



Using Human Rights in Recovery



A Joint Guide by the British
Institute of Human Rights and the
Scottish Recovery Consortium



This guide is for information purposes only. It is not intended, and should not be used as, legal advice or guidance. The law referred to in this guide may have changed since it was published.

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About this guide



This guide has been co-developed by the British Institute of Human Rights (BIHR) and the Scottish Recovery Consortium (SRC).



BIHR is a UK-wide charity working with people, communities, and public bodies to make positive change using human rights.



Scottish Recovery Consortium supports, represents and connects recovery across Scotland. They achieve this by working with recovery in all its forms – from grassroots to government, from individuals to international organisations, valuing lived and living experience throughout.

This guide follows on from the Rights in Recovery Leadership Programme which was co-delivered by BIHR and SRC from 2022 to 2024. This programme aimed to support and empower recovery advocates in Scotland to use human rights in their work. To help others in similar roles to do the same, this guide has been designed for people accessing, or trying to access, recovery services, as well as their loved ones and supporters, to know and speak up for human rights every day.

[You can read about the impact of the 2023-24 programme here.](#)

The stories and examples come from legal cases, and from members of recovery organisations that have worked with SRC which have been anonymised. Although the examples are from Scotland, the guide focuses on the Human Rights Act which is a UK law, and so it is intended to have relevance for recovery communities UK-wide.

BIHR and SRC offer practical support to organisations working on human rights and recovery. For more information about what we do, you can visit our websites:

bihr.org.uk

scottishrecoveryconsortium.org

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Why human rights matter in recovery

Human rights are basic freedoms and protections that we are all entitled to, simply because we are human. The HRA offers important legal safeguards for people whose lives are affected by substance use, who are at high risk of being treated unfairly and receiving a lower standard of care in their journey to recovery.



A human rights approach puts the person's protected rights at the centre of policy and practice, and offers a framework for decision-making that can transform the values of dignity, respect, fairness, and control over our lives, into a reality.

“

“The Human Rights Act 1998 (HRA) offers essential protection for people whose lives have been, or continue to be, affected by alcohol and drugs. It offers the fundamental protections that are needed for people and their loved ones to receive appropriate standards of care, safety and support.

Human rights are the basic elements and protections that all humans require to live in safety and with dignity. They are not luxuries, or extras as some in power would like to have us believe.”

Tom Bennett, Rights in Recovery Officer at SRC

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Read Tom Bennett from SRC's blog on why our Human Rights Act matters to people in recovery.

An introduction to rights in recovery

What are human rights?



Human rights are the freedoms and protections we have that help us to be treated with dignity, respect and fairness, having a say over our lives and participating in decisions about our care, treatment, and recovery.

Human rights are **universal**, which means they are for everyone, no matter who we are.

Importantly, human rights are more than just values. They are the law, and the main law which protects our human rights in the UK is the Human Rights Act (HRA). This is a rulebook for how we can be expected to be treated by the Government, including public services and their staff. We know that sometimes human rights are not always respected, protected, or fulfilled in reality, but having these legal protections helps us to know what should be happening, and to ensure accountability if things go wrong.

[You can read more about the Human Rights Act here.](#)

How does the Human Rights Act work?



1. It puts a legal duty on public bodies and their staff to respect, protect and fulfil human rights across their actions, decisions, policies, services, etc.



2. Other laws and policies should be applied in a way that respects people's human rights, as far as possible.



3. If 1 and 2 are not complied with, people can now bring legal cases in UK courts and tribunals.

What are public authorities?

There are two types of bodies which have legal duties to respect, protect and fulfil human rights. We sometimes refer to these as **duty-bearers**.

Core public authorities are organisations you would traditionally think of as public services, i.e. government-run services. This includes NHS services, local councils, police and emergency services, as well as regulatory bodies, courts and tribunals.

There are also **hybrid or functional public bodies**. This includes private organisations, charities, or not-for-profit organisations which are delivering 'public functions'. Other factors which can indicate whether a public function is taking place, is if that function is funded by a core public authority, or if that function is regulated.

