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**General debate on national experience in population matters:
realizing the future we want — integrating population issues
into sustainable development, including the post-2015
development agenda**

Statement submitted by Society for the Psychological Study of Social Issues, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

Psychological contributions to the integration of population issues into sustainable development and the post-2015 agenda

Submitted by the Society for the Psychological Study of Social Issues and co-sponsored by the International Association of Applied Psychology, the World Council for Psychotherapy, the International Council of Psychotherapists and other organizational members of the Psychology Coalition of NGOs accredited at the United Nations.

Although some progress has been achieved in population issues established at the 1994 International Conference on Population and Development (ICPD), the goals have not been completely fulfilled, especially for persons and groups that are minorities, poor, female, and disabled. Therefore, we as members of the Psychology Coalition of NGOs accredited at the United Nations (PCUN) offer this statement to advocate for: (1) the importance of psychosocial factors to the implementation of population issues and to sustainable development beyond 2015; (2) fulfilment of the physical and mental health and psychosocial well-being of children; and (3) the inclusion of international migrants.

- I. Ensure that psychosocial well-being and mental health are promoted and fulfilled as human rights for all population groups

For the first time in United Nations history, mental health and well-being has been included in global agenda, in the proposed Sustainable Development Goals. Human rights standards and documents of United Nations processes increasingly recognize psychosocial well-being and mental health as basic human rights. Psychological literature and research confirm that maltreatment from abuse, rape, torture, war, and deprivation due to conditions including poverty inflict persistent psychological and mental health wounds. Research further affirms the inclusion, as proposed by the World Health Organization (WHO), of mental health as a crucial factor in overall health, defined as a “state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (http://www.who.int/features/factfiles/mental_health/en/).

Poor mental health is both a cause and a consequence of poverty, often including conditions of isolation and inadequate access to education, economic resources and necessary social services. These multiple stressors cause anxiety and depression, negatively impacting an individual’s ability to cope, resulting in an intergenerational cycle of negative consequences.

Therefore, PCUN recommends that governments, the international community and all stakeholders:

- Include programmes and policies in all planning that promote psychosocial well-being as an essential aspect of sustainable development and that mental healthcare is held to a high standard;
- Make mental health care accessible to all sectors of society, including children, women and those who are marginalized, as a requirement of human rights and social justice;

- Implement the social protection floor initiative, including access to mental health care within primary health care, using a lifespan approach in taking care of basic human needs of all vulnerable groups;
 - Provide trained psychologists, mental health counsellors, and social workers well versed in culturally-specific methodology and techniques, to train and work with local communities, especially in rural areas, to recognize mental health problems and to provide services in an informed, non-discriminatory manner;
 - Ensure that all services and interventions are implemented according to ethical principles.
- II. Limit the exposure of children to toxic stress to ensure their rights to physical health, mental health and psychosocial well-being

Children are being exposed to high levels of stress from various debilitating conditions including: poverty, malnutrition, and preventable diseases; disparities in their access to physical and mental health care; disparities in their access to formal education; abuse and exploitation, including trafficking and sexual exploitation; violence in the family, the community and armed conflict; hazardous child labour; harmful traditional practices; loss of parental or family care due to death of parents and separation during migration.

Scientific findings suggest that without adult support, long-term consequences of exposure to toxic stress can have mental and physical health consequences lasting into adulthood. These include: increased risk of cardiovascular disease, depression, anxiety, and post-traumatic stress disorder. When a child is threatened, biochemical reactions in the body result in increased heart rate, blood pressure, and stress hormones. A supportive relationship with family or other adults lessens the child's stress responses to a tolerable level.

Therefore, we urge Governments, the international community and all stakeholders to:

- Use best practices to promote, protect, and fulfil children's right to quality physical health, mental health and psychosocial well-being;
- Invest more resources and front-load science-based investments to support infant and early childhood physical and mental health development;
- Integrate physical and mental health services supporting child development and life-long holistic health;
- Provide parents and early childhood caregivers with expert assistance and education to help children exhibiting symptoms of abnormal responses to stress before these produce pathology;
- Provide specialized interventions and services for children who have been trafficked and subjected to armed conflict, hazardous labour, or sexual exploitation;
- Provide stress management training for children in formal school curricula;
- Increase the availability of assessment and treatment for children with serious stress-induced physical and mental health problems.

III. Promote and support the inclusion and contribution of international migrants

Many international migrants experience human rights violations stemming from racism, ethnocentric biases and xenophobia.

Therefore, we call upon and urge:

- All governments and stakeholders to support the ratification and implementation of human rights standards in support of the well-being of international migrants;
- All governments and stakeholders to address vulnerabilities experienced by international migrants;
- Countries of origin to practice good governance to fulfil the civil, political, economic, social, and cultural rights of people within their borders, helping reduce the pressures toward international migration;
- Governments to ratify core human rights instruments, including the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families;
- Governments to promote effective implementation of human rights instruments;
- Governments to establish rights-centred national legislation, programs and practices to implement the international human rights standards and ILO conventions in order to protect the inherent human dignity of international migrants;
- Governments to develop and implement laws, policies and practices to protect international migrants from racial profiling and violence;
- Governments to review and transform their laws, policies and practices on migration to comply with international human rights standards;
- Governments, United Nations agencies, civil society and humanitarian organizations to protect the rights of international migrants to self-determination enabling migrants to participate in decisions affecting their welfare;
- Host countries and civil society organizations to launch media and education campaigns for social inclusion, to discourage xenophobia and communicate about the human rights of migrants and their contributions to society;
- Both countries of origin and host countries to protect and support children of migrant mothers who were raped and children of mixed racial/ethnic parentage born in the host country.

In cases of migration, research further shows that gender discrimination intersects with racial/ethnic discrimination and other risk factors resulting in gender-based abuse and violence including: trafficking, sexual exploitation, domestic violence, harmful traditional practices, and exploitation in domestic and care-giving work.

Therefore, we call upon and urge Governments, United Nations agencies and civil society organizations to:

- Promote gender equality and social justice for migrants through gender equality legislation, human rights education and public awareness campaigns;
- Develop legislation that institutionalizes penalties for human trafficking for sexual and labour exploitation and processes for apprehending violators of these laws;
- Provide human resources, policies, programmes, facilities, and services to promote the mental health and psychosocial recovery/well-being of women and girls having experienced physical, sexual or psychological violence.

Children who leave their countries of origin, are left behind, or are born to migrant parents in transit and destination countries experience special risks. Many migrant children are potential victims of human trafficking, sexual exploitation and labour exploitation. Unaccompanied child and adolescent migrants are exposed in transit and at destination to dependency on adults who may abuse or exploit.

Therefore, we urge Governments to:

- Conduct birth registrations of migrant children and collect family data disaggregated by age, sex, race/ethnicity, disability status and national origin;
 - Provide access to physical and mental health care for migrants;
 - Ensure that young children and adolescents are not separated for long periods from attachment figures (parents, guardians, siblings) and that migrant children and adolescents are not isolated or ostracized in transitional educational environments or detention;
 - Provide access to education for all migrant children as the most effective tool to integrate migrant children into host societies (UNICEF, 2012);
 - Ratify and implement the ILO 2011 Convention concerning Decent Work for Domestic Workers.
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