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1. Letter from the Secretary-General

Esteemed Delegates

As the Secretary General of BRCMUN, I am honored and pleased to welcome you all to our conference. On behalf of the entire BRCMUN team, I would like to express our gratitude for the many difficulties we have faced. We have worked with passion, dedication, and great care to present a conference that we are really proud of.

My name is Ecenaz Anbarlı, I am a student of Beyhan-Rıfat Çıkılıoğlu Anatolian High School. BRCMUN, what once seemed like a distant dream, has now become our reality. I am honored to serve as Secretary General at such a prestigious conference alongside an academic team whose dedication and depth of knowledge continue to impress me every day. Since I first started at the United Nations, it has held a place in my heart, and my passion for it has only grown stronger over time.
Of course, none of this would have been possible without the endless support of our organizing team. Our whole team is ready to work for you.

The planning of the BRCMUN started at once, and it was incredibly inspiring to witness how deeply we all care about this conference. We aim to show that the United Nations Model is more than just a simulation. It is a stage for young voices, a platform for diplomacy, and a space for change.

Finally, I want to express my deepest gratitude to those who have been with me on this path, to my MUN predecessors who have shaped today's standards, and most importantly, to you for being here, participating, and believing.
Thank you for joining us on this journey.

With the most sincere regards,

Ecenaz Anbarlı
Secretary-General

anbarliecenaz@gmail.com

2. Letter from the Deputy Secretary General

Dear Participants,

I am very excited and sincerely grateful to welcome you all to BRCMUN25. As Deputy Secretary General, I am proud to be part of a conference that has been built on months of dedication, hard work, and an unwavering belief in what we do. From the moment the idea of BRCMUN25 was born, every member of our team has poured their hearts into making this more than a conference, but a shared experience that we can all grow from.

My name is Çınar Efe Buluş, I am a student of Beyhan-Rıfat Çıkılıoğlu Anatolian High School. Since I first stepped into the world of MUN, I have found something that challenges me, inspires me, and gives me a place where my voice matters. This feeling has only grown stronger with each conference. It has been an incredible journey to be able to participate in the creation of BRCMUN25 from scratch, a journey for which I am truly grateful.

This conference is not just about speeches and decisions. It's about learning to listen, understand, and work together. It's about discovering what kind of leader, thinker, and changemaker you can be. And to see so many passionate individuals gathered here today proves that we are on the right track.

I would like to express my gratitude to everyone who contributed to this process, especially the brilliant organization and academic teams.

But most of all, thank you for being here; your presence means everything to us. You are the one who makes BRCMUN special.

I wish you an unforgettable and inspiring conference.

Best Regards,

Çınar Efe BULUŞ
Deputy-Secretary General

buluscinarefe12@gmail.com

3. Letter from the Chairboard

3.1. Letter from Main Chair

Dear Delegates,

First and foremost, I would like to extend my heartfelt gratitude to each of you for attending this BRCMUN25. This conference will be an unforgettable experience for all of us, filled with joy, success, and invaluable learning.

My name is Melek Defne Boyraz, and I am honored to serve as your Main Chair. I am currently a 10th-grade student at Gelişim Schools, and it brings me immense pride and excitement to be part of such a prestigious event. I know that many of you may feel a bit anxious or uncertain as we begin. Let me assure you: this feeling is completely normal. We've all been in your shoes, feeling the same nervous anticipation. But trust me when I say, there is absolutely nothing to fear. BRCMUN is not just a conference; it's a supportive community where we learn, grow, and create lasting memories together.

Our agenda centers on the topic of mental health—an incredibly important and timely issue that affects us all in some way. I am confident that through our discussions and debates, we will not only gain a deeper understanding of the challenges surrounding mental health but also work collaboratively to propose meaningful and impactful solutions. Your voices matter, and this is your opportunity to make them heard. I am here to support and guide you throughout this experience. If you have any questions, concerns, or simply need a bit of encouragement, do not hesitate to reach out. Let's make BRCMUN25 a conference to remember—a place where ideas flourish and friendships are formed.

Thank you once again for being here. I look forward to witnessing the incredible contributions each of you will bring to the table. Let's make this journey not only successful but also inspiring and meaningful for us all.

Sincerely,

Melek Defne Boyraz
daphneleave@outlook.com

3.2. Letter from Vice Chair

Dear Delegates,

Firstly, it is an amazing privilege for me to be with you and be your vice-chair in this committee and conference.

