

Our approach to mental health and psychosocial disability

People with psychosocial disabilities continue to face systemic exclusion, stigma, and pervasive violations of their rights. Many are denied access to social protection, rights-based healthcare, legal safeguards, and meaningful, equal participation in community life – especially in low-resource settings. Despite global evidence and human rights guidance, many countries still invest in outdated institutional and biomedical models of mental healthcare, instead of inclusive, rights-based, community-rooted services.

CBM Global's approach to mental health and psychosocial disability builds on decades of partnership, evidence, learning, and meaningful engagement with people with lived experience. It is grounded in human rights and social justice, guided by the leadership of people with lived experience, and aligned with international human rights standards, including the Convention on the Rights of Person's with Disabilities (CRPD), Agenda 2030, the Sustainable Development Goals, the World Health Organization's QualityRights Initiative, and the global disability movement.

Mental health and psychosocial disability aren't just health issues – they're equity and justice issues, shaped by social, cultural, and environmental factors.

OUR VALUE ADD:

CBM plays a distinctive and strategic role in the development ecosystem, offering a unique blend of technical expertise, trusted relationships, and integrated vehicles of change. Our value lies in the way we connect, equip, and amplify the voices and impact of local partners – especially Organisations of People with Disabilities (OPDs) – via our three vehicles of change: **advocacy, advisory services, and programming.**

OUR STRATEGIC PRIORITIES:

Our work on mental health and psychosocial disability is shaped by a vision of just, inclusive, and connected societies. To realise this vision, we are committed to a set of strategic priorities that will guide all our advocacy, advisory, and program work.

Each priority is interconnected and mutually reinforcing. Together, they work toward achieving the [preconditions for inclusion](#).

Claiming rights and strengthening voice: partnering with people with psychosocial disabilities to claim their rights, lead advocacy efforts, and shape the decisions and systems that affect their lives.

Localising power and practice: shifting resources, decision-making, and leadership to local organisations and communities, promoting culturally appropriate, lived experience-led innovations.

Inclusive cross-sectoral systems: integrating mental health and psychosocial disability inclusion across health, education, livelihoods, social protection, and justice systems to address holistic needs.

Inclusive supportive communities: implementing models that challenge stigma and social exclusion, establish or scale support systems (i.e. peer, family, community) and create sustainable alternatives to institutionalisation through rights-based, community-rooted models.

Inclusive mental health and psychosocial support (MHPSS) in Disaster Risk Management: embedding inclusive mental health and psychosocial support into risk reduction, emergency preparedness, response, and recovery, ensuring no one is left behind in crisis contexts, including climate crises.

OUR APPROACH:

To achieve our vision for mental health and psychosocial disability, CBM utilises our three vehicles of change Advocacy, Advisory, and Programs.

Advocacy: focuses on shifting laws, policies, systems, and attitudes to uphold the rights of people with psychosocial disabilities. We partner with people with lived experience to position mental health as a human rights and inclusion issue, promote CRPD implementation, and ensure mental health is integrated into sustainable development, humanitarian, and climate agendas. Advocacy happens at all levels – global to local – amplifying voices of people with psychosocial disabilities.

Advisory: provides technical expertise to governments, UN organisations, development and humanitarian actors, OPDs, and service providers. We help translate rights-based mental health and psychosocial disability principles into practice by guiding inclusive policies, community models, deinstitutionalisation, inclusive MHPSS, and integration across sectors. This includes capacity building, co-developing tools, and offering technical support.

Programs: our programs are grounded in community-rooted approaches, ensuring services are accessible, person-centred, and rights-affirming. We partner with local organisations, including OPDs and user-led groups, to co-design and deliver initiatives that strengthen support systems, promote inclusion, tackle stigma, and build resilience. These programs generate evidence that informs our advocacy and advisory work.

The goal?

A world where people with psychosocial disabilities live with dignity, connection, and choice, supported by inclusive communities and rights-based systems that foster wellbeing, freedom, and justice for all.



OUR WORK:

CBM has been at the forefront of rights-based, inclusive mental health and psychosocial disability programming for more than two decades. We have worked to challenge the dominance of institutional and biomedical approaches and promote mental health as a human rights and development priority. The integration of [Community Based Inclusive Development \(CBID\)](#) and the BasicNeeds model into our work has helped to embed community-rooted and lived experience-driven approaches into more than 60 of our programs across development and humanitarian settings.

CBM Australia is currently working with local partners to implement a number of projects focused on mental health and psychosocial disability.

These include:

Community mental health projects in Bangladesh, Indonesia*, Nepal*, Philippines* and Kenya. These projects focus on strengthening support systems at peer, family and community levels.

An advocacy focused project in Indonesia* that aims to strengthen services and policies to promote deinstitutionalisation.

Disaster Risk Reduction and humanitarian projects in Indonesia and Nepal. These initiatives work to enhance the resilience of people with mental health conditions by improving access to MHPSS services and supporting initiatives that help them prepare for, adapt to, and recover from the impacts of climate change.

Regional Health Partnership projects in Fiji^ and the Philippines^. These projects aim to amplify the voices of people with psychosocial disabilities and improve access to community-based mental health and social support services through stronger mental health policy, leadership, resourcing, and governance systems, and greater community awareness.

QualityRights Masters Training project which is focused on building a regional network of expert trainers across the Asia-Pacific Region. This network will mentor and strengthen the capacity of future trainers on rights-based mental health services and supports.

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^ Projects supported by the Australian Government through the Partnerships for a Healthy Region initiative.

Top right: Gobinda enjoying a moment with his dog at home in Nepal. He receives ongoing support for his mental health through one of CBM Australia's community mental health projects.