



# Impact of short term multi-layered Salaam Bombay Foundation interventions during the COVID-19 Pandemic on the well-being of adolescents in Mumbai

Evaluation Report (Draft 2.0) March 2021

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**SALAAM  
BOMBAY  
FOUNDATION**

A CHILD IN SCHOOL HAS A FUTURE



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## Executive Summary

This cross-sectional evaluation study initiated in partnership with Harvard T.H. Chan School of Public Health and Salaam Bombay Foundation (SBF) looks at the effect of multi-layered interventions implemented by SBF on underprivileged adolescents across various communities of Mumbai from April to June 2020. The interventions comprised of Happy Mind Calls, Skill Building Activities and Food Relief.

The aim of this study was to assess the impact of these interventions on the social and psychological wellbeing of adolescents, who were a part of the SBF program during the COVID 19 pandemic lockdown.

This case control mixed methodology study looked at the Happy Mind Calls intervention impact evaluated in the form of a quantitative telephonic survey and qualitative analysis of the audio recordings of Happy Mind Calls.

The survey designed to evaluate positive emotions, social support and self-efficacy to assess the impact of Happy Mind calls was administered to 630 students across five target groups including control group – students who were not made Happy Mind Calls. Intervention groups comprising of four categories were considered depending on the multiple layers and included Only Happy Mind Calls, Happy Mind Calls with Skill-Building Activities, Happy Mind Calls and Food Relief and the all-inclusive Happy Mind Calls, Skill Building Activity and Food relief category. The audio recordings of 240 calls Happy Mind Calls were qualitatively analysed to assess the students' psychological well-being, interpersonal skills, and decision-making skills. In addition to that, verbal cues that were a part of the casual conversations between the students and the facilitators were evaluated to assess the impact of life skills that were a part of SBF's regular curriculum.

Although at the beginning of the calls, most of the students reported of feeling neither positive nor negative, by the end of the call majority them shared of a positive feeling about the activity. A large number of the students laughed during the activities, suggesting they had fun. Most of the students displayed a readiness to engage in the activity without hesitation. In addition to conducting the activities, most of the facilitators managed to engage the students in additional conversations and made extra efforts to keep the conversation happy and engaging for the students and their families.

It was interesting to note that the qualitative data of the study showed an interesting contrast to our quantitative findings. For instance, although a follow-up evaluation survey did not quantitatively confirm an increase in positive emotions due to the Happy Mind Calls, our findings from the qualitative study indicate that the Happy Mind Calls were able to make the students happy by providing them with some entertainment in the form of the activities.

The study concludes that the Happy Mind Calls were important to bring out the positive emotions and allowed students to express themselves, majority being happy to participate. The study recommended that Happy Minds calls alone may not be enough to instil the feeling of social

support and self-efficacy as the multi-layered interventions of skill-building and food relief along with Happy Minds calls produced the stronger feeling of social support and care. The impact of the overall intervention lasted for almost six months, which speaks of the importance and success of the intervention and such activities should be carried out in the future with more well planned holistic approach.



It is now widely recognized that among the many negative outcomes of COVID-19 is the impact it had or continuing to have on people's mental health. The impact on children has been even more profound given the disruption in schooling, engaging with classmates and friends, and loss of a typical childhood as they knew it before the pandemic.

In this context, the program of Salaam Bombay Foundation that engaged students through what is called as Happy Mind Calls is innovative and impressive. This brief intervention of one phone call supplemented with other activities such as skill-building, playing games or food relief where needed, appears to have had solid and demonstrable positive impact on children's emotional well-being. The evaluation of the program in collaboration with our team at Harvard T. H. Chan School of Public Health clearly shows that SBF's calls made the students happy and feel connected. They must have communicated to the children that they matter. And, that someone cares for them.

This is an innovative approach that can be done remotely, easily scalable and impactful. This approach offers an illuminating pathway for working with children not just during the pandemic but to engage them during other times too. I congratulate SBF on developing and executing such as an innovative program that is not only impactful but also serves as a model for others.



