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VOICES

Newsletter of the Psychiatric Survivor Archives of Toronto

Many thanks to everyone who joined us for our 8th Annual General Meeting! Among other exciting activities, this past year saw the development and inauguration of our Non-Discrimination/Oppression Statement, which we proudly present below.

PSAT Non-Discrimination/Oppression Statement By-Law Addendum, July 2013

The Psychiatric Survivor Archives of Toronto is a grassroots non-profit organization of psychiatric survivors, allies, and supporters. PSAT is committed to participatory democracy, which includes an elected Board of Directors. PSAT is also dedicated to the principle and practice of accessibility—making sure that psychiatric survivors, students, researchers and other interested people have reasonable access to our archives. Consistent with its dedication to accessibility, PSAT recognizes, respects and supports the human rights of everyone—particularly respect and dignity.

PSAT completely rejects and condemns all forms of discrimination and bigotry, including but not limited to mentalism, ableism, sanism, racism, sexism, heterosexism, homophobia, and transphobia. PSAT does not and will not tolerate any discrimination against vulnerable people who self-identify as psychiatric survivors; mental health consumers; people with disabilities; homeless and economically disadvantaged people; lesbian, gay, bisexual, transgender and two-spirited people; indigenous people; people of colour; immigrants and refugees; or any marginalized people, however they identify.

No person shall be discriminated against or excluded within PSAT, including its general members, board members, archivists, volunteers, and archive volunteers and researchers. This policy is informed by the Canadian Human Rights Act (RSC, 1985, c. H-6) and the Canadian Charter of Rights and Freedoms. However, PSAT recognizes and respects diverse approaches to social justice and acknowledges the limitations of rights-based legal traditions. All members of PSAT will respect this policy and its spirit, as well as PSAT's rules of membership and access.

Any violations, complaints, or comments regarding this statement or its intent should be addressed to PSAT's Board of Directors at the above address or by email. PSAT will promptly review any and all complaints in an open and democratic manner. ■



Everyone Makes a Mark



CANADIAN MUSEUM FOR
HUMAN RIGHTS
MUSÉE CANADIEN POUR LES
DROITS DE LA PERSONNE

Canada's New National Museum to House Ryerson's Groundbreaking Exhibit on Disability Rights

A media event was held at Ryerson University on Friday April 25th to announce a partnership with the Canadian Museum for Human Rights ([CMHR](#)), including loan of a groundbreaking [exhibit](#) on disability rights, titled "Out from Under." Canada's new national museum opens September 20th 2014 in Winnipeg.

Kathryn Church and Melanie Panitch, [School of Disability Studies](#) and curatorial team; Usha George, dean of Ryerson's Faculty of Community Services; and Angela Cassie, director of CMHR Communications and External Relations, provided welcoming remarks. Exhibitors also presented short descriptions of their contributions to the exhibit, and members of the arts community discussed the exhibit's impact on disability rights.

To view PSAT Board Member Ruth Ruth Stackhouse's contribution to this innovative exhibit, see <http://www.ryerson.ca/ofu/exhibits/labouring.html>

