



#WhatWENeed 2022

Spotlight interview with Dorothy Gould

Transcript

Richa, TCI: Hello and welcome to the TCI #WhatWENeed Spotlight Interview Series. We sincerely thank you for being available for this session and giving us your time. I would now request you to please tell us your name, where do you live and what do you do?

Dorothy, Liberation: I am Dorothy Gould and I live in London, in the UK. I very much see myself as a survivor of mental health services and also institutionalisation. Just to say, my main work nowadays is coordinating a group called Liberation. It is a user led, community based group for people with experience of mental distress and trauma. It's aim is to promote the UN Convention on the Rights of Disabled People.

Richa, TCI: Thank you, Dorothy. Thank you for that introduction. As you already know that the UN guidelines on deinstitutionalization have been officially adopted and deinstitutionalization is a topic our movement of persons with psychosocial disabilities have been working on for decades. Could you please tell us what you and your organization Liberation, have been doing in your work and advocacy to promote deinstitutionalization in your country?

Dorothy, Liberation: Thank you for that. Just for the audience to know, in the UK, we tend to use mental distress or trauma and unusual experiences. When I use those words, that's what we're using for psychosocial disability. This is just to make sure everyone's following that. If I just say a little bit more about Liberation because that's relevant to deinstitutionalization in England. I set it up because of the need for a group led by people in mental distress, which takes a lead in championing the UN convention in England. Just because it's so important we have rights under this convention and that those rights are both recognized and implemented. At the moment, that just has not been happening. Deinstitutionalization obviously is very much part of that because it is absolutely fundamental to the Convention. At Liberation, we have been working really hard to promote it.

To tell you some of the things that we've been doing, a very first step has been to make the Convention better known. Government ministers themselves can lack awareness of it or not really understand it, even though UK government has actually signed up to the treaty. The same is true of many service commissioners and service providers. It is a bit shocking, really. Media in England also draws heavily on a medical model as opposed to a human rights model. Also, in terms of the general public, including many people using mental health services, often do not know about the Convention at all and that's really worrying. That's why the first step has been to try and make the convention better known and better understood. It is actually a really uphill task to try and achieve full human rights because this country really is still at a very basic level. I know that the UK government likes to market itself as a world leader in terms of human rights, but I have to say that really isn't the reality. This country's history of colonization is still a stain on this Empire to this day. The government continues to contravene many basic human rights, particularly those set out in the UN convention.

Another key issue for us in the UK is the fact that UK law is based on European Convention on Human Rights, not on the UN Convention on Rights of Disabled People. The European Convention is important obviously but a big problem is that people in this country think that Convention is enough. It is not. Liberation is challenging that. To give one example, the European Convention still allows us to be detained in psychiatric hospitals against our will and forcibly treated. The current government plan, so far from moving forwards to the Convention on Rights of Disabled People, they are actually planning to reassess even the rights we have under our Human Rights Act, and that's the act which is based on European Convention. So, that's a big issue, trying to explain that when we're talking about rights, we're talking about far more fundamental rights still than the European Convention.

A key aspect of what we're doing at the moment at Liberation is challenging current mental health law in England and the planned 'reform' of it. Because planned reform falls well short of giving full human rights to those who are in mental distress or those with unusual experiences. The fact that the reform does fall so short is just heart-breaking because it is really a missed opportunity to give us rights, our full rights, after being treated for years as second class citizens. To try and counter it, what we are doing is using submissions to the government and presentations at conferences representing key groups. Unfortunately, most professional groups essentially support mental health law as it is. We do joint work with other user led groups, sympathetic allies, approaches to the media and other channels like this to promote a radically different approach to reform of mental health law. These are some of our messages. We are challenging the medicalization of mental distress and unusual experiences. It is said that rates of mental illness in the UK have been increasing rapidly but the reality is that people are actually experiencing very natural human reactions to trauma. During the COVID pandemic, it is

not that more and more people have mysteriously been developing brain disorders. Increased trauma during the pandemic has been a very natural human reaction to the pandemic and also some poor handling of it by the UK government. It shouldn't be medicalised.

