

#WhatWENeed 2023 campaign: We have a voice!!

Concept Note

TCI launched its annual advocacy campaign, #WhatWENeed, as a response to the Lancet Commission on Mental Health (2018)¹. This report reinforced the stereotypes perpetuated against persons with psychosocial disabilities and put the cause of our exclusion on the 'lack of treatment of mental disorders'. A concerning trope in these documents, carried forward into global advocacy by the Global Mental health Movement and their allies, for example, with respect to the SDGs, is that, if 'mental illness' is left untreated, it will result in economic downfall of nations and the degradation of peaceful cities². The literature gave no respect at all to the identities of persons with psychosocial disabilities, and the extraordinary human rights violations and humiliations they already face, particularly institutionalization.

#WhatWENeed campaign has been one of our yearly advocacy instruments to continually challenge the globalizing of psychiatry and its institutions and their influence on shaping of international policies. Our 'forced entry' towards the narrow mental health door by mental health sector and allied actors, and routine 'enforced disappearances' enacted through the mental health laws, has resulted in the medicalization of all aspects of our lives and exposed us to risks of institutionalization and cruel, inhuman and torturous treatments. Through the campaign and our works, TCI has been advocating for our entry through the human rights door that enables disability inclusive development and facilitates community inclusion by transforming communities³. The campaign provides opportunities for engaging persons with psychosocial disabilities and OPDs to amplify our voices on inclusion in development agendas, in all spheres of life, and not being reduced to Article 25 (Health) and Goal 3 (Good Health & Well Being) of SDG. This is our attempt to create a strong counter narrative that establishes our interest and autonomy over all aspects of our lives, and therefore, embrace all of the CRPD and the SDGs.

The campaign is a way for our movement to reclaim the mental health week, starting the 1st week of October, to pass these key messages. The campaign gives a platform for our members to present their work and advocacy to a wider global audience. Every year, the campaign has

¹ https://whatweneed.tci-global.org/campaign-2018/

² https://tci-global.org/wp-content/uploads/2023/04/Critiquing-Global-mental-health-Movements-advocacy-around-SDGs-2015-1.pdf

³ TCI (2022). TCI positionality on Community Inclusion. TCI Global, Geneva. Available at: https://whatweneed.tci-global.org/wp-content/uploads/2022/12/TCI-Positionality-on-Community-Inclusion-2022.pdf

focussed on issues of topical interest at the time. Other than the issue of stopping the normative violence against us, inclusion in the SDGs, questions of our identity, political participation, support systems, de-institutionalization and various themes related to our community inclusion have been featured in the campaign by our members, partners and allies. #WhatWENeed 2022, truly demonstrated the global footprint of TCI and captured the vibrant, strong and core messages of our movement with respect to inclusion of persons with psychosocial disabilities⁴.

This year, we are focusing on our core thematics (described below) and invite all our members to submit their works. Submissions are invited in all formats (blogs, poems, photos, videos, artworks, short messages etc.)



