

Rebellious Psychiatry: Where Mental Health Meets Social Justice

September 28, 2018

Harkness Auditorium Yale University School of Medicine New Haven, CT

medicine.yale.edu/psychiatry/rebpsych #rebpsych

Conference Co-Sponsors:

- **The Bertram H. Roberts Memorial Fund** was established in 1955 to provide support for medical students and residents to complete projects in the field of social psychiatry.
- The Yale Afro-American Cultural Center, established in 1969, serves to foster a vibrant community of Black scholar-leaders and others who are committed to preserving and promoting the historical, cultural, intellectual and social movement traditions of the African Diaspora at Yale, in New Haven, and throughout the world.
- The Connecticut Psychiatric Society is a District Branch of the American Psychiatric Association that advocates for patients and those who care for them, promotes and disseminates professional values, supports education and career advancement of psychiatrists, and strengthens the scientific basis of psychiatric diagnosis and treatment.
- **History, Health, and Humanities (HHH)** is an interdisciplinary reading group that strives to create an environment where health professional students, clinicians, scholars in the humanities, and members of the broader community explore social justice in medicine through a critical historical lens.
- The Section of the History of Medicine and Program in the History of Science and Medicine seek to understand medical and scientific ideas, practices, and institutions in their broad social and cultural contexts, and to provide intellectual tools to engage with the challenges faced by contemporary medicine and science.
- The Program for the Humanities on Medicine at the Yale School of Medicine offers
 programming that fosters a provocative and meaningful approach to the art and practice of
 medicine. They collaborate with a wide range of institutions and schools across campus to
 promote a diverse persepctive on the medical humanities.

Trainee Organizers:

Faculty Advisors:

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The organizers wish to thank Gerold Lopez and the Rebellious Lawyering conference at Yale Law School for inspiring the RebPsych conferences.

2018 Conference Theme

Multiple Justices

In its inaugural year, the Rebellious Psychiatry conference brought together activists, artists, consumers, mental health professionals, and students to form a strong, interdisciplinary coalition for social justice. Our conversations at RebPsych2017 helped us understand that there are multiple forms of justice that operate in the field of mental health. This year we build upon that foundation, seeking to explore and unite these "multiple justices." For example, two paradigms of justice emerged last year: one seeks to expand access to care and address mental health disparities, and another critiques the history and the very practice of mental health care. RebPsych2018 will interrogate the various, and sometimes conflicting, conceptions of justice. What forms of justice are currently mobilized and supported within the field of mental health and by mental health institutions? What forms of justice are excluded? How could these multiple justices inform each other in a more integrated manner? How do mental health care providers act as a credible force in advancing justice? When it comes to activism, is there a boundary between the professional and the political, and if so, when and how was this boundary conceived?

For this year's conference, RebPsych solicited proposals from a diverse array of people, including health professionals, activists, community organizers, scholars, patients, artists, students, and writers. The resulting program includes a rich variety of traditional academic papers, panels, discussions of activist work, and artistic projects. As always, we hope to foster dialogue, partnerships, and sharing of ideas that will continue long after the conference is over.

Keynote Speaker

10:15 to 11:45 am Harkness Auditorium 333 Cedar St.

Mychal Denzel Smith



Mychal Denzel Smith is the New York Times bestselling author of *Invisible Man*, *Got the Whole World Watching* (Nation Books, 2016) and a 2017 NAACP Image Award Nominee. His work has appeared, online and in print, in publications such as the Washington Post, New Republic, New York Times Book Review, Harper's, The Nation, The Atlantic, Paris Review, Complex, GQ, Guernica, Literary Hub, Pitchfork, Buzzfeed, The Guardian, and many others. He has appeared as a commentator on MSNBC, CNN, Democracy NOW!, NPR, and numerous other national/local radio and television outlets. He is featured in and was a consulting producer for "Rest in Power: The Trayvon Martin Story," the Paramount Network docuseries executive produced by Jay-Z. In 2014 and 2016, TheRoot.com named him one of the 100 Most Influential African-Americans in their annual The Root 100 list. He is a fellow at The Nation Institute.

