# ANNUAL BANYAN ACADEMY OF LEADERSHIP IN MENTAL HEALTH





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### **Credits**

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Banyan Academy of Leadership in Mental Health (BALM) operates at the cusp of mental health systems change and social justice, interrogating the fundamental question: How do we cultivate care infrastructures that align with and respond to the lived realities of those systematically excluded from flourishing?

Our work emerges from the understanding that service scarcity alone cannot explain why mental health care fails marginalized communities when existing systems fail to comprehend the intersectional realities of structural violence that accompany mental health experiences. Drawing from The Banyan's longitudinal experience, we advance a paradigm of mental health workforce development grounded in community epistemologies and relational care models.

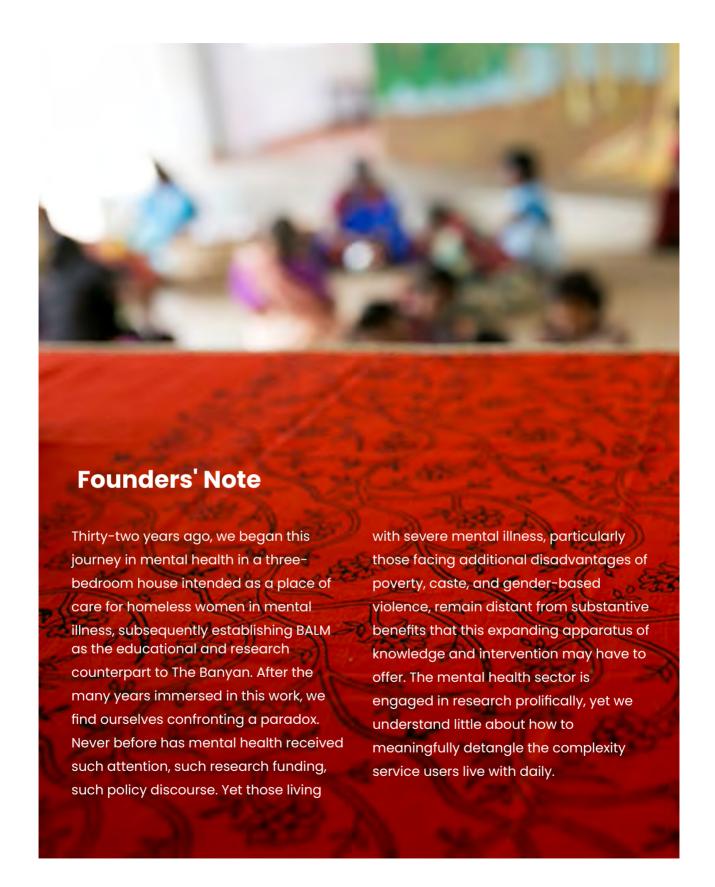


Our research is centred on participatory enquiries of what navigating mental health under conditions of social marginalization manifests as and what constitutes meaningful care. We generate evidence that centers the perspectives most often excluded from academic discourse.

Our pedagogical approach is focused on cultivating mental health champions across diverse social locations. Through educational programs, fellowships and grassroots interventions, we enable trajectories that contribute to systemic change: women working at the frontlines earning their first educational certificates; young people once supported by services now coordinating scholarships for the next generation of children growing up with parental mental illness; multidisciplinary teams across partner organisations engaged in scaling up of services for homeless people with mental illness; and diverse professionals engaged in the mental health sector who seek to build perspectives and skills to inform their work.

Your partnership enables us to expand this ecosystem of inclusive, locally-rooted mental health leadership that hopes to shape the future of who holds knowledge, how care is delivered, and whose voices shape the systems meant to support human flourishing.





For someone experiencing chronic psychosis while living homeless, what holds value, in terms of return to health or life, that they wish to pursue? How do we speak of social inclusion when communities themselves are structured through exclusion? When families and communities can be sites of both profound care and profound harm? How do we design research that captures the temporality of severe mental illness, its intermittent nature, its decades-long arcs, its refusal of linear narratives?

More than new questions, these are lingering reminders of the constraints of conventional methodologies of research and systems building that are yet to access registers where the most significant transformations occur. This year's work, our longitudinal studies, our attempts to operationalize dialogic approaches, our research on knowledge architecture, represent efforts to apprehend wisdom, grounded and collaborative, beyond analytical frames currently available to us.

Many states and civil society organisations in India are engaged in significant mental health systems expansion. For instance, the Tamil Nadu and Karnataka government's commitment to establishing Emergency Care and Recovery Centres across all districts represents unprecedented political will. Yet we worry. Scaling existing models, even the good ones, risks reproducing their limitations.

The pressure for rapid results, measurable outcomes, and clear causal pathways may foreclose the immersive enquiries required to doggedly grapple with complexity. BALM, therefore, exists as an attempt to hold space for the harder questions. We aspire our educational offerings to emphasize reflexivity alongside technical competence, we draw our research and social action from a lens of knowledge and practice where participants are active collaborators.

In a world filled with fractures and no substantive solutions, what we can engage in is sustained presence and enquiry, that privilege learning over knowing, that sit with discomfort and uncertainty and be troubled by realities they fail to capture. Your partnership sustains this work and the ecosystem it nurtures.

