Mental Health as An Accelerator for All SDGs

Mental Health and Psychosocial Support (MHPSS) is an institutional priority for the UN, and for UNICEF. UNICEF promotes a holistic, systems strengthening, and community-based approach to child and adolescent health, development, and protection programming.

The 17 SDGs provide an opportunity for broadening the global mental health agenda to include entire populations[1]. Virtually all of the SDGs are related to mental health which directly contributes towards SDG targets 3.4 (promote mental health and well-being), 3.5 (substance abuse prevention and treatment), 4.2 (access to ECD), 4.7 (knowledge and skills needed to promote sustainable development), 5 (end all forms of violence against women and girls), 16.2, (end all forms of violence).

Goal #3, Good Health and Well-Being, is specifically applicable to mental health, and underscores 4 basic principles:

- Mental health is a global good and relevant to sustainable development in all countries.
- Mental health problems exist along a continuum from mild, time-limited distress to chronic, progressive, and severely disabling conditions.
- Each individual’s mental health is a product of social and environmental conditions, especially in the early years, interacting with genetic, neurodevelopmental, and psychological processes and affecting biological pathways in the brain.
- Mental health is a fundamental human right for everyone. A rights-based approach is necessary to protect the rights of people with mental disorders and those at risk of developing disorders, and to stimulate an environment that promotes mental health for all.

Promoting good mental health, however, should also be seen as a catalyst to achieving all SDGs and ensuring children can access and fulfill all their rights and full potential.

UNICEF’s commitment to achieve the 2030 Agenda requires an increased understanding of the ways in which social conditions determine health and mental health outcomes. Responses to mental health and psychosocial problems in each population need to be multi-layered and multi-sectoral. Health, education, social welfare, transport, and housing sectors all need to contribute to a ‘health in all policies’ approach, as reflected in the SDGs[2].

In line with SDG targets, UNICEF is working with partners to ensure children and adolescents experience reduced suffering and improved mental health and psychosocial wellbeing, and development by 2030. The following implementation milestones, defined in UNICEF and WHO 2020-2030 joint programme for the mental health and psychosocial well-being and development of children and adolescents, support the monitoring of this expected result:

- An increased number of countries implement multi-sectoral and multi-stakeholder strategies and actions for mental health and psychosocial wellbeing for children and adolescents.
- An increased number of countries are able to offer improved access to quality care services (across health, education and social services/child protection services) for children and adolescents with mental health conditions, and their caregivers.
- An increased number of countries are able to offer nurturing supportive environments for children and adolescents and opportunities for them to strengthen cognitive and socioemotional skills.
- An increased number of countries are able to generate and use quality data and evidence to inform multi-sectoral actions and policies for mental health and psychosocial wellbeing and development of children and adolescents.
1. **Strengthen global leadership and partnerships.** Supporting the mental health of children, adolescents and caregivers is a global challenge and a global opportunity: laying strong mental health foundations in childhood offers unique possibilities for lifelong returns and the prevention of the onset of mental health conditions. That is why mental health demands a global response. Building on existing efforts, stronger global leadership is needed to align stakeholders around clear goals and set priorities, to develop financing models that can help bridge the investment gap; to develop partnerships to share knowledge and experience – globally, regionally and nationally – on delivering services, building capacity, gathering data and evidence, and providing MHPSS in crisis and emergency settings; and crucially, to monitor and evaluate progress.

2. **Invest in supporting mental health.** Mental health is woefully underfunded: Many governments spend only a few cents per capita directly on mental health and allocations from international development assistance are meagre. Most spending goes into psychiatric services, meaning that almost nothing is spent on mental health prevention or promotion. Investment is needed across sectors, not just in health, to support a strong focus on workforce development in health, education, and social protection systems. Clear targets need to be set and new and innovative sources of funding and investment need to be identified to meet those targets. This is true not just at the national level: funding by international agencies and donors must target mental health needs, not just through spending on health systems and services but also in areas like education and social protection, where important progress is possible in promoting and protecting mental health.

3. **Break the silence, and stigma.** Misconceptions about mental health fuel stigma and discrimination and prevent children and young people from seeking support and participating fully in their families, schools, and communities. A simple message: it is not just okay to talk about mental health – it is essential. Governments and other stakeholders, including the media, should work to break down stigmas around mental health and promote a message of inclusiveness: we are all on the mental health continuum, and – so long as adequate support and opportunities are available – living with a mental health condition or psychosocial disability need not be an obstacle to living a happy and healthy life. Tackling stigma also means promoting mental health literacy – supporting children, adolescents and caregivers to better understand how to promote positive mental health, how to recognize signs of distress in themselves and in others, and how to seek help when they most need it.

