

# The UN CRPD –Challenges and chances for users and survivors of psychiatry

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# What is the CRPD?

- Legally binding human rights treaty, adopted in 2006 and entered into force in May 2008
- What is an international human rights convention, commitment towards its citizens but subject to international scrutiny
- Obliges only States Parties, there are 94. Another 50 or so have signed, but not yet ratified
- Optional Protocol which requires separate ratification (Greece has just signed it)

# What is the CRPD II

- The negotiation process benefitted from a very active involvement of DPOs, unity, and active participation of WNUSP which is clearly reflected in the text
- Impact of the CRPD on other UN human rights mechanisms (other treaty bodies, Human Rights Committee, CAT Committee)
- Disability has become part of the human rights agenda; also for mainstream human rights NGOs

# Some general features

- States Parties commit themselves to align their legislation, policies and practices to the CRPD, abolish legislation that is inconsistent
- Objective: protects and promotes the rights of persons with disabilities
- Who is protected by the Convention? Pwds, including persons with intellectual and mental disability
- Discrimination on the basis of disability: perceived, past
- Comprehensive Convention, covering all areas of life and goes beyond discrimination
- Individual communications in States that have also ratified the Optional Protocol and inquiry procedure
- Recognises the role of DPOs, “Nothing about us without us”

# Some key articles in the CRPD from an user/survivor perspective

- Principles: individual autonomy, respect to make one own's choice, respect for diversity
- Protection from discrimination, including the denial of reasonable accommodation
- Legal capacity, change from the substituted decision making model to the supported decision making model
- No more deprivation of liberty based on disability, revision/abolition of mental health laws
- Protection from torture and from violence and abuse, restraint, use of ECT
- Special monitoring service of services designed for people with disabilities

# Some key articles II

- Protection of integrity, no treatment against the will of the person (explain this article, no safeguards, no exceptions)
- Living in the community, putting an end to institutions and replacing it with community based services
- Access to health based on informed consent, training for health professionals on human rights
- Rehabilitation as a voluntary issue, important reference to peer support
- Family related issues; separation of the child, support in raising the child, but best interest of the child prevails

# International and national monitoring

- Committee on the Rights of Persons with Disabilities (has two members from the user/survivor community)
- Reviews State report (process)
- Receives also alternative reports, including from DPOs
- Makes recommendations to States on additional measures to take for the full implementation of the CRPD
- National monitoring is an innovative feature, but potentially very important
- DPOs need to get familiar with the monitoring process, IDA's guidance document is useful for this

# Challenges

- To ensure an advanced interpretation of the CRPD, role of the Committee in this (General Comments)
- Work also on economic, cultural and social rights, like employment and education
- To get involved in the implementation and monitoring process at national and international level
- To use the individual communications option
- To ensure a coherent interpretation by all treaty bodies, still referring to MI Principles.
- The predominance of mental health practices that are inconsistent with the CRPD (WHO reports)
- The need to provide policy guidance beyond the principles



# Opportunities

- To work with other disability organisations , issue of solidarity but need to explain well the issues (example of IDA). Involvement is more effective if there is unity
- The potential support of mainstream human rights NGOs which might be more interested in these “tough” issues than on issues around accessibility.
- To use the wide spread of UN mechanisms, including the Special Rapporteur on Torture who has made a very advanced interpretation of the CRPD (Norwegian example)
- To get involved in international cooperation work to ensure that our countries fund CRPD consistent programmes and practices