



UNIVERSITY OF LEEDS

This is a repository copy of *'The Big Picture': Developing community-led approaches to substance use disorder through participatory video.*

White Rose Research Online URL for this paper:

<https://eprints.whiterose.ac.uk/184830/>

Version: Accepted Version

---

**Article:**

Cooke, P [orcid.org/0000-0002-8377-3118](https://orcid.org/0000-0002-8377-3118), Duara, R and Madill, A [orcid.org/0000-0002-9406-507X](https://orcid.org/0000-0002-9406-507X) (2022) 'The Big Picture': Developing community-led approaches to substance use disorder through participatory video. *Journal of Applied Arts & Health*, 13 (2). pp. 179-195. ISSN 2040-2457

[https://doi.org/10.1386/jaah\\_00099\\_1](https://doi.org/10.1386/jaah_00099_1)

---

This is an author produced version of an article published in *Journal of Applied Arts & Health*. Uploaded in accordance with the publisher's self-archiving policy.

**Reuse**

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

**Takedown**

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing [eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk) including the URL of the record and the reason for the withdrawal request.



[eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk)  
<https://eprints.whiterose.ac.uk/>

**Submitted: 18.8.21**

**Accepted: 16.3.22**

## **‘The Big Picture’: Developing Community-Led Approaches to Substance Use Disorder through Participatory Video**

Paul Cooke, University of Leeds

Raginie Duara, University of Leeds

Anna Madill, University of Leeds

### **Abstract**

‘The Big Picture’ was a participatory video (PV) project. The aim was to increase the involvement of young people in India in the active development of practice and policy with regard to Substance Use Disorder (SUD). Working with drug rehabilitation centres to innovate their programmes, the team used video production as a tool to help young people advocate for policy change by promoting public awareness of how they see this issue. Unlike many accounts of PV, which tend to focus solely on the *processes* of community engagement, this article also takes account of the art of the films *produced*. Drawing on theoretical approaches to subjectivity in autobiographical filmmaking that highlight the complex interactions between the individual and the collective in such work, the article examines, in particular, how the films created emphasise the importance of adopting a *relational*, community-led, approach to SUD if rehabilitation programmes are to be effective.

### **Keywords**

action research

film practice

mental health

drugs

India

youth

### **Introduction**

Community-based participatory video production (PV) has a long history, frequently traced back to the 1960s and the National Film Board of Canada’s ‘Challenge for Change’ programme. Such projects tend to bring together a filmmaker with a non-filmmaking

community to make short audio-visual texts with the aim of creating, as Colin Low, one of the key filmmakers involved in Challenge for Change, describes it as ‘a community development program [...] that use[s] film as a catalyst to generate local debate—to give local people a voice and even editorial control—and to provide those people with access to people in power, via film’ (2010: 17). This article provides an account of how PV was used as part of ‘The Big Picture’, a UK Global Challenges Research Fund project, conducted between 2018 and 2021 in Assam, India. Unlike many accounts of such projects, which tend to focus solely on the *processes* of community engagement involved, this article also takes account of the nature of the films *produced*. As Claudia Mitchell, E-J Milne and Naydene de Lange note, ‘this is an area worthy of study but often left out of participatory video studies. The process is of course important, but then so are the producers and their productions’ (2012: 9).

In working with youth at risk of substance use disorder (SUD), ‘The Big Picture’ used PV to ensure that the voice of young people remained central to the design of the services available to support their recovery from (and resilience to) SUD. The project team included both Indian and British nationals comprising the clinical community, counselling and health psychologists, drug rehabilitation professionals, a participatory filmmaker, a research fellow (an Indian national trained in participatory filmmaking methods) who was in the field throughout the project, and, most importantly, the youth participants who were selected due to their past experience – their own or of those connected to them - with substance use and. There were thirty participants in total: fifteen young people at high risk of developing SUD, who know people that use but do not use themselves, and fifteen young people who no longer use after engaging successfully in drug rehabilitation.

The project produced six short films. Of particular importance to this discussion is the ways in which these films highlight the importance of adopting a *relational*, community-led approach to SUD. As Linda Liebenberg (2020) notes, this is a dimension often missing in psychological research. This relational dimension is revealed through the use of theoretical approaches to subjectivity in autobiographical filmmaking that highlight the complex interactions between the individual and the collective in such work, approaches that are generally ignored in discussions of PV and the audio-visual texts such projects generate. This article suggests that these insights have particular utility in projects such as ‘The Big Project’, which seek to address sensitive topics such as SUD (Pathak et al. 2017). As shall be discussed further in the course of this discussion, understanding the relational dimension is important because the anonymity of the source of a particular story must be maintained

while, at the same time, it is clear that the advocacy potential of this work is rooted in the amplification of personal testimony. At the same time, the films produced by this project highlight the need for a networked, community-focussed, and yet differentiated and intersectional, approach to addressing SUD in young people in Assam. This is a tough needle to thread, balancing anonymity with the power of the personal story and the importance of sharing those stories with the community.

