ANNUAL REPORT 2019
Dear friends and supporters,

This year’s report is dedicated to our amazing partners that work hard every day to help people with mental illness and their families overcome challenges. Our core work would not be possible without people like them who demonstrate competence, show commitment, and truly believe in what they do.

Our partners face significant challenges in the provision of mental health and psychosocial support services. In order to reach individuals in remote areas, they travel through compromising weather and face poor road infrastructure. Others must work diligently and cautiously to heal the history of trauma in certain regions. Moreover, overcoming stigma is a challenge in and of itself with both service users and staff working in mental health facing judgment due to the negative conceptions surrounding this topic.

Yet regardless of the conditions, our partners act with enthusiasm to build a bridge between people struggling and the communities in which they live.

One of our main goals in 2019 was to strengthen collaboration with our partners. We made a point to increase opportunities for them to share their progress, any difficulties, and the option to find solutions together. Each event, conference, meeting, and field visit allowed us to meet with experts, mental health specialists, and people with lived experience to identify barriers and discuss lessons learned. Along the journey, we have learned that the individuals providing mental health services are in fact the first beneficiaries of our projects. Without the proper support and adequate training, they would never be able to really help patients recover. For this reason, capacity building has become a key component of the projects we support. Regular supervision and feedback are key to ensuring that staff develop personally and professionally in order to run quality programs.

It takes time, energy, and trust to build strong partnerships, but Fondation d’Harcourt is committed to fostering the relationships that help change lives.

Fortunately, over the last 2 years the environment in which we operate has steadily changed. More attention from government representatives, intergovernmental agencies, and new private donors has demonstrated now is the time to invest in mental health. Fondation d’Harcourt took part in this process by supporting the launch of the global campaign for mental health, “Speak Your Mind”, organized by United for Global Mental Health, in Geneva, Switzerland. Its main objective is (UGMH) to leverage powerful communications strategies to change policies globally and to connect directly with the public to promote mental health.

We thank our partners and everyone who contributes to making our mission a reality. There are still many more people affected by mental illness, their families and communities that need support and we look forward to next year’s progress and the many new developments to come.

- Gaia Montauti d’Harcourt

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

**Axis of intervention**

Fondation d’Harcourt achieves its mission by creating partnerships that fall within three main sectors of intervention:

1. **Ensuring access to mental health care**
   Ensuring access to mental health care means that every individual, regardless of socioeconomic standing or geographic location, can access the services essential for therapeutic recovery. Through capacity building programs for mental health care staff and health personnel, targeted community outreach programs to reach patients in remote areas, support to mental health structures, by facilitating referral networks, and by fostering environments conducive to recovery, we along with our partners are breaking down the barriers to mental health care.

2. **Empowering people suffering from mental illnesses and their families**
   Fondation d’Harcourt believes that empowerment facilitates recovery by allowing individuals to feel like the protagonists of their own lives. Within this axis, the objective is to overcome the barriers such as, stigma, discrimination, and social exclusion which make reintegration into society difficult for people with mental illnesses. Education and awareness are key in this process at both the individual and community level. Our partners take a holistic approach to mental health sensitization and aim to include families, local communities, and in some cases national and international stakeholders. Through recreational and artistic activities, comprehensive and educational e-training programs, and social reintegration efforts our partners work to empower people with mental illness and to change the environment in which they live.

3. **Promoting the psychosocial wellbeing of vulnerable groups**
   Typically, circumstances that predispose individuals to mental health issues involve a collective intertwining of individual, family-related, social, economic, and environmental risk factors with a lack of protective factors. By promoting the psychosocial wellbeing of vulnerable groups Fondation d’Harcourt aims to prevent the future potential for the development of mental health illness. There is strong evidence linking risk and protective factors to the development of mental disorders especially in groups such as migrants, refugees, young mothers living in social isolation and poverty. Together with Fondation d’Harcourt’s support, our partners are able to reach these groups through individual and community support, sensitization, and psychosocial activities.
Ensuring access to mental health care

Partners

“Providing quality mental health care to the patients should never be a routine. I understood that personal contact with patients and a tailor made approach is important. We, as coaches, got insight into the fact that knowledge, skills, and attitude are all part of being a good care provider.”

