

Columbia Global Centers is a network of eleven centers established by Columbia University worldwide, with the Mumbai center launched in 2010 as Columbia's gateway to South Asia. Located in the city's central business district, it operates as a research, education, and knowledge hub — conducting interdisciplinary research, designing educational opportunities, and connecting Columbia faculty with institutions, government agencies, and NGOs across India. Its programmatic focus spans environmental sustainability, health and medicine, innovation and entrepreneurship, and education.

My internship at CGC Mumbai has been a long-term engagement running from Grade 9 through Grade 11, under the supervision of Puja. The work spanned public health research, academic programme development, event planning, fellowship impact analysis, and large-scale research curation.

Hip Hop Public Health — India Adaptation. Columbia's Center for Community Health, led by Dr. Olajide Williams, developed Hip Hop Public Health as a US model for improving youth health literacy through music, animation, and culturally resonant storytelling. I was assigned to produce the foundational research determining whether the model could be adapted for India. This involved artist recommendations, animation studio assessment, cultural adaptation research, a creative education literature review, and concept notes — work grounded in India's linguistically diverse school system and its rapidly growing domestic hip-hop scene reaching working-class and urban youth.

The Columbia India Data Directory. My largest project was building a curated, research-grade repository of India's best secondary datasets for Columbia faculty conducting India-related research. The center had an initial draft that was raw, inconsistently described, and unverified. I rebuilt it across three versions — restructuring around thematic research pillars with analytically specific utility descriptions, then applying systematic fact-checking that identified six material errors in the source material, including a sixfold understatement of NFHS-5 household coverage, an unreleased survey wave listed as available, and incorrect coverage figures for multiple databases. The final directory expanded to 77 datasets across 10 research pillars, incorporating Puja's feedback on pillar ordering, access classification, and structure. It was prepared for publication on CGC Mumbai's website for faculty use.

Additional projects. I also designed a pre-application questionnaire for the Fulbright India programme, conducted a comprehensive impact analysis of the Yusuf Hamied Fellowship examining fellows' publications and citations, produced a thematic analysis of a nutrition convening transcript, and developed evidence-based video concept frameworks for a colon cancer awareness project — researching behaviour change communication, health messaging, and youth engagement patterns to build a structured content plan for a medical professional.

Working at the center over three years gave me sustained exposure to how a research institution actually operates — how projects move from a research question to a usable output, how findings get verified before they reach anyone, and how academic knowledge travels to the people who need it. Across public health, education, fellowship analysis, and data curation, the common thread was making rigorous work accessible to those positioned to use it.