



Game
rules

Useful
definitions
for
understanding
mental
health

Set of 4 awareness games on

MENTAL HEALTH RIGHTS

And
more

Created by With the support of



Touching Minds, Raising Dignity | 2021

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DESCRIPTION OF THE CONTENTS

This game set contains:

- 1 deck of 32 playing cards made up of 16 image cards et 16 explanatory cards
- 1 game board
- 1 chatterbox (paper finger game) to fold and to use as a die (see game instructions about the part to be cut out)
- 1 booklet that includes: a general presentation of the game set; the rules of the 4 games (Time's Up of rights – Memory of rights – 8 Families of rights – Spiral of rights); 3 fact sheets (a) examples of situations of stigmatization and discrimination relevant to the 8 rights; b) examples of stereotypes or prejudices about mental health relevant to the 8 rights; c) definitions and answers to better understand mental health); and the 8 articles of the Convention on the Rights of Persons with Disabilities (CRPD)

1 presentation picture to paste on a cardboard folder holding all the printouts of this set of tools/documents



This whole set of files is available in digital format and printable from any printer and any computer.

1) Presentation

a) INTRODUCTION

Our experience in the 4 countries of the **Touching Minds, Raising Dignity (TMRD)** programme shows that there's room for improvement for the social inclusion of mental health users in these countries of intervention (Madagascar, Lebanon, Sierra Leone, and Togo). **People experiencing psychosocial distress or living with a mental health condition are often stigmatized and perceived as ill** and thus, as needing to be treated through a mainly curative care model. Their rights are often violated and are little known in society, but also to users themselves. Mental health (MH) users ultimately only have little say, if any, in the decisions that affect them. To address this, we recommend:

- **Building the capacities of health care professionals** to improve care;
- Organizing **collective activities that anticipate on or complement curative care**, such as peer support groups or awareness activities in communities. These activities can effectively combat the stigmatization of MH users to facilitate their rehabilitation and reinsertion into society;
- **Building the capacities of users** to ensure their effective **involvement in the projects that affect them** and their **social participation** in general by promoting individual support and guidance, networking between users, and the creation of user groups. In a spirit of empowerment, the TMRD programme continues to train beneficiaries and support their transition to actors able to practice self-care, organize themselves, and advocate for the enforcement of their rights. However, they can't achieve this without knowing these rights, and this is what this tool aims to address!

B) GOALS

This awareness tool deals with the **rights of mental health users enshrined in the Convention on the Rights of Persons with Disabilities (CRPD)**. We have decided to focus on 8 key rights rather than on all the CRPD rights to foster the best possible learning, understanding, and ultimately application.

Overall goal:

raising awareness of the rights of mental health users as described in the CRPD.

Specific goals:

1) Informing persons living with mental health conditions and/or psychosocial disabilities

about their rights within a framework of empowerment and autonomy;

2) Combatting the stigmatization and social exclusion of MH users by raising awareness among health care professionals and the general public of their rights and of the situations they face;

3) Capitalizing on the best practices from the Touching

Minds, Raising Dignity (TMRD) programme and supporting Handicap International – Humanity & Inclusion (HI) teams and their partners in their outreach and awareness efforts beyond the end of TMRD.

c) Audiences & Uses

The main target audience is MH users since one of the specific goals of this pedagogical tool is to inform them about their rights. Beyond this, it also targets the broader public, as this set is made up of:

- **1 card deck with 3 distinct sets of rules that are relatively easy, accessible, and understandable to all audiences** from an early age on (from age 7 to age 77, both users and non-users);
- **1 board game aimed at an adult audience** (young adults at the very least), as it's relatively difficult due to the rules and reflection needed to progress and finish: **MH users, health care professionals, community health workers, and social workers (educators, facilitators)...**

These games can be used as part of:

- 👉 **Awareness activities** in communities or schools and at various events (World Mental Health Day...) initiated directly or indirectly by HI teams, their partners, and/or user groups and associations;
- 👉 **Capacity-building activities** for HI teams, their partners (e.g., user groups and associations), and, more broadly, for social workers and other health actors.



2) Rules of the 4 games

a) TIME'S UP OF RIGHTS

How to place the cards? This game only uses 16 cards: 8 image cards and 8 explanatory cards with the 8 rights. After selecting the cards, shuffle them then stack them into a deck.