Overview of Events

	Friday September 28
8:00-8:30 am	Registration
8:30-9:00 am	Opening Remarks
9:00-10:00 am	Parallel Session 1
10:00-10:15 am	Coffee Break
10:15-11:45 am	Keynote Address
11:45-12:30 pm	Lunch Break
12:30-2:10 pm	Parallel Session 2
2:10-2:20 pm	Coffee Break
2:20-4:00 pm	Parallel Session 3
4:00-4:30 pm	Closing Session

Detailed Program

8:00-8:30 am	Registration
	Harkness Auditorium, 333 Cedar St.

- 8:30-9:00 am Opening Remarks Harkness Auditorium, 333 Cedar St.
- 9:00-10:00 am Parallel Session 1

Session 1A Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

On Breaking the Taboo of Politics

Caitlin Rippey, *PGY3 Psychiatry, University of Washington* **Jai Gandhi**, *Psychosomatic Fellow, University of Washington*

Session 1B Boyer Center for Molecular Medicine, Rm 206/208 (295 Congress Ave)

Institutional Racism in Psychiatry: How far have we truly come?

Jessica Isom, PGY4 Psychiatry, Yale School of Medicine

Incarnate Histiography: Narrative, Structural Violence, and Justice

Kevin J. Gutierrez, MS4, Sidney Kimmel Medical College

Session 1C Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

#WallofResistance: Public/Protest Art Project Workship

Nichole Roxas, PGY1 Psychiatry, Yale School of Medicine

Session 1D Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

When Life Hands You Lemons: Lemonade in Harlem

Maciel Campos, Clinical Psychologist, Children's Hospital of New York-Presbyterian/Columbia University Medical Center Madeline Solano, Clinical Social Worker, Children's Hospital of New York-Presbyterian/Columbia University Medical Center Joseph Hatchett, Case Manager, Children's Hospital of New York-Presbyterian/Columbia University Medical Center

10:00-10:15 am Coffee Break

10:15-11:45 am Keynote Address: The Bertram H. Roberts Lecture *Harkness Auditorium, 333 Cedar St.*

A Vision of Social Justice for Mental Health Care

Mychal Denzel Smith New York Times bestselling author of <u>Invisible Man</u> and <u>Got The Whole World</u> <u>Watching: A Young Black Man's Education</u>

11:45-12:30 pm Lunch Break

12:30-2:10 pm Parallel Session 2

Session 2A Cohen Auditorium, NIHB E 02 (230 S. Frontage Rd)

Doctoring While Black: Confronting Racial Violence Against Black Physicians

J.Corey Williams, Child and Adolescent Psychiatry Fellow, U.Penn- Children's Hospital of Philadelphia

Racial Loneliness in Analytically-Informed Social Work Training

Brianna Suslovic, Smith College School for Social Work

Session 2B

Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

Undocumented and Unafraid

Faria Kamal, Postdoctoral Fellow, Yale University Department of Psychiatry

Normalization of Death in the Refugee Experience

Manuel Cabrera, Columbia University

Session 2C Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

Mental Health Trialogue: Real Perspectives from Family Members, Prescribers, and Peers

Jessie Roth, Institute for the Development of Human Arts Jazmine Russell, Institute for the Development of Human Arts Xinlin Chen, Institute for the Development of Human Arts

Partnering With Community Organizers to Create an Anti-Oppression Training for Mental Health Providers

Matthew Perry, MS3, Brown Medical School

Session 2D Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

Climate Change, Displacement, and Mental Health

Maya Prabhu, Assistant Professor of Psychiatry, Yale School of Medicine Miraj U. Desai, Associate Research Scientist and Faculty Member Program for Recovery and Community Health Yale School of Medicine Kate Burrows, Yale School of Forestry and Environmental Studies

2:10-2:20 pm Break

2:20-4:00 pm Parallel Session 3

Session 3A

Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

Justice and Legal Activism in the History of Psychiatry

Kylie Smith, Assistant Professor, Emory University & Emory College Daniel LaChance, Assistant Professor, Emory University & Emory College Susan Youngblood Ashmore, Professor, Emory University & Emory College

Session 3B

Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

Transgenerational Trauma and the Laotian Diaspora: Stories, Impacts, and Ideas

Paul Bryant, Forensic, Child, Adolescent & Adult Psychiatrist Nay Saysourinho, Writer and Kundiman Fellow Somdeng Danny Thongsy, Former Yuri Kochiyama Fellow - Asian Law Caucus

Session 3C

Cohen Auditorium, NIHB E 02 (230 S. Frontage Rd)

Direct Experience: Challenging Psychiatric Authority and Inclusive Meaning Making

Part 1 of 3: "One Thorn of Experience Is Worth a Whole Wilderness of Warning": Experiential Training in Psychiatry, How Far Can We Go?

