Leading the Voice of Voiceless People
My Voice for Dignified Life

Mental Health and Human Rights

National Human Rights Commission’s Strategic Plan Support Project (SPSP)

DECEMBER 2017
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An Outreach Intervention
of
National Human Rights Commission’s
Strategic Plan Support Project (SPSP)

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“All human beings are born free and equal in dignity and rights”
Universal Declaration of Human Rights
The Constitution of Nepal 2015 has recognized the right to health as a fundamental right of citizens. The World Health Organization (WHO) defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, and affirms that health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition. It is worthwhile to note that the WHO definition of health also includes mental well-being. Good mental health enables people to realize their potential, cope with the normal stresses of life, work productively and contribute to their communities. Since the National Human Rights Commission (NHRC) of Nepal has put in high consideration for the promotion and protection of human rights of mentally disabled people, NHRC has included it in its Strategic Plan 2015-20 as priority.

In this regard, the Strategic Plan Support Project (SPSP) of NHRC worked exclusively in promoting and protecting the human rights of mentally and psychologically disabled people, such as by reaching out the grass-root level through awareness and advocacy programmes with service providers, duty bearers, civils society organizers and victims/survivors. It also initiated pilot programmes focusing on monitoring, outreach and the promotion of rights for people with mental disabilities. All these efforts, I believe, have recorded the voice of voiceless people in enjoying their dignified lives.

I acknowledge the support extended from Swiss embassy, Denmark embassy, UNDP, KOSHISH, NHRC Promotion Division and project team in executing this programme.

This consolidated report highlights the results, achievements and draws upon lesson learnt from mental health and human rights interventions. I believe that the report will help enriching our knowledge, and set up a baseline understanding on ways to promote and highlight human rights issues of mentally disabled people. I also hope that this will help unveil ways forward to similar initiatives in future.

Bed Bhattarai
Secretary, NHRC
### CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>6</td>
</tr>
<tr>
<td>Start up</td>
<td>8</td>
</tr>
<tr>
<td>Objectives of the programme</td>
<td>9</td>
</tr>
<tr>
<td>Activities</td>
<td>10</td>
</tr>
<tr>
<td>Focus of the intervention</td>
<td>11</td>
</tr>
<tr>
<td>Outcomes</td>
<td>13</td>
</tr>
<tr>
<td>Reflections verbatim</td>
<td>14</td>
</tr>
<tr>
<td>Key results</td>
<td>17</td>
</tr>
<tr>
<td>Lesson learnt</td>
<td>18</td>
</tr>
<tr>
<td>Ways forward</td>
<td>19</td>
</tr>
</tbody>
</table>
Introduction
Mental health is important to lead the dignity of life. A person needs to be physically, mentally and socially healthy to enjoy rights such as right to development, right to employment and right to life; and more importantly, these rights are related to basic fundamental rights including right to life, freedom, equality and dignity. The Constitution of Nepal 2015 (in Part 3 on “Fundamental Rights and Duties, article 35) includes rights related to health. It states that every citizen shall have the right to free basic health care from the State, and no one shall be deprived of emergency health services.

Nepal Health Sector Strategy (2014-2020) has ensured providing OPD and emergency services on mental health. The National Human Rights Commission (NHRC), in cooperation with civil society organizations, has been advocating for result-oriented implementation of the policy to protect and promote implementation of National Health Policy (1991). Even though the Ministry of Health is a legal body to implement the national policy, the NHRC had included in its strategic plan (2015-2020) and strategic action plan (3.3.1) as the prime human rights body. The policy includes the rights of people with mental disabilities as a priority issue.

In order to strengthen the capacity of human resources of NHRC on mental health and human rights issues, to initiate effective advocacy from national to local levels, and to promote and protect the human rights of mentally disabled people, the NHRC conducted a national training of trainers on mental health and human rights in Kathmandu on 20-24 November 2017 as a part of the Strategic Plan Support Project (SPSP) in collaboration with KOSHISH (a national mental health self-help organization). The participants included nine Human Rights Officers from the NHRC, representatives from five civil society organizations (CSOs) and self-advocates working on mental health issues.

