



71st session of the WHO Regional Committee for Europe

Joint Statement on Mental Health

by The World Federation of Occupational Therapists (WFOT), Alzheimer's Disease International (ADI), EuroHealthNet and Mental Health Europe (MHE)

Dear chair, Mr President, Regional Director, honourable ministers, distinguished delegates, dear colleagues,

We welcome and applaud the efforts by the Regional Office for Europe to mainstream and prioritise mental health in the WHO European Region, through the European Framework for Action on Mental Health and the new Mental Health Coalition, 2021-2025. The World Federation of Occupational Therapists (WFOT), Alzheimer's Disease International (ADI), EuroHealthNet and Mental Health Europe (MHE) would like to take the opportunity to collectively voice the importance of prioritising mental health by investment in mental health services and placing mental health at the heart of the post-COVID-19 recovery agenda, through collaboration.

In the European Region, mental health problems are considered the leading cause of disability. Whilst, the COVID-19 pandemic has certainly exacerbated the challenges regarding mental health, it has exponentially unmasked the failure to integrate mental health into the preparedness for, response to, and recovery from crises and emergencies. The increase in mental health problems has also indicated the need for mental health to be given equal priority to physical health since both are equally important components of overall health. Without urgent action around mental health care, the rise of psychosocial support demands will inevitably upsurge. As countries are shifting towards the recovery phase of the pandemic, the long-term socio-economic implications, and how to address them, is imperative to the success or failure of our societies.

In particular, we welcome the creation of The Pan-European Mental Health Coalition and the Mental Health Data Platform. Data has an integral role in mental health, including identification and prevention of mental health problems, more than ever. We also recognise and applaud the inclusion of action on mental health focusing on different age groups, mental health in the workplace and social determinants, to reflect the reality of social groups disproportionately affected.

We, the undersigned organisations, urge the following considerations be embedded, to guarantee mental health is effectively prioritised in the recovery process:

- Ensure the involvement of all relevant stakeholders intrinsic to the development of an implementation and monitoring framework for mental health promotion, protection and care in the region. This should be carried out through meaningful and continuous



involvements of key experts and communities, to support the design and exchange of evidence-based interventions;

- Where possible, ensure all impacted groups are represented in the Mental Health Coalition, including persons with lived experience, families and informal mental health carers;
- Ensure the Mental Health Data Platform is shaped to collect data based on existing and emerging gaps and needs. Ensure the tool is utilised to monitor health inequities to aid in dismantling the longstanding systemic problems and deficiencies in public mental health;
- Monitor health inequities and ensure that all individuals can access information and quality health services when and where they need them. More research and action-driven by disaggregated data is needed to provide consideration for intersecting factors that may place certain groups in the high-risk category;
- Ensure a psychosocial approach to mental health remains at the heart of work around mental health, to support the increased adoption of the psychosocial model in mental health promotion and care;
- Strongly embed the Economy of Wellbeing approaches, leading transformation towards a psychosocial concept of health-promoting recovery and resilience building;
- The Mental Health Coalition should provide space for dialogue on innovative mental health awareness and literacy, as well as collaboration with policymakers, funders, health and care providers and civil society organisations; and
- Mobilise funds for comprehensive and innovative mental health reforms that, include mental health promotion.

Furthermore, Alzheimer's disease and dementia accounts for approximately 10 million people in the WHO Europe region and are expected to double by 2050. As such, our collective organisations also wish to highlight that mental health, under the WHO structure, incorporates other illnesses, such as Alzheimer's disease and dementia, despite these conditions more commonly coming under the umbrella of Neurological or neurodegenerative conditions. As such, the work of the Mental Health Coalition flagship programme must include dedicated measures and resources to ensure that Alzheimer's disease, dementia and other conditions are not overlooked.

In concluding this joint statement, we emphasise the need for affected communities, including community-led organizations and civil society, to be placed at the centre of these initiatives. Alongside our members, we stand firmly ready to support the implementation of the WHO European Framework for Action on Mental Health 2021–2025 and will work tirelessly to realise the potential of the Mental Health Coalition and support the renewed attention to the mental health and well-being of affected vulnerable populations and the public at large. We thank WHO Europe and Member States for listening to our joint statement and look forward to working with you.

The World Federation of Occupational Therapists (WFOT), Alzheimer's Disease International (ADI), EuroHealthNet and Mental Health Europe (MHE), Brussels, 08 September 2021