



## WHO QualityRights

Transforming services, promoting rights & implementing a whole-of-society approach in mental health



### Dr Michelle Funk

Policy, Law and Human Rights (PLR)  
Department of Mental Health & Substance Use,  
World Health Organization



# Urgent need for person-centred & human rights approach in mental health

## Pressing issues to address:

- Institutionalisation
- Lack of access to community mental health services and supports
- Use of coercive practices, violence, abuse and neglect
- Denial of peoples' legal capacity and right to decide over their own treatment and other key elements of their lives
- Disempowerment that many people experience within the mental health system
- Over emphasis on the diagnosis and use of medication rather than taking a holistic, person-centred rights-based approach to treatment and care
- Lack of coordinated, cross sector response to put in place a whole-of-society approach encompassing services, promotion, prevention and community inclusion



## What needs to change?

- Radical transformation of mental health system, services & overall approach
- paradigm change away from the biomedical model towards a more holistic model with human rights at its core

### Goal:

- **coercion free services** that **respect peoples' rights** and promote **community inclusion**
- **holistic services and supports** that address all areas of their lives that are important to people; including relationships, education, employment and social protection
- **supportive society wide environment** that protects and promotes mental health



# WHO QualityRights objectives

- Build capacity to **combat stigma and discrimination** and promote human rights and recovery
- Create **community-based services** and **supports** that respect and promote human rights
- Promote the **participation** of persons with lived experience and support civil society
- Reform national **policies and legislation** in line with the CRPD and other international human rights standards



# Capacity building on human rights and recovery in mental health

- Attitude and mindset change is fundamental for rights based mental health reform
- Shifts in attitudes to:
  - combat stigma and discrimination
  - ensure people are seen as rights holders (respect for legal capacity; freedom from coercion etc.)
- Without significant mindset change the risk is that mental health reform efforts will only lead to a slight improvement in practices without any fundamental change in the paradigm

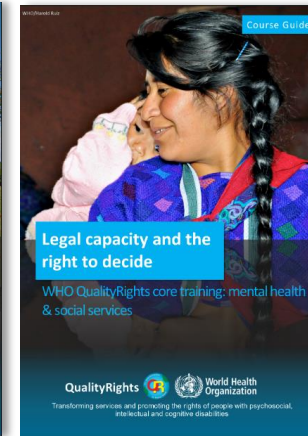
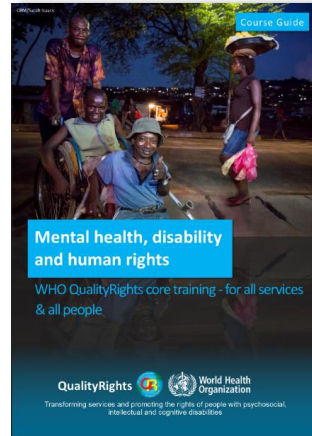




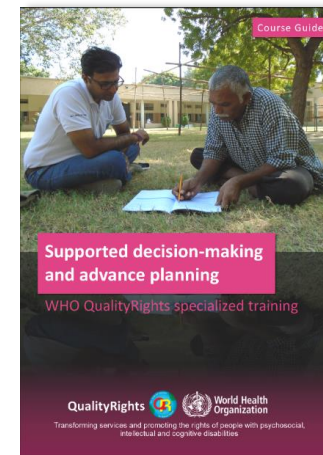
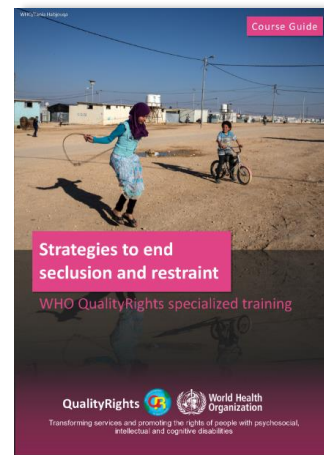
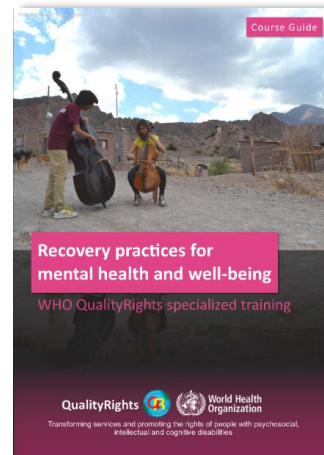
# Capacity building on human rights and recovery in mental health

