

The Mental Health Bill [Lords] 2025

Liberation very much welcomes parliament's recognition that the Mental Health Act 1983 is not fit for the 21st century. At the same time, we continue to have major concerns about the Mental Health Bill's serious shortcomings.

In the video clip below, Clenton Farquharson explains why:

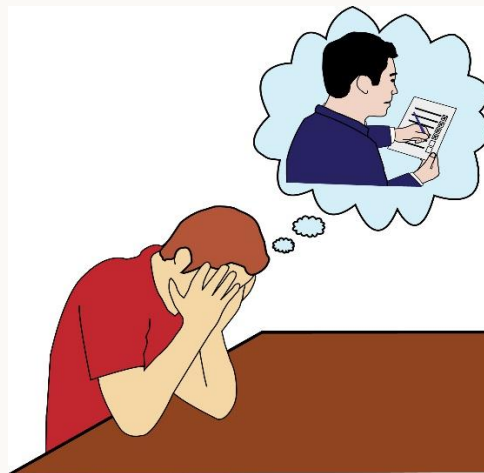
<https://www.youtube.com/watch?v=VI7sKneNNVI>



See also the points which follow on the next pages.



We are calling for a fundamental rethink of the Mental Health Bill's approach to risk



People First (Self-Advocacy) Picture Bank

Reasons

As the [World Health Organisation and UN Office of the High Commissioner for Human Rights](#) have stated (Box 2, pp. 15-16):

- There is no adequate research evidence that involuntary detention in psychiatric hospitals and forced treatment are effective. However, there is clear evidence both of trauma caused by these approaches and of a worryingly high death rate among people who are detained.
- There is considerable evidence that people with mental health diagnoses are more likely to be victims of violence than to be violent.

**‘A tide of hate and prejudice
Is sweeping us away
It’s hard enough to live this life
When one struggles day to day.**

**But apparently we are to blame
For all this country’s woes
We are made to seem fair game
Everyone Our Foe.’**

Extract from *We are the voiceless*,
Tony Demoncey 02/05/2011.

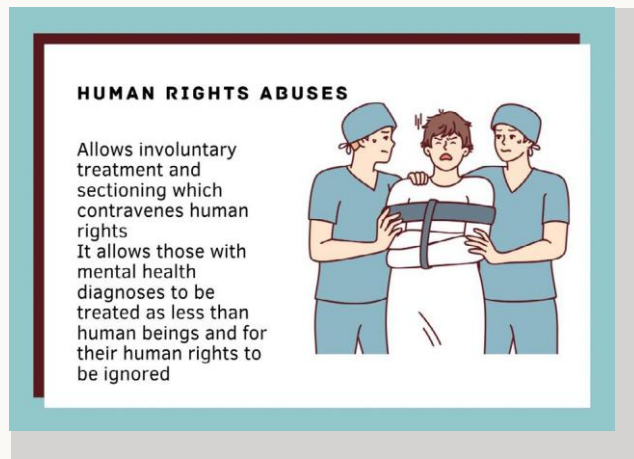
- Even when there are genuine risks, not only is there a growing body of non-coercive approaches that can be used instead, but these approaches have been shown to lead to better outcomes. (See also examples cited on page 4 below.)

Because of this, we are urging the government to replace involuntary detention and forced treatment with evidence-based, therapeutic approaches which are genuinely effective and genuinely healing.

We are calling for people with mental health diagnoses to have equal legal rights

Reasons

- The Mental Health Bill is designed only to give us 'greater' choices and autonomy, not the same choices and autonomy that other people have.
- There is no adequate justification for this on risk grounds. (See above.) Yet involuntary detention in psychiatric hospitals, forced treatment and community treatment orders remain a key part of the Mental Health Bill, even if the intention is for them to happen less often.
- The assumption that they are necessary because we can lack 'mental capacity' is also ill-founded. When adequate support is in place, for example the [Personal Ombudsman Project](#) in Sweden, it is fully possible for us to make our own judgements even at times of major crisis. The actual issue is that the UK lacks resources of this sort.



