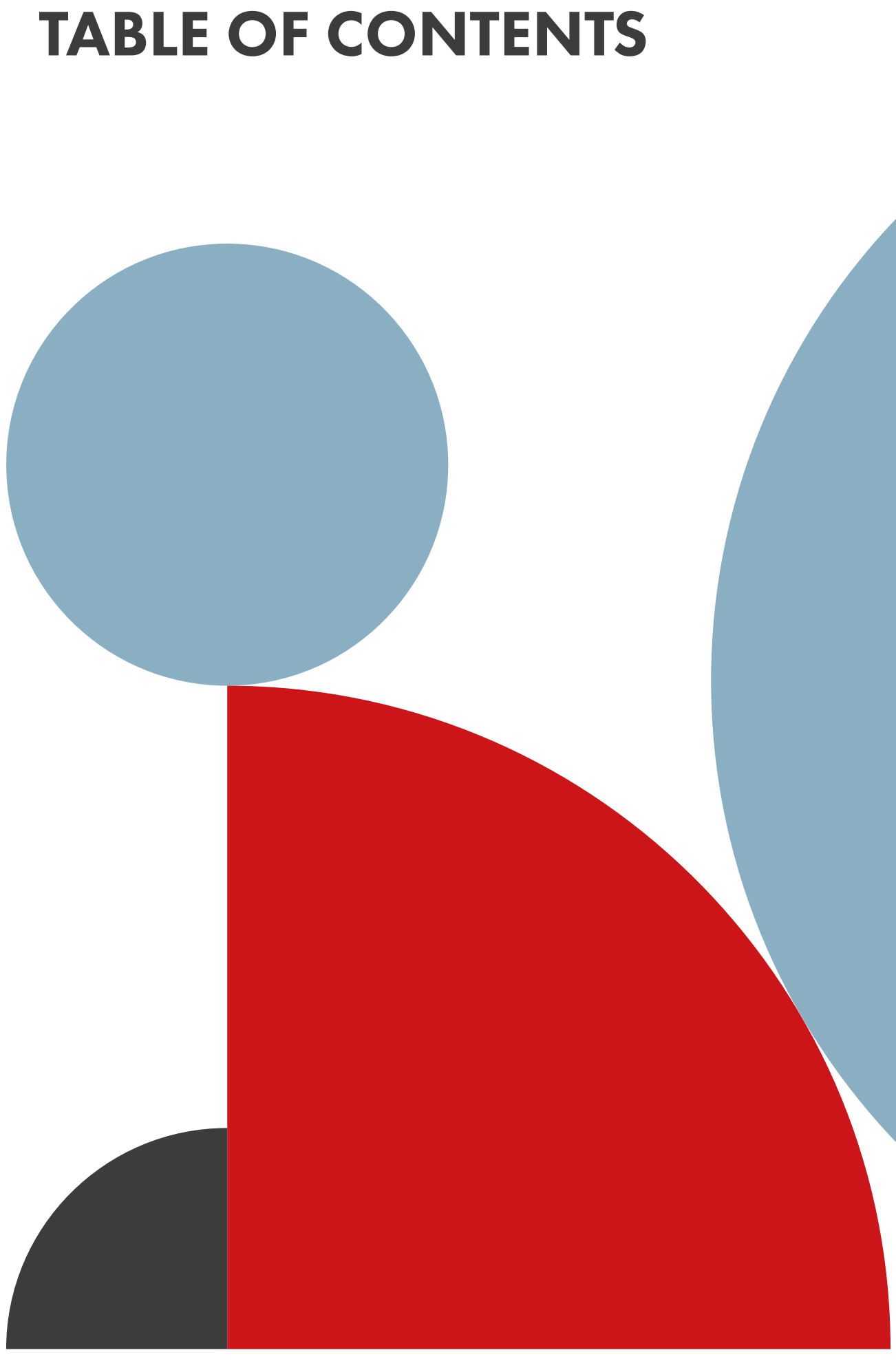




# ANNUAL REPORT 2017

Fondation d'Harcourt

A decorative graphic on the left side of the page. It features a light blue circle at the top left, a large light blue circle on the right, and a red shape at the bottom left that is a quarter-circle with a radius equal to the diameter of the top-left circle. A dark grey semi-circle is partially visible at the bottom left corner.

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# MESSAGE FROM OUR MANAGING DIRECTOR

Since 2005 we have been promoting the mental health and wellbeing of communities, ensuring that individuals and families are supported and their intangible needs are valued and fulfilled.

We have made a difference, improving the lives of many, while building our expertise through partnerships with experienced organizations, learning how to overcome challenges and growing as an organization.

Today, Fondation d'Harcourt is still the only private foundation solely focusing on mental health. In fact, although global mental health is the silent crisis of the 21st century, countries and donors are still not allocating funding in proportion to its burden.

As anticipated last year, in 2017 we focused more on projects that facilitated access to mental health care (see axes of intervention) and in promising models that could be scaled up and replicated. We also paid particular attention to the role that technology can play in providing mental health care by supporting innovative projects.

This report shows our impact in 2017.

**Gaia Mountati d'Harcourt**  
Managing Director



# MISSION

Our mission is to improve the lives of people struggling with mental illness and their families. Our holistic approach helps them unlock their full potential, function in society and give something back to their communities. Given that certain social conditions increase the risk of mental illness, we also work towards prevention by providing psychosocial support to those who are most vulnerable.

Switzerland  
Italy  
Romania  
Greece  
Lebanon  
Uganda  
Togo  
Rwanda  
Burundi  
Bolivia

# AXIS OF INTERVENTION



Promoting the psychosocial wellbeing of vulnerable groups



Ensuring access to mental health care



Empowering people suffering from mental illnesses and their families



# ENSURING ACCESS TO MENTAL HEALTH CARE

|  |      |                   |
|--|------|-------------------|
|  | Togo | 2013<br>↓<br>2018 |
|--|------|-------------------|

## Major achievements



2661

patients with psychiatric disorders  
screened and treated

283

people with psychological issues  
screened and treated

60

patients with psychiatric disorders  
hospitalized at the center

52

patients involved in social reintegration activities

## Training

on emergency treatment of aggressive patients  
held by British psychiatrist Dr. Eaton

# Paul-Louis Renée Mental Health Center

**Objective: To provide mentally ill people  
with access to specialized treatment at  
the Paul Louis-Renée Center in Lomé**

Since the Foundation's support for this project will end in 2018, in 2017 we set up a clear sustainability plan for the center. We consulted Dr. Eaton who, knowing the context and the Sisters who are running the clinic, identified the challenges the center faces and proposed suitable solutions. It was agreed to expand the health center's structure to increase short hospitalization periods and to invest in capacity building of the health personnel. We also tried to facilitate the collaboration between AKT and the Sisters; although they continue to have a difficult and regular communication.



