



## Vision and Activities

## Our Values

- Dignity
- Inclusion
- Participation
- Informed Choice
- Purposefulness and Recovery
- Respect for Personhood

## Our Methods

- Evidence Based
- Community Partnerships
- Integrated biological, psychological and social interventions
- Contextualized Knowledge

**Saarthak meaningful** is a voluntary, not for profit, organization.

Saarthak works on the issues of mental health in the community. We work towards creating enabling environments, which acknowledge mental health as a human right.

We believe that mental health is closely linked to development in a society. Positive mental health can empower people and help them have a greater voice in decisions regarding themselves. Mental Health problems lead to exclusion and underline vulnerability.

Saarthak also believes that exclusion and violation of people living with mental illness need to be confronted by all societies.

Saarthak works in partnership with communities and their resources to ensure the achievement of above goals.

- We want mental health services to be more accessible and reach people in a timely manner. We intend to achieve this by **increasing awareness about mental health** in the communities that we work together with.
- About ninety percent of people who need mental health services are not able to access such services in India. It is our endeavor to **evolve innovative replicable models of service delivery for mental health** that are low cost and self-sustaining so as to address this treatment gap. These service delivery models have as their foundation the use of existing resources in the community and are made successful by a significant participation from the community that they serve.
- It is a key strategy for us to **support a greater voice for the consumer of the mental health services**. Lack of informed consent for treatment, lack of human rights in mental hospitals and discrimination due to stigma are rampant in India. It is our belief that an informed consumer is the only possible strategy to challenge the nihilism that surrounds mental health services.
- **Addressing the mental health human resource gap and making skill based training opportunities available for the young mental health professionals** are significant areas of our work. With around three thousand psychiatrists and a few hundred psychologists and social workers, there is shortfall in the human resources in the field of mental health. Saarthak has developed multiple training processes and partnerships to address the lack of skilled mental health professionals in India.

# Our Projects and Activities

## Pact and DOR

**PACT** started as a reintegration project for people recovering from severe and enduring mental illness. PACT has evolved into **DOR** (Diverse Opportunities and Resources) (in partnership with AADI) and now provides services to all people living with disabilities. The focus is on preparation for independent and meaningful living and creating inclusive opportunities for work and social enterprise. The effort is to see people as people first and to connect people to life beyond treatment facilities.

## Hope and Smile Centers

Saarthak provides mental health services through three mental health resource centers based in Delhi. The services offered are access to information about mental health; cognitive behaviour therapy for individuals and groups; psychiatry consultations; school and university based mental health programs and family therapy. Saarthak team conducts nearly 500 sessions per month at its Hope and Smile Centers. Presently, all the services offered by Hope and Smile Centers are free of cost.

## Mind of the Survivor

Saarthak reaches out to women and children in difficult circumstances by providing services through a mobile team. Over the past ten

(continued)

Saarthak has over the past fifteen years provided mental health services to many groups of vulnerable people

# Our Projects and Activities

years the team has supported survivors of human trafficking, children of victims of commercial sexual exploitation, children living in institutional care, homeless women and children, children living with HIV/ AIDS and survivors of domestic violence and childhood sexual abuse. These services have been provided in partnership with organizations primarily working with these vulnerable groups of people and interventions have included therapeutic interventions for the women and children and systemic interventions for the organizations so as to make the care and protection processes mental health sensitive.

## **Khushhali**

Through Khushhali (well being), Saarthak reached out to migrant men working in garment factories and export houses in and around Delhi. According to our research, migrant workers have significant mental health problems because of the nature of the changes that they experience in life. Migrant workers also have the potential of being ambassadors for mental health when they return to their homes. The program was also seen to contribute to prevention of human trafficking and violence against women.

## **Operation Hope**

Saarthak pioneered a crisis intervention helpline for young people in India. The helpline initially started by focusing on providing support to young people during the examinations and then evolved to supporting young people to redefine success for themselves and also supported parents to reflect on their relationships with their children.

