WHO-EM/MNH/228/E

Summary report on the

Regional consultation on enhancing the capacity of Member States to implement anti-stigma programmes in the Eastern Mediterranean Region

Cairo, Egypt
28–30 June 2022

World Health Organization
REGIONAL OFFICE FOR THE Eastern Mediterranean

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1. Introduction

Mental health is an integral part of our general health and well-being and is a basic human right. Having good mental health means we are better able to connect, function, cope and thrive. Both mental health risks and protective factors can be found in society. Key mental health threats today include: economic downturns and social polarization; public health emergencies; widespread humanitarian emergencies and forced displacement; and the growing climate crisis. Also, the COVID-19 pandemic has created a global crisis for mental health, fuelling short- and long-term stresses and undermining the mental health of millions. For example, estimates put the rise in both anxiety and depressive disorders at more than 25% during the first year of the pandemic. At the same time, mental health services have been severely disrupted and the treatment gap for mental health conditions has widened.

More than a billion people live with mental health, neurological and substance use conditions and mental disorders are the leading cause of years lived with disability (YLD), accounting for one in every six YLD globally. They also make a substantial contribution to mortality, with almost 800 000 people dying by suicide every year. Strikingly, mental health systems worldwide are marked by major gaps and imbalances in information and research, governance, resources and services. Pervasive stigma and discrimination are among the major contributors to these imbalances and the least addressed. They are present in homes, schools, workplaces and even within the mental health care system itself.

Stigma leads to social isolation and discrimination, which impacts a person’s ability to earn an income, have a voice, gain access to quality care, be part of their community and recover from their mental health conditions.

To fulfil its commitments, as the lead international agency on health, in fighting misconceptions, stigma and discrimination surrounding mental health, the WHO's comprehensive mental health action plan 2013–2030 calls on Member States to adopt strategic interventions to reduce stigmatization, discrimination and human rights violations against people with mental health conditions. In response to the mental health action plan, at its 62nd session in 2015, the WHO Regional Committee for the Eastern Mediterranean endorsed a framework to scale up action on mental health in the Region. Among other things, the regional framework requests Member States to review legislation related to mental health in line with international human rights covenants/instruments.

In this context, the WHO Regional Office for the Eastern Mediterranean held a regional consultation at the WHO Regional Office in Cairo, Egypt, from 28 to 30 June 2022 to enhance the capacity of countries to implement anti-stigma programmes in the Eastern Mediterranean Region.

The specific objectives of the meeting were to:

- orient participating countries on international developments in work to tackle the stigma related to mental health;
- share the available tools and resources to set up anti-stigma programmes; and
- identify the support that countries need to develop and set up anti-stigma programmes.

Over the three days of the consultation, representatives from ministries of health, civil society organizations and international experts participated in discussions to learn from national and international experiences in tackling the stigma related to mental health and set up evidence-based interventions using evidence-based resources and tools.

The countries represented included Egypt, the Islamic Republic of Iran, Jordan, Lebanon, Morocco, Pakistan, Qatar, Tunisia and the United Arab Emirates.

The consultation concluded with recommendations to help countries move forward the anti-stigma agenda and improve the quality of life of people living with mental health conditions in the Region.

2. Summary of discussions

Overview of the global and regional situation of mental health conditions and mental health-related stigma

There are resource, information and research gaps regarding mental health-related stigma and discrimination in the Eastern Mediterranean Region that translate into service/treatment gaps. However, increased awareness of the importance of mental health and increased help-seeking behaviour during the COVID-19 pandemic has provided an opportunity to bridge these gaps.

The WHO comprehensive mental health global action plan 2013–2030, regional framework to scale up action on mental health in the Eastern Mediterranean Region and recently-released WHO World mental health report provide strategic directions to address this stigma and discrimination and are supported by technical tools and resources that can help guide development of services and programmes.

