

Community Mental Health Training at TLMTI



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Executive summary

Background

Leprosy leads to long-term mental health issues, including depression and anxiety. 50% of leprosy-affected individuals experience mental health problems, especially those with disabilities. Stigma and discrimination contribute to increased mental distress among affected individuals. TLMTI's training program was designed and implemented to enhance healthcare professionals' capacity in collaboration with healthSoch Academy to provide mental health training for healthcare professionals.

Training Objectives

The training objective was To enhance TLMTI staff's capacity to recognize and respond to mental health concerns and deliver tailored online training for various healthcare professionals through a Training of Trainers model to create a sustainable internal trainer pool for ongoing mental health training.

Methodology of Training

A three-tiered community mental health curriculum was designed with 10 modules. Trainers were recruited from TLMTI staff who completed a Post Graduate Diploma in Mental Health. 24 trainees were selected from seven TLMTI hospitals across three tracks: doctors, mid-level healthcare professionals, and community health workers.

Implementation of Training

Training of Trainers was conducted over one month, followed by a four-month training period for trainees. Trainees engaged in self-paced learning and live online sessions to consolidate their knowledge.

Trainees were assessed through an online exam with two parts, focusing on recognition and response to mental health issues. A pass mark of 80% was required for both parts to ensure mastery of skills.

Key Achievements

24 healthcare workers were trained across seven TLMTI hospitals to address mental health needs. Effective mentoring and support ecosystems was established within units. Consistent learner engagement facilitated by the 3Rs framework.

Recommendations and way forward

Cascade training to other TLMTI units and develop future programs on community mental health administration and implementation. Training strengthened TLMTI teams' capacity to integrate mental health into leprosy care and laid the foundation for scaling up. Plans for further training and reinforcement of learned skills are encouraged until June 2025.

Background

Leprosy, a neglected tropical disease, has long-term consequences related to impairment and stigma, which includes a major impact on mental health [1]. Multiple psychiatric morbidities have been identified among leprosy-affected persons, including depression, anxiety disorders, and suicide attempts [2]. Living with leprosy has a negative effect on mental health. Physical symptoms and the pain they can cause, the limitations caused by disability, and the prejudice that is so often experienced can impact in a negative way upon thoughts and feelings [4]. Feelings such as fear, shame, and low self-esteem are also experienced by those affected, and their children [1]. One in two people who receive a diagnosis of leprosy are estimated to be affected by mental health problems [3]. This is especially high among people who develop disabilities because of their disease.

An increased prevalence of mental distress is found in people affected by leprosy. This is because of disease impairments as well as societal influences, such as stigma and discrimination [5]. The most diagnosed mental problems are depression and anxiety disorders.

The Leprosy Mission Trust India (TLMTI) recognizes the need for comprehensive mental health support within leprosy care. To address this challenge, TLMTI aims to collaborate with healthSoch Academy (hSA), who are expert training consultants to develop and implement tailored mental health training programs for healthcare professionals and stakeholders involved in leprosy care. The stigma and isolation associated with leprosy often lead to significant psychological distress among affected individuals. In this project, we envision that mental health services will be ongoing, integrated into the leprosy services. For all training and capacity building purposes, the hospitals, VTCs and projects will be considered as one.

In line with the agreement signed in June 2024 between TLMTI and healthSoch Academy (hSA), a Community Mental Health Training Program was developed and implemented across seven TLMTI hospitals in India. The training aimed to equip TLMTI personnel with knowledge and skills to recognise and respond to the mental health needs of persons affected by leprosy and disability.

Training Objectives

- To enhance the capacity of TLMTI staff to recognize, respond to, and reflect on mental health concerns.
- To deliver an online training curriculum tailored to doctors, mid-level healthcare professionals (MLHCPs) like nurses and allied health professionals, and community health workers (CHWs) like other non-medical health workers through a Training of Trainers (ToT) model.
- To create a sustainable internal trainer pool to capacity-build mental health training across units within TLMTI.

