**Structure of the Resolution on Mental Health and Human Rights**

Key messages of this Resolution are:

1. The Human Rights Council recognizes the need to protect, promote and respect all human rights in the global response to mental health-related issues, and the need to promote the mainstreaming of a human rights perspective to mental health in all relevant public policies,
2. It stresses that mental health and community services should integrate a human rights perspective so as to avoid any harm to persons using them and to respect their dignity, integrity, choices and inclusion in the community,
3. It also underlines the importance of investing more on mental health promotion through a multisectoral and human rights approach which also addresses the underlying social, economic and environmental determinants of mental health,
4. The Council urges States to take active steps to fully integrate a human rights perspective into mental health and community services, and to adopt, implement, update, strengthen or monitor, as appropriate, all existing laws, policies and practices, with a view to eliminating all forms of discrimination, stigma, prejudice, violence, abuse, social exclusion and segregation within that context, and to promote the right of persons with psychosocial disabilities to full inclusion and effective participation in society, on an equal basis with others, and
5. It calls upon States to abandon all practices that fail to respect the rights, will and preferences of all persons, on an equal basis, and that lead to power imbalances, stigma and discrimination in mental health settings; therefore,
6. It urges States to develop community-based, people-centred services and supports that do not lead to overmedicalization and inappropriate treatments, and that fail to respect the autonomy, will and preferences of all persons;
7. It also encourages States to promote effective, full and meaningful participation of persons with psychosocial disabilities and their organizations in the design, implementation and monitoring of law, policies and programmes relevant to realizing the right of everyone to the enjoyment of the highest attainable standard of mental health.

In particular, the Resolution brings the following milestone elements:

**SDGs and Human Rights**

1. It recognizes the CRPD and underscore that the full realization of human rights and fundamental freedoms for all contributes to the efforts to implement the Sustainable Development Goals, and, on the other hand, that the SDGs implementation contributes to the full realization of human rights and fundamental freedoms for all,
2. It welcomes the Sustainable Development Goals, including Goal 3 (on ensuring healthy lives and promoting well-being for all at all ages), its specific and interlinked targets and its close interlinkages with Goal 1 (on eradicating poverty) and Goal 10 (on reducing inequalities),
3. It recognizes that discrimination, stigma, corruption, violence and abuse are major obstacles to the implementation of the SDGs,
4. It further underscores that persons with psychosocial disabilities should have access to a range of support services that are based on respect for human rights in order to live independently, be included in the community, exercise their autonomy and agency, participate meaningfully in and decide upon all matters affecting them and have their dignity respected, on an equal basis with others*,*

**CRPD standards**

1. The Resolution reaffirms that everyone has the right to life, liberty and security of person, to live independently and be included in the community,
2. And it also reaffirms that everyone has the right to equal recognition before the law and that no one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment,
3. And, also, reaffirms that all human beings are born free and equal in dignity and rights, and recognizes that these rights derive from the inherent dignity of the human person,
4. It recalls the general principles of the CRPD, namely respect for inherent dignity, individual autonomy and independence, and full and effective participation and inclusion in society, and welcomes the General Comment no. 5 of the Committee on the Rights of Persons with Disabilities, on article 19,
5. Through this Resolution, States expressed their deep concerns that persons with psychosocial disabilities may be subject to, inter alia, widespread discrimination, stigma, prejudice, violence, abuse, social exclusion and segregation, unlawful or arbitrary institutionalization, overmedicalization and treatment practices that fail to respect their autonomy, will and preferences,
6. Following the spirit of the CRPD, the resolution recalls that such practices may constitute or lead to violations and abuses of their human rights and fundamental freedoms, sometimes amounting to torture or other cruel, inhuman, or degrading treatment or punishment,
7. In addition, through this Resolution, the Human Rights Council declares be conscious that greater commitment is needed to address all the remaining challenges in regards to paragraphs 8 and 9, above,
8. The Resolution also recalls the importance for States to adopt, implement, update, strengthen or monitor, as appropriate, laws, policies and practices to eradicate any form of discrimination, stigma, violence and abuse in this regard,
9. It also urges States to address holistically a range of barriers arising from inequality and discrimination that impede the full enjoyment of human rights in the context of mental health,

