



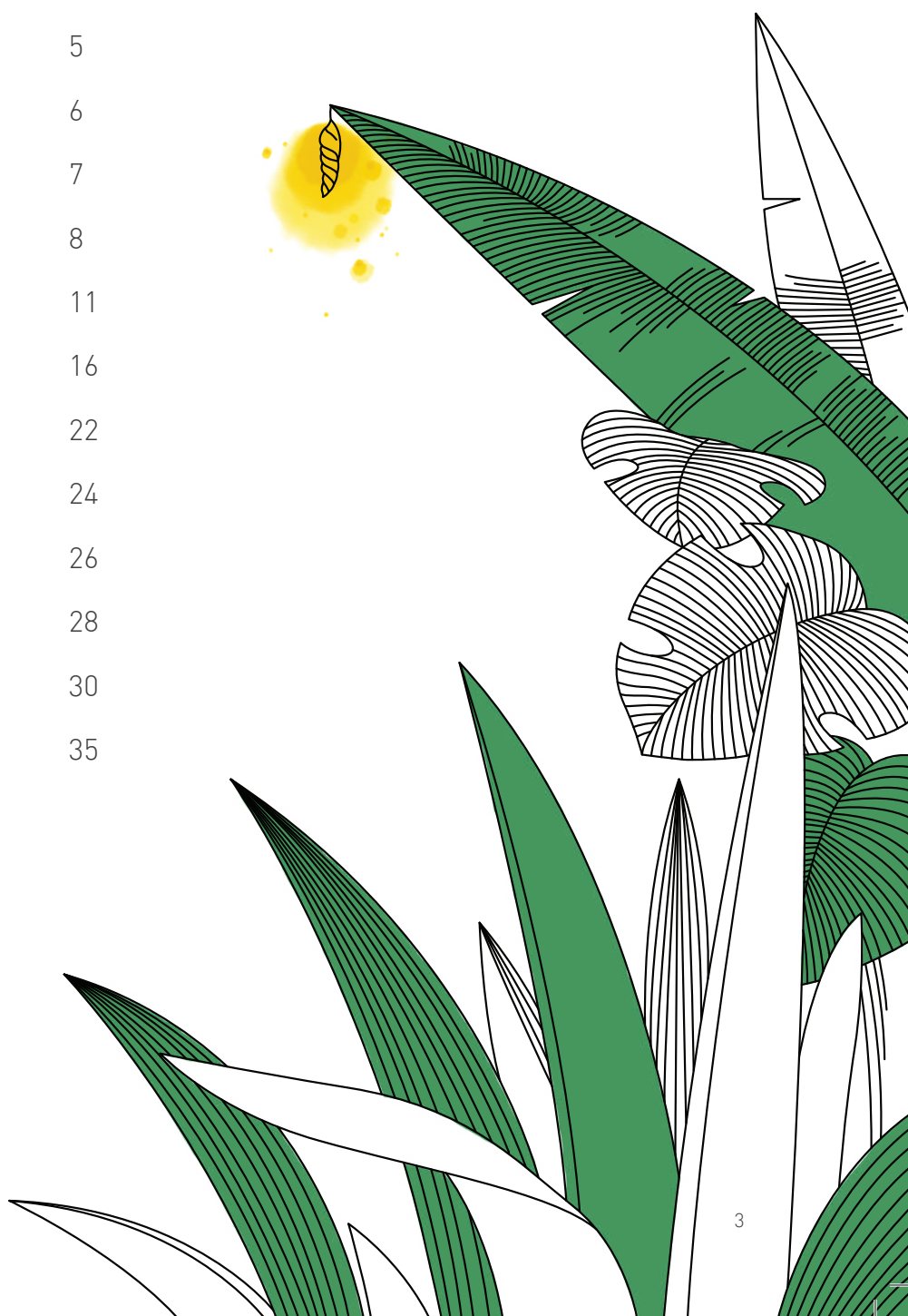
Towards Brighter Tomorrows

ANNUAL REPORT
2018-2019



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The humble firefly is a small bit of inner magic that graces our world. Casting a momentary glow in the dark, it serves here as a metaphor for the magical spark that inspires change in every survivor's life, making them a beacon of light to others.

This theme acknowledges the continuous work done by The Live Love Laugh Foundation to bring about a positive change, serving as a beacon of hope in the dark, while it moves forward in its quest to light up more lives.

Lighting the way forward





A Message from the Founder

Can we do more?

The question that keeps us all at The Live Love Laugh Foundation up at night.

Can we do more for the millions struggling with mental illness who need our support to make it through the day and see a better tomorrow?

Can we do more for their families, who are trying to grapple with what their loved ones are going through?

Can we do more for our students and workers so they have access to the right information and resources, and are able to seek help when needed?

Can we, as a society, do more to create a safe environment for those affected by mental illness, so they can reach out for help, without the fear of feeling excluded and being ridiculed?

Can we do more?

Yes, we can!

And as we work collaboratively with you, we most definitely will.

Looking back at the last four years, I feel a deep sense of gratitude. To everyone who has been an important stakeholder in our journey – donors, partners, supporters, survivors, their families, and of course, the

ever-enthusiastic team at TLLLF... thank you!

Each one of you has played a vital role in giving wings to TLLLF's dreams and I look forward to your continued support in our long journey ahead.

Live, Love & Laugh

Deepika Padukone
Founder
The Live Love Laugh Foundation

From the Director's Desk



This past year has been one of great learning and fulfilment for everyone at The Live Love Laugh Foundation (TLLLF). It has allowed us to consolidate our initiatives and sharpen our focus.

Our school programme, **You Are Not Alone**, passed a major milestone with 1,00,000 students covered since its launch three years ago. We are delighted at the response from students and school managements across the country. The programme has now covered 1,23,864 students, 16,145 teachers and 655 schools across 8 cities over the last three years and serves as an important intervention for our adolescents, given the increasing rate of

teenage mental illness and suicide in India.

While family support is important throughout a child's early years, having guardians who are equipped to identify, understand and assist with the challenges of stress, anxiety and depression in adolescents also becomes absolutely critical. Hence, this year, we introduced an online manual for parents as an important complement to our programme. This initiative has also been widely appreciated.

TLLLF's commitment to focus on rural mental health has been underlined this year with the growth of our programme that now provides free psychiatric treatment to patients in all six *taluks* of Davangere district in Karnataka. It is our endeavour to continue to expand this support across remote areas of the country.

Another important landmark for us this year was the launch of **#NotAshamed**, the second large-scale public awareness campaign that TLLLF has undertaken nationally after *Dobara Poocho* in 2016. The launch of **#NotAshamed**, which was aimed at stigma reduction, coincided with World Mental Health Day on 10th October and the campaign featured across

digital, print, outdoor, radio and television. Using stories of survivors of mental illness, the campaign highlighted the many shades of mental illness through deep, heartfelt narratives. **#NotAshamed** was an unqualified success, receiving nearly 100 million impressions across the media. More importantly, however, it encouraged many survivors to share their own stories.

Other initiatives during the year included submitting our application for Foreign Contribution Regulation Act (FCRA) approval, preparations to become General Data Protection Regulation (GDPR) compliant, as well as growing the size of our internal team across various verticals to support the expanding list of activities we plan to undertake going forward.

