



REPORT



National Programme on Climate Change and Human Health MINISTRY OF HEALTH AND FAMILY WELFARE





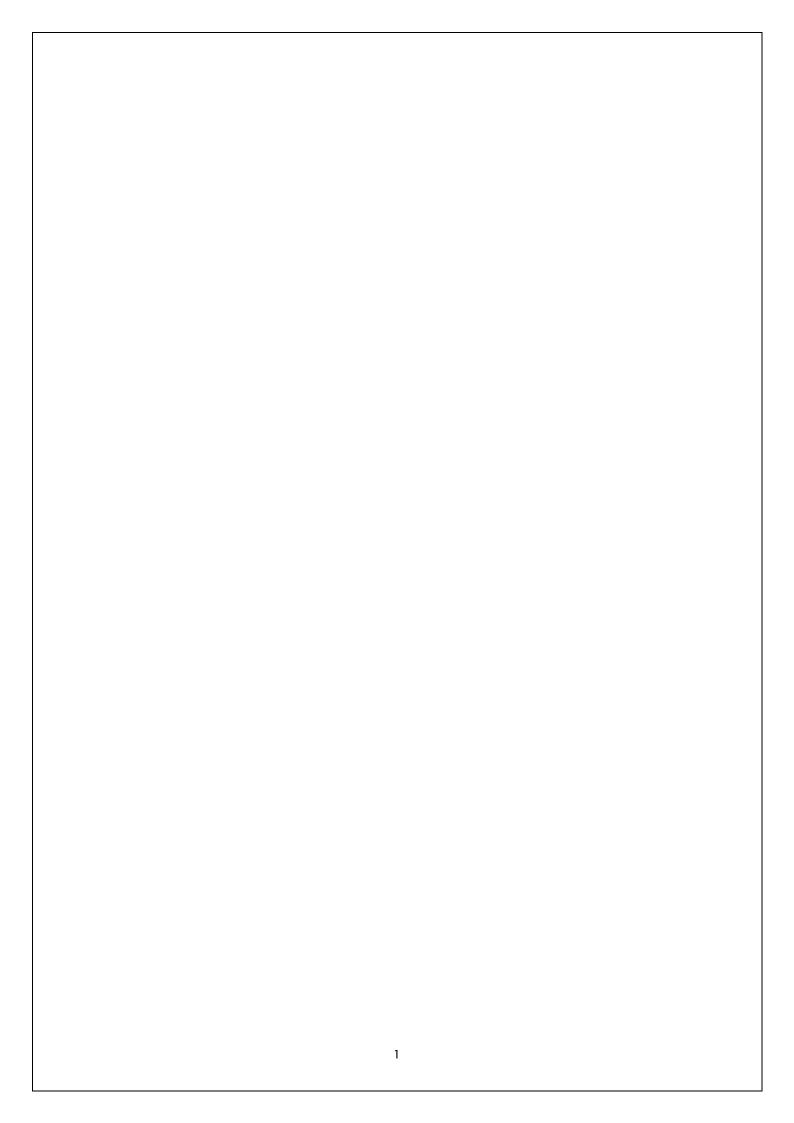


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Introduction

The Ministry of Health & Family Welfare launched the National Programme on Climate Change and Human Health (NPCCHH) in 2019. One of the main objectives of the programme is to create awareness among general population (vulnerable community), health-care providers and Policy makers regarding impacts of climate change on human health. National Centre for Diseases Control (NCDC) was identified as the nodal agency for 'Health Mission' by Ministry of Health & Family Welfare (MoHFW), Government of India. For the NPCCHH, NCDC recognised 17 Centres of Excellence (CoE) one of which was the National Institute for Mental Health and Neuro Science (NIMHANS) in Bengaluru, which was designated as a CoE for Mental Health.

In this regards in collaboration with NPCCHH, NCDC AND NIMHANS the following activities has been carried out since January 2021 and reported as follows:

Visit by the Delegates

A meeting was held between experts from National Institute of Mental Health and Neuro Sciences (NIMHANS), Bengaluru and **Dr. Purvi Patel**, Senior Consultant from National Programme on Climate Change and Human Health (NPCCHH), NCDC on July 14, 2021 (11am). Dr. Pratima Murthy Director, NIMHANS welcomed everyone. Dr. Naveen facilitated the meeting

- Dr. Purvi provided details of NPCCHH program objectives and role of a CoE in drafting subject-specific, health national adaptation plan (H-NAP). Developing training modules and IEC materials along with helping subject-specific chapter in formatting state action plans on climate change and human health was discussed.
- Overview of adaptation plan sections with example of adaptation plan on air pollution related illnesses and need for developing a current version of H-NAP on mental health was discussed.
- Draft version of voice over module for ToT training was discussed to add more technical details and action points

Through these research projects, the institute has prepared the following which can be modified for planning- NAP

- A tool for adaptation assessment
- Training modules

- IEC material on climate impact, dos & don'ts, emotional reactions, support vulnerable and marginalized populations
- Training of trainers with Anganwadi and community health workers are conducted on priority disease identification

Agenda for the visit to NIMHANS:

- 1. Take a meeting with the CoE team and introduce them to the scope of NPCCHH through a PPT presentation.
- 2. Update the current version of subject specific HAP with CoE team Officer will submit next version of HAP along with tour report.
- 3. Exchange views on what the scope of activities CoE can undertake & their capacity to assist NPCCHH. Draft MoU may be used as a guidance document.
- 4. If training slides with voice-over have yet not been completed, to get it completed and submit along with tour report.

Dr. Pratima Murthy	Director, NIMHANS	80-26995001
Dr. C. Naveen Kumar	Prof Psychiatry, NIMHANS	9448504903
Dr. V. Senthil Kumar Reddi,	Prof. Psychiatry, NIMHANS	9482229970
Dr. K. Sekar	Prof & HoD CPSSDM, NIMHANS	9845214397
Dr. Aarti Jagannath	Associate Prof PSW, NIMHANS	9448150690
Dr. K.S. Meena	Additional Prof & HOD.MHE, NIMHANS	8762689735
Dr. Eesha Sharma	Assistant Prof CAP, NIMHANS	7607644446
Dr. Seema Mehrotra	Prof & Hod Clinical Psychology, NIMHANS	9448503853
Dr. Suresh Bada Math	Prof Psychiatry, NIMHANS	9845141918
Dr. Rahul Patley	Senior Resident Psychiatry, NIMHANS	9704140658
Dr. Rajani Parthasarathy	Deputy Director, Mental Health, Karnataka	9845329154
Dr. Purvi Patel	Senior Consultant, NPCCHH, NCDC	7567514863



Outcome Dissemination and future Strategy Workshop

The agenda for the meeting held on 15 September 2021 was to conduct a workshop on the theme "Health Adaptation and Resilience: Advancing Strategies Knowledge and Capacities." It was hosted and organised by National Institute of Disaster Management, New Delhi. The workshop was begun with an Inaugural ceremony followed by the Dissemination Session which included Document release of NHAP for disaster related illness. The Session 3 was a panel discussion on Future Strategy Recommendation chaired by Dr. Aakash Shrivastava. The Workshop concluded with a Valedictory session.



