

**Financing Mental
Health Innovation:
scaling societal
benefits through
cross-sectoral
collaboration**

Annexes of opportunities

DISCLAIMER: This document contains preliminary annexes that are meant to provide inspiration and guidance for further discussion and refinement. The lists are not exhaustive of all opportunities. Any examples do not imply endorsement of specific programs, products, or services. This document aims to be a living resource that will expand over time through collaboration and contributions. As of this writing, this document is to support the roundtable discussion at the 2023 CGI event.

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ANNEX 1: Pathways one and two – opportunities for action

This first menu includes a few exemplar opportunities that fall within pathway one (integration) and pathway two (innovative metrics) identified in the corresponding white paper. It is **not** an exhaustive list but aims to highlight on some of the **innovation that is already happening and is ripe for further funding**. This document is a crowdsourced work in progress that we look forward to continuing to build out with funders and global experts, during and after our discussions at CGI.

Table 1.1 - Pathway one: Live funding opportunities to achieve scale by integrating mental health services / skills / training into the work of other sectors and communities.

Opportunity	Description	Funding to date	Target stage / population	Income group experience	Health/social care system experience	Outcome measures
<p>1. COP² <i>Integrating mental health into global climate adaptation</i></p> <p>PoC: Gary Belkin, A Billion Minds / Columbia University</p>	<p>Global portfolio of projects, overseen by a central COP²team, empowering the UNFCCC’s Race to Resilience partners to scale psychological resilience as part of their mandate to support the resilience of 4 billion people by 2030.</p>	<p>Individual and corporate philanthropic grants.</p>	<p>Prevention and care for communities most vulnerable to the impacts of the climate crisis.</p>	<p>Low-income countries prioritized for initial roll-out.</p>	<p>A broad range of stakeholders in local consortia deliver tailored projects in the community, including health systems and wide-ranging civil society anchors.</p>	<p>Aggregate capacity to increase the resilience of individuals living in highly climate-threatened regions, consistent with Race to Resilience criteria.</p>
<p>2. EMPOWER Incubator at Harvard Medical School and EMPOWER at Scale <i>Delivering scale by training lay-people to deliver mental health support</i></p> <p>PoC: Vikram Patel, Harvard University Ben Miller, EMPOWER at Scale</p>	<p>Enhancing the capacity of communities to address mental health through a community-based workforce and a scientifically grounded approach to training, monitoring and evaluation.</p>	<p>Grant funding, major gifts and contracts</p>	<p>General population and those with mild/moderate symptoms</p>	<p>All</p>	<p>Community-based, connection to healthcare</p>	<p>Clinical outcomes (e.g. PHQ 9), training measures, (e.g., competency assessment), and other measures to track knowledge</p>

Opportunity	Description	Funding to date	Target stage / population	Income group experience	Health/social care system experience	Outcome measures
<p>3. WHO Special Initiative <i>Integrating mental health across all policies.</i></p> <p>PoC: Devora Kestel, WHO</p>	<p>Global initiative across 9 countries to scale-up access and coverage for MNS conditions</p>	<p>~\$10M grant funding from development partners (incl. NORAD, USAID SDC)</p>	<p>Increased access to quality services for 75 million people</p>	<p>LMIC</p>	<p>Mainly PHC service level (mhGAP). Participating countries have weak MH systems / low coverage; efforts to scale-up are mainly through national governments</p>	<p>Access; coverage; rights-based approach / service capacity</p>
<p>4. WorldBeing <i>Combining privately funded pilots with public commitments to scale.</i></p> <p>PoC: Steven Leventhal, WorldBeing</p>	<p>WorldBeing works with private funders to develop country pilots of its 'Youth First' program, which helps young people to build emotional resilience, self- efficacy, coping skills and health knowledge. This program is then scaled by i) being integrated into the national or state curricula of partner countries and by ii) training trainers who in turn train public sector teachers. In India, Youth First will reach 50,000+ schools, 3.5 million students and 100,000 teachers annually by 2026. In Kenya, Youth First will reach every school, 2 million students annually by 2026.</p>	<p>Grants</p>	<p>Young people in India, Kenya and Rwanda Expansion planned to Ghana, Nigeria, Senegal, and the US, pending funding.</p>	<p>LMIC youth</p>	<p>Public-private collaboration. Scale achieved through integration in the national an/or state curricula.</p>	<p>Standardized measures for anxiety, emotional resilience, quality of life, social wellbeing and other emotional issues.</p>

