



**Foundation  
HUMAN RIGHTS IN MENTAL HEALTH-FGIP  
Amsterdam - The Netherlands**

**ANNUAL ACCOUNTS 2016**

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## Annual report by the Board - 2016

### 1. Introduction

In front of you is the Annual Report of the Foundation Human Rights in Mental Health-FGIP covering the year 2016. The report first includes an overview of our goals, mission and vision and work carried out during the year, as well as information on the executive bodies of the organization, and is then followed by the financial accounts of 2016.

### 2. The goal and history of the organization

Human Rights in Mental Health – FGIP is an international federation of not-for-profit organizations that promote humane, ethical and effective mental health care throughout the world. The organization aims to empower people and help build improved and sustainable services that are not dependent on continued external support. The defense of human rights in mental health care delivery is the cornerstone of our work. We consider it our prime obligation to speak out whenever and wherever human rights abuses in mental health practice occur, and work with local partners to amend the situation and make sure the human rights violations in question are discontinued. The basis in all our activities is partnership.

Although Human Rights in Mental Health-FGIP was established as a new legal entity in 2010, the history of the organization goes back to 1980 when it started as a human rights organization with the goal to end the incarceration of dissidents in psychiatric hospitals under the name **International Association on the Political Use of Psychiatry (IAPUP)**. The information we received was often shocking, the treatment nothing less than torture and many of our “clients” stayed for many years under the most inhumane circumstances in psychiatric prisons. When the Berlin Wall came down at the end of the 1980s and all political prisoners were released, we discovered that the situation was much worse than we ever imagined. Hundreds of thousands of people remained locked up under inhumane conditions in psychiatric hospitals and ‘social care homes’, for the rest of their lives. Initially we focused our work exclusively on Central & Eastern Europe and the former Soviet Union. Renamed the **Geneva Initiative on Psychiatry (GIP)**, we started with small projects, setting up psychiatric associations, associations of psychiatric nurses, family organizations and eventually also consumer organizations. We trained mental health professionals, established day care programs and gradually a new approach to mental health care provision was developed: an approach that focused on trying to keep people in the community as much as possible. Gradually the projects became bigger and together with our partners in the target countries we received support from local and national authorities that agreed to cover regular expenses (such as water, gas, electricity, salaries). As a result of ten or fifteen years of hard work the landscape of mental health in many of the countries was changed fundamentally.

Starting in 2005, GIP – now renamed **Global Initiative on Psychiatry** - also focused on countries outside the region, in particular in Africa and South East Asia. In many of these countries the work is the same as what we did and continue to do in Central & Eastern Europe and the former Soviet Union. We help in integrating patients into society who were locked up in a psychiatric hospital for many years, and under very bad living conditions, or develop community mental health care services where no assistance has been available so far.

### 3. Vision and Mission

Every person in the world should have the opportunity to realize his or her full potential as a human being, notwithstanding personal vulnerabilities or life circumstances. Every society, accordingly, has a special obligation to establish a comprehensive, integrated system for providing ethical, humane and individualized treatment, care, and rehabilitation, and to counteract stigmatization of, and discrimination against, people with mental disorders or histories of mental health treatment. An enlightened services system promotes mutually respectful partnerships between persons who receive services and those who deliver them, protects the human rights of users and the ethical autonomy of service providers, and facilitates the engagement of users, families, and all other stakeholders in advocating for and achieving improvements in the quality of care.

Recognizing that these aspirations remain everywhere unfulfilled, and that the rights and needs of persons with mental disorders are particularly vulnerable to infringement and neglect, the mission of Human Rights in Mental Health-FGIP is to promote humane, ethical, and effective mental health care throughout the world and to support a global network of individuals and organizations to develop, advocate for, and carry out the necessary reforms.