Rebecca Miller, Yale University Department of Psychiatry **Erika Carr**, Yale University Department of Psychiatry

Part 2 of 3: The Mad Underground: A New Wave of Mad Resistance

Jonah Bossewitch, Vibrant Emotional Health

Part 3 of 3: Beyond Recovery: Dangerous Gifts and Transformative Mutual Aid Practices

Sascha DuBrul, Institute for the Development of Human Arts

Session 3D Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

Critique and Reform: Moving Global Mental Health Toward a Rights-Based Approach

Justin M. Karter, UMass Boston, Department of School and Counseling Psychology Zenobia Morrill, UMass Boston, Department of School and Counseling Psychology Lisa Cosgrove, UMass Boston, Department of School and Counseling Psychology

Stigma as a Perpetuating Force in the HIV and Mental Illness Syndemic in Botswana

Tim Becker, MS4, Penn Mental Health AIDS Research Center

4:00-4:30 pm Closing Session Harkness Auditorium, 333 Cedar St.

Abstracts for Parallel Sessions

Parallel 1A Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

On Breaking the Taboo of Politics

Presenters: Caitlin Rippey PGY3, University of Washington Department of Psychiatry Jai Gandhi Psychosomatic fellow, University of Washington Department of Psychiatry

Abstract:

As politicized psychiatrists, we perceive a double bind. In our clinical work we are confronted on a daily basis with the ways that systems of oppression damage people's mental well-being, stymie access to healing, and suppress indigenous and alternative healing modalities. In our political and organizing work, we see how being engaged in the struggle for collective liberation can be intrinsically healing, in addition to the larger work of totally undoing these systems of oppression. The desire to radically transform mental health care and bring psychiatry into alignment with the goal of collective liberation, runs up against the deep taboo of politics within medicine, within psychiatry, and within medical institutions. In this talk we plan to discuss ways of breaking this taboo, particularly targeted for those who choose to do their clinical work within mainstream academic or community organizations. We will draw on moral philosophy, theories of personal and institutional change, and social justice history to learn lessons and build courage for those working to change the system from within. We will engage the audience in an interactive discussion about the ethical considerations of the politically engaged professional, and whether there are legitimate or useful limits to politicization within the field.

Parallel 1B Boyer Center for Molecular Medicine, Rm 206/208 (295 Congress Ave)

Institutional Racism in Psychiatry: How Far Have We Truly Come?

Presenter: Jessica Isom

PGY4, Yale University Department of Psychiatry School of Medicine

Abstract:

This presentation will highlight the findings of the seminal 1970s paper entitled Institutional racism in mental health care that defined institutional racism in terms of self-perpetuating barriers to blacks' participation as equals in all areas of psychiatry. Its authors review the influence of white racism on the image of the black patient, neglected problem areas, treatment accessibility, community mental health, research, and the professional functioning of psychiatrists. These analyses lead to specific recommendations for new institutionalized practices to be supported by the white power structure of psychiatry if eradication of racism in psychiatry is to be accomplished. In 2018, nearly 5 decades later, the presentation will review whether we've succeeded in the outlined recommendations and necessary areas for improvement as it relates to New Haven residents representative of a sizable urban demographic.

Incarnate Historiography: Narrative, Structural Violence, and Justice

Presenter: Kevin J. Gutierrez, Medical Student, Sidney Kimmel Medical College at Thomas Jefferson University

Abstract:

Within the fields of critical race theory and postcolonial theory, the concept of "incarnate historiography" asserts that history is written uniquely onto the bodies of marginalized individuals. Structural violence is inflicted upon the bodies and psyches of individuals at the margins of society or those who occupy liminal spaces of belonging. It is believed then that "mental illness" in marginalized individuals is less individual entity and process, and more accurately a symptom of structural pathology.

