

Human Rights based Approach case Studies



We asked peer researchers from our joint IRISS and See Me to produce case studies from existing Change Networks, best practice examples and local services to demonstrate what Human Rights Based Approaches can look like in practice. Please read below for some detailed examples, but visit our 'Overview' and 'Dos and Don'ts' page for a bird's-eye view of the lessons learned.

ACTIVISM ON AND OFF CAMPUS CASE STUDY



Brief overview of the case

Activism on and off Campus ran a session with students to increase their knowledge of what the Equality Act (2010) means in education settings like universities and colleges. They wanted students to understand that if they have a mental illness, then their university or college has to make reasonable adjustments to ensure that they can experience and take part in their education, activities, and societies and access other related services etc. to the same standard as students who do not have a mental illness.

What is the project?

Activism on and off Campus is a multi-faceted project by the National Union of Students at the students' associations and institutions of University of the West Scotland, Forth Valley College and Edinburgh College.

What are they trying to achieve?

NUS wanted to show students what reasonable adjustments might be, because from previous conversations and research it was apparent that sometimes they weren't aware what could and potentially should be done to ensure their right to this standard of educational experience (i.e. equal to that of all other students).

How did they use human rights based approach to do that?

After speaking to university and college support services and those working in equality and diversity related roles, as well as those working in students' associations, to find out what was commonly done by way of reasonable adjustment, they collated these case studies/examples for students to discuss at the session. Through desk-based research they found examples of good practice across the world that could be shared to spark discussion as well.

This allowed for empowerment of the students, who, by the end of the session, felt more confident in their knowledge of their human rights, and were encouraged to hold their institutions accountable for providing a non-discriminatory environment, thus reflecting all of the PANEL principles.

What was the impact of this?

The aim to improve students' knowledge of their rights appears to have been achieved for the group taking part, and the element of peer support, through the fact it was a group of students with lived experience of mental ill health, will hopefully have contributed to empowering them to ask for these or other relevant adjustments when required. Students certainly reported increased knowledge and confidence.

Further links / references / questions

The difficulty is in measuring whether this increased knowledge and confidence translates to behavioural change (i.e. action being taken) as it will be case by case and isn't like a campaign for a policy change, which would have a more visible and easily measured outcome.

Equality Act Guidance for Students: www.equalityhumanrights.com/publication/what-equality-law-means-you-student-further-or-higher-education

SEEING THE PERSON, SEEING OURSELVES CASE STUDY



Brief overview of the case

Seeing the Person, Seeing ourselves: In 2009 the Scottish Human Rights Commission (the Commission) undertook an independent evaluation of the experience of a Special NHS Health Board which has sought to adopt a human rights culture. The results provide practical lessons for other public authorities.

What is the project?

The State Hospital, located in Lanarkshire, is the high security forensic mental health hospital for Scotland and Northern Ireland. It provides psychiatric care in conditions of high security, for persons with mental illness who are compulsorily detained under mental health or criminal law.

What are they trying to achieve?

According to the Commission, A human rights-based approach (HRBA) means putting human rights considerations at the centre of all policies and practices. In this way human rights are seen as both a means (a way of doing things), driven by human rights standards and principles, as well as an end to be achieved. The Commission promotes a HRBA approach which emphasises the following principles:

Participation: everyone has the right to participate in decisions which affect their human rights

Accountability of duty-bearers to rights-holders: this requires both effective monitoring and effective remedies.

Non-discrimination and equality: all forms of discrimination in the realisation of rights must be prohibited, prevented and eliminated.

Empowerment of rights holders: everyone should know their rights and be supported to participate in decision making, and to claim their rights where necessary.

Legality – public authorities should expressly apply the Human Rights Act and link to international and regional rights standards

How did they use human rights based approach to do that?

What the State Hospital did to adopt the approach:

Following a decision by the Board to adopt a HRBA, The State Hospital established a Human Rights Working Group led by senior management and involving clinical and non-clinical members of staff. The Group underwent training in human rights with a human rights expert who helped them to identify specific human rights which were relevant to The State Hospital.