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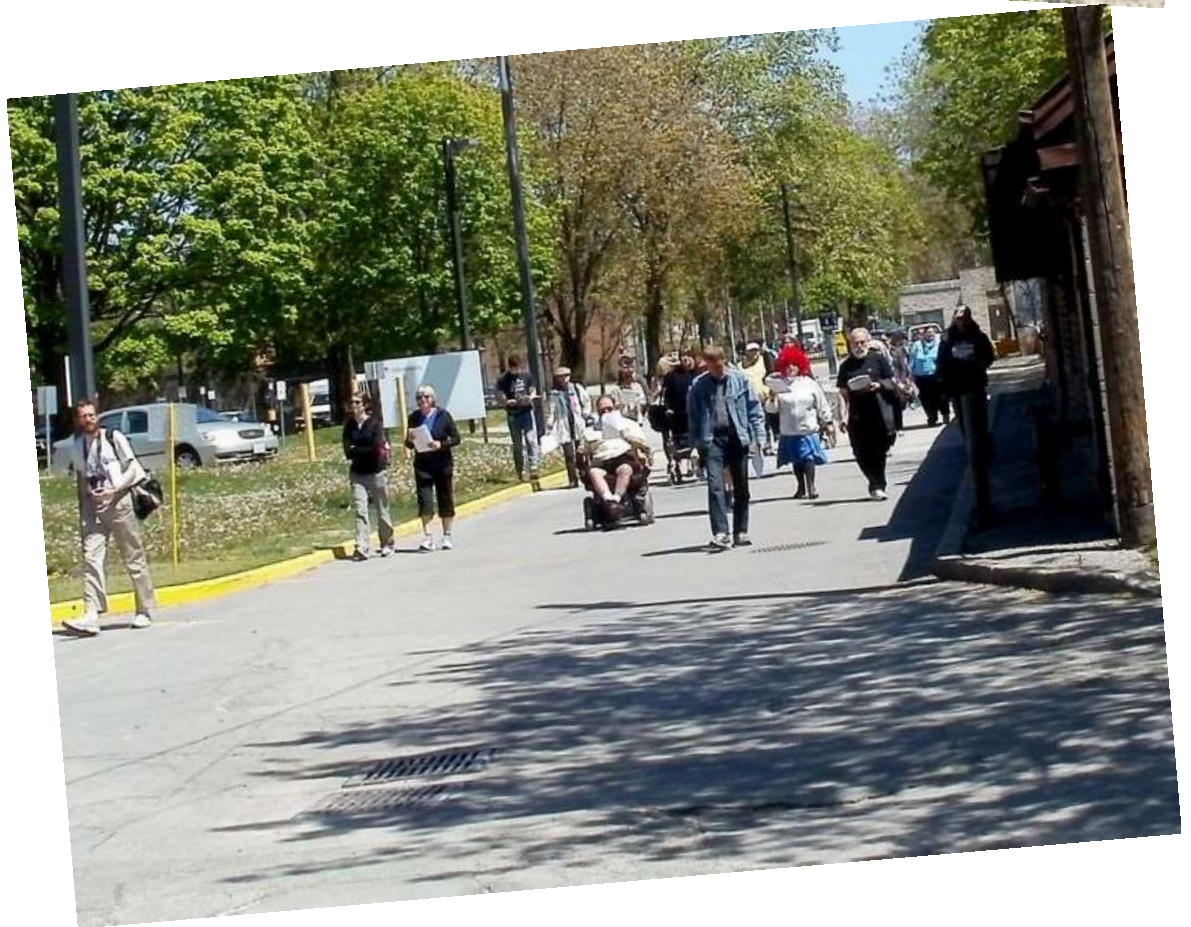
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The Walls Are Alive With The Sounds Of Mad People

On May 4th, a crowd gathered at the southwest corner of Queen Street West and Shaw Street.

Why? For the Friendly Spike Theatre

Band's tour of the psychiatric patient-built wall around the former Toronto Asylum, of course! Part of Jane's Walk 2014, Friendly Spike led a theatrical performance that brought to life not only Mad people's history but the City of Toronto's history. The Band gratefully acknowledges the support of the Friendly Spike Theatre Angels and CanadaHelps.org.



DEAR MAINSTREAM MEDIA...

Unpublished Letters of a Social Justice Activist

By Don Weitz

Dear *Toronto Star*,
Re: "Jury urges changes to training following homicide verdict," (2/14/14). Since when are police officers trained to determine or diagnose the "mental state" of a person experiencing an emotional or personal crisis? They didn't use de-escalation or "talk down" tactics when they "encountered" and shot Sylvia Klibingaitis, Michael Eligon, and Reyal Jardine-Douglas in the last two years. Nevertheless, we're expected to believe and trust police officers' subjective judgments of people's "mental states" when they're in crisis. Given that police officers are routinely trained in use-of-force tactics and support psychiatry's discredited medical model of "mental illness," this belief and recommendation is completely naïve. The message of one jury recommendation into these recent deaths states, "Officers should take into account whether a person is in crisis and not just his or her behaviour when encountering a person with a weapon..."

Another recommendation calls for expanding the many Mobile Crisis Intervention Teams (MCITs) currently spread across the GTA, but fails to mention the possibility of providing nonmedical community alternatives if the MCITs were staffed with psychiatric survivors, street nurses, other community health workers specially trained and qualified in crisis and trauma counselling.

It's time to start including psychiatric survivors and activists in the solution, and stop blaming, demonizing and imprisoning us for the alarming growth of "mental illness" and violence manufactured and promoted by psychiatry and Big Pharma.