As examined below, questions of *relationality* are increasingly seen as key to understanding best practice in community engagement, not least in public health programming. The World Health Organisation's Community Engagement Framework, for example, emphasises the central importance of 'relational and contextual factors' in developing successful public health programming (WHO 2017: 22), while also insisting (and returning to Liebenberg's comment above) that such approaches still require further consideration. This article examines the ways in which the films generated by 'The Big Picture' offer new insights into the nature of *relationality* as an important structuring consideration in understanding SUD, as well as in how to approach PV projects more generally. Ultimately, this allows for movement beyond any *product* versus *process* dichotomy, focussing instead on how an analysis of the former can inform the latter, and with it the various outcomes such projects seek to achieve.

### **SUD, Young People and Assam**

Global mental health strategies tend to prioritise adolescents. This is due to the fact that adolescents are particularly susceptible to mental health problems, which can in turn lead to lifelong disadvantage and, indeed, higher than average suicide risk (Patel et al. 2007). In India, adolescent mental disorder is prevalent in 7.3 per cent of 13-17 year olds. While this is slightly lower than the global average of 10 per cent (WHO 2021), it nonetheless equates to 9.8 million people. There is also more than likely a larger hidden problem, due to the strong social stigma connected to this problem (Gautham et al. 2020). This is suggested, for example, in the very large 'treatment gap' that has been identified in the literature between those who could benefit from support and those who seek it (82.58 per cent in Assam) (Borooah and Ghosh: 2017).

Poor mental health in young people is also a key risk factor for SUD (Degenhardt et al. 2016). The Childline Foundation survey reports that 13 per cent of people using substances in India are children and adolescents (Katoki et al. 2016), with the lowest treatment-seeking age-group by far being those under 20 years old (UNODC 2004).

Excluding tobacco as its use is part of the culture even for youth, the most common substances used by children and adolescents in India are alcohol, cannabis and opioids, with initiation typically at 13-15 years (Dhawan et al. 2017). Consequently, the National Mental Health Survey of India report has called for strengthening of youth mental health research and addiction management to improve the life chances of young people most at risk (Gautham et al. 2020; Katoki et al. 2016; Priyanka and Ankita 2016; Pathak et al. 2017). It is in this context that ‘The Big Picture’ was conceived, rooted in a partnership between two Guwahati-based rehabilitation organisations, Nirmaan Rehabilitation Facility ([www.nirmaanrehab.org](http://www.nirmaanrehab.org)) and HOPE Foundation ([www.hopefoundation.org.in/guwahati](http://www.hopefoundation.org.in/guwahati)), the NGO Mind India who provide counselling services, consultation and research across northeast India, and an interdisciplinary group of academics from the UK.

### **Participatory Video and India**

More often than not PV is defined, as Shirley White suggests, ‘as a *process* [...]. It can serve as a powerful force for people to see themselves in relation to the community’, in order ‘to empower people to shape their own destiny’ (White 2003: 64, our emphasis). As such, PV can be seen as one of numerous art-based methods that have been adopted as an initially self-reflexive knowledge creation, and subsequent knowledge translation strategy, now frequently used within the sphere of development and public health, and upon which this work builds (Hall et al. 2019; Breed 2022).

The use of PV in India is widespread. Numerous studies have used versions of this methodology to explore, and raise awareness of, issues largely ignored by other forms of media. Recent examples include the Nila Illam project which worked with street children in Tamil Nadu (Battaglia 2014), Sue Sudbury’s (2018) work with rural women in Andhra Pradesh and Benjamin-Thomas et al.’s (2019) work with children with disabilities on questions of inclusivity. It is particularly interesting to see how PV in some cases in India has gone beyond a methodology to support individual projects to become embedded in organisational practice. For example, the Community Media Trust programme (CMT) of the Deccan Development Society in Hyderabad is considered by Vijaya Mulay (2010) to be a direct descendant of Challenge for Change, often seen as the starting point for much of the present-day interest in PV (Crocker 2003), but one built upon a more sustainable model than its precursor.

