



T&F INDIA

NEWSLETTER



Parth Sharma, Founder T&F India

PROJECT LAUNCH

We are so excited to launch **Kota: A Case Study** that focuses on lived experience response and systemic review of youth suicides in India.

The project is led by **Ananya MS**, Parth Sharma, with researchers Sanya Banga, Atri Das and volunteers Abira Sharma, Sanjana Nair, Mehek Firoze, Yukti Arora and Souradeep.



March 2024 at T&F India

T&F SESSION OF THE MONTH

On 24 March 2024, T&F India conducted its first session on **de-colonising therapy**. The workshop was attended by 25 participants which included mental health professionals, educators, researchers and students.

Hear from the participants:

"Great engagement and engaging session. Resourceful too." by Lavanya Rajesh

"This webinar and the topics it touched through the presentation content as well as the discussions were extremely insightful and thought provoking" by Dishita Swaika

Follow us for updates on upcoming webinars/ workshops .



QUOTE OF THE MONTH

"The white fathers told us: I think, therefore I am. The Black mother within each of us—the poet—whispers in our dreams: I feel, therefore I can be free"

Audre Lorde



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Art:Celia Jacobs

YOUNG PEOPLE: THE TORCHBEARERS OF HOPE

Ayushi Saha

Young people symbolize change, and are adaptable. Young people are the ones that suffer the most invisibly. With the alarming rise of suicide there's a growing need to address these mental health issues;

Who opened the pandora's jar

One can argue that it's the system's fault, others would say it is the parents' fault. But we can all agree that it needs to change before we lose more youth whose bright futures are dimmed too soon. But hope does exist. It's high time we shake the jar, maybe bang it thrice to the ground and break it to release hope.

We didn't start the fire

In Greek mythology Prometheus gave humans the fire which they took leading to advancement in civilization. He was punished. We do not share his fate. Our ancestors forged metals from fire and breathed them to flourish life. We do not have to scrap rocks into tools but our minds are incredible and the ability to hope to imagine is a gift far greater than fire.

Who should lead the march?

While working in the Lions club where we conducted workshops for children. I created icebreakers for topics such as bullying, relationships, sex, importance of consent etc. a lot of these topics in Indian high-school are swept under the rug. Most curriculums lack teaching skills such as empathy and active listening. As a future mental health practitioner I believe that empathy isn't exclusive to therapists everyone benefits from being empathetic.

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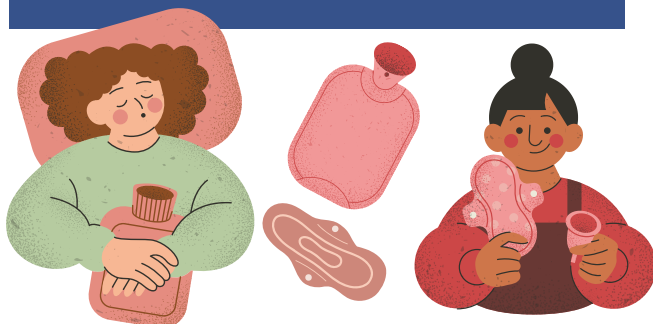
DID YOU KNOW: MYTHS- MENSTRUAL HEALTH

Smriti Kamath

It has been found that menstruators who hold perceptions about menstruation riddled with taboos or myths are more likely to have poorer menstrual health ([Babbar, 2021](#)). Among both urban and rural adolescent menstruators, the most common myths are that they shouldn't wear new clothes, touch particular objects, enter temples, or attend social functions. A relatively high prevalence of the same myths existed in the urban menstruators, indicating that the basis of these myths cannot solely be attributed to socioeconomic status or literacy rates ([Arora & Shah, 2019](#)).

A survey conducted on adolescent menstruators found that when they first started menstruating, many of them were convinced that they had contracted a serious ailment. Forty percent of them believed that menstrual blood was 'dirty' ([Sahay, 2020](#)). While menstruating, some rural women are not allowed to sleep in the same bed with their husbands due to being perceived as 'dirty and impure.' Also, while they're not allowed to work at home or tend to cattle due to the belief that they may leave them infertile, they're sent to do agricultural work.

What other myths around menstrual health do you know?



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IS IT ME, OR MY PERIOD?