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## Background and Introduction

Salaam Bombay Foundation (SBF), a Mumbai based Non-Governmental Organization (NGO) with its presence in Pune, Kolkata, Bengaluru, Jaipur, and a few parts of rural India, is an organization that works with adolescents from low-income communities to help them stay in school and empowers them to make the right choices about health, education and careers. Their mission, 'every child in school has a future' is a noticeable belief that is apparent through all their programmes, which pre-COVID19 were predominantly in-school programmes. SBF programmes are aimed to keep a socio-economically vulnerable population of school-going adolescents, between ages 11 to 18 years, from dropping out due to reasons such as pressure to contribute to family income, addiction to forms of tobacco and even just disinterest in the school curriculum. These programmes work closely with government and government-aided schools for adolescents during their formative years to motivate them to continue their schooling which in turn improves their chances for better opportunities and life outcomes. All SBF programmes, pre-COVID19, were conducted either before school or after school hours on the school premise itself to ensure maximum participation and that adolescents do not compromise on the regular classes and activities in their schools.

In the current crisis of the COVID-19 pandemic, social distancing has been recommended as one of the major ways through which individuals can protect themselves from infection. In such a situation, adolescents are losing out on one of the major development aspects in their life- social interaction with their friends and peers. (Miller 2020). Consequently, a lockdown lasting over a few months can affect their social relationships which enable and empower them to feel motivated and to work towards positive life goals.

Institutional networks like schools and NGOs working with adolescents can be a source of support during such difficult times. These networks owing to their close association with adolescents are in a position not only to recognize various care needs of adolescents but also provide them with care support within their virtual spaces (in the form of virtual classrooms, interactive sessions, phone calls etc.)

Salaam Bombay Foundation (SBF) while training its students in important life and technical skills, additionally provides a space of expression within their training ambit. This enables SBF students to understand their peer's social contexts as well as motivate them to move forward by making informed choices about their education and life goals.

During the time of emergency, SBF is not only conscious but cognizant about the barriers faced by many of its students living in urban slums to access the spaces which enable their growth through networks (at various levels like peers, school and institutional). In such situations where social distancing becomes the norm for a prolonged period (over a year), SBF provides virtual spaces to enable various peer and network support for its students. This is also to ensure that following norms of social distancing stringently does not lead to social isolation of adolescents (Hawkley and Capitano 2015). Enabling steps to ensure accessibility to various networks allows adolescents to not feel socially isolated where mobility is limited.

The care becomes a medium of support and motivation since it provides the adolescents with spaces of expression, sharing of aspirations, talking about the new normal or just talking about the new every day.

#### About the multi-layered interventions implemented by SBF

In April 2020, the SBF started a ‘Happy Mind Calls’ initiative. They conducted peer to peer activities to promote social and psychological well-being of adolescents during the lockdown that was enforced, between March, 2020-June, 2020, to contain the COVID-19 pandemic. The SBF support came in three types of increasing intensity: Happy Mind Calls, various skill building activities, and food relief interventions, as described below:

1. **Happy Mind Calls:** This intervention included telephonic calls made to SBF students, to help them cope up with the unexpected lockdown, sudden imposed restrictions and the fear of COVID-19. During these 2 to 10 minute calls, some fun based activities were conducted to engage them, and facilitate normalisation of their emotional well being.
2. **Skill building activities:** This intervention was also conducted with the SBF students during the lockdown. However, these were limited to students who were in the Sports, Arts, Media and skills@ school academies. This intervention included the SBF facilitators suggesting activities, such as photography, citizens journalism /skills of radio jockey (Mirchi gully gang), creative arts and digital skills, to the students.
3. **Food relief:** Extension of the lockdown beyond a month resulted in severe food insecurity for some families. This led to some of the SBF students and their parents sharing their food insecurity concerns with the SBF facilitators during the Happy Mind calls. Accordingly, some food relief was provided by SBF to the students as well as their families.