What's the goal? Make your team guess as many rights as possible!

How many players? At least 2 teams, so at least 4 players all in all.

How to play? Each game has three rounds and each round has a different rule. First, each team designates a “representative”; each round will have a different team rep so that everyone can have their turn. The representative draws a card from the deck and has 30 seconds to make his or her team guess the right depicted on the card by following rules specific to each round:

- First round: the representative makes his or team guess the right by using **as many words as he or she wants**, but he or she can't make gestures or show anything. Moreover, he or she is not allowed to say the name of the right if the card he or she drew is an image card and can't say the bolded words either if it's an explanatory card. Otherwise, the team loses its turn even if its time isn't up.
- Second round: same idea, but with only **one word** (without gestures): the team rep is **not allowed to say the name of the right if the card he or she drew is an image card and can't say the bolded words either if it's an explanatory card**. It may sound complicated, but the players need to use their memory since the cards are the same as in the first round and all the rights have already been mentioned.
- Third round: same idea, but only with **gestures**.

When a team finds a right, the team rep sets the corresponding card aside to count the cards at the end of the round, then draws a new one, and so on until time's up. The teams take turns with the same rules.

When all the cards have been found, each team counts its cards and writes down its score for the round (**one card = one point**), then the next round starts.

How to win? When the third round's over, the teams add up their points from the three rounds. The team with the highest score wins!

B) MEMORY OF RIGHTS

How to place the cards? Shuffle the cards and spread them face down on an even surface in 4 rows of 8.



What's the goal? Finding as many pairs as possible. A pair always includes an image card and an explanatory card: a pair made up of 2 image cards or 2 explanatory cards isn't considered a winning pair unless the players decide to change the rules before the game starts.

How many players? Between 2 and 6 players; if there are more than 6 players, it's recommended to form teams.

How to play? The players or teams take turns. Each player/team turns over 2 cards of different colours and shows them to all the players. Two results are possible:

Either one or the other



If the two cards aren't a winning pair (an image card and the matching explanatory card), the player places them back face down. In this case, all the players must try to memorize the overturned cards as the game goes on to find pairs as fast as possible. When the first player's turn is over, the second player plays, and so on.



If the two cards depict the same right (an image card and the matching explanatory card), the player wins the pair. He or she must then describe the drawing on the image card and read the explanatory card aloud and set the pair aside to be counted at the end of the game. The player goes on playing as long as he or she finds pairs; when he fails, it's the next player's turn.

How to win? When all the pairs have been found, each player counts his or her number of pairs. The player or team with the highest score wins!

c) 8 Families of Rights

How to place the cards? Shuffle all the cards and deal out 4 cards to each player. The remaining cards are stacked into a deck between all the players.




What's the goal? Collecting as many families of rights as possible!


How many players? 2-4 players.



How to play? The first player asks another player if they have the card he or she wants by naming both categories: the specific right and the card type (image card or explanatory card). For example: "In the Right to Education family, I'm looking for an explanatory card."

 If the player who was asked the card doesn't have it, the player who asked draws a new card from the deck:

- if the card is the one he or she was looking for, he or she must let the other players know by saying "lucky dip" and can ask any player another card.
- if the card isn't the one he or she was looking for, it's the next player's turn to ask a specific card.

 If the player who was asked the card has it, he or she must give it to the player who asked and draw a new card from the deck. Then, it's the next player's turn.

Either one or the other

Caution: a player can only ask a card from a specific family of rights if he or she already has a card from this family.

If a player has gathered a whole family of rights, he or she places the 4 cards of the family in front of him- or herself and the game goes on until there are no more cards left in the deck.

How to win? When there are no more cards in the deck, each player counts his or her complete families. The player with the most families wins.

D) SPIRAL OF RIGHTS

Caution: this game is mostly aimed at adults. Because of its relative difficulty, players are advised to play one of the card games first (with one of the three sets of rules). Indeed, it'll be easier for the players to progress in the spiral of rights if they're already familiar with the 8 rights.



