

NO HEALTH WITHOUT MENTAL HEALTH

A mental health summary of
the Political Declaration of
the UN High-Level Meeting on
Noncommunicable Diseases and
Mental Health

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The UN High-Level Meeting on Noncommunicable Diseases and Mental Health marks a critical moment to secure meaningful and lasting progress for mental health worldwide. It is the first time Heads of State will convene and have the opportunity to discuss and make meaningful global commitments on mental health.

Today, almost a billion people in the world are living with a mental health condition. Far too many of these individuals face stigma, discrimination and violation of their human rights. The majority are also unable to access essential support for prevention, care, and recovery. And, efforts to create environments that enable good mental health are severely lacking. This must be addressed urgently before it becomes an even greater human and economic catastrophe.

The culmination of this unique gathering of governments will be the adoption by the UN General Assembly of the Political Declaration, in which:

“Heads of State and Government and representatives of States and Governments... emphasize that mental health conditions including anxiety, depression, and psychosis affect close to 1 billion people worldwide and can commonly co-occur and interact with other neurological conditions, including Alzheimer’s disease and other forms of dementia, stroke sequelae, Parkinson’s disease, epilepsy, and other noncommunicable diseases, as well as substance abuse, and that suicide is the third leading cause of death among those 15 – 29 years old.

We therefore commit to urgently:

“Fast-track efforts to accelerate progress on noncommunicable diseases and mental health and well-being over the next five years... and improving mental health care, with the aim to reduce by one third premature mortality from noncommunicable diseases and achieve the following global targets by 2030: ... 150 million more people have access to mental health care”

The Political Declaration includes commitments to improving mental health care across the world in the following priority areas.



1. STRENGTHENING MENTAL HEALTH SYSTEMS THROUGH MOVING AWAY FROM INSTITUTIONS TO INTEGRATED PRIMARY AND COMMUNITY-BASED CARE



8.4 million people are admitted to mental hospitals every year - more than people in prison for committing crimes.



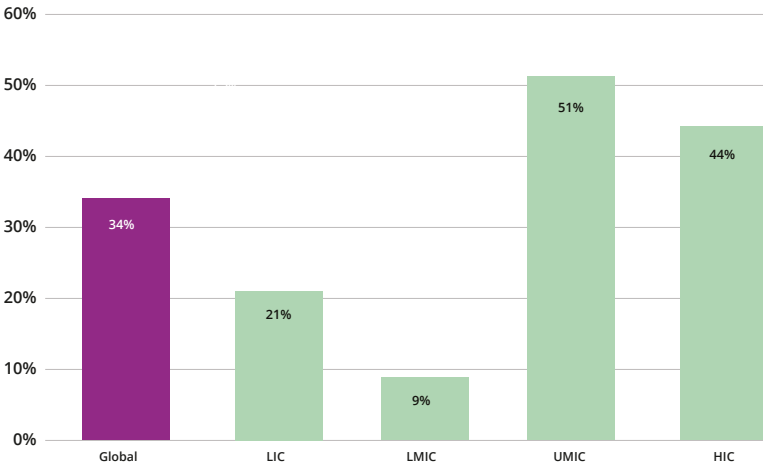
66% of all government funding for mental health goes to mental hospitals



Less than 20% of mental health budgets are spent on primary and community based care in most countries


There remains a lack of attention and action on mental health compared to physical health, despite up to 75% of primary care visits relating to mental health. Current health systems often fall short of providing accessible, person-centred, high-quality, rights-based services to people with multiple chronic conditions, including mental health conditions and NCDs.

Functional integration of mental health into primary health care. Source: WHO Atlas 2024



This is critical because in most countries, mental health care is heavily focused on provision in institutions where involuntary admissions, arbitrary detentions, coercive practices, inhumane treatment and other forms of human rights abuses are common.

The Political Declaration addresses this by committing to fully integrating mental health into physical health systems and shifting mental health care and resources from institutions to care delivered in primary-level and community-based settings.



UN Member States therefore commit to urgently:

“Scale up, particularly at primary health care level and within general health care services, the accessibility, availability and provision of psychosocial and psychological support, and pharmacological treatment for depression, anxiety and psychosis, as well as for other related conditions, including childhood and youth mental health conditions, and self-harm, harmful use of alcohol, other substance abuse, epilepsy, dementia, autism spectrum disorder and attention deficit hyperactivity disorder, while addressing related stigma including through inclusive and accessible quality public education and the involvement of people with lived experience;