4. **Ensure young people have a say.** Young people are gradually raising their voices and sharing concerns about their mental health and well-being. Continued support is needed to provide all young people, especially those with lived experience of mental health conditions, with the means for active and meaningful engagement. This can be done through, for example, investment in community youth groups, co-creation of peer-to-peer initiatives and training programmes. Ensuring that children and young people have a voice can help mental health services – as well as mental health promotion and protection efforts – to better reflect the varying and evolving needs and concerns of children, young people and caregivers throughout their lives.

5. **Support families, parents, and caregivers.** The family is fundamental in a child’s life. Parents and caregivers are the first attachment figures, playing a vital role in shaping the home environment and the child’s socioemotional development. Supporting parents and caregivers is essential to building child and adolescent well-being and to reducing and preventing violence against children. Stable relations at home can help protect children against toxic stress and promote resilience and overall well-being.

6. **Ensure schools support mental health.** Schools play a unique and vital role in the lives of children and adolescents. Violence and bullying – both by teachers and other students – as well as excessive pressure to succeed can undermine children’s mental health; on the other hand, a warm school environment and positive relationships between students and between students and teachers can bolster it.

7. **Strengthen and equip multiple systems and workforces to meet complex challenges.** The focus for mental health programming and services needs to broaden to take advantage of opportunities to promote, protect and care for mental health not just in health services, but in areas like social protection and community care. But for this to happen effectively and sustainably, child- and family-focused workforces and relevant systems need to be strengthened both to deliver services across systems and settings, and to ensure that the needs and human rights of every child are upheld.

8. **Improve data, research, and evidence.** Data on the mental health of children, adolescents and caregivers are sadly lacking, especially in LMICs, where most of the world’s adolescents live. The lack of data and evidence renders children with mental health conditions invisible and is a major obstacle to policy development and planning. Progress on mental health is also hampered by lack of research and inadequate investment in implementation research.
**MONITOR -- THE IMPORTANCE OF DISAGGREGATED DATA COLLECTION, ANALYSIS AND USE**

Effectively responding to children and young people’s mental health challenges requires accurate data and robust research. Comprehensive monitoring must be done at global, regional, national and local levels using agreed indicators for SDGs and additional indicators as needed.

Greater investment is needed in research on children and adolescents, which should be cross-culturally applicable, adaptable to local realities and capable of capturing diverse experiences and realities.

**INVEST -- SOCIAL SPENDING AND PROGRESS ON RESULTS FOR CHILDREN, ADOLESCENTS AND YOUTH**

Along with engaging partners to contribute with innovation, technical assistance, capacity building and research, UNICEF invites public partners to invest in improving mental health in several sustainable ways:

- Invest in pooled, flexible funds: flexible funds enable UNICEF to direct investments where they are needed most within the area of mental health. This funding gives experts the ability to focus on interventions that will have the best results, and therefore enable a strong return on investment. This is particularly important during the COVID-19 pandemic and as we build a next and better tomorrow: it provides flexibility to adapt and respond to adolescents’ needs in a changing environment.

- Invest in specific results: UNICEF recognizes that some partners need to designate their resources to a particular result or country or would like to complement financial investment with advocacy and technical expertise. UNICEF has a long history of developing strategic partnerships to meet partners’ priorities and their institutional goals. Partnerships could support any of the mental health priorities, from implementation of services, to data and research, advocacy, and workforce development.

- Invest in addressing the mental health challenges of the workforce: in addition to supporting UNICEF’s work, public-sector partners can consider how they can prevent and address mental health challenges in their workforce. This can help to address some of the lost productivity caused by poor mental health. Measures can include introducing family-friendly policies and other approaches to promoting mental health. Partners can also use their voice and influence to call for greater investment in child and adolescent mental health.

**ACTIVATE -- AWARENESS BUILDING AND MEANINGFUL PARTICIPATION OF CHILDREN, ADOLESCENTS AND YOUTH**

To deliver the SDGs and for overall promotion of mental health and psychosocial wellbeing, working together with caregivers & adolescents themselves needs to be a cross-cutting strategy, and across all Goal Areas, including engagement on evidence generation, policy dialogue, service delivery design, intervention (where appropriate), and advocacy.

Those most impacted – including children and adolescents, their caregivers, and their communities – broadly recognize the limitations of governments and donors to adequately support the necessary preventative, promotive and responsive environment people need for wellbeing. Service users, including children, adolescents and caregivers with lived experience, can offer a unique body of knowledge and ideas in matters that affect their lives – in private and public spheres, in the home, in alternative care settings, at school, in the workplace, in the community, in social media, and in broader governance processes – which make them singularly positioned to lead and influence in matters impacting them and their communities. Facilitating the safe and meaningful participation of children, adolescents and caregivers in planning, implementation, and monitoring of activities for child and adolescent mental health and psychosocial wellbeing and development must be a priority.

For more information, visit: https://www.unicef.org/sdgs