

The Global Mental Health Peer Network



Annual Report 2020

Reporting period:
April 2019 - March 2020

www.gmhpn.org

Make a
donation
CLICK HERE

Vision

“Strengthening the voices of persons with lived experience globally through empowerment and inspiring respect and acknowledgement of their experiences, views and opinions as valued and equal citizens of the world”

Principles

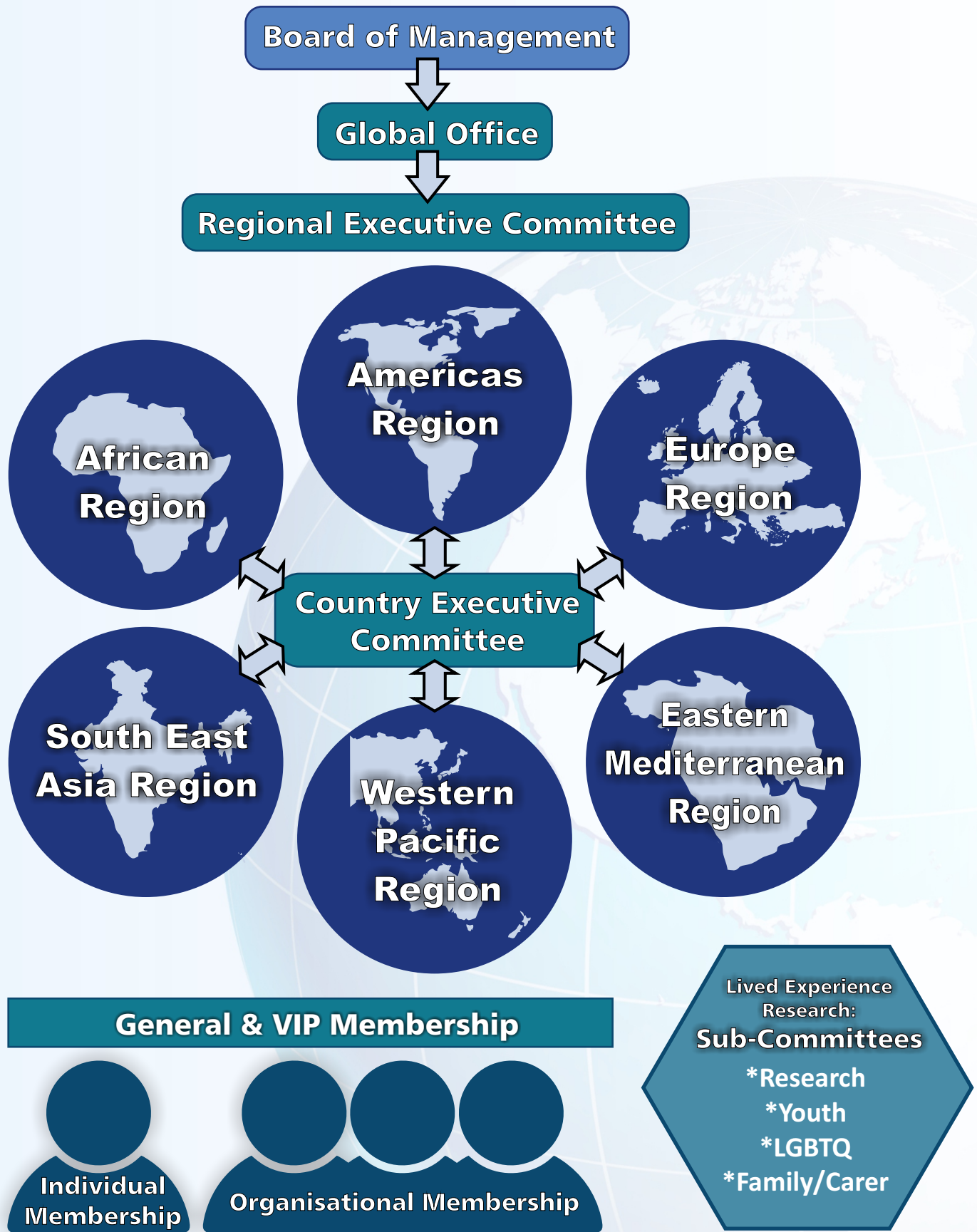
Two principles are fundamental to the GMHPN:

- Working together with all stakeholders involved to affect the desired change
- The views, opinions and experiences of persons with lived experience reflect the change desired

Objectives

- Create communities where persons with lived experience are valued as equal citizens of the world, free from stigma, discrimination, inequality and inequity
- Give a voice to the voiceless and create a platform where what persons with lived experience say and share, matters
- End isolation from the world and connect mental health care user groups and movements globally to form a community of experts by experience and who are empowered to self-advocate and advocate on a broader and global scale

GMHPN Global Structure



www.gmhpn.org

gmhpn@gmhpn.org

GMHPN Executive Structure

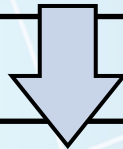
The GMHPN Executive Structure is designed to develop new global lived experience leadership and create a sophisticated platform for diverse lived experience voices to be at the forefront of change. Empowerment is built into the structure and experienced representatives become teachers and mentors to the newly appointed lived experience representatives.

Regional Executive Committee

The Regional Executive Committee are elected by the entire Executive Committee. The Committee consists of Regional Representative Leads and Regional Deputy Representative Leads. Members of the Regional Executive Committee serves a one (1) year term.

Country Executive Committee

The Country Executive Committee are appointed through an application process - applications are reviewed by the Global Office who then appoint country representatives. Up to 4 representatives are appointed per country, maximum 5. Members of the Country Executive Committee serves a two (2) year term. Members then have the opportunity to apply for Honorary Mentorship after a full 2 year term.



Honourary Mentors

The Honourary Mentors are there to guide and empower the Regional and Executive Committee Representatives, through their own experiences and skills obtained from having served in that capacity [Executive Committee]. Honourary Mentors serve a term of up to two (2) years and then automatically become Honourary Members.