The range of activities and the scale we have achieved in these past four years would not have been possible without the support we have received from all of you. On behalf of the entire team at TLLLF, I would like to thank our donors, partners, friends and well-wishers, as well as survivors and their families, for your immense faith in us. Your encouragement is hugely inspirational, and we look forward to your continued support in the years ahead.

Anisha Padukone
Director

24th April, 2018

Deepika Padukone highlights mental health during her address at the 'TIME 100 Most Influential People' gala in New York

10

16th March, 2019
4th Board meeting

25th February, 2019
Developed online manual on mental health for parents as a complement to our school programme

9

24th May, 2018

1st workshop for school programme implementation partners conducted at the Foundation

2

27th August, 2018
1st Board meeting

3

8th September, 2018

Deepika Padukone and Anna Chandy jointly address FICCI Ladies Organisation (FLO) in New Delhi

4

5

10th October, 2018
#NotAshamed campaign launch

6

11th October, 2018
2nd Board meeting

7

14th November, 2018
School mental health awareness programme hits 1,00,000 students

8

26th January, 2019
3rd Board meeting

2018-19 Milestones

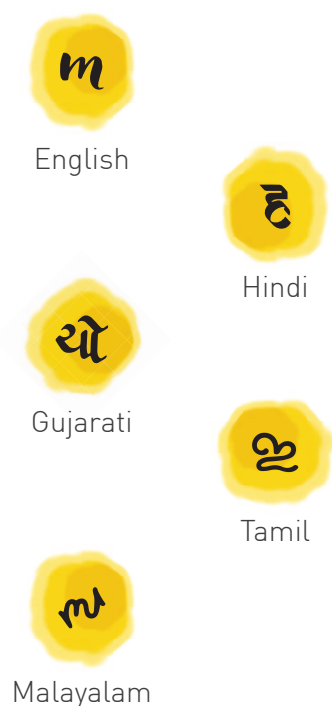
You Are Not Alone

Initiated in 2016, the You Are Not Alone programme has continually worked towards promoting mental health awareness and guidance in schools across the country. It aims to help students develop a basic understanding of mental illnesses and their symptoms, and provides them

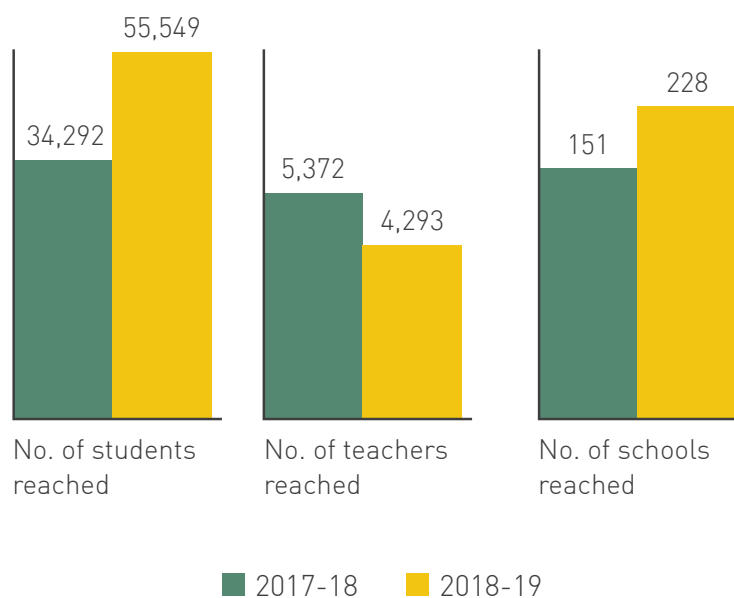
with resources to reach out for professional help.

In 2018-19, the programme was delivered in schools across Mumbai, Bangalore, Pune, Chennai, Cochin, Kolkata, Ahmedabad and Goa by the implementing partners in each city.

Languages used in programme delivery



Reach





Milestones

2018-19 saw the programme reach over 1,00,000 students, 15,000 teachers and 500 schools across 8 cities in India.

Programme overview for 2016-19



1,23,864

Total number of students who have participated in the programme between March '16-March '19



16,145

Total number of teachers who have participated in the programme between March '16-March '19



655

Total number of schools that have participated in the programme between March '16-March '19

Way forward

- In 2019-20, the You Are Not Alone Programme will be conducted in Chennai, Ahmedabad, Bangalore, Mumbai, Delhi NCR, Hyderabad, Pune, Cochin, Kolkata and Goa
- New implementing partners have been brought on-board for Delhi NCR and Hyderabad
- A Phase 2 reinforcer session has been developed for students and teachers who attended the first session of the programme. The reinforcer session is aimed at gauging recall of information from the first session, while also serving as a platform to discuss participants' conceptions on mental health and illnesses in light of the information they received

School Programmes



The Heritage School, Bangalore



Vidya Niketan, Bangalore



St. Xavier's Collegiate School,
Kolkata



Lady Andal School, Chennai



Caldwell Academy, Bangalore

Rural Mental Health Programme

Continuing work on RMHP

To facilitate accessibility to the State Government of Karnataka's District Mental Health Programme, TLLLF has been supporting the Rural Mental Health Programme (RMHP) — an initiative launched by the Association of People with Disabilities (APD) — since 2016. The programme aims to remedy the **lack of awareness about mental health** and address the socio-economic challenges that deter members of the rural population from seeking help.

The goals for 2018-19 were to:

- Expand the programme's reach to at least two more *taluks*
- Impact approximately 1,000 patients

Additionally, last year, a signed memorandum was submitted to the District Commissioner, Lokayukta, Panchayat Executive Officer and Deputy District Welfare Officer requesting for:

- a) Prioritisation of People with Mental Illness (PwMI) in Aadhaar schemes
- b) Allocation of 5% of the government budget towards PwMI
- c) Provision of special status for PwMI in other government schemes

These were given official recognition this year.



Treatment camp



Staff training activity



The year in numbers:

384 new (male -180, female - 204) PwMI were identified through door-to-door surveys, networking with the public, treatment camps, hospital visits and public awareness programmes in Davangere district. With a follow-up of 700 patients from last year, the programme now lists **1,084** PwMI as beneficiaries.

132 PwMI were able to receive government benefits.

Of them, **94** received disability ID cards and are now eligible for bus and train passes.


They can now also avail self-employment (Aadhaar) schemes and 5% reservation for

People with Disabilities under Municipality and Gram Panchayat.

5 of them were able to avail housing schemes.

14 of them benefitted from 5% allocation of the government budget toward PwMI.





The team conducted treatment camps at:
5 taluk hospitals — Channagiri, Honnalli, Harapanahalli, Harihara and Jagaluru.

18 Primary Health Centres (PHCs) — Mallapura, Musturu, Kalledevarapura, Bidarakere, Asagodu, Billichodu, Pallagate, Hallekalu, Sokke, Basavanakote, Arasikere, Telagi, Mayakonda, Anagodu, Lokikere, Kulambi, Ukadagathri and Mallebenuru.

Doctors from district hospitals, NIMHANS and DMHP extended their support to complete the camp.

983 PwMI were provided access to psychiatric treatment and were enabled to continue their medication through these camps.

