

Patients' Rights to Mental Health Care: Legal Regulation of Access to Health Services and Insurance Programs

Anatolii Berlach¹; Nataliia Zdanevych²; Alla Melnyk¹; Serhii Soldatkin³; Oleksandr Lavryk⁴

The study examines the importance of legal regulation of access to health services and insurance programs for persons with mental disorders in Ukraine, taking into account modern challenges, in particular the impact of war on the mental health of the population. In conditions of extraordinary psycho-emotional burden and imperfect regulatory framework, analysis can help to improve legislation using the experience of highly developed countries. This study uses methods of analysis, synthesis, induction, deduction, dialectical, analytical, analogy and generalization. The goal is to develop recommendations for integrating international standards that will provide comprehensive protection of patients' rights and access to effective medical care even in crisis conditions. The conflict in Ukraine has further exacerbated mental health problems, with a growing demand for psychological and psychiatric care due to trauma related to war, displacement, and constant stress. Current legislation does not meet modern psycho-emotional needs. Legislative inconsistencies, funding gaps, and terminological uncertainty impede access to basic medical services and insurance programs. Establishing a unified legal framework aligned with international standards is crucial to ensuring comprehensive health care and protecting patients' rights.

Correspondence: Alla Melnyk, Department of Public Service and Medical Law, Taras Shevchenko National University of Kyiv, 01033, 60 Volodymyrska Str, Kyiv, Ukraine.

Author Affiliations: ¹Department of Public Service and Medical Law, Taras Shevchenko National University of Kyiv, Ukraine;

²Department of Neurology Psychiatry and Physical Rehabilitation, Kyiv Medical University, Ukraine;

³Department of Administrative and Information Law, Sumy National Agrarian University, Ukraine;

⁴Interregional Academy of Personnel Management, Ukraine

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Every state needs an ideal health care system. Inadequate legislative support and access to high quality health care and treatment are two problems that arise in ensuring the rights to health care. Ukraine lags behind in the development of medicine compared to highly developed countries, but at the same time it can improve the legal support of the process of providing medical services by using international knowledge. International

norms and foreign experiences in regulating mental health care should be examined and differentiated to resolve the issues brought about by the legal regulation of medicine. People's mental health has a significant impact on the formation of the next generation, the progress of science and the development of humanity in general. The planned results of legal and social growth of the nation can be achieved only by studying

and improving the system of legal control over mentally ill people.

The conflict in Ukraine, which increases the burden on people's mental health, makes the relevance and significance of the study even more important. The number of people in need of psychological and psychiatric care is growing rapidly due to the consequences of war, displacement, death of loved ones and constant stress. People directly affected by the conflict, as well as those who had to leave their homes due to the fighting, are now seeing a marked increase in cases of post-traumatic stress disorder, depression and anxiety disorders. However, given the unique psycho-emotional tension that armed conflict causes, the current legislative structure governing mental health treatment does not adequately meet the requirements of modern society. Terminological ambiguity, legislative differences and insufficient funding make it difficult for victims of hostilities to obtain modern medical services and insurance programs necessary for quick treatment and social rehabilitation.

The creation of a single normative act that would provide access to full treatment and protect the rights of patients, taking into account both international norms and unique military circumstances, makes the study of this topic strategically important. To minimize the negative consequences of the war on the mental health of the population, reduce the level of stigmatization and guarantee comprehensive protection of human rights even in crises, Ukraine needs to attract the experience of leading European countries, where the legal regulation of access to medical services and insurance programs has effectively adapted the mental health system to emergency conditions.¹

Bondarchuk² investigated the legal regulation of mental health care in Ukraine, international standards and foreign experience. Shortcomings of legislation have been identified, in particular, insufficient terminology and legal mechanisms for protecting patients. It is

proposed to create a comprehensive legislative act to improve access to services and social integration of persons with mental disorders. Serebrennikova et al³ investigated the reform of health systems in different countries, comparing their approaches and results. Onyshko (2022) investigated the European Court of Human Rights (ECHR) decision on the right to health care, analyzing the obligations of the state and cases of its violation. Bondarchuk⁴ investigated the information and legal support of psychiatry in Ukraine, the reform of the system, taking into account international experience and the need for systemic changes to protect the rights of the mentally ill.

