



“Our Global Voice” Project

Introduction

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:

- 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?
- 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 diagnosis to after a treatment and recovery plan was decided on?
- 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 at all 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 Global Mental Health Peer Network (GMHPN) will embark on this quest to find out through its **“Our Global Voice” Project**.

About the “Our Global Voice” Project

In light of the above, the GMHPN will be implementing its “Our Global Voice” project, starting in 2019 over 3-year timeframe. The project will focus on the experiences, views, opinions and perspectives of persons with lived experience from diverse backgrounds in 6 countries - from low to high income countries (considering countries such as South Africa, India, Cameroon/ Kenya, Ukraine/ Poland, Canada, United States of America).

The “Our Global Voice” Project will consist of 3 components:

- Film production – documentary and short video clips
- Online photo exhibition – photos depicting the impact of a diagnosis
- Lived experience engagement report/ publication – survey

The Project will serve as an **advocacy and awareness initiative** that will be widely disseminated through the GMHPN structures, individual members, member organisations and partners of the GMHPN. A **dedicated website** will be developed to exhibit the video clips, photos, and messaging. The materials will further be utilised and incorporate into collaborative campaigning initiatives that aim to influence policies and legislation that directly or indirectly impact on the lives and quality of life of persons with lived experience.

The “Our Global Voice” Project ask the questions in order to obtain lived experience perspectives on the impact of a diagnosis and key factors that lead to/ hindered their recovery:

- *How did a diagnosis affect the person – was it a sense of relief or burden?*
- *How was the diagnosis conveyed to the person – and how would they have wanted it to be conveyed?*
- *How did the family and/or community respond to the diagnosis – and how would they have wanted the family and/or community to respond?*
- *Was the person involved in the treatment or recovery plan developed for them – is there a partnership between the person and treating psychiatrist/ doctor?*
- *What was most helpful with recovery or management of symptoms?*
- *What is the biggest barrier that prevented the person from achieving quality of life and/or having their human rights respected and protected?*
- *What would the person recommend to be implemented/ changed in order to improve mental health care and services in their country?*
- *In the person’s point of view, how could coercion in mental health be reduced/ eliminated?*
- *What does the person perceive as being harmful to them in services or interventions received for their mental health condition (either at present or past)?*
- *What does the person understand of what human rights mean and should mean to them as a person with lived experience?*

Call for Participants

The GMHPN seeks candidates with lived experience to be interviewed on camera and for still imaging – we are looking for 2-3 candidates per country/ location. Suitable candidates must comply with the following criteria:

- Must be over the age of 21 years
- Must have received a diagnosis of any mental health condition – diagnosis received 3 or more years ago
- Reside or work or are able to reach the film shoot location in:
 - ***Cambridge (USA)** – 10/11 September 2019;
 - ***Pune (India)** – 16 October 2019;
 - ***Johannesburg (South Africa)** - 3/4 December 2019.

Interested candidates can make contact with the GMHPN CEO, Charlene Sunkel at globalmentalhealthpeernetwork@gmail.com or WhatsApp +27 79 8966 963