Fondation d'Harcourt

Annual Report 2024

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Message from Managing Director

Dear Partners and Friends,

This past year has been both intense and transformative for our foundation as several projects reached their conclusion and long-standing partnerships came to a close. These relationships extended well beyond project goals: they were grounded in trust, shared learning, and a deep sense of common purpose.

This report seeks to present not only the outcomes achieved together, but also the lessons learned, insights gained and lived experiences that have informed our journey throughout the year. One of the clearest insights has been the value of bringing services closer to communities. Proximity improves access and ensures support reaches those who need it most. Yet access alone is not enough. Meaningful community engagement — built on trust, participation and dialogue — is essential to ensuring that programmes are accepted, relevant and sustainable. It also plays a powerful role in reducing stigma.

We've also seen the importance of flexibility and locally-driven solutions. Programmes that adapt to the realities of each context are more responsive and resilient. At the systems level, embedding mental health services into national frameworks strengthens long-term sustainability and opens the door to scale. In many cases, public–private partnerships have helped extend reach and support broader impact.

But systems only function if there are people at the helm. And those on the front lines — the providers, practitioners and community workers — carry the emotional and psychological weight of care. Supporting them is not optional; it's essential. Through reflective supervision, continuous training, peer support and flexible working structures, we've seen how investing in the well-being of mental health providers not only protects their own health but also enhances the quality and durability of care they provide.

At the same time, peer support continues to stand out as a powerful driver of healing. When individuals with shared experiences connect — whether parents, youth, or community members — they create spaces of trust, empathy and mutual strength. These relationships foster emotional resilience, reduce isolation, and offer a type of solidarity that professional services alone cannot replicate.

In close connection with this, families and caregivers often represent the first and most constant source of support. Yet they remain underrecognized in many programme designs. When caregivers are empowered — through information, emotional support, and genuine participation in care decisions — outcomes improve, not just for individuals, but for entire households. Strengthening families builds a stronger mental health ecosystem.

In 2024, we also deepened our appreciation for collaborative, cross-sector care. Mental health does not exist in a vacuum — it intersects with education, housing, employment, physical health and social justice. Interdisciplinary teams help bridge these connections, offering holistic support that reflects the complexity of real lives. They also reduce fragmentation and promote more seamless, coordinated care.

At the heart of our work lies a conviction that continues to guide us: the importance of putting people with lived experience at the centre. Their voices bring essential knowledge that no dataset can capture, revealing how systems work, where they fall short, and how they can evolve. When individuals with lived experience are actively involved in shaping and leading programmes, mental health care becomes more inclusive, more grounded, and ultimately, more effective.

In parallel to these learnings, we also completed a significant internal process: the finalisation of the foundation's new strategy. Though the journey took more time than expected, it led to a meaningful first step — the formal creation of our Advisory Committee. This group of trusted lived-experience leaders, practitioners and advocates will help guide and challenge us as we enter a new phase of work.

We are proud of what has been accomplished and deeply grateful to those who made it possible. We dedicate this annual report to the remarkable work of these partners, whose commitment, compassion and vision have shaped communities and improved countless lives.

As we look ahead, we're excited to build new partnerships aligned with our renewed vision and to continue walking alongside all those who share our mission: to make mental health care more accessible, equitable, and rooted in real community needs.

With gratitude,

Gaia Montauti d'Harcourt
Managing Director

Who We Are

Fondation d'Harcourt is a private non-profit Swiss foundation established upon the initiative of the d'Harcourt family. We promote national and international initiatives and partnerships in the fields of mental health and psychosocial support. Our actions stem from the belief that primary needs are not only material. Addressing persons' intangible needs is also essential to their well-being and dignity.

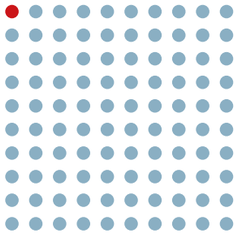
Mission

Our mission is to improve the lives of people living with a mental health condition and provide support to 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.

Why mental health matters

1 IN 8
people live with a mental health condition

Every year, close to
3 MILLION PEOPLE
die due to substance abuse



SUICIDE ACCOUNTS FOR 1 IN 100 DEATHS GLOBALLY

In low-income countries, more than
75%

OF PEOPLE WITH DISORDERS DO NOT RECEIVE TREATMENT

5 TO 1
benefit-to-cost ratio for scaling up treatment for depression and anxiety

People with severe mental health conditions
DIE ON AVERAGE 10 TO 20 YEARS EARLIER
than the general population

Approximately
50%

OF MENTAL HEALTH DISORDERS START BY THE AGE OF 14

Approach

At Fondation d'Harcourt, we believe our mission can be achieved in partnership with organizations that provide direct services through the following axis of intervention:

PROMOTING THE PSYCHOSOCIAL WELLBEING OF VULNERABLE GROUPS

- By raising understanding about mental health issues
- By establishing and strengthening self-help and peer groups
- By facilitating education and vocational training
- By promoting psychosocial rehabilitation through interventions that facilitate social inclusion

ENSURING ACCESS TO MENTAL HEALTH CARE

- By supporting mental health facilities and community-based services
- By training primary mental health care staff, specialists, and non-specialist providers
- Through community outreach programs
- Through better referral systems

EMPOWERING PEOPLE LIVING WITH A MENTAL HEALTH CONDITION AND THEIR FAMILIES

- By raising awareness and understanding about mental health issues
- Through targeted/specific psycho-social interventions for vulnerable groups across the lifespan
- Through individual support by qualified psychologists and social workers
- By promoting psycho-social and sensitization activities for individuals, families, and communities

11
PARTNERS

59
STAKEHOLDERS

7
COUNTRIES

FdH recognises the value and need for collaboration with other stakeholders in the mental health and philanthropic ecosystem and partners with the following networks:

MENTAL HEALTH INNOVATION NETWORK
www.mhinnovation.net

GLOBAL MENTAL HEALTH ACTION NETWORK
www.gmhan.org

GIVING WOMEN
www.givingwomen.ch

Our Advisory Committee

OUR ADVISORY COMMITTEE

Transforming mental health care requires both strategic thinking and deep human understanding. Our Advisory Committee is a circle of thinkers, doers and changemakers who walk alongside us as we work to build a mental health ecosystem that is community-rooted, accessible, compassionate, and grounded in the realities of those we serve. They bring extensive lived experience, advocacy, clinical practice and research in the mental health space, plus a willingness to listen deeply, challenge respectfully, and help us see the bigger picture when the path becomes complex.

As advisors, their role is to question, support and guide — keeping us aligned with the heart of our mission: people. They help us stay transparent and accountable, grounding our work in ethical, inclusive and community-driven approaches

Through their insights, we strengthen the impact and relevance of the programmes we support, remain attentive to emerging needs and best practices in mental health, and continue to grow in ways that reflect and respond to the communities we serve.

We're deeply honored to have them by our side.

MEET OUR ADVISORY COMMITTEE:

AVES

Aves Mental Health, is an **international organisation that builds capacity among people with lived experience of a mental health condition** through empowerment, peer-to-peer mentorship and peer support.
Formally known as the Global Mental Health Peer Network (GMHPN), Aves was founded by Charlene Sunkel, a person with lived experience of schizophrenia and a global voice for the rights of people with lived experience of mental health conditions.
Aves Mental Health was created to transform mental health care and service delivery globally, with a clear and compelling vision: to empower individuals with lived experience of mental health conditions. This vision is anchored in a mission to develop leadership among people with lived experience, to advocate for their integration in discussions and decision-making processes, and to engage them as colleagues in service delivery.
Established in 2018, Aves works globally, with a particular focus on low- and middle-income countries, guided by the principle that lived experience leadership and expertise are essential to building inclusive and effective mental health systems

NASRI OMAR

Nasri Omar is **Technical Advisor to the Cabinet Secretary for Health in Kenya,** where she provides high-level technical guidance on national health policy and strategy, and supports the Ministry's leadership across a range of public health priorities. Previously, as the Ministry's focal point for Mental Wellness and Suicide Prevention, she played a pivotal role in the Kenya Mental Health Investment Case – a national project co-led with the WHO-UNDP Joint Programme – enabling the design and implementation of coordinated, evidence-based, and cost-effective mental health interventions. Nasri is advancing her expertise as a Kofi Annan Global Health Leadership Fellow focusing on mapping Kenya's mental health stakeholders to strengthen sector-wide collaboration and coordination. Nasri serves as a member of the Africa CDC Advisory Committee on NCDs, Injuries, and Mental Health, and as an advisory board member for the Centre for Global Mental Health at the London School of Hygiene & Tropical Medicine and King's College London. She holds a Bachelor of Pharmacy and a Master of Science in Global Mental Health.

ERICA BREUER

Dr. Erica Breuer is a **global health researcher** working at the intersection of participatory theory of change development, co-design, evaluation of complex interventions, health services research and implementation science. Her expertise is particularly focused on advancing mental health services in low-resource settings

Erica collaborates with a diverse range of stakeholders, including people with lived experience, to explore how interventions, programs and policies can be designed and implemented to create meaningful impact across health and social care issues globally. She has led key work packages within multiple research projects and offers consultancy and training to universities, NGOs, government agencies and international organizations.