With deep appreciation for walking this path together,

### Vandana Gopikumar, Vaishnavi Jayakumar and Balraj Vasudevan

Co-founders, BALM



R Dilip Kumar
Chief Financial Officer
TVS Sundram Fasteners Limited

Message from
Sundram Fasteners
Centre for Social
Action and Research

Corporate partnerships in social change often operate on logic of scale with inputs, outputs, measurable impact. Our relationship with BALM over these years has taught us something different: that the most significant transformations move beyond quantification to learning to see through different perspectives.

This year's annual report reveals the maturation of approaches we have witnessed evolving: education and research that enable critical action and interventions co-designed by those they aim to serve. The scholarship provided to children of parents with mental illness, bearing our name, operates within this larger ecosystem recognizing that material support cannot be separated from the broader work of challenging exclusion and nurturing dignity.

Our continued partnership reflects a conviction that India's mental health transformation will come from nurturing ecosystems where new approaches can emerge, grounded in dignity.

Thank you for the opportunity to participate and learn from this vital work.



### Lakshmi Narasimhan CEO, Banyan Academy of Leadership in Mental Health

### **CEO's Note**

When Arulvani speaks of her journey, from a girl whose education ended at sixteen, barred by gender and caste, to a NALAM mobilizer now recognized by name across three panchayats, she espouses BALM's central conviction, that change in mental health care is inseparable from shifts in who gets to dictate this trajectory.

This year marks a critical juncture in our work, where we complement the diffusion of The Banyan models across the country with attempting to reshape whose knowledge counts and how systems can centre the dignity of those they claim to serve. Three major longitudinal studies are now underway, examining effects of decade long housing with supportive service interventions, community mobilization across diverse contexts, and knowledge architecture in care systems. In each, we position our participants as co-creators and not subjects, attempting

to bridge gaps between conventional empirical investigation and wisdom embedded in lived experience of being a service user, a carer and sometimes someone at the intersection. Our educational programs, trainings to support replication of The Banyan approaches and social action work with children living with parental mental illness all reflect this same commitment that responsive mental health systems can emerge by nurturing leadership from within communities themselves.

In this report, we centre four stories that offer a glimpse into the core of our work: the first, is the capacity building of grassroots mental health mobilisers across six sites scattered across four states in India; second, the development of mental health vocabulary in Indian Sign Language with the Deaf community; the third, a spotlight on our Open Dialogue course and the path we envision for this unique psychotherapeutic intervention; and the fourth, an update on the diploma program born from our long-standing associate with VU Amsterdam for transdisciplinary research. As you read through this report, you will meet people who have earned credentials and skills, as also found different ground to stand on, where their voices can hold value in order to shape the future of mental health care. This is the vision your partnership makes possible.

Thank you for walking with us as we continue to reaffirm our path towards better mental health care and what it can be when it truly centres human dignity in all its complexity.

### Scaling hope:

## How 120 community- based mental health champions are transforming mental health care access across four states in India

Arulvani refused to let caste barriers define her life. Married at sixteen, her education stopped at class ten. Caste barriers determined where she could draw water, which spaces she could enter, who would speak to her. But through BALM's Diploma in Integrated Mental Health Care, she became a NALAM mobilizer and now offers her services in three panchayats. People who once wouldn't speak to her now know her name.

Vennila carries a different pride. "In my house, I'm the first one to get any degree—a pattadhari (graduate)—and now I have my certificate!" After 10 years in the social sector, she was jobless and unsure about her next steps. One day at a bus stop, she



For Kavitha, becoming a NALAM mobilizer meant finding "manasuku thirupthiyana velai—a job that brings deep satisfaction to my heart. She says of her experience with the BALM Diploma, "I never imagined I would earn a degree in my life and yet here I am." In one panchayat, when she learnt the temple priest's mother needed help, she provided counseling and raised awareness about seeking care. The priest later introduced her to the temple authorities. "I felt so proud at that moment."

They are part of something bigger.

Over **120** people across Tamil Nadu, Madhya Pradesh, Maharashtra, and Odisha are now trained to deliver mental health support in their communities. Some are peer leaders who've lived through their own mental health journeys and turned that experience into resources to support others. They serve as frontline staff for NALAM, a community mental health approach that combines clinical interventions via multidisciplinary outpatient teams with social entitlements and local community-level alliances. Project Thrive, under the aegis of NALAM and supported by Infosys Foundation, is working to scale this approach across six sites in four states of India with an aim to reach 20,000 people by 2027.



BALM partnered with The Banyan and its partner Gramin Adiwasi Samaj Vikas Sansthan in Madhya Pradesh and Chetana Jewels International in Odisha to support the replication of NALAM. Through a six-month diploma course, certified by Madras School of Social Work, BALM trained 73 graduates this year alone. Training was delivered in Chennai, Chengalpattu, Aghai, Pandhurna, and Dompada—reaching people where they are. Over 133 training sessions, 124 trainers, including program graduates who came back to teach others, delivered the curriculum in four languages, Tamil, Hindi, Marathi, and Odiya. Because mental health support can't happen if people can't talk about their experience in their own words.

For the trainers themselves, stepping into teaching roles brought unexpected transformation. Gajalakshmi, who has been with The Banyan for 18 years, admits: "I remember thinking, 'Why me? What do I even know to teach?'... but students' feedback made me realize, I was useful & I do have experience to share." Nervous at first, she had to learn to make presentations and push herself in new ways. "Their appreciation made me realize that I had gained new skills and I felt so proud of myself."