Mehek Firoze

If you menstruate, you probably know that your period goes beyond your body. As a 13-year-old who got her first period, screaming at the sight of blood coming from my body was an automatic response, but I did not know then that this thing would make me question my sanity in the future. Some of us start spotting a few days before the period starts, abdominal cramps that feel like our insides have been twisted, lower back pain, headaches, nausea, acidity, bloating, constipation, and sometimes even diarrhea!

Is your period just limited to your body, though? Not really. You start to feel your emotions with more intensity. Premenstrual syndrome (PMS) is a term used to refer to the physical and emotional symptoms that occur around one or two weeks before your period. My unpredictable mood swings get the best of me on some days, but as a 21-year-old, I manage to stay on top of this emotional instability more often than not; practice makes it tolerable. PMS can look like mood swings, food cravings, tender breasts, irritability, fatigue, loss of appetite, and, in some cases, depression.

Your period has a strong influence on how you feel and think, and it can affect your physical and mental health. It can make you feel good, bad, and ugly all at once, and it's crazy. It's good to seek professional help from a gynecologist or a mental health professional if you find it hard to manage by yourself. So the next time you feel a sudden shift in your mood, ask yourself:

"Is it me, or my period?" and is it time to get help.



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Gender-Based Discrimination in Contraceptive Care

INFOGRAPHIC

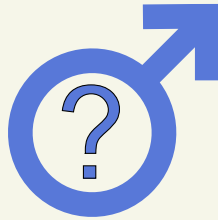
Sanjana Nair

Who faces the brunt of side-effects?

Lack of safe Contraceptives for AMAB bodies

Only barrier methods or permanent contraceptives exist as options.

Very little research funding is dedicated to developing contraceptives for AMAB bodies.



Menstruators face side-effects

Hormonal imbalances due to IUDs and consumable contraceptives impact daily life and pose long-term bodily harm.

Most menstruators go through difficult trial and error to find an option with minimal side effects



Who has the power to decide?

Coercion/Pressure

Menstruators are often restricted access to certain contraceptives and peer pressured/coerced into using certain others.

E.g. Who decides a pregnant person's right to abortion?

Why are certain genders excluded from the larger conversation?

What are the barriers in accessing contraceptive care?

This depends on a number of factors:

Who has been educated/ made aware of their contraceptive/ healthcare options?

Who can afford to buy higher-quality contraceptives? Who must resort to cheaper options?

Are all types of contraceptives available at a local store?

Who can independently decide which contraceptive they use without pressure from their peers, partner, or family?

Does your prescription cover the contraceptive you need?

If one does not fall into the gender/sex binary, do they have the same access to contraceptive care as their hetero-normative counterparts?

Who experiences stigma?

Female-presenting/ AFAB/Menstruators

Often shamed for purchasing contraceptives or discussing them.

More often than not, they are accused of promiscuity for making their own contraceptive/sexual decisions.

Eg: Are you married? Do you have a boyfriend?

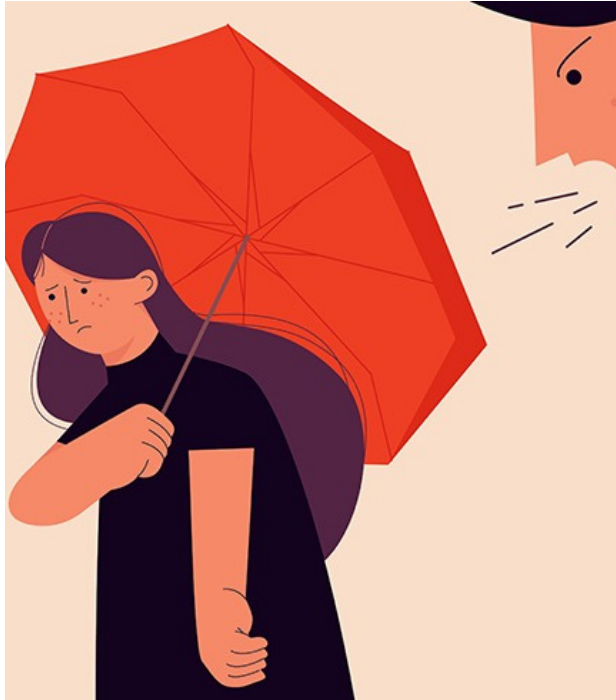
Male-presenting/ AMAB Bodies

Taught to exclude menstruators from the conversation about their bodies. Instead, they are taught to take all of the decision-making into their own hands.