Erica is a Senior Researcher at the Heidelberg Institute for Global Health and an Honorary Lecturer in the School of Medicine and Public Health at the University of Newcastle, Australia. She holds a PhD, a Master of Public Health (Epidemiology) and a Bachelor of Applied Science in Physiotherapy (with Honours).

OUR ADVISORY COMMITTEE

CLAUDIA MARINETTI

Claudia Marinetti **supports philanthropic organisations in investing for positive social change,** drawing on extensive expertise in the areas of equity and well-being and its social determinants. With over 20 years of experience in management, policy, advocacy and research, Claudia has worked across sectors to improve communities including approaches based on human rights, access to quality services, HiAP, and social inclusion.
Prior to being Director at Mental Health Europe (2018–2025), she held senior roles in European public health networks and research institutions, focusing on health promotion, policy translation, and international cooperation. She has collaborated with government agencies, NGOs, and academic bodies to develop evidence-informed strategies that foster population well-being. Claudia is a graduate of the University of Padua (Italy) and holds a PhD in Social and Applied Psychology from the University of Oxford (UK).

JULIAN EATON

Julian Eaton is a **public health psychiatrist and professor in Global Mental Health at the Liverpool School of Tropical Medicine.** His research focuses on strengthening mental health care in low-resource settings and understanding the intersection of mental health with climate change and Neglected Tropical Diseases.

Julian has contributed to key global mental health guidelines for the World Health Organization, including mhGAP and QualityRights. He is a long-standing representative on the Inter-Agency Standing Committee (IASC) and works on mental health and psychosocial support (MHPSS) in preparedness and response to humanitarian emergencies. As the lead for MHPSS in the UK Public Health Rapid Support Team, Julian provides critical expertise in outbreak response and emergency preparedness.

From 2003 to 2017, Julian lived and worked in West Africa, where he focused on mental health system strengthening, stigma reduction and addressing human rights abuses.

2014-2024

Paths to Recovery: Empowering People, Families and Communities

FONDAZIONE INTERNAZIONALE DON LUIGI DI LIEGRO onlus

People living with mental health conditions often face stigma, silence and a lack of support that deepens isolation and slows recovery. Families, too, are left struggling to navigate complex systems and carry the burden alone.

With recovery at its centre, our partner Fondazione di Liegro worked to build a network of care where individuals, families and communities move forward together. Training and awareness initiatives, combined with the commitment of volunteers, were central to this effort. Acting as trusted links between health services and everyday life, volunteers helped break down stigma and made support more accessible.

Alongside this, people living with mental health conditions supported by public health services were invited to art therapy workshops, such as theatre, music, photography and writing, which offered safe spaces for expression, confidence, social connection and belonging.

Families joined peer-led self-help groups, sharing both their struggles – such as delays in getting help, lack of meaningful activities, and support that felt disconnected from their real needs – and their hopes for more inclusive, personalised support. The Orientation and Social Support Service (SOSS) also guided families and individuals through complex care systems and supported health workers to shape rehabilitation paths.

This collaborative spirit was also highlighted in a public–private partnership event, which showed how recovery can be sustained when public health services, civil society and community volunteers act together.

2024 PROJECT HIGHLIGHTS

500
PEOPLE RECEIVED ORIENTATION on mental health services

15 operators completed training in SOSS methods

200
HEALTH WORKERS STRENGTHENED THEIR CAPACITY IN MENTAL HEALTH CARE

146 PARTICIPANTS ATTENDED MENTAL HEALTH TRAINING

80
family members engaged in self-help groups for peer support

170
INDIVIDUALS took part in art therapy workshops

47 volunteers actively supported workshop delivery

WHAT WE LEARNED

- ☑ Community engagement is critical to reducing stigma.
- ☑ Empowering families and caregivers as part of the care model enhances both recovery and community wellbeing.
- ☑ Art therapy and social skills development are proven elements of recovery.
- ☑ Sustainable impact requires strong public–private partnerships.

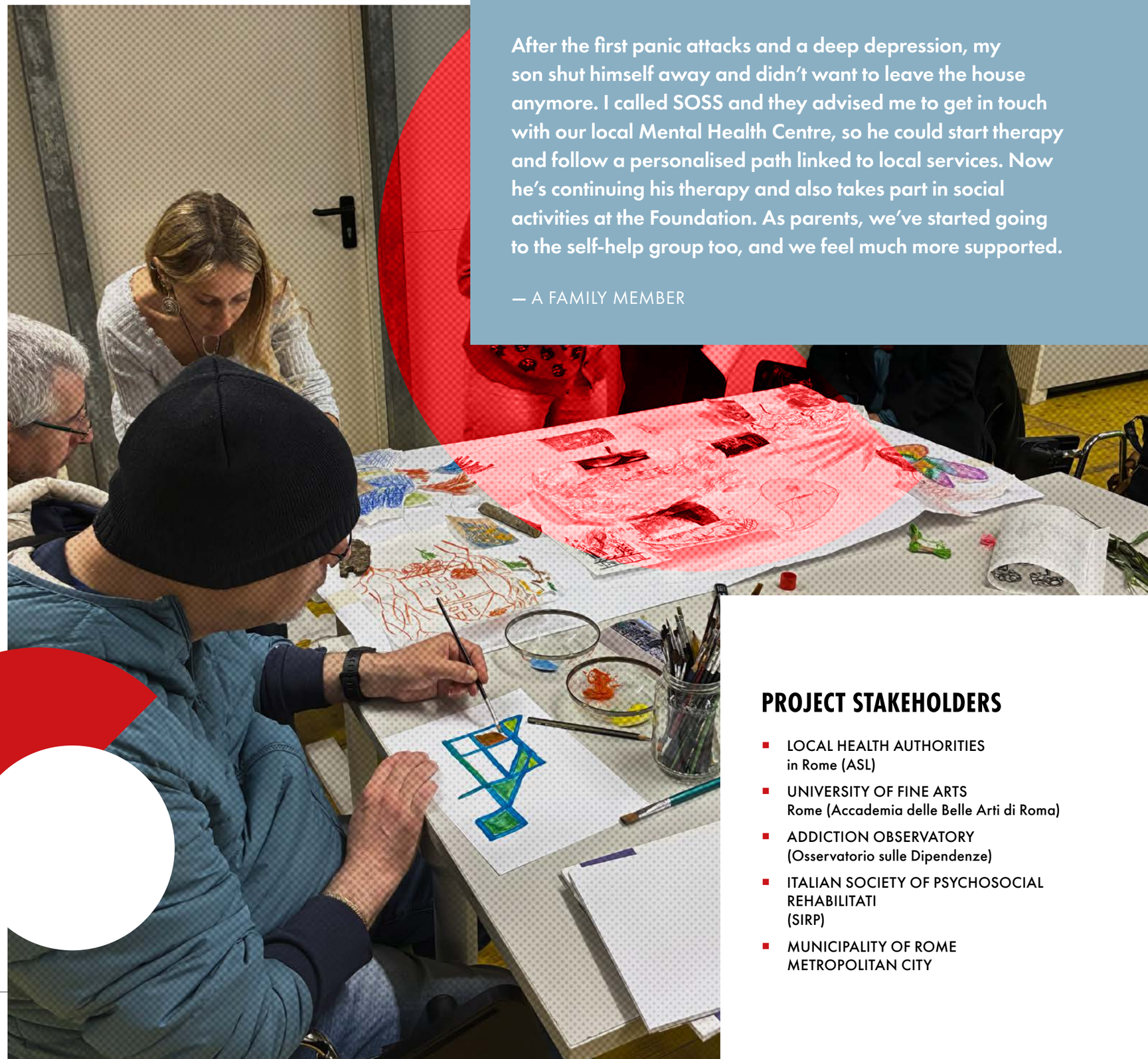
STORY

THE HEALING POWER OF SELF-EXPRESSION AND CONNECTION

Giulia first discovered the Fondazione di Liegro through her mother, who still attends the family support group. She recalls joining two art therapy workshops — creative painting and narrative writing — that, even with her irregular attendance, became a turning point. At a time when she struggled to define her identity and connect with others, the sessions gave shape to feelings of anxiety and panic she had not yet understood. What mattered most, she says, was the genuine support of volunteers and psychologists, and the chance to interact with others in a space where she felt truly seen.

At 24, Giulia experienced what she calls a "collapse." Once describing herself as a "winner," with friends, possessions, alcohol and tattoos to show for it, she suddenly felt like "an ocean that could never be poured into tiny glasses." She lost confidence, stability and trust in herself until, one day, she broke down in her car and sought help from a psychotherapist and a psychiatrist, who she says helped to "smooth the edges of her soul." The workshops complemented this professional care, giving her a safe place to share difficult experiences without fear of judgement and reinforcing her belief that acceptance and awareness grow through connection, not isolation.