Honourary Members

The Honourary Members are life long members for those who had been involved in the GMHPN Executive Committee since the inception of the organisation and served their full term in office.



www.gmhpn.org

gmhpn@gmhpn.org

Index

1. **Meet the GMHPN Team**
 - Board of Management
 - Global Office Staff
 - Regional Executive Committee
 - Country Executive Committee
7. **Message: Founder & CEO**
8. **Message: Deputy CEO**
9. **Message: Chairperson**
10. **History & Background**
12. **Impact - "How" and "Why"**
13. **Executive Structure**
14. **General Membership**
15. **Partnerships, Representation & Publications**
18. **International Engagement & Participation**
19. **Communications Platforms**
20. **Campaigns**
21. **Projects**
22. **Short-Medium Term Plans**
23. **Long-Term Plans**

Special Thank You ...

... to our funders and partners,
our staff, volunteers, Executive Committee,
members, colleagues, and
everyone who supported the GMHPN.

Your support has been invaluable!

Board of Management



Adv Nigel Carpenter
Chairperson



Mrs Chantelle Gradidge
Member



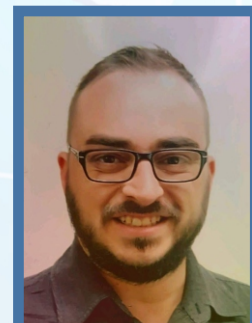
Mr Deon Swanepoel
Treasurer



Dr Richard Vergunst
Member



Mrs Charmaine Higgins
Member



Mr Marcel Gil
Member

Global Office Staff



Charlene Sunkel

Founder & CEO

I see inclusion as an integral part of the GMHPN. We are all citizens of the world, our diversity and uniqueness are precious assets of humanity, that must be celebrated, not judged.



Claudia Sartor

Deputy CEO

For me, GMHPN is not just another organisation, it is the heart and soul of a family of a global lived experience community. It is THE platform for driving change in our world. I am honoured to be a part of the family.



Zak Martah

*Fundraising & Financial
Support Assistant*

A quote from Winnie the Pooh that truly resonates with me and what the GMHPN is placing an emphasising on, is "***Life is a journey to be experienced, not a problem to be solved***".

REGIONAL EXECUTIVE COMMITTEE



African Region

REPRESENTATIVE: Marie Abanga (Cameroon)



Americas Region

REPRESENTATIVE: Syd Gravel (Canada)



Europe Region

REPRESENTATIVE: Lucy Goldsmith (UK)



South East Asia Region

SOUTH EAST ASIA REGIONAL REPRESENTATIVE
Anjali Singla (India)



Western Pacific Region

REPRESENTATIVE: Enoch Li (China)



DEPUTY REPRESENTATIVE
Angelica Mkorongo (Zimbabwe)



DEPUTY REPRESENTATIVE
Katrina McIntosh (Trinidad & Tobago)



DEPUTY REPRESENTATIVE
Jakub Bil (Poland)



DEPUTY REPRESENTATIVE
Matthew Jackman (Australia)

African Region



Swetha Jammalamadugu
Botswana



Odireleng Kasale
Botswana



Eleni Misganaw
Ethiopia



Jerome Uriko-Kang
Ghana



Esemam Abra Dra
Ghana



Martha Coffie
Ghana



Japheth Obare
Kenya



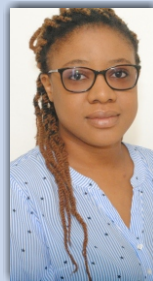
Samoina Mbuguah
Kenya



Claire Kyalo
Kenya



Iregi Mwenja
Kenya



Thandiwe Mkandawire
Malawi



Victor Ugo
Nigeria



Sandra Ferreira
South Africa



Tivania Moodley
South Africa



Chantelle Booysen
South Africa



Leila Sasman
South Africa



Katleho Toabala
South Africa



Victorine Ragouena
Togo



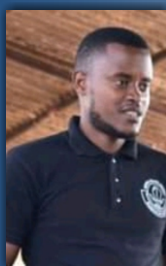
Joseph Atukunda
Uganda



Godfrey Kagaayi
Uganda



Juliet Nalukwago
Uganda



Marvin Ntege
Uganda



Kennedy Chanda
Zambia



Albert Zimunhu
Zimbabwe



Paida Mudzamba
Zimbabwe



Ntokozo Nyathi
Zimbabwe



Winnie Ndoro
Zimbabwe

Americas Region



Karen Athie
Brazil



Sahar Vasquez
Belize



Michele Capots
United States



Anim Aweh
United States



Jaclyn Schess
United States

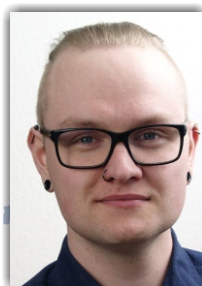


Hannah Stewart
United States



Jodie Dennie
St Vincents of Grenadines

Europe Region



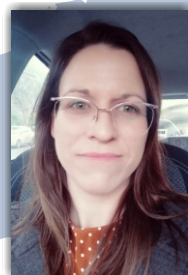
Stefan Tofte
Denmark



Celline Cole
Germany



Raluca Mirela
Romania



Lion Gai-Meir
Israel



Mark Sanderson
United Kingdom



Sue Baker
United Kingdom

South East Asia Region



Sanjay Agarwal
India

Western Pacific Region



Andrew Turtle
Australia



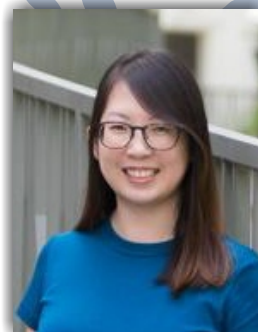
Laura Smith
Australia



Luke Spajic
Australia



James Site Faimu
Samoa



Nicole Kay
Singapore



Bernard Ang
Singapore



Shaun McNeil
New Zealand

Message : Founder & CEO

Ms Charlene Sunkel



Ms Charlene Sunkel
Founder/CEO

First and foremost, on behalf of the Global Mental Health Peer Network (GMHPN), I would like to express our sincere gratitude to our major funders, Comic Relief and Open Society Foundations, for their support over the past financial year. The funding received has allowed the GMHPN to expand its reach globally and further develop the organisational structure to amplify the voices of persons with lived experience.

