



## Joint Interagency Call for Action on MHPSS 2020

*As presented at High Level Meeting 9 December 2020, facilitated by the Kingdom of the Netherlands, with support of Bahrain, Belgium, Canada and Ecuador as the co-chairs of the GoF on Mental Health and Wellbeing*

In 2019 the humanitarian community made strategic advances towards the integration of Mental Health and Psychosocial Support (MHPSS) in all its humanitarian work. On 5 December 2019 the IASC principals [reaffirmed MHPSS as a multi-sectoral cross-cutting issue](#) (summary below) and the Red Cross movement adopted a [resolution](#) on integrating MHPSS into all its work.

In 2020, the global emergency caused by the COVID-19 pandemic has wreaked havoc on hundreds of millions of people worldwide. We have seen how the pandemic has affected the health, the livelihoods, the educational opportunities and community and family life of many. The tremendous socio-economic impact halted, and to a certain extent, reversed the achievements made under the Sustainable Development Goals (SDGs) to date. As the UN Secretary-General outlined in his [policy brief on mental health in COVID response](#), a whole-of-society approach to promote, protect, and care for mental health for all, is essential.

According to a [new WHO survey](#), the COVID-19 pandemic has disrupted or halted critical mental health services in 93% of countries worldwide while the demand for mental health support is increasing. Approximately 70% of mental health services for children and adolescents or older adults are disrupted. The survey of 130 countries provides the first global data showing the devastating impact of COVID-19 on access to mental health services and underscores the urgent need for funding to meet people's demands and requirements.

Those who were already living at the margins, such as people affected by natural disasters, armed conflicts, and living in fragile ecological systems are disproportionately impacted, with increased vulnerability and risks for children, adolescents, women of reproductive age, young and older people, for migrants, refugees, asylum seekers, internally displaced persons and stateless persons, for survivors of gender-based violence, people with disabilities and victims of violent extremism. OCHA and agencies contributing to the activities of the [Global Humanitarian Response Plan](#) identified MHPSS as essential for all groups affected by the pandemic.

In many of those groups, emotional distress and stressors increase. At the same time, people in crises already are faced with higher levels of mental health conditions and psychosocial distress.

Our collective experiences during the COVID-19 response have strengthened our resolve that support to people in crisis situations must include actions to support and sustain good mental health and psychosocial wellbeing.

In 2020, our agencies have stepped up efforts to provide an acceptable level of MHPSS services for all people we serve. But despite the progress made over 2019 and 2020, we recognize that our efforts fall short given the tremendous and increasing needs.

Through this Call to Action we want to commit ourselves, and ask our partners to join us, in increasing our collective efforts to provide cross-sectoral mental health and psychosocial support that is integrated into humanitarian programmes for preparedness, response and recovery to meet the needs of all populations affected by emergencies; to increase efforts to implement the IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings; to include mental health and psychosocial support in humanitarian needs assessments and in Humanitarian Response Plans (HRPs) and Refugee Response Plans (RRPs); build mental health and psychosocial support capacity accordingly and report on MHPSS activities and funding.

We as humanitarian agencies cannot do it alone and need more support. We call upon and urge all our partners to act and to scale up the investment in innovative, multi-sectoral and quality mental health and psychosocial interventions. These interventions are not a luxury, but an essential investment and contribution to mitigating the effects of war, natural disasters, displacement and pandemics.

Addressing mental health and psychosocial wellbeing is critical to reaching each and every one of the SDGs. The topic must remain at the top of the global agenda for humanitarian assistance with strengthened links to the agendas for preparedness, development and peacebuilding. Good mental health and psychosocial wellbeing is a universal right, and is at the heart of a sustainable global future for everyone.

For ease of reference, from the

**INTER-AGENCY STANDING COMMITTEE**

of its meeting in  
Geneva, **5 December 2019:**

**The IASC Principals agreed on the following:**

- Endorse recommendations outlined in the background document, namely:
  - Treat MHPSS as a cross-cutting issue that has relevance within health, protection, nutrition, education and CCCM sectors/clusters, in all emergencies. [IASC members]
  - Reflect MHPSS indicators in relevant planning documents and establish dedicated budget lines, as well as specific MHPSS codes within financial tracking systems. [OCHA]
  - Support for the creation of and the work of country-level MHPSS Working Groups in all migration, refugee and humanitarian contexts as crosscutting groups. [IASC members]
  - Continued support to the work of the IASC MHPSS Reference Group, in coordination with other relevant bodies and international fora. [IASC Members]
  - Protect and promote mental health and wellbeing of staff and volunteers facing extreme stressors, including trauma, hostile environments and chronic stress. [IASC Members]
- Finalize the inter-agency Minimum Service Package for MHPSS [WHO, UNICEF, UNHCR in coordination with IASC members].