### 4. Our work

Mental health care is a mirror of society. The more humane and civil a society, the more chance there is for a humane, user-oriented mental health care system in which human rights are respected and users and their carers collaborate in selecting and delivering services. However, a civil society does not automatically produce a humane and user-oriented mental health care system. In spite of the fact that a large portion of society is affected by mental health problems, users typically remain stigmatized, invisible, and often neglected, and as a result mental health services are often under-financed and under-rated. People with mental illness are often segregated -- psychologically and, in many cases, also physically and legally -- from the rest of society. In fact, a genuine commitment to improve treatment of people with mental disabilities may be the most revealing measure of progress in a modern society. A truly "civil" society elevates the position of all its most vulnerable citizens, serves the needs of persons with mental problems, provides adequate funding for mental health care, and assures that services are user-oriented -- in other words, the needs and wishes of those using the services are the central considerations in shaping policy and practice.

Mental health care has always been a low priority in most of the countries in the world. In many countries, mental patients were stashed away in large institutions outside the city, where people were ignored and, all too often, left to die. This mentality, which relegated mental patients to a sub-human status, and even branded relatives of the mentally ill, still pervades many societies. Much work needs to be done in this field, to change the image and position of persons with mental problems. This is a task that will take several decades to accomplish.

In many countries, the human rights of mental patients are violated on a massive scale. In many institutions, living conditions are appalling; methods of treatment are outdated; staff is underpaid and insufficiently educated and unable to deal with the patients' problems; abuses are rampant; and little hope exists that the care provided will help to bring persons with mental illness back to society. In short, becoming mentally ill is usually a life sentence to a form of exile or second-class citizenship.

Human Rights in Mental Health-FGIP is committed to achieving genuine improvements in mental health care and in respect for human rights, and believes that these improvements need to be achieved by opening doors, not closing them. We believe in building partnerships and finding ways to enable local leaders to embrace the need for correction themselves. This strategy of "operating in silence" is not necessarily contradicted or undermined by the activities of those who voice their criticisms more stridently and more openly.

## **5. Our activities in 2016**

During 2016, FGIP has been able to stabilize the situation and gradually start an upswing in its activities. Although the size of the organization is nowhere near the size it was before the regionalization process started in 2000, it seems safe to conclude that we have reached the bottom and are now looking at a brighter future. Over the past year the turnover continued to increase and contracts with the Council of Europe and the United Nations Development Program (UNDP) are a clear indicator that the organization has become a trusted partner for intergovernmental organizations, which will have a positive effect on our ability to obtain EU-funding once the annual turnover has reached a sufficiently high level.

### **The organization**

At the end of 2014 the FGIP office moved out from the GIP-Hilversum office. A small office space was created in the town of Hollandsche Rading, which is mainly used as storage of archival materials, financial and legal documents and related stuff. For the rest the office is a "virtual" one. FGIP has no paid staff, and both the Chief Executive and other collaborators to the work of FGIP are contracted for specific jobs e.g. translations, accompanying delegations or organization of site-visits. This contributes to maintaining a low overhead for FGIP.

In 2015 a new responsive website (which adapts itself to the size of smartphones, tablets and computers) was created, while the facebook page remained very active with an ever growing number of followers.

### **Projects**

In 2016 the number of projects continued to grow. Here we provide an overview of some of the main activities.

#### **Jim Birley Scholarship**

Fundraising for the Jim Birley Scholarship has been quite successful and in 2016 the first Scholarships were awarded. On basis of the selection by the jury it was decided to divide the scholarship between both persons (one from South Africa, the other from Georgia).

#### **Trauma Care Ukraine**

Very soon after Maidan in Ukraine turned violent FGIP become involved in supporting the psychological services of Maidan. After the killings in January 2014 and February 2014, our support increased into providing psychological support both to the Maidan Psychological Services and to the development of trauma care throughout the country. The latter was carried out in collaboration with Ukrainian partners (a.o. the Ukrainian Psychiatric Association) and our Georgian partners (GIP-Tbilisi). Funding was acquired from private donations, Dutch monasteries and the Dutch Ministry of Foreign Affairs.