Like Challenge for Change, the CMT was set up initially to support community development and to pool community-level knowledge, in this case, about farming, forestry,

ecology and biodiversity. However, over time, the role of external advocacy has become more important to the organisation, which is now regularly commissioned to make films about a range of issues. CMT has developed into an autonomous media organisation in the post-1990s increasingly diverse and deregulated Indian media landscape. In the process this has led CMT to become self-financing (Mulay 2010). A similar approach has been taken by Budhan Theatre, a community-arts organisation based in Ahmedabad that advocates for the recognition of the so-called Denotified Tribes. These are tribal communities that lost their citizenship rights at the time of Indian partition in 1947 and who have, since then, been subjected to the regular infringement of their human rights. Budhan, like CMT has built participatory filmmaking into its portfolio of advocacy strategies, also using filmmaking both as a form of alternative media, fully embedded within its communities, and as an income-generating tool to support sustainability (Cooke et al. 2018). It is upon this well-established tradition that 'The Big Picture' was built, similarly concerned with the issues of sustainability and organisational capacity development alongside the wider programming and policy innovation the project sought to achieve.

### **The Film Production Process**

While this article focuses primarily on the films produced during the project, as this is an aspect of such projects that is often ignored, it is still useful to briefly outline the film production process. This involved three phases corresponding to the traditional phases in the filmmaking process:

*Phase 1 (Pre-production):* This began with a series of art-based exercises designed to draw out the key themes that were important to all the young people involved. In the first of these exercises, young people produced a series of photographs (either taken themselves or found online). These were used as the starting point for conversations with the project research fellow about their experience of SUD, either in terms of resilience in the face of this risk within their community or of their own personal recovery. The second exercise involved the co-creation, with the research fellow, of posters that sought to communicate key messages that emerged from these conversations. The aim here was to ensure that, for ethical reasons, the origin of individual accounts remained anonymous, but that the key messages the individual wished to communicate were firmly rooted in these accounts. The group was then asked who wanted to develop this work further into short films. Of the 30 original participants who took part in these exercises, eight opted to take part in the filmmaking. The

eight came predominantly from those recovering from SUD. Working with the project research fellow, the filmmaking group was given a freehand as to the type of films participants wanted to make. Using the posters as their starting point, the group started to develop screenplays and storyboards that told stories which they felt captured the messages of the posters. In parallel to these activities, the group was taught to use film equipment. Adopting a ‘learning by doing’ approach that is common in PV projects, participants were encouraged to experiment with the equipment as they worked on their stories, as opposed to seeing film training and story development as discrete work strands. Finally, the group agreed a shooting script and production schedule to ensure that they were able to deliver a product that could be shown at a community screening (see Phase 3).

*Phase 2 (Production):* Then participants shot their footage using cameras provided by the project. This was an iterative process, with participants bringing together their first pass at generating the required footage and discussing their individual work as a group with the project research fellow. The group discussed which takes they wanted to use for each scene or if they needed further footage. The original storyboard was used to guide this process, the group reassessing their approach to the story in light of the shoot. In the process, the message of the film was also further refined.

*Phase 3 (Post-production):* The next step was to put together a first cut of the film. Here the process was shaped both by the wish to generate an interesting and creative story and by the project’s advocacy imperative, namely to ensure that the films could stimulate discussion about addiction and recovery as it was perceived by the filmmakers. The main role of the participants at this stage was to comment on the first cut produced by the research fellow. In most cases, participants decided not to be actively involved in the detail of editing (i.e. using software to bring the shot scenes together to create the film’s story). Nonetheless, they were fully involved in the broader production design: the choice of colour palette, the use of sound and music and the types of graphics to be used. The one exception to this model was the final film produced, *Ek Notun Probhat (A New Dawn)*. Here one of the participants decided to work with a friend on the final edit in order to have increased ownership of the process. Alongside this process, the research fellow also consulted with the wider research team, in particular Madill (the project principal investigator) and Cooke (the team member responsible for film training), to gather feedback on the material produced. This feedback was offered purely as suggestions. It was up to the production team (filmmaker and project research

fellow) how they responded and final editorial control rested with them. A total of six participant-led films were made by the eight participants ranging from 5-17 minutes in length.

Once the group was happy with the films they had produced, a 3-day showcase event was organised in Assam, during which the films were screened. 53 school students accompanied by four members of staff attended the event on Days 1 and 2. Day 3 was open to the general public and had 44 attendees, including college students and other members of the public from different professions as well as some mental health professionals. Film screenings were followed by question and answer sessions with some of the filmmakers. At the film screenings participants were also invited to fill in a questionnaire, responding to five questions:

1. What key messages about substance use did you get from these films?
2. In what ways have the films changed your understanding about young people who use substances?
3. What impact could these films have on young people who see peers already taking substances?
4. What impact could these films have on adults who know little about the challenges of substance use for young people?
5. Is there anything else you would like to share with us?

