The 10th Annual Psychology Day at the United Nations, April 20th 2017, New York

Promoting Well-Being in the 21st Century: Psychological Contributions for Social, Economic, and Environmental Challenges

Sarah Goodman
Icahn School of Medicine at Mount Sinai, USA

Vera Araujo-Soares
University of Newcastle, UK

Nihal Mohamed
Icahn School of Medicine at Mount Sinai, USA

The United Nations’ 10th Annual Psychology Day, an event that informed the UN community of recent psychological contributions to the global human rights agenda, took place on April 20th, 2017. Contributing psychologists, who represent various UN-accredited NGOs, come from multiple subspecialties such as clinical, health, educational, social, developmental, counselling, community, and industrial. Not only do they participate in committees and working groups on family, migration, technology, and climate change issues, they present at various UN Commissions and design, implement, and evaluate field projects related to the UN’s Millennium Development Goals. This report was written in collaboration with the EHPS UN related activities, and EHPS’s affiliation with the UN.

This year’s theme was Promoting Well-being in the 21st Century: Psychological Contributions for Social, Economic, and Environmental Challenges. One of the event’s co-chairs included Dr. Ayorkor Gaba, PsyD, Senior Project Director at the University of Massachusetts Medical School’s Department of Psychiatry, and the American Psychological Association (APA) Representative to the United Nations. Dr. Gaba was also moderator of last year’s event From Vulnerability to Resilience: Using Psychology to Address the Global Migration Crisis, a topic that has remained critically important. This year’s other co-chair, Dr. Sonia Suchday, PhD, is the professor and chair of Pace University’s Psychology Department. Dr. Gaba began the event by acknowledging the “…success of the psychology community advocacy efforts’ culminating in the inclusion of mental health and well-being in the UN’s sustainable development agenda.”

On September 25th, 2015, UN countries adopted a set of 17 interrelated goals to end poverty, protect the planet, and ensure prosperity for all. Each goal has specific targets, which UN representatives and national officials have agreed to achieve over the next 15 years. For these goals to be reached, everyone must make a concerted effort: governments, the private sector, civil society, and individual citizens. The psychology community has amassed pivotal knowledge that can enhance and expedite the implementation of these goals, particularly SDG 3, which concerns “good health and well-being” for the world’s citizens. Dr. Gaba acknowledged that this is the first event during which world leaders jointly acknowledged good mental health and well-being as instrumental to global change. Dr. Gaba also noted that this should have a positive and systemic impact on “communities, families, and individuals.” Dr. Suchday later elaborated, “Well-being is achieved only when all living entities inhabiting the earth thrive in all areas of functioning, including psychological, social, economic, political, and spiritual.”
The sponsors of this 10th Annual Psychology Day at the UN included Ambassador Rubén Ignacio Zamora of the Permanent Mission of El Salvador to the UN, and Ambassador Dr. Caleb Otto, the Permanent Representative of the Republic of Palau. Zamora, who was a professor at the Universidad de Centroamerica and is now a El Salvadorian politician, framed well-being as a key concept dependent upon multiple factors such as economies, politics, and human rights. Zamora asserted in his speech that, according to recent research from the World Health Organization in Geneva, Switzerland, a mere 3 percent of governments’ spending worldwide goes to mental healthcare. Health economics research further indicates that this continued underinvestment deprives the global economy of an astronomical one trillion dollars per year in lost productivity across domestic, workplace, and government domains. Ambassador Otto, a physician, public health specialist, and advocate for the inclusion of “mental health and well-being” to the list of SDG’s list, later stated that “diseases and infirmities” have always been the primary focus of health-related investigation. Given the World Health Organization’s definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity,” Otto remarked upon the “great victory” of societies’ and governments’ belated inclusion of the latter two dimensions. They must also develop new indicators to measure mental health levels, as well as launch new initiatives for mental and behavioral wellness promotion worldwide.

Next to speak was moderator Dr. David Marcotte, PhD of Fordham University, who argued that psychology is now devoting more of its research efforts towards individuals’ adaptation to unstable and challenging environments. Like the previous speakers, Dr. Marcotte then reviewed psychology’s critical role in the United Nations’ fulfillment of the Sustainable Development Goals, especially where “health and well-being” are concerned.

