

Report

Second International Training Forum on Mental Health, Human Rights and Legislation

Geneva, Switzerland

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This document reports on the discussions and key recommendations made at the Second International Training Forum on Mental Health, Human Rights and Legislation organized by the Mental Health Policy and Service Development Team of the Department of Mental Health and Substance Abuse, WHO, Geneva.



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1. Introduction

Mental health legislation is an essential means of upholding the rights of people with mental disorders, ensuring appropriate treatment and promoting the mental health of populations. However, many countries do not have adequate legislative frameworks for mental health. Mental health legislation is absent in 25 per cent of countries, covering nearly 31 per cent of the world's population. Of the countries which do have mental health legislation, only half (51 per cent) have laws passed after 1990, and nearly a sixth (15 per cent) have legislation dating before the 1960s – before most of the currently used treatment methods became available.

The development of mental health legislation is particularly important in the light of the current burden imposed by mental disorders, globally. It is estimated that mental disorders comprised 12 per cent of the global burden of disease (GBD) in the year 2000, and that this will increase to 15% by 2020. Depression is predicted to become the second leading cause of health disability in the world by 2020. It is therefore essential that governments develop appropriate legislation to uphold the rights of people with mental disorders, ensure appropriate treatment and promote the mental health of their populations.

In recent years, the WHO Mental Health Policy and Service Development Team has been active in providing technical assistance to countries in this regard. A draft Manual on Mental Health Legislation has been developed, to provide countries with practical guidance for the reform of mental health legislation. A number of checklists, audit tools and training exercises have also been developed to assist countries to review and improve their own legislation.

To make these resources available and assist with the process of mental health legislation reform, WHO has organised training forums and workshops at international, regional and national levels. The 1st International Training Forum on Mental Health Policy and Service Development took place in Tunisia in November 2002. This document reports on the 2nd International WHO Training Forum – Mental health, human rights and legislation.

Objectives of the Training Forum

- To bring together mental health representatives from countries who wish to receive guidance on issues related to mental health, human rights and legislation.
- To offer information and training in developing and implementing mental health legislation.
- To provide a forum in which countries can share information and learn from one another's experiences.
- To establish an international network of people working towards the common goal of promoting and protecting the rights of people with mental disorders.

2. Opening speeches

Dr Benedetto Saraceno, Director, Department of Mental Health and Substance Dependence, opened the meeting and welcomed 125 participants from 56 countries around the world. He stressed the importance of this meeting in the context of the Mental Health Global Action Programme (MhGAP). This 2nd International Training Forum follows logically from the 1st International Training Forum in Tunisia, November 2002, which dealt more broadly with mental health policy. It offers an opportunity to share skills and learn from each other in the development of legislation for mental health and the protection of the rights of people with mental disorders.

In his opening address, Mr Alexander Capron, Director, Ethics and Health, stated that the right to health was established with the formation of WHO nearly 60 years ago. Health is a condition of mental and physical well-being. In many countries this is not honoured. Part of the problem is the limitation of medical interventions and technology. But a central problem is the infrastructure, particularly the legislative framework that ensures that people with mental disorders enjoy their full human rights. Stigma marks mental disorders in ways that used to be true of many physical disorders. The effects of stigma isolate people with mental disorders further and serve to exacerbate the symptoms of mental disorders. Legislation is essential to protect our most vulnerable citizens, particularly those with mental disorders.

To address these concerns, WHO is integrating mental health into public health in a range of areas. Every member state has signed up to a variety of treaties and agreements that protect human rights. There is the economic argument that improved mental health improves the productivity of society. But in addition to this, mental health legislation needs to be developed as a basic means of upholding the rights of people with mental disorders.

The Department of Mental Health and Substance Abuse is a flagship department of WHO that is taking forward its work in human rights. A crucial aspect of this work has been the development of a Mental Health Legislation Manual. In the development of this manual, a variety of stakeholders have been consulted. In other words the development of the manual has upheld the principles that it prescribes. This way of working is now being taken forward in this meeting, to which a range of stakeholders have been invited. Mr Capron wished participants well in this very important meeting.