-William, Coach in Kasaka (Fracarita).
I learned about CVT because they came to the community here in Uganda and said they were opening a center to do counseling for those who were tortured in the LRA war. They said if you've undergone torture or they forced you to do terrible things, you should come. The things they talked about were all things that I went through. So I came to CVT.

I didn't have someone to support me then. But because CVT was coming, I thought I'd get better. They really created a humble environment for us – they gave us the room to share and to cry. This made me feel relieved.

There have been so many changes in my life since CVT I can't even mention them all. When I first came I used to cry all the time. I had two family members who were killed while I was right there. I kept crying and worrying, I kept imagining their deaths.

After counseling, I realized it's not only me – there were others who had similar problems. Counseling helped me to be strong and to understand my problems.

Before coming to CVT, I could not imagine that someone could have all these problems but then go on to a good situation. It helped me. Now when I'm going through difficulties, I know that this is part of life. The good times are also part of life. I learned this through counseling. CVT works hard to see that people have healing in their hearts.

CVT made me realize you as a person are important.

For those who've also gone through difficult times, I hope they know they can get help by coming. I want them to know: You're still a human being. Have love. Feel that you are also being loved.

CVT made me realize you as a person are important.
Mental Health Trauma Rehabilitation for Ugandan Victims of War Crimes
The Center for Victims of Torture (CVT)

The Lord’s Resistance Army (LRA) conflict lasted almost two decades and had devastating psychological, social and economic effects that are still pervasive in today’s communities. Committed to alleviating trauma, our partner CVT’s attentive and holistic approach allows survivors to rebuild their lives and reconnect with their communities in the Gulu District of northern Uganda. Building on community engagement, CVT holds sensitization activities in order to raise awareness about the effects of torture and trauma on individual survivors as well as to identify LRA-affected communities in need of mental health services. This year CVT managed to conduct 11 community sensitization activities reaching a total of 408 community members. CVT also provided quality trauma rehabilitative care through group counselling and individual therapy for 300 patients showing symptoms of posttraumatic stress, depression, or other behavioral dysfunctions. After an initial phase of emotional stabilization and trust building, CVT counselors guide clients through the reprocessing of traumatic memories. Opening up can be challenging and patients are supported throughout these very delicate moments. These sessions end with containment and integration for the group and concentrate on looking to the future as well as reconnection to self and others. Key to providing such quality care are the capacity building efforts promoted by CVT for their mental health staff. The intensity of emotional expressions can be challenging for even experienced counselors, and CVT encourages staff to seek support from their co-facilitator and supervisor, and to engage in self-care. In January, CVT Uganda’s Clinical Advisor for Mental Health, Veronica Laveta, conducted a clinical supervision visit to Gulu, reinforcing the knowledge and skills to provide effective counseling and help counselors refine their approach to case management. In an effort to strengthen the provision of mental health services wide-scale, on-going clinical supervision is also provided to other service providers in Gulu and a training on specific trauma and mental health problems is held each year.

Looking forward to 2020, CVT, in collaboration with Makerere University’s Department of Psychology, is planning a new trauma counselling diploma program for which 15 participants have been selected.

Outputs

- 408 people reached through community sensitization activities.
- 300 new beneficiaries received high-quality trauma rehabilitative care
- 216 clinical supervision sessions for CVT’s PSCs
- 21 clinical supervision sessions for CVT’s mental health staff and other organizations
- 10 training sessions on mental health
Improving mental health care in the Great Lakes Region
Fracarita Belgium

The mental health care challenges faced throughout the Great Lakes Region of Africa include lack of adequate infrastructures, a shortage of qualified mental health providers, and stigma surrounding mental health conditions. Through this project, our partner Fracarita Belgium is committed to improving the quality of professional mental health care services in the region. Fracarita aims to enhance the competencies of mental health personnel by working within 5 of their psychiatric hospitals located in Rwanda, Burundi, Tanzania, and the DRC. Mental health nurses meeting a strict set of criteria are selected from each hospital and trained as coaches at the Caraes Neuropsychiatric Hospital by Rwandan and international mental health experts. Two 10-day training sessions are organized every year, after which the nurses are certified as full-time coaches and are then qualified to provide on-the-job-training to other nurses. Veronique Coppin, a psychiatric nurse from Belgium, as a trainer and supervisor assists coaches in widening their horizons to increase nursing attitudes and competencies, particularly on communication and team building. During 2019 Fondation d’Harcourt attended one of the trainings for coaches led by 2 psychiatrists. Fracarita’s methodological approach to the coaching program is called ‘intervision.’ By discussing practical issues together, intervision serves as an effective method for coaches to learn from themselves and from each other. The system of training and peer-supervision ultimately improves the quality of life of mental health patients by offering the highest possible quality of care. Such care is monitored through quality instruments that have been developed to monitor mental health patients, continued care, and nurse performance.