This Annual Report celebrates the organisation's second year of operations. Looking back, we started off as an infant, working towards further development of the organisation and finding effective ways to enhance diverse voices of people with lived experience through the organisation's structures, and continued to improve on our strategies to achieve our objectives.

I am proud to say that the Global Mental Health Peer Network (GMHPN) has gained international recognition as a lived experience organisation and as a source of lived experience expertise. Our space in global mental health has given us multiple opportunities to provide lived experience expertise at various local and international engagement and discussion platforms. This impact would not have been possible without the dedication and passion of the GMHPN staff, Executive Committee members, funders, partners and supporters. The most rewarding of founding and leading the GMHPN has been to witness how new lived experience global leaders emerged through the GMHPN. It has been inspirational to witness how these lived experience leaders united as a community and found each other as a source of peer support. The personal and professional growth that has taken effect amongst the lived experience leaders through their involvement in the GMHPN, has set the stage for breaking down stigma, promoting the abilities (NOT disabilities) of persons with lived experience, and placing lived experience at the center of engagement and transformation in mental health.

We have developed a number of partnerships with like-minded organisations and it is truly exciting to imagine the way forward, joining our journeys as a collective and create strong collaborations towards our common goals and advocacy initiatives within the global space.

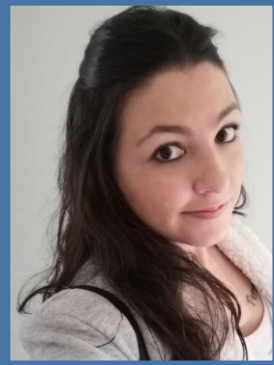
The GMHPN embarked on its first project in September 2019 - the "Our Global Voice" project, supported by a grant from the Foundation Open Society Institute in cooperation with the Public Health Program of the Open Society Foundations. We engaged 11 inspirational individuals with lived experience from Ethiopia, Kenya, South Africa, India and the United States of America, who kindly shared their experiences and perspectives on receiving a diagnosis of a mental health condition. The videos provide valuable insights from lived experience perspectives.

In March 2020, as the COVID-19 pandemic started ravaging throughout the world, it presented an opportunity to raise the status of mental health globally, as the pandemic proved to have challenged the mental health and wellbeing of populations, those with pre-existing mental health conditions and without. Needless to say, the pandemic forced us to rethink our strategies and adapt accordingly.

I am excited about leading the GMHPN into another successful year!

Message : Deputy CEO

Ms Claudia Sartor



Ms Claudia Sartor
Deputy CEO

My involvement with the GMHPN began before its official launch in 2018. I watched from behind the scenes as Ms. Sunkel's vision of the GMHPN expanded. In spite of the hardships she had faced with her diagnosis, her heart remained open to changing the world in so far as mental health was concerned.

With time we got to know one another and I was truly inspired by her work and achievements, not at all disregarding her genuine persistence and determination to fight the fight.

It was not long after meeting her that she became my mentor- she showed me the ropes and for some time I volunteered for the GMHPN-to-be and with that my passion for mental health advocacy became clear.

In 2015, I was diagnosed with Bipolar disorder (type 2) and my life turned upside down very quickly and it was ugly; but in the end after taking the right steps and correctly following my treatment and recovery plan I too had made a choice; a choice to get up and speak out about my diagnosis and the impact it had on my home and work life. The world needs to know that mental illness does not discriminate and that in fact we are all vulnerable to its reality.

During GMHPN's infancy stage I was appointed Chairperson of Board of Management and while I enjoyed it very much, for the longest time I would be determined to find a way to get further involved in the work of GMHPN. The year 2020 will always be the year during which my professional aspiration was realised- yes, you guessed it, I accepted the role of Deputy Chief Executive Officer for the GMHPN. I resigned from my- then- corporate work and I was eager and absolutely inspired to start my new job. Waking up every morning and loving what I do is PRICELESS.

The GMHPN has given me a real sense of purpose and drive and I am thrilled to be part of such a wonderful organisation. Our Executive Committee members are beautiful human beings and they too have a special place in my heart. They opened up their arms to me and instantly made me feel a part of the GMHPN family. I am grateful for this opportunity and I intend on giving this my ALL.

Message : Chairperson

Adv Nigel Carpenter



Adv Nigel Carpenter
Chairperson

Being Chairperson of the Board of Management of the GMHPN has been a privilege as the fellow Board members, global staff, regional executive committee members and country committee members are passionate about the principles and objectives of the Network. When looking at the rapid growth of the Network it is clear that a platform was needed for persons with lived experience where their voices could be heard and they could interact amongst each other. I am convinced that the Network will continue to grow and have more of a voice as each year passes by. The Pandemic this year has brought attention to mental health issues and the treatment thereof. The Network provides an invaluable service as people with lived experience can provide real answers to issues that arise.

The Board has changed since the previous annual report and I would like to thank the following Board members. Firstly, Claudia Sartor, who resigned as Chairperson to take on the position as Deputy CEO of the Network. The leadership Claudia provided and her hard work as Chairperson from the inception of the Network is greatly appreciated. This has made it easy for me to take over the position as Chairperson. We are fortunate that we have not lost her experience due to the new position she now occupies. Secondly, Tayyibah Collophen, the Treasurer who resigned due to personal reasons. Tayyibah provided invaluable guidance, ensured financial compliance and asked the difficult questions regarding the budgets and expenditure. Thank you for all you did for the Network.

The Board welcomes Deon Swanepoel who has been appointed as the Treasurer in place of Tayyibah. Thank you for taking up the position and the hard work you have already put in for the Network. We also welcome Charmain Higgens to the Board and appreciate your willingness to serve on the Board. I look forward to a long and fruitful working relationship with the new and current Board members.

A special note of thanks must go out to Charlene Sunkel, the CEO, who has almost single handily run, grown, drawn awareness, raised funds, attended meetings and conferences on behalf of the Network. Without your tireless dedication, enthusiastic marketing and endless hours the Network would not be in the position it now is.

