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NGO Roundtable on the Human Rights Report of the European Parliament for 2006 – 23 January 2007

MHE briefing note regarding the dreadful human rights situation of people with mental health problems

Mental ill health is widespread in Europe and it can affect anyone.

In Europe, one in four people experience at least one significant episode of mental ill health during their lives, and mental disorders can be found in 10% of the adult population. During the course of any one year 18.4 million people in the European Union aged between 18 and 65 are estimated to suffer from major depression.

One fifth of children and adolescents experience developmental, emotional or behavioural problems, and one in eight have a mental disorder. Many of these disorders are recurrent or chronic.

It has been estimated that mental disorders and problems will increase by 50% by the year 2020.

In addition, some 58 000 European Union citizens commit suicide each year, more than the annual deaths from road traffic accidents or HIV/AIDS, and ten times this number attempt suicide.¹

Whereas economic costs to society of mental ill health are enormous, with some estimates putting them at between 3% and 4% of GDP (Gross Domestic Product) in the Member States of the European Union, yet, according to the WHO (World Health Organization) Regional Office for Europe: *"All countries (in the region) have to work with limited resources. Too often, prejudice and stigma hamper the development of mental health policies, and are reflected in poor services, low status of care providers and a lack of human rights for mentally ill people."*

¹ John Bowis - Committee on the Environment, Public Health and Food Safety, 2006, Report on Improving the mental health of the population - Towards a strategy on mental health for the European Union (2006/2058(INI)) of 18.07.06

Users of mental health services are at extremely high risk of human rights abuses.

Across Europe, thousands of people with mental health problems spend many years, or their entire lives, isolated in institutions. While the quality of life in institutions varies, all deny people with mental disorders the right to live included in the community and society.

Many institutions deny people with mental health problems their basic human rights. Residents of these institutions have no choice over how to live their lives and no control over decisions made about them. Others decide where and with whom they will live, how many people they will share their room with and what clothes they will wear. Others decide how their money will be spent. In these institutions residents are not allowed to have a relationship or get married. They cannot leave the institution freely and often lose any contact with their family and friends. Most have no access to education or employment and spend their days with little or nothing to do. In some cases members of the staff have neither the skills nor the knowledge to provide residents with the necessary habilitation and therapy.

People with mental disorders living in institutions are often victims of serious human rights violations. Some reports have documented residents being kept in "caged beds" - in which they are physically restrained in unacceptable circumstances - and the use of unmodified electroshock therapy.² Others highlight physical and sexual abuse by the staff and other residents, degrading living facilities and the failure to provide for basic needs. The situation in new EU Member States such as Bulgaria and Romania, as well as in other countries of Eastern Europe, is particularly appalling. People with mental disorders are subjected to high rates of abusive behaviour and experience unacceptable levels of discrimination. Concerns about the treatment of people with mental disabilities, especially in Romania and Bulgaria, have been the subject of Amnesty International reports.³

The only way to ensure respect for human rights in mental health systems and in-patient facilities is through effective enforcement of international and European human rights standards, principally through rights-based national legislation.

Protecting the rights of people with, or at risk of, mental health problems, particularly those placed in mental in-patient facilities, is at the core of several key international and European instruments.

At the international level, major human rights standards applicable to mental health have been adopted: the *Un Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care* (MI Principles, 1991), and the *Standard Rules on the Equalisation of Opportunities for Persons with Disabilities* (Standard Rules, 1993).

However, there is a widespread misconception that because the human rights instruments relating specifically to mental health and disability are non-binding resolutions, rather than obligatory conventions, mental health legislation is therefore subject only to the domestic discretion of governments.

² Mental Disability Rights International, Behind closed doors: Human Rights Abuses in the Psychiatric Facilities, Orphanages and Rehabilitation Centers of Turkey, 28.09.05

Crowley, F., *Mental Illness - The Neglected Quarter*. Amnesty International (Irish section) Summary report, 2003

³ Latvian Centre for Human rights, Human Rights in Mental Health Care in Baltic Countries, 04.08.06

Amnesty International, Memorandum to the Romanian Government Concerning Inpatient Psychiatric Treatment, 04.05.04

Amnesty international, Bulgaria: Far from the eyes of society - Systematic discrimination against people with mental disabilities, 10.10.02

Member States' governments should be reminded that they are under obligation, under international human rights law, to ensure that their policies and practices conform to binding international human rights law – and this include the protection of persons with mental disorders.

This attitude may change however, since a new *UN Convention on the Rights of Persons with Disabilities* has been recently adopted (December 2006). Once signed and ratified, it will have an impact on national laws that will transform how people with disabilities, including people with mental health problems, can live their lives. It will offer a way forward to ensure that those with disabilities enjoy the same human rights as everyone else -- in education, employment, access to buildings and other facilities, and access to justice.