In April 2015 the financial support from the Dutch Ministry of Foreign Affairs came to an end, and our work is now mainly assisting e.g. the Ministry of Defense in developing their own rehabilitation services. We also worked on setting up community-based services near the front line (e.g. Slavjansk-Kramatorsk) where a large part of the catchment area consists of IDPs and soldiers from the ATO-zone (ATO: Anti-Terrorist Operation).

### **Forensic psychiatry**

With financial support of the United Nations Development Program and in collaboration with the Ombudsman on Human Rights of the Verkhovna Rada an assessment visit to forensic psychiatric institutions in Ukraine was organized, on basis of which a reform plan would to be put together and submitted to the Ukrainian Parliament for approval. In November 2015 a team of four experts (Dr. Algimantas Liausedas from Lithuania; Mr. Frans Douw from The Netherlands; Mr. Gavin German from the U.K.; and Robert van Voren) traveled to Ukraine, visited four institutions and discussed the situation with a variety of people concerned. In March 2016 their report was officially presented in Kyiv.

### **Annual Meeting of the Ukrainian Psychiatric Association**

In November 2015 the Ukrainian Psychiatric Association held its annual meeting in Lviv. The main theme was mental health and human rights, coercion in psychiatry and non-medical abuse. FGIP was present with a presentation on systematic abuse of the medical profession (Euthanasia Program in Nazi-Germany, Soviet psychiatric abuse and the CIA torture program involving psychologists and psychiatrists) and arranged a presentation by Prof. Bill Fulford from the United Kingdom.

### **WHO mobile teams project**

As part of the agreement between WHO-Kyiv and FGIP Chief Executive Robert van Voren, a project was developed to set up mobile mental health teams in four regions of Ukraine. The teams were to be educated by Lithuanian trainers and should be operational by the beginning of 2016. The project is meant to be a first step to work out a larger-scale project to develop community-based services, using the influx of aid for the East not to have hit-and-run projects but to use it for sustainable reforms in mental health care provision.

### **Domestic Violence Georgia**

Over the years, FGIP has invested considerably in helping set up services for women and children in IDP communities who fell victim to domestic violence and sexual abuse. Staff was trained in Gori, self-help teams were set up, training programs for aid workers were developed and leaflets were produced for the community. In the fall of 2016 FGIP was contracted to provide expertise to a Georgian project on domestic violence and sexual abuse in the buffer regions of Georgia (e.g. Gori district). As with the penitentiary site-visit to The Netherlands FGIP is paid for providing such expertise as well as logistical support.

### **Site-visits on psychogeriatrics, community mental health and penitentiary psychiatry**

In July 2015 a delegation from GIP-Tbilisi traveled to the Netherlands for a site-visit to psychogeriatric services in and around Amsterdam and Utrecht. The goal of the site-visit was to understand what low-budget and sustainable services could be developed in Georgia in order to meet the growing needs of the ageing population in the country for whom there are currently virtually no specialized services available. Among the institutions visited were volunteer services, day centers and the Alzheimer Diagnostic Center of the Free University Academic Center in Amsterdam.

In July 2015, a delegation from the Ministry of Health and the Ministry of Corrections of Georgia, under the auspices of the Council of Europe, traveled to The Netherlands for a site-visit to community mental health and prison mental health services. The visit was organized by FGIP, and financed by the Council of Europe. A wide variety of services were visited, including the high-security prison facility in Vught for especially dangerous criminals.

In September 2015, a delegation from the Georgian NGO *Rehabilitation Initiative for vulnerable groups* visited the Netherlands in order to discuss collaboration in the field of training of penitentiary personnel, in particular in high-security units, prison mental health, aggression management and rehabilitation services for inmates. The visit included meetings with training institutes connected to the Dutch penitentiary services as well as visits to medium and low-security facilities.

### **Political abuse of psychiatry**

Political abuse of psychiatry is ongoing in Russia, even though currently on an individual level and mostly in the provinces as a result of the prevailing political climate. FGIP keeps track of these developments and interacts with human rights activists and like-minded organizations, e.g. Amnesty International. Over the past year, several articles were published in order to attract attention to the issue, and this seems to have had the necessary effect. The number of cases are more scarce, and of shorter duration.

