People with mental health problems have historically suffered and currently suffer human rights violations that require **joint action for protection and promotion by governments, services and societies**. They are also often subject to misconceptions and false beliefs that promote stigmatizing and discriminatory attitudes such as the belief that they are dangerous, have no capacity to make decisions by themselves or are weak, among others. Many people who have a mental health problem say that the stigma they experience is worse than the disorder itself.

**Human Rights (HR)** proclaimed in the Universal Declaration of Human Rights (UDHR) are those that all people have by the mere fact of being human; they are the starting point for individuals to live “a life with dignity.” The basic principles that underlie HR are equity, respect, freedom, equality, and dignity.

The Convention on the Rights of Persons with Disabilities (CRPD) is an international human rights instrument of the United Nations aimed at protecting the rights of persons with disabilities. The CRPD is a legally binding instrument, which means that when a country subscribes to and ratifies it, it is obliged to comply with and implement it. The CRPD was adopted by the United Nations in 2006. Currently, 186 countries (out of the 194 that have signed) have ratified the CRPD.

PAHO advocates for countries to comply with the international conventions they have signed and ratified on health-related issues, and in this specific case, to **promote and protect the human rights of people with mental health problems**. PAHO provides technical support to member states through guidelines, advice, and support to develop health legislation, as well as related policies, strategies, plans and regulations.
PAHO's 2023 policy to improve mental health and WHO's comprehensive mental health action plan 2020-2030 provide a framework to help countries prioritize and implement a people-centered, rights-based, recovery-oriented approach to mental health.

**Approaches**

- **Community-based**
  Bringing mental health services closer to people and promoting the participation of people with mental health problems in their communities.

- **Recovery-oriented**
  Emphasizing the empowerment of individuals to manage their own lives. It involves supporting individuals to find hope, develop self-esteem and resilience, establish healthy relationships, regain independence, and live a meaningful life.

- **Person-centered**
  Providing effective responses to the needs of people with mental health problems through the promotion of their participation and leadership in their comprehensive care.

- **Deinstitutionalization**
  As a process that proposes the transition from the reclusion of people with mental problems in psychiatric hospitals to dignified and quality care in the community.

The UDHR and the CRPD protect people with mental health problems. Among all the rights, we highlight the following as the most vulnerable in people with mental health problems:

- Being equal before the law (Article 2, UDHR).
- Having the same opportunities as everyone else (Article 5, CRPD).
- Not being subjected to arbitrary interference (Article 12, UDHR).
- Making their own decisions (Article 12, CRPD).
- Participating in social activities (Article 3, CRPD).
- Being protected in situations of risk (Article 11, CRPD).
- Receiving quality care (Article 25, CRPD).
- Respecting their physical and mental integrity (Article 12, CRPD).
- Respecting their privacy (Article 22, CRPD).
- Not being immobilized, isolated, or subjected to coercive actions (Articles 14 and 15, CRPD).

**How to promote and protect human rights in mental health?**

In the Americas region, despite efforts by mental health services to provide support and care for people with mental health problems, stigma, discrimination, and human rights violations continue to be evident. In many countries, people still do not have access to quality services that meet their needs and respect their rights and dignity. Coercive practices, poor and inhumane treatment and living conditions, neglect, and in some cases, even abuse, continue to be present in health care settings.
There are several tools and work strategies to protect and improve the quality of life of people with mental health problems. Among them, we highlight:

**Promoting their legal capacity** so that individuals can make decisions about their personal life and carry out valid legal actions (for example, getting married or signing a work contract).

**Using informed consent** in their health care to ensure that the person voluntarily accepts for example a medical or therapeutic intervention.

**Using supported decision-making tools** to promote autonomy.

**Working with advance care plans** where the person specifies comprehensive care and recovery options for the future so that he or she is at the centre of the recovery process by setting his or her own goals and objectives.

**Working in a coordinated and intersectoral manner** so that people with mental health problems can access education, employment, housing, and social benefits, thus addressing the social determinants of mental health.

**Eliminating coercive practices** such as those that use persuasion or threats to make a person do something against their will, such as confinement, involuntary treatment, or manual, physical or mechanical restraint. These practices significantly impair their physical and mental health.

**Creating alternatives for mental health treatment in the community** by providing a range of mental health services that can be tailored to the needs of people at different stages of life and the severity of the mental disorder, thus avoiding the use of practices such as long-term and involuntary hospitalization.

How can countries advance the protection and promotion of human rights in mental health?

Governments, in a coordinated and intersectoral manner, together with civil society, professional bodies, associations and other key actors, have a fundamental role in promoting regulatory and normative initiatives that foster positive practices in the field of human rights and mental health, as well as the limitation of practices that involve human rights violations, including associated sanctions.

Progressively advancing awareness among the general population, as well as capacity building for groups with greater vulnerability and key actors involved in social and health services, is essential for the protection and promotion of human rights for people with mental health problems.
RESOURCES

Universal Declaration of Human Rights

Conventional on the Rights of Persons with Disabilities, CRPD

Guidance and technical packages on community mental health services: Promoting person-centred and rights-based approaches

QualityRights materials for training, guidance and transformation

Deinstitutionalization of Psychiatric Care in Latin America and the Caribbean

WHO QualityRights tool kit: assessing and improving quality and human rights in mental health and social care facilities

Promoting rights and community living for children with psychosocial disabilities

Comprehensive Mental Health Action Plan 2013-2030

PAHO Policy for Improving Mental Health, 2023

CURSOS VIRTUALES

WHO QualityRights e-training on mental health

Protection and promotion of human rights in mental health and psychosocial support response in emergencies

Understanding and taking action against mental health stigma in health contexts