# SPOTLIGHT

## Jay's fight against substance abuse

Jay, 24, holds an Advanced Vocational Diploma in management but his substance abuse has hindered him from reaching his potential. In 2014 he was admitted into the Paul-Louis Renée Mental Health Center for the first time. Unfortunately, at the beginning of last year he returned with withdrawal symptoms from cannabis and alcohol.

When Jay arrived he was tense and nervous. He described his relationship with his parents, especially with his mother, as confrontational and preventing him from pursuing his goals. Jay expressed that his difficulty in coping with this situation had pushed him into substance abuse. Jay also showed evidence of psychotic tendencies such as auditory hallucinations and the difficulty to appreciate and empathize with others' viewpoints. Furthermore, he believed cannabis allowed him to communicate with spirits.

The mental health professional team at the Paul-Louis Renée Center designed a multi-fronted treatment to help Jay. Motivational therapy was advised as a first step to reveal all the factors contributing to his substance use.

Subsequent family therapy was introduced to improve his relationship with his parents. This was especially important regarding Jay's relationship with his mother, since she would only talk to him about his substance problems. Therapy helped them rebuild their relationship in a healthy way, shifting focus from their problems towards what brought them together as a family.

While hospitalized, Jay received cognitive and behavioral therapy. This allowed Jay to develop his self-esteem and assertiveness, particularly in relation to his motivation to stop smoking and drinking.

Thanks to the dedicated and professional team of the Paul-Louis Renée Center Jay was discharged at the end of January and says that he has felt better ever since. He reports that the hallucinations have decreased and that he is thankful for the family therapy sessions because they have significantly improved his relationship with his mother. The holistic approach promoted by the PLR Center has enabled Jay to regain the inner peace and family support which will allow him to avoid relapse and seek out his life goals.

*Strengthening personal resilience  
and family ties is essential for a  
successful recovery.*

|                                                                     |         |                   |
|---------------------------------------------------------------------|---------|-------------------|
| Rebuild. Recover. Thrive.<br><b>Peter C. Alderman</b><br>FOUNDATION | Burundi | 2016<br>↓<br>2018 |
|---------------------------------------------------------------------|---------|-------------------|

## Major achievements



3

in-depth clinical trainings held for mental health professionals

255

patients received for in-depth individual psychotherapy

477

patients hospitalized

1288

people attended 3 mass awareness campaigns on mental health

15

therapy groups run for 196 patients and their families

690

patients participated in 14 mental health sensitizations on common mental health issues

53

community health workers received specific skills training on identification, follow up and referrals

200

community health workers received training on common mental health problems

2544

households visited by community health workers

291

family home visits to follow up existing patients, encourage treatment adherence and offer psychosocial support to family members

# Building capacity and implementing mental health services

**Objective: To provide services for mental health promotion, prevention, treatment and follow up by setting up and training a mental health team in Kigutu**

The strategy of this intervention is to adapt PCAF's unique mental health support model, as successfully applied in Uganda, to set up a mental health team to treat Burundi's conflict-affected people. One of the major challenges faced by the English-speaking Ugandan training team was delivering their training in French. On the other hand, the partnership with the well-structured and organized grassroots non-governmental organization Village Health Works, based in Kigutu, has been essential for ensuring the project's positive outcomes. VHW did a great job at supporting the setup team and the community felt wholly engaged by the sensitizations campaign on mental health.



|                                                                                                             |         |                   |
|-------------------------------------------------------------------------------------------------------------|---------|-------------------|
|  World Health Organization | Lebanon | 2015<br>↓<br>2019 |
|-------------------------------------------------------------------------------------------------------------|---------|-------------------|

## Major achievements



5

public/private mental health clinics involved

200

patients treated (pilot phase)

500

indirect beneficiaries

1

software created

# E-mental Health

**Objective: To improve the mental health and function of adults in Lebanon by using a digital self-help cognitive behavioral therapy program**

Step-by-Step, “Khoutweh Khoutweh” in Lebanese, is a computerized mental health intervention with weekly 15-minute phone- or SMS-guidance by a trained non-specialist “e-helper”. Designing content relevant to the diverse communities of Lebanon was a major challenge. To overcome this diversity issue we suggested to test content and to work more closely with the target populations across the country. During the feasibility study we managed to involve 200 participants from different communities. In 2017 we approved the second phase of the project, which included a randomized controlled trial (RCT) of the intervention (2018-2019). The possibility to scale up and cater to larger populations is being worked on. If the intervention proves to be effective in two other fully-powered trials, WHO will make Step-by-Step widely available to different countries. In addition, Lebanon hopes to integrate the software into the government-run mental health care system and disseminate it for use within the general public.



# SPOTLIGHT

## From the blog

In mid-February we joined WHO for a three-day workshop in Beirut to follow up on the implementation of the e-mental health intervention we are supporting there.

The mental health departments of WHO HQ and the Lebanese Ministry of Health, representatives of the University of Zurich and International Medical Corps all gathered with us to review what had been done so far. We also designed the research phase of the project and identified the roles and responsibilities for the next steps.

The e-mental health platform follows a semi-interactive story which users click through. The generic version of the narrative was shared at the workshop. It was drafted by the University of Zurich and revised and contextualized accordingly. This was carried out in four primary health centers and one community center in different parts of Lebanon. Seven focus group discussions with eight key informants and three experts were carried out. The contextualization process pointed out some issues which needed work, such as the length of the story and the need to introduce more self-care activities.

We also spoke about the pilot study, whose objective is to check the feasibility and acceptability of a nationwide intervention. In order to successfully carry out a larger randomized control trial (RCT) the research methods are to be refined.

This will ultimately produce a tool that effectively reduces the symptoms of depression and increases functioning. The intervention pilot is scheduled to start in October 2017 and will last six months.

On the second day we had the opportunity to visit one of the primary health centers where the project will be tested. The health center, run by the Makhzoumi Foundation, is very well structured and counts with a mental health unit. The health personnel there have been trained on mhGAP, patients are successfully referred to the closest psychiatric hospitals and internet connection is available and functioning. These three elements will ensure that the trial can run smoothly.

