COVID-19 the Trigger for SDG Solutions in a Revised WHO Mental Health Action Plan

Paul Illingworth

Leicester School of Allied Health Sciences, Faculty of Health and Life Sciences, De Montfort University, Leicester, England

Abstract

Introduction. This paper explores COVID-19 impact on Global attempts to achieve Sustainable Development Goal 3, specifically Target 3.4.

Purpose. Suggest a new WHO Mental Health Action Plan needs to be refocused to help achieve universal mental health.

Approach. The author discusses the context of COVID-19s impact on Governments inability to progress the UN Sustainable Development Goals, specifically Target 3.4, reviewing this against the WHO Mental Health Action Plan (MHAP) 2013-2020 (WHO 2013). Utilizing relevant publications, progress/lack of progress are discussed, suggestions made as to how, by refocusing the MHAP to one more culturally sensitive and localized, to progress towards universal mental health.

Discussion. Contextualizing the lack of specific Sustainable Development Goals mental health target. The continual use by the WHO of promoting western medical approaches to achieve universal global mental health is explored, while using COVID-19 pandemic as a means of triggering change in how localized, culturally specific non-medical approaches could be championed.

Limitation/Strengths. The paper does not involve an extensive literature search. However, subject matter is timely and relevant. It challenges traditional approaches of how Global Mental Health has been addressed by organizations led by the UN/WHO. It identifies positive ways of progressing global mental health, by utilizing localized and culturally sensitive approaches.

Practical/Social value. The suggestions made are cost effective, given the financial challenges COVID-19 has brought, that is a practical and social value in its own right. Additionally, the practical local and culturally sensitive solutions can be used globally. They could be undertaken on their own or in conjunction with traditional western/medical models. The potential social value could be considerable, should it be the focus of the latest WHO Mental Health Action Plan.

Conclusion. Any new WHO Mental Health Action Plan must ensure non-traditional interventions are central and increasingly used to achieve universal mental health for all

Keywords

Address for correspondence:

Paul Illingworth, Head of the Leicester School of Allied Health Sciences, Faculty of Health and Life Sciences, De Montfort University, Leicester, England. e-mail: *paul.illingworth@dmu.ac.uk*

Introduction

The COVID-19 pandemic has brought about great disturbance for the global health community. Governments and all the other different organizations involved with the fight to control it, is having to do so on many fronts. These include identifying people who test positive through test and trace, directly fighting the disease by caring for those needing acute in-patient care, plus vaccination and where needed resultant end of life care. Increasingly care is undertaken, in many countries, by Primary Care staff and this can include helping people with the so called long COVID and also those having also recovered but who have been left with post COVID anxiety. Additionally, this 'fight' involves supporting health and social care workers, and any others involved directly or in directly, as well as protecting children's learning and people's livelihoods. This is the focus of the world's attention. However, this work has often been hampered by challenges of access, safety, supplies, and financial stress and increasingly the isolation and mental anguish, the likes of which has never been seen before, at least as far as can be remembered or on record.

This global challenge has resulted in short-term consequences which are evident everywhere, but the long-term costs of the pandemic have only recently started to emerge and be considered. Just how COVID19 will reconfigure health and social care, organizations operating practices, (and not just health and social care organizations, but also schools plus further and higher education establishments, to name a few), livelihoods, professions and priorities is only beginning to emerge

There is now an opportunity to refocus and reform how we do things. This paper suggests that by using the COVID-19 pandemics impact on people's mental health globally, the WHO Sustainable Development Goals (SDGs), specifically Target 3.4, https://sdgs.un.org/goals/goal3 could be better achieved and that a revised and reconfigured WHO Mental Health Action Plan needs updating and refocusing. By doing so, it will greatly assist to get the globe back on track, from a mental health perspective.

Purpose

This paper explores the impact of COVID-19 on Global attempts to achieve Sustainable Development Goal 3, specifically Target 3.4 and suggest how a new WHO Mental Health Action Plan needs to be refocused to help achieve universal mental health.

Approach

The author discusses the current context of COVID-19s impact on Governments ability to progress the UN Sustainable Development Goals, in particular Target 3.4 and reviews this against the he WHO Mental Health Action Plan (MHAP) 2013-2020 (WHO 2013). Utilizing relevant publications, progress and lack of progress are discussed and suggestions are made as to how, by refocusing the MHAP away from the traditional Western medical model to one more culturally sensitive and localized, could help to bring about great progress towards universal mental health.

