

**Committee:** World Health Organisation (WHO)

**Topic:** Implementing universal health coverage for mental health treatment

**Student Officer:** Joanna Mavromati

**Position:** Deputy President

---

## Personal Introduction

Dear Delegates,

My name is Joanna Mavromati and I am currently a 10th Grade student at Platon School in Athens. This is my second time as a Student Officer and I can say that I am more than excited to work with you and serve as the Deputy President of the World Health Organization at the 9th CSMUN conference.

Attending a Model United Nations Conference equips you with the necessary skills to channel your thirst for knowledge into a more specific direction, whether that is in the aspect of politics, humanitarian affairs or in this case global health and medicine, in which you are given the opportunity to compose a fuller perspective of the world as well as turn your ideas and beliefs into productive work. This year's WHO agenda is of extreme importance since it covers topics influencing all individuals, irrespective of their financial and social status. As far as my topic is concerned, it provides the committee with a lot of room for debate and addresses the need for universal mental health coverage. It goes in-depth about the impact that mental health has on our daily lives and emphasizes the importance of setting the bases, both legal and social, towards a future in which all people have access to adequate mental health treatment.

I encourage you all to revise the study guides before the conference and conduct extensive research, especially on your country's policy in order to be able to form innovative resolutions and have a fruitful debate. We are all looking forward to



our time together! Do not hesitate to contact me for any further clarifications concerning the topic at my email linked below.

Yours truly,

Joanna Mavromati

[mavromati\\_jo@icloud.com](mailto:mavromati_jo@icloud.com)

## Topic Introduction

Mental health is a concept which has been left untouched for many years. Rooted from the fact that mental health does not necessarily have physical symptoms which can be easily recognized and identified, individuals suffering from mental illnesses often fail to get the attention they deserve. Many people's mental illnesses frequently become invalidated due to a lack of knowledge and proper diagnosis. Especially in Less Economically Developed Countries (LEDCs) the importance of mental health and mental health treatment is often underestimated causing devastating effects to the individuals suffering as well as to their families and people involved with them. In comparison to physical health, mental health has constituted a taboo topic for centuries. Its impact on the affected individual is not always obvious, leaving them feeling confused, scared and unable to express the feelings they're experiencing.

The absence of knowledge surrounding the topic of mental health does not allow people to openly discuss it, further aggravating the situation and intensifying the negative feelings of the individuals suffering from mental illnesses. It is known that in 2017 more than 10% of the world's population was suffering from a mental disorder<sup>1</sup> (excluding all the people who have yet to be diagnosed due to a lack of resources). To put this into perspective, more than 264 million people are suffering solely from depression with it being one of the main causes of disability on an international level.

---

<sup>1</sup> Ritchie, Hannah, and Max Roser. "Mental Health." *Our World in Data*, 20 Jan. 2018, [ourworldindata.org/mental-health](https://ourworldindata.org/mental-health).



In addition, suicide is the second most common cause of death among 15 to 19 year-old people.<sup>2</sup>

Therefore, it becomes evident that universal health coverage and awareness regarding mental health is an issue of utmost importance as it exceeds the lines of individual stability and reaches the point of threatening millions of human lives, irrespective of age and social status. It may be said that implementing universal health coverage for mental health treatment in our healthcare systems is a matter of extreme urgency when aiming to protect human lives in the long term and establish fundamental human rights, such as the right to healthcare.

## Definition of key terms

### Mental Disorder

Mental disorders are characterized as conditions that affect one's behaviour, mood, relationship with others or themselves, and their thoughts. Some common mental disorders are depression, anxiety disorders, bipolar disorder (BPD), obsessive and compulsive disorder (OCD), post-traumatic stress disorder (PTSD) and eating disorders.

### Mental Health

Mental health is described as the state of mental well-being in which an individual is capable to deal with the emotional stresses of every-day life, contribute to society and is able to produce productive work.

### Mental Health Treatment

Mental Health treatment consists of all the methods by which an individual diagnosed with a mental illness can receive medical care and support aimed for their recovery.

---

<sup>2</sup> "Depression." *World Health Organization*, World Health Organization, [www.who.int/news-room/fact-sheets/detail/depression](http://www.who.int/news-room/fact-sheets/detail/depression).



## Physical health

Physical health is the state in which the body is functioning as it was biologically meant to be and there is a balance between the body and its environment, ensuring that all biological processes meant for survival and reproduction are being performed normally. Physical health is very closely related to mental health, as the well being of one's mind can often directly impact their basic bodily functions and lead to psychosomatic issues.

## Right to Healthcare

The Right to Healthcare is one of the inherent human rights that all people are endowed with. According to Article 25.1 of the Universal Declaration of Human Rights, all individuals are entitled to a standard of adequate health and therefore have the right to access healthcare, irrespective of their gender, ethnicity, religious beliefs, sexual orientation, financial or societal status. The inalienable human right to healthcare also includes access to mental health treatment, as it plays a pivotal role in achieving overall well-being.

