



CITIZENS COMMISSION ON HUMAN RIGHTS NATIONAL AFFAIRS OFFICE

Open Letter to the American Psychiatric Association on the Human Rights Abuse of Coercive Psychiatric Practices

**“Coercive practices violate a person’s right to liberty and security,
which is a fundamental human right.”**

WHO/OHCHR, “Mental Health, Human Rights, and Legislation,” 9 October 2023

May 7, 2024

Petros Levounis, President
American Psychiatric Association
800 Maine Avenue SW
Washington, DC 20024

Dear Dr. Levounis,

As our organization has not received a response to a letter delivered to American Psychiatric Association CEO Saul Levin last October concerning the APA’s position on nonconsensual psychiatric practices, the Citizens Commission on Human Rights (CCHR) National Affairs Office is reiterating the need for the APA to take a formal position aligned with international human rights standards that call for an end to all coercive psychiatric practices. In its most recent (2020) “Position Statement on Voluntary and Involuntary Hospitalization of Adults with Mental Illness,” the APA continues to support the use of coercive practices.

On October 9, 2023, this issue was prominently addressed in the World Health Organization (WHO) and the United Nations Office of the High Commissioner for Human Rights (OHCHR) guidance issued on “Mental Health, Human Rights, and Legislation.” The guidance calls on governments to “commit by law to a ‘zero coercion’ policy.” So, too, should the APA.

Points from the guidance include:

- “A growing body of evidence sets out how coercive practices negatively impact physical and mental health, often compounding a person’s existing condition while alienating them from their support systems.”
- “Such practices may include involuntary hospitalization, involuntary medication, involuntary electroconvulsive therapy (ECT), seclusion, and physical, chemical and mechanical restraint.”
- “Accountability is an important component of the human rights framework.... Effective remedies also entail the duty to investigate and bring to justice those who are responsible, to hold them to account, combat impunity and prevent repetition of violations.”

In earlier guidance issued in 2021, WHO stated that its opposition to involuntary mental health treatment extends to those experiencing acute mental distress. The report noted that individuals in mental health crisis “are at a heightened risk of their human rights being violated, including through forced admissions and treatment.... These practices have been shown to be harmful to people’s mental, emotional and physical health, sometimes leading to death.”¹

The UN Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment also previously stated: “It is essential that an absolute ban on all coercive and nonconsensual measures, including restraint and solitary confinement of people with psychological or intellectual disabilities, should apply in all places of deprivation of liberty, including in psychiatric and social care institutions.”²

In 2020, the World Psychiatric Association issued a position statement expressing concern over “the protection of human rights, and the extent to which coercive interventions violate these.” It provided “support for implementing alternatives to coercion in mental health care,” and observed, “There is widespread agreement that coercive practices are over-used.”

In April 2024, the European Congress of Psychiatry held a special seminar aimed at reducing the use of coercive measures in psychiatry, reportedly emphasizing the importance of the shift away from coercion because of its risks.³ Julian Beezhold, MD, current chair of the European Psychiatric Association's (EPA's) Section on Emergency

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Psychiatry, is also on record saying that examining how to reduce coercive practices in psychiatry is a priority for his association.⁴

CCHR will continue to bring this matter to the attention of the APA until the APA issues a formal statement in support of the elimination of the human rights abuse of involuntary detentions and other coercive psychiatric practices and actively works to ensure this is done.

Sincerely,

Anne Goedeke

Anne Goedeke
President

cc: Saul Levin, CEO
American Psychiatric Association
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¹ “Guidance on community mental health services: promoting person-centred and rights-based approaches.” Geneva: World Health Organization; 2021 (Guidance and technical packages on community mental health services: promoting person-centred and rights-based approaches).

<https://www.who.int/publications/i/item/9789240025707>

² A/HRC/22/53, “Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Juan E. Méndez,” United Nations, General Assembly, Human Rights Council, Twenty-second Session, Agenda Item 3, 1 Feb. 2013, p. 15.

http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session22/A.HRC.22.53_English.pdf

³ “Practice Changes Reduce Coercive Psychiatric Measures,” *Medscape*, 11 Apr.

2024, <https://www.medscape.com/viewarticle/practice-changes-reduce-coercive-psychiatric-measures-2024a10006z0>

⁴Ibid.