डॉ. अनिल कुमार गुप्त आचार्य एवं अध्यक्ष

Dr. Anil Kumar Gupta rofessor & Head Division of Environment Climate ind Disaster Risk Management

राष्ट्रीय आपदा प्रबंधन संस्थान National Institute of Disaster Manageme ONE STREET STREET SPRING

Ministry of Home Affairs, Govt. of India

भारत व १६, व्यक्ति वी, वीकट ३ होकट २६, विहिनी, विस्त्री

Plot No. 15, Block B, Pocket 3 Sector 29, Robini, Delhi -42

Reference: HERCAP/NIDM-WHO/202

Date: 10th September 2021

Madem /Sir,

Climate change is known to aggravate disasters by contributing to hazards and vulnerability This leads to an increase in spread, intensity and complexity of health consequences Government of India under the National Action Plan on Climate Change (NAPCC) has launched a National Programme on Climate Change and Human Health (NAPCCHH). The National Institute of Disaster Management (NIDM), New Delhi has been designated as a Centre of Excellence by the Ministry of Health & Family Welfare (MoHFW).

- NIDM has prepared the 'National health adaptation plan (NHAP) for disaster related illnesses' along with a training manual on Health Adaptation and Resilience to Climate Risks and a compendium of case studies on Health Adaptation and Resilience to Climate Change and Related Disasters with the support from World Health Organisation (WHO) India and National Centre for Disease Control (NCDC). A workshop is being organised on 15th September 2021 at 11:00AM - 01:00PM online using Cisco WebEx platform to release these documents and to discuss the future strategy.
- You are, therefore, requested to kindly join the workshop as an expert panelist, in case you are not able to attend due to pre-occupation, please nominate a suitable senior official to attend the workshop as a participant. The Concept note for the workshop is attached herewith for your kind information. Further details including web link for the meeting would follow. Ms. Atisha Sood (Research Fellow), HER-CAP Project, M. +919805513998 Email: soodatisha.gemail.com, hereap midm.gemail.com, would be available for any further queries.

egards.

(Anil K Gupta)

Directors of CoEs/ Institutes/ Departments of Ministry of Health and Family Welfare, Gol (As per the list attached)

आपदा प्रबंधन महाविचार: पूरा भारत भागीदार

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Outcome Dissemination and Future Strategy Workshop

on

"Health Adaptation and Resilience: Advancing Strategies Knowledge and Capacities"

Date: 15 September 2021 at 11:00 AM to 01:00 PM

Organised & Hosted By: National Institute of Disaster Management, New Delhi

		T	entative Ag	genda		
SESSION 1	Inaugural Session					
11:00 AM	Context Setting – Prof (Dr) Anil K Gupta Head, ECDRM Division, NIDM					
11:10 AM	Welcome Address - Maj. Gen. Manoj Kumar Bindal Executive Director, NIDM					
11:20 AM		Keynote Address – Dr. Sujeet Kumar Singh				
11:30 AM		Special Address – WHO India Representative				
11:40 AM	Remarks – UNICEF, NIHFW, ICMR					
SESSION 2	Dissemination Session					
11:55 AM		Document Release				
12:05 PM	Climate Change, Environment and Health - Mr. Harshit Sharma					
12:12 PM	Document Development Process and Key stakeholders- Ms. Atisha Sood					
SESSION 4	Fu	ture Strate	gy Recomi	nendation	(Panel Discu	ission
	Future Strategy Recommendation (Panel Discussion) Chair - Dr. Aakash Shrivastava Co - Chair - Sh. Manjeet S. Saluja					
12:20 PM	Dr. Ravindra Khaiwal	Dr. Nitish Dogra	Prof. R K Mall	Dr. Jugal Kishore	Dr. Saurabh Dalal	Dr. Meena Sehgal
SESSION 5			Valedic	tory Sessio	n	
12:50 PM	Closing R	emarks - M	laj. Gen. Ma	noj Kumar	Bindal, <i>ED N</i>	IDM
12:58 PM	Vote of Thanks – Dr. Anjali Barwal					

Letter of grant released

28/21, 3:42 PM

SANCTION LETTER Jpg

No. 27/NCDC/NPCCHH/2021-22/CoE (NPCCHH)-MOU Government of India
National Centre for Disease Control 22- Shamnath Marg, Delhi-110054

Dated the 20.12.2021

The Pay & Accounts Officer, Ministry of Health and Family Welfare 22-Sham Nath Marg.

Subject: Release of Grants-in aid under "National Programme for Climate Change and Human Health FY 2021-22"- reg.

Sir.

I hereby request you to release the funds to the extent of Rs.10,00,000/- (Rupees Ten Lakhs only) during the year 2021-22 for implementation of the above programme as per concurrence received from Integrated Finance Division vide CD No. C-1791 dated 25.10.2021.

-	Name of the Institute	Amount (Rs.)
S No.		5.00,000/-
	National Institute of Mental Health and Neurosciences-NIMHANS Bengaluru	5 00 000/-
1	Nutrition Foundation of India, New Delhi	
-	Total	10,00,000/-

1. The fund is Non-Recurring in nature.

2. The sanction order is being issued in accordance with Rule 228 to 245 of General Financial Rules, 2017.

 The accounts of the grantee institutions/organizations shall open to inspection by the sanctioning authority and audit both by C& AG of India under the provisions of CAG (DPC) Act,1971 and internal audit by office of CCA of the Ministry of Health & Family Welfare.

4. The Grants-in-Aid is releasing under India Covid 19 Emergency Response And Health Systems Preparedness Package Eac

The Grant-In-Aid is releasing first time to the Institute.

The Expenditure covered by this sanction will be met from the funds provided under Demand No. 44. Major Head - 2210, Minor Head-06101- Sub Head - 07- India Covid 19 Emergency Response And Health Systems Preparedness Package Eac, 070931- Grants- in-aid during the financial year 2021-22.