The legal duties can be shared, but they can't be passed along to another agency. For example, if a local authority contracts out their social housing provision to a private body, both bodies will have legal duties under the HRA.



What are the legal duties?

The legal duty on public bodies (and bodies that are delivering a public function) under the HRA has three parts:



RESPECT: Respecting our human rights means not restricting them or trying to breach them. Staff should avoid interfering with people's rights unless it is necessary.



PROTECT: Protecting our human rights means stepping in and taking positive action to protect people from harm. This can include protecting a person from harm by another person such as a family member. This is sometimes called safeguarding.



FULFIL: Fulfilling people's human rights means investigating when things have gone wrong and trying to stop it from happening again.



Fiona's Story

Fiona was on a methadone prescription which was dispensed by her local chemist. She went to the chemist to buy something for a family member, but when she was there another customer swept some items into a bag and ran off. Fiona had no role to play in the theft and was not charged by the police. However, the chemist decided to ban Fiona from ever entering the chemist again.

Fiona has now been in recovery for five years and has been abstinent from all substances for three years. She works as a senior support worker in a recovery community, however she is still banned from the local chemist which continues to be a barrier in her personal and professional life.

The chemist may be privately owned, but could still be seen as performing a public function by dispensing medication on behalf of the NHS. If the staff working there are also employed by the NHS, they would also be considered public officials. This means the chemist could have legal duties to respect, protect and fulfil Fiona's human rights. If Fiona is being treated worse due to her history of substance use, this could put her right to be free from discrimination (Article 14) at risk, as well as her right to respect for private life (Article 8), as her ability to access this service has been restricted in a way which may not be proportionate.

How does the Human Rights Act work with other laws?



The HRA operates as a foundation law. This means that when duty bearers make decisions using other laws, policies and guidance, they should apply them in a way that supports human rights as much as possible.

What rights do we have?

There are 16 rights which are protected by the HRA.



Absolute and non-absolute rights

Not all of our rights work in the same way. Some of our rights are absolute, and some are non-absolute.



Absolute rights must never be restricted or interfered with under any circumstances. It does not matter what reason is given for this – any restriction is unlawful.



Non-absolute rights can sometimes be restricted, but duty-bearers must follow a 3-part test to ensure their decision is rights-respecting:

1. **Lawful** – Is there a law which allows that restriction?
2. **Legitimate aim** – Is there a legitimate reason to restrict this right? Usually this is about protecting the person whose rights are being restricted from harm, or protecting other people from harm.
3. **Proportionate** – Have other things been thought about, and the least restrictive option taken to meet the legitimate aim?

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Human rights across the UK

The HRA was introduced in 1998. It brings the rights in the European Convention on Human Rights (ECHR) into domestic law here in the UK, and an important aim of the HRA was to create a **culture of respect for human rights**.

The UK Parliament's Joint Committee on Human Rights said:

"A human rights culture is one that fosters basic respect for human rights and creates a climate in which such respect becomes **an integral part of our way of life and a reference point for our dealing with public authorities** ... in which all our institutional policies and practices are influenced by these ideas ... The building of a human rights culture ... [depends] not just on courts awarding remedies for violations of individual's rights, but on **decision-makers in all public services internalising the requirements of human rights law**, integrating those standards into their policy and decision-making processes, and ensuring that **the delivery of public services in all fields is fully informed by human rights considerations.**"

The Human Rights Act and devolution



The rights in the HRA are part of the devolution arrangements in Northern Ireland, Scotland, and Wales. For example, the Scotland Act incorporates the HRA and the ECHR into Scots law.

Each devolved nation has a range of issues for which it is responsible. This can include health and social services, housing services and local government services. Many of these areas impact on our human rights.