Description of the game materials (to print beforehand: assemble the pages of the booklet; cut out the cards; assemble the game board out of its 4 parts; cut out and fold the chatterbox):

- The **game board**;
- The set of **32 rights cards**;
- A **chatterbox** to use as a die;
- The **booklet** with the rules of the 4 games, the 3 fact sheets (definitions and answers; stigmatization and discrimination; stereotypes and prejudices), and the 8 CRPD articles;
- There're **no game pieces** to print since small everyday objects will be used instead: pieces of wood, small stones, balls of crumpled paper...

How many players? At least 2 teams, so at least 4 players (max. 4 teams of max. 4 players to make sure everyone participates).

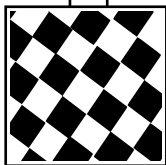
How to arrange the game materials? Sort the 32 rights cards into 2 decks, namely the 16 image cards and the 16 explanatory cards. Place each of the decks on a corner of the game board. Each team then chooses a game piece (for example: a piece of wood, a stone, a piece of crumpled colour paper...) and places it on the Start square.

How to progress? First, a member of the first team opens the chatterbox so that 4 corners are visible (top left, top right, bottom left, and bottom right) and picks one of the 4 corners. Without closing the chatterbox, he or she asks a teammate to say a number between 1 and 6 (like the numbers on a die). He or she then opens and closes the chatterbox this number of times. Then, the player lifts the corner he or she chose earlier (for example, top left) to see what number is written. The team moves its makeshift game piece by counting the squares to this number (for example, if the chatterbox corner indicates 6, the game piece moves 6 squares).

How to play? The teams take turns as long as their answers are validated. If a team fails, it must skip its turn (sit one turn out).

The actions associated with the squares on the board (32 in total) are as follows:

Start square: all the teams must place their game piece on this square to start playing.



Finish square: all the teams must land right on this square to win the game.



The player draws an **image card** and has his or her team guess the corresponding right by using **words and/or an example** of a positive or negative situation illustrating it.

Saying the name of the right is strictly forbidden



The player draws an **image card** and has his or her team guess the corresponding right by **drawing and/or miming** a positive or negative situation illustrating it.



The player draws an **explanatory card** and has his or her team guess the corresponding right by using **words and/or**

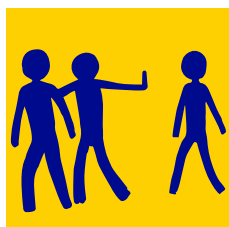
an example of a positive or negative situation illustrating it.

Saying the name of the right or the bolded words is strictly forbidden



The player draws an **explanatory card** and has his or her team guess the corresponding right by **drawing and/or miming** a positive or negative situation illustrating it.

Stigmatization & Discrimination



(from personal experience or not) of a situation of **stigmatization and/or discrimination** that violates the right on the card. They can take a few minutes to brainstorm a good example as a team.

The team that landed on the square must then infer from the example which right was violated – in other words, which right duty-bearers should've enforced to protect the person from stigma or discrimination.

Stereotype



When a team lands on this square, the **opposing team** draws a card (either an image card or an explanatory card) and finds an example

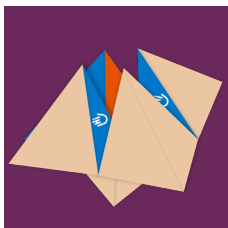
of a **stereotype or cliché** about the right on the card. They can take a few minutes to brainstorm a good example as a team. The team that landed on the square must then infer from the **stereotype** which right invalidates said **stereotype/ cliché**.

If the team that landed on the **Stigmatization and Discrimination** or **Stereotype** square finds the corresponding right, the game goes on. The teams take turns.

If the team that landed on the square think they failed to find the corresponding right because the opposing team gave a poor, misleading example, they can dispute the clarity of the example by giving a better one or by demonstrating in a discussion why the example was inappropriate. The teams must reach an agreement for the game to continue:

- if they agree that the example given by the opposing team was misleading, the game goes on and the opposing team skips a turn;
- if they agree that the example was clear, the game goes on and the team that landed on the square skips a turn;
- if they don't manage to find an agreement, the game resumes.