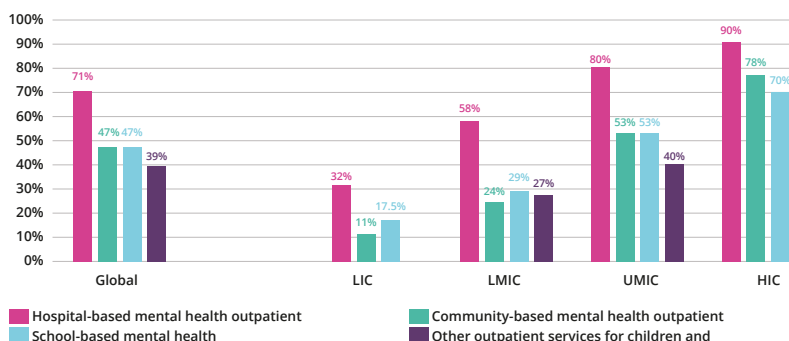
Expanding primary health and community-based services to improve health promotion, prevention, screening, diagnosis, treatment, referral pathways, and follow-up, for ... anxiety, depression; ... (iv) shifting, as appropriate, mental health care and resources from specialized institutions to general health care services delivered in community-based settings”



2. YOUNG PEOPLE'S MENTAL HEALTH

Overall, around a third of mental disorders present in adulthood have developed by the age of 14 years; half appear by the age of 18 years; and nearly two thirds appear by the age of 25 years.. Tragically, suicide is the third leading cause of death among 15–29-year-olds. It is essential to integrate mental health into primary care for children and youth to change this.

Availability of mental health outpatient services for children and adolescents. Source: WHO Atlas 2024



The Political Declaration addresses youth mental health, with governments:

“Recognising also that noncommunicable diseases, mental health conditions and their underlying risk factors and determinants affect people at all ages, including children and young people”

And committing to:

“Integrating, as appropriate, prevention, screening, diagnosis, rehabilitation and long-term care into existing programmes for communicable diseases, maternal and child health, and sexual and reproductive health programmes;

Address the health risks related to digital technology, including social media, such as excessive screen time, exposure to harmful

content, social disconnection, social isolation, and loneliness, stressing the importance of updating regulatory and educational systems to ensure that children and young people benefit from the opportunities of digital services, that their human rights are protected online and offline, and that they are protected from the potential negative impact that digital services can have on their physical and mental health;

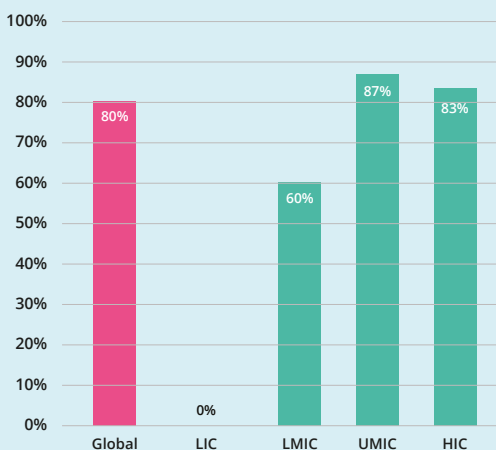
Address the impact of misinformation and disinformation around the prevention and treatment of noncommunicable diseases and mental health conditions and their risk factors, including by increasing health literacy and regulating the digital environment in a manner consistent with national and international law to protect especially children and young people”



3. PREVENTING SUICIDE

Nearly $\frac{3}{4}$ of a million people lose their lives to suicide each year, and there are 20 suicide attempts for every suicide that occurs, and yet in many areas of the world, effective suicide prevention is not happening. And, at least 25 countries still criminalise suicide attempts, which heightens the risk of suicides because it hampers suicide prevention efforts, prevents people from seeking help, increases stigma and leads to inaccurate data.

Countries with a functioning suicide prevention programme. Source: WHO Atlas 2024



In the Political Declaration, governments commit to:

“Deliver on our commitment to prevent and control noncommunicable diseases and promote mental health and well-being, and in line with our respective national contexts and where appropriate, we will: ... prevent and reduce suicides, and take steps to decriminalize attempted suicide, in line with national circumstances, by: (i) developing national suicide prevention strategies and action plans; (ii) limiting access to means of suicide, including highly hazardous pesticides; (iii) reducing stigma for mental health conditions and neurological disorders; (iv) creating an open environment to discuss mental health; (v) fostering a public health approach; (vi) providing support to persons affected by suicide and self-harm; (vii) promoting and supporting the responsible reporting of suicide by the media, including online, digital and social; and (viii) fostering life skills and support for young people”



4. THE COMMERCIAL AND SOCIAL DETERMINANTS OF MENTAL HEALTH

Mental health is profoundly shaped by the circumstances in which we are born, grow up, work, live and age. We should be collectively tackling underlying health determinants and inequities (including socioeconomic disadvantage, social inequalities, adverse living or working conditions and harmful commercial practices). Many of these co-determinants are shared with physical health and NCDs. Mental health and psychosocial disability are not solely health issues and require a whole-of-society, cross-sectoral approach.

