

**MENTAL HEALTH STRATEGY FOR
UNITED NATIONS
UNIFORMED PERSONNEL**



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Foreword

In our shared mission to promote peace and security across the globe, the United Nations relies on the steadfast dedication of our uniformed personnel. While serving in diverse and often challenging environments, these men and women put their physical and mental well-being at risk. With appreciation for their commitment and in recognition of their unique challenges, we present this Mental Health Strategy for United Nations Uniformed Personnel.

In alignment with the global commitment to achieving the United Nations Sustainable Development Goals for 2030, which include ensuring healthy lives and promoting well-being for everyone at all ages, embracing a holistic definition of health is crucial. The World Health Organization defines health as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”. This comprehensive definition underscores physical, mental and social interconnectedness in fostering well-being.

In 2018, the United Nations took a significant step forward by introducing “A Healthy Workforce for a Better World: United Nations system mental health and well-being strategy, for civilian personnel”. However, deeper examination revealed that United Nations uniformed personnel face a distinctive set of workplace stresses and challenges.

This Mental Health Strategy underscores the critical importance of optimizing the mental health literacy of our uniformed personnel, thereby reducing the barriers to seeking support for mental health issues. The Strategy's extensive and highly informative annexes delineate comprehensive roles and responsibilities in preventing, protecting and promoting, and providing support for uniformed personnel, their families and leadership, in achieving the Strategy's objectives. We have been meticulous in ensuring that the content is not only gender-responsive but also culturally inclusive.

We wish to express our gratitude to uniformed mental health experts from various Member States and troops- and police-contributing countries (T/PCCs); the World Health Organization; and non-governmental organizations dedicated to mental health and their subject matter experts for their invaluable contributions to crafting this Strategy.

We acknowledge that this Strategy and its annexes may evolve as Member States and T/PCCs implement them. Your feedback will be instrumental in refining and adapting these resources and will contribute significantly to the well-being and resilience of United Nations uniformed personnel and their families.

This Strategy is a testament to our commitment for placing the mental well-being of our uniformed personnel who work tirelessly for a safer world at the forefront of our priorities.



Atul Khare
Under-Secretary-General
for Operational Support

Glossary

Critical Incident Trauma (CIT): An event that is outside the range of everyday experience; one that is sudden and unexpected, makes one lose control, involves the perception of a threat to life, and can include elements of physical or emotional loss. CIT can involve a wide range of situations, such as accidents, natural disasters, violent crimes, or any event that overwhelms an individual's capacity to cope and leaves them feeling helpless. The severity of the trauma can vary depending on the individual's personal experience and resilience.

Mental Health: A state of mental well-being that enables people to cope with the stresses of life, to realize their abilities, to learn well and work well, and to contribute to their communities. Mental health is an integral component of health and well-being and is more than the absence of mental disorders.

Mental Health Continuum Model: A spectrum of well-being with mental health and mental illness at either end. Depending on the circumstances of an individual at a given time, they may find themselves at one point on the continuum and shift position as their situation improves or deteriorates.

Mental Health Literacy: refers to an individual's knowledge, understanding, and awareness about mental health conditions and how to promote and maintain good mental well-being. It encompasses the ability to recognize when there might be a mental health concern, to understand the factors that contribute to mental health, and to know how and where to seek help or support for oneself or others.

Mental Disorder: As defined by the International Classification of Diseases 11th Revision (ICD-11), a mental disorder is a syndrome characterized by clinically significant disturbances in an individual's cognition, emotional regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes that underlie mental and behavioural functioning. These disturbances are usually associated with distress or impairment in personal, family, social, educational, occupational, or other important areas of functioning. This strategy uses the term "mental disorder" when discussing symptoms that rely on defined categories of mental disorders.

Potentially Morally Injurious Events (PMIEs): are experiences that refer to events or situations that can violate an individual's moral code and result in psychological distress or trauma. They can be subjective and vary from person to person, but they often involve experiences such as betrayal, perceived injustice, moral transgressions, or witnessing or perpetrating harm.

Potentially Traumatic Events (PTEs): These are unexpected events that can evoke extreme emotional reactions and potentially interfere with an individual's ability to function appropriately. These events usually involve personnel having experienced, witnessed, or been confronted with a single acute event, a prolonged one, or a series of events occurring over time that involve actual or threatened death or serious injury or threat to the physical integrity of self or others.

