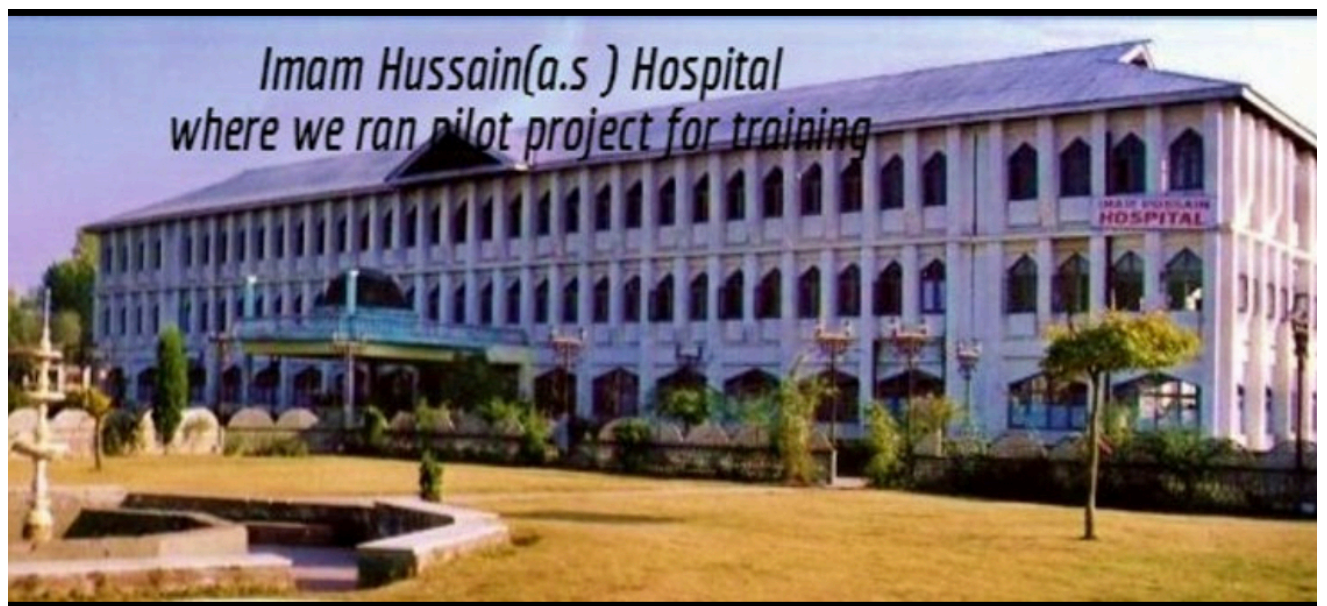


mhGAP Kashmir 2013Success or failure ,A reflective journey down the timeline in 2021.





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WITH PROFESSOR DAME SUE BAILEY IMMEDIATE PAST PRESIDENT OF THE ROYAL COLLEGE OF PSYCHIATRISTS LONDON CURRENT CHAIR OF ROYAL COLLEGES OF UNITED KINGDOM AND PROFESSOR OF CHILD AND ADOLESCENT PSYCHIATRY DISCUSSING THE PROPOSAL OF MENTAL HEALTH CURRICULUM IN SCHOOLS IN KASHMIR.

AS PRESIDENT OF THE ROYAL COLLEGE OF PSYCHIATRISTS LONDON SHE WAS RESPONSIBLE FOR APPROVING THE PROPOSAL BY GOVERNMENT OF JAMMU AND KASHMIR FOR MENTAL HEALTH TRAINING IN KASHMIR.



Implementation of
mhGAP in Kashmir



ROW Foundation

**The Mental Health Innovation Network is jointly
headquartered at:**

**The Department of Mental Health and Substance Abuse
World Health Organization**

20 Avenue Appia
1211 Geneva 27
Switzerland

London School of Hygiene and Tropical Medicine

Keppel Street
London
WC1E 7HT
UK



LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



mhGAP Implementation in Kashmir





The main image is a submission by Masood Hussain, a renowned Kashmiri artist. It depicts a praying woman's face and hands peeping through a lattice window - a symbolic image intertwined with the success of the project.





Table 1 –list of facilitators –UK-Kashmir

Name of Facilitators	Profession	Week	Gender	mhGAP experience
Dr. Peter Hughes	Adult Psychiatrist-UK	1	M	Yes
Dr. Sophie Thomson	Adult Psychiatrist-UK	1	F	Yes
Dr. Eleni Palazidou	Adult Psychiatrist-UK	1	F	
Dr. Jane Mounty	Adult Psychiatrist-UK	1	F	Yes
Dr. Henrike Klasen	Child Psychiatrist-NL	2	F	Yes
Dr. Sally Browning	Adult Psychiatrist-UK	1	F	Yes
Dr. Lucy Potter	Adult Psychiatrist-UK	2	F	Yes
Dr. Sajad Yousuf	Adult Psychiatrist-UK	1,2	M	Yes
Dr. Mina Bobdey	Adult Psychiatrist-UK	2	F	
Dr. Aqeel Hussain	Psychiatrist -Kashmir	1,2	M	Yes
Dr. Muzaffar Khan	Psychologist-Kashmir	1,2	M	

Week 1

Dr. Peter Hughes FRCPsych
Dr. Sayed Aqeel Hussain MRCPsych
Dr. Sophia Thomson MRCPsych
Dr. Sally Browning MRCPsych
Dr. Jane Mounty MRCPsych
Dr. Sajad Yousuf MRCPsych
Dr. Eleni Palazidou MRCPsych

Week 2

Dr. Henrike Klasen MRCPsych Phd
Dr. Lucy Potter MRCPsych
Dr. Mina Bobdey MRCPsych
Dr. Sajad Yousuf MRCPsych
Dr.Sayed Aqeel Hussain MRCPsych

— — — — —





DIRECTORATE OF HEALTH SERVICES KASHMIR

KEY ACHIEVEMENTS

2012-13

- First ever **Kashmir Skills and Simulation Centre** has been set up by the Directorate of Health Services, Kashmir (DHSK) at Regional Institute of Health and Family Welfare (RIHFW), Dohbiwan, Baramulla incorporating a skill centre and in-house innovation.
- Three District Hospitals and one Community Health Centre (CHC) are in the final stage of accreditation and pre-assessment of these hospitals will be done by the Quality Council of India (QCI).
- Advanced surgeries in various fields have been performed at different hospitals up to sub district level across the Kashmir division which has not only improved secondary care at door steps but also given a ray of hope to tertiary care in rural hospitals.
- Laparoscopic Surgeries started at various hospitals for the first time.
- Establishment of Super Specialty Departments at JLN Hospital, Rainawari.
- Onset of various surgical procedures at remote hospitals for the first time (CHC Chandousia, SDH Seer).
- Establishment of Chemotherapy Centre, Geriatric Ward and Cardiac Care Unit in District Kupwara, Leh and Kargil.
- e-Hospital CPO Record Management started at JLN Hospital, Rainawari.
- Establishment of Sick Newborn Care Unit (SNCU) in all district hospitals.
- Launching of Rashtriya Bal Swasthya Karyakram (RBSK) Child Health Screening and Early Intervention Services.
- 100 Reconstructive Surgeries performed at JLN Hospital in collaboration with INTERPLAST Germany.
- Medical Mobile Unit (MMU) services started at Anantnag, Kupwara and Kargil.
- Setting up of Super Specialty Outreach Clinic at Zakura with regular outreach camps at PHC level.
- Gene Xpert for diagnosing MDR TB, DOTS Plus site started at Chest Disease Hospital Srinagar and SNM Hospital Leh under Revised National Tuberculosis Control Programme (RNTCP).
- 5,77,033 people screened for Diabetes Mellitus and 5,42,668 for Hypertension till now under Non Communicable Disease (NCD) Programme.
- 222 Cancer patients have received Chemotherapy till now.
- 34 Cancer and NCD screening camps held till now which included upper GI Endoscopies and Cervical Cancer screening.
- Improved Disease Surveillance activities under Integrated Disease Surveillance Programme (IDSP).
- 5,000 Health Care Workers have been trained in Basic Life Support (BLS) till now including Photo Video Journalists of Kashmir Division.
- Training of Medical Officers in Advanced Trauma Life Support (ATLS), Advanced Cardiac Life Support (ACLS) and Emergency Room Training Course (ERTC) have been started.