Now interning at a museum, Giulia still considers herself in recovery. The workshops taught her that mind and body are inseparable, and that healing requires recognition, expression and courage. Her message to others facing acute struggles is that healing is possible when pain is expressed rather than hidden. Whether through art, words, or other forms of creativity, telling one's story opens the door to connection and resilience. *"Our lives," she says, "are always just ahead of us, slightly out of reach, but we can choose to look at them and keep moving."*



After the first panic attacks and a deep depression, my son shut himself away and didn't want to leave the house anymore. I called SOSS and they advised me to get in touch with our local Mental Health Centre, so he could start therapy and follow a personalised path linked to local services. Now he's continuing his therapy and also takes part in social activities at the Foundation. As parents, we've started going to the self-help group too, and we feel much more supported.

— A FAMILY MEMBER

PROJECT STAKEHOLDERS

- LOCAL HEALTH AUTHORITIES in Rome (ASL)
- UNIVERSITY OF FINE ARTS Rome (Accademia delle Belle Arti di Roma)
- ADDICTION OBSERVATORY (Osservatorio sulle Dipendenze)
- ITALIAN SOCIETY OF PSYCHOSOCIAL REHABILITATI (SIRP)
- MUNICIPALITY OF ROME METROPOLITAN CITY

2017-2024

Advancing Mental Health Care in the Great Lakes Region

Across the African Great Lakes Region, people living with mental health conditions often face limited access to care and a shortage of trained professionals. This project, implemented by our partner Fracarita Belgium, works with five regional psychiatric hospitals (Rwanda, Burundi, RDC and Tanzania), to strengthen systems, equip staff with new skills, and improve the quality of care for thousands of people.

Through a train-the-trainer model, five regional coaches and their assistants received tailored, hands-on training from national and international experts, preparing them to become leaders within their hospitals. They then mentored colleagues directly on the wards through case discussions, bedside demonstrations and regular supervision. This practical, peer-to-peer approach created an environment where professional growth and mutual support could flourish. Nurses who once worked in isolation gained guidance, encouragement and visible role models to learn from and emulate.

The project also built a regional network of collaboration. Each year, professionals from psychiatry, nursing, psychology and social work came together for intensive seminars, sharing knowledge across disciplines and borders. These gatherings not only deepened clinical, ethical and psychosocial expertise but also fostered solidarity among institutions facing similar challenges. By linking local coaching with regional exchange, the project helped create a culture of accountability, compassion and continuous improvement—laying the groundwork for stronger, more sustainable mental health systems across the region.

FRACARITA BELGIUM

2017-2024 PROJECT HIGHLIGHTS

5 HOSPITALS/HEALTH centres engaged

967 PSYCHIATRIC NURSES TRAINED AND SUPERVISED

5 COACHES AND 20 ASSISTANT COACHES TRAINED AND SUPERVISED

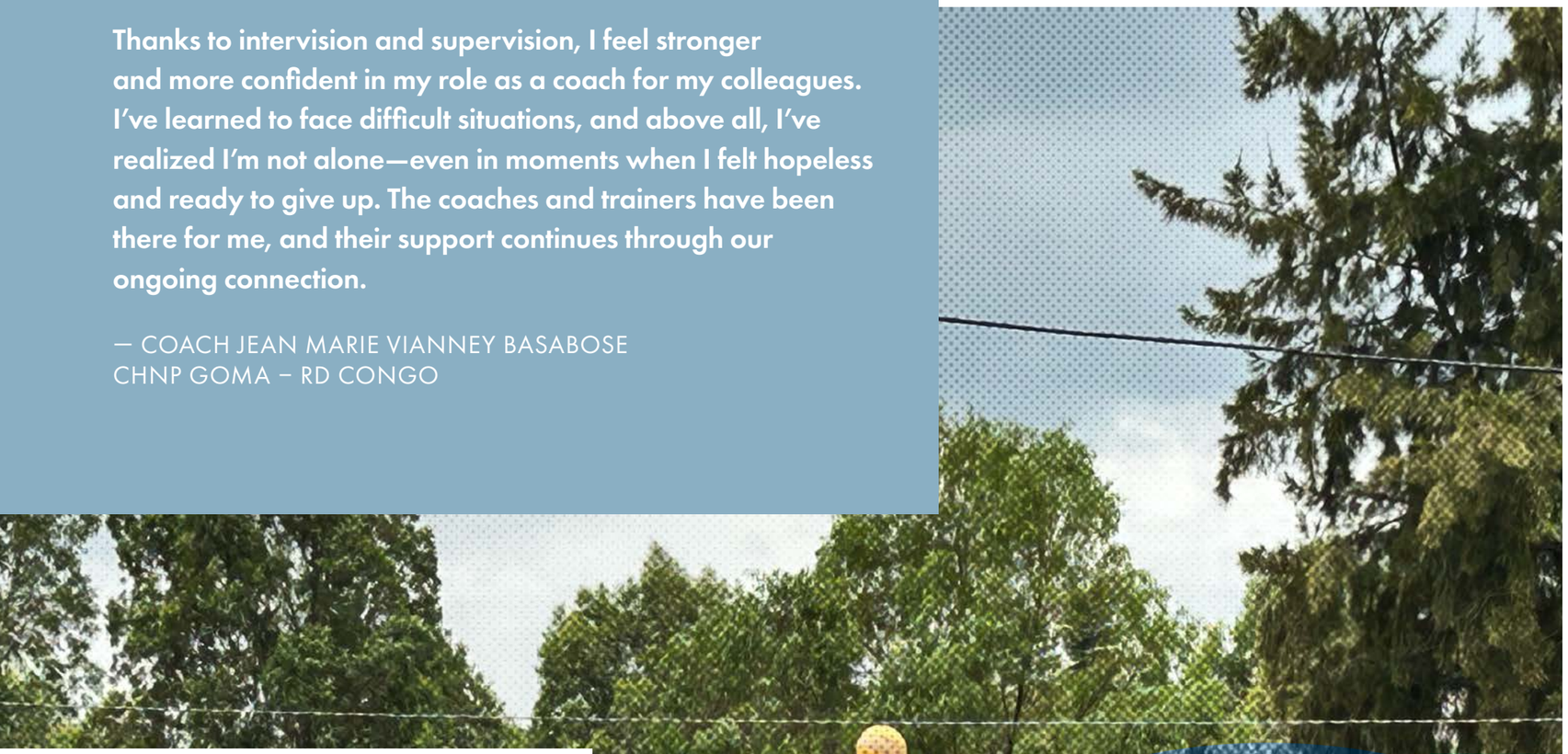
186,834 PEOPLE TREATED

WHAT WE LEARNED

- ☑ Lead nurses improve coordination and foster leadership within care teams.
- ☑ Ongoing training and hands-on coaching build staff skills and confidence.
- ☑ Peer support boosts motivation and keeps staff engaged.
- ☑ Collaboration across regions helps good practices spread more widely.

Thanks to intervision and supervision, I feel stronger and more confident in my role as a coach for my colleagues. I've learned to face difficult situations, and above all, I've realized I'm not alone—even in moments when I felt hopeless and ready to give up. The coaches and trainers have been there for me, and their support continues through our ongoing connection.

— COACH JEAN MARIE VIANNEY BASABOSE
CHNP GOMA – RD CONGO



PROJECT STAKEHOLDERS

- NDERA NEURO-PSYCHIATRIC TEACHING HOSPITAL
  + branches in Rwanda
- CENTRE NEURO-PSYCHIATRIQUE DE KAMENGE
  + Antennes in Burundi
- KASAKA MENTAL HEALTH CENTRE
  + branch in Tanzania
- CENTRE PSYCHIATRIQUE SOINS SANTÉ MENTALE
  Buvaku + branch in DRC
- CENTRE HOSPITALIER NEUROPSYCHIATRIQUE
  de Goma in DRC

Coaching is performance driven; its purposes are to improve the individual's performance on the job by enhancing skills and acquiring new skills. This supervision visit was the time to clarify and to structure the system where it looks dormant, and we hope by this visit the service will be improved and the patients will receive quality service.

— COACH NTAKIYISUMBA EMMANUEL
HNP/ CARAES NDERA

2017-2024

Improving the well-being of children and adolescents

Fundația inocenți
Romanian Children's Relief

In Romania, mental health awareness and access to psychosocial support remain limited, particularly among children and adolescents. To address this gap, our partner organization Fundatia Inocenti implemented a multifaceted program that promoted mental health literacy, resilience and emotional well-being in both school and clinical settings.

In schools, Fundatia Inocenti delivered educational sessions on adolescence, anxiety, depression and coping strategies, equipping students with practical tools to manage emotional challenges. Special emphasis was placed on rural communities, where mental health services are often scarce. These school-based initiatives were supported by the School Inspectorate, ensuring institutional engagement and broad outreach.