Psychological Resilience: refers to an individual's ability to effectively adapt and cope with adversity, challenges, trauma, or significant sources of stress, including the capacity to bounce back from difficult situations, maintain psychological well-being and continue functioning positively and healthily despite facing setbacks or challenging circumstances.

Psychological Self-care: refers to intentional and proactive practices individuals engage in to nurture and promote their mental and emotional well-being. It involves taking deliberate steps to maintain, enhance, and protect one's psychological health by managing stress, coping with challenges, and fostering a positive sense of self.

Stress: Stress can be defined as a state of worry or mental tension caused by a difficult situation. Stress is a natural human response that prompts us to address challenges and threats in our lives. Everyone experiences stress to some degree. However, how we respond to stress makes a big difference to our overall well-being.

Spiritual Fitness: The beliefs and practices that strengthen one's connectedness with sources of hope, meaning, and purpose. Spiritual fitness may contribute to developing overall wellness.

Stigma: refers to the negative attitudes, beliefs, and stereotypes held by individuals, groups, or institutions toward uniformed personnel experiencing mental health challenges or seeking mental health support. Negative attitudes and beliefs about mental health can influence people's behaviour and actions towards others. This stigma can create barriers to acknowledging and addressing mental health issues within the uniformed personnel community. Stigmatizing attitudes can lead to shame, reluctance to seek help, and a perception that seeking assistance for mental health concerns might negatively affect one's career or reputation.

Trauma Response: refers to the range of psychological, emotional, and physiological reactions an individual may experience in the aftermath of a traumatic event or situation. This response can encompass various emotions, behaviours, and physiological changes triggered by the memory or reminders of the traumatic experience. Common trauma responses include heightened anxiety, flashbacks, hypervigilance, avoidance of triggers, emotional numbing, mood changes, difficulty concentrating, and physical symptoms such as rapid heartbeat or sweating. Trauma responses can vary widely among individuals and may be influenced by factors such as the nature of the trauma, an individual's past experiences, and coping mechanisms.

Uniformed Personnel: refers to all military/police/justice and correctional personnel seconded from their respective Member State and deployed under a blue helmet as part of a military contingent/formed police unit or as Staff Officers, Military Observers, or Individual Police Officers.

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Project Manager: Dr. Adarsh Tiwathia, Deputy Director, DHMOSH/OSO/DOS.

Development and coordination: Dr. Shashikumar Ramadugu, Mental Health Officer, DHMOSH/OSO/DOS; Dr. Eric Vermetten, Consultant Psychiatrist, DHMOSH/OSO/DOS; Dr. Rakesh Jetly, Consultant Psychiatrist.

DHMOSH/DOS support team: Dr. Haraprudveswara Koka Rao, Consultant; Dr. Sophia Oteng, Senior Medical Officer; Brandy L. Bryant, Medical Healthcare Quality and Patient Safety Officer; Dr. Saurabha Urmi, Data Analyst.

Department of Peace Operations support team: Andrew W. Morritt, Associate Program Management Officer.

Mental Health Advisory Board from the following Member States:

Australia: Colonel Neanne Bennett;

Bosnia And Herzegovina: Kamaric Sanela;

Brazil: Captain Carolina Silveira, Lieutenant Commander Luciana Marzo Japiassu;

Burkina Faso: Captain Aïcha Traore;

Canada: Captain (Navy) Iain Beck, Lieutenant-Colonel Andrea Tukarea;

China: Lieutenant-Colonel Longbiao Cui, Colonel Yan Gao;

Czech Republic: Lieutenant-Colonel Pavel Kral;

East-Timor: Captain Manuel Pereira, Corporal Salvador Santos;

Ecuador: Major Maria Cuesta;

Germany: Colonel Peter Zimmermann, Anja Courte, Thomas Eibl;

Ghana: Lieutenant-Colonel Emmanuel Yobanya; Dr. Erica Danfrekua Dickson;

Greece: Captain Christos Pezirkianidis, Captain Sofia Theodorou;

India: Brigadier Vinay Chauhan, Colonel Raghu Mani;

Ireland: Major Dorota O'Brien, Dr. Fionnbar Lenihan;

Israel: Major Michal Lifshitz;

Mexico: Lieutenant-Colonel José Manuel Romero Torres;

Morocco: Lieutenant-Colonel Yassine Otheman;

Nepal: Brigadier General (Dr.) Namrata Rawal, Dr. Pradeep Manandhar;

Netherlands: Surgeon Pieter Eland, Major Martine Hueting;

Philippines: Major Christine De Jesus, Corazon Arce;

Portugal: Fernando Passos, Jorge Silva;

Romania: Lorina Ariton, Cătălin Călin;

Serbia: Lieutenant-Colonel (Dr.) Danilo Jokovic;

Slovakia: Ladislav Muller, Emilia Kinska;

Togo: Saliou Salifou.

