

Preventing the inexcusable human rights violations of people with mental and psychosocial disabilities

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Stigma and discrimination lead to pervasive human rights violations against people with mental and psychosocial disabilities in low-income and middle-income countries. The final paper in The *Lancet* Series on Global Mental Health draws on the views, expertise, and experience of 51 people with mental and psychosocial disabilities from 18 low-income and middle-income countries as well as a review of English language literature including from UN publications, non-governmental organisation reports, press reports, and the academic literature. The report is by Natalie Drew, World Health Organization, Switzerland, and Sylvester Katontoka, Mental Health Users Network of Zambia, Lusaka, Zambia, and colleagues.

Human rights violations span basic civil, cultural, economic, political, and social rights. They include, in order of reported frequency: exclusion, marglinalisation, and discrimination in the community; denial or restriction of employment rights and opportunities; physical abuse/violence; inability to access effective mental health services; sexual abuse/violence; arbitrary detention; denial of opportunities for marriage/right to create a family; lack of means to enable independent living in the community; denial of access to general health/medical services, and financial exploitation. The environments in which these human rights violations are most likely to take place, are, in order from highest to lowest: the general community and everyday life; home and family settings; the workplace (or potential workplace); psychiatric



institutions and other <u>mental health</u> services; hospitals and health-care services; prisons, police and the legal system; government and official services; and schools and the education sector.

The authors say: "In the health-care context, two major concerns are lack of access to mental health care, and ill treatment and abuse by health workers…Issues central to human rights violations are the denial of people's right to exercise legal capacity and discrimination in employment."

To deal with this vital issue, the authors advocate adopting and applying the framework of the UN Convention on the Rights of Persons with Disabilities (CRPD) and using a range of evidence-based strategies, saying this will help put an end to these violations and to promote human rights. Among their suggested strategies are: running public-awareness and anti-stigma campaigns; providing better training for mental health professionals and increased funding for mental health services based in the community; promoting empowerment, rehabilitation, and participation of people with mental and psychosocial disabilities; implementing human rights oriented laws and policies, and establishing legal and oversight mechanisms to protect the rights of this marginalized group; forming support groups for people with these disabilities; and integrating mental health into overall health and development policies.

The authors conclude: "The CRPD and other international human rights standards require states and the international community to empower people with mental and psychosocial disabilities, their organisations, and civil society. Civil society must be enlisted as advocates and agents for change, holding governments accountable for meeting their obligations with regard to human.rights. To rectify this historic and ongoing neglect and mistreatment, it is essential to create clear benchmarks or indicators of tangible progress, with rigorous monitoring and assessment at the state and international level. Additionally, more research must be devoted to



examining the effectiveness of strategies to prevent violations and promote the rights of people with mental and psychosocial disabilities."

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