



Enriching young lives in emerging markets



“Without solid mental health, young people can’t do any of those things”: Cynthia Steele of EMpower on making well-being the foundation for youth opportunity

Jessica Kantor

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Jessica Kantor: Tell me about the work that you do. What is distinctive about it in the field of youth mental health?

Cynthia Steele: Everything that EMpower focuses on relates to young people who are living in marginalized circumstances in 15 different emerging market countries, where, by the way, 85% of the young people in the world live, so it's a not inconsiderable population.

Our focus on mental health is several-fold. One, just recognizing that we all need mental health. We're seeing, and this became even more dramatically revealed during COVID, an epidemic level of issues of depression, anxiety, suicide ideation, suicide, and bodily harm among young people. These had historically been considered almost more Global North or Western issues, but that is clearly not the case. There's a growing body of evidence of rising concerns about youth mental health around the world, and many adult mental health issues have their origins in adolescence.

Also, I would say two other things. One is that understanding for people who are living in poverty, there are so many more stressors and reasons to be concerned about mental health, because their exposure to violence and precarity are known to be additional stressors, and obviously, that takes a toll on mental health.

Lastly, just recognizing that having mental health is important for all of the other positive outcomes we're hoping young people can achieve through the kind of support that we give. Whether it's getting a secondary school degree, being able to interview for, get, and keep a decent job, keeping themselves whole, or dealing with trying to stave off early marriage. Without solid mental health, young people can't do any of those things.

We see it as foundational for every other kind of program that is seeking to give young people skills and opportunities.

Jessica Kantor: How exactly do you work with teens and youth?

Cynthia Steele: Our basic model is to find and fund amazing local organizations that are working with young people. Often, they're also working with children or with adults, but they definitely are working with young people. We focus on local organizations, meaning in communities in the 15 countries where we work, because we believe that they have credibility in their local community and context, and they know solutions that will work. They're there for the long term; it's not subject to the flows and whims of international aid organizations, they're rooted in those places.

We fund these organizations through cash grants, but we also provide a number of other supports, learning opportunities, consultants, technical assistance, and access to resources. Resources, meaning tools that they can use rather than having to develop everything from scratch. One very important part of our model is long-term partnerships. We fund organizations, and we work alongside them for up to 10 years. We really believe durable change takes time, and we want the organizations that we support to be able to plan, project, and invest themselves in what they need to do to make a profound difference, and that can't be done in a year. We really have a long-term horizon.

Jessica Kantor: What is something others might find surprising about your work?

Cynthia Steele: It is highly unusual to fund for up to 10 years. This may not be surprising, but the things unique to EMpower's value proposition. We're working in places where there's not often a lot of other funding available, often under the premise that these countries are middle-income and they can do it on their own. But we know there's still deeply entrenched poverty, and local organizations need support.

Surprisingly, I think a vital part of our value proposition, the extent to which we support other things besides cash grants, is what our grantee partners consistently tell us they value the most. Of course our grantee partners seek funding, but other elements of our support are super important, such as linking them to each other, communities of practice so they can come together to learn, problem-solve, and cross-refer.

Jessica Kantor: The Youth Mental Wellbeing Co-Lab has three focus areas: building young people's resilience, giving young people agency, and helping young people build a sense of community and belonging. Which area do you think your work focuses on?

Cynthia Steele: It would be unfair for me to pick one because I actually think the work that we support is across all of them, and they're also really interconnected.

Jessica Kantor: How do you collaborate with organizations that are also in these three areas?

Cynthia Steele: Many of our staff are based in the countries in which we work, so they're super plugged in. They speak the languages, they know the networks, the other funders that are there, and the local organizations, so I think we have really good intelligence on the ground. We spend a lot of time in the community with our partners, and we ask them who they think are really strong, who's doing really great work, who they partner with, and who they respect. That's an important way that we really lift up their expertise and experience. Then we work with them in many different ways.

In my observation, a lot of the conversations about youths' mental health have prioritized what's happening in the Global North, and that's true with so many things. There's more of a body of evidence, there's more resourcing for it, there's more specialization around it. One of the ways that we work with our local partners, and this is absolutely true for mental health, is giving them platforms so they can talk about what they see, what their needs are, what their solutions are, and what their challenges are.

