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Glossary





Capacity-building is the process of developing and strengthening the skills, instincts, abilities, processes and resources that individuals, organisations and communities need to survive, adapt, and thrive.

Coproduction

Coproduction is a strengths-based inclusive process that looks to incorporate the experience and expertise of people as equal participants from the very beginning and throughout the process, planning, development, delivery and evaluation of projects and services.

Empowerment

This refers to the level of choice, influence and control that individuals can exercise over events in their lives. In the context of mental health services, empowerment means that Service Users, Family Members and Carers have the skills, resources, information, education and opportunity to explore and articulate what self-determination means in their lives.

Engagement

A process to support service improvement through dialogue between individuals who access mental health services and family members/ friends with mental health service providers.

Equity

Equity speaks to fairness and justice, whereby everyone can expect fair play, equal access and a chance to advance their life goals. It takes into account inequalities to ensure that everyone has the same access to opportunities and outcomes.

Evidence-Based

This is how we ensure that our offerings are based on or informed by proven factual information.

Experts by Experience

Are people who have gained valuable expertise through their experience of mental health challenges and recovery. This includes people who have experienced mental health challenges themselves or their family members or supporters. This experience is used to inform, guide and direct mental health promoting initiatives and service development , delivery and evaluation.

Family and Friends

Close network of social supports that may be related or unrelated. Who may live together or not.

Human Rights

These are rights we have simply because we exist as human beings. These universal rights are inherent to us all, regardless of nationality, sex, national or ethnic origin, colour, religion, language, or any other status.

Lived Experience

Individuals with personal and/or family experience of mental health challenges.

Mental Health

A state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. (WHO, 2004)

Mental Health Challenge

This is when a person experiences distress that results in changes in thinking, feeling, mood, ability to relate to others and daily functioning as a result. This will vary from person to person as will the supports the person needs for their recovery.

Mental Health Policy

Is an official statement by a government or health authority that provides the overall direction for mental health by defining a vision, values, principles and objectives, i.e. Sharing the Vision 2020.

Mental Health Services

These are services that offer a variety (myriad) of supports through community and hospital based settings that focus on the recovery from mental health challenges of the person and their family / supporters.

MoU

Memorandum of Understanding & Coproduction

In Mental Health Ireland this refers to a document describing the process of working through coproduction and how this can be achieved in partnership with other groups and organisations

Peer Educator

A Peer Educator is a lead for recovery education in a Recovery College or Recovery Education Service, bringing both educational qualifications and lived experience of mental health challenges to inform coproduction of recovery education

Recovery Education

Is the process by which individuals explore, assimilate and create the knowledge required for recovery to occur in their own lives or in the lives of those they support

SDG's

Sustainable Development Goals

These are the blueprint to achieve a better and more sustainable future for all. They address the global challenges we face, including poverty, inequality, climate change, environmental degradation, peace and justice

Stigma

Social stigma is the prejudiced attitudes that others have about mental health. Self-stigma is the internalised stigma that the person with the mental health challenge has about themselves or about mental health in general

Sustainability

Is a approach to create long term value by taking into consideration how an organisation operates in the ecological, social and economic environment. Its built on the assumption that if this approach is adopted they will ensure their future.

Trauma Informed

Being aware that people may have experienced trauma in their lives that has impacted on them and working in a way that will reduce the chance of retraumatising individuals. This might include being mindful of safety, choice, collaboration, trustworthiness and empowerment.

Universal Design

Is a design that is usable by all people, to the greatest extent possible, without the need for adaptation or specialised design.

Wellbeing

Wellbeing is present when a person realises their potential, is resilient in dealing with the normal stresses of their life, takes care of their physical wellbeing and has a sense of purpose, connection and belonging to a wider community. It is a fluid way of being and needs nurturing throughout life. (WHO, 2001)





Mental Health Ireland Strategy 2022 - 2024



Hugh Kane, Chairperson

Chairperson's Opening Statement

It is my great privilege as Chairperson of Mental Health Ireland to introduce this new strategy. Over the past 55 years, Volunteers in Mental Health Associations and Mental Health Ireland have worked tirelessly to begin a new conversation about mental health in Ireland. A conversation of **hope, strength and action**.

The new national mental health policy 'Sharing the Vision – A mental health policy for all', was published in June 2020. A number of themes were heard repeatedly, Irish people want an accessible, high quality mental health service which can respond to need in the most appropriate setting. They also want to live in a society that is fairer, more inclusive and understands the importance of mental health for all.

Sometimes a national policy can seem distant, and it can be hard to see how its recommendations translate into each person's daily experience of life. The work undertaken by Volunteers in Mental Health Associations and our team at Mental Health Ireland aim to take these recommendations and make them real. It is so encouraging to see the recommendations in Sharing the Vision come to life at ground level, in communities right across the country. I am greatly encouraged by the agility, creativity and commitment shown by our network of Volunteers, partners, funders and supporters.