At the European level, Member States have adopted a number of instruments protecting the dignity and human rights of people with mental disorders, mostly in the framework of the Council of Europe:

- the Council of Europe *European Convention for the Protection of Human Rights and Fundamental Freedoms*, that provides binding protection for the human rights of people with mental disorders residing in the States that have ratified the Convention; mental health legislation is required to grant safeguards against involuntary hospitalisation.
- the Council of Europe *European Convention for the Protection of Human Rights and Dignity of the Human Being, with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine* (1996), a binding instrument which provides for informed consent, equal access to medical care and for the right to be informed.
- the Council of Europe *Recommendation 1235 on Psychiatry and Human Rights* (1994), which lays down criteria for involuntary admission, the procedure for involuntary admission, standards for care and treatment of persons with mental disorders, and prohibitions to prevent abuses in psychiatric care and practice;
- the Council of Europe *Recommendation Rec (2004) 10 concerning the Protection of the Human Rights and Dignity of Persons with Mental Disorders* (2004), which calls upon Member States of the Council of Europe to enhance the protection of the dignity, human rights and fundamental freedoms of people with mental disorders, in particular those subject to involuntary placement or involuntary treatment.
- the Council of Europe *European Convention for the Prevention of Torture and Inhumane and degrading Treatment or Punishment* (1987).
- the Revised *European Charter on Social Rights*, whose article 15 in particular provides for the rights of people with mental disorders to independence, social integration and participation in the life of the community.
- the EU *Charter of Fundamental Rights* (2000), which protects human dignity as well as fundamental freedoms, equality, solidarity and citizen's rights.

These standards should be incorporated into mental health laws and practice of all EU Member States. All Member States should also ensure that their allocation of resources to mental health services is sufficient to allow human rights standards to be met.

Finally, all Member States should review and reform their mental health systems and laws to guarantee compliance with international human rights standards and best professional practice. Mental health service users should play a part in that process.

At the Helsinki conference (January 2005), the 52 countries in the WHO European region have signed a Mental Health Declaration and Action Plan for Europe, with the objective of tackling the stigma and discrimination that affect people with mental health problems in their daily lives.

They have agreed that mental health policy development and implementation must not be jeopardized by the widespread stigma attached to mental health problems that leads to discrimination. In many cases - access to employment, health care services, education/training, housing, transport, leisure activities... -, people with mental health problems suffer from a lack of equal opportunity because of such discrimination.

As a consequence, the social exclusion experienced by mental health service users, whether in asylums and institutions or in the community, must be tackled and their human rights must be protected in a variety of ways:

- acknowledgment of important safeguards, including the right to the highest attainable standard of physical and mental health;
- protection against discrimination;
- protection against torture, inhuman and degrading treatment;
- protection against arbitrary detention;
- introduction/monitoring of disability rights legislation to ensure that it covers mental health equally and equitably;
- introduction of target activities that emphasise the fact that mental health problems are rarely associated with violence, to counter stigma and discrimination.

Empowerment is a crucial step towards meeting these objectives, as it enhances integration and social inclusion. It is essential that people with mental health problems have a right to inform and participate in all decision-making and policy formulation that affect them. The lack of empowerment of service users' and carers' organisations hinder the design and implementation of policies and activities that are sensitive to their needs and wishes.

Implementation of the WHO/Euro Declaration and Action Plan requires concerted and well coordinated action by all relevant ministries and other authorities. It is essential to adopt detailed programmes and actions, with clear timeframes and dedicated resources.

MHE recommendations to overcome the discrimination and social exclusion of people with mental health problems and improve their human rights situation.

MHE calls on the EU to help to prevent abuses and violations of the human rights of people with mental health problems and to provide adequate funding, organisational investment and political support to:

- improve the quality standards of care and rehabilitation;
- eliminate unacceptable practices;
- draw attention to deficiencies in practice;
- promote the empowerment of (ex)users and survivors of psychiatry in order to protect themselves against discrimination;
- raise awareness among health professionals to improve their knowledge, broaden their skills and improve their attitudes towards people with mental health problems;
- provide an up-to-date legal framework on non-discrimination with a focus on human rights ensuring the dignity of people with mental health problems.

Improving the human rights situation of people with mental health problems could only be achieved through appropriate education and training of health care providers and mental health professionals, who are directly involved in their recovery, as well as targeted awareness raising of health care ministers and relevant political authorities.

Mental Health Europe, 16 January 2006