Designed by Emerynd Willow

‘I am very worried about the Mental Health Bill due to my own experience. I only experienced 8 days of the psychiatric system in 2009. However, those 8 days were the worst days of my life. I thought I was going to die or end up brain damaged from the threatened ECT. It had such an effect on me that I have been campaigning for complete change for 16 years now. Of course, many others have had years of abuse at the hands of psychiatry and some are no longer with us. Yet the Bill still does not give us full human rights, human rights that everyone else has, but not those deemed as mental patients. Potential risk is often used to argue for locking people up, but this logic is not applied to others.’
(Cheryl Prax.)

We are, therefore, urging the government to make sure that we have and can exercise the same legal rights as others can.

We are calling for new legislation which, in contrast to the Mental Health Bill, is genuinely fit for the 21st century

Reasons

- The Mental Health Bill has been described as initiating changes that will make mental health legislation 'fit' for this century, but, in reality, it falls seriously short of doing so.
- It maintains institutionalisation.
- It lacks an adequate focus on the wide-ranging community resources which will be crucial if people with mental health diagnoses are instead to live independently in their local communities, as integrated members of these.
- The government has described the Bill as 'compatible' with the [UN Convention on the Rights of Disabled People](#) (UNCRPD). However, in reality, it falls seriously short of genuinely progressive moves towards the Convention that can be found in a number of other countries.
- Examples include the innovative [model](#) used in Trieste, Northern Italy, which has made community care the norm; [Act 8/2021](#) in Spain, which recognises the legal capacity of all adults; the [General Health Law 2022](#) in Mexico, which prohibits involuntary treatment and hospitalisation of people experiencing a mental health crisis, and the ground-breaking [National Civil Procedure Code](#) now being initiated there for implementation purposes.



For all these reasons, we are urging the government to recognise the Bill's major shortcomings and to replace it with legislation that is genuinely compliant with the UNCRPD.

We are calling for a meaningful influence over the Mental Health Bill



Designed by Alisa Rayner

Reasons

The government has described 'the insight and input of stakeholders' as 'crucial' to the Bill. However, that has not been the experience of those of us with mental health diagnoses who are campaigning for full human rights.

- It has been even less the experience of those among us who experience more than one form of discrimination, related, for example, to ethnicity, gender, gender identity, age, socio-economic status, physical or sensory impairments and/or LGBTQI+ identity.
- In further contravention of the UNCRPD, we have received either no responses to the issues raised above, dismissive responses, or responses that do not accurately reflect concerns raised.

We are, therefore, urging the government to take a radically different approach and to ensure that we are meaningfully involved in decisions made about the Bill.

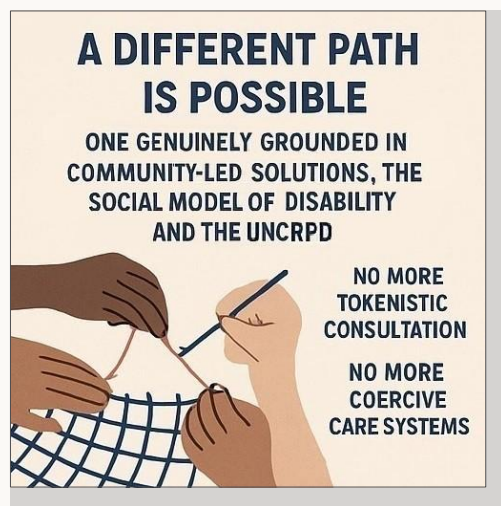
Our call is for a Bill that is genuinely compliant with the UNCRPD

As it stands, the Mental Health Bill will not resolve serious breaches of the UNCRPD that are intrinsic to the Mental Health Act 1983 and Mental Health Act 2007.



Designed by Recovery in the Bin

We are urgently appealing to you to advocate for legislation which genuinely gives people with mental health diagnoses the full human rights that they should have, because it is genuinely based on the UNCRPD, and to do so in full partnership with us.



Designed by Alisa Rayner

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