I also welcome the new Global Office employees Claudia Sartor, Deputy CEO, and Zak Martah, Fundraising & Financial Support Assistant. Thank you to Chantelle Booyesen, Project Officer, for your hard work during this financial year.

As with all organisation like ours we are very dependant on external financial support to operate and achieve our goals. In this regard I would specifically like to thank Comic Relief for a 2 year grant which has provided support for operational costs and further development of the Network. Thank you also to The Open Society Foundations which funded "Our Global Voice" project that was completed in August 2020. The Open Society Foundations also provided an additional 3 year grant for operational support which allowed the Network to appoint the additional staff in the Global Office.

Lastly, I would like to thank all the numerous global volunteers who have helped the GMHPN grow.

History & Background

The GMHPN developed from the successful initiatives of Movement for Global Mental Health (www.globalmentalhealth.org), an international virtual network of individuals and organisations dedicated to improve services and promote human rights for people living with mental health conditions worldwide. It is from this solid foundation that the GMHPN was launched in 2018 at the 5th Global Mental Health Summit, hosted in South Africa, to enhance diverse lived experience voices throughout the world.

The GMHPN was formally registered as a Non-Profit Organisation (NPO 212-449) under the South African Non-profit Organisations Act 71 of 1997 in July 2018 and in July 2019 registered as a Public Benefit Organisation (PBO 930065563) with the South African Revenue Services. In April 2020, the GMHPN received its Equivalency Determination Certification, recognised equivalent to a US public charity.

Since the GMHPN's establishment in 2018, the focus of its work has involved the building of a sustainable structure to serve two main purposes:

- to develop a global leadership of lived experience; and
- to create a sophisticated communication platform where the lived experience community can share their views, opinions, perceptions and experiences.

The GMHPN emerged to give a voice to persons living with a mental health condition and who are users of mental health care and services - this specific target group of people with lived experience had never before been adequately represented at both local and international levels or been meaningfully and authentically involved in addressing the challenges and needs that they face on a daily basis at grassroots level. Yet many possess excellent leadership potential and passion but never been given the opportunity to lead and inspire change. The GMHPN specifically focuses on empowering and developing leadership potential to generate new global lived experience leaders, specifically focusing on the younger generation to start taking the lead.

The GMHPN's projects and overall work in the field of mental health and human rights advocacy, aspires to have lived experience representation and mental health lived experience leadership from all 195 countries in the world, and becoming the first truly globally represented lived experience organisation in the world, who are instrumental in driving change and transformation, in every country. This is an ambitious goal, but it can be achieved through facilitating empowerment of persons with lived experience and develop leadership potential, while providing a solid support and engagement structure for emerging mental health lived experience leaders.

The entire GMHPN, as an international organisation, is solely driven and managed by persons with lived experience; including management and staff, volunteers, Board of Management, and each and every member of the Regional and Country Executive Committees, including the sub-structures, who are all people with lived experience.

The GMHPN strives towards establishing a well-represented global structure of person with lived experience with mental health conditions.

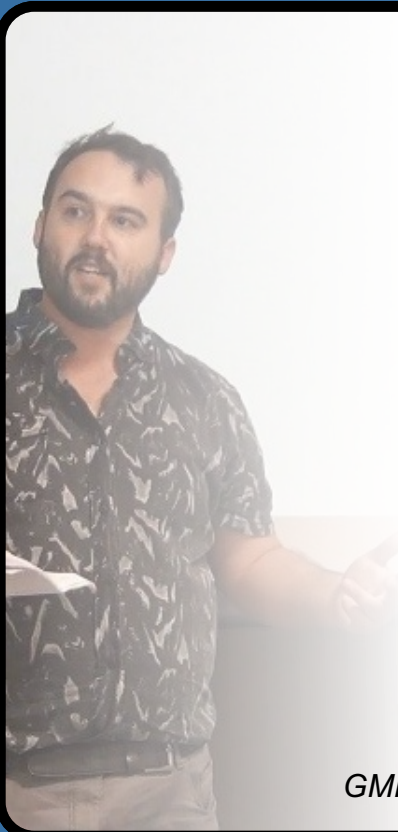
The establishment of a strong sustainable structure is the foundation on which the GMHPN is built and further developed to create a diverse community of persons with lived experience that are actively and able to influence policy and practice through collective advocacy initiatives.

One of the GMHPN's core focus areas is on the development of leadership among persons with lived experience in mental health to ensure that there are meaningful and authentic participation in the development, design, review, implementation, monitoring and evaluation of services for persons with lived experiences at all stages and in all aspects of life.

The Global Office is based in Johannesburg, South Africa, and responsible for the day-to-day operations; project development, implementation, monitoring and evaluation; sustainability and donor relations; partnership development; and coordinating the structural committees and sub-committees.

Two key structures exist within the Global Mental Health Peer Network; the Regional Executive Committee and the Country Executive Committee. Both of these Executive Committees are made up of persons with lived experience who are representatives of their region or country respectively.

Sub-Committees are facilitated by members of the Regional and Executive Committees in areas that are aligned with their interests and expertise.



The GMHPN has opened up so many doors for me. It has allowed me to engage with leaders throughout the world and be involved in truly innovative initiatives. The GMHPN has allowed me to grow by being in contact with people from all walks of life, and learning what people are going through on a daily basis throughout the world. By sharing their frustrations and struggles, it has taught me to take nothing for granted and to realise how lucky I am to have the support and resources I receive to maintain on top of my mental health here in Australia. The GMHPN is a timely reminder that growing a network is the easiest and best way to have a voice, and that reaching out to people is a powerful way to make a difference. I am truly grateful for the opportunities the GMHPN has provided me, and I hope that I can continue to grow as I reach out to people around the world through this amazing platform.

Andrew Turtle
GMHPN Executive Committee Representative for Australia

Impact - "How" and "Why"

Strengthening Lived Experience Voices

HOW?

Empowerment of persons with Lived Experience

- Improve mental health / human rights literacy
- Develop Lived Experience leadership

Uniting Lived Experience voices for collective action

- Establish a global sustainable structure and platforms for engagement
- Work towards achieving common goals and advocacy actions

Enhance Lived Experience engagement and involvement at all levels

- Building stakeholder partnerships
- Provide Lived Experience consultation services through Network of expertise

WHY?