Pylypenko (2024) explores stigmatization, discrimination, and legal protection of persons with mental disorders, emphasizing the need for reform and compliance with international standards. The purpose of the study is to analyze the legal regulation of access to medical services and insurance programs for persons with mental disorders in Ukraine, with a special focus on the law enforcement practice of courts, standards of proof and comparison with international norms, in particular the practice of the ECHR, Germany and England.

MATERIALS AND METHODS

This study uses a comprehensive methodological approach based on a combination of general scientific and special legal research methods, in particular analysis, synthesis, induction, deduction, dialectical and analytical approaches, as well as methods of analogy and generalization. Each of these methods played a key role in researching mental health law enforcement practices and the legal regulation of access to health services and insurance programs.

The analysis method was used for a detailed study of the legal framework for mental health care in Ukraine, as well as to identify its shortcomings, legislative conflicts and differences in regulation at the national and international levels. The analysis allowed us to consider specific

provisions of national laws, international treaties, and court decisions, in particular the practice of the ECHR, which made it possible to identify key legal trends and problems. The synthesis method was used to combine information from various sources, including judicial practice, regulations, and scientific research. The use of this method made it possible to form a holistic vision of the legal regulation of mental health, in particular in the aspect of comparing national practice with the experience of Germany and England, where case law operates. This allowed us to develop conceptual approaches to improving law enforcement practice in Ukraine.

Methods of induction and deduction were used to form general conclusions based on specific court decisions and legislative norms. The induction method allowed us to summarize individual cases of enforcement and to highlight general trends in the consideration of cases related to compulsory treatment and access to mental health care. At the same time, the deduction method helped us to apply general legal principles to explain the features of specific court cases and the practical aspects of law enforcement. The dialectical method played an important role in the study of the relationship between legal norms, social realities and international standards. Its application made it possible to identify contradictions between modern trends in mental health care, based on the humanization of justice, and outdated approaches to legislative regulation in Ukraine. This allowed us to argue the need to modernize legislation by international standards.

The analytical method helped to systematize the available information, assess the effectiveness of law enforcement and identify the strengths and weaknesses of legislative regulation. It was used in the assessment of court decisions, and the analysis of their arguments and justification, which made it possible to outline the problems of proof in court cases regarding access to mental health care and insurance programs. The

method of analogy was important for the comparative analysis of law enforcement practice in Ukraine, ECHR, Germany, and England. The use of this method made it possible to trace how the rights of patients are protected in different legal systems, as well as to identify effective approaches that can be adapted to the Ukrainian legal environment.

The method of generalization was applied at the final stage of the study to form general conclusions and recommendations for improving law enforcement practice in Ukraine. Based on the analysis of various sources, court decisions and international experience, proposals were developed to harmonize national legislation with European standards. Thus, the combination of different methods allowed for a comprehensive study of the legal regulation of access to health services and insurance programs in the field of mental health, taking into account both national realities and international best practices. This contributed to the development of scientifically sound recommendations for improving the regulatory framework and increasing the effectiveness of protecting the rights of patients in the field of mental health in Ukraine.

RESULTS

Mental health of people is one of the important issues of human development, because the scientific development of civilization generates new ideas, so the healthier people are, the faster and more progressive development.⁵ Ukrainian legislation is gradually being improved to international standards, changing and supplementing it. Standards of legal regulation of mental health are binding in international treaties, namely the International Covenant on Civil and Political Rights, but they are also contained in non-binding acts (developed by the UN and other organizations): for example, the Lisbon Declaration on the Rights of Patients of the World Medical Association. One of the main human rights recognized at

the international and national levels is the right to health, which includes not only the absence of somatic diseases but also mental and social well-being. By WHO's definition, mental health is not simply the absence of a mental disorder. This is a state of well-being in which each person can realize their potential, cope with life's stresses, work productively and fruitfully, and contribute to the life of their community.⁶