## **Partnering Resilience**

Saarthak has gathered significant experience in supporting people and communities in the post disaster situations following the earthquake in Gujarat in 2001 and by working in the Tsunami affected areas in Tamil Nadu and Sri Lanka in 2004-2005. Saarthak has developed training programs, tool kits and standards for mental health and psychosocial interventions in complex emergencies. Saarthak also has experience of providing services to survivors of fire tragedies

Saarthak is a rights based organization and it has taken multiple initiatives to influence the mental health policy and law. Saarthak has also tried to facilitate formation of self-advocacy groups for users of mental health services and amongst families of persons living with mental illness. Saarthak has also tried to form alliances with the other rights movements in the country and has strong bonds with the disability movement, child rights movement, the gender rights movement, the counter-trafficking initiatives and the movement of the homeless people. Some of our key advocacy campaigns and initiatives are:

### **The Saarthak PIL:**

In 2001, Saarthak moved the Supreme Court of India after 28 people died in a fire at Erwadi Dargah. We asked for the improvement of quality of psychiatric services in India. The public interest litigation was to address the human rights violation faced by people living with mental illness. It asked for more treatment facilities in the community, integration of rehabilitation with acute care, provision of long term care, ban on restraint and unmodified ECT. The Supreme Court passed wide ranging interim orders and the final orders are still awaited in the case as the court decided to wait for ratification and implementation of UNCRPD in India.

## **Implementation of UNCRPD in India**

India ratified the United Nations Convention for the Rights of Persons with Disability in 2007. This represents a watershed for persons living with mental illness in India. Saarthak in partnership with other disability organizations has tried to facilitate that persons living with mental illness know about their rights as outlined in the convention. It has tried to influence the judiciary and bureaucracy in India to understand the convention while trying to align the Indian policy and law to the convention. Saarthak has been able to state its positions to both the Ministry of Social Justice and Empowerment and the Health Ministry as the process of writing the new laws on disability and mental health is being undertaken. Saarthak has reviewed its own programs and processes to align these to UNCRPD. Saarthak has also designed a organizational audit tool to support other disability and mental health organizations to implement UNCRPD in their everyday functioning

### **Alliances and Self – Advocacy**

Saarthak has initiated a national alliance for mental health advocacy called Mental Health Rights group. We also support Brave heart Club and Citizens for Mental Health.

**Our  
Advocacy  
Initiatives**

## The Mental Health Human Resource Gap

There is a significant gap in the human resource required and human resource available for mental health services in India. The numbers of mental health professionals in India are appallingly low. The oft quoted and unchanging numbers of 3000 psychiatrists, 500 odd clinical psychologists, less than five hundred psychiatric social workers, very few hundred nurses trained in psychiatry.

A recent review of current training programs on mental health done by Saarthak shows that these are largely focused on a medical model of mental health and overlook the development context. Only a few of the present courses on mental health are skill based. This results in a significant number of professionals dropping out of the mental health sector to join the corporate world or schools.

Those few who do join and complete their M. Phil programs then end up working in tertiary institutions or in the private sector providing chamber based counselling. There is thus a complete vacuum of professionals who work on the issues of community development and mental health. The present training does not address the real need in the society as it supports only an institutional service delivery model. Also the present training processes do not include working with diverse people to facilitate enabling environments.

If a back of the envelope calculation were to be used to answer the

question, "How many professionals would we need to reduce the treatment gap by about fifty per cent by providing comprehensive quality assured services?" The answer would be India needs a few hundred thousand mental health professionals at different levels of competence as of today!

## The Strategies

We believe that there is a need to quickly build a large work force capable of working in the community on the issues of mental health.

In the past fifteen years, Saarthak has provided skill based training within the value framework of human rights and the conceptual frameworks of Cognitive Behaviour Therapy, Systems Theory, Community Psychology and Attachment Theory. Training has been provided to enable professionals to work in diverse vulnerable situations and at different points in life cycle. Students have been provided with opportunities for supervised application of skills and opportunities for personal therapy and development. We have reached out to students across India and South Asia. We have trained people at different levels of competency and across disciplines.

We have trained bare foot counselors with no educational background to be first response workers and we have trained post-graduates in the skills of Cognitive Behaviour Therapy and Family Therapy. We have trained counselors amongst survivors of trafficking, homeless, university students, teachers, human resource managers, social workers, child care

and protection workers, people living with HIV/ AIDS and Persons living with Mental Illness.

We provide capacity building support for organization to become rights based and mental health sensitive organization. We do so by designing and implementing mental health audits for the organizational processes. Based on what we discover through the audits, we then design and implement a capacity building program for the organization. We have supported many not for profit and for profit organizations go through such a process of capacity building.

We have provided mental health training in South Asia in partnership with UNICEF, UNIFEM, UNODC, ATSEC, AADI, National Trust, Prajwala, Sakshi, CRS, CARITAS, Action Aid, VOLCOMH, WOREC, Groupe Development, SANLAAP.

**Our  
Training  
Initiatives**

In pursuance of our strategy to reduce the human resource gap for Mental Health in India we have initiated the process to set up the Institute of Mental Health and Development.