The Human Rights Act means that people living in devolved nations can bring a legal case to their local court to be reviewed if they have an issue with their rights. Because the UK is signed up to the European Convention of Human Rights, legal cases about human rights can also be taken to the European Court of Human Rights which is in Strasbourg, France. This only happens if you have tried all your legal options in the UK first.

There are extra legal protections for human rights in Scotland and other devolved nations. If laws are made by devolved parliaments or assemblies which do not support human rights, these laws can be overturned by a court. This means the law would be disapplied, and it would not be the law anymore.



Spotlight on Scotland: Building Rights Protections

The HRA is a crucial building block for increasing rights protections in Scotland. In recent years, there has been movement in Scotland to further embed human rights protections by supporting implementation and by bringing other international treaties and agreements into Scots Law. This has been happening separately from the UK Government, as is allowed by devolution arrangements.

The National Collaborative was created as part of Scottish Government's National Mission to reduce drug-related deaths. Its objective is to 'to integrate human rights into drug and alcohol policy development, implementation, monitoring and evaluation.'

The National Collaborative is led by Professor Alan Miller, an academic in human rights law, and has a Change Team made up of people with personal and professional lived experience of drug and alcohol problems. The National Collaborative has produced several publications aimed to shape and facilitate the implementation of a human rights-based approach in Scotland.

[You can read more about the National Collaborative on the Scottish Government's website.](#)

Focus on choice, relationships, wellbeing, community, privacy and home (Article 8, HRA)

Why does the right to respect for private and family life, home and correspondence matter for people in recovery?



Our right to respect for private and family life, home and correspondence is protected by Article 8 in the HRA. Each part of this right protects many different things that are important in the daily lives of people whose lives are affected by substance use.

The right to private life protects:

- Wellbeing – our physical and mental health
- Autonomy – involving people in decisions about their own body and life
- Participation in our community
- Relationships with others
- Confidentiality

The right to family life protects:

- Being able to develop ordinary family relationships – whatever ‘family’ means to you
- Having ongoing contact if you are split up from family
- Also choosing not to have contact with family

The right to home protects:

- Enjoyment of our current home. This is not a right to housing, but is about enjoying the home you have at the moment.

The right to correspondence protects:

- Having uncensored communication with others
- Letters and modern communications (texts, emails, phone calls)

This right is non-absolute, which means that any restriction of this right must meet be:

1. **Lawful** – Is there a law which allows that restriction?
2. **Legitimate aim** – Is there a legitimate reason to restrict this right? Usually this is about protecting the person whose rights are being restricted from harm, or protecting other people from harm.
3. **Proportionate** – Have other things been thought about, and the least restrictive option taken to meet the legitimate aim?



When can this right be relevant in recovery?

- If someone's mental or physical health is at risk.
- If a person is not being involved in decisions that affect their rights, such as where they should live or what treatment they should receive.
- If a public official limits someone's contact with their family without a good reason, or in an overly restrictive way.
- If someone's treatment is delivered in a way which harms other aspects of their life, such as their ability to work or take part in their community.
- If police or another public official enters your home without your permission.
- If a public official shares someone's medical records without consent or they share more information than is needed.



Article 8 and the MAT Standards in Scotland

The MAT Standards were introduced in 2021 as part of the work of the Drug Death Task Force (DDTF) which had been set up in response to the significant increase in drug-related death figures in Scotland which was declared to be a public health crisis by then First Minister Nicola Sturgeon. The MAT Standards implementation process began in 2021 and was scheduled to be fully implemented by 2024.

The MAT Standards aim to transform the way treatment is accessed and provided, making it easier and more attractive by allowing people to access treatment more quickly and to participate more in decisions around treatment planning.

The right to respect for private and family life, home and correspondence (Article 8) protects so many things that are important to us every day, and it comes up in recovery contexts regularly. The ideas behind this right are threaded through the MAT Standards, which aim to promote choice, prevent harm, and provide access to holistic support for housing, welfare and income needs, mental health care, and independent advocacy.