## Universal Health Coverage (UHC)

Universal Health Coverage is a term which means that all individuals have access to adequate healthcare services including prevention, treatment and rehabilitation, without having to undergo financial distress.

## Background Information

Universal Health Coverage has not always been a widely recognized concept, especially in the aspect of mental health and mental health treatment. Over the years, several misconceptions on the causes, effects and treatment of mental disorders have been recorded, having disastrous effects on the individuals suffering from them. The lack of resources in combination with the ignorance and taboo created around the topic of mental health did not facilitate scientific research and progress, further



aggravating the situation.<sup>3</sup> Recent technological advancements, such as smartphones and tablets, facilitate data collection and increase ways to access help,<sup>4</sup> as well as evolution in medicine, have helped establish a strong basis towards Universal Health Coverage and set some basic standards for better mental health treatment. However, there is still plenty of room for improvement as it is evident that mental health treatment has yet to become a priority with healthcare systems around the world still invalidating its significance in Universal Health Coverage plans.

## History of mental health treatment

### Roman and Egyptian History

Current mental disorders do not scientifically differ from those that people suffered from in earlier civilizations; however, there have been profound changes in our perception, diagnosis and treatment of them. In the 1400s, civilizations like the Romans and Egyptians believed that psychological issues were the result of evil spirits. They were not yet equipped with the scientific knowledge necessary to comprehend and properly treat such complex illnesses with symptoms differing from any other disease they had experienced. Some common treatments of mental disorders included expulsion or types of experimental “magical” remedies with no actual results.

### Ancient Greek History

Furthermore, Ancient Greek tragedies contain some of the most vivid descriptions of insanity in the history of literature. Tragedians like Aeschylus, Sophocles, and Euripides represented madness and mental disorders as a punishment for wicked actions sent by gods, also known as divine punishment. The first Greeks to highlight the importance of one’s mental health and approach it as a

---

<sup>3</sup> “Breaking the Stigma around Mental Illness in Uganda.” *BBC News*, BBC, 21 Feb. 2015, [www.bbc.com/news/world-africa-31557295](http://www.bbc.com/news/world-africa-31557295).

<sup>4</sup> “Technology and the Future of Mental Health Treatment.” *National Institute of Mental Health*, U.S. Department of Health and Human Services, [www.nimh.nih.gov/health/topics/technology-and-the-future-of-mental-health-treatment/](http://www.nimh.nih.gov/health/topics/technology-and-the-future-of-mental-health-treatment/).



natural function were Asclepius and Hippocrates. They believed that there must be harmony between the patient's social and natural environment so as for them to be considered healthy, as highlighted in the Hippocratic oath. Hippocrates' philosophy centred around the saying "healthy mind in a healthy body" meaning that one's physical health is closely dependent on their mental health and vice versa. However, even though more rational theories on the explanation of mental disorders, such as those of Hippocrates, started forming, effective mental health treatment did not appear until centuries later and people in ancient times continued to depend on religious remedies and sacrifices to gods as their main treatment.<sup>5</sup>

### Mental Health in the Victorian Era

During the Victorian Era (1820-1914), mental health and mental disorders continued to get invalidated and mistreated and gender inequalities also started to rise. Women and girls would often be overdiagnosed and labelled as "insane" due to symptoms rooted in maternity or menstruation such as postpartum anxiety indications, pregnancy-related bitterness or menstruation-related irritation. Today, such behaviour has been medically explained and is considered a normal female bodily function and there is scientific evidence on the causes behind such hormonal reactions. However, during the Victorian Era, many women were often put in institutions where they would get mistreated and punished when they did not comply with certain rules.<sup>6</sup>

### Mental Health Institutions

Setting mentally unstable people in offices did not allow for the rest of the population to understand their struggles and come up with more effective solutions to their issues. Mental institutions all over the globe constituted the main form of mental disorder treatment but consequently did more harm than good as they alienated the individuals from society, not allowing them to leave and infringing all of their

---

<sup>5</sup> Tzeferakos, Georgios, and Athanasios Douzenis. "Sacred Psychiatry in Ancient Greece." *Annals of General Psychiatry*, BioMed Central, 12 Apr. 2014, [www.ncbi.nlm.nih.gov/pmc/articles/PMC3991897/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3991897/).

<sup>6</sup> Ben Lesser Ben Lesser is one of the most sought-after experts in health. "Ben Lesser." *Dualdiagnosis.org*, 21 Mar. 2021, [dualdiagnosis.org/mental-health-and-addiction/history/](http://dualdiagnosis.org/mental-health-and-addiction/history/).



fundamental human rights and freedoms making them feel trapped and often unsafe. Due to the lack of information, specialized personnel and proper knowledge treatment inside such institutions were often brutal and included several unsafe and harmful methods. Patients would often be tied to their beds with the use of force as a means to contain them, which further worsened the mental state of the already unstable individuals.

