CITIES**RISE**

Achievement Report for partnership between citiesRISE and WPA, May 2019

The first quarter of 2019 was a time of significant growth and accomplishment for the citiesRISE-WPA partnership. Both programmatic and operational activities were expanded. As a result, activities across cities and globally are poised for accelerated implementation in 2019. Furthermore, progress has been made to mobilize new resources and develop a WPA-citiesRISE Global Task Force of Psychiatry (GTF) to support the citiesRISE platform and serve to anchor the work envisioned. Key progress milestones include:

- Advancing Practice Transformation design and development in key citiesRISE cities with on-the-ground time spent in Nairobi, Bogotá, and Chennai.
- Appointment and first meeting (remote) of the GTF (Global Task Force of Psychiatry) to support the citiesRISE platform and the WPA-citiesRISE partnership, and consider the obligations of the GTF as set out in the Terms of Reference.
- Operationalizing practice transformation with development of a strategic plan and program of actiivties. A paper titled "Clinics to Community" is in development to describe the concepts, plan and programs.
- Embedding the core goals of the partnership in the articulation of new concepts and proposed program development in maternal mental health among disadvantaged young women and families in Chennai and Nairobi. This takes the form of funding proposals for Grand Challenges Canada. Success in these applications will contribute to supporting the WPA-citiesRISE program activities.
- citiesRISE and World Economic Forum partnership to develop a Mental Health Friendly Cities framework in collaboration with WPA.

Activities of the partnership between citiesRISE and WPA will be embedded in the global acceleration strategies for the citiesRISE platform (Practice Transformation and Research, Youth Mobilization, Creative Campaigns, Technology and Data and Intersectoral Collaboration).

City Engagement

NAIROBI:
On March 3rd, 2019 citiesRISE and WPA convened stakeholders and youth leaders in Nairobi, Kenya to further understand the local context and outline priorities for practice transformation in the city. Key areas of discussion included:
- Understanding the Nairobi landscape based on key findings from citiesRISE stakeholder and scene assessment;
- Localizing practice transformation in Nairobi/Kenya;
- Synthesizing learnings from Chennai and applying learnings to Nairobi.

Through discussions on how to advance practice transformation in Nairobi, combined with earlier disucssions in Bangalore and Chennai, the following ideas emerged as significant for initial attention:

- **Institutional strengthening**. Building institutional capacity for promoting mental health in: schools (through school-teachers, principals, school-support services); primary health and community services (through nurses, midwives, lay health workers); and peer-support groups, mentors, student support clubs in colleges and universities.

- **Promoting positive mental health**. Working with media in promoting positive mental health through (a) media sensitization in reporting on mental health and suicide; (b) taking advantage of key calendar events in Nairobi/Kenya to reinforce messaging on youth and mental health.

- **Mainstreaming professional practice.** In the following contexts, contribute to local, regional or national programs through focused/concerted efforts: (a) Universal Health Coverage – integrate mental health into primary health and maternal and child health services by building capacity amongst community health volunteers, nurses, midwives and other workers; (b) Mapping mental health needs through consulting with the development of a national mental health survey, for example in India, focusing on young people and social determinants of their health in cities; (c) Creating a multi-stakeholder platform comprising country leadership across health, education and other sectors to advocate for greater integration of mental health friendly principles in settings relevant to the lives of young men and women in slums and other urban slums, including safe spaces for youth to seek health and social support, and recreational, arts and cultural activities.

- **Leveraging the role of technology.** As an opportunity to build capacity and create virtual safe spaces for young people to access support and care

> **Nairobi Meeting Participant List**
>
> 1. Caroline Kendi (Centre for Public Health & Development)
> 2. Dr. David Ndetei (Founder of Africa Mental Health Foundation)
> 3. Dr. Lukoye Atwoli (Kenya Psychiatric Association, Moi University)
> 4. Dr. Manasi Kumar (University of Nairobi)
> 5. Dr. Muthoni Mathai (University of Nairobi)
> 6. Dr. Victoria Mutiso (Africa Mental Health Foundation)
> 7. Professor Helen Herman (President of World Psychiatric Association)
> 8. James Wareiro (Centre for Public Health & Development)
> 9. Karthik Subbaraman (citiesRISE Program Manager)
> 10. Professor Norman Sartorius
> 11. Rosemary Gathara (Executive Director, BasicNeeds Kenya) + 2 staff members
> 12. Samuel Talam (Youth Leader and Founder of Amazing Minds Africa)
> 13. Thelma Chebet (citiesRISE Nairobi Coordinator)
> 14. Yvonne Ochieng (Youth Leader and Founder of Nzumaari Africa)
> 15. Members from Department of Mental Health
> 16. Professor Anne Obondo (University of Nairobi)

Participants identified that the need for institutional strengthening to support improvement in mental Healthamong your people in Nairobi could be used as an incentive for building capacity amongst young mental health professionals. This is seen as an opportunity area. It would also lend needed support to current MOH plans to develop a 5-year county plan for mental health as part of the national strategic vision for 2030. This 5-year plan for mental health is currently proposed but needs significant development to become operationally useful.