Kavitha, another trainer with 18 years at The Banyan, describes her approach: "I don't see it as just teaching—I share my experiences, discuss challenges & engage in meaningful conversations." Nervous during her first class, she spoke too fast and doubted herself. "But over time I became more mindful and now I teach with confidence. I have always shared my experiences and encouraged people to ask questions. We have discussions, and I enjoy that process—it's a way of learning and growing together."



### 259 new signs:co-creating a mental health vocabulary for the Deaf community in India



For Deaf and hard-of-hearing communities across India. conversations about mental health existed in a linguistic void. Indian Sign Language (ISL) while a developed language was missing specific vocabulary to express concepts like "anxiety," "depression," or "trauma", leaving the entire community without the means to name their experiences, seek support, or access care.

Between July 2024 and August 2025, Vshesh (an award-winning impact enterprise working on disability inclusion) and BALM partnered with the

Deaf community to build what was missing with the support of Bajaj Finserv. Through 24 individual interviews and community workshops, Deaf participants identified which terms mattered most. Together, we developed 259 new ISL signs for mental health and wellbeing.

The Indian Sign Language Research and Training Centre (ISLRTC), the body responsible for ISL standardization, reviewed and formally approved all 259 signs for inclusion in the official ISL dictionary. These terms are now part of India's recognized sign language, accessible to interpreters nationwide, taught in formal ISL programs, and accepted in medical, educational, and legal settings.

We trained 90+ Deaf peers across Chennai, Pune, Mumbai, and Delhi to recognize distress, offer support, and use the new vocabulary with confidence. Another 70+ mental health professionals and organizational representatives learned the signs through dissemination workshops. The data from before and after training reveals that self-care awareness jumped from 46% to 100%, ability to identify mental health crises rose from 54% to 74%, and understanding of the physical and mental health connection increased from 46% to 100%.



The data represents a trained peer support network that can now hold space for someone's distress, recognize when immediate help is needed, and have these conversations in their own language. In the words of Surya, a training participant from Chennai, "My hands have so much to say—I just need the world to learn how to listen."



(Scan to watch video on some of the terms on ISLRTC's channel)

# From Course to Community: Open dialogue course prepares for implementation, adaptation and research

When Vijayakumar first joined the Open Dialogue training, he expected to learn new techniques. Instead, he discovered something more fundamental: the transformative power of truly listening.

"What struck me most was that the focus was not on adding more techniques, but in slowing down, on being fully present," he recalls. The shift in his practice was palpable. By creating space for every voice and practicing deep listening, Vijayakumar found himself not just learning a method, but embracing a philosophy of care.

Today, as Lead for Aftercare and Community Mental Health Support Services in Chennai, he carries these principles into every interaction, pausing to listen, inviting collaboration, building spaces where understanding can be shared.



"The course strengthened my commitment to being present with uncertainty and holding a space for shared understanding. It has deepened my practice and my commitment to building more respectful, humane connections with the people I support."

Between March and September 2024, 25 mental health professionals participated in BALM's Open Dialogue course delivered by Dr Pina Ridente, retired Senior Psychiatrist from the University of Trieste, Italy, learning to implement a relational approach to mental health care. The course involved 155 hours of blended learning, including 90 hours of theory, 45 hours of dialogic practice, and 20 hours of applied assignments. Four thematic blocks covered Open Dialogue history, reflexive practice, trauma-informed care, and real-world application.

Shanthi Rajmohan, Founder, Dialysis Patients Association, speaks of her experience, "The Open Dialogue course is a revelation in that therapy which was confined within the walls of an institution is now more flexible in reaching out to clients, where they need. The inclusivity of family and friends, bringing in the social network makes this approach a holistic intervention technique."

BALM's work with Open Dialogue began with a question: Could this Finnish-developed approach be adapted to India's pluralistic, family-oriented culture? The answer will continue to evolve through action. Working with Dr. Pina Ridente and drawing on the curriculum of the Finnish Open Dialogue School, BALM has begun exploring prospects to offer a Training of Trainers course to deliver the course through locally rooted faculty as well as operationalizing this approach for the Indian context through a Randomised Control Trial to evaluate effectiveness people experiencing mental illness and histories of homelessness.







### A Transdisciplinary Partnership For Social Change

In December 2022, the India Centre for Transdisciplinary Research was launched, a collaborative initiative between the Athena Institute at Vrije Universiteit Amsterdam and the Banyan Academy of Leadership in Mental Health (BALM). It was a movement to fundamentally reimagine how we approach complex social problems. This began in 2013 as part of a tripartite agreement with TISS—a partnership cemented over 10 years and 10+ PhDs to train more young scholars and practitioners in transdisciplinary research and praxis in mental health. The partnership brought together three organisations: VU Amsterdam's Athena Institute, a global leader in developing methodologies for multi-actor engagement toward societal transformation; the Banyan Academy, which draws from The Banyan's deep practice in mental health and social inclusion; and the Madras School of Social Work (MSSW), an autonomous institution with a legacy of shaping social work education since 1952. The Centre's philosophy is clear: we must bridge the boundaries between science, policy, practice, and lived experience. Transdisciplinary research is a way of being that invites collaboration, reflexivity, and courage. For many years, The Banyan & BALM have worked to address mental distress and exclusion through participatory models that restore meaning, independence, and rights. The India Centre for Transdisciplinary Research extends this ethos into the realm of research, becoming a living laboratory where knowledge creation and action are inseparable. The centre also supports researchers and practitioners in conducting PhDs that are rooted in praxis.