Psychiatry reinscribes these violences when the patient's narrative and its elicitation are not situated within a structural pathology. This presentation will examine the concept of incarnate historiography in addition to other theories of Otherness, and will present an example patient case. Ultimately, this presentation will demonstrate that the just practice of psychiatry is rooted in the practitioner's responsibility to situate the individual uniquely in relation to histories of structural violence.

Parallel 1C Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

#WallofResistance: Public/Protest Art Project Workshop

Presenter: Nichole Roxas

PGY1, Yale University Department of Psychiatry Resident

Abstract:

In spring 2017, Harvard, Lesley University, and Massachusetts College of Art and Design students, artists, and activists came together to envision, build, and unveil a 10' by 24' public art project entitled "The Wall of Resistance." Borne out of their fears and hopes during the current political climate, its creation asserted solidarity through our common humanity. I'd like to use this workshop as an opportunity to reflect on the process of seeing the project to fruition with illustrative photos and quotes from my vantage point as the Healthcare Panel Wall Coordinator and its ultimate designs for the 'suffering as a critique' and fears side of the wall as well as the "hope as resistance" side of the wall. Then, I intend to transition to individual, small group, and large group exercises to draw out the most pressing issues for the audience and try to brainstorm a public art project that resonates with RebPsych, informed by my peers' wisdom as those who oversaw the #WallofResistance moving parts as a whole. My hope is that the conversations, relationships, resources, and ideas from this workshop will one day lead to a public art project inspired and created by and for the RebPsych community.

Parallel 1D Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

When Life Hands You Lemons: Lemonade in Harlem

Presenters: Madeline Solano Clinical Social Worker, Children's Hospital of New York-Presbyterian/Columbia University Medical Center Maciel Campos Clinical Psychologist, Children's Hospital of New York-Presbyterian/Columbia University Medical Center

Joseph Hatchett

Case Manager, Children's Hospital of New York-Presbyterian/Columbia University Medical Center

Abstract:

The number of homeless children in New York City has been steadily increasing over the last 5 years, reaching peak numbers. Given this concerning trend, more discussions have been geared toward increasing access to these hard to reach families. Systems like the New York City Board of Education, currently facing scrutiny for the disproportionate school absenteeism found in homeless youth, and the New York City shelter system, find themselves overwhelmed and under resourced, leaving these families at the margins of society. When identified, these families often present with a wide range of intensive needs that floods and activates other systems, including mental health and child protective services. The fracturing of these systems, however, along with the numerous unique psychosocial stressors faced by these families both prior to and as a result of activation of these systems, threatens the success of comprehensive care of some of the nation's most marginalized individuals. In this presentation, we outline the case of a family living in the family shelter system in Harlem, New York. We track their involvement with a variety of systems in the context of increasing psychiatric needs. We propose a model of care for such families through the delivery of a Home Based Crisis Intervention program, highlighting coordination of care and intensive parenting support from a validating and non judgmental stance for parents who frequently face blame. We explore implicit biases present when working with similar families and will highlight specific interventions for maintaining engagement and increasing trust with the aims of increasing access to quality care. Lastly, we will review challenges and future directions for the care of similar families.

Parallel 2A Cohen Auditorium, NIHB E 02 (230 S. Frontage Rd)

Doctoring While Black: Confronting Racial Violence Against Black Physicians

Presenter: J. Corey Williams

Yale University Department of Psychiatry

Abstract:

Medical trainees and faculty have little guidance, if any at all, on situations involving explicit racism and bigotry from patients, even though physician mistreatment from patients and families is surprisingly commonplace. Acknowledging and addressing racism in health care centers is a drastic change from the status quo. A move to address and name the racism directly represents a decisive confrontation with the nation's legacy of structural racism and how an indirect, "objective" response would represent a silence and complicity to the insidious nature of white supremacy in medicine. Addressing racism from patients represents a departure from the traditional self-sacrificing, disembodied, non-subject image of the physician role, towards a more humanistic approach of thinking about the physician as having a historical body with valid subjectivity. In this panel, I would like to invite speakers who can help generate discussion around (1) re-imaging the physician role in an effort to decolonize its construction (2) addressing the safety of the providers and the patient in the moment (3) supporting those affected in the aftermath and (4) considering appropriate consequences for the perpetrators of racialized violence.