### **Aim of the study**

To assess the impact of the short term multi-layered SBF interventions, on the social and psychological wellbeing of adolescents in lockdown, during the COVID-19 pandemic in Mumbai.

### **Section 1: Happy Mind Calls Survey**

Using a survey as an evaluation tool, we assessed the effect of SBF’s Happy Mind Calls initiative on the adolescents’ social and psychological wellbeing by evaluating their positive emotions, perceived social support, and self-efficacy.

#### **Methods**

##### **Outcomes**

*Positive emotions* A positive emotion can be defined as an emotional reaction designed to express a positive affect, such as happiness when one attains a goal, relief when a danger has been avoided, or contentment when one is satisfied with the present state of affairs. (“Positive Emotion – APA Dictionary of Psychology,” n.d.) The positive emotions of the participants were assessed using a

modification of the 10-item Pemberton Happiness Index.(Hervás & Vázquez, 2013) The Cronbach's alpha of the positive emotions index was 0.22. The response scales of this scale was modified to a three-point scale for ease of administering over the telephone to adolescents.

*Perceived social support* Perceived social support may arise from any interpersonal relationship in an individual's social network, involving family members, friends, neighbors, religious institutions, colleagues, caregivers, or support groups.(“Social Support – APA Dictionary of Psychology,” n.d.) The perceived social support was measured through the six-item ENRICH Social Support Inventory (ESSI).(Mitchell et al., 2003) The Cronbach's alpha of the perceived social support index was 0.59. The response scales of this scale was also modified to a three-point scale for ease of administering over the telephone to adolescents.

*Self-efficacy* Self-efficacy is an individual's subjective perception of his or her capability to perform in a given setting or to attain desired results. (“Self-Efficacy – APA Dictionary of Psychology,” n.d.) These measures were evaluated using the respective multi-item psychometric scales, to determine the students' social and psychological wellbeing.(Robinson, 2018) An eight-item survey tool assessed the self-efficacy of the adolescents. The self-efficacy index has been used by SBF in their past studies. The Cronbach's alpha of the self-efficacy index was 0.61.

### Target Population

Based on the different types of interventions conducted by the SBF, the target population for this study could be divided into five groups:

- (1) No Happy Mind Calls (Control group)
- (2) Only Happy Mind Calls
- (3) Happy Mind Calls and Skill building activities
- (4) Happy Mind Calls and Food relief
- (5) Happy Mind Calls, Skill building activity and Food relief

Data were collected from all the five groups, using a semi-structured telephone survey developed post-intervention. No baseline data were collected.

### Evaluation Tools Development

A survey was used to collect data from the five groups. The questions of the survey were developed based on the objectives of the evaluation. The survey was developed in English and then translated into Hindi and Marathi.

### Data Collection

To collect data from adolescents who had received SBF's Happy Mind Calls intervention, previously trained interviewers conducted the post intervention surveys via phone. These surveys were conducted four to seven months post intervention, in October, 2020. To avoid interviewer

bias, it was ensured that a student did not receive the intervention and the post intervention survey from the same interviewer.

Prior to conducting the surveys, the interviewers received a brief training on research ethics and field protocols for this study. Additionally, in the past, they have also been a part of similar research where they have facilitated surveys and interventions to adolescents in similar situations. At SBF, the interviewers are annually trained in research ethics and protocols.

### Sample size calculation

Approximately, 45,000 students are a part of SBF, and over 12,000 of these students received the Happy Mind Calls. The students who received the Happy Mind Calls were the target population for this study. Furthermore, the students that received the Happy Mind Calls were divided into four groups, based on the combination of interventions they received, in addition to the Happy Mind Calls. The group that did not receive the Happy Mind Calls was the control group. A representative stratified sample, based on the population sizes of individual groups, was calculated using an online sample size calculator of “Stat-Trek”, which is available at: <https://stattrek.com/survey-sampling/sample-size-calculator.aspx>.

Using the online sample size calculator, a total sample size of 630 was calculated. Our sample size calculation was based on 95% Confidence Level and 0.5 sample proportion, and had a 5% Margin of Error. The calculation is shown in the table below.