Through discussions with around 100 staff and patients, the Group assessed all policies and practices using a Traffic Light assessment tool:

Red = policy/ practice is not human rights compliant

Amber = policy/ practice has significant risk of non-compliance

Green = policy/ practice is human rights compliant.

No policy was given the red light and many were given a green light. However, some policies and practices, such as those related to seclusion and restraint, were given an amber light and further policy development and training needs were identified accordingly.

The Group worked with a human rights expert to develop human rights training for staff and tools for the assessment of future policy and practice. Other steps taken included the creation of a forum for staff, patient, and carer involvement in decisions, and ultimately the creation of an Equality, Diversity and Human Rights Group to ensure a human rights approach to the delivery of equality duties.

What was the impact of this?

According to the Commission, The experience of The State Hospital provides clear lessons for the integration of human rights into other public authorities in the health and social care sectors as well as others. The following elements were seen by the Commission as crucial to its success:

- Top level buy-in and vision from the Board, Chief Executive and senior management;
- Clear executive leadership in implementation by a senior management team;
- Involvement from an early stage of human rights expertise to support the development and tailoring of a HRBA;
- A participatory diagnostic process, 'the human rights audit', involving staff and stakeholders of an organisation;
- Investment of appropriate time and resources;
- A proportionate approach, consistent with human rights principles itself, so that the HRBA effort reflects the significance of the issues.
- An approach which focuses on the rights of everyone affected: staff as well as patients and their carers.
- The HRBA promoted understanding of everybody's rights, and how to balance one person's rights against those of another, as well as how to justify limitations of rights

Next steps

At the time of the evaluation, the Commission stated it would like to work with the Scottish Government and Scottish Public Authorities to:

- Promote the experience and lessons from the evaluation of The State Hospital HRBA to see how the human rights based approach can be applied elsewhere;
- Support the lessons from this being taken forward in other key health initiatives including the Patients' Rights Bill and the review of the Mental Health (Care and Treatment) (Scotland) Act 2003.
- Develop clear guidance on how all Scottish public authorities should take human rights into account in delivering equality duties, including in the context of the new specific duties under the Equality Act 2010;
- Develop human rights impact assessment tools, and other mechanisms for integrating human rights into the culture of health and social care institutions.

Many of these goals have formed part of the Scottish National Action Plan for Human Rights (SNAP), launched in 2013. SNAP is now the home for collective action on a wide range of human rights issues by dozens of partners working across government, civil society and the public sector. Actions are underway to realise human rights in health and social care settings, to improve access to justice and safety and to explore human rights-based approaches to tackling poverty.

SNAP also aims to raise awareness, understanding of and accountability for human rights so that a better human rights culture develops across Scotland. Finally, SNAP partners are working on initiatives to help Scotland fulfil its international human rights obligations, with a particular focus on business and human rights, climate justice and international development.

BUN AND A BLETHER CASE STUDY



Brief overview of the case (3 lines)

The 'Bun and a Blether' project to tackle workplace stigma is run by the Hope Café in Lanarkshire. It is delivered by two paid part time members of staff, both of whom have lived experience of mental health issues.

What is the project?

The project uses social contact theory to challenge stigma around mental health in workplaces. Free 90 minute interactive workshop sessions (with tea and cakes) are offered to local employers, enabling staff to discuss issues, gain information and make

suggestions to their employers that they feel would lead to the creation of a healthier workplace.

What are they trying to achieve?

The project raises awareness of stigma, encourages conversations within workplaces and also provides information on common mental health issues. Project staff spend a full day in the workplace with an information stall, enabling further discussions after the workshop and providing one to one sessions where these are required. An Action Plan is created at the end of each workshop, aimed at developing a more mentally healthy workplace. Employees leave with a pack of information and tools for stress relief etc.

How did they use human rights based approach to do that?

While the project does not explicitly use a human rights framework, elements of the PANEL principles underpin the project.

Participation – The project aims to bring employees together and to facilitate conversations about mental health issues. For many, this will be the first time they have thought about the matter in a structured way. Workshop sessions are designed specifically for each workplace and aim to enable maximum participation. The project also gives employees the opportunity to make suggestions to their employer for actions that will make their workplace a more mentally healthy one.