Mental Health Advisory Board from the United Nations system and NGOs:

CISMS/DSS: M Sohail Ali,

DHMOSH/OSO/DOS: Dawn Straiton, Silvia Campo Sanchez;

MINUSCA: Kadidiatou Gouro;

MINUSMA: Colleen Brady;

MONUSCO: Annabelle Borg;

NATAL (Israel): Efrat Shaprut, Idit Michael, Ophir Peleg;

OMA/DPO (Focal Point): Lieutenant-Colonel Iulia Batista;

Police Division/OROLSI/DPO: Ahmed El Harrech;

UCSD/OSCM/DOS: Michael Mulinge Kitivi;

UNHQ Gender Parity Team: Annika Kovar, Thanujah Yogarajah;

WHO: Werner Obermeyer; Dr. Devora Kestel.

Executive summary

United Nations peace operations are deployed in challenging, non-permissive environments. Beyond traditional peacekeeping, where United Nations uniformed personnel monitor ceasefires and peace agreements in peaceful conditions, the Security Council increasingly pushes United Nations missions to new frontiers. In addition to working in challenging environments, most peacekeeping missions are responsible for safeguarding civilians from violence and addressing large-scale grave offences, severe violations of the laws and customs of warfare, and acts categorized as crimes against humanity.

The United Nations system cannot alter specific operational environments, which can be stressful and emotionally strenuous, nor prevent the toll incidents take on personnel. The United Nations recognizes it must now give priority to enhancing understanding and consideration of the mental health needs of uniformed personnel.

The United Nations also recognizes the importance of sustaining the resilience and psychological fitness of uniformed personnel to be operationally ready, contributing to Mission success. The complexity of current mandates requires a comprehensive approach to uniformed personnel mental health needs.

Implementing the Mental Health Strategy will foster a more positive and supportive work environment, heightening awareness of challenges faced by United Nations uniformed personnel. The strategy focuses on prevention, protection, promotion, and support, using a well-established Mental Health Continuum model adopted across Member States as a foundational model.

The tools outlined in this strategy will be available to uniformed personnel at their workplace. It is envisaged that a digital platform or app will support them throughout the deployment cycle. It is recommended that Member States support this strategy and integrate it into their own health initiatives.

1. Introduction and background

Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well, work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. (World Health Organization, 2023)

Past and present United Nations missions

In past and present United Nations missions, uniformed personnel have faced numerous stressors, often with minimal awareness of their psychological impact, and have had limited coping tools at hand. Security Council Resolution 2668 (2022) encouraged “troop- and police-contributing countries, including the Member States and the UN Secretariat, as appropriate, to provide mental health services to support personnel during pre-deployment training, in order to sensitize personnel on effective recognition of signs and symptoms of mental distress”. It also encouraged them “to continue to provide peace operations personnel at the post-deployment stage with adequate mental health and psychosocial support services and apply a gender-responsive approach, as appropriate.”¹ The General Assembly and the Special Committee on Peacekeeping Operations (C34) have also emphasized the need for prevention, mitigation, and treatment of mental health conditions and associated risk factors,² and several landmark reports from the United Nations Secretariat have recommended standardizing medical support, including mental health support to uniformed personnel.³

United Nations Peace Operations uniformed personnel work under unique conditions, often at odds with those part of their national military or police training; hence the importance of addressing their mental health needs.

A comprehensive needs assessment conducted by DHMOSH in four high-risk missions further reinforced the necessity of a mental health strategy. It identified the most critical stressors, their psychological impact, barriers to seeking help, and potential solutions.