Table 1.2 - Pathway two: Live funding opportunities to achieve scale by innovating mental health metrics

Opportunity	Description	Income group experience
<p>Friendship Bench , Shamiri Institute, Ubuntu Centre For Peace and StrongMinds <i>Innovating to make wellbeing outcomes easier to track and more compelling for funding.more compelling for funding.</i></p> <p>PoC: Dixon Chibanda, Friendship Bench</p>	<p>A project to develop a common metric for wellbeing and hope, working initially in collaboration with 90 organizations from regions around the world to establish consensus around basic principles and a common measure for wellness.</p>	Global
<p>Prospira Global <i>Expanding the metrics available to capture a company's positive/negative impact on mental health, and opening up pathways to greater accountability</i></p> <p>PoC: Elisha London, Prospira Global</p>	<p>A programme to develop mental health and wellbeing sector impact reports that build our collective understanding of the mental health risks and opportunities in different sectors, and open the potential for companies to be held accountable for the positive or negative impact that they have on mental health, which in turn, may have potential implications for regulatory, financial and consumer choices.</p> <p>Reports are in planning for the social media and retail sectors. Other sectors/sub-sectors being explored in this first wave of reports are aiming to include; Commercial Banking, VC, Computer Gaming, Sports, Technology, FMCG, Beauty, Law Firms and Alcohol.</p>	Global
<p>Microinsurance Network (MiN), in partnership with COP² <i>Capturing the monetary value of climate-crisis related psychological distress or impairment</i></p> <p>PoC: Katharine Pulvermacher, MiN</p>	<p>An initiative to build 'insuresilience' by working with a broad range of stakeholders to:</p> <ul style="list-style-type: none"> • Find consensus on tools and opportunities to capture the monetary value of a specified degree of psychological / mental health distress or impairment caused by the climate crisis • Compensate for and/or respond to an incurred or anticipated need • Purchase the best solutions for those anticipated needs, building the overall market awareness and demand for effective support. <p>The current Psychological Resilience Workgroup supporting the development of this work will be facilitated by the Microinsurance Network (MiN) with participants drawn from MiN, associated industry organizations, and expert input to this process from Insuresilience Global Partnership, World Bank Climate and Health Team, Centre for Disaster Protection, OECD Wellbeing Data and Policy, WhatWorksWellbeing and a number of other experts, NGOs and advocates.</p>	Communities impacted by climate crisis

Opportunity	Description	Income group experience
<p>StrongMinds <i>Capturing the holistic benefits of treating depression</i></p> <p>PoC: Rasa Dawson, StrongMinds</p>	<p>Strongminds deliver scale by using facilitator and peer-led group interpersonal psychotherapy. Their data collection is helping to build a stronger understanding of the non-health metrics impacted by depression, including engagement in work and child nutrition or attendance at school.</p>	Low-income
<p>The Global Center for AI in Mental Health <i>Using global data and AI to better diagnose and help treat mental health disorders</i></p> <p>PoC: Pradeep Kakkattil, Health Innovation Exchange.</p>	<p>A partnership between Health Innovation Exchange, State University of New York, Albany and SUNY Downstate Medical School that is seeking to open up the power of AI and deep learning technology to analyze data from around the world. With access to NY's fastest supercomputer AiMOS, NVIDIA DGX A100 GPU farms and Lambdascalers as part of this center to support AI innovations, the aims are to identify social determinants of health, better understand the biological mechanisms behind mental health disorders, identify differences across the life course, and develop strategies to help fill critical mental health care gaps globally. Access to NY state's health system sandbox also provides the option of testing and translating innovations to communities through the center.</p>	Global

ANNEX 2: Pathway three – opportunities for action

This second menu includes opportunities that fall within pathway three (innovative financing) identified in the corresponding white paper. It is not an exhaustive list but aims to shine a light on some of the innovation that is already happening and is ripe for further funding.