The NHRC believes that the collaborative and continuous advocacy and lobbying with government stakeholders and concerned authorities impelled the Government of Nepal to establish a committee on mental health and to form a focal division and focal unit at the Ministry of Health to deal with mental health issues throughout the nation. The NHRC included the issues of mental health in its strategic plan (2015-20) and in SPSP (as Output#4) with the objective that the NHRC commissioners and staff protect and promote the rights of people with mental disabilities through a newly designed, planned and implemented intervention. The NHRC-SPSP was rolled out as an awareness and advocacy package at the central and regional levels in collaboration with civil society organizations.
Start up

- Training of Trainers (ToT) on Mental Health and Human Rights
- A total of 25 participants
- Enhanced the capacity of human rights defenders and self-advocates, and prepared Master Trainers on human rights and mental health for regional training
Objectives of the programme

- To sensitize health workers and human right defenders on mental health and human rights issues at district and local level;
- To make the best use of the knowledge and skills on advocacy and lobby with civil society organizations, media, NHRC and service providers together; and
- To expand and strengthen the outreach of NHRC at the local levels to underscore the issue of mental health and human rights by making health workers and human right defenders accountable on the issue.
Activities

- Training of Trainers (ToT) on mental health and human rights in Kathmandu
- Five trainings were conducted on mental health and human rights (Biratnagar, Janakpur, Pokhara, Nepalgunj and Dhangadhi) for 139 participants from 48 districts (including 40% women)

Key issues covered in the trainings

- Basic concepts of human rights
- Human rights and mental health in Nepal
- Concepts on crime, human rights violations, abuse and abetment
- Convention on the Rights of Persons with Disabilities (CRPD), core conventions and mental health
- Advocacy skills
- Psychological first aid
- Situation of mental health in Nepal
- Existing Nepalese laws and policies on right to health
- Collaboration, coordination with civil society and NHRC
- Basic principles of human rights monitoring
Focus of the intervention
These trainings which took place in collaboration with CSO by maximizing the in-house expertise the NHRC supported importantly helped NHRC itself to broaden its outreach for advocacy and monitoring human rights issues of mentally disabled persons. It brought together human right defenders and health workers into a common forum, and imparted knowledge and skills on advocacy and lobbying on human rights and mental health by sensitizing human right defenders and health workers.

Similarly, the training strengthened the NHRC’s collaborative approach of outreach with civil society, and media at local level. It also incorporated a range of advocacy and lobbying approaches at local level on mental health and human rights issues. The training offered a range of opportunities for NHRC and civil society organizations so as to have in-depth discussions on the core issues, challenges and opportunities related to mental health and human rights. By doing so, it initiated robust collective actions to protect and promote the rights of persons with mental disabilities and identify gaps and challenges on mental health. It also helped identify other pertinent issues surrounding human rights of people living with mental health problems and design more intervention at local level through collaboration with health workers and local stakeholders. It also furthered joint and continuous advocacy initiatives with the government and other stakeholders, both at central and local levels, which hopefully will help them become accountable on human rights and mental health issues.

After receiving trainings, the participants expressed their commitments to put their efforts in ensuring the rights of persons with mental health/psychosocial disability by developing and signing a petition paper called “Commitment 2017 for Mental Health and Human Rights”. The paper expresses their pledge to continue rigorous advocacy and awareness works at local levels to influence the government line agencies in order to formulate mental health disability-friendly laws, policies and implementation complying provisions enshrined as fundamental rights in the Constitution of Nepal 2015.
Outcomes

a. **Understanding of the issue developed**: The trainings deepened a better understanding among human rights defenders and health workers on the protection and promotion of the rights of persons with mental health problems.

b. **Trainers and expertise developed**: The trainings maximized expertise of NHRC’s in-house trainers and SPSP trained master trainers, and broadened the outreach of NHRC and civil society for advocating and monitoring human rights issues of mentally disabled persons. It also mobilized trained master trainers.

c. **Advocacy skill on policy-making on mental and health and human rights improved**: Unveiled opportunities to NHRC and civil society organizations (CSOs) to advocate on key issues, challenges and opportunities related to mental health and human rights issues.

d. **Commitment and declaration produced**: A Declaration of eight points commitment on mental health and human rights was pledged for rigorous advocacy and awareness programme at local level to influence the government and line agencies to formulate mental health/psychosocial disability-friendly laws, policies complying with the provisions enshrined in the Fundamental Rights Chapter of the Constitution of Nepal 2015.
Reflections verbatim

I was nominated by NHRC to participate on the training of trainers (ToT) on mental health and human rights conducted by SPSP in November 2016. The training became a cornerstone to shape my dream and work closely with human rights defenders and government line agencies.