### Mental Health Treatment, Post World War I

After World War I, scientists started experimenting with different medications that could help tackle different mental disorders. Electroshock treatment, lobotomies as well as other methods of treatment were used in establishments for people struggling with psychological issues until the 1940s and 1950s, assisting a number of people with genuine illness. Yet, this started becoming undesirable when new and partly improved strategies appeared. During the 1940s and 1950s, scientists started supplying patients with severe bipolar disorders with lithium pills, which to a large extent helped calm them down. Antipsychotics were also prescribed to schizophrenia patients. This medicine seemed to be effective and with most mental foundations lacking capacity, doctors started allowing patients to use these medications at home. However, many patients failed to integrate into society and had relapsed since healthcare services, such as support groups, social help, and therapy, were not administered properly. Until the 1990s, many people with a mental illness record had entered the criminal equity because of a mix in their medication and research conducted in 1988, which showed that 28% of vagrants had diagnosable mental maladjustment.

### Effects of Mental Disorders

#### Effects on the individual

Mental illnesses can negatively affect all sectors of a person's life including their relationships with others, productivity and efficiency in their work, hobbies and self-esteem. Different mental disorders vary in the impacts they can have on one person's



everyday life. Even though the causes of mental disorders vary from person to person, some widely known causes include childhood trauma, such as abuse, alienation or loss of a loved one, environmental triggers and unstable living conditions, substance abuse, genetics and brain injury. Physical health is very closely related to mental health, as the well-being of one's mind can often directly impact their basic bodily functions and lead to psychosomatic issues. Depression, being one of the main causes of disability worldwide, can cause insomnia, fatigue, feelings of severe sadness, hopelessness or emptiness, weaken one's immune system and even increase pain sensitivity. Anxiety disorders such as PTSD, panic disorders, social anxiety or agoraphobia, except for the negative impact they have on your physical health, can discourage individuals from participating in everyday activities leading to alienation and aggravating any fears and feelings of loneliness which can unfortunately sometimes lead to suicidal thoughts or self-harming. Lastly, it is known that people suffering from severe mental disorders die on average 20 years earlier than the general population due to physical conditions rooted in their mental illness such as cardiovascular disease.

Sometimes, mental disorder treatment can have an even more negative impact than that of the mental illness itself. False diagnosis, caused by a lack of expertise and knowledge, can leave the individual feeling even more confused and alone since they feel as if their thoughts and feelings do not have a valid explanation. In addition, mental





facilities, although deemed helpful under certain circumstances, may contain certain flaws which do not allow for proper recovery of patients. <sup>7</sup>



Figure 1: Diagram depicting some effects that mental disorders can have <sup>8</sup>

A major issue that such facilities have yet to resolve is separating patients of different backgrounds so as to deal with them separately and not invalidate their feelings. For example, when an individual is sent to a mental facility due to a suicide attempt, it does not allow them to heal when they are being treated in the same room with a patient suffering from schizophrenia. Instead, seeing a patient suffering from such a severe illness being treated similarly to them can make them question their own sanity and feel as if their disorder has completely taken control of their personality. It is really important to address such administrative issues so as to be able to provide

<sup>7</sup> Pietrangelo, Ann. "The Effects of Depression in Your Body." *Healthline*, Healthline Media, 22 Oct. 2019, [www.healthline.com/health/depression/effects-on-body](http://www.healthline.com/health/depression/effects-on-body).

<sup>8</sup> "Sleep and Mental Health." *Mind*, [www.mind.org.uk/information-support/types-of-mental-health-problems/sleep-problems/about-sleep-and-mental-health/](http://www.mind.org.uk/information-support/types-of-mental-health-problems/sleep-problems/about-sleep-and-mental-health/).

people in need with adequate treatment without causing them further trauma, undue stress, or harm.

### Effects on society and the economy

Mental illnesses and disabilities caused by mental disorders also have a large social and economic impact. People with mental illnesses have reduced productivity and employment rates by 15% to 20% compared to those with good mental health and mental stability. High unemployment rates can result in an inability to get access to basic human needs, adequate mental health treatment and, in extreme cases, may even lead to homelessness. Poor mental health treatment does not allow for individuals to recover and therefore deprives them of the opportunity to work and contribute to their community. Furthermore, inadequate mental health treatment and high rates of mental disorders often lead to more deaths caused by suicide; this reduces productivity as young people choose to end their life before they get the chance to make a change in their urban community. Lastly, people suffering from untreated mental disorders are more likely to take part in illegal activities, due to the lack of social services and poverty caused by unemployment, and end up in the criminal justice system.