Furthermore, individuals and whole communities alike can learn, develop, and refine mental well-being as a skill. This assertion segued into the introduction of the invited speakers, all of whom are professional psychologists. Each speaker addressed one of the three main pillars – environmental, economic, and social – of the United Nations’ 2030 Agenda.

**First Presenter, Environmental Pillar: Dr. Minu Hemmati, PhD**

Dr. Minu Hemmati is a clinical, organizational, and environmental psychologist specializing in sustainable development and climate-related gender issues. She is also the co-founder of the Multi-stakeholder Processes Institute for Sustainable Development, an international charitable association based in Berlin, Germany. Dr. Hemmati’s presentation was titled “Psychology and the Environmental Pillar: Impacts of Environmental Challenges on Well-Being and Contributions to Realizing the 2030 Sustainable Development Agenda.” The first part summarized how today’s environmental changes affect people’s health and psychological functioning. After outlining today’s top environmental challenges such as climate change, air and ocean pollution, deforestation, loss of biodiversity, soil degradation, overpopulation, and ozone layer depletion, she analysed their subsequent effects on human health and cognition. Medical and physical health complications include heat-related illnesses, allergies, increased exposure to water- and vector-borne diseases, and behavioral changes in physical activity levels, all of which are exposure pathways to health disruption. The subsequent emotional responses to deteriorating environmental conditions (or the perception and anticipation thereof) include stress, anxiety, depression, and grief. Substance abuse, relationship strains, and PTSD are also subsequently increasing in prevalence. The broadest, community-level issues...
include increased food insecurity, social instability, interpersonal aggression, violence, crime, and displacement, especially amongst indigenous peoples and in regions where livelihoods depend directly on agricultural performance. Most vulnerable are women (particularly pregnant and postpartum), young children, the elderly, individuals with disabilities, the economically disadvantaged, and those with preexisting physical or mental illnesses, the last of whom are most adversely affected during episodes of extreme heat. “The majority of affected people do recover over time,” Dr. Hemmati said. “However, a significant proportion of exposed individuals develop chronic psychological dysfunction. And that is up to 20 percent, depending upon the disaster.”

Dr. Hemmati also stressed throughout her presentation the mutual inclusivity of physical, psychological, and social well-being, as well as the many dimensions of environmental change the SDG’s must tackle in order to improve population health. Lastly, she emphasized that realizing the SDG’s must include psychologists’ establishment of partnerships across “sectors, silos, and disciplines” in the absence of stereotyping. One important example of such interdisciplinary cooperation includes the German government’s National Climate Initiative, which now employs 14 thousand diverse municipalities working to achieve the nation’s Paris Accord climate commitment. Representatives include lawyers, engineers, and administrative professionals, whom psychologists are training in group learning processes. Not only has this shown to be efficient and productive in ultimately reducing CO2 emissions, but it has encouraged effective team building and fundamentally changed the organizational culture of climate action for the better.

Second Presenter, Economic Pillar: Dr. Ann Masten, PhD

Dr. Masten, the Irving B. Harris Professor of Child Development at the University of Minnesota, studies the development of competence, risk, and resilience throughout the life span. In her presentation, Dr. Masten explained how research on human resilience and recovery is integral to informing their realization. Current times are fraught with war, terror, disasters, pandemics, displacement, poverty, homelessness, and other similar calamities, both incidental and chronic. However, there exists a growing multidisciplinary science of evaluating resilience, or “the capacity of a system (person, family, economy, ecology, et cetera) to adapt successfully to challenges that threaten its life, function, or development.” Relevant research, especially amongst war and trauma survivors, has uncovered inspiring and actionable information on potential program development and capacity building endeavors that will expedite recovery in trauma-afflicted regions. More specifically, resiliency’s three defining areas of focus are:

a) The threats themselves, such as trauma, neglect, poverty, war, natural disasters, and adverse childhood experiences (ACE’s)

b) Protections at the neurobiological, individual, relational, community, cultural, and societal levels that each foster adaptive success

c) Adaptive success measures, such as developmental tasks, mental and physical health, happiness, achievement, and parenting

Similar to Dr. Hemmati, Dr. Masten then described the simultaneous interaction of the myriad systems affecting an individual at differing times and degrees, and how systems can also be embedded and interdependent. She elaborated that, for instance, “a child is a living system, and within that child are many other systems that help them function.” She then explained how human
systems such as families and communities all involve and depend upon multiple actors. As an example, Dr. Masten described the quality of children’s interactions with their teachers, and the environments in which those interactions occur, as key determinants of a child’s development. Dr. Masten also acknowledged the role of national policies, which frequently constrain the resources available in each part of the system. These systemic interconnections each create and feature opportunities to leverage change in the interest of promoting synergy.

