# Towards a Coalition for Scaling Evidence Based Interventions in the Global Mental Health & Well-Being Space

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### Introduction

In 2007, the clarion call "No Health Without Mental Health" catalyzed a surge in evidence demonstrating the effectiveness of trained non-professionals in reducing the treatment gap for mental, neurological, and substance use disorders worldwide. Nearly two decades since the inception of the global mental health movement, and despite the mounting body of randomized controlled trials, and other research evidence, showcasing the efficacy of task-shifting as a global strategy<sup>4,5</sup>, their remains a paucity of practical knowledge on optimal approaches for scaling effective interventions across the globe.

The impact of mental health problems continues to be devastating on individuals, communities, and economies around the world, and particularly in the low-resource settings where we work.<sup>6</sup> To address the treatment gap and transform mental health for all—as urged by the most recent WHO World Mental Health Report<sup>6</sup>—we must adopt strategies and interventions conducive to scaling that are not only accessible to the communities that need them, but that are also tailored to individual and communal needs while seamlessly integrated into existing caregiving systems and community life.<sup>6–8</sup>

It is against this backdrop—and drawing on our collective insights from over 25 years of experience in developing and scaling mental health caregiving models that have collectively served over a million individuals—that we propose the establishment of a Coalition for Scaling Mental Health (CSMH). We believe that it is imperative, now more than ever, for us collaborate and collectively pursue the identification, adoption, and scaling of effective strategies that can bridge the treatment gap.

We enter this dialogue as implementers. We are organizations that are deeply entrenched on the ground: We work to deliver essential mental healthcare on daily basis to some of the most marginalized groups. The inception of CSMH was born out of a serendipitous encounter between the founders of StrongMinds (StrongMinds treats depression in low-income women and adolescents by providing group interpersonal therapy (IPT-G), delivered by lay community health workers; <a href="https://strongminds.org">https://strongminds.org</a>), Shamiri Institute (Kiswahili for "thrive", The Shamiri Institute trains high-school graduates to deliver group-based therapy across Kenyan schools; <a href="https://www.shamiri.institute">https://www.shamiri.institute</a>), Ubuntu Center for Peace (The Ubuntu Center implements a community-based psychosocial healing model to address trauma and common mental health

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conditions; <a href="https://ubuntucenterforpeace.org">https://ubuntucenterforpeace.org</a>) and Friendship Bench (The Friendship Bench provides sustainable community based psychological interventions that are evidence based, accessible and scalable; <a href="https://www.friendshipbenchzimbabwe.org">https://www.friendshipbenchzimbabwe.org</a>).

As a collective, CSMH represents implementers who are unified by shared values, with a primary focus on empowering those who are proximal to the problem. Indeed, it is our belief that it is those who are closest to the problem are closest to the solution. Central to this ethos is the belief in proximal support, which includes amplifying support and funding opportunities for those who are spearheading initiatives and caregiving models that are specifically tailored to local contexts. Moreover, it entails fostering collaboration between implementing organizations and organizations engaged in advocacy, training, and research, thereby consolidating the political influence of stakeholders involved in service delivery.

Drawing on over 25 years of experience, CSMH is steadfast in its conviction that it is imperative, if we are to bridge the treatment gap, that we:

- Broaden the representation of diverse voices on the global stage of mental health and well-being implementation, thus ensuring that mental health service models resonate with and meet the needs of beneficiaries that they seek to serve.<sup>9</sup>
- Foster the exchange of skills and resources among implementing organization through shared best practices and learning in various forums, such as workshops and conferences, thereby establishing clear and universally accepted standards of practice.
- Champion the shared objective of democratizing mental health care for all, eliminating discrimination on race, gender, ethnicity, profession, or any other demographic factors.
- Elevate the voices of frontline implementers in this discourse, recognizing their
  invaluable insights and experiences gained from directly engaging with communities.
  This involves actively involving implementers in decision-making processes, policy
  development, and program design, ensuring that their perspectives are not only heard
  but also incorporated into mental health initiatives at all levels.