Racial Loneliness in Analytically-Informed Social Work Training

Presenter: Brianna Suslovic

Masters Social Work Student, Smith College School for Social Work

Abstract:

Racial loneliness can be defined as the experience of being the only person of color in an otherwise all-white setting. Through psychoanalytic understandings of race/racism and loneliness, this paper articulates the role of racial loneliness in clinical work, focusing specifically on the training experience of social work interns of color.

Parallel 2B

Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

Undocumented and Unafraid

Presenter:

Faria Kamal Postdoctoral Fellow, Yale University Dept of Psychiatry

Abstract:

Presenter 1: Present findings on research study regarding undocumented mental health. Presenter 2: Undocumented immigrant discussing lived experience. Presenter 3: Community organizer discussing how to get involved to support undocumented migrants in New Haven and Connecticut.

Normalization of Death in the Refugee Experience

Presenter: Manuel Cabrera Narrative Medicine Master Program, Columbia University

Abstract:

How does death impact and change an individual's mindset, behavior, and their own perception of being alive? Do we understand the circumstances or state of mind that is embedded in or that is accepted when an individual's identity is that of a refugee? Are physicians and political figures aware? A person devoted to leave everything behind (their country, home, and/or even family) to embark on a precarious journey that often results in their death. Refugees are individuals on the run due to the oppressive political and/or religious climate in their country. In this presentation, refugees are defined as individuals that are affected by the chaos in their country, consisting of those that not only flee from the country but also of individuals seeking refuge either in or out of their country.

Through thorough analysis and evaluation of three narrative texts, it supported that the constant exposure to traumatic events produced this idea that the normalization of death leads to a development of identity, which in this presentation is that of being a refugee. The texts are as follows: "We wish to inform you that tomorrow we will be killed with our families" by Philip Gourevitch, "Exit West" by Mohsin Hamid, and The Boat by Nam Le. After finalizing the examination of these stories, it was evident that an individual's action and mindset in relation to death showcases an impact or perhaps a change in their identities.

Parallel 2C Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

Mental Health Trialogue: Real Perspectives from Family Members, Prescribers, and Peers

Presenters: Jessie Roth Institute for the Development of Human Arts Jazmine Russell Institute for the Development of Human Arts Xinlin Chen Institute for the Development of Human Arts

Abstract:

Despite shifts towards inclusiveness and partnership in mental health service development, meaningful open communication between professionals, service users, and families within the mental health system remains a challenge.

Mental Health Trialogue (MHT) is a forum that brings together perspectives from providers, peers/survivors, family members and others to discuss controversial issues such as psychotropic medication, coercion, and diagnostic labels. The goal is to foster rich discussion and to change the perception that only those who work in the field of mental health are the experts. MHT directly challenges the boundary between the professional, the personal, and the political.

Building off of a rich history of practice in Europe, and incorporating social justice principles of equity, self-determination, and participation, the Institute for the Development of Human Arts (IDHA) organized the country's first-ever MHT in NYC in April 2018. The event was met with success and will continue monthly.

For RebPsych, we propose an interactive presentation that models the MHT for audiences who may be unfamiliar with the practice. Three IDHA members – a psychiatrist, peer, and family member – will explain the mission and principles of IDHA, explain the purpose of MHT, and then launch into a trialogical discussion. We will then open the conversation to audience responses and reactions.

MHT's combination of expertise and experience provides a unique wealth of collective knowledge to which individuals from different perspectives would not otherwise be exposed. MHT provides a non-judgemental space to share stories, find solidarity and discover complementary perspectives that offer clarity, insight, and support.

Partnering With Community Organizers to Create an Anti-Oppression Training for Mental Health Providers

Presenters: Matthew Perry MS3, Brown Medical School Sherrie Andre Cofounder, The FANG Collective Elise Presser MS3, Brown Medical School Alexa Kanbergs MS3, Brown Medical School

Abstract:

This presentation will include a content review of the anti-oppression training described below, and a facilitated discussion about fostering partnerships with community organizers.

Last year in Providence, RI, POC-led community organizations came together to form The AMOR network (Alliance to Mobilize Our Resistance). The AMOR Network offers community members facing state or interpersonal violence a range of rapid-response and long-term support, including legal services, community response, and mental healthcare. AMOR aims to support groups including but not limited to immigrants, refugees, sex workers, and people encountering the criminal justice system.