## QualityRights face-to-face training modules

Core modules



Specialized modules





# QualityRights e-training

## Mental Health, recovery and community inclusion

- Changing mindsets of whole communities, on massive scale
- Free of cost and open to all
- Available in 11 languages including English, Spanish and French
- WHO certificate upon completion

WHO QualityRights  
Act, unite and empower for mental health

Login

Password

VALIDATE

Don't have an account? [Sign Up](#)

For any questions, please contact  
[assistance@coopacademy.com](mailto:assistance@coopacademy.com)  
[Forgot your password?](#)

**Target:**  
**5 million learners**  
**to complete the**  
**e-training by 2025**

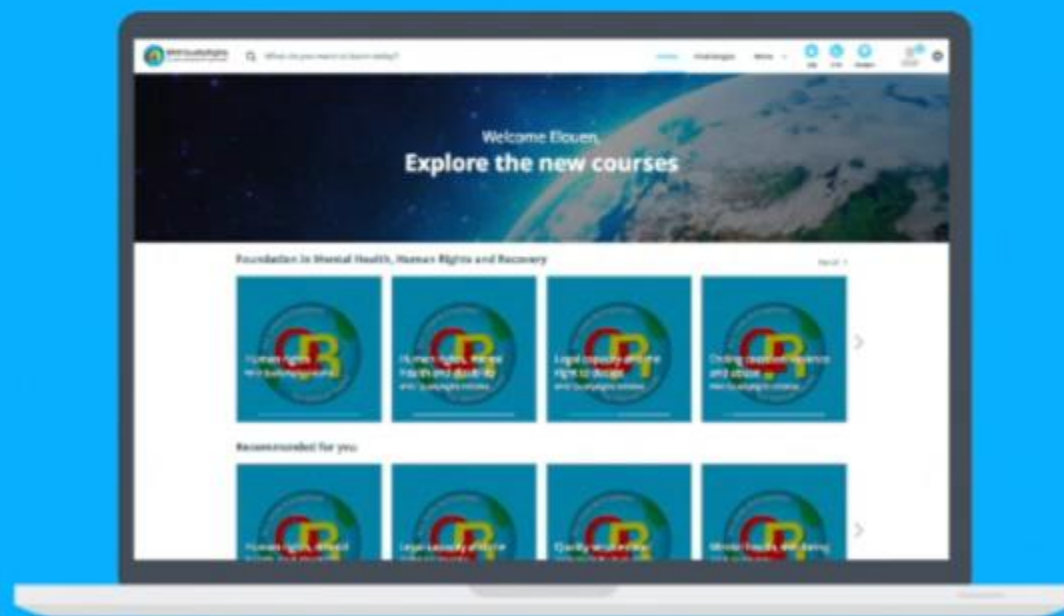




# WHO QualityRights

Act, unite and empower for mental health

E-training: Mental health, recovery and community inclusion







# QualityRights e-training evaluation: Pre and post training attitudinal scores

- 17 attitudinal items → **highly significant changes on all items ( $p < 0.0001$ )**
- **38% improvement in overall attitudes**
- **50% improvements on many challenging issues:**
  - Legal capacity & the right to decide
  - Ending coercive practices
  - Choice and information about treatment
  - Right to community inclusion



# QualityRights e-training: impact on attitudinal change

## What we are hearing from people on the platform

*“Life changing!”*

*“Am most grateful to this special training for helping me to upgrade my professional knowledge about human rights.”*

*“Wow. Learning has indeed taken place. I pray to resolve from making the final and only decision for my patients without caring for their legal capacity.”*