De-institutionalization

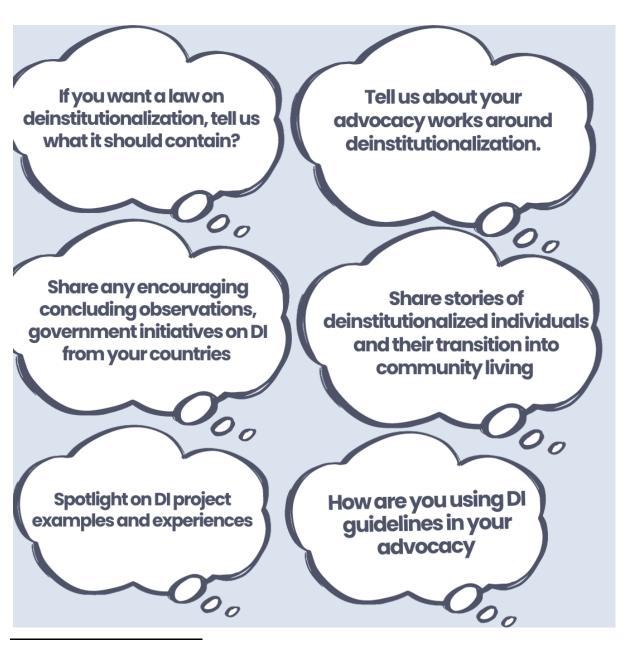
TCI was engaged with the development of the 'Guidelines on De-institutionalization including in emergencies'. It was completed and adopted by the CRPD Committee on 10th October 2022. They serve as a new reference point for CRPD jurisprudence around article 19. The DI Guidelines validated what is widely known: De-institutionalization is not a new idea or practice. It has been in policy news since the 1970s. However, even after five decades, good practice examples of DI are rare. Failures are more widely known. The existence of institutions is justified as places of residence or respite for persons with psychosocial disabilities. Even after 15 years of the CRPD, institutions, in all their forms, names and varieties still exist. Deinstitutionalization and community inclusion are still not considered as separate funding strategies (from mental health funding). High Income Countries have developed community support services and it has had minimal effects on closure of institutions. Under the 'Care Agenda', for example, in Europe, mini-institutions are being perpetrated. In low and middle income countries, institutions for the elderly and children are mushrooming in the name of 'Care'. Lives of persons with psychosocial disabilities and their inclusion continues to be bound by legal shackles of mental health laws and new / hybrid service provider paradigms. There is evolving literature and advocacy from TCI Global and partners that forced institutionalization and various forms of forced treatment, which causes physical, mental pain and suffering, and

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⁴ TCI Global. (2023). #WhatWENeed 2022: A campaign report. Report of TCI's annual advocacy campaign 2022. [Campaign report]. Available at: https://whatweneed.tci-global.org/wp-content/uploads/2023/07/WhatWENeed-2022-report-with-ISBN.pdf

is intentionally inflicted on a person should be considered 'torture'⁵. The DI guidelines also provides us, a historically oppressed group, with the language of reparations and redress.

To build on the practice-based evidence, TCI has been supporting its members to demonstrate and document the ongoing successful efforts in tackling the topic of institutionalization of persons with psychosocial disabilities with various stakeholders including State Parties. Our members have been relentlessly advocating against institutions and promoting inclusion of persons with psychosocial disabilities in their communities. We aim to take this forward by inviting our members to send us submissions on deinstitutionalization particularly their engagement with the DI guidelines.



⁵ Concept note. "Hidden Torture: Institutionalization of Persons with Disabilities in Indonesia". International Seminar held on August 22, 2023. Available at: https://tci-global.org/wp-content/uploads/2023/08/Hidden-Torture-Concept-Note-Updated.pdf

Community Inclusion:

The topic of community inclusion has been taken up widely in global policy circles. A range of stakeholders are claiming that they are doing inclusion through their activities. While we do appreciate community inclusion being the latest buzzword for development sector as it ensures State Parties are actively engaged on this topic, however, much to our dismay, it is being confined to the narrow definitions of availability of mental health services or psychiatric care etc. This is an irony; for communities are large, boundless, open and free and inclusion feels the same but the current dominant ideas are attempting at limiting it to just one or two service related aspects. This narrative needs to change. Recently, there has been a push towards introducing a 'mental health component' for every SDG, threatening their psychiatrization. Owing to advocacy by international cross disability movements, including TCI, the final document brings our identity and experience as persons with psychosocial disability more frontally and does not include derogatory references to our capacity. However, parts of it prescribe a 'mental health solution pill' for every Sustainable Development Goal be it climate change, violence, just communities, children and adolescent's needs etc. Inclusion of persons with psychosocial disabilities in communities is not dependent or limited to solely accessing mental health services and this must be communicated by building up practicebased evidence. There has also been a disturbing attempt on introducing the Care Agenda which equates the rights of care receivers and care givers, and brings an interest politics within social relationships. Considering that service providers also provide 'care', this granting of rights on equal basis to care givers is pernicious and re-establishes the power dynamic and a status quo; a power dynamic that has been further reinforced by declaring of an International Day of Care and Support, which promotes development of support services at home and in communities. While care is important, as are services, the power dynamic is not acceptable. Restoring the status of the primary rights holders (persons with disabilities) at the centre of the discourse on disability rights is important.