Mental Health Ireland's strategy came together through a careful and detailed process of coproduction. By bringing together a broad range of views we can be sure that our strategy can make a real difference. A strategy helps us to be more focused and to marshal our collective efforts to the best effect. We need to acknowledge our strengths and be clearer about our scope of action if we are to have a lasting impact. By continually monitoring and evaluating our work we ensure it continues to deliver meaningful outcomes for people who use our services, Irish households, the communities we serve and our society.

At Mental Health Ireland we want to extend an invitation to all members of our community to play their part, to get involved, to contribute and to belong. This strategy translates shared ambitions into practical actions and through our work we can create platforms for change. Many people wish to assist and join with us, and our strategy helps to clarify our role and set out a practical pathway forward.

We celebrate and restate the values that have sustained Mental Health Ireland over the past 55 years, while being open to new approaches, new technologies and new solutions. We now want to activate and invest our time, talents and energy to continue to build on the changes made in our last strategy and we welcome others who want to join with us.

I believe that we can be very positive about the future. At all levels we incorporate the experience, strengths and hopes of people with lived experience so that our work continues to makes a tangible difference. We engage and learn from local communities so we mobilise their inherent strengths and support them to thrive. We greatly appreciate the trust and encouragement invested by the Health Service Executive in Mental Health Ireland's work.

I would like to thank all the people who worked in coproduction and helped us build this new exciting strategy and I know that we can fulfil its promise of *Mental Health for All - Hope, Strength, Action*.

Hugh Kane

Chairperson

Mental Health Ireland





Martin Rogan, CEO

CEO's Address

Mental Health Ireland looks forward to the future with confidence. This document builds upon the success of our strategy 'Empowerment - from Ideas to Action' and moves the agenda forward. As a national voluntary organisation our role is to listen and respond to people within local communities and to fashion solutions that best fit these needs. By being leaders in Mental Health Promotion and Recovery, Mental Health Ireland will continue to bring pragmatic expression to national policies.

At Mental Health Ireland coproduction is the fundamental premise of our work. By actively including all perspectives we can create more acceptable and sustainable solutions which can successfully be integrated at a local context. This is not always an easy process, but we have always found that its worth taking the time to build a respectful and common understanding.

Our work in promoting mental health, wellbeing & recovery is underpinned by a strong evidence base. It's our ability to bring new thinking and new hope to communities that makes Mental Health Ireland unique. We adopt a community development approach, strengthening the individual, the family & friends, the community and our society.



We envision an Ireland where fairness and equity is a distinguishing hallmark, where every member of our community is valued, treated with dignity and where their human rights, wishes and decisions are respected. We will continue to challenge discrimination, exclusion or attempts to segregate – we have a common purpose and a common humanity. We also restate our commitment to our shared environment and set specific targets to reduce our carbon footprint in all aspects of our work.

The past two years have been difficult at a global scale and in Ireland we rediscovered the importance of solidarity, community and pulling together. This is our strength and a source of great hope. When we take the time to listen carefully to other perspectives we can find better solutions to mutual benefit. Our work in promoting public awareness and understanding through training, community development and in partnerships, is central to our success.

For too long mental health was a closed world, hidden, inward-looking and trying to go it alone. This approach was driven by shame, stigma and discrimination. At Mental Health Ireland we recognise the importance of opening up, developing new relationships, friendships and partnerships. Maintaining and enhancing good mental health is not a solo pursuit. By working with diverse partners, discovering new insights and developing new skills, we can extend our reach and achieve more together. We understand that all of us know more than any of us.

This strategy looks to the future with a new energy and enthusiasm and Mental Health Ireland together with the Mental Health Association volunteers look forward to making this strategy a reality.

Martin Rogan

CEO

Mental Health Ireland







together we can achieve great things

This is our

STRENGTH

against enormous odds.

Through new discoveries, new ambitions and focused efforts we can at last be much more **optimistic** about mental health for individuals. family and friends, community and our society. This is real and achievable and not just a distant possibility.

This is our HOPE



Only when we focus our efforts, share the tasks and are clear about our objectives, can we succeed. At Mental Health Ireland we listen carefully to people with lived experience, their families, statutory services & communities and our broader society and seek to understand their needs. With these insights we can form new solutions and help to realise the objectives of the national mental health policy 'Sharing the Vision' (2020). It's through co-production that we can make change happen, bring people along with us and sustain the progress made. Having formulated a detailed strategy,

it's now time for

ACTION

Our strategy must be more than a statement of intent, it is designed to clearly set out our priorities so we can progress these in a co-ordinated and synchronised manner. Our aim is that Mental Health for All would be implemented across our network of Mental Health Associations so that every community can benefit in a balanced and equitable way.

We would like to thank each and every person who contributed to making this new strategy a reality in such a busy environment.

Mission, Vision & Values

MISSION

Our Mission is to promote and enhance mental health and wellbeing and to create a culture where we are all respected and supported, especially when our mental health is challenged.