An additional component of the project includes building competencies among pharmacists within the network’s hospitals. Similar to coaches, annual regional training sessions are carried out by an international expert pharmacist who also provides on-the-job supervision. At the same time, hospital directors and doctors are sensitized on mental health and on the important role of coaches.

Outputs

- 5 regional mental health hospitals involved
- 1 regional training session of coaches
- 1 regional training session of pharmacists
- 1 supervision for coaches and 1 for pharmacists
- 1 intervision session carried out between coaches
- 1 regional seminar (Quality of Life)
The Step-by-Step project, initiated by the World Health Organization (WHO) in collaboration with the Lebanese Ministry of Public Health, aims to address the needs of the Lebanese population and the more than 1.7 million refugees within its borders through a computerized psychological self-help therapy. During weekly 15 to 30 minute sessions, participants are provided with relatable, context-appropriate narrative scenarios through which they learn key therapeutic techniques such as behavioral activation, stress management, and relapse prevention. Sessions take place over email or telephone and are guided by non-specialists called “e-helpers” who are supervised by a clinical psychologist. E-helpers offer technical assistance, motivational, and emotional support within the scope of the project.

The project is being rolled out in three phases. Phase 1 of the project involved the development of a generic computer-based (c-CBT) intervention in English that was adapted for Lebanon (in Arabic). The software has been tested in health service settings in Beirut and assessed Lebanese, Palestinian, and Syrian refugees suffering from anxiety or depression.

In 2019 the project entered phase 2 and in May a planning meeting was held to present the results and lessons learned of the feasibility randomized control trial (RCT) and to discuss and make decisions pertinent to the design and implementation of the definitive RCT. In particular, a professional creative writer was contracted to render the story narratives more engaging and to better reflect the ups and downs in the process of overcoming psychological distress. A feature called “My Journal” as well as a “Mood Tracker” were also developed allowing users to track their activities and emotions. All content (i.e., texts, illustrations, and audio) was added to the app and is currently being tested by e-helpers. There are a total of 16 versions of the narrative to accommodate people of varying cultures and backgrounds.

As the year came to an end, the project team launched the definitive RCT of the intervention to scientifically confirm its effectiveness. Results of the process will be available in 2020 and if positive Step-by-Step will enter in phase 3 to be scaled up in Lebanon. Phase 3 will also serve as a guide to develop a sustainable implementation model that can be used in other countries around the world.

**Outputs**

- 3200 people expected to benefit from the project
- 5 e-helpers trained
Perinatal depression is not an uncommon experience for new mothers, but in conflict-affected populations rates tend to be higher, placing women and their babies at a higher risk of preterm labor, low birth weight, malnutrition, and other obstetric complications. In an effort to prevent such cases, the Maternal Mental Health Initiative (MMH), implemented by our partner HealthRight International, places a spotlight on the needs of soon to be mothers. MMH aims to reduce cases of maternal depression and improve maternal functioning in Uganda through a cost-effective context appropriate stepped care model. In collaboration with the Ugandan Ministry of Health and Johns Hopkins University, the project begins with perinatal visits during which pregnant women are screened for signs of depression. Those testing positive receive care such as psychoeducation classes which teach women about the causes of depression, its symptoms, and simple self-care techniques to help alleviate them. Depending on the severity of each case, women requiring further care may attend interpersonal therapy groups (IPT) or are referred to specialized care. Husbands of the women and other men are also involved in the process as their attendance has been shown to improve the effectiveness of the intervention. Originally implemented only in the Soroti district of Uganda, the project has been scaled up and extended to the Kitgum, Lamwo, and Lira districts. In Lamwo, the program has been embraced by the community and the mental health team has successfully increased the number of mothers at antenatal care clinics (ANC); Similarly, in Lira there has been improved attendance at the antiretroviral treatment (ART) clinic due to the services offered. In situations where follow-up is low after the initial screening, for example due to travel distance or during periods of heavy rain, the community psychosocial assistants and village health teams follow-up through home visits. Over 200 home visits were conducted this year, allowing women to receive in-person individualized care. By the end of 2019, the project reached 163 women who attended IPT, 6,212 perinatal women who were screened for depression and supported an additional 1,867 women with psychoeducation classes. In addition to supporting pregnant women, the project also works to sensitize family members and the local community. The maternal mental health team conducted 786 health education talks reaching 17,754 people and an additional 246 community sensitization meetings reaching 16,971 individuals. The community and community leaders responded to these interventions with positive feedback. In September, a training was held in Kampala for the entire HealthRight Uganda team. Emmanuel, the Lira field team lead, skillfully led an IPT refresher training that not only strengthened the counseling skills of the maternal mental health field teams, but also empowered these teams to lead the IPT training of village health teams in Lira and Lamwo.

