WHO QualityRights tool kit

WHO has prepared the QualityRights tool kit to assess and improve quality and human rights in mental health and related services. The tool kit was prepared with input from international experts, including people with psychosocial and intellectual 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 services 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 services;
- preparing for an assessment, including establishing a multidisciplinary assessment committee;
- conducting a comprehensive assessment of services, 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 services can be assessed. The team undertaking the assessment determines whether these quality and human rights standards are being met in services.

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 related services.
- It can be used by different groups with an interest in promoting the rights of people with psychosocial and intellectual 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 in all mental health and related services

WHO gratefully acknowledges CBM, Grand Challenges Canada, and the Governments of Western Australia, Portugal and Spain for their support of the WHO QualityRights project.

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Act, unite and empower for mental health

WHO QualityRights
Addressing a hidden human rights emergency

Mental health is recognized as a central part of overall health and it is critical that countries provide services and supports that meet people’s needs and respect human rights. However, what we find is that the care provided in many services around the world is of poor quality; violates human rights and hinders recovery.

Training of staff is minimal and outdated, and the level of knowledge and understanding of the rights of people with psychosocial and intellectual 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 are often stripped of their dignity and treated with contempt. Violations are not restricted to inpatient and residential services; 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 psychosocial and intellectual 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 psychosocial and intellectual disabilities 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?
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 related services. 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.

1. Visiting committees are established in countries, which include people with psychosocial and intellectual disabilities, their families, carers and other supporters, health and other professionals, legal and human rights experts.

2. Committee members receive training on how to assess the quality and human rights conditions in mental health and related services using the WHO QualityRights Tool Kit.

3. After assessments, visiting committees work collaboratively with service users, family and staff to prepare a plan to improve conditions in services.

4. Improvement plans are implemented to improve quality of care and respect for human rights in services. In institutional settings, improvement plans will also help to re-orient care towards a community based model of service provision.

5. A full range of community based and recovery oriented services and supports are created, in line with the standards set out in the QualityRights Tool Kit and the Convention on the Rights of Persons with Disabilities.

6. Training on human rights and recovery is provided to people with psychosocial and intellectual disabilities, their families, carers and other supporters, health and other professionals.

7. Technical support is provided to create and/or strengthen associations and organizations in order to undertake advocacy, conduct campaigns and participate in and influence decision-making processes.

8. Policy and legislation in countries is reformed, on the basis of the assessments of services, to promote and protect human rights in line with the CRPD and other international human rights standards and to encourage the development of community services.

People with psychosocial and intellectual disabilities have the same rights as everybody else.

What are the objectives?

1. Improve the quality of care and human rights conditions in inpatient and outpatient mental health and related services.

2. Create community based and recovery oriented services that respect and promote human rights.

3. Build capacity to understand and promote human rights, recovery and independent living in the community.

4. Develop a civil society movement to conduct advocacy and influence policy-making.

5. Reform national policies and legislation in line with best practice, the CRPD and other international human rights standards.

What are the long-term benefits?
The project has substantial long-term benefits. It will improve the quality of support and care provided in all mental health and related services. Using the skills obtained during the project, people with psychosocial and intellectual 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 grass-roots civil society movement of people with psychosocial and intellectual disabilities. Through the establishment of civil society organizations, people 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.
Addressing a hidden human rights emergency

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