

High-Level Meeting of the General Assembly on the Prevention and Control of Non-Communicable Diseases (19-20 Sept 2011) and Informal Interactive Hearing on Non-Communicable Diseases (16 June 2011) / UN Headquarters, New York

Civil Society Statement on Non-Communicable Diseases and Mental and Substance Abuse Disorders

Statement submitted by International Federation of Settlements and Neighborhood Centers (IFS), non-governmental organizations in general consultative status with the Economic and Social Council; (names to be inserted), World Federation for Mental Health (WFMH), International Association of Schools of Social Work (IASSW), International Council of Psychologists (ICP), International Federation of Social Workers (IFSW), International Federation of Women Lawyers (FIDA), International Federation of Women in Legal Careers (FIFCJ), World Association for Psychosocial Rehabilitation (WAPR); non-governmental organizations in special consultative status with the Economic and Social Council; and civil society organizations (names to be inserted).

We, the international non-governmental organizations (NGOs) in consultative status with the Economic and Social Council and other organizations of civil society support the following statement:

Recalling the Ministerial Declaration from the High-Level Segment of the Substantive Session of the Economic and Social Council, held in Geneva in July 2009, *“Implementing the internationally agreed goals and commitments in regard to global public health,”* which recognized the importance of mental health and incorporated recommendations on mental and substance use disorders, as well as other non-communicable diseases;

Recalling the Resolution on the Prevention and Control of Non-Communicable Diseases (64/265) adopted by the 64th Session of the General Assembly on 13 May 2010, which states *“Noting with concern that for millions of people throughout the world, the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, including access to medicines, still remains a distant goal and that, in many cases, especially for those living in poverty, this goal is becoming increasingly remote;”*

Reaffirming our commitment to persons with mental and substance use disorders, and those who provide care and support, who often feel neglected in the world of Non-Communicable Diseases;

We are pleased that there has been considerable attention and discussion on mental and substance use disorders at the Global Forum on Non-Communicable Diseases and the First Global Ministerial Conference on Healthy Lifestyles and Non-Communicable Disease Control held in Moscow in April 2011. The Moscow Declaration recognizes that mental and substance use disorders are non-communicable diseases that impose a significant global burden.

Mental and substance use disorders were also notably included in the final declaration of the Regional Consultation on the Prevention and Control of Non-Communicable Diseases (NCDs) in Brazzaville, Congo, in April 2011. The Brazzaville Declaration affirms that mental disorders represent a significant challenge to development.

These Outcome Declarations recognize that we will not be able to address the NCD issue effectively unless we adopt a multi-sectoral and “holistic” approach which includes and integrates interventions for mental and substance use disorders in the NCD agenda.

Mental disorders are not only a risk factor for other NCDs, but are often a consequence of having diabetes, cancers, cardiovascular diseases and respiratory diseases. Without addressing mental and substance use disorders explicitly, outcomes related to NCD initiatives will not only be less effective – but also, as the research shows – will cost more. For example, we know that diabetics have twice the risk of being depressed as non-diabetics; and treating both diabetes and depression results in improved medication adherence and lower healthcare costs. If depression is addressed, outcomes improve and medical expenditures are reduced.

We understand the concern that the inclusion of all mental and substance use disorders may not be possible at this stage. However, as the WHO mhGAP Programme shows, there are cost-effective, evidence-based interventions for a limited set of diagnoses. We are advocating that these be included as part of the NCD agenda, in order to ensure that mental disorders are included in some form as part of the UN High-Level Session outcome declaration, recommendations and action plans, recognizing both the linkages with other NCDs as well as the state-of-the-science. By advocating for the inclusion of mental and substance use disorders, we seek to strengthen and support the NCD efforts at all levels.

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