WHO Mental Health Forum 2021

REPORT

TIME TO ACT

Transforming mental health systems, doing more and better
CONTENTS

1. Introduction
2. WHO Mental Health Forum
   2.1 Day 1
      ■ Welcoming remarks
      ■ WHO Director-General’s statement at the WHO Mental Health Forum
      ■ 2.1.1 Plenary Session I
      ■ 2.1.2 Parallel Sessions

Universal health coverage - mental health for all -
- Session 1.1 Suicide prevention: Decriminalization of suicide and engaging governments and communities on suicide prevention strategies.
- Session 1.2 Collaborative care: An integrated, person-centred approach to moving towards Universal Health Coverage.

Mental health transformation - leaving no one behind -
- Session 2.2 Developmental disabilities: Strengthening policies and services for children with developmental disabilities.

Innovations in mental health - evidence for change -
- Session 3.1 Digital and multimedia interventions: Where are we, where are the challenges and what is coming?
- Session 3.2 mhGAP e-learning course: Enhancing access to evidence-based care for mental, neurological and substance use disorders.

2.1.3 Plenary Session II: World Mental Health Day
2.2 Day 2

- 2.2.1 Plenary Session III

- 2.2.2 Parallel Sessions

**Universal health coverage - mental health for all**

- **Session 1.3** WHO Special Initiative for Mental Health: Exploring "the missing link" of secondary care in mental health care systems.

- **Session 1.4** Brain Health and Neurology: Advancing actions on epilepsy and other neurological disorders in support of universal health coverage.

**Mental health transformation - leaving no one behind**

- **Session 2.3** Interagency rapid deployment mechanism for mental health and psychosocial support in humanitarian settings: The how, what & what is next?

- **Session 2.4** MHPSS Minimum Service Package: Developing an inter-sectoral package to strengthen the MHPSS response in emergencies.

**Innovations in mental health - evidence for change**

- **Session 3.3** Adolescents’ Mental and Brain Health: Evidence-informed strategies to promote and protect adolescent mental and brain health.

- **Session 3.4** E-QualityRights: Responding to capacity building demands to create mental health systems with a rights-based approach.

- 2.2.3 Plenary Session IV

3. Closing remarks
The Mental Health Forum provides an opportunity to bring together stakeholders working on mental health-related issues to exchange ideas, collaborate, and learn from each other.

The theme for this year’s Mental Health Forum —Time to Act: transforming mental health systems, doing more and better— reflects the urgent need to act in order to make mental health a core area of renewed investment during and beyond the pandemic.

This year’s World Health Assembly urged Member States to develop and strengthen comprehensive mental health services and psychosocial support as part of universal health coverage, with a particular focus on improving understanding of mental health conditions and the needs of vulnerable populations and scaling-up the use of innovative technologies.
2. WHO Mental Health Forum

2.1 Day 1

Welcoming remarks

Dévora Kestel, as Director of the department of Mental Health and Substance Use department at WHO, officially opened the 2021 WHO Mental Health Forum, welcomed participants and then gave the floor to WHO Director-General, Dr Tedros Adhanom Ghebreyesus.

Dr Ren Minghui, WHO’s Assistant Director-General for Universal Health Coverage / Communicable and Non-communicable Diseases, also welcomed the participants and highlighted how we need to use the current momentum of interest in mental health to catalyze mental health reforms, and how we need to place mental health at the heart of the pandemic recovery by promoting a whole of society approach, mobilizing financial resources, strengthening services and including Mental Health as part of Universal Health Coverage.

Opening remarks were also made by WHO mental health ambassador, Cynthia Germanotta, who invited participants to continue the battle to make mental health care accessible for all.
WHO Director-General's statement at the WHO Mental Health Forum

11 October 2021

Distinguished guests, dear colleagues and friends,

It is my pleasure to welcome you to the 2021 WHO Mental Health Forum.

Thank you all for joining us, and I would especially like to thank our Global Goodwill Ambassador for Mental Health, Cynthia Germanotta, the president and co-founder of the Born This Way Foundation, for her continued support and advocacy.

We convene this forum every year to create better understanding, opportunities and systems to respond to the massive unmet need for mental health support and services around the world.

The COVID-19 pandemic has made an already challenging situation worse, exacerbating both mental health needs and the gaps in mental health services.

Of course, even before the pandemic, access to quality, affordable mental health care was far too limited, particularly in humanitarian emergencies and conflict settings.