The Diploma in Transdisciplinary Research and Practice: In February 2024, the partnership launched its flagship Diploma in Transdisciplinary Research and Practice—a year-long journey designed for professionals determined to work through complex problems. Eleven participants from across disciplines joined the first cohort, each bringing with them a persistent problem from their field—be it in health, community development, policy, or education. Sixteen participants are enrolled in the ongoing batch (second). The programme's strength lies in its immersive structure—a hybrid blend of in-person workshops, online reading circles, and field-based assignments that turn workplaces and communities into learning spaces. At the heart of the diploma are three intensive two-day workshops hosted at BALM and MSSW in Chennai. These sessions are part masterclass, part laboratory—where participants engage in real-world problem solving with peers and practitioners who have spent years in the field. The workshops introduce foundational skills in transdisciplinary research design, stakeholder analysis, participatory methods, and reflexive learning. Between workshops, participants join online reading circles to collectively explore key texts like Knowledge Co-Creation (Regeer & Bunders, 2009). These sessions spark dialogue about whose knowledge counts, how power operates in

research spaces, and how to design for transformation rather than control. Assignments extend these ideas into practice. In one, participants reimagine a conventional research paper as a transdisciplinary project, integrating stakeholder perspectives into design and implementation. In another, they conduct transformative interviews—conversations that aim to be as valuable to participants as to researchers, emphasizing co-creation and action. A reflective "external brain" exercise captures each learner's evolving questions, challenges, and insights over the year. By the time the cohort presented their final projects in December, many had already begun designing participatory interventions and challenging traditional hierarchies of knowledge.

As one participant shared: "The course gave us tools to blend research and implementation in ways that centre people with lived experience—not just academics or policy folks. The inperson sessions, group activities, and reading circles were all deeply engaging. And learning from peers who were tackling their own persistent problems was incredibly valuable."

The third cohort of the Diploma in Transdisciplinary Research and Practice will begin in 2026.



### **Education & Capacity Building**

### 7 academic programs | 184 professionals trained | 6,750+ lives impacted

Degree & Diploma Programs in collaboration with Madras School of Social Work

#### Master of Social Work in Mental Health

**18 graduates** enrolled in Year 1 preparing for roles across mental health, public policy and disability sectors

### Diploma in Integrated Mental Health Care

**90 professionals trained** across 2 batches to build India's frontline mental health workforce | Operating in Tamil Nadu, Maharashtra, Odisha, and Madhya Pradesh | estimated 5,000+ persons reached with mental health promotion, screening, and care

### Diploma in Mental Well-being of Vulnerable Children

**30 NGO staff trained** to integrate mental health support in child protection and care | an estimated 500+ vulnerable children from vulnerable communities supported

### Diploma in Transdisciplinary Research and Practice

**9 practitioners graduated** from partnership program with Vrije Universiteit (Netherlands) and MSSW | Developing innovative, crossdisciplinary approaches to complex mental healthcare challenges





### **Certificate Programs**

Public Mental Health Course — 55 specialists equipped with problemsolving skills for public mental health challenges

Trauma-Informed Care — 30 **professionals** trained through 10-hour online course to identify trauma, support vulnerable populations, and integrate trauma frameworks into organizations

### Open Dialogue & Dialogical Practices - 25 professionals trained in this pioneering democratic, non-directive therapeutic approach



### Research

### **Publications**

Ravi, M., Tyagi, S., Gopikumar, V., de Wit, E. E., Bunders, J., Padgett, D., & Regeer, B. (2025). Participatory research in low resource settings—Endeavours in epistemic justice at the Banyan, India. Journal of Responsible Technology, 23, 100123. https://doi.org/10.1016/j.jrt.2025.100123

Key findings: This study trained 18 peer researchers, people with lived experience of mental illness and homelessness, to conduct service audits at The Banyan. Service users interviewed by peer researchers were perceived to offer more honest feedback, particularly criticism, because they felt understood by someone who had "been there." Peer researchers reported pride and liberation in taking on the researcher identity. One stated: "I grew up wanting to become a doctor, I ended up as a patient instead...Since they have a 'doctor tag', no one will question them on anything." In low-resource settings with limited formal education, we developed audio recordings of questionnaires and divided lengthy surveys to manage fatigue. These practical accommodations made participation possible without compromising research quality. The study demonstrates processes and dynamics through which people with severe mental illness may be supported to participate as co-producers of knowledge about mental health services.

