

World Health Assembly adopts Comprehensive Mental Health Action Plan 2013–2020



On May 27, 2013, the World Health Assembly adopted the Comprehensive Mental Health Action Plan 2013–2020¹ that has great potential to change the direction of mental health in countries around the world in the next 8 years. This action plan and the accompanying resolution—a first in the history of WHO—represent a formal recognition of the importance of mental health for WHO's 194 member states. It is also a commitment by all member states to take specified actions to improve mental health and to contribute to the attainment of a set of agreed global targets.

The action plan focuses on four key objectives: “to strengthen effective leadership and governance for mental health; provide comprehensive, integrated and responsive mental health and social care services in community-based settings; implement strategies for promotion and prevention in mental health, and; strengthen information systems, evidence and research for mental health”.¹ Building upon earlier work,^{2–5} and based upon a consultation process that involved 135 member states, 60 WHO collaborating centres and academic centres, 76 non-governmental organisations (NGOs), and 17 other organisations and individual experts in the past 12 months, consensus was reached on the key actions to be taken with respect to each of the four objectives by member states, WHO's Secretariat, and partners. Furthermore, for the first time, specific and measurable global targets and indicators have been agreed upon as a way to monitor implementation, progress, and impact. The targets include a 20% increase in service coverage for severe mental disorders and a 10% reduction of the suicide rate in countries by 2020.

The Comprehensive Mental Health Action Plan 2013–2020 is testimony to some of the shifts in thinking about mental health that have occurred over the past few years. Issues that used to be at the periphery are now seen as central to providing an effective response to mental health problems. The plan highlights the importance of protecting and promoting human rights and includes a central role for the provision of community-based care and support. To ensure a comprehensive response to mental health, the plan introduces the notion of recovery, and moves away from

a wholly medical model to address income generation and education opportunities, housing and social services, and other social determinants of mental health. The plan also highlights important actions that need to be taken around promotion of mental health and prevention of mental disorders, and to strengthen and empower civil society, especially organisations of people with mental disorders and psychosocial disability, so that they can take an active role in policy debates and decision-making processes.

Ministries of health will need to take a leadership role and WHO will work with them and with international and national partners, including civil society, to implement the plan. Much of the action outlined in the plan will take place within countries, especially in the low-income and middle-income groups where needs are high and resources inadequate.⁶ WHO will provide technical assistance to countries in line with their particular needs, and will draw upon the technical expertise of WHO collaborating centres, NGOs, academia, and other experts. A set of core indicators is being developed so that relevant data can be collected from all countries to track national, regional, and global progress, to be reported back to the World Health Assembly in 2015, 2018, and 2021.

At the root of the action plan is a vision of “a world in which mental health is valued, promoted and protected, mental disorders are prevented and persons affected by these disorders are able to exercise the full range of human rights and to access high quality, culturally-appropriate health and social care in a timely way to promote recovery, all in order to attain the highest possible level of health and participate fully in society and at work free from stigmatisation and discrimination”.¹

Implementation of the action plan will face challenges; in particular, years or decades of inadequate investment into human and financial resources for mental health care need to be quickly reversed. Health policy planners and health professionals can help to enable this turnaround by ensuring that promoting, protecting, and restoring good mental health represents an integral part of their responsibilities. Local leaderships will need to develop to support this process. With concerted action



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by all stakeholders, WHO hopes to overcome these challenges and assist countries to deliver health care and other services that better conform to WHO's definition of health,⁷ which explicitly recognises the critical place of mental and social wellbeing.

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