



## **Barriers to Legal Representation for Persons with Psychosocial Disabilities**

### **Introduction**

Research consistently shows that persons with mental health conditions and psychosocial disabilities are far more likely to experience violence and human rights abuses than to perpetrate them themselves. Across the world, many individuals with psychosocial disabilities endure serious human rights violations, including physical abuse, coercive treatment, discrimination, social exclusion, and denial of basic dignity, among other severe violations. Yet most never obtain justice.

One of the greatest barriers is the inability to secure legal representation in the first place. If a survivor cannot find a lawyer willing to hear and assess their case fairly, their journey toward justice effectively ends before it even begins.

This barrier becomes especially severe when a person with a psychosocial disability presents a story that appears, at first glance, to sound psychotic, paranoid, delusional, bizarre, or implausible to an ordinary listener. In such situations, many lawyers immediately dismiss the individual entirely, without examining whether genuine human rights abuses may still have occurred within the broader context of the case.

The following are fictionalized examples meant to illustrate the problem, but they are based on real-life cases.

### **Hypothetical Cases**

#### **Case A**

A man in his mid-twenties contacts a human rights advocate claiming that when he visited a gastroenterologist for stomach problems, he told the doctor that he believed his family was poisoning him. The doctor informed his family, after which he was involuntarily hospitalized in a psychiatric institution. During his hospitalization, he alleges that he was injected with antipsychotic medication while being told they were vitamins. Upon release, psychiatrists instructed his parents in front of him to contact the police if he refused psychiatric medication.

At home, the man insisted that he was not psychotic and refused treatment. Ongoing family conflict regarding his inability to work and provide for his family, together with his refusal to take medication, escalated into frequent arguments leading to physical abuse. According to his account, family members often restrained him with belts and chains, forcibly administered medication, and physically beat him up. He also experienced significant side effects from the medication, including substantial weight gain.

Years later, after struggling to find legal assistance, he located a lawyer willing to listen pro bono. However, after listening for only ten minutes, the lawyer abruptly dismissed him, advised him to continue psychiatric treatment, and ceased all communication.

Even if the man's belief about poisoning was delusional, several potentially serious human rights concerns still emerge from the narrative: involuntary hospitalization, physical assault, restraint, forced medication, possible deception regarding treatment, and potential breaches of medical confidentiality.

## **Case B**

A woman in her forties approaches a lawyer claiming that people throughout her city are conspiring to destroy her reputation and harass her. She alleges that groups of individuals stalk her at work and near her home, coordinate intimidation, and publicly humiliate her.

She describes incidents where she was expelled from shops and restaurants, mocked in public, physically harassed, spat on, and once even pulled by the hair. She explains these incidents within a broader conspiracy narrative that many listeners would consider implausible and delusional.

The lawyer listens to the whole story but later avoids all further communication with her.

Yet beneath the apparently psychotic narrative, there may still exist genuine abuses that deserve investigation. In reality, the woman may have developed a poor reputation in her community due to eccentric behavior. Businesses may have denied her service due to prejudice. Some individuals may indeed have harassed or assaulted her out of a tendency to bully those who have psychosocial disabilities.

Potential human rights concerns in this case include denial of services, physical assault, harassment, and degrading treatment of a vulnerable individual.

### **The Core Problem**

These examples demonstrate an important reality: even individuals experiencing severe psychosis, including hallucinations, delusions, paranoia, and bizarre thoughts, may simultaneously be victims of genuine human rights violations.

However, persons with psychosocial disabilities often face an additional burden that other victims do not. Most victims approach a lawyer expecting the lawyer to investigate facts and gather evidence for court. By contrast, a person with a psychosocial disability must first convince the lawyer that they are credible before the lawyer will even consider investigating the case. In practice, they are forced to “prove” themselves twice: first to their own lawyer, and then to the legal system.

When lawyers dismiss individuals immediately as “crazy,” “delusional,” or “unreliable,” genuine abuses may remain entirely uninvestigated.

## **Barriers to Legal Representation in Bangladesh**

### **Online Legal Advice Forums**

Many people first seek help through online legal advice forums. However, most such forums are jurisdiction-specific and are designed for simple legal advice. They are not designed for complex human rights cases involving psychosocial disability.

Individuals from Bangladesh often find that most such international forums refuse to engage with their cases because they fall outside the relevant jurisdiction. Meanwhile, in Bangladeshi forums, some users report being ignored, removed, or blocked when their narratives appear psychotic.

As a result, many individuals encounter their first barrier to justice at the very first point of outreach.

### **Local Lawyers**

A major challenge is that many lawyers immediately disengage when hearing a story that sounds psychotic or implausible. Yet, as illustrated above, even individuals experiencing psychosis may still have legitimate legal claims involving human rights violations, including assault, coercion, discrimination, unlawful detention, and many others.