Overall, that's really useful, but especially around mental health, because the difference between being where I am in New York and despite the access to psychiatrists and social workers, counseling centers, peers, a whole variety of things, it's still strained here. But compared to a township in Cape Town, there is no comparison. It's really our partners. We try to give, both in how we represent them, but giving them the microphone and giving young people the microphone to help explain how different it is to work in low-resource settings where none of those things exist, or they're scarce.

Then we look at what the solutions are that are appropriate for those places, because they're completely different. One of the most effective approaches or ways EMpower can have and really tries to do is influence the practices and resources of other people by sharing not only what we do, but also sharing the experiences of our 150 partners who are doing amazing work on the ground, serving as that bridge, and trying to really elevate those lessons learned.

Then, in terms of sister funders, we are super connected to a whole range of them through formal kinds of groups that are what's called in philanthropy, affinity groups around particular issues. There are several in the mental health space where we share resources. We're on monthly calls. We get their newsletters. We contribute. We're part of the research.

Then, through informal networks. One example – it's not specific to mental health, but it's interesting – I'm part of an executive leadership group made up of global funders that are focusing on human rights and social justice issues. It's been going on for six years. We have monthly calls. We have retreats, and a super active Signal group where we're sharing about many things that are going on, particularly in the context of what's happening in the US. It is really important to try and understand all the changes and how to respond and be as resilient as we can, but also support the infrastructure of the places in which we're working, because this is a very challenging time.

Being able to have trusted colleagues who have different sources of intelligence, solutions, and strategies come together is super important because we realized we're much more effective collectively than we are at arm's length or sharp elbows.

Jessica Kantor: Is that a named organization, like a group, or is that just something that you all put together?

Cynthia Steele: It came together informally, and we call ourselves the executive leadership group. The origin is informal and organic. We have formalized it a little over time. We've now gotten some funding from several important foundations that are recognizing the value of funders such as ourselves, both as supporting movement, supporting local organizations so that they are especially resilient, and are able to be adaptive and pivot in these times. Overnight, people lost their USAID [United States Agency for International Development] funding.

There are so many things that are happening in philanthropy and in international development. Several foundations have funded us, not huge amounts, but they are saying, you all are a really important bulwark to be forward thinking, knowing that this is going on at this time.

Jessica Kantor: How many countries are you funding in? Do you exclusively fund in the Global South, or are you also in the Global North?

Cynthia Steele: We support organizations in 15 countries, 5 in Latin America, 3 in Sub-Saharan Africa, 5 in Asia, as well as in Turkey and Ukraine. We only fund in the Global South. The one place where we fund that would be considered in the middle is in Hong Kong. The idea is that emerging market countries are a specific set of countries that have huge economies, huge populations, different kinds of political challenges, and there tends not to be as much funding for those countries, yet they are so important, especially for young people.

A, because of the size of the youth population, but also if you're living in poverty in an emerging market country where the economy and society are rapidly evolving, and you're at the margins, you are so much more at the margins than in a country where most of the people are in poverty. You're one of many. There's an important difference there to help those who are really behind to have access to the digital economy, and to get a leg up, because if not, the inequalities are going to become more and more pronounced.

Jessica Kantor: Do you have a formal submission process? If you do, and when you are analyzing organizations, are you focused more on learning about their outputs or their outcomes? What are you focused on specifically, since mental health can be a little intangible sometimes when you're reporting your success metrics?

Cynthia Steele: We have a series of criteria that we use to filter organizations that we're considering: how long they have been in operation, which is generally three years

or more, what their budget size is, and whether they focus on young people in the areas that we support, which include education, health, and livelihoods. A less tangible factor, but one that's important, is that they have an appetite for learning, show that they are adaptive, want to learn, and want to evolve.

There is a formal application process. If you are asking, do we have RFPs [Request for Proposals]? We don't. We've tried that in the past, and what we found is that when we have unsolicited proposals, we end up, even though the directions or instructions are super clear about eligibility, with tons of applications from countries and issues that don't fit the criteria, so we found it not to be effective. Also, it takes staff time to be able to screen those out.

