

## Good Governance: Protecting the Most Vulnerable

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In the last two decades the sterile rhetorical confrontations of the Cold War era regarding the relative importance of civil and political rights and economic, social and cultural rights have gradually given way to a more mature recognition that all rights are equally important.<sup>1</sup> There has also been a growing acceptance that human rights are an integral element of “good governance” and that good governance is essential for sustainable development.

However, the increasing recognition of the necessity for sustainable development still tends to focus disproportionately on economic indicators—with less than adequate emphasis on the necessity for governments to ensure that the rights of the most vulnerable and marginalized within their jurisdiction are appropriately respected and properly protected.

Among the most vulnerable groups in virtually every country are those affected by mental illness. These people, who have the same human rights as the rest of us, are frequently subjected to discrimination, marginalization and even victimization. It is both striking and surprising that these violations are extremely common in countries which are among the richest in the world—as well as among the poorest. My own country, Australia, is one of the richest. But

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1 Vienna Declaration and Programme of Action (VDPA) Adopted by the World Conference on Human Rights in Vienna on 25 June 1993. Both China and Australia were among the 171 States which adopted the VDPA by consensus, agreeing that: “All Human Rights are universal, indivisible and interdependent and interrelated. The International community must treat human rights globally in a fair and equal manner, on the same footing, and with the same emphasis. While the significance of national and regional particularities and various historical, cultural and religious backgrounds must be borne in mind, it is the duty of States, regardless of their political, economic and cultural systems, to promote and protect all human rights and freedoms.” Part 1 Para 5 U.N. Doc A/CONF.157/23.

some years ago when we conducted a comprehensive National Inquiry on Human Rights and Mental Illness,<sup>2</sup> we uncovered the most appalling situation. The serious violations of human rights, which emerged from the evidence in every State and Territory, clearly established:

- That notwithstanding the existence of anti-discrimination legislation in most jurisdictions, people with a mental illness were routinely discriminated against, in both the public and the private sector.
- That legislation relating to Australians affected by mental illness was generally outdated, and that law reform in this area invariably received a low priority.
- That our court system was generally inaccessible to individuals affected by psychiatric disabilities and that while our legal system protected their human rights in theory, it was an abysmal failure in reality.
- That this fundamental failure of law and policy was largely being ignored by our Parliaments, policy makers and the legal profession.
- That this situation was only possible because of widespread public ignorance concerning the nature and prevalence of mental illness or psychiatric disability.
- That this public ignorance generated irrational fear—which was a fundamental cause of the discrimination, marginalization and even victimization of those with a mental illness.
- That this discrimination was so entrenched in public and official attitudes that it was both “systemic” and “systematic”—and therefore required sweeping reforms and a major injection of resources.
- That it was precisely those who were most vulnerable and disadvantaged—people with dual or multiple disabilities—for whom there were no programmes—or for whom the existing programmes were grossly inadequate.
- That the allocation of such limited resources as were available for the mentally ill clearly discriminated against those living in rural and regional areas—and that in these areas our youth suicide rate was 300% higher than in our major cities and mentally ill elderly people frequently received no appropriate care at all.
- That our doctors were generally very poorly trained in the field of mental illness—and that our health system routinely discriminated against people with a psychiatric disability.

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2 *Human Rights and Mental Illness: Report of the National Inquiry into the Human Rights of People with Mental Illness by the Human Rights and Equal Opportunity Commission* (Canberra: Australian Government Publishing Service, 1993).