### Present-day treatment

#### Methods of treatment and diagnosis today

Nowadays, treatment and diagnosis methods have become much more efficient, with scientists continuously working and researching new treatments for even the rarest disorders. The most common methods of treatment internationally include psychotherapy, occupational therapy, support groups, medication (such as antidepressant pills and tranquilizers), and in more severe cases, hospitalization. Standards and legislation such as the “Mental Health Act” and GA Resolution 46/119 on the “Principles for the protection of persons with mental illness and the improvement of mental health care” have been adopted so as to help protect the human rights of mentally ill people and ensure that patients in mental health facilities



are not under any circumstances mistreated. Even though immense progress has been made, mental health treatment costs are often very high and people of lower incomes do not have the financial ability to access them. Since mental health treatment is not covered by health insurance in most countries, a very large percentage of the population still does not have access to it. Furthermore, even though the importance of mental health has been recognized in most Western countries, many LEDCs still do not have the means necessary to implement mental health treatment in their healthcare systems.

### Access to mental health treatment today

There have been international efforts by global health agencies to support national governments for the integration of mental health care in their healthcare systems. Advancements in medicine and technology have made mental health treatment more accessible and affordable yet LEDCs still struggle to implement mental health treatment due to a lack of skilled human resources, trained personnel, capacities and financial resources. Acknowledging the fact that MEDCs mainly focus their mental health treatment methods on biomedicine, paying little attention to prevention and promotion, LEDCs would not have the means to establish a mental healthcare system based on the same principles, as such treatment requires facilities, research centres and resources that they are not attained with.

### Universal Health Coverage (UHC)

UHC includes all essential health services, including rehabilitation and prevention, and is considered to be one of the main goals of the UN Sustainable Development Goals (SDGs), namely Goal No. 3, “Good Health and Well Being”.<sup>9</sup> The concept of UHC is for everyone to have access to quality healthcare at a cost that can serve them and the nation as a whole. It has also started becoming widely recognized that “there is no health without mental health” and therefore UHC would not be

---

<sup>9</sup> “Health – United Nations Sustainable Development.” *United Nations*, United Nations, [www.un.org/sustainabledevelopment/health/](http://www.un.org/sustainabledevelopment/health/).



considered effective if it did not include mental health treatment coverage, rehabilitation, promotion and prevention. UHC is a concept that has been receiving more and more recognition over the years and it is apprehensible that mental health must be integrated into global efforts to enhance the international healthcare system. States such as New Zealand, the United Kingdom and Japan started adopting legislation ever since 1938. New Zealand's Social Security Act was one of the first to be adopted, and set the basis towards the establishment and recognition of Universal Health Coverage. Overall, the right to healthcare, which all people are endowed with, could not be considered fulfilled unless mental health treatment was not covered and accessible to all.

## Major countries and organizations involved

### United States of America (USA)

The USA is one of the countries with the highest percentages of people struggling with mental disorders, with around 51.5 million recorded cases in 2019. In 1946, the US adopted the Mental Health Act as a response to mistreatment in mental health facilities and human rights violations against people with mental disabilities. The Mental Health Act is the main piece of legislation that highlights the human rights that people with mental disorders are endowed with. Moreover, it explains that people detained under the said act are in urgent need of medical care and could impose a risk on themselves or others if left untreated. Although mental health treatment is not covered by standard health insurance, certain insurance companies have provided people with health insurance plans that also cover mental health treatment, such as the Affordable Care Act (ACC 2010).

### China

The two most common mental disorders in China include depression and anxiety, with an estimation of 54 million people suffering from depression and 42 million from anxiety. Fortunately, China has made significant progress over the last



decade in the integration of mental health treatment in UHC, such as adopting the first mental health law<sup>10</sup> which urges for more facilities to be built, increase in mental healthcare personnel and spreading awareness to the people.

## Netherlands

The Netherlands was one of the first States on 30 March 2007 to sign the UN Convention on the Rights of Persons with Disabilities, and ratified the Convention on 13 July 2016. The Netherlands have one of the most advanced anti-discrimination national frameworks<sup>11</sup> which sets the standards which must be met when treating patients with mental health disorders. In addition, mental health care, both primary and secondary, is fully covered by health insurance and sets a global example for integrating mental health treatment in UHC plans.

## Uganda

Uganda has ratified the Convention on the Rights of Persons with disabilities on 25<sup>th</sup> September 2008. Since then, there have been efforts to implement the Convention, but a lack of resources and capacities do not allow for progress to be made. Similarly to other LEDCs and States of the African Union, Uganda has extremely limited resources, a weak referral system, a lack of skilled mental health personnel and stock-outs of pharmaceuticals. It is estimated that there are around 30 psychiatrists in total meaning that with a population of around 35 million it is less than 1 psychiatrist per 1 million people (2015). Due to a lack of education, people still have the

---

<sup>10</sup> Chen, Hh, et al. "Mental Health Law of the People's Republic of China (English Translation with Annotations): Translated and Annotated Version of China's New Mental Health Law."