My name is Zeynep Su Dedeoğlu, and I am going to be your vice-chair for the upcoming 3 days. I am a 9th-grade student in Gelişim Schools, and this MUN will be my 6th experience and my first experience on the chairboard.

Our committee is the World Health Organization (WHO), and in the upcoming days, we are going to have fruitful debates about "Promoting Mental Health Awareness and Support Systems." We will discuss the major issues regarding this agenda and find practical solutions. As everyone of you will talk about your nation's policies, all the delegates will debate. In conclusion, all of you will be together in this committee to ensure a good resolution. I do not doubt that you all will do admirably.

I urge you to approach the committee with an open mind, curiosity, and preparation. As the chairboard, we are always available to answer your questions, so don't be scared to ask. Discuss the policies of your nation and, above all, cooperate. In my capacity as your vice-chair, I hope that we will all remember these three days. Do not hesitate to get in touch with us in any circumstance.

Zeynep Su Dedeoğlu
zeynepsudedeoglu6@gmail.com

3. Introduction to Committee

3.1 Introduction to the World Health Organization (WHO)

The World Health Organization, often abbreviated as WHO, is a specialized organization affiliated with the United Nations, tasked with addressing international public health. The main purpose of the organization, which is included in the constitution, is defined as "ensuring that all people achieve the highest possible level of health". Headquartered in Geneva, Switzerland, WHO was founded on April 7, 1948, and today operates through more than 150 field offices with 6 semi-autonomous regional offices around the world.

3.1 History

On July 19 - July 22, 1946, the WHO Constitution was adopted at the International Health Conference held in New York, signed by representatives of 61 countries on July 22 of the same year, and entered into force on April 7, 1948. This date is celebrated every year as World Health Day.

Since its establishment, the World Health Assembly (WHA), the executive body of WHO, held its first meeting on July 24, 1948. In this process, the WHO has started its activities by taking over the duties of its previous structures, such as the League of Nations Health Organization and the International Hygiene Bureau. The organization started to work effectively in 1951 with the provision of financial and technical support.

WHO has played an important role in many global health achievements to date. These include developments such as the Alma-Ata Declaration of 1978 (on primary health care), the official elimination of smallpox in 1980, the adoption of the Framework Convention on Tobacco Control in 2003, and the revision of the International Health Charter in 2005.

Today, the WHO has attracted attention especially for the role it has played in the COVID-19 pandemic. March January 30, 2020, declared this outbreak a public health emergency of international importance (PHEIC), and on March 11, 2020, announced that it was a global pandemic.

WHO has also taken an active role in the issue of mental health, which has become an important part of the agenda in recent years. Together with member states and various partners, it conducts studies to promote mental health, prevent mental disorders, and increase access to high-quality, human rights-respecting health services.

In this context, WHO launched a project titled ”Private Initiative for Mental Health (2019-2023)" in 2019. The goal of this initiative is to expand access to mental health services in 12 priority countries and provide 100 million additional people with quality, affordable care.

4. Understanding Mental Health Awareness

4.1. What is Mental Health?

Mental health is a state of mental well-being that makes it possible for an individual to cope with the stresses brought by life, to realize their abilities, to be productive in their learning and working life, and to contribute to society. It has a value in its own right and is functional for the overall quality of life.

The factors affecting mental health vary at the individual, familial, social, and structural levels. Most people are resilient, but individuals exposed to adverse living conditions such as poverty, violence, disability, and inequality are at a higher risk of developing mental health problems.

Although many mental disorders can be effectively treated at relatively low costs, health systems still experience serious shortcomings in this area. There are large gaps in access to treatment worldwide, and the services provided are often inadequate or of poor quality. Individuals with mental health problems also face stigma, discrimination, and human rights violations.

4.2. The Relationship Decoupled Between Mental and Physical Health

Mental health does not just mean the absence of mental disorders; it is an integral and fundamental part of overall health. According to the WHO Constitution, health is not only the absence of a state of illness or disability, but also a state of complete physical, mental, and social well-being. This definition makes it clear that mental health is at the heart of the concept of health.

Mental health is shaped by the interaction of socioeconomic, biological, and environmental factors. Effective, low-cost public health approaches and cross-disciplinary collaborations are available to protect, develop, and restore this area.

Mental health has a direct impact on an individual's capacity to express emotions, think, form social relationships, be productive, earn income, and enjoy life. Therefore, the promotion, protection, and improvement of mental health should be recognized as a shared responsibility not only of individuals but also of societies.