**Outputs**

- 6,212 perinatal women screened for depression at ANC
- 1,867 perinatal women receive psychoeducation
- 100% women enrolled in the stepped care model showed decrease in depression symptoms
- 16,971 people sensitized on maternal mental health

“Psychoeducation helped me understand the fact that it was depression that led me to loss of interest in many things, and negatively affected my functions.”

- Mother, Palabek, Lawmo Town
Building capacity and implementing mental health services in Burundi

Village Health Works (VHW)

With only one psychiatric hospital in Burundi, the treatment gap for those requiring mental health services is 95%. To close this gap, our partner Village Health Works (VHW) runs a clinic to provide quality care in a remote area of Burundi. VHW's aims to strengthen the capacity of mental health staff and providing quality essential mental health care, in particular for pregnant women. Capacity building is central to the success of VHW's mental health team. Regular supervision and mentoring were provided on a weekly or biweekly basis by Burundian and international experts for the mental health team. This ongoing training helped the team improve their skills in the management of psychiatric patients as well as to improve outreach and identify specific needs in the community, such as the need for more expansive maternal mental health care services. Throughout 2019 capacity building efforts for staff were aimed at strengthening community interventions and training community health workers and lay counselors on the follow-up of pregnant women in the community. Capacity building efforts also led to the discovery of a need for meaningful engagement with the community. Launched by VHW, Twiyugurure, which means “opening up” in Kirundi, is a community-based support program. Sessions focus on self-understanding, individual behavioral change, communication tools, and building relationships between family members. Within an environment of trust the participants open up and are provided support as they confront and understand past traumas. Thanks to the dedicated work of VHW, 2019 saw 185 graduates from the program. In addition to the Twiyugurure group, VHW has continued to provide mental health evaluations, treatment on site and in the community, psychotherapy services, psychoeducation for families, and sensitization sessions for the community on how to overcome the stigma surrounding mental health. To support soon to be mothers, VHW screens pregnant women for symptoms of depression. These screenings allow the team and Community Health Workers to do more targeted and effective community-based interventions among vulnerable women. This year VHW screened 1,296 women for depression, while making referrals for those in need of additional services. VHW also provided antenatal care clinics to an additional 986 pregnant women in order to prevent potential health problems and promote healthy habits which benefit both mother and child.

Outputs

- 679 patients and patient family members benefited from therapy
- 986 women attended antenatal care clinics
- 1296 pregnant women were screened for symptoms of depression
- 857 patients participated in mental health sensitizations
- 104 community Leaders were educated on mental health conditions
- 185 graduates from the “Twiyugurure” groups

“I was the most dangerous person of the community. I took many drugs so I could confront anything. When I heard about a program called Twiyugurure, it was like a miracle that I decided to join. I decided to listen for the first time in my life. I reduced my drinking and am now able to maintain a conversation with family, and with neighbors. I now understand what is wrong.”