At the end of the workshop a stakeholder meeting was organized with the representatives of the health clinics where the application is to be tested to share what had been discussed. They welcomed and appreciated the intervention, and provided some valuable input. Some ideas regarding how to advertise the program came up, such as using TV adverts, which are a very effective channel in Lebanon.

Overall, it was an extremely productive workshop. We are proud to collaborate with WHO and with the mental health Lebanese team. Their dedication and attention to detail, along with their strong commitment to set up the best intervention for the communities pushes us to continue supporting them.

|                                                                     |        |                   |
|---------------------------------------------------------------------|--------|-------------------|
| Rebuild. Recover. Thrive.<br><b>Peter C. Alderman</b><br>FOUNDATION | Uganda | 2017<br>↓<br>2019 |
|---------------------------------------------------------------------|--------|-------------------|

Major achievements



4,002

women screened by the maternal mental health team

1,008

depressed women were provided with psychoeducation

802

women attended follow-up after receiving psychoeducation

165

women who are still symptomatic involved in 14 interpersonal therapy groups

180

women with severe depression referred for specialized care

80%

of women enrolled decreased their symptoms of depression

65%

of women enrolled have increased functioning scores

Regular clinical supervision visits carried out by the MH team

Maternal mental health

**Objective: To strengthen mental health among pregnant women and young mothers through an innovative stepped care model that prevents and reduces the rate of maternal mental illness, especially maternal depression**

This intervention is based on a stepped care model that starts with screening at antenatal care visits and utilizes community health care workers to deliver psychoeducation — an evidence-based low-intensity intervention that has been shown effective in reducing depression symptoms in up to 75% of women. Following this, only those women who do not improve with psychoeducation are referred to specialized professionals for interpersonal group therapy. This method of task-shifting attempts to provide services in a sustainable and effective way while reducing the burden on scarce and overworked primary health care workers and mental health specialists. During its implementation, it was noticed that women did not return for follow ups after the first antenatal care visit. PCAF suggested to carry out home visits more regularly and to involve spouses in the intervention, something which has proven to be successful. In 2017 we approved the extension of the project for two additional years and its scaling up to two additional Ugandan districts. PCAF, building on its current work and lessons learned, will develop systemized strategies for handing over the program to the government.

SPOTLIGHT

From the blog

At the end of September we flew to Uganda for our annual field visit to PCAF, a very strong and committed partner. Josephine Akellot Ocamo, responsible for this project, walked us with her team to the homes of three mothers and their families who have been involved in the project. Caroline, Catherine and Christine\* gave us a very warm welcome and openly shared their experiences, their difficulties and how the program has helped them to start on a new and positive path. Caroline fully recovered from depression after attending psychoeducation sessions and Catherine recovered after attending an IPT group. Family therapy has been suggested to the third mother, Christine, which she is to start soon.

It was also touching to see how happy and supportive the husbands of these three wonderful women were about their wives’ recoveries. This is a direct result of the inclusion of the husbands in the health education talks that the team carries out and an innovative component PCAF introduced in July. It has been noticed that if husbands attend psychoeducational meetings with their partners they gain a better understanding of the psycho-psychical problems their wives are going through and become more encouraging during the recovery process.

We highly value the work carried out by PCAF. Their team is always searching for the best solutions while taking the local context, the available resources and the sustainability of the project into consideration. We could not be happier with their results and cannot wait to go back to Uganda for the next field visit.



\*The women’s names have been changed.

|                                                                                                                              |        |                   |
|------------------------------------------------------------------------------------------------------------------------------|--------|-------------------|
|  The<br>CENTER for<br>VICTIMS of<br>TORTURE | Uganda | 2018<br>↓<br>2020 |
|------------------------------------------------------------------------------------------------------------------------------|--------|-------------------|

### Predicted achievements



875

survivors of torture and war trauma will receive individual and group counseling

2,100

community members will participate in sensitizations on mental health

8

partner organizations will benefit from formal training and mentoring

3-6

psychologists of Makerere University will participate in clinical internships



## Mental Health Trauma Rehabilitation for Ugandan Victims of War Crimes

**Objective: To provide mental health services for victims of torture and capacity-building in mental health delivery for service providers in Uganda**

Despite everything that victims of war crimes have endured, survivors of torture are able to recover. CVT's work will provide the added value of specialized mental health trauma rehabilitation for survivors of torture and war trauma through group counseling and individual therapy as necessary. Its approach is based on the three-stage Trauma Therapy Model developed by Dr. Judith Herman of Harvard University Medical School. Counseling sessions focus initially on emotional stabilization, followed by the exploration of traumatic memories, and concludes by reclaiming personal dignity and reconnecting with the community. This therapy model will help individuals suffering from the effects of torture and trauma to rebuild their lives with dignity and enable them to once again contribute effectively to their families and communities. CVT will also provide training and supervision to mental health care providers to strengthen their capacity to better understand, identify, support and treat these survivors. The project includes a very detailed monitoring and evaluation process with regular assessments and follow-ups.

While approved in 2017, this project only started in 2018. It is therefore not found in the 2017 financial report.

|                                                                                                          |        |                   |
|----------------------------------------------------------------------------------------------------------|--------|-------------------|
|  fracarita<br>BELGIUM | Rwanda | 2017<br>↓<br>2020 |
|----------------------------------------------------------------------------------------------------------|--------|-------------------|