Beyond the classroom, the programme extended its impact to families through online campaigns and public events. One notable initiative, *Body Image: An Empathetic Dialogue with Parents of Teenagers*, fostered open conversations about the pressures of social media, unrealistic beauty standards and the critical role of parental support in adolescent emotional development. Supporting materials for this event were developed and widely distributed in collaboration with the University of Psychology of Cluj, further reinforcing the program's educational foundation.

At the Pediatric Psychiatric Clinic, the focus shifted to strengthening emotional regulation and overall psychological well-being. Activities included identifying personal strengths, building trust, expressing needs and cultivating resilience. Children and caregivers also received individualised support when necessary, ensuring tailored interventions.

To enhance the programme's effectiveness, Fundatia Inocenti's staff received specialised training from Boston's Children Hospital in trauma intervention and suicide risk assessment. Additionally, psychology students were engaged as volunteers, participating directly in programme activities and receiving mentorship as they developed into emerging mental health advocates.

2024 HIGHLIGHTS

580 STUDENTS AND **35 TEACHERS** PARTICIPATED IN THE MENTAL HEALTH LITERACY PROGRAMME

9,709 mental health material distributed in schools and online

325 CHILDREN AND CAREGIVERS RECEIVED PSYCHOLOGICAL SUPPORT

30 PSYCHOLOGIST STUDENTS trained as volunteers and engaged in activities with children

WHAT WE LEARNED

- ☑ Mental health education in schools helps children and adolescents build emotional resilience and reduces stigma.
- ☑ Limited access to services in rural areas makes tailored, localised interventions essential for equitable mental health support.
- ☑ Engaging parents in open dialogue strengthens communication and fosters a more supportive home environment.
- ☑ Mentoring psychology students and involving them in programme delivery builds long-term capacity and strengthens the mental health workforce.

In the ward, the team creates a warm and caring space where children and teens feel safe, supported and listened to. They help them build essential life skills and encourage friendships, confidence and empathy among children who are hospitalized.

— DR. MARA DIS, RESIDENT DOCTOR, PEDIATRIC PSYCHIATRY AND ADDICTION CLINIC (CLUJ-NAPOCA)

PROJECT STAKEHOLDERS

- PEDIATRIC PSYCHIATRY AND ADDICTION CLINICS in Cluj-Napoca
- FACULTY OF PSYCHOLOGY AND EDUCATIONAL SCIENCES Babeș-Bolyai University, Cluj-Napoca
- ROMULUS LADEA Visual Arts High School
- CLUJ COUNTY SCHOOL INSPECTORATE And partner schools
- BOSTON CHILDREN'S HOSPITAL in the United States of America

One of our most inspiring success stories is a former student who first joined our Mental Health Programme in high school. Her experience with the programme motivated her to pursue a degree in psychology. Today, she's one of our most committed volunteers—a powerful example of how early support can plant the seeds for lifelong impact.

— FUNDATIA STAFF

2016-2024

E-mental health intervention for depression

STEP-BY-STEP

World Health Organization

Mental health challenges in Lebanon such as stigma, high costs and workforce shortages, have strained access to quality mental health care for both host and refugee communities. In response, our partners the World Health Organization (WHO) and the Lebanon National Mental Health Programme, launched Step-by-Step (SBS), a digital self-help programme designed to reduce depression symptoms.

SBS is a five-week, smartphone- or web-based intervention that offers behavioural activation, psychoeducation, stress management and relapse prevention, with optional weekly guidance from trained non-specialists called e-helpers. After demonstrating effectiveness and cost-efficiency in clinical trials, SBS was rolled out nationwide in April 2021 by Lebanon's National Mental Health Programme (NMHP), with support from various donors, including the World Bank through the IRC.

Twenty-three e-helpers supported users through phone calls or messages, and outreach activities – including social media, TV interviews and visits to 15 municipalities – helped raise awareness. Challenges such as an economic crisis, political instability, the COVID-19 pandemic, Beirut Port explosion, ongoing regional conflict and a cyberattack in 2024, impacted operations, but the team adapted by shifting to remote support and updating procedures to maintain service delivery and staff well-being. The Step-by-Step model is now being introduced in other countries, showing how a locally tested, digital approach can be scaled and tailored to improve mental health in diverse settings.

NMHP received the 2023 UN Interagency Task Force Award for digital health in non-communicable diseases, recognizing the work done on Step-by-Step, from research to scale-up.

2017-2024 PROJECT HIGHLIGHTS

DEVELOPMENT, LAUNCH AND SCALE UP OF AN IMPROVED DIGITAL PLATFORM ADAPTED FOR LEBANON.

23 E-HELPERS AND 40 INTERNS
trained, strengthening local digital mental health capacity.

OVER 4,800 USERS SUPPORTED

80+ **AWARENESS AND DISSEMINATION ACTIVITIES**

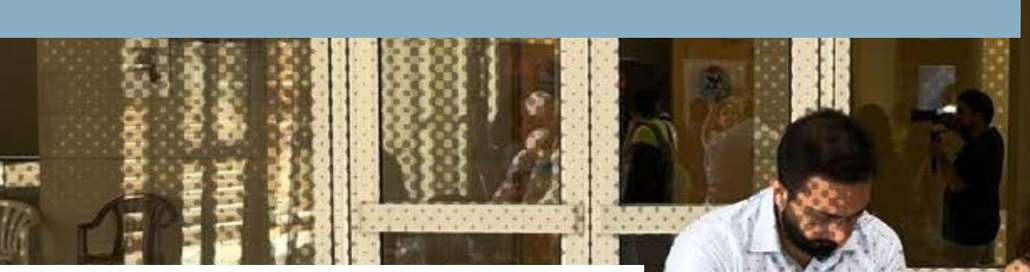
Active involvement of 60+ PEOPLE
with lived experience in programme development.

20.9%
OF PARTICIPANTS EXPERIENCED COMPLETE REMISSION

44.8% OF PARTICIPANTS REPORTED MORE THAN 50% REDUCTION IN DEPRESSION

WHAT WE LEARNED

- ☑ Early community engagement is critical for ensuring programme acceptance, relevance and resilience.
- ☑ A committed, skilled local coordination team is key to navigating complex and rapidly changing contexts.
- ☑ Digital tools expand access but require high literacy rates, widespread smartphone use, reliable infrastructure, community outreach and trained staff to ensure effectiveness.
- ☑ Embedding the program within the National Mental Health Programme strengthens sustainability and scalability.
- ☑ Persistent socio-economic and political instability underscore the need for flexibility, adaptability and strong coordination.



> I liked how I was able to choose a story in Step-by-Step. I liked how it made me understand that I am not alone in my struggles, a lot of people might be going through what I am, through the same struggles and experiences. What I also liked were the audio exercises provided by the doctor character like the grounding and breathing exercises, they were very well guided. I really felt throughout the sessions and exercises like I was sitting face to face with a therapist, even though it is an online self-help intervention.
>
> — FEMALE SBS PARTICIPANT

PROJECT STAKEHOLDERS

Implementation organizations:

- NATIONAL MENTAL HEALTH PROGRAMME
  Ministry of Public Health, Lebanon
- EMBRACE

Research organizations:

- VU UNIVERSITY AMSTERDAM
  the Netherlands
- ST JOSEPH'S UNIVERSITY
  Beirut, Lebanon (local Ethics Review Board)
- FREIE UNIVERSITÄT BERLIN

> Before Step-by-Step, I was a silhouette of a body lying on a chair all day, drinking coffee and smoking nicotine while pushing everyone out. The small activities in Step-by-Step were the key in helping me to get out of the situation I was in, even in small things like doing the dishes... My life after Step-by-Step has completely changed, I am more active and sociable, and I am achieving more in my life. I started the program with no desire in life, now I say that I deserve life.
>
> — SBS PARTICIPANT

2018 - 2024

Mental Health Trauma Rehabilitation in Uganda

The CENTER for VICTIMS of TORTURE

For seven years, our partner, the Center for Victims of Torture, responded to the needs of conflict-affected communities in Northern Uganda, delivering trauma-informed care to survivors of abduction, sexual violence, and displacement, and building local capacity to provide adequate services.

CVT's qualified team met people where they were, extending care into underserved districts through community sensitisations, screenings and counseling in local settings. Sessions combined somatic techniques, shared processing of pain, and a strong focus on family and intergenerational healing, for example, working with youth born in captivity and their mothers to challenge stigma and break cycles of trauma. Therapeutic Documentation, which focuses on storytelling and creative expression, was piloted to support healing, advocacy and justice. This approach fostered acceptance and reintegration, with some former participants becoming facilitators and advocates themselves.

The project also invested in building a skilled workforce. Counselors and staff received training and supervision, and partnerships with Makerere University helped embed trauma-informed care into an academic and clinical programme. Many graduates of this effort now lead NGO and government services or have become mental health educators, ensuring that knowledge and practices are carried forward.

Behind every story of transformation, new skills and leadership lies the dedication of CVT, the trust of the communities we serve, and the support of many committed partners working alongside us.

