Advocacy Toolkit

Protecting Rights Protecting Mental Health

February 2026

Wayahead®

Being Mental Health Consumers

Mental Health Carers NSW

Acknowledgement of Country

We acknowledge the traditional custodians of various countries across New South Wales. We pay our respects to Elders past, present and emerging. We acknowledge land was never ceded, and was, is, and always will be Aboriginal land. We value your holistic management of country over the millennia and realise that Indigenous knowledge systems have much to teach us about how we thrive as a society.

Recognition of Lived Experience

We value all people with lived experience of mental health challenges, especially those from intersectional backgrounds whose experiences remind us that we need a mental health system for all. We stand alongside you, in your strength and courage, as driving forces in the work we do. Your voice will always matter.

Copyright information

First published in 2026 by BEING – Mental Health Consumers
Level 6, 201 Kent St, Sydney, New South Wales, 2000
Email: info@being.org.au
Phone: 1300 234 640
URL: www.being.org.au

Typeset in Calibri 11, 16 and 21.5 pt
© BEING – Mental Health Consumers 2026

The moral rights of the authors have been asserted
National Library of Australia Cataloguing-in-Publication data:

Publisher(s): BEING – Mental Health Consumers, Mental Health Carers NSW and Wayahead
Author(s) Giancarlo de Vera
Title: "*Advocacy Toolkit: Promoting Rights, Protecting Mental Health*"

All rights reserved. Except as permitted with the *Australian Copyright Act 1968* (for example, a fair dealing for the purposes of study, research, criticism or review), no part of this book may be reproduced, stored in a retrieval system, communication or transmitted in any form or by any means without prior written permission. All inquiries should be made to the publisher at the address above.

About us

This guide has been developed in partnership with **BEING – Mental Health Consumers**, **Mental Health Carers NSW** and **Wayahead**, in support of the Human Rights Act for NSW campaign.

Being – Mental Health Consumers

BEING – Mental Health consumers is the NSW peak body founded in 1993 that represents mental health consumers across NSW. BEING is independent and 100% of our staff and board are current mental health consumers and have lived/living experiences of mental health challenges, and as the peak body, provides systemic advocacy to realise the vision is for all mental health decisions in NSW to be decided in active partnership with people who have lived experience.

BEING is a foundational member of the newly formed national peak organisation representing mental health consumers across Australia, the National Mental Health Consumer Alliance, which brings all the state and territory mental health consumers organisations together, alongside Australia's only First Nations-led self-determined organisation, the Indigenous Australian Lived Experience Centre.

Mental Health Carers NSW

Mental Health Carers NSW ('MHCN', formerly ARAFMI NSW) is a non-government organisation founded in 1974 by Margaret Lukes. MHCN is the peak body for mental health families and carers in NSW, engaging in systemic advocacy to reflect the voices and needs of carers, to drive change in the mental health system.

MHCN builds capacity through training programs for both carers and service providers, facilitates events, and produces vital resources. Engagement is driven through the Mental Health Carer Advocacy Network, MHCN's core membership program.

As a member of Mental Health Carers Australia—the world's first national carer peak body—MHCN collaborates with representatives from the Indigenous Australian Lived Experience Centre to ensure inclusive representation. Through education and advocacy, MHCN empowers those supporting people with mental health challenges to achieve a more equitable system.

The Mental Health Association of NSW (Wayahead)

The Mental Health Association of NSW (Wayahead) has been at the forefront of mental health promotion, early intervention, and prevention for 94 years. By challenging stereotypes and encouraging help-seeking behaviour, Wayahead ensures individuals receive essential support through various community-focused initiatives.

Wayahead coordinates major events like NSW Mental Health Month and facilitates Anxiety Support Groups that provide safe, supportive environments for regional and rural communities. To help people navigate a complex system, Wayahead also offers a comprehensive service directory and dedicated phone lines. Their Small Steps program provides early intervention by educating parents and teachers on childhood anxiety, while the Sharespace network fosters workplace wellbeing through collaborative peer-to-peer support. Together, these programs break down barriers and promote positive attitudes toward mental health across the state.

With over 175 years of collective lived experience, our three organisations support the Human Rights Act for NSW Alliance because of our collective lived experience of the harmful consequences and impacts of when the human rights of mental health consumers are violated. Visit the Human Rights Act for NSW Alliance website to find out more www.humanrightsfornsw.org.

A Human Rights Act for NSW

The structural failures of the NSW mental health system are well known. While essential clinical services provide critical mental health support, they are not designed to address the root causes of mental health challenges.

Why this matters for mental health in NSW

These underlying causes—including housing and economic insecurity, loneliness and social isolation, and the denial of fundamental human rights to dignity, making choices and connecting with community—are social and systemic in nature, falling outside the scope of clinical care.

This mismatch between the design of the mental health system and addressing the root causes of mental health challenges creates a cycle of unmet need—and mental health consumers and their families, kin and carers are stuck in the middle. Increasing investment in clinical access, though necessary, inadvertently creates and reveals a deeper crisis: as more people enter the system, the profound gaps in addressing social determinants become glaringly apparent. Simply expanding a clinically focused system is not a solution; it can exacerbate strain on an already stretched workforce and, without integration, fail to see the whole person.

The 2025 pay dispute between NSW public psychiatrists and the NSW Government was a symptom of this deeper dysfunction. It highlighted a system under unsustainable pressure, one not designed to fulfill the state's obligations to ensure the people of NSW have the highest attainable level of health and mental healthcare.

NSW needs a fundamental reset: The people of NSW deserve a world-class mental health system.

A system that truly **respects, protects, and fulfills human rights** must directly address the social determinants of mental health. A Human Rights Act for NSW offers this reset—and gives power to the people to have their rights protected.

While the most socially disadvantaged bear the heaviest burden of the status quo being maintained, every person experiencing mental health challenges is entitled to person-centred comprehensive, integrated supports. Mental health consumers deserve to be seen and treated as human, and more than their diagnoses. Our care should support dignity, and a pathway to a life anchored in choice, stability, connection, and respect for our inherent rights – so we can thrive in lives of our own making.

A converging moment for change

The urgency for a Human Rights Act has never been clearer, and the conditions for meaningful reform and change are finally aligning.

For decades, tens of thousands of recommendations have been made to fix a system that remains overwhelmingly crisis driven. In 2025, public psychiatrists took historic industrial action, publicly affirming what consumers have long articulated: the system is forced into coercion because voluntary, community-based, and peer-led care has been chronically and catastrophically underfunded. But if we only fund crisis care, we can't reduce the numbers of crises.

In the same year, the NSW Government passed the landmark *Suicide Prevention Act 2025*, establishing a legal obligation for government agencies to work together so the underlying causes of mental health challenges can be addressed. The NSW Government has stated its commitment to tackling the causes of mental health challenges, so if it truly cares, now is the time to match the rhetoric with action to tackle systemic reform. A Human Rights Act is the necessary framework to fulfill the duty to act.

A Human Rights Act would provide the legal architecture for a paradigm shift. It is the structural blueprint to drive changes in funding and accountability, towards a human rights compliant, voluntary, preventative, community-based and peer-led mental health system that we desperately need, alleviating pressure on over-stretched hospitals, in-patient units and a crisis-driven service system.

The NSW Government's own Policy Platform, taken to the last state election and endorsed again at the NSW Australian Labor Party State Conference in 2024, unequivocally supports community consultation into the introduction of further legislation to better protect the human rights of NSW citizens.

Furthermore, a landmark 2024 Federal Inquiry into Australia's Human Rights Framework not only unanimously recommend that Australia adopt a national Human Rights Act, but that all states and territories that have yet to enact one, like NSW, should do so. In April 2025 the South Australian Parliament's Social Development Committee tabled a unanimous report recognising the need for state-based human rights legislation following a 16-month inquiry into the Potential for a Human Rights Act for South Australia.

It's time for NSW to catch up and ensure our laws are ready to align with the momentum across Australia.

This toolkit is for everyone who believes mental healthcare in NSW must be grounded in human rights. It provides the evidence, messages, and tools to effectively advocate for the transformative change our communities deserve.