VISION

Our vision is for an Ireland where mental health is valued and supported as an essential part of everyone's health, so that individuals, family and friends, and communities can thrive.

VALUES

The principles of human rights, equality and equity, recovery and trauma-informed care are all integral to and at the core of our work.

We are committed to using coproduction, being evidence informed, improving accessibility, ensuring inclusion & representation and becoming more sustainable in our practices.

Transparency, good governance, and compliance with the highest ethical standards are intrinsic to our work. We value volunteers, staff and partners through creating a respectful, equal, and supportive environment.

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Who Are Mental Health Ireland?

Mental Health Ireland was **founded in 1966**. We are governed by a Board of Directors, who come from a range of different backgrounds, specialisms and experiences. The Board are supported and informed by Governance and Finance Committees. Our Head Office team are based in Dún Laoghaire in Co. Dublin. This is where our CEO, Deputy CEO, Chief Operations Officer, Finance, Communications, Fundraising, Mental Health Promotion, Education, Training, & e-Mental Health, Human Resources, and Administration team members are based.

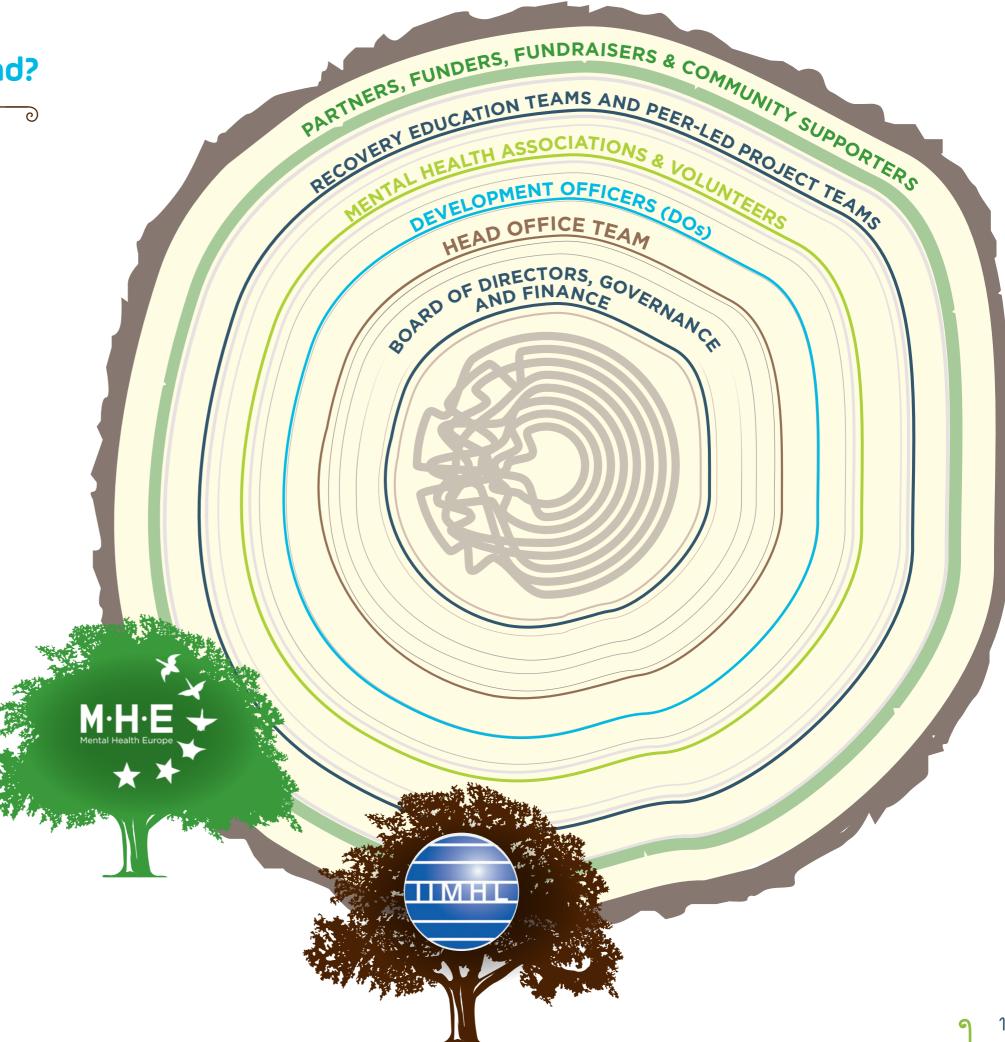
We have 10 Development Officers across the country who link with our network of Mental Health Associations, volunteers and community groups, promoting mental health and supporting recovery in their communities. Mental Health Ireland are now also the employer of people working in recovery education and peer led community services across the country. The team members work in a variety of different settings including Recovery Education Services, Mental Health Services, Involvement Centres and Peer Led community services.

We work very closely with the **HSE** and the Office of Mental **Health Engagement and Recovery**. We also work with a range of partners in the statutory, community, voluntary and corporate sectors in Ireland, Europe and Internationally.