THE CENTER FOR VICTIMS OF TORTURE

2024 PROJECT HIGHLIGHTS

547
people gained awareness on trauma, human rights and mental health services

182
individuals received intensive counselling

213
MENTAL HEALTH SCREENINGS CONDUCTED

PSYCHOSOCIAL COUNSELORS RECEIVED AN AVERAGE OF 9.4 HOURS OF CLINICAL SUPERVISION PER MONTH

99.6%
OF BENEFICIARIES REPORTED BEING SATISFIED OR VERY SATISFIED WITH THE SERVICES

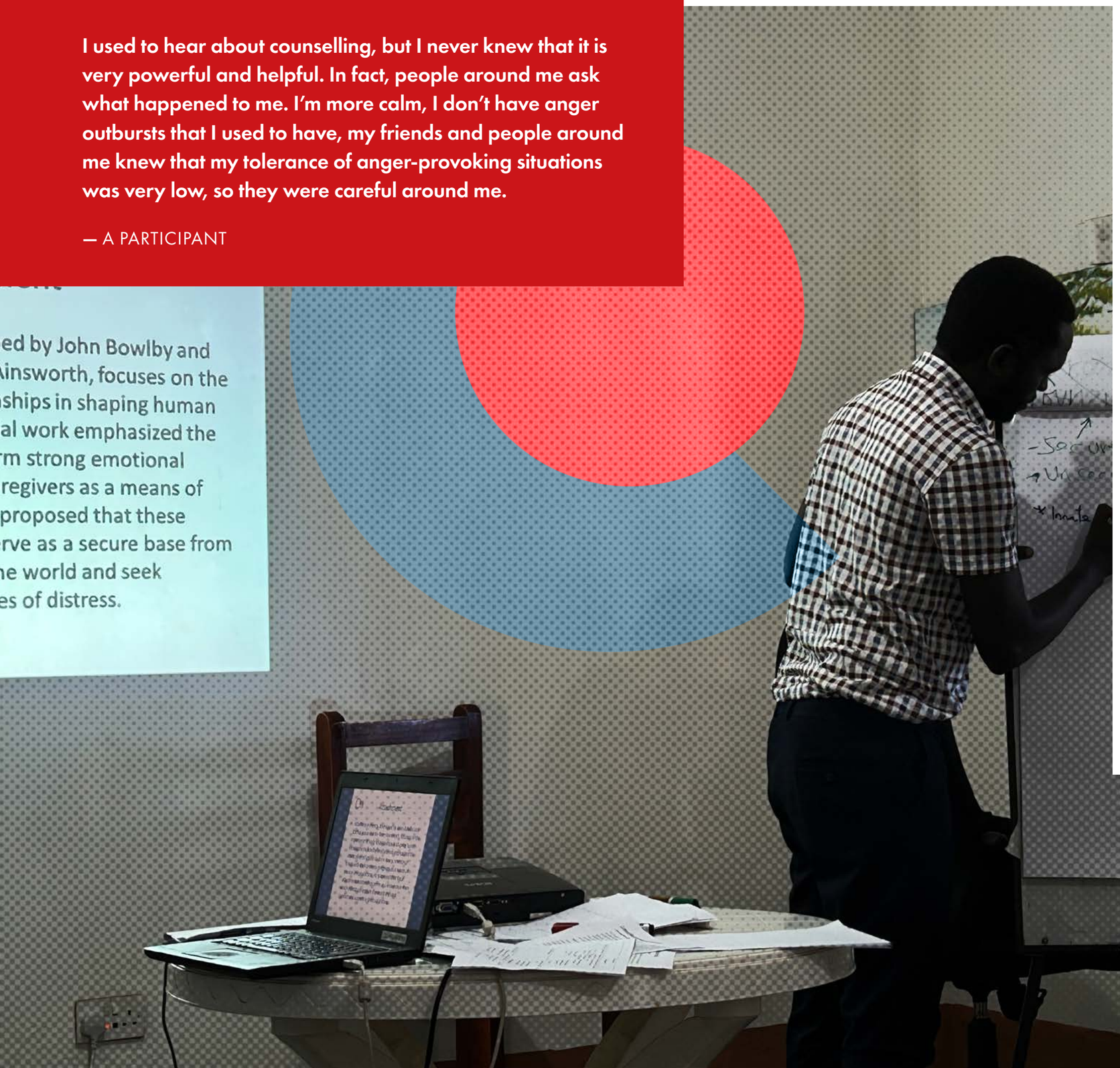
6 STAFF TRAINING
sessions delivered

WHAT WE LEARNED

- ☑ Locally based, accessible and free services ensure that people can receive timely care close to home.
- ☑ Bringing together psychological, social, health, and legal services through partnerships with local institutions creates a trusted and sustainable support system.
- ☑ Ongoing training and supervision improve care quality while building local expertise and leadership in mental health.
- ☑ Documenting survivors' experiences and giving them a voice supports individual healing and strengthens collective advocacy.
- ☑ Community needs evolve and require structural flexibility, from trauma response to the building of networks for justice and coexistence.

I used to hear about counselling, but I never knew that it is very powerful and helpful. In fact, people around me ask what happened to me. I'm more calm, I don't have anger outbursts that I used to have, my friends and people around me knew that my tolerance of anger-provoking situations was very low, so they were careful around me.

— A PARTICIPANT



STORY

ODONG'S JOURNEY: HEALING FROM THE TRAUMA OF WAR

Odong, a former combatant in the Lord's Resistance Army (LRA) conflict in northern Uganda, lived for years in the shadow of war. He woke in terror from nightmares – vivid, recurring memories of the violence he witnessed and endured. Flashbacks would strike without warning, pulling him back into traumatic moments. These experiences left Odong emotionally exhausted, unable to sleep, work or connect with others. Living in a small community, he felt isolated and trapped by a past he couldn't escape.

That began to change when Odong attended a community sensitisation event and was introduced to trauma counseling sessions offered by CVT. At first, he was hesitant. Talking about the past seemed too painful, and he doubted it would help. Over time, Odong became an active participant, gradually beginning to unpack the emotions and memories he had long suppressed.

Within weeks, Odong reported sleeping better. His flashbacks, once constant and debilitating, became less frequent and easier to manage. As his symptoms eased, Odong began to re-engage with life. He started a small business and rebuilt relationships in his community. Those around him noticed the change: he was calmer, more focused, and hopeful.

"I thought I would never escape my past," Odong reflected. "But these sessions helped me find peace. I'm no longer afraid of my memories. I can finally move forward."

Through CVT's intervention, Odong has not only regained control over his life but now serves as a source of encouragement for others seeking healing.

PROJECT STAKEHOLDERS

- LOCAL AND CENTRAL GOVERNMENT DEPARTMENTS
- CSOS

2020-2024

Supporting Parents in Perinatal Mental Health

FONDATION RECHERCHE PÉRINATALITÉ

The arrival of a baby is a joyful moment, but it can also bring doubts, exhaustion and a sense of isolation. Research shows the first weeks are crucial for a baby's development, with the quality of early interactions being the strongest predictor of healthy growth (Bayot, Murray). Yet, many families today face this transition without the social network that once surrounded new parents.

To respond to this need, our partner FREP, in collaboration with CAP Cocooning Association, has created a warm, free and open space in Geneva. Every week, parents and parents-to-be can drop in to meet other families and talk with professionals who understand the perinatal journey. Each session is hosted by a midwife and a child development specialist, whether a psychologist, child psychiatrist, psychomotor therapist or speech therapist, offering both medical and psychosocial support.

In this safe space, parents can voice their concerns, bond with their baby, and find reassurance in connecting with other families who share the same journey. Recently, more couples have started attending the sessions together, with parental leave giving fathers the chance to share these first steps and be present alongside mothers.

When parents feel confident and connected with their baby, family bonds grow stronger. These early moments of support also help protect against perinatal depression, a challenge which affects around 15% of mothers in Switzerland.