Sustainable Development Goals

The Sustainable Development Goals are the recovery framework developed by the United Nations/World Health Organization (UN/WHO) (UN 2021). Their aim is to make everyone globally have an improved and more maintainable life. The UN/WHO see this being accomplished by addressing major global challenges, which they see as; poverty, inequality, climate change, environmental degradation, peace and justice. These challenges are to be addressed globally by governments through the 17 SDGs included in Table 1. Each Goal is broken down into targets relating to specific areas.

Table 1. The Seventeen Sustainable Development Goals

The 17 Sustainable Development Goals		
1: No Poverty	2: Zero Hunger	3: Good Health and Well-being
4: Quality Education	5: Gender Equality	6: Clean Water and Sanitation
7: Affordable and Clean Energy	8: Decent Work and Economic Growth	9: Industry, Innovation and Infrastructure
10: Reduced Inequality	11: Sustainable Cities and Communities	12: Responsible Consumption and Production
13: Climate Action	14: Life Below Water	15: Life on Land
16: Peace and Justice Strong Institutions	17: Partnerships to achieve the Goal	

COVID-19 Pandemic

Millions of lives have been and continue to be affected globally as a result of the COVID-19 pandemic, it is very likely many more will be before the acute phase as run its course. At the time of writing, it is just over 12 months since the

COVID-19 virus had become more widely known. However, the Public Health community had been predicting a similar SARS type virus would strike again, much earlier. Devi Sridhar, Professor of Global Public Health at Edinburgh University, had predicted a coronavirus-like crisis in 2018. Speaking at the launch of her book, co-authored with Chelsea Clinton, at the Hay Book Festival in Hay-on-Wye in Wales, she not only predicted it, but said it would most likely come from animal to human transfer in China and then be brought to the West by airline (Allen-Mills & Gregory 2020).

Estimates of how many will eventually be directly impacted vary, but there is no doubt, there will be few globally not impacted. Lives have been and will continue to be disrupted, people losing their jobs many forced into poverty, some into extreme poverty. While those with jobs and money and developed countries are and will continue to find this all a great challenge, the impact will be even greater in low-middle income countries (LMICs) and among vulnerable groups everywhere.

It is, and will be for the foreseeable future, challenging for any country to attain the SDGs, but they can and must be achieved. Prior to the COVID-19 pandemic, the majority of countries had begun to make advances towards the SDGs, the Sustainable Development Report 2020 (SDG 2020). The report exposed that there was no country on course to achieve all of the SDGs, but the majority were continuing to progress towards their goals. It is interesting to note that Sach et al. (2020) identified that East and South Asia have progressed more than any other area, with Latin America and the Caribbean progressing the least. However, Sach et al. (2020) cautioned that despite the progress made to date, any further progress has been negatively impacted by COVID-19.

In respect of mental health, there is growing evidence that the pandemic has, is and will continue to impact on the mental health of the world's population across the age range, (Girdhar et al 2020; Shuja et al 2020 and Tanaka & Okamoto 2021). The next pandemic is already with us and it is the mental health pandemic.

Discussion

Had SDGs and especially Target 3.D, https://sdgs.un.org/goals/goal3 which asks for "early warning, risk reduction and management of national and global health risks," been fully operationalized by now, countries globally would have been in a better position and been able to react and thereby control the COVID-19 pandemic better than they have. As mentioned earlier, there was clearly early warnings. Had

there been better forethought and greater decisiveness, by Governments globally, many more lives would likely have been saved. It is worth noting that several low-income countries, such as Cambodia and Vietnam, for example, have for the most part stifled it with very little financial cost.

At the time of writing COVID-19 continues to have a major impact globally, it has also seriously resulted in increased inequalities. One area that has especially being affected is the mental health of communities globally. A wealth of publications globally has emerged since the pandemic began, relating to the negative impact COVID-19 has had on the mental health of people across different age ranges, for example; perinatal and offspring in Spain (Caparros-Gonzalez et al., 2020), children and adolescents in China (Duan et al., 2020) and adults in Indonesia (Siste et al., 2020). While Girdar et al. (2020) cautioned that the elderly in India was at risk from social isolation as a result of COVID-19, García-Fernández et al. (2020) found that elderly people in Spain had significantly less emotional distress than other age groups. No longer should countries be delaying their response to the SDGs in relation to this, and other areas. Given the ensuing mental ill-health pandemic, action needs to be enhanced to address SDG 3 which is all encompassing "Ensure healthy lives and promote well-being for all at all ages".