5. Common Mental Health Problems

5.1. Depression

Depressive disorder (or depression as it is commonly called) is one of the most common mental health disorders. A long-term depressed mood is characterized by a decrease in the capacity to enjoy or a loss of interest. Depression is different from ordinary mood swings in everyday life and can negatively affect all areas of a person's life, including family, social environment, and work life.

Depression can be seen in every individual; however, the risk of occurrence is higher in individuals who have undergone difficult life experiences such as violence, trauma, and loss. The incidence of depression in women is higher than in men. About 3.8% of the population worldwide is affected by depression, which is about 5% in adults (4% in men, 6% in women). For individuals over the age of 60, this rate reaches 5.7%. In total, about 280 million people experience depression.

Depression is about 50% more common in women. More than 10% of pregnant women and postpartum women worldwide experience depression. More than 700,000 people die by suicide every year, and suicide is the fourth most common cause of death among young people between the ages of 15 and 29. Although effective treatment methods are known, more than 75% of individuals, especially in low- and middle-income countries, cannot receive any treatment. The main barriers to access to treatment are insufficient resources, lack of specialists, and stigma.

5.2. Anxiety Disorders

Everyone may feel anxiety from time to time; however, in individuals with anxiety disorder, this state of fear and anxiety is intense, constant, and extreme. Anxiety is usually accompanied by physical tension, intensity of thought, and behavioral difficulties. This condition significantly affects a person's daily life and can persist for a long time if left untreated.

Anxiety disorders; individual, family, educational, social, and work life can be affected. According to 2019 data, about 301 million people worldwide experience this disorder, which makes anxiety the most common mental disorder. About 4% of the global population currently experiences an anxiety disorder.

Although there are effective treatment options, only 27.6% of people in need receive treatment. The main reasons for this include the Deceptiveness of the situation, lack of services, lack of specialists, and social stigma.

5.3. Schizophrenia

Schizophrenia is a chronic mental disorder that is accompanied by severe impairments in the perception of reality and leads to significant changes in behavior. The main symptoms are:

Fixed delusions: firmly believing in beliefs that have been proven to be unreal,

Constant hallucinations: hearing, seeing, feeling things that are not there,

Feeling of loss of control: The thought that thoughts have been placed or received in a person's mind by someone else,

Disorganized thinking and talking, meaningless phrases,

Erratic or inappropriate behavior, strange movements,

Negative symptoms: lack of emotional expression, decreased speech, social withdrawal, and apathy.

About one-third of people with schizophrenia may experience a full recovery. In others, the symptoms may increase from time to time or progress to become chronic. In addition, impairments in cognitive functions such as memory, attention, and problem-solving are also often observed.

5.4. Obsessive-Compulsive Disorder (OCD)

Obsessive-Compulsive Disorder (OCD) is a long-term disorder in which an individual experiences involuntary and repetitive thoughts (obsessions) and turns to repetitive behaviors (compulsions) to reduce these thoughts. In individuals with OCD, these symptoms can seriously impair the quality of life and interfere with daily functionality. The symptoms are time-consuming and are a significant source of distress for the individual.

5.5. Eating Disorders

Although eating disorders are often incorrectly considered as a lifestyle choice, they are mental disorders that can be serious and sometimes fatal. These disorders are characterized by severe impairments in a person's eating behaviors, body perception, and emotions.

Symptoms of an eating disorder may include an excessive focus on food, body weight, and appearance. Among the most common types are Decapitated:

Anorexia Nervosa (excessive weight loss and starvation),

Bulimia Nervosa (binge eating followed by compensatory behaviors),

Binge Eating Disorder (episodes of uncontrolled eating) is found.

6. Support Systems For Mental Health

6.1. The Importance of Support Groups

Support groups provide a safe space where individuals can express themselves by coming together with people who are experiencing similar difficulties. These groups provide great benefits in terms of emotional solidarity, reducing the feeling of loneliness, and strengthening the sense of belonging.

Group members share their experiences and offer coping strategies and practical suggestions to each other, which allows individuals to cope more effectively with the challenges they face. At the same time, these groups contribute to increasing motivation and maintaining commitment to personal goals.

Social bonds formed through support groups can turn into lasting friendships over time. Participants develop their self-awareness through shared lives and gain new perspectives that support their personal development.

Most support groups require a specialist (psychologist, social worker, etc.) to be carried out under the guidance of. In this way, the negotiations will be more efficient and focused. In general, support groups are a powerful tool for recovery, development, and sustainable psychological well-being.

