



Systems Design Project

Progress Report

Week 1

Guided by:

Prof. Ravi Poovaiah & Prof. Pramod Khambete

22 March 2021

Introduction

In this report we'll take you through our progress this week. We started with *inclination mapping*, where we shared our interests and came up with initial ideas and topics. Following that, we conducted some *interviews* to explore our selected broad topic and judge the scope of our project. We supplemented these interviews with *secondary research*, and with these insights, we were able to identify the focus of our project and define a *rough problem area* that we can begin with. In the end, we'll take you through our plan for the coming week.

Inclination mapping

In the initial brainstorming, we came up with four main topics:

1. **Reproductive health**, including topics like sex ed and maternal health.
2. **Animal welfare**, where we could look at pet care as well as stray vaccination, sterilization and shelters.
3. **Mental health** exploring LGBT and Elderly mental health as well as student counselling.
4. **Helping recent adults** with the problems that arise with living independently such as finances, conflict resolution and caring for dependents.



Since our group inclined towards **storytelling**, we looked into topics where we could put this to use, and so we gravitated towards community-based systems. Out of those four topics, we picked two that we felt most interested in, being reproductive health and mental health, and explored them some more.

From these, we identified areas of overlap, primarily mental health of young mothers, pubescent girls and menopausal women. We arranged our strongest ideas into a spectrum, with reproductive health being one end of the spectrum and mental healthcare at the other. We also drew connections between topics that could work well with each other.



With the variety of topics we were interested in exploring, we came to our first set of decisions to make - which group we would focus on, and which approaches would we study and employ? This is, however, not a set of questions we could answer without guidance.

Interviews

We felt that it was essential to talk to a few people working in it before making our initial decisions about the direction of the project.

- We had questions about choosing a **focus topic**, and wanted help understanding where the current gaps in the system are.
- Our questions also included those of **approach** — where do we have accessible data, and are our brainstormed methods actually appropriate for our chosen topics?
- Finally, those of **effort** — what is out of our scope? Where are our efforts best concentrated? Is it possible for us to make something implementable?

Arinjit Das

Student, working on a project about Mental Health

Arinjit is currently looking into IIT's Student Wellness Center, and was able to highlight many systemic issues with it's functioning. A key element that was missing from this

system was the ability of a student to choose or change their counsellor. He touched upon the importance of senior mentorship through all the years of college, as well as the issue of there not being training for the ISMPs in this regard.

Dr. Rekha

Clinical Psychotherapist

With her, we discussed the gaps she feels exist in this field, her personal experiences with conducting group and art therapy, and topics that she felt might be relevant to us. She introduced us to a variety of theories relevant to our interests.

She conducted **group therapy** with sex trafficking victims for a year, and expressed how it 'worked wonders' in that case. Where individual therapy falls prey to issues of distrust, false memories, exploitation and manipulation of the system, group therapy is able to help people open up and find forgiveness and closure.

However, group therapy is not without its own faults, and if unmediated can lead to harmful self-perpetuating cycles.

She explained that while group and individual therapy are altogether different things, using a **balance of both** often gives the best results. Observations from group therapy can make individual sessions far richer, since we are always communicating in a group setting, verbally or nonverbally.

Dr. Rekha introduced us to **Gestalt therapy**, a prevalent term in psychological circles, which refers to healing the 'whole' rather than focusing on micro issues as individual therapy does. This theory works well in group settings.

As we discussed with her our interests in the comforting power of storytelling, she introduced us to a term called '**Group processes**' - a study of the psychological impacts of a community, and the healing power of a group. For each of these topics, she provided us with literature and references to take home.

Secondary research

As part of our secondary research, we are looking at some books and papers that were either recommended to us or that we found ourselves.

1. **Art-Based Group Therapy by Bruce L. Moon**

This talks about how building relationships and opening up are a fundamental part of both therapy and art. Group based art therapy especially helps people who have trouble making progress in their regular talking sessions, and hence the sessions are observed closely by art therapists.

2. **Family Therapy by Mark Rivett & Eddy Street**

This has a particularly interesting first chapter, which introduced the concept of the family as a system, giving us an idea of how groups of people can work as systems. It also introduced us to topics like homeostasis, morphogenesis, and circularity in social systems.

3. **Group Process Made Visible by Shirley Riley**

This contains an analysis of various group therapy sessions conducted by the author along with pointers on how therapy groups must be structured. The author states that the outcome of the session may vary drastically depending on the personalities of the people put together in the group. She also discusses how the unpredictability of the participants' behaviour may lead to some damaging results if not handled well.

As we go further into the project we will continue studying these texts, including the **Handbook of Innovative Psychotherapies** for their chapter on art therapy and **Social Psychology** for its section on group processes, in order to understand the subject better.

Identifying systems

In our research so far, we've come across four prevalent systems involved in aiding mental health in india.

1. **Institute initiatives**, like SWC in IIT Bombay
2. **NGOs**, like Save the Children and the MINDS Foundation
3. **Support Groups**, like Alcoholics Anonymous,
4. **Therapy Centres** like IPH

We will keep these existing systems in mind as we go ahead with the project , but haven't made any concrete decisions of fitting into any of them just yet.

Focus identification

After all our research, we discussed and narrowed down our focus on the bases of interest, what we saw potential in, and which problems, in the end, felt the most personal to us. Out of the shortlisted topics, we made a rough map with the basic information we had about the *workings and structure of group therapy and art based therapy*.

We went back to the groups we had identified during our initial ideation and research, and from these, we chose to focus on **college students**. We personally know the plight of the mental health of our student populace, and college students are an accessible group for further study, research, testing and ultimately implementation.

From the different approaches we had considered, we've decided to further study **group processes and group therapy**, and are also looking at art therapy as a tool. Group therapy, we found, was not only supplemental to individual therapy, but also capable of standing on its own, and can help in many situations where individual therapy cannot.

We are also looking at **art therapy** because it helps bring the mind into a more reflective state, and enables students to subconsciously let out their emotions, without feeling like they are "in therapy".

Revised focus

To understand applications of **group processes** and **art therapy** to create a system that serves as an **introduction to mental healthcare** for **college-level students**, including those who **do not seek therapy**.

Future steps

1. Primary Research

Divya Padmanaban - senior IxD, working on mental health

Dr. Sharmila Londhe - therapist at IPH

Dr. Kavita Joshi - conducting an art therapy session

2. Secondary Research

Reading further on above-mentioned literature

Deep-dive into therapeutic processes

3. End-week goal

Identify and define a system and its boundaries