

# Agenda

- Welcome and introduction
  - Mark van Ommeren, Head, Mental Health Unit
- Presentation of WMHR (Mark) - 8 mins
- Partner questions / discussion - 15 mins
- Communications approach & social media strategy - 8 mins
  - Sarah Sheppard, Communications Lead, Dept of Communications
- Report advocacy cross-walk - 8 mins
  - Sarah Kline, CEO, United for Global Mental Health
- Open discussion - 15 mins
  - Partners to share their plans & ideas



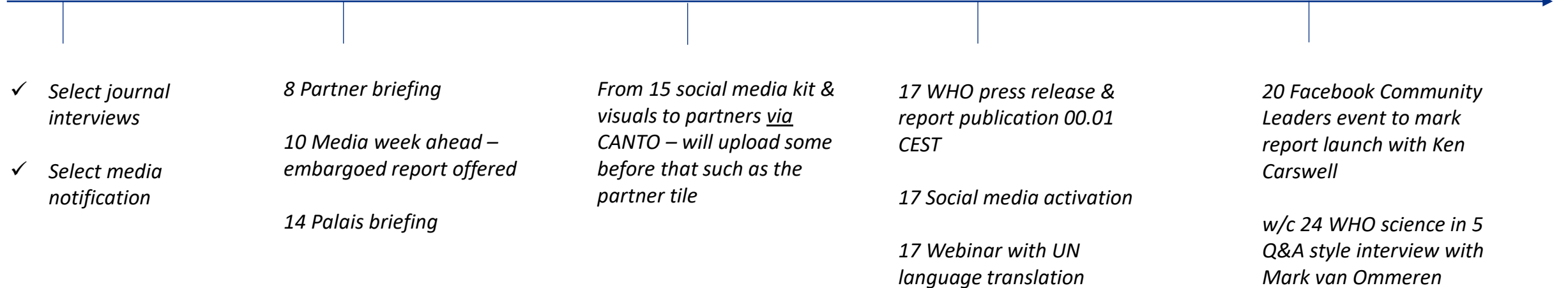
## World mental health report

Transforming mental  
health for all

# Communications timeline

## *World Mental Health Report – Transforming Mental Health For All*

### June



- 
- **Media interviews**
  - **Regional launches**
  - **Continuing social media**
  - **Partner activity**
  - **WHO Foundation blog for private sector engagement**

# World Mental Health Report –Transforming Mental Health For All

webinar, 17 June, 14.00 – 15.30 CEST

moderated by Claudia Hammond - Broadcaster and Writer on Mental Health

Time (CET)	Speaker
14.05	Ms Enoch Li - Person with lived experience
14.10	Dr Tedros Adhanom Ghebreyesus - Director-General, World Health Organization
14.14	HE Mr Alberto Fernández – President, Republic of Argentina
14.19	Ms Juliana Velasquez - Singer and Performer
14.29	HE Mr António Guterres – Secretary-General, United Nations
14.34	Mr Andrew Little - Minister of Health, New Zealand
14.39	Ms Dévora Kestel – Director of the Department of Mental Health and Substance Use, World Health Organization
14.56	Dr Ahmed Hankir - Person with lived experience and psychiatrist
15.00	Mr Bjørg Sandkjær - State Secretary of International Development, Norway
15.05	HE Mrs Neo Jane Masisi - First Lady, Republic of Botswana
15.10	Youth speaker (TBC)

# WMHR – *materials to support advocacy 1*

- CANTO link with all materials
- Press release
- [World Mental Health Report](#)
  - Exec summaries on all UN languages
  - Website version – not just a pdf document
- Messages
  - Overarching & per chapter
  - Quotable quotes by chapter
  - Paragraph describing the report for your newsletters / websites



# WMHR – materials to support advocacy 2

## Social Media content


- 8 People with lived experience (static & video for social media)
- 6 country case studies (Pakistan, Turkey, Sri Lanka, Brazil, Singapore, Uganda & Zambia)
- Partner template
- Report facts & data

**#WorldMentalHealthReport**




#WorldMentalHealthReport

# Living with a mental health condition



**LARRY**




*From the report –  
6 PWLE case studies for social & web  
(carousel & standalone)*

“  
I was working in a toxic environment  
#WorldMentalHealthReport



“  
A lengthy and unpleasant matter at work was sending my mind reeling into panic attacks, anxiety, and depression  
#WorldMentalHealthReport



“  
This was the single most tumultuous experience in my life  
#WorldMentalHealthReport



“  
In the end, I learnt a great deal about myself and what is important to me  
#WorldMentalHealthReport