7. Name of Scheme - National Programme for Climate Change and Human Health.

8. This sanction issues with the concurrence of Finance Division vide CD No.C-1791 dated 25.10.2021.

Encl: As above

Yours faithfully,

Assistant Director & DDO for Director

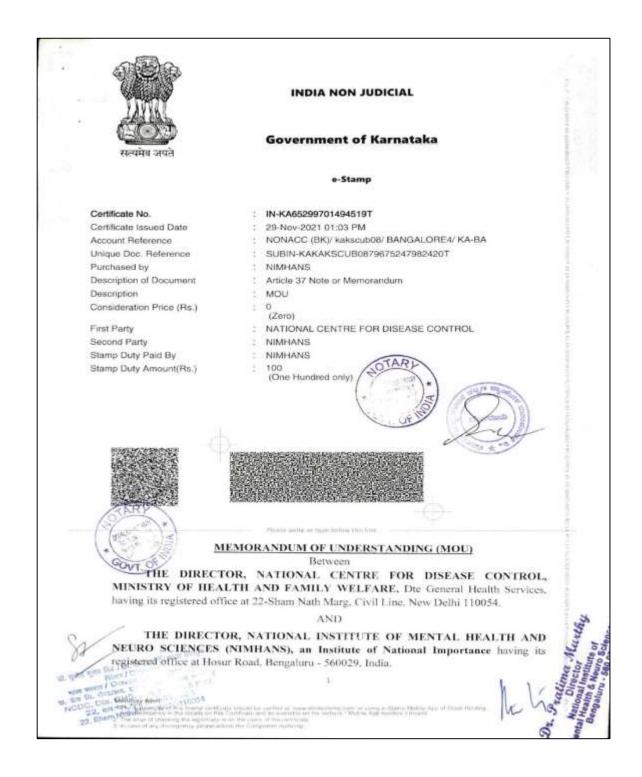
Copy to 1 Director, National Institute of Mental Health and Neurosciences-NIMHANS Bengaluru-560029

2. Director, Nutrition Foundation of India, New Delhi- 110016

3. HOD (National Programme for Climate Change and Human Health), NCDC, Delhi

4. Budget Section, NCDC, Delhi

Signing of Memorandum of Understanding (MoU)



1. Preamble

- 1.1. WHEREAS the Government of India had constituted the Prime Minister's Council on Climate Change (PMCCC) for a coordinated response towards issues related to climate change at the national level and for providing oversight for formulation of action plans in the area of assessment, adaptation and mitigation of climate change and their monitoring. The 'Mission on Health' was proposed by reconstituted PMCCC in January 2015 and the Ministry of Health and Family Welfare, Government of India designated as the nodal ministry for the mission.
- 1.2. Under the 'Mission on Health', the National Action Plan for Climate Change and Human Health (NAPCCHH) has been prepared by an Expert Group constituted under the MoHFW and it is updated regularly to achieve health sector resilient to climate change. National Centre for Disease Control (NCDC) is being designated as the Nodal Technical agency for coordination with multi-sector experts and for undertaking activities listed under the NAPCCHH.
- 1.3. The NAPCCHH outlines strategies to reduce climate sensitive illnesses through integration with other National Missions for Climate Change of Government of India as well as through health and non-health programmes run by various ministries. NAPCCHH aims to strengthen health system to protect the citizens of India especially the vulnerables like elderly, children, women and marginalized population against climate sensitive illnesses. To achieve the objectives of the Health Mission, the MoHFW approved National Programme on Climate Change and Human Health (NPCCHH) under National Health Mission (NHM) in February 2019.

1.4. AND WHEREAS the main components of the NPCCHH programme are

- Generating Awareness: IEC campaigns, sensitization workshops & advisories for effective information dissemination.
- Capacity Building: Training of health professionals; guidelines & workshops for effective capacity building, inclusion of climate change in medical curricula.
- Strengthen Health Sector Preparedness: development of health adaptation plans; vulnerability need assessment; enhanced surveillance of climate sensitive diseases, developing green and climate resilience in healthcare facilities.

intersectoral coordination with other national programmes and organisations.

Dr. Pratima Marthy
Mational Institute of
Mental Health & Neuro Science
Bengaluru - 550 022

- Research & Development: steering research for climate sensitive diseases through Indian Council of Medical Research (ICMR), Department of Science and Technology (DST) and other research organization
- 1.5. WITH REFERENCE to above NPCCHH objectives, premier institutes from across the country have been identified as Centres of Excellence (COE) under the programme to deal with specific climate sensitive diseases/issues.
- 1.6. AND WHEREAS the Director, NCDC will be the grantor and the identified Centres of Excellence as the Grantee shall be the parties to this Memorandum of Understanding
- 1.7. NOW THEREFORE, below are the terms and conditions under which the signatories to this MoU, the Director, NCDC and the Grantee party, have agreed to set out as herein below;

2. Duration of MOU

This MOU will be operative with effect from the date of signature of both the parties concerned and will remain in force till 31st March 2022. This MOU may be terminated before the expiry of its term by the mutual consent of the parties concerned.

3. Details of the Grantee party: Name, designation, address, contact number and email of the dedicated focal person from the Grantee party, who shall be responsible for the above activities and will liaison with NCDC focal person

Name: Dr Naveen Kumar C

Designation: Professor of Psychiatry

Address: National Institute of Mental Health and Neurosciences

(NIMHANS)-Hosur Road, Bangalore, Karnataka-560029

Contact no: +91-9448504903

E- mail address: cnkumar1974@gmil.com

4. The commitments of Grantee party

4.1. The identified Centers of Excellence (Grantee party) are expected to deliver within stipulated timelines the following deliverables on climate sensitive subject allocated to them

SLNo	Deliverables for NIMHANS	Minimum deliverable quantity
1	To develop subject specific health action plan	01 HAP
	(HAP) on climate change and mental health.	100

Director
National Institute of
Mental Health & Neuro Science

2.	To develop Standard Operating Procedures (SOPs) related to implementation of action plan and subject related advisory/ guidelines on climate change and mental health.	
3	To support States/UTs in development of relevant chapter/s in their State Action Plan on Climate Change and Human Health (SAPCCHH).	One per State/UT
4	and mental health a) State Nodal Officer Climate Change, District Nodal Officer Climate Change and Consultant Climate Change (1 module including exercises) b) Medical Officers (1 module) e) Para medical officers & Health care workers (1 module) d) Community level (2 module) for vulnerable population group such as women/ children/ elderly/ different type occupations)	Module in English and /or Hindi
5	To conduct training of all on climate change and mental health • State Nodal Officers Climate Change and Consultants Climate Change (36 States/UTs). To T is online.	72 participants (36 SNOs +36 Consultants)
6	To design how to integrate climate change in existing surveillance system. Run a pilot or do a dummy exercise and provide report of the pilot/exercise with respect to climate change and mental health.	01
7	To develop monitoring and evaluation system for action plan implementation including surveillance (CRY)	01
8	To develop BC on eligate change and mental health.	05 videos (1 min each) 05 audios 10 templates for print IEC

	poster, banner with graphics	
	10 GIF	
To prepare report and document best practices. All articles should carry mention of NPCCHH.	To share annual report (one report)	
	To share best practice document (1 document)	
	To share articles for quarterly newsletter	
	To publish article in any scientific or generally read journal/ magazine	