The SDG declaration emphasizes that to achieve the overall health goal, 'we must achieve universal health coverage (UHC) and access to quality health care" (WHO 2019). However, this is not specific enough. SDG3 Target 3.4 mentions mental health but does not even give it its own target. Instead it states; "By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being. Within Target 3.4, suicide rate is an indicator (3.4.2). One has to question why such an important and growing global concern has not got its own target. Why does the WHO not build on work already being undertaken to strengthen mental health resilience, rather than focusing on traditional western medical intervention, as it does in the Mental Health Action Plan (MHAP) 2013-2020 (WHO, 2013)? Clearly it was not on track before the COVID-19 pandemic struck. There is growing evidence that non-medical, local and culturally aware interventions are successful (Doukani et al., 2021, Jakovljevic (2018) and Raghavan et al., 2020).

However, one has to be careful and a distinction made between non-medical and medical or professional interventions, for

example, a very good review was undertaken by Rathod et al. (2018) into "culturally adapted interventions for mental health disorders". They concluded, there was value in cultural adaptation but there was not strong evidence of what adaptation and for whom. In other words, traditional, westernized interventions that had been adapted to address cultural differences., can work but more research is needed to ascertain what exactly works and what does not.

What this paper calls for, is not a western medical or psychological model that has been culturally adapted for local needs. Instead it asks for non-medical interventions that emerge from cultures within which there are people with mental health problems, where the 'medical model' is not accepted for whatever reason or not working. This could be that the cost is prohibitive, or more likely availability is scarce. In many LMICs the ratio of mental health professional to the population is high and that what care provided is in urban areas. A non-medical intervention could be something as simple as a bench (Chibamba and London, 2019) or religious involvement (Iheanacho et al., 2021), or theatre (Crossley et al., 2019).

To ensure this is prioritized, we require a robust framework for guiding governments to move away from the costly medical and pharmacological models, to one where immediate post-pandemic recovery and long-term strategies focus attention on low cost, localized, culturally sensitive and effective means of building mental health resilience. However, both the UN (2020) policy brief on the need for action on mental health in relation to COVID-19 and the WHO (2021) report into how preparedness and response to COVID-19 into mental health, emphasize a more traditional medical model response.

The WHO Mental Health Action Plan 2013-2020 (WHO 2013) recognized the importance of mental health in achieving health for all. The four objectives; 1) more effective leadership and governance for mental health; 2) the provision of comprehensive, integrated mental health and social care services in community-based settings; 3) implementation of strategies for promotion and prevention and 4) strengthened information systems, evidence and research, were well received. However, with the Covis-19 pandemic and it is now 2021, a new Action Plan going forward is needed and one that offers something different to those previously championed which has had limited success.

Limitations of the study\Strengths of the study:

The paper does not involve an extensive literature search and has been undertaken by a sole author. However, the subject matter is timely and highly relevant. It challenges traditional approaches of how Global Mental Health has been addressed by organizations led by the UN/WHO and who have championed the western/medical model over other approaches. It identifies positive ways of progressing global mental health, by utilizing localized and culturally sensitive approaches.

Conclusion

The COVID-19 pandemic and resulting growing mental health related problems must be the trigger to drive change in how mental health is achieved by all. There is a long history of attempting to fix it be traditional westernized approaches, medical interventions and the use of medicines. Despite recommendations and guidance from the UN and WHO and countries responding to those, the mental health pandemic is growing. The concern is once the viral aspects of COVID-19 are beginning to be better controlled, the mental health pandemic will hit. There are increasing numbers of publications demonstrating that locally based, culturally sensitive and non-traditional interventions are having a significant impact on improving mental ill-health. Any new WHO Mental Health Action Plan should, indeed must, ensure these non-traditional interventions are central and increasingly used to achieve universal mental health for all.

Conflict of interest

The author declares no conflict of interests

References

Allen-Mills, T & Gregory, A (2020) Coronavirus: did Britain get it wrong in the battle to stop the spread? *The Sunday Times*. https://www.thetimes.co.uk/article/coronavirus-did-britain-get-it-wrong-in-the-battle-to-stop-the-spread-ffjvgq02c

Caparros-Gonzalez, RA. Ganho-Ávila, A. & de la Torre-Luque, A (2020) Editorial. The COVID-19 Pandemic Can Impact Perinatal Mental Health and the Health of the Offspring. *Behavioral Science*. 10(162) https://www.doi:10.3390/bs10110162

Chibanda, D & London, E (2019) The journey of making mental health a development priority.