The AMOR Network's mental health team provides competent and holistic mental health support; this includes family support, socio-emotional support, and a more formalized mental health referral network. Medical students at Brown partnered with AMOR to create a CME/CEU certified anti-oppression training for mental health providers in this referral network. The goal of the training is to establish a baseline of trust and cultural/structural competency among providers, as well as bridge the language and frameworks typically used by clinicians and organizers. The training content draws from both medical literature, including topics such as trauma-informed care and structural competency, and healing practices within activist spaces, such as Young Lords and Common Ground Medical. Moving forward, providers will participate in an anti-racist reading and supervision group.

This training partnership required trust-building, communication and accountability, and we hope to serve as a case study in fostering relationships between providers and movement organizers.

Parallel 2D Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

Climate Change, Displacement, and Mental Health

Presenters: Maya Prabhu

Assistant Professor of Psychiatry, Yale School of Medicine **Miraj U. Desai** Associate Research Scientist & Faculty Member Program for Recovery and Community Health Yale School of Medicine **Kate Burrows** Yale School of Forestry & Environmental Studies

Abstract:

It is estimated that 200 million persons will be displaced by weather events by 2050. These include "extreme weather events" such as the Tuvalu cyclones, Asian typhoons or California wildfires. It also includes relocation due to slower moving weather changes such as droughts and rising sea levels. The majority of persons affected by weather stressors will be in Asia and Africa, the US too will experience population flows across its borders, as Hurricane Maria, resulting in 300,000 Puerto Ricans crossing into the US mainland, demonstrated. In fact, the US has already resettled its own first "climate migrants:" the Isle de Jean Charles, home to the Biloxi-Chitimacha-Choctaw tribe. Miraj Desai will analyze the impact of climate-change induced population displacement from the perspective of climate justice. He will consider the ways in which weather events exacerbate existing structural economic and health inequalities resulting in those most vulnerable and least responsible for climate change such as those living on low-lying, often economically disadvantaged islands are becoming disproportionately affected by it. Maya Prabhu will describe how the current refuge regime creates a legal void for protections for climateinduced displaced populations and whether the mechanisms envisioned by the Paris Climate Change Accord (the Warsaw Mechanism on Loss and Damage) sufficiently considers public health risks. Kate Burrows will discuss how displacement affects the association between natural disasters and mental health in Indonesia. She will focus particularly on the ways in which

heterogeneity in exposure and diversity of experience of mental health & wellbeing alter this relationship.

Parallel 3A Boyer Center for Molecular Medicine, Rm 201 (295 Congress Ave)

Justice and Legal Activism in the History of Psychiatry

Presenters: Daniel LaChance Assistant Professor, Emory University & Emory College Kylie Smith Assistant Professor, Emory University & Emory College Susan Youngblood Ashmore Professor, Emory University & Emory College

Abstract:

This panel consists of three papers that explore the historical intersection of civil rights law with mental health and psychiatry. LaChance's paper, "Mrs. Miller's Constitution: Civil Liberties and the Radical Right in Cold War America" discusses the case of Lucille Miller, a far-right anticommunist activist who was arrested and then committed to St Elizabeth's Hospital in 1955 for advocating against the draft. Smith's paper, "Jim Crow in the Asylum: Racism and psychiatry in Alabama 1964-1972" explores the network of legal activists who brought a case through the NAACP's Legal Defense Fund to enforce the Civil Rights Act in Alabama's psychiatric institutions. Ashmore's paper, "Fit to be Free: Wyatt v. Stickney and the Alabama Rebels Who Fought for Disability Justice" demonstrates the significance of legal and judicial activism for extending the concept of 'civil rights' for institutionalized people in a case which has shaped the provision of psychiatric care across the country. Together, these papers explore the complex way in which 'civil rights' has been understood in relation to those declared 'mentally ill' or 'disabled' and argue that the promise of historical legal and judicial activism is yet to be fully realized.