Dr. Masten then described the most important protective factors that foster an individual’s resilience. Healthy brain development, cognitive and self-regulation skills, as well as motivation, are all integral within the individual, whereas good caregiving, food security, emotionally and physically safe conditions, and solid family routines are all critical elements of the individual’s immediate environment. School and classroom systems must feature strong leadership, effective teaching, high expectations, support, structure, and a welcoming climate. Community and cultural systems must feature healthcare and emergency services. Governmental and non-governmental services should support families, education, and stress-reducing traditions. Masten affirmed that “human beings have a lot of capacity for recovery and withstanding adversity if these fundamental protections are in place.”

Lastly, Masten overviewed the most rapid – and perhaps most important – stage of a person’s development: early childhood. The early childhood years contain the largest number of simultaneously developing foundations for a stable, productive, and empowered life thereafter. Early childhood features the swift formation of cognitive function, stress regulation, interpersonal attachments, problem-solving skills, motivation to learn, and the cultivation of empathy and pro-social behavior. Given these skills’ increased importance throughout the lifespan as the child (then adolescent, then adult) gain agency and independence, these “neurocognitive and socioemotional tools for life and learning” yield cascading consequences for the near and distant future. The knowledge that success and competence are cumulative should underscore the universal necessity of support for mothers and pregnant women, safe home environments, stable upbringings, violence prevention, food and housing security, and constructive early childhood education programs, all of which invariably yield immeasurable returns on investment. To conclude, Dr. Masten explained, “Investing in healthy lives and well-being builds enduring resilience for societies.” Resilience and “the capacity to adapt” are common, “and we can invest and do something about it.”

**Third Presenter, Social Pillar: Dr. Doug Oman, PhD**

The final presenter for this year’s event was Dr. Doug Oman, President of the Society for the Psychology of Religion and Spirituality of the APA. He is also an adjunct professor in the School of Public Health at the University of California at Berkeley. Dr. Oman, whose work focuses on occupational health and spirituality, aptly titled his presentation “Spirituality and Religion: Contributions and Implications for Well-Being and Sustainable Development Goals.” After a brief historical overview of the history of psychology with Dr.’s William James and Sigmund Freud, he explained how an upswing in academic enthusiasm for religion’s positive psychological effects took hold in the 1980’s. Dr. Oman stated that modern literature and empirical evidence have revealed that, overall, religion and spirituality are positively associated with improved physical and mental health. Some dimensions of religion and spirituality feature worse outcomes, such as with extremism, internal and interpersonal conflict, and refusal of medical care on religious grounds.
However, Dr. Oman stated that meta-analyses, mostly from Western and US samples, have revealed that mild to moderately religious individuals are 18 percent less likely to experience premature death, with life prolonged for religious US residents an average of 7 additional years (for Black Americans, added longevity averaged 14 years). This is a difference similar to that of smokers versus nonsmokers. Other studies have revealed that spiritual and religious involvement reduces risk of common physical ailments such as cardiovascular disease, stroke, cancer, pulmonary disease, disability, and dementia. Religious and spiritual involvement can also reduce depression and anxiety. Similarly, related “accommodative therapies” have been shown to yield better mental health outcomes than control groups and groups receiving “alternate secular psychotherapies.”

Lastly, mild to moderate religious involvement has been shown to reduce likelihood of youth risk behavior and substance abuse, as well as improve marital stability and coping skills. Despite these results’ relative confinement to the US and Western world, there has been ample cross-cultural corroborations in many other diverse regions for several physical and mental risk factors.

