

**Health**

 Briefing Paper

Alexander Wasserstein

Sebastian Maltz

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## **The Question of Improving Mental Healthcare Access**

### **Background**

### Persons with mental and psychosocial disabilities comprise a substantial portion of the global population, with millions affected by various mental health conditions, including anything from depression to alcohol abuse. This necessitates urgent attention to address stigma, discrimination, and economic burdens that surround mental health. Much of this issue is fundamentally linked to the Sustainable Development Goals (SDGs), and comes under the ‘support’ pillar of the *United Nations System Mental Health and Well-being Strategy* (more on which later), linked under the ‘Further Reading’ section of the paper.

### **Key Issues**

**Limited infrastructure & shortage of human resources**

In many LMICs, the majority of the population are unable to access mental healthcare, as there has not been enough emphasis on its importance. In many countries, especially poorer ones, funding is often more focused on physical health and the issues that come with it. Inpatient mental health care, whether delivered in general hospitals or standalone mental health facilities, only makes a relatively modest contribution to meeting overall needs for access to treatment. Therefore, the best approach is generally considered to be integrating mental health into primary care, and research is advancing on how to best do this. However, it is vital for the treatment of mental disorders such as schizophrenia, best treated with antipsychotic drugs, for example. Schizophrenia places a heavy demand on caregivers, and yet 90% of those with Schizophrenia in LICs do not receive treatment. This trend features among other mental disorders as well, with more than 70% of people worldwide lacking access to care.

**Stigma around mental disorders**

A significant obstacle to reducing the global mental health treatment gap and increasing mental healthcare access, stigma surrounding mental illness perpetuates a harmful cycle of silence and suffering, fostering successive cycles of discrimination. This stigma, leading to social exclusion, contributes to poorer recovery outcomes and diminished quality of life for individuals with mental disorders. Additionally, it deters many from seeking mental health services in the early stages of their conditions, resulting in delays that worsen prognosis and reinforce the misconception that mental illnesses are incurable. After all, access can to mental healthcare can and should be vastly improved but the effect of this is diminished if people are unwilling to use the services. The widespread stigma within populations may also diminish the standing of mental health professions, discouraging young individuals from pursuing these specialties and exacerbating the shortage of human resources.

**Identification of those in need**

Even in high income countries, less than a quarter of children with mental disorders are identified. Improvements on identification could come with a reduction in stigma, but also with improvements in devices such as screening questionnaires and currently existing structured interviews such as the DAWBA (development and wellbeing assessment).

**Legal Frameworks**

The *United Nations System Mental Health and Well-being Strategy* should certainly guide your resolution, as it lays out the fundamental methods that the UN are utilising to help provide more equitable access to mental health care. It lays out its three key pillars with actions under each – you should mostly focus on the support pillar here, as that is where most of the content on providing action is, but other useful content, such as reducing stigma, can be found in the other two pillars. It also contains an implementation guide and could definitely provide inspiration for your clauses. It is linked under the ‘Further Reading’ section.

Additionally, the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD) underscores the importance of upholding the rights and dignity of persons with disabilities, including those with mental health conditions. However, you need to make sure your resolution complies with the document – in particular, articles 5, 12, 13, 14, 15, 16, 17 and 25. This should not, however, limit you too much – instead, it should encourage most of the action you wish to take!

We won’t have covered every point here, so find below some useful further reading:

1. [un\_system\_mental\_health\_and\_well\_being\_strategy\_for\_2024.pdf](https://www.un.org/sites/un2.un.org/files/un_system_mental_health_and_well_being_strategy_for_2024.pdf)
2. [Challenges and Opportunities in Global Mental Health: a Research-to-Practice Perspective - PMC (nih.gov)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5553319/)
3. [IMPROVING ACCESS TO CARE FOR CHILDREN WITH MENTAL DISORDERS: A GLOBAL PERSPECTIVE - PMC (nih.gov)](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3672840/)
4. <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwi9tpy2rseEAxXK7LsIHep1AMsQFnoECA8QAw&url=https%3A%2F%2Fwww.un.org%2Fdisabilities%2Fdocuments%2Freports%2Fohchr%2Fa_hrc_34_32_mental_health_and_human_rights_2017.docx%23%3A~%3Atext%3DIn%2520all%2520cases%252C%2520laws%2520and%2Cimpairment%252C%2520irrespective%2520of%2520any%2520purported&usg=AOvVaw30fZSO-EFuzkITKGEOQxB6&opi=89978449>

General tips for resolution writing can be found on the briefing paper for *The Question of Sanitation in Sub-Saharan Africa* and on habsmun.com. Good luck!