Addressing stigma and discrimination is one of the key shifts needed for the transformation towards better mental health worldwide. Cost-effective interventions to reduce stigma are available which need to be efficiently used, adapted to specific contexts and robustly evaluated.

Social contact interventions, which work to reduce stigma through interactions with people with mental health conditions, have the most robust evidence, especially for immediate-term impact and when conducted in optimal conditions. Indirect social contact interventions (such as watching videos of the testimonies of people with lived experience of mental health conditions) are as effective as direct contact.

The strong involvement of civil society organizations in planning and implementation of de-stigmatization, awareness-raising initiatives and campaigns and engaging people with lived experience of mental health conditions from the planning phases (co-production/creation of anti-stigma programmes) are key factors for successful anti-stigma interventions. It is equally important to include stories on recovery and hope narratives.

There is also a need to leverage the power of social media to combat stereotypes around mental health and make use of celebrity stories for positive portrayal, advocacy and reducing prejudice towards people with mental health conditions.

Effective stigma reduction campaigns should be research-based, with longer duration, higher reach and intensity, creative and multi-faceted. The key driver for these campaigns should not be improving knowledge only but should rather focus on empathy and tackling negative stereotypes.

Evaluation of anti-stigma programmes should measure changes in behaviour and attitudes towards mental health stigma and not only changes in knowledge. Locally-generated evidence is needed to lobby for continuity and securing funds for stigma reduction interventions and to help other stakeholders exchange and learn from each other’s experiences.

HIV programmes can provide lessons in raising political commitment, resource mobilization, combatting stigma and enhancing access to services, since evidence is limited when it comes to mental health.

National anti-stigma initiatives

Presentations were made on anti-stigma programmes developed in eight countries of the Eastern Mediterranean Region, as described below.

In Egypt, mental health training was provided for 1000 health care personnel in primary health care and one educational hospital in Cairo to improve the parity and equality of health care for patients with schizophrenia.

In the Islamic Republic of Iran, an online WHO QualityRights training course was adapted and provided in Farsi to train health workers.

In Jordan, by 2024, there will be training for all mental health professionals and people with lived experience of mental health conditions at the main mental health hospitals, clinics and community-based centres on case management guidelines, communication skills, patients' rights and increasing awareness on mental health and related stigma.

In Lebanon, a 1-year intervention was implemented to increase mental health knowledge and awareness and decrease levels of stigma among employees working in six ministries in Lebanon.

In Morocco, a 2-week training course to increase awareness on mental health, mental health disorders and the rights of persons with mental health conditions was provided for health care providers and administrative staff in the Rabat-Salé-Kenira region.

In Pakistan, a year-long mental health awareness campaign was implemented to encourage men aged between 20 and 40 years, affected by mental health problems, to seek mental health support.

In Tunisia, a scalable 1-year service for treatment of women with a substance use disorder has been launched at Razi's psychiatric hospital.

In the United Arab Emirates, a 1-year mental health anti-stigma campaign for women will be launched in 2023.

3. Conclusion

In conclusion, discussions showed that despite diverse contexts and political and socioeconomic differences between countries in the Region, challenges related to mental health remain largely similar.

4. Recommendations

To Member States

1. Integrate an anti-stigma component in mental health law and policy formulation, service design and delivery, promotion and prevention activities, data collection and research.
2. Enhance partnerships with people with lived experience of mental health conditions and support networks for people with lived experience to be able to share their experiences.
3. Build more effective collaborations between nongovernmental organizations and the public sector to leverage the scarce resources dedicated to mental health.
4. Conduct advocacy activities at national and subnational levels.

To WHO

5. Reinvigorate the intercountry consultation mechanism to share information on developments at global, regional and country levels and to identify emerging challenges and ways to overcome them.
6. Support the development of a mental health advisory group to support the implementation of the regional framework and support countries in implementation of strategic interventions.
7. Support Member States to refine planned national anti-stigma interventions/programmes and provide technical support to Member States to facilitate the implementation of anti-stigma interventions/programmes.

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