



Indian Council of Medical Research (ICMR)

Department of Health Research

(Ministry of Health and Family Welfare)

Investigator-Initiated Research Proposals

Date of submission: 13-Mar-2024 02:33:45 PM

<p>Proposal Id: IIRPSG-2024-01-03946, Version Id: F1, Proposal Title: SKILLS-FOCUSSED NUTRITION EDUCATION INTERVENTIONS FOR SCHOOL GOING ADOLESCENTS IN THRISSUR DISTRICT, KERALA – AN IMPLEMENTATION RESEARCH</p>	
<p>Personal details of Principle Investigator (PI)</p>	
<p>Name of PI (IN BLOCK LETTERS), Designation, Email, Contact No., Gender, DOB, Date of Superannuation</p>	<p>DR SANDRA PAULSON, Assistant Professor, sandrajabin28@gmail.com, 9495579656, Female, 06-09-1988, 01-01-2055</p>
<p>Nature of Employment</p>	<p>Permanent</p>
<p>Institute</p>	<p>Amala Institute of Medical Sciences , Private academic institutions with valid UGC/AICTE/PCI or NMC approved Medical colleges ,</p>
<p style="text-align: center;">Proposal Details PART-A</p>	
<p>Are you currently under regular employment in Medical Institutes, Research Institutes, Universities, Colleges, recognized Research & Development laboratories, Government and semi-government organizations, and NGOs?</p>	<p>Yes</p>
<p>Advertisement</p>	<p>Call for Investigator-Initiated Research Proposals for small extramural grants - 2024</p>
<p>Summary (up to 250 words): A structured summary should contain the following subheadings: Rationale/ gaps in existing knowledge, Novelty, Objectives, Methods, and Expected outcome. Rationale- When the adolescents are equipped with the practical skills and included in the decision process of food selection in the family, they tend to make more responsible choices. Methods - By introducing a behavior change communication session based on their food choices and targeting their value negotiation process involving the eating behaviors we aspire to make enable them to make informed food choices. Objective - 1. To compare dietary intake of school going children using 3-day 24 hour recall method and food frequency questionnaire using interview method and food diaries in village and town area schools before and after intervention. Our research aims at implementing strategies to inculcate practical cognitive culinary skills to the adolescents so as to enable them to prepare healthy meals for themselves and their families. Novelty - It will be tailored and context specific for each school based on their dietary intake data collected. Expected Outcome -On collaboration with Dieticians to suggest tailor made interventions for them with an eye on continuing sustainable healthy eating patterns throughout their growing period and into adulthood.</p>	
<p>Priority Area/Priority Area diseases</p>	<p>Reproductive, Maternal and Child Health, Nutrition / Adolescent health</p>
<p>Keywords Six keywords separated by comma which best describe your project may be provided.</p>	<p>Skills, nutrition, dietary intake, Intervention, education, adolescents, Kerala</p>
<p>Abbreviations Only standard abbreviations should be used in the text. List of abbreviations maximum of ten may be given as a list.</p>	<p>Govt - Government , CBSE - Central Board of Secondary Education , hr - hour</p>

Problem Statement (up to 500 words): State the currently available information to present the problem adequately.