Definition



The die-chatterbox has 6 numbers, each of which is associated with a definition (see booklet p. 11: 1 number = 1 definition). **When a team lands on this square, they play the chatterbox again and say the number to the opposing team, who then ask the corresponding question from the booklet (e.g., if the first team gets a 1, they need to answer question 1, “How would you define good mental health?”).**

It's unusual for a team to find the exact definition, so they brainstorm it before answering out loud. Once they've given their definition, the team can't modify it or give more details. Then, based on the definition from the booklet, all the teams need to agree on whether to accept the definition given by the team that landed on the square.

The teams must reach an agreement for the game to continue:

- if they agree that the definition given by the first team is reasonably close to the one from the booklet, the game goes on and the teams take turns;
- if they agree that the definition given by the first team is wrong or unclear, the game goes on and the team that landed on the square skips a turn;
- if they don't manage to find an agreement, the team plays the chatterbox again to try to guess another word.

With the **Stigmatization and Discrimination**, **Stereotype**, and **Definition squares**, the teams must exchange, cooperate, and discuss to progress in the game. This collaborative exercise enables participants to talk about the main rights of MH users and about useful definitions for understanding mental health conditions. It also gives them the opportunity to exchange about their own prejudices and the other players' to deconstruct stereotypes about people with mental health conditions.

How to win? The first team to reach the Finish square wins, but only if they land right on the square: the number from the chatterbox must be the exact number that allows the game piece to land on the Finish square (if the number from the chatterbox is higher than the number of squares to the finish, the game piece goes back in the opposite direction by the number of extra squares and the game goes on).



3) Fact sheets

a) DEFINITIONS FOR UNDERSTANDING MENTAL HEALTH RIGHTS

How would you define **good mental health**?



Good mental health is...

- feeling comfortable with oneself and others;
- just as important as physical health;
- connected with physical health.

To go further...

The Constitution of the World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” Like physical health, **mental health is not limited to the absence of disease or ailment** and is **a major component of health: there is no good health without good mental health!**

Good mental health is “**a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution** to his or her community” (WHO definition).

It either refers to a state of **well-being**, a feeling of **happiness** and/or **self-actualization**, or to specific **personality traits** (resilience, optimism, ability to cope with adversity, the feeling of controlling one’s own life, self-esteem). It is a **positive state of balance and harmony** between the structures of the individual and those of the environment to which he or she must adapt.

1 Good mental health is **not a permanent state**: enjoying good mental health on a specific day does not mean it will last forever: it can **vary throughout life according to external and personal determinants (factors)** (such as, respectively, the environment and our genetic makeup or a trauma).

How would you define
mental health conditions?
OR give an example of a
mental health condition



Mental health conditions usually result from several different factors and take distinct forms. Their duration can vary, and they can be more or less severe and incapacitating (they often cause difficulties in the lives of the individual and of the people around him or her).

The most common examples are depression, bipolar disorder, conditions linked to drug/alcohol use, and schizophrenia.

To go further ...

Mental health conditions include:

Psychosocial disabilities tied to **psychological distress** (whatever the cause may be: migration, exile, natural disaster, poverty, lack of housing or shelter, loss of familial and/or social bonds, loss of employment...): **those impairments interfere with the individual's ability to participate in social life, with a deterioration of their ability to keep themselves occupied and care for themselves** as well as of their social skills. For example: anxiety disorders (post-traumatic stress disorder, phobias, obsessive-compulsive disorder...), alcohol- or drug-related substance use disorders...

Psychic or mental incapacities tied to the chronification of severe mental health conditions such as psychotic disorders (schizophrenia, bipolar disorder, chronic delirium...), full depressive syndromes (dysthymia, depression...), personality disorders (antisocial personality disorder...), etc. **They don't involve systematic or permanent intellectual disabilities, but rather behavioural and emotional disturbances that manifest as difficulties in acquiring or expressing psychosocial skills** (impairments at the levels of language and behaviour). **Attention deficits** ensue, as well as **an alternation between calm and tense states** and difficulties in planning and following a course of action.

Intellectual disabilities tied to **intellectual impairments**, usually caused by a **developmental disorder** or a pervasive developmental disorder (whatever the cause may be: genetic, chromosomal, biological-organic, environmental including nutritional...). **Intellectual impairment** refers **to a significant, persistent, and lasting limitation of a person's intellectual functions**. Intellectual disabilities result in **varying degrees of impairment, disrupting learning, knowledge retention, attention, communication, social and professional autonomy, emotional stability, and behaviour**.