## **The Objectives**

The Institute would support the existing mental health and development professionals to make their practice more evidence and value based by providing skill based supervised training opportunities.

It will endeavor to train a new generation of mental health and development professionals who see mental health as a bridge for human development and work towards inclusion of persons living with mental illness and those facing difficult circumstances in their communities.

It will also provide a platform for development of service standards and research that values the lived experiences of persons living with mental illness, persons living with disability and those who face disadvantages because of exploitation and trauma

It will through its linkage with the program initiatives of Saarthak provide a vehicle to translate research into practice and develop service delivery models relevant for India.

It will network with other training providers to widen the definition of mental health professionals and work on the principles of

developing multi tiered task sharing mental health teams. The Institute is also likely to advocate setting of accreditation standards for curriculum and pedagogy for mental health training.

The Institute will also provide enabling graduate and diploma programs for those people who have faced systemic and mindset barriers and have not been able to complete their education due to exclusion or difficult circumstances in their life.

## **The Structure of Institute**

The Institute is envisaged as a training body, which is supported by partnerships amongst diverse mental health, disability, child rights, counter trafficking and women's rights organizations across the world.

Saarthak will provide the administrative and knowledge management core for the Institute for the first six years. Saarthak will also provide financial support for the design and implementation of the programs for these six years.

The training facilities, the practice schools and the core faculty are to be derived from its partner organizations. The Institute is likely to be affiliated for its programs with a UGC recognized university in India. The Institute will also try to work towards setting and meeting benchmark Standards for all the relevant therapeutic programs with the support of an Advisory Academic committee.

**Institute of  
Mental Health  
and  
Development**

## Fellowship Program for Trainers and Supervisors

To achieve standardization of method and values of training, the Institute will launch a fellowship program. The fellowship program initially will be available to the mental health professionals with ten years of experience of working as practitioners and trainers in mental health services in the developmental context after a post graduation in Mental Health or allied disciplines. All fellows will be provided supervision and intensive advanced training by the faculty at the Institute.

### Proposed MPhil Courses:

- MPhil in Psychotherapy
- MPhil in Community Mental Health

*MPhil programs will be two-year programs, which will be offered to post graduates in Mental Health and allied fields with at least 3 to 5 years of experience in the field of Mental Health.*

### Proposed Diploma Courses:

- Diploma in Cognitive Behaviour Therapy
- Diploma in Mental Health and Human Rights
- Diploma in Mental Health and Development
- Diploma in Systems Theory and Family Interventions
- Diploma in School Mental Health
- Diploma in Working with Families and Parents
- Diploma in Implementing Mental Health Friendly Child Care and Protection Programs
- Diploma in Psychosocial Interventions for Survivors of Human Trafficking
- Diploma in Inclusive Psychosocial Recovery programs for persons living with mental illness

*All Diploma Programs will be available to existing Mental Health Professionals and Development Sector Workers with experience of working with people for two to three years. Diplomas will be part time and require a commitment of at least 16 hours per week for 44 weeks*

## Short term Certificate Courses:

- Foundation Certificate in Community Mental Health
- Certificate in Care Giving Skills
- Training of trainer's for Community Mental Health
- Certificate for Psychosocial Interventions for Survivors' of trafficking/ sexual violence
- Certificate in Counselling for Phone based Mental Health Services
- Certificate in Counselling Survivors of Violence against Women
- Certificate for Psychosocial Interventions in complex emergency situations
- Certificate in Psychosocial Interventions for Supporting Persons Living with Mental Illness
- Certificate in Psychosocial Interventions and Minimum Standards of Care for Children and young people living in Institutions
- Certificate in Psychosocial Interventions for Supporting Disabled Persons
- Certificate for Psychosocial Interventions for Law Enforcement Agencies working with Survivors of Human Trafficking and Sexual Violence
- Certificate in Coaching Skills for Managers
- Certificate in Developing Diverse Organizations with Enabling Environments

*All Certificate Courses will be Workshop based and vary between 16 hours of training to seventy-two hours of training. Some of the courses will be available on line with an element of face-to-face contact*

**Institute of  
Mental Health  
and  
Development**



Saarthak works through a dedicated multi-disciplinary team of young mental health professionals.

Dr. Achal Bhagat, Director, Division of Mental Health and Quality of Life, Medanta the Medicity, Delhi leads the Saarthak team.

Saarthak has a support of volunteers to run its programs.

Saarthak is a self-sustaining organization and it will continue to innovate to generate resources for mental health.

## Our Team



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