S. No.	Groups	Total Population	Estimated Sample size
1	SBF Control (No Happy Mind Calls)	33249	250
2	SBF adolescents with Only Happy Mind Calls	8164	240
3	SBF adolescents with Happy Mind Calls + Skill Building Activity	3412	100
4	SBF adolescents with Happy Mind Calls + Skill Building Activity + Food Relief	87	20
5	SBF adolescents with Happy Mind Calls + Food Relief	345	20
<b>Total</b>		<b>45257</b>	<b>630</b>

### Sampling

Within SBF’s target populations, we used stratified random sampling without replacement to select adolescents from each group.

## Data Entry and Data Analysis

The data of the phone-administered survey was collected using the KoBoCollect App. The data were transferred to a MS-Excel file and cleaned. The cleaned data were analyzed using the statistical software, R.

## Results

**Table 1:** Descriptive characteristics of the Happy calls grouped by the type of intervention received. [SD= Standard deviation, IQR= Interquartile Range]

Characteristic	No Happy Calls, N = 251 <sup>1</sup>	Happy Calls, N = 243 <sup>1</sup>	Happy calls and Skill Building Activity, N = 148 <sup>1</sup>	Happy Calls and Food relief, N = 23 <sup>1</sup>	Happy calls, Skill Building activities and Food Relief, N = 20 <sup>1</sup>	p-value <sup>2</sup>
N (%)	251 (100%)	243 (100%)	148 (100%)	23 (100%)	20 (100%)	
<b>Education level (%)</b>						<b>&lt;0.001</b>
7 Standard or below	35%	45%	55%	17%	10%	
8 Standard	33%	24%	23%	35%	20%	
9 Standard or above	32%	31%	22%	48%	70%	
<b>Gender (%)</b>						0.063
Female	46%	53%	58%	48%	70%	
Male	54%	47%	42%	52%	30%	
<b>Religion (%)</b>						<b>&lt;0.001</b>
Hindu	59%	67%	72%	61%	40%	
Muslim	33%	21%	15%	26%	55%	
Others	7.2%	11%	13%	13%	5.0%	
<b>Positive Emotions (median [IQR])</b>	2.10 [1.90, 2.20]	2.10 [1.90, 2.20]	2.10 [2.00, 2.20]	2.10 [2.00, 2.20]	2.10 [2.00, 2.20]	0.086
<b>Perceived Social Support (median [IQR])</b>	2.67 [2.33, 2.83]	2.67 [2.50, 2.83]	2.67 [2.50, 2.83]	2.83 [2.67, 3.00]	2.67 [2.67, 2.88]	<b>0.026</b>
<b>Self-Efficacy</b>	2.62 [2.38, 2.75]	2.62 [2.38, 2.81]	2.75 [2.50, 2.88]	2.75 [2.56, 2.88]	2.75 [2.62, 3.00]	<b>0.023</b>

(median [IQR])						
<sup>1</sup> Mean (SD); n (%); Median (IQR)						
<sup>2</sup> Kruskal-Wallis rank sum test; Pearson's Chi-squared test; Fisher's exact test						

Our findings suggest that there is no significant difference in the scores for positive emotions among the five intervention groups of students. On the other hand, our findings also suggest that there is a significant difference in the scores for perceived social support and self-efficacy among the five intervention groups of students.

Furthermore, we performed post-hoc analysis to determine which groups have significantly different scores for social support and self-efficacy:

1. Social support:

- a. Students who received the happy mind calls and food relief had a significantly higher median social support score compared to students who did not receive the happy mind calls.
- b. Students who received the happy mind calls and food relief had a significantly higher median social support score, compared to students who received only the happy mind calls.
- c. Students who received the happy mind calls and food relief had a significantly higher median social support score, compared to students who received the happy mind calls along with skill building activity.

These differences in the social support scores were also significant after we corrected for multiple comparisons using the Benjamini-Hochberg (BH) adjustment.