Examples:

- developmental disorders tied to a chromosomal or genetic condition: Down's syndrome / trisomy 21, fragile X syndrome, Prader-Willi syndrome, Smith-Magenis syndrome, Williams syndrome...
- pervasive developmental disorders: autism spectrum, Rett's syndrome, childhood disintegrative disorder...

People who have a disability because of an intellectual impairment and of their environment can experience mental health conditions and psychological distress.

2

What are some possible **factors** or **causes** of mental health conditions: give an example.

The most common risk factors are verbal and physical violence (abuse), child abuse, poverty, loss of employment, the passing of a loved one, and drug or alcohol abuse.

To go further ...

Risk factors are **stressors or personal or environmental situations** that increase a person's likelihood to develop a mental health condition or experience psychological distress.

Several factors or determinants can influence mental health; they can be **interconnected and thus cumulated** by a single person. The combination of all these factors is what determines a specific person's mental health status at a given time. **The same factors can have different consequences depending on who is experiencing them.**

Please find below a non-exhaustive list of factors that can influence mental health:

External or environmental factors:

- **economic factors** (related to the economic positioning of an individual within his or her community);
- **social factors** (related to the social positioning of an individual within his or her community);
- **societal, cultural, and political factors** (those factors apply to the whole community but affect different groups and individuals unequally)...

Examples of external/environmental factors: access to employment and remuneration; access to health (availability of health care, adaptation, and rehabilitation...); educational level and access to education; debt; conditions of living; poverty; social life (friends, family, colleagues...); social support network and group/community affiliation; social exclusion; values and beliefs; prejudice and discrimination (racism, sexism...); social cohesion; social disparities; public policies; infrastructures (access to water, sanitation, housing, transportation...); environment (safety, violence, war, natural disaster, human rights violations...); migration and exile...

Personal or individual factors:

- **Physical health**
- **Lifestyle or life habits**
- **Psychological profiles, personality traits, emotional and social intelligence**
- **Genetics**

Examples of personal/individual factors: predispositions to specific mental health conditions; alcohol and/or drug use; ability to cope with life's challenges, do one's job, contribute to the life of the community; life story...

Each of us is a rights holder: persons with disabilities, women, children, convicts, foreign nationals, ex-combatants or soldiers...

Who is a rights holder?
Give an example.

What is a rights holder allowed to do?

Give an example.

5

Every rights holder:

- is entitled to rights;
- can claim his or her rights from duty-bearers;
- can hold those with obligations (duty-bearers) to account;
- has the responsibility to respect other people's rights;
- can influence the life of other rights holders;
- can be a duty-bearer.

What are a duty-bearer's obligations? OR give an example of a duty-bearer (or duty-holder).



Duty-bearers have the obligation to respect, ensure, and protect the fundamental rights of rights holders. The greater the power, the greater the obligation to respect human rights.

Examples: the State (first duty-bearer) as well as the ministries, local and judicial authorities, judges, police, and Parliament; the private sector, intergovernmental organizations, civil society organizations, heads of household. And, in principle, every individual who has the power to affect the life of another rights holder is a duty-bearer (for example, a mother is a duty-bearer within her family...).

6



B) EXAMPLES OF SITUATIONS OF STIGMATIZATION & DISCRIMINATION

Right to equality and non-discrimination

- ✎ A park warden or retail security guard denies a person with a mental health condition access to a public park or to a supermarket, claiming that he or she scares children.
- ✎ In a restaurant, a waiter refuses service to a person with a psychosocial disability.

Obligation of States to promote the rights of persons with disabilities

- ✎ Some media depict people with mental health conditions as dependent individuals who can't take care of themselves.
- ✎ Low media representation of people with mental health conditions.
- ✎ Excluding people with mental health conditions from local or national awareness campaigns.

Right to justice and protection

- ✎ Depriving a person with a mental health condition of his or her inheritance and inheritance rights.
- ✎ A banker refuses to open a bank account for a person with a mental health condition

Right to live independently and to be included in the community

- ✎ Committing a person with a psychosocial disability against his or her will.
- ✎ Villagers chase away a person with a mental health condition because they think he or she is possessed by the Devil or by an evil spirit.