Based on the above ideas, including discussions held in India in January, there are three ways to position practice transformation in Nairobi and Chennai (refer to Annex, February Achievement Report on Chennai discussions) that are being proposed for overall city implementation as part of the citiesRISE platform.

	1. Localizing practice transformation in the city implementation plan	2. Leveraging ongoing activities to demonstrate the role of practice transformation	3. 'Incubating' regional or national-level efforts related to practice transformation
Chennai	• Building institutional capacity in schools and maternal and child health programs • Media engagement to promote positive mental health & wellbeing • Policy-advocacy	• Urban Mental Health Program	• Supporting "best-practices" in community-oriented mental health • Contributing to the NMHS-2019 • Leadership/Fellowship program for psychiatrists
Nairobi	• Building institutional capacity • Media engagement to promote positive mental health & wellbeing	• Integrating mental health within the primary care system (as part of the Universal Health Care agenda)	• Leadership/Fellowship program for psychiatrists • Contributing to commissioning a National Mental Health Survey with focus on youth (demand/supply mapping) • Supporting the development of a 5-year-roadmap that enables integration of mental health with mainstream health (PHC)

BOGOTÁ, COLOMBIA MARCH 2019; Formal Signing of the citiesRISE - Secretary of Health of Bogotá Alliance

citiesRISE and WPA held an event on March 18th in partnership with the Secretary of Health of Bogotá's office, which resulted in the signing of the citiesRISE - Secretary of Health of Bogotá Alliance. The event was set to present the work of citiesRISE, publicly announce the partnership with the Secretary of Health's office and align around a vision for young people's mental health in Bogotá. Over 30 stakeholders came together that spanned the Secretary of Health, Ministry of Health, NGO organizations such as War Child, Dunna, Sinergias, Tiempo de Juego, and Sexperto, Academic institutions such as

Figure3: Signing of the citiesRISE - Secretary of Health of Bogotá alliance

Figure 1: citiesRISE, WPA, Secretary of Health of Bogotá and local Bogotá partners celebrate the alliance signing

Figure 2: Emergence Creative, WPA, Secretary of Health of Bogotá and citiesRISE

Universidad Javeriana, University of Rosario, Universidad de Antioquia, Universidad Externado, Universidad of Los Andes, youth leaders from the Cuidad Bolivar and universities, health system experts such as Keralty and ACEMI and global organizations such as Emergence Creative and the World Psychiatric Association.

Key outcomes from the Bogotá visit include:
- citiesRISE and the Secretary of Health office of Bogotá held a signing ceremony to showcase their alliance agreement on March 18th 2019 which outlines the partnership over the next three years.
- Engagement with the Ministry of Health of Bogota and vision to align city-based efforts to national efforts
- Alignment on 2019 workplan and timeline in Bogotá to:
  - Launch a Youth Challenge Award in Bogotá in Summer 2019
  - Initiate a larger youth mobilization network in Bogotá focused on young people's mental health through a series of workshops throughout 2019
  - Itegrate and support the design and launch of a Creative Campaign in Bogotá that is youth informed by the end of 2019

Next steps to accelerate practice transformation and other programs in Bogotá will be:
- Confirm a local WPA representative with the support of the Colombian Psychiatric Association leadership
- Form a research agenda in Colombia that includes practice transformation, in partnership with Javeriana University, represented by Dr. Carlos Gomez and Dr. Miguel Uribe
- Gain a better understanding of the local context and needs related to practice transformation work, through local stakeholder engagement
- Launch a Youth Challege Award in Bogotá

UPCOMING CITY VISITS:
May 23rd -24th WPA-citiesRISE visit to Sacramento
- At the end of May, a delegation from citiesRISE and WPA will be visiting Sacramento to initiate city engagement and interaction with local psychiatrists and mental health professionals and youth communities.

