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COMMENTARY AND DEBATE



Towards mental health friendly cities during and after COVID-19

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ABSTRACT

COVID-19 and the resultant stringent control measures have increased social isolation, loneliness, and domestic violence, and generated feelings of uncertainty, fear, anxiety, and hopelessness. Over the past two years, citiesRISE, a global platform that engages youth leadership in mental health system reform, has developed a holistic model for youth mental health and operationalized it through the Mental Health Friendly Cities (MHFC) framework. Using this framework, we surveyed youth from the five cities early in the COVID-19 pandemic, and identified critical needs, based on which we recommend research and programming priorities towards post-COVID-19 Mental Health Friendly Cities.

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Educational, social, and economic opportunities are drawing increasing numbers of predominantly young people to cities across the globe. While this influx of new residents puts a strain on urban infrastructure, it also presents an enormous opportunity to address persistent socio-economic issues, with youth mental health being among the most significant. Globally, mental and substance use disorders are the leading cause of disability in children and youth, accounting for a quarter of all years lived with disease (YLDs) (Erskine *et al.* 2015). The total global cost of these conditions could surpass US\$16 trillion in lost economic output by 2030 (Patel *et al.* 2018), and yet global development assistance for child and adolescent mental health averaged only 0.1% of development assistance for health from 2007–2015 (Lu *et al.* 2018).

The COVID-19 pandemic has additionally tested the ability of many urban communities- and young people in particular- to cope with stress and uncertainty. This paper examines how citiesRISE, a global platform for youth-led system reform (Sinha *et al.* 2019), conceptualizes and applies three dimensions of wellbeing – self, society, and space – to the creation of Mental Health Friendly Cities during and after this pandemic.

Mental health friendly cities for youth framework for action

Built around the core pillars of enhancing coping, increasing connectedness, and promoting access to a caring ecosystem, the Mental Health Friendly Cities (MHFC) framework is designed to sustain and improve mental health along the continuum from wellbeing to illness. In so doing, the framework's elements lay the groundwork for improving individual and social functioning and scaling up of successfully integrated mental health interventions globally (Figure 1).

As illustrated in Figure 1, our MHFC framework envisages cities with youth who are activated and engaged, are taking a leadership role around mental health and their socioeconomic development, and are connected to city and national systems to effect meaningful change.

Some components of Mental Health Friendly Cities include:

- *Educational institutions* with programs on hope, resilience and life skills; spaces for learners to deal with psychological distress or just 'hang out'; youth-led organizations promoting mental health; linkage to mental health clinical services;

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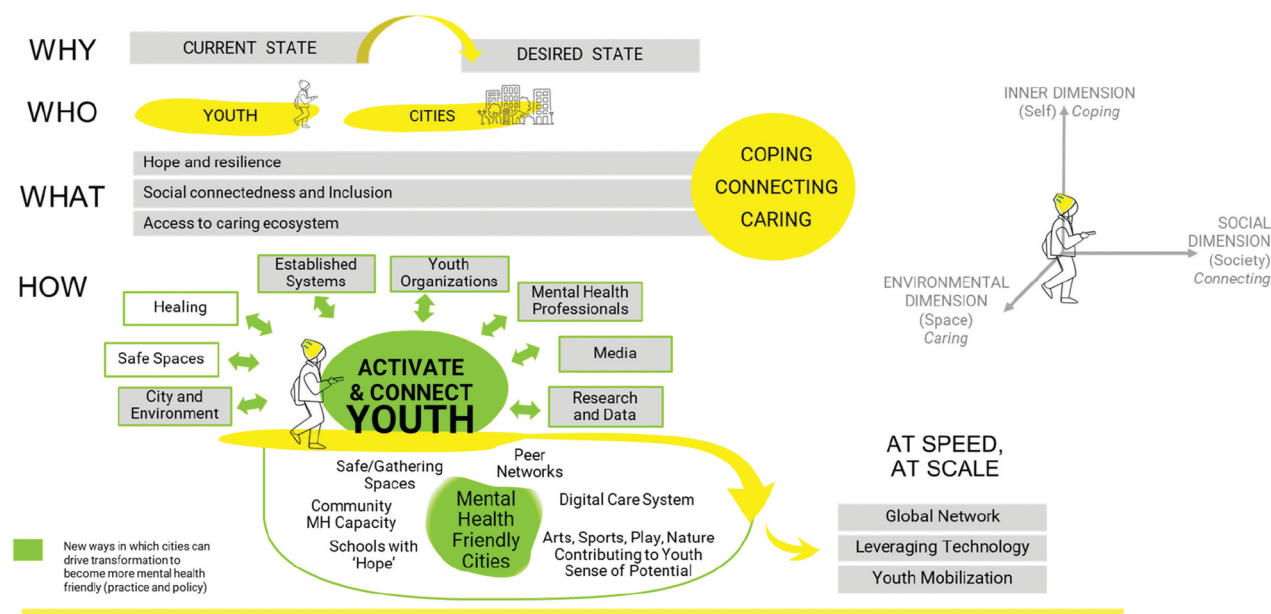


