Maintaining Mental Illness Patients' Humanity while Respecting their Human Rights

Heon-Jeong Lee

Department of Psychiatry, Korea University College of Medicine, Seoul, Republic of Korea

On December 31, 2018, Dr. Lim Se Won, a psychiatrist at Kangbuk Samsung Hospital in Seoul, Korea, was stabbed and killed by a patient suffering from mental illness.¹ Dr. Lim was a responsible psychiatrist who developed a suicide prevention education program; thus, many people were even more saddened and shocked to learn of his death. The patient who stabbed him was in a severe psychotic state at the time of the crime. Although the crime rate for people with mental illness is not higher than that for the general population, patients who have acutely exacerbated psychotic symptoms can be a risk to themselves and to others. The victim in this case is obviously Dr. Lim, but it is clear that the criminal is also a victim because he has become a serious offender owing to a mental illness that has caused him to lose his humanity. Why did the offender perform the tragic crime in a state of acute delusions and confusion without maintaining his humanity? Are there not social means to prevent this tragedy? What causes mentally ill patients and mental health professionals to be unhappy and discouraged in our society? Despite their deep shock and sadness, Dr. Lim's family requested the society to establish a safe mental health care environment and social environment in which mentally ill patients could be treated without discrimination.

However, in a legislative hearing held on February 8, 2019, some mental disability rights organizations protested the so called "Lim Se Won Act."² They raised their voices against its enactment because they believed that there is a possibility that forced hospitalization will be strengthened. At the center of the argument is the introduction of the judicial hospitalization system, which, as the Korean Neuropsychiatric Association (KNPA) advocates, requires the judicial system to judge whether a person with mental illness needs to be

admitted to a hospital. The KNPA insists that it is difficult to admit and treat patients under the current system that leaves those who suffer from more severe mental illnesses out of patient care. Although the Mental Health Act introduced in 1995 stipulated "hospitalization by a guardian," that is, forced hospitalization, the Constitutional Court in 2016 pointed out a constitutional inconsistency with the provision to allow mental patients to be admitted with the consent of two guardians and one psychiatrist.³ As a result, the requirements for hospitalization have become more difficult since May 2017. The number of psychiatrists who agree to the admission has increased from one to two, and these two psychiatrists must be from different institutions. In the past, forced hospitalization was permitted if one of the following conditions were met: "worry about harming yourself or others" or "the case of needing treatment"; however, from May 2017, both conditions had to be met for forced hospitalization. As a result of this change, the number of forced hospitalizations has decreased, but this has resulted in patients with serious mental illnesses remaining in the community without appropriate treatment. It has therefore become more difficult to respond timely to acute psychotic patients who require immediate intervention.

The most important requirement is a well-established system that can cope with patients' acute exacerbations. The worsening of psychotic symptoms of the patients who have not been adequately treated can become a serious threat to not only the patients themselves but also to the community. Social systems are needed to effectively overcome acute crises and protect patients and the community. The human rights of people with mental illness are important but, more importantly, we need to ensure that mentally ill patients who remain in society do not lose their humanity. The human rights of patients with severe mental illnesses can be maintained by the recovery of their self-determination ability and of their humanity through appropriate treatment rather than by respecting their pathological self-determination.

Those who insist on the human rights of psychiatric pa-

✉ Correspondence: Heon-Jeong Lee, MD, PhD

Department of Psychiatry, Korea University Hospital, Korea University College of Medicine, 73 Incheon-ro, Seongbuk-gu, Seoul 02841, Republic of Korea
Tel: +82-2-920-6721, Fax: +82-2-929-7679, E-mail: leehjeong@korea.ac.kr

© This is an Open Access article distributed under the terms of the Creative Commons Attribution Non-Commercial License (<https://creativecommons.org/licenses/by-nc/4.0>) which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

tients who oppose forced hospitalization are overlooking the fact that admission is not intended to limit the rights of the patients but to treat their psychotic symptoms. Modern psychiatry, unlike that of the past, can treat a patient's acute psychotic symptoms significantly more successfully. It is also a way for patients to recover their true human rights through improved morbidity and recovery of their humanity.

REFERENCES

1. Patient's murder of psychiatrist shocks medical community. Available at: <http://www.koreabiomed.com/news/articleView.html?idxno=4847>. Accessed March 2, 2019.
2. "Legislative hearing is deceitful" ... The voice against 'Lim Se Won' Act resonated in the National Assembly. Available at: <http://www.docdocdoc.co.kr/news/articleView.html?idxno=1065121>. Accessed March 2, 2019.
3. Constitutional inconsistency in mental hospital forced hospitalization. Available at: <http://medigatenews.com/news/2286485391>. Accessed March 3, 2019.