Global Task Force for Psychiatry

On April 24th, 2019 the Global Task Force for psyciatry had an inaugural call to establish the position of the taskforce within citiesRISE and discuss priorities and plans for 2019. The Global Task Force for psyciatry call included the following participants;

- Helen Herman, Moitreyee Sinha, Pamela Collins, Norman Sartorius, Lukoye Atwoli (Kenya Technical Advisor for citiesRISE), Prabha Chandra (India Technical Advisor for citiesRISE), Christina Hoven, Sam Tyano, Pamela Collins, and Karthik Subbaraman.

The call enabled Moitreyee Sinha, CEO of citiesRISE to share the citiesRISE model and vision and Helen Herrman to share details of the citiesRISE – WPA Partnership. Additional topics discussed were:

- Overall vision and role of Global Task Force members to support the WPA – citiesRISE Partnership
- Updates from meetings in Bangalore, Chennai and Nairobi were shared which included practice transformation design details
- Practical approaches to addressing learnings from the ground were defined as: (1) linking practice transformation with city program design; and (2) developing a program to prepare psychiatrists for community-oriented practice. The specifics in (#1) are needed to most effectively utilize the Global Task Force to design activities for (#2).
- A need to identify 2-3 specific actions for WPA as part of the city and global activities of citiesRISE. The Global Task Force through its members' networks can find ways to be responsive to specific needs emerging in participating cities.
- A draft Terms of Reference for the Global Task Force was developed previous to the call and discussed together on the call.

> **Global Task Force Members**
>
> - Helen Herrman, Australia
> - Afzal Javed, United Kingdom
> - Norman Sartorius, Switzerland
> - Lukoye Atwoli, Keyna
> - Prabha Chandra, India
> - Christina Hoven, United States
> - Sam Tyano, Israel

Proposed Program to Prepare Psychiatrists in Community Oriented Professional Practice

As a vehicle to advance practice transformation the need to prepare and train professionals towards community-oriented care has been identified through stakeholder engagement and discussions. This is linked with developing a local representative program of psychiatrists that will use the best of evidence and experience from the field of mental health to support community capacity to respond to mental health needs in cities.

Proposed next steps for program development include the below ideas. Discussions are underway to determine how to mobilize resources to support this work:

- Fellowship program for training and experience in community-oriented care that will include
  - a. development of core competencies for community oriented professional practice and
  - b. assembling faculty to develop and deliver the training and
  - c. Administer a call for competitive fellowships and establish the program

- Establish regional centers of excellence in India and Kenya in collaboration with the fellowship program
  - Fellows from each country will assist in establishing a regional center of excellence or training hub in community oriented professional practice.
  - The regional center of excellence will aim to provide a sustainable hub that fosters continuing contact between trainers and trainees to continue learning and knowledge transfers. This includes facilitating contact with leading institutions in their country to ensure collaboration.

Picture 1: Youth Perspectives for community oriented care were discussed during the Nairobi meeting

Clinics to Community Strategy Paper

A central facet of the citiesRISE strategy for accelerating access to care, support and social connections among young women and men living in adversity across all of our cities is the encouragement of community-oriented care among mental health practitioners. The Clinic-to-Community strategy paper developed in partnership between the World Psychiatric Association and citiesRISE describes community-oriented care and provides an operational framework for practice transformation in psychiatry and mental health care. Ten key Chennai stakeholders (SCARF, the Banyan, SNEHA, and others) and WPA have been involved in identifying methods to effectively deploy practice transformation in the city. It is being applied to:

- build capacity amongst school-teachers and student-support services in government-aided schools.
- the existing healthcare institutional framework: the Urban Mental Health Program becomes a setting in which prepared and supported psychiatrists and other mental health practitioners can operate systematically to train and support other workers and establish pathways to care in which they are directly involved as well, and improve the quality and effectiveness of perinatal mental health services.