Over the three screenings 84 responses were received. Key comments from the audience include: 'We should never judge anyone with substance abuse and instead of that we can lend a helping hand.'

We often have friends who are addicts, and we leave their friendship because what if we are affected. But now I will keep in mind: I can resist, it is my own responsibility to stay away from substances, but I will not desert my friend, instead try to help them.

The feedback also highlighted an appetite for the films to be used in further awareness raising campaigns: 'These types of films should be shown more often in order to bring a kind of

awareness. And also reaching to many people who are suffering this is another important factor.’ ‘I think we need to show these films especially in towns and rural areas and make them aware.’ ‘Such programs need wider reach and audience.’

In addition to the questionnaires at these screenings, the project also conducted evaluative open interviews with the participants. As is typical of such PV projects, participants generally found great personal value in their involvement. One participant (male, 21 years) spoke for many, stating:

I’m really grateful that I got a platform like this where I’m encouraged to explain my life story. [...] So I got a platform like this and I don’t want to lose that. For that I liked doing this. But somewhere, even my experience, that I’m able to learn something, about how to express myself, about how to confidently give an answer, about in front of the camera even. I never experienced something like this.’

Film offered them a new, at times more liberating, form of communication: ‘I got to learn a lot through this process and things that I cannot say through words, I’m able to say it through the film’ (female participant, 16 years).

This in turn seemed to offer some participants a way of validating their experience, allowing them to be seen in a new way:

My story will be now seen by the whole public and will understand how the life of an addict is. They have to struggle a lot, that which I had experienced. Now, means next year, gradually complete two years of staying away from addiction life, staying away from a disease. So this, I feel good means, feel good, feel proud of myself (female participant, 24 years).

The film project offered some participants a way of resetting how they felt others saw them, be that as ‘criminals’ (male participant, 19 years) or as part of a ‘mad house’ (female participant, 24 years) hoping that the project would allow people to feel more ‘empathy or compassion’ for them (male participant, 22 years). In turn, this also spoke to a strong need for participants to be able to (re)connect with their wider community: ‘We cannot do this by ourselves, we need some people’s help’ (male participant, 21 years). As we shall see, it is this need for connection, alongside an urge for at least one participant to be seen as ‘a normal boy’ (male participant, 19 years) with a problem, rather than a generic ‘drug addict’ (male

participant, 19 years), that also emerges very strongly in the films themselves the participants created.

### **What did the films look like?**

It is striking in all the films produced by the project that they consistently seek to balance the need to protect the anonymity of the person on whose testimony the film is based with the need to tell a story based on the implied authenticity of this testimony. Indeed, this became a key creative impulse within each production (even in the case of two of the films where the participants ultimately decided that they wished to reveal their identity). In the process, the films also consistently highlighted the need for a differentiated approach to rehabilitation that refuses to treat participants collectively as nothing more than ‘addicts’, while also emphasising the need for a socially embedded, collective response, to SUD as an issue.

This tension particularly comes to the fore in *One for the Other*, a film which tells the story of a young man’s journey through addiction to recovery. The film protects the identity of those involved specifically in the issues connected to addiction by using a set of facemasks, the colour of which reflects where they are, or the role they play, in this journey. The film opens with our central protagonist returning home from school. He plays cricket with his friends, the only thing that seems to differentiate him from the rest of the group being his white facemask. As the story unfolds, he comes into contact with other characters, one of whom wears a different coloured mask. Finally, as his journey into addiction develops, the colour of his mask turns black. Then, as he starts on his faltering pathway towards recovery his mask changes, in fits and starts, back to white, the overall narrative highlighting the complex, non-linear, experience of someone experiencing SUD. At the same time, we see the other character with the red mask later supported by the main character, suggesting the multiple stories unfolding within this community.

The use of these coloured masks as part of the production design is a very simple but highly affective device. On the one hand, the masks straightforwardly protect the identity of the people involved, who are all reflecting their experiences of addiction and rehabilitation. On the other, the mask also, somewhat counter-intuitively perhaps, marks them out as unique. If we return to the opening sequence, the young man who will become an addict is shown as being the same as his friends playing cricket. However, the fact that he alone wears the mask highlights, the research team believes, that his experience is also different and that it is an experience that seems to rob him, in terms of public perception at least, of his individuality. He is now a problem rather than a person.