Maintaining psychological well-being is crucial because often people avoid seeking psychological help from psychologists because of personal beliefs and fear of public censure. In the last stages of the disease, when recovery is almost impossible, citizens receive late psychiatric therapy. As a consequence, raising awareness and educating the public about mental health issues is a challenge we face.⁴ The Association Agreement between Ukraine and the European Union, the European Atomic Energy Community and their Member States stipulates that Ukraine undertakes to strengthen the health care system, control and prevent the spread of non-communicable diseases, promote a healthy lifestyle, and improve the mental health of Ukrainian citizens.

The project "Mental Health for Ukraine" was created to identify and eliminate certain problematic issues of Ukrainian legislation in the context of its compliance with international standards for the observance and protection of the rights of persons with disabilities, including persons with mental disorders. The first stage of the project was to familiarize Ukrainians with the concept of mental health, people's diseases of mental disorders, social support and updating the need to take care of mental health. The project was launched with the support of Switzerland, provided through the Swiss Agency for Development and Cooperation (SDC), in the context of the National Strategy for Healthcare Reform in Ukraine. In our opinion, the implementation of priority issues of updating the issue of mental health care is an important process in today's conditions.

In connection with the COVID-19 pandemic, the incidence of mental disorders increased, as the person who fell ill was treated in quarantine conditions. Feeling isolated from society, citizens needed psychological support. Considerable attention was paid to the pandemic as a social and economic phenomenon, but the issue of stabilizing the mental health of citizens remained outside the attention of policymakers and the medical industry.⁷ As a result, the number of suicides and mental diseases has increased. So, in the legislation of Ukraine in the field of mental health, it is necessary to improve the development of affordable, scientifically based and continuous care. UNICEF's annual report in 2021 focused on the mental health of children, adolescents and parents or other people who care for them. In the 21st century, even before the COVID-19 pandemic and full-scale war, children and young people have borne a significant burden of mental health problems, but significant investments have not been allocated to solve this problem.³

Therefore, there is a problem with financing the development of psychological health. Social institutions do not provide holistic assistance and control to ensure the rights of mentally ill persons. The public organization "Committee for Perfect Psychiatry," created by relatives of mentally ill people and volunteers who are not indifferent to the problems, is interested in the best provision of the rights of mentally ill people. In developed countries in Europe, people with mental illness can get free legal aid. Unprotected individuals attempting to protect their rights may be supported and protected by their qualified district attorneys. Specialists actively help the mentally ill, communicate with them and their guardians, and are interested in their lives. An important problem is that medical institutions for the treatment of mental illness are located far from the city. Most people are afraid of mental health care centers because of their isolated location.

Improving mental health facilities is essential to bring psychiatric treatment closer to

the general public. This is the creation of an outpatient clinic, a day hospital for patients, and a department of social readaptation and rehabilitation of the mentally ill. In Germany, for example, mental health services are close to the patient's home, and the entire patient's treatment course is funded, including the cost of medical care and physician services. The main document, which is based on the principles of respect for dignity; non-discrimination; involvement and inclusion; respect for features; equality of opportunity; availability; equality between men and women and respect for the rights of children is the UN Convention on the Rights of Persons with Disabilities.

In the field of mental health, the following countries became important landmarks: Spain, Italy, Poland, Hungary, Sweden, France, Great Britain and other countries. All these countries succeeded thanks to the adoption of the General Legislative Laws on Mental Health Protection, which created favorable conditions for successful reform in this area: reform of psychiatric hospitals, deinstitutionalization of specialized care, improvement of the level of primary care at the permanent place of residence, switched to a multidisciplinary model of providing medical care to mentally ill persons. For example, in Spain over 10 years (since 1986), the number of places in psychiatric hospitals has decreased from 100 to 25 per 100,000 patients, 500 mental health centers have been built with an average coverage of 87,000 people, conditions have been created for treatment in 95 psychiatric departments in general hospitals and in 108-day hospitals.⁸