CLINIC TO COMMUNITY

VISION Mental health profession is community-oriented and practised in the framework of community care

CLINIC | **COMMUNITY** | **OBJECTIVES**

Culture of mental health care and support systems
Often top-down, with psychiatrists and hospitals at the top

Participatory to incorporate the rights, knowledge, and strengths of people with lived experience of adversity

Psychiatric training
Hospital and clinically based

Broaden to include
- Exposure to community-based interventions
- Cross-disciplinary understanding
- Cross-sectoral teamwork
- Theoretical base needed to cover expanded role

Research
High concentration of studies conducted in middle-high income populations

Diversification of evidence base

Role of MH professionals
Medical management of the sick

Mental health...
- Promotion
- Prevention
- Early intervention
- Treatment
- Rehabilitation and recovery support
- Training
- Advice for policy reform

System orientation
Siloed mental health sector

Mental health integrated across sectors, such as:
- Education
- Housing
- Human services
- Arts and culture
- Primary health

More effective interventions
- Broader coverage
- Better return on investment
- Increased adherence to treatment due to improved communication about mental health and greater ownership of intervention methods
- Greater awareness of barriers to MH support and how to address them
- Less stigma and discrimination
- More high-quality evidence on what works and for whom
- Higher standards and respect for human rights
- Amplified voice and empowerment of people with lived experience of adversity

Healthier communities
Health equity
Realization of human rights

Mobilization of new partnerships

World Economic Forum
citiesRISE is currently developing the Mental Health Friendly Cities framework in collaboration with WPA. The World Economic Forum is a new partner that will be supporting the development of the framework. In July 2019, a set of workshops to advance the framework will take place in Nairobi.

Grand Challenges Canada
Proposal and concept development has been underway with Grand Challenges Canada for an opportunity to support work related to maternal and newborn mental health. The citiesRISE and WPA partnership has a key role in designing and implementing the projects, particularly through (1) engaging local psychiatric networks to train and support nurses, midwives and community workers, and (2) evaluation of the actions and scale up of knowledge generated. Two proposals that have been developed are
- 'Improved outcomes across the life course through cross-system integration of maternal mental health in Nairobi and Kenya'
- 'Scale-up and disseminate evidence-based approaches for enhancing maternal sensitivity and maternal mental health in low-resource settings in Bangalore and Chennai, India'

Next Steps and Forthcoming

Over the second quarter of 2019 citiesRISE aims to launch full program implementation in Chennai and Nairobi. WPA and citiesRISE are on target to release the Clinic to Community publication and a literature review on 'Strategies for better mental health responses in adversity settings' (originally developed for the WPA-citiesRISE workshop in March 2018). Finally, a convening of the Global Task Force is being planned for summer 2019, details are being determined.

Key Events:
- APA conference San Franscico, May 2019. citiesRISE – WPA panel presentation:
  - Session Title: Our Shared Responsibility: Helping Young Women and Men Overcome Adversity
  - Date: Wednesday, May 22
  - Time: 3:00 PM–4:30 PM
- May 23-24th: citiesRISE – WPA Stakeholder and Working Sessions, Sacramento, United States
- July 2019: citiesRISE Mental Health Friendly City strategy and design workshop, Nairobi, Kenya
- World Congress of Psychiatry Annual Meeting August 21-24th, Lisbon Portugal

ANNEX 1: citiesRISE-WPA February Achievement Report:

This achievement report elaborates on the progress made between WPA and citiesRISE towards transforming mental health policy and practice globally. In September 2017, WPA and citiesRISE entered a formal relationship through the 2017-2020 WPA Action Plan. In March 2018, with the support of the Juan José López-Ibor Foundation in Madrid, WPA and citiesRISE convened key partners including WHO, IMC and others to develop a shared framework for activities of common interest. Core objectives of the citiesRISE and WPA Partnership are:

1. To ensure that psychiatry is community oriented and practiced within a framework of community care
2. To strengthen the networks of support and communications for psychiatrists engaged in community-based work and community development related to the improvement of mental health
3. To identify, collate and develop materials and resources that support the partnership work of citiesRISE and the WPA
4. To provide conceptual and technical support to the development of citiesRISE programs, ensuring that the promotion of health and wellbeing is supported by the best available evidence and experience.

In 2018 there was significant growth and accomplishment, moving from strategic development to a global implementation. The commitment from WPA to help build the citiesRISE platform has enabled the refinement of a shared strategy and city-engagement model that aims to integrate psychiatrists and psychiatric networks in community-focused care and support. In parallel, citiesRISE creates a direct linkage for WPA to participate in innovative community mental health programs and expands the WPA's ability to drive large-scale advancement of mental health. Together, citiesRISE and WPA support each other to reach their full potential in improving mental health and well-being.

citiesRISE and WPA are pleased to report significant progress has been made toward meeting their shared objectives.