### **Training in monitoring closed institutions - Tajikistan**

Via the Netherlands Helsinki Committee FGIP was contacted with the request from the Tajik NGO "Nota Bene" to organize the training of monitors for the national Preventive Mechanism (NPM) in Tajikistan on monitoring human rights violations in closed institutions in Tajikistan. The training was carried out in

### **FGIP 35 years project: a trishaw for Sri Lanka**

One of FGIP's partner organizations in Sri Lanka was set up more than 25 years ago. The organization has developed a wide range of activities for persons with mental health problems who need support and care. Tirelessly, the volunteers of Nest work in both hospitals and the community, and through their work they have helped hundreds of people restore their lives and become active members of society again. Nest embodies all the values that FGIP stands for: commitment and dedication, determination, putting the consumers central and helping them to become or remain part of the community and have full-bodied lives.

One of the projects focuses at the Mulleriyawa mental hospital for women, where originally more than seven hundred women were locked up for the rest of their lives and lived under horrific conditions. Thanks to Nest, more than half of the women have been reintegrated into society and the remainder is living under far better circumstances both on the hospital grounds and in houses nearby. In order to continue their work, Nest needed financial support to meet the basic needs of the women, as well as to purchase a trishaw to transport women to the market for shopping or for outings into the community. A trishaw would greatly enhance the efficacy of Nest and give the women of Mulleriyawa a much greater sense of mobility and independence. Thanks to several generous donors, FGIP was able to purchase a trishaw for Nest as a present for its 35<sup>th</sup> anniversary.

## 6. Donors

Mental Health in Human Rights-FGIP is a non-endowed, project-based foundation. In the interests of the people we serve, we seek to keep its operating budget low, while simultaneously ensuring the quality of its operations. Because we do not currently have an endowment, we are dependent on charitable donations and project funds.

## 7. Board

The Board of the Foundation has confirmed the financial accounts on 18 April 2016

In 2015 the Board of FGIP consisted of the following persons:

<b>Name</b>		<b>Date Joined Board</b>	<b>Term Ending</b>	
<b>Chairman</b>				
Graham Thornicroft	UK	November 2012	2016	(1)
<b>Past-chairman</b>				
Benedetto Saraceno	IT	March 2010	2018	(2)
<b>Secretary:</b>				
John Bowis	UK	November 2009	2017	(2)
<b>Treasurer:</b>				
Hans 's Gravesande	NL	October 2015	2019	(1)
<b>Members:</b>				
David Gzirishvili	GEO	January 2012	2019	(2)
Melvyn Freeman	SA	November 2009	2017	(2)
M. Ganesan	SL	November 2009	2017	(2)
Jos Poelmann	NL	November 2013	2017	(1)
Maria Varniene	LT	November 2013	2017	(1)
Borislav Milev	BG	November 2014	2018	(1)



## Annual accounts Foundation Human Rights in Mental Health-FGIP

**Vorwerk & Co**  
ACCOUNTANTS EN BELASTINGADVISEURS

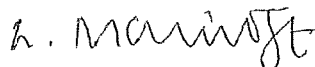
The FGIP Statutes indicate that each Board member is elected for a four-year term, with a possible extension of a second 4-year term.

The Chairman serves 4 years, with a possible extension of four years, to be followed by an automatic four-year term as Past-Chairman.

The Board members and the dates each joined the Board are listed below.

Robert Van Voren functions as Chief Executive and attends the board-meetings because of his function. The same counts for the directors of the members of the federation. However, they have voting rights only when their dues have been paid, unless this requirement has been waived temporarily. On behalf of the Board of Human Rights in Mental Health-FGIP,

Prof. G.J. Thornicroft, Chairman



2 November 2017

## Balans Sheet At 31 December 2016

(x € 1)

