

Strategies to Promote Mental Health in a Population Group

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N123- Community Mental Health Nursing

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Learning Objectives

- Understand community mental health promotion
- Explain the conceptual approaches to community practice
- List community mental health promotion strategies



Community Mental Health Promotion

- A whole-of-community approach to mental health promotion means engaging the wider community composed of multiple actors, sectors and systems, to address the social determinants of mental health and reduce mental health inequities.
- A community approach to mental health promotion views mental health as a positive resource for individuals and communities embedded within the social, cultural, environmental and economic contexts of everyday life.



What does <u>COMMUNITY</u> mean?

- Those that describe a geographically based community such as a local neighborhood, city or rural locality, to groups of people who share a common identity or interests, for example, communities based on ethnic, sexual, religious or cultural identities, who may not be geographically based
- Group of people sharing values and institutions, a sense of belonging or shared social meaning, and social structures that serve to connect interdependent social groups (Rifkin et al. 1988).



Rationale for Community Mental Health Promotion

- Provides a unique opportunity to put into practice the principles of community participation and empowerment, which were outlined in the World Health Organization's Declaration of Alma-Ata (WHO 1978), the Ottawa Charter for Health Promotion (WHO 1986) and subsequent health promotion declarations.
- The concepts of participation and empowerment occupy a special importance in community mental health promotion practice.



Rationale for Community Mental Health Promotion

 Community engagement strategies that embrace participation and empowerment have a positive impact on the development and delivery of more appropriate and acceptable interventions and have positive effects on social cohesion, social support and the individual self-efficacy of those who are actively engaged (O'Mara-Eves et al. 2013).

Conceptual Approaches to Community Practice

1. Community-Based Approach



- The main purpose of community-based approaches is to consult with and reach a wide range of community members.
- These approaches involve engagement with communities at different levels, ranging from consultation to direct involvement in intervention delivery.
- Peer-based or lay-delivered approaches fall under this category.

2. Community Organization Approach

- Community organization approaches mobilize major agencies, institutions, and groups within a community.
- The goal is to coordinate services and create programs to improve community health.
- Large-scale community interventions like the Quezon City Community Based Mental Health Program.



3. Community Development Approach:

- Often grassroots and 'bottom-up,' this approach actively involves community members.
- Community members participate in identifying their own needs.
- Strategies are devised collectively, leading to increased self-reliance and decision-making power.

Principles of Community Practice



Socio-ecological model of health

- Interactions: Individuals, families, and communities interact with various factors like socio-economic conditions, culture, and structural determinants that affect mental health.
- 2. Multi-level Interventions: Actions based on this perspective target different levels such as community norms, social structures, policies, and services.
- 3. Ecological Programs: These programs consider the interdependencies across various determinants like socio-economic, cultural, political, environmental, organizational, psychological, and biological factors.



Socio-ecological model of health

- **4. Community as Interface**: The community serves as a connection point between different interacting systems like individuals, groups, organizations, environment, and policy.
- **5. Community Interventions**: These interventions can address multiple levels, thereby enhancing their combined effects.
- 6. Mediating Structures: Structures like schools, workplaces, and community settings play a key role in social interventions, operating at different levels from micro to macro.



Community Engagement and Participation

- Community engagement is a collaborative process that involves working with and through groups of people to address health-related issues.
- It spans a continuum of approaches, ranging from information sharing and consultation to more active strategies like community participation and empowerment.
- Community engagement enables individuals and communities to define their health problems and shape solutions.
- It promotes a sense of control and ownership, leading to increased capacity and more sustainable change.

Community Empowerment



- Empowerment involves a social action process where individuals, communities, and organizations gain mastery over their lives.
- It aims to transform power relations and remove psychological and structural barriers. Paulo Freire's consciousness-raising approach emphasizes dialogue, critical reflection, and action.
- Operates at various levels, including the individual, group, organizational, and wider community.



Community Empowerment

 In an empowered community, individuals and organizations collaborate to meet their needs. Through participation, they provide mutual support, address <u>conflicts</u>, and <u>gain influence over their quality of life</u>. An empowered community can also <u>influence decisions</u> and <u>drive changes</u> in the larger social system.

How to promote Community Empowerment?

Social Inclusion and Cohesion



- 1. Social Inclusion and Well-Being
 - A socially inclusive society values all individuals, respects their differences, and ensures their basic needs are met with dignity.
 - Émile Durkheim, a pioneering sociologist, highlighted the impact of social cohesion (or lack thereof) on mental health and suicide rates.
 - Anti-social behavior and variations in suicidal tendencies are linked to the presence or absence of social cohesion.
- 2. Factors Protective of Health and Positive Outcomes
 - Cooperation and tolerance between individuals, institutions, and diverse groups contribute to better health outcomes.
 - A sense of belonging to family, school, workplace, and community fosters positive social outcomes.
 - Strong social networks serve as buffers against everyday stressors and enhance selfconfidence and community resilience.

