

RECOMMENDATIONS TO FUNDERS TO IMPROVE MENTAL HEALTH & WELL-BEING IN THE HUMAN RIGHTS FIELD

The Human Rights Resilience Project

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Human rights advocacy can be a source of significant joy, purpose, political agency, belonging, and community.¹ Yet advocates can also experience harms, and trauma in their efforts to advance justice and equality, including those caused by heavy workloads, time pressures, discrimination and bullying in the workplace, vicarious exposure to trauma and human rights abuse, and direct experience of threats and attacks. Advocates can experience suffering, sometimes very severe, as a result, including demotivation, alienation, anxiety, fear, depression, and post-traumatic stress disorder. How advocates experience their work and any resulting harms can vary widely, and may be highly contextual and culturally specific.

Improving and maintaining well-being is essential to individual health, to organizational functioning, and to the sustainability and effectiveness of the human rights field as a whole.

Positively transforming mental health and well-being in the human rights field will require significant reforms and both structural changes and close attention to the contextually-specific needs of individual advocates and organizations. The causes and dynamics at play are complex, and there are no quick fixes that can address the cultural shifts required. As efforts are taken to improve well-being, it is important that the field avoids tick-the-box or commodified approaches. Improving the well-being of human rights advocates requires a holistic response and a movement-wide prioritization of well-being, with careful attention to context, culture, and the diverse needs of advocates and organizations.

Some of the drivers of poor mental health are inherent to much human rights work—such as exposure to human rights violations—and no recommendation could realistically address these inbuilt pathways of exposure. Other drivers are so structural, vast, and deeply entrenched in the human rights field and the world in which the field operates, that considering how to remedy them to specifically improve mental health can feel overwhelming and disempowering. These drivers include: the job and economic insecurity faced by many advocates, especially those working in the Global South—a result of economic systems and global inequality; the human rights marketplace, which can overly

¹ The Human Rights Resilience Project (<https://www.hrresilience.org/>) seeks to promote resilience and improve mental health and well-being among human rights advocates. The members of the project conduct research into mental health, promote awareness of well-being issues in the human rights, offer trainings and mentoring, and work to support the development of a global community of practice engaged in collective learning about resilience. The authors of these recommendations are: Margaret Satterthwaite, NYU School of Law; Sarah Knuckey, Columbia Law School; Ria Singh Sawhney, Human Rights Advocate, India; Katie Wightman, NYU School of Law; Rohini Bagrodia, The New School for Social Research; and Adam Brown, The New School for Social Research. These recommendations are based upon three years of research into how NGOs are responding to the mental health needs of advocates. The full study is available at: *From a “Culture of Unwellness” to Sustainable Advocacy: Organizational Responses to Mental Health Risks in the Human Rights Field*, 48 SOUTHERN CALIFORNIA REVIEW OF LAW AND SOCIAL JUSTICE (2019) 443-554.

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focus on “outputs” and reinforce a competitive, individualistic human rights culture; burdensome fundraising and funder reporting requirements; savior mentalities, closely linked with histories of colonization; and discrimination and bias, especially related to class, race, ethnicity, gender, sexuality, disability, and nationality.

These are problems that are caused by many socio-economic and political factors, and which, in turn, cause many harms, including trauma and systematic deprivation of well-being. These are vital areas in need of change, and ongoing efforts should take into account the mental health effects of the underlying systems.

One obstacle to discussing these issues can be the terminology used. “Mental health” can be a useful framing for some, but it can have an overly medicalized, stigmatizing, or culturally-specific connotation for others. “Well-being” can be understood more broadly and inclusively, but may carry connotations of individualized, de-politicized, self-care. Action to improve psychosocial health should be designed as broadly as possible, by acknowledging the limitations of some terms and frameworks, and working to promote inclusive, diverse, and culturally-informed responses. Part of the human rights field’s work on these issues should be to discuss and build shared understandings based on diverse experiences and worldviews.

Recognition of the deeply-rooted problems requiring radical change or of the complexities of the issues and the difficulty of defining a clear set of recommendations applicable across the board should not operate as an excuse to take no action now to improve well-being. There are many concrete, immediately actionable reforms that are achievable in the near-term and which address a variety of causes of distress, or which can support efforts to transform the field over the long term. Such steps should be taken while the human rights field works toward deep transformation. Some of these steps include the following recommended actions, which are drawn from our research with advocates around the world.

1. **Funders should review, in dialogue with grantees, how their current practices may be supporting or undermining well-being among advocates and how current practices could be reformed.** This could include, for example, examination of how funder-grantee relationships, grant reporting processes, the structure of grants, and core versus project funding may impact well-being.
2. **Funders should review their own institutional well-being policies and practices and implement reforms where necessary.** This is necessary to support the well-being of staff working at funder organizations. And, given the power and influence of funders within the human rights field, it is incumbent upon funders to lead by example and ensure that their own organizational culture prioritizes well-being. The priorities, values, and practices of funders have a ripple effect and influence the well-being of the human rights movement at large.
3. **Train grant officers in mental health and in how to support grantees to improve well-being.** To ensure that the kinds of actions recommended here can be implemented well, provide resources and training to grant officers and their managers so that their capacities to support NGOs to advance well-being are strengthened. This should be done in consultation with grantees, to ensure that any grantor-provided support is appropriate.