2. Self-efficacy

- a. Students who received the happy mind calls, skill-building activities and food relief had a significantly higher median self-efficacy score, compared to students who did not receive the happy mind calls.
- b. Students who received the happy mind calls, skill-building activities and food relief had a significantly higher median self-efficacy score, compared to students who received the happy mind calls.

These differences in the self-efficacy scores were not significant after we corrected for multiple comparisons using the Benjamini-Hochberg (BH) adjustment.

## Section 2: Happy Mind Calls recordings

In the second part of this evaluation, we analyzed the audio recordings of the Happy Mind Calls, and assessed the students' psychological well-being, interpersonal skills, and decision-making

skills, by evaluating their responses to the Happy Mind Call activities. We also analyzed verbal cues that were a part of the casual conversations between the students and the facilitators to evaluate other life skills that were a part of SBF's regular curriculum.

## Methods

The content of the Happy Mind Calls was qualitatively analyzed to evaluate the student's responses to the calls during lockdown. Based on the aims of the evaluation, a coding scheme was developed by reviewing eight recordings.

## Outcomes

The following emerging themes were derived from our analysis:

- Emotional well being
- Reciprocity in enquiring well-being (Interpersonal Skill)
- Readiness to engage in activity
- Feeling about the activity
- Demonstration of keen interest
- Demonstration of initiative
- Involvement
- Comfort levels between child and facilitator and involvement of child during the call
- Impact of the call

## Sample size

From over 12,000 Happy Mind Calls that were conducted by SBF, audio recordings of approximately 240 calls were available. All the 240 calls were selected for final analysis in this study.

## Data analysis and Data analysis tools

Using the coding scheme, all the other calls were manually analyzed for their content by a trained coder. The coder was familiar with the culture, with the local languages Hindi and Marathi, and the language of the evaluation tool, English. Using the statistical software, R [version 3.6.1 (2019-07-05)], the population distribution for each of the emerging themes were calculated. [See appendix]

## Results

- In our study, 51.7% of the students were a part of the arts academy, 26.2% of the students were a part of the sports academy, 13.3% of the students were a part of the skills academy, 7.5% of the students were a part of the media academy and 1.2% of the students were a part of the preventive health academy.

- About 23% of the students were not asked about their emotional well-being. However, amongst the students who were asked, 27.6% students responded positively and 70.3% students had a neutral response.
  - “*Theek hu*” i.e. “I am okay” was the most commonly received response
- Approximately 77% of the students who were asked about their well-being did not show reciprocity by enquiring about the well-being of the facilitator. This question was not a part of the recording for 14.2% of the total calls.
- Most of the students (60.8%) were not asked about how they have been engaging themselves during the lockdown. However, amongst the students who were asked, the top three responses were: playing (27.7%), studying (24.5%) and/or watching television (22.3%).
  - Other activities that the students were engaging in included dancing, reading, talking to friends/ family and household work. Some students (16%) reported doing “nothing” (“*kuch nahi*”) during the lockdown, or “*ghar par bhaithi rehati hu*” i.e. “sitting around at home”.
- Before starting the activity, some facilitators (91.2%) enquired the student’s interest in playing the game. Amongst the students who were asked, 84.9% of the students showed prompt readiness to engage in the activity, 11.9% of the students agreed to play the game but showed some hesitation, 1.8% agreed with some encouragement and 1.4% declined to engage in the activity.
  - Most students responded with “Haan” i.e. “yes” or something similar, like “Haan, chalega” i.e. “yes, sure”.
- Over 40% of the students were not asked to describe their feelings about the activity. However, amongst the students who were asked, 94.4% students responded by saying that they enjoyed the activity, and 5.6% students had a neutral response.
  - Most students responded with “*Accha laga*” i.e. “felt good” or “*Mazaa aaya*” i.e. “had fun”.
- In some cases, the facilitators kept the students engaged in the call by asking them if they wanted to play more games. More than half of the students (55.4%) showed interest in more activities after being asked by the facilitator and 0.4% students asked to play more activities themselves. On the other hand, 3.8% students did not want to (or refused to) continue playing and 40.4% students did not play more activities during the calls.
  - Students who showed interest responded with “Haan” i.e. “yes”. Some students also asked “*kausa*” i.e. “which one”. Some students refused to continue playing by saying “*Mujhe kuchh kaam hai*” i.e. “I have some work” or “I am bored, [I] need to go to bring ration” or “*phone thevalchaya ata*”, i.e. “I want to cut the call now”.
- Only 2.9% of the students demonstrated initiative by suggesting a new or alternate activity themselves, whereas the rest of the students either made a choice from a list of activities offered