Accountability – Employees have the opportunity to hold employers to account by contributing to Action Plans and also by raising any issues they have faced or seen in an anonymous fashion.

Non discrimination – All employees can be involved in the sessions and supported to challenge any discrimination that exists. Issues can also be raised confidentially with project staff if required.

Empowerment – The provision of information to employees empowers them, and they are also given the direct opportunity to challenge any discriminatory practice in the workplace.

Legality – Knowledge of issues around stigma and discrimination will assist employees to challenge barriers to asserting their human rights.

What was the impact of this?

Workshops are working well and wide and varied discussions are taking place. Issues raised have been fed back to employers for action and follow ups will be arranged to assess actions taken.

Wide publicity has also been achieved for the project, which is promoted by a range of local agencies throughout Lanarkshire. To date, all workshops have been arranged solely by employers contacting the project directly and requesting the input.

Further links / references / questions

The assessment of actions taken by employers will be an important success factor.

CONVERSATIONS FOR CHANGE CASE STUDY



Brief overview of the case

The 'Conversations for Change' project is operated by CAPS Advocacy in Lothian. It is delivered by a Creative Team of people with lived experience of mental health issues, working with a specialist artist.

What is the project?

The Conversations for Change project uses social contact theory and an arts based approach to generate public conversations on mental health.

What are they trying to achieve?

By generating public conversations the stigma associated with mental health conditions will be challenged. Large numbers of members of the public will be engaged and will have their own attitudes and outlooks challenged, as well as taking the threads of the conversations into their own networks and families. A public artwork will be created at the end of the project, acting as a focus for anti stigma work.

How did they use human rights based approach to do that?

While the approach used does not explicitly use a human rights framework, elements of the PANEL principles do underpin the project.

Participation – The project has been developed by the Creative Team, all of whom have lived experience of mental health issues. Many have worked with CAPS on previous projects, but an open approach to participation has been taken and opportunities for involvement have been widely offered. A public session outlining the project and the role of the Team was held, a mailing list established to provide regular updates and good use is made of the dedicated project website and Facebook page.

Accountability – The artist facilitates meetings of the Creative Team and reports back to CAPS, the grant holder. This contractual relationship ensures accountability.

Non discrimination – The public based nature of the project means that it is open to all. Specific interventions are also planned around traditionally harder to reach or less involved groups, e.g. young people, the Muslim community and the Polish community.

Empowerment – The Creative Team are empowered to deliver the project and supported by the artist to use and enhance their own skills to do so.

Legality – The essence of the project is to challenge the stigma that acts as a barrier to the human rights of those with mental health conditions.

What was the impact of this?

The project is working well and attracting large numbers of people at most of its interventions, with over 400 conversations recorded so far. Sessions were held during the Hidden Doors arts festival in Edinburgh as well as in public places. Wide participation is a key success criterion for the project.

Further links / references / questions

The empowerment of the Project Team is a crucial activity, and the benefits to them as individuals is clear.

The impact of the project in tackling stigma will be assessed through a formal evaluation by the mental Health Foundation.

MORAY COMMUNITY MENTAL HEALTH DAY SERVICE CASE STUDY



Brief overview of the case

Moray based community mental health day service with Social work referral only, added pre-referral visits to their service to enable choice and increase awareness of service provision for those looking for support, thus enabling choice and decreasing unrealistic expectation.

What is the project?

Community mental health day service

What are they trying to achieve?

Overall: Increased recovery from mental health issues
Specific example: enabling personal choice in accessing the service

How did they use human rights based approach to do that?

Access of service is via health / social care referral. Currently there can be long periods of time (1-2 months) between this and access to the service. People can pin a lot on accessing the service resources, despite it potentially not being what they feel they need by the time they do get access, leaving them in limbo in the interim. This leads to disappointment, disempowerment and poor rates of retention of those who do get access if they find out it's not what they expected.

The service then changed their approach to encourage service visits by those who may

be interested in referral. This means that people can access appropriate information at the right time. This is a human rights based approach as it focuses on empowerment of choice in accessing support toward wellbeing.

What was the impact of this?

This saves disappointment for those using the service and staff as well as time on paperwork, but also inspires people to feel more valued and enables choice.

Further links / references / questions / going further questions

N/A