



**PERMANENT MISSION OF JAMAICA
TO THE UNITED NATIONS**

STATEMENT BY

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TO THE UNITED NATIONS**

61ST SESSION COMMISSION ON THE STATUS OF WOMEN

**SIDE EVENT ON *"VIOLENCE, CRISES, ADVERSITY, AND NON-COMMUNICABLE
DISEASES (NCDS): IMPLICATIONS FOR GLOBAL HEALTH AND
WELL-BEING FOR WOMEN AND CHILDREN***

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Excellencies,
Distinguished panellists,
Ladies and gentlemen,

I am pleased to welcome you to this side event addressing the impact of crises, such as conflict, violence, stress and adverse life events on women's health and well-being. Let me thank our moderator Dr Elizabeth Carll for sharing the vision with us, and also the numerous cosponsors who joined in to ensure that we highlight this important area during this session of the CSW.

2017 marks the tenth anniversary of the Port-of-Spain Declaration "Uniting to Stop the Epidemic of Chronic NCDs". That landmark pioneering document by CARICOM Heads gave impetus to the drive to broaden the lens through which NCD prevention and control was seen. After years of discourse we have already confirmed the fact that the impact of Non-Communicable Diseases is both a health and development issue. Chronic illness, disability and premature death undermine socio-economic development and impair the health outcomes of individuals and communities. While NCDs affect all countries, the Caribbean experiences disproportionately high rates of prevalence and so for my region, it is a pressing matter requiring urgent ongoing attention and action at the international level.

The 2030 Agenda for Sustainable Development sets the stage for a new paradigm in the quest for achieving sustainable development. The agenda is broad and universal; it encapsulating the cross-cutting nature of sustainable development. With its 17 SDGs and 169 targets, it places us on a trajectory to achieving improved life outcomes for our citizens on a safer and healthier planet. With regard to NCDs, Target 3.4 commits to both reducing premature mortality from NCDs, as well as promoting mental health and well-being. As is the case with many other cross-cutting goals and targets, success in this area will depend on progress made in attaining other Goals. Conversely, the realisation of Target 3.4 will support the achievement of other Goals.

The important task of implementation is now underway in earnest, as we are conscious that the clock is ticking. On the NCDs front much work is there to be done, but headway has already been made. This is primarily due to the prior actions and commitments made in the context of the WHO, which arose from the 2011 and 2014 Declarations on NCDs that were adopted at the respective General Assembly High-Level Meetings.

There is a well-established strategic concept underpinning the global prevention and control of NCDs, which is that we need to ensure multi-sectoral and multi-stakeholder engagement in order to achieve meaningful success.

Ladies and gentlemen,

Jamaica is committed to the prevention and control of NCDs. We recognise that notwithstanding the stigma that is still attached to this disease within certain settings, mental disorders are prevalent throughout the world and are major contributors to morbidity, disability, and premature mortality. It is estimated that between 18 and 25% of the population suffer from a mental disorder.

I was interested to see a feature that CNN broadcast a few days ago on the high prevalence of mental health disorders among the entrepreneur community in Silicon Valley. They interviewed psychiatrist Dr. Michael Freeman, who studies the relationship between entrepreneurship and depression. He said that many of the personality traits found in entrepreneurs – creativity, extroversion, open mindedness and a propensity for risk – are also traits associated with ADHD, bipolar spectrum conditions, depression, and substance abuse. In a study that he conducted, he found that nearly half of the entrepreneurs interviewed said they experienced mental health issues at some point in their lives.

The difficulty many of them faced within the high-stress Silicon Valley environment is that were they to reveal their condition they would risk losing their business. One can easily see why. If a successful start-up is on the verge of being acquired, or if it is going to go public within the next year or so, the mere fact of knowing that the entrepreneur is associated with mental health issues could adversely impact the acquisition or the IPO.

According to the PAHO, across the world, the percentage of people with severe mental disorders who do not receive treatment is very high: 35 to 50% in high-income countries, and 75 to 90 % in low- and middle-income countries. The reasons behind this treatment gap include not only stigma and social exclusion, but also insufficient financial and human resources and outright discrimination.

Within the Caribbean, there is a demographic transition underway resulting in population ageing, with mental and neurological disorders in the elderly such as Alzheimer's disease, other dementias, and depression, contributing significantly to the burden of NCDs. We are full aware of the need to strengthen health care systems, so as to improve the delivery of mental health care and treatment of mental disorders. This needs, in particular, to occur at the primary health care level, where, integrated care models can be best developed and implemented

Mental health disorders are also a major public health burden for Jamaica, with depression being the most common among them. Over the past few years, we have commenced the integration of mental health into our primary care network, and are developing services for the mentally ill within the community, as we seek alternative ways to treat people outside of psychiatric hospitals.

An emerging issue is the increasing vulnerability of the Caribbean to natural disasters. These phenomena can lead to public health disasters and emergencies that can be extremely taxing on individuals and states which result in an increase in mental disorders among affected populations. In response, Jamaica is one of the countries in the Caribbean that has developed a Mental Health Disaster Preparedness Plan.

While more work is needed in the area of integrating the response to and treatment of mental health and non-communicable diseases, we are working towards addressing the mental well-being and implementing timely health promotion and interventions that will lead to a healthier population.

Evidence has shown that women are particularly vulnerable in times of disaster and conflict related crises. This means that in addition to bearing the burden of inequality, women also are more likely to be negatively affected by adverse life events. The impact of such traumatic events on mental health and well-being is inescapable. Added responsibilities of unpaid and unrecognised care for family members and children, being breadwinners, providing emotional support while ensuring the family's survival, all exacerbate multiple challenges already faced in situations of violence and conflict or natural disasters.

Migrant women, victims of trafficking, women facing violence and abuse and those living in poverty are at heightened risk of developing mental challenges. This leads to their marginalisation and diminished ability to rebound and ultimately move on with their lives. It will therefore be critical to ensure that diagnoses and treatment are available in conflict situations, particularly in post-conflict and refugee settings. There is a pressing need for the provision of comprehensive healthcare services for victims of violence or those receiving social benefits.

Ladies and gentlemen,

Next year will be the 2018 Review Meeting where the General Assembly will assess progress in the implementation of commitments made at the last review meeting in 2014. With this in mind and noting the urgency of advancing with the implementation of Target 3.4, it is my hope that we will see accelerated progress in attaining the mental health and well-being of women, in particular, and everyone in general. I look forward to the fruitful discussions this afternoon knowing that they will both inform and inspire our action in the weeks and months ahead.

Thank you.