Right to education and training

- ✎ Denying a child with a psychosocial disability access.
- ✎ Charging a person with a mental health condition more for the same vocational training.

Right to health

- ✎ In an emergency service, a nurse refuses to admit a person with a stomachache because he thinks this person has a mental health condition; instead of admitting the person to investigate his or her physical pain, he sends him or her to the psychiatric emergency unit.
- ✎ Forcing a person with a mental health condition to take medications against his or her will (without his or her consent).

Right to work and to be protected from exploitation

- ✎ An employer rejects a candidate with a mental health condition at a job interview.
- ✎ Refusing to pay a person with a mental health condition the same wages as other employees for the same work (equal remuneration).

Civil and political rights

- ✎ Forbidding a person with a mental health condition to vote; denying him or her the right to vote.
- ✎ People with mental health conditions are underrepresented in state institutions.

c) EXAMPLES OF STEREOTYPES AND PREJUDICES

Right to equality and non-discrimination

“Facilitation and accommodation measures for people with disabilities and/or mental health conditions are discriminatory.”

“People with mental health conditions already have the same access to services, information, and/or activities as other citizens.”

Obligation of States to promote the rights of persons with disabilities

“It’s not the role of the state to solve the issue of mental health stigma!”

“It’s pointless to fight mental health prejudice because people with mental health conditions don’t even notice!”

“People with mental health conditions can’t speak for themselves, so there’s no point in including them in awareness campaigns, talks, etc.”

Right to justice and protection

“Someone with a mental health condition can’t handle his or her own money.”

“You can’t trust people with psychosocial, intellectual, or cognitive disabilities to make decisions in all aspects of their lives.”

Right to live independently and to be included in the community

“A ‘psychotic’ person is unable to make decisions, can’t be reasoned with or understood and can’t communicate his or her will and preferences.”

“If someone lives in a care home, a mental health service, or another related service, it’s only logical that all the decisions regarding their care needs should be made by mental health professionals.”

“People with mental health conditions are possessed by evil spirits.”

Right to education and training

“It’s pointless to include a child with a mental health condition at school because they won’t learn anything.”

“People with psychosocial disabilities are unable to learn or to engage in a learning process on a regular basis.”

Right to health

“Decisions regarding mental health treatment and care must be made against the will of the ‘sick person’ because he or she doesn’t even know or understand that he or she needs them.”

“Doctors are the best judges of medical matters and will protect the ‘sick person’ based on what they believe to be his or her best interest.”

Right to work and to be protected from exploitation

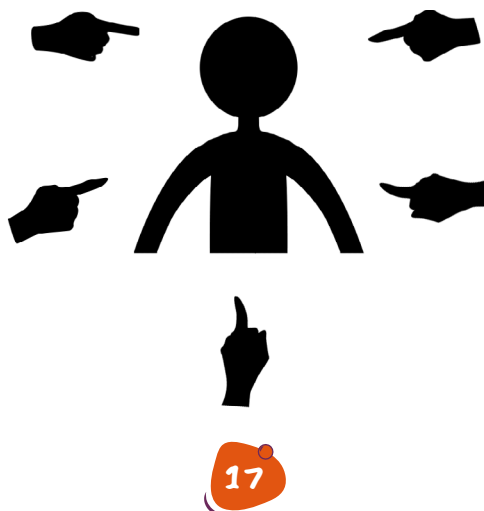
“People with mental health conditions are helpless, they can’t work autonomously or even in a group.”

“People with mental health conditions can’t manage other people because they can’t even manage themselves.”

Civil and political rights

“People with psychosocial disabilities shouldn’t be allowed to vote because they can’t possibly understand what’s best for their community and their country.”

“People with mental health conditions can’t hold public positions or be given responsibilities.”



4) 8 full CRPD articles

Article 5: Equality and non-discrimination

Article 5: Equality and non-discrimination

1. States Parties recognize that all persons are equal before and under the law and are entitled without any discrimination to the equal protection and equal benefit of the law.
2. States Parties shall **prohibit all discrimination** on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds.
3. In order to **promote equality and eliminate discrimination, States Parties shall take all appropriate steps to ensure that reasonable accommodation is provided.**
4. Specific measures which are necessary to accelerate or achieve de facto equality of persons with disabilities **shall not be considered discrimination** under the terms of the present Convention.