*“Coercion, violence and abuse at work must end NOW!!!”*

*“Very educative, it got to a point I bowed my head because I felt ashamed of how on numerous occasions I used substitute decision instead of supportive decision. I seriously think all health workers especially mental health workers in Ghana can help respect these rights a lot.”*



# QualityRights e-training reach

## QR e-training stats

**90,760** people have registered on the e-training platform

**49,526** have started the e-training course

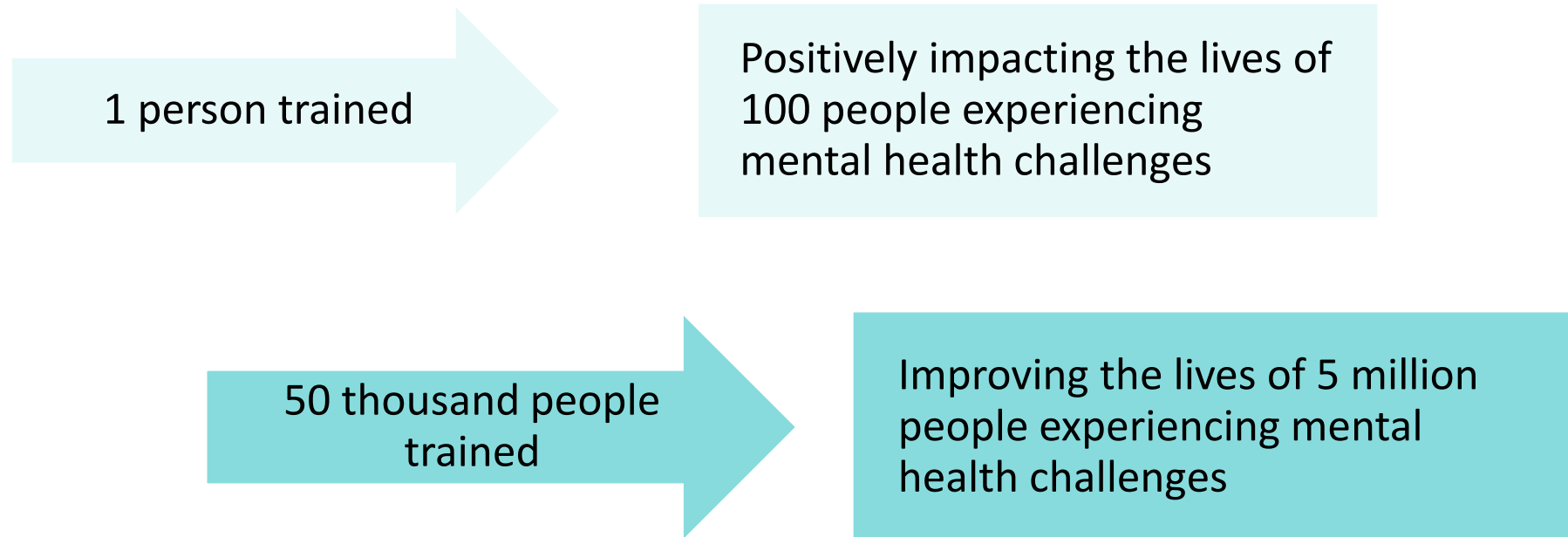
**38,187** have completed the course & been awarded WHO certificate



# Impact of WHO's QualityRights e-training

**Think big**

**Imagine 50 thousand people completing the QualityRights e-training in Australia**







# Benefits for stakeholders

Health and social care providers → Better treatment, care and support

Policy makers → Policies that better respond to peoples' needs, dignity and rights

OPD's, NGOS and other community organizations → Support mental health of marginalized individuals and groups

Families, carers, supporters, and others → Support people in distress in a way that respects dignity and autonomy

People with lived experience → Learn about rights, pathways to recovery and contribute to policy