<sup>11</sup> Aart Hendriks Johan Legemaate. "Thematic Legal Study on Mental Health and Fundamental Rights - Netherlands ." *European Union Agency for Mental Health*, 2009, fra.europa.eu/sites/default/files/fra\_uploads/2157-mental-health-study-2009-NL.pdf.



misconception that mental disorders are linked with supernatural powers, making it extremely difficult to provide aid to people in need.<sup>12</sup>

## World Health Organization (WHO)

The UN World Health Organization is one of the main organizations focusing on the scale-up of UHC and the implementation of mental health treatment in UHC package plans. In Article 1 of the WHO's Constitution, the aim of the Organization is defined as “*the attainment by all peoples of the highest possible level of health*”.<sup>13</sup> The WHO's unique structure as a science and evidence-based organization gives it a pivotal role in universal health matters such as UHC for mental health. The WHO is working to achieve the Thirteenth General Programme of Work (GPW 13) aiming to triple a billion targets by the year 2023: “one billion more people are benefiting from universal health coverage, one billion more people are better protected for health emergencies, and one billion more people are enjoying better health and well-being.”<sup>14</sup> The organization also plays a major role in the achievement of Sustainable Development Goal No. 3, “good health and well-being”, and has also set in motion the WHO Special Initiative for Mental Health and WHO's comprehensive mental health Action Plan 2013-2030.

## World Federation for Mental Health (WFMH)

WFMH is a global membership organization, which was founded in 1948 with the goal to advance mental health treatment, prevent psychological disorders, promote mental health and raise awareness to the public about psychological issues. They have organized summits, such as the International Trauma Summit, intending to inform the public about mental health disorders and normalize mental disabilities. They

---

<sup>12</sup> Kopinak, Janice Katherine. “Mental Health in Developing Countries: Challenges and Opportunities in Introducing Western Mental Health System in Uganda.” *International Journal of MCH and AIDS*, Global Health and Education Projects, Inc, 2015, [www.ncbi.nlm.nih.gov/pmc/articles/PMC4948168/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4948168/).

<sup>13</sup> “Constitution of the World Health Organization.” *World Health Organization*, World Health Organization, [www.who.int/publications/m/item/constitution-of-the-world-health-organization](http://www.who.int/publications/m/item/constitution-of-the-world-health-organization).

<sup>14</sup> “Thirteenth General Programme of Work 2019–2023.” *World Health Organization*, World Health Organization, [www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023](http://www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023).



have also been providing the public with online mental health courses during the COVID-19 pandemic as a way to help individuals feel less alone.

## Timeline of events

<u>April 7, 1948</u>	The World Health Organisation is established
<u>July 3, 1946</u>	The Mental Health Act (US) is adopted, setting the basic standards for mental health treatment
<u>July 22, 1946</u>	The WHO Constitution, the document setting the standards and functions of the WHO, is adopted
<u>December 10, 1948</u>	The Universal Declaration of Human Rights (UDHR) is adopted
<u>February 18, 1992</u>	The General Assembly of the United Nations adopts resolution 46/119 “Principles for the protection of persons with mental illness and the improvement of mental health care”
<u>December 13 2006</u>	Adoption of the Convention on the Rights of Persons with Disabilities (CRPD)
<u>May 2013-2020</u>	Time period for the WHO Comprehensive Action Plan for mental health
<u>September 25-27 2015</u>	The United Nations Sustainable Development Summit takes place, where the Sustainable Development Goals (SDGs) are adopted

<u>2018</u>	WHO's Special Initiative for mental health takes place
<u>September 23, 2019</u>	UN General Assembly High-Level Meeting on UHC, where states reaffirmed their commitment to the SDG and to implementing UHC

## Previous attempts to solve the issue

### WHO Special Initiative for Mental Health

The WHO's Special Initiative for Mental Health is one of the main efforts to implement mental health treatment in Universal Health Coverage. The Initiative seeks to ensure affordable and high-quality mental health treatment to more than 100 million people in 12 priority countries, over the course of 5 years (2019-2023). It will advance mental health policies, taking into consideration already implemented universal human rights instruments. Moreover, it will enhance national mental health care services.

### WHO's comprehensive mental health Action Plan 2013-2030

The WHO comprehensive mental health Action Plan adopted in May 2013 at the 66<sup>th</sup> World Health Assembly has been extended to the year 2030 so as to align with the 2030 Sustainable Development Agenda. The Action Plan aims to implement mental health treatment in UHC so as to reduce premature deaths due to non-communicable diseases, through prevention, treatment and promotion of mental health and well-being.<sup>15</sup>

### Mental Health Act

The Mental Health Act is the main piece of US legislation, adopted in 1946, concerning the rights and freedoms of people with intellectual disabilities and mental disorders. It highlights the standards which must be met during mental health

<sup>15</sup> "Eastern Mediterranean Region." *World Health Organization*, World Health Organization, [www.emro.who.int/mnh/mental-health-action-plan/index.html](http://www.emro.who.int/mnh/mental-health-action-plan/index.html).





treatment and emphasizes the fundamental human rights that individuals suffering from mental disorders are endowed with.

