



“I was now a resident or rather an inmate of the hospital. I saw no one except the other people on the floor, who wore identical striped hospital robes and plastic bracelets with identifying names. Just as the bracelet was a closed stiff bracelet, the door was a locked door which I could not open. The mental health workers were the only ones who could open the locked door. I left my hope on the other side of the locked door.”

—Mental health service user



QualityRights

WHO QualityRights

Act, unite and empower
for mental health



**World Health
Organization**

Addressing a hidden human rights emergency

All over the world, people with mental and psychosocial disabilities experience a wide range of human rights violations, stigma and discrimination.

The care available in mental health facilities around the world is not only of poor quality but in many instances hinders recovery. Training of staff is minimal and outdated, and the level of knowledge and understanding of the rights of people with mental disabilities is very poor. It is common for people to be locked away in small, prison-like cells with no human contact or to be chained to their beds, unable to move. Inhuman and degrading treatment is common, and people in facilities are often stripped of their dignity and treated with contempt. Violations are not restricted to inpatient and residential facilities; many people seeking care from outpatient and community care services are disempowered and also experience extensive restrictions to their basic human rights.

In the wider community, people with mental disabilities are denied many basic rights that most people take for granted. For example, they are denied opportunities to live where they choose, marry, have families, attend

school and seek employment. There is a commonly held, yet false, assumption that people with mental health conditions lack the capacity to assume responsibility, manage their affairs and make decisions about their lives. These misconceptions contribute to the ongoing marginalization, disenfranchisement and invisibility of this group of people in their communities.

A new paradigm is required, in which services promote recovery and emphasize the key elements of autonomy and participation of service users in all aspects of their treatment and private lives.

What action must be taken?

Violations often occur behind closed doors and go unreported. Unless people know that they are happening, action cannot be taken to stop them.

For this reason, the World Health Organization has initiated *QualityRights*, a new project to unite and empower people to improve the quality of care and promote human rights in mental health and social care facilities. This project not only provides training for health care workers and mental health service users to improve services, it will also leave a lasting legacy of respect for human rights.

What are the objectives?

1

Improve the quality of services and human rights conditions in inpatient and outpatient mental health facilities.

2

Build capacity among service users, families and health workers to understand and promote human rights and recovery from mental disabilities.

3

Develop a civil society movement of people with mental disabilities to provide mutual support, conduct advocacy and influence policy-making in line with international human rights standards.

4

Reform national policies and legislation in line with best practice and international human rights standards.

What actions are taken?

1

Visiting committees are established in countries, which include people with mental disabilities, families of people with mental disabilities, mental health professionals and legal and human rights experts.

2

Committee members receive training in how to assess the quality and human rights conditions in mental health and social care facilities using the WHO QualityRights Tool Kit.

3

After assessing facilities, the visiting committees work collaboratively with service users, family and staff to prepare a plan to improve conditions in the facilities.

4

Improvement plans are implemented in mental health and social care facilities, and training on human rights is provided to service users, families and staff.

5

Technical and administrative support is provided to people with mental disabilities in facilities and in the community on setting up self-advocacy groups and family associations, on providing mutual support and information about mental health and human rights to other service users, their families and members of the community, on undertaking advocacy and campaigning and on participating in and influencing decision-making.

6

Policy and legislation in countries are reformed, on the basis of the assessments of facilities, to promote and protect human rights and encourage the development of a full range of high-quality community services to support the recovery of people with mental disabilities.

What are the long-term benefits?

The project has substantial long-term benefits. It will put an end to violations in all mental health and social care facilities and improve the quality of support and care provided. Using the skills obtained during the project, people with mental disabilities and family members who have participated in the project in their home country will be employed as consultants to help set up similar initiatives in other countries.

Importantly, the project is a building block for a grassroots civil society movement of people with mental disabilities. Through the establishment of civil society organizations, people with mental disabilities can take concerted action against human rights violations. They can participate more fully in community life, gain access to education and employment opportunities, actively contribute to decision-making on issues affecting them and work towards the provision of high-quality mental health services in the communities in which they live.

**People with mental disabilities have the same rights as everybody else.
It is time to act, unite and empower people to improve mental health.**

WHO QualityRights tool kit

WHO has prepared the *QualityRights tool kit to assess and improve quality and human rights in mental health and social care facilities*. The tool kit was prepared with input from international experts, including people with mental and psychosocial disabilities, and is based on the United Nations Convention on the Rights of Persons with Disabilities. Its aim is to give countries information on quality and human rights standards in facilities that must be respected, protected and fulfilled.

The tool kit provides practical information and guidance on:

- the human rights and quality standards to be met in both inpatient and outpatient facilities;
- preparing for an assessment, including establishing a multidisciplinary assessment committee;
- conducting a comprehensive assessment of facilities, including conducting interviews, observing and reviewing documentation; and
- reporting the findings and making appropriate recommendations on the basis of the assessment.

The tool kit covers five human rights themes:

1. The right to an adequate standard of living and social protection
2. The right to enjoyment of the highest attainable standard of physical and mental health
3. The right to exercise legal capacity and to personal liberty and the security of person
4. Freedom from torture or cruel, inhuman or degrading treatment or punishment and from exploitation, violence and abuse
5. The right to live independently and be included in the community

Each theme includes sets of standards and criteria against which the situation in facilities can be assessed. The team undertaking the assessment determines whether these quality and human rights standards are being met in facilities.

How, where and by whom can the WHO QualityRights tool kit be used?

- The WHO QualityRights tool kit is designed for use in low-, middle- and high-income countries.
- It can be applied in all inpatient and outpatient mental health and social care facilities.
- It can be used by different groups with an interest in promoting the rights of people with mental and psychosocial disabilities, such as dedicated assessment committees, nongovernmental organizations, national human rights institutions, national health and mental health commissions, health service accreditation bodies and national bodies and mechanisms established under international human rights standards.

WHO QualityRights tool kit: Setting quality and human rights standards for all facilities delivering mental health and social care

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**Support QualityRights
Contact us**

Mental Health Policy and Service Development
Department of Mental Health and Substance Abuse
World Health Organization
Geneva, Switzerland

Dr Michelle Funk, Coordinator: funkm@who.int
Ms Natalie Drew, Technical Officer: drewn@who.int
Ms Trish Robertson: robertsonp@who.int