Gopikumar, V., Narasimhan, L., Easwaran, D., Srinivas, A., R, K., Moideen, P., Sivayokan, S., Rohatgi, P., Padmakar, A., Rajesh, V., Ravi, M., Krishnadas, P., Margaret, A., Hamlai, M., Sharma, C., Joseph, S., Venkateswaran, C., Ck, K., Sn, S., ... Ravikanth, L. (2025). From institutions to homes: Evaluation of a housing with supportive services intervention for people with psychosocial disabilities with histories of homelessness. SSM - Mental Health, 7, 100424. https://doi.org/10.1016/j.ssmmh.2025.100424

Key Findings: This multi-site evaluation of Home Again across 9 Indian states and Sri Lanka with 214 participants who had been institutionalized for a median of 29 months demonstrated statistically significant improvements across all measured outcomes over 12 months: community integration (p < 0.001, large effect size), disability reduction (p < 0.001), symptom reduction (p < 0.001), quality of life increase (p < 0.001), and hope increase (p < 0.001). Participants from government-run institutions showed greater reductions in disability and symptoms compared to those from private institutions, suggesting prolonged institutionalization in under-resourced settings creates substantial acquired disability that remits with appropriate community support. Through 72 focus groups with 220 participants, the research revealed complex transition experiences—newfound freedoms in making daily choices, practicing religion, and gaining employment alongside lingering constraints around social expectations.

### **Forthcoming**

"Navigating Homelessness: Establishing a Sense of Place and Creating Home" - a study exploring how individuals experiencing homelessness develop a sense of place and redefine the concept of home, examining the social factors that shape their experiences and influence their pathways to homelessness. This research was presented at Vrije Universiteit Amsterdam and is being developed for submission to a peer-reviewed journal.

Key Findings: This ethnographic study in Chennai documented how survival on streets requires acquiring embodied knowledge through peer networks—where to sleep safely, how to negotiate with police, how to access food and labour markets. As one participant explained: "I did not know that I could stay in the room...I was scared. I learnt the spaces from my fellow homeless peers." The research reveals homelessness not as mere deprivation but as a situated, learned practice shaped by urban governance and informal economies. During a 2022 eviction, residents hid belongings with trusted shopkeepers and temporarily relocated to alleys and temples before returning—demonstrating survival involves continuous negotiation with authorities.

Even without permanent housing, participants created provisional homes through daily routines: under a flyover, one woman demarcated space with hung clothes as curtains, swept daily, and organized possessions—transforming public infrastructure into domestic space. Participants refused housing in Kannagi Nagar because it was too far from work and lacked the networks and spatial knowledge they'd developed, revealing why distant relocated housing often fails.

"Alaipāyum Kātru: Displacement and the Fluid Notions of Home Amongst Homeless Men and Women Living with Mental Illness" – a book chapter submitted for the edited volume "Diversity and Equity in Mental Health Practice," focusing on displacement, gender, and evolving concepts of home among residents of Banyan's care facilities.

Key Findings: The study sought to understand homelessness as a process of "continuous displacement" rather than a static state. Data revealed that participants moved fluidly between rough sleeping, institutions, and temporary housing—not as discrete categories but as a continuum. One woman described highway petrol bunks as her "home" because "they allowed me to sleep and gave me protection."

Participants defined home through safety, autonomy, relationships, and cultural familiarity, not physical structure alone. For some, institutional spaces, while providing shelter, felt like displacement due to uncertainty about permanence and lack of control. Gender dimensions were pronounced: women faced mobility restrictions for safety, menstruation management on streets created severe stress (sometimes causing cycles to pause), and women restricted themselves to well-lit public spaces like bus stands and hospitals while men had greater spatial mobility.

"The Banyan: Mental health and social care systems for vulnerable populations in India" - a chapter submitted for "Global Mental Health Delivery: Research to Practice" (MIT Press), highlighting approaches developed by The Banyan over thirty-one years of service, with particular focus on homeless women living with severe mental illnesses.

"Cultivating hope: Assessment and social work interventions for persons with chronic psychiatric disorders," was accepted In Social work assessment and intervention: Working with diverse populations (under print). Cambridge Scholars Publications

### Ongoing Research with The Banyan

Socio-structural Patterns and Experiential Dimensions of Mental Health Provisioning in Diverse Indian Contexts: A Mixed-Methods Analysis of the NALAM Program Dataset

### Funded by: Infosys Foundation grant to The Banyan

Abstract: India faces a major mental health treatment gap, shaped by scarce professional resources and socio-cultural barriers. The NALAM program addresses this by training community mobilisers as bridges between local communities and formal systems. This study seeks to profile participating communities, examine mobilisers' experiences, develop context-sensitive frameworks, and explore evolving community understandings of mental health. A mixed-methods study design will be implemented across the six diverse sites in Tamil Nadu, Maharashtra, Madhya Pradesh, and Odisha. By integrating both statistical analysis and qualitative insights, the study seeks to advance understanding of how community-based interventions interact with social cultural and structural determinants of mental health in India

### **Principal Investigator:** Dr. Preetha Krishnadas





**Outcome Trajectories of People with Psycho-social disabilities:** A Ten-Year Evaluation of a Housing with Supportive Services Program

### Funded by: Grand Challenges Canada grant to The Banyan

Abstract: This study conducts a longitudinal evaluation of the Home Again intervention, a community-based mental health care model supporting recovery and social inclusion. The objective is to assess its efficacy, impact, and feasibility across health, well-being, care practices, community integration, and economic domains. A mixed-methods design will be used: quantitative data will be gathered through standardized tools such as the WHO Disability Assessment Schedule 2.0, Community Integration Questionnaire, Quality of Life measures, and Social Network Inventory, while qualitative insights will be captured through in-depth interviews, ethnographic observations, and photovoice. Trained researchers will ensure consistency across sites. The findings aim to provide a comprehensive understanding of Home Again and guide evidence-based improvements in community-based mental health care.