- First time in India **Mental Health Gap (mhGAP)** training programme was held in collaboration with **Royal College of Psychiatry (UK)** with support from **World Health Organization (WHO)** Geneva at RIHFW, Dohbiwan, Baramulla.
- Trauma management team constituted which is looking into upgradation of District and Sub District Hospital Emergency Departments with major revamp in the level of equipments.
- Orientation course in High Altitude Medical Emergencies started for Medical Officers at RIHFW. Active Yatra Management by DHSK led to the drastic reduction in Yatra deaths this year.
- Academic Committee, Quality Assurance Committee and DHSK Media Cell have been constituted to look at various progressive issues pertaining to the department.



GE Expert MRB TB/RF at Intermediate Reference Laboratory (IRL) Dalgate



Participants in the Mental Health Gap (mhGAP) training



Kashmir Health Skills & Simulation Centre at Regional Institute of Health and Family Welfare



Proposed Sub District Hospital at Puthalgam Kashmir

REPORT FROM THE INTERNATIONAL UNIT

THE VOLUNTEER SCHEME

One of the main volunteer scheme projects of 2014 was a visit by UK volunteers to Kashmir. Four volunteers – Dr Peter Hughes, Dr Sajad Yousuf, Dr Parimala Moodley and Dr Howard Ryland – travelled from the UK to Kashmir to deliver 5 days of training to a number of health professionals using the mhGAP curriculum. The mhGAP (mental health gap action plan) is a WHO programme designed to scale up care for mental, neurological and substance use disorders among non-specialist providers, including primary healthcare workers.

The project was coordinated by Dr Sayeed Aqeel Hussain, a College Member based in Kashmir, and was facilitated by the Director of Health Services in Kashmir, Dr Saleem-UI-Rehman.

Kashmir – the first volunteer project took place in September 2013. The visit in August 2014 was set in the Ganderbal district and the training was attended by over 35 doctors, nurses, pharmacists, social workers and students. The objectives of the training were to ensure that those present became familiar with the mhGAP programme, acquired the skills on assessment, diagnosis and management of priority conditions, mastered various models of training methodology and training techniques, facilitator skills and supervision skills. The volunteers were also looking to identify a pool of potential champions of mhGAP in Kashmir to develop a strategy for supervision.

This training event was successful and the course facilitators reported being impressed with



Trekking from Pindaya to the Inle Lake in Myanmar / Burma in February 2014.
Left to right: Dr Sophie Tomlin, Professor Elspeth Bradley, Dr Sophie Thomson (kneeling), Dr Deborah Connolly and Dr Christine Brown.

the commitment, enthusiasm and interest of participants in applying mhGAP to their work. It is hoped that stakeholders in Kashmir will develop this programme of work by ensuring that capacity is maintained through follow-up with participants and use of refresher courses.

This project in Kashmir has also brought about the establishment of a Memorandum of Understanding between the College and the Health Services Department in Kashmir and Jammu which was signed by Professor Sir Simon Wessely and Dr Saleem-UI-Rehman in August 2014.

by money raised by College Members themselves. In February 2015 a group of 5 College Members undertook a trek in Burma/Myanmar to raise money for the volunteer scheme (see photo). As a result of the links made during the planning of this event a team of College volunteers is now planning a training event for family doctors in Myanmar in January 2015.

FEEDBACK

Feedback from the Faculty of Royal College of Psychiatry , UK on mhGAP Training Held at Regional Institute of Health and Family welfare , Dhobiwan, Baramulla

Dr Lucy Potter

Designation: Psychiatrist Trainee

Affiliation with Institute : Royal College of Psychiatrists

Feedback:

The mhGAP training in Kashmir was a fantastic experience for me, through which I feel I have developed multiple skills (including the planning and delivery of training to a multidisciplinary audience). Our stay at the Regional Institute of Health and FW was great, and could not have been more welcoming. I hope there will be further mhGAP trainings in future!

BW, Lucy



particularly enjoyed waking up to a series of chanting from the Mosques every morning, followed by the birds singing – an amazing experience!

Dr SM Kadri, head of Institute oversaw the training with great skill – he kept a discrete presence, being always around and available as needed to advise, support and help resolve any difficulties without interfering with the work. The staff couldn't be more helpful and the food was fantastic.

All the best

Eleni

Dr Eleni Palazidou MD PhD MRCP FRCPsych

Designation: **Consultant Psychiatrist and Honorary Senior Lecturer**

Affiliation with Institute: **Bart's and The London School of Medicine and Dentistry, Queen Mary University, London UK**

Feedback:

The training was focussed on familiarising trainees with the use of the WHO Mental Health Gap manual. I was very impressed with the participants' interest and motivation as well as ability and eagerness to learn. I have been teaching psychiatry to medical students and doctors/other trainees in the UK and abroad for many years and I must say the Kashmir trainees come top of the list in eagerness and motivation as well as ability to learn. I'd be delighted to teach in Kashmir again – it is very rewarding!

We were very well looked after and I am happy with the venue. I



Dr Peter Hughes

Designation: **Consultant Psychiatrist**

Affiliation with Institute: **Royal College of Psychiatrists**

Feedback:

Was an excellent experience that was very well organised. Punctual and varied group. Interactive groups. Mutual learning and lecturers learned a lot about Kashmir and manifestations of illness. Lot of interest in stress conditions and somatisation conditions. epilepsy not such an issue. Suicide an issue. Drugs a huge problem.

Transport was provided to centre and pick up from airport successfully. Hospitality was wonderful and excellent food for lecturers. Kind attention from our hosts.

Sally Browning MB,ChB,FRCPsych,

Retired Consultant Psychiatrist, Adult General Psychiatry Member of the International Volunteering SIG at the Royal College of Psychiatrists



07:53



Retweeted

by Wendy Burn 🌈



sayedaqeel FRCPsych @sayedaq... · 9m ▾

@rcpsych @ssaxenageneva

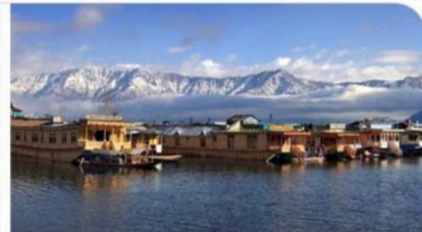
@DrKateLovett @dineshbhugra

@DrAdrianJames @KSBhui

@psychvolunteer @subodhdave1

@wendyburn @MHInnovation

@DHSKashmir mhGAP team of Royal College of Psychiatrists London enjoying their stay at houseboat in famous dal lake in kashmir



Wendy Burn 🌈

@wendyburn

Follow

President Royal College of Psychiatrists.
Co-Chair Gatsby Wellcome Neuroscience
Project. Consultant Old Age Psychiatrist,
Leeds. Views expressed are my own.