## Relevant UN Resolutions, Events, Treaties and Legislation

### UN Convention on the Rights of Persons with Disabilities

In 2006, the UN General Assembly adopted the Convention on the Rights of Persons with Disabilities as well as its optional Protocol, which in 2008 entered into force. The Convention sets the human rights standards under which all people with disabilities should be treated, including individuals struggling with mental health disorders, aiming to limit discrimination, promote justice and equality as well as the insurance of fundamental human rights regardless of one's disability.<sup>16</sup>

### GA Resolution 46/119: Principles for the protection of persons with mental illness and the improvement of mental health care

On the 18th of February 1992, the General Assembly of the United Nations adopted resolution 46/119 which establishes a number of principles that should be followed to protect mentally ill persons as well as improve mental healthcare standards. Said resolution consists of 25 principles that are intended to ensure that the fundamental human rights of people with mental illnesses will under no circumstances be infringed.<sup>17</sup>

### UN Sustainable Development Goals: Goal No. 3 “Good Health And Well-Being”

Universal Health Coverage makes up a key aspect of Sustainable Development and is one of the main objectives of the 2030 Agenda. Sustainable Development Goal No.3 is specifically devoted to UHC with target 3.8 reading: “Achieve universal health

---

<sup>16</sup> “Convention on the Rights of Persons with Disabilities (CRPD) Enable.” *United Nations*, United Nations, [www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html](http://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html).

<sup>17</sup> “The Protection of Persons with Mental Illness and the Improvement of Mental Health Care :” *United Nations*, United Nations, [digitallibrary.un.org/record/135851#record-files-collapse-header](https://digitallibrary.un.org/record/135851#record-files-collapse-header).



coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.”<sup>18</sup> UHC for mental health treatment is one of the many goals of the UN 2030 Agenda with SDG 3 setting one more example of the standards that Member States should start to meet.

## Possible solutions

### Implementation of new legal frameworks and commitment to already existing ones

One of the main obstacles that Member States have faced when aiming to scale up and integrate mental health in UHC is the lack of mental health policies and laws that align with human rights standards set in globally recognized instruments such as the Universal Declaration of Human Rights. In order to achieve the integration of mental health treatment in UHC package plans it is vital to provide States with applicable mental health laws and commit to or improve already existing documents such as the WHO comprehensive mental health action plan 2013-2030.

### Creation of governmental hotlines specializing in different mental disorders

In order to ensure that more people have access to mental health treatment, it is crucial to establish affordable and efficient ways for individuals to seek out help, even in cases of emergency. An effective way that could be achieved is through establishing a network of government hotlines, which could cooperate with already existing UN bodies, such as the WHO, but operate on a national level. Said hotlines will specialize in a specific mental disorder so as to guarantee that patients will receive the proper response, attention, treatment and perhaps advice that they need according to their specific situation.

---

<sup>18</sup> “Health – United Nations Sustainable Development.” *United Nations*, United Nations, [www.un.org/sustainabledevelopment/health/](http://www.un.org/sustainabledevelopment/health/).



## Training staff and specialised personnel

One of the main reasons why people are not provided high-quality mental health treatment is the lack of resources, including mental healthcare personnel. In order to implement any legislation promoting universal mental health coverage, we must ensure that all nations have the resources to cover such needs. This can happen through an organized movement of capacity building aiming to help LEDCs become self-reliant by receiving financial help from international organizations and MEDCs so as to train their medical personnel and equip them with the necessary skills to have the ability to deliver such services.

## Creation of reliable databases

An issue that policymakers and funders have experienced in the past when trying to establish mental health laws and implement such action plans for mental health to be implemented in UHC package plans, is the lack of reliable information and data around the topic of mental health. By creating or improving already existing databases, we can help provide the necessary data to support funding and policy decisions especially in LEDCs and lower-income countries.

## Bibliography

“About Us.” *World Federation for Mental Health*, 7 Apr. 2020, [wfmh.global/about-us/](http://wfmh.global/about-us/).

Ben Lesser Ben Lesser is one of the most sought-after health experts. "Ben Lesser." *Dualdiagnosis.org*, 21 Mar. 2021, [dualdiagnosis.org/mental-health-and-addiction/history/](http://dualdiagnosis.org/mental-health-and-addiction/history/).

“Breaking the Stigma around Mental Illness in Uganda.” *BBC News*, BBC, 21 Feb. 2015, [www.bbc.com/news/world-africa-31557295](http://www.bbc.com/news/world-africa-31557295).

“Home.” *World Federation for Mental Health*, 8 Aug. 2020, [wfmh.global/](http://wfmh.global/).



“Mental Disorders.” *World Health Organization*, World Health Organization, [www.who.int/news-room/fact-sheets/detail/mental-disorders](http://www.who.int/news-room/fact-sheets/detail/mental-disorders).

“Mental Health Treatments.” *Mental Health America*, [www.mhanational.org/mental-health-treatments](http://www.mhanational.org/mental-health-treatments).