2020-2024 PROJECT HIGHLIGHTS

221
FAMILIES SUPPORTED

140
SUPPORT SESSIONS

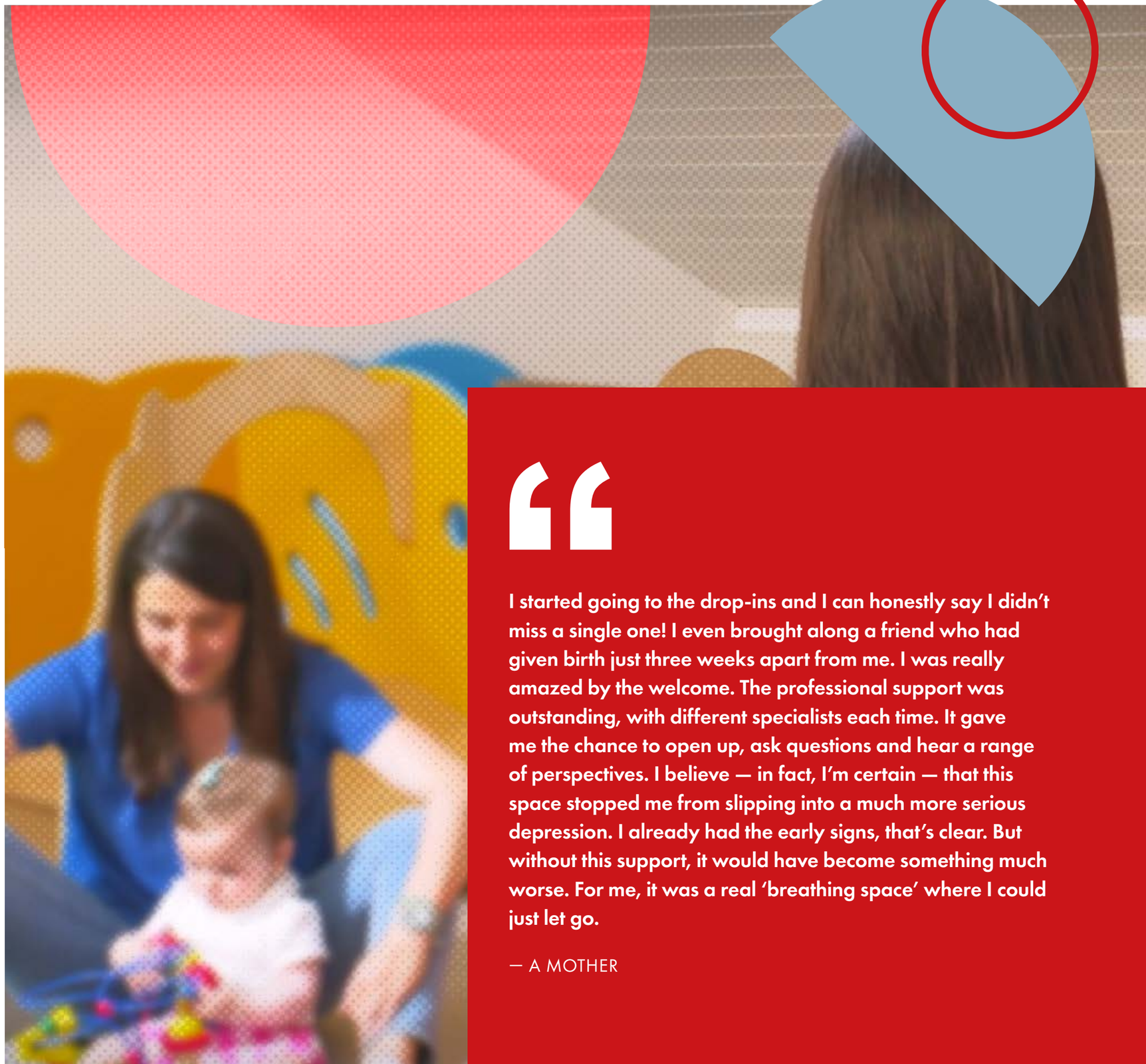
1 MULTI-DISCIPLINARY TEAM ACTIVATED

WHAT WE LEARNED

- ☑ Early, accessible support strengthens the parent–child bond and reduces the risk of perinatal depression.
- ☑ Free, drop-in spaces make it easier for parents to ask for help and reduce stigma around seeking support.
- ☑ Peer groups where parents share experiences prevent isolation and build confidence in early parenting.
- ☑ Interdisciplinary teams provide holistic guidance for families.

PROJECT STAKEHOLDERS

- CAP COCOONING



I started going to the drop-ins and I can honestly say I didn't miss a single one! I even brought along a friend who had given birth just three weeks apart from me. I was really amazed by the welcome. The professional support was outstanding, with different specialists each time. It gave me the chance to open up, ask questions and hear a range of perspectives. I believe — in fact, I'm certain — that this space stopped me from slipping into a much more serious depression. I already had the early signs, that's clear. But without this support, it would have become something much worse. For me, it was a real 'breathing space' where I could just let go.

— A MOTHER

2020-2024

Building Hope and Resilience through Community–Based Intervention

CARE

The CARE Project, implemented by our partner AVSI, has worked to strengthen the resilience of people living with mental health conditions and their families. Rooted in a community-based and recovery-oriented approach, it improved access to services, reduced stigma, and promoted inclusion, laying the groundwork for both individual recovery and stronger community systems.

Community volunteers, who were central to the project, received training and support through an innovative interactive voice response (IVR) system. By reaching people in their daily lives, they tackled stigma and raised awareness, increasing access to care in underserved areas. Their work was reinforced by healthcare providers in health centres equipped through the mhGAP programme to diagnose, treat and refer people with mental, neurological, and substance-use conditions. Together, they created a vital bridge between community and clinic, making care more accessible and sustainable.

People living with mental health conditions and their families also took part in support groups, socio-educational centres, occupational therapy and village savings and loan associations (VSLAs), which reinforced emotional wellbeing and built economic resilience. Many joined agricultural groups, which contributed to household needs while restoring a sense of dignity and belonging. These activities strengthened family and community solidarity, creating the supportive environment essential for long-term recovery and reintegration, with some participants later stepping forward as peer supporters.

The CARE project interventions were extended to Gatsibo, Ruhango, and Kamonyi districts with support from the EKFS Foundation.

2020-2024 PROJECT HIGHLIGHTS

24
AWARENESS CAMPAIGNS ORGANISED

49 HEALTH WORKERS
trained in mhgap-IG and psychosocial intervention

6,900 PEOPLE
with mental health conditions received support

1 COMMUNITY
volunteer handbook developed and distributed

600 COMMUNITY
volunteers trained in mental health care support and facilitation of psycho-educational groups

24
OCCUPATIONAL THERAPY GROUPS CREATED

48 FAMILY
members and people trained in village savings and loans association

WHAT WE LEARNED

- ☑ Community-led action reduces stigma and makes services easier to access.
- ☑ Involving people with lived experience creates a more humane and inclusive system.
- ☑ Support groups and activities build resilience and emotional balance.
- ☑ Income-generating opportunities restore autonomy, dignity and social reintegration.
- ☑ Collaboration across sectors is key to lasting change.

Previously, when someone had a mental health condition, families would hide them. But now, people turn to volunteers for help. Before, patients were often neglected and unkempt. Now, we see a visible change in their appearance, dignity, and integration into society.

— COMMUNITY VOLUNTEER

STORY

LUCIE'S STORY: FROM DESPAIR TO HOPE

Lucie, a mother of six, lived with her husband and children in the village of Kabuga, struggling to survive on subsistence farming. After her husband's small shop closed, family conflicts escalated. He turned to alcohol and became violent, forcing Lucie to spend nights hiding in the banana fields to protect herself. Overwhelmed by despair and suicidal thoughts, she felt isolated and ashamed, unable to join other women in the community.

Her situation changed when a community volunteer trained by our partner AVSI identified Lucie as someone in need of support. Through active listening, counselling and basic psychosocial care, Lucie began to regain strength. She was invited to join a women's saving group focused on basket weaving, where she found both income and emotional support. Selling her woven items allowed her to buy food, pay school fees, and contribute to the household.

As her confidence and income grew, Lucie's mental health improved and the situation at home began to change. Her husband reduced his drinking and started to recognise her contribution. Communication and mutual respect returned to the household, and their children now live in a more stable, hopeful environment.

Today, Lucie's family has become an example in their village of how psychosocial support, solidarity groups, and economic empowerment can rebuild lives and restore hope.

PROJECT STAKEHOLDERS

- NEUROPSYCHIATRIC HOSPITAL CARAES NDERA in Kigali
- LOCAL MINISTERIES Ministry of Health, Ministry of Gender and Family Promotion, Ministry of Education and Ministry of Local Administration
- UNIVERSITY OF RWANDA College of Medicine and Health Science / Mental Health Department
- RESILIENCE ONLUS ASSOCIATION
- RWANDA BIOMEDICAL CENTER

2020-2024

A Network of Care: Psychological Support in Response to COVID-19

soleterre

Launched in the midst of the COVID-19 pandemic, this project run by our partner Soleterre initially addressed the immediate psychological emergency but also recognised the need for sustained psychological support across Italy. Placing mental health care at the centre, Soleterre made psychological services a standard and essential part of care at Policlinico San Matteo in Pavia. The project established an "Osservatorio Covid" to coordinate all psychological activities, with a dedicated team of psychologists working across six departments to support healthcare workers, patients and families.

Beyond the hospital, the Soleterre Network of Psychologists extended free therapeutic services to people hospitalised with COVID, bereaved relatives, frontline health staff and those whose vulnerabilities had been exacerbated by the pandemic at the national level. In its final year, the programme broadened its scope to include adolescents and their parents, people with chronic illnesses, and individuals experiencing social or economic marginalisation. This pioneering approach demonstrates how effective public–private partnerships can bridge critical gaps in the national mental health system.

To ensure lasting impact, the project invested in capacity building and training for mental health professionals. Psychologists, doctors and social workers benefited from monthly supervision and courses in emergency psychology and communication in complex care settings and were equipped with tools to deliver high-quality psychological care well beyond the project's duration. Alongside clinical support, the project also addressed social and economic inequalities by offering job counselling and tailored consultancy to vulnerable individuals.