Achievements to date include:

- Define clear value proposition and view point on psychiatry's participation in the field of community-centric mental health programming:
    - An operationalizable strategy for local – global action that has been tested with local stakeholders in Bogota, Chennai, Nairobi, Seattle and Sacramento and validated across cities and contexts. Key outputs from this work include:
        - Developed Clinic to Community Concept Paper that lays a roadmap for the health profession to play a strong role in building the capacity of communities to support improved mental health among even their most disadvantaged members.
        - Designed Centre of Excellence (CoE) for Community Oriented Clinical Practice (COPE).
        - Beginning work to identify capacity building and training needs for psychiatrists in working with communities.

- Develop Mental Health Friendly City (MHFC) Framework:
    - citiesRISE co-created the concept of MHFC to measure and drive city system-level changes across the four dimensions of the paradigm shift we aim to create, including: 1) normalizing the narrative around mental health; 2) increasing access to care and support; 3) building social connectedness; 4) and developing healthy environments.
    - The MHFC framework enables city stakeholders to keep a consistent aim as they identify, prioritize, and implement interventions across multiple sectors.
    - The MHFC framework also serves as a diagnostic tool and strategic road map for community and city leaders to navigate development decisions, recognizing how they can have positive and negative impacts on the social and environmental determinants of mental health.

- o The MHFC Framework will be publicly announced in partnership with the World Economic Forum during summer 2019.
- Establish local and global partnerships that will be foundational in the systems level transformation being driven by the citiesRISE platform:
  - o Key collaborations in which WPA has engaged through the citiesRISE platform include:
    - 7cups: an application/website that provides online therapy and free support to people experiencing emotional distress by connecting them with trained listeners.
    - IIMHL and I-Circle: International Initiative for Mental Health Leadership (IIMHL) is an international collaborative of eight countries (Australia, England, Canada, New Zealand, Republic of Ireland, Scotland, Sweden and USA) that focuses on improving mental health, addiction and disability services and aims to provide better services to consumers and families.
    - World Economic Forum: The World Economic Forum engages with business, political, academic and other leaders of society to shape global, regional and industry agendas.
    - University of Washington and King's College London: citiesRISE core research and evaluation partners in participating cities.
  - o Engagement with cross-sector networks that represent key stakeholders for mental health systems change, including rights-based organizations, which focus on community-driven interventions, development organizations for youth and led by youth, and non-traditional actors (private sector or media, including technology & social media).
    - Snapshot: In Chennai, these include many actors who have not been involved in mental health traditionally: Tamil Nadu Slum Clearance Board – housing + slum development, rehabilitation + resettlement programs; Department of Health + Family Welfare, Department of School Education, Department of Youth Welfare + Sports, Department of Social Reforms, Welfare of Differently Abled persons, Institute of Mental Health, Institute of Child Health, State Mental Health Authority, District Mental Health Program, National Health Mission – Tamil Nadu, Tata Trust, Mental health professionals, Youth organizations and Youth networks.
  - o WPA has engaged directly with local psychiatric networks and associations such as the American Psychiatric Association, Indian psychiatric Associations, Kenyan psychiatric Association, and Colombian Psychiatric Association in order to position these groups for collaboration as implementation in cities kicks off and to support national level advocacy and funding mobilization.
- Launch 'deep dive' efforts in Bogota, Chennai, Nairobi, Seattle and Sacramento with local psychiatrists and professional associations engaged and active in design of local programs.
  - o citiesRISE has designed the first set of city-based programs in Chennai and India that demonstrate proof-of-concept and early impact within the populations being served. In each of the local design processes the WPA has played a key advisory role and engaged local psychiatric representatives to take part in the design. Implementation plans are currently being finalized in Chennai and Nairobi.
- Support global stewardship and presence in cross-sectoral decision-making:
  - o Direct community engagements in Colombia, Kenya, India, and United States.
  - o Engaged with cross-sector leadership in diverse sectors including technology, global philanthropy, finance, youth development, creative arts and media, and sustainable development.
  - o Supported the launch and dissemination of 2018 Lancet Series on Global Mental Health and Sustainable Development.
  - o Participated in global leadership circles such as the National Funders meeting NATCON in March 2018, UN/WHO/UNICEF special roundtable on mental health in May 2018, and Global Ministerial Mental Health Summit in October 2018.
  - o Published article in World Psychiatry - Collective action for young people's mental health: the citiesRISE experience.

In 2019, the key objectives for citiesRISE and WPA are as follows:

A. Operationalize community-oriented practice as one of the core acceleration strategies for the city program design and its development pathways, with initial focus on Chennai/Nairobi/Bogota/Sacramento/Seattle

B. Set-up a Center of Excellence (CoE) to serve as a central hub to scale practice transformation efforts in a city and region, with initial focus on Bangalore-Chennai and expansion to Nairobi, Bogota, Sacramento, and Seattle.