“Mental Health.” *World Health Organization*, World Health Organization, [www.who.int/health-topics/mental-health#tab=tab\\_1](http://www.who.int/health-topics/mental-health#tab=tab_1).

“Mental Health: Strengthening Our Response.” *World Health Organization*, World Health Organization, [www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response](http://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response).

“Mental Illness.” *National Institute of Mental Health*, U.S. Department of Health and Human Services, [www.nimh.nih.gov/health/statistics/mental-illness](http://www.nimh.nih.gov/health/statistics/mental-illness).

“Mental Illness: Is There Really a Global Epidemic?” *The Guardian*, Guardian News and Media, 3 June 2019, [www.theguardian.com/society/2019/jun/03/mental-illness-is-there-really-a-global-epidemic](http://www.theguardian.com/society/2019/jun/03/mental-illness-is-there-really-a-global-epidemic).

Momen, Md Al. “Physical Health Definition: What Does Physical Health Mean?” *The World Book*, 22 Mar. 2021, [theworldbook.org/physical-health/](http://theworldbook.org/physical-health/).

Nations, United. “Convention on the Rights of Persons with Disabilities and Optional Protocol.” *UN Organisation*, 6 Dec. 2006, [www.un.org/disabilities/documents/convention/convention\\_accessible\\_pdf.pdf](http://www.un.org/disabilities/documents/convention/convention_accessible_pdf.pdf).

Polyakov, Maxim. “Universal Health Coverage - No Health Without Mental Health.pdf.” *United For Global Mental Health*, Dec. 2020, [unitedgmh.org/sites/default/files/2020-12/Universal%20Health%20Coverage%20-%20No%20Health%20Without%20Mental%20Health.pdf](http://unitedgmh.org/sites/default/files/2020-12/Universal%20Health%20Coverage%20-%20No%20Health%20Without%20Mental%20Health.pdf).

“Principles for the Protection of Persons with Mental Illness.” *OHCHR*, [www.ohchr.org/EN/ProfessionalInterest/Pages/PersonsWithMentalIllness.aspx](http://www.ohchr.org/EN/ProfessionalInterest/Pages/PersonsWithMentalIllness.aspx).



“The Protection of Persons with Mental Illness and the Improvement of Mental Health Care :” *United Nations*, United Nations, [digitallibrary.un.org/record/135851#record-files-collapse-header](https://digitallibrary.un.org/record/135851#record-files-collapse-header).

“A Quote by Fred Rogers.” *Goodreads*, Goodreads, [www.goodreads.com/quotes/157666-anything-that-s-human-is-mentionable-and-anything-that-is-mentionable](https://www.goodreads.com/quotes/157666-anything-that-s-human-is-mentionable-and-anything-that-is-mentionable).

Ritchie, Hannah, and Max Roser. “Mental Health.” *Our World in Data*, 20 Jan. 2018, [ourworldindata.org/mental-health](https://ourworldindata.org/mental-health).

“WHO Special Initiative for Mental Health.” *World Health Organization*, World Health Organization, [www.who.int/initiatives/who-special-initiative-for-mental-health](https://www.who.int/initiatives/who-special-initiative-for-mental-health).

“Eastern Mediterranean Region.” *World Health Organization*, World Health Organization, [www.emro.who.int/mnh/mental-health-action-plan/index.html](https://www.emro.who.int/mnh/mental-health-action-plan/index.html).

“Constitution of the World Health Organization.” *World Health Organization*, World Health Organization, [www.who.int/publications/m/item/constitution-of-the-world-health-organization](https://www.who.int/publications/m/item/constitution-of-the-world-health-organization).

“Thirteenth General Programme of Work 2019–2023.” *World Health Organization*, World Health Organization, [www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023](https://www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023).

“Universal Declaration of Human Rights.” *United Nations*, United Nations, [www.un.org/en/about-us/universal-declaration-of-human-rights](https://www.un.org/en/about-us/universal-declaration-of-human-rights).

*NHS Choices*, NHS, [www.nhs.uk/mental-health/social-care-and-your-rights/mental-health-and-the-law/mental-health-act/](https://www.nhs.uk/mental-health/social-care-and-your-rights/mental-health-and-the-law/mental-health-act/).

“The Netherlands Ratifies CRPD (Total: 166) Enable.” *United Nations*, United Nations, [www.un.org/development/desa/disabilities/news/dspd/the-netherlands-ratifies-crpd-total-166.html](https://www.un.org/development/desa/disabilities/news/dspd/the-netherlands-ratifies-crpd-total-166.html).

“Mental Health Care in NL.” *XPAT.NL*, 2 Nov. 2018, [www.xpat.nl/expat-netherlands/health-care/mental-health-care-nl/](https://www.xpat.nl/expat-netherlands/health-care/mental-health-care-nl/).