Kerala considered as God's own country, with highest health indices and literacy rate, is unambiguously placed at the highest epidemiologic transitions zone which had exerted drastic effects on the morbidity and mortality tables of the state. The rampant urbanization and modernization which had infiltrated even to the grass root levels of the state, irrespective of the region and economic strata, influenced lifestyle of the population making the state fertile for non-Communicable diseases to flourish. The mortality and morbidity due to lifestyle diseases soon began to surpass those due to communicable diseases RCH issues combined. The available studies on prevalence of these diseases indicate high trends of NCD placing the state in the top spot of prevalence chart. The study conducted by Achutha Menon Centre for Health Science Studies in 2017 was a shocking revelation into precarious the position of the state with findings pointing that one in five of the population being diabetic and one in three being hypertensive. This along with the poor control rates and high out of pocket expenditure for the management of this diseases made Kerala the hub of Non-Communicable Diseases in the country. The unhealthy dietary practices and lack of physical exercise in all sections of the population irrespective of the age and economic status has contributed to the rise in lifestyle diseases with the statistics pointing that 52% of the total death in the age productive age group between 30 and 70 being due to one or other cause of NCD. Of 217 students in the age group of 15-17 years studied in a rural school in Thiruvananthapuram district obesity was found in 2.8% of students, 45.6% falls under normal category and the rest 51.6% were in the underweight category. The prevalence of hypertension and pre hypertension in males are 8.4% and 30.8% respectively, whereas none of the females are hypertensive and 18.2% are in pre hypertensive group. The food choice determinants include biological determinants, economic elements, structural determinants and social characteristics. The individual's personal system based on these influences including a value negotiation process and a set of strategies will finally lead to food choices. The biological mechanisms that regulate food choice do not stand a chance against the current food supply system that provides low-cost palatable energy dense foods with high reward potential and limited nutritional value. The food industry is to be blamed for creating sweet, salty and high fat foods with the intent of capitalizing on innate biological predispositions. On top of that, limited availability of nutritious foods in schools and food outlets just add fuel to the fire. Even where healthy food is available and affordable, adolescent choices can be heavily influenced by commercial influences. These include advertising and marketing factors (e.g., clarity of labelling, supermarket placement, and social media influences) as well as convenience.

Rationale of the study (up to 250 words) Mention how the research question addresses the critical barrier(s) in scientific knowledge, technical capability, and/or programmatic/ clinical/lab practice and its relevance to local, national and international context with relevant bibliography.

Adolescence provides an excellent opportunity to correct nutritional deficiencies that may have occurred in early life and to catch-up on growth, and to establish good dietary behaviors that will in the help in combating both undernutrition and overnutrition and thereby pave way for a healthier Kerala and healthier India. When the adolescents are equipped with the practical skills and included in the decision process of food selection in the family, they tend to make more responsible choices. By introducing a behaviour change communication session based on their food choices and targeting their value negotiation process involving the eating behaviors we aspire to make enable them to make informed food choices. Our research aims at implementing strategies to inculcate practical cognitive culinary skills to the adolescents so as to enable them to prepare healthy meals for themselves and their families. It will be tailored and context specific for each school based on their dietary intake data collected. The skills focussed education interventions targeting the adolescents will include meal planning, reading food labels, role of food lists in guiding food procurement and making informed food selection

Hypothesis/ Research question (up to 100 words) : Will the strategy of nutrition skills educational intervention among school going adolescents of Thrissur district improve their diet quality

Methodology

Include objective-wise work plan under the following sub-headings:

Study Objective No. 1

Study Objective : To determine the physical and physiological status using anthropometry, physical activity and sleep pattern, blood pressure measurement, hemoglobin level and random blood glucose

Study Design : School based cross sectional design

Study Area : Government, Government Aided and CBSE upper primary and high schools in Thrissur district

Sample Size : Multistage random sampling would be used for this study. In the first stage, the list of Government upper primary and high schools, Government Aided upper primary and high schools and CBSE upper primary and high schools in rural as well as urban area would be prepared. From this list, 2 schools in village area and 2 schools in town area from each Govt, Govt Aided and CBSE schools category would be selected randomly by lottery method. From each selected school, 100 students would be selected. So a total of 600 students from each area would be selected. In the second stage, from each standard (8,9,10,11,12) one division would be randomly selected and from each division 20 students would be included in the study such that 10 would be girls and 10 would be boys. So the total sample size would be 1200 students.

Project Implementation Plan : After obtaining Institutional Research and Ethics Committee clearance , the permission from Heads of the institutions will be sought. Following which consent from parents and assent from children will be sought through PTA meetings and social media messaging apps.

Design of Statistical analysis : Categorical variables will be analyzed and expressed in percentage and frequency . Continuous variables will be expressed in mean and standard deviation .Association will be checked using Chi square where needed. Correlation will be checked for continuous variables where suitable.