Then you're also wasting applicants' time because they're spending a lot of time when there's a negligible chance they will ever be funded. On mental health, we don't have a vertical. We wouldn't expect an organization to say they're working on mental health, and then we would decide to fund them. It's consistent with our approach. Most of the organizations that we support don't define their work in terms of mental health.

Mental health isn't even a concept that exists in some languages. I learned this when I was in Asia last month, and a Vietnamese person was explaining to me that they don't have the word for depression in Vietnamese. The closest that one would use to describe something like mental health is being mad, and that's obviously not what we mean. Language oftentimes is insufficient, or it tends to skew towards mental illness, which isn't the concept that EMpower is working on, which is preventative and promotional mental health.

For things like resilience, belonging, and agency, I can't think of any of the organizations we're supporting that don't do all of those things, but they wouldn't necessarily consider that mental health. One of the things we're doing now very actively is helping our grantee partners see that they are working in the space. Because they might not define it that way, but actually, they are. It's so important to have a protector for young people

Jessica Kantor: Can you share an example that illustrates the impact of your work?

Cynthia Steele: Sure. This organization has now come to be very well known and is part of the iconic cohort. We just graduated support for Waves for Change in South Africa, which has become a global organization. As I noted, we fund for up to 10 years. Since that, they have gotten 10 years of funding. We remain in partnership, but not as a funder. Our very first grant to them was to fund research so that they could have evidence and proof of concept, because it was more than a proof of concept.

They had been working on using surfing as a way to build young people's resilience and community, and give young people strategies for managing their everyday stress. You're talking about black kids in communities where many of them had never set foot on a beach because their parents were not able to due to apartheid, and there are all kinds

of stigmas and urban myths about what happens in the ocean. Even just getting them onto a beach and getting them into the water took much more than one might think.

Anyhow, they saw anecdotal evidence that they were making a real difference for young people, but they didn't have the evidence, so we funded an external evaluation, which they wanted. We were their first international funder. That gave them the platform. They were able to show the kinds of differences that it was making for young people, even through things biometrically, that their heart rates actually were lower and didn't spike as much. This is a huge credit to Waves for Change. I do not want to attribute everything to EMpower. They're an amazing organization.

That enabled them to get more funding, do more advocacy, and evolve their model. Now they've expanded to other countries. They're really pioneers in the mental health space. Again, using really practical approaches that work with what young people want to do. Young people, because of their time of life, they're risk takers. Developmentally, that's what adolescents do is they want to take risks and try new things. Channeling that energy toward something where they could do that, but safely, and get other skills alongside that, is just such a smart strategy.

Jessica Kantor: Where do you think attitudes toward mental health are in the audience that you serve? How do you think that has shifted in just the past five years, possibly due to the pandemic?

Cynthia Steele: I think it has shifted dramatically, and in ways that I'm super encouraged about. I have found that even among EMpower board directors, supporters, and donors, when I have talked with them over the past couple of years about mental health and youth mental health in general, everyone sees its importance. They're living it in their families. They're either living it themselves, they're living it in their families, or they're living it with their teams.

I literally cannot think of a person who has said to me that it's a non-issue or doesn't understand why that's important. People really get it. Expand that circle. Largely, sadly, because of COVID, but there's just so much more recognition of its importance. That said, there's still way too little funding there.

I always color outside the lines. There's so much more opportunity to draw the connective tissue or formulate the connective tissue between mental health and so many other sectors where people may not see the affinity, but it is there. There's obviously a huge amount of work that needs funding going towards the climate crisis and climate justice, but there are links between mental health and climate. Climate and anxiety are huge things, especially for young people.

Similarly, sexual and reproductive health are huge issues that young women relate to who find themselves survivors of violence, unable to get contraception, or pregnant if they don't want to be. Similarly, look at the issues around refugees, disabilities, or LGBTQ [Lesbian, Gay, Bisexual, Transgender, Queer]. Yet, we need to link the funding

communities and the people doing the work on the ground in a tighter way so that we all see ourselves as having very shared and aligned goals.

