Thank you, Mr. Chair,

02. Bangladesh is delivering this statement on behalf of 11 Member States in the South East Asia Region.

03. We appreciate Director General’s leadership in global mental health initiative in Bangladesh and Nepal to enhance access to inclusive, integrated, evidence-based primary and community mental health services and psychosocial supports.

04. It is a fact that mental Health is still the most neglected and under-invested area across WHO program. We hope - the EB148 decision on “Promoting Mental Health Preparedness and Response for Public Health Emergencies” would pave the way for strengthening capacity of the Member States on mental health preparedness and response for public health emergencies, as highlighted by the COVID-19 pandemic.

Mr. Chair,

05. The COVID-19 has exposed the existing mental health service gaps. In this respect, our region would like to make four points to address the existing and emerging challenges:

   First, prioritization of mental health needs to be continued at all levels - global, regional and national - to ensure an effective and comprehensive response to the mental health needs of people and healthcare workers during COVID-19 pandemic. At the country level, integration of mental health services into primary health care needs to be ensured to improve the availability and accessibility of mental health care for all especially those in vulnerable situations and hard-to-reach areas. This also includes promoting de-institutionalization towards community-led mental health services and cares. Moreover, the sustainable funding for addressing mental health problems needs to be available and adequate at all levels.

   In addition, culturally acceptable forms of mental health services should be developed, keeping in mind the needs, contexts and priorities across regions.
Second, monitoring systems including research should be conducted to better understand the magnitude of problems, situation of unmet need and utilization of services as well as impacts to patients and family in the event of health emergencies.

Third, Mental health and community resilience should be strengthened through implementing an inclusive, multi-stakeholder approach involving different professions related to mental health in line with WHO’s approach to Mental Health and Psychosocial Support. In addition, mental health literacy and awareness must be promoted to reduce misconceptions and stigma about mental health disorders, including in times of health emergencies. Also, adequate technical assistance should be provided for training and building capacity of the community health professionals and social workers on mental health, particularly in low- and middle-income countries.

Finally, Member States should be provided with adequate support for the implementation of the Global Mental Health Action Plan 2013-2030 in the context of public health emergencies.

Thank you.

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