by the facilitator, played the activities conducted by the facilitator or did not play any new or alternative activity.

- We noted the student's feelings during the activity/activities. Most of the students (60.4%) laughed while doing the activities. Some students were very quiet (11.2%), some became impatient (1.7%) and some got bored (1.2%) during the activities.
- 82.5% of the students had a positive response while engaging with the facilitator and 72.1% of the students enjoyed the Happy Mind Call.

## Summary and Discussion

At the beginning of the Happy Mind calls, most of the students said they were feeling neither positive nor negative with *"theek hu"* (or "I am okay") being the most often received response. Most of the students displayed a readiness to engage in the activity without hesitation. Some students reported doing *"kuch nahi"* i.e. "nothing" during the lockdown, or *"ghar par bhaithi rehati hu"* i.e. "sitting around at home". A student said *"haan mere paas time hi time hai"* i.e. "yes, I have lots and lots of time" demonstrating that the students could be looking for some source of entertainment, during the lockdown and had almost absent or limited social interactions.

By the end of the call, most of the students had a positive feeling about the activity, and majority of the students laughed during the activity/activities, suggesting they had fun. Some students said *"achcha laga purani khushiyan yaad karke"* i.e. "we felt good reminiscing the old happy memories" or *"ghari basun bor hot hote pn ata mazza ali"* i.e. "I am bored by sitting at home, but I enjoyed by playing games" or *"bahut achha laga, mujhe akele akele lag raha tha abhi refresh lag raha hai"* i.e. "I liked it a lot, I was feeling lonely but now I feel refreshed". Such kind of responses from the students indicate why they showed a keen interest in further engagement after participating in the first activity.

In addition to conducting the activities, most of the facilitators managed to engage the students in additional conversations and made extra efforts to keep the conversation happy and engaging for the students and their family.

It was interesting to note that the qualitative data of our study showed an interesting contrast to our quantitative findings. For instance, although a follow-up evaluation survey did not quantitatively confirm an increase in positive emotions due to the Happy Mind Calls, our findings from the qualitative study indicate that the Happy Mind Calls were able to make the students happy by providing them with some entertainment in the form of the activities.

Apart from the Happy Mind Calls, SBF also conducted other interventions during the lockdown, including skill building activities and food relief interventions. Students received one, two or all three of these interventions. Based on the follow-up survey conducted in this group of SBF students, it was found that students who received food relief in addition to the Happy Mind Calls, with or without the skill building activities, had a stronger feeling of social support. This could be an indicator that this tangible effort (i.e. food relief) by SBF could have contributed towards the

students feeling a sense of social support. The students may have felt more cared for by other people in their community (including SBF) and that they can seek assistance from the people in their community.

Students who received both food relief and skill building activities in addition to the Happy Mind Calls had higher self-efficacy. A combination of food relief and skill building activities, in addition to the Happy Mind Calls, might have instilled confidence in the students about their capabilities to manage difficult situations, such as the hardships that might have occurred during the pandemic and the subsequent lockdown.

These findings suggest that Happy Mind Calls alone may not be enough to instill the feeling of social support and self-efficacy in the students, but they are aided by other interventions such as skill building activities and food relief. Overall, the Happy Mind Calls had a positive impact on the students.