Supportive Physical Environment



 When individuals have access to safe, clean, and welcoming environments that allow interaction with both people and nature, it fosters a sense of belonging and community connectedness. This, in turn, contributes to promoting positive mental and physical health and wellbeing (Kent &Thompson, 2014)

Virtual Communities



- Online social networks can positively impact psychological wellbeing by fostering empowering interactions and providing social support.
- However, it's essential to recognize that using social media platforms can also have negative effects. Young adults may experience negative social comparisons, self-perceptions, and psychological distress. Additionally, excessive use can lead to a decline in life satisfaction.
- Innovative online platforms and mobile apps have been designed to enhance mental resilience and community engagement.
 - Examples include the Fit in je Hoofd app in Belgium and the Pace Standard app in Scotland, both aimed at promoting community involvement and wellbeing.

Implementing Community-Based Mental Health Promotion Strategy

Collaborative Partnership



Collaborative Partnership

- Community-based approaches that build on the strengths and assets of the local community help to create a sense of ownership and empowerment among community members, especially those who are disadvantaged or marginalized.
- Collaborative approaches involve community members, families and local services working together in identifying local needs, planning, implementing and evaluating community interventions
- O'Mara-Eves et al. (2013) describe a continuum of community engagement approaches ranging from consultation in determining local priority needs, through to community involvement in the design and planning of interventions and direct involvement in intervention delivery.



Collaborative Partnership

 Engaging community members as partners in the design and delivery of interventions is based on the understanding that involving communities will result in interventions that are better matched to local needs and resources and will have a better ecological fit with the sociocultural environment in which they will be delivered.

Example: The Stepping Stones Intervention



Program Description

The Stepping Stones intervention is a participatory gender-transformative and livelihoods strengthening program. It targets both males and females aged 15–26. The program is delivered to single-sex groups over the course of six to eight weeks (50 hours).
 Facilitators conducting the program are the same age as the participants with three weeks of program training.

Objectives

- The primary aim of Stepping Stones is to prevent intimate partner violence (IPV) and reduce HIV vulnerability. By addressing gender norms and promoting equitable relationships, the program seeks to create a safer environment.

Example: The Stepping Stones Intervention



Outcomes:

 Evaluations of the Stepping Stones intervention have shown: A reduction in known risk factors for HIV among young men and women and improvements in levels of sexual violence and substance misuse among males.

Context

the program was evaluated in urban informal settlements in eThekwini Municipality,
 South Africa. This trial represents one of the first large-scale efforts to prevent IPV
 and HIV vulnerability in such settings.



Community Youth Interventions

Features for successful community youth interventions:

- 1. Adoption of a structured approach to delivery with specific and well-defined goals.
- 2. A focus on skill enhancement.
- 3. A direct and explicit focus on desired outcomes.
- 4. Provision of training and implementation over a longer period of time.



Example: Project K

- Project K is a youth development programme for adolescents with low selfefficacy, which combines a wilderness adventure, community service and an individual mentoring partnership with a trained mentor.
- Delivered over a 14 month period, evaluations have reported significant improvements in participants' sense of efficacy (Deane et al. 2017) and positive effects on self-efficacy, resilience and well-being (Furness et al. 2017).

Social Inclusion Intervention for Adults



- There is a limited evidence base on community interventions designed to promote social inclusion and strengthen social networks for adults in the general population.
- A number of studies, however, can be found in relation to interventions for older people, including volunteering and befriending.
- <u>Volunteering</u> includes a range of activities in which time is given freely to benefit another person, group or organization, and <u>befriending</u> usually involves a supportive relationship offered to vulnerable people who find living in their community difficult.

Implementing Community Empowerment Programs



- These strategies primarily target deprived communities and marginalized groups.
- Epidemiological, sociological, and psychological evidence supports the link between control, health, and powerlessness.
- Poverty and economic powerlessness correlate with social dysfunction, poor mental health, and increased morbidity and mortality.
- The World Bank emphasizes the importance of agency in marginalized communities.

Example: Act-Belong-Commit



- Act-Belong-Commit is a population-wide, comprehensive, community-based mental health promotion campaign designed to enhance mental health and prevent mental ill-health (Donovan et al. 2006)
- The Act-Belong-Commit messages and framework were based on this primary research into lay people's understanding of, and beliefs about, factors contributing to good mental health, which were then confirmed through an extensive review of the scientific literature.
 - Act: Keep physically, mentally, spiritually and socially active (i.e. 'do something').
 - Belong: Keep up friendships, engage in group activities, participate in community events (i.e. 'do something with someone').
 - Commit: Set goals and challenges, engage in activities that provide purpose in life, including taking up causes and volunteering to help others (i.e. 'do something meaningful').

Key Factors to Successful Intervention



- 1. The campaign brand message resonated with the general population's intuitive beliefs about enhancing and safeguarding good mental health.
- 2. The campaign's straightforward message emphasized actionable steps, such as taking walks, reading books, joining book clubs, participating in community events, learning new skills, and volunteering.
- 3. The campaign reframes 'mental health' from having primarily 'illness' connotations, to positive 'health' connotations.

