



**FOCUSED OPINION POLLING OF DOCTORS AND PATIENTS ON THE
RIGHTS OF PERSONS WITH MENTAL DISABILITIES**

Kotor

March 2017

Focused opinion polling of doctors and patients on the rights of persons with mental disabilities

Publisher

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This report was prepared within the project "Beyond exclusion - effective rights for mental health patients" implemented by Human Rights Action (HRA), Center for Women's and Peace Education (ANIMA) and Mental Disability Advocacy Centre (MDAC) from Budapest, with the support of the European Union and Kotor municipality.

The content of this report does not reflect the official opinion of donors. Responsibility for the information and views expressed in the publication lies entirely with the authors.

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1. Conclusions and recommendations

1.1. Conclusions

As a rule, patients do not complain about the violation of their rights on any basis. Of 100% respondents, only 3.7% complained about anything in relation to the treatment in the institution.

However, it was noticed that in most cases patients responded that they were not informed about their rights. On the other hand, more than two-thirds of the employees who work with patients answered that patients were orally informed about their rights immediately upon admission.

While it would be necessary to further investigate the causes of the observed difference in responses, distribution of brochures and other written instructions in order to inform patients and their families with their rights would certainly contribute in overcoming the observed differences.

Most respondents (69%) make use of the right to send and receive their mail and packages, as well as to use the phone at their own expense, with full privacy, while 8,3% of respondents did not use these rights (the remainder of 22,7% of respondents did not respond to the question). However, the largest number of patients who have been using the phone said that they had to use the phone in the ambulance in the presence of medical staff, while the staff determined time and duration of the conversation. Bearing in mind this finding, as well as the fact that patients in any institution do not have lockers with a lock and a key in which they would place their personal things, it may be concluded that patients are not being provided with the right to privacy.

Most of the patients answered that they did not know that they have the right to choose a doctor and were not aware of their diagnosis, therapy, and side effects of the therapy. Also, most of the respondents did not know that they had the right to have one or more trusted persons at their side in the treatment consent process, nor were they aware of the possibility of withdrawing consent for the treatment. There has also been a difference regarding responses of medical staff, who, for example, all stated that the patients were aware of their diagnosis, and the majority of the respondents that they were familiar with the therapy also.

Finally, most of the patients do not recognize discrimination, while the employees in the Hospital pointed to the discrimination against women who were addicted to alcohol and psychoactive substances in terms of the lack of conditions for their stationary treatment.

According to the answers received, at least one third of the respondents were deprived of their legal capacity (34.3%), while 11.7% of the respondents did not know whether they were deprived of their legal capacity or not. Unfortunately, most of those who were deprived of their legal capacity were not aware of the possibility of restoring their legal capacity - 40.5%, while

37.2% of respondents did not answer this question. Only 16.8% of respondents answered that they have this information. And here we emphasize that deprivation of legal capacity is unacceptable in modern society and contrary to the principles of respecting human rights and the prohibition of discrimination. The solution to this problem is not contributed by the fact that, when asked if they participated in training on human rights and new disability approaches in accordance with the UN Convention on the Rights of Persons with Disabilities, more than half of the employees (52.9%) responded that they never participated in human rights training.

The research showed that 62.9% of patients and 100% of employees consider that the support of the family is necessary for successful re-socialization of patients. The rest of the patients (37.1%) believe that understanding of the environment and society is important for successful re-socialization.

1.2. Recommendations

1. Continuously inform patients how to protect their rights.
2. Provide sufficient brochures and other instructions (e.g. posters) on the rights of patients and members of their families and ensure that they received them immediately upon admission to a department, clinic or hospital.
3. Thoroughly investigate the causes of various responses regarding the perception of informing of patients by the staff and patients themselves.
4. Periodically examine and evaluate how often patients use opportunities to protect their rights.
5. Provide patients with privacy while telephoning and provide them lockers with lock and key in which they will place their personal things during their stay in the institution.
6. Further educate staff about the rights of people with mental disabilities.
7. Inform the public, raise awareness and actively work to break prejudices and stereotypes against people with mental disabilities in society.
8. Provide, without discrimination, the conditions for the permanent treatment of women who are addicted to alcohol and psychoactive substances in Montenegro.
9. Bearing in mind that Montenegro's regulations are not in compliance with international documents and standards regarding the deprivation of legal capacity, primarily the Convention on the Rights of Persons with Disabilities, take steps towards harmonization of regulations, and in the meantime, apply them directly by quitting deprivation of legal capacity and restriction of legal capacity applied restrictively.

10. Establish and continuously provide access to appropriate mental health services to any person with mental disabilities and members of their family.