6.2. The Importance of Professional Help

Professional help plays a critical role in overcoming mental health-related difficulties. Trained specialists such as therapists, psychological counselors, and psychiatrists provide personalized, scientifically based support in coping with conditions such as stress, anxiety, and depression.

While emotional support from family or friends is valuable, the help offered by specialists is objective, structured, and evidence-based. Professional support contributes not only to the solution of existing problems but also to the personal development of the individual and the improvement of the quality of life.

6.3. The Role of Family and Friends

Family members and close friends have a great influence on maintaining mental health and encouraging the search for help. The emotional support offered by loved ones creates positive effects, such as feeling safe and reducing feelings of loneliness in the individual.

Family and friends can contribute to the early intervention process by noticing changes in an individual's behavior or mood. In addition, they can also offer practical assistance, such as conducting information research, and accompanying in the search for psychological support.

However, what is important in this process is that the immediate environment encourages the individual to get professional support when necessary, and he also knows his boundaries.

When professional help and support from the immediate environment are offered together, the Deceleration and recovery process in the mental health process becomes much more effective.

7. Mental Health Awareness Campaigns

7.1. Examples of Successful Campaigns

#BellLetsTalk (Bell Canada)
The #BellLetsTalk campaign, launched by Canadian-based telecommunications company Bell, aims to raise awareness of mental health in society and promote open communication. Every year, social media interactions (shares, tagging, etc.) the proceeds from it are donated to mental health initiatives. This campaign has significantly reduced the stigma about mental health in Canada and raised millions of dollars in funding.

Time to Change (United Kingdom)
The Time to Change campaign, based in the United Kingdom, aims to eliminate prejudices and stigma about mental health. The sharing of personal stories has been very effective in raising public awareness through the use of social media and cooperation with institutions. He encouraged people to openly express their mental problems and not to hesitate to get help.

Heads Together (United Kingdom)
The Heads Together campaign, launched under the leadership of the Duke and Duchess of Cambridge and Prince Harry, aims to encourage conversations about mental health in the United Kingdom. While the campaign aims to break the stigma around mental health, it has gained great public attention thanks to the support of the royal family.

#MyYoungerSelf (Mental Health Foundation - USA)
This campaign, run by the Mental Health Foundation, encourages individuals to reflect on their past mental health struggles and write supportive messages to their “younger selves”. Shared personal stories contribute to the normalization of mental problems and instill hope in those who are experiencing similar difficulties.

NAMI Campaigns (US National Alliance for Mental Health)
NAMI's campaigns, such as ”In Our Voice“ and ”StigmaFree," aim to raise social awareness by sharing individuals' experiences with mental illnesses. Thanks to these campaigns, while the message is given that individuals with mental health problems can lead productive and fulfilling lives, prejudices are also actively fought.

#BellLetsTalk Day
#BellLetsTalk Day, which is held once a year, aims to bring mental health issues to the agenda via social media and to collect donations on this issue. This special day makes both financial contributions and helps to raise awareness of mental health, to be accepted on a social level.

7.2. The Role of Social Media in Awareness

While social media is a powerful tool for raising awareness about mental health and spreading support campaigns, it also brings with it some risky side effects, especially for adolescents and young adults.

Dopamine effect and addiction: Social media causes dopamine secretion in the brain through interactions such as likes and comments. This ”feel-good" chemical triggers the reward mechanism. However, when there is not enough appreciation or approval, the self-confidence and self-esteem of individuals can be damaged.

Filters and body perception: Thanks to the filters widely used on platforms such as Snapchat, Instagram, and TikTok, users can easily change their appearance. This situation can lead to the formation of unreal perceptions of beauty, and individuals feeling dissatisfied with their bodies.

FOMO (Fear of Missing Out on Improvements): Because social media presents the lives of others by idealizing them, it can cause the user to feel that “others are living a better life”. This can lead to dissatisfaction, anxiety, and comparison-related stress.

Cyberbullying: According to 2020 data, 44% of internet users in the United States reported experiencing online harassment. Cyberbullying can deeply affect an individual's mental health through such means as teasing, insulting, threatening, or manipulating. Social media platforms can create easy grounds for this type of bullying, which can lead to long-term emotional trauma in individuals.

8. Digital Tools and Applications that Support Mental Health

8.1. Mobile Applications and Online Resources

Digital technologies have become important tools that provide accessible and flexible solutions to the challenges related to mental health. Thanks to mobile applications and online platforms, individuals can receive support in coping with stress, anxiety, and other psychological conditions at their own pace and by protecting their privacy.