Building a cohesive and responsive Lived Experience community

- End isolation and fragmentation - a collective action drives change
- Diversity among Lived Experience provide powerful source of information and expertise

Ensuring Lived Experience voices are at the centre of action

- Lived Experience has an in-depth understanding of stigma, discrimination, segregation, harmful practices
- Ensure societal systems are compliant with local and international human rights instruments

Ensuring Lived Experience's unique and diverse experiences and perspectives reflect in policy and practice

- Lived Experience have a fundamental role in systems transformation
- Ensure systems speak to the needs and challenges of Lived Experience

IMPACT

- **Increased Lived Experience mobilisation leads to influencing policy and practice, but at larger scale, a global united Lived Experience movement accelerates transformation in mental health**
- **Diversity within the global Lived Experience movement, provides for comprehensive insights into context specific experiences for the effective development and implementation of strategies and innovations that "leaves no one behind"**
- **Effecting change through the formation of partnerships between the Lived Experience community and stakeholders are crucial**
- **Lived Experience provides for practical experiences of navigating mental health and other societal systems as users of these systems**
- **Lived Experience provides for comprehensive knowledge of the elements involved that leads to achieving recovery but also what has a negative impact on recovery**
- **Lived Experience's recover journeys provide for an in-depth understanding of both common and context specific needs and challenges and how systems could address these innovatively**

The GMHPN Executive Structure is designed to develop new global lived experience leadership and create a sophisticated platform for diverse lived experience voices to be at the forefront of change. Empowerment is built into the structure and experienced representatives become teachers and mentors to the newly appointed lived experience representatives.

The GMHPN developed its structure by starting to build its Country Executive Committee. Since the organisation's inception in 2018 and up to March 2020, a total of 30 exceptional lived experience representatives were appointed to the Executive Committee, from across 20 countries.

The Regional Executive Committee started to be developed as the next step in the structure development, where Country Executive committee members stood for election as representatives and deputy representatives for each of the 6 World Health Organisation's world regions, including Africa, Americas, Eastern Mediterranean, Europe, South East Asia and Western Pacific.

Flowing from the Country and Regional Executive Committee is the Honorary Mentors who are experienced members who served a full term on the Executive Committee, and moves into this role in providing guidance and empowerment to newly appointed Executive Committee members.

The structure sets fixed terms to serve in the various capacities to make provision for new lived experience leaders to be phased into the Network.

Essentially the roles of the lived experience leaders throughout the structure are advisors and providers of lived experience perspectives.

PROFILE OF EXECUTIVE COMMITTEE (April 2019 - March 2020)

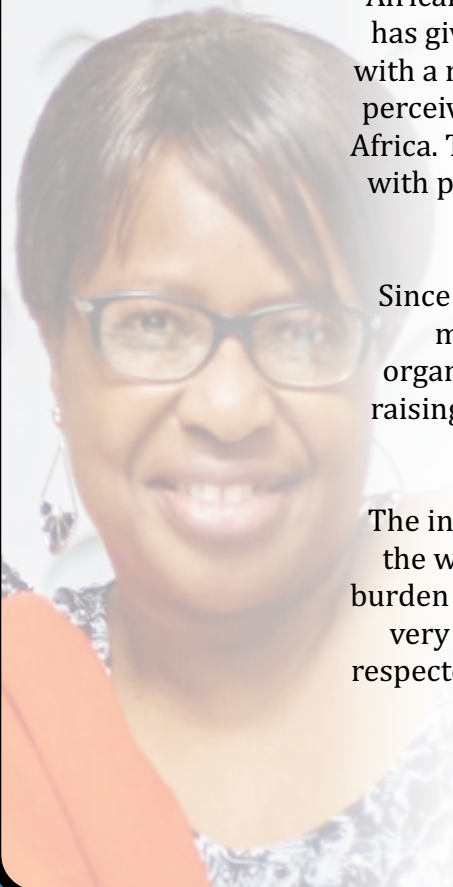
30 Lived Experience representatives
from **20** countries

GENDER: 64% Female, 36% Male

AGE GROUP: 14% in 18-29 age, 54% in 30-45 age, 16% in 46-59 age, 16% in 60+

RACE: 54% Black, 40% White, 6% Asian

INCOME COUNTRY: 14% Low-Income, 30% Lower Middle-Income,
20% Upper Middle, 36% High Income Countries



Since I have been appointed as the Deputy Representative for the African Region on the GMHPN Regional Executive Committee, it has given me the courage to think big. It has made me a person with a mission, to bring some meaningful changes on how people perceive mental health, not only in my country Zimbabwe but in Africa. This has given me a chance to dream big about how people with psychosocial disabilities throughout the world should live - with dignity and stigma-free.

Since joining the GMHPN, I am excited to say that other global mental health organisations have begun to notice our organisation in Zimbabwe and the efforts we are putting into raising awareness on mental health conditions, something that very few people in Africa know about.

The interaction with my colleagues in the GMHPN from all over the world, through sharing our common problems makes the burden lighter. Thank you to the GMHPN Founder who is working very hard to make sure all people with Lived Experience are respected and given an equal chance in life. I sure will do my part.

Angelica Mkorongo
*GMHPN Executive Committee
 Deputy Representative for the Africa Region*

Reporting Period:
 April 2019 to March 2020

General Membership

General membership include both individuals with lived experience and mental health organisations.