Article 12: Equal recognition before the law

1. States Parties reaffirm that persons with disabilities have the right to recognition everywhere as persons before the law.
2. States Parties shall recognize that persons with disabilities **enjoy legal capacity on an equal basis with others in all aspects of life.**
3. States Parties shall take appropriate measures to provide access by persons with disabilities **to the support they may require in exercising their legal capacity.**
4. States Parties shall ensure that all measures that relate to the exercise of legal capacity provide for appropriate and effective safeguards to prevent abuse in accordance with international human rights law. Such safeguards shall ensure that measures relating to the exercise of legal capacity respect the rights, will and preferences of the person, are free of conflict of interest and undue influence, are proportional and tailored to the person's circumstances, apply for the shortest time possible and are subject to regular review by a competent, independent and impartial authority or judicial body. The safeguards shall be proportional to the degree to which such measures affect the person's rights and interests.
5. Subject to the provisions of this article, States Parties shall take all appropriate and effective measures **to ensure the equal right of persons with disabilities to own or inherit property, to control their own financial affairs and to have equal access to bank loans, mortgages and other forms of financial credit,** and shall ensure that persons with disabilities are not arbitrarily deprived of their property.

Article 8: Awareness-raising

1. States Parties undertake to adopt immediate, effective and appropriate measures:
 - (a) **To raise awareness throughout society,** including at the family level, regarding persons with disabilities, and **to foster respect for the rights and dignity** of persons with disabilities;
 - (b) **To combat stereotypes, prejudices and harmful practices** relating to persons with disabilities, including those based on sex and age, in all areas of life;
 - (c) To promote awareness of the capabilities and contributions of persons with disabilities.
2. Measures to this end include:
 - (a) Initiating and maintaining **effective public awareness campaigns** designed:
 - (i) **To nurture receptiveness** to the rights of persons with disabilities;
 - (ii) To promote positive perceptions and greater social awareness towards persons with disabilities;
 - (iii) To promote recognition of the skills, merits and abilities of persons with disabilities, and of their contributions to the workplace and the labour market;
 - (b) Fostering at all levels of the education system, including in all children from an early age, an attitude of respect for the rights of persons with disabilities;
 - (c) Encouraging all organs of **the media to portray persons with disabilities in a manner consistent with the purpose** of the present Convention;
 - (d) Promoting **awareness-training programmes** regarding persons with disabilities and the rights of persons with disabilities.

Article 19: Living independently and being included in the community

States Parties to this Convention recognize **the equal right of all persons with disabilities to live in the community, with choices equal to others**, and shall take **effective and appropriate measures to facilitate** full enjoyment by persons with disabilities of this right and their **full inclusion and participation in the community**, including by ensuring that:

- (a) Persons with disabilities have the opportunity to **choose their place of residence and where and with whom they live** on an equal basis with others and are not obliged to live in a particular living arrangement;
- (b) Persons with disabilities have **access to a range of in-home, residential and other community support services**, including personal assistance necessary to support living and inclusion in the community, and to **prevent isolation or segregation from the community**;
- (c) Community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs.

Article 24: Education

1. States Parties recognize the **right of persons with disabilities to education**. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an **inclusive education system at all levels** and life long learning directed to:

- (a) The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;
- (b) The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;
- (c) **Enabling persons with disabilities to participate effectively in a free society.**

2. In realizing this right, **States Parties shall ensure that:**

- (a) **Persons with disabilities are not excluded** from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;
- (b) Persons with disabilities can **access an inclusive, quality and free primary education**

and secondary education on an equal basis with others **in the communities in which they live**;

- (c) **Reasonable accommodation** of the individual's requirements is provided;
- (d) Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;
- (e) Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

3. States Parties shall enable persons with disabilities to learn life and social development skills to **facilitate their full and equal participation in education and as members of the community**. To this end, States Parties shall take appropriate measures, including:

- (a) **Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring**;
- b) Facilitating the learning of **sign language** and the promotion of the linguistic identity of the deaf community;
- (c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.

4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

5. States Parties shall ensure that persons with disabilities are able to **access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others**. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.

