Seven insights into community-based mental health responses to Covid-19
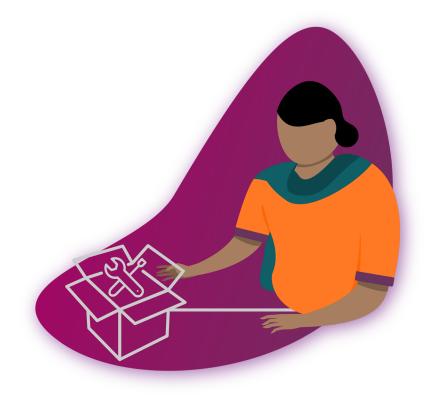
ember

July 2020

the SHM foundation

Vitol Foundation

cbm
Global Disability Inclusion

Voices from the frontline

Ember finds, connects and funds excellent community-based mental health initiatives around the world.

We are currently working with 15 initiatives across 12 countries, all uniquely equipped to overcome issues of stigma and engage people in meaningful, culturally-sensitive ways.

When the Covid-19 pandemic became acute, our first response was to ask them how this was affecting their work.

We learned seven important lessons from listening to what to they had to say.

Map of the 15 initiatives Ember is currently working with

MSUA, Ethiopia
An association of mental service users advocating for their voices to be taken into account in policies and services

CBMHP, Afghanistan
A volunteer-driven system of outreach, home visits, training and referrals to meet community mental health needs and raise awareness

CMC - Nepal
A wide-reaching system integrated within government structures to train health and lay workers to address mental health needs

Huertomanías, Ecuador
A collective of people living with severe mental illness that provides livelihoods for those involved and tackles the stigma surrounding their conditions

Quan Tam Network, Vietnam
A large-scale, comprehensive community support programme for people living with severe mental illness

Buena Semilla, Guatemala
Creating peer-led support groups – Women's Circles – to empower indigenous Maya women to become agents of change in their lives and communities

Punto de Encuentro, Argentina
Supporting the mental health of domestic violence survivors by helping them reach financial independence

Burans, India
Building relationships with and between community stakeholders to increase mental health provision in rural communities

Green String Network, Kenya, Somalia, Ethiopia, South Sudan
Breaking cycles of violence in post-conflict settings through creative, collective therapies and workshops

CAFS, Sri Lanka
Child- and youth-friendly community hubs hosting a range of psychosocial services for families, adolescents and children

SPANS, Zimbabwe
Supporting new mothers and fathers with their mental health

Mental Health and Wellbeing on Campus, Kenya
Establishing mental health services in universities and raising awareness of mental health issues among staff and students

Open Hands, Botswana
Supporting and advocating for the mental health needs of LGBTQ communities

PDO, Kenya
A user-led organisation of people with lived experience and professionals volunteering their time to provide free community-based support

PHOLA, South Africa
Providing support to vulnerable communities through creative methods and narrative therapies that leverage the strengths of local healing practices

ember

Community-based initiatives have had the skill to rapidly transform their work to respond to new needs.

They have acted quickly and directly through close proximity to communities and dedicated teams.

Case Study

In northern India, Burans drew on their extensive community networks to rapidly double the number of volunteers within days by training and empowering young people. They used this extra capacity to spread accurate information about Covid-19 widely throughout the communities they work within.

In Zimbabwe, SPANS (Society for Pre and Post Natal Services) adapted existing plans for a future community awareness-raising project to rapidly launch a response effort focused on sharing information about Covid-19 and mental health. With a committed team of volunteers, they began by targeting the communities in which they had strong relationships and, from there, branched out to wherever the need was greatest.

These initiatives know their communities' needs very well thanks to the close and trusting relationships they have with them. They therefore know how their needs have changed.

They are not dealing with mental health needs in isolation. They are also being responsive to other interconnected needs at this time, such as access to food and PPE, as well as psychosocial support.

Case Study

Green String Network have exemplified this responsiveness and this openness to broadening the remit of their activity. From the early days of the pandemic's spread, they saw how poorly accurate and relevant information about the virus was being disseminated to poor and marginalised communities.

Communication and storytelling are one of their strengths so they developed tailored and accessible illustrated tools to help reach them.