**Principal Investigator:** Dr. K.V. Kishore Kumar **Co-Principal Investigator:** Deepika Easwaran

Bridging Gaps in Care Ecologies: Knowledge Architecture and Adaptation in Mental Health Care

### Funded by: Wellcome Trust

Abstract: A key challenge in mental health care is bridging the gap between formal knowledge systems and the lived, experience-based realities of providers and service users, as conventional approaches often overlook these insights, leading to misaligned care in diverse contexts. This study seeks to build a responsive framework for knowledge co-creation in mental health, using an iterative qualitative design that evolves with participants and field realities rather than following a fixed structure. The study involves care providers and service users at The Banyan's Emergency Care and Recovery Centers. Data will be gathered through observations, narratives, recordings, and digital entries, and analyzed through a participatory, reflexive process to generate insights grounded in lived realities and inform adaptive, inclusive mental health systems.

Principal Investigator: Dr. Lakshmi Narasimhan Co-Principal Investigator: Purnima Prakash



# Sundram Fasteners Lecture Series: convening experts to advance equity and innovation in mental health

Launched in 2020, the series brings together global experts to foster cross-disciplinary dialogue on mental health, social justice, and inclusive development. This year 500+ mental health professionals, policymakers, and thought leaders engaged across two editions



### April 2024 | Child & Adolescent Mental Health

Dr. Ramesh Raghavan (NYU) delivered keynote on supporting children facing social disadvantage and parental mental illness. Panelists were Dr. Chetna Duggal (TISS) and Dr. KV Kishore Kumar, moderated by N. Ram (The Hindu Group). Featured photography exhibition by Ibrahim and Thenarasan—children of service users and SFL scholarship recipients.



### March 2025 | Culture, Ritual & Health

The 5th edition of the Sundram Fasteners Lecture Series was held on March 14, 2025, featuring Dr. Cristine Legare's keynote on "Leveraging the Power of Ritual to Improve Health Outcomes". Dr. Legare, an internationally recognised cognitive scientist, from University of Texas, Austin, offered a research-based perspective on the psychology and cultural mechanisms behind rituals and health behaviors. The event included a panel discussion with Ms. K. Sujatha Rao, former Union Secretary of the Ministry of Health and Family Welfare, moderated by Ms. Sharon Buteau, Executive Director of LEAD at Krea University.

### Sundram Fasteners Scholarships and Life Skills Education Program

Scholarships for Children living with Parental Mental Illness

8 students received direct financial support totaling Rs. 91,982 for school fees 433 educational kits (worth Rs. 3.47 lakh) was distributed to children living with parental mental illness in Chennai's Padi Kuppam and Tiruchirappalli.

### **Life Skills Education Program**

**3 locations** launched | **235 students** in grades 6–9 engaged Delivered structured life skills curriculum at Government Middle School (Chennai), Gurukulam Trust School (Kovalam), and Rainbow Homes (Chetpet), addressing emotional regulation, self-awareness, decision-making, and coping mechanisms.

### SFL Fellowship Programs for Mental Health Action

The Sundram Fasteners Fellowships for Mental Health Action, established in 2019, addresses India's critical mental health workforce shortages through targeted leadership development. This cornerstone initiative exemplifies a strategic response to both quantitative deficits and qualitative gaps in the mental health service ecosystem, operating within a theoretical framework that integrates diverse epistemological perspectives and privileges both professional expertise and experiential knowledge.

The 2024-25 cohort included remarkable individuals implementing innovative interventions:

- Mr. Mohd Tarique, has engaged extensively in decriminalisation practices and institutional reform for homeless people, particularly those in carceral settings, and as Distinguished Fellow was involved in offering strategic support and oversight to the expansion of the NALAM intervention in Maharashtra, Odisha and Madhya Pradesh.
- Mr. Ratheesh Kanakode, a social entrepreneur in mental health, was involved in advancing scalable mental health intervention models such as the Emergency Care and Recovery Centre (ECRC) for Homeless persons with mental health issues and Home Again; inclusive & supported community living setup for individuals recovering/recovered from mental health issues. As Director and Founder of Menadora Foundation, he leads three major initiatives: ECRC Sholavaram (30-bedded inpatient facility), ECRC Tiruvallur (20-bedded inpatient facility), and Home Again Villupuram (6 houses with 30 residents). These interconnected projects form a comprehensive mental health support ecosystem serving vulnerable populations across multiple districts.

Mr. Balaji, a lived experience expert, was involved in setting up and running the vocational training unit at the partner-run ECRC in Erode (Atchayam Trust). He began accessing The Banyan's outpatient services in 2008 after experiencing symptoms of mental illness. In 2014, he joined The Banyan's Vocational Training, earning a living by making candles, art and crafts, and jute bags. Since then, he has completed his Diploma in Fine Arts, Magazine Art and Screen Printing. As a professional artist, he also makes greeting cards and scenery posters for another NGO, which have been sold internationally since 2010.