Now, major disruptions to essential health services around the world have made accessing mental health care even more difficult.

In response, the World Health Assembly has urged Member States to develop and strengthen comprehensive mental health services and psychosocial support as part of universal health coverage.

In particular, the mandate is to focus on improving understanding and acceptance of mental health conditions, issues for vulnerable populations, and the use of innovative technologies to increase access to care.

The WHA also endorsed an updated set of indicators and implementation options to guide action at the national level, as set out in the 2030 WHO Mental Health Action Plan.

Throughout the pandemic, WHO has worked to respond to the multiple needs and demands faced by countries in addressing the mental health consequences of COVID-19.

"We must try to reframe and advance the global mental health agenda through the integration of mental health into pandemic response and recovery plans".

Dr. Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization (WHO)
WHO is honoured to co-chair the UN Inter-Agency Standing Committee’s Working Group on mental health and psychosocial support.

The Group has developed and disseminated a series of technical and informational materials that are being used across the globe to tackle the mental health impacts of the COVID-19 pandemic.

I would like to express my sincere appreciation for the outstanding work of this multi-agency and multi-partner group.

With the support and collaboration of the Dutch government and other partners, WHO launched for the first time an interagency rapid deployment mechanism for mental health and psychosocial support coordinators. To date, experts have been deployed to provide rapid assistance in 32 countries.

I would also like to mention the WHO Special Initiative for Mental Health, which supports countries in advancing mental health policies, advocacy and human rights, as well as scaling up quality interventions and services as part of universal health coverage. The project is currently at work in Bangladesh, Ghana, Jordan, Nepal, Paraguay, Philippines, Ukraine and Zimbabwe.

We offer our thanks to Norway, Switzerland and the United States for their dedicated support.

Let me leave you with three areas of focus:

First, let’s recognize the COVID-19 pandemic as not only a challenge, but an opportunity. We must try to reframe and advance the global mental health agenda through the integration of mental health into pandemic response and recovery plans.

Second, let’s learn the lessons of this pandemic, and work to build resilient health systems and services that meet the mental as well as physical health needs of the population.

Third, as we plan for the long-term, let’s join together to support countries in their efforts to integrate mental health support into schools, community and primary health care, to address the determinants of mental health, and to make sure than nobody is left behind.

Because ultimately, there is no health without mental health.

I thank you.
The first of the plenary sessions reflected on recent developments and the current situation regarding global mental health.

3rd Global Ministerial Health Summit

A representative from France’s Ministry of Health, Simon Vasseur-Bacle, provided an overview of the third Global Ministerial Mental Health Summit held on 5–6th October 2021 in Paris, France, at which more than 2000 delegates from over 100 countries participated to discuss topics in relation to the theme of "Mind our rights, now!".

Detailed information about the summit’s objectives, structure and outcomes is available here.

World Mental Health Atlas 2020

In addition, Tarun Dua, Head of the Brain Health Unit in WHO’s Department of Mental Health and Substance Use, guided the audience through the key findings of the Mental Health Atlas 2020, published just a week prior to the Forum.

Please click on the image above to watch the full Plenary session I.

Media:

LINK: Global Mental Health Summit website

LINK: Mental Health ATLAS website
Universal health coverage
- mental health for all -

2.1.2 Parallel sessions

Session 1.1
Title: Suicide prevention - Decriminalization of suicide and engaging governments and communities on suicide prevention strategies

Main Objectives:
More than 700 000 people lose their life to suicide every year. The world is not on track to reach the global target of reducing the suicide mortality rate by one third by 2030.

In response, WHO has developed the LIVE LIFE guide to support countries in implementing key effective evidence-based interventions to prevent suicide.

Main Messages:
• The global suicide rate has decreased, but more needs to be done to achieve UN SDG and WHO Mental Health Action Plan targets.
• Collaboration from different sectors, governments, and communities is essential to decreasing the rate of suicide.
• Help is available!

Main Questions:
• Why decriminalization?
• What are the key, effective evidence-based suicide prevention strategies?
• Why is multi-sectoral collaboration essential to lowering rates of suicide?

Main Outcomes:
• Increase awareness about suicide prevention.
• Inform and share information and experiences on suicide prevention.
• Encourage stakeholders to work together to prevent suicide.

Moderator:
James Sale, United for Global Mental Health

Speakers:
Lakshmi Vijayakumar, SNEHA, India; Sabah Abdulrahman, Azhee, Iraq; Carla na Nagara, Suicide Prevention Office, MoH New Zealand; Philip Grady, MoH New Zealand.