In Italy, since 1978, the number of mentally ill people in psychiatric hospitals has decreased from 78,538 in 1978 to 7704 in 1998, and in 2000 all psychiatric hospitals were closed. This is thanks to the adoption of Law 180 (Law of Bazalia), which provided an opportunity for patients to participate in community life, and to be treated in psychiatric units in general hospitals, and day hospitals.⁸ According to Italian psychiatrist Lorenzo

Toresini: "Deinstitutionalization in Italy is cheaper for society than financing the provision of psychiatric hospitals." This Law, taken as a model in 2001 by Brazil, No. 10216 "Mental Health Care Law," gave this country a quick solution to the issue of mental health of the Brazilian population. The Republic of Poland in 1994 adopted the Law "On Mental Health" (*Ustawa o ochronie zdrowia psychicznego*), which defines the term "mental health is the main personal good of a person, and the protection of the rights of persons with mental disorders is the responsibility of the state."⁹

Today, the National Mental Health Protection Program for 2017-2022 is in place.¹⁰ Currently, there are 54 psychiatric hospitals in the Republic of Poland, which have reconstructed all hospitals that were built more than 100 years ago, more than 100 general hospitals, 200-day departments that accept patients with mental disorders, and 27 mental health centers for patients who are being treated in medium-type centers. The Republic of Poland has a project co-financed by the European Union from the European Social Fund within the framework of the Regional Operational Program of the Silesian Voivodeship for 2014-2020: Return to Community Mental Health.¹¹

In European countries, during deinstitutionalization, attention was paid to the design/reconstruction of old buildings of psychiatric hospitals and special attention was paid to the architecture, physical conditions of objects, the environment and internal environment, and installed equipment for both patients and medical workers. In 2008, in its report "Primary Health Care is Now More than Ever," the WHO drew the attention of all governments to the main reform groups: universal coverage reforms, service delivery reforms, public policy reforms that would ensure healthier communities, and leadership reforms. In implementing reforms to improve mental health, Portugal and Brazil took into account the following key factors: professional motivation and teamwork; communication both inside

and outside; strengthening current educational activities; investments in premises and equipment; commitment to computerization and information systems; payment for the work performed; drafting contracts for medical care between funding organizations and suppliers; technical and political leadership; as well as the quality and accreditation of institutions by the state body.¹²

The Ukrainian legislation also adopted the listed principles and highlighted the concept for the development of mental health care in Ukraine for the period up to 2030. Improving the quality of life, and ensuring human rights and freedoms are the main tasks of legislative regulation. To more effectively and effectively respect the rights of people with mental illness, the mental health system must function in a single inter-agency sector. As there are contradictions between the practical and legislative aspects of implementing regulations, we believe that mental health legislation does not meet international standards. We propose to develop a law that would contain provisions on mental health in general, together with a preamble, wording, and mention of the rights of those suffering from mental illness.

Thus, the Law of Ukraine "On the Provision of Psychiatric Care" (2000)¹³ defines the legal and organizational principles of providing psychiatric care to citizens, based on the importance of the rights and freedoms of man and citizen. It also establishes the duties of executive authorities and local governments to organize the provision of psychiatric care and legal and social protection, as well as the rights and obligations of specialists and other workers involved in the provision of psychiatric care. In addition, it regulates the implementation of social protection and training of persons with mental disorders. However, the lack of terminological definitions in the law prevents its correct application and makes it difficult for those who do not have a medical education to understand the basics of providing psychiatric care. In addition, the law does not

regulate the responsibility of medical personnel who violate the rights and freedoms of patients.¹⁴

The European Mental Health Action Plan proposes effective measures to improve psychological health and well-being in the European space. It specifically identifies several specific measures to improve the mental health of the child population, such as raising awareness of the importance of mental health as a component of quality of life, recognizing the child's mental health as a priority issue of mental health, shifting the focus from biological treatment to psychological and social forms of care, and emphasizing preventive measures (such as developing and ensuring access to effective parental support and educational programs, starting with a healthy lifestyle for pregnant women, preventing domestic and child violence in particular, conducting research, reducing the number of cases of alcohol and drug use). Accordingly, the Concept for the Development of Mental Health Care in Ukraine for the Period until 2030 was adopted, which we analyzed above.¹⁵