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- 4.2. Grantee party may complete the listed deliverables by utilizing the GIA amount for arranging resources as per their requirements; by hiring a consultant, contractual staff, support staff or paying out honorarium to existing staff or contracting services of external agency or travel expenses or contingency expenses, as long as properly billed and accounted as per government rules.
- 4.3. Deliverables should be timed such that half of listed work is delivered in midterm.
 Grantee party will report progress of deliverables to NCDC and organize midterm review with Technical Experts Committee.
- 4.4. Grantee party will discuss details of deliverable products with NPCCHI and Technical Experts Committee during development process.
- 4.5. Grantee party whose assigned subject does not necessarily have possibility of any of the aforementioned deliverables, will discuss with NPCCHH on how they may implement other suitable deliverables for the same remunerations. Only after official approval can such changes be accepted.
- 5. The commitments of NCDC is
 - 5.1. The Grant in Aid (GIA) of Rs 5,00,000 (Five Lakh Rupees) will be provided by NCDC to Grantee party to carry out above activities.
- Set out below are the Terms and Conditions under which Grantee party agrees to carry out the above-mentioned assignment

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Dr. Stallma Musthy
Director
National Institute of
Mental Health & Neuro Sciences
Bengaluru - 560 029

- 6.1. The Director, NCDC may, if found necessary, postpone or cancel the assignment and/or shorten or extend its duration. However, every effort will be made to give Grantee party notice of any changes; notice of about 30 days. In the event of termination, the Grantee party shall be paid for the services rendered for carrying out the assignment to the date of termination, and the Grantee party will provide the Director, NCDC with any documentation and product developed under the contract prior to the date of termination.
- 6.2. Whereas, this contract, its meaning and interpretation and relation between the parties shall be governed by the Laws in force applicable under the Union of India.
- 6.3. Whereas all documents like Health Adaptation Plan, Guideline, SOP, Adviosry, Training Modules, IEC materials, Surveillance and Monitoring and Evaluation tools, documents and records generated by Grantee party in the performance of the services shall become and remain the property of the Director, NCDC. The Grantee party shall not use them for purpose other than this contract without the prior written approval of Director, NCDC. The submitted material will not have inclusion of logo or symbol or emblem, design, or trade mark of any organization or even the CoE. The contributions made by the Grantee party, the Institution and their Scientists will be appropriately acknowledged in an acknowledgement page of the final document, in consultation with NPCCHH. Products shall only bear reference to National Programme on Climate Change and Human Health, NCDC, MoHFW, GoL Publications will have authorship from both the involved institutions and the NPCCHH programme officials. Prior approval of Director, NCDC will be required before submission of any work to a scientific or other journal.
- 6.4. Whereas the Grantee party undertakes to carry out the assignment in accordance with the highest standards of professional and ethical competence and integrity.
- 6.5. All submitted products will be presented by the Grantee party to constituted technical expert committee and any suggestions by technical committee on the improvement of the product needs to be delivered by Grantee party in the stipulated timeline,

6.6. Half of the above mentioned deliverables in para 4 must be executed within mid term with a submission of clear vision about how the remaining activities will be

Dr. Fratima Murth

Mattonal Institute of Mental Health & Neuro Science: Bengaluru - 550 029 executed before the end of MoU. Failure to meet delivery on timeline may result in cancellation of MoU and refund of remaining balance.

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- 6.7. The Grantee party shall pay the taxes, duties fee and other impositions levied under the applicable law which are to be computed within the Grant-in Aid amount. If any dispute arises in this regards, Director, NCDC, Delhi is not liable for that.
- 6.8. The Grantee party also agrees that all knowledge and information not within the public domain which may be acquired during carrying out of this Contract, shall be for all times and for all purpose, regarded as strictly confidential and held in confidence and shall not be directly or indirectly disclosed to any person whatsoever, except with Director, NCDC's written permission.
- 6.9. The fund for this program will be transferred through Public Financial Management System (PFMS) before commencement of activities. Grantee party shall use the Expenditure Filing Module (EFM) of PFMS for expenditure filling and submit statement of expenditure and utilization certificates within 15 days of the closure of each activity. For the purpose of maintenance of accounts relating to above funds, the Grantee party shall open a separate current bank account in the name of controlling officer of the institute or utilize the existing project account of the institute. Grantee party shall submit the mandate form, maintain books of account separately and submit the audited accounts; the accounts should be audited by an auditor who is enlisted from CAG empaneled agency. The Grantee party shall submit the certified copies of vouchers and statement of activity wise expenditure, bill wise summary sheet of expenditure and Utilization Certificate (in the attached format), after completion of activity to Director, NCDC, Delhi within 15 days. The expenditure will then be adjusted against the Grant in Aid paid to the institute. The Audit Fees should be charged under the head of "Incidental Charge". The format of Utilization Certificate is attached as per GFR12-A of GFR rule, 2017. The Institutions that do not have PFMS account will open one by submitting requisite documents and Mandate forms.
- 6.10. The Grantee party should follow the General Financial Rules 2017 for procurement of Goods and services and deduct TDS while making various payments as per Income Tax Act/GST.

Director, NCDC will not be liable to pay any liability on account of nonfulfilment of Statuary rules/ obligations on the part of Grantee Party.

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- 6.12. If the work is not satisfactorily completed (and, where applicable, delivered) by the date fixed in this agreement and /or if any financial statement required is not satisfactorily submitted to NCDC in accordance with general condition in point 6 above. NCDC may specify an additional period within which this agreement must be satisfactorily performed. Normally such additional period should be of a maximum of 30 days, unless otherwise agreed by both the parties.
- 6.13. Non-compliance of the commitments and obligations set out in the MoU, upon failure of Grantee party to make satisfactory progress may require Director, NCDC and Grantee party to review the situation committed through this MoU leading to suspension, reduction or cancellation thereof. In case of unsatisfactory progress in the project, every effort would be made by Director, NCDC and the Grantee party to bring the project back to rail through mutual consultations. In event of irretrievable situation, the funding may be suspended, and MoU also be terminated as per procedure.
- 6.14. All the documents and products submitted by Grantee party will be assessed by a Technical Expert Committee for Standard Quality Assurance for reviewing and updation of the said documents. The performance of the Grantee party and its activities mentioned in the MoU will be assessed by the Technical Expert Committee. Only, if the performance of the Grantee party is found satisfactory, the Grantee party will continue to be Centre of Excellence under the NPCCHH.
- 6.15. In case of any irregularity or dispute arising out of this MoU or interpretation of the terms and conditions of this MoU, both the parties agree to settle the matter amicably through mutual discussion by Director, NCDC and the Grantee party

7. Definitions:

7.1. Health Action Plan: This is a detailed action plan on the subject assigned to CoE, which details what, how, and when needs to be done at state, district and sub district levels by varied health cadre professionals to achieve climate resilience in given subject area. This document can have literature background and general lagout of principles for explanation of subject area. The details on activity can be relatively broadly listed whilst more details of activity would go in SOP document.