Media:
Please click on the image above to watch the full session.

Downloads:
LIVE LIFE: an implementation guide for suicide prevention in countries

LINK: WHO Suicide Prevention website
Session 1.2
Title: Collaborative Care - An integrated, person-centered approach to moving towards UHC

Main Objectives:
The aim of the session was to quickly orient the audience as to what collaborative care is - and to gain their inputs on its application in Low and Middle Income Countries (LMIC).

Main Messages:
• Important to develop a well-defined model covering basic ingredients to build from.
• Consider taking a multiple disorder approach, covering common conditions.
• Showcase a field-test version of a new WHO collaborative care manual for physical disease programmes that will be available for testing in 2022 in LMIC.

Main Questions:
• How do you see the application of collaborative care (CC) in LMICs?

• Would you prefer the focus of CC implementation efforts to be on depression or on multiple conditions?
• What are the pros and cons of applying the model within programmes targeting co-morbid physical disease management vs. within PHC in general?

Main Outcomes:
• Increase awareness of the WHO’s work on Collaborative Care.
• Propose solutions and perspectives on the application of Collaborative Care in LMIC.
• Suggestions to make focus within PHC settings.

Moderator:
Dan Chisholm, WHO

Speakers:
Mark Van Ommeren, WHO.
Bibhav Acharya, UCSF Dept Psychiatry and Behavioral Sciences, Nepal.

Media:
Please click on the image above to watch the full session.

WHO Mental Health Forum Report 2021
Mental health transformation
- leaving no one behind -

Session 2.1
Title: COVID-19 pandemic response & recovery - Redesigning mental health systems in the context of COVID-19

Main Objectives:
To share the learned lessons of adapting and scaling up pre-existing mental health services during the COVID-19 pandemic.

Main Messages:
- Innovations used to increase service access during the pandemic, (e.g., tele-medicine, telephone/helplines, remote support, digital platforms etc.), will be critical to scaling up services.
- Safeguarding staff, virtual trainings, and how to avert delays in supplies of protective equipment is critical to this scale up.

Main Outcomes:
- The COVID-19 pandemic has put a spotlight on mental health and well-being, and provided us with an opportunity to strengthen public mental health system in the long term.
Mental health transformation - leaving no one behind -

Session 2.2
Title: Developmental disabilities - Strengthening policies and services for children with developmental disabilities

Main Objectives:
The session aimed to present and discuss an actionable framework for improving health and wellbeing in children and young people with developmental disabilities.

Main Messages:
- Clear and pragmatic definition of children with developmental disabilities and delays is required.
- Holistic needs of children and families should be catered through multi-sectoral coordination and strengthening systems that incorporate standards and instil accountability using monitoring and evaluation frameworks.
- We must include experts with lived experience in advocacy, planning, policy, programming and interventions - understand how to operationalise.
- Vital need for caregivers to have more accessible information and be empowered to redress stigma, discrimination and barriers to social participation.

Main Questions:
- What are some of the key points in the framework of action for children with developmental disabilities?
- What may be some of the key accelerators for improving health and wellbeing for children with developmental disabilities?
- What are good practices for improving inclusion and equal access to quality care?

Main Outcomes:
- Technical inputs into proposed framework for action for improving health and wellbeing of children and young people with developmental disabilities.

Moderators:
Grace Sweetman, Youth Advocate;
Kathy Leadbitter, University of Manchester.

Speakers:
Muhannad Alazzeh, High Council on Disabilities, Jordan;
Paola Jelonche, Fundación Visibilia, Argentina;
Joaquin Fuentes, ESCAP;
Yetunde C. Adeniyi, Ibadan University, Nigeria.

Downloads:
Virtual map representing framework for action

WHO Mental Health Forum Report 2021
Innovations in mental health - evidence for change -

Session 3.1
Title: Digital and multimedia interventions
- Where are we, where are the challenges and what is coming?

Main Objectives:
The session covered two WHO digital and multi-media self-help interventions: Step-by-Step (SbS) and Self-Help Plus (SH+). This included introductory presentations and videos of implementers. Other WHO interventions were also briefly covered.

Main Messages:
- WHO is developing and testing mental health digital and multimedia interventions for use in Low and Middle Income Countries.

