

Appendix 7.1 Public engagement project description and results



Public Engagement Case Study

Perspectives of the Sierra: Fighting against mental health-related stigma

Overview and context

Perspectives of the Sierra was a project in collaboration with Partners in Health Mexico (PIH/CES) that sought to challenge mental health-related stigma in rural communities of the State of Chiapas by empowering people living with mental illnesses to share their experiences with others. Over the course of four months, we conducted photography workshops based on the photovoice methodology, where we involved 20 patients from the mental health programme. All participants developed their own projects and shared these in presentations with family members. The project results have been further disseminated to promote the creation of safe environments to speak openly about mental illnesses.

Project Coordinator:

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The basics

Who: People living with mental illness
What: Challenge the stigma around mental health
When: April – July 2017
Where: Chiapas, Mexico
How: Photovoice
Funder: LSHTM Small Grants Scheme

By the numbers

Development time: 9 months
Project duration: 4 months
No. of participants: 20 patients
LSHTM staff involved: 2
Other professional staff: 6
No. of volunteers: 7
Project budget: £1,640

Project aims

- To facilitate participant reflections about positive and negative experiences of living with a mental illness.
- Support participants in the process of generating images to express their reflections, and sharing them with peers, family members and facilitators via the photovoice method.
- Generate safe environments to have open discussions about experiences with mental illness mediated by these images.
- Promote the creation of these safe spaces through the wider dissemination of the project.

The audience

The project's primary audience was patients from a mental health programme delivered through four rural and remote primary health clinics in Chiapas, Mexico. Clinic staff identified potential participants and project staff made home visits for the final recruitment. Participants were aged 13-64 and had been diagnosed with depression or anxiety.

Our secondary audience were family members invited to attend the final presentations. Since the project ended we have also reached a wider audience through a website and three presentations of the participants' work in relevant events in Mexico and abroad.

The project

Over a two-week period, workshops were facilitated by psychologists and members of the mental health programme in each community. The workshops included five group sessions at community halls, five individual sessions at participant homes or local clinics, and two final group sessions, one of which involved family members.

We involved between four to six participants in each community who were taught how to use photographic cameras, and shown how to express their thoughts and emotions through images in a way that could facilitate a dialogue between participants. Sessions consisted of practical exercises and discussions on the following:

1. Introduction to photography
2. Who am I?
3. What is depression and anxiety?
4. My photography project

Each participant developed their own photography project on any topic that reflected what they wanted to share. They were asked to choose 5-20 of their photos, develop a message for each photo, and answer the question: "What advice would I give to someone going through the same thing as me?"

Each participant presented their project in a group session and in a session with family members, for which participants got together to cook a meal to celebrate. Each participant was given a pack with their printed photos and a certificate acknowledging their participation.

Collaboration and external partners

- Fatima Rodriguez and Sarah Hartman from Partners in Health Mexico/Compañeros de Salud and Camila Jurado, an independent photographer, supported the design and implementation of the project at all stages. The aforementioned organisation also provided key logistical support and funds.
- Sarah Evans-Lacko from the London School of Economics provided invaluable advice for project design.
- Undergraduate students and teachers from the university UPAEP volunteered their time to support the delivery of the second set of workshops.

Key costs

Photographic cameras: £635

Photo printing: £130

Transportation: £640

Materials and snacks: £235

Before the project

Major planning and development tasks

Developing content: Planning the sessions and developing materials took a significant amount of time. We anticipated that most participants would not have any previous experience using a photographic camera, and that a significant proportion of them would be illiterate. We had to ensure everyone had a good understanding by using adequate vocabulary and explanations. After each of the first two sessions we spent some time discussing successes and failures so that we could adjust and improve subsequent sessions. It was important and helpful to share this information so that we could exchange advice, especially since all team members had different strengths. Some of us were more experienced in working in similar workshops, others had a good knowledge of photography and others had expertise in working in this particular context.

Participant recruitment: Recruiting was another very time-consuming task. Due to the lack of cell phone coverage, we had to make home visits to invite participants, which long distances and weather conditions made difficult.

Main challenges

Resistance to photography: Participants in one of the communities did not want to take photos of family members and seemed to distrust the team, even after discussing several times the use of the photos. After exploring this issue, we found out the community previously had negative experiences with other photography projects brought in by external people.