Jessica Kantor: Smartphone access in the Global South is much higher than people in the Global North realize, because a lot of people access cellphones instead of landlines. It was a gap, and they were able to jump that. Social media use is as much a prerequisite to living right now for teens in the Global South versus the Global North. I think it has become a thing where terminology and understanding of mental health have increased due to social media, because people are talking about it a lot more. At the same time, social media use itself contributes to poor mental health. What are your thoughts on smartphone access and social media in terms of attitudes towards youth mental health?

Cynthia Steele: We are going to be strengthening the work we do in our strategy around the digital space, both how to double down on the positive benefits there can be for places where there are too few human resources. How can there be more access to information and tools? But there's more evidence that's needed.

I know there's a lot of excitement around apps and bots as substitute providers. I think it's really an interesting space. From what I know, the verdict's still out, and I don't think there's a silver bullet. That said, there are a lot of positives, so how to double-click on all of those, at the same time as mediating what we know to be the negative impacts of social media and all that. It's just too much screen time. It's not only social media.

A few years ago, there was this view that smartphone access is super limited in the communities in which we work, that it's more of a Global North issue. As you rightly point out, these days that's not true. Even if it is true, we saw during COVID, girls are the last ones in their families to have access to smartphones.

That is a problem because their fathers might have the family phone. If anybody has access to it after that, it's the brother. That's an issue because they have to go through male gatekeepers to have access. Increasingly, these are real issues. Having strategies, helping our partners with strategies to harness the positive aspects, and ensuring digital safety is becoming more important and something we're focusing on.

Jessica Kantor: Aside from funding, are there any challenges that you faced or are currently facing that you haven't been able to solve?

Cynthia Steele: I think it's at a few levels. There's at the EMpower level, and then there's a whole range of issues that are happening on the ground we would be concerned about. I do think there's still a lot of stigma around mental health. The lack of understanding, or the lack of framing, and the insufficient language, especially outside of English.

In general, we need to come up with language that is more encompassing and relatable. The stigma is real in all the places in which we work, so that makes it more comfortable for people to talk about in general, and specifically if they're facing issues. There are some really important generational challenges. We supported some research

in South Africa a couple of years ago. A lot of the young people said that their parents don't get this. They come from a generation of living under a lot of hardship, living under apartheid, and their attitude, and I'm summarizing, is to suck it up. Life's tough. Get over whatever mood you're in.

We've seen this thinking in other places, too, even in the funding space, where an older generation of funders who are often the decision makers in family offices and things like this. I'm thinking of Asia, for example, they're thinking of funding schools, funding arts. They don't see mental health as being something that they want to be associated with. Again, this goes back to the stigmatization, or being relevant. A younger generation will, but they might not have the power to make decisions yet. To unlock more funding for this space, there's a lot to be done to change the framing, change the language, and make it, in a way, like, come on in, the water's warm.

Mental health, I assume, relates to everything if you think about it that way. That will enable more funding on the ground. Last thing, it's deeply worrying that the cuts are going to be sustained in government health budgets because of the cuts from USAID and other bilateral funding. WHO [World Health Organization] is eviscerated. Mental health, as it is, only gets, on average, 2% of the national health budget. Much less of the overall national budget. Will countries prioritize that when they need to think about vaccines and they have other really hard choices to make? I worry about what's going to happen with funding for mental health, which is already not nearly where it needs to be.

Those are some of the bigger challenges that we're trying to see what we can do. Again, using our platform to raise these issues with people who might have influence or can do something about it. It's these wicked problems that require a lot of people strategizing and thinking about how we can change the landscape.

I would say the challenges are not specific to mental health. Funding, obviously, is always an issue. This is a very hard time for nonprofits. There's a set of issues that relate to people trying to cope with the US administration and wondering what's coming down the pipe. The funding climate is challenging, in general, so I would say it's not specific to mental health, but it's the larger issue.