Since then, I have been facilitating trainings on mental health and human rights which has supported to protect the rights of people with mental disabilities. Networks have been developed with District Women Children Development Office, KOSHISH Nepal, District Court, Networks of Women Human Rights Defenders and B.P Koirala Health Institute and INSEC. Recently collaborating with these organizations, I have rescued three cases of mentally ill persons who are still under treatment. Nowadays, I have developed my new identity. I understand that there is a long way to go and the path is still difficult but I will continue to move ahead.

This is the first training I have ever participated on human rights and mental health. The training helped us to develop inter-district networks of human right defenders and to work even extensively on mental health issues. With the trainings, I have made commitments to implement skills, knowledge and experiences gained through the training for the protection and promotion of the human rights of mentally disabled persons.
I have been a part of medical treatment of mentally disabled and ill persons for last ten years. The training provided by SPSP particularly became an eye-opener for me on how a doctor needs to be aware about human rights issues of mentally disabled persons. It also broadened my understanding on human rights and mental health. I will try to incorporate my learning while organizing professional trainings to medical staff in days to come.

The training has imparted me knowledge that people with mental health problems should be treated with respect and dignity. I have gained enthusiasm and motivation by which I have overcome the fear I had before. I can share my problem confidently, and have been providing emotional support to my family, society and community. Currently, I am performing the role of a leader in a self-help group of people with mental health problems in Thimi, Bhaktapur. I also support to promote rights of mentally disabled people.

A separate act to address the issues of mentally disabled persons is essential, and in this regard, NHRC is working to raise awareness, advocate, and monitor the human rights issues of mentally disabled persons to materialize its slogan ‘Human rights in every household, a base of peace and development’. The training is a part of it.
Primary health should be taken in priority. Even though the policy was developed in 1997, it has only been 4-5 years that there has been progress in the sector of mental health. This three-day training shared a lot of information and imparted knowledge. If a client visits for family planning, we should make it possible to provide service on the day itself as it might not be possible for them to visit again as they might be coming from places far away. Let’s be willing to provide health care to them. If there is a mental health patient, time has come to be more aware to cater proper treatment and health care as we have to be responsible towards our work. It is also the need of the hour to raise voice about human rights. I appeal doctors and health workers to work on mental health, and I show my solidarity on it.
Key Results

- Increased number of human resources to raise voice of voiceless in order to protect the human rights of persons with mental health problems as well as to prevent mental illness at the community level
- Strengthened networking and collaboration among NHRC, civil society and concerned stakeholders to work on issues of mental health and human rights
- Extended outreach of NHRC and civil society at local level on the issues of mental health and human rights
- Developed a pool of trainers on mental health and human rights
- Created a baseline set on the issues of mental health and human rights for a formulation of separate policy
- Collaborated with civil society
Lesson learnt

- Collaborative approach is more effective to unveil the issue of voiceless people
- Partnerships for a cause should be comprehensive
- Research and study is a foundation to set baseline in critical issue
- There is a long way to go to translate the NHRC’s slogan ‘Human rights in every household, a base of peace and development’ in reality
- School level curriculum, school teachers and other activists must be part of the training
- Major role and responsibilities of different stakeholders must be clearly defined
Ways forward

• Continued awareness and sensitization activities at province and local level including locally elected bodies
• Policy level intervention at central level
• Study research on situation of mentally disabled persons in Nepal to set a baseline
• National Mental Health Survey to identify gravity of problem
• Joint monitoring missions to monitor the human rights situation of mentally disabled persons
"Countries continue to lock up patients in 'caged beds' for hours, days, weeks, or sometimes even months or years...A couple of patients have lived in these devices nearly 24 hours a day for at least the last 15 years."

- Example of the kind of treatment some people with mental disabilities are subjected to

WHO