https://oxfamblogs.org/fp2p/the-journey-of-making-mental-health-a-development-priority/

Crossley, M. Barrett, A. Brown, B. Coope, J. Raghaven, R. (2019) Systematic review of applied theatre practice in the Indian context of mental health, resilience and well-being. *Applied Theatre Research*, 7 (2), pp. 211-232 https://doi.org/10.1386/atr_00017_1

Doukani, A., Van Dalen, R., Valev, H., Njenga, A., Sera, F. & Chibanda, D. (2021). A community health volunteer delivered problem-solving therapy mobile application based on the Friendship Bench 'Inuka Coaching' in Kenya: A pilot cohort study. *Global Mental Health*. 8, E9. https://www.doi:10.1017/gmh.2021.3

Duan, L., Shao, X., Wang, Y., Huang, Y., Miao, J., Yang, X., & Zhu, G. (2020). An investigation of mental health status of children and adolescents in china during the outbreak of COVID-19. *Journal of Affective Disorders*. 275, pp112–118.
https://doi.org/10.1016/j.jad.2020.06.029

García-Fernández, L., Romero-Ferreiro, V., López-Roldán, PD., Padilla, S. & Rodriguez-Jimenez, R. (2020) Mental Health in Elderly Spanish People in Times of COVID-19 Outbreak. The *American Journal of Geriatric Psychiatry*. 28(10) pp1040-1045.
https://doi.org/10.1016/j.jagp.2020.06.027

Girdhar R, Srivastava V, Sethi S. (2020) Managing mental health issues among elderly during COVID-19 pandemic. *Journal of Geriatric Care and Research*, 7(1) pp32-35

Iheanacho T, Nduanya UC, Slinkard S, Ogidi AG, Patel D, Itanyi IU, Naeem F, Spiegelman D, Ezeanolue EE (2021). Utilizing a church-based platform for mental health interventions: exploring the role of the clergy and the treatment preference of women with depression. *Global Mental Health* 8, e5, 1–8. https://doi.org/10.1017/gmh.2021.4

Jakovljevic, M. (2018) Empathy, Sense of Coherence and Resilience: Bridging Personal, Public and Global Mental Health and Conceptual Synthesis. *Psychiatria Danubina* 30(4) pp 380-384 https://doi.org/10.24869/psyd.2018.380

Raghavan, R., Coope, J., Jamwal, S. & Pendse, T. (2020) Reflections on the use of mental health resilience concepts in migration and global mental health. *International Journal of Mental Health*. 48:4, 299-308, https://www.doi:10.1080/00207411.2019.1708646

Rathod, S, Gega, L, Degnan, A, Pikard, J, Khan, T, Husain, N, Munshi, T, & Naeem, F (2018). The current status of culturally adapted mental health interventions: a practice-focused review of meta-analyses. *Neuropsychiatric Disease and Treatment*, 14, 165–178. https://doi.org/10.2147/NDT.S138430

Sachs, J., Schmidt-Traub, G., Kroll, C., Lafortune, G., Fuller, G., Woelm, F. (2020). The Sustainable Development Goals and COVID-19. *Sustainable Development Report 2020*. Cambridge: Cambridge University Press.

SDG (2020) Sustainable Development Report https://dashboards.sdgindex.org/

Shuja KH, Aqeel M, Jaffar A and Ahmed A. (2020) COVID-19 Pandemic and Impending Global Mental Health Implications. *Psychiatria Danubina*. 32 (1) pp32-35 https://doi.org/10.24869/psyd.2020.32

Siste K, Hanafi E, Sen LT, Christian H, Adrian, Siswidiani LP, Limawan AP, Murtani BJ and Suwartono C (2020) The Impact of Physical Distancing and Associated Factors Towards Internet Addiction Among Adults in Indonesia During COVID-19 Pandemic: A Nationwide Web-Based Study. *Frontiers in Psychiatry* 11:580977.
https://www.doi:10.3389/fpsyt.2020.580977

Tanaka T and Okamoto S (2021) Increase in suicide following an initial decline during the COVID-19 pandemic in Japan. *Nature Human Behaviour* https://doi.org/10.1038/s41562-020-01042-z

UN (n.d.) Take Action for the Sustainable Development Goals https://www.un.org/sustainabledevelopment/sustainable-development-goals/

WHO (2013) Mental Health Action Plan 2013 – 2020.
https://www.who.int/publications/i/item/9789241506021

WHO (2019) Mental Health. Sustainable Development Goals https://www.who.int/mental_health/suicide-prevention/SDGs/en/