



To all Psychiatrists 31 March 2021

Dear Colleagues,

The work in Psychiatry has been and still is connected with the use of involuntary measures. Some of them are considered obsolete nowadays, some are under scrutiny and others must still be deemed as necessary to protect patients or the people around them.

This critical discussion has been picked up by the Council of Europe (CoE), which has decided to collect examples of voluntary measures that can help to avoid involuntary measures. The Council of Europe has asked for examples of such voluntary measures in order to share best practices and ideas widely.

We would like to ask you to provide any experience you may have of such voluntary measures. This would be a good sign showing the willingness and preparedness of us as physicians to make a difference and to guard the dignity of our patients even under difficult medical circumstances.

Please find attached a short description of the <u>CoE approach</u> and a questionnaire, both in English and French.

The CoE will collect examples until end of May 2021 (31 May2021).

When responding to the CoE <u>DGI-CDDH-Bioethics@coe.int</u>, <u>katrin.uerpmann@coe.int</u> we would appreciate you sending a copy to: secretariat@wma.net

Sincerely,

Dr Afzal Javed President

World Psychiatric Association

Dr David O. Barbe President

World Medical Association

Attachments:

- Coercion statement.pdf (Implementing Alternatives to Coercion: A Key Component of Improving Mental Health Care)
- INF(2020)5 concept note Compendium of good practices in mental health care E
- INF(2020)5 concept note Compendium of good practices in mental health care F
- INF(2020)5 Addendum concept note Compendium of good practices in mental health care E
- INF(2020)5 Addendum concept note Compendium of good practices in mental health care F