29 mental health capacity-building programmes were held for Accredited Social Health Activist (ASHA) workers, Village Rehabilitation Workers (VRWs), college students, *anganwadi* teachers and parents, with the aim of reducing stigma, promoting mental health acceptance, encouraging volunteerism and identifying more PwMI.

2,003 stakeholders benefitted from these capacity-building programmes.

41 caregivers' meetings were held during the year, at Harapanahalli, Harihara, Davangere, Honnalli, Channagiri and Jagaluru taluks, to build parents' capacity. Regular monthly meetings were organised to discuss their issues and address them collectively.

4 street exhibitions promoting mental health awareness programmes were conducted by the Community Mental Health Programme team at Harapanahalli, Honnalli, Nyamathi and Uchangidurgha marketplaces. The stalls were visited by approximately **1,032** people.

22 wall writings in public places were created in collaboration with Gram Panchayats and PHCs.

Residential camps

6 residential camps were held, which saw the participation of **496** persons in total, of whom **265** were parents and caregivers, and **231** were PwMI.

Feedback from participants

Parents said they:

- Gained information about mental illness, its causes, symptoms, treatment, side effects of medication, emotional problems and the advantages of the Federation
- Developed a better appreciation of their role in PwMI rehabilitation
- Understood Federation members' roles and responsibilities better
- Gained knowledge about different government schemes and bank loans
- Experienced peace of mind due to cultural programmes, exposure visits and morning exercises



The way forward

Through **2019-2020**, TLLLF intends to further its rural mission in the following ways:

- Continuing the Rural Mental Health Programme in Davangere for **1,000** patient beneficiaries across **6 taluks**
- Launching a new project in association with APD in **2 taluks** in Gulbarga for **400** patient beneficiaries
- Creating a partnership with Carers Worldwide for a rural mental health project in Laxmipur block, Koraput, Orissa. The project will focus on addressing mental health needs and providing access to treatment for caregivers of PwMI. This project aims to impact **400** patient beneficiaries
- Bringing focus to research initiatives. A baseline and a mid-term impact measurement survey will be conducted with the help of an external agency to document the learnings from all three projects.

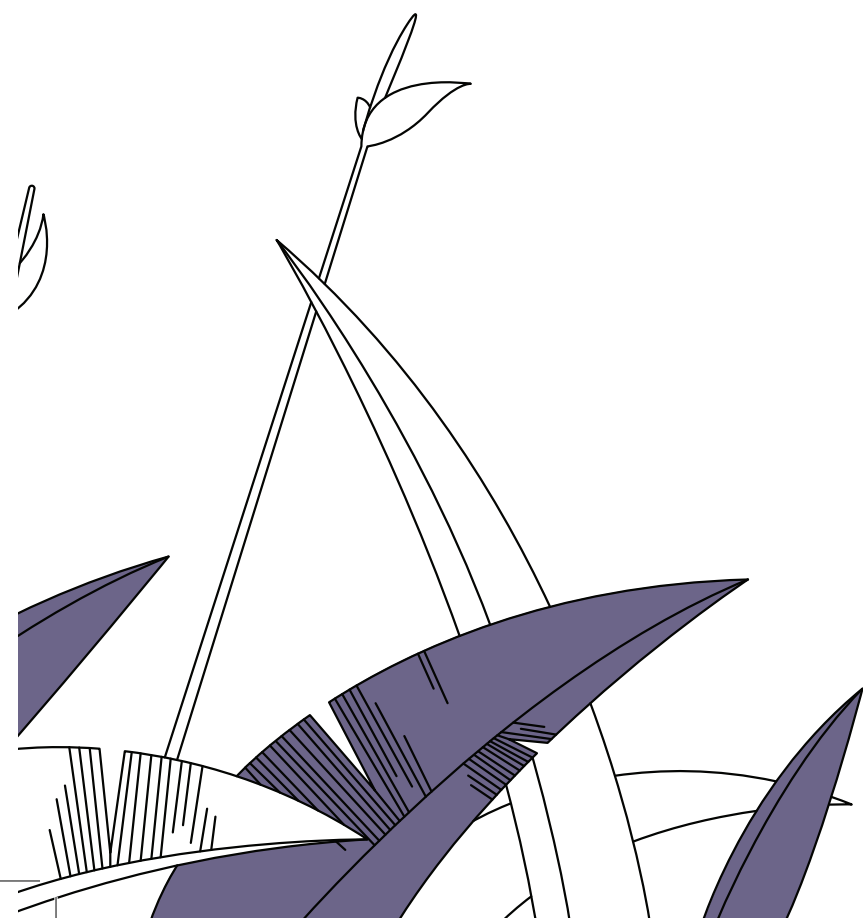
Case study

Mrs. M is a 45-year old woman hailing from a remote village called Madihalli in Davangere district. She is a widow and lives with her son, daughter-in-law and two granddaughters.

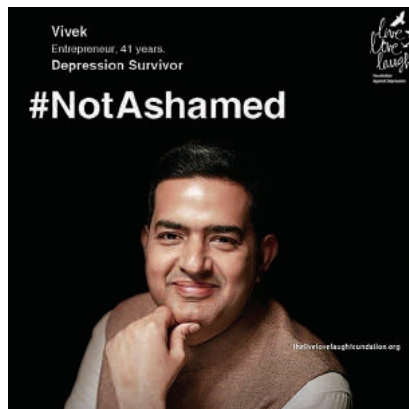
M is a tailor by profession and she is one of the earning members of the family. She has been suffering from depression for three years, displaying symptoms such as sleeping disorder, loss of appetite, talking loudly to herself in the presence of others and abusing family members and neighbours. At times, she even displayed violent tendencies, prompting the family to take her to Shimoga for treatment in 2014, where she showed some improvement but relapsed when she discontinued medication.

In 2016, APD identified M in a door-to-door survey and she was made aware of mental health issues. She now regularly takes medication. The APD staff provides her with counselling support and free medication on a monthly basis.

As a result of these measures, M's symptoms of depression gradually reduced, and people in the community accepted her once again. She is now able to take care of her personal needs, household activities and community activities. Currently, she has gone back to her profession as a tailor and is earning to support her family.



#NotAshamed Campaign



A light in the dark

The #NotAshamed campaign was launched in 2018 by TLLLF to inspire public dialogue on a subject steeped in ignorance and stigma — the very real issue of mental illness and those who live with it in silence.

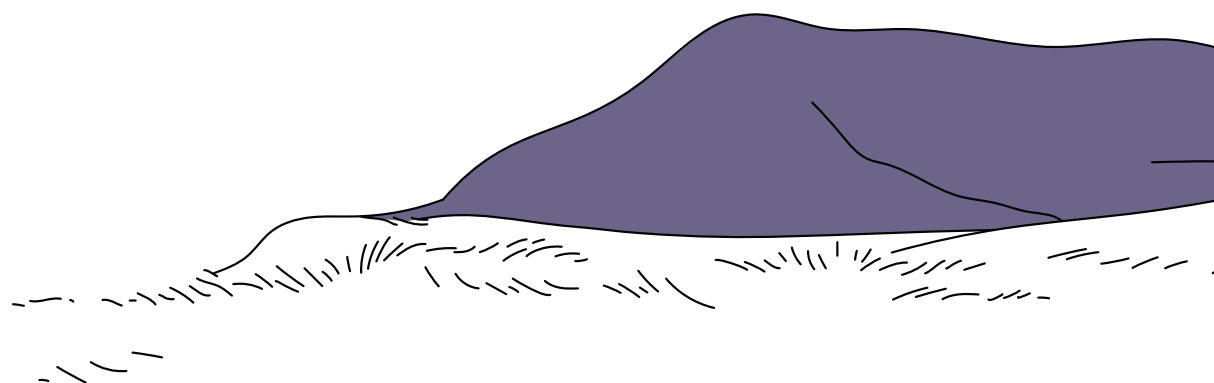
These illnesses are commonly attributed to causes such as oversensitivity, overthinking and a lack of willpower, creating an unreceptive environment that discourages People with Lived Experiences (PwLE) from speaking out. Seeking professional help and taking prescription drugs subjects them to judgement as mental illness isn't considered significant the same way a physically visible disease is.