### **Limitations:**

- Since this is a cross-sectional study, we can only talk about correlation and not causation.
- The Happy Mind Call was a brief 2-10 minutes interaction carried out between April to June, 2020. The evaluation was carried out in October, 2020, i.e. four to seven months post intervention. This could potentially lead to a recall bias.
  - With respect to the evaluation of positive emotions in the students, this delay in follow-up can account for the discrepancies in the quantitative evaluation survey results and qualitative findings from the call recordings.
- The Happy Mind Call was an evolving interaction that adapted to the needs of the students. Thus, the evaluation cannot be standardized based on a single survey.
- The evaluation survey was administered by SBF facilitators who are comfortable with the students. This can lead to a bias towards the positive in the students' responses. However, some of this was mitigated by ensuring that different facilitators were part of the intervention and the evaluation.
- The scales used to measure positive emotions, social support and self-efficacy were not validated for our target population, leading to a low Cronbach's alpha of these scores.
- Sample sizes in the groups– Happy Calls and Food relief, and Happy Calls, Food relief and Skill building activities was extremely small as compared to other three groups.

### **Recommendations for SBF and future interventions:**

- As new interventions are developed, evaluation studies should be planned simultaneously. This can help in obtaining an accurate baseline and post-intervention score, helping in impact evaluation. This will also help in timing the evaluation.

- During the Happy Mind Call activity/activities, majority of the students laughed, suggesting they had fun while being involved in the activity. At the end of the call, most of them had a positive feeling about the activity. However, while gauging the responses of the students most of the facilitators (65.4%) asked leading questions, such as asking “*mazaa aaya?*” i.e. “did you enjoy?” instead of “*kaisa laga?*” i.e. “how did you feel?”, which could have biased the responses. [Appendix Table 2]
- During the Happy Mind Calls, 82.5% of the facilitators engaged the students in additional conversation, and 61.7% of the facilitators also took extra efforts to keep the conversation happy and engaging for the child.
  - Some of the facilitators engaged in additional conversation by walking the students through COVID-19 precautions and asked them stay home.
  - Some of the facilitators were able to convince students to play and tried hard to help the child enjoy the activity/ conversation.
  - Some facilitators talked about school and class related activities with the students.
  - Many facilitators talked to parents/ family as well.
- Observations on consent process during the Happy Mind Calls for Facilitators:
  - In majority of the cases (57.5%), a verbal consent was asked and provided (and it was part of the recording).
  - In some recordings (42.5%), the consent was not a part of the recording indicating that the recording may have started post-consent or consent was not obtained. In some recordings, the call was completely recorded but the consent was not obtained.
  - Some facilitators explained the consent and its need for documentation to the students, while some only informed that they are recording the call.
  - In some cases, facilitators did not explain the consent adequately such as:
    - In one recording, when student asked why a recording is needed, the facilitator “so you will able to listen to you voice again”.
    - In another recording, facilitator mentioned the student might be aware of SBF activities and rules, so he/she did not brief the student about consent.

## Conclusions

- Calls made a difference in terms of engaging students and promoting participation in the first place. Very few declined to participate.
- Among those who participated, perceived social support and self-efficacy lasted almost 6 months into the intervention. The fact that the impact lasted this long speaks to the success of

the intervention; emotions are transitory; confidence and perceived social support are more lasting.

- Immediate post impact or simultaneous assessment shows that calls did result to positive emotions and allowed the students to express enjoyment.
- Longer interventions with more components meeting their needs does matter, suggesting that dose matters.