**Transforming  
Mental Health  
for All**

#WorldMentalHealthReport



*Message  
template for  
partners*

**Mental health conditions are widespread, undertreated and under-resourced**

01

**WIDESPREAD**

**1 in 8**  
live with a mental health condition

**UNDERTREATED**

02

**71%**

people with psychosis do not receive mental health services

03

**UNDER-RESOURCED**

of health budgets, on average, go to mental health

**Across the world, mental health needs are high but responses are insufficient and inadequate**

**Transforming Mental Health**

#WorldMentalHealthReport

*From the report – facts & data (carousel & standalone)*



From the report –  
6 country case studies

Pakistan

Turkey

Sri Lanka

Brazil

Singapore

Uganda & Zambia

### TRANSFORMATION CASE STUDY

# Sri Lanka

#### LOW-COST SUICIDE PREVENTION INTERVENTIONS

Sri Lanka implemented policies to limit access to and availability of acutely toxic, highly hazardous pesticides thus reducing deaths by suicide.

**1980**  
**Control of Pesticides Act**  
When Sri Lanka's government drew up the Control of Pesticides Act in 1980, pesticide poisoning accounted for more than two-thirds of all suicides in the country.

**1984**  
**National Pesticide Ban initiated**  
Sri Lanka's government used the new Act to ban two highly hazardous pesticides: parathion and methyl parathion.

**1994**  
**Supportive policies introduced**  
A Presidential Commission was established to draft a national policy and action plan on suicide prevention and coordinate action across government agencies.





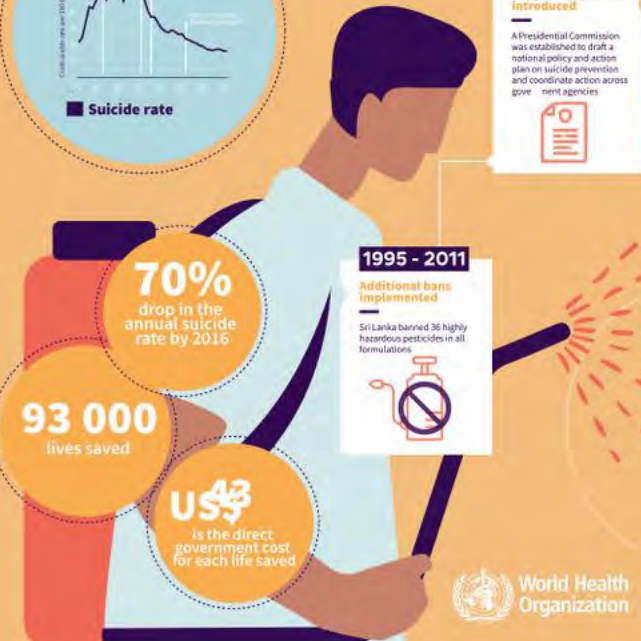
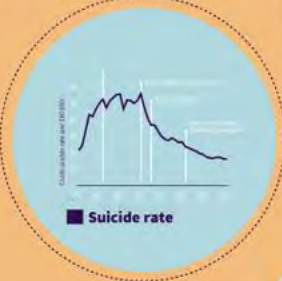
**1995 - 2011**  
**Additional bans implemented**  
Sri Lanka banned 36 highly hazardous pesticides in all formulations.

**67%** of all suicides were from consumption of pesticides.

**70%** drop in the annual suicide rate by 2016.

**93 000** lives saved.

**US\$3** is the direct government cost for each life saved.



### TRANSFORMATION CASE STUDY

# Singapore

#### COMMUNITY-BASED PARTNERSHIPS TO IMPROVE YOUTH MENTAL HEALTH

Singapore launches the 'Response, Early Intervention and Assessment in Community Mental Health' (REACH) initiative to provide front-line support to students with mental health conditions by establishing regional multidisciplinary and intersectoral networks of care.

**2007**  
**Initiated REACH an early detection and intervention programme in schools**  
School counsellors are trained to identify emotional, social and behavioural issues and refer students to a mobile case management team of REACH clinicians for assessment and intervention.

**BY 2015**  
**4 000** students referred to REACH teams through trained school counsellors.

School-based counselling can be used as a preventive intervention for children with emerging signs of mental health conditions.

#### PROMOTING MENTAL HEALTH IN SCHOOLS

Schools offer a strong platform for early identification and treatment of mental health conditions in children and adolescents because they operate where most school-going children are, have access to families, are free at point of use and overcome typical access barriers like inconvenient location, costly transport and stigma.



Please share your ideas and activity

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