Study Objective No. 2

Study Objective : To compare dietary intake of school going children using 3-day 24 hr recall method and food frequency questionnaire using interview method and food diaries in village and town area schools before and after intervention

Study Design : School based cross sectional study design

Study Area : community

Sample Size : Multistage random sampling would be used for this study. In the first stage, the list of Government upper primary and high schools, Government Aided upper primary and high schools and CBSE upper primary and high schools in rural as well as urban area would be prepared. From this list, 2 schools in village area and 2 schools in town area from each Govt, Govt Aided and CBSE schools category would be selected randomly by lottery method. From each selected school, 100 students would be selected. So a total of 600 students from each area would be selected. In the second stage, from each standard (8,9,10,11,12) one division would be randomly selected and from each division 20 students would be included in the study such that 10 would be girls and 10 would be boys. So the total sample size would be 1200 students.

Project Implementation Plan : After getting permission from Heads of the Institution , sensitization of the study is done to the teachers as well as parents through meetings and messaging apps. Importance of the study and its relevance in today's world is emphasized. Through PTA meetings it shall be conveyed also. Written consent taken from parents by sending the forms through students school diary. Ensuring it is signed and duly returned the next day. School going children studying in 5th,6th, 7th,8th,9th 10th standard in Government ,Government Aided and CBSE schools in Thrissur district . A printed booklet will be handed over to the students after taking down their first 24 hour recall method and food frequency by a trained interviewer so as to complete their second and third 24 hour dietary recall.

Design of Statistical analysis : Data coded and entered into excel worksheet and analysis will be performed using SPSS 23. Result on continuous measurements are presented on mean +/- SD and result on categorical measurements presented in number (%). Significance assessed at 5% level. Normality of data tested using Shapiro wilk test. If normal, correlation between nutrient deficiency and variables analyzed by Pearson correlation coefficient , if not normal Spearman rank correlation. The risk of malnutrition was analyzed by linear and logistic regression.

Study Objective No. 3

Study Objective : To implement a behavioral change communication session based on the Skills-focussed nutrition education interventions among the school going adolescents of Thrissur district

Study Design : Quasi experimental study

Study Area : Government upper primary and high schools, Government Aided upper primary and high schools and CBSE upper primary and high schools in Thrissur district

Sample Size : Twelve schools selected as per the above objectives will be chosen for conducting health communication on the skills- focused nutrition education session.

Methodology

Include objective-wise work plan under the following sub-headings:

Project Implementation Plan : Two sessions will be conducted in each of the selected schools. Pre and post test scores will be analyzed to check for the effectiveness of the health communication session. Periodic reminders, pamphlets will be circulated in regular intervals so as to reinforce the message. After a gap of two months, the 3 day 24 hour dietary recall as well as food frequency questionnaire will be employed to check for the effectiveness of the intervention.

Design of Statistical analysis : Paired t test scores will be analyzed to check for the difference in the knowledge , attitude and practice of the adolescents.

Expected outcome/ Deliverables aligned with research question (up to 100 words): Improved diet quality of adolescents in line with reduced consumption of highly processed foods after the behavioral change communication session.

Immediate next steps following the end of the project(up to 100 words): Presentation in conference proceedings to bring about radical changes in the school canteen policy as well as inclusion of nutrition education in academic curriculum.

Whether the study is going to generate new intellectual property: yes

Timelines with achievable targets

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Proposal Details (PART-B)

Preliminary work done by the PI including the source of funding (up to 250 words): nil

