

Atmiyata Evaluation Plan

I. Project Impact

Study Design & Sample Size

The study design to assess impact of the Atmiyata project is a quasi experimental, pre-post with control group design (Campbell and Stanley xxxx). The intervention site has 35 villages. Control villages from a similar geographical block to the intervention site will be selected based on distance from main town and population size. The control block will be located at a geographical distance from the intervention villages to avoid contamination. The study population includes adult women and men > 18 years.

A sample size of 823 has been calculated to detect a decrease in reported symptoms meeting the diagnosis of a CMD from 15 percent to 10 percent with 85 percent power and an alpha of 0.05 (Fleiss 2005). The sample will be stratified by women and men and will include younger and older age groups. As a result there will be 225 women (< 40 years), 225 women (40+ years) and 225 men (< 40 years) and 225 men (40+ years). As a result the total sample at baseline in the intervention group will be 900 and in the control group 900.

I. Project Outcomes

	Outcome Measure	Metric/Indicator	Tools/ Instruments	Data Source/s
1.	Access to treatment	25 percent of those detected with MI will access treatment either at the FRU or district hospital	GHQ questionnaire	Baseline and endline surveys in intervention and control groups
2.	Increase in utilization of social benefits	Percent increase in utilization of access to social benefits	A set of questions on access to social benefits by the family of a person with MI	Baseline and endline surveys in intervention and control groups Project MIS; monthly reporting on access to and utilization of social benefits
3.	Increase in quality of life	Percent increase in quality of life from baseline to endline and compared to the control area		Baseline and endline surveys in intervention and control groups
4.	Increase in capacity of Amtiyata champions	Percent knowledge & skills increased	Index of knowledge & skills	Scores on pre and post tests

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II. Development of the Intervention

	Activity	Description	Outcomes/Products of Activity	Applications to Atmiyata Intervention
1.	Formative Research	10 FGDs 6 IDIs	-Local constructs of well being & mental illness - Coping patterns for MI - Treatment seeking pathways including traditional healers - Lexicon for well being & MI - Social support for MI; attitudes towards MI -Development of core criteria for Atmiyata champions.	Formative research findings will be used to develop the core structure and content of the films They will used to ensure that local context and need are prioritized in the development of the intervention
2.	Mobile phones	Several models will be tested for audio quality and screen size before finalization of the phones Usability testing will be done with Atmiyata champions prior to finalization of the model	Phones with good audio quality & screen size will be selected Functions such as Bluetooth and micro SD chip transfer will be tested with Atmiyata champions	Selection of final model of phone will bedone after usability testing with Atmiyata champions; Content for technical training of Atmiyata champions will be based on usability testing
3.	Films	Field visit by film consultant Formative research findings Development of story line and concepts Preparation of photomatics Testing photomatics at the field level Finalization of films	Iterative process of generation of training and motivation films with several rounds of inputs from Atmiyata team and pretesting at the field level	Films developed that are locally relevant, technically strong, emotionally appealing and compassionate in approach.
4.	Social Benefits	Compiling details of social entitlements and establishing linkages to obtain them	List of social benefits List of documents required to obtain different social benefits List of how and where to obtain social benefits	Detailed information about social benefits Linkages to be established

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III. Validation of the Atmiyata intervention (1 month) in 1 villages

	Activity	Description	Outcomes/Products of Activity	Applications to Atmiyata Intervention
1.	Undertake validation of Atmiyata intervention	<p>Orient Atmiyata champions in 1 villages</p> <p>Use photomatics if films are not ready</p> <p>Have a meeting of the Atmiyata champions with the atmiyata friends</p> <p>Have stakeholder meetings in the village</p> <p>Usability testing of mobile phones & 5 exit interviews of persons meetings</p>	<p>-Local constructs of well being & mental illness</p> <p>- Coping patterns for MI</p> <p>- Treatment seeking pathways including traditional healers</p> <p>- Lexicon for well being & MI</p> <p>- Social support for MI; stigma</p> <p>- Develop criteria for identification of Atmiyata champions</p>	<p>Formative research findings will be used to develop the core structure and content of the films</p> <p>They will used to ensure that local context and need are prioritized in the development of the intervention</p>

IV. Tracking the Atmiyata Intervention

	Activity	Indicator	Who to collect	Frequency
1.	Training of Atmiyata champions	# of champions who scored a basic 75 percent in test after training	BAIF team	Once; after champions training
2.	Tracking how many attended the 9 training meetings for Atmiyata champions	# of champions who attended 7+ meetings # of champions with core championship criteria	BAIF team	After each training meeting (a total of 9)
3.	Showing of Atmiyata films at the community level	# times films shown in each village	BAIF team/ Technical Mobile tracking	Monthly
4.	Transferring Atmiyata films at the community level	# times films downloaded in each village	Technical Mobile tracking	Monthly
5.	Detection/referred/referral utilization	# persons detected/referred/ref utilization	BAIF team	Monthly
6	Social benefits	# persons/families receiving social benefits	BAIF team	Monthly

7	Atmiyata meetings at village level	# of meetings held at village level # of persons attending Atmiyata meetings	BAIF team	Monthly
6.	Tracking the viewing, sharing and transferring of films via mobile phone	# of times films viewed/shared/transferred	Technical tracking system on the mobile phone	Monthly