[Click here to read more about the MAT Standards.](#)



Tips for speaking about this right

- * This is a non-absolute right – it can sometimes be restricted in certain circumstances.
- * If you are worried about this right, you can ask how a public official's decisions or actions are lawful, legitimate, and proportionate.
- * This right protects many of the things that make us who we are: our choices, our relationships, our community, our home.
- * Any time someone is being prevented from making a decision about their own lives by a public body, you can think about whether this right is being respected, protected and fulfilled.
- * This right protects our mental and physical wellbeing. If the situation changes and the impact of a decision on someone becomes more serious, it may be important to think about the right to be free from inhuman and degrading treatment (Article 3, HRA) as well. This is an absolute right, so you should raise this immediately if you think it is at risk. You can find more information about this right in Chapter 4 of this handbook.

[Read more about our right to respect for private and family life, home and correspondence \(Article 8, HRA\) on BIHR's website.](#)

Focus on safety from serious harm (Article 3, HRA)

Why does the right to be free from inhuman and degrading treatment matter for people in recovery?



Our right to be free from inhuman and degrading treatment is protected by Article 3 in the HRA. This is an absolute right, which means it can never be lawfully restricted.

This right protects against treatment which:

- Makes a person feel very frightened or worried
- Causes someone a lot of pain or humiliation
- Makes them feel worthless or hopeless

It must be looked at on a **person-centred basis** – considering the impact of factors like age, sex, disability, or health status. The same decision or policy might have a worse impact on some people, for example because they have a history of substance use.



When can this right be relevant in recovery?

- If a person is experiencing abuse or neglect, and public services know about this, and they do nothing to step in and protect them from serious harm.
- If someone is living in conditions which cause them to feel humiliated and a public body is aware and they do nothing to step in and improve the conditions.
- If someone is experiencing serious harm as a result of not receiving appropriate care and support.
- If someone is street homeless, destitute, and there are exceptional personal factors (for example, you are pregnant).
- If the police do not carry out a proper inquiry after this right has been risked.



Robert's Story

In 2001, Robert was being held in HMP Barlinnie on remand, having been charged with assault, robbery, abduction, and attempted murder.

Due to overcrowding, it was common for two prisoners to share a single occupancy cell. Robert's cell was cramped, poorly ventilated, artificially lit, and had no running water or flushable toilet. Prisoners urinated in bottles and defecated in chamber pots behind a small screen in their cells, and were allowed out 4 times a day to use the toilet facilities. A buzzer could be pressed to request toilet access, but due to low staffing levels these requests were often denied.

Robert felt shame, disgust, loss of self-esteem, low mood, anxiety, tension and anger, and he had a flare-up of eczema during this time which then became infected.

Robert applied to the court about his human rights one week after he was detained at HMP Barlinnie, arguing that the conditions he was being held in were inhuman and degrading. Around 40 days later, the case reached a judge, an order was made to transfer Robert to another part of the prison.

Other prisoners and various experts gave evidence, and in 2004 the courts found that Scottish Ministers had breached Robert's right to be free from inhuman and degrading treatment (Article 3) and his right to private life (Article 8). Robert was awarded damages of £2,450 for the psychological and physical impact on the conditions had had on him.

Judicial Review of Robert Napier v The Scottish Ministers (2004)



Tips for speaking about this right

- * This is an absolute right – if you are worried that it is at risk, raise the issue immediately.
- * We are all different. What is inhuman and degrading differs from person to person.
- * Restrictions which harm someone's recovery and which have a very serious mental or physical impact on a person are highly likely to impact this right.
- * Things can change quickly. An action or situation may not be inhuman and degrading to begin with, but it could become so over time – ask for a review.

Read more about the right to be free from inhuman and degrading treatment on [BIHR's website.](#)

Focus on equality and discrimination (Article 14, HRA)

Why does the right to be free from discrimination matter for people in recovery?



Our right to be free from discrimination is protected by Article 14 in the HRA. The law says:

“The enjoyment of the rights and freedoms set forth in this Convention shall be secured without discrimination on any ground such as sex, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth or other status.”