Skill and experience of the research team (Highlight only salient points (along with 5 relevant publications) that provides confidence to reviewers that team can implement the project with quality.) : Principal investigator Dr Sandra Paulson has conducted research among adolescents namely : 1) Thilak SA , Sandra Paulson , Sarada A.K . Academic stress among High School Students in Thalassery educational block , Kerala : A cross sectional study .National Journal of Research in Community Medicine , Vol 6 Supp Issue 1 , July 2017 2) George J, Paulson S. Recent Status of Covid-19 Pandemic: A Perspective to Global and Indian Scenario . RDMMR-V15 Internet. 2021 Nov. 23 cited 2023 May 12:57-61. Available from: <https://stm.bookpi.org/RDMMR-V15/article/view/5006> PI - Dr SRUTHI MV - 1) Sunil V, Valsan SM. A study on risk factors of abortion in a tertiary care hospital in Thrissur District, Kerala. Int J ReprodContraceptObstetGynecol 20209:4118-22. 14. Kumar SS, Kamaladevi LV, Valsan SM. Utilization of diabetic retinopathy screening among diabetic patients at a tertiary care hospital in Kerala, India. Int J Community Med Public Health 20218:4938-43 15. Teenu S R, Sruthi M V, C R Saju, M Mohammed Rafi The Role of Health Education on Larval Indices and Fever Cases from Rural Area of Thrissure District, Kerala: A Quasi Randomized Control Study. Clinical Medicine And Health Research Journal, Vol. 2 No. 2 (2022), 28 March 2022 , Page 87-91<https://cmhrj.com/index.php/cmhrj/article/view/38> 16. Nithya M C, Sruthi M V, C R Saju, Mohammed Rafi. A Study on Mosquito Density and Trend of Larval Indices from a Hospital Campus of Rural Area, Thrissur District Kerala. International Journal of Multidisciplinary research and analysis 202205(7): 1620- 1625. 17. Jose NK, Sruthi MV, Rachel J, Jerome K, Vaz C, Saju CR. Barriers and facilitators of noncommunicable disease (NCD) prevention in Kerala: A qualitative study. J Family Med Prim Care. 2022 Jun11(6):3109-3114. doi: 10.4103/jfmpc.jfmpc147121. Epub 2022 Jun 30. PMID: 36119306 PMCID: PMC9480671. DR CR SAJU - He He associated with different projects in various capacities a) Nodal Officer - AMALA-UNICEF Project on "Facts for Life", b) Research associate-"Evaluation of Pulse Polio Program" conducted by IndiaCLEN. c) Investigator-"Evaluation of Family Health Awareness Campaign" conducted by IndiaCLEN. d) Project coordinator-WHO project on Hospital Waste Management at the Institute of Maternal and Child Health, Govt. Medical College Calicut. e) UNICEF project on timely achievement of targets related to MDGs and f) UNICEF Project on HIV/AIDS Awareness among adolescence. Publications 1. A study on the awareness and practice of medical education technologies among medical college teachers. CR Saju, J Vincent, VM Joshy International Journal of Research in Medical Sciences 8 (1), 330 2. Assessing risk factors of Non-Communicable Diseases using STEPS Survey in a rural area of Thrissur District, Kerala. Saju CR, Catherin Nisha, Jerry Rachel, Kerline Jerome, Subin Koshy, Vidhu J, International Journal of Medical Science and Current Research 2(40, 241 3. A study on selected behavioral factors of mothers influencing acute diarrhoea in under-five children in a rural part of Kerala, India. S Divya, CR Saju, CJ Navya, VM Joshy, MP Jini, MV Radhamani International Journal of Community Medicine and Public Health 3 (8), 2211 4. An assessment of the nutritional status of underfive children in a rural area of Thrissur district, Kerala, India. R Priyanka, V Vincent, MP Jini, CR Saju Int J Community Med Public Health 3 (12), 3479-3486 5. Nutritional status and cognitive impairment in elderly population in a rural area of Thrissur district, Kerala. R Ramachandran, JM Mundodan, CR Saju, VM Joshy Int J Community Med Public Health 5 (3), 1218-1223

Institutional Support/ Facilities: Institutional Research Committee , Institutional Ethics Committee , Several interdepartmental projects have been carried out

Laboratory facilities (in-vitro/ in-silico) Institutional resources such as instruments/ equipment and other physical resources available for use in the project proposed animal house etc. Printer, NABL ACCREDITED LABORATORY PRESENT

Conflict of Interest declaration (if any) The authors declare no conflicts of interests.