We are members of the **International Initiative for Mental Health Leadership**and **Mental Health Europe** and currently
hold the presidency of the latter.

Our work couldn't happen without the close relationships we have with members of our **coproduction groups** who come from all across communities, the voluntary sector and mental health services.





What is Coproduction?

Ireland's 'National Framework for Recovery in Mental Health' (2018-2020) names coproduction as one of the four key principles for recovery, describing it as "delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours." (New Economics Foundation, 2009). Informed by this, Mental Health Ireland has created a memorandum of understanding (MOU) on co-production. The MOU supports our staff, volunteers, and partners to use coproduction as one of our core processes.



Coproduction is a strengths-based process that looks to incorporate the end user as an equal participant from the very beginning and throughout the process, planning, development, delivery and evaluation. For Mental Health Ireland this means having people with lived and family experience of mental health challenges as active participants alongside professionals from community and voluntary sector, mental health services, or wider community representatives.







Coproduction is compatible with collaborations, partnership working and project management processes. It is intended to be outcomes focussed while also upholding the principles of empowerment, participation, equity, exploration, collaboration, power sharing, enhancing knowledge, relationship of equals and non-linear. Coproduction aligns with the highest standards of citizen participation and is evidence based as the most beneficial method of user involvement in mental health. (New Economics Foundation, 2009) (Page 16, fig. 2)



How We Went About Coproducing This Strategy

Mental Health Ireland was very conscious at the start of 2021 that its current strategy `Empowerment - From Ideas to Actions' would come to an end this year and that there would not be a gap in moving to the next iteration of evolvement for the organisation. In May 2021 Mental Health Ireland put out a call to Staff, Board Members, Mental Health Association Volunteers, Peer Educators and partner groups to join us in beginning the coproduction process for the new three year strategy for 2022 to 2024. The first meeting of the group took place on the 15th May 2021 and based on Mental Health Ireland's current strategy, the work and the mental health needs of the community, we began to plot the priority areas for the next iteration of the strategy in the spirit of true coproduction.

To use the time as effectively as possible the meetings were held for 3 hours once a month and following each full team meeting a working coproduction subgroup refined all the discussions into clear priorities, objectives, actions and outcomes. Although representative, the coproduction team also wanted to ensure wider consultation among Mental Health Association Volunteers, Board Members and the wider staff team and held 3 Consultation sessions on the 13th October via zoom where 60 Volunteers, Recovery Educators, Board members, external agencies and staff provided feedback and comment. Where people could not attend the consultation sessions the draft strategy was emailed for their input. The resulting strategy for Mental Health Ireland -Mental Health for All - Hope, Strength & Action was then completed and is reflective of the views and opinions of all key stakeholders.



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PARTICIPATORY MODELS



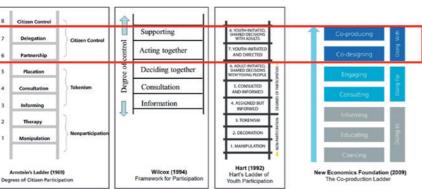


Figure 2

There are many different ways of engaging the public and key stakeholders in projects and initiatives that ultimately affect them.
They are not all equal.

Figure 2 illustrates some of the models of participation which have been conceptualised to support public participation. Sometimes, resources such as time, money, other external factors, or the nature of the project itself may mean that a group or organisation choose a less involved form of public engagement or participation. However, the best practice is to have the highest level of public participation possible in the design of public services, amenities, and projects. In Figure 2, these are identified using the red box. Mental Health Ireland use coproduction as a way to engage meaningfully with key stakeholders to ensure out initiatives, resources and projects are as relevant as possible to those who use them.



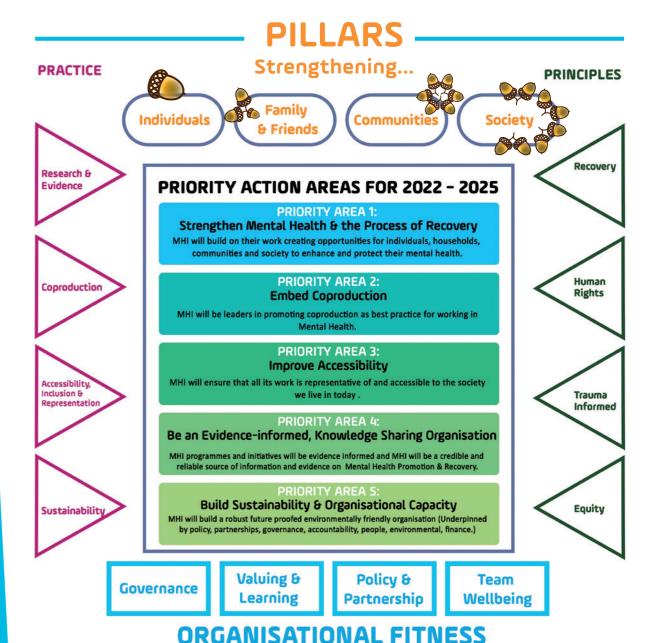
Strategy Summary



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The below diagram visually describes the core elements of Mental Health Ireland's new strategy. The central pillars, in orange, are the key groups we serve; Individuals, Family & Friends, Communities, and Society. The essential practices, in purple on the left, will be used to carry out our work to the highest standards; Research and Evidence, Coproduction, Accessibility, Inclusion & Representation, and Sustainability. The core principles that we commit to, in green on the right, will inform how we do our work; Recovery, Human Rights, Trauma-informed, and Equity. The foundations of our organisation's fitness, in blue