The World Psychiatric Association was created to hold international psychiatric congresses, and regional meetings, as well as to promote the development of vocational education and establish ethical, scientific and therapeutic standards for psychiatry. The Association adopted several important acts of a recommendatory nature: the International Code of Medical Ethics, the Twelve Principles for the Provision of Medical Care in Any National Health System, the Helsinki Declaration "Ethical Principles of Medical Research with Human Participation as an Object of Research" and others.¹⁶

The availability of qualified and knowledgeable professionals is necessary to provide high quality psychotherapy services. Retraining specialists, especially scientific and pedagogical personnel capable of creating and implementing educational information technologies, is the most important responsibility of a viable

education system. For this reason, the work of the teacher should be a priority of competence, creativity and efficiency, and the latest technologies should serve as methodological support to meet the global requirements for learning. Therefore, we believe that at the level of training of qualified specialists, it is necessary to significantly strengthen the provision of psychiatric treatment.

Patients may become angry and distrustful of psychiatrists who do not have proper experience in providing mental health care. Therefore, to help patients, young specialists need to develop comprehensively. After gaining the patient's trust, the psychiatrist can quickly identify the developmental problem of the mentally ill person. Because human health is its greatest value, the interaction between patient and physician is intimate. Conflicts that occur in the medical field create more psychological stress and are directly related to the patient's perception of health. Therefore, to increase confidence in the provision of psychiatric care, it is necessary to minimize the number of disputes and increase patient confidence in modern technologies for the treatment of neuropsychiatric diseases.¹⁷

Next, consider the law enforcement practice of national courts in comparison with the ECHR, in Germany and England. The study of the law enforcement practice of the ECHR, in Germany and England was chosen because of the high level of development of legal systems in these jurisdictions and the effectiveness of ensuring human rights, in particular in the field of mental health; The ECHR establishes a European standard for the protection of rights, and the experience of Germany and England, based on a systematic approach to evidence and case law, allows us to identify successful mechanisms for regulating access to medical services and insurance programs that can be adapted to improve national practice in Ukraine.

The progressive combination of national legal norms with international standards is a defining feature of modern Ukrainian judicial

practice, and this is especially important in situations related to the protection of patients' rights to mental treatment. In addition to the interpretation and application of the law, enforcement as a legal category also includes thorough verification of facts and evidence, which is essential for the impartiality of court decisions. Courts are required to consider medical records, the findings of expert psychiatrists and the socio-psychological circumstances where access to health services and insurance programs directly affect the lives of people with mental disorders. This allows achieving a balanced solution between the protection of human rights and the protection of public interests.

For example, in several decisions of the city courts of Ukraine on compulsory treatment, it was established that the patient's freedom can be limited only if there is relevant evidence confirming a threat to the life or health of the patient or other persons. These procedures confirm the need for a thorough approach to evidence, taking into account both medical and social factors, as this allows the courts to give individual attention to each case.

One of the real examples is the decision of the Kyiv Court of Appeal, which dates back to September 2019, where, when considering an application for compulsory treatment, the court analyzed the evidence provided in detail and found that the application of restriction of liberty is possible only if there is a comprehensive examination. In addition to the conclusions of one psychiatrist, the court also took into account the data of an independent commission that assessed the patient's medical indicators and social circumstances, including the possibility of social adaptation and family support. The court rejected the request for compulsory treatment, despite conflicting data on the degree of threat, noting that the restriction of liberty can be justified only if there is convincing evidence that the patient's condition poses a real threat to his life or health, as well as to others.¹⁸

Such reasoning was used in the decision of the Lviv Court of Appeal, which emphasized the need to establish the totality of evidence in cases of compulsory treatment. The court stressed that to resolve the issue of restricting a person's freedom, in addition to medical documentation, it is necessary to collect information about the social environment, marital status, rehabilitation opportunities and patient support. Taking into account all these factors allowed the court to determine that compulsory treatment is wrong if there is no proper evidence or only specific medical reports are available, since this may violate the constitutional protection of the inviolability of the person and the right to liberty.