To Veronica Sutherland, Project Coordinator, Canadian Association of Chiefs of Police:

I have reconsidered and decided to cancel my recent application for a registration fee subsidy for the national conference "Balancing Individual Safety, Community Safety and Quality of Life: A Conference for Improving Interactions with People with Mental Illness," to be held in Toronto on March 24-26, 2014. I therefore will not attend this conference, which is co-sponsored by the Canadian Association of Chiefs of Police and the Mental Health Commission of Canada.

The major reason why I am canceling my application and refusing to attend this conference is the conference organizers' failure to invite more psychiatric survivors to present or speak, despite the fact that many survivors are qualified by personal experience, knowledge, activism, and advocacy to speak on vital issues such as the criminalization of the "the mentally ill," police shootings and institutional violence against the "mentally ill," civil rights violations by police and mental health professionals, inquest jury recommendations, crisis counseling, alternatives to mobile crisis intervention teams, non-violent community options. I note that "lead facilitator" Pat Capponi is the only psychiatric survivor listed as a

presenter at the workshop focused on stigma. The conference organizers' exclusion of other psychiatric survivors, mad people, and other critics, such as advocate Jennifer Chambers and civil rights lawyers, as presenters or featured speakers at this conference is inexcusable and insulting—simply put, it is bigotry. Since this conference is disproportionately weighted in favor of the police, mental health professionals, and bureaucrats, it is biased against the perspectives of those of us who have actually been in the system.

If I were to attend this conference, I would be betraying my commitment to the principles of participant democracy, inclusion, and respect for the civil and human rights of psychiatric survivors—my brothers and sisters—who are routinely and unjustly demonized, criminalized, and marginalized by mental health professionals, the police, and the mainstream corporate media. This conference has violated these principles.

I hope future and similar conferences on the police, prisons, and the psychiatric system in Canada will be inclusive and respectful of the informed views and perspectives of psychiatric survivors, mad people, antipsychiatry activists, civil rights human rights advocates, and other critics.

To the *Toronto Star* Letters Editor:
Congratulations to *Star* journalist Jennifer Pagliaro for her riveting exposé of the horrific police shooting-killing, incompetent detective investigation and unlawful house search of Michael MacIsaac. MacIsaac suffered from temporal lobe epilepsy, a major neurological condition and disability before he died in hospital with at least three bullet wounds on December 2 last year ("WHY?", 3/23/14). "Why?" is a damn good question. The Durham police officer who shot three or four bullets into 47-year old MacIsaac, an innocent civilian, didn't bother talking with him before shooting him. This unidentified officer should be publicly named, immediately suspended without pay, and criminally charged by the SIU with second-degree murder.

It is obvious, and has been for many years, that the vast majority of police officers, including this anonymous officer, lack sufficient training, knowledge

and sensitivity in dealing with people who are labeled "mentally ill" or "emotionally disturbed"—human beings who are in fact enduring personal crises. Before shooting or tasing people with "non-lethal" weapons, police officers fail to de-escalate crises with non-violent and non-threatening dialogue.

Last year, the Toronto Police Services Board dismissed my constructive recommendation in a written deputation that called for establishing and funding a pilot project of civilian-controlled Community Crisis Response Teams specially trained in trauma counselling, crisis prevention, and de-escalation methods. Too bad my recommendation proved too threatening or 'unrealistic' to the Board.

Dear *Toronto Star*,
Your reporters' investigations into Ontario nursing homes, particularly the forced psychiatric drugging of elderly women disabled by dementia and other medical conditions, are deeply disturbing ("They Tried to Quiet Her Down"; "Family says drug killed 'Aunt Gerry'", 4/15/14).

Prescribing off-label, brain-damaging, and often deadly psychiatric drugs such as Seroquel and Zyprexa to elderly nursing home residents is unethical pacification and medical malpractice—in fact, it is elder abuse. Forced drugging in nursing homes, "mental health centres" and prisons is a national crime driven by ageism, sexism, and social control. The decades-old abuse of thousands of extremely vulnerable brothers and sisters is inexcusable, a national shame.

Worse yet, the drugging of elderly people ("seniors") is being condoned, committed and covered up by government ministers and geriatric psychiatrists—many of whom should be charged with assault, sued for medical malpractice and/or fired. Immediate and coordinated action by Ontario Health Minister Deb Matthews is long overdue.

Prescribing off-label psychiatric drugs, particularly neuroleptics and antidepressants, in all nursing and other long-term care homes should be immediately banned. It is unethical, it discriminates against elderly and disabled citizens, and it violates their human rights. ■