'Logon ko batao ki hum psychiatrist ke paas jaate hai ya humein depression hai, log toh pagal hi bolte hai.'

(Person affected by mental illness, Mumbai)

Therefore, the goal of the campaign was to:

- Increase awareness on the matter in order to absolve the stigma attached to it
- Encourage PwLE to speak out and seek external help
- Equip people with the knowledge to identify symptoms among friends and family members



Reach of the campaign

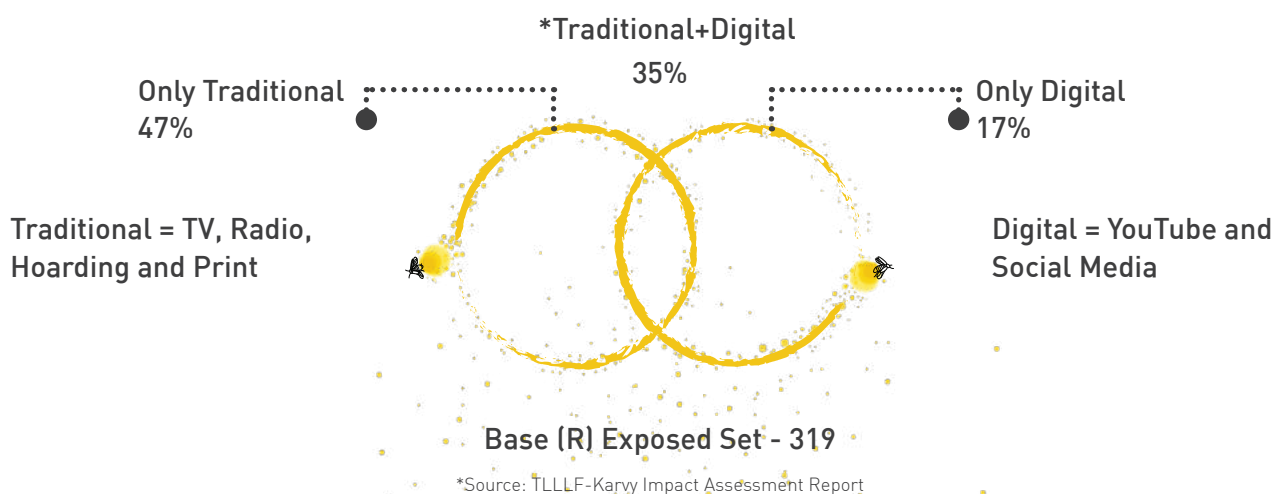
Spreading the light

The campaign was greatly successful in spreading its message among its core target demographic — People with Lived Experiences.

The deliberated, first-person narrative, bereft of bells and whistles, promoted a sense of accessibility that is seldom witnessed on the small screen. The vulnerable and personal nature of the campaign struck a chord with

PwLE and the general population alike, driving traffic to the Foundation's YouTube channel, generating retweets and most importantly, inspiring PwLE to share their stories without shame.

The campaign didn't only succeed in gaining the attention of the target demographic — analysis showed that it also had greater than average rates of message retention among them.



Over 1/3rd of those the campaign reached were exposed to it in both traditional and digital media. These multiple points of exposure helped reinforce the campaign's message.



Takeaways

- The campaign succeeded in gaining the attention of the core target group — PwLE — who also showed greater message retention
- Multiple points of exposure also helped facilitate retention of the message
- Using multiple mediums proved extremely beneficial as a large group of people had been exposed to the campaign over both traditional and digital media

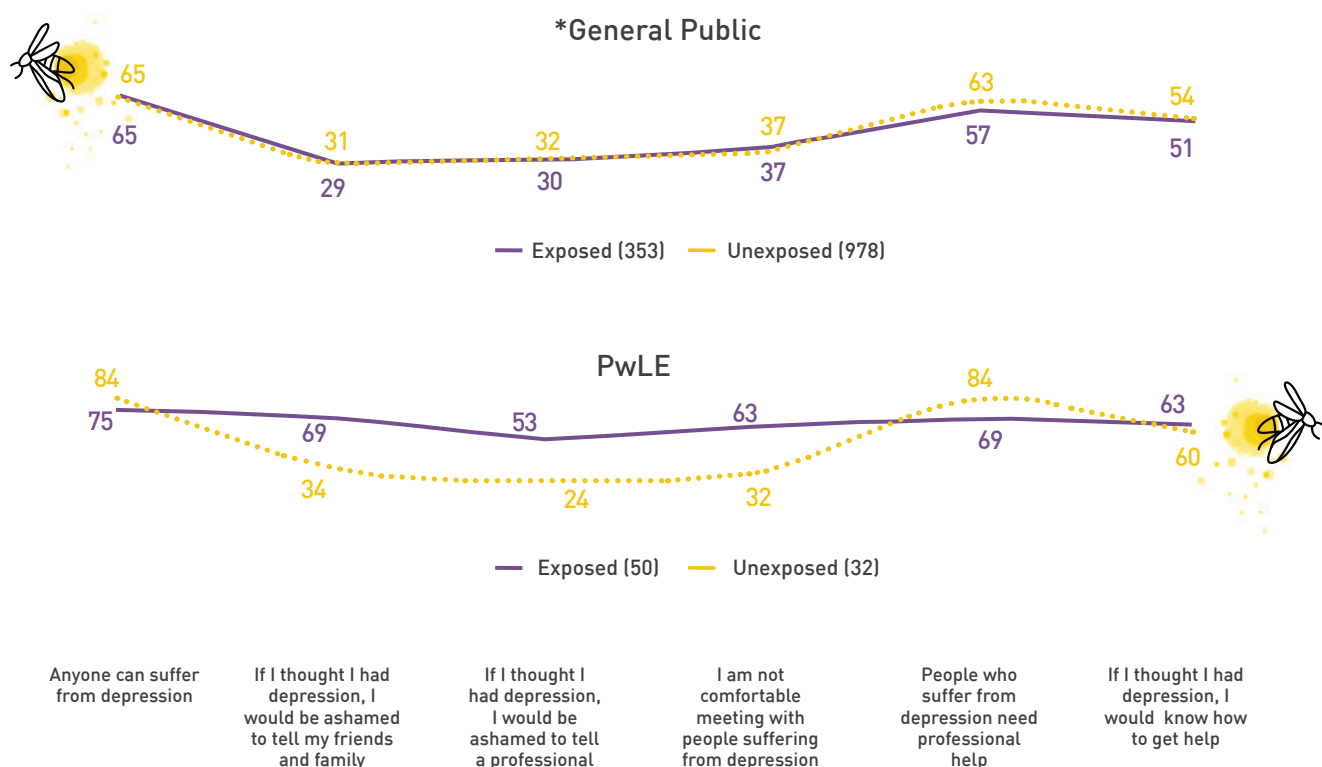
Impact of the campaign

Echoes from far and wide

- Changes in attitude toward depression
- Campaign's effectiveness in encouraging sharing and action — difference of attitude between those 'exposed' and 'unexposed'