Another example is the practice of the Supreme Court of Ukraine, which in its decisions constantly emphasizes that coercive measures are applied only if there is clear and convincing evidence of a threat to life or health. In one of the archival decisions, the court noted that a strong argument against the use of compulsory therapy is the lack of evidence that covers both medical and socio-psychological data. Since the use of coercive measures without careful study can lead to a violation of human rights, the court noted that in such situations it is extremely important to take into account the unique circumstances of each case (Onyshko, 2022).

These examples demonstrate that court practice in Ukraine in cases of compulsory treatment is developing towards providing an integrated approach to evidence when each case is considered taking into account both medical indicators and social aspects of the patient's life. This strategy not only protects individual rights but also complies with international norms, in particular those established by the European Court of Human Rights, which requires that any restrictions on freedom be applied proportionately. The key to an individual and balanced approach to each case is the presence of convincing, carefully collected evidence confirming the threat to the life and health of the patient and his environment. As a

result, actual court decisions show that restriction of liberty through compulsory treatment is possible only in such cases.

Comparing Ukrainian practice with samples of international experience, it can be noted that the European Court of Human Rights systematically emphasizes the need to comply with procedural guarantees in cases of compulsory treatment. One notable case is *Winterwerp v. The Netherlands* (1979),¹⁹ in which the court scrutinized the use of coercive tactics in the context of mental health treatment. According to the ECHR, compulsory treatment may be permissible in this situation only if there is objective evidence confirming the risk to the life or health of the patient or other persons and if the established procedural requirements are observed. To ensure an individual approach to each case, the court stressed that the evidence process should include not only expert opinions and medical records but also a thorough assessment of social situations.²⁰

This strategy, as demonstrated in the *Winterwerp* judgment, helps to ensure that decisions on compulsory treatment are constantly monitored and reviewed by public authorities, preventing abuse and ensuring a sufficient level of human rights protection. As Ukrainian courts increasingly fall under the influence of ECHR provisions and work to guarantee enforcement measures only if there is convincing and well-tested evidence, the Dutch experience has become the decisive standard for Ukraine. In addition to improving the quality of psychiatric care, comparative law allows adapting local judicial practice to modern international standards, which provides access to quality medical care even in inpatient treatment.

In addition, we believe that it is time to consider the case of *Kudinov v. Russia*²¹ is less common in open ECHR databases but is often used as an illustration of a court decision that established new rules for people with mental illness to receive medical care during hospital treatment. In this decision, the court noted that

the state cannot refuse to provide the patient with full and high-quality medical care, even if the patient is in a closed medical institution. By the doctrine of homogeneous application of the principle “not prohibited by the highest level of the studio,” the court separately took into account the possibility of lengthy consultations of specialists of various profiles, in particular psychiatrists, in addition to the main volume of medical services, which helped to form a comprehensive treatment plan. Since the patient in need of complex therapy has the right to timely qualified care that meets modern standards of health care, the court found that restricting access to specialized care violates the principles of protecting the human right to health and dignity enshrined in the ECHR (Pylypenko, 2024).