Since inception, TCI along with its members has been elaborating on a view of community which is neurodiverse and biodiverse and are best visualized as human ecosystems. TCI has time and again demonstrated various good practice examples of its members on how such ecosystems are enabled and maintained. For us, the idea of community inclusion means that communities must be empowered to support each other, especially its most vulnerable members. When communities come together to support persons with disabilities, families are empowered economically and socially, it becomes a positive reservoir for the whole

⁶ https://tci-global.org/stoppsychiatrizingsdgs/

⁷ https://tci-global.org/supportnotcare/

^{8 &}lt;a href="https://enil.eu/enils-position-on-the-new-un-resolution-for-the-international-day-for-care-and-support/#:~:text=On%2024th%20July%2C%20the,and%20Support%20on%2029%20October.">https://enil.eu/enils-position-on-the-new-un-resolution-for-the-international-day-for-care-and-support/#:~:text=On%2024th%20July%2C%20the,and%20Support%20on%2029%20October.

⁹ TCI (2022). TCI positionality on Community Inclusion. TCI Global, Geneva. Available at: https://whatweneed.tci-global.org/wp-content/uploads/2022/12/TCI-Positionality-on-Community-Inclusion-2022.pdf

community, built on a network of support.¹⁰ Community support systems are a viable social entity and needs to be recognized as such.

Through the campaign, we wish to utilize this opportunity by inviting our members and networks to share with us what community inclusion means to them, how do they practice inclusion in their communities; who are the community actors involved in ensuring inclusion and how do they engage them; how do members utilize the social capital and social networks in the communities and bolster them etc. Such practices may differ from culture to culture, country to country. We also invite members to submit on topics such as inclusive disaster reduction risk, climate change, political participation of persons with psychosocial disabilities, inclusion of elderly persons and children at risk win communities etc.

Share the local words and terms on 'Community Inclusion' in your languages and scripts.

Nominate an #InclusionChampion or #InclusionBuddy? Shine a spotlight on their amazing efforts to foster community inclusion.

"My inclusive community"
Digital photo project: Share
pictures of what CI looks like
to you

Share stories of your advocacy around disability-based discrimination in accessing any mainstream services from your communities



Send submissions on what community inclusion means to you and for peers from your communities

Other thematics:

We invite our members and networks to send us any lead articles, advocacy manifestos, declarations, projects, good practice examples of their works or advocacy on topics crucial for them. Some examples that could be covered are depicted below:

¹⁰ Statement of Expert Testimony on the topic of Legal Capacity and Guardianship of persons with disabilities, before the Hon. Constitutional Court of Indonesia. (2023).



Lived experiences of persons with intersectional and neurodiverse identities:

TCI has a growing membership from the neurodiverse communities and persons with intersectional identities. Members and networks are invited to make submissions on their lived experiences, barriers and challenges they face, shared identities with our movement, advocacy works you are engaged in etc.

Indigenous Persons with Young persons with psychosocial disabilities pscyhosocial disabilities from persons with psychosocial conflict areas disabilities Elderly persons with psychosocial disabilities Children with Neurodiversity and pscyhosocial psychosocial disabilities disabilities Persons with Immigration/ psychosocial Gender identity migration and disabilites who and persons with persons with have experience of substance use psychosocial disabilities psychosocial disabilities Persons with Persons with disabilities albinism and intersecting with psychosocial psychosocial disabilities disabilities