Mental Health Europe

08 March 2021

**Statement – Opening 24th Session CRPD Committee**

By Kristijan Grdan, Board Member of Mental Health Europe

Chairperson, Members of the CRPD Committee, Excellencies,

As a board member to Mental Health Europe, I am delighted to deliver this statement in front of the CRPD Committee. Mental Health Europe is a European non-governmental network organisation committed to the promotion of positive mental health, the prevention of mental distress, the improvement of care, advocacy for social inclusion and the protection of the rights of (ex)users of mental health services, persons with psychosocial disabilities, their families and carers. MHE places users of mental health services and persons with psychosocial disabilities at the centre of its work to ensure that the human rights of people who have experienced mental ill health are respected and protected across Europe. At this point let me congratulate the newly appointed CRPD Committee Members and wish them best of luck in this important endeavour.

I am joining you today to speak about the ongoing development of the draft additional protocol to the Oviedo Convention by the Bioethics Committee at the Council of Europe. The additional protocol addresses legal provisions when it comes to involuntary treatment and placement in psychiatry, with its latest draft including extremely low standards that would cement mental health practice in the 47 Council of Europe Member States and beyond.

For more than a decade, Mental Health Europe and other civil society organisations have tirelessly advocated against the development and adoption of the additional protocol. Among others, previous efforts were also made by the CRPD Committee, the Special Rapporteur on the Rights of Persons with Disabilities and the Special Rapporteur on the Right to Health. At this point, let me express my disappointment that so far, the DH Bioethics Committee has not respected full and meaningful participation of persons with disabilities regarding questions that concern them as rights holders. In light of the strong disagreement by the disability movement, this work clearly violates the spirit of the UN CRPD as a Convention that puts persons with disabilities at the centre of every decision-making respecting “nothing about us without us”.

Advocating for the end of coercive measures in mental health care and respecting legal capacity is not just wishful thinking. At Mental Health Europe we have been collecting practices around Europe that reduce and end coercion. They demonstrate a wide range of initiatives, coming from mental health professionals and peer-support networks alike, sometimes supported by dedicated mental health policies. A similar initiative can be seen by the World Health Organization under its Quality Rights Initiative, and an upcoming good practice guidance on community based mental health services promoting human rights and recovery. In light of these developments, we encourage member states to take a proactive and visionary stance to making the UNCRPD a reality, and in particular that mental health care systems should not rely on involuntary measures and harmful practices.

At this instance we must express our deep concern that eventual adoption of the draft Protocol will undermine the advocacy efforts aimed at full implementation of UN CRPD. In simple terms, member states will use the Protocol as an excuse for the continuation of human rights violations against people with disabilities in Europe and for avoiding UN CRPD standards. However, the legislative practice of the Council of Europe also risks setting a precedent to future deviation from human rights standards, and thus should be a matter of grave international concern beyond the disability rights movement.

Together with the European Disability Forum, the European network of (ex-)users and survivors of psychiatry, we have advocated against this protocol for a long time. On the 25th of March, we will launch an advocacy toolkit against the draft protocol during an online event. I invite all of you to join.

We believe it is time for the Council of Europe to finally end its work on the draft additional protocol. Instead, it should engage with persons with psychosocial disabilities to make mental health support a reality that is free from the use of coercive measure and respects the autonomy and dignity of the person.

Thank you very much for the opportunity to talk today, I wish you a successful session and enriching discussions.

For any queries, kindly contact

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