



MENTAL HEALTH EUROPE – SANTE MENTALE EUROPE aisbl
Boulevard Clovis 7, B-1000 Brussels
Tel +32 2 280 04 68 - Fax +32 2 280 16 04
E-Mail: info@mhe-sme.org
www.mhe-sme.org

**MHE CONTRIBUTION TO THE FUNDAMENTAL RIGHTS PLATFORM
CONSULTATION**

By

**Peter Kinderman – President MHE Human Rights Committee,
Professor of Clinical Psychology, University of Liverpool, UK**

Name of organisation

Mental Health Europe

Contact

Fanny Muller
Information and Human Rights Officer
Email fmuller@mhe-sme.org

Mental Health Europe – Santé Mentale Europe aisbl
Boulevard Clovis 7
1000 Brussels
Belgium
Tel. +32 2 280 04 68
Fax. +32 2 280 16 04
General email info@mhe-sme.org

Policy area and main activities of Mental Health Europe – Santé Mentale Europe

MHE is a non governmental organisation committed to the promotion of positive mental health and well-being, the prevention of mental disorders, the improvement

of care, advocacy for social inclusion and the protection of the human rights of (ex)users of mental health services and their families and carers.

MHE represents associations, organisations and individuals active in the field of mental health and well-being in Europe, including (ex)users of mental health services, volunteers and professionals of many disciplines. MHE's mission is to promote mental health and well-being of all citizens, from all minority groups and the whole of Europe.

Created in 1985 as the Regional Council of the World Federation for Mental Health, Mental Health Europe currently has 67 member organisations in 30 European countries and 72 individual members. Ever since, MHE has been promoting and representing mental health in its broadest sense in Europe. MHE has found recognition and acknowledgement for its leading and innovative role in promoting positive mental health and well-being and social inclusion of people with mental health problems.

Mental Health Europe's vision is of a Europe where mental health and well-being is given high priority in the political spectrum and on the European health and social policy agenda, where (ex)users of mental health services live as full citizens with access to appropriate services and support when needed, and where meaningful participation is guaranteed at all levels of decision-making and administration. MHE's values are based on dignity and respect, equal opportunities, freedom of choice, non-discrimination, social inclusion, democracy and participation. MHE believes that much more can be done in the promotion of mental health and well-being and the prevention of mental disorders if we address civil society, those suffering from mental illness, their carers and families. Mental health is an essential part of any citizen's health and well being. As such, it is an essential component of communities. Good mental health is a basic human right. Factors that adversely affect mental health represent a major and growing threat to economic, social and public health in the world

Feedback on methods and relevance of research topics of the FRA Annual Report 2008:

a) Appropriateness and assessment of methods used for data collection and reporting at national level (information was provided by the Agency's RAXEN network).

Given the reservations over the issues covered – which we address below – the methods used for data collection are largely appropriate. However it should be noted that these methods are largely appropriate for addressing the currently core issues for the Agency - the implementation of the Racial Equality Directive and important issues related to racial and ethnic discrimination. If, as we hope, the remit of the Agency extends to address wider issues of human rights concerns including – for example – stigma discrimination against people with mental health problems, the methods for data collection may require revision.

b) Relevance of issues covered for civil society concerns (is the Agency covering the key issues related to the thematic area, are there other issues which the Agency should cover etc.);

This represents an area where we would like to comment more specifically. We would not in any sense wish to undermine the entirely appropriate emphasis on issues concerning racial discrimination or xenophobia – the modern history of Europe has been scarred by racism, and the commitment of the European Union to address this issue is admirable. If, however, the Agency is to address the wider range of human rights challenges in Europe, it will necessarily have to widen its scope. We in Mental Health Europe would wish this increased scope to be achieved without any lessening of the Agency's attention to its previous areas of activity.

In particular, we request that the Agency focuses attention on the human rights aspects of mental health. We would argue that the human rights aspects of mental health care are serious and acute. One person in four during their lifetime and one person in seven at any one time experiences mental health problems. There are several direct threats to human rights for people with mental health problems – the care offered to people with mental health problems, especially under compulsion, can be extraordinarily unpleasant and even actively damaging, people are exposed to very significant discrimination in the fields of education, childcare, employment, housing and access to healthcare, and people are exposed to discrimination and abuse in everyday life.

We would therefore welcome coverage of these areas in the subsequent work of the Agency.

c) Relevance of content and structure of opinions for civil society concerns (are the conclusions and opinions useful for your work, are they provided in such a way that they can be adapted for your work);

Further to point b) above, we believe that the conclusions and opinions represented by the Agency's report are entirely appropriate – with the proviso that we in Mental Health Europe are, of course, primarily interested in those aspects of the Agency's activities that we expect to emerge over the next few years.

Technical aspects of the Report

d) Size, content and structure of the report (is the report the right size, is it structured in such a way that the information is accessible and can be extracted for your use, is the Executive summary useful etc.);

This seems entirely appropriate

e) The website presentation of the report; e.g. would an interactive website presentation be useful, is the pdf version accessible?

This seems entirely appropriate. There seems little potential benefit from an interactive website presentation; a pdf version is the most appropriate format for dissemination.

Suggestions for the follow-up on the Annual Report:

f) How well does the report meet your needs in your work (advocacy, awareness raising, information sharing and exchange, lobbying, education and training etc.)?

With the proviso mentioned in b) above, and g) below, the report meets our needs well.

g) What topics of this report could be further researched etc.?

As mentioned above, we request that the Agency focuses attention on the human rights aspects of mental health. We argue that the human rights aspects of mental health care are serious and acute. There are several direct threats to human rights for people with mental health problems – the care offered to people with mental health problems, especially under compulsion, can be extraordinarily unpleasant and even actively damaging, people are exposed to very significant discrimination in the fields of education, childcare, employment, housing and access to healthcare, and people are exposed to discrimination and abuse in everyday life. We would therefore welcome coverage of these areas in the subsequent work of the Agency.

h) How can your organisation contribute to the follow up of the opinions of this report?

Would you need advice or training from FRA on possible ways of following up?

We would be happy to contribute to the follow up of this report, but we would need advice or training from FRA to that end.

i) What cooperation and awareness raising activities would you suggest as a follow up to the report?

N/A

j) Other follow-up activities;

N/A

Mental Health Europe, 18 August 2008