



#WhatWENeed

Solidarity, Emotional Awareness, Social Justice and Compassion: Insights from The Red Door's Community Mental Health Program in India

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The Red Door's Mental Health & Psychosocial Support (MHPSS) interventions with young women and girls from structurally excluded communities in the Indian state of Madhya Pradesh have been extremely edifying, offering critical insights into #WhatWENeed to build the psychosocial wellbeing and resilience of at-risk communities.

For the past two years, we have been engaged in training young leaders from the community in offering essential psychosocial support through community clubs which function as safe spaces of co-learning and peer support.

The young women of the community that we work with experience a perfect storm of distressing factors, with the age group of 15–29 years having the highest suicide rate among women in India.

The risk factors can be attributed to the structural violence they experience in their everyday lives in the form of patriarchal norms that dominate every aspect of their lives - from what they wear to who they meet. They are denied sexual freedom and have no autonomy regarding their choice of life partner. Since they belong to historically marginalized communities (Dalit and Adivasi), generational trauma is pervasive, compounded by continuous structural harm in the form of identity-based discrimination in the areas of education and employment. At home, they experience alcohol-fuelled domestic violence at the hands of their male family members.

A section of our community belongs to families who were afflicted by the Bhopal Gas Tragedy and continue to experience the financial and psychological fallout of the tragedy as their family members, especially elders, grapple with health conditions resulting from the gas leak.

<https://www.amnesty.org/en/latest/news/2024/12/bhopal-gas-tragedy-40-years-of-injustice/>

Our MHPSS intervention has now reached over 800 young women and extensive evaluation of qualitative data at various points of the intervention has revealed an overwhelmingly positive impact on their psychosocial wellbeing. These encouraging results have allowed us to theorize on certain elements of the intervention that have the powerful potential not only in the preventive/promotive context in which they have been implemented but in a preparatory capacity for community inclusion practices.

1. Creating safe spaces where the participants can talk about themselves and their lives, their emotions and their struggles knowing that they will not be judged for sharing their vulnerabilities. The clubs that have been created through the intervention have given the participants a sense of belonging, of being part of a community that understands and cares as well as a feeling of being less alone, since many members have gone through or continue to go through similar challenges.
2. Facilitating a deeper understanding of one's inner life and emotions. When we began working with the community, we found a deeply entrenched gendered narrative of emotions where fear, jealousy, and sadness were feminine and anger, the domain of men. Feeling 'too much' was a sign of weakness and this led to a general reticence of sharing what the participants were feeling. We encountered many narratives of the participants being slapped for crying when they were younger, shamed for being afraid, and rushed out of any intense emotion they were feeling to get on with the daily grind. There was a pervasive disengagement with emotions in the community's culture, a sense of disapproval of the expression of emotions unless they emerged from an incident that the community deemed as significant enough such as a death.

When we began to ease the participants into a more nuanced understanding of emotions, where they came from, how natural it was to feel difficult emotions, and, most importantly, the diversity in an experience where what affects one of us might not affect another and that the experience was still valid, that is when we were able to make the breakthrough of introducing them to the idea of 'response' over impulsive reactions, of processing emotions and letting them go instead of suppressing them.

3. Encouraging an understanding of the diversity of emotional expression. The pathologization of expressions of emotional distress has begun to take root even in Indigenous communities where, even a generation ago, a wide range of expressions of emotional release were considered natural and culturally appropriate. The first instinct, we found, when our participants recalled seeing instances of 'mad' behaviour was fear, followed by shame, especially if the person exhibiting this behaviour was a member of the family. Not surprisingly, this was a lens that they also applied to their own experience of emotions and their expression. We helped supplant their judgment with a critical interrogation of - who sets these rules of how much one should feel, when one should feel and in what ways? – and worked to help replace the fear and shame with the intention to creating space for emotional release, with an awareness of the immensity of stressors that community members experience due to their structurally excluded location in the society.

4. Facilitating a critical interrogation of the structural determinants of emotional distress has been a powerful tool, allowing them to move away from a largely individualistic, self-blaming way of looking at their difficult experiences as women and bring in a social justice lens instead.

Also, a larger number of our participants are adolescent girls for whom the immediate locus of conflict is the family, where parental expectations are met with an emerging need for autonomy. In the historically marginalized community we work with, taking a social justice lens has equipped them with sensitivity to the existence of inter-generational trauma in parents and children alike and has

allowed them to approach familial conflict with a mindset of 'us versus the problem' instead of 'you vs me'.

Finally, actively endorsing compassion as a potent mechanism for psychosocial well-being as well as transformative social action. This emerges from the understanding that everyone bears the psychic wounds of dehumanizing power structures, as much as we are subconsciously complicit in maintaining the status quo impelled by the need for security and comfort. The trauma responses are easily observable in the community - mistrust of intentions, an inability to assert one's needs for fear of backlash, taking criticism as an indictment of the whole self without critically assessing its context or intent, etc. So, while we work on strengthening an array of psychosocial resources that can help the participants navigate the stressors in their lives, we also foreground compassion as a tool and an agenda. We encourage them to feel affection and find compassion for the parts of the self that cause the most discomfort because those are the parts that are most in need of healing. As they begin to grow comfortable with this practice, we gently encourage them to offer the same grace to others in the community, with the understanding that in order for things to truly change, we must act differently to the systems that hurt us.

About The Red Door:

The Red Door (TRD) is a rights-based mental health initiative that believes that the discourse around psychosocial wellbeing needs to be more inclusive, diverse, and respectful of the myriad realities we inhabit in our minds and lives. TRD takes cognizance of the United Nations Convention on the Rights of Persons with Disability (UNCRPD) motto of "nothing about us, without us," and is powered by persons with psychosocial disability.

TRD works extensively on community-based Mental Health & Psychosocial Support interventions that are informed by Resilience Science, storytelling & the arts, culturally relevant pedagogical tools, and contemplative practices. Our approach is firmly embedded in the collectivist ethos of the Global South, and we work towards fostering community-led peer-support spaces, especially in at-risk demographics.

TRD believes that it is a radical act to be 'well' in a deeply divisive and unequal society.

Website: <https://www.thereddoor.co.in/>