	Reference	31-12-2016	31-12-2015
		€	€
<b>CURRENT ASSETS</b>			
Receivables and prepaid expenses	1	5.000	5.000
Cash at bank en in hand	2	71.448	34.604
Cash in transit		2.000	0
		<b>78.448</b>	<b>39.604</b>
<b>LIABILITIES</b>			
<b>Reserves and funds</b>			
Continuity reserves	3	66.169	28.525
Appropriated reserves		0	0
Destination funds		10.079	10.079
		<b>76.248</b>	<b>38.604</b>
<b>Current liabilities</b>			
Accrued expenses	4	2.200	1.000
		<b>78.448</b>	<b>39.604</b>

## Statement of Income and Expenditure in 2016

(x € 1)

	Reference	2016	2015
		€	€
Income from direct fundraising	5	322.854	155.237
Income from investments and bank interest	5	138	356
<b>TOTAL INCOME</b>		<b>322.992</b>	<b>155.593</b>
<b>COSTS</b>			
Various projects		229.555	136.366
Other expenses (designated funds)		0	0
<b>Spent on target</b>	6	<b>229.555</b>	<b>136.366</b>
<b>Recruitment benefits:</b>			
Costs own fundraising	6	19.989	18.000
Costs of investments and bank charges		582	446
		<b>20.571</b>	<b>18.446</b>
<b>Others cost</b>			
Accountants costs	6	2.777	0
Costs of management and administration		1.000	1.658
Office costs		10.110	0
Contributions		1.258	0
Porto		231	0
Travel cost		14.605	0
General costs		5.241	0
<b>TOTAL EXPENSES</b>		<b>35.222</b>	<b>1.658</b>
<b>Operating result</b>		<b>37.644</b>	<b>-/- 877</b>
<b>Appropriation:</b>			
	3		
<b>Entry / exit (- / -) to :</b>			
Continuity reserves		37.644	-/- 877
Appropriated reserves		0	0
Destination funds		0	0
		<b>37.644</b>	<b>-/- 877</b>

**CASH FLOW STATEMENT 2016**

(x € 1)

	<b>2016</b>
<b>Cashflow from operational activities</b>	
Operating results	37.644
<i>Adjustments for:</i>	
Depreciation	0
<i>Changes in working capital:</i>	
Receivables and prepaid expenses	1.200
Cash in transit	-/- 2.000
<b>Cashflow from operational activities</b>	<b>36.844</b>
<b>Cash:</b>	
Balance January 1	34.604
Balances December 31	71.448
<b>Distance, increase funds respectively</b>	<b>36.844</b>

## General principles

### 1. General

#### 1.1. Annual report

The financial statements are drawn up in accordance with the provisions of guideline 650 Fundraising Institutions and the Dutch Accounting Standards as published by the Dutch Accounting Standard Board.

### 2. Principles for the valuation of assets and liabilities

#### 2.1. Comparison with previous year

The valuation principles and method of determining the result are the same as those used in the previous year, with the exception of the changes in accounting policies as set out in the relevant sections.

#### 2.2. General

Assets and liabilities are generally valued at historical cost or at fair value at the time of acquisition. If no specific valuation principle has been stated, valuation is at historical cost.

#### 2.3. Transactions, receivables and liabilities

Transactions in foreign currencies are stated in the financial statements at the exchange rate of the functional currency on the transaction date.

#### 2.4 Cash at banks and in hand

Cash at banks and in hand represent cash in hand, bank balances and deposits with terms of less than twelve months. Overdrafts at banks are recognised as part of debts to lending institutions under current liabilities. Cash at banks and in hand is valued at nominal value.

#### 2.6. Reserves and funds

The **continuity reserve** has been formed to ensure continuity in the event of ( temporary ) stagnation of income and amounts to about 1 times the annual commitments of the board. The restriction on spending of the reserve is determined by the Board and not a liability. The board may cancel this restriction itself.

**Destination Funds** concern the resources obtained with a specific destination specified by third parties.

Additions to and withdrawals from reserves and funds are made by means of result .

Expenditures for which purpose reserve or a designated fund is formed as an expense in the statement of income and expenses recognized.