Duration (in Months)

24 Months

Investigator Details

#	Name	Institute	Designation	Email	Contact No.	Role in Proposal
1	Dr SANDRA PAULSON	Amala Institute of Medical Sciences	Assistant Professor	sandrajobin28@gmail.com	9495579656	PI
2	Dr Sruthi M V	Amala Institute of Medical Sciences	Associate Professor	sruhar086@gmail.com	9495966828	Co-PI

Investigator Details

#	Name	Institute	Designation	Email	Contact No.	Role in Proposal
3	Prof Saju Cherumadathil	Amala Institute of Medical Sciences	Professor	drsajucr@gmail.com	9495315986	Co-PI

Documents consideration

#	Document Name	Is Applicable?	Uploaded Document	Remarks
1	Declaration & Attestation Form(duly signed by Head of Department/ Director)	Yes	View	nil
2	Additional supplementary information including figures tables flow diagrams etc can be shared as PDF	Yes	View	nil

Proposed Budget Details

Institute	Budget Year	Manpower Budget (Rs.)	Contingency	Consumables	Equipment	Travel	Overhead	Total(Rs)
Amala Institute of Medical Sciences	1	3172000.00	0	61645.00	1399.00	72000.00	0	3307044
Amala Institute of Medical Sciences	2	3474000.00	467000.00	53745.00	0	132000.00	0	4126745
Total in (Rs.):		6646000	467000	115390	1399	204000	0	7,433,789.00

Budget Breakup Details (Staff/Manpower)

#	Budget Year	Institute	Designation	No. of Person(nos)	Require Month(nos)	Cost Per Person(Rs.)	Overhead(Rs.)	Total Cost(Rs.)
1	Year: 1	Amala Institute of Medical Sciences	Project Technical Support - I	1	2	18,000	0.00	36,000.00
Justification : DATA ENTRY OPERATOR								
2	Year: 1	Amala Institute of Medical Sciences	Project Nurse - II	1	5	20,000	0.00	100,000.00
Justification : BLOOD SAMPLE COLLECTION								
3	Year: 1	Amala Institute of Medical Sciences	Project Research Scientist - II (Medical)	1	12	80,000	0.00	960,000.00
Justification : CO PRINCIPAI INVESTIGATOR								
4	Year: 1	Amala Institute of Medical Sciences	Project Research Scientist - II (Medical)	1	12	80,000	0.00	960,000.00
Justification : PRINCIPAL INVESTIGATOR								
5	Year: 1	Amala Institute of Medical Sciences	Project Research Scientist - III (Medical)	1	12	93,000	0.00	1,116,000.00
Justification : SUPERVISING AND EXPERT OPINION								
6	Year: 2	Amala Institute of Medical Sciences	Project Technical Support - I	1	2	18,000	0.00	36,000.00
Justification : DATA ENTRY OPERATOR								
Total Cost (Rs.)								6,646,000.00
including overhead								

Budget Breakup Details (Staff/Manpower)

7	Year: 2	Amala Institute of Medical Sciences	Project Reseach Scientist - II (Non Medical)	1	6	67,000	0.00	402,000.00
Justification : DIETICIAN - PLANNING AND DELIVERING BCC SESSIONS								
8	Year: 2	Amala Institute of Medical Sciences	Project Research Scientist - II (Medical)	1	12	80,000	0.00	960,000.00
Justification : CO PRINCIPAI INVESTIGATOR								
9	Year: 2	Amala Institute of Medical Sciences	Project Research Scientist - III (Medical)	1	12	93,000	0.00	1,116,000.00
Justification : SUPERVISING AND EXPERT OPINION								
10	Year: 2	Amala Institute of Medical Sciences	Project Research Scientist - II (Medical)	1	12	80,000	0.00	960,000.00
Justification : PRINCIPAL INVESTIGATOR								
Total Cost (Rs.) including overhead								6,646,000.00