Article 25: Health

States Parties recognize that persons with disabilities have the **right to the enjoyment of the highest attainable standard of health without discrimination** on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall:

- (a) Provide persons with disabilities with **the same range, quality and standard of free or affordable health care and programmes as provided to other persons**, including in the area of sexual and reproductive health and **population-based public health programmes**;
- (b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;

(c) Provide these health services as **close as possible to people's own communities, including in rural areas**;

(d) **Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent** by, inter alia, **raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities** through training and the promulgation of ethical standards for public and private health care;

(e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;

(f) **Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.**

Article 27: Work and employment

1. States Parties recognize the **right of persons with disabilities to work**, on an equal basis with others; this includes **the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible** to persons with disabilities. States Parties shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation, to, inter alia:

- (a) **Prohibit discrimination** on the basis of disability with regard to all matters concerning all forms of employment, including **conditions of recruitment, hiring and employment**, continuance of employment, career advancement and safe and healthy working conditions;
- (b) Protect the rights of persons with disabilities, on an equal basis with others, to **just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment**, and the redress of grievances;
- (c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;
- (d) Enable persons with disabilities to have effective

access to general technical and vocational guidance programmes, placement services and vocational and continuing training;

(e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

(f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one's own business;

(g) **Employ persons with disabilities in the public sector**;

(h) Promote the employment of persons with disabilities **in the private sector** through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

(i) Ensure that **reasonable accommodation** is provided to persons with disabilities in the workplace;

(j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

(k) Promote **vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.**

2. States Parties shall ensure that persons with disabilities are not held in slavery or in servitude, and are **protected, on an equal basis with others, from forced or compulsory labour.**

Article 29: Participation in political and public life

States Parties shall guarantee to persons with disabilities **political rights and the opportunity to enjoy them on an equal basis with others**, and shall undertake to:

(a) Ensure that persons with disabilities **can effectively and fully participate in political and public life** on an equal basis with others, directly or through freely chosen representatives, including the right and **opportunity for persons with disabilities to vote and be elected**, inter alia, by:

(i) Ensuring that **voting procedures, facilities and materials are appropriate, accessible and easy to understand and use**;

(ii) Protecting the right of persons with disabilities to vote by secret ballot in elections and public referendums without intimidation, and to stand for elections, to effectively hold office and perform all public functions at all levels of government, facilitating the use of assistive and new technologies where

appropriate;

(iii) Guaranteeing **the free expression of the will of persons with disabilities as electors** and to this end, where necessary, at their request, allowing assistance in voting by a person of their own choice;

(b) Promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, including:

(i) **Participation in non-governmental organizations and associations concerned with the public and political life of the country**, and in the activities and administration of political parties;

(ii) **Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels.**



Mental health users: you have rights!

These rights stem from the Convention on the Rights of Persons with Disabilities

RIGHT TO EQUALITY AND NON- DISCRIMINATION

Everybody's
equal!
**Discrimination
against people
with mental
health
conditions is
forbidden.**

CIVIL AND POLITICAL RIGHTS

People with
mental health
conditions have
the **right to
express
themselves and
to be heard.**

They can vote, be
elected, and hold
public positions.

OBLIGATION OF STATES TO PROMOTE THE RIGHTS OF PERSONS WITH DISABILITIES

RIGHT TO WORK AND TO BE PROTECTED FROM EXPLOITATION

People with



The State must raise awareness of the rights of people with mental health conditions in order to **fight stereotypes** about them.

Touching Minds, Raising Dignity
2021

mental health conditions have the **right to work and to earn equal wages**.

RIGHT TO JUSTICE AND PROTECTION

People with mental health conditions have rights that **can't be taken away**: they're entitled to support in exercising them and they must to **be protected from abuse**.

RIGHT TO LIVE INDEPENDENTLY AND TO BE INCLUDED IN THE COMMUNITY

People with mental health conditions are **free to make their own decisions** and can't be forced to live somewhere without their consent.

RIGHT TO EDUCATION AND TRAINING

The State must ensure that children and adults living with mental health conditions have **access to education, school, and vocational training**.

RIGHT TO HEALTH

The State must ensure that people with mental health conditions have **access to health services and to quality health care** – whether they live in a city/town or a village.



And a lot more, because we all have equal rights!



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LEBANON – MADAGASCAR – SIERRA LEONE - TOGO

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