They also developed a cloth mask initiative that has provided a source of income to local tailors and free, reusable masks to families in informal settlements. As the situation in Kenya has intensified, they have repeatedly spotted new needs by listening to the communities they are embedded within, then drawn on their strengths to meet them.

Community-based initiatives face additional demand for their services.

The ripple effects of the pandemic are having significant impacts on mental health.

Many groups are particularly vulnerable right now, including frontline workers, victims of domestic violence and those with low or precarious incomes. These initiatives have been responding to such needs from the start.

Case Study

Afghanistan was one of the early hotspots of the pandemic, thanks in part to its proximity to Iran. The already-strained healthcare system came under intense pressure and there has been a surge in the need for mental health support for both healthcare workers and the families of Covid-19 patients.

CBMHP (Community Based Mental Health Project, by The International Assistance Mission) responded to these urgent needs by creating programmes for both populations, as well as continuing with their existing work, albeit digitally. Additionally, CBMHP was invited to join the government's emergency task force alongside leaders in other areas of health and humanitarian assistance to advise on the mental health dimension of the crisis.

Demand for CBMHP's time and resources therefore increased at each level of their operations, from service delivery to consultation.

There is a big need to support the wellbeing of these teams that are now exposed to additional factors of distress.

Their ability to support others and take decisions is dependent on their wellbeing. You can't help someone else put their oxygen mask on until you've put on your own.

Case Study

As an advocacy organisation of mental health service users, the lockdown exposed the wellbeing of the members of MSUA (Mental Service Users' Association - Ethiopia) to various threats.

First of all, the uncertainty related to the pandemic added to their mental distress. Moreover, being impossible to organize in-person meetings, the members experience a sense of isolation, aggravated by the fact that centers that used to provide mental health services and medications before the pandemic are now dedicated for COVID-19 related interventions. Finally, due to poor internet and telephone coverage, digital consultations are not accessible to many service users.

All these factors combine to make it difficult for the association to maintain clarity in planning and implementing its strategy. Focusing on the team's wellbeing is therefore crucial to ensure that they can still pursue the objective of improving the mental health scenario in their country.

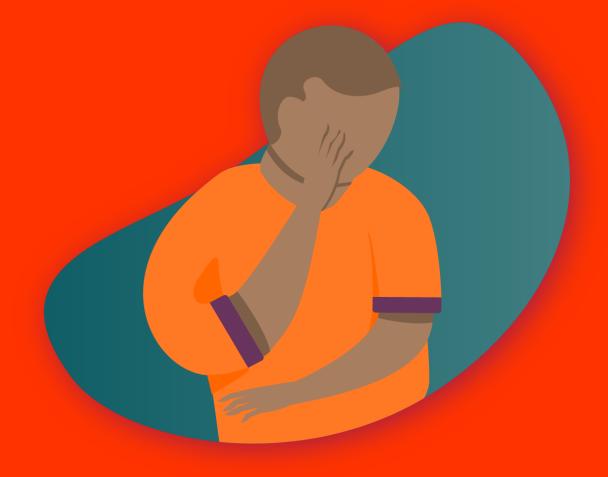# Financial precarities have, for some, become acute.

In some cases, funders have frozen or reduced funds; in others, sources of revenue from service delivery have stalled as a result of lockdown and social distancing guidelines.

Case Study

CAFS (Child Adolescent and Family Services) is a family-friendly hub in Colombo, Sri Lanka, that offers a variety of mental health services on a sliding cost scale, according to each client's situation. Due to lockdown, CAFS temporarily closed the hub and therefore lost the vast majority of its income overnight.

In Argentina, Punto de Encuentro had been expecting the renewal of a government grant.

However, the uncertainty brought by the pandemic has caused that funding to be frozen indefinitely, leaving them in a precarious and uncertain situation.

