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## XX meeting, .....2025

1 General questions

### 1.1 Recommendation CM/Rec(2025)... on respect for autonomy in mental healthcare

Item to be considered by the GR-... at its meeting on ... 2025

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#### **Recommendation CM/Rec(2025)... on respect for autonomy in mental healthcare**

*(adopted by the Committee of Ministers on ... 2025  
at the... meeting of the Ministers' Deputies)*

#### **Preamble**

The Committee of Ministers, under the terms of Article 15.b of the Statute of the Council of Europe (ETS No. 1),

Considering that the aim of the Council of Europe is to achieve greater unity between its members by, *inter alia*, promoting common standards and putting in place initiatives in the field of human rights;

Recalling the Convention for the Protection of Human Rights and Fundamental Freedoms (ETS No. 5) and the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine (ETS No. 164, Oviedo Convention);

Recalling the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (ETS No. 126);

Recalling relevant international standards, including in the United Nations Convention on the Rights of Persons with Disabilities (2515 UNTS 3);

Having regard to the relevant case law of the European Court of Human Rights;

Having regard to the work of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment;

Recalling the principles of Recommendation Rec(2004)10 of the Committee of Ministers to member States concerning the protection of the human rights and dignity of persons with mental disorder;

Building on the Council of Europe's "Compendium report: good practices to promote voluntary measures in mental health services";

Having regard to the World Health Organization's QualityRights Initiative;

Reaffirming the importance of the principles of the Oviedo Convention concerning the protection of human dignity, the primacy of the human being and non-discrimination;

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<sup>1</sup> This document has been classified restricted until examination by the Committee of Ministers.

Emphasising the principles of free and informed consent, of equitable access to healthcare and of professional standards set out in that convention;

Stressing that respect for autonomy is central to upholding human dignity;

Recommends that the governments of the member States:

- a. demonstrate leadership in embedding respect for autonomy in mental healthcare by ensuring that the guidelines contained in this Recommendation are reflected in national law, policy and practice;
- b. take appropriate measures to ensure that adequate resources are allocated to mental healthcare so that these guidelines can be implemented;
- c. examine, within the Committee of Ministers, the implementation of this Recommendation no later than five years after its adoption, and every five years thereafter.

## **Appendix to Recommendation CM/Rec(2025)... Guidelines on respect for autonomy in mental healthcare**

### **Chapter I – Object and scope**

#### **Article 1 – Object**

This Recommendation aims to ensure respect for the autonomy of persons receiving mental healthcare and to prevent the use of coercion in the provision of such care.

#### **Article 2 – Scope**

This Recommendation applies to persons receiving mental healthcare (hereafter “the persons concerned”) in all settings in which the care is delivered.

### **Chapter II – General principles**

#### **Article 3 – General rule**

1. Mental healthcare should only be provided with the free and informed consent of the person concerned or, where according to law the person does not have the capacity to consent, by respecting their will and preferences.
2. Any exception to the general rule laid down in the preceding paragraph should be subject to strict legal safeguards that respect human dignity.

#### **Article 4 – Access to mental healthcare**

Persons with mental health problems should have equitable access to mental healthcare, including community-based care. They should have access to mental healthcare as early as possible.

### **Chapter III – Policies and practices**

#### **Article 5 – Guiding principles**

Policies and practices should reflect the goal of ensuring respect for the autonomy of the persons concerned in mental healthcare. Responsibilities for achieving this goal should be defined at all levels.

#### **Article 6 – Involvement of persons with lived experience**

Persons with lived experience of mental healthcare should be involved, individually or via representative organisations, in developing laws, policies and practices relevant to mental health and in their monitoring and evaluation. Their involvement should be appropriately resourced.

## **Chapter IV – Mental healthcare**

### **Article 7 – Information about rights and how to exercise them**

The persons concerned should be individually informed of their rights in respect of mental healthcare and have access to assistance to enable them to understand and exercise such rights, including to express their will and preferences and make decisions about their care.

### **Article 8 – Advance care planning**

The persons concerned should be encouraged to express their will and preferences for their future care and these should be documented.

### **Article 9 – Environment of mental healthcare facilities**

The physical and social environment of mental healthcare facilities should be reviewed and, if necessary, adapted, taking into account the need to respect the autonomy of the persons concerned.

### **Article 10 – Service networks**

Mental healthcare services should have close links with other services that can contribute to the promotion of and respect for the autonomy of the persons concerned.

### **Article 11 – Family and social network**

Subject to respecting the confidentiality, privacy and autonomy of the person concerned, the potential benefits of involving the person's family and social network in their care should be taken into account.

### **Article 12 – Complaints procedure**

1. The persons concerned should have effective access to a complaints procedure. They should be informed of this procedure and should receive an appropriate and timely response to any complaint.
2. Information arising from complaints should be used to improve care in the future.
3. Such information should be made available, subject to appropriate protection of the privacy and confidentiality of the person concerned, to bodies responsible for quality assurance and monitoring.

## **Chapter V – Public understanding and prevention of stigma**

### **Article 13 – Public understanding**

Public understanding should be promoted in relation to:

- a. the importance of respect for autonomy as a human rights principle;
- b. the prevention and care of mental health problems, and the potential for recovery; and
- c. the benefits of early access to mental healthcare.

### **Article 14 – Non-stigmatisation and non-discrimination**

Measures should be taken to address the stigma and prejudice associated with mental health problems, and to prevent and eliminate discrimination against persons with such problems and to promote their inclusion in society.

## **Chapter VI – Education and training**

### **Article 15 – Education and training**

1. All staff involved in mental healthcare and those who, in their professional capacity, come into contact with persons with mental health problems, should receive, as appropriate to their role:

a. education on respect for autonomy as a human rights principle; and

b. training in practices that respect the autonomy of such persons.

2. Healthcare professionals in primary care should receive appropriate training in the early identification of mental health problems and initiation of appropriate care that respects autonomy.

## **Chapter VII – Research and sharing of good practice**

### **Article 16 – Research**

Research aiming to promote respect for autonomy in mental healthcare should be supported.

### **Article 17 – Sharing of good practice**

Mental healthcare services should share good practice in view of ensuring respect for autonomy in mental healthcare.

## **Chapter VIII – Review of practices and monitoring**

### **Article 18 – Review of practices**

Those providing mental healthcare should regularly review their practices, with a view to ensuring respect for the autonomy of the persons concerned.

### **Article 19 – Monitoring**

1. There should be systems for monitoring compliance with the principles set out in this Recommendation.

2. The results of such monitoring should be made publicly available.