These tools provide the user with scientifically based methods such as mindfulness exercises, cognitive behavioral techniques, and mood tracking. In this way, individuals gain skills such as emotional regulation, relaxation, focus, and developing healthy thinking patterns.

Thanks to online counseling and therapy sessions, professional support has become accessible without geographical borders. This flexibility and privacy are a great advantage, especially for individuals who are hesitant to get face-to-face help.

Digital mental health tools also increase mental health literacy. It provides educational resources for users to understand their mental health conditions and develop proactive coping

strategies. Features such as mood monitoring make it easier for a person to observe themselves and turn to professional help if necessary.

However, these tools are not a substitute for face-to-face professional intervention in serious cases. Therefore, ethical use, data privacy, and protection of the quality of intervention are of critical importance for the sustainability of digital applications.

9. Mental Health Education in Schools

9.1. Programs for Students

Mental health trainings given in schools are of vital importance in terms of improving students' emotional resilience, ensuring early intervention, and supporting well-being. These programs provide students with both mental health knowledge (literacy) and instill social-emotional skills such as awareness, help-seeking skills, and empathy.

The main purpose of the programs is for students to recognize mental problems, understand the importance of getting help, and, if necessary, they can seek support on their own or through friends. Usually, mindfulness studies, relaxation techniques, problem-solving skills, and peer support groups are also included in these programs.

In addition, anti-stigma campaigns organized in schools make it easier for students to openly talk about mental health issues. Trainings are usually carried out in the form of in-class lessons, seminars, and guidance studies, and are supported by psychological counselors and guidance counselors.

Research shows that such programs improve students' academic achievement, social relationships, and overall quality of life. Early interventions create a healthier school environment by preventing the progression of mental health problems.

9.2. The Role of Educators in Mental Health Awareness

Teachers play a key role in raising awareness of mental health in the school environment and creating a supportive learning atmosphere. Thanks to their close interaction with students, they are at the forefront of noticing and directing the early signs of mental problems.

The fact that educators have mental health literacy allows them to correctly interpret behavioral changes, academic regression, and emotional fluctuations. This competence should be strengthened through in-service training and seminars.

Teachers also set an example to students about healthy coping methods, empathy, and emotional expression. By providing an open communication environment, they create safe spaces where students can share their concerns.

With the inclusion of subjects such as endurance, stress management, and emotional awareness in the course content, students become better-equipped individuals. The cooperation established by teachers with school psychological counselors and parents provides holistic support for students.

Finally, teachers can become advocates of policies that make mental health a priority at the system level in schools. These efforts create a school climate in which students are supported not only academically, but also psychologically.

10. Mental Health at Work

10.1. Creating Supportive Working Environments

Supporting mental health in the workplace directly affects the well-being of employees, productivity, and corporate success. Supportive environments not only prevent mental health problems but also encourage employees to seek help and facilitate the establishment of a work-private life balance.

The first step is to raise awareness about the mental health of employees through awareness and training programs. These trainings reduce criminalization and encourage open communication between employees.

Flexibilities such as flexible working hours, remote working opportunities, and task sharing enable employees to manage their workload more healthily. In addition, employee support programs (EAP) and the provision of psychological counseling services also respond to spiritual needs.

The role of leaders in this process is great. An empathetic management approach, regular feedback, and an open-door policy make employees feel valued.

Workload balance, clear task definitions, and a culture of appreciation contribute to both reducing stress and increasing employee loyalty. The zero tolerance policy against exclusionary and discriminatory behaviors increases psychological safety.

Research shows that supportive work environments reduce absenteeism, increase employee loyalty, and make a positive contribution to corporate performance. Therefore, institutions that prioritize mental health both increase the well-being of their employees and achieve sustainable success.