<Insert Fig 1> Figure 1: Screen grab taken from *One for the Other* © The Big Picture, 2021

At the same time, the presence of multiple mask wearers at different stages of their individual stories also points to a broader social phenomenon that requires a collective response, a response which, the film shows, is also contingent on multiple stakeholders working together. The boy in the mask must himself want to change, but without the support of his family bringing him to the rehabilitation centre, or the centre understanding his specific drivers, it is clear that the colour of the mask will remain black.

Addressing SUD is presented as a *communal* action. However, to understand it involves not only empathy with, but also positive reflection on the *individual* experience of the person involved in order to develop appropriate therapeutic solutions. A similar impulse is communicated in terms of production design in *A Different Path to Recovery*. In this video-essay, the filmmakers present the original testimony of a young woman as a series of captions set against a series of abstract images that range from a blossoming flower to a wedding ring dropping to the floor, punctuated regularly throughout by an overhead shot of a woman's legs walking forward.

<Insert Fig 2.> Figure 2: Screen grab from *A Different Path to Recovery*, © The Big Picture, 2021

Again, the film communicates both the specificity of this woman's experiences and the social pressures she feels as a woman seeking help for addiction, pressures that would seem to be very different to the many men she meets on her journey. We are reminded here that there are many more men using rehabilitation services than women, and that the needs of women can be very different. At the same time, the abstract, non-personalised, visual performance of this woman's story presents it almost as an alternative *archetypal* experience that seeks to resonate with others beyond the author of this individual testimony. This impulse is further reinforced in the final film made by participants, *Ek Notun Probhat* (*A New Dawn*), which retells this particular story as a more mainstream, fictionalised, narrative production, with the largest cast and most complex script. This was also the film that the participants took most ownership of the editing process.

<Insert Fig 3.> Figure 3: Screen grab from *Ek Notun Probhat* © The Big Picture, 2021

Here the ‘minority’ experience of a woman dealing with addiction is taken up by the participants as their most significant contribution to their community’s collective understanding of SUD, again emphasising the need for a differentiated understanding of the addiction, which understands addicts as people rather than problems, while also emphasising the need for the community to come together to address this issue collectively.

### **Discussion: Relational Aesthetics and Modes of Communication**

As outlined above, the starting point for the filmmaking process was the individual experience of the participants. However, the production process was designed to abstract and place this experience into a wider collective social context. This process of abstraction and, specifically, collectivisation can also be read off the films themselves. In the process, this points perhaps to the particular value of using PV for this project, as opposed to other types of participatory practice. This is a process which, as Alisa Lebow (2012) notes, is always at play in a filmmaking project, however subjective the impulse behind a given film. The very impetus to make a film inevitably implies that:

the ‘I’ is always social, always already in relation, and when it speaks, as these filmmakers do, in the first person, it may appear to be in the first person singular ‘I’ but ontologically speaking, it is always in effect, the first person plural ‘we’. [...] Despite the fact that we believe [the ‘I’] to express our individuality, it nonetheless also expresses our commonality, our plurality, our interrelatedness with a group, a mass, a sociality, if not a society. (Lebow 2012: 3)

Film is always a social product. There is always an implied statement that the message to be communicated warrants the collective act of making a film. Through this act, the ostensible singularity of the narrative impulse behind a given film, in the case of this project the individual testimony of a participant, is placed into a wider context that complicates this singularity. This point is picked up by Bill Nicholls in his analysis of documentary filmmaking, but which is also very pertinent to PV projects such as *The Big Picture*: ‘For every documentary there are at least three stories that intertwine: the filmmaker’s, the film’s and the audience’s’ (Nichols 2012: 61). For Nichols, the meaning of a documentary is the product of a creative tension between these three ‘stories’. The

relationship between Nichol's stories is often particularly complicated in the films produced by PV projects. Indeed, it is the tension between Nichols' 'three stories' and the implications this has for participatory filmmaking that is often an important structuring device in the power dynamics that are invariably at play in PV projects. This is also central to understanding the aesthetic value of such work, which is, as Verena Thomas and Kate Britton put it, always fundamentally 'relational', an aspect of such projects that, they suggest, allows us to think beyond the *process* versus *product* dichotomy mentioned above:

The media product is the manifestation of a relationship between the maker(s) and their subject(s). Each visual image therefore has an external narrative that comes to hold as much significance as the internal, entangling the image within the conditions of its creation. (Thomas and Britton 2012: 216)

And, we would argue, of its consumption. It is this relational dimension that is central to the success or failure of a given PV project. This is also important if we are to go beyond the celebratory and, perhaps somewhat patronising, conceptualisation of such projects being about 'giving' a community 'a voice', or seeing such work as being about addressing an empowerment 'deficit' within a particular community. For PV to work, it must be built on the principle of equitability, where all members of the project are valued for the knowledge they *bring to it*, rather than focussing on what is either lacking, or what needs to be taught. Moreover, and as a consequence of this, the knowledge created by participatory processes in any given context, with any group of stakeholders, like the approach to aesthetics suggested here, must be understood, and valued, as 'relational, and emergent' (Chilvers and Longhurst 2016: 585), rather than preordained.