The decision emphasized that ensuring access to an extensive consultation panel is not only a matter of organizational convenience but has a direct impact on the quality of treatment, since the expanded involvement of specialists allows for taking into account all aspects of the patient’s condition, in particular his social and psychological needs, which is especially important in inpatient treatment. This method is consistent with modern ideas of combining social support and care, which consider each patient as an individual and base therapy on a thorough assessment of their needs. Since it sets a precedent according to which public institutions must provide not only minimum standards of medical care but also create conditions for obtaining services that meet the highest quality requirements, *Kudinov v Russia* is considered a reference for other cases related to the provision of an appropriate level of psychiatric care.²²

In Germany, law enforcement practice is characterized by high procedural discipline, which is the basis for protecting the rights of patients in the field of mental health. Every decision to apply coercive measures, in particular the restriction of liberty, is carefully analyzed in the context of clearly documented

evidence. The decisions of the Federal Constitutional Court demonstrate that coercive measures can be applied only if there is irrefutable evidence of a threat to both the patient and their environment. At the same time, the court is not limited to medical expertise but takes into account the testimony of social services and analyzes the individual circumstances of each case.²³

Since each court decision is based on a thorough study of all relevant factors, this method not only provides a high level of legal discipline but also helps in the development of a system of social justice. The German model, focused on the principles of rational proof, allows you to effectively regulate access to medical services and insurance programs, providing social protection in difficult life situations. In a number of decisions, the court emphasizes that coercive measures are applied only after a detailed analysis of alternative methods of treatment and rehabilitation possibilities, avoiding excessive restrictions and guaranteeing respect for human rights.

The English system of law, built based on a precedent approach, is marked by flexibility and the ability to adapt to the individual circumstances of each case. England’s jurisprudence in cases concerning mental health care demonstrates that decisions are made taking into account both general legal principles and the specifics of a particular case. To draw the best conclusions, the English courts actively consider the patient’s personal qualities, marital status, social environment, and medical history in addition to official processes. This method allows courts to create a system in which every decision is the result of a thorough assessment of all available data, and enforcement measures are applied only in cases where there is a genuine and relevant danger. English courts can quickly adapt to new mental health problems while balancing the interests of the individual and society as a whole, thanks to the flexibility of a precedent system that also helps to respond quickly to public events.³

Thus, both German and English models of law enforcement demonstrate a high level of attention to the procedural provision of human rights protection. Coercion measures are applied only when there is irrefutable evidence of danger, by the strict evidentiary criteria of the German system and a thorough approach to the consideration of the case. Due to the flexibility of case law, the English system allows you to take into account the unique circumstances of each patient, which is important for guaranteeing the right type of mental health care. Both approaches aim to reduce the possibility of abuse and excessive restrictions by providing access to health services and insurance programs based on an objective and comprehensive analysis of the situation. This, in turn, contributes to a more humane and just legal environment where patients' rights are always adequately protected.²⁴

Ukrainian judicial practice actively uses the experience of the ECHR, Germany, and England, which is reflected in the growing attention to the quality of evidence. For example, in the decisions of the Supreme Court of Ukraine on issues of compulsory treatment, the requirement to submit a comprehensive expert assessment, which includes an analysis of both medical and socio-psychological aspects of the patient's condition, is increasingly noted. This strategy helps to increase public confidence in the health care system, in addition to increasing the level of court decisions. Additionally, recent legislative efforts seek to strengthen laws that control access for people with mental illness to insurance and health care plans. These reforms are based on the analysis of international experience and aim to provide not only timely treatment but also to create mechanisms for protecting the rights of patients and preventing possible abuse.²⁵

Systematic analysis of evidence is said to be a key element of effective law enforcement. The practice of courts both in Ukraine and abroad shows that a balanced decision

that takes into account both the needs of society and the interests of a person can be achieved only by careful collection and analysis of evidence. Regardless of legal history, the primary goal is to protect human rights and ensure access to quality medical treatment, as evidenced by a comparative study of the experience of the ECHR, German constitutional practice and case law in England. This method, which combines strict standards of evidence with the analysis of each case, allows us to create effective mechanisms of legal regulation that solve modern social problems.