7.2. Standard Operation Protocol: This is a more detailed version of the Health Action
* Plan and has only mention of activity matrix with all details of what, how, when and

who. It can also have estimation of budget for carrying out activities. It would be the blueprint or "How to do" manual for the Health Action Plan.

- 7.3. Guidelines/Advisory: These are documents that will be developed on need basis as and when certain specific knowledge is sought on subject assigned to CoE.
- 7.4. State Action Plan: The SAPCCHHs (State Action plan on Climate Change and Human Health) are a framework of action for responding to the effects of climate change on human health in each state. The plans follow a uniform structure, setting out the unique vulnerabilities of the state in relation to a changing climate and the state government's approach for adapting to current and future impacts. It has chapters on each of the subject area relevant to which CoEs exist.
- 7.5. Dummy Table: An outline of planned tables and figures which bring into focus of what you are doing and how will you display your result.
- 7.6. Training Module: These are learning structures for imparting knowledge and skills in various cadre of health program officers, medical officers, health workers and also community. They should have content to increase knowledge, have case studies, exercises, learning evaluation tools. They should be designed such that take in account the intellect level of the target audience. Those in levels of program officers and medical officers should be designed to suffice on selfrun mode. Those in levels of health workers and community should be designed to have facilitator and trainee parts.
- 7.7. Surveillance System: CoEs are expected to design a surveillance system to cover subject area assigned. Some assigned subject areas may have existing surveillance system in the country. In such case, this needs to be studied for how the climate variables will be integrated. Wherever, no existing surveillance exists, a new system needs to be deigned. A pilot of the same may be undertaken to check the feasibility of the design.
- 7.8. Monitoring and Evaluation Tool: CoEs are expected to design a Monitoring and Evaluation Tool to evaluate actions undertaken by states and districts in subject area assigned. The tool will suggest indicators and evaluation formats along with timelines. A pilot of the same may be undertaken to check the feasibility of the design.

7.9. Public Financial Management System: The Public Financial Management System
Y (PFMS) is a web-based online software application developed and implemented by

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the Controller General of Accounts (CGA), Department of Expenditure, Ministry of Finance, Government of India, PFMS started during 2009 with the objective of tracking funds released under all Plan schemes of Government of India, and real time reporting of expenditure at all levels of Programme implementation.

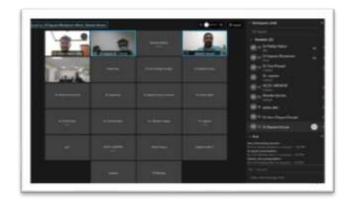
7.10. Expenditure Filing Module: The process of feeding the day to day transactions as recorded in the eash book on the PFMS portal by an agency registered on PFMS, is called expenditure filing and expenditure filing is done through Expenditure Advance and Transfer (EAT) Module of PFMS. An agency should be registered on PFMS for filing expenditure. On registration of an agency, it gets an Agency Admin log in and password.

In witness whereof, the parties have executed	this agreement on this
day of	(month) &(year)
Signature. Dr. Suject Kumer Single Dr. Suject K. Singham want Corner Transport of Interest of Director, National Centre for Disease	Dr Pratima Murthy Dr. Pratima Marth Director, National Institute of Montal Feelth & Neuro Science
Control 22. Shamiltan	Mental Health and Bengaluru - 560 029
Ministry of Health and Family Welfare	Neurosciences
Dte General Health Services	(NIMHANS), Hosur Road.
22-Sham Nath Marg	Bangalore, Karnataka-S60029
Civil Line, New Delhi 110054	GOV 3 Simon 2
1 1	Witness 2 Signature. Selected subject
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Training programmes

1. National programme on climate change and Human Health (NPCCHH)- Online training schedule of all State and District Nodal officer on climate change and Human Health:

As a part of the National Programme on Climate Change & Human Health initiative, the National Institute of Mental Health and Neurosciences (NIMHANS) - Bengaluru has been designated as a 'Centre of Excellence' for Mental Health, by the Union Ministry of Health and Family Welfare, Govt. of India. It was proposed to train all healthcare workers on the topic 'climate change and its influence on mental health'. As may be noted, climate change is one of the great challenges of recent times having potential to adversely affect large proportions of population. As a part of "Restructuring National Programme on Climate Change and Human Health activities" it was requested that each Centre of Excellence (CoE) to deliver the voice over on ppt formats for respective climate sensitive disease for training of State and district officers based on WHO-SEARO module and with the relevant Indian examples. The community team has prepared voice over presentation as a training module for all the healthcare workers and nodal officers in the country. This was presented in the above said programme which was held on 12/8/2021 between 3.45-4.20pm on topic "Mental health associated with Climate change", Around 257 participants (195 Non-medical Officers and 77 Medical officers) attended the programme where existing literature about the impacts of climate change in various states of India and Interventions to promote mental wellbeing of the population was discussed.





(Online training for all State and District Nodal officer on climate change and Human Health)

2. Training on Climate change and Health Issues

NPCCHH conducted a training program on Climate change and Health Issues from 10th august to 13th august, 2021, 2:00pm- 5:00pm. The objective of the training was Capacity building for state program stakeholders on 'Climate Change & Health Issues'. On 12th august 2021, NIMHANS/ Dr. Patley Rahul, Senior Resident, Community Psychiatry, presented on Mental health associated with Climate change.

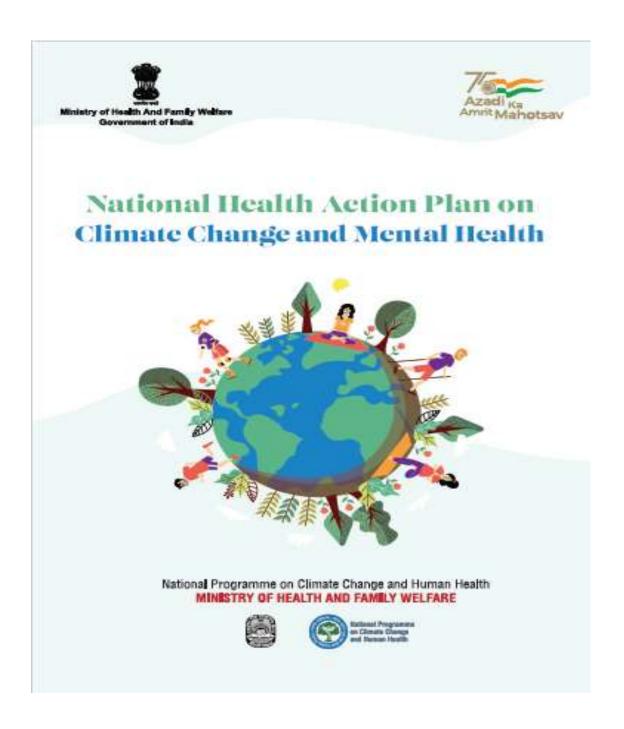


(NPCCHH conducted a training program on Climate change and Health Issues for state program stakeholders)