Methodology of the training

Curriculum Design and Content Development

The team from hSA had designed a three-tiered community mental health curriculum factoring in the relevant roles of the trainees in each track. They also developed video based online course material for all three tracks of trainees using their innovative “SochCast” teaching methodology (*with dramatized presentations, interactive questions and reflective exercises*) and “3Rs” community mental health framework (*Recognise, Respond, Reflect*). These courses had 10 modules comprising of the following topics and served as self-paced learning material for the trainees. The courses were designed with a “*backward design framework*” where learning objectives were first defined, followed by creation of the final assessments to test the achievement of these learning objectives. Finally, the learning content and methods were then developed to align with the final assessment.

Recruitment of Trainers

TLMTI staff who underwent the Post Graduate Diploma in Mental Health (PGDMH)[6] were identified as trainers.

Recruitment of Trainee Teams

TLMTI identified seven of its hospitals and teams of trainees in all three tracks were formed in these hospitals. This comprised of a total of 24 trainees (7 in doctors’ track, 13 in MLHCP track and 4 in CHW track).

Topics covered

TOPICS

Module 1 - Introduction of 3Rs (Recognize, Respond and Reflect) Framework

Module 2 – Psychosis

Module 3 - Seizures

Module 4 – Depression

Module 5 – Anxiety

Module 6 – Suicide

Module 7 - Alcohol Use Problems

Module 8 - Developmental Disorders

Module 9 – Dementia

Module 10 - Contextualizing for Care of Persons with Disability and People Living with Leprosy

Implementation of the training

Model – Training of Trainers (ToT) Model.

Training of Trainers

In this phase, the team from healthSoch Academy (hSA) trained the trainers in teaching learning methods and oriented them to the curriculum and self-paced trainee course material of all three tracks. The ToT was delivered over a period of one month and included provision of online self-paced course material of all trainee tracks as well as online live sessions to orient the trainers for best use of the material to train the trainees. Additional support for trainers was also provided in the remaining months during the trainee course period by periodic debriefs of the sessions conducted by trainers for trainees.

Training of Trainees:

The training of trainees was administered through the self-paced course material as well as 10 online live sessions over a period of 4 months. The trainees would view the self-paced course material and come prepared for the live online sessions to consolidate their learning and clarify their doubts. The first and the final live online sessions were facilitated by the hSA team while the rest of the sessions were facilitated by the TLMTI trainers.

Trainee details

Trainee Tracks	No. of participants	Category of Participants
Doctors' Track	7	Medical Officers
MLHCP Track	13	Nurses, Physiotherapists
CHW Track	4	Other non-medical workers / Counsellors
Trainers	3	hSA trained TLMTI staff

Timeline

Activity	Timeline
Curriculum Design	July – Sept 2024
Training of Trainers (ToT)	October 2024
Trainee Course Rollout	Nov 2024 – Feb 2025
Final Assessment & Certification	March 2025

Assessment and Certification

- The trainees were assessed through an online exam with multiple choice questions. The exam consisted of two parts – Part A focussed on the recognition aspect of mental health issues. This part consisted of video vignettes which had simulated scenarios of patient presentations which the candidates had to identify. Part B focussed on the response aspect and consisted of text based questions. Part A had higher weightage of marks and was common for all the three trainee tracks. Part B was different for each track and assessed content that was covered for each track.
- The pass mark was fixed at 80% in both part A and part B separately. This was to ensure that the trainees would achieve mastery level proficiency in the skills and knowledge assessed.
- Certificates issued jointly by hSA and TLMTI in April 2025.

Key Achievements

24 healthcare workers with different job roles were trained as seven teams across the TLMTI hospitals in community mental health to recognize and respond to the mental health needs of the community. Trainers were effectively mentored and created support ecosystems in their units. Learner engagement was consistent across all cadres. This was facilitated by the use of a three-tiered approach as well as the 3Rs framework for effective delivery of mental health services across TLMTI hospitals in India.

Challenges and Mitigation

Connectivity issues: There was poor internet in few of the remote locations which was resolved with access to recorded sessions. Digital literacy barriers was addressed through early user orientation and peer assistance.

One centre experienced a technical challenge during the exam and two candidates could not complete the exam. The exam was administered a second time for these candidates.

Recommendations

After this training there are teams built up in 7 units of TLMTI. This learning needs to be imparted to the rest of the units in a cascading manner. A future training program on how to set up a community mental health program will be beneficial to learn the administrative and implementation aspect of the program.