Dr. Oman argued that such findings have important implications for community building and overall achievement of the SDG’s. In general, clinicians can support and acknowledge religion and spirituality as valid coping mechanisms for interested patients, as well as develop basic competencies in spirituality-enhanced psychotherapies. Clinicians in medical settings are also encouraged to consider patients’ “spiritual histories” during treatment. Accrediting bodies such as the Joint Commission have also begun to require that certain healthcare organizations conduct religious assessments, most commonly in intake settings. Dr. Oman suggested the possibility of healthcare professionals’ teaching evidence-supported spiritual and religious practices, yet they must be very careful not to endorse or promote specific practices over others. One noncontroversial example involves allocating brief segments of time to sitting meditation, common forms of which can be religious or secular in nature. Dr. Oman believes that the UN can develop and disseminate professional training and skills workshops to spread knowledge of common ground strategies, which are general coping frameworks that align a) the “outsider, etic” insights of professional psychologists’ expertise with b) “insider, emic” spiritual traditions. Dr. Oman argued that, not only is this all directed toward well-being, but there is a particular resonance with SDG No. 16, which is to “Promote peaceful and inclusive societies... and build effective, accountable, and inclusive institutions at all levels.”

Dr. Gonzales-Canali, MD, advisor at the UN Coordination Division of UN Woman: Critical Issues on wellbeing

Last to speak was panelist Dr. Gustavo Gonzalez-Canali MD, a clinical research physician and Senior Advisor at the United Nations Coordination Division of UN Women. Dr. Gonzalez-Canali, who was formerly head of the Health and Human Development Department of the French Ministry of Foreign Affairs, spoke about critical issues for well-being related to the Beijing Platform for Action. Dr. Gonzalez-Canali first mentioned that women and girls comprise slightly more than half of the world’s population, and that they are “more deeply impacted than men and boys by poverty, climate change, food insecurity, lack of healthcare, and global economic crises.” However, women’s contributions and leadership endeavors are vital to social success, so it is critical to examine a) how the SDG’s will affect women and girls specifically, and b) how women and girls can uniquely help achieve them. Dr. Gonzalez-Canali stated that,
“Health in all respects, both physical and mental, is a fundamental human right.” Therefore, a right to health, the basis of well-being and the foundation of general participation in public life, must be better expressed as the right to fully access the best possible physical and mental healthcare resources. This language emphasizes societies’ obligation to deliver said services, as health statuses depend not only upon biology but the (often discrimination-laden) social environment, political choices, and levels of economic advancement. Worldwide afflictions for women and girls such as unfavorable power dynamics, domestic abuse, and early marriage and pregnancy all cause vastly understated physical and mental health deterrents, as well as economic obstacles. Gonzalez-Canali thus stressed the importance of governments’ specific attention to gender-based issues and their solutions, especially the many health threats that women still disproportionately face in the 21st century.

Although the topics reviewed in this 10th annual event were comprehensive and far-reaching, it would have been especially productive for a health psychologist to have presented as well. This is because health psychology focuses specifically on health and well-being, i.e. how cognitive, social, and emotional processes affect an individual’s illness behavior and physical well-being. Given this branch of psychology’s specific relevance to both this year’s topic and the achievement of health and well-being across the world’s populations, UN interventions can also benefit from knowledge of health-related behavior change mechanisms. Knowledge of health behavior change theories, models, and skills can therefore spur new and enhance existing UN health promotion programs and interventions, especially with additional contributions from implementation and translational scientists. Such programs can have an impact on individuals’ health-oriented behavior and resilience skills, the cumulative effects of which should manifest itself in improved population-wide health outcomes.

We agree with Dr. Gab’s assertion, “The presentations this year affirm the intersection of psychological science and practice with the economic, environmental and social pillars of the global agenda, showing how interconnected well-being is to the achievement of the sustainable development goals.” More generally, the recognition of psychologists and their important partnerships with government delegates in the global human rights agenda is a critical step forward, especially for those who have been historically and economically marginalized. Achievement of well-being is not only interlinked with many other goals of the agenda, including eradicating poverty, restoring ocean health, or combatting climate change, but it is central to a stable society, “the heart” of sustainable development. Despite current progress, there is still more to be done, so in the words of Dr. Otto, “Let’s think about reaching for the stars, accepting the moon, and ensuring that, at the end, we don’t come up empty-handed.”

Sarah Goodman
Icahn School of Medicine at Mount Sinai, New York
sarah.goodman@icahn.mssm.edu

Vera Araujo-Soares
University of Newcastle, Newcastle upon Tyne, UK
vera.araujo-soares@newcastle.ac.uk