### Predicted achievements



5

regional mental health hospitals will be involved

5

nurses (regional coaches) and 5 pharmacists will be trained

6

training sessions (10 days per session) carried out

188

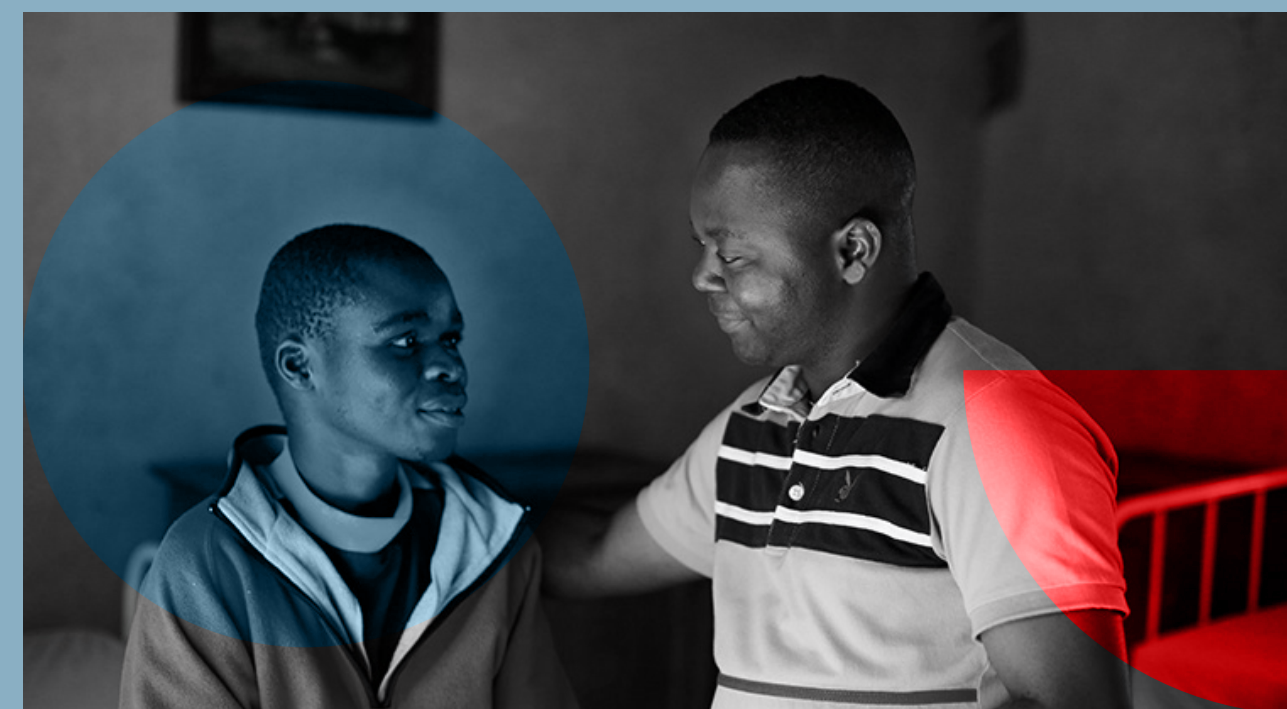
nurses will be trained on the job

193

hospital personnel will increase their competencies

5,736

people with mental health illness will improve their quality of life



## Improving mental health care

**Objective: To establish a regional network of good quality mental health referral hospitals by strengthening capacity building of mental health care professionals**

The Ndera Neuro-Psychiatric Hospital in Kigali, Rwanda, can be seen as a useful learning model for the whole Great Lake region. Burundi, DRC and Tanzania face similar mental health challenges to the ones of Rwanda but, mainly due to the shortage of well-trained mental health providers, lack accessibility to good quality mental health services. This project aims to improve quality mental health care in the region by achieving a competency-oriented development of nurses in mental health settings on different levels: knowledge, skills and attitudes. Because of this multi-level approach, the project proposes on-the-job training for general nurses by a specialized mental health nurse acting as a full-time coach. In addition, coaches will be supervised on-the-job by international mental health experts that will also organize regional networking and training. Finally, a regional instrument monitoring the quality of life of mental health patients, mental health care and nurse performance will be developed and improved.

### Predicted achievements



**10**

adolescents will have access to integrated mental health care

**10**

families and their communities will be supported

**5**

public territorial services will be involved

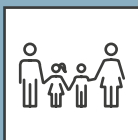
A multi-disciplinary team will be involved, trained and supervised by an experienced psychiatrist

# Omada Adolescent Neuropsychiatric Residential Community

**Objective: To improve the quality of life of adolescents living in the Omada residential community by integrating clinical services with psychosocial needs**

It is well known that adolescence is a long and delicate process which marks the change from childhood to adulthood. During adolescence, a number of physical and mental changes occur that bring about sudden and striking effects. Educators, social workers, psychologists, psychotherapists, neuropsychiatrists and psychiatrists collaborate with families and public territorial services to provide all the necessary psychological, emotional, scholastic and nutritional support an adolescent living in Omada requires. An individual plan for each girl is designed by the multidisciplinary team to accompany and monitor her in the transition from childhood-specific neuropsychiatric services to services for adults. This ensures therapeutic consistency and improves its long-term results in youth affected by psychotic disorders. In case hospitalization is required, health professionals ensure their presence and supervision so that possible trauma is prevented and therapy is properly followed up.





## EMPOWERING PEOPLE SUFFERING FROM MENTAL ILLNESSES AND THEIR FAMILIES



Italy

2014  
↓  
2018

### Major achievements



**82**

people attended the annual training on mental health issues opened to the general public

**3**

specific seminars on mental health issues held by technical experts

**61**

trained volunteers involved in public health services and workshops

**2**

bi-weekly self-help groups for patients' families

**105**

people with mental health illnesses involved in 6 different art therapy workshops (theatre, photography, music, sewing, fitwalking, cooking) and social activities

**350**

students (19 school classes of the Municipality of Rome) involved in a peer education program for prevention

**1**

International conference on recovery organized

**374**

requests of support received through the hotline program

## Volunteers and family network for mental health

**Objective: To offer proper support for people with mental illness by setting up a community network for them, their families and volunteers**

Our partnership with Fondazione di Liegro has been very fruitful over the years and several steps have been made to improve the quality of services they offer in Rome. In 2017 two major innovative activities were carried out: a comprehensive research and a peer education program. The research was presented at the conference on recovery held at the beginning of the year and it provides an overview of the situation of mental health care services in the municipality of Rome. It highlights, among other things, the need for human resources in the psychiatric sector. The conference stressed the existing need to de-psychiatrize the recovery process and promote the emancipation and empowerment of people affected by mental illnesses.

Based on the fact that some messages are more easily perceived and understood when promoted by peers, peer education activities were organized in two public secondary schools in Rome to sensitize adolescents on the importance of mental health and disseminate the message that mental conditions are indeed real illnesses and that cure is available.



# SPOTLIGHT

## Carlo's recovery through poetry and theater

Carlo\* was born in 1960 and joined the national gendarmerie during one of Italy's darkest times. He began to suffer from nightmares after witnessing colleagues losing their lives around him. He lost his appetite and growing feelings of anxiety would not let him rest during the day.

In a moment of desperation, Carlo shattered his bathroom mirror with his fist and was taken to hospital. He recovered from the incident but his action was judged as an act of self-harm and he was dismissed from the gendarmerie. This left Carlo feeling rejected and abandoned. As a consequence, his mental state worsened and he started behaving oddly, sometimes putting on his old uniform and "patrolling" the streets.