The problem: Rights without remedy

The current mental health system operates on a fundamental contradiction: by failing to address the root structural causes of mental health challenges—such as housing insecurity, natural disasters, unemployment, and social isolation—it defaults to policies and practices, that are propped up by laws, that often manage people through coercion and control. This systematic erosion of autonomy is not care or treatment, but a consequence and failure of the system's design.

For individuals experiencing mental health challenges, the right to make decisions about their own lives is paramount. Coercive practices are harmful to all involved, but the harm is compounded by a profound lack of accountability and avenues for redress and recourse.

This represents a critical legal and ethical gap, made worse by section 191 of NSW's *Mental Health Act 2007* limiting liability for harms caused by people who are meant to provide care for mental health consumers, such as healthcare workers, the police and first responders. Mental health consumers end up being second class citizens, unable to seek justice no matter how foreseeable the harm is and are forced to accept involuntary treatment when there are no guarantees they will be safe.

The consequences are severe to both individuals and society. When the mental health system relies on coercive responses rather than addressing underlying causes, people are exposed to long term harm including increased long-term costs, avoidable trauma, disruptions to education and employment, life-altering experiences for individuals that can lead to institutionalisation, and the perpetuation of the very conditions that contribute to mental health challenges.

Ultimately, this dynamic leads to the deterioration of human rights, systemic abuses, deepens community isolation, and in the most devastating cases, contributes to a tragic loss of life.

We can, and must, do better to build a system that protects dignity, fosters recovery, and prevents harm.

The solution: A Human Rights Act for NSW

A Human Rights Act for NSW is the essential reset—a comprehensive legal framework to redirect our mental health system from control to care, and from coercion to choice.

It is the crucial legislation needed to transform a broken system into one that:

- **Meets the real support needs** of people with mental health challenges, and
- **Directly addresses** the social and economic causes of those challenges.

An overwhelming **75% of Australians support a national Human Rights Act**. Yet NSW remains the only jurisdiction on the eastern seaboard without one. The Australian Capital Territory (2004), Victoria (2008) and Queensland (2019) have already enacted these laws. NSW's position is a choice—and right now it is a choice to fall behind.

We can choose differently. Supporting a Human Rights Act for NSW is choosing to imagine a future where the system transforms lives, enabling people to thrive, not just survive.

A well-designed Human Rights Act would:

1. Set out the rights that are protected such as the right to liberty, equality, health, and freedom from cruel, inhuman or degrading treatment.

2. Require government departments and public services (including NSW Health) and private entities exercising a public function to act compatibly with these rights and consider them in all decisions, policies, regulations, practices and when delivering services.

3. Require Parliament to scrutinise new laws for human rights compatibility, preventing unintended harms before they occur.

4. Give courts a role in interpreting laws consistently with human rights, strengthening legal clarity and fairness.

5. Provide accessible pathways for people to seek redress if they believe their rights have been breached, ensuring accountability and preventing systemic abuses from going unchecked.

How a Human Rights Act protects and transforms

While Australia has signed international human rights treaties, like the *Convention on the Rights of Persons with Disabilities*, these obligations are not adequately enshrined in NSW law. A Human Rights Act can bridge this gap by:

- **Protecting the rights of people with mental health challenges:** It would explicitly protect rights critical to mental health, such as the right to liberty and to make choices, health, non-discrimination, dignified treatment and freedom from cruel, inhuman or degrading treatment.
- **Ensuring decisions are compatible and consistent with human rights:** A Human Rights Act would require government agencies and private entities exercising a public function, to consider how their decisions and changes impact on the human rights of NSW citizens. It would require government agencies—including NSW Health—to act compatibly with protected human rights and consider them in all policies and practices, decisions and service delivery arrangements, fostering a culture of dignity.
- **Providing accountability and redress:** It can create accessible pathways for individuals to seek remedy when rights are breached, ensuring systemic abuses do not go unchecked, and strengthening accountability across the mental health system.

This is not about inventing new rights, it is about finally protecting the ones we all already have. A well-designed Act would **create an ecosystem of accountability, making human rights the cornerstone of public life.**

The precise and concrete ways a Human Rights Act for NSW will bring greater accountability and prevent future human rights breaches depends entirely on the model that the NSW Parliament and our elected representatives adopt.

However, a model can be expected to:

1. Create public authority obligations with potential mechanisms including human rights impact assessments, statements of compatibility, annual compliance reporting, and creating a duty to properly consider what human rights are affected and the impact of decisions on those rights.

2. Safeguard against breaches and suspensions by implementing mechanisms like creating an independent parliamentary committee to scrutinise laws if those laws are insufficiently incompatible with human rights and clearly listing certain rights (e.g. freedom from cruel, inhuman, or degrading treatment) that cannot be suspended.

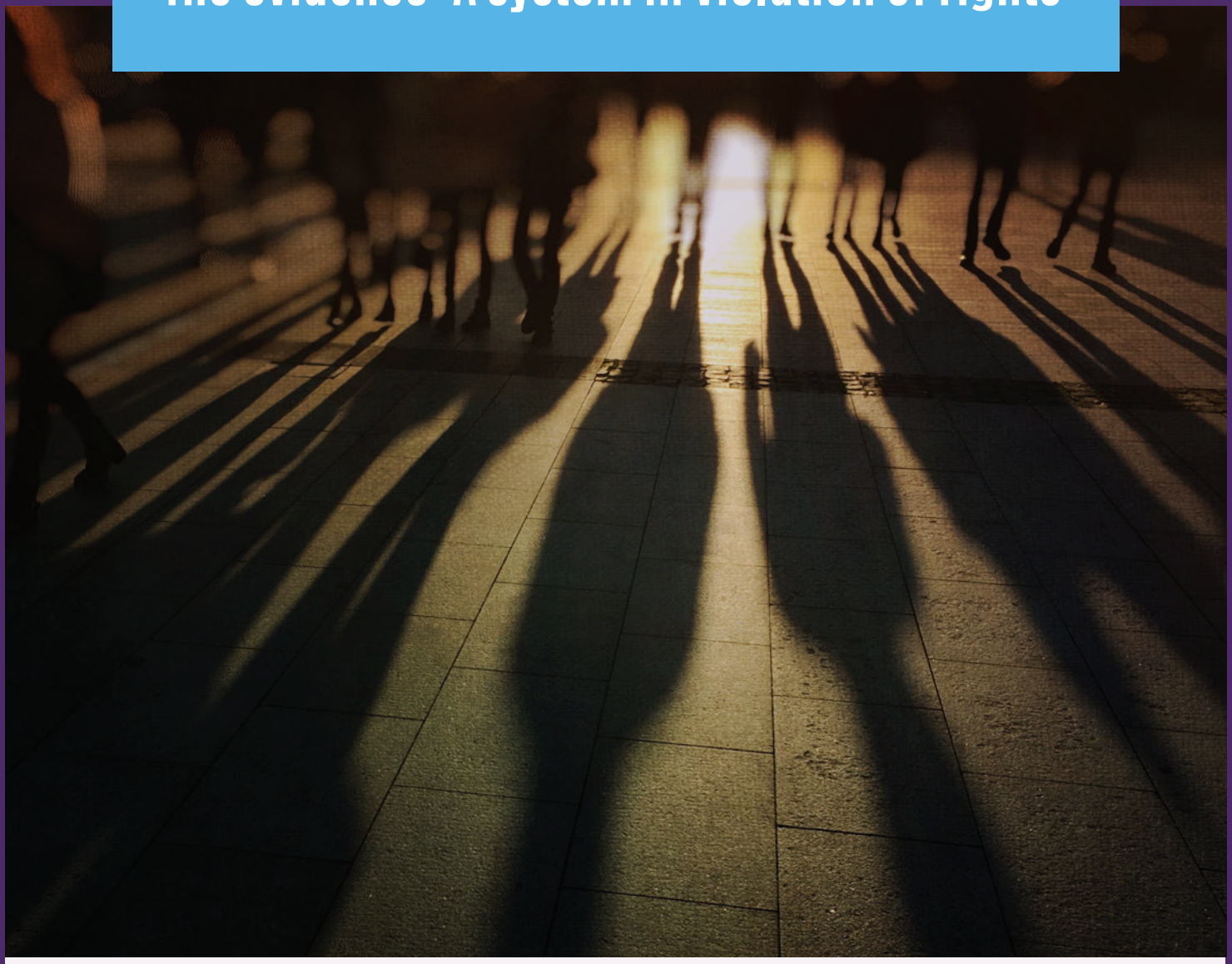
3. Build a stronger enforcement culture through actions like creating a direct right to pursue legal action, clarifying the role of Anti-Discrimination NSW in resolving disputes, and strengthening existing laws like the *Anti-Discrimination Act 1977* to create a better enforcement culture.