Partnerships, Representation & Publications

Partnerships

The GMHPN has built several partnerships over the past 2 years with whom we have collaborated with in various projects and activities. These include:

- **Speak Your Mind Global Campaign**
- **Countdown Global Mental Health Coalition**
- **Movement for Global Mental Health**
- **Mind the Gap Campaign**

Representation

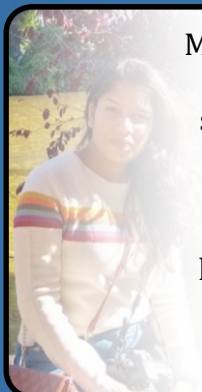
The GMHPN are represented on a number of boards and committees. These include:

- **Lancet Editorial Advisory Board**
- **Blue Print Group on Global Mental Health**
- **WPA Lived Experience & Family/ Carer Advisory Committee**
- **Board of Mental Health and Human Rights FGIP**
- **Time To Change Global Governance Group**
- **citiesRISE Steering Committee**
- **WHO Civil Society Working Group on NCDs and Mental Health**
- **UPSIDE International Advisory Board**
- **ASSET International Advisory Board**
- **Movement for Global Mental Health International Advisory Board**
- **Healthy Brains Global Initiatives**
- **My Mind Our Humanity Youth Campaign**
- **International Mental Health Ambassadors**

Publications

The GMHPN's Founder and CEO has written a chapter for a book on 'Innovations in Global Mental Health', titled '**The Global Mental Health Peer Network - The Role of Persons with Lived Experience with Mental Health Conditions**', published by **Springer** in November 2019.

The GMHPN Founder & CEO is involved in 2 Lancet Commissions at present, one on *Psychosis* and the other on *Mental Health Stigma and Discrimination* (co-leading this Commission).



My role in the GMHPN on the Regional Executive Committee, enables me to empower individuals with lived experiences, bring forth issues such as local laws and civil society support, and bring together the larger issues of universal rights concerning mental health, such as basic income and housing, employment rights and peer and ally support networks. This position allows me to gain insight and mobilise resources to address challenges unique to the cultural understanding of mental health in South East Asia allowing a culturally relevant solution focussed approach.

Anjali Singla
GMHPN Regional Executive Committee Representative for South East Asia

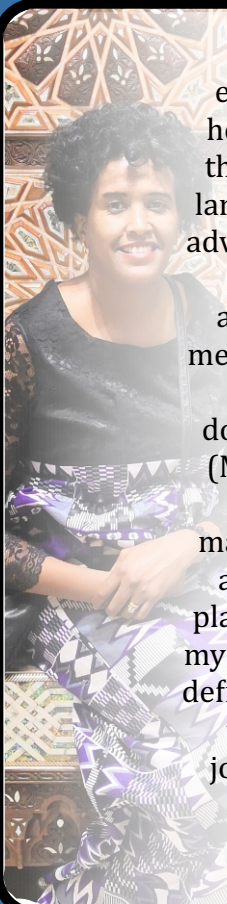
Reporting Period:
April 2019 to March 2020

International Engagement & Participation

Since the inception of the GMHPN, members of staff and the Executive Committee, participated in **52** engagement events where lived experience perspectives were provided on a range of topics.

Between April 2019 and March 2020, GMHPN members of staff and the Executive Committee provided lived experienced perspectives into **10** documents and policies ranging from topics on human rights and recovery, community mental health services, peer support, investment in mental health, workplace mental health, refugee health, COVID and mental health.

Between April 2019 and March 2020, the GMHPN was involved in **9** research projects.



My involvement with GMHPN played a tremendous role in my advocacy engagement in mental health as well as my personal development. GMHPN has helped me embrace to what extent lived experience can contribute to improving the mental health system. Sharing experiences from other GMHPN members has largely widened my horizon to see what can be achieved through lived experience advocacy. Gatherings of such courageous individuals with high calibre from diverse geographical and cultural settings for the common cause of lived experience advocacy is really eye-opening. This has greatly impacted my understanding of mental health being a global issue. GMHPN has given me an opportunity to provide inputs from lived experience perspective in high-level policy and research documents. Thanks to my engagement with GMHPN, the local organisation I lead (Mental Service Users Association in Ethiopia) has gained visibility – in Ethiopia and globally. It has added credibility to the organisation in the eyes of policy-makers, duty-bearers and service users as well. My engagement with GMHPN has also greatly impacted my personal development. The safe space in the GMHPN platform has given me the energy and courage to break the shell and dare to share my personal lived experience in a context where mental health is still a taboo. I can definitely certify that my engagement as Country Executive Committee in GMHPN is the greatest empowering, uplifting, and inspiring experience I ever had in my journey as global mental health advocate and as a person with lived experience.

Eleni Misganaw
GMHPN Country Executive Committee Representative for Ethiopia

International Engagement & Participation



Human Resource Conference, China 2019



1 Voice Summit, Denmark 2019



World Health Summit, Germany 2019



World Congress on Psychiatry, Portugal 2019



Postpartum Support International Conference, United States, 2019



Touching Minds, Rasing Dignity Workshop, Sierra Leone 2019



citiesRISE Workshop, Kenya 2019



Shifting the Paradigm Sessions, Ukraine 2019

International Engagement & Participation



WHO Special Initiative for Mental Health, Geneva 2020



Blue Print Group and Speak Your Mind meetings, Kenya 2020



Presidential Working Group on Disability - Meeting with President Cyril Ramaphosa South Africa, 2019



Federal Ministry of Health - Annual Review of Health Sector Ethiopia, 2019



WHO-UNICEF Consultation: Helping Adolescents Thrive (HAT) Intervention Package South Africa, 2019



Kenya's First Mental Health Conference Kenya, 2019



Peer support is the foundation piece through which lived experience connects with empathy to those who have been traumatised and gets them to the help they need, medical or psychological, and supports them through the process of healing with reassurance and guidance and once they are strong enough, lets them go without obligation to the support that was offered. No one mental health service product can stand on its own...it all needs to work as one.

Syd Gravel

GMHPN Regional Executive Committee Representative for Americas

Reporting Period:
April 2019 to March 2020

Communications Platforms

Website

The website received an average of 5,584 visits daily. The top 3 sources of site referrals to the GMHPN website comes from, firstly Google searches, secondly links on the GMHPN monthly newsletter and thirdly the GMHPN Facebook page. The top 3 website pages most visited is firstly the home page, secondly the “Committee” and thirdly the “Membership” pages.