Conclusion and Way Forward

The training strengthened the capacity of TLMTI teams to integrate mental health into leprosy and disability care. It also laid the foundation for scale-up to other units. With LMS access available until June 2025, reinforcement and refresher use are encouraged. There are plans for replication and scaling up as well as further training in administration and implementation of the program. The training needs to be applied and aligned with the health program of TLMTI.

References

- [1] Somar P, Waltz M, van Brakel W. The impact of leprosy on the mental wellbeing of leprosy-affected persons and their family members – a systematic review. *Global Mental Health* 2020;7. <https://doi.org/10.1017/gmh.2020.3>.
- [2] Govindasamy K, Jacob I, Solomon RM, Darlong J, Franco-Paredes C. Burden of depression and anxiety among leprosy affected and associated factors-a cross sectional study from India. *PLoS Negl Trop Dis* 2021;15:1–12. <https://doi.org/10.1371/journal.pntd.0009030>.
- [3] Mental Health | LEPRO n.d. <https://www.lepra.org.uk/what-we-do/person-centred-care/mental-health> (accessed April 27, 2024).
- [4] A path towards inner wellbeing and good mental health for persons affected by leprosy - Leprosy Mission International n.d. <https://www.leprosymission.org/blog/a-path-towards-inner-wellbeing-and-good-mental-health-for-persons-affected-by-leprosy/>
- [5] Leprosy related mental health | Infolep n.d. <https://www.leprosy-information.org/key-topics/zero-stigma-and-discrimination/leprosy-related-mental-health>
- [6] One year blended learning program administered by the mental health team at [Distance Education Department :: Christian Medical College, Vellore](#)

Annexes:

Sample certificates



Assessment summary data

All trainees passed and achieved mastery level proficiency in the knowledge and skills of their respective tracks (80% or above). Two of the candidates could not successfully complete the first attempt due to technical difficulties and were able to do so after the exam was administered a second time.

This demonstrates that all trainees have acquired primary care level skills in recognising and responding to important mental health issues in their community.

Testimonials from trainees

..... every module was structured for clarity and ease of navigation, allowing me to focus fully on the content rather than logistics. What stood out most was the holistic approach—each session wove together clinical insights, community-centered strategies, and self-care practices, giving me a fresh, well-rounded perspective on mental health care. Dr Mazhar Imam Sajid, Muzaffarpur

Now it's easy to identify mental issues in leprosy patients. After this training our approach towards mental health issues has totally changed. Dr Ajeet , Ayodhya

.....the MH course is precise and it fulfils the criteria to meet at our hospital. Dr Noah , Vada

..... As the sessions were video based and interactive, it was easy to understand and even difficult topics were handled well by the trainers. The training gave us a clearer understanding of different mental health disorders and helped us see the importance of holistic care. It has changed how we view our work at The Leprosy Mission, reminding us that mental health is just as important as physical healing in our care for patients. Dr Shanthi , Naini

The self-learning was a new experience for me. It allowed me to learn on my own pace. There was scope for relearning and revising through the same uploaded content again and again. I didn't feel overwhelmed and difficult to progress forward. Nurse Swata

....., some of difficult and important topics of mental health, especially for our rural set up, and the multi-level approach was very effective gave roles and responsibilities to communityThank you for working hard to make it easy for us. Dr. Vandana, Chandkhuri