on the bottom, will strengthen and sustain our work; Governance, Valuing & Learning, Policy & Partnership, and Team Wellbeing. The context within which we do our work is illustrated in black at the bottom; Local, Regional, National, European, and International. The central column details our Priority Action Areas; Strengthen Mental Health & the Process of Recovery, Embed Coproduction, Improve Accessibility, Be an Evidence-informed, Knowledge Sharing Organisation, and Build Sustainability & Organisational Capacity. Later in the document these Priority Action Areas are broken down into related Objectives and specific Actions.



LOCAL, REGIONAL, NATIONAL, EUROPEAN, INTERNATIONAL

Mental Health Ireland Strategy 2022 - 2024



What is Recovery?

In 1993, William Anthony defined recovery as

"...a deeply personal, unique process of changing one's attitudes, values, feelings, goals, skills, and/or roles. It is a way of living a satisfying, hopeful, and contributing life even within the limitations caused by mental health challenges. Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental distress."

This marked the beginnings of a turning point relating to mental health service provision, as services began the process of de-institutionalisation and moving towards treating mental health challenges in the community.

In 2018, 'A National Framework for Recovery in Mental Health' was published, laying out a clear roadmap for Irish services to become more recovery orientated. Within this framework, recovery is defined as "intrinsically about people experiencing and living with mental health issues in their lives and the personal goals they want to achieve in life, regardless of the presence or severity of those mental health issues." In 2018, another, new understanding of recovery was identified in the literature, this time from the scholarly work Shulamit Ramon. Ramon discusses the idea of social recovery which is largely focused on how society supports individuals living with mental health challenges to become active citizens within society which creates a strong sense of belonging (Ramon 2018).

For the purposes of this strategy Mental Health Ireland defines recovery as:

"likened to a process of discovery, wherein the individual discovers new strengths and insights and of rediscovery whereby the individual reclaims aspects of themselves and their lives which they thought they had lost."

What are Human Rights?

Human rights are rights we have simply because we exist as human beings. These universal rights are inherent to us all, regardless of nationality, sex, national or ethnic origin, colour, religion, language, or any other status. They range from the most fundamental - the right to life - to those that make life worth living, such as the rights to food, education, work, health, and liberty.

Human rights are both rights and obligations. The Government has the primary responsibility to uphold human rights by creating the conditions for them to be effective. However, the State does not give people rights; these rights belong to everyone. States agree to respect, protect and fulfil the human rights contained in treaties or conventions. Meanwhile, as individuals, while we are entitled to our human rights – we should also respect and stand up for the human rights of others.

The Universal Declaration of Human Rights (UDHR), adopted by the UN General Assembly in 1948, was the first legal document to set out the fundamental human rights to be universally protected. Its 30 articles provide the principles and building blocks of current and future human rights conventions, treaties and other legal instruments.

According to the World Health Organization (WHO), 'health is a state of complete physical, mental and social well-being, and not merely the absence of disease' and that there 'is no health without mental health'.

According to Article 25(1) UDHR, 'everyone has the right to a standard of living adequate for the health and well-being of himself and his family'. This provision sets out some of the elements of this right: a) food; b) clothing; c) housing; d) medical care; and e) necessary social services. Article 1 of the UDHR states: "All human beings are born free and equal in dignity and rights." Freedom from discrimination, set out in Article 2, is what ensures this equality.

Mental Health Ireland are committed to keeping all human rights at the centre of our work because infringement or denial of any human right has a negative impact on the mental health of individuals, family and friends and society. We will also diligently work to protect the above listed articles which are rights which are currently being denied to those who experience mental health challenges.

In October, to inform this strategy, Mental Health Ireland held a National virtual webinar Workshop on Human Rights. The workshop was informed by our two main speakers, Colm O Gorman, the Executive Director of Amnesty International Ireland, speaking to the universal topic of human rights for all and Fiona Coyle, CEO of Mental Health Reform who focussed on human rights as they relate to mental health. As part of this workshop we had the opportunity to hear from people from diverse backgrounds to broaden our understanding in Mental Health Ireland and inform our work.



There is nothing

like a dream to

create the future.

Victor Hugo



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Equity and Mental Health





In order to achieve mental health for all we must have equity for all. Equity speaks to fairness and justice, whereby all of our citizens can expect fair play, equal access and a chance to advance life goals. Poverty, injustice and discrimination are not only very real barriers, but have a corrosive and degrading effect on each individual's mental health.