- Patient, VHW
Adolescence is a very delicate and unique time. With half of all mental illnesses beginning by age 14 and three-quarters by an individual’s mid-20s, early detection and treatment are crucial to better recovery outcomes. In one of the most troubled neighborhoods of Milan, Omada, a neuropsychiatric residential community run by Associazione Gruppo di Betania Onlus, works to improve the quality of life for 10 girls, ages 12-17 with mood and personality disorders. Omada has been identified as an appropriate residential community to support adolescents in need and typically receives minors from competent local authorities. After a period of observation and consultation, Omada creates an Individual Rehabilitation Therapeutic Project (PTR) together with the adolescent and her family. Omada aims to strengthen each girl’s identity and encourage constructive relational experiences. While respecting the transformations and changes expected in adolescence, Omada integrates quality clinical services into rehabilitative and recreational activities such as, theater courses, physical activities, music classes, pet therapy, reading, and swimming. These activities help adolescents overcome personal challenges and are guided by a highly qualified multi-disciplinary team that takes into consideration all aspects of the children’s lives.

Omada applies a collaborative-therapeutic method that helps young patients reconceptualize their life which in turn engages them in a constructive path to self-discovery. In fact, the path of a teenager in this therapeutic community, even in the initial phases, could not thrive without collaboration between the team and her family. Families play a key role in a child’s development and therefore Omada involves them in all phases of the rehabilitative process. The multidisciplinary nature of the team provides an added value to the program. The adolescents benefit from a broader range of refined and technical skill sets, each of which aids in the improvement of psychosocial and psychophysical well-being. Moreover, regular clinical supervision is carried out and professional technical exchanges are facilitated to build the holistic and integrated approach of the team.

**Outputs**

- 10 adolescents supported at Omada
- 16 family members supported and involved
- 21 specialists (psychiatrists, psychologists, educators and social workers) involved

“*A person is infinitely more than the problem for which they arrived into the community, just as I am much more than the role I play as Director.*”

- Director of Omada
Last night my lovely wife Abiba said I’ve changed; I’m more open and respectful. She noticed this few days after the QRGhana Face-to-Face Training of Trainers at Tamale (Northern Zone Training)

- Abu-Ibrahim Nikiema, Mental Health Nurse(Qualityrights Ghana)
Our daughter, now 20 years old, was born in Colombia and we adopted her when she was 9. As a child she was always very affectionate, but as difficulties with her peers emerged, she began to feel rejected by her companions. She usually appeared very exuberant and sociable, but in reality, she harbored so much anger and a sense of rebellion that erupted with adolescence.

We helped her with psychological support and with medication that helped stabilize her mood, but she became increasingly intolerant of her surroundings. Angry at family and friends, at 18 she dropped out of school and left home seeming to search for something that would give her life meaning and provide a solution to her unhappiness.

Since she “abandoned” the family, school, psychological support, and medication, she no longer engaged in any type of hobby or study projects. Her inconsistencies and mood swings prevented her from building any healthy relationships and she soon began a depressive co-dependent relationship with a boy. Together they maintained a level of emotional stability, but it consisted only of negative behaviors and attitudes.

In previous years we had made contact with our daughter’s therapists several times and we had also tried family therapy. Despite doing so, we had made little progress and could not understand the real situation in-depth. We felt out daughter had run out of options and we were lost.

Linda’s story continues when we learned about Fondazione di Liegro. We started attending their course for volunteers and family members of people with mental illness where we got to hear from professionals and other families. The discussions opened a window on a world with which we had been in contact, but had not fully understood. Concepts, keywords, and suggestions received in the past acquired a different meaning for us. Thanks to Fondazione di Liegro we look at our daughter with new eyes and with less anger for all the pain we have experienced.

Fondazione di Liegro also allowed us to attend a self-help group, introduced us to multi-family therapy, and gave us the opportunity to volunteer. We thus came into human contact with people who, like our daughter, experience mental discomfort. Together with them, we carry out simple but significant activities such as singing, drawing, theater, or sewing.

In recent months Linda’s story has evolved: she has managed to perform some small tasks from time to time. Now the challenge is that of autonomy. We gave her the opportunity to live with her boyfriend and to learn how to manage a home and daily life. Our hope is that as she improves, she will find what motivates her in life and discover a sense of serenity.
Adolescents and mental health—the challenge of prevention

Fondazione Internazionale Don Luigi di Liegro

With a focus of creating a solid community-based network to support people suffering from mental illness and their families, our partner Fondazione di Liegro (FdL), has worked hard in the past years to raise awareness on mental health and strengthen collaboration with families, local health authorities, volunteers, and universities. Through recreational and socialization workshops, FdL bridges the gap of social isolation and helps each person rediscover their potential, improve their self-esteem, and reintegrate into society.