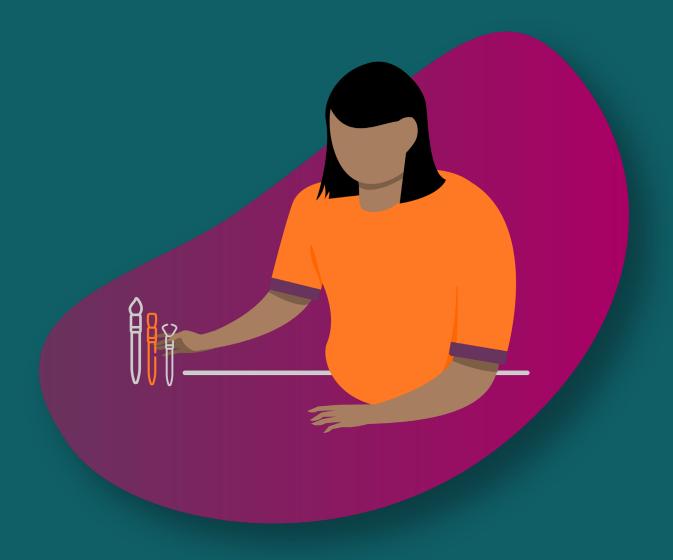# Teams and leaders are facing additional pressures.

Team members have in some cases lost jobs that provide crucial sources of income. People who usually volunteer their time may be unable to do so at present. This is a stressful situation, in personal as well as professional spheres.

Case Study

For the small team behind Open Hands in Botswana, there has been a lot of pressure on the shoulders of the three team leaders.

They have been providing ongoing and highly personalised support to each of the LGBTQ people in the Open Hands network, who are particularly vulnerable to becoming isolated during this time, despite challenges such as poor connectivity that have made it harder to deliver this support.

At the same time, these individuals have also been cut off from their own support networks. Two team members are also dealing with the loss of their job and the income it provided - income that has enabled their work on Open Hands.

These initiatives have found creative and resourceful ways to adapt to changing situations.
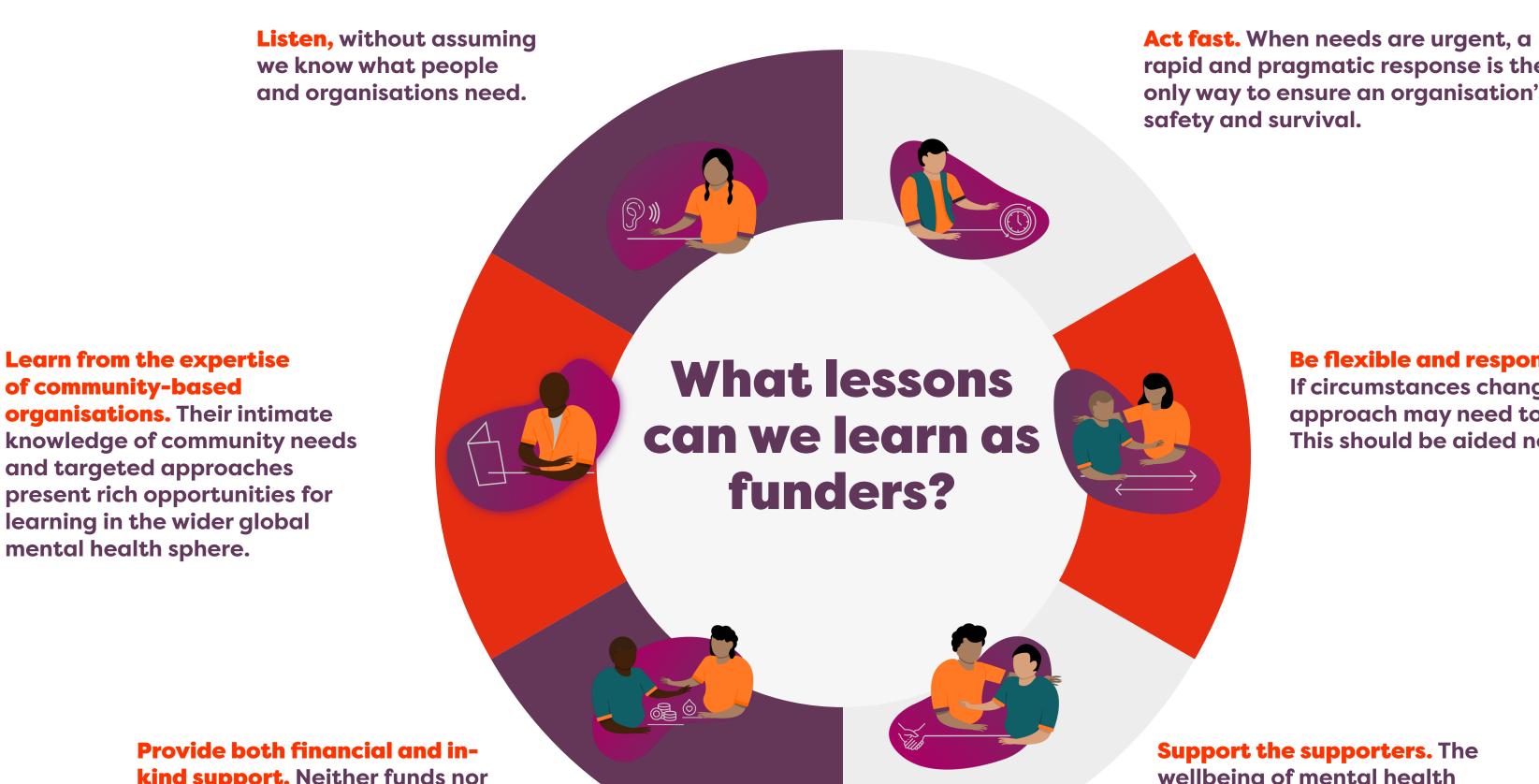
By doing so they can continue delivering their services and also develop ways of responding to new needs.