Figure 1. The citiesRISE mental health friendly cities framework.

- *Urban environments* that have youth gathering spaces with a variety of youth-designed activities (sports, arts, theater, peer support activities) that promote mental health; physical design that promotes physical and mental health (green open spaces, relaxation spaces and benches, pedestrian walkways, cycling lanes, safe road designs, environment-friendly building designs); youth-led organizations connected to existing systems (media, education, governance, mental health professional associations) and promoting mental health; youth-friendly mental health services and improved access to health care;
- *City governance systems* with youth membership of legislative and policy-making institutions; mechanism for collecting youth feedback during decision-making; adult allies working with youth-led organizations to influence policy and legislation; clear focus on youth needs and mental health underpinning all decision-making.

This MHFC framework is based upon a conceptualization of mental health as involving nurturing three dimensions of human wellbeing; *self*, *society*, and *space*, as illustrated in Figure 1.

Mental health is based on an individual *self* experiencing a complex and unique journey, parts of which can be observed or described to others, but most of which takes place beneath the surface of day-to-day life. This *self* links the emotions, thoughts, and behaviors of an individual to a vast constellation of past experiences and future aspirations. However, humans are social beings relying on others from birth (and even before) in order to grow strong and resilient. *Society* plays an essential role in the mental health

and wellbeing of individuals right from infancy (Lund *et al.* 2018). All of this takes place in the *space* of structural and intermediary determinants of health such as housing, play space, and physical work environments (Solar and Irwin 2010).

The rapidly changing world presents new challenges within these three dimensions, especially now with COVID-19. While many people possess a great capacity to adapt, rapid and compounding changes also strain mental health and wellbeing for most. A young person's ability to cope with ever-changing demands during this pandemic depends on how well we support the mental health and wellbeing of our youth.

We see the MHFC framework as key to creating cities in which systems continuously identify and respond to the mental health needs of youth and the entire population, even during and after an emergency such as the COVID-19 pandemic. Mental Health Friendly Cities should be able to harness human capabilities in a way that supports sustainable development, given that mental health is a key prerequisite of the UN Sustainable Development Goals – as evident in goals 1, 3, 4, 10, 11, 16, and 17 (Patel *et al.* 2018).

Application of the Mental Health Friendly Cities framework during and beyond COVID-19

The COVID-19 pandemic has exacerbated unemployment, disrupted education and training, increased food insecurity, and impeded access to social services. As with prior disasters, elevated rates of depression, anxiety, and post-traumatic stress disorder are expected. Further, the strict quarantine and physical

distancing implemented in many countries in response to COVID-19 will increase experiences of social isolation, loneliness, and domestic violence during a period of extreme need for social support (Galea *et al.* 2020). Restrictions of individual freedoms and livelihoods increase feelings of fear, anxiety, and hopelessness for many young people.