In 2019, 81 people attended workshops on photography, music, painting, and sewing. One of the most fascinating workshops this year was one involving theatre. It was organized in collaboration with the Accademia delle Belle Arti di Roma and participants were asked to share their emotions on the concept of housing which then culminated in a show called “Home Cabaret.” Participants wrote the script themselves with the support of a talented director.

The experience Fondazione di Liegro has developed along the years in mental health taught them the importance of prevention. Since 2017, FdL has developed and implemented a training course focused on adolescence and mental health. The course works to raise awareness and teaches participants, which include family members and volunteers, how to face the difficulties linked to living with a mental health condition. With the help of local health authorities, a peer education program was also proposed to two high schools in Rome. This program provides mental health sensitization and involves students as “peer counsellors” to influence peers’ knowledge, attitudes, and behaviors towards mental health questions.

This year, Fondazione di Liegro along with several other stakeholders, national and international experts, hosted the “S.O.S Giovani” conference in Rome which explored different forms of addiction in adolescents. These included psychoactive substances, internet dependency, and the hikikomori phenomenon. Experts underscored that the only possible way to overcome the rise in these addictions is through awareness raising and training.

Outputs

- 81 people, 30 volunteers, 9 trainers and 3 coordinators attended art therapy workshops
- 51 people attended the adolescents and mental health course
- 513 students involved in the Peer Education Program
- 40 students became peer counselors
Promoting recovery and respect for human rights for people with mental health conditions

World Health Organization (WHO)

While Ghana has certainly made positive steps to improve the conditions of people living with mental health and psychosocial disabilities in the county, poor care conditions and human rights violations still occur in mental health services. In order to promote human rights and recovery effectively and sustainably in all settings and at all levels, this project run by our partner WHO and other stakeholders, uses an e-training foundation course with online coaching on mental health, human rights, and recovery to improve knowledge, attitudes, and practices.

The national launch of the QualityRights Initiative in Ghana took place on the 26th of February 2019 and involved close to 800 stakeholders. A multi-stakeholder project meeting was held directly after to discuss organizing face to face capacity building meetings, strategies, and a timeframe for the wide scale roll out of the QualityRights e-training platform. A national workshop was also held in May 2019 to explore how to implement the WHO QualityRights assessment toolkit and methodology. To make the project more accessible, a specific website with access to the WHO QualityRights e-training platform and a series of video messages was created. The website displays personal stories and key messages related to mental health and human rights. It also offers a comprehensive social media campaign package for Facebook, Instagram and Twitter to encourage people to engage with the initiative.

The QualityRights project management committee monitored the overall progress of the project and suggested increasing communication activities to reach and engage stakeholders in all key sectors. This strategy led to the project reaching over 17'000 people across Ghana and over 6000 people completing the e-training course to receive a WHO certificate. Additionally, two national and four regional QualityRights training workshops were held covering how to conduct human rights assessments using the WHO QualityRights Assessment. Three teams are now being formed for the assessment of mental health facilities in the country.

**Outputs**

- 17'000 Ghanaians registered for Quality rights e-training
- 6'000 Individual successfully completed quality rights e-training
- 1 national launch of the initiative
- 1 website and 1 social media campaign run
Suicide prevention and treatment for adolescents
Children Action

School pressure, anxiety, and eating disorders are among the many risk factors adolescents face today. If left untreated, these risks can lead to suicide which is the most common cause of death in Switzerland among 15 to 19 year olds. Artopie, a project implemented by our partner Children Action and the Hôpitaux Universitaires de Genève (HUG), combines art and healthcare inside and outside the hospital. The project intends to support youth ages 13 to 25 in distress or at risk of suicide.

The program facilitates social, cultural, and recreational activities with several key objectives. First and foremost, activities are organized to give youth an opportunity to experiment with their creativity and occupy themselves while being hospitalized. Subsequently, they improve adherence to treatment and care. By raising awareness about suicide and suicide prevention, the activities also create a close relationship between youth, health professionals, and communities.

In 2019 several activities were realized, from visiting the theatre of Geneva and discovering how the theatre works to attending the annual Festival du Film et Forum International sur les droits Humains. In October, the adolescents participated in the Festival Animatou, where they watched and discussed movies and short films selected specifically for them. Creative activities included poem writing, a YouTube workshop, and a workshop based on the ‘light painting photographic technique’ which had a relaxing effect on the participants. A play was also organized for adolescents to share their scripts and express themselves through theatre. Music therapy workshops, managed by the music therapist Hubert Colau, were held for children 13 to 18 years of age.