- Ms. Shanthi Rajmohan, diagnosed with kidney failure in 2001 and the longest-living patient on peritoneal dialysis in Southeast Asia, completed her mission of visiting every Tanker Foundation supported dialysis unit in Chennai. Her current project focuses on sustainability through a 'Training of Trainers' initiative and developing a comprehensive caregiver handbook with self-care tools including art therapy techniques.
- Ms. Kaiser Jahan transforms her own personal experiences with parental mental illness into community intervention through the Life Skills program, emphasising emotional regulation, social skills, problem-solving, and self-care for children from families affected by mental illness and for other children from vulnerable psychosocial backgrounds.
- Ms. Sowmiya coordinates educational scholarships for children with parents experiencing mental illness and from other vulnerable backgrounds, bringing unique empathy from similar childhood experiences to her role evaluating children's situations and facilitating various forms of educational assistance.

### **GOVERNANCE**

### **Board of Trustees**

Dr. Vandana Gopikumar – Founder Trustee

Ms. Vaishnavi Jayakumar – Founder Trustee

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Mr. Vikram Phadke – Trustee (CEO, Interspace Inc)

Dr. K Sujatha Rao - Trustee

(Former Union Secretary of the Ministry of Health and Family Welfare, Government of India)

Ms. R. Madhuri Menon – Trustee (Director at Amaya Management Consultants)

Ms. Soumya Rajan – Trustee (Founder & CEO at Waterfield Advisors)

### **Salary Details**

Gross salary plus benefits (INR per month)	Women	Men	Total
10,000-25,000	3	1	4
25,000-50,000	5	4	9
50,000-1,00,000	4	3	7
1,00,000>	0	1	1
Total	12	9	21

Total monthly payments made to consultants	Number of consultants
10,000 - 25,000	4
25,000 - 50,000	1
50,000 - 1,00,000	10
1,00,000>	0
Total	15

#### **Travel Details**

Total cost of National travel by Board members/staff/volunteers on behalf the organisation for 2024 - 25 is **INR 2,95,771** 

Total cost of International travel by Board members/staff/volunteers on behalf the organisation for 2024 - 25 is **INR NIL** 

### **Board of Trustees Meeting 2024-25**

Date	Attendance
6th July 2024	7
13th Sept 2024	8
14th December 2024	8

### Registrations

Permanent Account Number(PAN)/GIR No: AABTB3454A

Registered u/s 12A, Application No: AABTB3454AE20214

FCRA Registration No: 075901410, dated 2nd December 2015

Darpan Unique ID:TN/2017/0154620 | CSR Registration No: CSR00001557

### **Auditor**

Mr. Viji Joseph G Joseph & Co, Chennai - 600 031

### Internal Auditor

TR Chadha & Co LLP Chennai 600 002

### BALANCE SHEET AS ON MARCH 31.03.2025

LIABILITIES	AMOUNT (Rs) 31.03.2024	AMOUNT (Rs) 31.03.2025
General Fund	1,90,56,190	1,49,14,257
TOTAL	1,90,56,190	1,49,14,257
ASSETS		
Fixed Assets	1,49,15,858	1,38,03,434
CURRENT ASSETS, LOANS & ADVANCES		
Current Assets	8,55,631	7,13,831
Balance in Scheduled Banks & Cash-in-hand	42,44,844	31,55,381
Sub total (A)	51,00,475	38,69,212
Less : Current Liabilities (B)	9,60,144	27,58,389
Net Current Assets { (A) - (B) }	41,40,331	11,10,823
TOTAL	1,90,56,190	1,49,14,257

For **BALM TRUST** For **G. JOSEPH & CO.,** 

CHARTERED ACCOUNTANTS.

FRN: 001383S

BALRAJ VASUDEVAN HONORARY TREASURER

VIJI JOSEPH

(Membership No: 027151)

PLACE: CHENNAI

DATE: September 25, 2025

### **INCOME & EXPENDITURE ACCOUNT AS ON MARCH 31.03.2025**

PARTICULARS	AMOUNT (Rs) 31.03.2024	AMOUNT (Rs) 31.03.2025
INCOME		
Donation ( Non FCRA )	1,93,56,255	2,64,15,151
Foreign Contribution	7,69,145	-
Interest Income	2,10,460	2,51,817
Course Fees	5,13,002	1,71,691
Miscellaneous Income	24,829	81,001
Internship Fees	2,39,700	4,08,500
Training Fees	1,70,500	-
Excess of Expenditure over Income	28,60,340	41,41,932
TOTAL (A)	2,41,44,231	3,14,70.092
EXPENDITURE		
Education	1,17,03,337	1,86,27,397
Research	41,60,594	3,04,953
Social Action	43,64,360	61,13,366
Training and Capacity building	-	21,73,525
Administration	24,10,329	23,84,318
Assets Maintainance	15,05,611	18,66,533
TOTAL	2,41,44,231	3,14,70,092

For **BALM TRUST** For G. JOSEPH & CO.,

**BALRAJ VASUDEVAN** FRN: 001383S HONORARY TREASURER

VIJI JOSEPH PLACE: CHENNAI

(Membership No: 027151) DATE: September 25, 2025

CHARTERED ACCOUNTANTS.