Dr Helena Silfverhielm, Chairperson, welcomed the participants and outlined the purpose of the Training Forum. She provided an overview of the programme, ways of working and the tasks of the working groups (see Appendix 1, Agenda; Appendix 2, List of Participants; Appendix 3, List of Working Groups).

3. Presentations and discussions

3.1 Plenary meetings

During the plenary meetings, a series of presentations and panel discussions were made. For detail, see Presentations, Appendix 4).

Presentations	Panel discussions
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<ul style="list-style-type: none"> ➤ Introducing WHO's work and the International Training Forum (Dr M. Funk) ➤ Mental health law: From Control to Care (Dr B. Saraceno) ➤ Exploring the relationship between health and human rights (Ms H. Nygren-Krug) ➤ What are the international human rights standards related to mental health? (Dr S. Pathare) ➤ Mental health law reform – the user perspective (Mr K. Sylvester) ➤ Mental health law reform – the family perspective (Ms Susan Kirkwood) ➤ What should go into a mental health law? (Professor M. Freeman) ➤ WHO's Checklist on the content of national mental health legislation (Dr H. Watchirs) ➤ Case study: the process of developing a mental health law – the experience of India (Ms U. Ramanathan) ➤ A human rights approach to mental health (Dr L. Gostin) ➤ Case study: implementing mental health law – the experience of South Africa (Professor M. Freeman) ➤ Case study: evaluating mental health law reform – the experience of Italy (Professor M.G. Giannichedda) 	<ul style="list-style-type: none"> ➤ Mental health and human rights (Dr H. Silfverhielm and panel) ➤ The consumer and family perspective (Dr H. Silfverhielm and panel) ➤ The content of mental health law (Dr H. Silfverhielm and panel) ➤ Reflections on the Indian case study (Dr H. Silfverhielm and panel) ➤ Human rights and mental health (Dr H. Silfverhielm and Dr L. Gostin) ➤ Reflections on the South African case study (Dr H. Silfverhielm and panel) ➤ Reflections on the Italian case study (Dr H. Silfverhielm and panel) ➤ Feedback from the final meeting of the Working Groups (Dr H. Silfverhielm)
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The plenary sessions provided an opportunity for participants to engage in lively discussion with presenters. Frank questions were posed to the presenters and WHO representatives on a range of topics, from the rights and responsibilities of service users; to the role of legislation in protecting rights and promoting service accessibility; to empowerment of service users and families; to involuntary admission; to the role of review boards; to the role of consolidated versus dispersed mental health legislation; to seclusion and restraint; to the relationship between legal and mental health professionals; to the relationship between disability legislation and legislation specific to mental health; to the many difficulties of drafting, adopting and implementing mental health legislation; to methodologies for evaluating the implementation of mental health legislation.

3.2 Working groups

Working groups constituted a large portion of the activities of the Training Forum (for lists of Working Groups, see Appendix 3). There were five group sessions during the Training Forum, which covered the following topics:

- Getting to know participants
- The content of national mental health law (using the WHO Checklist and the Selected Provisions of Mental Health Law Exercise
- The process of developing a mental health law (using the WHO Guidance Instrument for Developing, Adopting and Implementing Mental Health Legislation
- Implementing mental health law (using the WHO Guidance Instrument for Developing, Adopting and Implementing Mental Health Legislation
- Reviewing the Training Forum

The Working Groups provided an active learning environment, through which participants could use the WHO tools to assess specific examples of mental health legislation, and relate these to mental health legislation in their own countries. The groups were a forum for engaging with the presented material and learning from shared experiences in countries' mental health legislation and human rights.