It's a hard time in civil society, and that's true in some of the countries where we were, where there are just more constraints. It's true in India, true in Mexico, it's been true for a long time in China. There are more requirements for getting funding, more scrutiny, and more reporting requirements. All of which put pressure on the local organizations that are trying to deliver mental health services because they're now having to report on a bunch of different things. It is a really challenging time.

One of the things we think a lot about is the well-being of the local organizations that we're supporting. They're under a lot of pressure. They face a lot of stress. They are hearing stories. Young people are coming to them with signs of anxiety and signs of depression. They are experiencing suicides among their youth participants.

I know I keep using South Africa. It's just on my mind. I was in Cape Town last year, and while we were meeting with the director at a school, somebody came and pulled her aside and said, one of the girls said that she had been raped. The director obviously said, I'll get back to you guys. I need to go deal with this, which, of course, she did. The point being, they're experiencing a lot of really challenging conversations. One of the things we really think about is how to bolt through them and try and avoid burnout, and make sure that they're paying attention to their own well-being.

Jessica Kantor: What are some things that you tried that didn't work but that you learned lessons from, that maybe others can learn lessons from?

Cynthia Steele: One is, I can think of a few countries where we have not recognized the importance of mental health, especially in a community or with a group of young people who are facing enormous challenges. Like if they're orphans, at the margins in their community, or there isn't enough attention to mental health as a prerequisite.

All the things you're talking about, having social capital, developing critical thinking skills, and having a sense of agency. Those things need to be in place before the organization does anything else.

For example, if a program starts by thinking, we're going to have links for young people to get into good jobs. We're going to create contacts with employers, help them with their interview skills, and with job readiness and stuff. All of which makes a ton of sense, but if the young people first don't have the self-confidence to try for something, they won't have a sense of how to work in the workplace. Those results are not going to be achievable.

That has been an important lesson learned. There are certain things that relate to mental health that need to happen earlier, not just alongside the programmatic work. So that young people have a sense of self-confidence and feel that they have peers and trusted adults who are rooting for them. This way, they can stay in school and overcome some of these other challenges.

Jessica Kantor: You fund for 10 years. Was that always your mode, or did you learn from that after funding for a shorter amount of time, and you just didn't have the same impact?

Cynthia Steele: We've always funded for several years. We've never funded one-off projects ever, but we've evolved. I've been with EMpower for almost 21 years, which is mind-boggling. In the initial days, we went from 4 years of funding to 6 years, but we've been funding for 10 years, for 15 years now. At this point, we've done reviews of our partners that have been with us for that long. Just a really solid belief that it makes a difference to be able to count on that kind of support.

Also, it makes such a difference in the relationship you have. When we use the word "partnership," we don't use it as a throwaway word. Think about any relationship that you have with a person or organization. You're more likely to develop trust and share things that are not going well when you have spent some time with them, but not if it's

just a transactional relationship. You're not going to spend the time on it, you're not going to trust the outcome, you're not going to reveal yourself.

We really believe that we co-learn so much more. Particularly in this environment where organizations are facing so much more uncertainty, volatility, and precarity. They know that they can count on EMpower. Occasionally, even with groups that have exited, 10 years later, when they've faced a crisis, they've come back to us, and we've said, we're going to give you another year of funding. Because we want the organizations to thrive and to do well.

Jessica Kantor: What advice would you give to others trying to do similar work?

Cynthia Steele: I think our model, and again, there's more evidence about this, but it's also what we're hearing from our partners. I'm so glad that ICONIQ [Capital] funding is like this. It made my heart sing in my early conversations. Flexible funding, unrestricted funding, and giving for a period of time. All of that means that organizations can pivot, shift, and trust their wisdom. It also doesn't tie them up in knots.

We have experience with this both as a funder, but also because we're a public foundation. You can spend so much time trying to readjust budgets and small budgets, or continually apply for funding, and that time is so much better used dealing with the real issues in your community. Would we rather they spend time answering 25 questions on a report or using that time to reach 100 more young people?