Main Questions:
- What is the difference between the different WHO psychological interventions?
- When using lower intensity interventions, how do facilitators support participants with many problems?
- How can access problems to digital interventions (e.g. wi-fi/data) be addressed?

Main Outcomes:
- Increased understanding about WHO digital and multimedia interventions in general.
- Increased understanding about SH+ and its immediate availability.
- Increased understanding about Step-by-Step, potential uses and its forthcoming release.

Please click on the image above to watch the full session.

Media:

LINK: Self-help Plus (SH+)

LINK: Doing What Matters in Times of Stress

Moderator:
Peter Ventevogel, UNHCR

Speakers:
Edith van’t Hof, WHO; Teresa Au, WHO; Jinane Abi Ramia; Sally Khoury, Khoury National Mental Health Programme-Lebanon; Ceren Acaturk, Koç University, Turkey; Marx Lekuz and Safina Yusef, Healthright International, Uganda; Giulia Turrini, University of Verona; Andrian Liem, Jeffrey Cheah School of Medicine and Health Sciences, Malaysia.
Innovations in mental health - evidence for change -

Session 3.2
Title: mhGAP e-learning course - Enhancing access to evidence-based care for mental, neurological and substance use disorders

Main Objectives:
To introduce the mhGAP e-learning programme, and present experiences of mhGAP training, implementation, and scale-up.

Main Messages:
- Flexible, modular, competency-based self-directed digital learning that can be used to scale up current training using blended approaches.
- Budget availability, committed policymakers, trained trainers & supervisors are key. Challenges: Lack of internet & learner digital skills/motivation.
- Locally appropriate modalities are vital. Put learner needs at the centre and gather evidence on effectiveness/impact.

Main Questions:
- How can WHO Academy mhGAP e-learning programme be used to scale up and roll out mhGAP training in different contexts?
- What are the barriers and opportunities in implementation of the mhGAP e-learning programme?
- What innovations do we need to take mhGAP training from self-directed e-learning to blended learning?

Main Outcomes:
- Awareness of the mhGAP e-learning programme and assessment of the benefits and challenges of implementing it in their context.
- New understanding of how to use the mhGAP e-learning programme to scale up training provision and for innovative uses such as supervision or refresher training.
- Increase engagement in the rollout and implementation of the mhGAP e-learning programme.

Moderator:
Renato Oliveira, PAHO

Speakers:
Tunmise Olayiwola, Kolawole TD, Nigeria; Nangendra Prasad Luitel, Transcultural Psychosocial Organization Nepal; Peter Hughes, Royal College of Psychiatrists, UK; Carmen Martinez, PAHO

LINK: WHO Academy website

WHO Mental Health Forum Report 2021
During Plenary session II, Alison Brunier from WHO spoke about the campaign for the World Mental Health Day 2021, released on October 10th.

Presentation

The COVID-19 pandemic has had a major impact on people’s mental health. Some groups, including health and other frontline workers, students, people living alone, and those with pre-existing mental health conditions, have been particularly affected. And services for mental, neurological and substance use disorders have been significantly disrupted.

Yet there is cause for optimism. During the World Health Assembly in May 2021, governments from around the world recognized the need to scale up quality mental health services at all levels. And some countries have found new ways of providing mental health care to their populations.

During this year’s World Mental Health Day campaign, we showcased the efforts made in some of these countries and encouraged people to highlight positive stories as part of their own activities, as an inspiration to others.

We provided new materials, in easy-to-read formats, of how to take care of our own mental health and provide support to others too. We hope you had found them useful.

Campaign slogan

Mental health care for all: let’s make it a reality

Hashtag

#WorldMentalHealthDay
Following a welcome back to all participants and a brief recap of Day 1 of the Forum, Dévora Kestel opened up Day 2’s proceedings by inviting two guest speakers to share their thoughts, hopes and experience on the topic of “What does COVID-19 recovery mean & look like to me?”.

Chantelle Booysen, a mental health youth advocate from South Africa, spoke about the “continued lack of empathy towards the most vulnerable and a lack of political will to improve this. Civil society is doing the heavy lifting, scrambling for basic support services with little to no resources while carrying the responsibility to support communities.” Chantelle’s hopes and vision for COVID-19 recovery and the future of mental health include greater investment in mental health that goes beyond the medical model, stronger accountability mechanisms to nurture trust with communities and updating of policies and strategies to respond to the new needs arising from the pandemic.