In 2001 he moved to Rome, where he was diagnosed with bipolar affective disorder and was forced to receive involuntary treatment at a mental health center. After his hospitalization,

Carlo was referred to the Luigi di Liegro Foundation to attend art therapy groups that could aid him with his recovery and his social skills.

When he first arrived at the foundation, he was not independent and was always accompanied by a health worker from the mental health center. He started participating in the theater group, but he kept his head low and barely interacted with others. With everyone's support, however, he gradually became more involved in the group.

Today Carlo comes to the theater meetings on his own by public transport, holds his head up and has regained faith in himself and others. He will even play one of the main characters in this year's performance.

"When I act I play myself, even though the words are different", Carlo says. After having discovered a passion for acting and poetry, he also took up writing and entered this year's Premio Internazionale di Poesia Don Luigi Di Liegro (Don Luigi Di Liegro's International Poetry Award). He received a special mention from the jury for the following verses:

"Il tempo non cancella niente. Ricordi, nostalgia, dolori.... Sposta tutto da un'altra parte"

"Chi ti vuole bene, te ne vuole anche quando non te ne accorgi"

"Time doesn't erase anything. Memories, nostalgia, pain... It moves them to another place"

"Those who love you do so even when you don't notice it"

Unfortunately, Carlo's illness is chronic and he will likely need therapy all his life, but thanks to the support he receives at the Luigi di Liegro Foundation, his recovery process has improved greatly. Carlo can

once again enjoy his life despite his symptoms; he is now able to identify and maintain what makes him well, as he has gained an understanding and a sense of control over his life and illness.



\*His name has been changed to protect his privacy

Giving people affected by mental illness the opportunity to enhance their autonomy and rediscover their potentials generates feelings of self-worth that are essential to their recovery.

Predicted achievements



300

hospitalized children and 100 family members will receive support

250

hospitalized children will improve their condition and gain coping mechanisms

2

highly experienced artists will be involved

8

murals within the Clinic will be painted to promote calm and healing

More than 2000 people in the community will raise their awareness on children's mental health disorders, prevention and care



# Improving quality of life and wellbeing at the Clinic of Pediatric Psychiatry and Addiction

**Objective: To ensure proper mental health care for children and teenagers hospitalized at the Child and Adolescent Psychiatry and Addiction Clinic in Cluj-Napoca**

In Romania, where mental health facilities continue to follow a purely medical approach, children and teenagers hospitalized for mental health illnesses face many challenges and go through a deeply personal and stressful experience of failure. Through this project patients' needs are considered from a holistic perspective, taking into account the medical, psychological, emotional and social components. To facilitate a more promising recovery of patients between 4 and 18 years old individual and group counseling, art therapy, play therapy, occupational therapy and sensitizations are promoted. Next year, families will also be supported in understanding the prescribed treatment and the needs of their children. The community of Cluj-Napoca will also be sensitized through mental health awareness and prevention campaigns.

To create a calming environment which nurtures and supports patients, families and caregivers, two highly experienced artists trained in the Anouk methodology have created therapeutic murals in the Clinic of Pediatric Psychiatry and Addiction, increasing the overall wellbeing of the hospital's residents. We suggested the partnership between Fundatia Inocenti and Anouk Foundation because we believe that the two foundations share the same vision and are able to collaborate together and provide an added value to the project.



|                                                                                                             |       |                   |
|-------------------------------------------------------------------------------------------------------------|-------|-------------------|
|  World Health Organization | Ghana | 2018<br>↓<br>2020 |
|-------------------------------------------------------------------------------------------------------------|-------|-------------------|

Predicted achievements



1

e-training course will be set up

5,000

stakeholders (mental health and health professionals, students, school teachers, policy makers, people with mental health conditions and their families) will improve their knowledge and skills through an e-training

10,000

people with mental health conditions and psychosocial disabilities will improve their lives

Service delivery at Pantang Hospital will be assessed and evaluated using the WHO QualityRights Assessment Toolkit

# Promoting human rights and recovery for people with mental health conditions and psychosocial disabilities

**Objective: To increase access to human rights and recovery-oriented services and support for people with mental health conditions and psychosocial disabilities through an e-training course**

This project aims to build capacity and change attitudes through an e-training course on mental health, human rights and recovery with online coaching. The training, launched and strategically rolled out to target populations throughout the country, promotes attitudes and practices that respect the dignity and rights of patients, as well as holistic, person-centered and recovery-oriented care and support. To evaluate its impact on service delivery, an assessment of quality care and human rights will be carried out in Pantang Hospital, one of the three public psychiatric hospitals in Ghana. A key feature of this project is that it harnesses new and innovative technologies to strengthen knowledge and skills in the areas of human rights and recovery to reach more people.

|                                                                                                     |             |                   |
|-----------------------------------------------------------------------------------------------------|-------------|-------------------|
|  CHILDREN ACTION | Switzerland | 2018<br>↓<br>2020 |
|-----------------------------------------------------------------------------------------------------|-------------|-------------------|

Predicted achievements



1

Adolescents and young adults aged 13-25 at risk of suicide will be treated and cared for

Adolescents and young adults will attend creative therapy workshops (music, theater, dance, mosaics, photography, cinema, radio, web design, sewing, poetry, etc.)

Cultural activities will be organized (museum, trainings, conferences, video shoots)

socio-cultural coordinator will be hired and a multidisciplinary team will be involved

Awareness-raising on suicide prevention will be promoted in the city of Geneva

# Suicide prevention and treatment for adolescents and young adults

**Objective: To facilitate adherence to treatment and care among hospitalized adolescents and young adults at risk of suicide and to sensitize their communities on suicide prevention**

Suicide is the second leading cause of death among 15–29-year-olds worldwide and Swiss teenagers exhibit one of the highest rates in Europe. This project aims to design a prevention program that strengthens the personal and social resources of adolescents and young adults at risk of committing suicide. Adolescents who have attempted suicide and are hospitalized will be involved in different psychosocial and recreational activities, this will facilitate their adherence to treatment and care. This intervention proposes to facilitate community engagement to raise awareness on suicide prevention, since the stigma associated remains a major obstacle and communities can play a critical role. Cultural activities will be organized within the hospital and around the city of Geneva to break barriers and to create a space of dialogue that will support the adolescents at risk and the community. The program includes a very well-established partnership between Children Action and Malatavie (Unité de crise - HUG).