C. Research & Advocacy

    a. Collaborative funding applications for at least four other mutually agreed initiatives that further the joint objectives of WPA and citiesRISE

    b. Six publications on agreed topics that support practice transformation, including a clinic-to-community concept note and a literature review of practice transformation.

    c. Joint advocacy promoting practice-transformation and the mutual goals of WPA and citiesRISE in key international forums including the World Health Organization and World Economic Forum.

Key partnership updates: Q1-2019 (Focus: Chennai & Nairobi)

Key activities	Description	Chennai	Nairobi
Local representative program	Identifying a core group of psychiatrists to drive initiatives in community-oriented practice in Chennai as part of the city-design	Conducted 1st convening on January 6, 2019 1. Dr Kannan G K - 2. Dr Sivabalan E - SRM Medical College, Chennai Psychiatric Association (President) 3. Dr P P Kannan - KMC 4. Dr P Sriram - Independent practice 5. Dr S J Daniel - KMC 6. Dr Suvarna - Sri Ramachandra Medical College 7. Dr Jayakumar Menon - Sri Ramachandra Medical College/Anbagam 8. Dr Ramya Sampath - Sri Ramachandra Medical College 9. Dr Vaishnavi R - SCARF 10. Dr Vijaya Raghavan - SCARF	Planned for March 3, 2019 Participants comprising 1. Dr. Lukoiye Atwoli (Secretary General, African Association of Psychiatrists and VP, KPA) 2. Dr. Simon Njuguna (Department Head of Mental Health, MOH) 3. Prof. Ndetei (AMHF) 4. Additional representatives from a. ANC/PNC care b. Children/Adolescent specialists
Integrating practice transformation in the city-design efforts	Using initiatives in community oriented practice to drive local outcomes including (1) changing narrative in mental health; and (2) improving access to care and support	Using three entry points for young people in Chennai (Colleges, Government-aided schools, and Community-settings) with emphasis on 1. Promoting positive mental health through greater collaboration with media 2. Building institutional capacity through principles of task-sharing, and 3. Help develop a virtual-training platform for mainstreaming mental health in civil society (intended meaning not clear?)	Using three entry points for young people in Nairobi (Informal settlements, Universities, and schools) with core emphasis on 1. Reframing primary care practice in Levels I-III Health centers to serve as a catchment area for community-based mental health services 2. Using existing youth infrastructure to build safe spaces for vulnerable population groups (orphans, children in conflict with law, etc.,) 3. Help develop a virtual-training platform for

			mainstreaming mental health in civil society
Identifying National hub to scale practice transformation beyond the current set of cR-supported cities	Creating a Center of Excellence that serves as the basis for promoting community-oriented psychiatric practice, training a new cohort of psychiatric professionals, and supporting national advocacy efforts in mental health	NIMHANS Bangalore, India Initiatives include 1. Supporting Nationally-Commissioned study on National Mental Health Survey with specific emphasis on social determinants of mental health of young people in urban context 2. Using the NIMHANS Center for Well-being as a conceptual framework to design safe spaces (physical/virtual) for young people seeking mental health-enhancing services, including services for young women in the perinatal period 3. Learning from the success of RMHP/DMHP services in Karnataka to replicate across other states 4. Creating the content for leadership in community oriented psychiatry 5. Using the perinatal care service-delivery learnings as a framework for developing early childhood development-related interventions (to minimize long-term behavioral/cognitive consequences of poor maternal/child health)	Potentially, Department of Mental Health University of Nairobi Mathare Teaching and Referral Hospital Initiatives include 1. Building capacity of CHVs and Clinical Officers/Nurses (Level I-III) to provide community-based mental health services 2. Working with Kenya Institute of Curriculum Development (KICD) to mainstreaming mental wellness as a core component of the broader educational curriculum in schools (e.g., KICD already has parental empowerment and engagement guidelines to strengthen relationship between parents and teachers) 3. Advocating for effective integration of KMHP within the UHC/SDG-3 framework

Key partnership updates: Planned Q2-Q4 2019
1. Initiate practice transformation in Seattle-city
2. Supporting the development of M&E framework that will enable effective operational and programmatic monitoring of practice transformation at the local and global level
3. Supporting the development of a cross-city platform that encourages learning and exchange of best-practices related to the implementation of practice transformation