**Monthly Report**

**Webinar and mentorship to the CHILD trainees in South Asia**

**Date:** April 30, 2019 **Time:** 6AM – 7AM EST USA

**Type of Meeting:** Webinar **Frequency:** Monthly

**Organizer**:

Dr. Hendree Jones

**Agenda Items:**

1. Purpose of the mentorship and webinars
2. Didactic presentation
3. Case presentation
4. Timing for the webinars
5. Data from the attendees

**Discussion**

**Purpose:** The webinar started with welcoming remarks from Dr. Jones and she welcome everyone to the webinar and said that we are happy to be reconnected after training on CHILD curriculums. She added that Colombo Plan and INL are very generous by providing us this opportunity. The purpose of these webinars is reconnect with each other and have our own space for networking, exchanging knowledge and ideas as well as collaboration. We will have a webinar each month and each webinar will be for 60 minutes where we will discuss the CHILD work and every one of us will have a chance to share our achievements and challenges with the group members.

**Didactic and case presentation:** Each webinar will contains two main parts didactic presentation and case presentation. In didactic presentation one person will present a topic on a subject related to CHILD and participants will add to that by questions and answers. In case presentation one person will present a case from their treatment center and will discuss how old the child was, how the treatment went and what part of the CHILD curriculum have been used and what were the challenges.

A participant asked whether the presenter for a didactic and case presentation will be a same person and whether the topic of didactic presentation and case presentation will be a same as well. The response was that we will have different presenters for didactic and case presentation and topics for both presentation shouldn’t be the same but if they were the same there is no problem.

Mr. Sanullah Rathor from Pakistan mentioned that he can present a case in June 2019. Ms. Saadia from Pakistan said she used positive attachment and social support tools shared in the trainings and she may present in future. Dr. Sandeep from India told that we will start with children then we can add adult cases in future as parents are important for children’s treatment. Ms. Shibendu from India said that he will be interested in child drug prevention and if one or more webinars are schedule for this topic it will be great.

**Timing for webinars:** timing for the webinars has been discussed, most of the available participants said that it should be in their official time but some said it will be better if webinar is in the morning or late afternoon of their time. Considering time variation between US, India, Pakistan, Bangladesh, Kenya and South Africa to get idea from the participants who were not able to attend today’s webinar we send a follow up e-mail to all participants that which time work well for them.

**Achievements since training on CHILD curriculums**: Mr. Sanullah Rathor from Pakistan told that they build a new hospital for Children, Adolescents and Women drug treatment. The children aged 8-12, Adolescent 13-18. Dr. Sandeep told that they have developed SOP and guidelines for Medication Assisted Treatment. Mr. Shibendu said he has left his previous organization and wants to start a drug prevention program in India.

**Highlights**

* The purpose of the webinar was discuss and participants welcomed this new initiative to reconnect with each other and receive mentorship
* For the month of June UNC team will present didactic presentation and case
* In June will have a case presentation from Pakistan
* Timing for the webinars will be follow up through e-mail to get idea from those participants who were not able to join today’s webinar
* As it was the first webinar some of the participants have had some issues with using the go to meeting software in term of connecting and unmute themselves
* Power point slides presented in today’s webinars are in annexure.

Annex-1: Power point presentation used for today’s webinar