Finally, sport activities such as fitness and yoga were implemented in public parks. All of the activities, run by experts, included the presence of a nurse who supported the children in dealing with any challenges they may have faced along the way.

Outputs

- 11 engagements with the city
- 4 mediations within the hospital

Attending the music group gave me the possibility to express myself without feeling pressure of performance and it encouraged me to go back to school with a more positive approach.

- Adolescent, Malatavie

Switzerland
Children and teenagers hospitalized for mental health diagnosis and treatment recover faster when the multifaceted nature of their lives is taken into account. At the Child and Adolescent Psychiatry and Addiction Clinic in Cluj-Napoca, our partner Fundatia Inocenti, is doing exactly that. Fundatia, along with a team of both psychologists and volunteers, is committed to helping adolescents develop coping mechanisms and executive functioning skills. With each individual child, the team is sure to take into consideration all of the components making up a child’s psychological well-being, from psychological to emotional and social needs.

Every Monday through Friday, sessions of psychosocial support, recreational, and occupational therapeutic activities are carried out for the hospitalized children. Fundatia pays special attention to the importance of one-on-one conversations with each beneficiary and reserves a time for the adolescents to have meaningful in-depth conversations about the problems they face.

In collaboration with the Clinic’s medical staff, Fundatia maintained beneficial relations with the nurses and took time every day to talk to them at the beginning and end of the program. On an ongoing basis the psychological team shares important information with the medical team to ensure integrated and comprehensive treatment for the adolescents. The psychological team also provides support to families in dealing with the challenges their children may present.

In addition to the activities that took place at the Clinic, in 2019 Fundatia engaged in prevention activities in local high schools. They focused primarily on promoting mental health and providing teens with the resources necessary to develop healthy coping mechanisms. 4 mental health awareness sessions were held at the “Emanuel Baptist & Theological” High School and “Avram Iancu” High School reaching a total of 316 students. Three psychologists from the Fundatia team helped students to better understand the symptoms of depression, anxiety, and eating disorders as well as how to face such challenges. The interjections and emotions expressed by teens were touching and their existing awareness on several of the issues discussed was impressive. “We should talk about how we feel, express our emotions, and mostly we should not ignore the signs. When needed, we should ask for help” one teen shared.

- Psychologist at Fundatia Inocenti

### Outputs

- 455 hospitalized youth received psychosocial support
- 14 families received individual psycho-social and material support
- 134 parents benefited from individual and group support sessions
- 316 high school students participated in mental health awareness sessions
Promoting the psychosocial wellbeing of vulnerable groups

Partners

“Before the project, I was sick. I felt like I was in a black hole from which I could not get out. I didn’t speak, I felt useless, I was depressed. I wanted to leave my husband and at the same time I didn’t know what to do. In a panic I think I would also have left my children. Then I met the CBM operator who pulled me out of the black hole I was in. She has helped me and is still helping me when she comes to visit me.”

-CBM Beneficiary
Adele arrived in Switzerland with her husband with whom she had built a professional and family life. After the birth of her first child, her husband's behavior drastically changed and her marital relationship became increasingly tense. Adele felt she no longer recognized him and he no longer seemed motivated by the life they had built together. She began to feel increasingly isolated and as violent behavior began to take place between the couple, Adele sought help.

During the first consultation at Centre de la Roseraie, Adele told the psychologist she felt lost. The violent nature of the relationship had caused her to lose all contact with those around her and she could not find a viable solution to take shelter from the violence, reclaim a sense of calm, or rebuild her life.

It was clear to Centre de la Roseraie staff that Adele was in shock and displayed symptoms of depression.

