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MDRI Releases Report on Hungary's Mental Health System

by Kate Nahapetian

ental Disability Rights International (MDRI), which is part of WCL's Center for Human Rights and Humanitarian Law, is working to advance the recognition and enforcement of mental disability rights as human rights. MDRI recently released its second report focusing on the human rights situation in Hungary's mental health system.

Hungary's mental health system serves as a prime example of the difficulties facing people with mental disabilities in the newly developing democracies of Central and Eastern Europe. More than fifty years of neglect and systematic institutionalization have left thousands of Hungarians without legal rights or recourse. MDRI's report, "Human Rights and Mental Health: Hungary," documents this situation and recommends reforms that are needed to bring Hungary into compliance with international human rights standards and laws. (Copies of "Human Rights and Mental Health: Hungary" may be obtained

by calling MDRI at 202-274-4185.)
For its human rights framework, the report relies primarily on the UN's "Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care," as they are the most detailed and comprehensive codification to date of the rights of people with mental disabilities.

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The report reviews over twelve institutions in Hungary and is based on interviews with institution directors, psychiatrists, care-givers, people with mental disabilities, family members and human rights advocates. MDRI worked closely with Hungarian partner organizations such as the Hungarian Civil Liberties Association and the Awakenings Foundation, a model community-based service program. Members of the fact-finding missions observed major capital investments aimed at improving physical conditions of institutions and hospitals. These efforts, however, do not address the core structural problems, including the improper and unnecessary detention of many people in psychiatric institutions, the life-time segregation of 7,000 people in remote "social"



Ludányhalászi social care home near Balassagyarmat, Hungary.

care homes" in inhuman and degrading conditions, and the lack of communitybased support systems to reintegrate people with mental disabilities back into society.

The fact-finding teams documented numerous violations of international human rights law. Patients are denied effective assistance of counsel in civil commitment proceedings and are not offered avenues for appeal or review. Patient choice, including the right to informed consent of treatment, is not recognized under Hungarian law. In certain circumstances, individuals are held in cages because often there are no trained staff to supervise difficult patients.

The most serious abuses documented in the report are found in Hungary's social care homes, where people who are viewed as being "beyond rehabilitation" are institutionalized with little or no effort toward active treatment, rehabilitation, or reintegration into the community.

Not only are people, in effect, sentenced to life in social care homes with no procedure for reviewing the decision to commit them, but many are improperly placed there to begin with. Psychiatrists acknowledge that between ten to fifty percent of the social care home population does not require institutionalization and

could live in the community if they had family support.

Another disturbing practice involves the arbitrary classification of most people as "voluntary" patients in order to avoid the time-consuming civil commitment process which requires judicial review for involuntary patients. A number of psychiatrists told MDRI they consid-

ered the commitment process a "hassle" and a "formality" and much preferred to classify individuals as voluntary patients.

In addition to legal reform, the report's primary recommendation is to change Hungary's mental health system in order to provide the network of services and support necessary to reintegrate people into the community. MDRI is working with Hungarian mental health administrators, psychiatrists, policy makers and advocates to take the first steps toward this reform, and will follow up the report with a return mission to Hungary.

Although current conditions in institutions are bleak, members of the MDRI missions were very encouraged by the cooperation they received from almost every mental health professional they met. The Ministry of Health and Social Welfare has set up a special committee to draft new legislation regulating health care and protecting patients' rights. These positive attitudes and actions offer a promising environment for reform.

The MDRI report was researched and written by MDRI's Eric Rosenthal and Max Lapertosa, Elizabeth Bauer of the Michigan Protection and Advocacy Service, Ira Burnim of the Bazelon Center for Mental Health Law, WCL Professor Robert Dinerstein, Anita Bakos, and Dr. Robert Okin of San Francisco General Hospital.