Mental health is always shared endeavour and can only be achieved where every member of our community is valued, cherished and has equal access to all opportunities – in housing, education, employment, healthcare and community participation.

While some barriers are obvious, others have become engrained over a long period of time and can go unnoticed. Subtle and not so subtle signals work to block, discourage and disadvantage

many people from meeting their full potential and realising their life ambitions. Where there is unfairness, there is imbalance, and inherent instability. Health inequity must be actively addressed and we are hopeful that we can help to restore balance.

At Mental Health Ireland we support universal access, respect for human rights and human dignity. We will identify, highlight and call-out systemic unfairness and bias, working to actively dismantle the geographic, structural, attitudinal and cultural barriers which can undermine mental health and wellbeing within the individual, family and friends and communities.

In this strategy we will continue our work to build progressive pathways for equal community participation so that every member of our community can flourish and thrive.

What is a Trauma Informed Approach?

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A trauma informed approach means **being aware** that people may have experienced trauma in their lives that has impacted on **them**, and that organisations and services can respond in a way that upholds recovery values and our human rights, thereby protecting people from further trauma or from being retraumatised. This is relevant to everyone in society, including people who have had challenges to their mental health, families. friends and those who provide services.

To work this way, everyone at all levels of the organisation must have a basic understanding of trauma and how it can affect individuals, family and friends, organisations and communities, they must be able to recognise the signs of trauma, which may be gender-, age-, or setting-specific, and they should respond by applying the principles of trauma-informed care.



'Staff in every part of the organisation change their language, behaviour and policies to take into consideration the experiences of those who have trauma histories, including staff members themselves.'

The Department of Health in its mental health policy Sharing the Vision, launched June 2020 commits the HSE to adopting a trauma informed approach. In line with the core values and principles of this policy, mental health services will be evidence-informed and recovery-oriented and will adopt trauma-informed approaches to care, based on lived experience and individual need. Mental Health Ireland will also adopt a trauma informed approach based on ongoing research and working in coproduction. We began this process in April 2021 when we brought together experts by experience and experts by profession through a National Webinar to begin to unpack the area of trauma to inform our work.

Sustainable Development Goals

The United Nation's Sustainable
Development Goals (SDGs) describe
the world we want to live in. These
are universal commitments that apply
to all nations and are a set of shared
ambitions for the year 2030. The 17
SDGs are about equity, fairness and
respect for people, nature and our
planet so that we can all look to the
future with confidence and hope.

SUSTAINABLE DEVELOPMENT GALS



Priorities, Objectives and Actions

Mental Health is a very broad field and there are so many things to do, but unless we are clear and focused, we could dissipate a lot of energy and have limited impact. In preparing this strategy we have listened closely to people who use mental health services, their family members, our Board, volunteers and staff members, project partners and the communities we serve. We have built upon our experience from our previous strategy and have incorporated recommendations from *Sharing the Vision*, Ireland's new National mental health policy.

An effective strategy must be ambitious and set specific new goals for the years ahead, while attending to the immediate needs of our communities and our organisation. It must also be a clear statement of intent, not just describing a destination, but also the means to getting there. The co-production group and many contributors to the consultation meetings were very clear that they wanted to see practical attainable goals, pragmatic actions, and impactful solutions.

This strategy identifies the most pertinent tasks which will advance our mission. In setting out our priorities, we clearly state our task and declare our focus, making it plain to those who would like to volunteer, partner or support our work. Our strategy sets out what Mental Health Ireland is about, what we stand for and how we will progress each particular priority.

Our strategy is presented under 5 priority themes, while presented separately, they are all interrelated and complement each other. These 5 priorities build upon our existing work placing a new emphasis based on emerging needs and describing our next steps.

A priority is a bold statement and determines what we do.



- 2. Embed coproduction
- 3. Improve Inclusion & Accessibility
 - 4. Be an evidence-informed, knowledge sharing organisation
 - 5. Build Sustainability & Organisational Capacity

Within each priority we have grouped objectives, these add another level of detail and set out of our commitments. By communicating these objectives clearly we can better co-ordinate and synchronise our work at all levels. Objectives must be unambiguous and clearly state what the organisation's intentions are. They are designed to be direct and intentional.

Guided by Mental Health Ireland's Mission, Vision and Values, each of the 23 Objectives describe our work with Individuals, Family members & Friends, Communities and Society. Each objective explains why we undertake certain activities.

Over 40 Actions describe how we will realise our objectives, each action is a clear and

concise statement of intent. In committing to specific actions we are now required to follow through so that our impact can be seen and measured.

Actions involve the work of many people and they are designed to bring clarity and focus to our work. Of course, it's not possible to detail in every possible action, but each action listed, guides a particular task or work flow so that we can progress in a more effective and dynamic manner. As before, all our actions are informed by coproduction and where possible we prefer to work in partnership with a diverse range of partners and agencies.