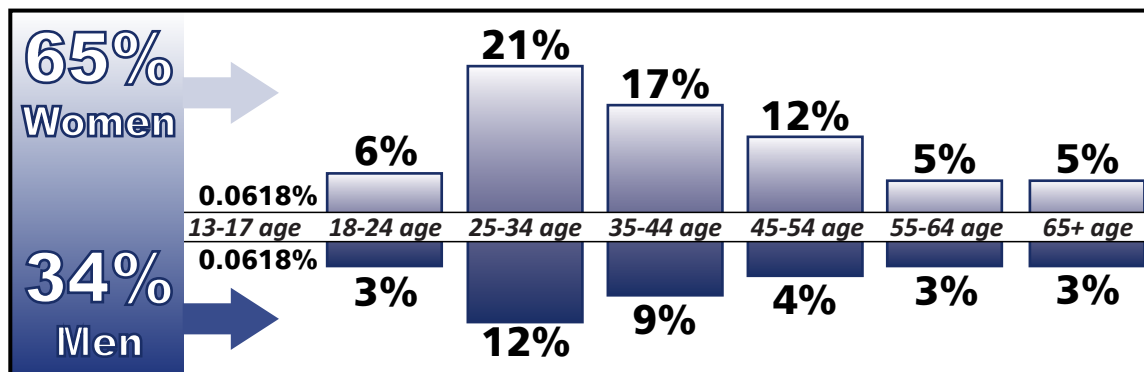
Newsletter

The GMHPN produces a monthly newsletter that contains activities of the GMHPN and Executive Committee members and informative content, not only targeted at the lived experience community but the broader public. The newsletter directly reaches over 2000 people globally.

Social Media




The GMHPN followers on **FACEBOOK** increased from 750 to 1589 in the financial year (2019/2020).



The GMHPN followers on **TWITTER** increased from 366 to 1299 in the financial year (2019/2020).

Virtual Groups

The GMHPN Country and Regional Executive Committees uses WhatsApp groups to stay connected, support each other, share activities and information. These virtual groups have resulted in the members of the Executive Committees becoming united in their advocacy and awareness work and establishing close relationships with one another.



My position as regional representative for Africa on the GMHPN Regional Executive Committee, means a lot for me as a person, and for persons living with mental health in my country. It is the validating of our experiences and an opportunity for me to join other global voices to make mental health matter. It is also a wonderful global opportunity to de-stigmatise mental illness and advocate for better inclusion policies with regards to persons with lived experiences, especially in a region like mine where mental illness is generally considered taboo, due to witchcraft or spiritual attacks.

Marie Abanga
GMHPN Regional Executive Committee Representative for Africa

Reporting Period:
April 2019 to March 2020

Campaigns

The GMHPN runs various campaigns throughout the year, including commemorative days and instances when specific topics are identified by the Executive Committees. The Network often partners with other organisations to strengthen campaign outcomes. Campaign materials and lived experience position statements are developed by the Global Office, endorsed by the Executive Committees, and disseminated jointly via social media platforms and other online and events platforms.

World Mental Health Day 2019

*Working together to prevent suicide
A day for "40 seconds of action"*

Key Facts

- Every **40 seconds** someone loses their life to suicide
- 800 000** people die due to suicide every year
- For every suicide there are **many more** people who attempt suicide every year
- A prior suicide attempt is the single most important **risk factor** for suicide
- Suicide is the **2nd leading** cause of death among 15-29 year-olds
- 79%** of global suicides occur in low-and middle-income countries



Together we can ...

- Raise **awareness**
- Work towards **eliminating stigma**
- Create **support** structures for those suffering
- Provide **safe spaces** to speak about struggles
- Make sure that **no one feels alone**
- Generate **hope**

Messages from GMHPN Executive Committee

#MentalHealthMatters, you can beat the odds and thrive, just like I am doing. *Marie Abanga (Cameroon)*

There's power of relating with lived experiences - when I share my experiences with depression, people listen, open up and start talking about theirs. *Enoch Li (China)*

We need to demand better mental health services, for treatment and promotion, but most importantly for prevention. Our governments are failing us, let us unite for mental health - you have a right to #speakyourmind! *Chantelle Baayen (South Africa)*

Stigma creates shame and shame aids hopelessness - this cycle needs to end and we as a community need to grow to empower each other in finding hope again, seek support and care. *Anjali Singla (India)*

It takes great courage and strength to live positively with a mental health problem and a lived experience person knows what that courage and strength feels like... the power of empathy. *Syd Gravel (Canada)*

It is our duty as leaders with lived experience to encourage, motivate and empower the next generation of leaders. *Kateho Thababala (South Africa)*



www.gmhpn.org
globalmentalhealthpeernetwork@gmail.com

Follow us on  @global_peer
Find us on  @GlobalMHPN

Key Principles for Effective Lived Experience Engagement

Empowerment

- Enabling persons with lived experience to meaningfully contribute at all levels by providing for adequate preparation and support including logistical support and safe spaces for participation
- Equipping persons with lived experience to become mental health and human rights literate, but also well informed on other relevant topics that would encourage rich discussions

Partnership

- Persons with lived experience's voices are at the centre of the conversation
- Persons with lived experience are actively involved - their contributions are reflected in engagement actions, policy and practice
- Persons with lived experience participate in a space where there are no power imbalances and recognised as experts by experience or otherwise

Respect

- Persons with lived experience's contributions are valued where they are acknowledged as equal and valued partners, and respected for their unique perspectives and experiences

www.gmhpn.org
globalmentalhealthpeernetwork@gmail.com



Reporting Period:
April 2019 to March 2020

Projects

Our Global Voice

The "Our Global Voice" project was supported by a grant from the Foundation Open Society Institute in cooperation with the Public Health Program of the Open Society Foundations

Receiving a diagnosis of a mental health condition or disorder can be a daunting experience and the way in which one receives such a diagnosis may very well determine just how difficult the journey ahead will become and whether it will lead to empowerment or disempowerment.

The consequences of how a diagnosis is received may be impacted by, whether:

- 1) The diagnosis was explained to the person and whether the person was given the opportunity to obtain clarity to fully comprehend the situation, and in doing so are able to meaningfully participate in their recovery— was the information given based on evidence?
- 2) The person was engaged with and supported to find the best treatment options that related to the person's unique needs – was the person involved right from the beginning of a diagnosis, during and after a treatment and later when a recovery plan was decided on?
- 3) The person was offered a range of treatment options to choose from – considered a person-centred and recovery approach?