Context and objectives of this menu

An ongoing financing gap exists in mental health globally that warrants urgent attention. Although excitement is growing about advancing mental health through public-private-social partnerships, there is still some **disconnect between opportunities in mental health that need funding and funders**. There is a network of funders looking to contribute capital, but do not know the business **case for** investment, how to get involved, or what funding model to pursue.

This **menu of opportunities** seeks to start bridging this gap by (1) outlining potential mechanisms for funding alongside examples to inspire action and (2) listing out example projects that could benefit from these innovative funding mechanisms

This list is **not exhaustive** of all active opportunities but can be considered a starting point for developing future public-private-social sector collaborations

Overview of this menu

(The menu is comprised of two sections)

1) Types of funding mechanisms: describes potential innovative investment mechanisms for potential funders to consider, with the goal to provide examples of funding mechanisms that have been successful in other sectors and may be underleveraged in mental health

2) Example applications of funding mechanisms: describes active opportunities (e.g., programs or projects) in mental health that have or could benefit from one of these innovative funding mechanisms, with the goal to radiate opportunities and inspire new approaches in mental health

1: Types of funding mechanisms

Innovative funding mechanisms have been growing in adoption to help align incentives across public-private-social stakeholders. Innovative financing mechanisms have the **potential** to do the following:

Provide additional avenues of funding, making a complementary source of capital available to traditional development finance and bringing on board a set of non-traditional funders

De-risk investments by spreading risks across types of financing instruments or funders, with many times lower-than-market (or zero) return expectations

Enhance the efficiency of financial flows by reducing transaction costs and delivery times / costs, consolidating investment from a multitude of actors

Make financial flows more effective and results-oriented by explicitly linking them to measurable performance on the ground

Successful mechanisms typically comply with the following principles:

Catalytic: new mechanisms need to provide catalytic support to the global health ecosystem

Additive: solutions should be net additive and cannot replace existing flows of funding

Complementary: at a minimum, the new mechanisms must not substantially increase the complexity of the existing financing ecosystem

Sustainable: new mechanisms should contribute to the long-term financial sustainability of the ecosystem

To best identify innovative financing solutions for mental health, consider these questions:

Which part(s) of the value chain need to be addressed to improve overall outcomes?

What risks does this funding mechanism address and for whom (e.g., high capital costs, regulatory risk or demand uncertainty)?

Is it the objective to raise a larger pool of financing (e.g., from existing or new sources) or to identify a mechanism that can enable more effective and efficient use of funds?

Who are the key stakeholders and what are their objectives (and desired outcomes)? How would the instrument mobilize new funding and how does that link with the existing funding flows?

Under what context can we exploit the most benefits of these instruments? What are the synergies we can leverage in the ecosystem (e.g., across disease areas, geographies etc.)?

Table 2.1 - The table below outlines innovative funding mechanisms that have been applied in addressing societal issues. This table is not exhaustive of all potential mechanisms nor exclusive—many of these mechanisms can be combined or “blended” to achieve goals.

Mechanism	Types and examples	Well suited for ...	Complexity
<p>1. Result Based Financing</p> <p>Results-based financing ties the disbursement of funds to specific (health) outcomes, promoting greater accountability and more efficient allocation of funds. In some cases, private sector funds are used for upfront investment and repaid with modest returns by a party who benefits if certain outcomes are met (e.g., government, philanthropy, consortium of employers)</p>	<p>Milestone-based Payments: Qlife / FIND framework agreement is developing a new and cost-effective two-in-one test to detect influenza and SARS-CoV-2 viruses in decentralized care environments in low and middle-income countries</p> <p>Performance-based financing (PBF): OFF (an outcomes fund) is an initiative aimed at scaling fever testing, treatment, and digital reporting through the private sector in sub-Saharan Africa. It is a partnership between Malaria No More and the Health Finance Coalition (HFC) and other partners, such as the Global Fund, Global Citizen, NPX, and the Clinton Health Access Initiative (CHAI).</p> <p>Social or Developmental Impact Bond: The Kangaroo Mother Care DIB focused on piloting health practices (through the Kangaroo Foundation Cameroon) in the private sector for premature babies that, if successful, could be scaled up throughout the public health care system. Once outcomes were assessed, outcome-based payments were triggered for disbursement from the government of Cameroon (outcome funder) to Grand Challenges Canada (upfront investors) for their initial investment plus interest.</p> <p>Social or Developmental Impact Bond: The Resolve Social Benefit Bond in Australia was established to improve mental health outcomes. Investors fund the Resolve Program, a recovery-oriented community support initiative for mental health. Investor returns are linked to outcome payments made by the New South Wales government, which are based on government savings generated by the Resolve Program. Overall investor returns are expected to be 7.5% per annum.</p>	<p>When desired outcomes are clear and commonly agreed upon and are measurable with a reasonable timeline</p> <p>When appetite for financial risk is not high by service providers (this is particularly true for impact bonds where there is upfront funding)</p> <p>When interventions are innovative but have been tested before</p> <p>Distribution / administration / delivery of goods or services (vs. R&D, manufacturing, or procurement)</p>	<p>Medium to high depending on the type (DIBs and Social success notes being the most complex)</p>

