**FORUM:** GENERAL ASSEMBLY II

**QUESTION OF:** Protecting mental health during isolation and times of crisis.

**SUBMITTED BY:** Japan

**CO-SUBMITTERS:** Italy, Venezuela, China

THE GENERAL ASSEMBLY,

*Deeply concerned* by the COVID-19 pandemic, its negative impacts on physical and mental health and social well-being, as well as the negative impacts on economy and society,

*Recalling* the United Nations resolutions A73/CONF./1 Rev.1 on “Covid-19 Response” and A/RES/74/274 on “International cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19”,

*Fully* alarmed of the economical constraints and pressures due to COVID-19 lockdowns,

*Acknowledging* the implementation of “The Mental Health Act” (1983) in Member States,

*Believing* in the Convention on the Rights of Persons with Disabilities, CRPD, treaty created and implemented by the United Nations on 3 May 2008,

*Deeply Regretting* accessibility, preparation, and coordination of local, national and international health services during times of crisis,

1. Urges the approval and promotion of online, digital or telephone medical services in all Member States through platforms such as:
   1. Internationally used social medias such as:
      1. Instagram,
      2. Facebook,
      3. Twitter,
      4. Other social medias used by the majority of citizens,
   2. National/local television,
   3. Investment and promotion of third party NGOs including but not limited to:
      1. The Ability Foundation,
      2. Center for Citizens with Disabilities (CCD),
      3. Other National third party organization;
2. Urges that Member States consider promoting physical interaction and face-to-face interventions amongst the community;
3. Suggests that each country evaluate their current situation regarding the pandemic and adapt their approach based around their regulations and resources, taking into consideration certain factors such as, but are not limited to:
   1. Maximum number of people allowed per gathering,
   2. Infrastructures available at a:
      1. National level,
      2. Per city,
      3. Per district;
4. Further requests collaboration between each Member State with the World Health Organization, WHO, and between private-sector organizations and government-run organizations, by making accessible any new known mental health and COVID-19 related knowledge such as:
   1. Lessons learned:
      1. Failures and successes of Member States,
      2. Consequences of certain lockdown or law implementations,
   2. Experiences,
   3. Best practices and data,
   4. Materials and necessities needed in order for the Member States to have an effective response towards COVID-19 and its impacts;
5. Endorses the funding and accessibility of required equipment and technology to both private and public health municipalities, and facilitating doctors and patient communications;
6. Encourages all Member States to inform and educate its citizens of mental health risks while in lockdown, and to provide ways for its citizens to access medical facilities by:
   1. Supply basic information on government websites by providing information about mental health and care,
   2. Collaborating with the WHO to make systems to assure citizens access to:
      1. Doctors,
      2. Prescribed drugs,
      3. Necessary equipment for citizens in serious conditions;
7. Reaffirms the pressures economically and politically on each Member State and the difficulties on ensuring mental, social, and physical wellness on all Member States;
8. Calls for the guarantee of timely and equitable distribution of drugs to all Member States, and the availability of certain medical drugs necessary to locations where this issue is more prominent;
9. Further requests that each Member State attend and confront current pressures imposed by citizens such as harsh stigmatization, discrimination, and harassment against medical workers and to ensure their welfare while carrying out their professional duties;
10. Recommends the initiation and funding of public and private mental support systems to transition to and launch telephone and/or social media consultation systems instead of the traditional face-to-face services;
11. Calls upon the collaboration between Member States to guarantee the preparation and funding of any future pandemics, planning out key aspects of life of citizens such as mental health;
12. Calls for the World Health Organization to consider including nations on which they will try to implement the "WHO Special Initiative for Mental Health” program.