The second invited speaker was Hauwa Ojeifo from Nigeria, who spoke powerfully about the humiliating experiences that she and others had when using local mental health services, and her consequent decision to establish She Writes Woman, to empower people with lived experience to tell their stories, co-create their solutions, and advocate for their rights.

The remainder of this plenary session was spent providing Forum participants with an overview of some of WHO’s most prominent upcoming technical products in the area of mental health, brain health and substance use in 2022. These include (but are not limited to) the following:

- **Head Quarters, Mental Health Unit**: A World Mental Health Report, which will reflect on the current state of the world’s mental health and set out a range of arguments, approaches, and strategies for transforming mental health services at country level. Also, new operational guidance on reorganizing services away from institutional care towards a network of community-based services.

Moderator:
Dévora Kestel, Director, Mental Health and Substance Use, WHO

Topics:

What does COVID-19 recovery mean & look like to me?:
Interventions by Chantelle Booysen, Independent Consultant & Advocate; Hauwa Ojeifo, She Writes Woman, Nigeria.

Upcoming: **World Mental Health Report**:
Mark van Ommeren, WHO.

Upcoming: **WHO guidance, tools and technical products**:
WHO headquarters & regional mental health advisors.

Please click on the image above to watch the Day 2 Plenary session III (part 1)
2. WHO Mental Health Forum

2.2.1 Plenary Session III (cont.)

- **HQ, Policy, Law and Human Rights Unit:** New operational guidance on Mental health related legislation and (in 2023) on National mental health policies and action plans.

- **HQ, Brain Health Unit:** a new intersectoral global action plan on neurological disorders, together with accompanying technical package for implementation; also new programmatic guidance related to maternal health and to developmental delays and disabilities.

- **HQ, Alcohol, Drugs and Addictive Behaviours Unit:** A new global action plan – and associated implementation toolkit – to address the harmful use of alcohol; also a WHO report on progress with attainment of SDG health target 3.5 relating to substance use.

- **African Regional Office:** Mental Health and Psychosocial Support Regional Strategic Plan; Guidelines to support countries to regulate alcohol and drug use disorders.

- **European Regional Office:** Implementation of the new Framework for Action on Mental Health in the WHO European Region 2021–2025, including through a Pan-European Mental Health Coalition; development of a mental health literacy toolkit.

- **Eastern Mediterranean Regional Office:** Guidance and on-line training course on Integration of mental health in PHC guidance plus School Mental health; Guidance on rational use of psychotropic medicines to support implementation of mhGAP.

- **Regional office for the Americas (PAHO):** Development of a new Regional Strategy on Mental Health; new online training materials via Virtual Campus on self-help and alcohol policies.

- **Western Pacific Regional Office:** Regional Framework For the Future of Mental Health in the Western Pacific Region.

---

2.2.1 Plenary Session III (cont.)

- **Media:**

  Please click on the image above to watch the Day 2 Plenary session III (part 2)
Session 1.3
Title: WHO Special Initiative for Mental Health - Exploring secondary care in mental health care systems

Main Objectives:
WHO’s Special Initiative for Mental Health aims to reach 100 million more people by transforming mental health systems, including secondary care. This session specifically explored the role and function of secondary care and discussed how it can be prioritised.

Main Messages:
• Describe the foundations of the Special Initiative for Mental Health, and challenges to the initiative.
• Secondary care is a critical part of mental health systems.
• Secondary care needs greater attention in our mental health work, to better connect and support community and primary level mental health care activities.

Main Questions:
• Beyond lack of resources, why is secondary care such a 'black hole' in mental health care work?
• What could governments, implementers, service users and academia be doing in SIMH countries to ensure secondary care is a higher priority?
• What can different mental health stakeholders be doing in WHO’s Special Initiative countries to ensure secondary care is more highly prioritised?

Main Outcomes:
• New appreciation of the critical need for secondary care in mental health systems.
• Reinforcing the resolve of governments, implementers, PWLE and academia to increase their advocacy and prioritisation for secondary care systems and services.

Moderator:
Alison Schafer, WHO

Speakers:
Kedar Marhatta, WHO Nepal; Frances Prescilla Cuevas, MoH, Philippines; Ana Maria Tijerino, WHO;

Media:
Please click on the image above to watch the full session.