Deliverables

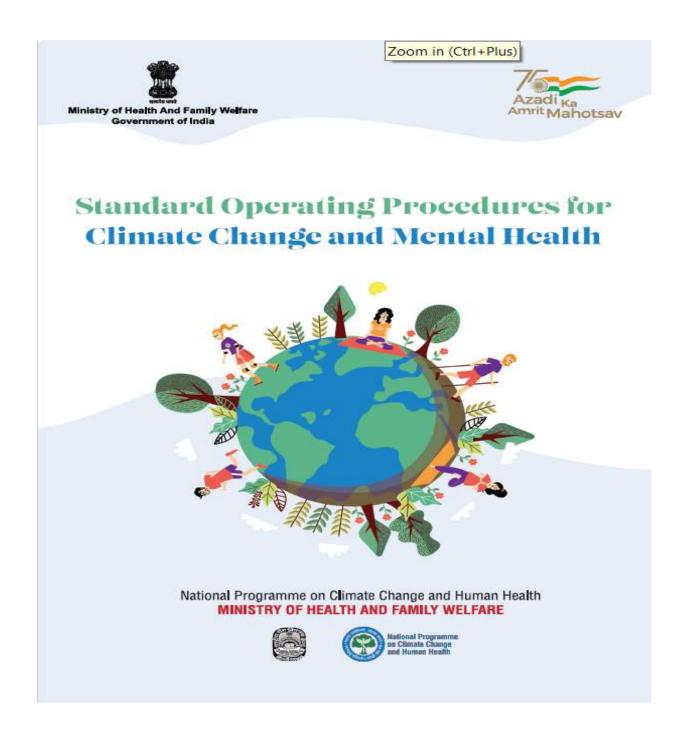
Health Action Plan (HAP)

Climate change and mental health under NPCCHH is to develop a comprehensive health system response to prevent and control mental health impacts due to climate change. In this regard, a comprehensive health action plan developed on climate change and mental health



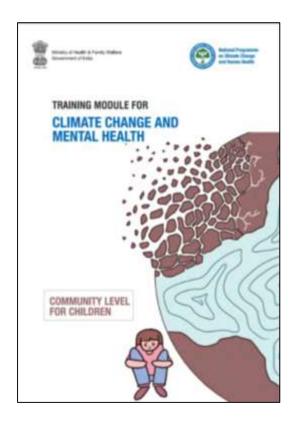
Standard Operating Procedure

The Standard Operating Procedure (SOP) is a document that defines and lays down procedure to be followed for Identifying, assessing and treating patients with Mental illnesses due to climate change. It has well defined segments for Medical Officer and Para-medicals which enlists the roles and responsibilities they have. The document also pictorially depicts the Monitoring and Evaluation program along with the Surveillance data flow. It talks about who will collect the data from the PHC, District hospital and how it will reach the State Nodal Officer.



Training Manuals

The team has developed 5 different types of training modules for Medical officers, Consultants, Para- medical officers and State and district Nodal officers. This module main aim is to make easy to find out the problem and provide treatment in an initial stage. As all knows people who are working in rural aria or especially remote areas which are victims for frequent climate changes its difficulty to find out the common mental illness (CMD) and other mental illness. So keeping all this in mind developed these modules which help Medical officers, Consultants, Para- medical officers and State and district Nodal officers finding out the needy people and treat them in a right time.





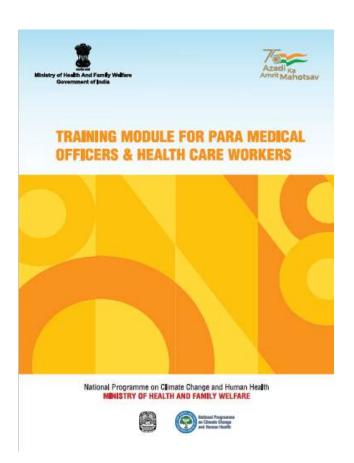


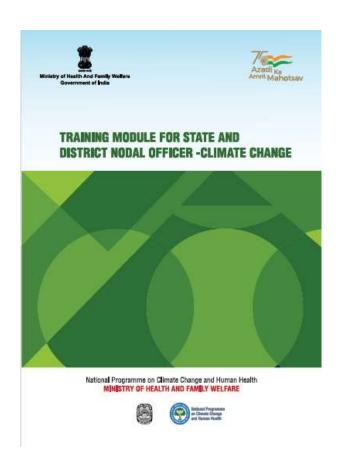


National Programme on Climate Change and Human Health MINISTRY OF HEALTH AND FAMILY WELFARE









Surveillance

Surveillance is "the ongoing, systematic collection, analysis, interpretation, and dissemination of data regarding a health-related event for use in public health action to reduce morbidity and mortality and to improve health". Analysis of mental health and other health issues has shown significant associations between mental illness and health risk behaviours (eg, smoking, obesity, physical inactivity), chronic disease (eg, arthritis, diabetes, cardiovascular disease, asthma). There has been association of mental health problems with climate change. So, having a surveillance system which can will help in predicting the trends of the psychological problems due to climate variability will enable us to be ready for action at community, facility health and governance systems. The following are the approaches team has incorporated in surveillance document.





Surveillance for Climate Change and Mental Health



Newsletter

A newsletter is a printed or electronic report containing news concerning the activities of a business or an organization. As a part of NPCCHH program Climate change and Mental Health, the team developed a comprehensive newsletter containing brief information about various training programs held, Articles written by Experts in the field of Mental Health.

Information Education Communication (IEC)

IEC material is to inspire and educate people about prevention, care and/or treatment of various health issues and for a better understanding of the same in a more comprehensive way. IEC is now considered as cross cutting issues and tools to deliver quality health care. The effectiveness of IEC materials largely depends on relevance, appeal, uniformity, simplicity of the content and language, accuracy of information, length of the material, cultural appropriateness, availability and modes of dissemination. We attempted to do so in a simple, understandable manner. The following are a list of IEC material developed both digital and print.