The present Mental Health Strategy for United Nations Uniformed Personnel aims to provide a comprehensive framework for addressing mental health needs in alignment with the World Health Organization (WHO) guidelines on mental health at work. The strategy focuses on prevention, protection and promotion, and support. These pillars encompass activities throughout the deployment cycle, from pre-deployment to the return home, aiming to raise awareness of mental health needs, sustain resilience, reduce stigma, and ensure operational effectiveness.

1 S/RES/2668 (2022) adopted at the 9229th meeting of the Security Council on 21 December 2022.

2 See General Assembly resolutions A/RES/77/303 adopted on 30 June 2023 and A/RES/76/274 on Cross-cutting issues adopted on 29 June 2022, as well as attachment 17, chap. 3, annex C, appendix 5 of the report of the Working Group on Contingent-Owned Equipment to the Fifth Committee of the General Assembly (A/77/736) on levels of medical support: level 2 (basic field hospital) requirements and standards; see also *Official Records of the General Assembly, Seventy-seventh Session, Supplement No. 19 (A/77/19)*.

3 See *Report of the High-level Independent Panel on Peace Operations on Uniting our Strengths for Peace: Politics, partnerships and people (A/70/95-S/2015/446)*; see also Carlos Alberto dos Santos Cruz, William R. Phillips and Salvador Cusimano, *Improving Security of United Nations Peacekeepers: We Need to Change the Way We Are Doing Business* (United Nations publication, 2017).

Call for increased awareness of mental health

The strategy seeks to increase awareness and understanding of mental health issues among uniformed personnel. It aims to facilitate coping skills, enhance accessibility to mental health literacy resources, and foster a positive and supportive work environment. The development of this strategy is driven by the increasing awareness of mental health and its impact on operational readiness among uniformed personnel.

It will be implemented through various initiatives and activities that prioritize mental health needs throughout the deployment cycle. The strategy aims to provide tools and information to support the mental health and well-being of uniformed personnel (Annex II).

Key elements include addressing stressors specific to the peacekeeping environment, promoting peer support and unit cohesion, engaging leaders in de-stigmatization efforts, leveraging the deployment phases for mental health interventions, and encouraging help-seeking. Rapid resolution provisions will be included to address psychological difficulties and positively contribute to the Mission's success.

Gender and mental health in United Nations peacekeeping settings are intricately linked due to the significant impact of gender-specific factors on the well-being of uniformed personnel. Traditional gender norms influence their roles, responsibilities, and interactions within missions. Women often engage more with local communities and address gender-specific needs, but these norms can perpetuate limiting stereotypes. Consequently, both genders face distinct challenges, including exposure to sexual and gender-based violence, which affect their mental health. This issue is exacerbated in male-dominated uniformed personnel, who are discouraged from seeking help or discussing their mental health openly due to stigma and gender-related stereotypes. Therefore, a gender-responsive approach to roles and responsibilities is warranted.

This Mental Health Strategy for United Nations Uniformed Personnel builds upon the evolving understanding of mental health in operational settings and the available knowledge and fieldwork undertaken in various missions. It envisages a culture where all uniformed personnel can access effective and timely mental health support, ultimately contributing to the Mission's success.

2. Scope and objectives

Scope

The Mental Health Strategy for United Nations Uniformed Personnel encompasses a comprehensive and inclusive approach aligned with the WHO guidelines on mental health at work. Its scope extends to all United Nations uniformed personnel, focussing on:

- Prevention, by increasing awareness and understanding of mental health issues through education and training initiatives.
- Protection and promotion, by facilitating mental health training for uniformed personnel and their families pre-, during and post-deployment, enhancing access to mental health materials, reducing stigma, and encouraging help-seeking for mental health concerns.
- Support, by fostering a positive and supportive work environment that promotes mental health and well-being.

Figure I. Approach aligned with the WHO guidelines on mental health at work, extending to all United Nations uniformed personnel



Objectives

Through its implementation, the strategy aims to:

- Establish guidelines for delivering mental health services within peacekeeping missions (Annexes I/II/III);
- Provide culturally sensitive psychological support and interventions, considering the diverse backgrounds and stressors uniformed personnel face;
- Focus on education, training, and support as pillars of the strategy, each with specific activities and objectives;
- Provide leaders with informational resources to improve mental health awareness and reduce barriers to seeking mental health services;
- Create a platform to encourage help-seeking behaviour for mental health issues, breaking down barriers and promoting support;
- Integrate mental health considerations into all aspects of mission planning and deployment;
- Offer guidelines to Member States to support the families of deployed personnel throughout the deployment cycle;
- Facilitate cooperation and knowledge exchange among experts and stakeholders from Member States to enhance mental health support;
- Foster positive experiences for uniformed personnel.

