**INTRODUCTION**

The Permanent Mission of Mexico to the United Nations will host an Arria Formula meeting to explore ways to better deliver mental health and psychosocial support (MHPSS) services in conflict, post-conflict, and humanitarian settings.

Prioritizing MHPSS in humanitarian strategies as a cross-sectoral issue at all levels of the United Nations system is of utmost importance in the protection and promotion of human rights. Mental health and psychosocial well-being are central elements in the paradigm of sustaining peace, construed as the guiding thread for preventing and resolving conflicts.

**OBJECTIVE**

Recognizing that the right to the enjoyment of the highest attainable standard of physical and mental health is a fundamental human right, this event aims to highlight ways in which MHPSS should be both an element of humanitarian programming and a core component of preventive and responsive strategies in the UN system and humanitarian actors in areas affected by conflict and humanitarian settings.

Moreover, the Arria Formula meeting intends to capitalize on recent momentum gained within the latest deliberations of the Security Council in various thematic agendas, such as children in armed conflict (CAAC), women, peace, and security (WPS) and youth, peace, and security (YPS). The discussion aims to stress the essential role the Council plays in ensuring timely and sufficient access to MHPSS services in situations of armed conflict, and humanitarian responses.
The event will provide an opportunity to review existing commitments, strategies of plans of action already in place, such as the Interagency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings. The discussion intends to highlight the need to implement contextually sensitive programmes capable of providing MHPSS services to help victims and survivors overcome the negative mental health consequences resulting from these stressful situations and exacerbated by the COVID-19 pandemic.

We look forward to promoting a constructive dialogue among Member States, medical professionals, mental health providers and other experts in the field to fast-track the implementation of MHPSS responses capable of overcoming emergency-induced traumas.

**BACKGROUND AND CONTEXT**

According to the World Health Organization (WHO), the burden of mental disorders among conflict-affected populations is extremely high. Moreover, one in five people who have experienced war or other conflict will have depression, anxiety, post-traumatic stress disorder, bipolar disorder or schizophrenia. Notwithstanding that distress is normal for people in these situations, the prevalence of common mental disorders is expected to more than double during a humanitarian crisis.\(^1\)

The mental health needs of those affected by emergencies remain widely unmet and neglected. For instance, the Global Humanitarian Overview 2021 identified one mental health professional for every 10,000 people globally.\(^2\) Moreover, addressing the mental and psychosocial needs of populations affected by conflict through an age-sensitive and gender-transformative approach is a steppingstone to weave more resilient social fabrics, particularly in the face of the COVID-19 pandemic. Failure to invest in MHPSS and incorporate such provisions in humanitarian programmatic responses can have devastating consequences in entire communities.

These risks are heightened in persons in situations of vulnerability, as evidenced by many women survivors of violence, including sexual and gender-based violence, and in children and youth exposed to violence, including harmful practices, forced labor, recruitment and use, and other grave violations perpetrated against children in armed conflict, that causes immediate and

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1 Mental health in emergencies (WHO) [https://www.who.int/news-room/fact-sheets/detail/mental-health-in-emergencies](https://www.who.int/news-room/fact-sheets/detail/mental-health-in-emergencies)
long-term psychological damage. The UNICEF’s “State of the World’s Children” 2021 report\(^3\), focused on mental health, highlights how specific characteristics of a child’s or adolescent’s experience with a crisis can have life-altering consequences. In addition, conflict imposes inadvertent effects, including the breakdown of social protection schemes, including health, education, and water and sanitation services, among others.

The impact of mental health on multiple sectors and groups of populations in situations of vulnerability, and the growing evidence of the direct link between conflict situations and the deterioration of mental health, is inextricably linked to the peace and security agenda. The UN Secretary-General's report on peacebuilding and sustaining peace\(^4\) states that the further integration of mental health and psychosocial support into peacebuilding is needed to increase individuals and communities' resilience and agency.

In this regard, we recognize and support ongoing efforts to develop a Mental Health Strategy for Uniformed Peacekeepers. Additionally, we must promote the Joint Interagency Call to Action on MHPSS announced in December 2020 and the Common Monitoring and Evaluation Framework for Mental Health and Psychosocial Support Programs in Emergency Settings, previously launched by the IASC.

**PROGRAMME**

**Opening Remarks**
- **H.E. Ambassador Juan Ramón de la Fuente**, Permanent Representative of Mexico to the United Nations

**Briefers**
- **Dr. Dévora Kestel**, Director, Department of Mental Health and Substance Abuse at World Health Organization
- **Dr. Micaela Serafini**, Health Director of the International Committee of the Red Cross
- **Prof. Norman Sartorius**, President of the Association for the Improvement of Mental Health Programmes
- **Ms. Pastora Mira García**, Human rights defender and beneficiary of psychosocial support from the UNDP’s transitional justice project in Colombia

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\(^3\) [https://www.unicef.org/media/108161/file/SOWC-2021-full-report-English.pdf](https://www.unicef.org/media/108161/file/SOWC-2021-full-report-English.pdf)

\(^4\) Report of the Secretary General on Peacebuilding and sustaining peace ([A/74/976](https://www.un.org/asset/a/74/976))
GUIDING QUESTIONS

The discussion will address the following questions:

1. How can the UN system integrate age-sensitive and gender-transformative MHPSS services in interagency coordination response mechanisms?

2. What are some of the best practices regarding the implementation of programmes that ensure access to MHPSS services in humanitarian response plans? What may be the consequences of not addressing MHPSS issues?

3. How can Member States support efforts to coordinate existing activities and programmes to ensure that the provision of MHPSS is accessible to all, in conflict, post-conflict and humanitarian settings?

4. How can the Security Council ensure that access to MHPSS services becomes an essential component in all its mandated protection tasks?

RSVP AND MORE INFORMATION

The meeting will be chaired by the Permanent Representative of Mexico to the United Nations, H.E. Juan Ramón de la Fuente. It will be streamed live via UN Web TV. All Member States, Permanent Observers, UN entities and civil society organizations are invited to follow the event that will be broadcast live. Interpretation services in the six official UN languages will be available during the meeting.

In-person format for Member States is 1+1. Civil society organizations are invited to follow the discussions via UN Web TV, and to submit their contributions limited to 350 words.

Interested delegations who intend to make a statement are invited to register via this link. Kindly note that statements will only be enabled for in-person participation. Non-UN Security Council members are welcome to deliver statements, time permitting.

The list of speakers closes on Monday, March 21 (COB). Deadline to receive statements and NGO contributions is Monday, March 28 (COB).

The Chair will prepare the Chair’s Summary with recommendations reflecting the discussions of the briefers and speakers. To allow as many interventions as possible, each one is limited to two minutes (2:00 min).

For any questions and for submitting final statements and NGO contributions, please use the following email address: csonu3@sre.gob.mx.