







DeclarationofDresden AgainstCoercedPsychiatricTreatment

Dresden(Germany), June 7,2007

The European Network of (ex-)Users and Survivors of Psychiatry (including its German member-organisation Bundesverband Psychiatrie-Erfahrener) together with their sister organisation the World Network of Users and Survivors of Psychiatry, and working closely with MindFreedom International, are issuing this statement to make clear our coordinated position on force and psychiatry at the time of The World Psychiatric Association (WPA) Conference, "Coercive Treatment in Psychiatry: A Comprehensive Review," being held in Dresden, Germany, June 6 to 8, 2007. Our organizations are in a unique position to speak on this issue because we have experienced forced psychiatry and know the damage it has done to ourlivesandthoseofourmembers, colleagues, and friends.

Our organizations will have representatives from a number of countries participating in the WPA conference, with the intent of putting a human face on this practice. We believe that people who have been coerced by psychiatry have a moral claim to making the definitive statement concerning such coercion.

We stand united in calling for an end to all forced and coerced psychiatric procedures and for the development of alternative stopsychiatry.

We especially point to the recent adoption by the United Nations General Assembly of the "Convention on the Rights of Persons with Disabilities" which was drafted with the participation of human rights activists who had personally experienced the mental health system. We believe that the people of the world and their elected representatives should ratify this Convention without reservations, affirming that all people ought to be treated equally and that no one should be denied liberty based on a label of disability, disease or disorder. We all have a right to refuse psychiatric procedures, since this Convention recognizes the right to free and informed consent with no discrimination based on disability. Even more important,

the Convention guarantees to people with disabilities the right to make our own decisions (legal capacity) on an equal basis with others, and requires governments to provide access to non-coercivesupportindecision-making, forthosewhoneed such support.

We note that the World Health Organization (WHO) has stated its opposition to all involuntary electroshock, which is also known as electro-convulsive therapy (ECT). Involuntary electroshock is increasing internationally, including in poor and developing countries where it is most likely to be used without anaesthesia. In particular, we call for the abolition of involuntaryECTineverycountry.

WHO and the European Commission have also stated the need for the development of new non-stigmatising and self-help approaches for people in emotional distress. Organizations of people who have experienced psychiatric treatment have taken the lead in developing self-help programs that are based on equality and choice, rather than on coercion, and have been successful in helping people lead integrated lives in the community. We know that healing can only occur when people are respected as humans with free will and when there are alternatives beyond psychiatry which are based on ethical approaches, which see the whole person, and which support recovery, while force makes recovery impossible.

We note that in many countries of the world, there is an increasing use of forced psychiatric procedures, including court ordered treatment which requires that people living in their own homes take psychiatric drugs against their will or lose their freedom. This practice is a violation of our human rights asset for thin the UNC onvention.

We invite all supporters of human rights to join and support us in demanding a world free of forced and coerced psychiatric procedures, and we call for adequate funding and support for voluntary self-help services and for alternatives to psychiatry which respect our humanity and an adignity.

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Onbehalfof

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