This is a practical, achievable reform that would put people's dignity at the heart of public life, starting with a mental health system grounded in respect, autonomy and humanity.

A Human Rights Act for NSW is a safeguard for us today and a promise to future generations. At a time of significant global uncertainty and change, the weight of multiple and reinforcing crises and rapid shifts creates a level of uncertainty that directly drives mental health challenges. By enshrining rights in law, we ensure that the NSW Government must consider the long-term impacts of its decisions.

This creates a foundation for intergenerational equity, acting as a beacon of stability that guarantees a liveable and dignified future for every citizen, no matter what challenges arise within or outside NSW.

The evidence: A system in violation of rights



The evidence for a Human Rights Act is built on the daily reality of rights denied.

"It was only this year I realised I actually had human rights, but people do not have rights if the doctors hold all the power. Complaint processes at least validate your experience that you and your human rights don't matter."

Mental Health Consumer

When systems fail to prioritise autonomy, community, and dignity, they create a direct pathway to institutionalisation. Although NSW committed to de-institutionalisation in the 1980s, many laws, policies and practices today continue to lay down the foundations for modern forms of institutionalisation. Limited recourse and accountability to protect the human rights of mental health consumers solidifies this path.

Australia's first mental health consumer-led human rights survey, released in December 2025 by the National Mental Health Consumer Alliance, exposes the failure of the NSW system. NSW data is drawn upon throughout this section, and the data reveals a landscape of compromise and neglect:

- **1 in 2** feel their human rights were not respected.
- **Only 4 in 10** received care that took account of their unique identities.
- **Only 30%** feel their physical and mental health were treated equally.
- **1 in 2** feel they are a part of their local community.
- **91.7%** have experienced discrimination.

These statistics paint a patchwork of failures and successes. As the Productivity Commission affirmed in October 2025, the National Mental Health and Suicide Prevention Agreement is failing. This agreement is a bedrock of the Australian mental health service delivery system, and the Productivity Commission found it was "not an effective mechanism for facilitating collaboration between governments to build a better person-centred mental health and suicide prevention system" (Finding 3.1).

The contemporary case for reform is rooted in this persistent denial of the dignity and autonomy that are otherwise guaranteed to all citizens. While the *Mental Health Act 2007 (NSW)* provides a clinical framework for care, the lived reality for many mental health consumers is one of trauma, exclusion, and a stark loss of liberty. Without a legislated human rights framework, these harms are not aberrations—they are predictable outcomes of a system designed without rights at its core.

Core violations demonstrating the need for a Human Rights Act

Violations occur because the mental health system is designed to produce them. The below are the top violations mental health consumers experience in NSW.

Involuntary treatment & loss of liberty

The Mental Health Act 2007 (NSW) permits detention and treatment without consent and often violating the fundamental right to liberty and security of the person.

Mental health consumers must be able to make choices about how they are treated and supported, but data shows this power creates a climate of fear:

1 in 5 mental health consumers agree to treatment out of fear of involuntary treatment, and **1 in 2** lacks adequate support to make informed decisions about their own care.

A Human Rights Act would rebalance this dynamic by requiring government and service providers to rigorously justify any limitation on liberty, to fund and apply the least restrictive alternatives, and place a positive obligation on the system to maximise voluntary, supported and, consensual care wherever possible.

The evidence: A system in violation of rights (continued)

Exclusion and isolation

Widespread discrimination continues to deny mental health consumers in NSW the right to equality, participation and community connection. With over 90% of mental health consumers in NSW experiencing discrimination, remaining connected and participating in the community is difficult.

Data shows **1 in 3** mental health consumers were unable to find employment, **1 in 2** cannot access peer workers with shared experiences, and only **1 in 10** feel media portrayals of consumers are fair.

A Human Rights Act operating alongside other laws could prevent discrimination, provide an adequate level of social protection and economic security and ensure person-centred care.

Restrictive practices

Restrictive practices limit a person's rights, bodily autonomy and freedom of movement. Practices like seclusion and physical or chemical restraint can constitute cruel, inhuman, or degrading treatment. In NSW these practices continue at concerning rates.

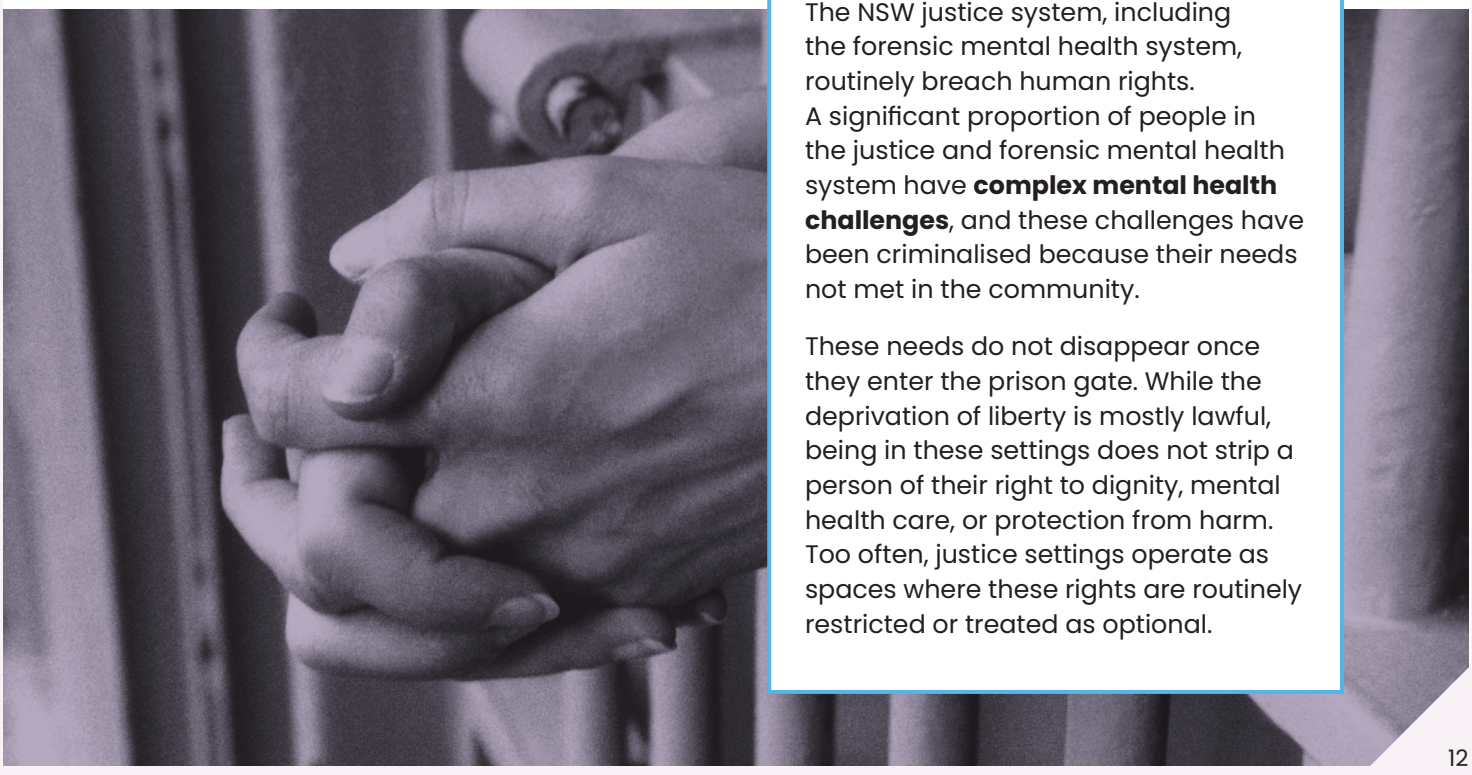
1 in 10 consumers report being physically or chemically restrained, and **1 in 4** state they have been subject to cruel, inhumane and degrading treatment.