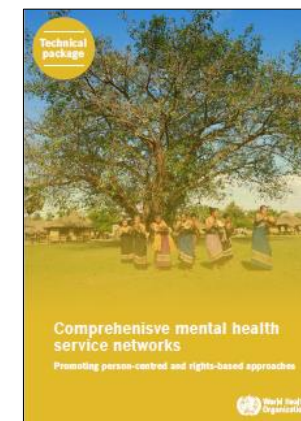
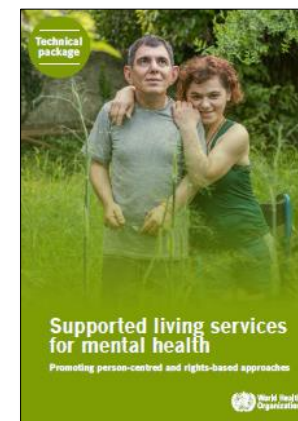
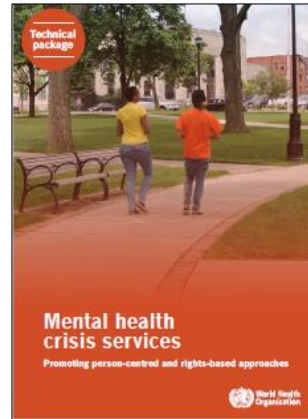
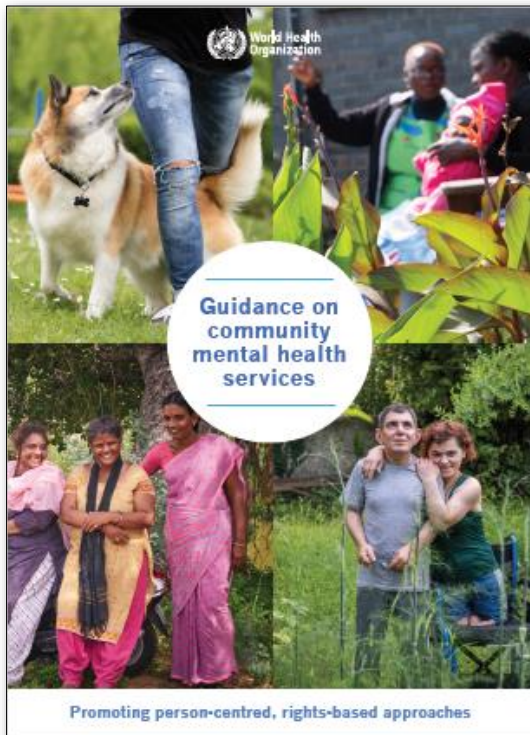
## Creating rights-based community mental health services

### **Community based services based on the social and human rights models of disability**

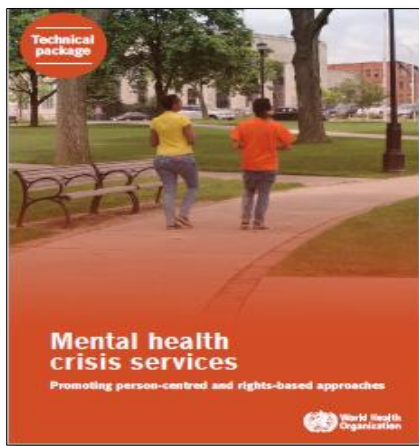
- Holistic services that consider people in the context of their whole lives & address social determinants of mental health
- Access to the full range of services & supports necessary to promote community inclusion and prevent isolation & segregation
- Services free from coercion & that promote legal capacity



# WHO Guidance on community mental health services: Promoting person-centred & rights-based approaches



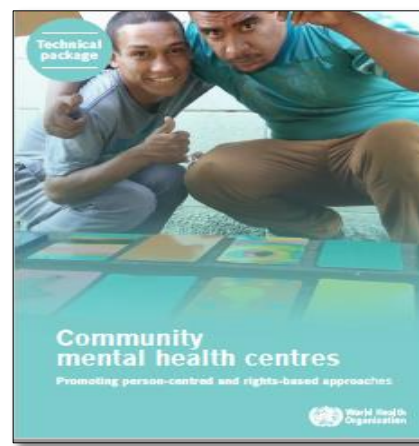




- Afiya House, USA
- Link House, UK
- Open Dialogue, Finland
- Tupu Ake, NZ



- BET Unit, Blakstad Hospital, Norway
- Kliniken Landkreis Heidenheim, Germany
- Soteria Berne, Switzerland



