

Social Innovation in Mental Health Care for Black, Asian and Migrant (BAM) Communities

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Community Therapies and Training
Service



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Creating Healthy Minds For Healthy Lives



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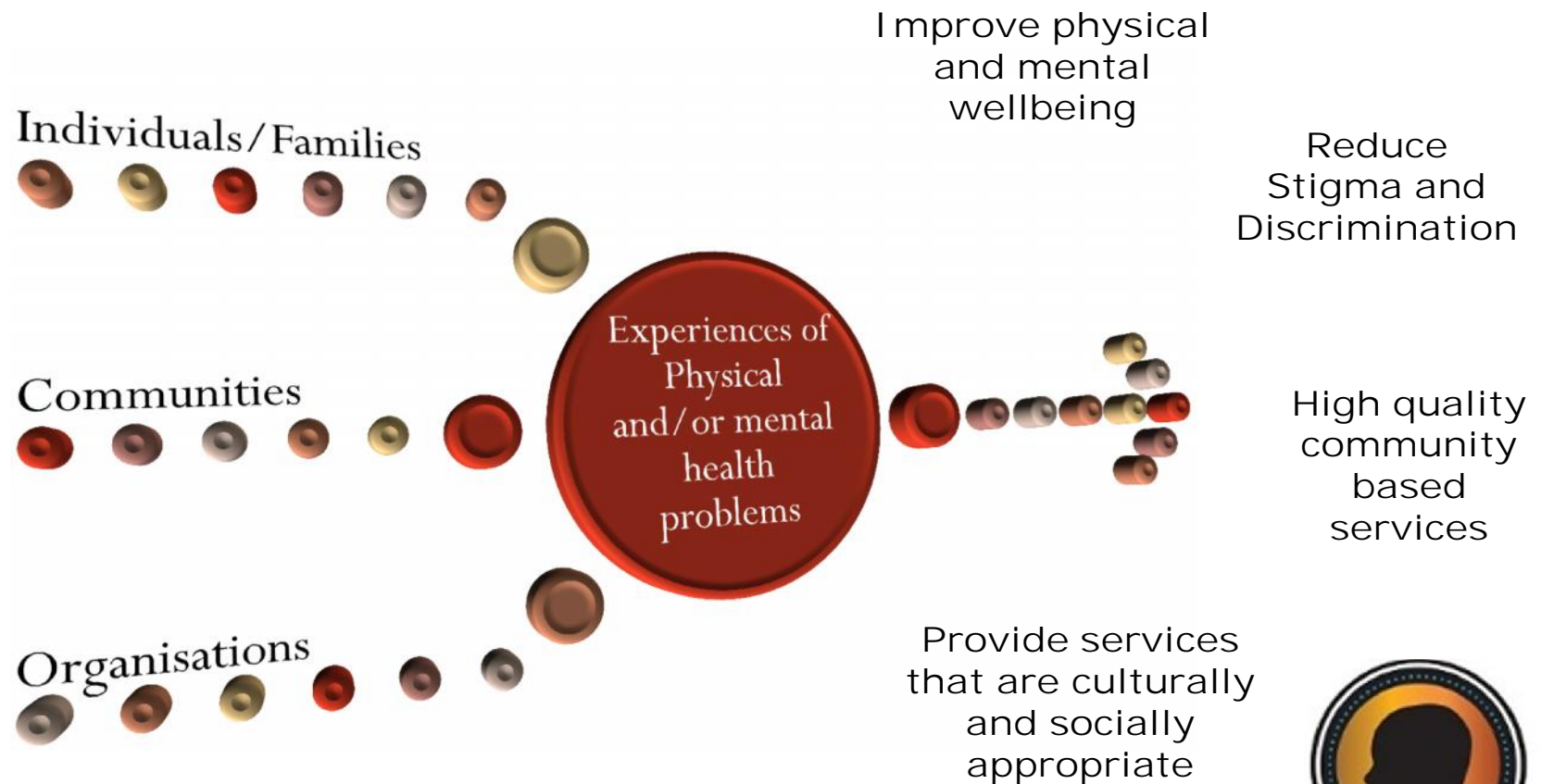
What do we do?

- Social Enterprise based in London, UK
- Health Problems, Mental Health Problems and Life Difficulties
- Talking Therapies, Community Development Approaches and Social Empowerment Models
- Reduce problems like Depression and Anxiety
- Community based support, programmes and training
- Specialise in supporting people from Black, Asian and Migrant Communities



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Our Mission



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What is Social Innovation

“Social Innovation refers to new ideas that resolve existing social, cultural, economic and environmental challenges for the benefit of people and planet. A true social innovation is systems-changing – it permanently alters the perceptions, behaviours and structures that previously gave rise to these challenges.

Even more simply, a social innovation is an idea that works for the public good.

Social innovations come from individuals, groups or organisations, and can take place in the for-profit, non-profit and public sectors. Increasingly, they are happening in the spaces between these three sectors as perspectives collide to spark new ways of thinking.”