## PROMOTING THE PSYCHOSOCIAL WELLBEING OF VULNERABLE GROUPS



Italy

2014  
↓  
2018

### Major achievements



3

primary aid reception centers  
involved and supported

2740

unaccompanied minors involved  
in psychosocial activities

97

minors with psychological disorders  
received individual support

235

psychological interviews held

14

vulnerable cases referred for specialized care

## Providing psychosocial support to unaccompanied migrant minors

**Objective: To provide psychological and psychosocial support to unaccompanied migrant minors in three primary aid centers in Sicily**

All the best practices and lessons learned throughout the years have been included in the FARO Model Handbook that has become a paradigm model of psychosocial support for unaccompanied minors. Since its publication in May 2017 it has been disseminated on a large scale throughout Sicily. The team, composed of a psychologist, a sociologist and a cultural mediator and regularly supervised by a psychiatrist, has gained all the competencies to work in a hostile context characterized by its volatility and low collaboration from the directors of the receptions centers. Following our suggestion, TdH also set up an internal evaluation process to measure the impact of the project.



# SPOTLIGHT

## From the blog

In the first two months of this year nearly 2,000 unaccompanied minors reached the shores of Sicily by boat. Early in March we visited our partner Terre des Hommes (TdH) Italy to share in their efforts promoting psychosocial support for these unaccompanied minors on the Italian island.

It was a great opportunity to spend some time with the team and discuss project FARO's activities. We met with Ganda, the psychologist, Sukeina, the cultural mediator and Francesca, the sociologist. It is always impressive to hear them describe their experiences with such passion and commitment.

We visited the Cooperativa San Francesco extraordinary reception center in Caltagirone. The center hosts around 70 unaccompanied minors, male and female, aged between 12 and 17. Upon our arrival we encountered a group of Nigerian teenagers involved in a psychosocial activity with Sukeina and Francesca. The children were excitedly personalizing some wooden boxes with color paint, a relaxing and creative activity which helps Ganda in identifying cases of vulnerability among the participants.

The TdH team has also been collaborating with the public health structure (ASL) of Catania, referring the most vulnerable cases to them. During our field visit we met with Dr. Aldo Virgilio, only psychiatrist specialized in transcultural psychiatry in Sicily. Dr. Virgilio highlighted the necessity to build and share competences among health personnel across the region, in particular training regarding refugees and migrants. He also emphasized the need for a holistic approach able to embrace this new humanitarian emergency.

Another TdH team works in a so-called "hotspot" in Pozzallo, province of Ragusa, which we had the opportunity to visit for the first time. Hot-spots have been created to identify and register disembarked migrants within 48-72 hours of their arrival.

Each person, including unaccompanied minors, has their picture and fingerprints taken. The Vice Prefect, responsible for the hotspot, walked us through the process that all people arriving by boat go through to enter the center.

Among the many national and international stakeholders involved in these hotspots, TdH carries out a series of psychosocial activities which help humanize an otherwise tense en-

vironment. TdH seeks to identify, refer and follow the most vulnerable cases while listening to the needs of the unaccompanied children and giving them useful information and comfort.

Given the harsh situations under which these children arrive on European coasts, and the many times violent lives they leave behind, on 29 March the Italian Parliament passed a comprehensive law for the protection of unaccompanied and separated children arriving in the

country. This is a historic event, as it is the first law of its kind in the world and we thank all the organizations, including TdH Italy, that contributed to its approval.

It is always inspiring to see how resilient migrant children are or have become and how they are dealing with this distinct and important phase of their lives. We thank Terre des Hommes for their valuable effort in helping these minors regain hope for their futures!



|                                                                                   |             |                   |
|-----------------------------------------------------------------------------------|-------------|-------------------|
|  | Switzerland | 2008<br>↓<br>2017 |
|-----------------------------------------------------------------------------------|-------------|-------------------|

### Major achievements



**5-15**

homeless people supported per week

**30-50**

people attended psychosocial activities per day

**25**

volunteers involved in psychosocial activities each week

# The Hameaux des Chemineaux - a holiday for the homeles

**Objective: To promote psychosocial wellbeing for the homeless at the Hameaux des Chemineaux in Geneva**

We have been partners with Carrefour-Rue for more than 8 fruitful years. To avoid endless support without a clear vision, we decided to conclude our partnership at the end of 2017. Carrefour-Rue is very well known in the Geneva area and, compared to other organizations, is supported by several private/public donors. We remain open to fund Carrefour-Rue in the future on a different and more specific psychosocial intervention.



|                         |             |                   |
|-------------------------|-------------|-------------------|
| <b>A</b> ppartenances • | Switzerland | 2015<br>↓<br>2017 |
|-------------------------|-------------|-------------------|

## Major achievements



71

people involved in group therapies: mother and children group, yoga, body group for migrant women, mindfulness, transcultural psychiatric intervention

618

physiotherapy sessions conducted for 61 patients

1

workshop organized on ethnopsychiatry and transcultural psychiatry

1

quantitative and qualitative evaluation carried out

# Psycho-corporal therapy groups for survivors of torture and war

**Objective: To provide specialized treatment for survivors of torture and war through psycho corporal therapy groups in Lausanne**

As the figures clearly show, many survivors of torture and war were able to benefit from the activities of the project. However, over the years Appartenances has gone through an important internal restructuring that has significantly affected the outcome and impact of the project. High turnover of personnel, lack of regular participation of patients in group therapy sessions, lack of a follow-up and referral pathway and difficulty in identifying criteria to attend group therapy were among the challenges the project faced. Seeing this, we constantly suggested different activities and procedures in order to improve the quality of services offered. In particular, we recommended that an evaluation of their intervention be carried out with the support of evaluation experts. We still need to receive the final version of the evaluation report, but the first draft already shows several weaknesses. Our financial support ended in 2017 but we have met twice with Appartenances in 2018 to help them identify a better way forward for the project.



# SPOTLIGHT

## Habtom knows he is not alone

Habtom was born in Eritrea to an Ethiopian mother and an Eritrean father but grew up in Ethiopia, where he eventually became a teacher. In 1998, when war erupted between Ethiopia and Eritrea, he was forced to flee to Eritrea to avoid persecution. When the war ended, Habtom returned to Addis Ababa, where he was arrested and severely beaten under accusations of being a spy due to his Eritrean origin. For more than four years Habtom was detained under conditions of forced hard labor, filth and hunger. After his release and following a long and painful journey, Habtom was able to reach Switzerland.

In Lausanne, Habtom's general practitioner carried out various exams but was unable to treat Habtom's sleeping disorders and gastric problems. He therefore decided to put his patient in contact with Association Appartenances, which offers specialized psychotherapeutic and psychiatric help to people suffering from the consequences of collective violence, migration and torture. At Appartenances Habtom was assigned a psychiatrist.