4. Feedback and key conclusions of the Training Forum

4.1 Headline messages from each Working Group

During the final plenary session, representatives from each of the Working Groups presented feedback on the major learning experiences of the Training Forum, as well as an evaluation of its success. Some of the headline messages are set out in the following box.

Some headline messages from Working Groups

“We had a very rich exchange of ideas and experiences.”

“The meeting empowered those involved in drafting legislation in some countries, and enabled constructive critique of existing legislation in other countries.”

“We need sustained support in our countries from WHO and technical experts.”

“Through sharing and solidarity we were able to see the practical usefulness of the manual and the need to work consultatively in creating mental health legislation.”

“The active participation of service users and family representatives was extremely useful.”

“It was very valuable to emphasise the human rights of people with mental disorders, in all of our work.”

“There could have been greater representation from a range of stakeholders, such as service users, families, parliamentarians, people from Spanish-speaking countries.”

“Sometimes we feel alone in our countries and it is good to see other people dealing with the same sort of problems. “

“The WHO Checklist is a very useful instrument that allows for flexibility, but also gives guidance.”

“Legislation is not likely to be effective only by being enacted. It is important to see it as a process with effort and involvement.”

“The case study presentations were very helpful. It was good to have real life experience.”

“International obligations on mental health services enabled us to discuss such important issues as confidentiality, involuntary admission, review procedures and the implementation of mental health legislation.”

4.2 Strategies for ongoing work

During the final session of the Training Forum, Dr Saraceno emphasized the need to continue with the work that has begun during this meeting. This meant building a global community of mental health workers (professional and non-professional) who are committed to developing mental health legislation that upholds the rights of people with mental disorders and promotes the delivery of needed services.

Dr Saraceno outlined WHO’s commitment to provide continuing support to countries in developing mental health legislation and promoting the rights of people with mental disorders. This includes:

- Dissemination of the Mental Health Legislation Manual, and the related WHO Checklist, training exercises and other audit tools.
- Provision of technical assistance to assist countries to reform mental health legislation.
- Organisation of regional and national training events to empower mental health stakeholders in countries to develop, adopt, implement and evaluate mental health legislation.

5. Closure

Dr Michelle Funk closed the meeting by thanking participants, the chairperson, WHO faculty, working group facilitators, presenters, rapporteurs, interpreters, regional advisors and WHO secretariat in Geneva, particularly the technical and administrative staff for hosting and organising the Training Forum. She also thanked the donors whose generous contributions made this International Training Forum possible: the Governments of Australia, Finland, Italy, the Netherlands, New Zealand and Norway, as well as La Fondation pour Geneve, the Eli Lilly and Company Foundation, the Geneva International Academic Network (GIAN), and the Corporate Social Responsibility Europe, Johnson and Johnson.

Appendix 1. Agenda

Day One - 10 November

08.30 – 09.00	Opening Ceremony Dr B. Saraceno, and Mr A. Capron
09.00 – 09.20	Introducing WHO's work and the International Training Forum (Dr M. Funk)
09.20 – 09.45	Mental health law: From control to care (Dr B. Saraceno)
09.45 – 10.00	The Forum programme and introducing Day One (Lead Facilitator: Dr H Silfverhielm)
10.00 – 10.20	Exploring the relationship between health & human rights (Ms H. Nygren-Krug)
10.20 – 10.50	Break
10.50 – 11.20	What are the international human rights standards related to mental health? (Dr S. Pathare)
11.20 – 11.50	Panel discussion: mental health and human rights (Panel and Dr H Silfverhielm)
11.50 – 13.00	1 st Working Group Meeting – getting to know participants <ul style="list-style-type: none">• Introductions• Role of participants in Mental Health law reform
13.00 – 14.00	Lunch break
14.00 – 14.20	Mental health law reform - the user perspective (Mr K Sylvester, MHUNZA)
14.20 – 14.40	Presentation: Mental health law reform - the family perspective (Ms S Kirkwood, EUFAMI)
14.40 – 15.15	Panel Discussion: the consumer and family perspective (Panel and Dr H Silfverhielm)
15.15 – 15.45	Break
15.45 – 16.45	What should go into a mental health law? (Professor M. Freeman)
16.45 – 17.20	Panel discussion: the content of mental health law (Panel and Dr H Silfverhielm)
17.20 – 17.30	Review of Day One and Preview of Day Two (Dr H Silfverhielm)
19.00	Reception