## Appendix

**Appendix Table 1:** Frequency distribution of the emerging themes from the Happy mind call recordings.

Question number	Variables	(%)
	<b>Total</b>	<b>240</b>
<b>Q3</b>	<b>Distribution of sample respondents based on their academies (%)</b>	
	Arts	51.7 %
	Media	7.5 %
	Preventive Health	1.2 %
	Skills	13.3 %
	Sports	26.2 %
<b>Q4</b>	<b>Who answered the call? (%)</b>	
	1. Child	47.5 %
	2. Parent/Guardian/Other family member (e.g. sibling, aunt, uncle, etc.)	27.5 %
	3. Was a call-back by the child/parents/other	3.3 %
	4. Don't know	21.7 %
<b>Q5</b>	<b>How was the child's response when the facilitator asked, 'How are you doing'? (%)</b>	
	1. Positive response	27.6 %
	2. Negative response	0.5 %
	3. Neutral response	70.3 %
	4. No response (answers nothing)	1.6 %
<b>Q6</b>	<b>Did the child ask the facilitator how they were doing? (%)</b>	
	1. Yes	23.3 %
	2. No	76.7 %
<b>Q7</b>	<b>What did the child say when the facilitator asked, 'What are you doing?'/ 'What have you been doing?' (%)</b>	
	1. Watching TV	22.3 %
	2. Reading (other than studies)	3.2 %
	3. Studying	24.5 %
	4. Playing	27.7 %

	5. Talking to Friends/Family	3.2 %
	6. Nothing	16.0 %
	10. Other	22.3 %
<b>Q8</b>	<b>Did the child agree when the facilitator asked, 'Do you want to do the activity/ play the game'? (%)</b>	
	1. Yes- Agreed promptly/ without hesitation	84.9 %
	2. Yes- Agreed with hesitation	11.9 %
	3. Yes- Agreed with encouragement/ coercion	1.8 %
	4. Did not agree	1.4 %
<b>Q12</b>	<b>What was the child's response when the facilitator asked at the end of the activity 'How did you feel?' (%)</b>	
	1. Enjoyed	94.4 %
	2. Neutral	5.6 %
<b>Q13</b>	<b>Did the child want to continue playing further? (%)</b>	
	1. Yes- asked for more himself/herself	0.4 %
	2. Yes- showed interest in more activities after being asked by facilitator	55.4 %
	3. No- was okay with the one played	3.8 %
	4. Did not play during the call	40.4 %
<b>Q14</b>	<b>Did the child propose any new/ alternate activity? (%)</b>	
	1. Yes - suggested new/alternate activities himself/herself	2.9 %
	2. No - but made a choice from a list of activities given by the facilitator	9.6 %
	3. No - just played the activity/activities conducted by the facilitator or did not play any new/alternate activity	87.5 %
<b>Q15</b>	<b>Did the child express any of their feelings during the activity? (%)</b>	
	1. Laughed	60.4 %
	2. Got Irritated	0.8 %
	3. Became impatient	1.7 %
	4. Expressed sadness	0.8 %
	5. Got bored	1.2 %
	6. Stayed silent	11.2 %
	7. Did not express anything	14.2 %
	8. Other	9.6 %
<b>Q17</b>	<b>Was the child happy engaging with the facilitator? (chatting, playing activities, etc.) (%)</b>	
	1. Yes (Positive)	82.5 %
	2. No (Negative)	1.2 %
	3. Can't say (Not sure)	16.2 %
<b>Q18</b>	<b>Did the child enjoy the call? (%)</b>	
	1. Yes (Positive)	72.1 %
	2. No (Negative)	1.2 %
	3. Can't say (Not sure)	26.7 %

**Appendix Table 2:** Frequency distribution of the supplementary information (such as consent and interviewing process) from the Happy mind call recordings.

Question number	Variables	(%)
	<b>Total</b>	<b>240</b>
<b>Q10</b>	<b>Verbal consent- (%)</b>	
	1. Asked and Provided	57.1 %
	3. No verbal consent obtained/ Verbal consent not part of recording	42.9 %
<b>Q11</b>	<b>Who gave consent? (%)</b>	
	1. Child	57.1 %
	3. Other family member	0.4 %
	4. Don't know/ Not asked	42.5 %
<b>Q16</b>	<b>Comments on the Facilitator (Select all that apply) (%)</b>	
	1. Stuck to script	12.5 %
	2. Engaged in additional conversation	82.5 %
	3. Talked about SBF's Happy calls initiative	22.5 %
	4. Asked leading questions	65.4 %
	5. Took extra efforts to keep the conversation happy and engaging for the child	61.7 %
	6. None	2.1 %

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