3. WHO concept: prevent; protect and promote; support

“Mental health remains one of the most neglected aspects of healthcare. It is time to break the stigma of seeking help and ensure that everyone, everywhere, is empowered to access the support they need.” (António Guterres, United Nations Secretary-General, 2023)


The Mental Health Strategy is founded on the WHO concept of preventing mental illness, promoting and protecting mental health, and providing support to those who develop mental health issues. Encouraging mental health literacy and training, sustaining and enhancing mental health promotion and addressing stigma around mental health issues are fundamental to this.

Used by several Member States' militaries and first responder communities, the Mental Health Continuum model is a cornerstone of mental health literacy and training programmes. The philosophy behind this model is that mental health is not a binary of either mental wellness or mental illness, and it includes enhancing the mental health literacy of all stakeholders. As with physical health, an individual's mental health and well-being can fluctuate, moving in either direction on a continuum from well to unwell, or vice versa. This is reflected in the table below (see Table 1). This model recognizes that mental health symptoms can manifest differently and with different levels of intensity and should be assessed using a holistic and integrative approach that applies a variety of methods, including face-to-face clinical interviews, questionnaires, and observations by peers or buddies.

Education on the Mental Health Continuum is critical to the effectiveness of this strategy. It addresses the effects of stress and trauma on mental health and provides methods to promote mental well-being. The key elements of this strategy are prevention, protection and promotion, and support. They include the following:

- **Mental health training:** The United Nations will provide mental health awareness material for senior leaders and a platform for access to material for the education of uniformed personnel.
- **Psychological self-care:** Promoting self-care strategies such as maintaining a healthy lifestyle, engaging in regular physical exercise, prioritizing sleep hygiene, and learning relaxation techniques including mindfulness and meditation; sharing basic knowledge and skills to recognize poor mental health and respond appropriately.
- **Peer support:** Establishing peer support networks and safe spaces where uniformed personnel can share their experiences, seek help, and receive understanding from individuals who can relate to their challenges.
- **Stress management:** Equipping individuals with stress management techniques such as problem-solving skills, time management strategies, and relaxation exercises to effectively cope with stressors.
- **Resilience:** Training on building resilience by developing positive thinking patterns, improving communication skills, enhancing coping skills, and fostering social support networks.
- **Trauma response:** Developing plans for responding to trauma and supporting those who have experienced potentially traumatic events (PTEs) and potentially morally injurious events (PMIEs); emphasizing the importance of confidentiality and privacy in mental health support.

Table 1
Description of changes in mental health on a continuum



	HEALTHY	REACTING	INJURED	ILLNESS
MOOD	Normal mood fluctuations, calm and takes things in stride	Irritable, impatient, nervous, sad, overwhelmed	Anger, anxiety, pervasively sad/hopeless	Anger outbursts/aggression, excessive anxiety/panic attacks/depressive or suicidal thoughts
ATTITUDE AND PERFORMANCE	Good sense of humour, performing well, in control mentally	Displays sarcasm, procrastination, forgetfulness	Negative attitude, poor performance/workaholic/poor concentration or decisions	Overt insubordination cannot perform duties/control behaviour/concentrate
SLEEP	Regular sleep patterns, few sleep difficulties	Trouble sleeping, intrusive thoughts, nightmares	Restless, disturbed sleep, recurrent images/nightmares	Cannot fall asleep, or stay asleep, sleeps too much or too little
PHYSICAL SYMPTOMS	Physically well and sound energy levels	Muscle tension headaches, low energy	Increased aches and pains, increased fatigue	Physical illness, persistent fatigue
SOCIAL BEHAVIOUR	Physically and socially active	Decreased social activity	Avoidance or withdrawal from physical and social activity	Not going out and or not answering phone calls
ALCOHOL AND GAMBLING	No/limited alcohol use/gambling	Regular but controlled alcohol use/gambling to cope	Increased alcohol use/gambling- hard to control with negative consequences	Frequent alcohol or gambling use- inability to control with severe consequences
SPIRITUAL FITNESS	Engaged with life's meaning and purpose, is hope-filled about life and the future	Maintains life's meaning and purpose, maintains a sense of hope about life and future	Losing life's meaning and a sense of purpose, little hope about life and the future	Believing life has no meaning or purpose and hopelessness about life and the future

Mental health promotion initiatives will factor in the cultural backgrounds of uniformed personnel and address the unique challenges and stressors they may encounter in different environments and situations. Mental health advocacy by senior leaders in their routine interactions with uniformed personnel will help reduce stigma/hesitancy and encourage early help-seeking. These education, training, and support modules can be integrated into the deployment cycle.