Also, the ever increasing growth in socioeconomic injustice in the UK is appalling and it's causing huge trauma. Our increasingly right wing government needs to focus on resolving this instead of promoting the idea that many of us just really lack resilience and said that our trauma is an individual problem. We are also challenging the fact that current law and planned reform are still based on a paternalistic model. The assumption that we need protection and that this can therefore justify overruling our human rights. We are challenging false assumptions about risk. The idea that we can be detained because of risks to ourselves or others. There is not adequate research evidence in any case that detention even has any impact on risk but that fact somehow just gets bypassed. It also bypasses the fact that we're all far more at risk from other people than we are any risk to other people. In the UK, the reality is that horrifying examples of abuse and psychiatric hospitals and of hate crimes against us within society as a whole have been emerging more and more clearly. We need reparations because of this.

We are challenging the fact that current mental health law and planned reform are still based on a mental capacity model instead of recognizing our legal capacity in line with Article 12 of the UN Convention on the Rights of Disabled People. It is just so very wrong that current law and planned reform of it are still using mental capacity to justify detaining us against our will and forcibly treating us. We are calling on the UK government not to use community services just to replicate a medical model. The reason we are also including that in our messages is because in the community as well, medical services are dominant and still receive most funding. It is also because the government doesn't seem to have any real concept of rights based community services which enable us to live independently in the community just like anyone else.

We are also continuing to call on the government to address intersectional issues in all aspects of its approach to mental health reform. That's because the draft mental health bill falls well short of addressing particular issues for people in mental distress from racialized communities. The inhumane approach which the government is taking to asylum seekers and refugees can only worsen the whole situation. There is a worrying lack of emphasis on other intersectional issues for example, gender, gender identity, sexual orientation, older age. It seems very much on that sphere as well that we are not really seen as people. We're just sort of somehow one emotionless mass, which we're not. Those sort of some things I'd really like to say on what work we're doing.

Richa, TCI: Thank you, Dorothy. Thank you for giving a comprehensive view of all that you've been doing through your group and your advocacy and also informing us of what is the current situation in the UK. Thank you for that. Moving on to the last question, if you could please tell us, how do you plan to use the UN guidelines on deinstitutionalisation in your advocacy?

Dorothy, Liberation: Thank you very much for that question as well. In many ways we've been doing that already. When the very helpful guidelines came out, we found that they very usefully and very well captured a lot of what we are doing already. The challenges that I've just been outlining in many ways also pick up some key aspects of the guidelines. I've also been doing and will continue doing is that I've circulated the guidelines among Liberation members because I want to be really sure they are aware of them and in turn will build on that to circulate them more widely so that they're better known among the government itself, people who provide services and to the general public. The another thing we've actually already done is including a call to the UK government to use the guidelines and we've done that in our submission to the Government about the draft mental health bill. In other words, we're calling on the government to make sure that mental health reform does respect deinstitutionalization to the full, in line with those guidelines. One other thing I've just had the opportunity to do, and this will come out in the spring, is to write an article for the British Association of Social Workers, and that will come out in their journal in the spring. It is a challenge to the British Association of Social Workers to make full use of deinstitutionalization approach, which in turn of course will mean quite a fundamental change in their guidelines. It would be true to say that most social workers in this country are currently supporting an essentially institutional approach because they're essentially supporting the Mental Health Act. We will also be using the guidelines to continue challenging the UK government about it's very inadequate reform of mental health law. The crucial need for reform to bring a complete end to all forms of institutionalisation. It is really important we have our full human rights and we are not going to give up until we have got them.

Richa, TCI: Thank you, Dorothy. That's so inspiring to listen to all these steps that you've already taken and that you're planning to do. Thank you for such clear responses. We would like to thank you again for giving us the time to do these interviews and telling us about your work and all the very best for all these tasks ahead that you've outlined. Thank you.

Dorothy, Liberation: Thank you. It's really good to have the link with TCI. Thank you.