Changes in attitude toward depression

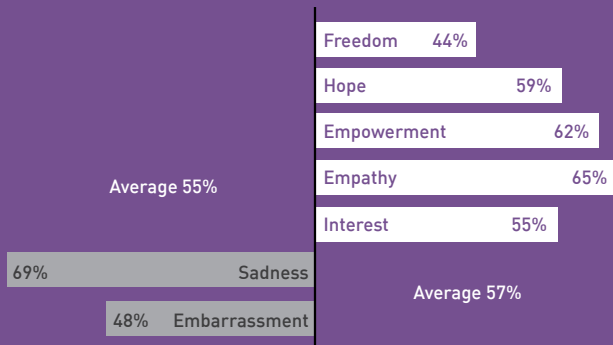
Overall, while basic awareness and stigma remained the same among both exposed and unexposed members of the general public, a noticeable impact was found in the promotion of the idea that people who suffer from mental illnesses should get help.



Net Distance = Exposed - Unexposed

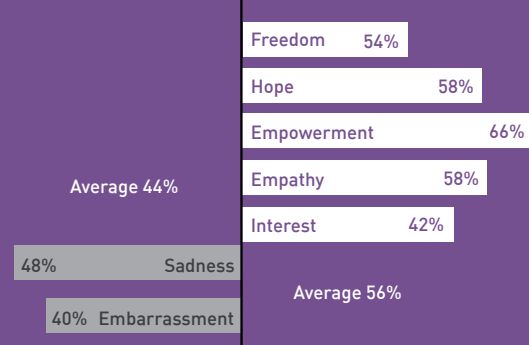
*Source: TLLLF-Karvy Impact Assessment Report

*General Public - Exposed (353)



Net Impact = Average of all Positive - Average of all Negative
= +2%

PwLE - Exposed (50)

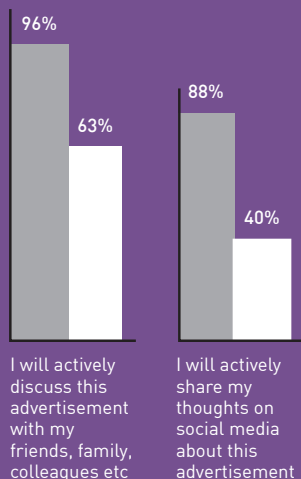


Net Impact = Average of all Positive - Average of all Negative
= +12%

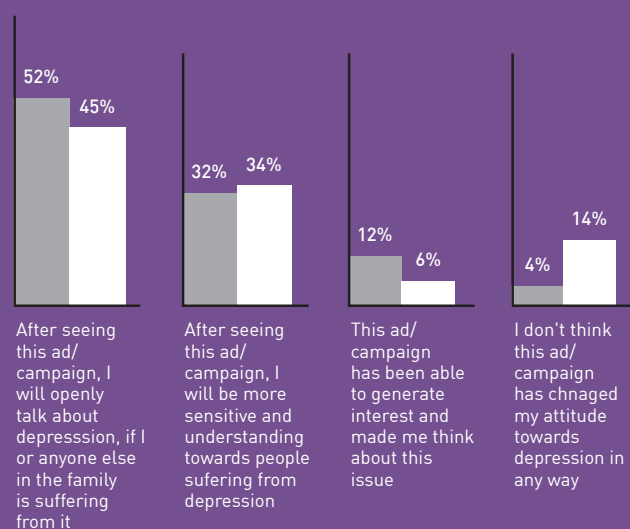
Emotions evoked by the campaign: Positive emotions evoked both among the general public and PwLE

% figure = association with the emotions after seeing the campaign

*Share Ability



Action Ability



Legend: PwLE Exposed (50) (Dark Grey), General Public Exposed (353) (Light Grey)

Campaign's effectiveness in encouraging sharing and action — Difference of attitudes between PwLE and general public

*Source: TLLLF-Karvy Impact Assessment Report

A light at the end of the tunnel

Here is the personal journey of a survivor exposed to the #NotAshamed campaign

Jhanvi*, 25

Started visiting the psychologist recently for depression and has been following the #NotAshamed campaign online for several weeks

From Depression

- Diagnosed with depression due to work-related stress
- Was finding it difficult to talk to family or friends due to fear of judgement

"The moment relatives got to know that I am suffering from depression, they started avoiding me, saying 'ye toh satiya gayi hai'.."

To Recovery

- Sought medical help after seeing an online video about depression
- Therapy helped her deal with her symptoms

"I was able to tell my psychologist things I could not tell my family... she helped me understand what I was going through."

To Empowerment

- #NotAshamed made her feel connected with Deepika
- Validated her condition by comparing her story with that of a celebrity

"It was so nice to see Deepika talk about it online. If she can, so can I."

"I no longer feel an inferiority complex that I am taking medicines for depression."

To Public Acknowledgement

- Feels she has found the right forum to express her feelings without the fear of judgement

"I can go online and post comments on the #NotAshamed campaign. A lot of people are doing it and I see no problem in it."

*Name changed

Social media response

Goldie Shawel

Glad that you are speaking up to help others. Let's also distinguish between many different types of depression. Women who give birth and have post partum depression with crazy thoughts etc... must go for help. Recognising that the chemicals in your brain have changed is so important and not to be taken lightly. I suffered in silence for two years after the birth of my second child. I was so frightened on a daily basis and basically stayed silent in shame... #noshame, thanks!

Aryansh Mishra

Many people think depression is just a sadness thing or an excuse people make, but it is actually a feeling that makes you an emotionless creature... I was in depression.... it's like living is so hard... you no longer have hope...you no longer like to live... like going to school without liking it... just do the work lifelessly... it's like a toxin spreading in your body.... nobody can understand actually...

Alex Peguero

As a psychiatric mental health professional, I just want to thank you for sharing this. There is hope and successful treatment. Never be afraid to ask for help.

A persevering glow

Over the course of the campaign, we have been blessed with the honour of witnessing real courage in action as survivors and affected persons have embraced our message and spoken out about their struggles. The resolve of those speaking out has served, in turn, to inspire even more people to share their stories.

The #NotAshamed Campaign has been an unprecedented, courageous venture that has met with appreciable success. More than eight months on, the core message of #NotAshamed still echoes, with many PwLE continuing to share their narratives. The campaign has given rise to a trend that is gradually but noticeably shifting general attitudes towards mental illnesses.



Digital Impact

Since its inception, TLLLF has laid special emphasis on leveraging the digital sphere to engage with communities. Over the course of the last year, the Foundation has emerged as a digital thought leader, sparking online conversations on matters relating to mental health and voicing a relevant issue that is rarely spoken about — in no small part thanks to the digitally driven #NotAshamed campaign.