Key focus areas of support for the mental health of uniformed personnel:

- **Mental health service availability:** Improving the availability and expertise of mental health professionals within the Mission; integrating mental health services with general health services to reduce distinction and enhance accessibility.
- **Mental health support awareness and use:** Raising awareness about the available mental health resources within the Mission and promoting their use.
- **Mental health advocacy:** Encouraging uniformed personnel leaders to advocate for mental health in their interactions with uniformed personnel, helping to reduce stigma and encourage early help-seeking.
- **Managing stigma around mental health:** Fearing possible repatriation, the early signs and symptoms are sometimes hidden until they can become more detrimental to the individual and impact the operational readiness of the uniformed personnel and the Mission. Uniformed personnel often hesitate to seek help for mental health symptoms due to fear of discrimination or judgment by their peers or superiors. This hesitancy can be particularly pronounced in peacekeeping missions, where seeking help is sometimes viewed as a sign of

weakness or vulnerability. It will be essential to sensitize leaders and uniformed personnel to mental health issues and the importance of early intervention and returning to duty.

By explicitly addressing stigma and promoting a supportive environment, the Mental Health Strategy can increase the likelihood of early intervention, thereby leading to successful early return to duty and avoiding repatriation, ultimately benefiting both individuals and the Mission’s operational readiness.

4. Actions towards mental wellness

Overview of Member State, T/PCCs and United Nations Secretariat roles and responsibilities

The United Nations Secretariat will provide governance and monitoring for the mental health initiatives recommended in this document. In line with the recommendations in the report of the Special Committee on Peacekeeping Operations on its 2023 substantive session (A/77/19), the Secretariat will provide T/PCCs and Member States access to informational materials and guidelines on mental health awareness and literacy. The United Nations will develop monitoring and evaluation mechanisms to assess the mental health support provided during the deployment period of uniformed personnel. Member States may assist in augmenting the capacity and capabilities of T/PCCs through bilateral partnerships to screen and mentally prepare personnel for deployment in United Nations missions.⁴

T/PCCs may ensure mental health literacy, screening, and various trainings of their uniformed personnel using the resources provided in this strategy's annexes. It includes assessing and monitoring personnel’s mental health before deployment, providing appropriate support and access to mental health experts during deployment, and identifying and managing mental health concerns after deployment.

Table 2

Summary of mental health support roles and responsibilities of the United Nations Secretariat and Troops- and police-contributing countries

<i>Roles and responsibilities</i>	<i>United Nations Secretariat</i>	<i>Troops- and police-contributing countries</i>
Leadership	Advocate for mental health as a priority in missions	Prioritize mental health within their uniformed personnel throughout deployment
Mental health literacy	Provide materials on guidelines, training, and literacy	Ensure access to mental health literacy resources, support programmes, and care
Support services	Ensure deployment of mental health experts as per the Contingent-Owned Equipment list	Ensure access to available mental health support services

Referral	Establish referral pathways for specialized care	Facilitate referrals for personnel requiring specialized mental health support
Stigma reduction	Promote advocacy to reduce mental health stigma	Address stigma within their ranks and promote open conversations
Monitoring	Monitor mental health trends and needs	Monitor mental health status, identify needs, and make necessary adjustments
Evaluation	Evaluate the effectiveness of mental health programmes	Assess the impact of mental health support initiatives within their ranks
It must be noted that these roles and responsibilities may vary based on specific mission contexts, agreements, and resources available to the United Nations and T/PCCs		

T/PCC leadership's roles

Mental health support during deployment should be guided by evidence-based principles to ensure the well-being of uniformed personnel in United Nations missions.