This is for the information of Everyone including Collaborating partners , Trainers and Trainees of mhGAP Training conducted in 2013 in collaboration with Directorate of Health Services Kashmir, Royal College of Psychiatrists London , WHO Geneva and Logistic support by J and K police, Help foundation, Action Aid India, TCI cements and Jammu and kashmir Bank.

The programme was conducted over two weeks in which more than 200 professionals which included doctors, nurses, psychologists, social workers, teachers, police personals and allied professionals from all 12 districts of kashmir participated.

The report of the programme was formally submitted to Govt of Kashmir by Royal College of Psychiatrists London and has been used as reference in papers around the world.

The Directorate of Health services published the project as one of its achievement in its 2013 achievement report and the success of the project led to the signing of MOU next year between Kashmir Government and Royal College of Psychiatrists London which was signed by then Commissioner secretary Health and Medical Education Mr Gazanfar Hussain and Prof Sir Simon Wesley President of the Royal College of Psychiatrists London.

This was followed by another mhGAP training project in District Ganderbal under MOU in 2014 followed by monitoring and evaluation of the training. Unfortunately the Psychiatric institute refused to depute psychiatrist for the

Govt supported project on my request as a faculty member of the Institute for monitoring and evaluation but deputed entire team to project run by MSF and to 22500000 Rs funded private project of Professor Margoob who had retired from Government and had no other official support from the Government.

Also Professor Margoob refused to work in collaboration with Govt supported project which would have helped his project immensely as advised by Dr Hussain without giving any valid reason

The completion of the mhGAP kashmir project took two years and the results were presented by Dr Sayed Aqeel Hussain Consultant Psychiatrist and Initiator, coordinator and implementor of Programme on ground at the mhGAP forum of WHO assembly Geneva following which mhGAP kashmir project was nominated as the most popular innovation in the world out of more than 120 nominations.

Heartiest Congratulations to the People of Jammu and Kashmir and mhGAP team Kashmir for mhGAP. Kashmir project being nominated as the best innovative Project in the world from more than 120 nominations submitted by more than 100 organisations around the world at the WHO assembly in Geneva on world mental health day. This was disclosed by Dr Sayed Aqeel. Hussain Consultant Psychiatrist and International Coordinator mhGAP Kashmir who was invited to attend the mhGAP forum at WHO assembly in Geneva attended by delegates ,ministers and ambassadors from more than 40 countries around the world



BACK GROUND OF PROJECT.

Prof Margoob Ex HOD Psychiatry who retired in 2013 refused to entertain Dr Sayed Aqeel Hussains proposal as member of faculty of the institute to invite RCPsych to kashmir to impart training using WHO devised mhGAP training module. He however used the same training module to train trainees of his private project in 2014.

The proposal was presented to Dr Saleem ur Rehman then Director Health Services Kashmir who immediately approved the proposal and formal invitation was sent to the President of the RCPsych to depute trainers for training.



Unfortunately Prof Margoob not only did not support the project along with the Psychiatric Institute but made a statement in the paper published by the Canadian Journal of Psychiatry that the mhGAP project supported by Govt of Kashmir and RCPsych has failed without providing any evidence.



Menu



Accounts



Search

The district of Ganderbal in the Kashmir valley extends to the north from the outskirts of the city of Srinagar through the Kangan valley to very remote mountainous regions, including the Thajvas glaciers. The district has a population of 297,000, which is predominantly rural (84%), with a low literacy rate (58% compared with the national average of 74%).³⁰ Within this district, our project aimed to cover an area with a population of 200,000. We selected this r [Copy](#) [Look Up](#) [Share...](#) or no access to governmental mental health services. A 2-week Mental Health Gap Action Programme (mhGAP) training initiative delivered by The Royal College of Psychiatrists (UK) in 2013³¹ created little improvement in access to mental health services. The mental health needs were served—albeit to a very limited extent—by SAWAB ("Supporting Always Wholeheartedly All Broken-hearted," an expression in Kashmiri meaning an act of kindness without expecting anything in

This statement was defended by one student of Prof Margoob in UK against basic principles .

One Consultant Psychiatrist Dr Mudasir Firdosi who along with being the student of Prof Mushtaq margoob in Institute of Mental health and Neurosciences Kashmir during his postgraduation and has published several papers along with Professor Margoob who served as Head of Department of the Institute before retiring in 2013 took objection to the statement.

He Is also a member of Royal College of Psychiatrist London and is currently working as a Consultant Psychiatrist in London.

Dr Firdosi made a charged and emotionally strong statement for objecting to the statement made by Porfessor Margoob in the paper even before reading the statement . Dr Firdosi was advised to read the statement which he did and felt that there was nothing wrong in the statement and it was entirely my responsibility to prove the success of the project.

It was highlighted to Dr Firdosi that the burden of proof is usually on the person who brings a claim in a dispute and the necessity of proof always lies with the person who lays charge.

For Peer Review

No further statement was received from Dr Mudasir Firdosi and all correspondence with Dr Firdosi stopped.

This was brought to the attention of Prof Mohammad Uzri head of International Division of the RCPsych who advised to write to the Editors of the Journal to initiate investigation .



maluzri 21 Dec 2020



to me, Elen, Peter ▾

Dear Aqeel

Thank you for your e-mail and sorry to know of the distress caused by this issue.

I am copying Peter for views as he was the lead volunteer on this project at the time.

My understanding is that the usual process is to write to journal's editor raising issue of inaccuracy when one noticed. I suggest you follow the process and see what the outcome before considering any other measure.

BW

Mohammed



The investigation was initiated by the Journal who published a Corrigendum that the authors could not produce any valid documented evidence to substantiate their claim and author claimed to have published the statement on the verbal opinion of Authors team which included Dr Abdul Majid currently HOD Psychiatry SKIMS medical college,

Dr Tajamul Dhar HOD Department of Psychiatry Baramulla Medical College ,

Dr Altaf Malla Consultant Psychiatrist Institute of Mental health and Neurosciences kashmir and

Dr Sabreena Qadri Consultant Psychiatrist Institute of Mental health and Neuro sciences kashmir.



Dear Dr. Hussain,

Thank you again for your patience and understanding as we worked to thoroughly understand the situation and provide the best course of action. We have expended extensive time in reviewing the statement and other information, as well as consultation with the authors and Journal Editor, and are now moving forward with publishing the following corrigendum, which we believe satisfactorily clarifies the article.

Corrigendum for A Model of Mental Health Care Involving Trained Lay Health Workers for Treatment of Major Mental Disorders Among Youth in a Conflict-Ridden, Low-Middle Income Environment: Part I
Adaptation and Implementation

The authors have provided additional clarification for their comments on the *Mental Health Gap Action Program*, described in the 'Site Description' section of the article, appearing on page 623, as having "provided little improvement to access to health services" at the time they began their project in 2013:

According to the Mental Health Innovation Network website at <https://www.mhinnovation.net/organisations/implementation-mhgap-kashmir>, the program's initial two-week preliminary primary care training was conducted in September 2013, and additional training phases of the mhGAP program were apparently conducted subsequently.