2020-2024 PROJECT HIGHLIGHTS

1,205
hours of family and caregiver counselling

11,184
PEOPLE RECEIVED PSYCHOLOGICAL SUPPORT

2,435
people received psychological support

20 REGIONS ENGAGED IN THE NATIONAL PSYCHOLOGISTS NETWORK

125
LONG COVID PATIENTS RECEIVED SPECIALISED SUPPORT

WHAT WE LEARNED

- ☑ Supporting the mental health of hospital teams is key to ensuring patient safety, staff wellbeing, and long-term quality of care.
- ☑ Strong public–private partnerships drive long-term impact and enable services to scale.
- ☑ Tackling stigma requires localised strategies and active community engagement.
- ☑ Flexible, multi-channel approaches (in-person, group, digital) are key to reaching diverse and remote populations.

SOLETERRE

PROJECT STAKEHOLDERS

- IRCSS POLICLINICO SAN MATTEO
- ORDER OF PSYCHOLOGISTS OF LOMBARDY
- LA SAPIENZA UNIVERSITY in Rome
- UNIVERSITY OF PAVIA (Department of Nervous System Sciences and Behaviour)
- CATTOLICA UNIVERSITY in Milan
- NATIONAL COUNCIL OF THE ORDER OF PSYCHOLOGISTS
- LOCAL PARTNERS
  Comunità della Salute (BG), Arca Project Foundation, La Cordata Social Cooperative, La Pulce Battaglie Association, Pieghe Association, Centro MEME, Oltrefrontiere, Idee di Salute, Solco Cooperative

STORY

OMAR'S STORY: REBUILDING AFTER LOSS

At 35-years-old, Omar had already faced a lifetime of challenges marked by loss and resilience. As a child, he survived two car accidents: the first took his father's life, and the second – years later – claimed his mother's. He was then adopted by her partner, who raised him as his own.

Despite completing his studies and earning a degree, adulthood brought Omar further struggles. A gambling addiction in his twenties led to heavy debts and a criminal conviction served under house arrest. During the Covid-19 pandemic, he began to experience breathing difficulties and panic attacks, linked both to long Covid and the trauma of his past.

With the support of a Soleterre psychologist, Omar is now on a slow but steady path to recovery. He has stopped gambling and returned to work, and he is learning techniques such as relaxation, mindfulness and breathing to cope with anxiety and panic attacks. His journey shows that even after deep adversity, recovery remains possible.

The sessions helped me process the trauma I experienced working in ICU during COVID. I no longer feel isolated in my struggles.

— HEALTHCARE PROVIDER

2022-2024

Building adolescent resilience and mental health literacy

YOUTH FIRST KENYA

cbm
together we can do more

In Kenya, many adolescents, particularly girls, face barriers to education due to high costs, household responsibilities and low expectations in first-generation learner families. These challenges often result in early school dropout, low aspirations and disengagement from learning.

The *Youth First Kenya (YFK)* project, run by our partners CBM Global Disability Inclusion and Basic Needs Basic Rights Kenya, responded by creating inclusive school environments and equipping students with skills in resilience, emotional regulation and problem-solving. Teachers and education officers were trained in mental health literacy and inclusive practices, while parents and communities were engaged to strengthen support for learners with disabilities. Community engagement was a core element: people with lived mental health experience and 14 mental health champions led awareness-raising and social contact activities that challenged stigma, promoted inclusion and encouraged treatment-seeking behaviour.

A randomised control trial in 35 schools supported by WorldBeing confirmed positive outcomes. Students showed improved psychosocial skills, stronger relationships with teachers and parents, and greater confidence to engage in learning. By embedding mental health literacy into schools, families and communities, the project has reduced stigma, strengthened support systems and laid the foundation for sustainable, scalable change across Kenya.

2022-2024 PROJECT HIGHLIGHTS

17,507
students, including **214 students** with disabilities, participated in the Youth YFK curriculum

91%
of students reported improved ability to manage their emotions

58
SCHOOLS actively implemented the YFK program

333
teachers and head teachers trained on YFK curriculum

6,124 COMMUNITY MEMBERS
including people with disabilities, sensitized on mental health

76%
Of teachers observed positive behavioral and academic changes, including increased student engagement, reduced absenteeism, and fewer discipline issues.

59%
Of community members surveyed felt more empowered to advocate for their own mental well-being and that of others

WHAT WE LEARNED

- ☑ Peer support fosters resilience, reduces stigma and improves school retention.
- ☑ Participatory approaches like drama and sports make learning engaging and inclusive.
- ☑ Inclusive materials are essential to ensure learners with disabilities can fully participate.
- ☑ Family involvement encourages problem-solving and strengthens student support.
- ☑ Local adaptation of materials enhances relevance and learner engagement.
- ☑ National curriculum approval is vital for curriculum alignment and stakeholder buy-in.

YFK has equipped me with the skills to address students' challenges. I have learned how to give students more time to open up about their issues. I have learned how to withhold judgement. I have also learned how to work better with my fellow teachers.

— TEACHER

PROJECT STAKEHOLDERS

- CBM GLOBAL DISABILITY INCLUSION KENYA
- BASIC NEEDS BASIC RIGHTS KENYA
- WORLDBEING
- MINISTRY OF EDUCATION AND MINISTRY OF HEALTH OF KENYA
- KENYA INSTITUTE OF CURRICULUM DEVELOPMENT
- LIGHTHOUSE KENYA

STORY

IBRAHIM'S STORY OF RESILIENCE AND TRANSFORMATION

At just 14 years old, Ibrahim, a Grade 7 pupil at Gandani Primary School in Kaloleni Sub County, Kilifi County, faced significant barriers to his education. Frequent absenteeism, driven by food insecurity at home, made it difficult for him to stay engaged in class and pursue his academic goals.

After participating in *YFK* sessions, Ibrahim began to apply the concepts of character strengths to his daily life. Motivated by what he learned, he collaborated with his mother to start a small vegetable kiosk outside their home. This initiative significantly improved the family's food security and enabled Ibrahim to attend school consistently.

Today, Ibrahim is not only thriving academically with improved concentration and regular attendance, he is also helping to foster a positive school culture. Using the conflict resolution skills he gained through YFK, he supports his peers in managing disagreements peacefully, contributing to a more harmonious learning environment.

Ibrahim's story reflects the transformative power of the YFK program in building students' resilience, enhancing their well-being and strengthening their connection to school.

Before YFK, many of my classmates were abusive and mean to each other. But after participating in the program, they began to practice kindness and empathy.

— FEMALE STUDENT

2022-2025

Strengthening Community Mental Health and Support Networks

HEALTHY MINDS, GOOD LIVES

In many remote areas of Uganda, including the Agago District, access to mental health care remains limited due to distance, stigma and a lack of resources. In response, our partners Network for Africa and BNUU, a local organization, have strengthened and expanded community-based mental health care, improving access and support for people living with mental health conditions and their families.

Community sensitisation efforts engaged local leaders, schools and faith-based institutions to encourage open dialogue around mental health and promote early help-seeking. These efforts helped foster a more informed and supportive environment. At the service delivery level, mental health care was integrated into primary health facilities, bringing support closer to those who needed it. Psychiatric specialists and trained health workers at local health centres assessed clients and provided personalised treatment plans, reducing the need for long-distance travel to hospitals.

Village Health Teams extended care into people's homes, monitoring recovery, guiding families and providing psychoeducation to prevent relapse. This home-based approach ensured continuity of care and maintained family involvement throughout the recovery process.

Access to counselling services was expanded, offering individuals and groups safe, confidential spaces to share their experiences, build resilience and confront stigma. At the community level, self-help groups emerged as strong advocates, ensuring the voices of people with lived experience shaped both public attitudes and local priorities.

To secure ongoing access to essential medication, savings groups were mobilised to manage community drug banks, while health workers received continued training to provide reliable, high-quality care.

2024 PROJECT HIGHLIGHTS

1,164 people reached through awareness sessions

194 PEOPLE SUPPORTED IN MENTAL HEALTH CLINICS

156 PEOPLE AND FAMILIES RECEIVED HOME VISITS

118 CAREGIVERS SUPPORTED

187 PEOPLE RECEIVED COUNSELLING

228 people joined savings groups and contributed to the drug bank

32 HEALTH WORKERS RECEIVED QUARTERLY SUPERVISION

WHAT WE LEARNED

- ☑ Awareness and sensitisation reduce stigma and foster understanding and solidarity around mental health.
- ☑ Bringing services closer to communities increases access and ensures more people receive help.
- ☑ Supporting staff wellbeing and self-care is vital to prevent burnout and sustain quality care.
- ☑ Integrating mental health and livelihood support helps families move from coping to thriving.

STORY

ACAN'S STORY OF RESILIENCE

Acan is a mother from a small village in Lapono sub-county. She has spent years raising her ten children alone after being abandoned by her husband and left to face emotional abuse and deep poverty. Some days she couldn't feed or clothe her children, and they were often sent home from school because she couldn't afford the fees.