Case Study

Any one of the 15 initiatives Ember's working with could be used to exemplify this. In diverse and innovative ways, each has transformed aspects of their work to overcome new challenges and find alternative ways of reaching the communities they serve.

Forum theatre is a creative, participatory methodology used by Mental Health and WellBeing on Campus (MH+WB) in their work with students at Kenyatta and Chuka Universities in Kenya by Basic Needs Basic Rights Kenya org to generate awareness and understanding about mental ill health.

Dramatic performances that feature the relevant topic are interspersed with group discussions, interventions and revisions to generate deep, personal engagement with the subject matter. With universities closed, MH+WB have developed a digital version of forum theatre using Zoom and Whatsapp and successfully run it with students, refining the approach as they learn what works.

Listen, without assuming we know what people and organisations need.

Act fast. When needs are urgent, a rapid and pragmatic response is the only way to ensure an organisation's safety and survival.

Learn from the expertise of community-based organisations. Their intimate knowledge of community needs and targeted approaches present rich opportunities for learning in the wider global mental health sphere.

Be flexible and responsive. If circumstances change, the approach may need to change too. This should be aided not blocked.

What lessons can we learn as funders?

Provide both financial and in-kind support. Neither funds nor capacity building are sufficient in themselves. The combination of both makes the biggest difference.

Support the supporters. The wellbeing of mental health caregivers is critical to the effectiveness of their work and must be actively supported.

ember

Listen. We have had in-depth and regular conversations with all the innovators to assess their situation, needs and well-being.

Act fast. Once we understood innovators' needs and how their situations had changed, we released two funds to meet them. The process was simple and straightforward for innovators and these funds were unrestricted.

Learn from the expertise of community-based organisations. We are gathering the stories of best-practice in how these innovators have responded to the pandemic and supporting evaluation of what works. We work to improve their visibility in the global mental health sphere through online publications, webinars and relationship-building.

How has Ember put this into practice?

Be flexible and responsive. We released a Transformation Fund to enable innovators to develop and implement alternative models where appropriate.

Provide both financial and in-kind support. Alongside releasing the Funds, we designed and delivered a package of strategic and capacity-building support to help innovators implement their transformation plans.

Support the supporters. We released a Wellbeing Fund dedicated to supporting the physical, emotional and mental health of the innovators' teams. We also delivered a virtual care package of workshops and individual sessions to meet the particular needs of different initiatives.

ember

This is just the beginning.

These insights demonstrate that the Covid-19 pandemic has revealed a profound contradiction.

On the one hand, community-based mental health projects live in a condition of continuous precariousness which can threaten their existence. On the other, there is an ever increasing and widespread need for the services of care they provide.

This crisis is proving how well-positioned community-based initiatives are to respond rapidly, effectively and appropriately to mental health needs.

We believe this powerful grassroots ecosystem of care around the world is part of the answer to the global mental health crisis. It urgently needs support to sustain and flourish. However, the existing funding system of global mental health does not respond to the specific perspective and needs of such organisations. New and alternative approaches informed by expertise are required to provide funding and support that make a real and lasting difference.

Ember's mission is to radically transform the funding landscape of global mental health so this ecosystem of care can grow and thrive.