The authors' comments that the mhGAP program had produced little benefit to access to mental health care at the time of commencing their program in 2013-2014 reflects the contemporaneous observation of their local team of clinician investigators. No peer reviewed evaluation of the mhGAP program was available and the original statement in the article should have clarified that it was based on the clinician investigators' observations at the time when the initial mhGAP training initiative had only recently been delivered.

We appreciate your bringing this matter to our attention and hope you agree this satisfactorily resolves the matter. Please let me know if you have any questions or concerns. We expect the corrigendum will be online within the next two weeks.

The Editors of the journal were thanked for impartial investigation and publication of the Corrigendum.

Dear

Thank you for your email. The College was pleased that the investigation has completed and a corrigendum will be published by the journal.. Special thanks to you for Re initiating the investigation after preliminary review.

This Corrigendum was essential to remove any issues with regards to crucial future trainings in kashmir especially the setting of crisis team in view of increased suicides in kashmir post covid and hope in future all professionals publish their work with proper evidence to substantiate it. Thanks once again for all your time and efforts which will be appreciated by RCPsych and WHO and everyone who benefitted and will continue to benefit from on going work and training in kashmir.

Am sharing email from Professor Uzri Lead of International Affairs for your information.

Regards

Also Prof Uzri was also pleased that journal completed the investigation

Am sharing email from Professor Uzri Lead of International Affairs for your information.

Regards
Aqeel



maluzri 14 Jun
to me ▾



Thanks Aqeel

Very pleased that this issue is resolved to your satisfaction.

BW

Mohammed

...



me 14 Jun
to maluzri ▾



Dear Uzri

Thanks for the mail. It was crucial to resolve the issue and clarify it as unresolved issue could had impact on any future trainings with College. Thanks once again for the support.

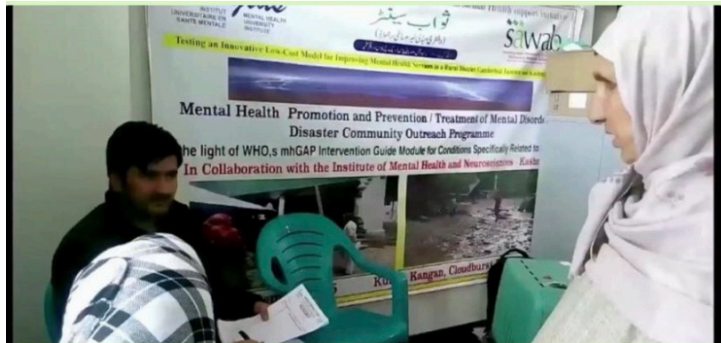
Regards

...

The issue of legal notice to the five team members is just an additional issue which college has been informed about

Following the completion of investigation Professor Margoobs team members were asked to explain how they came to the conclusion as the patients seen by Govt

supported project were seen in primary care centres where as the patients seen by Professor Margoobs team were seen in community as such they had no access to patients seen by team of Govt supported project.



Members of psychiatric disease hospital working for a project that discredited the work of RCPsych and WHO

11:40 ✓



11:40 ✓



The investigating team made a statement that Prof Margoob should have published in the paper that this statement was not based on any documented evidence.

The Grand challenges Canada which funded Professor Margoobs **Private** project with **22500000** rupees officially dissociated from project with regards to collecting data and publishing results.

The Department of Psychiatry Govt Medical college Srinagar and Psychiatry unit of SKIMS Medical college should issue a corrigendum in printed media like Grand Challenges Canada if their team has not contributed to publication of statement discrediting the work of Govt of Kashmir.

**Grand Challenges Canada**
26.7K Tweets

Tweets **Tweets & replies** Media Likes

**sayedaqeel FRCPsych** @sayed... · 4d ...
@gchallenges Really unfortunate that the project funded by grand challenges Canada has published its result and has tried to discredit the work of RCPsych London and WHO in kashmir without providing any evidence WHO work youtu.be/nobinWoTPjA journals.sagepub.com/doi/full/10.11...

07:03   

journals.sagepub.com

 **SAGE journals**  

The district of Ganderbal in the Kashmir valley extends to the north from the outskirts of the city of Srinagar through the Kangan

 1  2   

**Grand Challenges Canada** @g... · 3d ...
@sayedaqeel1 Thanks for reaching out. Grand Challenges Canada, and other funding sources mentioned, had no role in data collection, analysis interpretation or in the writing of this study.

The team members or their Institutes refused to reply to request by Dr Sayed Aqeel Hussain to provide evidence or issue corrigendum like Grand Challenges Canada which funded Professor Margoobs Rs 22500000 private project.

Instead of replying Prof Margoob and Dr Abdul Majid currently HOD Psychiatry SKIMS Medical College wrote an email to Royal College of Psychiatrists that Dr Sayed Aqeel Hussain was planning to file legal petition against the Journal and Authors which was contradictory to facts as Corrigendum was already issued.

RE: Thanks RCPsyc.

Dear Professor Margoob

Further to me email below I can confirm that while Dr Aqeel Hussain is a Fellow of the Royal College of Psychiatrists, he holds no office within the College and does not act or speak on behalf of the Royal College of Psychiatrists. Dr Hussain is acting in an personal capacity.

I can also confirm that the Royal College of Psychiatrists has not lodged a complaint with the Canadian Journal of Psychiatry and the Royal College of Psychiatrists has not begun any legal proceedings against the journal or the authors of the referenced article, and it has no intention of doing so.

This issue has been brought to the attention the Officers of the College and more formal correspondence to the individuals listed in your email below will follow shortly.

Best wishes
Elen

The College replied to the Authors and Prof margoob shared the reply which contained content contradictory to facts on ground in social media .

Also the Language in the reply mail did not seem to reflect the original mail received from the RCPsych.

The College was informed of the email circulation and Prof Uzri Head of International Division of the RCPsych again

confirmed that he had recommended Dr Sayed Aqeel Hussain to write to Editors of the Journal to investigate the matter and following the investigation a Corrigendum was published which made it clear that the email circulated in social media by Prof Margoob that Dr Sayed Aqeel Hussain was planning to file legal petition against the Journal and its authors was contradictory to the facts on ground and the only aim of Prof Margoob and Dr Majid was to destroy Dr Sayed Aqeel Hussain's credibility and work done on ground in order to cover the outcome of investigation by Canadian Journal of Psychiatry.

This also supported the fact that aim of the false statement published by Prof Margoob was only to destroy Dr Sayed Aqeel Hussain's credibility and work done in collaboration with reputed organisations like RCPsych.

To promote this paper with false statement against work done in kashmir Prof Margoob asked one of the Consultant Dr Sheikh Shoib to promote this paper as reference . Dr Shoib works as Consultant Psychiatrist in Directorate of Health services kashmir which was one of the main Collaborating partner of the project and it was on invitation of Director Health services kashmir that the team of RCPsych came to kashmir.

It was highlighted to Dr Shoib that the paper he was promoting was sharing a statement against the work of his own department without evidence and it also shared contradictory figures about the psychiatric manpower of

Directorate of Health services kashmir which were refuted by Consultant of IMHANS in one of the webinar.

Despite evidence he continued to promote the 22500000 Rs project of Prof Margoob for his own vested interests and discredit the work of his own parent department.

Professor Margoob and the team of his project working in IMHANS , SKIMS , Medical college Baramulla and Dr Shoib from Directorate of Health services kashmir are warned to be careful in future and advised to follow ethical guidelines in making any statement regarding Dr Sayed Aqeel Hussain's work in kashmir done in collaboration with various national or international organisations in past or in future.

