

**Mental Health Programming Needs and Successes:
Examples from Global Sites presented by speakers at the July 23 Congressional
Briefing by the U.S. Global Mental Health Alliance.
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Amani Tom is the Founding Director of Action Kivu and the co-founder and Executive Director of ABFEC (Action for the Welfare of Women and Children in Congo), a Congolese nonprofit organization that fosters equality for conflict-affected women and children in the Eastern DRC. The DRC has been beset by conflict for years, with >100 armed groups. Amani has extensive experience in community development project coordination, Humanitarian Emergency Intervention coordination, civil society capacity building and advocacy for human rights with focus on Peace, Education and Mental health. Amani strongly believes in the

power of education and Mental health, and this is why he founded the Congo Peace School Program (<https://www.actionkivu.org/peace-school>), which mainly aims at providing mostly war-affected children with quality education combined with mental health services to ensure war-affected children can get an education while healing from their traumatic experiences.

Summary of Amani's comments

I am participating in this session today because of the ongoing under-reported human rights crisis happening in the DRC right now. Hundreds of thousands of men, women and children have been forced to flee their homes in the eastern Democratic Republic of Congo following a resurgence of armed conflict over the last years—And as I am speaking to you now, belligerents have continued fighting to have control over precious minerals needed to power the economy of the World Tech industry, the ongoing armed violence has resulted into forcing 7 million people becoming internally displaced and an average of 500 people becoming refugees every day. Rape is being used as a weapon of war, child soldiering, forced child labor, out of school children... are very big issues. I am here today because the need for mental health intervention is very pressing in my country. The need to integrate Mental Health interventions into education is very pressing given the levels of trauma children come to school with in the DRC in general and in the Eastern part of the country in particular. Traumas among school children cause learning problems, including lower grades and suspensions and expulsions.

I established The Congo Peace School six years ago with an education program rooted in Peace and Nonviolence based on the teaching of Martin Luther king Jr and integrating mental health services as a core element. The school serves children in overlapping vulnerabilities, mostly orphans. In the context of war, where community members know that anything can happen any time, school children live with constant fear which is enemy number one of the learning Process. Since its opening integration of mental health Interventions with education has proven to be essential to improving

the attendance rate, reducing school dropout, and healing the trauma symptoms children commonly check-in in with at the beginning of every school year including constant fear, irritability, nightmares, isolation, aggressiveness, sadness, despair, suicidal thoughts ... We have realized that if the symptoms are not addressed using mental health interventions in school settings, school performance will be very poor. We have also realized that if we provide Mental Health services we can have significant positive impacts on learning outcomes.

A note about the future: While the school has been successful we see the need to extend mental health services to the wider community, acknowledging that the children come from families in the community and families have their own mental health problems and have to be part of the healing process. We hope to see mental health as part of community services available to the whole community. This will not only improve educational outcomes but the success of other critical programs.



Rawan Hamadeh, Program Officer and Mental Health specialist joined Project HOPE in July 2020. Originally from Lebanon, a country facing several crises, she accumulated experience in humanitarian assistance and system reform while pursuing her master's degree in Healthcare and Quality Management. She held roles in UN agencies, international NGOs and within the Lebanese Ministry of Public Health. With extensive expertise in project management, capacity building, and advocacy for public and mental health, Ms. Hamadeh is dedicated to advancing effective and equitable health solutions.

Summary of Rawan's comments

Lebanon is a low to middle income country facing multiple crises: from previous wars and current conflict to holding the highest number of refugees per capita in the world while dealing with the 3rd most severe economic collapse since the mid 1800s, in addition to COVID-19 and one of the largest non-nuclear explosions in history wiping out the main port. All these crises have exacerbated the mental health condition of the population living in Lebanon but at the same time have contributed to the mental health system reform in the country.

Mental health services in Lebanon were previously highly privatized and specialized, centered around tertiary care. Despite all the crises, mental health reform was successfully implemented by the National Mental Health Program (NMHP) and focused on the integration of mental health services within the primary healthcare system, providing services beyond medical treatment at the community level, in line with Human Rights principles and the latest evidence for best practices.

The key success factor of the NMHP was combining political will and endorsement of key health stakeholders within the Ministry of Public Health with the advocacy, expertise and

funding of UN agencies and other international organizations [UNICEF, IMC (International Medical Corps), WHO (World Health Organization)].

Currently, because of this program, people living in Lebanon have access to mental health services at the primary care level all across the country with a detailed accessible mapping of services, an active suicide hotline, innovative accessible digital tools to support their mental wellbeing, more up to date laws and regulations guiding mental health services and professionals, continuous awareness raising efforts using multiple channels and clear coordination between all mental health actors in the country to increase the accessibility and availability of high quality services.

Prioritizing Mental Health in complex contexts is essential for communities to thrive, and systemic change is possible when policy makers, advocates and experts are working in the same direction.



Georgia Karoutzou is a psychiatrist of Greek nationality with a doctoral degree in Neuroscience. For the past 13 years, she has been working as a relief worker in several missions for refugees and migrants, and people in complex humanitarian emergencies and post-conflict areas with various international organizations, including International Medical Corps, International Rescue Committee, and Médecins Sans Frontières. Her professional interests include transcultural psychiatry and International mental health & psychosocial support in fragile states.

Summary of Georgia's comments

In global humanitarian emergencies, the toll on mental health and psychosocial well-being of individuals, families and communities is profound. Exposure to violence, loss, protection violations, displacement, and economic difficulties cause immense suffering and despair, worsening preexisting mental health conditions and causing significant distress for many. One in five (22.1%) people in conflict-affected settings experienced a mental health condition. Complex and prolonged humanitarian emergencies are often characterized by decades of poverty, marginalization, armed violence, insecurity, political instability and have devastated the lives of millions. Natural disasters also have a long-term impact on individuals and communities. These crises highlight the urgent need for mental health support to address profound psychological and social impacts that can last for generations.

In my role as a global advisor, I have supported five newly emerging humanitarian emergencies, including conflicts in Ethiopia, Ukraine, and Sudan, as well as natural disasters like the floods in Pakistan and Libya. But also working in complex and protracted emergencies, such as those for Afghan refugees in Pakistan and in conflict-affected and famine-affected Somalia, where our resources are often limited, have enhanced my commitment to promoting mental health awareness and advocacy and developing effective solutions on a global scale.

I have seen firsthand how critical it is to provide mental health support, especially in crisis settings. We must make mental health care available, accessible, and affordable for those in need. And yet there is a large mental health treatment gap in humanitarian settings; access to mental health specialists is limited, and medication is often in short supply. Services are also underfunded, particularly in low-income countries where annual spending on mental health is less than \$2 per person. In Ethiopia I visited a community and spiritual treatment setting for people with mental health conditions where I met individuals whose treatment consisted of being chained by their ankles, in poor hygiene, almost naked, malnourished, and withdrawn. This motivated us to engage with the community, educate them about mental health, ensure the availability of medications, and train health providers to offer evidence based mental health interventions, and diminish such harmful practices.

International Medical Corps, in collaboration with partners including USAID, are working among the international and local organizations working to scale up services for mental, neurological and substance use disorders for low- and middle-income countries by integrating mental health into primary health services. We need to build mental health care into primary care and build capacity for community-based care which is more cost-effective and more successful in the long run, making substantial returns in both economic terms and improved health and social stability.