Parallel 3B

Boyer Center for Molecular Medicine, Rm 101 (295 Congress Ave)

Transgenerational Trauma and the Laotian Diaspora: Stories, Impacts, and Ideas

Presenters: Nay Saysourinho Writer and Kundiman Fellow Somdeng Danny Thongsy Former Yuri Kochiyama Fellow - Asian Law Caucus Paul Bryant Forensic, Child, Adolescent & Adult Psychiatrist

Abstract:

The US and Canada have established themselves as leaders in the mission to provide refugees and asylees with a safer home away from ongoing conflict and persecution. However, dramatically less focus has been placed on refugees once they reach these new homes. Psychiatrists are well aware that many of these resettled individuals have been exposed to extensive trauma. However, there is now mounting evidence that rates of PTSD may in fact be higher among resettled individuals than those exposed to similar traumas who remain in their countries of origin. We focus on the delayed and generational impacts of trauma on refugees by focusing specifically on the Laotian diaspora, resulting from the Secret War and subsequent Civil War. During the course of the presentation we will introduce segments of Lao Story, a podcast created by Nay Saysourinho about her mother's immigration to Canada and the prolonged impacts of trauma from both before and after resettlement. We will also focus on the delayed impacts of resettlement in resource-poor environments through a presentation by Danny Thongsy, who at two immigrated to California with his family only to be arrested and sentenced to life in prison as a teenager. Through the incorporation of video, audio, and first-person narrative, we will engage the audience in an interactive presentation not only highlighting the experience of refugees and asylees before and after resettlement, but also discussing steps the field of psychiatry can take to better address trauma in these groups and reduce the generational burden.

Parallel 3C Cohen Auditorium, NIHB E 02 (230 S. Frontage Rd)

Direct Experience: Challenging Psychiatric Authority and Inclusive Meaning Making

Part 1 of 3: "One Thorn of Experience Is Worth a Whole wilderness of warning": Experiential Training in Psychiatry, How Far Can We Go?

Presenters: Rebecca Miller Yale Department of Psychiatry Erika Carr Yale Department of Psychiatry

Abstract:

As a panelist on the important role of direct experience, we will focus on a provocative question: 1. what would change if psychology/psychiatry trainees spent a weekend as patients on an inpatient unit as part of their training experience? This idea of an experiential learning experience will be debated as to how it might actually be implemented, what the ethical and moral considerations would be, and how, if hypothetically it were a part of training, what might or might not change in terms of practice in behavioral health? The question will be raised about the evidence base of inpatient care, and the purpose and goals of such in light of our current behavioral health system in the US. This question will be related to issues of social justice in light of the higher rates of diagnosis of psychotic disorders among people of color and the subsequent higher likelihood of hospitalization for this group. Presenter's personal experiences of being hospitalized on psychiatric units will inform the discussion.

Part 2 of 3: The Mad Underground: A New Wave of Mad Resistance

Presenters: Jonah Bossewitch Vibrant Emotional Health

Abstract:

As a panelist responding to the prompt on the important role of direct experience I will share research from my doctoral dissertation in communications at the Columbia School of Journalism. My dissertation is an ethnographic study which examines significant shifts in the politics of psychiatric resistance and mental health activism that have appeared in the past decade. In contrast to earlier generations of consumer/survivor/ex-patient activists, many of whom dogmatically challenged the existence of mental illness, I found that the emerging wave of mad activists are demanding a voice in the production of psychiatric knowledge and greater control over the narration of their own identities. This new wave of resistance is best captured in the disability rights mantra "Nothing about us without us".

The lessons I learned conducting my field work at Occupy Wall Street, the American Psychiatric Association conventions, and through my work with The Icarus Project and The Institute for the Development of Human Arts (IDHA) have all contributed to my deep understanding of emerging trends, and threats, in the politics of the mad movement. My direct experiences with peer-support, mutual aid, open dialogue and alternative respite centers have shaped my perspectives and conclusions. My analysis is framed against the backdrop of relentless expansion in the diagnostic net of over-diagnosis, over-medication, and the looming threat that I call "surveillance psychiatry".

I am currently working to on turning my dissertation into a trade book, and intend to tell the story of the mad underground to a wider audience.

Part 3 of 3: Beyond Recovery: Dangerous Gifts and Transformative Mutual Aid Practices

Presenters: Sascha Altman DuBrul Institute for the Development of Human Arts

Abstract:

Language is incredibly powerful: it can leave us imprisoned in other people's labyrinths or give us the tools to set us free. I'll be talking about my work as a bridge builder and metaphor crafter, from my years in the mad underground to my time as a trainer for the peer workforce in the public mental health system. I'll be specifically breaking down exciting current innovations with our emerging collaborative at the Institute for the Development of Human Arts (IDHA) and our attempt to revision the socially transformative role of people like us who end up labeled as mad.