By being clear we can effect great change, and Action is the How.

Priority Areas & Actions

PRIORITY AREA 1

Strengthen Mental Health Promotion & the process of Recovery

The core business of Mental Health Ireland is promoting mental health and supporting recovery and this is reaffirmed in our first priority area. We will build on this work, creating opportunities for individuals, family and friends, communities and society to enhance and protect their mental health and increase their knowledge and understanding of recovery processes.

Priority Area 1

Strengthen Mental Health Promotion & the process of Recovery		
OBJECTIVES (Individuals, family and friends, communities, society)		ACTIONS
1	Build mental health awareness and understanding through campaigns, training, programmes, resources and information.	 Continue to coproduce and deliver scalable, evidence informed campaigns, resources, education and training programmes to promote and enhance mental health. Build on our current programmes focusing on physical and mental health and the natural environment.
2	Reduce misconceptions about mental health, mental ill health and recovery and reframe the language to reduce stigma, encourage early help seeking and support people experiencing mental distress.	Model the use of strengths based, clear and non-medical language when discussing people and their experiences in our training, resources, campaigns, events and promotional materials. Encourage open conversations about mental health through targeted campaigns.
3	Support empowerment through the provision of reliable information on mental health support services and signposting	Review, update, promote and signposting information.
4	Strengthen the relationships between Mental Health Ireland, Mental Health Associations and community partners to maximise the reach and impact of our work.	Coproduce Mental Health Ireland Volunteer Strategy. Create a digital platform which enables two-way communication with Mental Health Association's and external partners.
5	Influence legislation and support implementation of current policies in mental health.	Support the implementation of National Mental Health Promotion and Recovery Strategies. Coproduce a communication strategy.
6	Maintain links with academic and international partners to ensure that we can learn from and contribute to the knowledge base in mental health.	Strengthen our active membership of Mental Health Europe, the International Initiative for Mental Health Leaders and other relevant agencies. Continue to influence and input into the development and review of legislation and policy.
7	Ensure greater involvement of people with lived experience of mental health challenges and their family members / supporters in the development, design, and delivery of recovery oriented services.	 Continue to be the 'go-to' agency, supporting the building of Peer capacity in mental health & recovery education services. Enable peer led recovery initiatives by leading and ensuring that they are recovery-proofed, piloted and brought to scale. Collaborate with Peer Educators, statutory and community agencies to support the evolution and sustainability of Recovery Education services and Recovery Colleges.

Embed Coproduction

Coproduction is not just about having more people 'around the table'. It is about sharing power and valuing all experience and expertise. Used well, coproduction has the potential to bring about profound change in how we understand mental health and recovery, and what is needed to maintain and continually improve our mental health.

PRIORITY AREA 2

Mental Health Ireland has been developing our understanding of coproduction and to integrate coproduction into Mental Health Ireland practices. We now want to consolidate our practise and share our expertise to become leaders in implementing and promoting coproduction.

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Priority Area 2 Embed Coproduction		
(Ind	OBJECTIVES dividuals, family and friends, communities, society)	ACTIONS
1	Increase knowledge, understanding and practice of the process and benefits of coproduction.	Build capacity in coproduction in Mental Health Ireland, Mental Health Association's and throughout our Networks.
		Create a suite of learning resources on coproduction.
		Develop and support a coproduction panel for Mental Health Ireland which includes a wide range of individuals to ensure representation of Irish society.
2	Implement and promote coproduction through the work we do across all sectors of society	Ensure coproduction is central in our relationships with external organisations and partners.
		Mental Health Ireland and Mental Health Associations will continue to be a resource to co-produce and co-deliver innovative initiatives to statutory, voluntary and community agencies.



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PRIORITY AREA 3

Improve Inclusion & Accessibility

Mental Health Ireland works within an increasingly diverse society. Our understanding and awareness of societies needs continues to expand through working in coproduction. We are committed to ensuring that the work of Mental Health Ireland is representative and inclusive of and accessible to the society we live in.

Priority Area 3 Improve Inclusion & Accessibility		
(Indivi	OBJECTIVES duals, family and friends, communities, society)	ACTIONS
1	Be an informed organisation on matters of accessibility and inclusion.	Educate and upskill our staff and volunteers on how to make our work more accessible.
		Coproduce an Accessibility & Inclusion Strategy.
		 Create Standard Operating Procedures to be consistent in our practice relating to Trauma informed, Human Rights and Recovery approaches.
		 Utilise already available tools and resources from relevant organisations and address identified gaps in accessibility.
2	Proactively work with priority groups identified in national policy, to increase representation in our work and the accessibility of our processes and outputs/resources.	Partner with priority groups to understand their experiences to inform and improve the accessibility of Mental Health Ireland's work.
3	Employ universal design and Web Content Accessibility Guidelines (WCAG) 2.1 in the development of our resources, products and workshops.	Partner with priority groups to understand their experiences to inform and improve the accessibility of Mental Health Ireland's work.

