are often difficult to embrace and understand for young people. There is a prevalent fear and stigma surrounding these forms of mental healthcare. Learning about mental health and coping strategies as well as about therapy and medication from a friendly,



conversational mental health professional will allow young people to seek professional help when needed, and empower them to demand for better and more affordable services within their educational institutions.

### **Peer training on suicide awareness and prevention:**

Young people are often the first to know when their peers are contemplating or attempting self harm or suicidal thoughts, ideas and tendencies. There is a need for young people to be trained to respond to their peers when in distress, because they often do not know what to say or do in order to prevent their peers' current condition from worsening. There is a need for more online material through social media and emailers, as well as periodic offline training on how to talk to someone who is thinking of or has attempted suicide and/or self harm.

### **Gender, sexuality and intersectionality to be included in mental health content:**

Content around mental health should regularly focus on the intersection between class, gender, age, sexuality and mental health, instead of addressing these issues as a separate topic. The link between these should be more firmly established in online content as well as through offline workshops, events and information sessions.

*These recommendations were compiled by a youth consultant through qualitative interviews with 15 website contributors, volunteers, partners and youth mental health advocates.*



# Implementers and Partners

It's Ok To Talk is a public engagement initiative by Sangath, India that raises awareness and engages adolescents and youth in India on mental health through digital and community activities.

Sangath is a non-governmental, not-for-profit organisation committed to improving health across the lifespan by empowering existing community resources to provide appropriate physical, psychological and social therapies.

The Wellcome Trust is a biomedical research charity based in London, United Kingdom. It was established in 1936 with legacies from the pharmaceutical magnate Sir Henry Wellcome to fund research to improve human and animal health. Harvard Medical School is the graduate medical school of Harvard University.

For more information about our project please visit [www.itsoktotalk.in](http://www.itsoktotalk.in).

If you'd like to discuss the project with us or partner with us, please contact:

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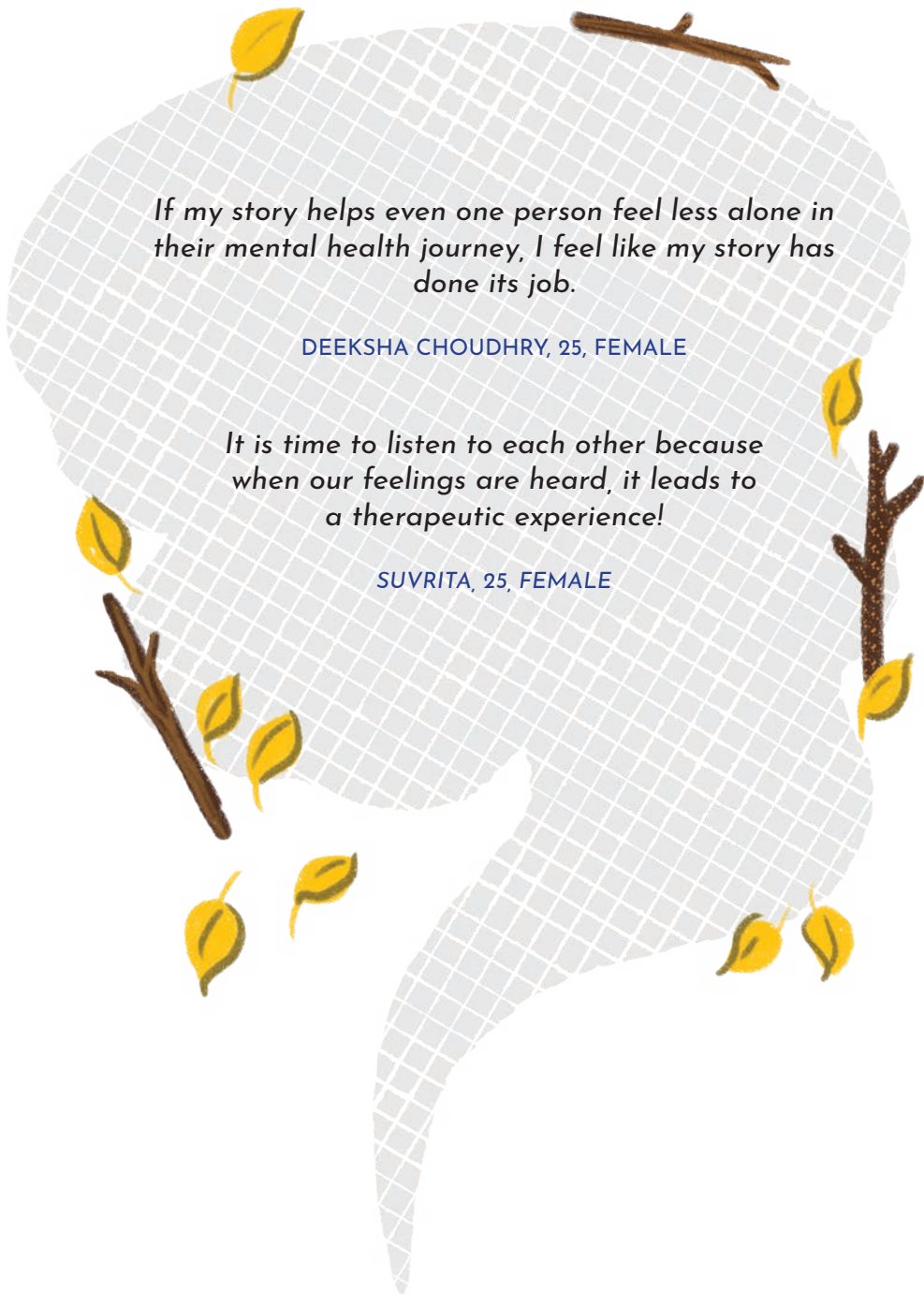
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*If my story helps even one person feel less alone in their mental health journey, I feel like my story has done its job.*

DEEKSHA CHOUDHRY, 25, FEMALE

*It is time to listen to each other because when our feelings are heard, it leads to a therapeutic experience!*

SUVRITA, 25, FEMALE