Contingency budget breakup details

#	Budget Year	Institute		Overhead Charges (Rs.)	Total Cost(Rs.)
1	Year: 2	Amala Institute of Medical Sciences		0.00	167,000.00
Contingency Name : miscellaneous					
Justification : conference presentation					
2	Year: 2	Amala Institute of Medical Sciences		0.00	300,000.00
Contingency Name : Article publishing charges					
Justification : For publishing the research in a peer-reviewed journal with high impact factor					
Total Cost (Rs.) including overhead					467,000.00

Consumables Budget Breakup Details

#	Budget Year	Institute	Consumables Name	Overhead	Total Cost(Rs.)
1	Year: 1	Amala Institute of Medical Sciences	refreshments	0.00	5,000.00
Justification : sensitization and training of staff involved regarding research purpose along with					
2	Year: 1	Amala Institute of Medical Sciences	dry cotton, wet cotton , 2 cc syringe , wound plaster , EDTA tube , Clot tube	0.00	7,900.00
Justification : for blood sample collection Hb and RBS					
3	Year: 1	Amala Institute of Medical Sciences	printer black ink	0.00	745.00
Justification : for printing questionnaire					
Total Cost (Rs.) including overhead					115,390.00

Consumables Budget Breakup Details

4	Year: 1	Amala Institute of Medical Sciences	1) printed consent papers , sociodemographic data , 3 day 24 hour dietary recall booklet with food frequency questionnaire	0.00	48,000.00
Justification : for data collection					
5	Year: 2	Amala Institute of Medical Sciences	refreshments	0.00	5,000.00
Justification : sensitization and training of staff involved regarding research purpose					
6	Year: 2	Amala Institute of Medical Sciences	printed sociodemographic data , 3 day 24 hour dietary recall booklet with food frequency questionnaire, post test and pre test questionnaire	0.00	48,000.00
Justification : for data collection					
7	Year: 2	Amala Institute of Medical Sciences	printer black ink	0.00	745.00
Justification : for printing data collection tool and pre test and post test questionnaire					
Total Cost (Rs.) including overhead					115,390.00

Equipment Budget Breakup Details

#	Budget Year	Institute	Equipment Name	Equipment Model	Equipment Manufacturer	Equipment Type	Total Cost(Rs.)
1	Year: 1	Amala Institute of Medical Sciences	small adult blood pressure cuffs		MEDTECH	Domestic	1,399.00
Justification : for taking automatic digital BP							
Mode of Proposed disposal : For further use again							
Total (Rs.):							1,399.00

Travel Justification

#	Year	Amount(Rs.)
1	Year: 1	72000.00
Justification : travelling to the twelve schools for permission and consent , collecting data prior to intervention - total of 24 visits to school in first year		
2	Year: 2	60000.00
Justification : for meetings related to project, travelling to ICMR		
3	Year: 2	72000.00
Justification : Health education sessions and collecting data after intervention,- total of 24 visits to schools		
Total:		204,000.00

Short resume PI/Co-PI

Name of PI/Co-Pi	DOB	Domain Expertise	Number of articles in Pub Med (Past 10 years)	h-index	Fellow of Academics	Role in Proposal
Prof Saju Cherumadathil	1962-10-23	Epidemiology, Tuberculosis, Adult vaccination	0	nil	Fellowship program in medical education	Co-PI

Short resume PI/Co-PI

Maximum of 10 primary research publications related to the proposal

Publication details in AMA style	Impact factor of journal	Author type (first, corresponding, coauthor)	Name of policy/programme/ protocol document or patent/commercialization of products where cited.
21. A Study on the Knowledge and Attitude Regarding Internet Blue Whale Game Among Adolescent School Children in a Private School in a Rural Area of Kerala, South India. VTKD Menon, H Kumar, CR Saju, V Joshi Call for Editorial Board Members 1 (2), 67	nil	co author	nil
5. Nutritional status and cognitive impairment in elderly population in a rural area of Thrissur district, Kerala. R Ramachandran, JM Mundodan, CR Saju, VM Joshy Int J Community Med Public Health 5 (3), 1218-1223	4.52	co author	nil
Assessing risk factors of Non-Communicable Diseases using STEPS Survey in a rural area of Thrissur District, Kerala. Saju CR, Catherin Nisha, Jerry Rachel, Kerline Jerome, Subin Koshy, Vidhu J, International Journal of Medical Science and Current Research 2(40), 241	5.565	co author	nil