**Deinstitutionalization and over treatment**

1. The Resolution acknowledges that CRPD laid the foundation for a paradigm shift in mental health and created the momentum for deinstitutionalization and the identification of a model of care based on respect for human rights that, inter alia, addresses the global burden of obstacles in mental health, provides effective mental health and community-based services and respects the enjoyment of legal capacity on an equal basis with others,
2. In comparison with the proposed draft, the approved text deleted relevant mention to the right to refuse treatment, as there was not support from Member States;
3. It also emphasizes that mental health is an integral part of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

**Community-based services and investment on multisectoral and human rights approach**

1. The Resolution also encourages States to take concrete steps towards recognizing the importance of addressing mental health by, inter alia, promoting the participation of all stakeholders in the development of public policies in this regard, promoting prevention and training programmes for social, health and other relevant professionals, integrating mental health services into primary and general health care, and providing effective mental health and other community-based services that protect, promote and respect the enjoyment of the rights to liberty and security of person and to live independently and be included in the community, on an equal basis with others;
2. Recognizes the need to mainstream a human rights perspective to mental health in all relevant public policies, inter alia by adopting a whole-of-government approach

**Empowerment and information**

1. It strongly encourages States to support persons with mental health conditions or psychosocial disabilities to empower themselves in order to know and demand their rights, including through health and human rights literacy, to provide human rights education and training for health workers, police, law enforcement officers, prison staff and other relevant professions, with a special focus on non-discrimination, free and informed consent and respect for the will and preferences of all, confidentiality and privacy, and to exchange best practices in this regard;
2. And, also, encourages States to provide technical support to countries to develop and implement policies, plans, laws and services that promote and protect human rights of persons with psychosocial disabilities,

**Role of different stakeholders, including health professionals**

1. Recognizes the particularly important role that psychiatry and other mental health professions should have, alongside, inter alia, government institutions and services, actors within the justice system, including the penitentiary system, civil society organizations and national human rights institutions, in taking measures to ensure that practices in the field of mental health do not perpetuate stigma and discrimination or lead to violations or abuses of human rights,
2. It calls on States to take all the necessary measures to ensure that health professionals provide care of the same quality to persons with mental health conditions or psychosocial disabilities, in particular persons using mental health services, as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of these persons through training and the promulgation of ethical standards for public and private health care,

**Particular populations - women and girls and people living with HIV/SIDA**

1. Recognizes that women and girls with mental health conditions or psychosocial disabilities at all ages, in particular those using mental health services, face an increased vulnerability to violence, abuse, discrimination and negative stereotyping, and underscoringthe need to take all appropriate measures to ensure access to mental health and community services that are gender-sensitive,
2. It also acknowledges the multiple or aggravated forms of discrimination, stigma, violence and abuse often faced by people living with, presumed to be living with or affected by, HIV/AIDS and members of key populations have negative consequences on their enjoyment of the highest attainable standard of mental health,

**WHO**

1. It also acknowledges the leadership of the World Health Organization in the field of health and also the work that it has carried out to date to, inter alia, integrate a human rights perspective into mental health, and recalling the commitment of States to achieve this through the implementation of the Organization’s Comprehensive Mental Health Action Plan 2013-2020,

**Public consultation**

1. The Resolution requests the OHCHR to organize a one and a half day accessible consultation to discuss all the relevant issues and challenges pertaining to the fulfilment of a human rights perspective to mental health, the exchange of best practices and the implementation of technical guidance in this regard; and to prepare a report on the consultation to be presented at the 39th session of the HRC (Sept 2018), which identifies strategies to promote human rights in mental health and to eliminate discrimination, stigma, violence, coercion and abuse in this regard, including through education and the training of all stakeholder groups.