Day Two - 11 November

08.30 – 08.40	Introducing Day Two (Dr H Silfverhielm)
08.40 – 09.00	Presentation: WHO's checklist on the content of national mental health legislation (Dr H. Watchirs)
09.00 – 10.30	2 nd Working Group Meeting – The content of national mental health law
10.30 – 11.00	Break
11.00 – 12.00	2 nd Working Group Meeting – The content of national mental health law.
12.00 – 13.00	Lunch break
13.00 – 14.00	Open session
14.00 – 14.30	Case study presentation: the process of developing a mental health law – the experience of India (Ms U. Ramanathan)
14.30 – 14.50	Panel discussion: Reflections on the Case Study (Panel and Dr H Silfverhielm)
14.50 – 15.50	3 rd Working Group Meeting – the process of developing a mental health law <ul style="list-style-type: none">• What is the main learning from the Case Study?• What problems would we anticipate in our own national contexts?
15.50 – 16.20	Break
16.20 – 17.20	3 rd Working Group Meeting – The process of developing a national mental health law
17.20 – 17.30	Review of Day Two and Preview of Day Three (Dr H Silfverhielm)

Day Three - 12 November

08.30 – 08.40	Introducing Day Three (Dr H Silfverhielm)
08.40 – 09.10	Case study presentation: Implementing mental health law – the experience of South Africa (Professor Melvyn Freeman)
09.10 – 09.30	Panel discussion: Reflections on the Case Study (Panel and Dr H Silfverhielm)
09.30 – 10.30	4 th Working Group Meeting – Implementing mental health law <ul style="list-style-type: none">• What is the main learning from the Case Study?• What problems would we anticipate in our own national contexts?
10.30 – 11.00	Break
11.00 – 12.00	4 th Working Group Meeting – Implementing mental health law
12.00 – 13.00	Lunch break
13.00 – 13.30	Case Study Presentation: Evaluating mental health law reform – the experience of Italy (Professor M. G. Giannichedda)
13.30 – 13.50	Panel discussion: Reflections on the Case Study (Panel and Dr H Silfverhielm)
13.50 – 14.50	Final Working Group Meeting - Reviewing the Training Forum <ul style="list-style-type: none">• Reflections on personal learning• Completing evaluation proformas• Preparing feedback from the Group
14.50 – 15.20	Break
15.20 – 16.20	Feedback from Final Working Group Meetings Headline messages from the Working Groups
16.20 – 16.35	Next Steps and Closure What will happen next, including Mental Health Networks Closing messages and observations from WHO (Dr B. Saraceno and Dr M. Funk)
16.35	Closure

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Appendix 3. Working groups

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- Dr Abelhatic Bouslimane – Algeria
- Dr Alain Maxime Mouanga - République du Congo
- Ms Yvonne Kayiteshonga – Rwanda
- Dr Abderrahman Didouh – Morocco
- Professor Kodjo Grunitzky – Togo
- Dr Mihai Hotineanu – Moldova

Working Group Two:

Lead facilitator Professor Melvyn Freeman & co-facilitators Dr Dickson Chibanda, Dr Crick Lund

- Dr Rui da Incarnacao Pires - Angola.
- Dr David Musau Kiima – Kenya
- Mrs Malephoi Makara – Lesotho
- Mrs Noko Masopha – Lesotho
- Ms M. Mushimba – Namibia
- Ms Antonia Kangumine – Namibia
- Dr Harry Taiwo Ladapo – Nigeria
- Ms Nomusa D. Mabaso - South Africa
- Dr Fred Kigozi - Uganda