Experience as Investigator

Title of the project	Role	Funding Agency	Amount of Funding	Reference of main publications
UNICEF project on timely achievement of targets related to MDGs	PI	UNICEF	193000.00	Capacity building of timely achievement of Millenium Developmental Goals in India
UNICEF Project on HIV/AIDS Awareness among adolescence	PI	UNICEF	251500.00	HIV/AIDS Awareness of college students in Kerala, South India
AMALA-UNICEF Project on "Facts for Life",	PI	UNICEF	1197000.00	NIL

Ongoing research projects (funded by ICMR)

Project Id	Title	Grant Amount	Start Date	End Date

Name of PI/Co-Pi	DOB	Domain Expertise	Number of articles in Pub Med (Past 10 years)	h-index	Fellow of Academics	Role in Proposal
Dr Sruthi M V	1986-11-04	maternal health	0	nil	nil	Co-PI

Maximum of 10 primary research publications related to the proposal

Publication details in AMA style	Impact factor of journal	Author type (first, corresponding, coauthor)	Name of policy/programme/ protocol document or patent/commercialization of products where cited.
Jose NK, Sruthi MV, Rachel J, Jerome K, Vaz C, Saju CR. Barriers and facilitators of noncommunicable disease (NCD) prevention in Kerala: A qualitative study. J Family Med Prim Care. 2022 Jun11(6):3109-3114. doi: 10.4103/jfmpc.jfmpc147121. Epub 2022 Jun 30. PMID: 36119306 PMCID: PMC9480671.	1.4	first	nil
Harish Haridas , K S Premlal , Sruthi M V, A Study on Dental Caries and Risk Factors for Non Communicable Diseases among Undergraduate Medical Students of Palakkad District, Kerala , Indian Journal of Public Health Research Development: Vol. 11 No. 8 (2020)	1.0	corresponding author	nil

Experience as Investigator

Title of the project	Role	Funding Agency	Amount of Funding	Reference of main publications

Project Id	Title	Grant Amount	Start Date	End Date

Short resume PI/Co-PI

Name of PI/Co-Pi	DOB	Domain Expertise	Number of articles in Pub Med (Past 10 years)	h-index	Fellow of Academics	Role in Proposal
Dr SANDRA PAULSON	1988-09-06	nutrition , adolescence	0	nil	nil	PI

Maximum of 10 primary research publications related to the proposal

Publication details in AMA style	Impact factor of journal	Author type (first, corresponding, coauthor)	Name of policy/programme/ protocol document or patent/commercialization of products where cited.
1) Thilak SA , Sandra Paulson , Sarada A.K . Academic stress among High School Students in Thalassery educational block , Kerala : A cross sectional study .National Journal of Research in Community Medicine , Vol 6 Supp Issue 1 , July 2017	2.12	co author	nil

Experience as Investigator

Title of the project	Role	Funding Agency	Amount of Funding	Reference of main publications
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Ongoing research projects (funded by ICMR)

Project Id	Title	Grant Amount	Start Date	End Date
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Declaration

I hereby declare that the entries in this form and the additional particulars, if any, furnished herewith are true to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage, my project/proposal shall be liable to cancellation / termination without notice or any compensation in lieu thereof.

I hereby certify that the research proposal I have submitted to ICMR, New Delhi, for potential funding is entirely my original idea and has not been copied or replicated from any other source. Furthermore, I confirm that this proposal has undergone scrutiny using a standard plagiarism detection tool, verifying its originality and confirming that its contents have not been directly taken from any other sources. Additionally, I declare that there have been no established or pending plagiarism charges against me in the last five years.

In the event that the funding agency identifies any form of plagiarism or inconsistencies in the aforementioned proposal, I acknowledge and agree to comply with any actions deemed necessary by ICMR. I take full responsibility for any such discrepancies and will adhere to the consequences as required.