This means that we must all be able to enjoy our human rights fairly and without discrimination. Because this is about the rest of our rights, this is not a stand-alone right. It must be raised alongside one of the other 15 rights in the HRA – sometimes we call it a **“piggy-back” right**. You do not need to prove that the other right has been breached, just that it is relevant.

This right prohibits discrimination for all the reasons set out the HRA above, as well as ‘other status’. This means discrimination for **any reason, or combined reasons**, is unlawful. This could include someone’s use of alcohol or drugs.

What is discrimination?

Discrimination is always unlawful. This could involve:

- Being treated worse than others in the same situation as you, based on something about yourself.
- Not being treated differently when you are in a very different situation to others, or applying rules which have a worse impact on you. Blanket policies that apply the same way to everyone without considering people’s individual circumstances are rarely rights-respecting.

Treating someone differently is not always discrimination. If a duty-bearer can show that their decision to treat someone differently is **objectively and reasonably justified**, then this would not be unlawful. Something is objectively and reasonably justified if it is **for a legitimate aim and it is the least restrictive option**.

For example, an NHS residential rehabilitation centre which has been set up for women is likely to be objectively and reasonably justified, as this is a therapeutic environment which caters specifically to the needs of women recovering from addiction.



When can this right be relevant in recovery?

- If you are being bullied or harassed.
- If you receive a lower standard of public service because of your age, mental health, disability, alcohol or drug use, or other factors.
- If you are denied treatment for a physical health problem because of a mental health or capacity issue.
- If a duty-bearer assumes what kind of life you should live based on your characteristics or experience, without involving you.
- If you are not given accessible information about your rights in a way that you can understand.

The Equality Act

The Equality Act is another law which protects against discrimination. It was introduced in 2010, replacing a range of anti-discrimination laws with a single Act across Scotland, England and Wales. The Equality Act puts legal duties on both public and private bodies, including employers, shops and restaurants.

The Equality Act prohibits discrimination for 9 specific reasons, called 'protected characteristics'. These are:

- | | |
|----------------------------------|----------------------|
| • Age | • Race |
| • Disability | • Religion or belief |
| • Gender reassignment | • Sex |
| • Marriage and civil partnership | • Sexual orientation |
| • Pregnancy and maternity | |



The Equality Act and alcohol dependence

Other mental health conditions are included in the definition of disability for the purposes of the Act but “addiction to alcohol itself is expressly excluded from the scope of the definition of disability in the Act”.

The University of Bedfordshire conducted a study where they created a citizen’s jury on whether alcohol dependence should be included as a disability in the Equality Act. 11 out of 15 jurors did not think this should be excluded from the protections given to us by the Equality Act.

SRC has spoken out about the need for this exclusion from Equality Act to be removed, so that people whose lives are affected by substance use will be afforded the legal protections they need and deserve.

Which law should you use?

The Human Rights Act and the Equality Act are complementary – they work together and strengthen each other. You can raise one, the other, or both depending on the situation where you think discrimination is occurring.

The Human Rights Act

Only applies to public bodies (and bodies delivering a public function).

Prohibits discrimination for any reason, including substance use.

Has to “piggyback” onto another right in the HRA.

The Equality Act

Applies to public bodies and private bodies.

Prohibits discrimination for 9 specific reasons, and alcohol dependence is specifically excluded.

Offers standalone protections against discrimination.

Stigma

Stigma involves labelling people, and having negative attitudes, beliefs or behaviours towards a group. This not only marginalises people with addictions, but disempowers them, and creates additional barriers for individuals to deal with and further diminishing their opportunities to claim their rights.

“Societal and institutional stigma is now recognised as being an important barrier that stands in the way of reducing drug and alcohol harms and the number of families tragically losing their loved ones. A rights-based approach, built upon the strong and essential foundations of the HRA, reduces stigma, and helps to reduce the impact of those that hold stigmatised beliefs and carry out their duties in a discriminatory and illegal way.”