- **Creating a culture of support:** Leadership must prioritize mental health as an essential aspect of overall well-being. They should identify and address mental health issues early on, encourage help-seeking behaviours, and ensure access to appropriate support and treatment. Leaders can mitigate stressors by meeting the infrastructural standards and increasing welfare activities for uniformed personnel in missions.
- **Providing material resources:** It is essential to ensure uniformed personnel have access to a range of mental health literacy materials, including peer support programmes and mental healthcare services. Barriers to accessing care, such as stigma, should be addressed to facilitate help-seeking behaviours.
- **Facilitating education and training:** Leaders shall be provided with informational resources to help them champion education and training on promoting mental health, identifying mental health needs, facilitating referral processes, and creating supportive work environments. Mental health response teams shall receive specialized training to address specific mental health concerns.
- **Addressing organizational stressors:** Organizational factors contributing to mental health concerns, such as dietary requirements, variable workloads, social support, recreational facilities, and communication tools, should be identified and addressed to create a supportive work environment. It is also essential to ensure strong unit cohesion.
- **Monitoring and evaluation:** Processes shall be implemented to track the mental health of uniformed personnel and evaluate the effectiveness of mental health programmes. Regular monitoring and assessment shall ensure that necessary adjustments can be made to improve mental health support.

Medical professionals' roles

Mental healthcare should be integrated into general medical services. Mission and T/PCC medical professionals have essential roles in providing mental health support:

Table 3
Make-up of mission and T/PCC mental health teams

Mission Mental Health Response Team	T/PCC Mental Health Response Team
Senior Medical Officer (of T/PCC) Chief Medical Officer Force Medical Officer Mental Health Expert (s) in the Mission* Sector Commander	Senior Medical Officer Religious/Spiritual Teacher General/Clinical Psychologist**/counsellors Company Commander Unit Commander

**Mental Health Expert in the Mission, that is, the Psychiatrist, Psychiatry Nurse, and General/Clinical Psychologist at the Level II/III hospital.*

***General/Clinical Psychologist when available.*

- **Providing education and training:** Medical professionals shall coordinate with mental health specialists in the Mission and provide education and training on mental health topics to uniformed personnel leaders and other medical professionals. This includes knowledge about the Mental Health Continuum model, recognizing signs of mental health concerns, supporting those reporting difficulties, and accessing appropriate care.
- **Advocating for mental health:** Medical professionals shall advocate for the mental health needs of uniformed personnel within their organizations and at the policy level. They shall work to ensure that proper mental healthcare is available and that mental health is prioritized within the mission.
- **Coordination:** Medical professionals shall coordinate actions between mission leadership and medical establishments, particularly after critical incidents. Effective coordination is crucial for providing timely and appropriate support to uniformed personnel.
- **Providing psychological interventions:** Evidence-based treatments for mental health concerns, including counselling, medication, and other interventions, should be made available by medical professionals. Individualised treatment plans tailored to the specific needs of uniformed personnel should be developed and implemented.
- **Managing mental health issues:** Early identification and reduction of psychological morbidity contribute to the overall well-being of uniformed personnel. Timely assessments and management of sleep disturbance, anxiety, trauma responses, depression, substance use disorders, self-harm/suicidal behaviour, bodily distress disorder symptoms, or any other mental health issues should be undertaken by medical professionals. If adequate response is not seen, the individual may be referred to a mental health expert in the mission.
- **Tracking and reporting:** T/PCC medical professionals should monitor stressor trends and the impact of critical events. Tracking and reporting mental health indicators contributes to effective planning and resource allocation.

Medical professionals at all levels play a critical role in safeguarding the mental health of uniformed personnel. Their work is indispensable for maintaining the overall readiness and effectiveness of uniformed personnel. While all stakeholders, including health professionals, contribute to mental healthcare, specialists such as psychiatrists and general/clinical psychologists bring additional expertise that enhances the capabilities of the response teams. Their specialized knowledge and skills significantly contribute to addressing mental health conditions holistically and ensuring comprehensive support for uniformed personnel, thus making them focal points for mental health challenges in the mission.

Uniformed personnel – Individuals’ roles

Recognizing the significance of maintaining proper attitude, social behaviour, sleep patterns, coping skills, and spiritual well-being (such as hope, meaning, personal values and purpose), each uniformed personnel must take responsibility for their physical and psychological wellness. The United Nations encourages all uniformed personnel to be accountable for taking the necessary measures to prioritize their psychological fitness as a fundamental aspect of operational readiness. This perspective acknowledges that maintaining psychological well-being is a personal commitment that external factors alone cannot control.