- CAPS III – Brasilândia, Brazil
- Aung Clinic, Myanmar
- Phoenix Clubhouse, China, Hong Kong SAR



- Hearing Voices support groups
- Nairobi Mind Empowerment Peer Support Group, Kenya
- Peer Support South East Ontario, Canada



- Atmiyata, India
- Friendship Bench, Zimbabwe
- Home Focus, Ireland
- Naya Daur, India
- Personal Ombudsman, Sweden



- Hand in Hand supported living, Georgia
- Home Again, India
- KeyRing Living Support Networks, UK
- Shared Lives, UK



#### Mental health networks:

- Campinas, Brazil
- East Lille, France
- Trieste, Italy
- Peru
- Bosnia & Herzegovina
- Lebanon





# WHO Guidance on community mental health services: Common factors for good practice services

- **Each selected service has embraced the paradigm shift from a biomedical model focused on symptom reduction to a rights-based approach**
- **Services were selected according to human rights criteria relevant for mental health**
  - ✓ Respect people's legal capacity - choice & decisions in treatment, care & support
  - ✓ Use of strategies to end coercion – seclusion, restraint, physical, sexual & emotional abuse
  - ✓ Actively involve and include people in their own care & in running of services
  - ✓ Link people to relevant community services and supports - social protection and disability benefits, housing, employment opportunities etc
  - ✓ Provide person-centered holistic care addressing relationships, work, family, and education – not just diagnosis, medication and symptom reduction
- **Each service had evaluation data demonstrating acceptability & effectiveness**



# WHO Guidance on rights-based community mental health services

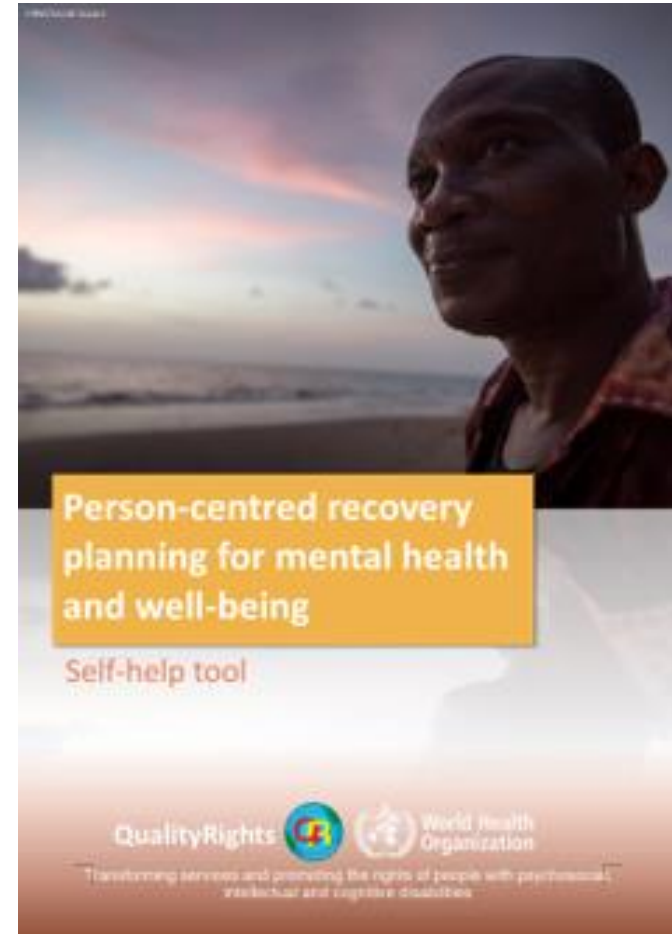
## Recommendations

- Increasing funding to develop/scale up rights-based services
- Establishing legal and policy frameworks that are comprehensive, holistic and align with human rights standards and that reflect the collaboration of all sectors
- Establishing a comprehensive rights-based network of community mental health services that interface with a strong social sector
- Widescale capacity building on mental health, human rights and disability for all stakeholder groups
- Integrating training on rights, disability and person centred, recovery-oriented approaches undergraduate and graduate course curricula
- Collecting data on health and social outcomes for mental health services
- Increasing funding for research on services using a rights-based approach
- Engaging organizations of people with psychosocial disabilities as advisors on policy, planning, law, service development and training