A Human Rights Act would establish a stronger legal obligation to prevent, reduce, and ultimately eliminate these practices, ensuring service delivery never amounts to forms of torture and degrading treatment.

The justice system

The NSW justice system, including the forensic mental health system, routinely breach human rights. A significant proportion of people in the justice and forensic mental health system have **complex mental health challenges**, and these challenges have been criminalised because their needs not met in the community.

These needs do not disappear once they enter the prison gate. While the deprivation of liberty is mostly lawful, being in these settings does not strip a person of their right to dignity, mental health care, or protection from harm. Too often, justice settings operate as spaces where these rights are routinely restricted or treated as optional.



The accountability vacuum

These violations are exacerbated by a critical absence of meaningful recourse. While formal complaint mechanisms exist, they are widely perceived as ineffective, inaccessible and retraumatizing. **Only a third of consumers** feel empowered to complain, and processes are often handled internally, prioritising institutional reputation over justice, transparency and accountability.

This creates a "revolving-door" of advocacy, where grievances are logged but systemic change remains elusive.

The absence of a Human Rights Act leaves consumers and their families, kin and carers without a clear legal standard for rights-based care and without an accessible pathway to seek remedy when those rights are breached.

A Human Rights Act is the essential legal instrument to dismantle this architecture of coercion and rebuild one founded on care, choice, and enforceable human rights.

By embedding accountability into law, it shifts responsibility from individuals bearing harm to the institutions and decision makers responsible for preventing it.

How the lack of a Human Rights Act fuels discrimination

The absence of a Human Rights Act in NSW does more than worsen mental health challenges—it actively drives them. Without clear, enforceable rights, the system defaults to coercion over informed choice, connection and community. This deters people from seeking help and embeds stigma directly into the structures meant to provide care, reinforcing harmful stereotypes and normalising unequal treatment.

These harms are not isolated failures, but predictable outcomes in a system without enforceable rights-based obligations. Discriminatory laws and practices—such as restrictive practices, inadequate person-centred supports, and chronic underinvestment in voluntary, community-based care, persist unchecked. This reinforces the harmful misconception that people with mental health challenges are problems to be contained, rather than individuals entitled to dignity, autonomy, and equality.

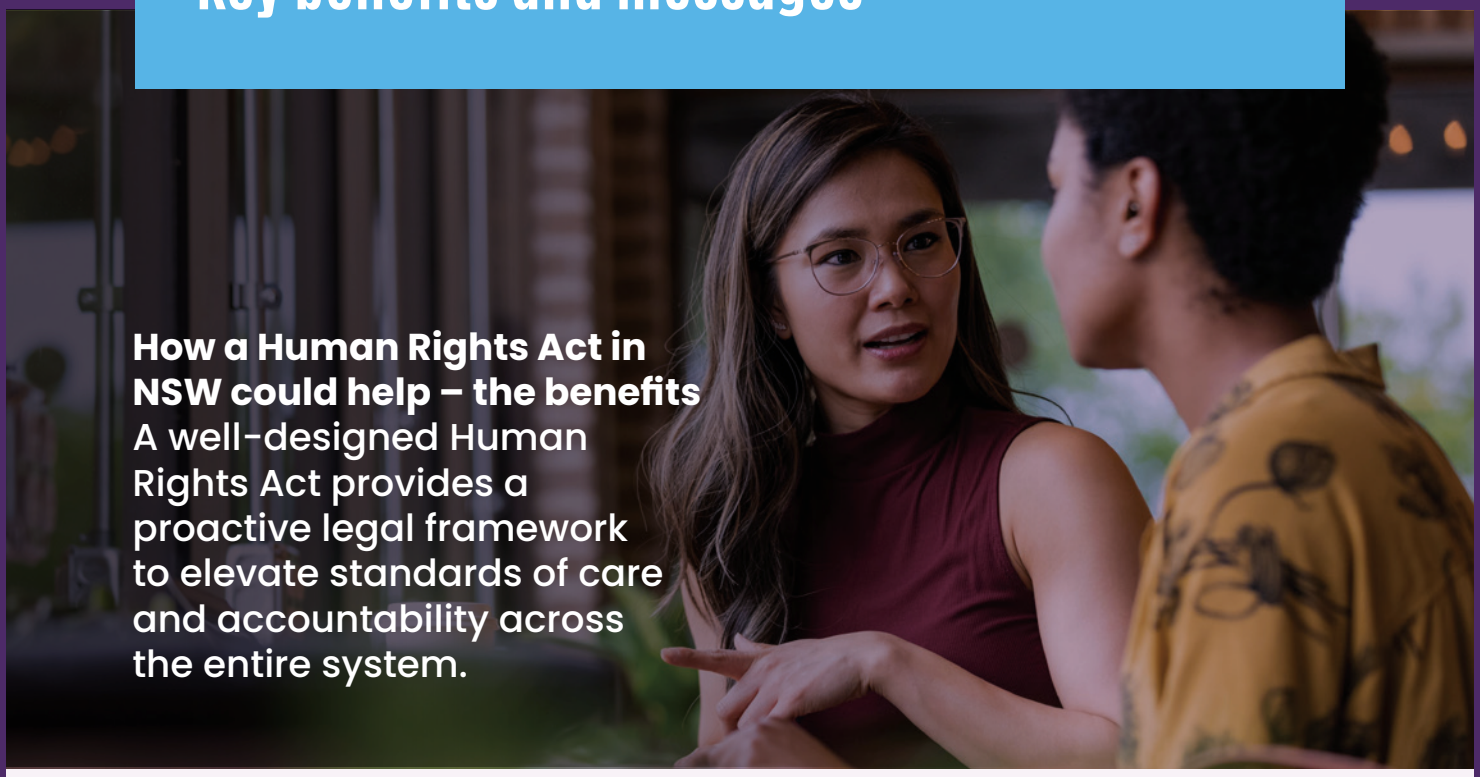
By failing to embed human rights into everyday decision-making, NSW perpetuates a cycle where discrimination is structurally reproduced—deepening exclusion, eroding trust, and exacerbating the very mental health challenges the system should address.

A Human Rights Act would break this cycle by placing dignity and accountability at the centre of government and service delivery.

Its benefits would extend broadly: because rights violations are a significant cause of mental distress, stronger legal protections would not only safeguard those with mental health challenges but help prevent mental health challenges across the entire community.

The need is urgent. Legislating human rights is essential to transform a system that currently allows harm to flourish, and to ensure every person is treated with fairness, safety, and respect.

Key benefits and messages



How a Human Rights Act in NSW could help – the benefits
A well-designed Human Rights Act provides a proactive legal framework to elevate standards of care and accountability across the entire system.

Its benefits would be felt at every level:

For individuals

Establishes clear rights when interacting with mental health services, provides stronger grounds and accessible pathways to challenge unfair or harmful treatment, and legally requires services to actively respect dignity, liberty, and cultural identity and supported decision making—rather than treating these as optional or aspirational.

For families, kin & carers

Creates a structured framework to ensure the rights and perspectives of both the individual in care and their support network are central to decision-making, especially during crises, and gives carers confidence they can back away from their caring role safely if needed and their loved one's rights will be upheld.

For service design & funding

Imposes a legal duty on government to consider human rights when developing policies, laws and regulations and when designing, commissioning and delivering services, and also creates a positive duty on public authorities to ensure the participation of groups like people with disability, children, First Nations people, culturally and racially marginalised people and others, are given proper consideration This shifts investment toward community-based, voluntary, and culturally safe models, for as many people as possible, moving beyond coercive and institutional approaches.

For Parliament

Ensures better-quality laws. A mandatory human rights assessment for every bill before Parliament leads to more robust, fair, and effective laws that protect vulnerable citizens from unintended harm and ensuring stronger protections for people and communities most at risk of rights violations.

For public servants & clinicians

Provides a clear, principled framework for dignity-centred, ethical decision-making, especially in complex situations. It supports professionals to balance safety, care and autonomy while upholding the rights, dignity and humanity of the people they serve.

Key messages (for lawmakers, media and the public)

Why a Human Rights Act for NSW matters

Embed dignity & safety

A Human Rights Act will ensure dignity and safety are legally embedded at the heart of the NSW's mental health system, moving us away from harmful, coercive practices.