Dr Sayed Aqeel Hussain has successfully completed more than 10 projects in kashmir in collaboration with various National and International Organisations over last one decade with establishment of two crisis helpline in Jammu and Kashmir in collaboration with SDRF.,unfortunately the work done in Kashmir in collaboration with various organisations especially RCPsych has been repeatedly undermined by various faculty members of IMHANS through press and social media and publication of false statement in Canadian Journal of Psychiatry against the work done in collaboration with RCPsych being a prime example.



Following the issuance of Corrigendum by CJPpsych the establishment of two crisis team in collaboration with mhGAP trust went successfully with criticism of work without any evidence having no impact on request to mhGAP team kashmir by Govt to complete the project .

 **Dr Sayed Aqeel Hussain**
@Dr_SayedAqeel


Appreciation to Mr VK singh
Commandant General by
[@haseeburrahman1](#) Commandant
SDRF for initiating and supporting
the establishment of two 24x7 crisis
international Affairs for your information.

Regards
Aqeel

 maluzri 14 Jun
to me ▾

Thanks Aqeel

Very pleased that this issue is resolved to your
satisfaction.

 @Dr_SayedAqeel

Establishment of two 24x7 crisis
helpline by SDRF in Jammu and
Kashmir after two intensive trainings
of one week each to Kashmir and
Jammu trainees using the WHO

and has published several papers along with
Professor Margoob who served as Head of
Department of the Institute before retiring in 2013
took objection to the statement.

He Is also a member of Royal College of
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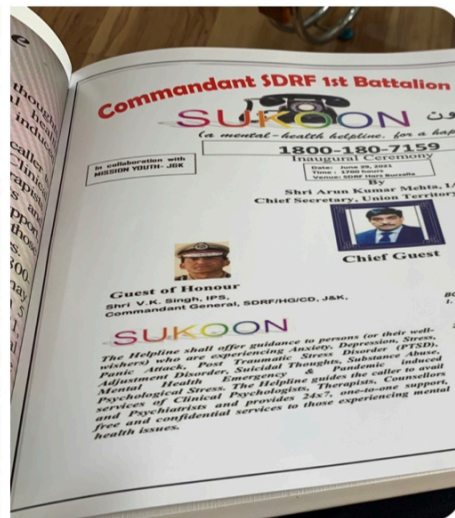
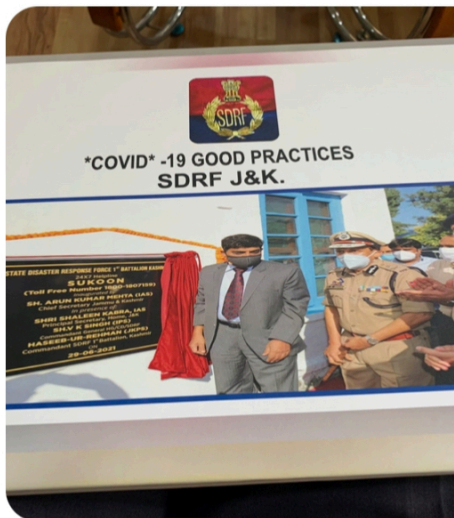
Dr Firdosi made a charged and emotionally strong
statement for objecting to the statement made by
Porfessor Margoob in the paper even before
reading the statement . Dr Firdosi was advised to
read the statement which he did and felt that there
was nothing wrong in the statement and it was
entirely my responsibility to revive the success of



Dr Sayed Aqeel Hussain
@Dr_SayedAqeel



Establishment of two 24x7 crisis helpline by SDRF in Jammu and Kashmir after two intensive trainings of one week each to Kashmir and Jammu trainees using the WHO devised mhGAP modules by mhGAP kashmir trust





Dr Sayed Aqeel Hussain
@Dr_SayedAqeel



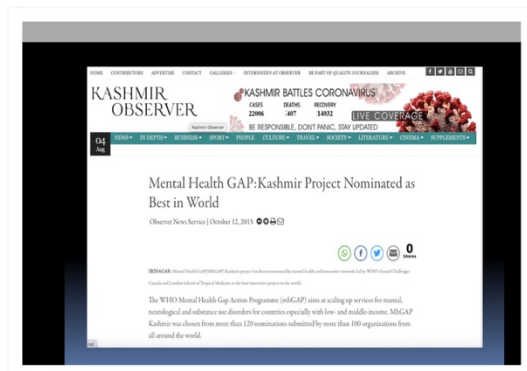
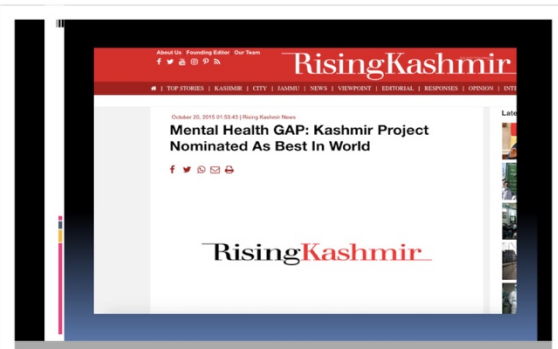
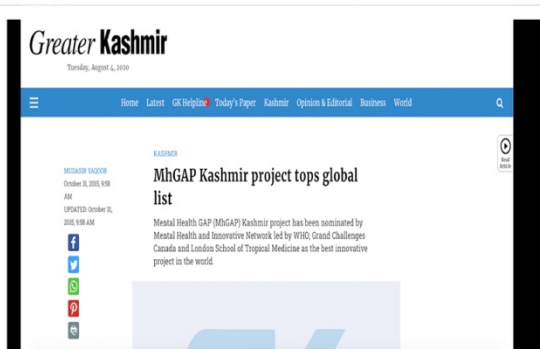
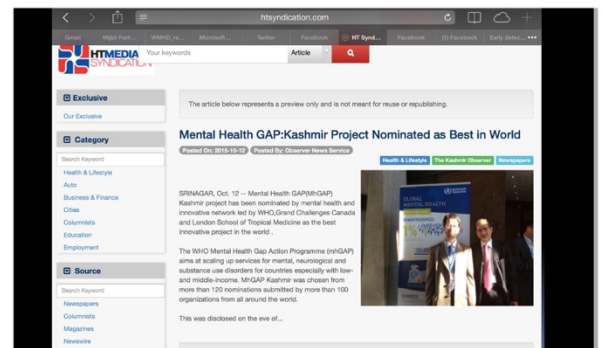
Appreciation to Mr VK singh
Commandant General by
[@haseeburrahman1](#) Commandant
SDRF for initiating and supporting
the establishment of two 24x7 crisis
helpline's by SDRF in Jammu and
Kashmir the first of its kind ...which I
have been recommending as part of
WHO recommendations





Dr Sayed Aqeel Hussain wants to reassure the people of kashmir that mhGAP team has never compromised on the

quality of care and training which has been appreciated across the Globe.



Dr Sayed Aqeel Hussain is the only Psychiatrist of Kashmiri origin to have received FRCPsych the most prestigious award in the field of psychiatry in the world

Unlimited HDTV is Here

Brits Can Cancel Their Cable TV Bill By Switching To This New HDTV Antenna crazgadgets.com

OPEN

Congratulations to Dr Sayed Aqeel Hussain for being the first psychiatrist of Kashmiri origin to be awarded Fellowship of The Royal College of Psychiatrist London (FRCPSych) the most Prestigious award in the field of psychiatry in the world by the President of the Royal College of Psychiatrist London.