As Michael J. Kral notes, the question of 'relationality' is a key motif in much participatory work when exploring power dynamics between the 'researcher' and the 'researched' (2014: 147). This is particularly important, he notes, for therapeutic projects, suggesting that 'the best predictor of successful therapy outcomes is the quality of the relationship between the therapist and the client' (Kral 2014: 147). This becomes more complex still in so-called 'community psychology', where therapy outcomes are contingent on a complicated nexus of relationships operating at several levels (Kral 2014: 147). As Isaac Prilleltensky (2001) puts it, in community psychology, one must always carefully negotiate tensions between personal, collective and *relational* wellness. This invariably involves working within 'a dialectic between personal and collective values', in order to generate

continual reflection on the multiple contributions that the wide variety of stakeholders involved in work with a given community can make (Prilleltensky 2001: 1, emphasis added).

## **Conclusion**

In the films produced by The Big Picture, one similarly sees the need for an emphasis on the relational values evident in the stories they tell. It is through an understanding of this relationality that the films seek to communicate the problem of SUDs for young people in Assam. These are films that creatively explore the unique experience of the individual participants involved in the project, while also seeing film as a way of projecting these stories, this individual experience, in order to generate greater empathy with the protagonists presented on screen within and by their communities.

It is clear from the showcase event that the communicative power of these films lies in their ability to personalise the experience of those suffering from SUD, both directly and indirectly, inviting the spectator to empathise with this experience. Next steps include engaging the policy making community, exploring the potential of the films to facilitate communication beyond the immediate context of their production. A degree of scepticism in the initial discussions with relevant stakeholders has been experienced. The work is based on young people's voices and it is not yet clear the extent to which policy makers in India will be receptive to the perspective of a community which is stigmatised for associated criminal activity and the perception that they may be to blame for their addiction. In order to address this issue, the research team has also created a policy brief – a more traditional way to engage policymakers – which contextualises the films (Madill et al, 2022). This brief outlines constructive ways forward highlighted by the young people themselves, such as the value of peer-to-peer support and positive role models which hopefully will provide an initial way to engage policymakers more effectively. In so doing, the team will seek to communicate our fundamental finding in the Big Picture, namely the need for a more empathetic relationship between those directly impacted by SUD, the communities they live within and those who create the policies that impact the services designed to support them.

## **Acknowledgements**

This study was funded by the Economic and Social Research Council and Arts and Humanities Research Council Global Research Challenge Fund grant ES/S00047X/1. We thank our participants for giving so generously of their time and for sharing their experiences with us in such depth. Our gratitude is extended also to Sangeeta Goswami (MIND India),

Ratul Dey and colleagues at Nirmaan Rehabilitation Facility, and Diptarup Chowdhury (Lokopriya Gopinath Bordoloi Regional Institute of Mental Health) for their insights as clinical practitioners. Finally, we thank our co-investigators Rebecca Graber (University of Brighton), Siobhan Hugh-Jones (University of Leeds), and Tolib Mirzeov (London School of Hygiene and Tropical Medicine) for their expertise and support. More information can be found on the project website <https://projectresilience.co.uk>