In the Political Declaration, governments:

“Emphasize that noncommunicable diseases and mental health conditions prevent people and communities from reaching their full potential, pose a heavy economic burden, limit human capital

development, can undermine the sustainability of health systems and, together with other health conditions, compound cycles of poverty and disadvantage;

Recognize that the human and economic cost of noncommunicable diseases and mental health conditions contributes to poverty and inequalities and threatens the health of peoples and the development of countries, and that there are public health risks associated with increased urbanization, including unhealthy diets, malnutrition and hunger, sedentary lifestyles and physical inactivity, requiring commitments to mobilize and allocate adequate, predictable and sustained resources for national responses to prevent and control noncommunicable diseases, including through international cooperation and official development assistance”

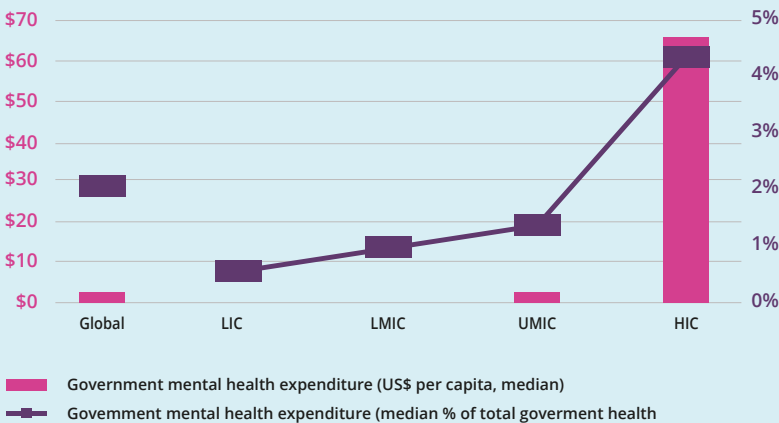
And, commit to:

“Address key social, economic and environmental determinants of noncommunicable diseases and mental health and the impact of economic, commercial and market factors. “



5. FINANCING MENTAL HEALTH SYSTEMS

Government mental health expenditure. Source: WHO Atlas 2024



Underpinning all other issues is the fact that mental health makes up only around 2% of the median government health expenditure around the world, with the figure close to 1% in low and middle-income countries, which leaves at least a US\$200 billion annual shortfall in public investment in mental health.

In the Political Declaration, governments:

“Acknowledge that there are cost-effective and evidence-based interventions for preventing, screening, diagnosing, treating, and caring for people living with or at elevated risk of noncommunicable diseases and mental health conditions, while also acknowledging that scarce resources and increasing prices of certain health products and services mean Member States must prioritize the most affordable and feasible interventions, which for the most part can be delivered at community and primary health care level based on context-specific considerations;”

And, commit to:

“Mobilize and allocate adequate, predictable and sustained resources for national responses to prevent and control noncommunicable diseases and to promote mental health and well-being, through domestic, bilateral and multilateral channels, including international cooperation and official development assistance, and continue exploring voluntary innovative financing mechanisms and partnerships, including with the private sector, to advance action at all levels;

Take measures to reduce out-of-pocket expenditure and the risk of impoverishment for people and households affected by noncommunicable diseases and mental health conditions by implementing financial protection policies to cover or limit the cost of essential services, diagnostics, assistive products, psychosocial support, and medicines;”

It is rare for mental health to be at the heart of a UN HLM, so this is a vital opportunity to accelerate progress on mental health.

It is an urgent opportunity to secure new, progressive commitments to deliver high-quality, rights-based, integrated, and people-centred mental health services, integrated into tertiary, secondary, primary, and community-based prevention and care. In the weeks, months and years to come, United for Global Mental Health will be working with other civil society organisations and experts by experience, global institutions, multilateral organisations, donors, and governments to ensure the implementation of commitments made and monitor progress. “

In the Political Declaration, governments commit to the following targets.

- ▶ 150 million more people have access to mental health care.
- ▶ At least 80% of countries have implemented policies and legislative, regulatory and fiscal measures to support health objectives related to prevention and control of noncommunicable diseases and promotion of mental health and well-being, in line with national circumstances, by 2030.
- ▶ At least 80% of primary health care facilities in all countries have availability of World Health Organization-recommended essential medicines and basic technologies for noncommunicable diseases and mental health conditions, at affordable prices, by 2030.
- ▶ At least 60% of countries have financial protection policies or measures in place that cover or limit the cost of essential services, diagnostics, medicines and other health products for noncommunicable diseases and mental health conditions by 2030.
- ▶ At least 80% of countries have an operational, multisectoral, integrated policy, strategy or action plans on noncommunicable diseases and mental health and well-being by 2030.
- ▶ At least 80% of countries have an operational noncommunicable diseases and mental health surveillance and monitoring system, in line with national circumstances, by 2030.



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