When his asylum application was denied a second time, Habtom was forced to move into a bunker house. This further aggravated his health problems and Habtom contemplated suicide. Fortunately, Appartenance's psychiatrist and Habtom's GP provi-

ded the government with the medical reports required to transfer him to a refugee center. Habtom's health, however, remained unstable; he lost weight and was hardly able to sleep. He was also unable to concentrate and learn French, which made it hard for him to integrate.

At Appartenances, Habtom's sessions were geared towards empowerment and designed to allow him to reclaim his body, restore a link with his emotions, and improve his pain management and other physical ailments. To help him integrate into society, Appartenances' psychiatrist suggested its socializing project, Espace Mozaik, where Habtom could meet with other people and attend French and computer classes.

Habtom also attends weekly sessions with Appartenances' physiotherapist to relieve the pain in his shoulder and throughout his body. The exercises and massages provided by the physiotherapist have helped reduce the stiffness and pain in his back and legs. Habtom's health has improved both psychologically and physically. He is overcoming some of his health problems and regaining some self-esteem.

Habtom's gratitude is touching, as is his trust in the whole team of therapists and social workers at Appartenances. He describes his psychiatrist as a very sensitive, kind and respectful person who is always there for him. Thanks to the Appartenances team, Habtom knows that he is not alone anymore.

\*The person's name

A multidisciplinary approach to the body and psyche is an effective aid to individuals suffering from the psychological consequences of migratory experiences and collective violence.

|                                                                                   |         |                   |
|-----------------------------------------------------------------------------------|---------|-------------------|
|  | Bolivia | 2017<br>↓<br>2019 |
|-----------------------------------------------------------------------------------|---------|-------------------|

## Major achievements



40

community promoters and 28 health professionals trained on maternal mental health issues

92

pregnant women and young mothers involved in cognitive behavioral training (mother-child bonding) and counseled by community promoters

1531

children improved their self-esteem

35

children diagnosed with psychosocial disorders received psychotherapeutic interventions

106

children involved in play therapy and recreational activities

151

teachers trained on identification and referral of children with psychosocial disorders

627

parents empowered with positive parenting skills

# Maternal and child mental health – El Taypi

**Objective: To provide support to pregnant women and mothers at risk of developing psychosocial and psychiatric disorders and prevention of mental health disorders in children with psychosocial vulnerabilities**

CBM, an international NGO with a specific expertise in mental health, supports this community mental health project run by two well-structured local organizations. In particular, CBM provides a national mental health advisor and a regional technical expert to train and supervise the local teams. The project is located in two different areas of Bolivia, which allows for sharing learning and experiences. By building the capacity of community promoters and health professionals on maternal mental health the intervention offers specific training and group/individual counseling for pregnant women at risk of developing a psychiatric disorder. It also develops adequate awareness on mental health issues for community members through sensitization campaigns disseminated by community promoters and health professionals. Furthermore, the project aims at contributing to the prevention of mental disorders in children through processes of early detection, diagnosis and individual/group therapy by building the capacity of teachers and families.



|                                                                                     |        |                   |
|-------------------------------------------------------------------------------------|--------|-------------------|
|  | Greece | 2017<br>↓<br>2018 |
|-------------------------------------------------------------------------------------|--------|-------------------|

## Major achievements



1200

Refugee children will be involved in psychosocial activities

3000+

children, families and communities will be supported

20

volunteers of the core team will be trained in child protection and first psychological aid

1

mental health and psychosocial specialist will train and supervise a multidisciplinary team

90

non-formal weekly educational and recreational activities will be carried out

# Promoting the psychosocial wellbeing of refugee children

**Objective: To improve the lives of child asylum-seekers in two centers for refugees and migrants in the island of Lesbos**

The small island of Lesbos can be considered Europe's front door and epicenter of the migrant crisis in Greece. More than 40% of refugees are children mainly coming from Syria, Iraq and Afghanistan. Trapped in a political and bureaucratic limbo, they are left in refugee camps with very limited resources for an indefinite period of time. This stressful situation of uncertainty only adds to an already traumatizing experience of conflict, displacement, potential loss of family and the perilous journey to Greece. This project targets children aged 4 to 11 in two refugee camps, providing supportive and relevant non-formal education and recreational activities such as expressive arts and design, literacy and life skills. A mental health and psychosocial expert will train and supervise the team of psychologists, social workers, protection officers and educators that will implement the project and interpreters will be involved to aid their planning and implementation.



# EVENTS ATTENDED



## On mental health

### Recovery – 27 and 28th of January 2017

<http://www.fondationdharcourt.org/recovery-determining-factors-in-mental-health/>  
(see project "Fondazione di Liegro: Volunteers and family network for mental health" for more information)

Over the last three years we have worked with our partner Fondazione di Liegro (FdL) promoting community support services for the wellbeing of people with mental illnesses in Rome, Italy.

Within this framework we decided to organize a conference on recovery, duly titled **Recovery – Determining factors in mental health** (*Recovery – I fattori determinanti della salute mentale*). The event took place in Rome on the 27th and 28th of January and was fruit of our collaboration with FdL and the National Institute for Health, Migration and Poverty. More than a hundred people attended the meeting, principally service users, family members, psychiatrists, psychologists, social workers, nurses and volunteers interested in the field of mental health.

The high-level panelists came from all around the world and included Pat Bracken, consultant psychiatrist and clinical director from Ireland; Roberto Mezzina, psychiatrist at the WHO Collaborating Center in Italy; Michelle Funk, Coordinator of Mental Health Policy and Service Development at WHO HQ in Geneva; Corrado Barbui, psychiatrist from Italy; Paul Lysaker, clinical psychologist from the USA and Fabrizio Starace, President of the Italian Society of Psychiatrist Epidemiology.

The conference served as an important opportunity to focus on both the effectiveness

and the limits of the current biomedical approach to mental health. It also highlighted the importance of personal and social factors in promoting quality of life of people with mental illness and their families beyond the clinical approach. These factors include the patient's social context, the experiential knowledge of patients and their families, and the capacity of mental health services to respond to often complex needs of their patients. Integrating such factors encourages a holistic approach to patients' personal needs, and takes into account their potentialities beyond the illness. Such an approach underlines the existing need to de-psychiatrize recovery and promote the emancipation and empowerment of people affected by mental illnesses.