From

***DR HAFIZ HUSSAIN ,DR SHAHIDA AGA
AND FAMILY.***

Special event for our newly elected Fellows, June 6 2019



The Royal College of Psychiatrists

Special event for our newly elected Fellows, June 6 2019 - 7 Jun at 14:20 -



Dr Sayed Aqeel Hussain
@Dr_SayedAqeel



It is because of people like these who exploit volunteering for political and personal interests Royal College of Psychiatrists closed the category of Volunteer Psychiatrist of the Year Award, only 4 people in the world have been nominated in this category by the Royal College

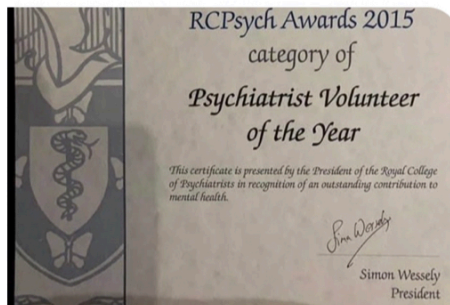
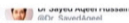


Dr Sayed Aqeel Hussain
@Dr_SayedAqeel



When political and personal interests override public interest while volunteering in community this is what happens. U feel only you have copyright over community and no one else really unfortunate .

@rcpsychINTL @rcpsych
@psychvolunteer @aluzri1
@bipa_uk @raj_psyg
@subodhdave1



Only four people were nominated in this category by RCPsych.

Dr Peter Hughes FRCPsych. UK
Dr Manoj FRCPsych INDIA
Dr Abbasi IRAQ
DR Sayed Aqeel Hussain FRCPsych INDIA

...recognising
excellence in
psychiatry



This is to certify that
Dr Sayed Aqeel Hussain
was
shortlisted
in the
RCPsych Awards 2015
category of
*Psychiatrist Volunteer
of the Year*

*This certificate is presented by the President of the Royal College
of Psychiatrists in recognition of an outstanding contribution to
mental health.*

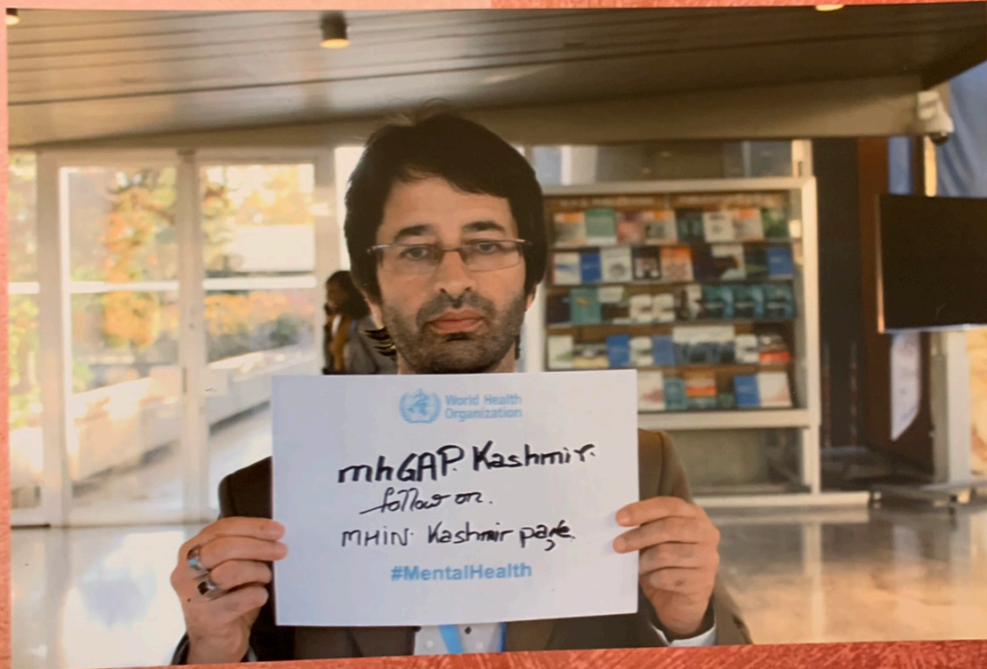
A handwritten signature in dark ink, reading 'Simon Wessely'.

Simon Wessely
President



MENTAL HEALTH

WE'RE IN IT TOGETHER



World Health
Organization



Dr Sayed Aqeel Hussain
@Dr_SayedAqeel




Replying to [@Dr_SayedAqeel](#) [@Mudasir__Karim](#) and 7 others

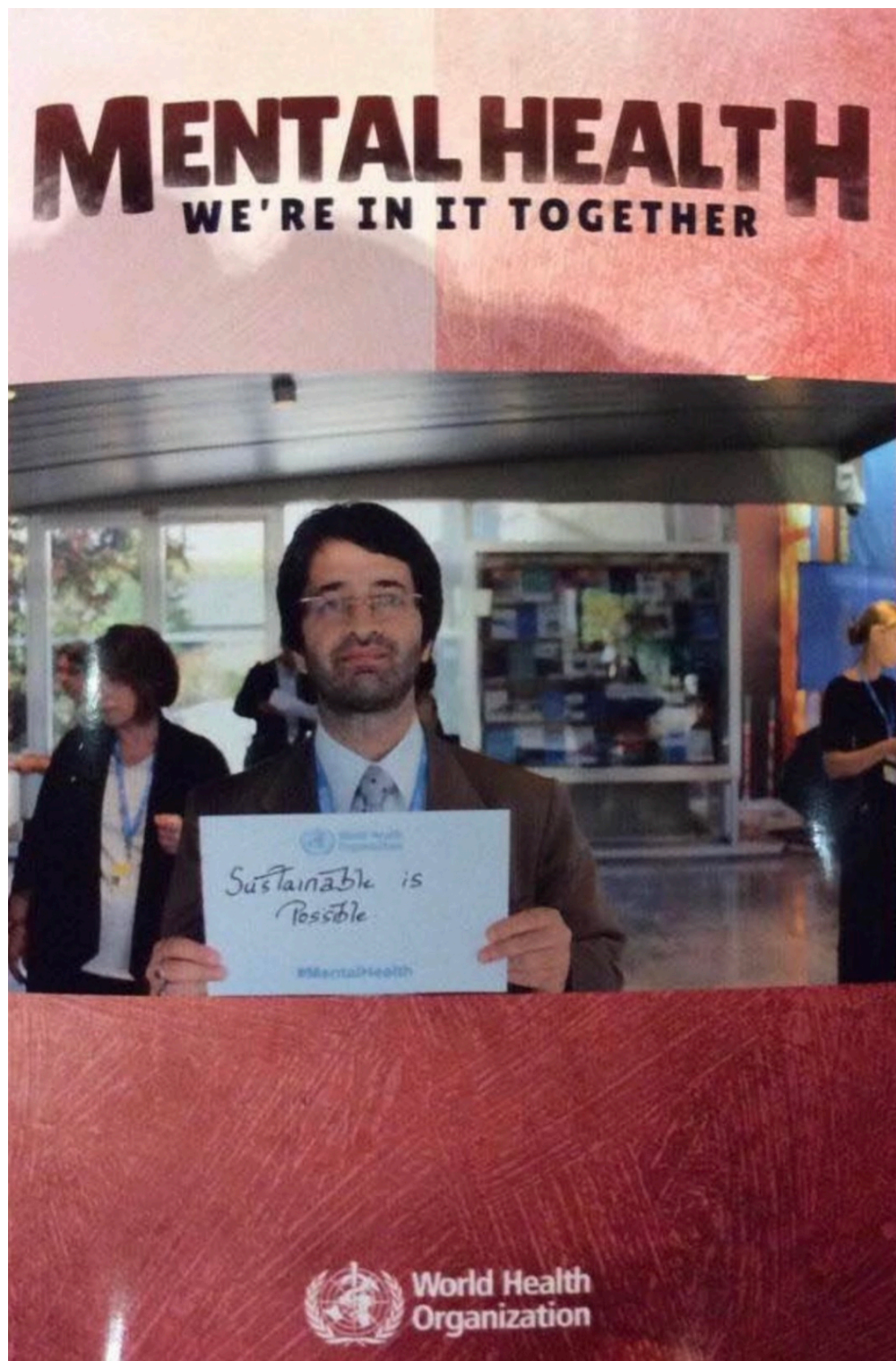
Our strength is the prayer of our people as depicted in our logo and we focus on quality of care and training rather quantity along with our collaborating partners

