In Coping Together, a tree metaphor is used to represent strong families rooted in resilience.

Overview
● Our team identified an unmet need for mental health care for families in Durham during COVID-19
● Could a family intervention (originally implemented in Kenya) be helpful in Durham to address this unmet need for mental health care?

Background
● Survey (N=1073) to assess mental health of families during pandemic was administered across 18 Southern States:
  - Parents: >50% of parents reported at least mild symptoms associated with depression
  - Children: 75% of parents reported at least one child’s mental health and well-being deteriorating
  - Families: Parents reported deterioration of partner relationships and parent-child relationships

Program Goals
● Pilot a family-centered program to address multiple dimensions of well-being (coping, communication, problem solving)
● Adapt and co-design with community partners
● Following a pilot of the intervention in Durham, possibility of adaptation to other community settings

Focus groups with child & family-serving community organizations from Durham and surrounding area
Findings:
- Families are struggling with:
  - mental health
  - pandemic restrictions
  - economic impact
- There are not enough (mental health) providers and resources to meet families’ needs

Content adaptation in co-developing sessions with community partners
- Coping Together content adapted from Tuko Pamoja (“We Are Together”), a lay-delivered family strengthening program from Kenya
- Training sessions of lay-providers are also collaborative and inform adaptation
- Training and developing done in stages – we continue to adapt as the intervention is in process

Implementation of the virtual program in 8-weekly sessions led by facilitators
- Connect with families through community partners – TRY and WECF
- Intervention content is a combination of skits, activities, and skill-development
- Collect feedback on feasibility and acceptability of the program through interviews and surveys