### RECEIPT & PAYMENTS ACCOUNTS FOR THE YEAR ENDED MARCH 31.03.2025

PARTICULARS	AMOUNT (Rs) 31.03.2025	
RECEIPTS		
Opening Balance		
Cash	21,344	
Kotak Bank Ltd [A/c # 8411540818]	3,15,006	
State Bhank of India [FCRA A/c # 40454813488]	2,66,613	
Axis Bank Ltd [A/c # 13499436]	2,249	
ICICI Bank [A/c # 032901000112]	8,948	
Axis Bank Ltd [A/c # 35603962]	3,879	
Kotak Mahindra Bank [A/c # 8411432649]	8,15,996	
Kotak Mahindra Bank [A/c # 8411622477]	21,23,031.51	
IDFC Bank Ltd [A/c # 10061721449]	4,34,010	39,91,076
Foreign Contribution Received		-
Donation and Programme Receipts ( Non - FCRA )		2,64,15,151
Bank Interest		3,62,636
Course Fees		1,71,691
Miscellaneous Income		86,851
Internship Fees		4,08,500.00
Expense Payable		12,39,245
Sundry Creditors		5,61,755
Loans & Advances		41,131
TOTAL		3,32,78,036
PAYMENTS		
Education		1,86,27,397
Research		3,04,953
Administration		23,87,073
Social Action		61,13,366
Training and Capacity building		21,73,525
Assets Maintenance		1,14,823

### **RECEIPT & PAYMENTS ACCOUNTS** FOR THE YEAR ENDED MARCH 31.03.2025

PARTICULARS	AMOUNT (Rs) 31.03.2025	
PAYMENTS		
Sundry Creditors		
Loans & Advances	16,000	
Fixed Deposit	18,465	
Fixed Assets	6,39,286	
Closing Balance		
Cash in hand	247	
Axis Bank Ltd [A/c # 13499436]	2,317	
ICICI Bank [A/c # 032901000112]	8,948	
Axis Bank Ltd [A/c # 35603962]	3,879	
Kotak Mahindra Bank [A/c # 8411432649]	7,94,017	
Kotak Mahindra Bank [A/c # 8411622477]	1,05,048	
IDFC Bank Ltd [A/c # 10061721449]	5,77,110	
Kotak Bank Ltd [A/c # 8411540818]	15,051	
State Bank of India [FCRA A/c # 40454813488]	19,809	
Axis Bank [A/c #924010062719195]	13,56,723	
TOTAL	3,32,78,036	

For **BALM TRUST** For G. JOSEPH & CO.,

CHARTERED ACCOUNTANTS.

BALRAJ VASUDEVAN FRN: 001383S

HONORARY TREASURER

VIJI JOSEPH PLACE: CHENNAI

(Membership No: 027151) DATE: September 25, 2025

### INDEPENDENT AUDITOR'S REPORT

### **Opinion**

We have audited the financial statements of Banyan Academy of Leadership in Mental Health Trust ("the Trust") which comprise the Balance Sheet at March 31, 2025 and the Income and Expenditure Account for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Trust as at March 31, 2025, and of its excess of expenditure over income for the year then ended in accordance with the Accounting Standards issued by the Institute of Chartered Accountants of India (ICAI).

### **Basis for Opinion**

We conducted our audit in accordance with the Standards on Auditing (SAs) issued by the Institute of Chartered Accountants of India (ICAI). Our responsibilities under those Standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Trust in accordance with the Code of Ethics issued by the Institute of Chartered Accountants of India and we have fulfilled our other ethical responsibilities in accordance with the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation of these financial statements that give a true and fair view of the financial position and financial performance of the Trust in accordance with the accounting principles generally accepted in India. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentation of the financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Trust's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Trust or to cease operations, or has no realistic alternative but to do so.

The Trustees are responsible for overseeing the Trust's financial reporting process.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgement and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Trust's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Trust to cease to continue as a going concern.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

For G JOSEPH & CO., Chartered Accountants, FRN: 001383

Viji Joseph.

Partner.

Membership No.: 027151

[UDIN: 25027151BMOLOU5435]

Place: Chennai

Date: September 25, 2025.

1. SIGNIFICANT ACCOUNTING POLICIES

(a) Accounting convention: The financial statements are prepared under historical cost

convention. Revenues are recognised and expenses are accounted on their accrual with

necessary provisions for all known liabilities and losses.

(b) Fixed Assets: Fixed assets are stated at written down value inclusive of all expenditure related

to acquisition less depreciation.

(c) Depreciation: Depreciation on fixed assets has been provided on the basis of the rates

prescribed in the Income Tax Act.

(d) Investments: Investments are stated at cost plus accrued interest, if any.

(e) Inventories: Nil.

(f) Revenue Recognition: Donations and other receipts are recognised on receipt.

(q) Foreign Currency Transactions: Receipts are accounted at the values at which they are

realised.

(h) Employees retirement benefits: Liabilities towards employees retirement benefits would be

accounted as and when such liability arises.

2. NOTES ON ACCOUNTS

A. Contingent Liabilities not provided for/not considered: Nil (Previous Year: Nil)

B. Liabilities disputed not provided for and under appeal: Income Tax: Nil (Previous Year: Nil)

C. No Provision for taxation has been made as there is no taxable income under the provisions of

Income Tax Act, 1961 as computed by the management.

For **BALM TRUST** For **G. JOSEPH & CO.**,

CHARTERED ACCOUNTANTS.

BALRAJ VASUDEVAN FRN: 001383S

HONORARY TREASURER

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DATE: September 25, 2025 (Membership No: 027151)

