

International Union of Psychological Science Presidential Symposium
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Statement of the United Nations High Commissioner for Human Rights

‘A Man’s body and his mind, with the utmost reverence to both I speak it, are exactly like a jerkin, and a jerkin’s lining; – rumple the one – you rumple the other.’ So wrote Laurence Sterne in his 18th century tome, *The Life and Opinions of Tristram Shandy, Gentleman*.

Today, the reciprocal relationship between physical and mental health is irrefutable as a matter of science, and human rights norms acknowledge this link. Article 12 of the International Covenant on Economic, Social and Cultural Rights recognises the right of everyone to the highest attainable standard of both physical and mental health, and the Constitution of the World Health Organization defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”.

Mental ill-health reduces life expectancy by a very significant proportion and accounts for a large part of the global burden of disease. In the United Kingdom, for instance, severe mental illness reduces life expectancy by an estimated 20 years for men and 15 years for women.¹ By helping people to overcome depression, trauma and emotional pain, by offering hope to those who have none and by carrying out numerous other interventions that, quite literally, save lives, psychologists play a fundamental role in reversing this pattern and they are, in that sense, human rights advocates. As such, every society owes a debt of gratitude to the professionals supporting the individuals and families facing mental health challenges.

Nevertheless, mental health continues to be the poor relation when it comes to health service delivery. There is frequently a stark disparity between the resources allocated for mental and physical health, respectively, and access to mental health services is often more restrictive and laborious. Stigma and discrimination play an important role in discouraging the very people who need these services from seeking assistance and accessing treatment, effectively ensnaring them in a cycle of illness. This affects the enjoyment of a broad range of human rights, including the rights to work, to education, to housing and to an adequate standard of living.

People in need of mental health services are not merely side-lined, stigmatised and discriminated against when it comes to policy and programming. The disheartening fact is that the field of mental health services is where we find some of the last vestiges of barbarism in the medical and caring professions. The casual unkindness and cruel, inhuman and degrading treatment with which many persons in need of mental health services are familiar has, regrettably, not been consigned to the past along with the “ice-pick lobotomy”, and “therapies” such as Metrazol, electroconvulsive therapy and hydrotherapy. Similarly, a failure to respect the principle of informed consent, the involuntary detention of persons in need of mental health services (with scant regard to their views on how their treatment should proceed), and the use of brutal methods of restraint remain with us today.

¹ Royal College of Psychiatrists. “Whole-person care: from rhetoric to reality Achieving parity between mental and physical health”. Occasional paper OP88, March 2013, p. 27.

The right to health is a right that encompasses both freedoms and entitlements and, in the context of mental health, particularly, the freedom to control one's health and body should be sacrosanct. Now, if mental health is routinely marginalised in "ordinary" or "civilian" settings, is it any wonder that this pattern not only repeats but is worse in militarised or police settings? And, as professionals involved in a vital area of mental health care delivery, what are the responsibilities of psychologists?

1. Respect for the human rights of the people under your care

At the centre of any treatment plan there is a human being – one who may have been rendered vulnerable as a result of the illness which led him or her to seek or need mental health services in the first place. Human rights norms are founded on the principle that everyone is worthy of dignity and respect. People who find themselves in a situation where they need mental health services are entitled to nothing less.

Back in 1948, the Universal Declaration of Human Rights was proclaimed as a "common standard of achievement for all peoples and nations". This standard calls for respect for the rights of all without any adverse distinction. It reaffirms the rights to life, liberty and security of the person and proscribes torture and cruel, inhuman or degrading treatment or punishment. Interestingly, the Universal Declaration of Human Rights also calls on "every individual and every organ of society, keeping this Declaration constantly in mind, [to] strive by teaching and education to promote respect for these rights and freedoms". This individual responsibility is one part of the human rights narrative which we hear relatively little about. Your contribution could be to breathe fresh life into this exhortation and transform it from perceived platitude to call to action by ensuring the scrupulous application of these principles in all settings where your expertise is solicited.

2. Respect for professional ethics

There is much common ground between professional ethics and human rights but, as we know, the two are not synonymous. Respect for professional ethical standards, and the enforcement of sanctions to address breaches, is an important pillar of the protection of persons requiring mental health services.

The Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment were adopted by the General Assembly in 1982 and provide some useful guidance in this area. According to these Principles, psychologists are required to avoid any participation or complicity in torture and cruel, inhuman or degrading treatment or punishment. The prohibition extends further to cover the application of their knowledge and skills to assist in the interrogation of detainees in a manner that may adversely affect their physical or mental health. Moreover, it is a contravention of ethics to certify, or to participate in the certification of, the fitness of detainees for any form of treatment or punishment that may adversely affect their physical or mental health.

There are many other sources of ethical guidance, your knowledge of which will be extensive, detailed and nuanced. My appeal is for a more deliberate bringing together of human rights and ethical standards, with human rights serving as the ultimate measure of the appropriate treatment of persons interacting with mental health service providers, including

psychologists. This can be achieved by supporting and advocating for programming and policy initiatives which protect and respect human rights and fundamental freedoms and by taking a principled stand on this matter against any mutiny within the ranks. You have taken an important step in acknowledging your human rights responsibilities as mental health practitioners, I support your efforts to promote human rights as a professional body, and I wish you every success.