

Healthy Brains Global Initiative

Creating new 'outcomes funds' with regional partners to mobilize new programs at scale; addressing mental health and its associated socio-economic impacts; giving donors a new mechanism to connect their funding more effectively with results, significantly increasing accountability and transparency; bringing in social or impact investment where needed to provide working capital; embedding research and learning from day one of delivery; working in collaboration with donors, governments, researchers, service providers and service users.

A call for Expressions of Interest

For programs to address poor mental health and/or its socio-economic causes and consequences and/or to strengthen mental health systems – **to be contracted and paid for on the basis of outcomes.**

Please note: We do not currently have the funding for these contracts. We are looking for Expressions of Interest to highlight what is out there and what could be achieved, selecting compelling examples to present to donors in order to establish these new mental health outcomes funds. We aim to run a further competitive Request for Proposals in 2023.

The context

The effects of mental and neurological health conditions are huge for individuals, families, communities and countries. It accounts for nearly 10% of the global disease burden, 70% of which originates between the ages of 11 and 24.

This represents an estimated \$4 trillion in annual cost to the global economy and has been exacerbated by the impact of COVID-19.

But it remains chronically unaddressed virtually everywhere. It is the great challenge we all face, either personally or in our families, at some point in our lives, but that we try to hide from. Financial investments remain very low with countries spending less than 2% of their health budgets on mental health, and with mental health systems often barely functioning. In some places, people will tragically chain up family members with acute conditions. Some estimate that nearly two thirds of adults with a mental illness receive no treatment.

The impact, inevitably, is exacerbated for vulnerable groups and in low resource settings (in low- and high-income countries). It is mixed up with a wide range of causes and consequences, from unemployment to child pregnancies, from homelessness to addiction, from domestic abuse to HIV patients dropping out of treatment, from environmental changes to the aftermath of conflict.

Healthy Brains Global Initiative

The Healthy Brains Global Initiative (HBGI) was founded in 2020, uniting world leaders across sectors to tackle this growing global issue. Over the past two years, HBGI has commissioned studies to develop its strategy, and brought in a wide variety of stakeholders through its Interim Board and Lived Experience Council. HBGI is now:

- **establishing four new ‘outcomes funds’** (giving donors a new stand-alone mechanism to enable them to pay for results);
- **contracting new programs and paying for them on the basis of outcomes** (linking funding to clearly evidenced outcomes, at the level of the individual service user, maximizing the funding impact);
- **learning from day one through generating and sharing data at scale** (undertaking research to drive a change in the global understanding of mental illness, across populations, in its prevention and treatment, and its place in government policy).

This flexible, outcomes-based model, with embedded research, will support bottom-up approaches to improve mental health, to improve life chances, and to foster systems-level change. We will grow this in stages, starting with four regional funds: **South Asia, Africa, California and Ukraine**. Each has an initial target of US\$50m to be spent on outcomes over six years with early ‘proofs of concept’ demonstrating the effectiveness and potential of the model.

Donors and multilaterals are all increasingly interested in performance measurement and outcomes – they want to see and pay for results. But their systems are not geared for this so they find it complex and expensive.

HBGI, on the other hand, will be structured from the outset to contract, manage and pay for performance. This will be our function.

How it will work

1. We will work with governments, donors, investors, communities, people with lived experience and service providers to identify programs and other interventions.
2. We will define clear, measurable outcomes to contract each program, with pricing that takes account of actual delivery costs, and we will pay programs when they deliver these outcomes.
3. If the providers of these programs need working capital to cover their delivery costs before they receive any outcomes payments, then we will bring in social investors to cover this (similar to Impact Bonds, where social investors take on the risk rather than the service providers).
4. We will closely manage the performance of these programs and look to generate rich data on the activities, the journey of the service recipients, the costs and the outcomes. We will fund local governments to co-manage these programs with us, to build capacity and influence policy.

5. We will not wait until programs are finished to evaluate impact. Implementation research will commence along with every program and our findings will be shared openly, globally.

Over the next 6 months, HBGI aims to mobilize US\$8-14m of private capital, which will be used to develop the systems and to secure the outcomes funds that HBGI will then administer on behalf of our donors. We will launch a Request for Proposals in 2023 for our first programs to be paid for with these funds. These programs will go live in 2024.

Our call for Expressions of Interest

We would like to go to philanthropists and donors **now** with examples of the types of programs and other interventions that we could contract and pay on the basis of outcomes – that will deliver tangible impact on vulnerable people’s lives.

We are calling for proposals of programs that you would like to run to address clearly identified needs.

We are looking for around a dozen compelling examples that we will use in our dialogue with the decision-makers. We want to show that such programs exist, how outcomes can be defined and delivered, and that there is an appetite in the ‘market’ to use this model to unlock a new scale of impact.