## References

- Battaglia, Giulia (2014), 'Crafting "participatory" and "collaborative" film-projects in India: Who's the author? Whose vision?', *Anthrovision*, 4:1, pp. 1-22.
- Benjamin-Thomas, Tanya Elizabeth, Laliberte Rudman, Debbie, Gunaseelan, Jeshuran, Abraham, Vinod Joseph, Cameron, Debra, McGrath, Colleen and Prasanna Vinoth Kuma, Samuel (2019), 'A participatory filmmaking process with children with disabilities in rural India: Working towards inclusive research', *Methodological Innovations*, 12:3, pp. 1-14.
- Breed, Ananda, Uwihoreye, Chaste, Ndushabandi, Eric, Elliott, Matthew, Pells, Kirrily (2022), 'Mobile Arts for Peace (MAP) at home: Digital art-based mental health provision in response to COVID-19', *Journal of Applied Arts & Health*, 13.1: xx-xx.
- Borooah, Indranee Phookan and Ghosh, Snigdha (2016), 'Attitudes and beliefs toward mental illness in Central Assam', *IOSR Journal of Humanities and Social Sciences*, 22, pp. 31-37.
- Chilvers, Jason and Longhurst, Noel (2016), 'Participation in transition(s): Reconceiving public engagements in energy transitions as co-produced, emergent and diverse', *Journal of Environmental Policy & Planning*, 18:5, pp. 585-607.
- Cooke, Paul, Dennison, Stephanie and Gould, William (2018), 'The Voicing Hidden Histories project: participatory video in development, soft power and film language', *Media Practice and Education*, 19:3, pp. 270-82.
- Crocker, Stephen (2003), 'The *Fogo Process*: participatory communication in a globalizing world', in S. A. White (ed.), *Participatory Video: Images that Transform and Empower*, London: Sage, pp. 122-41.
- Degenhardt, Louisa, Stockings, Emily, Patton, George, Hall, Wayne D., Lynskey, Michael (2016), 'The increasing global health priority of substance use in young people', *Lancet Psychiatry*, 3, pp. 251-64.

- Dhawan, Anju, Pattanayak, Raman Deep, Chopra, Anita, Tikoo, Vinod Kumar and Kumar, Rajesh (2017), 'Injection drug use among children and adolescents in India: Ringing the alarm bells', *Indian Journal of Psychiatry*, 58, pp. 387-93.
- Gautham, Melur Sukumar, Gururaj, Gopalkrishna, Varghese, Mathew, Benegal, Vivek, Rao, Girish N., Kokane, Arun, Singh Chavan, Bir, Kumar Dalal, Pronob, Ram, Daya, Pathak, Kangkan, Kumar Lenin Singh, Raj, Kumar Singh, Lokesh, Sharma, Pradeep, Kumar Saha, Pradeep, Ramasubramanian, Chellamuthu, Yeshwant Mehta, Ritambhara, Meethal Shibukumar, Theerthankara (2020), 'The National Mental Health Survey of India (2016): Prevalence, socio-demographic correlates and treatment gap of mental morbidity', *International Journal of Social Psychiatry* 66:4, pp. 361-73.
- Hall, Amanda, Furlong, Bradley, Pike, Andrea, Logan, Gabrielle, Lawrence, Rebecca, Ryan, Alexandra, Etchegary, Holly, Hennessey, Todd, Toomey, Elaine (2019), 'Using theatre as an arts-based knowledge translation strategy for health-related information: a scoping review protocol', *BJM Open*, 9, pp. 1-6.
- Katoki, Katoki, Bhagabaty, S. M., and Kalita, M. (2016), 'Silhouette of substance abuse amongst an adolescent sample group from urban slums of Guwahati metro, North East India', *International Journal of Medical Research and Health Sciences*, 5, pp. 1-8.
- Kral, Michael J. (2014), 'The relational motif in participatory qualitative research', *Qualitative Inquiry*, 20:2, pp. 144-50.
- Lebow, Alisa (2012), 'Introduction', in A. Lebow (ed.), *The Cinema of Me: The Self and Subjectivity in First Person Documentary*, London: Wallflower, pp. 1-11.
- Liebenberg, Linda (2020), 'Reconsidering interactive resilience processes in mental health: Implications for child and youth services', *Journal of Community Psychology*, 48:5, pp. 1365-80.
- Low, Colin (2010), 'Grierson and Challenge for Change (1984)', in T. Waugh, M. B. Baker and E. Winton (eds), *Challenge for Change: Activist Documentary at the National Film Board of Canada*, Montreal and Kingston: McGill-Queen's University Press, pp. 16-23.
- Madill, Anaa, Duara, Raginie, Goswami, Sangeeta, Graber, Rebecca, and Hugh-Jones, Siobhan. (2022), 'Policy brief 1: Pathways to recovery: Informing solutions to tackle youth substance abuse in Assam', <https://projectresilience.co.uk/wp-content/uploads/2021/12/BP-Policy-Brief-1.pdf>. Accessed 1 August 2021.