# **Principles for a Coalition for Scaling Mental Health:**

To operationalize our objectives, we are committed to the following guiding principles, which we have identified as crucial for achieving seamless integration of mental health care within local communities while upholding fidelity of practice:

1. Lay Providers: We prioritize task-shifting to lay providers who have direct access to communities and are effective in reducing barriers to accessing mental health support services, including stigma and cost. This approach addresses the dual challenge faced by mental health organizations in low-resource settings—lack of implementation support and personnel shortages. Embracing the lay provider model in its various iterations resolves obstacles for both service users and providers.<sup>4,5,10</sup>

- 2. **Training and Supervision:** To uphold the fidelity of service provision by lay providers, we need to provide comprehensive support to them through continuous training and supervision. This empowers lay providers with a robust understanding of best practices and ensures they operate within the framework of structured guidance, thereby enhancing the quality of care delivered.<sup>11–13</sup>
- 3. **Paid:** We recognize and remunerate individuals who contribute to, support, and influence our work. Valuing the expertise involved in implementation is paramount, and we advocate for fair compensation for all stakeholders, from lay providers to administrative staff, acknowledging the importance of earning a sustainable livelihood.<sup>11</sup>
- 4. **Evidence-Based Practices:** Our work, principles, programs, and initiatives are underpinned by rigorous research and evidence. 14–16 We take pride in our collective knowledge of the effectiveness of diverse methods and program frameworks tailored to address specific issues. Our commitment to continuous learning and adaptation ensures that our interventions remain culturally relevant and responsive to evolving community needs. 10,17,18
- 5. Integration with Established Healthcare Systems: Our efforts are designed to complement and enhance existing healthcare systems rather than operate in isolation. By collaborating with these systems, we ensure the comprehensiveness and sustainability of our programs. This collaborative approach fosters a holistic understanding of community needs, facilitating seamless integration and responsiveness across all systems involved in delivering mental health support.<sup>7,8,17</sup>

## **Strategy for a Coalition for Scaling Mental Health:**

To effectively drive our principles and realize the objectives of a Coalition for Scaling Mental Health, we have devised a comprehensive three-pronged strategy:

- 1) Advocacy and Dialogue: Our first approach involves advocating for systemic change through policy dialogue with governments and other key stakeholders. We aim to ensure the integration of community-based mental health services into primary healthcare and educational settings for long-term sustainability. This advocacy effort will emphasize the importance of our guiding principles and advocate for the necessary funding to support effective and high-quality task-shifting initiatives.
- 2) Research and Evidence: We are actively engaged in research efforts to deepen our understanding of implementers' landscape, their metrics for success, and the support required to scale their interventions. By incorporating Dissemination, Data, and Implementation Science methodologies, we aim to ensure that evidence informs both policy and practice. This research endeavour will result in a series of peer-reviewed publications in the field of Global Mental Health (GMH).

3) Towards Adopting a Common Measure for Mental Health and Wellbeing: Building on insights gleaned from our research and evidence-gathering efforts, we are undertaking a rigorous process to develop or adapt a culturally inclusive measure for mental health and wellbeing. This measure will serve as a universal benchmark for assessing impact across diverse cultural contexts, and CSMH members will integrate it into their programs to establish a unified collective measure of effectiveness.

In the coming months, we seek to articulate these strategies, and others that may emerge in a scientific journal through a robust perspective piece with a theory-of-change and through a systematic review on organizations that are implementing mental health and well-being interventions in the global south. We hope to utilize these papers to shape public opinion and lay the groundwork for further development of favorable policies driven by evidence.

# **Conclusion and a Call to Action:**

In conclusion, our journey towards transforming mental health for all is only just beginning, but the strides that have been made underscore the potential for a meaningful change. We believe that the proposed guiding principles and the multifaceted strategy that encompasses advocacy, research, and the adoption of common, standardized measures can truly reduce the treatment gap and revolutionize mental health support not only in low-resource settings in the Global South but on a global scale.

However, our success hinges on collective action. We invite individuals, policymakers, user groups, implementers, funders, and academics who share our vision to join us in this crucial endeavor. Together, we can bridge the treatment gap, democratize mental health care, and foster resilient, thriving communities worldwide.

To stay informed and engaged with our progress, we encourage you to subscribe to our free quarterly updates. Your support and involvement are integral to our shared mission of building a healthier, more equitable world. We invite you to join us today.

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