Working Group Three:

Lead facilitator Dr Robert Dinerstein & co-facilitator Professor Lawrence Gostin

- Dr Cayetano - Belize
- M. Spencer Bugingo – Rwanda
- Dr Angela Caba - Rep. Dominicana
- Mr Thorne Roberts – Grenada
- Dr Liliana Peñaherrera – Peru
- Dr Shish Ram Narayan – Fiji
- Ms Lusewane Rai Villiame – Fiji

Working Group Four:

Lead facilitator Dr Khalid Saeed & co-facilitator Dr Usha Ramanathan

- Dr Mohammad Taghi Yasamy – Iran
- Dr Ahmed Al Ansari – Bahrain
- Dr Ahmed Abdel Rehim Mohamed – Egypt
- Professor Gnam - Egypt
- Dr Yashir bin Abdul Rehda Bager Al Lawati – Oman
- Dr Pierre Chiniara - Syrian Arab Republic
- Dr Bassam Al-Ashhab – West Bank
- Dr Ayesh Samour - Gaza

Working Group Five:

Lead facilitator Dr Matt Muijen & co-facilitators Dr Svetlana Polubinskaya, Dr Helen Watchirs

- Dr Devora Kestel – Albania
- Dr Ledia Lazeri – Albania
- Dr Alma Dzubur-Ku – Bosnia and Herzegovina
- Dr Ismet Ceric - Bosnia and Herzegovina
- Dr Haris Taube – Latvia
- Dr Ona Davidoniene – Lithuania

Working Group Six:

Lead facilitator Professor Christian Curtis & co-facilitators Dr Eddie Kane, Dr Lars Jacobson

- Dr Athanassios Constantopoulos – Greece
- Professor V. Krasnov - Russian Federation
- Professor Cyril Höschl- Czech Republic
- Dr Nikica Panova – Macedonia
- Ms Snezana Cicevalleva – Macedonia
- Mr Stojan Bajraktarov – Macedonia
- Dr Aliriza Arenliu – Province of Kosovo, Serbia and Montenegro
- Dr Ismet Abdullahu – Province of Kosovo, Serbia and Montenegro

Working Group Seven:

Lead facilitator Dr Soumitra Pathare & co-facilitator Dr Nadia Kadri

- Professor Ramesh Bhat - India

- Dr Kiran Rao – India
- Dr Ravindra Bakre – India
- Dr Apichai Mongkol - Thailand
- Dr Yan Jun – China
- Dr Zhang Mingyuan –China
- Dr Liu Jin – China

Working Group Eight:

Lead faciliator Professor Josephine Cooper & co-faciliator Dr Xie Bin

- Dr Ding Wei – China
- Dr Xiao Zeping – China
- Dr Zhou Dongfeng – China
- Dr Gu Lihong – China
- Dr Nguyen Duc Tien – Vietnam
- Dr Tran Van Quang – Vietnam
- Dr L. Hiranthi S De Silva - Sri Lanka

Appendix 4. Evaluation

Second International Training Forum on Mental Health, Human Rights, and Legislation Geneva, Switzerland, 10-12 November 2003

Evaluation Report

This is a summary of the evaluation of the Second International Training Forum on Mental Health, Human Rights, and Legislation, held in Geneva, Switzerland, November 2003, organized by the Mental Health Policy and Service Development team, Department of Mental Health and Substance Dependence at WHO Headquarters

One hundred and five participants coming from 56 countries in each of the 6 WHO regions attended the Training Forum including Ministry of Health participants ranging from policy makers and planners to service providers of health/mental health. There were an additional 20 participants from WHO secretariat, comprising regional advisors from AMRO, EURO, WPRO, AFRO and SEARO as well as technical and administrative support staff from the Departments of Mental Health and Substance Abuse, and Ethics and Human Rights at WHO HQ, totalling a number of twenty.