- Mitchell, Claudia, Milne, E-J, de Lange, Naydene (2012), 'Introduction', in E-J Milne, C. Mitchell and N. de Lange (eds), *Handbook of Participatory Video*, Lanham: Alta Mira Press, pp. 1-15.
- Mulay, Vijaya (2010), 'Thirty years and twelve thousand miles away', in T. Waugh, M. B. Baker and E. Winton (eds), *Challenge for Change: Activist Documentary at the National Film Board of Canada*, Montreal and Kingston: McGill-Queen's University Press, pp. 443-52.
- Nichols, Bill (2012), *Introduction to Documentary*, Bloomington: Indiana University Press.
- Patel, Vikram, Flisher, Alan J., Hetrick, Sarah, McGorry, Patrick (2007), 'Mental health of young people: A global public-health challenge', *Lancet*, 369, pp. 1302-13.
- Pathak, Kangkan, Deuri, Sonia Pereira, Gogoi, Vijay, Sobhana, H., Gautham, Melur Sukumar, Sengupta, Saumik, Banerjee, Indrajeet, Sharma, Sameer, and NMHS collaborators group (2017), *Assam State Report, National Mental Health Survey (NMHS), 2015-16*, Tezpur: LGBRIMH.
- Prilleltensky, Isaac (2001), 'Value-based praxis in community psychology: Moving toward social justice and social action', *American Journal of Community Psychology*, 29:5, pp. 1-32.
- Priyanka, Sharma and Ankita, Tyagi (2016), 'A study on adolescent drug abuse in India', *American International Journal of Research in Humanities, Arts and Social Sciences*, 16:244, pp. 119-21.
- Sudbury, Sue (2018), 'Visualising the everyday: participatory filmmaking in rural India', *Visual Ethnography*, 7:2, pp. 6-23.
- Thomas, Verena and Britton, Kate (2012), 'The art of participatory video', in E-J Milne, C. Mitchell and N. de Lange (eds), *Handbook of Participatory Video*, Lanham: Alta Mira Press, pp. 208-22.
- United Nations Office on Drugs and Crime (UNODC) (2004), *National Survey on Extent, Pattern and Trends of Drug Abuse in India*, June, New Delhi: UNODC.
- White, Shirley A. (2003), 'Participatory video: A process that transforms the self and the other', in S. A. White (ed.), *Participatory Video: Images that Transform and Empower*, London: Sage, pp. 63-101.
- WHO (2017), *WHO Community Engagement Framework for Quality, People-Centred and Resilient Health Services*, Geneva: World Health Organization, [WHO-HIS-SDS-2017.15-eng.pdf](#). Accessed 10 August 2021.

WHO (2021) *Improving the Mental and Brain Health of Children and Adolescents*,  
<https://www.who.int/activities/improving-the-mental-and-brain-health-of-children-and-adolescents>. Accessed [day] [Month] [year].

### **Contributor details**

Professor Paul Cooke is Centenary Chair in World Cinemas at the University of Leeds. His main research focus is on the use of participatory arts as a tool for community-led research and advocacy, with a particular emphasis on use of participatory filmmaking. He has run projects in South Africa, Nepal, India, Germany, Cambodia, Kosovo and Brazil and is currently the principal investigator on the AHRC/GCRF Network Plus project ‘[Changing the Story](#): Building Civil Society with and for young people in post-conflict countries’.

Contact: Centre for World Cinemas and Digital Cultures, School of Languages, Cultures and Societies, University of Leeds, Leeds, UK LS2 9JT

E-mail: p.cooke@leeds.ac.uk

ORCID: <https://orcid.org/0000-0002-8377-3118>

Dr. Raginie Duara is a Research Fellow, University of Leeds, carrying out a research on drug addiction among young people in Assam, India, using qualitative methods of research also including visual methods photo-elicitation and participatory film-making. Appointed also as a Team Leader in Assam to coordinate all the essential research work in India.

Contact: School of Psychology, University of Leeds, University Rd, Woodhouse, Leeds LS2 9JU

E-mail: r.duara@leeds.ac.uk

ORCID: <https://orcid.org/0000-0002-3004-9185>

Professor Anna Madill is a Fellow of the British Psychological Society and of the Academy of Social Sciences and is based at the University of Leeds. She Co-Founded and Chaired (2008-11) the British Psychological Society Qualitative Methods in Psychology Section. Anna Madill is on the Editorial Board of the British Journal of Clinical Psychology, Qualitative Psychology, and Qualitative Research in Psychology. She is former Chair of the Crohn's and Colitis UK 'Living with Inflammatory Bowel Disease' Research Awards Committee.

Contact: School of Psychology, University of Leeds, University Rd, Woodhouse, Leeds LS2  
9JU

E-mail: [a.l.madill@leeds.ac.uk](mailto:a.l.madill@leeds.ac.uk)

ORCID: <https://orcid.org/0000-0002-9406-507X>