Drive better decisions

A Human Rights Act will lead to better government decisions, by requiring public services, like NSW Health, to proactively consider human rights in policy, funding and delivery, leading to effective investment and better outcomes for individuals and communities.

Prevention & accountability

A Human Rights Act focuses on preventing rights violations before they occur and creates a clear, accessible pathway to accountability and redress when breaches happen, so harm is prevented or addressed early rather than after it escalates.

NSW is falling behind

NSW is already more than two decades behind compared to other jurisdictions in Australia. The ACT (2004), Victoria (2008) and Queensland (2019) already use Human Rights Acts to mental health reform. NSW is lagging, leaving people in NSW with the least protection of human rights anywhere in the Western democratic world.

Practical reform

This is a practical, moderate reform that maintains parliamentary sovereignty while creating a legislative framework that gives our fundamental rights the legal protection they deserve. It strengthens, rather than disrupts, existing systems by embedding human rights into everyday public decision making.

Frequently asked questions (FAQs)

Won't a Human Rights Act create more red tape and excessive litigation?

No. The experience in Victoria, the Australian Capital Territory and Queensland shows the opposite, with most complaints resolved directly and internally with the relevant public authority. Most issues are resolved through internal review, complaints bodies, or conciliation. Court action is intentionally positioned as a last resort, used only when other options fail.

The primary focus of a Human Rights Act is preventative—it improves government decision-making upfront, reducing the likelihood of rights breaches and, in turn, the need for litigation.

For example, in Queensland the Queensland Human Rights Commission's conciliation service resolves most complaints without court involvement. This early resolution approach prevents harm, reduces long-term social and legal costs, and fosters better public administration.

Why do we need a Human Rights Act in NSW when there could be a national Human Rights Act?

The human rights of mental health consumers need to be protected now, especially because the NSW mental health system is so desperately in need to of systemic reform. A Human Rights Act in NSW will bring this legal protection and provide a legal framework for much needed systemic reform now.

It is also unclear what the timeline is, and whether the Australian Government will legislate a national Human Rights Act, even though 3 in 4 Australians support it, and Australia remains the only Western democracy without human rights protections. However, if a national Human Rights Act is legislated by the Australian Government in the future, a Human Rights Act in NSW will not be for nothing or made redundant.

A Human Rights Act in NSW can continue to guide much needed systemic reform, and if a national Human Rights Act is legislated, the Human Rights Act in NSW will continue to operate alongside a national Human Rights Act. If there are inconsistencies between the two laws, then the national Human Rights Act will override the Human Rights Act in NSW to the extent of the inconsistency.

Won't this protect the "right" to be a "danger" to oneself or others?

No. All Human Rights Act models include a proportionality test which allows rights to be limited only when it is reasonable, necessary, and demonstrably justified in a free society to achieve a legitimate aim like public safety or preventing serious harm.

A Human Rights Act doesn't prevent interventions, it ensures that interventions are lawful, necessary, and the least restrictive option available. This is a higher standard of accountability, not an impediment to safety.

Doesn't the *NSW Mental Health Act 2007* and the *Anti-Discrimination Act 1977* already protect people's rights?

These laws currently provide partial and fragmented protections, but they do not amount to a comprehensive human rights framework.

The Mental Health Act 2007 governs specific treatments but has weak enforcement principles and authorises drastic rights limitations (like detention) without a strong overarching legal test.

The *Anti-Discrimination Act 1977* only protects against discrimination on specific grounds (like disability) in certain areas (like employment or education). It does not protect broader rights like liberty, privacy, freedom from inhuman treatment, or cultural rights.

A Human Rights Act would provide a comprehensive safety net that applies across *all* government actions and provides a consistent set of enforceable standards.

Won't it tie clinicians' hands in an emergency?

No. A Human Rights Act can provide a clearer ethical framework for decision-making in crises. It doesn't remove clinical powers but ensures they be used lawfully, proportionately and as a last resort.
For example:

- **Before a crisis:** It encourages investment in de-escalation training, peer support, and trauma-informed environments to reduce the likelihood of emergencies.
- **During a crisis:** It guides clinicians to consider: "Is this the least restrictive way to ensure safety? Have we considered the person's known wishes (e.g., an advance statement)?"
- **After a crisis:** It It mandates review and accountability, ensuring restrictive actions are documented and justified against human rights standards. This promotes learning and leads to safer, more therapeutic practices for both consumers and staff.

Does it hand power to judges and undermine our elected Parliament?

No. Australian-style Human Rights Acts have been designed to preserve parliamentary sovereignty, and this would be the same in NSW.

Under models operating in Victoria, Queensland, and the ACT, if a court finds a law is incompatible with human rights, it cannot overturn the law or strike it down. Instead, it will be up to the Parliament to decide whether to amend the law.

The ultimate power remains with our elected representatives and the government. This is a dialogue model, not a judicial takeover, and it fosters a constructive dialogue between the judiciary, and Parliament, the executive and the community on rights protection, promoting a better rights-based culture in public life and administration while fully respecting democratic accountability to the Members of Parliament NSW citizens elect.

What about economic and social rights, like the right to health and housing? Does that mean anyone can sue for a free house or specific treatment?

This is a common misunderstanding. Including economic, social, and cultural rights in a Human Rights Act typically creates a duty on government to ensure protection for what are called the immediately realisable aspects of a right, for example, the right to access healthcare services without discrimination.

It can also create a duty on government to take reasonable, progressive steps to realise economic, social, and cultural rights for everyone within its available resources. It is not an automatic individual entitlement to a specific service or demand.

However, it does provide a powerful tool for:

- **Policy Advocacy:** Challenging government decisions that *retrogress* on rights (e.g., cutting funding to community mental health services without adequate justification).
- **Systemic Review:** Requiring government to justify how its budget allocations are moving towards the realisation of these rights for the most vulnerable.

Is this a radical or partisan idea?

Protecting human rights through legislation is a mainstream, consensus-driven reform in democracies worldwide. Australia is the only Western liberal democracy without a national Human Rights Act. The Human Rights Acts in Victoria, Queensland and the ACT have been operating successfully for more than twenty years. It is not radical to suggest that people in NSW deserve at least the same level of human rights protection.