As part of our continued mission to provide reliable resources to affected persons, new **helpline partners and therapists** (counsellors, psychiatrists, psychologists) have been verified and added to the website.

This year, TLLLF released content in 10 regional languages, including Assamese, Oriya, Punjabi and Bengali, to widen its reach and impact larger audiences across India.

We also saw continued growth in **Social Media**. With the #NotAshamed campaign focussing on outreach through video content, the Foundation's YouTube channel showed exponential growth in subscribers this year.





A safe space can help your friend who has depression open-up further.

Continue [#AskingForAFriend](#) this [#FriendshipDay](#) and urge them to seek a counsellor or professional help → youtu.be/PgooPeHSPUY [@TLLLFoundation](#) [@deepikapadukone](#)



अनजान लड़की @filmyaddict · 9 Nov 2018

Could not be prouder of all that you guys do! [@TLLLFoundation](#) thank you for starting this conversation & for being so strong. I will always love & admire you for this especially. Keep fighting the good fight. [#11YearsOfDeepikaPadukone](#)

4 18



gayoozzzz [@deepikapadukone](#)

[@thelivelovelaughfoundation](#) thanks to you guys especially [@deepikapadukone](#) as if she have not opened up her story to the world I would have been either suffering from depression without knowing or I would have had killed myself... But now I've survived depression thanks for sharing the courage to seek help [@deepikapadukone](#)



pari [@judoflipped](#)

shoutout to [@TLLLFoundation](#) and [@ManasFoundation](#) who conducted a mental health session in my school which I fortunately attended. I was 16, and I could talk about my mental health struggles for the first time without a hint of shame. Thankyou for amplifying my voice and of others.

1:59 PM · 16 Apr 2019

33 Retweets 144 Likes



The [#NotAshamed](#) campaign was rolled out in two phases.

Pre-launch, teasers were published in print and on hoardings. The video campaign had a primary emphasis on digital media, where it had a significant impact, organically generating retweets from well-known personalities across the entertainment and social media world with no behind-the-scenes influencer marketing involved.

As a result of the campaign, the Foundation's social media handles received more than 50 stories from People with Lived Experiences, talking about how they were able to embrace the message of the campaign. Consequently, the Foundation's YouTube page grew 306% as a result of the [#NotAshamed](#) campaign.

Media Outreach

TLLLF has emerged at the forefront of the movement to spread awareness on mental health and destigmatise mental illness. Here is a look at some of the media coverage TLLLF has received during the year.

COLUMN: MENTAL HEALTH

ARE YOUR EMPLOYEES DEPRESSED AND DO YOU KNOW HOW TO HELP THEM?

By Anna Chandry
Chairperson,
The Live Love Laugh Foundation

In recent years many beloved influencers and celebrities and have openly talked about their struggle with mental health disorders. Deepika Padukone, Varun Dhawan, Anushka Sharma and Hrithik Roshan have helped us see the importance of destigmatising this issue.

Depression and anxiety are among the most common mental health disorders impacting the Indian population. In 2015, there was a global estimate that around 322 million people were affected by depression. It is a mood disorder caused by chemical imbalances in the brain which results in lethargy, despondency and lack of any exuberance towards life.

The stigma associated with mental illness in Indian society is what prevents most people from talking openly about their struggles and getting the treatment they need which forces them to tirelessly suffer in silence.

When a person experiences this struggle for a prolonged period they lose hope and feel the only solution is taking their own life. Therefore, recognizing depression at an early stage is vital in reducing the suicide rate and deliberate self-harm. This makes it imperative to treat people that open up about their suffering with utmost care and sensitivity.

Below is a list of signs that someone knowingly or unknowingly exhibits when suffering with depression. This being said, the signs listed can be difficult to identify:

- Feeling sadness, hopelessness or anger
- Loss of interest in previously engaging activities
- Increased fatigue and lack of energy
- Change in sleeping patterns
- Change in appetite
- Mood swings
- Bleak outlook on life

Depression in the workplace:
Depression can affect anybody from young children to the elderly. There is a high prevalence of depression

among working adults aged 20-70 years with 25% of this population showing depressive symptoms and 80% exhibiting signs of anxiety. At the workplace everyone is subject to multiple stressors and pressures. Simple things such as feeling ignored by co-workers, having too many important deadlines in a short period of time, having disagreements with your boss regularly or unwarranted sexual comments or behavior, they can all contribute to poor mental health.

Blurred boundaries in relationships between co-workers contribute to unwanted sexual harassment which can further lead to symptoms of depression. Many people feel obligated to listen and adhere to their seniors at work in fear of job security. It can be hard to distinguish between innocent workplace behaviour and sexual harassment. Women on average tend to experience more harassment at the workplace compared to their male colleagues.

Some signs of workplace harassment that one should keep an eye out for are:

- Feeling punished for your gender
- Fearing repercussions when speaking up about these issues
- Discomfort and hesitation to make official complaint
- Feeling pressured to go along with things that you may not be comfortable with
- Experiencing unwarranted sexual offers
- Being unable to make them stop.

BW Healthcareworld, October 2018 issue

Move Over Weight Loss, Make a New Year Goal for Your Mental Health

ANNA CHANDRY | UPDATED: 16.01.19

MIND IT 5 min read

1.2k ENGAGEMENT



The beginning of the year is the time that most people set new goals to achieve. Most of these goals are associated with physical and social health.

This year, I recommend that you include mental health to your set of goals. The reality is mental, physical and social health are all interdependent, you cannot have one without the other.

Having good mental health motivates you to take better care of yourself, equips you with the ability to manage interpersonal conflicts and cope with stress and adversity. The World Health Organization (WHO) defines mental health as a state of well-being in which an individual realises their own potential, can cope with stress, can work productively and is able to make contributions to the community.

Quint website, 16th January, 2019

5 charts that reveal how India sees mental health



While there is much sympathy for mental health sufferers, stigmatisation is widespread.

Image: REUTERS/Vish Prakash

30 Apr 2018

Deepika Padukone
Founder, The Live Love Laugh Foundation

Murali Doraiswamy
Professor of psychiatry and behavioral sciences,
Duke University Health System

Anna Chandry
Chairperson, The Live Love Laugh Foundation

India is currently home to a population of over one billion citizens. A study conducted by the World Health Organization in 2015 shows that one in five Indians may suffer from depression in their lifetime, equivalent to 200 million people.

Due to the stigma associated with mental illness, a lack of awareness, and limited access to professional help, only 10-12% of these sufferers will seek help.

The Live Love Laugh Foundation (TLLLF) is a charity that aims to create

World Economic Forum website, 30th April, 2018

U.S. • TIME 100

TIME 100's Deepika Padukone: 'We're All in This Together'

TIME website,
25th April, 2018



दीपिका पदुकोणची अनोखी मोहीम

अभिनेत्री दीपिका पदुकोण हिने मानसिक आजार असलेल्या लोकांना त्यातून बाहेर काढण्यासाठी अनोखी मोहीम राबवली आहे. जागतिक मानसिक आरोग्य दिनाच्या निमित्ताने दीपिकाने या मोहिमेला सुरुवात केली. द लिव्ह लव्ह लाफ फाऊंडेशन (टीएलएलएफ) बरोबर तीने ही मोहीम राबवली आहे. यावर दीपिका म्हणाली की, मागील तीन वर्षांच्या प्रवासात आम्हाला हा अनुभव आला आहे की मानसिक आजाराला घेऊन आजही लोकांमध्ये खूप मोठा गैरसमज आहे. ज्यामुळे बरीचशी मानसिक नैराश्याने त्रासलेले लोक खुलून सामोरे येऊन बोलत नाहीत. लोक आपल्याला काय म्हणतील याच भीतीने त्यांना मळाडलेले आहे आणि हेच बदलले पाहिजे. जे मानसिक आजाराला लढत आहेत, एक समाज म्हणून आपण त्या रुग्णांना साथ द्यायला पाहिजे. आमच्या या मोहिमेचा हाच उद्देश आहे.