Over time, Acan began to feel constantly sad and hopeless, and she struggled to sleep. She thought no one saw what she was going through and that there was no way out.

In 2024, the BNUU team visited her village to run a community awareness session about depression. As she listened to the signs and symptoms being explained, Acan realised that what they were describing was exactly how she had been feeling. After the session, she approached the team and asked for help.

She was assessed and diagnosed with severe depression and received treatment at the local health centre. She was also invited to join a women's counselling group where she met other women facing similar challenges. Talking and listening to each other gave her comfort and hope.

"I thought I was the only one struggling," Acan said. "But now I know I'm not alone."

As the sessions continued, the team noticed that Acan and other women were missing meetings, especially during busy farming periods. To make it easier for them to attend regularly, the group started combining counselling with practical tasks—like shelling groundnuts, sorting beans, or preparing vegetables together. This simple change helped Acan and other women stay connected, support each other, and still meet their responsibilities at home.

With time and support, Acan began to feel like herself again. She was chosen as chairperson of her savings group and discovered she could earn money by selling turmeric. She also began planting millet to further support her family. For the first time in years, she was able to pay her children's school fees. Most of all, Acan is now helping other women in her community find the same support and strength she found.

I used to misuse alcohol as a coping mechanism but when I was counselled, I developed positive coping mechanisms which necessitated my recovery. I am now a happy person and engaging in productive activities like farming and running small business.

— KARLA

PROJECT STAKEHOLDERS

- BNUU
- LOCAL NGO
- DR. AMBROSOLI MEMORIAL HOSPITAL
- GULU REGIONAL REFERRAL UNIT
- BUTABIKA NATIONAL REFERRAL MENTAL HOSPITAL

2022-2026

Helping Vulnerable Children Flourish

TAKE CARE OF ME

FONDAZIONE Francesca Rava
N.P.H. Italia
NUESTROS PEQUENOS HERMANOS
20 anni in Italia, 65 nel mondo

In one of the most disadvantaged neighbourhoods of Milan, our partners Fondazione Rava and Centro Tempo per l'Infanzia worked to respond to the multiple and interconnected challenges faced by families. Poverty, social isolation and limited access to services were not only sources of daily hardship but also barriers to children's healthy growth and wellbeing. To address these issues, the Take Care of Me project took a holistic approach to meet families' emotional needs, strengthen community capacity, and provide urgent material support where required.

Psychological counselling offered direct support to children and families experiencing emotional and relational difficulties, while workshops in primary schools and art therapy sessions created safe spaces for children to express themselves and build resilience. At the same time, training courses equipped local operators and staff with the skills to recognise distress and provide appropriate responses, ensuring that support extended beyond the project's direct activities.

To complement these interventions, targeted financial assistance was provided to families under severe strain, easing immediate pressures and allowing them to focus on longer-term stability. By combining emotional care, educational activities, professional training and financial aid, the project delivered an integrated response that not only helped families cope with immediate challenges but also strengthened the foundations for a healthier and more connected community.

2024 PROJECT HIGHLIGHTS

153 individual psychological support sessions

9 TRAINING SESSIONS for educators and social workers

60 people engaged in mental health awareness through an art therapy exhibition

8 SCHOOL EDUCATIONAL WORKSHOPS

30 CHILDREN (aged 6–14) took part in art therapy workshops

10 families received financial support

WHAT WE LEARNED

- ☑ Integrated support (emotional, educational, financial) helps families recover and build resilience.
- ☑ Empowering parents, teachers, and local staff improves care and strengthens community capacity.
- ☑ Safe spaces, creative workshops, counselling, and financial aid boost children's confidence and well-being.
- ☑ Holistic, low-cost interventions are effective and can be replicated in other disadvantaged communities.

FONDAZIONE RAVA

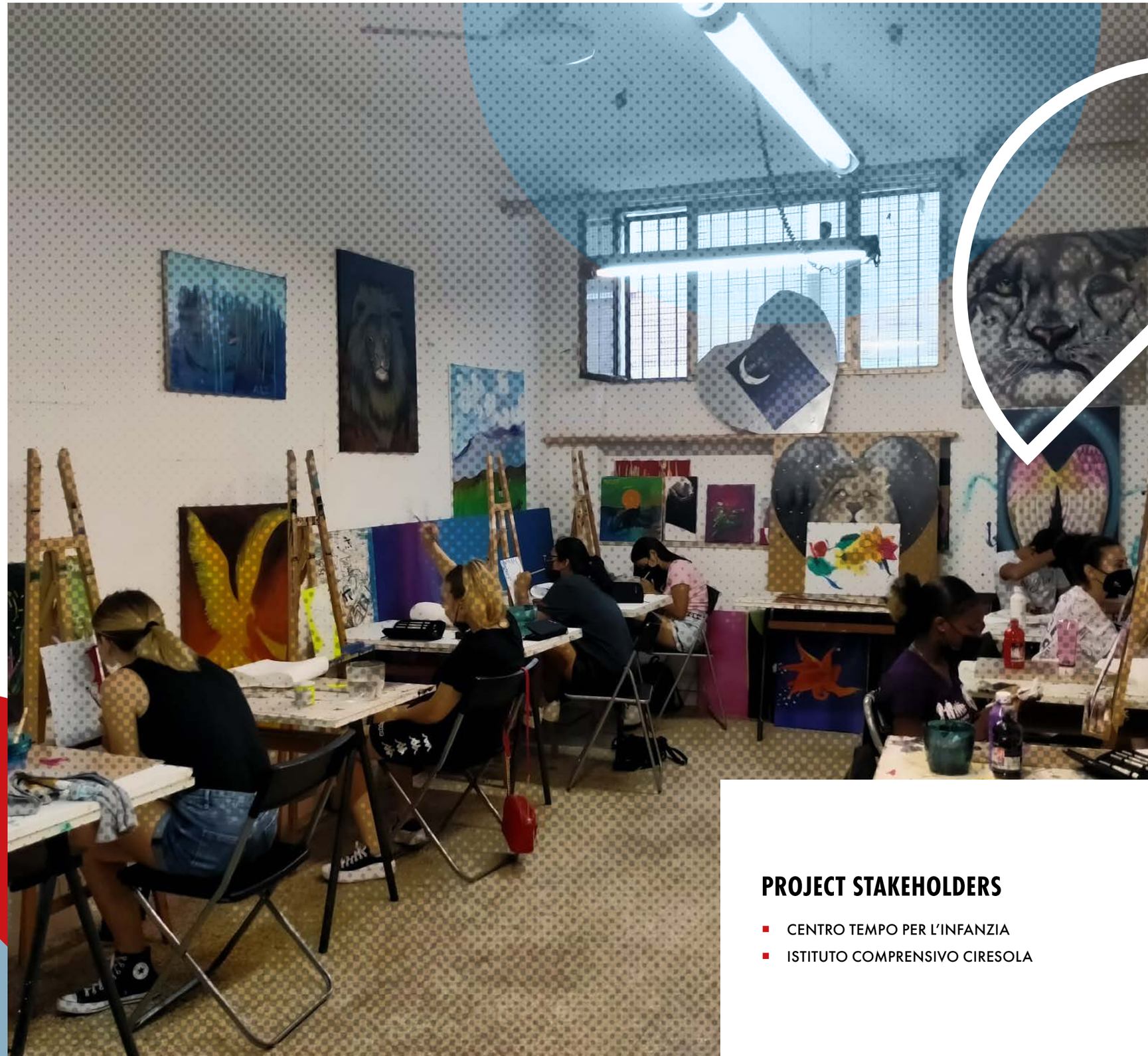
STORY

TURNING CRISIS INTO CONNECTION GIULIA'S STORY

When Giulia became an adolescent, she longed for recognition and experimented with new ways of being seen. But when a private photo she shared was circulated among peers, the experience left her devastated and ashamed. She withdrew from school and family life, while her parents, frightened by her precocity, tightened control in ways that only pushed her further away.

The crisis revealed how fragile the family's balance had become. Mistrust and silence replaced communication, leaving all three – daughter, mother and father – feeling isolated and powerless. What initially seemed like an individual problem quickly emerged as a collective one, rooted in relationships and the need for renewed connection.

A year-long therapeutic pathway involving both Giulia and her parents helped to break this cycle. Through regular sessions, the family learned to move from control to support, creating space for more open conversations and healthier patterns of trust. What could have remained a painful wound instead became a turning point, showing that with the right support, families can rediscover resilience, rebuild bonds and face the challenges of adolescence with greater confidence and hope.



PROJECT STAKEHOLDERS

- CENTRO TEMPO PER L'INFANZIA
- ISTITUTO COMPRENSIVO CIRESOLA

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Fondation d'Harcourt makes substantial grants every year from its endowment funds and donations. All operational costs are covered by the foundation's endowment.

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FINANCIAL AUDIT
Brunner et Associes SA - Société Fiduciaire

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