We hope to generate a hugely diverse set of possible programs. We have already seen some of these in practice but some may be completely new or at least new to the idea of outcomes funding. These might include, but certainly not be limited to:

- *Strengthening health systems, such as growing the skills of care workers or reducing staff attrition or improving access to pharmaceuticals or reducing hospitalization rates.*
- *Deploying peer counsellors or case managers, possibly embedding employment advisors in mental health teams or enabling homeless people to secure stable accommodation.*
- *Delivering across physical health conditions, such as improving adherence to HIV or TB treatment or reducing incidences of diabetes.*
- *Perhaps with a humanitarian focus, improving the wellbeing of refugees in refugee camps or assisting disaster or conflict victims to deal with trauma and regain independence.*
- *Possibly focused on young people, maybe increasing school attendance for vulnerable groups or reducing incidences of bullying or self-harm or eating disorders.*

We have a particular interest in low- and middle-income countries, and in young people who are suffering from anxiety and depression. Though we are not constrained by this and also recognize that there are many people in high-income countries who are currently in desperate need of mental health support.

Your proposed program could have been run already on a small scale, and you have a larger population that you would like to reach. It could have been run in one country and you would

like to implement it in a new context with evident need. You already have an evidence base, even if in a different context, of how well it has worked. You could be the provider, or part of a delivery partnership, or the manager of the program, or maybe an investor, though it will be clear who does what. We are thinking of programs that run for between three and five years.

There is, however, one vital criterion that all proposed programs must meet:

It must be possible to define a set of outcomes that can be measured and verified.

Submission instructions

If you are interested in being involved in this and would like potentially to be one of the examples we cite at this time, then we would very much like to hear from you. Please tell us:

- a) What your proposed program is;
- b) What is the target population;
- c) What is the need you are looking to address and how this is linked to mental health;
- d) What are the (clear, measurable, verifiable) outcomes that you would aim to achieve;
- e) How long the program would run and how many people it would reach and your estimate of the outcomes that could be achieved;
- f) A high-level estimate of program cost;
- g) Where this program has run before and any data you have on its performance;
- h) Any existing government buy-in;
- i) References/links to any public evaluations/reports on the program or something like it;
- j) A little about your organization, including your mission, brief history, current geographical reach, usual sources of funding, number of staff and annual financial turnover.

We do not anticipate this taking more than **four pages**. Please try to keep it as succinct and clear as possible.

In order to help us sift and select our examples, we will score these Expressions of Interest on the following basis:

- This is a population/community/system that is currently not reached by such a program (i.e. we are obviously going to be adding value) (15 marks);
- It is a concrete program in terms of the numbers to be reached, resources to be deployed, timeline, activities and overall cost (30 marks);
- There are clear, measurable, verifiable outcomes that we will be able to cost (i.e. attach a unit price to) (20 marks);
- There is an obvious link to mental health (15 marks);
- There is evidence of the proposed program/intervention working (e.g. performance data) (10 marks);
- The organization is credible, with a track record and capacity and stability (10 marks).

To be clear, we have no funding for these right now, but want to use the possible programs to raise the funding. We want to make the outcomes fund come alive with real examples.

We will acknowledge all proposals and, unless you request otherwise, keep you informed of all future developments of HBGI and the outcomes fund. We will choose around a dozen of the most compelling cases to include in our presentations to donors and compile an overview of the remaining proposals. All of these will be described on our website and to our social media contacts. You will be invited to consult with us on the best next steps, including on the process we follow when we move on in 2023 to a more formal Request for Proposals and a competitive selection of the first phase of funded programs. We hope you will consider submitting again at that time.

We regret that given current resource constraints, we are only accepting responses in English. Future Requests for Proposals will seek to be more inclusive and enable more diverse responses.

Please submit your Expressions of Interest as soon as it is ready and no later than the 6th September 2022 to: eoι.outcomes@hbgi.org

Please put 'Expression of Interest submission' in the subject line. If you have a question, please use the same address and put in the subject line 'Inquiry about Expressions of Interest'.

Thank you.

New Voices, New Science, New Finance

The voice of the community. *Listening to the voices of people with lived experience, focusing on currently excluded communities, delivering programs that are centered on the needs of each individual service user.*

Research to deliver impact. *Generating learning at scale, starting with implementation research, seeking constant performance improvement, working with populations that are usually ignored, sharing data and findings openly.*

Making every dollar work harder. *Regional 'outcomes funds', in partnership with local stakeholders, giving donors the ability to connect funding with verified results, efficiently and effectively, bringing in social or impact investment where needed.*

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