## Explanation to the balance

	31-12-2016	31-12-2015	
	€	€	
<b>Ref.</b>			
<b>1 Receivables and prepaid expenses</b>			
interest savings	0	0	
Other receivables	5.000	5.000	
	<b>5.000</b>	<b>5.0000</b>	
<b>2 Liquid assets</b>			
Banks	71.448	34.604	
Cash in transit	2.000	0	
	<b>73.448</b>	<b>34.604</b>	
The cash is disposable			
<b>3 Reserves and funds</b>	<b>31-12-2015</b>	<b>2016</b>	<b>31-12-2016</b>
	€	€	€
Continuity reserve	28.525	37.644	66.169
Appropriated reserves	0	0	0
FUND	10.079	0	10.079
Destination Funds	10.079	0	10.079
<b>Total Reserves and funds</b>	<b>38.604</b>	<b>36.869</b>	<b>75.473</b>
	<b>31-12-2016</b>	<b>31-12-2015</b>	
	€	€	
<b>4 Current liabilities</b>			
Accrued expenses	2.200	1.000	
	<b>2.200</b>	<b>1.000</b>	

## Notes to the Statement of Income and Expenses

	2016	2015
	€	€
<b>5 BENEFITS</b>		
Various projects	322.854	155.237
Other income (designated funds)		
General gifts		
<b>Income from direct fundraising</b>	<b>322.854</b>	<b>155.237</b>
<b>Income from investments (interest)</b>		
Interest savings	138	356
<b>TOTAL INCOME</b>	<b>322.922</b>	<b>155.593</b>
<b>6 COSTS</b>		
Various projects	229.555	136.366
Other expenses (designated funds)	0	0
<b>Spent on target</b>	<b>229.555</b>	<b>136.366</b>
Costs own fundraising	19.989	18.000
Cost of investments and bank charges	582	446
Accountants costs	2.777	0
Costs of management and administration	1.000	1.658
Office costs	10.110	0
Contributions	1.258	0
Porto	231	0
Travel cost	14.605	0
General costs	5.241	0
<b>TOTAL EXPENSES</b>	<b>35.222</b>	<b>156.470</b>
<b>Result</b>	<b>37.644</b>	<b>-/- 877</b>

## Accountant's compilation report

To: Foundation human Rights in Metal Health-FGIP  
Amsterdam

The financial statements of Foundation human Rights in Metal Health-FGIP at Amsterdam have been compiled by us using the information provided by you. The financial statements comprise the balance sheet as at 31 December 2016 and the profit and loss account for the year 2016 with the accompanying explanatory notes. These notes include a summary of the accounting policies which have been applied.

This compilation engagement has been performed by us in accordance with Dutch law, including the Dutch Standard 4410H, 'Compilation engagements', which is applicable to accountants. The standard requires us to assist you in the preparation and presentation of the financial statements in accordance with general accepted reporting principles and according to Part 9 of Book 2 of the Dutch Civil Code. To this end we have applied our professional expertise in accounting and financial reporting.

In a compilation engagement, you are responsible for ensuring that you provide us with all relevant information and that this information is correct. Therefore, we have conducted our work, in accordance with the applicable regulations, on the assumption that you have fulfilled your responsibility. To conclude our work, we have read the financial statements as a whole to consider whether the financial statements as presented correspond with our understanding of Foundation human Rights in Metal Health-FGIP. We have not performed any audit or review procedures which would enable us to express an opinion or a conclusion as to the fair presentation of the financial statements.

During this engagement we have complied with the relevant ethical requirements prescribed by the 'Verordening Gedrags- en Beroepsregels Accountants' (VGBA, Dutch Code of Ethics). You and other users of these financial statements may therefore assume that we have conducted the engagement in a professional, competent and objective manner and with due care and integrity and that we will treat all information provided to us as confidential.

For further information on the nature and scope of a compilation engagement and the VGBA we refer you to [www.nba.nl/uitleg-samenstellingsverklaring](http://www.nba.nl/uitleg-samenstellingsverklaring).

Hoogland, 2 november 2017

H.J. Scherrenberg  
Accountant-Administratieconsulent