LINK: WHO Special Initiative for Mental Health website
VIDEO: About the WHO Special Initiative for Mental Health
VIDEO: Presentation of the WHO Special Initiative for Mental Health
PDF: Sessions Summary Illustrations
Universal health coverage
- mental health for all -

Session 1.4
Title: Brain Health and Neurology - Advancing actions on epilepsy and other neurological disorders in support of universal health coverage

Main Objectives:
Establishing brain health and neurology as an opportunity for public health – brief introduction to WHO’s new Brain Health Unit, its areas of work and vision for the future.

Main Messages:
• Optimizing brain development and brain health requires public health approaches across the life course.
• Mental and brain health have multiple shared determinants, which can be addressed together.
• Global mental health advocates have successfully demonstrated that mental health is fundamentally important for all, and the field of brain health and neurology can learn a lot from this process! Involving people with lived experience at every step is key.

Main Questions:
• What is the audience’s take on brain health?
• What is the distinction/commonality between mental and brain health?
• What lessons can we learn from the global mental health movement over the last decades and how can we apply that to brain health?

Main Outcomes:
• Increased awareness of the new WHO Brain Health Unit, its main areas of work, and key outputs.
• Understanding of the difference between the new WHO action plan and proposed position paper on brain health.
• This discussion provided a first step to the wider consultation on a brain health position paper.

Moderator:
Tarun Dua, WHO

Speakers:
Tarun Dua, WHO; Kavitha Kohppa, WHO; Katrin Seeher, WHO; Nicoline Schiess, WHO.

Media:
Please click on the image above to watch the full session.
Mental health transformation - leaving no one behind -

Session 2.3
Title: Interagency rapid deployment mechanism for mental health and psychosocial support in humanitarian settings - the how, what & what is next?

Main Objectives:
To share the learned lessons of developing and running the first-ever interagency rapid deployment mechanism of MHPSS in emergencies, discuss with participants the way forward for scaling up the mechanism further and to adapt the learned lessons in other areas of work in mental health.

Main Questions:
- What is the relevance of this rapid deployment mechanism?
- How can rapid deployments have a lasting impact in a humanitarian context?
- How can the pool of experts be diversified?

Main Outcomes:
- Orient participants on the MHPSS rapid deployment mechanism and how to make a request to fill a human resource gap in MHPSS coordination in humanitarian emergencies.
- Encourage interested experts at the forum to join the roster.
- Facilitate raising awareness of funding agencies to contribute to further scale up the mechanism to include more geographical locations and areas of expertise.

Moderators:
Fahmy Hanna, WHO

Speakers:
Silvi Hurkmans, Netherlands Enterprise Agency (RVO), The Netherlands; Carmen Valle-Trabadelo, IFRC PS Center; Jennie van de Weerd, MoFA, The Netherlands; Murat Can Birand Apaydin, DSS MHPSS Roster Member, Turkey.

LINK: DSS MHPSS newsletter
LINK: IDSS webpage MHPSS
Session 2.4
Title: MHPSS Minimum Service Package:
Developing an inter-sectoral package to strengthen the MHPSS response in emergencies

Main Objectives:
This session on the Mental Health and Psychosocial Support Minimum Service Package (MSP) covered:

- What the MSP is and how it was developed.
- The different components of the MSP and how it is structured.
- How to access the MHPSS MSP and provide feedback.

Main Messages:
- The MSP is a practical tool designed to support programme planners, implementers, coordinators and donors in a range of sectors (health, protection, education).
- The MSP is currently being piloted, including at five field demonstration sites.
- Feedback on the MSP can be given by registering at mh-pssmsp.org and/or emailing the team directly (weissbecker@who.int and cnic@unicef.org).

Main Questions:
- How can the MSP be useful in your work?
- What are barriers or facilitators to using the MSP in your work or in your country?
- What is your advice to us as we finalize the MSP over the coming year?

Main Outcomes:
- Session participants are oriented about the MSP project and MSP content.
- Session participants reflect on how the MSP is relevant to their work.
- Session participants know how and where to access to MSP.
Innovations in mental health - evidence for change -

Session 3.3
Title: Adolescents’ Mental and Brain Health - Evidence-informed strategies to promote and protect adolescent mental and brain health

Main Objectives:
The session aimed to share experiences and perspectives on services for mental health promotion, prevention and care for children and young people.

Main Messages:
- Engage youth and make efforts to understand their experiences and what impact their mental health, their demand for and access to supports in local realities.
- Explore tailored strategies to reach young people with entry points across sectors and with recognition of youth exposed to marginalization and adversities.
- Enhance workforce capacity to implement transdiagnostic approaches and collaborative care.