The atmosphere of the meeting was positive and collaborative and with a high level of commitment to the Mental Health, Human Rights, and Legislation project was demonstrated by participants. A large majority of participants regarded the Geneva training forum on mental health, human rights, and legislation as providing a valuable learning experience. Many participants felt that all goals of the Forum were successfully attained. The majority of respondents commented positively on the achievements of the forum and its efficiency as a collective point of reference for the development of their own legislation in the area of mental health and human rights.

Were the Forum goals met?

The majority of participants considered the aims of the Forum had been adequately met. Eighty-five percent of participants rated the effectiveness of the Forum as good to excellent in outlining WHO's framework for developing and implementing mental health legislation. Additionally, as many as 90% of participants rated the technical information and training provided on international standards related to the rights of people with mental disorders as good to excellent. Another 86% highly rated the provision of training to assess, develop, and implement mental health laws. Eighty percent of participants stated that the forum was successful in facilitating the sharing of information and experiences between countries with regard to mental health, human rights and legislation.

How were the different sessions of the Forum ranked?

The training Forum included plenary presentations, case study presentations, panel discussions, and working group discussions. A Resource Pack of reading materials and tools was prepared and provided to participants well in advance of the forum in order to facilitate the completion of training exercises during the working group sessions. In general, participants felt that presentations and discussions were all effective in offering them more knowledge about developing and implementing their country's mental health law.

Fifty out of 66 participants (76%) ranked the information offered to them during plenary and case study as good to excellent. Many participants found these sessions extremely useful in helping participants understand, document, and reform their mental health legislation. Panel discussions were also well received amongst many participants (48 out of 66: 73%) who ranked them as good to excellent. However a few French-speaking participants felt they would have benefited more from panel discussions had they been interpreted from English to French.

Working group discussions were ranked as good to excellent by 90% of participants. Participants felt that such discussions were integral and conducive to networking possibilities between countries in similar stages and processes of legislative development. Lastly, 88% of the participants found the Resource Pack to be very useful in their understanding of the Forum.

Was the Forum Organization and venue satisfactory?

As many as 87% of respondents ranked the Organization and Venue of the meeting as “good to excellent” and a large majority of participants (86%) ranked the event administration as “good to excellent”. 42 out of 63 of respondents (67%) highly ranked the catering with a few concerns expressed regarding the insufficient time allocated to lunch breaks. 56 out of 64 respondents (88%) ranked the overall facilities for the training Forum “good to excellent”. Additionally, 47 out of 61 respondents (77%) were highly satisfied with lodging options, although a few participants expressed concerns about the high costs in Geneva.

Table 1: Rankings of the different components of the 2nd International WHO Training Forum on Mental Health, Human Rights, and Legislation held in Geneva, Switzerland on 10-12 November 2003

Number of respondents: 66	N / A	1 Poor	2 Average	3 Good	4 Excellent
1. AIMS- Have we met the aims of the Forum?					
(i) to outline WHO’s framework for developing and implementing mental health legislation		1	3	30	26
(ii) To offer technical information and training on international standards related to the rights of people with mental disorders		1	5	25	34
(iii) To provide training on the steps required to assess, develop, and implement mental health law		2	6	25	32
(iv) To facilitate the sharing of information and experiences between countries in the areas of mental health, human rights, and legislation		1	11	24	29
2. Activities and inputs- How valuable were the following activities and inputs?					
(i) Working group discussions		2	3	17	42
(ii) Case studies and presentations		2	12	31	19
(iii) Panel discussions		1	16	34	14
(iv) The Resource Pack		2	5	28	30
3. Organization and Venue- How would you rate the following?					
(i) Event Administration		1	8	30	25
(ii) Facilities for the Training Forum (meeting rooms etc.)		4	5	24	32
(iii) Catering		6	15	25	17
(iv) Your Hotel Room		5	9	24	23