Tom Bennett, Rights in Recovery Officer at SRC

For example, in some chemists there are policies in place which can lead to the stigmatisation of people who access methadone. They might be asked to use a different entrance to everyone else, or they might be restricted to entering one at a time meaning people have to wait outside. This can draw attention to the fact that they are there to access methadone, and may lead to feelings of disempowerment and even put their recovery at risk.

[Read the report by the Scottish Recovery Consortium and Scottish Families Affected by Alcohol and Drugs on stigma about addiction and recovery in the media.](#)



Tips for speaking about this right

- * This is a “piggy-back” right – it can be raised in conjunction with any of the other 15 rights protected by the HRA. Remember – you don’t have to show that the other right has been breached, just that it is relevant.
- * If someone is being treated differently and you are worried about discrimination, you can ask a public official how the differential treatment was objectively and reasonably justified.
- * The Human Rights Act and the Equality Act both prohibit discrimination in different ways – you can use one, the other, or both depending on the situation.

[Read more about the right to be free from discrimination on BIHR’s website.](#)



David's Story

David was in custody in a Scottish Prison. Before being in prison, he had been attending recovery communities, and he wished to reduce his methadone, transfer to buprenorphine, and lastly finish his detox with Buvidal. This treatment plan was agreed with his addiction support worker.

Unfortunately, David's addiction support worker was unexpectedly absent from work and was replaced by someone else. The new worker disagreed with the reduction and treatment plan, and refused David access to buprenorphine. David was upset by this change, especially because he had not been given the chance to take part in discussions about his own recovery.

David had some knowledge of the Medication Assisted Treatment (MAT) Standards, and had a copy of them in his cell. He used this information to challenge the way his treatment plan had been changed without his involvement. However, the addiction support worker then stopped visiting David and stopped his access to addiction support altogether.

For four months, David had no access to addiction support and was only provided his medication by medical staff. He described these four months as the most stressful, difficult and upsetting period of his time in custody, which presented a high risk of relapse due to the psychological difficulty he endured.

This story raises a number of questions around David's human rights, as he was in the custody of the Scottish Prison Service who have legal duties under the Human Rights Act. By not being involved in decisions about his treatment, his right to respect for private life (Article 8) was relevant. This right also comes up after his addiction support is withdrawn as this significantly impacts on his mental wellbeing. It is possible that David's right to be free from inhuman and degrading treatment (Article 3) was also relevant here. It seems as though David was punished for speaking up which then caused him intense psychological distress, which if severe enough could be considered serious harm under this right. There are also questions about whether discrimination (Article 14) was a factor. Would support have been withdrawn if David had been speaking up about a different health condition other than addiction?

Following this, David was transferred to a different prison, where he was able to discuss his treatment and revert back to his original plan for recovery. David is now abstinent from substances and employed as a recovery worker, supporting others on their recovery journey.

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Other rights in recovery (Articles 2, 5 and 6, HRA)

The right to life (Article 2, HRA)



This right means the public officials must not deliberately take away your life, they must take reasonable steps to protect life when they know (or should know) that it's at real and immediate risk, and they should investigate if they have been involved in a death. This is an absolute right.

This right could be relevant in recovery if healthcare professionals refuse to give life-saving treatment to a person because of discriminatory attitudes towards their substance use.

[Read more about the right to life on BIHR's website.](#)

The right to liberty (Article 5, HRA)



This right prevents extreme restrictions being placed on people's freedom of movement, except in certain circumstances. This is a non-absolute right, which means it can sometimes be limited but only if this is lawful, legitimate, and proportionate.

This right could be relevant in recovery where a person has restrictions placed on their movement as part of their care and treatment arrangements.

[Read more about the right to liberty on BIHR's website.](#)

The right to a fair trial (Article 6, HRA)



This right may be relevant when someone is charged with a criminal offence, or if a public authority (such as social services) is making a decision that has an impact on someone's rights. This is an absolute right.