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4. **Include funding for well-being in core support for organizations and project grants.** When granting to NGOs, ensure that core support includes well-being funds and that project grants include funding for concrete programming to promote mental health, particularly where a project involves exposure to traumatic material. Funders have a responsibility to “do no harm,” and this includes ensuring that sufficient funding is allocated for organizations to function with resilience and for projects to be executed sustainably. When providing core funding, funders could offer resources to support organizational plans to advance well-being and resilience and welcome mainstreaming of these concerns. While addressing well-being in core support is crucial, including attention to mental health in project funding is also essential.
5. **Support sectoral, regional, and field-wide mental health initiatives.** Funders can support field-wide changes through facilitating initiatives across and between organizations. For example, coalitions of civil society organizations could be supported to engage in dedicated mental health trainings, meetings, best-practice sharing, personnel exchanges, awareness-raising activities, peer-support, de-stigmatizing programming, management training, and other efforts designed collaboratively with grantees.
6. **Consider how to mainstream well-being within grant making processes.** Funders should consult with well-being experts and grantees to assess how well-being could be better integrated into grant proposals, applications, and reports. For example, funders could set out their commitment to support well-being programming in requests for proposals to ensure that civil society groups are aware that, in seeking funding for projects, they can include funds to take concrete steps to mitigate mental health harms. Similarly, funders could welcome reflections about well-being programming in grant reports. Funders should also support NGOs that seek to advance respect for labor rights and improve staff salaries, health benefits, and other core expenses for well-being concerns. Such steps should be taken in a way that does not impose unnecessary burdens on NGOs, result in a tick-boxing exercise, or have a disproportionate impact on smaller organizations or those in the Global South; rather, the steps should be designed to support NGOs to improve well-being.
7. **In consultation with grantees, share information about mental health risks and strategies.** To improve knowledge among advocates about the risks of human rights work and strategies for well-being, funders should provide educational materials to grantees about well-being, and build spaces to learn from grantees about well-being needs and initiatives. This sharing should be done in a way that respects the agency and context of grantees; funders’ approaches to well-being should not be imposed on grantees.
8. **Include staff well-being among the measures used to evaluate project or NGO impact.** Advocates reported that some funders formulate outcome expectations that undermine, instead of promote, a healthy understanding of social impact. In recognition that the metrics of success established by funders influence organizational priorities, funders should welcome grantees’ efforts to re-define these metrics to ensure there is space for policies and programs to advance staff well-being when assessing the “impacts” and “success” of funded projects.

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9. **Support NGO efforts to improve well-being at the organizational level.** Many of the steps that NGOs may take to improve the sustainability of their work and to respond to the well-being needs of advocates require funding. Organizations have different needs and there is no one-size-fits-all approach. As with other areas of funder support, it is essential for funders to consult with grantees about their specific needs. Some types of specific measures which funders could, in consultation with NGOs, support include:
- Consultation processes by the NGO with their staff about their specific well-being concerns and needs.
 - The creation of culturally and contextually appropriate NGO well-being policies, plans, or procedures.
 - Efforts to ensure staff are paid decent wages and have job security. Many advocates are underpaid or work in precarious positions and this has a direct impact on their well-being. Low wages increase stress, reduce access to individual well-being support such as healthcare and mental health services, and limit lifestyle choices relating to, for example, exercise, sleep, leisure activities, and nutrition, which can negatively impact well-being.
 - Training, including for managers and peers, about how to identify mental health risks and concerns and in how to support colleagues, and the creation and provision of educational resources. Psychoeducation about the importance of well-being can also help to destigmatize mental health issues.
 - Provide training and professional development opportunities for staff. Advocates reported that opportunities for staff to learn and develop their skill-base are often tied to well-being.
 - Efforts to mainstream well-being into daily human rights practice, including, for example, efforts to include well-being in staff meetings and evaluations, debriefing practices, and trauma-informed workflows.
 - Staff leave and breaks.
 - Access to physical and mental healthcare. Funders can support organizations to facilitate access to psychological support in ways that work best for their employees: for example, through cultural or spiritual practices identified by the NGO as important, in-house counsellors, tele-therapy, or mental health and well-being benefits.
 - Promote peer support programs to support colleagues address well-being challenges. Peer support programs foster staff bonds, reduce feelings of isolation, and provide opportunities to share self-care practices. Advocates reported the value in both formal and informal programs.
 - Creation of a well-being or resilience officer in the organization with responsibility for building a holistic well-being program.
 - Alternative leadership structures, such as co-leadership or rotating roles.

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10. **Fund opportunities for mental health professionals and others involved in providing well-being support to enhance the well-being of human rights advocates.** Funders can support efforts to:

- Train mental health professionals and others in the needs and circumstances of human rights advocates. Advocates reported that some mental health professionals lack sufficient understanding of the specific well-being challenges in the human rights field.
- Develop and test trainings and educational materials tailored to human rights advocates.
- Involve mental health experts in funder and NGO efforts, including through aiding in the development of policies and resources.

11. **Fund research on human rights and mental health.** In particular, funders should:

- Fund studies to better understand the factors underlying mental health issues in human rights and the efficacy of different interventions to enhance well-being.
- Prioritize support for the development and testing of peer support programs and methods, which are among the most promising strategies.
- Support research conducted by Global South researchers, collaborative and interdisciplinary research, and research conducted with diverse perspectives on well-being, including research outside western or medical models.