Centre for Social Innovation, 2013



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Statistics in BAM Mental Health

- o Everyone's life has been touched by mental ill health
- o Mental healthcare system struggling to handle high levels of referrals and people stuck in secondary care
- o Men and women living in the most deprived areas are twice as likely to commit suicide.
- o 1 in 4 women have experienced some form of domestic abuse since reaching the age of 16
- o Migrant communities over represented in at acute end of mental health system
- o Muslim people have the lowest rate of employment of any religious group



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Major barriers to engaging Migrant Communities

- View of mental health/psychological therapies
- Historical treatment
- Fear/Trust
- International historical focus in HIV/Aids, Malaria, TB
- Lack of open dialogue about the impacts of race and racism on mental health
- Differences in history and migration into the UK
- Perceived links with mental health and spirituality/witchcraft
- Global view
- Lack of engagement with community and faith leaders



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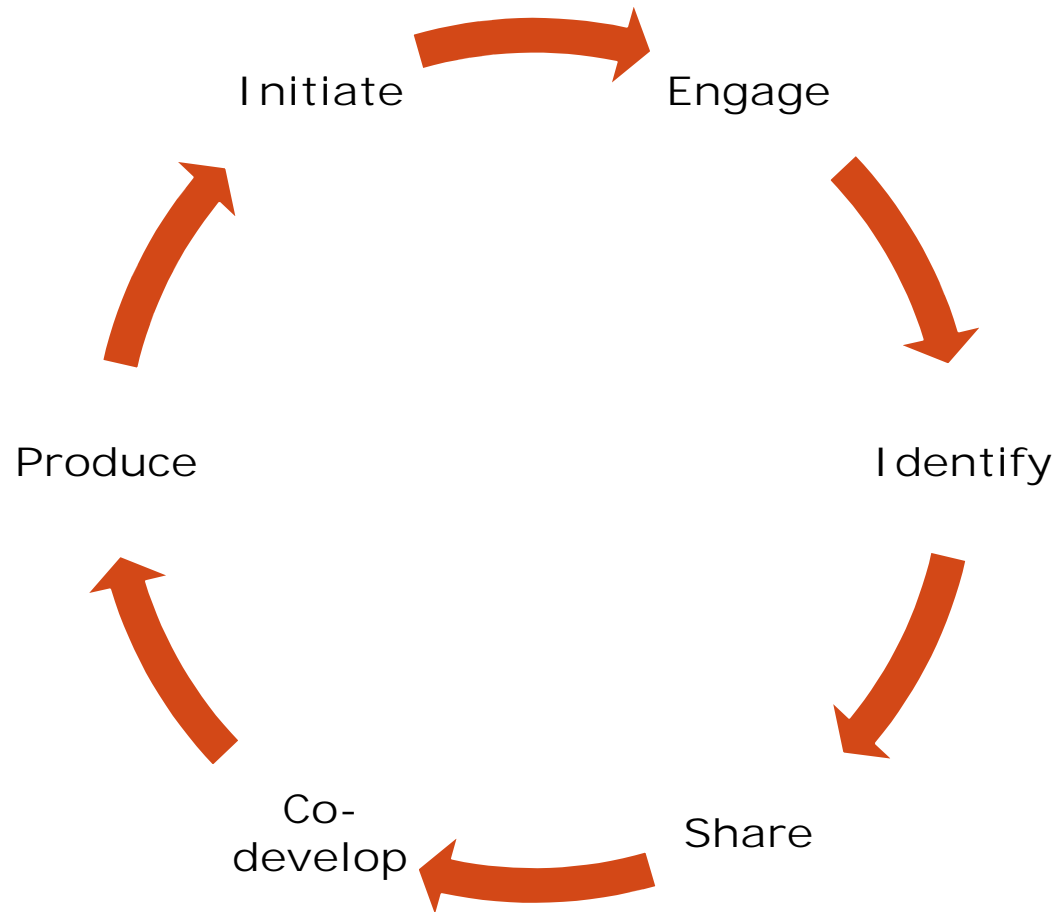
Tackling Stigma and Discrimination

- Explore communities view of mental health issues and psychological therapies
- Influence and change service provision
- Address and highlight cultural barriers – using workers' own ethnic origin with 'hard to reach' groups
- Addressing and opening the dialogue about the impacts of race and racism on mental health
- Engagement with community and faith leaders
- Partnership working
- Visits to local organisations
- Addressing the credibility of approaches within the statutory services and in the wider community



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Community Engagement Model



(Mwasambili, N , IAPT Lewisham Equality and Diversity Strategy 2011)



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Stage 1

- INITIATE
- Make contact
- Search topic
- Generate ideas
- Make visits
- Formulate

- ENGAGE
- Individual
- Group
- Organisation
- Forum
- Process (Allow time)
- Flow of information (2 way)

- IDENTIFY
- Needs
- Attitudes
- Discussion
- Prior Knowledge or experience (Personal/ Professional)
- Reports/Policy
- Consultation

Stage 2

- SHARE
- Service information (2 ways)
- Referral pathways
- Knowledge
- Contacts and established partnerships

- CO-DEVELOP
- Joint ideas/initiatives
- Strategy development
- Bid and Funding
- Referral pathways

- PRODUCE
- Partnerships
- Collaborations
- Workshops
- Training sessions
- Outreach events



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How to use the Community Engagement Model

- Flexibility with approach and use of assertive outreach
- Varying terminology depending on audience
- High profile events to individual meetings
- Managing and mediating politics
- Not time limited
- Addressing social and organisational cultures
- Open and warm attitude/approach
- Always willing to learn/demonstrating a passion and commitment to equality
- Negotiation
- Addressing cultural barriers in creative ways



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Current Project – The Rafiki Project

- Partnership with Africa Advocacy Foundation
- Funded by Time to Change
- Aim: To start conversations about mental health and stigma within African Communities
- 6 weeks of training for 50 Community Champions
- 25 with lived experience of mental health problems and 25 without
- Social Contacts with 1000 people
- Project life span is 1 year
- Sustainability plan – Champion leadership, additional funding, fundraising through products and peer support groups



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Current Updates – Rafiki Project

- 32 Champions recruited
- 22 people in Training
- Attended community Events including Festivals, community days, Churches, Mosques
- 260 conversations/Social Contacts
- Supporting the creation of culturally appropriate material for interventions

- Articles in Lambeth Talk, Lewisham Life,
- Interview on BEN TV



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Thank you for listening

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