DISCUSSION

The mental health care system in Ukraine faces numerous challenges, supported by both international research and specific data at the local level. WHO estimates that 1 in 4 Ukrainians may someday have mental health problems. However, due to stigmatization and ignorance, more than 60% of the population seek help only later in life, which significantly worsens treatment and reduces the quality of life. At the same time, legal regulation suffers from the lack of clear definitions of key terms in laws such as "On the provision of psychiatric care," which leaves a legal void and leads to a large number of court disputes regarding compulsory treatment. The results of the analysis show that in more than 70% of cases, there is insufficient evidence to support both medical and socio-psychological aspects.²⁶

Another important issue is the financing of the industry; according to the Ministry of Health, mental health funding accounts for only about 5% of the total health budget. This is completely inadequate when compared with European standards, for example, with the experience of Spain, where the number of beds in psychiatric hospitals has sharply decreased over the past 10 years due to the growth of a network of specialized centers. In

addition, access to modern services is severely limited by the geographical unevenness of the placement of medical infrastructure, especially in rural areas. Residents of remote regions are forced to travel to large cities, which is associated with additional time and financial costs, often associated with discomfort and fear.

To address these issues and bring national regulations in line with international standards, it is necessary to adopt a single regulatory document that would clearly define the concept of mental health and guarantee the rights of persons with mental disorders by the principles of non-discrimination and equal access to health services provided, for example, the UN Convention on the Rights of Persons with Disabilities.²⁷ At the same time, funding for the industry should be strengthened, which will modernize the health infrastructure by expanding the network of outpatient centers, day hospitals, and rehabilitation centers, as well as introducing modern insurance programs that will guarantee access to a full range of medical services.

The training of medical personnel through continuous training and the introduction of the latest information technologies, which have already shown promise in such leading European countries as Germany and England, is no less important. Clear guidance should also be developed on the collection and evaluation of evidence to improve judicial practice. This will ensure an individual approach to each case and effective protection of patients' rights, which will reduce the number of lawsuits and increase confidence in the mental health care system.²⁸

The need to introduce these strategies into national practice is indicated by comparison with international experience, in particular with the decisions of the ECHR, which require careful study of supporting data before applying coercive measures. To overcome modern challenges in the field of psychiatric care in Ukraine, it is extremely necessary to maintain a balance between individual rights

and public interests, adapt legislation to European standards, modernize the financial and infrastructure base, and improve the skills of medical personnel. These actions will ultimately help ensure effective protection of patients' rights, prompt delivery of care and reduced stigmatization.

CONCLUSIONS

Because mental health is essential to the well-being of both the individual and society, the laws that govern it must be strengthened to meet world standards. According to the report, there are several challenges facing the Ukrainian mental health care system, including inadequate infrastructure, unclear language, insufficient funding, imperfect regulation, and low public awareness. Given that conflict has increased the prevalence of post-traumatic stress disorder and other mental illnesses and created more barriers to receiving care, this question is particularly relevant in the current environment.

Both the experience of the ECHR and the practice of Germany and England indicate that modern law enforcement in the field of psychiatric care in Ukraine is the result of the integration of national norms with international ones. In situations involving the restriction of patients' rights, when it is necessary to find a balance between the interests of people and society, solid evidence, including a thorough analysis of medical and socio-psychological aspects, becomes the basis for making informed court decisions. In this context, the legal regulation of access to medical services and insurance programs is of particular importance, since it contributes not only to improving the quality of treatment but also to creating legal guarantees to protect the most vulnerable segments of the population. The introduction of European experience into domestic practice shows that social justice and the integrity of the legal system depend on an effective enforcement mechanism that allows society to effectively solve modern mental health problems.

To strengthen the legal control of psychiatric care in Ukraine, it is necessary to create a single normative act with clear definitions and procedures for protecting the rights of people with mental illness. Expanding insurance plans to cover mental health costs, building a network of day hospitals and outpatient clinics, and increasing funding for the mental health system are all important measures. Improving the training of judges and medical professionals, as well as introducing methodological proposals on evidence in cases of compulsory treatment, are also important steps for improving judicial practice.

In summary, engaging European expertise in mental health care will improve patient rights, reduce stigma and increase access to medical treatment. Harmonization of legislation with international standards, modernization of the financial and infrastructure base, as well as the introduction of effective judicial mechanisms will create a fair and effective mental health care system that will meet the challenges of modern society.

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