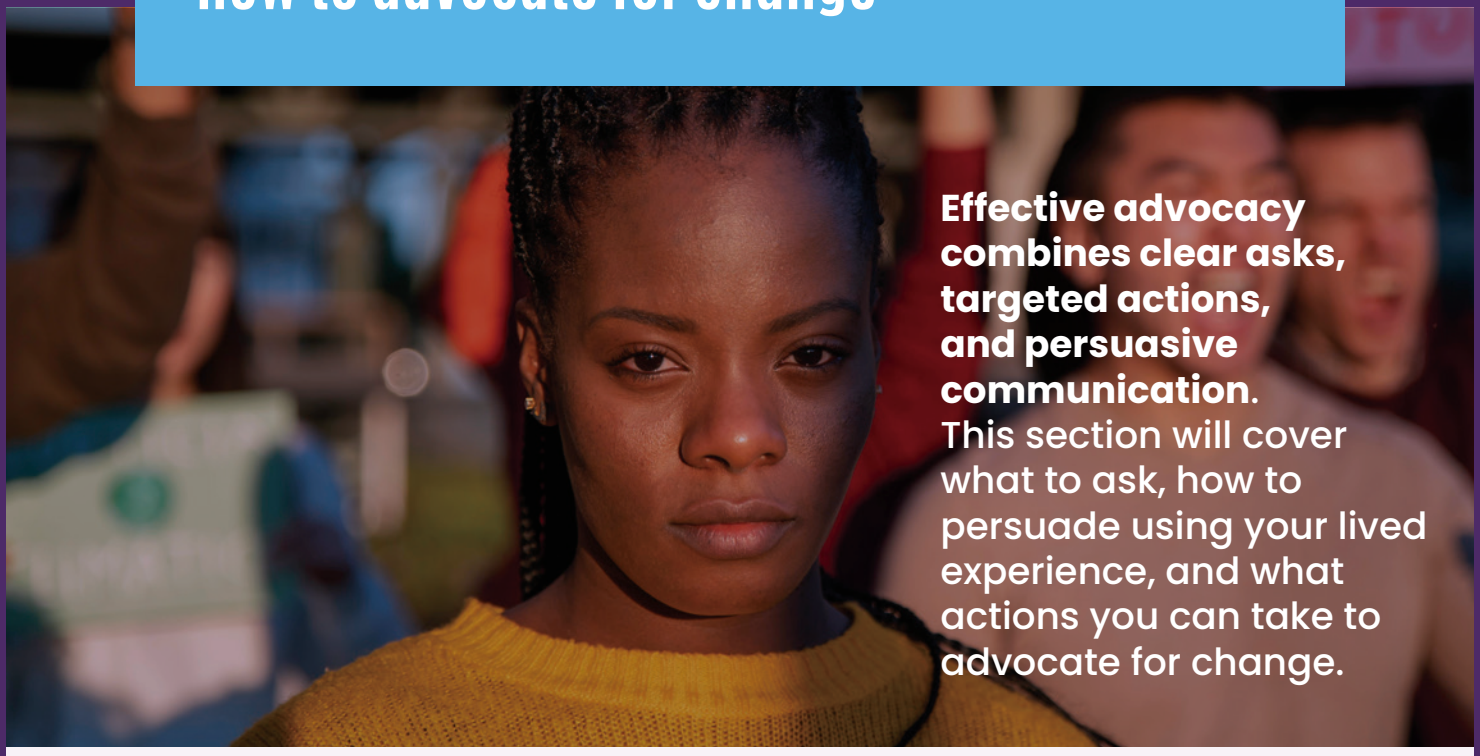
This is about good governance, not partisan politics. Human Rights Acts in other Australian states and territories have been implemented and then have gone on to receiving ongoing support from governments of different stripes. No jurisdiction that has enacted a Human Rights Act have repealed their laws, even if the opposition to the government that enacted the law forms government at the following election. This is because governments recognise that Human Rights Acts enhance their work if and offer concrete benefits to their constituents.

A Human Rights Act for NSW is supported by a wide coalition of diverse NSW voices, including:

- **legal bodies** (including the Law Council of Australia, the NSW Bar Association, the Law Society of NSW, Australian Lawyers for Human Rights, the NSW Council of Civil Liberties, Community Legal Centres NSW, the Justice and Equity Centre, Knowmore Legal Service and the Aboriginal Legal Service NSW/ACT)
- **peak bodies** (the NSW Council of Social Services, People with Disability Australia, the Australian Federation of Disability Organisations, The National Centre for Excellence in Disability Health, Save the Children, ANTaR, Absec, Equality Australia)
- **University Institutes** (Newcastle Centre for Law and Social Justice, the Australian Human Rights Institute, UTS Centre for Social Justice and Inclusion)
- **faith groups, service providers, business organisations** and more.

For a full list of the hundreds of organisations that support a Human Rights Act for NSW, **visit the Human Rights Act for NSW Alliance's website here.**

How to advocate for change



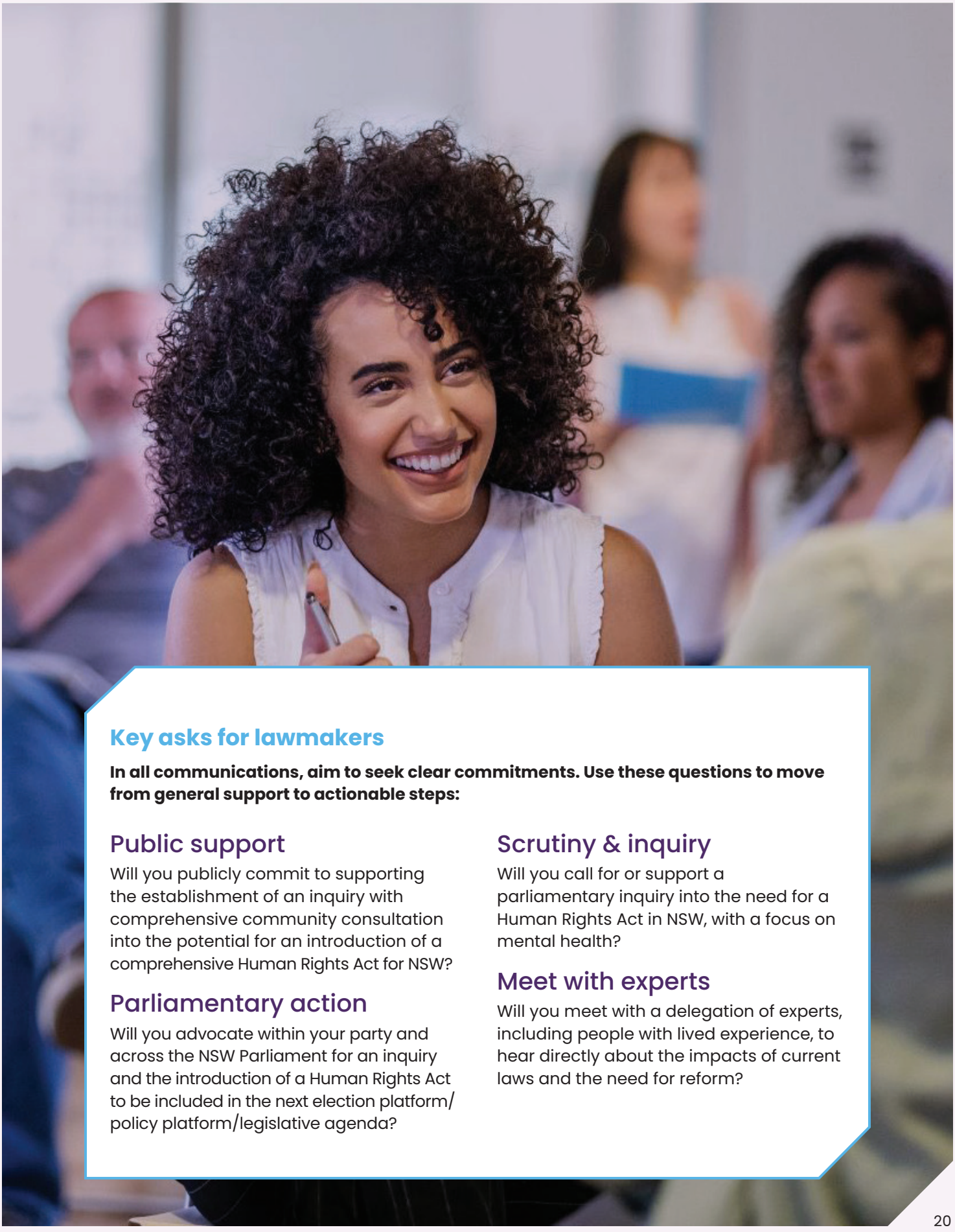
Effective advocacy combines clear asks, targeted actions, and persuasive communication. This section will cover what to ask, how to persuade using your lived experience, and what actions you can take to advocate for change.

Section 1 – The political landscape and direct asks

Where do major NSW political parties stand?

Understanding where NSW's major political parties currently stand helps you tailor your advocacy and focus your efforts where they can have the greatest impact.

NSW Greens	Have an established official policy supporting a Human Rights Act. The party has an advocacy history and has introduced bills to this effect and currently has a bill in the NSW Parliament.
NSW Labor (ALP)	The NSW ALP Policy Platform supports a "community consultation into the introduction of further legislation to better protect the human rights of NSW residents… [and, that] NSW Labor supports improvements to the processes for parliamentary scrutiny of legislation in line with human rights principles so that the human rights of NSW residents are properly protected when law is developed". Together these commitments bind the NSW Labor Party to reviewing the human rights framework in NSW. However, the NSW Labor Government has not committed to enacting a Human Rights Act. Advocacy is needed to make this a policy priority and hold them to their platform promises.
NSW Liberal / National Coalition	Has historically not supported a state-based Act, preferring federal parliamentary scrutiny models. While some individuals may be supportive and be open to reform, significant advocacy is needed to shift the broader party's position.



Key asks for lawmakers

In all communications, aim to seek clear commitments. Use these questions to move from general support to actionable steps:

Public support

Will you publicly commit to supporting the establishment of an inquiry with comprehensive community consultation into the potential for an introduction of a comprehensive Human Rights Act for NSW?