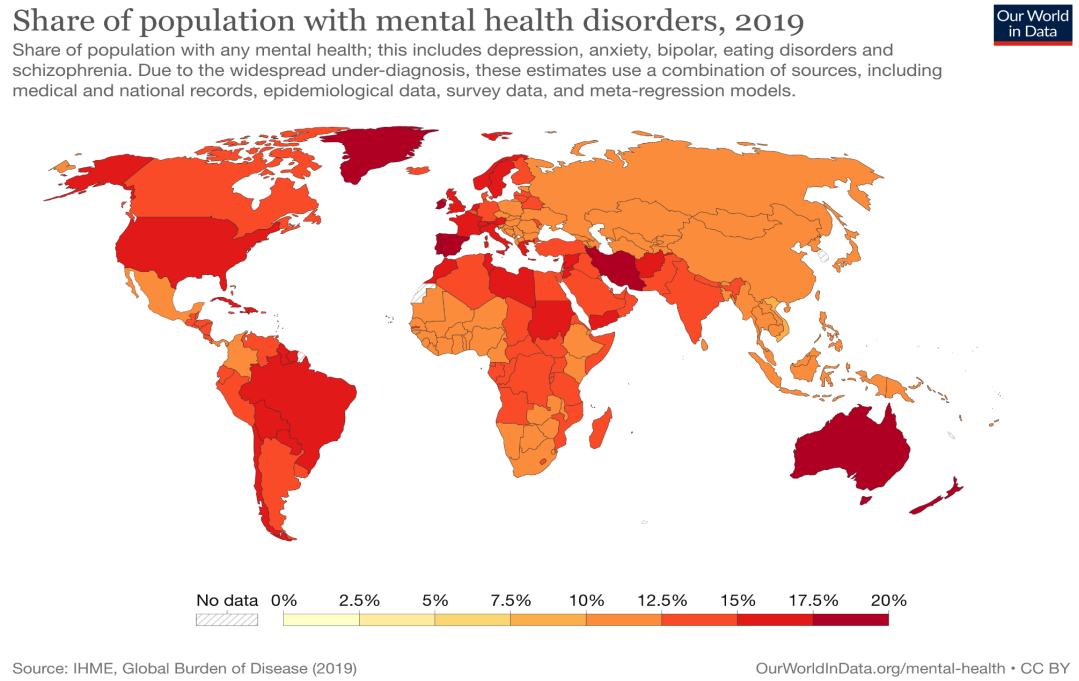
11. Global Mental Health Trends: Understanding the Crisis

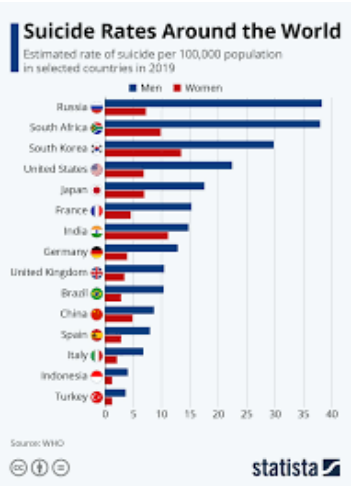
11.1. Prevalence of Mental Health Disorders

Mental health is a cornerstone of overall well-being, yet it remains one of the most neglected areas of public health worldwide. Despite its critical role in shaping individuals' lives and societal outcomes, mental health disorders are surrounded by stigma and often overlooked in healthcare systems.

Mental health disorders affect over one billion people globally, with depression and anxiety ranking as the most common. According to the World Health Organization (WHO), depression affects approximately 280 million people worldwide, making it a leading cause of disability. Anxiety disorders are similarly widespread, impacting 264 million individuals. Severe mental health conditions, such as bipolar disorder and schizophrenia, also contribute significantly to the global burden of disease.

Children and adolescents are not exempt from this crisis; 10–20% of young people experience mental health disorders. The consequences are far-reaching, as untreated mental health conditions during youth can lead to lifelong struggles, affecting education, employment, and relationships.





11.2 Suicide: A Leading Cause of Death

Suicide is a tragic and preventable outcome of untreated mental health disorders. Each year, over 700,000 people die by suicide, with it ranking as the fourth leading cause of death among individuals aged 15–29. The global suicide rate stands at 9 per 100,000 people, with significant

disparities across regions. For example, low- and middle-income countries (LMICs) account for more than 77% of global suicides.
Gender differences in suicide rates are also notable: men are more likely to die by suicide, while women are more likely to attempt it. Stigma, lack of access to care, and societal pressures contribute to these alarming statistics.

11.3.The Treatment Gap

One of the most concerning trends in global mental health is the treatment gap, with the WHO estimating that over 75% of individuals in low- and middle-income countries (LMICs) with mental health conditions receive no treatment. Even in high-income countries, access to mental health services remains inadequate, with many individuals facing long waits for specialized care. This gap is driven by several systemic challenges, including funding shortfalls, as most countries allocate only about 2% of their national health budgets to mental health. There are also significant workforce shortages, with fewer than 13 mental health workers per 100,000 people globally, leading to stark disparities in service availability. Additionally, cultural and societal stigmas often discourage individuals from seeking help, further exacerbating the treatment gap.