This right could be relevant in recovery if a person was not informed promptly, in a language they understand, in detail, what they have been accused of, or what decisions have been made by a public authority that affect their rights.

[Read more about the right to a fair trial on BIHR's website.](#)

The Human Rights Act legal duty means that in everyday situations you can:



Speak up because everyone has human rights which should be respected, protected and fulfilled.



Talk to services about whether they are meeting their legal duty to respect and protect human rights.



Work with services to find better solutions without the need to go to court or use a lawyer.

This section will provide some tips and tools to help you raise a human rights issue, and hopefully secure positive change for people in recovery who are interacting with public services. Remember, human rights are not a magic wand that will immediately resolve every issue, but having the language to hold public bodies to account in line with their legal duties under the Human Rights Act can be effective in asking for reconsideration of a decision.



Top tips for raising a human rights issue

- * Record the impact that the decision is having on you, or on the person that you support. Having evidence of how the actions of a public body are affecting you can be helpful when asking for a different decision.
- * Identify all the human rights that are involved. For each one, think about whether they are absolute or non-absolute, and what changes could be made to support human rights better.
- * Think about the response you might get and plan ahead. Can you suggest alternatives or come up with a compromise?
- * Don't be afraid to use the language of human rights law. Human rights are not just values or an optional add-on for public services, they have legal duties to respect, protect and fulfil them.
- * **Remember, if the situation is urgent, raise the issue immediately!**



Eddie's Story

Eddie had been on a methadone prescription for seven years and was on a full therapeutic dose which was dispensed daily. Eddie was subject to an Exclusion Order which prohibited him from visiting the town centre. Whilst experiencing withdrawals, Eddie attempted to get his prescription from a chemist in the town centre, breaching his Exclusion Order. He was arrested, taken to the police station, and held in a custody suite. Eddie was refused medical treatment because he was using abusive language.

When a local recovery worker visited Eddie to provide lived experience support, Eddie had already been denied medical attention for 72 hours, and he was in severe physical discomfort from opiate withdrawals and psychological distress from being denied essential treatment as a form of punishment.

The recovery worker was in the process of completing a human rights and recovery programme run by BIHR and SRC. Because he knew more about human rights and the HRA legal duties on public bodies, including the police, he had the confidence to raise Eddie's right to be free from inhuman and degrading treatment (Article 3) to challenge the lack of appropriate medical care and highlight concerns about the severe impact on his physical and mental health. This brought about an immediate change to the situation – Eddie was seen by a doctor who immediately dispensed methadone, taking Eddie out of his withdrawals.

Taking steps to raise a human rights issue

STEP 1: IDENTIFY THE ISSUE

Identify if there are any human rights at risk and if so which ones.

There may be just one right involved or a number of rights. For each one think about whether this is an absolute or non-absolute right.

IF IT'S NOT URGENT...



IF IT'S URGENT...

Take immediate action.

STEP 2: RAISE THE ISSUE INFORMALLY – TALK TO A PUBLIC OFFICIAL

IF THEY DON'T ACCEPT THE COMPLAINT...



IF THEY ACCEPT THE COMPLAINT...

work together to resolve the issue.

STEP 3: RAISE THE ISSUE FORMALLY IN WRITING

You could do this by letter or email. The service provider should give you a written reply setting out their response to your concerns.

IF THEY DON'T ACCEPT THE COMPLAINT...



IF THEY ACCEPT THE COMPLAINT...

work together to resolve the issue.

STEP 4: STEP UP YOUR ACTION

You could send a follow-up letter or email, ask for a meeting, warn of more serious action, or reach out to someone more senior.



STEP 5: TAKE FURTHER ACTION, SUCH AS:

You could follow the organisation's internal complaint's procedure, contact a regulator and ombudsman, or seek legal advice about bringing a human rights legal case.



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For suggestions on where to get further support please visit www.bihar.org.uk/help.

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