Trainers and Master trainers



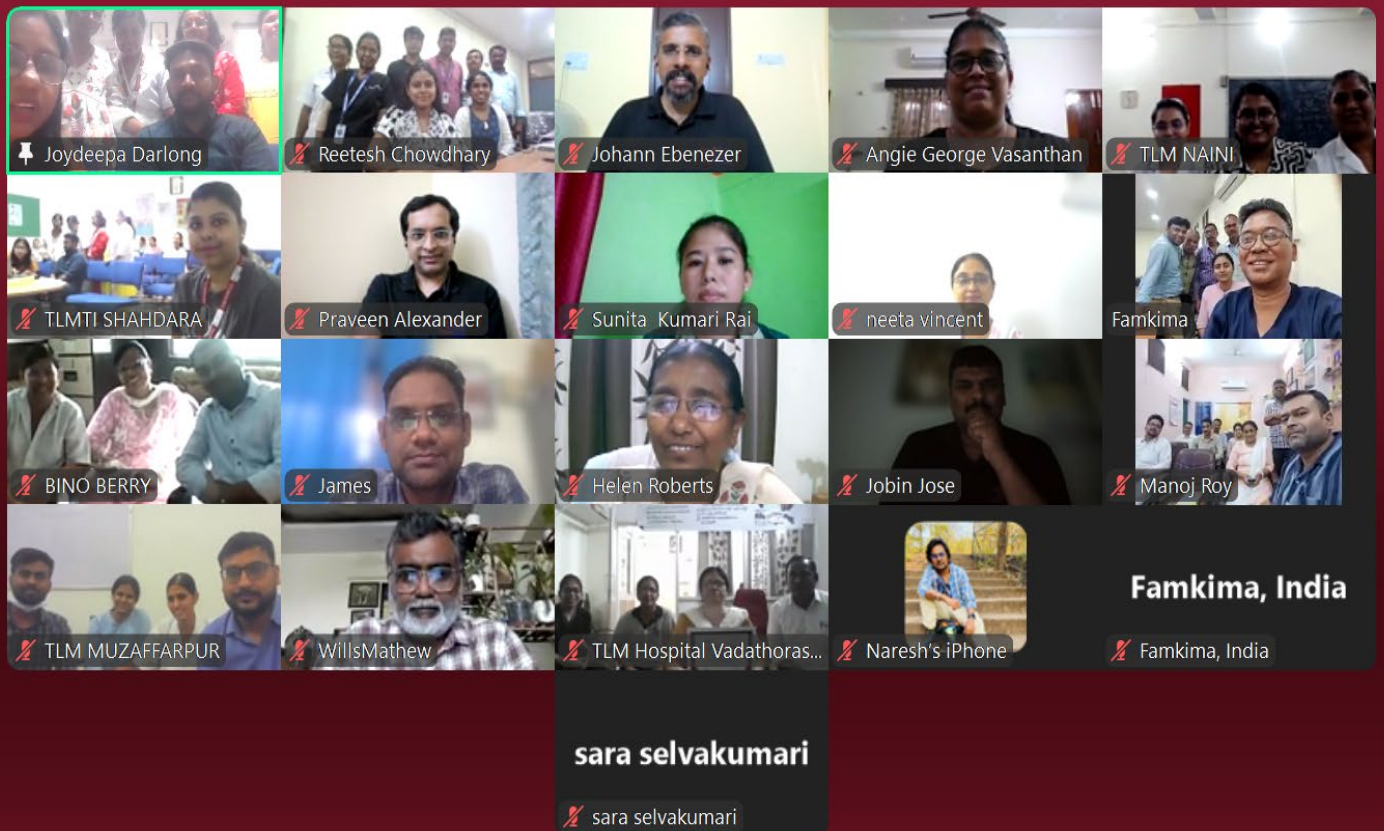
Master trainers

James George , TLM Muzaffarpur

Dr Neeta Maximus , TLM Barabanki

Ms Sunita Rai , TLM Kolkata

Unit and Names
TLM Shahdara
Dr Komera Sunanda
Mrs. Shalini Koshy
Mrs Ashiya James
Mrs. Sinphia Ajith
TLM Chandkuri
Dr Vandana J Elkana
Naresh Bahadur Chand
Manoj Roy
TLM Faizabad
Dr Ajeet Kumar
Ms Mitali Benjamin
Mrs Soni Samson
TLM Purulia
Dr Gladys Staines
Shreyasi Dorman
Sanchari Fernandis
TLM Muzaffarpur
Dr Mazhar Imam Sajid
Kaushik Mohato
Devaki Poudel
TLM Vadathoraisalur
Dr. Noah Yesuraj
Mrs. Mary Santhaselvi
Mrs. Maheswari
Mr. Vijayakumar
TLM Naini
Dr. Shanthi Anna Kuruvilla
Mrs. Leeba Dhawal
Mrs. Kota Swapna Kumari
Ms. Swata Bhattacharjee



End of report