Parliamentary action

Will you advocate within your party and across the NSW Parliament for an inquiry and the introduction of a Human Rights Act to be included in the next election platform/ policy platform/legislative agenda?

Scrutiny & inquiry

Will you call for or support a parliamentary inquiry into the need for a Human Rights Act in NSW, with a focus on mental health?

Meet with experts

Will you meet with a delegation of experts, including people with lived experience, to hear directly about the impacts of current laws and the need for reform?

Section 2 – Taking action: A pathway for all advocates

Actions for individuals

People are at the heart of our democracy in NSW. Your voice has power and it matters – collective action drives change. There are multiple things you can do to get behind the campaign for a Human Rights Act for NSW:

Get informed & connected

Join the below for campaign updates:

- **BEING** (for mental health consumers)
- **Mental Health Carers NSW**
- **Wayahead**

Influence the system

Ask your **service provider** where they stand on a Human Rights Act for NSW and encourage them to publicly support rights based reform.

Build public momentum

Start a petition, **share your story online, discuss this with your loved ones and friends, host a community conversation, or post on social media**. Public discussion helps shift attitudes and normalise the call for reform.

Make it an election issue

In the lead up to the **2027 State Election**, ask your local candidates where they stand on a Human Rights Act—and make it clear this issue matters to you.

Engage directly with the Human Rights Act for NSW (HRA4NSW) Alliance

- **Sign the petition and join the campaign** for a Human Rights Act for NSW here.
- **Email your MP** using the HRA4NSW template and call on them to support a Human Rights Act for NSW. Access the email writing tool and template here. You can amend your letter to:
  - focus on mental health
  - explain your lived experience and
  - request a meeting with your local MP, the Attorney-General, and the Premier.
- **Connect with HRA4NSW on social media:**
  - Instagram: @hra4nsw
  - LinkedIn: @Human Rights Act for New South Wales
  - Facebook: @Human Rights Act for NSW

Actions for organisations

The first step for any organisation is to join the Human Rights Act for NSW Alliance (HRA4NSW).

HRA4NSW was established in 2015 and is an Alliance of more than 100 community and civil society organisations campaigning to ensure the human rights of people in NSW are protected and articulated in law, so all people treated fairly, and with dignity, equality and respect.

The Alliance is co-convened by Australian Lawyers for Human Rights and the NSW Council for Civil Liberties in collaboration with a steering committee of 17 leading NSW civil society organisations and collectively represent tens of thousands of stakeholders who are calling on the NSW Parliament to enact a Human Rights Act following a comprehensive community consultation.

HRA4NSW has reflected deeply on learnings from other jurisdictions and are ready to share a detailed proposals for a Human Rights Act that is effective and does not hinder the government's ability to respond to immediate community needs.

You can join the Alliance by completing the membership application form here.

Once you've done that:

1. **Publicly and consistently state your support** for NSW having a conversation about a Human Rights Act for NSW across your communication channels—your website, newsletters, social media, public statements and stakeholder engagement—especially in the lead up to and during the 2027 NSW state election.
2. Reach out to HRA4NSW and **endorse the Alliance's Key Principles for a Human Rights Act for NSW.**
3. **Consider hosting an event** for your stakeholders – The Alliance can offer support!

For service providers:

1. **Create and equip dedicated Lived Experience roles**, including leadership roles, in your organisation, who can promote human rights-based service delivery innovation.
2. **Embed Lived Experience Governance in your organisation**, using the Lived Experience Governance Framework, developed by and for mental health consumers, to ensure lived experience leadership is embedded in organisational decision making, accountability and service design.

For advocacy and peak organisations:

1. Include the introduction of a Human Rights Act for NSW—with a clear focus on mental health—in your **2027 NSW State Election platform and advocacy priorities**.
2. Work with the **NSW peak bodies** representing mental health consumers (BEING – Mental Health Consumers) and family, kin and carers (Mental Health Carers NSW). Centre lived experience leadership in campaign strategy, messaging and advocacy to ensure reform is grounded in the realities of those most affected.

Section 3 – Key tips on persuasive communication

Tip #1 – Use your story powerfully

Support people with experience of the system to tell their stories of the problem and potential solutions.

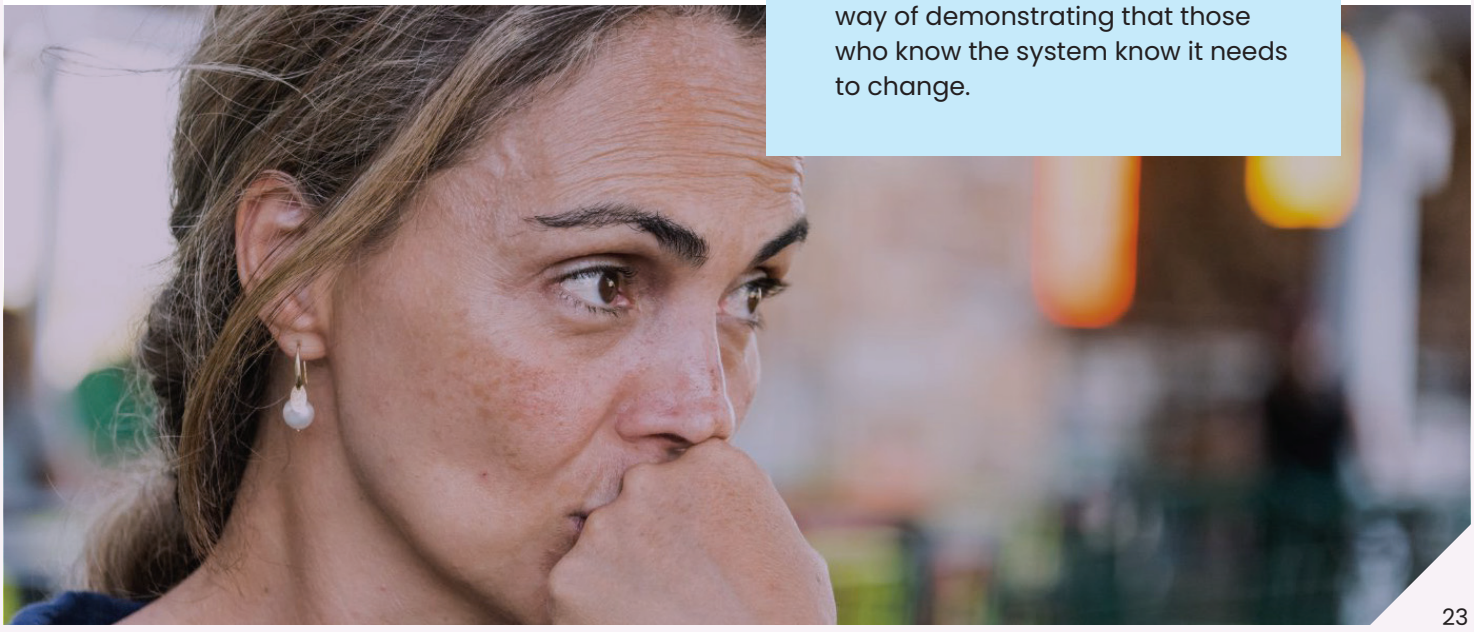
The most effective advocacy centres the voices of people with direct experience of the mental health system. Supporting mental health consumers—and families, kin and carers—to tell their stories of harm and hope is one of the strongest ways to build understanding and momentum for change.

Whether you are a mental health consumer, or the family, kin or carer of a mental health consumer, your lived experience of how the mental health system not meeting need or failing to address the causes of mental health challenges, is the most effective way of building support for change.

These stories make the consequences of policy visible and human. Communicating through personal stories is more effective than relying on factual statements or statistics because stories activate empathy and shared identity; the emotional pathways that drive opinion and behaviour change.

How to do it:

- **Consult and be led by mental health consumers** when preparing messages or policy positions. Include them in meetings or communications with government or media.
- **Treat lived experience as a form of expertise**. Respect their knowledge and expertise and focus not only on what is happening to them, but also their proposed solutions.
- **Avoid speaking for people** who are trying to navigate the system — give them the opportunity to speak for themselves. If you're unsure how to do this, see below for some links to sources of advice.
- **Combine real stories of individuals with data** that proves most people involved in the system (or a part of it) don't believe it's working as it should.
- **Telling stories of people who work within the mental health system** and are critical of them is another way of demonstrating that those who know the system know it needs to change.