Mechanism	Types and examples	Well suited for ...	Complexity
<p>2. Guarantees</p> <p>Guarantees are a promise given by a guarantor to take responsibility for the borrower in the case of a default; in some contracts with a public or private sector entity, the government may provide a revenue or demand guarantee that requires the government to make up the difference if revenue or quantity demanded is below the guaranteed level.</p>	<p>Financial guarantee: USAID’s DCA guarantee supports healthcare providers by enabling commercial banks to extend working capital loans to traditionally underserved sectors like health. The DCA guarantee de-risks lending by sharing the risk with the bank, reimbursing up to 50% of the value of a loan in the event a borrower defaults. Of note, DCA’s default rate across its entire portfolio is less than 3%. DCA is the third largest guarantor in the world</p> <p>Demand guarantee: CHAI and MedAccess created a volume guarantee with Wondfo to make their HIV self-test product available for \$1 (30% below current market price)</p>	<p>Incentivizing/streamlining upstream activities such as R&D, manufacturing, procurement</p> <p>Minimizing demand uncertainty and/or transaction costs</p>	<p>Low</p>
<p>3. Pooled / catalytic funding</p> <p>Pooled funds are in a portfolio from many individual investors that are aggregated for the purposes of investment. Investors in pooled funds benefit from economies of scale, which allow for lower trading costs per dollar of investment, and for diversification.</p>	<p>The Stop TB Partnership’s Global Drug Facility (GDF) facilitates global access to quality-assured, affordable TB diagnostics and treatments.</p> <p>CEPI is an alliance to finance and coordinate the development of new vaccines to prevent and contain infectious disease epidemics.</p> <p>GFF is a multi-stakeholder global partnership housed at the World Bank that supports countries with catalytic financing and technical assistance.</p> <p>Giving to Amplify Earth Action (GAEA) is a global initiative by the World Economic Forum in partnership with 45 other organizations to fund and grow new and existing public, private, and philanthropic partnerships (e.g., place-based partnerships between US private healthcare providers, local governments, and philanthropies to make cities healthier)</p>	<p>Increasing economies of scale by consolidating/streamlining resources and purchasing power when many parties might be interested in addressing the same problem</p> <p>Require alignment between donors and a sense of common cause and willingness to share decision making power</p>	<p>Medium</p>

