# WHO guidance:
Feasibility of community mental health

Jonas Bull, Policy and Research Officer at Mental Health Europe, sheds light on new WHO guidance that demonstrates the feasibility of community mental health services based on human rights

"A thought exercise for you at the beginning of this article: how do we understand a community? Many times, we see it as the local geographic setting, a neighbourhood where a person formally resides. However, a community can be much more, encompassing a sense of belonging with like-minded persons and within a culture of respecting each other's human rights."
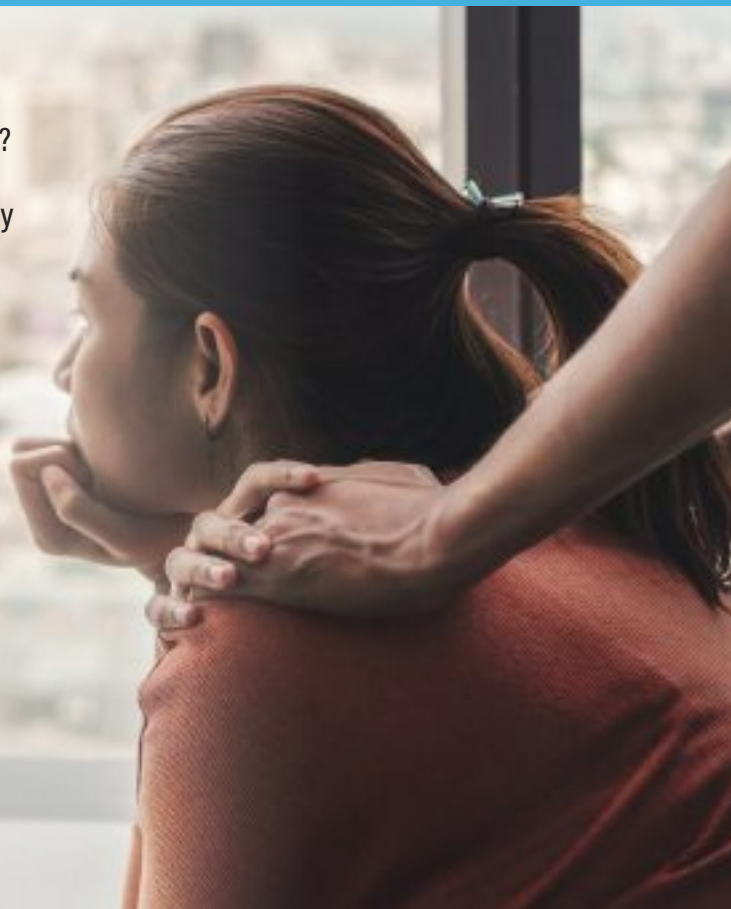
COVID-19 and mental health

The COVID-19 outbreak signified a re-connection of the two understandings. Neighbourhood support emerged, often in terms of a few familiar faces during lockdown. But COVID-19 taught many more lessons, including the notion of mental health difficulties being an understandable reaction to adversity, not deserving the stigma that surrounds it.

The unprecedented public health emergency of the 21st century arrived at a time where mental health reforms across Europe are staggering. Deinstitutionalisation, a core issue for decades, continues to be slow while being exposed to its flaws:

persons living in institutions face higher risks of COVID-19 infections and resulting deaths. Such crucial changes have been met with hesitance, from the psychiatric community and policy-makers alike, despite the emergence of normative frameworks such as the UN CRPD, which the EU itself and all EU Member States have ratified. However, implementation of this binding legal instrument falls short, particularly in the field of mental health.

Jurisprudence also needs to be expanded, as recently expressed in a third-party intervention by the Council of Europe Commissioner for Human Rights before the European Court of Human Rights. The Commissioner

considers that an evolution of the Court's case law is necessary to avoid a widening gap between the protection enjoyed by persons with psychosocial disabilities under the European Convention of Human Rights and the CRPD.

WHO's guidance on community mental health

On the other hand, there has never been such a strong global movement of persons with lived experiences of mental health difficulties, carers, service providers, and international organisations, sowing seeds of hope for the future. The most recent example is the World Health Organization's guidance on community mental health services, showcasing examples around the world that respect human rights such as legal capacity and ending coercion. Terms that may sound difficult at first, but in fact express the most fundamental ideas of personhood. For example, the right to say what help you want or which kind of support you refuse. The guidance is remarkable since it demonstrates the wealth of knowledge that already exists to make human rights in mental health a reality – despite the persistence of legal and practical realities that do not comply with human rights (almost all European countries contain provisions on involuntary treatment and placement of persons with 'mental disorders').

When discussing the need for change, one cannot help but wonder why these archaic systems of mental health persist. Behind the legal terms and statistics, we often tend to forget the human story behind a number or figure. Recently, I was told the story of a young boy in Belgium, who following a mental health crisis was escorted by police to a psychiatric facility. There he was heavily sedated, tied to the bed (as documented in a later medical report), and secluded in an isolated and dark room for several days (we do not know for how long exactly).

In Malta, a story of a young woman went viral, who admitted herself to Mount Carmen Hospital. Instead of receiving adequate support, her phone and valuables were taken away, she was woken up at 7 am with bright lights and put into the showers. "It was

hell", she said in her own words. So, besides the normative imperative to make mental health systems more compliant, these stories show that archaic mental health actions approaching mental health difficulties do not work, but exacerbate the situation – nowadays rightly coined 'coercion is not care'.

Despite concerning initiatives such as the development of an additional protocol at the Council of Europe, aiming to standardise involuntary treatment and placement, the WHO guidance shines a light onto the right path. Using human rights as a compass, as formulated by the Council of Europe Commissioner for Human Rights in May, means that all efforts of "building back better" should focus on how mental health support can be translated into the community setting.

Community mental health support

Let us go back to our understanding of community. If we imagine it as a place where one feels at home it now requires envisioning such community mental health support. The WHO guidance is an important element contributing to the notion that it can be done – if backed with political will.

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