# Person-centred recovery planning for mental health and well-being: A self-help tool

- ✓ Explore meaning of recovery
- ✓ Develop a plan for pursuing dreams and goals
- ✓ Create personal wellness plan
- ✓ Planning for difficult times – response during and after a crisis





# Assessing & transforming services

## QualityRights Assessment toolkit



## Guidance - Transforming services & promoting rights







## Promote the participation of persons with lived experience & support civil society

- Expertise of persons with lived experience (PLE) crucial for reform
- BUT PLE not invited to:
  - guide policy and law development
  - co-develop and implement services, training, and research
- WHO QualityRights actions for meaningful participation.
  - Creating opportunities to influence policy & legislative processes
  - Building capacities of PLE and OPDs to become experts on rights-based reform
  - Capitalising on the skills of PLE to rollout QualityRights
  - Engaging PLE in the development of WHO normative guidance



# Engaging with persons with lived experience & civil society

- ✓ Providing (i) one-to-one peer support and (ii) peer support groups
- ✓ (i) Setting-up and operating civil society organizations and (ii) putting in place advocacy campaigns





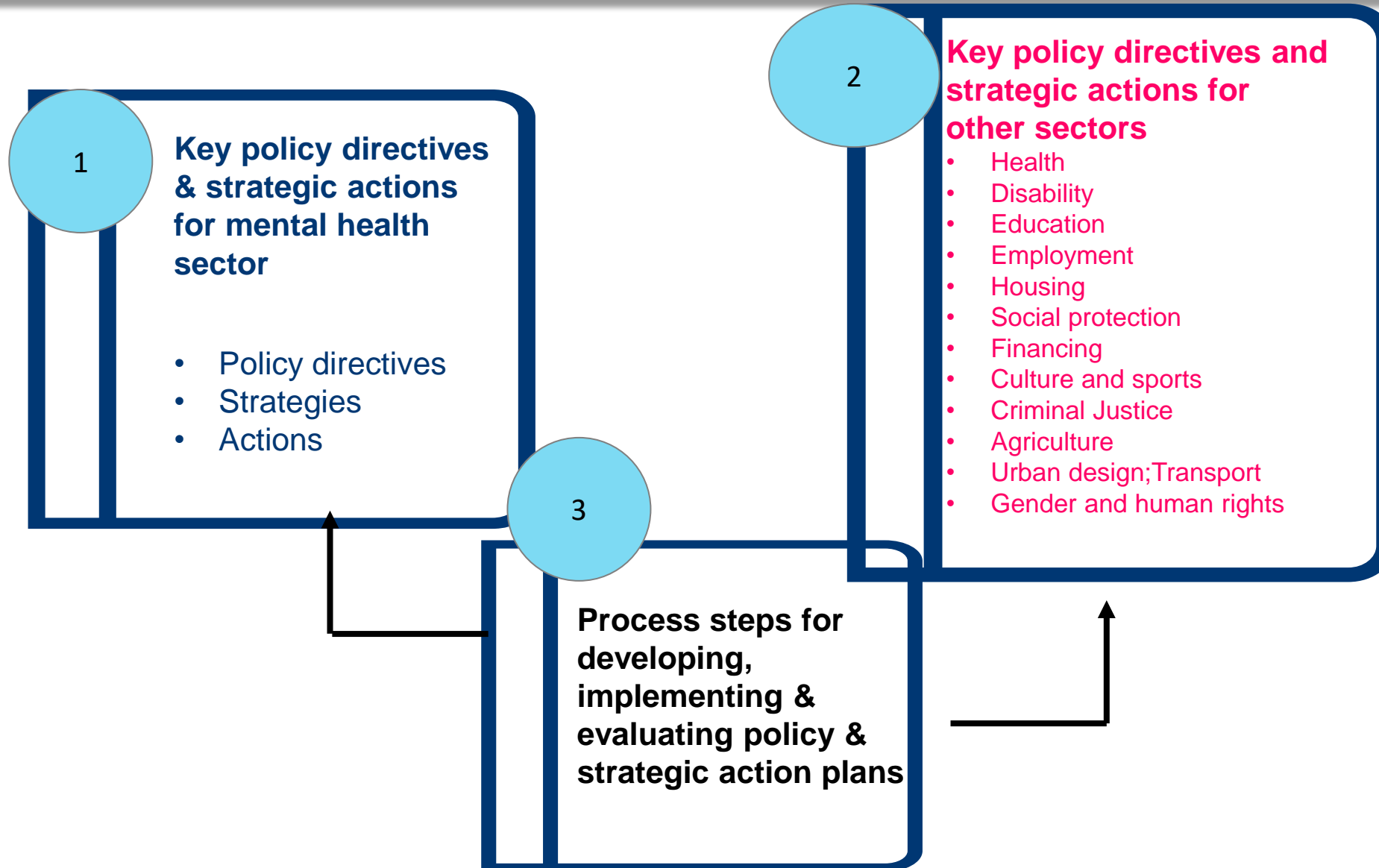
# Mental Health Policy Reform

## Human-rights aligned GUIDANCE on:

- National mental health policies & action plans (2023)

- Social and structural determinants of health
- Climate change
- Racism and colonialism
- Discrimination based on gender, sexual orientation, age, or disability;
- Education, housing, employment, or social protection
- Violence, abuse, and crime
- COVID-19 and other health emergencies
- **mental health service and system related issues.**

# Policy package toolkit – 3 inter-related components





# POLICY AREAS FOR ACTION

Policy Directives

## 1. Service organisation and development

- 1.1. Coordinated rights-based community mental health & primary care services & supports