Two other things I would say. Again, I'm speaking of what our model is, but it's because I am so passionate about it. I absolutely think it's the way to go. Paying attention to gender. There are important differences in the mental health experience. It's true for everything: education, livelihoods, and health. There are important differences in the experiences, the statuses, the roles, and the norms for girls and boys, young women, young men, and LGBTQI [Lesbian, Gay, Bisexual, Transgender, Queer, Intersex].

There needs to be more of a sense of nuance about it. It doesn't mean that the program has to be radically different, but one has to understand that the ways that boys express their mental health issues, and this is as true in the Global North as it is in the Global South, are different. The programming and the people who are working on these issues need to have an understanding of this. Gender is a through line for everything that EMpower does. Always has been. One needs to pay attention to it.

Historically, programs that focused on young people always skewed towards boys and men, just like most of the world has. Science, evidence, and investments. If there's not a conscious attention to things like, can girls get to programs? Are the hours going to work for them because they're taking care of their younger siblings? Are their parents going to let them? And specific questions like that. The default may be to not consider those things, and then girls don't show up.

Then, meaningful youth engagement for us means actively seeking young people's opinions and getting to know their realities, listening to what they say, and factoring it into the programming for them. They know far better than any of us, you in Los Angeles,

me in Brooklyn, of what their needs are, what their realities are, and what's going to work. We center listening to young people and giving them the mic, letting them speak for themselves in their programs and in their communities.

Jessica Kantor: I could see how that's done within the organizations that you fund, but how, and are you able to do that in your work as a funder as well?

Cynthia Steele: Yes. We have youth fellows in some of the countries where we're supporting work. They give EMpower advice on different things, including our country's strategies. We've had, since 2016, a girls' advisory council in India, for example. The girls have changed because they graduate, but the council has, and the ideas exist. They have reviewed proposals, and they've conducted participatory action research.

We have youth fellows in Mexico, in Indonesia, now in the Philippines, and in South Africa, each doing different things because they also shape what they want to do. For example, in Indonesia, they've prioritized mental health and have mobilized a lot of other young people to understand their issues. They've gone to the Philippines to help them start a youth-meaningful engagement program.

Our approach is to provide the enabling environment. That includes paying the young people, not expecting them to donate their time for free, and giving them recommendations for future work, things that matter to them, so we're not being extractive, but also so they determine their own agenda of what they want to do. We don't come in and say, provide this or we want that. It's more of us facilitating a space for them to contribute and make decisions.

Jessica Kantor: Are there any other things that you think are barriers to changing the way people think about youth mental health that we haven't already discussed?

Cynthia Steele: Breaking down any myths or misconceptions about helping people understand what the long-term effects are in not making these investments. If one were to think about how to really mobilize more funding, I think they are helping by not seeing it as a side issue or icing on the cake.

For some people, they have [more of] a sense of hunger's importance, and housing's importance, and they are. I'm not by any means saying to stop food programs, but there can be a bit of a sense among some people that [mental health] is just a nice add-on, or sprinkles on the cake. But without that, none of the rest of it is going to matter.

Also, we as a field have more to do to highlight the economic consequences of not investing in mental health. What it means in terms of human capital lost, of what health systems are going to have to pay for, and of disability costs. There's been some modeling of this by PAHO [Pan American Health Organization], for example, and it's huge. Consolidating arguments that can persuade people who might not see the macro advantages and the macro importance, and the consequences of not doing this, not only for the young people for whom we should feel a moral obligation to help be intact and whole, but also for communities and countries.

Jessica Kantor: What do you think the most important question is that Co-Lab should be asking right now?

Cynthia Steele: The question that I would pose is, what other assets could be deployed by people in the collective to de-stigmatize, to drive more funding, to drive more acceptance, to lift up best program practices? What are the intellectual, networking, and platform assets that could be harnessed?

Jessica Kantor: Thank you so much for taking the time to chat.

Jessica Kantor is an independent journalist specializing in health, human rights, and social impact. Her work can be found in Fast Company, Healthcare Quarterly, Innately Science, and others, and she has been a Solutions Insights Lab interviewer since 2023. Additionally, she provides communications strategy to nonprofits and INGOs who are working on the Sustainable Development Goals. She is a living kidney donor based in Los Angeles.

** This interview has been edited and condensed.*