Mechanism	Types and examples	Well suited for ...	Complexity
<p>4. Seed funding</p> <p>Seed funding / flexible grant capital is used by donors to invest in early-stage social enterprises or high-impact innovations that are then scaled by other donors or commercialized at a later stage</p>	<p>Grand Challenges Canada provides funding of up to CAD\$250K for novel solutions that address specific humanitarian crises</p> <p>OneMind's Accelerator provides US \$100K plus 10 weeks of programming to take mental health solutions to the next level</p>	<p>When upfront costs are one of the bigger challenges and traditional funding is less likely to flow</p> <p>Creating proof of concepts that may not be financially viable until it reaches scale</p>	<p>Low</p>
<p>5. Insurance mechanisms</p> <p>Insurance mechanisms are insurance-based approaches to mitigate potential risks that may otherwise deter investment into a social issue and / or enable more rapid payout of funds, compared with traditional insurance.</p>	<p>Parametric insurance: World Food Program, together with Oxfam Bangladesh, Weather Risk Management Services and Green Delta Insurance Company, launched a parametric climate-risk insurance pilot scheme to support agricultural labourers affected by a prolonged monsoon flood. Funded by (the Korea International Cooperation Agency, the scheme compensates vulnerable families for wage losses due to the floods so they can get back on their feet and prevent long lasting negative impacts.</p> <p>Parametric insurance: Quintana Roo Reef Protection program in Mexico is focused on preserving the natural coral reef ecosystem. The claim payment is released when hurricane wind speeds reach a certain threshold, allowing the policy holder to repair the reef quickly (vs. requiring verification of losses before claims can be made)</p> <p>Social insurance: USAID partnered with Absa Bank, Aspen Pharmacare, GSK, Imperial Health Sciences, and Pfizer to create Lulama, an innovative financing model that provides independent pharmacies in underserved areas in South Africa with access to working capital. These pharmacies, in turn, can purchase an affordable product bundle of high-quality medicines and consumer goods and receive training in business and logistics management.</p> <p>Micro insurance: BIMA offers a wide range of affordable health and insurance services, tailor-made to create short-term and long-term value for customers; it has provided close to 35 million insurance and health policies with presence in 10 countries including Ghana, Tanzania and Senegal in Africa, and Bangladesh, Cambodia, Indonesia, Malaysia, Pakistan, Philippines and Sri Lanka across Asia</p>	<p>Creating a sustainable funding source for administration of services</p> <p>Aligning incentives and risks between stakeholders</p> <p>For microinsurance schemes, innovation in delivery and collection models will be key, products need to be demand driven and affordable, and the risk management system protects the portfolio from adverse selection and moral hazard</p> <p>Ability to move to action needs to be fast where triggers of insurance are clear</p>	<p>High</p>

Mechanism	Types and examples	Well suited for ...	Complexity
<p>6. Capital stacks</p> <p>Capital stacking is the strategic use of development finance for the mobilization of additional finance, which has origins in real estate projects but has been used towards sustainable development to combine various funding sources across public and private stakeholders and align risk-return profiles</p>	<p>'Malaria No More': The Health Finance Coalition brings together leading philanthropies, health donors, technical partners, and institutional investors to pair concessional and commercial funding in a "capital stack" approach to address some of Africa's biggest health challenges. The coalition uses a stacked financing model that combines different funding sources, coordinated by a "finance host" to "stack" private funding with non-profit sources such as government spending / grants / philanthropies, and expanded with debt / quasi-debt to achieve a certain goal</p> <p>USAID, IPE Global, and stakeholders from the Indian government, academia, and the private sector developed the SAMRIDH blended finance facility to combine public and philanthropic funds with commercial capital to create and rapidly scale market-based health solutions. In a new program, SAMRIDH hopes to incentivize global healthcare innovation and entrepreneurship; This funding initiative would improve access to affordable and quality healthcare for vulnerable populations</p>	<p>Combining public, private, and social funding sources and risk tolerances under a common project or goal</p> <p>Creating a sustainable model that require a combination of different mechanisms</p> <p>Ability to assign the right set of risk-return to meet expectations of different parties is well aligned early on</p>	<p>Medium to high</p>
<p>7. Empowered social impact</p> <p>These emerging models of financing involve combining financing approaches across sectors and social priorities (e.g., climate and health)</p>	<p>Global Surgical Initiatives, in partnership with OutcomesX and Powertrust, is leading the development of a verified, climate + health linked, results based financing mechanism, underpinned by auditable data. By providing transparent outcomes based on verified data from auditable sources, organizations can confidently contribute impact funding to both climate impact and health outcomes in a tangible and verifiable manner, with one transaction. The purchase of Renewable Energy Certificates generated by health facilities, plus Verified Impact Units directly linked to specific and measurable health outcomes of those same facilities incentivizes local capacity building and affordable and quality healthcare. The first proof of concept is a flagship surgical facility in rural Uganda, founded by the Mt. Sinai Health System, known as Kyabirwa Surgical Center, which runs on 100% renewable energy (solar) and recycled rain water.</p>	<p>Increasing funder interest by addressing multiple social causes through a single platform</p> <p>Creating a sustained engine of capital for social causes through traditional funding approaches</p>	<p>Medium</p>
<p>8. Impact focused capital market solutions</p> <p>Such solutions are based in traditional financing approaches but have proceeds earmarked to finance social impact projects</p>	<p>Future Generation in Australia created publicly-traded funds that contribute 1% of assets per year to charities that support children and youth</p>	<p>Creating a sustained engine of capital for social causes through traditional funding approaches</p>	<p>Low</p>