Solution: We organised a Q&A session where we clarified any doubts or fears of participants.

Attendance of participants: It was common that participants forgot about sessions and showed up late. We decided to issue daily reminders to participants, which had to be done through home visits and sometimes took significant time. In one of the communities, we lost two participants due to husbands forbidding the participation of their wives.

Solution: On future occasions we have to be sure to establish a dialogue with the family from the beginning, especially in communities with high levels of gender-based violence.

Scheduling of sessions: Many times community meetings or those related to benefit programmes were suddenly scheduled and conflicted with organised sessions. Besides this, the rainy season started during the course of the implementation of the second set of workshops which meant that there was rain every afternoon. Participants usually preferred afternoon sessions since this allows them to do their house work in the morning.

Solution: We had to be flexible and be able to reschedule sessions or appointments according to participants' needs.

Cultural competency: Certain collaborators found it challenging to adapt to the cultural needs and norms of the community.

Solution: We had to organise daily meetings in which we could share these difficulties and frustrations either related to logistic complications, or challenges in the communication and interaction with participants. Sharing this and supporting each other was key.

Project outcomes

The project was successful in many ways. Most participants used a camera for the first time in their lives through the workshop. All participants expressed having enjoyed the experience, both familiarising themselves with photography and using it to reflect on their feelings and experiences with mental illnesses to share with their peers.

Many participants found it useful to meet others who had gone through similar experiences and struggles as them. We observed a decrease in internalised stigma scores in 77% of participants. The areas in which we observed the most significant changes indicate that participants now feel less worried about telling others they have received psychological treatment, feel less lonely, would be more willing to say they have a mental illness when applying for a job and feel stronger for having mental health problems.

What worked?

Photovoice: Using photography helped participants engage in a conversation about topics they usually feel uncomfortable discussing. The images gave them the strength to express difficult experiences and feelings. Telling these stories allowed them to recognise their own strengths and learning how to use the camera helped them see their own skills.

Tailored support: One-to-one support during group exercises and individual sessions helped participants with different performance levels to equally benefit from the workshop.

What did not work?

Workshop timing: Implementing the workshop during the rainy season was significantly harder for multiple reasons: the attendance of participants decreased, electricity cuts were very frequent making it impossible to use the electronic equipment needed and home visits were more difficult due to slippery roads.

Solution: Factoring in local weather conditions in contexts with poor infrastructure is key to the project planning.

Feedback from participants

Participants enjoyed the experience and were grateful for the source of support they had found through the workshop. They also expressed that they would like to carry on participating in similar activities:

"It was nice to use a camera and I never thought you could do all this with photos... Making a story with the photos and realising that we do not all think the same about the disease."

Participant, aged 17

"I had the opportunity to give my opinion and to know that I am not the only one suffering this but there are many people who are suffering."

Participant, aged 20

Family members were surprised to learn for the first time about the many struggles their loved ones had gone through. Many family members also mentioned feeling more understanding of certain behaviours that they had judged as negative before learning more about the characteristics of depression and anxiety:

"At some point when she started it was very difficult for me to understand her, and I always said 'oh, you're complaining' or 'get up, do this or the other,' but when I really understood the problem I tried to relate more to her, to talk more with her."

Mother of a participant

Future potential or plans

Members of PIH/CES are planning to carry on implementing workshops in the rest of the communities where they currently work. We are also collaborating to design follow-up activities for the four communities where workshops have already taken place. They have committed to absorb all running expenses and we are planning to jointly continue disseminating the project results and promoting the fight against stigma.

Advice for other researchers

- Careful consideration of the financial resources and time available, are essential to formulate realistic and achievable objectives.
- Developing a strong and equitable relationship with local collaborators was essential to the success of this project. Frequent contact helped tackle emerging challenges more efficiently.
- It is important to create spaces where we can dialogue with participants and mechanisms by which their views and needs can be taken into account in projects.
- Prioritising the voices of participants allowed for relevant reflections about our relationship with targeted populations and strengthened the impact of the project for everyone involved.

Further information



You can find out more about the project at the following links:

- [The project website contains details about the communities and samples of the participants' projects.](#)
- [View images from one of the project's exhibitions.](#)
- To read publications related to the project please visit the [PhotoVoice](#) or [Verne El Pais](#) websites.

Contact



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