Chen, Hh, et al. “Mental Health Law of the People's Republic of China (English Translation with Annotations): Translated and Annotated Version of China's New Mental Health Law.” *Shanghai Archives of Psychiatry*, Editorial Department of the Shanghai Archives of Psychiatry, Dec. 2012, [www.ncbi.nlm.nih.gov/pmc/articles/PMC4198897/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4198897/).

“Mental Health.” *World Health Organization*, World Health Organization, [www.who.int/china/health-topics/mental-health](http://www.who.int/china/health-topics/mental-health).

“How Can Anxiety Disorders Impact One's Life?” *The Recovery Village Drug and Alcohol Rehab*, The Recovery Village Drug and Alcohol Rehab, 29 Sept. 2020, [www.therecoveryvillage.com/mental-health/anxiety/faq/how-can-anxiety-disorders-impact-ones-life/](http://www.therecoveryvillage.com/mental-health/anxiety/faq/how-can-anxiety-disorders-impact-ones-life/).

Pietrangelo, Ann. “The Effects of Depression in Your Body.” *Healthline*, Healthline Media, 22 Oct. 2019, [www.healthline.com/health/depression/effects-on-body](http://www.healthline.com/health/depression/effects-on-body).

Kleisaris, Christos F, et al. “Health Care Practices in Ancient Greece: The Hippocratic Ideal.” *Journal of Medical Ethics and History of Medicine*, Tehran University of Medical Sciences, 15 Mar. 2014, [www.ncbi.nlm.nih.gov/pmc/articles/PMC4263393/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4263393/).

Tzeferakos, Georgios, and Athanasios Douzenis. “Sacred Psychiatry in Ancient Greece.” *Annals of General Psychiatry*, BioMed Central, 12 Apr. 2014, [www.ncbi.nlm.nih.gov/pmc/articles/PMC3991897/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3991897/).

Beck, Julie. “Diagnosing Mental Illness in Ancient Greece and Rome.” *The Atlantic*, Atlantic Media Company, 23 Jan. 2014, [www.theatlantic.com/health/archive/2014/01/diagnosing-mental-illness-in-ancient-greece-and-rome/282856/](http://www.theatlantic.com/health/archive/2014/01/diagnosing-mental-illness-in-ancient-greece-and-rome/282856/).

“Universal Health Coverage (UHC).” *World Health Organization*, World Health Organization, [www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](http://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc)).



“Causes of Mental Illness.” *WebMD*, WebMD, [www.webmd.com/mental-health/mental-health-causes-mental-illness](http://www.webmd.com/mental-health/mental-health-causes-mental-illness).

“Mental Illness.” *National Institute of Mental Health*, U.S. Department of Health and Human Services, [www.nimh.nih.gov/health/statistics/mental-illness](http://www.nimh.nih.gov/health/statistics/mental-illness).

“Why Integrating Mental Health into Universal Health Coverage in Low Resource Settings Is Necessary and Achievable.” *The George Institute for Global Health*, [www.georgeinstitute.org/profiles/why-integrating-mental-health-into-universal-health-coverage-in-low-resource-settings-is](http://www.georgeinstitute.org/profiles/why-integrating-mental-health-into-universal-health-coverage-in-low-resource-settings-is).

“Comprehensive Mental Health Action Plan 2013-2020-2030.” *World Health Organization*, World Health Organization, [www.who.int/initiatives/mental-health-action-plan-2013-2030](http://www.who.int/initiatives/mental-health-action-plan-2013-2030).

Kopinak, Janice Katherine. “Mental Health in Developing Countries: Challenges and Opportunities in Introducing Western Mental Health System in Uganda.” *International Journal of MCH and AIDS*, Global Health and Education Projects, Inc, 2015, [www.ncbi.nlm.nih.gov/pmc/articles/PMC4948168/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4948168/).

Ben Lesser Ben Lesser is one of the most sought-after health experts. “Ben Lesser.” *Dualdiagnosis.org*, 21 Mar. 2021, [dualdiagnosis.org/mental-health-and-addiction/history/](http://dualdiagnosis.org/mental-health-and-addiction/history/).

“How Mental Health Affects the City.” *Centre for Urban Design and Mental Health*, [www.urbandesignmentalhealth.com/how-mental-health-affects-the-city.html](http://www.urbandesignmentalhealth.com/how-mental-health-affects-the-city.html).

“Technology and the Future of Mental Health Treatment.” *National Institute of Mental Health*, U.S. Department of Health and Human Services, [www.nimh.nih.gov/health/topics/technology-and-the-future-of-mental-health-treatment/](http://www.nimh.nih.gov/health/topics/technology-and-the-future-of-mental-health-treatment/).

“Sleep and Mental Health.” *Mind*, [www.mind.org.uk/information-support/types-of-mental-health-problems/sleep-problems/about-sleep-and-mental-health/](http://www.mind.org.uk/information-support/types-of-mental-health-problems/sleep-problems/about-sleep-and-mental-health/).