Mental Health Ireland programmes and initiatives will be evidence-informed and Mental Health Ireland will be a credible and reliable source of information and evidence on Mental Health Promotion & Recovery.

PRIORITY AREA 4

Be an evidenceinformed, knowledge sharing organisation

	Priority Area 4 Be an evidence-informed, knowledge sharing organisation		
OBJECTIVES (Individuals, family and friends, communities, society)		ACTIONS	
1	Use evidence to inform and direct the work of Mental Health Ireland	Coproduce a research strategy.	
2	Demonstrate the value and impact of Mental Health Ireland	Carry out a social impact analysis.	
3	Invest in the formal evaluation of Mental Health Ireland programmes	Invest in formal evaluation of Mental Health Ireland programmes and initiatives	
4	Contribute to the evidence base on Recovery & Mental Health Promotion in Ireland	Work with partners to identify and make available a wide variety of evidence on mental health promotion and recovery.	
5 r	Build capacity for coproduction in mental health research and other health-related research and	Build the research capacity of the team including Mental Health Association volunteers	
	evaluation.	Increase the understanding and practice of coproduction in health-related research, particularly mental health research	
6	Use a robust framework for the governance, management and support of research and evaluation within the organisation.	Utilise relevant and appropriate research governance processes	
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PRIORITY AREA 5

Build Sustainability & Organisational Capacity

The external environment in which we operate has an increasing focus on sustainability and the need for the highest possible standards and transparency in our work. Mental Health Ireland will continue to improve its governance, processes, and systems to ensure a future proofed, ethical and environmentally responsible organisation.

	Priority Area 5 Build Sustainability & Organisational Capacity			
(Indivi	OBJECTIVES duals, family and friends, communities, society)	ACTIONS		
1	Continue strengthening governance to ensure quality, transparency and accountability in our work.	Adhere and comply with all statutory and legislative requirements. Regularly review Organisation and Board effectiveness.		
2	Develop our organisation structures to support the delivery of Mental Health Ireland's work.	 Review, update and coproduce policies and procedures as required. Utilise new technologies that will future - proof the organisation. Develop clear succession planning and processes. 		
3	Improve on our environmental choices.	Coproduce and implement an organisation statement and policy on environmental sustainability.		
4	Generate revenue streams that will support Mental Health Ireland future financial sustainability.	Coproduce a new fundraising strategy.		
5	Create an organisational culture where staff, volunteers, and Mental Health Associations are valued, respected, supported and empowered.	Coproduce a workplace culture and staff wellbeing strategy. Promote and provide opportunities for learning and continuous professional development with the organisation. Strengthen the relationships between MHAs and Mental Health Ireland and harness skills and resources for mutual benefit. Coproduce a mental health in the workplace policy.		

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Strategy Evaluation

Strategy evaluation - how we plan to measure progress

For Mental Health Ireland, the value of having a robust strategic plan is not just in setting our goals and direction for the next three years, but in enabling us to assess our progress against those goals. The strategy evaluation process helps us to answer questions such as;



How much progress have we made towards our vision?

Which of our objectives have we completed successfully?

Which objectives need to be changed or are no longer needed?

Where we fell short of our goals, why did this happen?

As we developed the strategy we identified outputs, outcomes and ways we might measure these so that we can easily assess our progress at regular intervals.

Outputs are fairly straightforward to define and measure – they are the things that happen or are produced. For example, one action might be to deliver three training sessions on a particular topic. It is easy to establish if these happen and we can also provide other information like how many people participated in the training, where it happened and so on.

Outcomes are sometimes more difficult to measure, as they can be more difficult to define and they often require specific tools or methods to measure. Taking the training example again, one of the objectives is to deliver training but that is part of achieving a wider goal around growing mental health awareness and understanding. The outcomes from the training are to bring about this change, i.e. to increase understanding of mental health. To measure this, we might use a questionnaire for participants which will help us to assess how their understanding increased.

Measuring outputs and outcomes over the course of the strategy will give us some assessment of impact, that is, the longer term, collective effect of our objectives and actions. As an organisation, we are committed to learning and responding to that learning – what is working well? What changes in the wider environment do we need to respond to? What can we do better?

In the first six months of the strategy, we will put in place metrics to measure our goals and objectives and a system to produce regular reports for us to track our progress.



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Key Documents that informed Mental Health for All – Hope, Strength & Action

The coproduction group consulted the following policies, documents and declarations in the drafting of our new strategy. These include;

- Empowerment From Idea to Actions (2019 2021)
- The National Framework for Recovery (2018 -2020)
- The Ottawa Charter for Health Promotion (1986)
- Sharing the Vision (2020 2030)
- Connecting for Life (2015-2024)
- Slainte Care (2018)
- CHIME Principles (2011)
- Mental Health Act (2001)
- Healthy Ireland Strategy (2013)
- Equal Status Act (2000 2018)
- Declaration on Human Rights (1948)



Notes Notes