11.4.The Post-Pandemic Mental Health Crisis

The COVID-19 pandemic further highlighted the fragility of global mental health systems. Isolation, economic hardships, and grief caused a surge in mental health conditions, with anxiety and depression rates increasing by over 25% in the first year of the pandemic. The pandemic also strained already underfunded mental health services, leaving millions without adequate care.
Global mental health trends reveal a pressing public health crisis that demands immediate and sustained attention. The high prevalence of mental health disorders, alarming suicide rates, and a persistent treatment gap highlight the urgent need for robust mental health systems worldwide. Addressing these challenges requires a multi-faceted approach that includes increasing funding, reducing stigma, and integrating mental health care into primary health services.

12. Current Challenges in Global Mental Health

Mental health continues to be a significant global challenge, despite growing awareness and efforts to improve care and accessibility. As nations work toward advancing mental health systems, several key challenges persist that hinder progress. These include stigma, underfunding, cultural barriers, and the lingering effects of the post-pandemic mental health crisis. Each of these factors compounds the difficulty of providing adequate mental health support to individuals worldwide, especially in low- and middle-income countries (LMICs). Addressing these challenges is crucial for achieving sustainable mental health improvements and ensuring that everyone has access to the care they need.

12.1 Stigma Surrounding Mental Health

One of the most pervasive challenges in mental health care is the stigma associated with mental health conditions. Across cultures and societies, mental illness is often misunderstood, leading to discrimination and social exclusion of those affected. People with mental health disorders frequently face prejudice, which can discourage them from seeking help due to fears of being labeled as “weak” or “unstable.”

This stigma is especially pronounced in communities where mental health issues are considered a taboo subject or a sign of personal failure. The fear of judgment can prevent individuals from accessing treatment, thereby exacerbating the conditions they suffer from. Efforts to reduce stigma have been made through global awareness campaigns, but changing deep-seated cultural perceptions takes time. Until stigma is effectively tackled, many people will continue to suffer in silence, unable to take the first step toward recovery.

12.2.Underfunding of Mental Health Services

Despite the growing recognition of the importance of mental health, many countries allocate a minuscule portion of their health budgets to mental health services. On average, countries spend less than 2% of their health budgets on mental health care. This underfunding results in a lack of infrastructure, insufficient numbers of trained professionals, and inadequate treatment options, particularly in LMICs. Inadequate funding has tangible consequences. In many countries, there are not enough mental health professionals to meet the needs of the population, leading to long waiting times for treatment. For example, in some regions, individuals may wait for months or even years to see a specialist. Without proper investment, mental health services will continue to be underdeveloped, limiting access to care for millions of people worldwide.

12.3. Cultural Barriers to Mental Health Care

Cultural beliefs and traditions can also present significant barriers to mental health care. In many societies, mental health issues are not recognized as medical conditions but as signs of personal or spiritual weakness. In such contexts, people may rely on alternative forms of care, such as religious or spiritual practices, rather than seeking professional medical or psychological support. This reluctance to engage with conventional mental health services often stems from cultural attitudes that view mental illness as something shameful or stigmatizing. Additionally, cultural and linguistic differences can create obstacles in accessing services. For instance, people from minority ethnic groups may face challenges in finding providers who understand their specific cultural needs. Mental health care systems that fail to recognize and respect cultural differences often fail to reach those who need them most.

12.4.The Post-Pandemic Mental Health Crisis

The COVID-19 pandemic has left an indelible mark on global mental health, leading to a post-pandemic mental health crisis that continues to affect millions of people worldwide. The social isolation, economic disruptions, loss of loved ones, and uncertainty caused by the pandemic have resulted in widespread increases in mental health conditions, particularly depression, anxiety, and stress. The WHO reported that the global prevalence of anxiety and depression increased by 25% in the first year of the pandemic alone. The pandemic also placed immense strain on already fragile mental health systems, particularly in LMICs, where resources were stretched thin. Health systems that were overwhelmed with the physical

13. The Impact of Non-Communicable Diseases on Global Health

Non-communicable diseases (NCDs) account for about 74% of all deaths worldwide and are the most common types, especially cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes. These diseases usually progress slowly, but if left untreated, they lead to serious complications and early death.