Punyanagari, 11th October, 2018

KEEP talking

Because communication is the only way we'll get to a place of awareness, acceptance, action

SUNALINI MATHEW

"Look at a discussion on depression as you would the LGBT movement," says Dr. Senthil Reddy, Additional Professor, Department of Psychiatry, NIMHANS, Bengaluru. "Lots of people have had different orientations for many years, but only when prominent people came to the fore did it allow for the whole movement to really move forward and reach its legitimate conclusion for people to be acknowledged, for their rights and privileges to be recognised, and for changes at the policy level."

He says that celebrities started the movement that is now carried forward by heads of Government, before gaining acceptance at the home level. "Celebrities who have become spokespeople for depression or any kind of mental illness have been role models to people in recovery," he says. Rekindling a discussion on the subject is important: Janet Jackson did it in her recent interview with Essence, and Deepika Padukone does it for us today.

When you started The Live Love Laugh Foundation (TLLLF) three years ago, what was your vision for it and how has it evolved?

● I wanted to reach as many lives as possible and to bring about as much awareness as I could, and to save people from going through what I went through. Because just identifying what you're going through and understanding it and coming to terms with it, is in itself an exhausting process. For me, understanding what I was going through was half the battle won. I wanted to make that process easier for people

around me, who were going through a similar experience. Awareness is the most important need in the process. I lived with it for two to three months and it took me a couple of weeks to identify it, but it was divine intervention, because sometimes people tell me they've lived with it for years.

What has your mental health journey been like from 2014?

● It's a constant process of taking care of yourself. So the experience has led to a lot of self-awareness and that allows me to keep a check on myself, my health, my breathing, my thoughts.

What are the tools that your doctors helped you with?

● I would avoid getting into that space, because they may be different for different people. But broadly, a better lifestyle. From an urban point of view, the quality and how much people sleep, exercise, or the thoughts that our energies revolve around. For rural India, it would be very different. For me, exercise is not simply an option - it's a part of my lifestyle.

In hindsight, did you see any obvious triggers?

● No, it just comes out of

nowhere. I have been someone who has taken very good care of myself. I'd had a great year; there was no need for it to have happened. But it could be one thing or a bunch of things. Today, when I make

time for myself for a couple of hours in a day, I don't do it with guilt, because I know it's coming from a place where I need to do that for myself. It's very important to do things for yourself, to take care of your health - I don't only mean physical health, mental health too.

Where do you plan to take the TLLLF next?

● I think we are geared up for the next phase and I see us scaling. The area we are working in won't change - awareness and stigma are going to take many years to go away, but I definitely see us having a global presence.

Those in distress can call Aazadi, a suicide prevention telephone helpline at 27540669 or email anasuhelping@yahoo.com



THE RIGHT COMMUNICATION

The Ministry of Health and Family Welfare offended by tweeting about depression, describing it as a "state of low mood that affects a person's thought, behaviour, feeling and sense of well-being. One must take up activities that keep him or her boosted in order to cope with depression". While everyone balked, it isn't uncommon for people to say and do the wrong thing. Dr. Shyam Bhat, Trustee, The Live Love Laugh Foundation, tells us what to say and do.

What to say...

"I'm here for you."

Tell them that they are not alone. Tell them that you are there to support them.

"This is not your fault!"

People suffering from depression often feel inappropriate guilt and this can worsen the anguish. Remind them that it's not their fault, and just like any medical condition, this can be treated and cured.

"Can I help you with your therapist's/doctor's appointments?"

All too often, in our country, people have to seek professional help alone. Support your loved one in getting professional help and remind them of their appointments. Support them in their journey of healing.

What not to say...

Don't use trite or evident statements like "Be Positive". They don't work, and in fact, increase the stress. A person suffering from depression wants to be positive, but they just can't help feeling sad.

Telling them to "Be positive" is like telling a person with an ankle sprain to stop limping and to start running.

Depression is not a luxury, it's not a weakness or a choice, so avoid statements like "Snap out of it!" "Don't worry about it." "It's all in your mind." "Stop feeling sorry for yourself." Or worse: "Enjoy, relax, have a drink, and forget about it."

What we can do...

Approach with acceptance, compassion, empathy and be emotionally supportive. Listen without judging or trying to solve the issue. Just listen to understand.

Encourage your loved one to get help. Help them consult a psychiatrist or psychologist and support them in their treatment decisions. Help them try to stick to some sort of daily routine. Spend time together at home if he or she does not feel like going out.

Take any threats or casual mentions of death or suicide seriously. Don't assume the person is simply trying to get someone's attention.

What we shouldn't do...

Advising a person suffering from depression using our own personal experience

Depression is not just passing sadness. They will not be helped by a motivational talk or a few positive words. If a person has symptoms of depression, then professional help is required.

Ignoring talk about suicide

About 10% of people suffering from depression die from suicide, and almost 90% of those who commit suicide had a mood or other disorder. Talk about suicide seriously. And don't be afraid to ask, if you are concerned about the possibility of suicidal thoughts, talking about suicide doesn't plant the idea in the mind.

Discouraging professional help

Unfortunately, many of us still are not aware that professional help is important. Consulting a psychiatrist is not shameful or scary. We accept and take medical help for conditions such as diabetes or high blood pressure, or a prolonged fever, and so similarly, we must encourage treatment for depression.

The Hindu, 9th August, 2018



Audit Report

1. We have examined the Balance Sheet of The Live Love Laugh Foundation, Bangalore as on 31st March, 2019 and the annexed Income and Expenditure account and Receipts and Payment account for the year ended that date. These financial statements are the responsibility of the management. Our responsibility is to express an opinion on these financial statements based on our audit.
2. We have conducted the audit in accordance with auditing standards generally accepted in India. These standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. Our audit included examining on a test basis, evidence supporting amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by the management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.
3. We further report that:
 - a) We have obtained all the information and explanations, which to the best of our knowledge and belief, were necessary for the purpose of our audit
 - b) In our opinion proper books as required by law have been kept by the Trust so far as appears from the examination of those books
 - c) The Balance Sheet, Income and Expenditure account and Receipts and Payment account dealt with by this report are in agreement with the books of accounts
 - d) In our opinion and to the best of our information and according to the explanations given to us during our audit, the said accounts give a true and fair view of the state of affairs of the Trust as on 31st March, 2019