The Mental Health Strategy acknowledges the diverse nature of mental health challenges across Member States, and that individuals must recognize their role in preserving their own well-being and psychological fitness.

- **Taking part in education and training modules:** Uniformed personnel should participate in education and training modules to increase their mental health awareness regarding common mental health problems. This helps overcome barriers to help-seeking behaviours.
- **Prioritizing self-care;** Self-care activities such as regular exercise, healthy eating habits, proper sleep hygiene, and regular communication with family and peers contribute to overall well-being and psychological fitness.
- **Building resilience:** Uniformed personnel should enhance resilience by practising mindfulness, positive thinking, and problem-solving skills to effectively cope with stress and adversity.
- **Buddy support:** Supporting peers in promoting psychological wellness creates a culture of collegial support and fosters a sense of community among uniformed personnel.
- **Overcoming stigma:** Adopting a culture that reduces the stigma surrounding mental health issues and encourages help-seeking behaviour is crucial. Uniformed personnel should actively contribute to reducing barriers to seeking mental healthcare.
- **Help-seeking:** Reducing hesitation to approach colleagues, friends, family, or mental health professionals whenever psychological concerns arise is essential. Seeking help early can prevent the escalation of mental health issues and promote timely intervention and support.

5. Strategy implementation

Successfully implementing the Mental Health Strategy for Uniformed Personnel requires a well-planned and coordinated effort involving all stakeholders, executed systematically. Clear communication and ongoing progress tracking are essential, allowing for necessary refinements.

A multimodal approach will be adopted, including population-based metrics, focus groups, and formal and informal feedback mechanisms. Measures may include tracking the number of personnel who have completed education modules, participation in training, mental health assessments, access to mental health infrastructure, and ease of access to mental health services. These will all help evaluate the acceptability and feasibility of this strategy while also assessing the mental health status of uniformed personnel and identifying any gaps in the framework.

Enhancing mental health is a collective responsibility shared by all stakeholders. The specific roles, interventions, and timelines may vary, but each stakeholder group contributes to the overall effort. Mental health professionals must be prepared to address mission-specific clinical presentations. At the same time, the United Nations Secretariat and Member States play a role in mitigating day-to-day stressors by ensuring adequate infrastructure and communication facilities. Effective vertical and horizontal communication is crucial to deliver optimal psychological support. The roles and responsibilities of various uniformed personnel are detailed in Annex I.

Given the many components of the strategy, an implementation guide is necessary. This guide will direct users to educational materials, screening tools, training manuals, and guidance on how to manage mental unwellness (for further details, see Annex I).

6. A digital platform

A digital platform (website and digital app) dedicated to mental health will be a powerful tool for disseminating critical elements of the strategy. This platform will offer accessible and practical mental health information for uniformed personnel. Leveraging technology in this way allows for unprecedented reach and impact. The platform will include modules containing self-help resources, screening tools, training materials, and videos.

Advantages:

- **Accessibility:** The platform will provide round-the-clock support that can be scaled up instantly during critical incidents through additional resources.
- **Affordability:** The platform can contribute to improved access to mental health support and training.
- **Anonymity:** Maintaining anonymity within the platform can help reduce stigma and other barriers.
- **Personalization:** Apps and modules within the platform can offer tailored mental health information based on individual needs.
- **Convenience:** The platform can be used offline, eliminating the need for continuous online availability.

While digital platforms can enhance accessibility and provide personalized psychological care, they cannot fully replace customized care. Offline usability is essential, and the platform will be designed to minimize risks while maximizing its potential. The digital platform will be securely housed on United Nations servers. Member States' contributions to its development will enhance scalability, accessibility, and effectiveness, promoting global cooperation in addressing the mental health needs of uniformed personnel. Access to informational resources even after completion of United Nations deployment shall be a critical factor in achieving the long-term goal of mitigating the impact of stressful deployment.

7. Annexes

Annex I:	United Nations Guidelines for Management of Mental Health.
Annex II:	Recommended Screening tools.
Annex III:	Mental Health Literacy and Training Catalogue
Annex IV:	Information for United Nations Uniformed Personnel, Their Families and T/PCCs to Understand and Manage Issues Around Deployment.
Annex V:	A Gender-responsive Approach to Mental Health in Uniformed Personnel.

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