Financial barriers further compound the problem. Many persons with psychosocial disabilities are unemployed, underemployed, or economically dependent on family members. Legal fees are therefore often unaffordable, leaving pro bono representation as the only realistic option.

However, pro bono opportunities are limited. Lawyers generally prioritize cases with strategic impact or strong reputational value. Most cases involving psychosocial disability are therefore difficult to obtain support for.

### **NGOs and Human Rights Organizations**

Human rights NGOs in Bangladesh also face limited capacity and tend to prioritize strategic litigation. Intake staff or lawyers may similarly dismiss cases that initially appear psychotic or implausible, without deeper assessment. Consequently, survivors may find themselves excluded even from institutions designed to protect vulnerable populations.

### **Government Legal Aid**

Bangladesh has state-funded legal aid mechanisms for low-income individuals and persons with disabilities. However, the income threshold is often too low for individuals who earn more than the threshold but still not enough to realistically afford legal representation. Moreover, the same credibility barriers may arise during intake processes, particularly where staff may dismiss cases that initially appear psychotic or implausible.

### **Financial and Structural Barriers**

#### **Raising Legal Funds**

Bangladesh has a very limited culture of crowdfunding legal expenses. Public fundraising is often viewed as socially shameful, especially in matters involving mental illness, which itself carries severe stigma affecting both individuals and families.

Even internationally, fundraising for cases involving psychosis or complex mental health narratives is extremely difficult. Many potential donors may simply dismiss such stories as unbelievable.

In addition, Bangladesh's foreign donations regulations create legal and bureaucratic uncertainty regarding the receipt of overseas funds for human rights work or personal legal assistance. For receiving funds for human rights work, whether in cash or in kind, individuals generally require an application process and official approval before donations are permitted. At the same time, platforms such as PayPal and Stripe are unavailable in Bangladesh, which means people are often unable even to register for international crowdfunding platforms such as GoFundMe.

#### **Restrictions on International Payments**

Many survivors may seek international expertise, including foreign lawyers, psychologists, or other technical experts. However, Bangladesh maintains strict foreign exchange controls. Sending funds abroad is heavily restricted, and generally only certain e-commerce transactions are allowed up to a yearly amount per person and subject to per-transaction limits.

Even then, a passport and a dual-currency card are required, the quota must be obtained from a bank, and transactions are monitored. Transactions bypassing the regulations carry severe legal penalties.

#### **Lack of Self-Help Legal Resources**

Unlike some countries where accessible self-help legal literature exists for ordinary citizens, Bangladesh has very few plain-language legal resources aimed at laypersons. Most legal texts are written for legal professionals in highly technical language.

There are virtually no accessible resources specifically designed to help persons with psychosocial disabilities understand and assert their rights.

### **Common Reasons Lawyers Refuse Such Cases**

Lawyers commonly express concerns such as:

- Persons with psychosis are unpleasant to work with.
- They may distrust the lawyer or believe the lawyer is part of a conspiracy.
- They may be unreliable witnesses and damage their own case.
- The case may damage the lawyer's reputation.
- They may be unable to pay.
- The narratives appear irrational or false.

While some concerns may be understandable from a practical standpoint, many lawyers lack training in distinguishing between psychotic symptoms and factual allegations embedded within broader narratives. As a result, the default response often becomes immediate rejection and complete disengagement. This creates a severe access-to-justice gap for one of society's most vulnerable populations.

### **Recommendations**

The following recommendations are offered from a human rights and access-to-justice perspective:

- Lawyers should listen to the full narrative before making conclusions.
- Legal professionals should attempt to separate potentially imagined elements from factual allegations that may constitute genuine legal claims.
- Lawyers should maintain an open and non-prejudicial approach, recognizing that individuals with psychosocial disabilities can still experience real abuse.
- Clients should be clearly informed which parts of a case may be legally actionable, which parts require further evidence, and which claims may not be legally sustainable.
- Lawyers should avoid abruptly abandoning clients, even where they do not believe the entire narrative.
- Maintaining respectful communication and encouraging concurrent psychological support can significantly reduce distress and feelings of helplessness.
- Greater collaboration is needed between lawyers, mental health professionals, disability-rights advocates, and human rights organizations to develop practical guidelines for lawyers on how to handle cases involving psychosocial disability and psychosis-related narratives.

### **Conclusion**

Persons with psychosocial disabilities face unique and often invisible barriers to justice. Even where genuine human rights violations occur, they may never be investigated because the survivor is dismissed as inherently unreliable before the legal process even begins.

Access to justice requires more than laws on paper. It requires approaches and mindsets capable of listening carefully, distinguishing symptoms from facts, and treating persons with psychosocial disabilities with dignity, fairness, and humanity.