Bangalore

Yadu & Co
Chartered Accountants
Firm registration number: 004795S

Sd/-
VN Yadunath
Proprietor
Membership Number: 021170
Bangalore



Balance Sheet 2018-19

| | |
|-----------------------------|---------------------|
| Capital/Corpus Fund | ₹ 38,653,173 |
| Advance from Trustees | 0 |
| Sundry Creditors/Provisions | ₹ 98,493 |
| Total | ₹ 38,751,666 |

| | |
|------------------------|---------------------|
| Fixed Assets | ₹ 437,255 |
| Advances and Deposits | ₹ 1,041,139 |
| Investments | ₹ 33,168,630 |
| Cash and Bank Balances | ₹ 4,104,642 |
| Total | ₹ 38,751,666 |

Income and Expenditure

| | |
|--------------------|---------------------|
| Donations Received | ₹ 33,154,790 |
| Other Income | ₹ 4,449,691 |
| Total | ₹ 37,604,481 |

| | |
|-----------------------------------|---------------------|
| Educational Awareness Programme | ₹ 17,145,797 |
| Development Expenses | ₹ 9,012,111 |
| Administrative Expenses | ₹ 9,008,979 |
| Depreciation | ₹ 59,639 |
| Excess of Income over Expenditure | ₹ 2,377,955 |
| Total | ₹ 37,604,481 |

Board of Trustees



Anna Chandy

Anna has over 18 years of experience in developmental work, counselling, coaching and mentoring. She is the first Certified Transactional Analyst from Asia accredited to the International Transactional Analysis Association, and has specialised in Counselling. She is also certified in Neuro Linguistic Programming and Art Therapy. Anna works with organisations as well as practices in private.



Kiran Mazumdar-Shaw

Kiran is the Chairperson and Managing Director at Biocon. She is a pioneering biotech entrepreneur and a recipient of the Padma Bhushan (2005) and the Padma Shri (1989). She is committed to providing affordable access to healthcare with several global recognitions to her credit. Recently, she became the second Indian to sign the 'Giving Pledge' of the Gates Foundation.





Dr. Shyam Bhat

Dr. Shyam is a psychiatrist and physician, with postgraduate training and board certifications in Psychiatry, Internal Medicine and Psychosomatic Medicine. He has over 20 years of experience and has a special interest in the integration of eastern and western methods of healing.



Nina Nair

Nina has about 30 years of work experience in teaching, learning and developmental activities, human resources, and organisational development. She has played an eclectic mix of roles — from being a high school teacher, entrepreneur, trainer, to the head of HR. She is currently VP and Head HRD (India and LatAm) at [24]7 Inc.



Dr. Murali Doraiswamy

Dr. Murali Doraiswamy is a professor and doctor at the Duke University Health System (USA) and one of the world's leading clinical experts in the area of brain and mental health. He is also a member of the Duke Institute for Brain Sciences and directs a renowned clinical trials unit that has been involved in the development of many therapies used widely today in mental health. Murali has received numerous awards for his work, including a Fellowship by Distinction from the Royal College of Physicians and a special US Congressional recognition for his services to the community. He has been an advisor to leading government agencies, businesses and advocacy groups, and serves as the Co-chair of the World Economic Forum's Global Future Council on Neurotechnologies and Brain Sciences.

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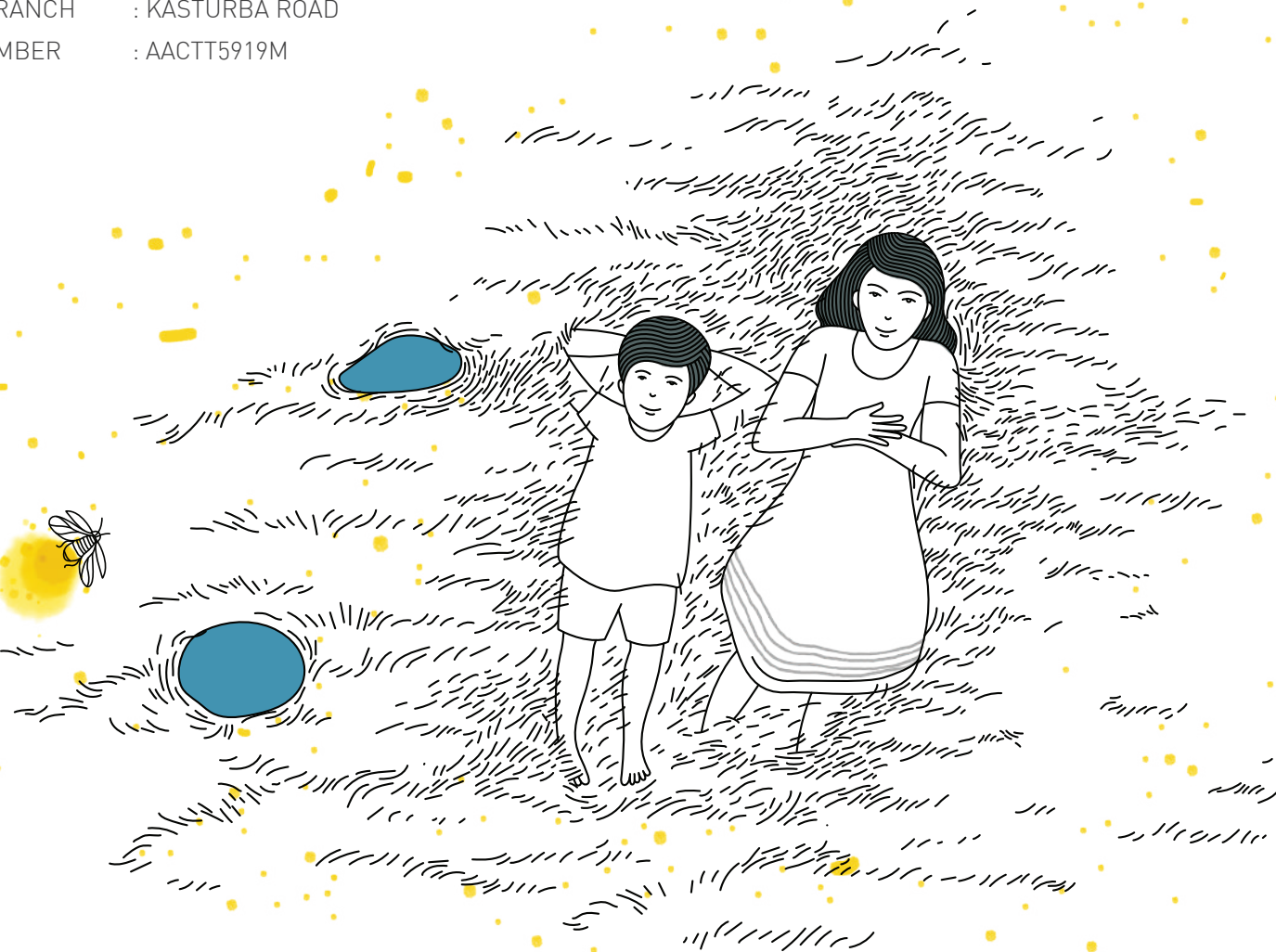
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IFSC CODE : HDFC0000009
BANK BRANCH : KASTURBA ROAD
PAN NUMBER : AACTT5919M



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*Anisha Padukone
Director*



*Brian Carvalho
Head, PR & Communications*



*Natasha Vijay
Programmes Lead*



*Anovshka Chandy
Lead, Digital Initiatives*



*Arul Benedict
Administration Manager*



*Sridharan VK
Office Assistant*



The Live Love Laugh Foundation

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