S.no	Name of IEC	Total Quantity
1.	Posters	11
2.	Brochures	8
3.	Gif's	10
4.	Videos	5
5.	Audios	5
٦.	Audios	

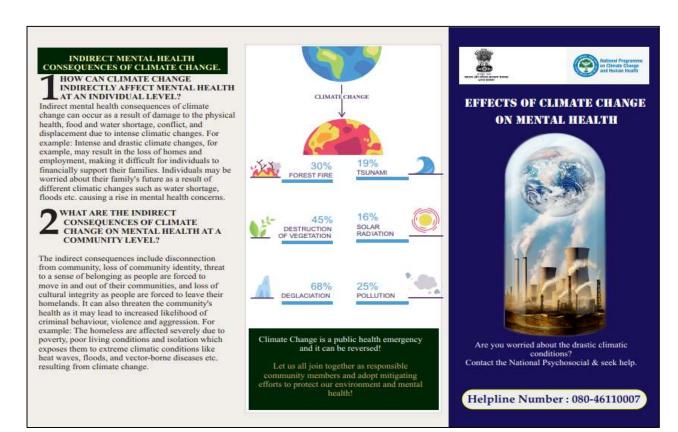
Brochures

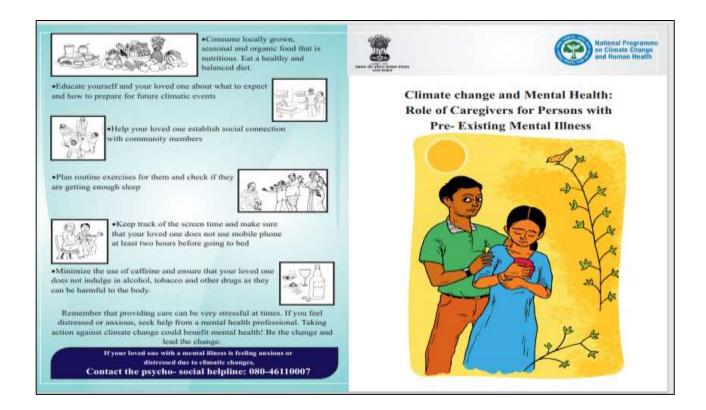
A brochure is usually folded and only includes summary of the information. A brochure mainly aims to serve the information in a creative way and make the people understand the basic information within a short period of time. The team has developed 8 brochures.

The following are the brochures developed:

- 1 Climate change and Mental Health
- 2. Climate change and mental health role of organisation working for Homeless

- 3. Climate Change and Mental Health: Women
- 4. Effect of climate change in mental health
- 5. Climate change and mental health role of care giver for person with pre-existing mental illness
- 6. Climate change and mental health role of organisation working for the migrants
- 7. Climate change and mental health: ways to cope
- 8. Climate change and elderly



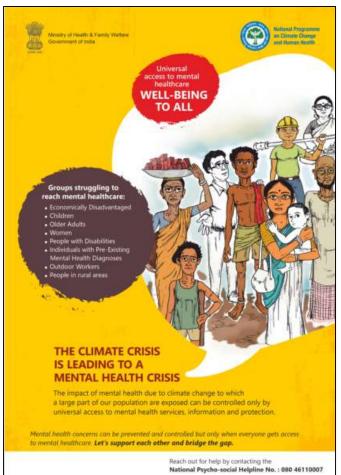


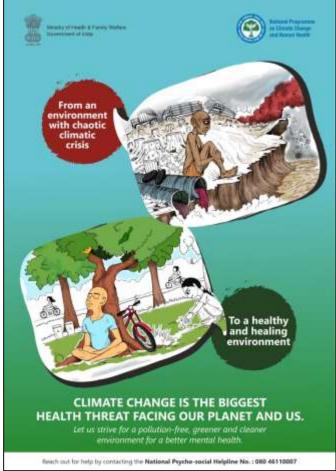
Posters

Effective communication is the key to better understanding people, particularly in the healthcare industry. Medical professionals and personnel have to be able to keep patients informed about their health and help them take measures to prevent or manage diseases.

These visual presentations are more likely to drive action and change behaviour. Below are a few examples

- 1. Are you distressed due to rapidly changing weather condition?
- 2. Are the prolonged, frequent and un-predicable rains causing you emotional distress?
- 3. Distress due to failing crops associated with extreme heat
- 4. Air pollution can harm your child
- 5. Drastic climate changes poses greater risk for the mental health elderly
- 6. Are you distressed due to rapidly changing weather conditions?
- 7. Climate crisis is leading to a mental health crisis
- 8. Climate change is the biggest health threat facing our planet &us
- 9. Mental health impacts of climate change
- 10. Climate change and mental health what we can do





GIFs:

GIFs are a type of computer file that contains a still or moving image. GIF is the abbreviation for "Graphic Interchange Format". The team has developed 8 GIFs which is talking about the association between Climate change and mental health, the disasters (it may be man-made or natural) and its effect on mental health.





Videos:

With the help of videos, we are able disseminate information to the masses. The audio and visuals help us retain information more and are easy to understand. Some videos are animated and made catchy which not only holds a person's attention but also is able to convey the message efficiently.

The team developed 5 videos which will give Awareness about climate change and mental health.

Audio:

Audio media is important because it engages audiences, it helps deliver information, it increases the production value, it evokes emotional responses, it emphasises what's on the screen and is used to indicate mood and often used without visual contact (eg. Radio). When put to good use, language, sound effects, music, and even silence, can elevate your visual abilities dramatically. A total of 5 audios were developed

REVIEW MEETINGS

1st review meeting

Agenda: Meeting on the progress of CoEs under the NPCCHH Program

A Meeting is on 28th February 2022 was held by NCDC with all CoE to get an understanding of timelines of deliverables. NIMHANS participated in the meeting and presented the timelines of each deliverable and subsequently sent the deliverables to Technical Expert Committee Clearance.







2nd review meeting:

Agenda: Follow-up on the deliverables to be sent to TGE

The second brief review meeting held by the NCDC with all CoE to get an understanding of timelines of deliverables on 14th March 2022. It was brief meeting where the sent deliverables were discussed and the remaining timelines were given.

3rd review meeting

Agenda: To Discuss HAP and IEC material with TEG and seek their advice.

A meeting held on 06th April 2022 in the august presence of Experts of the field from various parts of country, the meeting started with the introduction of the experts and the institutes they are affiliated with. The meeting began with Dr. Praveen welcoming everyone and thanking NIMHANS for the third meeting. He began by introducing the Members of Technical Expert committee along with Members of NCDC present for the meeting. After this Professor Naveen Kumar Head of Community mental health services NIMHANS took the charge and began the presentation on the above said agenda that is – Health action plan and IEC materials.