The main image is a submission by Masood Hussain, a renowned Kashmiri artist. It depicts a praying woman's face and hands peeping through a lattice window – a symbolic image intertwined with the success of the project.



 **Leicestershire Partnership NHS Tr...** [@LPTnhs](#)

Congratulations LPT consultant psychiatrist [@aluzri1](#) who is to oversee international work of [@rcpsych](#) in prestigious Presidential appointment. Read more in our media



Example of sustainability.....

- Outcome of meeting between Prof Sue Bailey President of the Royal college of Psychiatry and Dr Sayed aqeel Hussain on 14 Feb
- Dear Sayad,
- It was really good to meet you last Tuesday and I am really impressed by all the work that you are doing in trying to take forward both mental health and public mental health services in Kashmir.
- I suggested to you that you needed to make three priorities;
- 1. To proceed to a model as in Iraq and also as carried out by Peter Hughes for some mental health gap training. You have a paper by Peter Hughes that gives you a model.
- 2. To work out a priority plan on what you would like to achieve over the next ten years. When you send that back to me I would be very happy to discuss it with you again. We have also suggested asking Professor Dinesh Bughra, as the President elect to the WPA, for his advice.
- 3. How you are going to spearhead any of this work while carrying out all your other commitments and whether there was some way you could look towards a more formal role in service development in Kashmir.
- Once again best wishes.
- ,Sue
- Professor Sue Bailey
- President
- Royal college of psychiatry

10 projects completed over last 10 years

MhGAP training 2013

MhGAP training with psychiatric hospital 2014

MhGAP training with directorate of Health 2014

Online interactive project 2015

Training of students in Uk 2015

Psychological first aid workshop 2016

~~Deaddiction~~ workshop 2018

Autism workshop 2019

Suicide webinar for training of GP across world 2020

CESR application project 2020

Crisis team establishment project 2021

Dr Sayed Aqeel Hussain and his team will not be responsible for any action initiated against Prof Margoob and his team by any individual or organisation whose reputation or credibility might have been affected due to distortion of content of email from RCPsych if any and circulating it in social media .



SOME PEOPLE DON'T RECOVER THEY STILL HAVE FLASH BACK ABOUT THE SUCCESS OF THE PROJECT AFTER ONE DECADE.

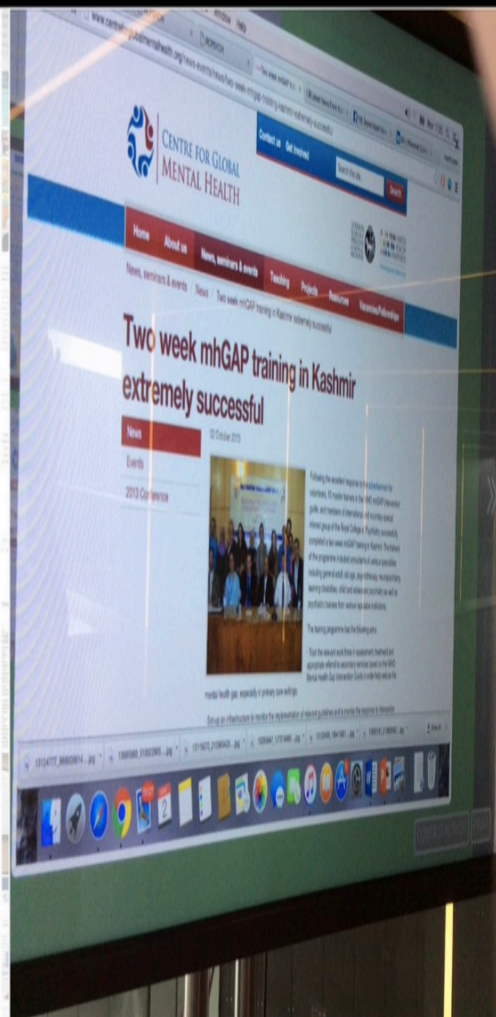
Vikram Patel named as one of Time Magazine's 100 most influential people

Submitted by Brandon Sanford on April 16, 2015 -
11:08pm



Vikram Patel, who will be one of the plenary speakers at this year's ACBS World Conference, was named as one of Time Magazine's 100 most influential people. The article, which can

be found [here](#), describes Dr. Patel as "a gifted psychiatrist, a dedicated researcher, a successful author of books and academic papers, and [an] effective communicator. In fact, he seems to have an unending supply of these critical skills." Dr. Patel was the Founding and Joint Director of the [Centre for Global Mental Health](#) which states as its mission "To close the treatment gap for people living with mental, neurological and substance use disorders in low resource settings." Specifically, the center conducts research concerning prevention, treatment, and care for mental, neurological, and substance use disorders in low resource





Dr Sayed Aqeel Hussain
@Dr_SayedAqeel



If the Ex HOD refuses to support an International Project coordinated by @JKGovt1 in collaboration with @DHSKashmir WHO and RCPsych and supported by @KashmirPolice you won't find your name in the Dignitaries awarded for their contribution which does not mean project has failed

Two week mhGAP training in Kashmir extremely successful

02 October 2013



Following the excellent response to the [advertisement](#) for volunteers, 10 master trainers in the WHO mhGAP intervention guide, and members of international and voluntary special interest group of the Royal College of Psychiatry, successfully completed a two week mhGAP training in Kashmir. The trainers of the programme included

outstanding contribution and commitment towards reducing the mental health gap in Kashmir:

Dr Shekhar Saxena, Director WHO Mental Health and Substance Abuse;

Prof Sue Bailey, President of the Royal College of Psychiatry;

Prof Vikram Patel, co-director of the Centre for Global Mental Health;

Prof Rachel Jenkins Research, collaborator for WHO Mental Health and Substance Abuse

Dr Peter Hughes, Royal College of Psychiatry and his team



The district of Ganderbal in the Kashmir valley extends to the north from the outskirts of the city of Srinagar through the Kangan valley to very remote mountainous regions, including the Thajivas glaciers. The district has a population of 297,000, which is predominantly rural (84%), with a low literacy rate (58% compared with the national average of 74%).³⁰ Within this district, our project aimed to cover an area

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The training programme had the following aims:

- Train the relevant work force in assessment, treatment and appropriate referral to secondary services based on the WHO Mental Health Gap Intervention Guide in order help reduce the mental health gap, especially in primary care settings;
- Set-up an infrastructure to monitor the implementation of relevant guidelines and to monitor the response to intervention and
- Strengthen interagency liason for effective delivery of services using bio psycho social approach



More than 100 trainees both from Kashmir and other states of India were trained, including general physicians, nurses, teachers, NGOs, psychologists, lawyers, social workers, police personnel and people from various other disciplines. Representatives of PRIME and Prof Vikram Patel also attended the training session.