Implementing Community Empowerment Programs



Implementing Community Empowerment Programs

- Consideration of opportunity, institutional structures, and broader political, economic, and governmental contexts is crucial.
- Strategies must also address power imbalances and create tangible changes in community living conditions.
- Integration with macroeconomic and policy strategies enhances economic, political, and human rights, fostering greater equity.



Effective interventions in LMICs

- Economic empowerment initiatives, such as micro-credit schemes and community banks.
- Literacy promotion.
- Gender and racial equality initiatives.
- Violence prevention and crime reduction in marginalized communities.



Interventions Promoting Gender Equality

• The promotion of gender equality, including interventions that confront traditional beliefs and cultural norms, is a critical part of violence prevention programmes which have been implemented in many LMICs, with promising interventions in school and community settings (Patel et al. 2007).



Example: Comprehensive Rural Health Programme (CRHP)

- The CRHP was initiated in 1970 when Maharashtra faced severe health and poverty challenges. The program aimed to address these issues through community-based interventions.
- The CRHP directly targets poverty, inequality, and gender discrimination. It operates based on principles of equity, integration, and empowerment.
- The project actively engages with local communities through various channels:
 - <u>Farmers' Clubs:</u> These clubs foster collaboration among farmers and promote sustainable agricultural practices.
 - <u>Women's Groups:</u> Empowering women is a central focus. These groups provide a platform for education, income generation, and social support.
 - <u>Adolescent Girls' Groups:</u> These groups empower young girls by providing education and life skills.



Comprehensive Rural Health Programme (CRHP)

- Interventions:
 - Income Generation: The program encourages economic self-sufficiency by promoting income-generating activities.
 - Agricultural and Environmental Programs: Sustainable farming practices and environmental awareness are emphasized.
 - Education: Education plays a crucial role in empowering individuals and communities.
 - Health Services Development: Access to quality healthcare services is improved.

Comprehensive Rural Health Programme (CRHP)



- Impact on Mental Health:
 - Determinants: Mental health and illness are understood as products of cultural and socio-economic factors.
 - Conceptualization: Mental health is commonly seen as an absence of stress.
 Stressors include conflicts with family members, domestic violence, and poverty.
 - Empowerment and Mental Well-Being: Empowering women through income generation, education, and reduced discrimination positively impacts mental health.
 - Addressing Determinants: The project indirectly addresses social and economic determinants of mental health, including social inclusion, freedom from discrimination, and women's economic participation.
 - Suicide and Violence: Participants describe mental health problems such as suicide and violence.



Peer Support Models

- Peer support programs create supportive linking relationships.
- The peer support model emphasizes the value of other people as helpers.
- While peer support often occurs naturally, formalized interventions can

enhance its effectiveness.



Example: Widow-to-Widow Programme–A Mutual Support Bereavement Programme

- A volunteer community program for recently widowed persons, where other widowed persons are the primary helpers providing support to the newly widowed still experiencing bereavement and the problems of coping with the loss of a loved one
- A community outreach service is provided which usually involves an unsolicited offer of help to the newly widowed by trained volunteer helpers.

Example: Widow-to-Widow Programme–A Mutual Support Bereavement Programme



- The program sets out to identify the unmet needs of the newly widowed six weeks to two months after the death, and focuses on promoting people's ability to cope with their pain and to deal effectively with the changes in their lives.
- The outreach volunteers or helpers are seen as neighbors who contact the bereaved and offer support. The basis of the help is a widow-to-widow relationship, thereby reducing the potential stigma attached to accepting this kind of help.

Advantages of adopting a community approach to mental health promotion



• Community interventions have the capacity to address multiple interacting

systems at the level of the individual, family, group and the wider environment,

thereby increasing the synergistic effects of change strategies operating from

the micro to the macro levels.

• Community-wide interventions have the potential to reach a wider range of

population groups across a range of setting and sectors.



• Cross-sectoral community approaches provide an opportunity to engage with

multiple stakeholders through collaborative partnerships in addressing the

broader social determinants of mental health.

• Community interventions can reinforce positive social norms, and promote structures and environments that are supportive of positive mental health

across multiple segments of the community.



• The development of interventions for the whole community is more likely to

avoid the stigma and negative labelling associated with interventions targeted at specific groups, such as those who are disadvantaged, excluded or regarded as being at higher risk of mental health problems.

• The process of community engagement and participation, which is central to community practice, is recognized as promoting a greater sense of control and

enhancing overall community competence and capacity.



• Interventions that are planned and designed through community partnerships

and collaboration are more likely to be ecologically valid, that is, relevant,

meaningful and culturally appropriate for the community in which the interventions are implemented.

• Collaborative community practice, through the empowerment of community members, contributes to the development of local capacity, which increases the

possibility of sustaining local initiatives after initial funding.

References

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Thank you!