Main Questions:
- What are useful lessons learned that can inform organization of promotion and care services for young people across countries?
- What defines "quality" care services (from the perspective of youth and other parameters)?

Main Outcomes:
- Improved understanding of experiences with organizing and scaling up mental health promotion and care for young people.
- Participants are aware about HAT tools.
- The UNICEF WHO Joint Programme and opportunities to collaborate with WHO on CAMH service strengthening in countries.

Moderator:
Renato Oliveira, PAHO
Speakers:
Lawrence Wissow, Washington University, US; Gunjan Dhonju, Kanti Children’s Hospital, Nepal; German Casas, Universidad de los Andes, Colombia

Please click on the image above to watch the full session.

Media:

World Mental Health Forum Report 2021
Session 3.4
Title: e-QualityRights - Responding to capacity building demands to create mental health systems with a rights-based approach

Main Objectives:
The session was an opportunity to provide an update on the latest developments of the QualityRights e-training including key features, current reach, impact on attitude change and country achievements and experiences of implementation.

Main Messages:
- Preliminary analyses of e-training demonstrate significant impact (~30%) improvement in overall attitudes towards rights-based approach aligned with CRPD.
- Innovative strategies at national level offer important lessons on effective rollout and uptake of QualityRights e-training among wide-ranging stakeholders, including social media platforms, boosting awareness and enrolment.
- WHO e-training certificates as an incentive for enrolment.
- First quarter of 2022, aiming at a global audience: global launch and rollout of QualityRights e-training.

Main Questions:
- What is the evidence to date that the WHO QualityRights e-training is having an impact in countries?
- What are key strategies being taken in countries to ensure long-term uptake & sustainability of the e-training?
- How is WHO planning to increase awareness & disseminate the e-training to a global audience?

Main Outcomes:
- Increased understanding about the potential for the QR e-training to have a real and beneficial impact in countries.
- Commitment to supporting WHO efforts in launching the e-training on a global scale in 2022.
- Support for the further dissemination of the e-training deep within countries and among wide-ranging stakeholders.

VIDEO: Short descriptive video of the QR e-training
LINK: Information about the QualityRights e-training
LINK: Country experiences of nationwide QualityRights rollout
LINK: QualityRights training & guidance materials
LINK: Guidance and technical packages on community mental health services
LINK: Promoting rights-based policy & law for mental health
LINK: Transforming services and promoting human rights in mental health and related areas
LINK: WHO QualityRights
During the final plenary session, the next Global Mental Health Summit was announced. Mrs Nerina Dirindin, representative of the Ministry of Health Italy, presented plans for next year’s Global Mental Health Summit, which will be hosted by Italy and will focus primarily on:

1. Integrating mental health into wider healthcare systems;
2. Promoting universal access to health and social services;
3. Ensuring nations are providing the necessary financial support to better mental health and wellbeing services; and
4. Identifying areas of concerns that may affect global mental health, such as the COVID-19 pandemic.

In addition, the summit will follow-up with stakeholders on the commitments made during the 2021 Summit.

Mrs Dirindin underlined how critical is the collaboration between nation states, stakeholders, and persons with lived experience to furthering the global mental health agenda.

Through the promotion of shared values and common interests, as well as through the sharing of experiences, the global mental health community will be able to identify the best route to realize these goals.
Over the two days of the Forum, voices were heard from governments, from people with lived experience, from civil society partners, from academia, and from leading representatives within the UN system. During the Forum there was a clear acknowledgment that progress in mental health is often slow, sporadic and uneven within and across countries. At the same time, clear messages of hope and indications of the way forward for a better future were presented and heard. Only by unifying our efforts will we see meaningful and sustainable change in the lives of people with mental health conditions, psychosocial, intellectual and cognitive disabilities.

The Forum also provided WHO with an opportunity to share new resources and tools that are ready and available to support mental health reform efforts in countries.

Awareness of the importance of good mental health is growing. But we are a long way from taking the action required to meet the need for prevention and support services. More investments are needed, in every level, transforming mental health systems is an urgent task, and we cannot afford not to take any action.

Dévora Kestel, Director of the Department of Mental Health and Substance Use, closed the Forum by thanking every one for their continued engagement, commitment and support to WHO’s work and vision. She also thanked her colleagues in the Department of Mental Health and Substance Use for their hard work, including those involved in the organization of the Forum.
In case of questions, please contact
mhforum@who.int