The impact of NCDs is not limited only to individuals; it strains health systems, increases social security spending, and negatively affects the economic growth of countries. The World Health Organization identifies NCDs as one of the biggest obstacles to sustainable development. Especially in developing countries, the inadequacy of health systems and the limited opportunities for early diagnosis further increase this burden.

14. The Role of Lifestyle Factors in the Spread of NCDs

Modern lifestyle habits are among the main factors in the increase of non-communicable diseases today. The main risk factors are:
Tobacco and alcohol use, unhealthy diet (high sugar, salt, and saturated fat consumption), physical inactivity, air pollution, and stress.
While these factors are among the behaviors that individuals can control, they are directly related to the social, cultural, and economic context. Especially low-income individuals face more obstacles in accessing habits such as healthy eating and sports. Therefore, lifestyle-based prevention strategies should be supported by interventions at the societal level, not just the individual.

15. The Responsibility of Health Systems and Policy Makers

Countries' health systems and policymakers play a major role in controlling NCDs. However, many countries do not have the necessary resources and strategic infrastructure to combat these diseases. While a large part of health expenditures is devoted to infectious diseases and emergency interventions, NCDs are often neglected or given late priority.

In this context, an effective policy approach should include:

Early detection and screening programs

Community-based education and awareness campaigns

Affordable and sustainable treatment services

Integration of NCD measures into national health strategies

Countries should adopt data-based and inclusive approaches that are compatible with the World Health goals when creating NCD strategies.

16. International Cooperation and Sustainable Development Perspective

Non-communicable diseases are a global health problem that knows no borders. For this reason, not only national but also international cooperation is essential for a solution. Organizations such as the World Health Organization (WHO), the United Nations (UN), and the World Bank provide technical and financial support to combat NCDs.

Target number 3.4, included in the UN's 2030 Sustainable Development Goals, aims to reduce premature deaths caused by NCD by one third. In this direction:

Sharing of knowledge and experience between countries,

Joint financing models,

Ensuring fairness in access to medicines and technology,

Multi-stakeholder cooperation with non-governmental organizations comes to the fore.

In addition, it has once again become clear that resilient health systems should be created to prevent NCD patients' access to treatment from being interrupted during periods of crisis (for example, pandemics).

17. Glossary

- **Non-Communicable Diseases (NCDs):** Chronic diseases that are not transmitted from person to person. They typically progress slowly and are influenced by genetic, physiological, environmental, and behavioral factors (e.g., cardiovascular diseases, cancer, diabetes).

- **DALY (Disability-Adjusted Life Year):** A measure that combines years of life lost due to premature death and years lived with disability, reflecting the total burden of disease.

- **WHO (World Health Organization):** A specialized agency of the United Nations responsible for international public health.

- **Lifestyle Factors:** Behaviors and habits (e.g., smoking, poor diet, lack of exercise) that significantly affect the risk of developing NCDs.

- **Primary Prevention:** Strategies to prevent the onset of disease, typically through lifestyle changes or policy interventions.

- **Global Health Burden:** The impact of diseases on populations measured in terms of mortality, morbidity, and economic costs.

- **SDGs (Sustainable Development Goals):** A set of global goals set by the United Nations, including Goal 3.4, which aims to reduce premature mortality from NCDs by one-third by 2030.

- **Health System Capacity:** The ability of a country's health infrastructure and workforce to provide necessary services, including prevention, diagnosis, and treatment.

- **Equity in Health:** The principle of fairness in health care access, treatment, and outcomes for all population groups.

- **Social Determinants of Health:** Non-medical factors like income, education, employment, and social support that influence health outcomes.

18. Questions to Ponder:

- How do societal norms and cultural beliefs about mental illness shape the accessibility of mental health care?
- What programs should be developed and implemented to enhance mental health awareness within educational institutions?
- How can global health organizations address the growing mental health crisis in low- and middle-income countries?
- How could global health organizations shift their focus to prevent mental health crises, rather than only responding after they occur?
- What role does technology play in expanding access to mental health services, especially in remote or underserved areas?
- In what ways does social media contribute to mental health issues, and how can users protect their mental well-being while using it?
- Could virtual mental health communities replace traditional in-person therapy, and what might be the benefits or drawbacks of such a shift?
- What strategies can be implemented to reduce the burden of non-communicable diseases in low- and middle-income countries?
- To what extent should governments intervene in individual lifestyle choices (such as smoking, diet, and alcohol consumption) to prevent NCDs?
- How can international cooperation be strengthened to ensure equitable access to treatment and medication for non-communicable diseases worldwide?

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