2: Example applications of funding mechanisms

Table 2.2 - The table below outlines active opportunities in mental health that have used or are planning to use an innovative funding mechanism.

Opportunity	Description	Funding mechanism	Funding to date	Target stage / population	Income group experience	Health/social care system experience	Outcome measures
1. HBGI – The Healthy Brains Global Initiative PoC: Richard Johnson, HBGI	<p>Disrupting philanthropy and delivering outcomes that matter to people. Pooling philanthropy and development financing to create Outcomes Funds with which HBGI will contract programs and pay for them on the basis of the functional outcomes that they deliver for service users. The funds are 'vehicles' to better connect spend with delivery, reducing waste, generating live performance data, maximizing impact.</p>	Outcomes contracting and enhanced performance management	<p>Start-up funding from Wellcome. Core funding for the organization to date provided largely by pharma (notably Johnson & Johnson plus Otsuka). Development and delivery through 2025 for child immunization and maternal mental health from a commercial company operating in South Africa. Currently seeking funding for development of three other Outcomes Funds.</p>	<p>Underserved and unserved populations. The Outcomes Funds are organized thematically. The first funds under development are: Sport & Mental Health; Immunisation & Maternal Mental Health; Youth; Climate Change & Mental Health; Veterans/post-conflict.</p>	Targeting mainly low income settings (though also looking to reach excluded groups in high income countries).	<p>HBGI draws on a breadth of experience across systems globally, with particular expertise in the design and oversight of outcomes contracts, plus mental health and social impact.</p>	<p>The outcomes depend on the program but HBGI look to contract for tangible, measurable, functional outcomes (e.g. jobs, housing, school attendance, baby gaining weight). Mental health outcomes might include improvements in scores on validated tools, increases in activities (such as socialization), adherence to treatment, or reductions in hospitalization. The most powerful outcomes will be selected by the service user themselves at the start of the program. If training is funded, it must deliver measurable behaviour change. Proxy outcomes (e.g. participation in sport) may be contracted where there is a strong evidence base of the link with improved social, physical and mental wellbeing.</p>
2. KOIS Invest <i>Scaling innovative solutions for mental healthcare in India</i> PoC: Parag Vaidya, KOIS	<p>Enabling the scaling up of innovative and effective ways of service delivery in mental health, working with local communities and community health workers in India.</p>	<p>Pay for Success (PFS) or Development Impact Bonds (DIB)</p>	<p>Feasibility and structuring phases done. Partial outcome funding has been committed.</p>	India	Low	Community health workers	Reduction in depression and anxiety

Opportunity	Description	Funding mechanism	Funding to date	Target stage / population	Income group experience	Health/social care system experience	Outcome measures
<p>3. Child Opportunity Fund, British Asian Trust + Partners PoC: Richard Hawkes, British Asian Trust</p>	<p>An ambitious USD50m Fund to drive transformative change of the child protection ecosystem and support millions of children in India, including by providing mental health support to at-risk children and their families, as well as to survivors, to reduce their vulnerability to harm. We will also provide access to community mental health support services and destigmatize mental health.</p>	<p>Grant funding + an element of outcomes contracting.</p>	<p>BAT is a diaspora-led international development organisation, with a strong track record of philanthropy and outcomes financing of programmes in South Asia.</p>	<p>India</p>	<p>Low</p>	<p>Multi-stakeholder</p>	<p>A holistic approach to strengthen child protection, including a particular focus on the prevention of and rescue from child labour, child marriage, trafficking and sexual abuse.</p>