Among the most touching interventions was Dutch social scientist Wilma Boevink's panel on psychiatric care. As a schizophrenic patient herself, she shared her personal experience in dealing with psychiatric institutions. Expressing her deepest emotions and feelings, Ms. Boevink vividly described her long and complex journey towards recovery.

Ms. Antonella Cammarota, social worker and mother of a person with mental disorders, underlined how important it was for her to participate in family groups that were supported by an expert. Family members are key in the recovery process, but they too need to be supported along their long journey.



A very interesting and innovative panel was presented by British psychiatrist Ms. Joanna Moncrief, who promotes a more transparent, patient-centered approach to drugs. She reminded us that psychoactive drugs exert mind-altering effects in everyone, regardless of whether or not they have a psychiatric diagnosis. "Drugs cannot cure an illness because we do not actually know how the biological mechanism of the illness works", she said, which leads to the concept that a patient's reaction to psychoactive drugs should dictate doctors' decisions, making overall treatment of mental disorders less prescriptive and more collaborative. (More on [her website](#))

The agenda also included the presentation of the first results of the "Research on the quality of mental health services provided in the Rome Metropolitan Area" carried out by Professor Frisanco. The final results will be shared in a public event that will take place in the upcoming months.

In her opening speech, Fondation d'Harcourt's Managing Director Gaia Montauti d'Harcourt recalled something Patricia E. Degan, a psychologist who was affected by mental illness, said: "The goal of recovery is to become the unique, awesome, never-to-be-repeated human being that we were called to be". This should always lie at the heart of our efforts.

We thank our partner Fondazione di Liegro for their extraordinary fight to promote recovery and we will continue working together to ensure the wellbeing of people with mental illness!

## mhGAP forum: mental health capacity building within countries- 9-10th October 2017

More than 200 professionals, experts, government and civil society representatives from around the world gathered in Geneva to take part in the mhGAP forum, WHO's annual partnership event on mental health. This year, the forum's theme was mental health capacity building within countries as part of the implementation of the WHO Mental Action Plan 2013-2020.

The plenary session marked the launch of the mhGAP IG 2.0 Mobile App. mhGAP is a tool designed for non-specialized health care providers to manage mental, neurological and substance use disorders such as depression which has been used to scale up mental health services in over 90 countries worldwide.

e-mhGAP was born out of the ever-increasing access to internet and the need to innovate the decision support system and further spread the implementation of mhGAP strategies by making them more accessible.

At Fondation d'Harcourt we strongly believe in the importance of scaling up mental health services, which is why we collaborated with the WHO in the implementation of the mhGAP pilot in Ethiopia from 2010 to 2013. mhGAP enables a comprehensive response, especially in places where there is a weak peripheral care system and a lack of resources.

To document the effectiveness of such a program, Julian Eaton, CBM Global Mental Health Advisor and Rabih El Chammay, Ministry of Public Health Lebanon, shared their experiences on the implementation of mhGAP in poor and middle-income countries.

The Forum was also an occasion to talk about the different work that is being carried out by WHO's mental health department. Mark Van Ommeren introduced some of the self-help interventions promoted by WHO and its partners. Self-help interventions are a valid resource due to the great need for innovative and low cost-solutions. They also represent the first step within a stepped care approach and have been proven to be highly effective, especially when guided.

One of those intervention is Step-by-Step intervention : a pilot that Fondation d'Harcourt is supporting in Lebanon. We were excited to see that the project we have been part of is taking shape and is reaching its objectives.

In a different panel, Michelle Funk (WHO), gave an insightful presentation of the QualityRights training and guidance tools. WHO QualityRights' purpose is to improve the quality and human rights conditions in mental health and social care facilities and empower organization to advocate for the rights of people with mental and psychosocial disabilities. At the beginning of 2017, 15 key training and guidance materials were published to help build capacity among stakeholders and change attitudes and practices in services and communities. Fondation d'Harcourt participated in the

testing of an e-version of said training. We encourage everyone interested in changing the way we see people with mental illness to take part in this global initiative.

A side event was specifically organized to celebrate World Mental Health Day, this year dedicated to mental health in the workplace. Creating and keeping a healthy workplace environment is essential for the health, safety and well-being of all employees. The Bank of England presented a touching video to reduce the stigma surrounding mental health.

We are pleased to have attended this inspiring forum where we met truly committed organizations and individuals that are willing to work hard to make a difference in mental health and we look forward to next year's mhGAP forum.





## On Philanthropy

2017 UBS Global Philanthropy Forum (7-10 December 2017)

Gaia was invited to attend the annual UBS global philanthropy forum held in St. Moritz at the end of 2017. An array of speakers ranging from Sir Richard Branson and Graça Machel Mandela to Clive Calder, Staffan de Mistura and Jacqueline Novogratz shared their personal experiences of exploring new pathways to impact. Gaia had the opportunity to participate in several interesting sessions, specifically on partnership and impact, whose content may prove strategic for the management of the Foundation.

The “Harnessing the power of partnership” session highlighted that the need to enhance partnerships with people that share the

same vision is vital for achieving sustainable, scalable social change. Evidence should guide every partnership and an evaluation should be carried out to understand if the impact is worth the investment.

The “Effective social impact measurement” session stressed the importance of the role of philanthropists in supporting NGOs to achieve their impact. Indeed, allocating resources to measure a project’s impact and discover what works best in a given context is an invaluable tool for the partner. New technologies are unlocking pathways to gather high-quality impact data quickly and inexpensively so as to make impact measurement easier and more efficient.

“The moral imperative for mental health and sustainable development is to leave no one behind by simultaneously acting on the early life social determinants of poor mental health and implementing evidence-based community-delivered interventions for mental disorders”.

**Professor Vikram Patel**

Harvard University



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Pag. 41 @ Luigi Baldelli/AVSI

Income and expenditures/financial data

Fondation d’Harcourt makes substantial grants every year from its endowment funds and donations. A total of 12 long-term partnerships are currently active with multi-year contracts. All operational costs are covered by the foundation’s endowment.

Board members

President: Fabio Montauti d’Harcourt  
Vice-President: Yves Chevrier  
Members: Claude Fayolle, Luca Tenchio, Thea Montauti d’Harcourt

Management Team

Managing Director: Gaia Montauti d’Harcourt  
Partnership Officer: Sara Pedersini

Financial audit

Brunner et Associates SA - Société Fiduciaire Geneva, Switzerland

Annual Report 2017

This Annual Report was prepared by Gaia Montauti d’Harcourt and Sara Pedersini.  
Edited and designed by [www.blossom.it](http://www.blossom.it)

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