Tip #2 – Name the impact, not the stereotype

Describe the emotional, psychological and wellbeing impacts of discrimination to highlight harmful beliefs and practices

Describing harmful effects of discrimination gives the listener a chance to reflect and overcome their own biases. However, it's important to not repeat discriminatory stereotypes or beliefs while explaining their effects, as this risks reinforcing or introducing harmful stereotypes and beliefs.

The emotional, psychological and wellbeing impacts are unique to you, but if you know that these impacts are similarly experienced by those with lived experience in the same position as you, then sharing the collective impact can be more powerful – just be sure to ask for permission first!

How to do it:

- **Show, don't tell**. Rather than only stating discriminatory stereotypes and beliefs, feature real stories of people who have experienced this form of harm.
- Focus on the effects of discrimination to **prevent repeating discriminatory stereotypes and beliefs**
- Where relevant, **name further consequences of discrimination**, such as developing distrust from accessing other services or seeking further help.

Tip #3 – Use strength, not deficit language and framing

Avoid framing mental health consumers as vulnerable or less capable. Focus on seeing a person as their whole self, and the impact of when systems fail people.

With the experience of discrimination so high among mental health consumers, using deficit language to talk about lived experience fuels discrimination.

Deficit language is any language that suggests there is something wrong, lesser or bad about a mental health consumer. It can also be language that frames mental health consumers as a burden or dangerous to society or experiencing mental health challenges because of individual failings. Deficit language can also remove the whole person and view a person through the lens of their diagnosis only.

With many mental health challenges resulting from systems failing to ensure the human rights of mental health consumers are met, strength-based language power and agency to the person and dramatically increases support for change.

How to do it:

- **Focus on individual and collective impacts** of discriminatory beliefs, practices and stereotypes
- Make sure it's clear that just being **able to look after oneself** in the face of the harms caused by the system is a huge achievement.
- **Avoid diagnostic and medical language** like 'disorder' or 'maladaptive'. It perpetuates the notion of what a 'normal' person does in response to causes of mental health challenges, when responses are unique and individual.
- When selecting real case studies or creating generic composite stories, **avoid painting a picture of a 'model person'**. This only plays into discriminatory beliefs, practices and stereotypes.

Tip #4 – Use values, not facts, to persuade

Rely on values important to you to make your case and identify common values to push the conversation forward.

Values drive decision-making. If facts and statistics align with our values, they are more likely to be accepted. If not, they tend to be ignored or disputed.

Values are guiding principles in life. They play a crucial role in shaping beliefs and actions, and identifying common values are more effective in influencing beliefs and actions. Developing a common set of values is important for moving the conversation forward, and identifying solutions driven by those values.

How to do it:

- **Consider what values you have in common.** Frame problems and solutions based on these common values and discuss how your solutions promote values alignment.
- **Avoid self-interested and fear-based values** like entitlement and punishment. The value of Lived Experience Leadership lies in being able to use individual grievances to promote a collective goal or systemic change that prevents what you experienced.
- **Connect values with human needs.** At the heart of human rights is a dignified life, so focus on how unmet needs misaligns with a common value.

Tip #5 – Create something good, don't just stop at the bad

Bring solutions to problems and include a vision of the want you want and explain how to get there.

Decision-makers know there are problems, so they are more interested in using their power to make changes that fix problems. While it's still important to raise problems, it is only part of the message. By focusing on problems only, it builds the perception that mental health challenges are the problem, instead of responses to the causes of mental health challenges.

Instead, be purposeful about the problems you highlight, not as a way of glossing over the harm caused, but to highlight the cause of the problem and potential solutions to address the cause of the problem. Frame the problem as the sign that the system is not addressing the cause of the problem and explain how your solution is better at addressing the cause of the problem.

How to do it:

- As a general rule of thumb, try to make no more than a **third of your message about the problem**. Focus the majority of your energy into the solution.
- **Always pair problems with solutions.** Keep the solutions concrete and focus on how the decision-maker you're speaking to can make things better.
- **Describe the intended impact of your solution** to paint the picture of what you're suggesting. How does the solution address the causes of the problem?

Section 4 – How to frame your message and story

Structure all communication using the effective **Vision-Barrier-Action framework** – from a tweet to the story you share with your local MP.

Use the Vision-Barrier-Action Framework

Vision	Barrier	Action
Describe a relatable vision both you and the listener would value.	*Identify what stands in the way of the vision, and what human rights are at stake because of the barrier.*	*Describe what can be done to overcome the barrier and why the action address the causes of the problem.*
This is a positive outcome grounded in human rights, that will result if the action suggested is taken.	This is where you define both the problem and the impacts of the problem, as well as the causes of the problem.	This demonstrates your Lived Experience expertise and leadership, and identifies actions that will address the causes and solve the impact of barriers.

To persuade effectively, present an inspiring vision rooted in human rights. It's useful to describe the vision as something positive instead of the absence of a problem.

When describing the barrier to the vision, ground the barrier in how it violates your human rights. Doing this bridges the high principles of human rights into the solid ground of everyday life.

- Often a barrier can have a cascading effect on other human rights. Explain how one violation leads to another.
- A barrier can be better communicated by relevantly highlighting impacts of the barrier, especially for a person who does not have similar lived experience.

Include a clear action that overcomes the barrier and addresses the causes of the impacts the barrier creates.

Examples

Vision	Barrier	Action
A society where personal autonomy and the ability to make decisions are fundamental to thriving.	Involuntary and coercive treatment acts as a barrier to the right to lead one's own care and stay connected to the community. It directly violates the fundamental right to liberty and security of person.	Enact a Human Rights Act that legally compels service providers to maximise voluntary, consensual care and provide robust decision-making supports.
An inclusive community that respects all people and enables everyone to reach their full potential.	(Cascading) Exclusion and discrimination prevent people from enjoying employment and participating in cultural, social, or political activities. This hinders the right to participate equally in society.	Mandate person-centred care and equitable access to psychosocial supports through enforceable non-discrimination standards.
A secure home that provides the stability needed to contribute to and belong within the community.	(Cascading with impacts): Housing insecurity violates the right to a home and makes it more difficult to maintain work or study commitments. The constant fear of losing a roof over one's head creates a cycle of trauma that deeply impacts mental health.	Create affordable housing options with secure tenure and enshrining this as foundational right, with mechanisms to enforce this right.

Towards a future promoting rights and protecting mental health

The journey toward a mental health system that **truly respects, protects, and fulfills human rights** is both urgent and achievable.

The evidence is clear: the current mental system in NSW too often fails people it is meant to serve, perpetuating cycles of coercion, isolation, and unmet need. This is not a matter of insufficient effort by individuals within the system, but a consequence of its very design—a design that lacks a foundational commitment to human rights.

A Human Rights Act for NSW is the essential, practical, and transformative reform needed to reset this trajectory. It is not a radical idea, but a necessary step to align our state with our interstate and international peers, and with our own values of fairness, dignity, equity and respect.

A Human Rights Act will provide the legal architecture to shift the system from one of control to one of care, from managing crises to genuine prevention and supporting wellbeing, and from institutional neglect to meaningful community inclusion.

This toolkit has outlined the compelling reasons for change, the tangible benefits of a Human Rights Act, and the powerful advocacy tools at your disposal. The power to create this change lies not only with policymakers but with every person who believes in a better future. Your voice, your story, and your actions are critical.

We stand at a converging moment. With the landmark Suicide Prevention Act 2025, the historic advocacy of clinicians, the damning data from consumer-led research, and the growing national momentum for rights protection, the path forward is illuminated. Let us walk it together.

Now is the time to act.

- Use this toolkit
- Share your story
- Contact your MP
- Join the HRA4NSW Alliance
- Demand that NSW establish an inquiry with comprehensive community consultation into the enactment of a Human Rights Act.

Mental health care grounded in human rights is not a privilege, but a fundamental entitlement for every person in our community.

Together, we can build a system where everyone is seen, heard, and empowered to thrive in a life of their own making.