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STIGMA THROUGH LIVED EXPERIENCE

Souradeep Chakraborty

From my experience, pervasive stigmas hinder expression, access to services, equal opportunities, and more. Discrimination against those with mental health conditions stems from societal stigmas, portraying sufferers as inferior or burdensome. Furthermore, mental health care is much more accessible to the economically privileged people, and the issues of the people of other background are often overlooked due to less accessibility and awareness. However, efforts are underway to improve inclusivity and awareness. I believe to combat stigma and discrimination; open discussion and normalization of mental health experiences are crucial. Embracing equality in mental health care is essential for fostering a more inclusive and accessible society.

HOW I PRACTICE SELF CARE

Udisha Jain

How do you beat a hard day? The thing is hard days end up defeating us but hope seeps in the unlikeliest of manner, the sudden glimmer of fairy lights, the no adds feeling of the premium subscription or picking up the 10 kg axe like comb and putting your hair in a somewhat orderly fashion after weeks of dreading not doing the routine. Hope for a person with mental health conditions is dichotomous; You're depressed, all your friends will either attempt to give you hope for brighter days to come or upon formal psychiatric diagnosis your entire world changes and then friends are now clueless because how can the support system friend need support?

Hope comes in like an isolated strike of lightning on the darkest of days when we are crawled up contemplating life with our permanent companion i.e, pillows. Books, movies, the fictional world not so much fictional comes to the rescue when humans look at us with a different set of eyes because diagnosis apparently changes our personality, it changes how we are viewed by loved ones and acquaintances alike. Community based activities like spending time in Nature, creative arts and exercise are said to help as a form of self-care but when concepts like motivation and things you love cease to exist, when your then favourite hobbies now look like smoke filled clouds, you look up sitting down on the floor and sometimes your life flashes in front of your eyes or sometimes the stroke of lightning gets you to the next day.

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STIGMA OF MENTRUATION AND HYGIENE

Mihikaa

For generations, menstruation has long been a taboo topic amongst people from all over the world. Despite one of the principle sustainable development goals being, to promote healthy lives for all individuals, the majority of menstruators are still suffering in silence, burdened by feelings of shame, misinformation, and outdated beliefs. Owing to the lack of awareness related to the importance of hygiene during menstruation, menstrual products are still a luxury in our country, forcing the majority of the population to use cloth, cotton, and even mud, thereby not exposing them to serious health risks. There are several unnoticed illnesses and deaths that happen owing to this lack of awareness and stigma. Having worked closely with an organization spreading awareness about period hygiene amongst underprivileged communities, I witnessed the ingrained shame, misinformation and problematic beliefs firsthand, amongst not just the family, but also the menstruators themselves.

The pervasive belief about the impurity of menstruation cloaks the acknowledgment of the sheer necessity and importance of this vital human process, essential for life. The battle against this stigma will not be won in one day, but rather, over a period of time, through continued, collaborative efforts.

BRIDGING THE CARE GAP

Sunaina G.S

Mental health is not merely the absence of illness or disorders; rather, it is a holistic, long-term process encompassing emotional, psychological, and social well-being. Global organisations like WHO have redefined 'mental health or well-being', broadening its scope to foster comprehensive understanding and proactive intervention

Accessibility remains a substantial challenge in the domain of mental health. Despite the formulation and implementation of action plans by governing bodies, there exists a gap between knowledge distribution and effective implementation at grassroots levels. Barriers such as financial constraints, inadequate training, improper licensure regulation, and geographical disparities hinder access to mental health professionals, exacerbating the dilemma faced by individuals seeking support.

Moreover, pervasive stigma and stereotypes surrounding mental health further impede access to care. Societal misconceptions, coupled with apprehensions perpetuated by mental health professionals themselves, create challenging barriers to seeking help. Marginalised communities face heightened challenges in accessing safe and affordable spaces to address their vulnerabilities. Only through determined efforts can we ensure that mental health care is accessible and equitable for all.



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Nothing about us

Without us.

T&F India is a non-profit with its entire team comprising of lived experience experts, people from the queer, trans and gender diverse community, people with disabilities and those from the global south.

Learn MoreGet InvolvedDonate Now



Join the revolution!

Young people are tired, exhausted and angry. We no longer want to be another cog in the industrial complex- we want to **break the wheel**. Join us in decolonising mental health and social impact.

[Start your journey](#)

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Contact Us

Are you ready to turn your advocacy and activism into actionable steps? If so, join us at The Foundation.

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"Your silence will not protect you"
-Audre Lorde



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