To assess these impacts during this pandemic, citiesRISE conducted a rapid survey of 46 young people from the five cities in which we work: Bogotá, Colombia; Chennai, India; Nairobi, Kenya; Sacramento and Seattle, USA. Across these diverse settings, we identified critical needs for mental health and social support:

- (a) Reliable and clear information about how and where to get mental health support online and offline;
- (b) Mental health promotion that maintains hope, purpose, and direction and provides information on positive thinking, relaxation, and managing uncertainty;
- (c) Greater connectedness to peers and cultivation of a sense of community; and
- (d) Use of social media platforms for mental health information and messaging.

These identified needs align with the MHFC framework in demonstrating the need for greater investment in building life skills among young people, creation of more caring ecosystems to ensure young people have access to appropriate and acceptable information and care, and development of programs that enhance social connectedness and inclusion.

Youth in the cities indicated that health messaging during the crisis was developed mostly by adults with little youth involvement. From the surveys, it was clearly demonstrated that cities must engage young people directly as part of COVID-19 response, ensuring they have an active voice, co-design role, and pathways to participation in solutions and decisions addressing their immediate and long-term concerns.

We concluded that there is a need to connect public health decision-makers to youth in order to build more trust, understanding and friendlier services for those testing positive for COVID-19, or practicing self-quarantine or physical distancing. We must develop tools to enable young people to be connected to other resources, including peers and opportunities to contribute to local responses. Leveraging technology, we must develop virtual gathering spaces, chat rooms, and help-lines in cities and communities to provide real-time mental health and psychosocial support. Finally, it was clear from our surveys that youth involvement is essential in refining guidelines around caring, coping, and connecting for children and young people in the community.

Our MHFC framework has guided our cities on the utilization of existing structures to quickly collect data

through rapid assessments, to inform interventions needed at this time to address needs around enhanced coping, increased connectedness, and creation of a caring ecosystem, specifically:

- adaptation of youth-driven mental health innovations informed by our MHFC youth focus
- increasing access to coping resources, peer support, and formal support by building youth peer support networks and digitally enabled gathering spaces; and
- working collaboratively to provide direct access to mental health resources and services.

Future directions for research and practice on mental health friendly cities

We envisage five priorities relevant to Mental Health Friendly Cities in the next stages of the pandemic, and after:

- (1) Researchers and funders to prioritize research that investigates interventions that enhance coping, including approaches to hope as a teachable skill and its impact on risks for a variety of mental conditions.
- (2) Policy-makers designing youth mental health programs must incorporate and evaluate systems and structures that equally value and support self, society, and space. This requires forging new, diverse collaborative partnerships to develop coordinated, cooperative research responses.
- (3) City leaderships and governments must coordinate efforts to research, develop, adapt, and scale technology-based approaches to meeting the needs of young people around connectedness and access to care, especially in low- and middle-income settings.
- (4) Education and mental health leaders should assess the outcomes of incorporating mental health literacy into school curricula and youth-informed programming that we propose under the Mental Health Friendly Cities framework.
- (5) Governments and their partners need to support cities to forge new diverse collaborative partnerships to develop robust systems that are responsive to the mental health needs of young people, now and in future.

Going forward, the systematic use of locally generated data as we have proposed above is key in building mental health initiatives that are responsive, adaptive, and capable of providing appropriate levels of support to the whole population. Ultimately, our emphasis on solution-sourcing from affected youth communities during this pandemic and the use of

multi-sectoral partnerships for the activation and amplification of those solutions has been invaluable. In a post-COVID-19 world, our work aligns with and makes significant contributions to the WHO principle of 'Building back better' for sustainable mental health care after emergencies (WHO 2013).

Disclosure statement

No potential conflict of interest was reported by the authors.

Notes on contributors

citiesRISE is a multi-stakeholder initiative that includes many of the world's leading experts and practitioners working with young people to enhance coping by increasing hope and resilience, to foster connectedness, and to improve access to a caring ecosystem for youth through a network of cities in order to address the large and rising global burden of mental ill health. It is a global platform using a local collective action model that is dedicated to scaling up mental health enhancing interventions and models that have been developed in recent years, through proven methodologies of collective action and a network approach. <http://cities-rise.org>.

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