The following individuals received awards of appreciation for their role on the programme, and their outstanding contribution and commitment towards reducing the mental health gap in Kashmir:

Dr Shekhar Saxena, Director WHO Mental Health and Substance Abuse;

Prof Sue Bailey, President of the Royal College of Psychiatry;

Prof Vikram Patel, co-director of the Centre for Global Mental Health;

Prof Rachel Jenkins Research, collaborator for WHO Mental Health and Substance Abuse

Dr Peter Hughes, Royal College of Psychiatry and his team

Dr. Salim ur Rehman, Director health services Kashmir, without whose support this project would not have been possible

Dr Sayed Aqeel Hussain, consultant psychiatrist and member of Royal College of Psychiatry, for initiating the project and coordinating it at the international level;

Dr Muzaffar Khan, Director of Police Addiction services in Kashmir, for successfully coordinating the project at state level.

Mrs Nighat Shafi, for her outstanding contribution to the cause of women and children especially in the field of mental health,

Mr SM Sahai, ADGP, for initiating drug addiction services on behalf of police in Kashmir.

This is the first successful mhGAP training programme in whole of India and will serve as a role model for mhGAP training in rest of India in the future.

The Response by Professor Margoob and his team raises several unanswered questions.

1. Why did Professor Margoob refuse to reply to Query by Dr Hussain to produce evidence to substantiate the claim that the 2 week training conducted in collaboration with RCPsych failed to produce results forcing the principle author Prof Ashok Malla to advise Dr Hussain to write to editor of the journal to initiate investigation.
2. How did Prof Margoob and his team come to conclusion by just relying on District Ganderbal when the training was conducted in 12 districts of kashmir.
3. How did Prof Margoob and his team come to conclusion when the main training project followed by intensive monitoring and evaluation started after

the start of Professor Margoob and his teams project.

4. How did Prof Margoob and his team come to conclusion when they had no access to the cases seen by permanent members of Govt Supported team in primary care centres as the cases seen by his team were cases of patients seen in community.
5. Why did Prof margoob and his team not mention that the main training monitoring and evaluation project implemented as part of MOU between Govt of Kashmir and RCPsych under the supervision of Dr Sayed Aqeel Hussain who was working as Consultant Psychiatrist in Govt Psychiatric disease hospital started after the two week training as highlighted in the Corrigendum published by Canadian Journal of Psychiatry following investigation.

6. Why did Prof Margoob and his team not mention that this statement was based on observation rather any documented evidence or data as highlighted in the Corrigendum published by the Canadian journal of Psychiatry.
7. Why did Prof Margoob refuse the request to work in collaboration with Govt supported project in 2014 as both projects were running in District Ganderbal .
8. Why did Govt psychiatric disease hospital refuse to provide any support to Govt supported project to depute team for monitoring and evaluation as requested by Dr Sayed Aqeel Hussain who was working as a faculty member at the institute but deputed team to 22500000 Rs private project of a retired psychiatry professor .

9. Why did Professor Margoob team refuse to reply to Dr Sayed Aqeel Hussain request whether they made observation and recommendation to Prof margoob to publish statement that the two week training conducted in collaboration with RCpsych and WHO failed to produce any results.
10. Why does Prof Margoobs team refuse to explain how they came to conclusion and made this observation.
11. Why did Prof Margoob write to RCPsych that Dr Sayed Aqeel Hussain was planning to initiate legal proceedings against the journal without RCPsych permission when the investigation initiated by the journal on the recommendation of Prof Mohammad Uzri head of International Division of the

RCpsych had already been completed and corrigendum issued.

12. Are Prof Margoobs and his team not responsible for damaging the credibility of Dr Sayed Aqeel Hussain and his work by blaming him for planning to initiate legal proceedings against the Journal on behalf of RCPsych without their permission.
13. Why did Prof Margoob and his team circulate in entire social media so called email by RCPsych that Dr Sayed Aqeel Hussain was planning to initiate legal proceedings against the Canadian Journal of Psychiatry on behalf of RCPsych without seeking RCPsych permission.
14. Are Prof Margoobs and his team not liable to defamatory charges by Dr Sayed Aqeel Hussain for trying to damage the reputation and credibility of Dr Sayed Aqeel Hussains work done in kashmir in

collaboration with various National and International organisations including RCPsych by circulating false information on social media.

15. Why Did Dr Shoib who is working as a Consultant Psychiatrist in Directorate of Health services kashmir one of the main Collaborating partner in mhGAP training in kashmir refuse to write to editors of the journal to remove reference of Prof margoob project that discredited the work done by Directorate of Health services in collaboration with RCPsych and WHO without evidence.
16. Why did Dr Shoib actively promote the paper when it mentioned figures regarding the psychiatric manpower of Directorate of Health services kashmir which was contradictory to figures on

ground and which were even disputed by Consultant psychiatrist of IMHANS in a recent webinar conducted in collaboration with BKMA.

17. why did Prof Margoob advocate the use of mhGAP training of Pakistan in kashmir while completely dismissing the mhGAP project completed in kashmir by Govt of kashmir in collaboration with various National and International organisations like RCPsych and WHO.

18. It is unfortunate that Dr Mudasir Firdosi working as Consultant Psychiatrist in UK and principle investigator in a research project in uk and has been student of Prof Margoob tried to justify the statement of Prof Margoob in the paper and putting responsibility on Dr Hussain to disprove the statement forgetting the principle that the burden of proof is usually on the person who brings

a claim in a dispute and the necessity of proof always lies with the person who lays charge

It is recommended that investigation be initiated and answers be sought from Prof Margoob and his team and recommendations be made by Govt that the Govt employees should provide complete support to Govt supported projects rather using Govt manpower and resources to support private projects for their own vested interests.

Dr Sayed Aqeel Hussain is currently seeking legal opinion for filing defamatory suit against Prof Margoob and his team for deliberatory trying to damage the reputation and credibility of Dr Sayed Aqeel Hussains work on social media.

Dr Sayed Aqeel Hussain will also not be responsible for any legal proceedings initiated by RCPsych or its team members for trying to

distort the content of the correspondence email if any by Professor Margoob and its team.

Finally this statement and action by Professor Margoob and its team has seriously damaged the credibility of the Govt of Kashmir especially by members of Govt Psychiatric Institute Srinagar, Psychiatric institute SKIMS medical college and Dr Sheikh shoib consultant Psychiatrist working in Directorate of Health services kashmir which was one of the main collaborating partner of the mhGAP Project in kashmir.

This will prevent International organisations working on world stage to stop collaborating with Govt of Kashmir in any future projects .

I hope the Govt will fully investigate the matter and take necessary action in order to deter professionals and Govt employees from discrediting the work of Govt and damage

reputation on world stage for their own vested interest.

Dr Sayed Aqeel Hussain(MRCPsych, FRCPsych)
Consultant Psychiatrist
International Collaborating Partner WHO Headquarters
Geneva
Master Trainer mhGAP
Research Collaborater for PRIME India
Chairman mhGAP Kashmir Trust
Ex Consultant Govt Psychiatric disease hospital Srinagar