On the negative side, when a person's diagnosis or treatment plan is not explained or shared with the person, and where they had been excluded from participating in their own treatment and recovery, disempowerment is activated— the chance of that person achieving quality of life and functioning at an optimal level of their full potential, may be jeopardised. This scenario of non-participation in mental health care and services, has human rights implications as well, in that it denies the person the right to free and informed consent, autonomy, legal capacity, and protection from coercion.

What do persons with lived experience think about this and what can we learn from their experiences? The GMHPN embarked on this quest to find out through its "Our Global Voice" Project. We video interviewed persons with lived experience from Ethiopia, Kenya, South Africa, India and the United States of America.

In addition to the video interviews, we obtained 27 lived experience perspectives from Bhutan, Canada, Ethiopia, India, Kenya, Mexico, South Africa, Zimbabwe, United Kingdom and United States of America, through an online survey questionnaire.

This project was completed at the end of August 2020.

Video interviews is available on



Short-Medium Term Plans

Executive Structure

- Expand representation on the Country Executive Committee
- Establishment of the Regional Executive Committee for each of the 6 WHO world regions, with an elected lead representative and deputy lead representative
- Establish Sub-Committees for: Research; Youth Mental Health; Peer Support & Recovery; Family & Carers; Quality Rights & Human Rights; Stigma & Discrimination
- Establishment of Honourary Mentors and Honourary Members structure

General Membership

- Develop VIP paid Membership for both individuals and organisations with specific special benefits

Partnerships, Representation

- Continue to strengthen existing partnerships and explore new partnerships
- Conclude and formally establish partnerships that have been in negotiations

International Engagement & Participation

- Continue to provide lived experience perspectives and recommendations at international engagement and discussion platforms
- Continue to involve lived experience members in research

Projects

- Develop a Peer Support & Advocacy Work online training platforms
- Webinar Series: Peer Support Work, Effective Advocacy, UNCRPD relation to Psychosocial Disability
- Set up of "Care for a Cuppa" Virtual Coffee Shop - promoting connectedness and preventing isolation during COVID pandemic

Services

- Finalise set up of services division of the GMHPN, including: Corporate Wellness & Workplace Mental Health Sessions, Employee Support and Workplace Policy Review/Development



My role on the GMHPN Regional Executive Committee is a vitalising booster to what sometimes feel like a rocky up-cliff journey, and an active propeller to encourage lived experiences to be part of the strategy in building mentally healthy workplaces. It is crucial to share best practices within and across regions so we do it together, and in a way that respects local cultures and thoughts.

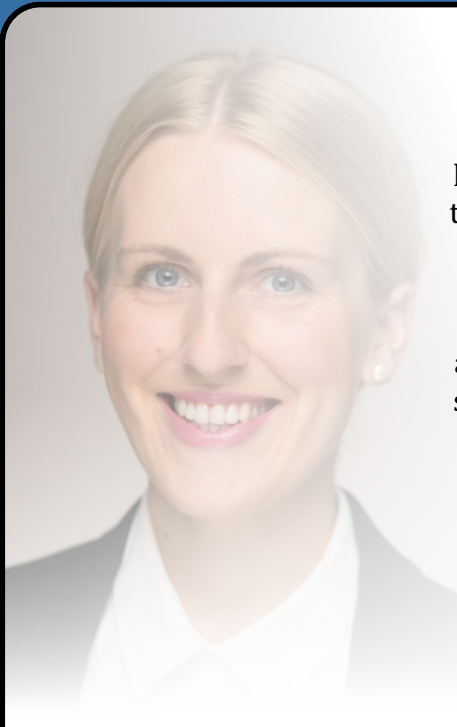
Enoch Li

GMHPN Regional Executive Committee Representative for Western Pacific

Long-Term Plans

Long-Term Strategy

- Achieve global lived experience representation in at least 150 countries in the world
- Establish regional offices to directly work with and in countries within the 6 WHO world regions, with the Global Office providing strategic support and coordination between regions



As a mental health professional and person with lived experience, joining the GMHPN has positively impacted me on both a personal and professional level. Connecting with other GMHPN members over the past months and hearing their individual stories has hugely increased my understanding of mental health recovery and showed me once again how important it is to implement a person-centered approach in mental health services. However, when speaking with my peers, it becomes more and more evident that many mental health services around the world still do not provide the care and support that people really want and need. Having just started a residency in clinical psychology on an acute psychiatric ward, I am motivated to make a change, advocate for the rights of people using mental health services and making sure that the voice of people with lived experience is heard.

With the support and huge experience base of my fellow GMHPN team members, I am sure I will be able to inspire change on my ward and beyond. On a more personal level, becoming a member of the GMHPN has reminded me again that it is okay to speak openly about my mental health and seek support from peers in difficult times. Being a therapist now, I tend to forget to take care of my own mental health but now with the support of my peers I am making sure to allow enough time for self-care and doing the things I love like running, yoga, reading and taking long walks with my dog.

Celline Cole

GMHPN Country Executive Committee Representative for Germany

Lived experience advocates for mental health at www.gmhpnp.org



Look at us ...

We are so much more than a diagnosis, we are invaluable in so many ways



Do we deserve to be *stigmatized*, perceived as *unequal, not worthy* of being part of society, *not eligible* to be rights holders ... ?



GMHPN
Global Mental Health Peer Network



Follow Us On
@global_peer



Find us on:
@GlobalMHPN

The Global Mental Health Peer Network

Annual Report 2020

Reporting period:
April 2019 - March 2020

Annual Financial Statements available on request
from gmhpn@gmhpn.org



Download newsletters:

April 2019

May 2019

June 2019

July 2019

August 2019

September 2019

October 2019

November 2019

January 2020

February 2020

March 2020

Make a
donation
CLICK HERE

Online Platforms & Other Links:



Website



Subscribe

Social Media Links:



General Membership:



Individual (Lived Experience)



Organisations/ Institutions

VIP Membership: NPOs & DPOs

VIP Membership: Companies

Contact Us:



Email



www.gmhpn.org