- 1.2. Partnerships for community inclusion, socioeconomic empowerment, & protection & promotion of rights
- 1.3. Deinstitutionalisation

## 2. Human resource and workforce development

- 2.1. Human resource development including role & task sharing
- 2.2. Recruitment and retention of staff
- 2.3. Competency based curricula for mental health

## 3 Assessment, interventions & support

- 3.1. Assessment of mental health and support needs
- 3.2. Non-pharmacological interventions, (lifestyle, psychological, social, economic)
- 3.3. Psychotropic drug interventions

## 4. Mental health sector contributions to addressing structural & social determinants & society wide issues impacting mental health and well-being

- 4.1. Transforming mindsets, improving literacy to promote mental health & combat stigma, discrimination & exclusion of persons with mh conditions and all marginalized groups
- 4.2. Joint sector action on structural determinants & society wide issues
- 4.3 Mental health & psychosocial support in humanitarian emergencies
- 4.4 Suicide prevention

## 5. Governance, accountability & other enablers

- 5.1. Leadership and accountability
- 5.2. Finance and budget
- 5.3. Persons with lived experience, civil society, people & community
- 5.4 Rights-based legislation related to mental health

Policy Directives

### Emphasis throughout

Human rights, person centered and recovery approach  
 Meaningful participation of persons with lived experience, stigma, discrimination, changing attitudes, mindsets & culture in mh

### Key considerations throughout:

age; gender; sexual orientation; disability; immigration & refugee status; race & ethnicity, amongst others



# Rights-based Law Reform

## Human-rights aligned GUIDANCE on:

— Mental health related legislation (2023)

- Access to quality mental health care
- Community-based mental health services
- Non-discrimination
- Legal capacity and supported decision-making
- Eliminating coercive practices in mental health care
- Independent living and community inclusion
- Criminal law and justice
- Participation
- Accountability



**THANK YOU!**