The first step Centre de la Rosarie took was to actively listen to Adele. This allowed her to express what she was going through and it allowed the staff at the Centre to provide an appropriate response to meet her needs. She was offered psychosocial support including psychotherapeutic sessions. Adele also learned emotional management tools as well as the importance of rebuilding a network of reliable and supportive people around her. During her time at the Centre, she received tailored support which provided essential responses to other aspects of her situation, including legal assistance to obtain relevant and timely information about her rights in the process of separating from her husband. Adele is now separated from her spouse and holds custody of her child. She is benefiting from psychotherapy sessions and has begun looking for a project that will allow her to fully regain her independence.
Retrouver sa voie/x
Centre de la Roseraie

From the perspective of an outsider, reaching Switzerland after a long and difficult journey could be seen as the end of all problems and the beginning of an easy life. However, for migrants and refugees, language barriers, securing work permits, housing, and lack of insurance all present new, and oftentimes very technical obstacles. Without a supportive network of family or friends, each new challenge has the potential to exacerbate existing mental health conditions for already vulnerable individuals. The Roseraie Center, based in Geneva, is a unique place whose mission is to prevent social exclusion and improve the quality of life of refugees and migrants. Welcoming orientation sessions, recreational and social activities provide people an opportunity to share difficulties, learn how to cope with their new reality, understand their surroundings, but most importantly socialize and build new relationships. For participants struggling with mental health conditions, a referral pathway for recovery has been made possible thanks to the creation of a network of experts in mental health, public and private partners. This project focuses primarily on psychosocial support while applying a comprehensive approach to integrating migrants and refugees into a new society. In 2019, 797 people were supported through informational sessions covering health resources, local health networks and how to access them. 17 thematic workshops, some of which covered mental health issues such as depression, were also carried out and regular group therapy was attended by 349 people. Collectively, these sessions and workshops helped to destigmatize mental health problems for migrants and refugees and allowed the Center to screen and detect psychiatric disorders. 77 participants received individual psychological support and the most vulnerable cases were referred to specialized care. The majority of people asking for support were women coming from Latin America between the ages of 36 and 50 years old without a stable permit or work with a high salary.

In 2019 the Center also participated in the Walk the Talk march and launch of the Speak Your Mind campaign held in Geneva to raise awareness on mental health.

Outputs

- 797 people provided psychosocial support
- 77 people received individual psychological support
- 349 people involved in group therapy
- 17 thematic workshops organized
- 85 people referred to specialized organizations
In Bolivia, the most multicultural country in Latin America, many people live in conditions of extreme poverty and psychosocial vulnerability. In such a fragile setting, young women and children are among the most exposed to health risks and experiences compromising their wellbeing. Access to quality healthcare and social support is limited and their needs are often poorly understood or overlooked. The El Taypi project, developed by our partner CBM Italia Onlus in collaboration with two local partners Caritas (in La Paz) and Añanakuna (in Chuquisaca), takes a community-based approach to supporting women and children. Using the MhGAP guide developed by WHO, the process starts by strengthening the competence of health personnel on mental health in order to identify pregnant women and mothers showing signs of postpartum depression. Psychology students trained on the management of perinatal depression and mental health provide individual psychosocial support to mothers identified at the community level. They create a strong relationship with each mother so that the women feel comfortable sharing their doubts, fears, and uncertainties. These interactions allow mothers to understand themselves and their emotions better and help them develop a healthy bond with their babies. Self-help groups have also been set up so that women do not feel alone during the difficult journey of motherhood. To be as effective as possible the project focuses on prevention by promoting early detection, diagnosis, and therapy within schools of children with psycho-emotional and psychosocial problems. Teachers are trained on how to conduct early detection of psychosocial problems and any child identified as needing support is then introduced to play therapy and individual psychotherapy. The most vulnerable cases are referred to specialized care. Their families are involved in the process through sensitization sessions on the prevention and treatment of mental health disorders.

**Outputs**

- 70 health professional trained on mhGAP
- 37 psychologist students trained
- 191 pregnant women supported and followed up
- 229 families sensitized on child mental health
- 80 children receiving therapeutic support
- 160 teachers sensitized and trained
- 101 children attending play therapy sessions
- 1094 children sensitized on the “treat us well” module
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ANNUAL REPORT 2019

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INCOME AND EXPENDITURES/FINANCIAL DATA

Fondation d’Harcourt makes substantial grants every year based on the revenues of its own endowment and eventual donations. A total of 11 long-term partnership are now running, with multi-year contracts. All costs of structure are covered by its endowment.

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“We truly believe our partners are our greatest asset and we reiterate our utmost appreciation for them. Their commitment and genuine love for what they do allows us to make a difference in the lives of people with mental illness, their families and their communities.”