Technical Expert Group Meeting				
02:00 pm – 02:10 pm	Brief Introduction			
02:10 pm – 02:40 pm	Activities undertaken & Plans of Centre of Excellence (NIMHANS, Bangalore) on the deliverables agreed in the MoU i.e. HAP and IEC materials.	NIMHANS, Bangalore		
02:40 pm – 04:00 pm	Discussion on the deliverables and suggestions from members	TEG members/Special Invitees		

Technical Expert Group Member	Comments/ Suggestions	
	HAP	IEC
Dr. Rinku Sharma	How at community level people should recognize the mental health effects due to climate change	

Dr. Pradeep Saxena	Describe the symptoms due to climate change	Describe the symptoms due to climate change Don't give different definitions in brochures, to use definition as in HAP (WHO definition)
Dr. Lenin Singh	a. Impacts of human activities leading to climate change b.How to mitigate?	
Dr Ravi Gupta	a.slow climatic changes and its effects. b.Sleep issues secondary to climate change.	
Dr Vivek Benegal	Emphasis was made on crucial need to start a surveillance center in high-risk area all over the country to trace the pattern of climate change on mental health at least for period of 5 years.	a. Calibri to be used b. illustration coping skills can be depicted. c. not to use line-based sketches.
Dr. Kangkan Pathak		a.Posters and brochures can be less congested. b. Spelling errors to be corrected
Dr Joy Deep		a. Heat stress effects on mental health b. participation of women should be more focused so that migration can be easy when climate change occurs.
Dr Sushant Padhy.		a. Lifestyle changes how it leads to syndromal disorder and CMDs b. Physical illness leading to mental illness c. Can there be visit of other stake holders to DMHP to interact regarding mental health effects on climate change. d.National Mental health survey related to climate change and mental health e. scan code can be incorporated on the brochures.

In response to the suggestions by the Technical Expert Group Dr. Naveen thanked everyone for their insightful feedback. For a few points given, it was clarified that those have already been incorporated and the others will be soon included as suggested.

It was decided that the technical expert group would take one weeks' time to go through the documents in order to share their comments.

The meeting was concluded with the call for a final meeting after a week with incorporation of all the suggestions in the deliverables.



4th review meeting:

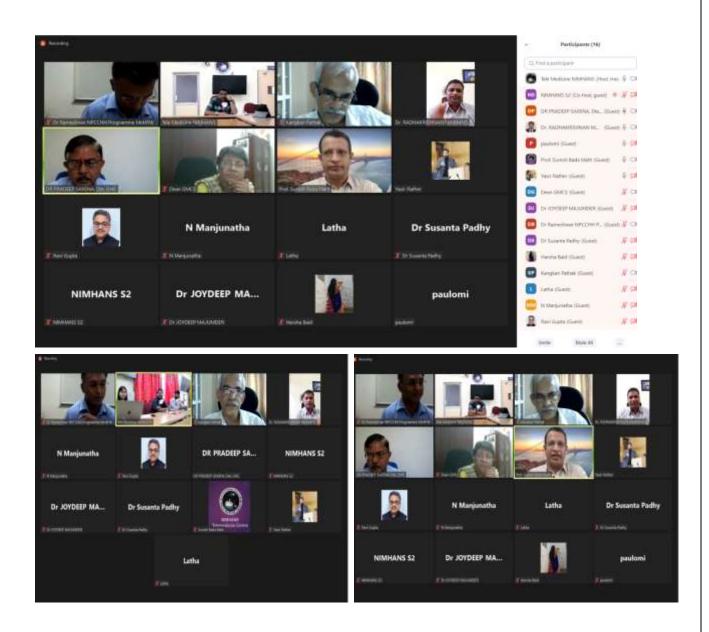
Agenda: To finalise the deliverables with technical expert committee inputs.

Dr. Pradeep Saxena, Praveen G from the NPCCHH Division at NCDC, welcomed the members of the meeting. This was followed by a formal introduction by all the TEG members/Special invitees of the TEG meeting NPCCHH and NIMHANS team. The meeting commenced with TEG members giving their inputs regarding the deliverables. The comments were responded to by Dr. Naveen Kumar C, along with presentation of point by point response from the first TEG meeting.

- During the meeting, following were discussed with NIMHANS team and TEG members with respect to the deliverables presented
- Dr. Kangkan Pathak has suggested that spelling errors were present and Dr Naveen responded that all the spelling errors will be corrected in the documents.

- Dr Pradeep Saxena- suggested that focus should be on the early identification of symptoms of mental health problems by medical officer, community workers, nurses etc. and Dr Naveen responded that it has been already incorporated in the action plan and the training manuals.
- Dr. Ravi Gupta- suggested to remove the tagline, "mental health as important as physical health" in the IEC materials to reduce Stigma. Dr Naveen responded that it will be done.
- Dr. Ritambhara Mehta suggested that emphasis can be on indirect impact on mental health due to consequences of climate change rather than the direct effect. Training modules can explain how climate change "MAY" lead to mental illness. Dr Naveen responded that the suggestions have been incorporated already.
- Dr. Susant Padhy- suggested to add treatment of common physical illness as a pathway
 to treat mental illness, training manuals can have a list of all the medication that may
 cause mental illness.
- Dr. Suresh- talked about importance of behavioral changes which could be done to reduce climate change. Dr Naveen responded that the suggestions have been incorporated already in IEC materials.

The meeting was concluded with a request to all TEG members to send their further suggestions to NIMHANS in 3 days and that the deliverables would be deemed approved in case no further suggestions came with in 21st April 2022. All TEG members agreed to the above request



All the suggestions made by Technical expert committee has been incorporated and submitted (Soft copy and a set of hard copy of all deliverables) to NPCCHH, NCDC on 30th April 2022.

5th Review meeting

Agenda- Meeting with Dr. Rinku Sharma, ADG, DteGHS, MoHFW, Government of India. (Representative from NMHP), to incorporate her suggestions.

The last review meeting with Dr Rinku Sharma was held on May17th 2022 to incorporate suggestions regarding DMHP roles and responsibilities with respect to data collection of climate change and mental health, role of surveillance officer, and few other corrections in surveillance forms were made as per Dr. Rinku's suggestions in HAP, monitoring evaluation forms, SOPs, Surveillance document, Guidelines and Best practice document.

All these corrected document was sent to Dr Rinku and all TEG group on 21-5-2022 with consensus for finalisation within a week to go ahead with printing of following deliverables.

Review meetings	Date of meeting	Agenda	Submission dates
Meeting 1	28 th February	Meeting on the progress	First draft submitted
	2022	of CoEs under the	to NCDC-HQ on 2 nd
		NPCCHH Program	march
Meeting 2	14th March 2022	Follow-up on the	First draft was resent
		deliverables to be sent to	to NCDC-HQ to
		TGE	circulate to TEG
Meeting 3	06 th April 2022	To Discuss HAP and IEC	Corrections sent to
		material with TEG and	NCDC on 8th april
		seek their advice.	
Meeting 4	18 th April 2022	To finalise the	Final suggestions
		deliverables with	from TEG
		technical expert	incorporated and sent
		committee inputs.	to NCDC on 20 nd
		_	April
Meeting 5	May17th 2022	Meeting with Dr. Rinku	Suggestions were
		Sharma, ADG, DteGHS,	incorporated and sent
		MoHFW, Government of	to Dr Rinku on 21st
		India. (Representative	May.
		from NMHP), to	Finalised
		incorporate her	deliverables sent to
		suggestions.	NCDC for circulation
			to TEG members for
			the endorsement on
			21-5-22.

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Ministry of Health And Family Welfare Government of India





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