Session 3D Sterling Hall of Medicine, Rm I-304 (333 Cedar St.)

Critique and Reform: Moving Global Mental Health Toward a Rights-Based Approach

Presenters: J

s: Justin M. Karter UMass Boston, Department of School and Counseling Psychology Zenobia Morrill UMass Boston, Department of School and Counseling Psychology Lisa Cosgrove UMass Boston, Department of School and Counseling Psychology

Abstract:

Recently, there has been increased attention to the "global disease burden of depression." In 2017 the World Health Organization (WHO) developed a campaign to address the underdiagnosis and undertreatment of depression in developing countries. However, the disease burden framework reifies Western descriptions of "mental disorders" and diverts attention away from the political and social factors that contribute to depression such as gender-based violence, institutionalized racism and sexism, poverty, and xenophobia. It also reinforces the medicalization of distress, perpetuates a neocolonial approach, and undermines our ability to address how multiple social relations (e.g., of race, class, gender) impact in disparate ways on people's mental health.

In response to the WHO campaign, the United Nations Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Dainius Pūras, released a statement calling for a shift "from focusing on 'chemical imbalances' to focusing on 'power imbalances' and inequalities."

We propose a three part presentation that joins the critiques of the WHO's global mental health discourse to a rights-based framework. For the first third of the 60 minute session, we will present the results of our discourse analysis of the WHO campaign. In the second portion, we will present the rights-based framework, arguing for mobilizing forms of justice that emphasize the right to health and the global burden of obstacles. In the final portion of the presentation, we intend a structured and interactive discussion, working to reimagine social justice efforts through a rights-based approach.

Stigma as a Perpetuating Force in the HIV and Mental Illness Syndemic in Botswana

Presenter:

Tim Becker *MS4*, Penn Mental Health AIDS Research Center

Abstract:

Stigma mediates the relationship between disease status and human rights. HIV and mental illness have been described as "syndemic," commonly co-occurring conditions mutually reinforced by social processes, including stigma. We utilized Link & Phelan's power dynamic model of stigma and Yang's "What Matters Most" cultural approach stigma, to investigate stigma and explanatory beliefs around HIV and mental illness via in-depth interviews with 42 respondents in Botswana, a southern African nation with one of the highest HIV rates in the world. Limited mental health resources and cultural beliefs limit the treatment of mental illness in Botswana, contributing to widespread stigma and discrimination. People experiencing mental illness (PEMI) are widely viewed as dangerous, cognitively impaired, and not trustworthy. Respondents endorse witchcraft as a predominant causal belief, which one can become victim to either through social success or transgression. Mental illness was also repeatedly attributed to drug abuse and effects of HIV. Respondents describe mental illness as occurring "when the trees blossom," indicating a common local understanding of it as seasonal, chronic, and often incurable. Respondents held varying beliefs about the treatability of mental illness, with many considering it worse to have and less treatable than HIV, reflecting structural discrimination in healthcare investment. Respondents perceive that PEMI suffer from discrimination in work and marriage, limiting their ability to fulfill cultural expectations, and are believed to be at elevated risk of contracting HIV due to sexual exploitation. Findings that sexual exploitation follows mental illness stereotypes and mental distress follows HIV-related discrimination provide evidence how stigma perpetuates a syndemic of HIV and mental illness in Botswana. Quality, accessible biomedical care has proven critical to decreasing stigma for other conditions, in settings where beliefs of witchcraft previously dominated. Clinical care that targets the unique vulnerabilities of PEMI and PLHIV due to stigma is necessary to address the syndemic of HIV and mental illness and ensure human rights. Policy that focuses on vocational rehabilitation and extending community mental health services through peer support and integration of biomedicine and traditional healers may facilitate recovery-oriented treatment that is consistent with cultural beliefs and thus protect human rights.

Closing Session

Harkness Auditorium (333 Cedar St.)

Abstract:

The trainee organizers will lead participants in a reflective session about the day's themes, lessons, and challenges. Plans for future RebPsych programs will be discussed before the conference is brought to a close.