## Brenda LeFrancois - Organizing Collective Resistance through Children's Rights Legislation and Children's Agency

Ethnographic research conducted in an adolescent psychiatric hospital in the UK demonstrated that children are being 'voluntarily' subjected to a coercive system of treatment and the abuse of power. However, children are not merely vulnerable, passive victims of psychiatry. Instead, the relations of power are multi-directional, with the institution, practitioners and children actively exercising power amongst and between each other. Given this complex display of power relations, it is not to say that the children have equal opportunities to exercise power over the practitioners or the institution. Regardless, these findings exemplify children's agency in terms of resisting psychiatric oppression at least at the individual level. Although the experiences of oppression in the psychiatry in some ways relate directly to the experience of discrimination and oppression in the greater society due to belonging to the minority groups of 'children' and 'patients', the experiences are not additive in relation to these aspects of their identities. Instead, the category 'child' may actually position the children in a place of resistance, given the international legislative backing of children's participation rights in mental health services. Adult patients do not have similar legislation in terms of having rights to direct involvement in decision making regarding their treatment, care and service development. The exclusion of children labeled with psychiatric disorders from the children's rights movement needs to change. Children's rights academics, activists and lawyers as well as children's organizations need to find ways to give distressed children a platform, an audience and a voice. The lack of involvement of children within the psychiatric survivor movement represents another unacceptable exclusion. The survivor movement needs to take up the cause of child patients, including finding ways to make the movement accessible to young activists and creating space for young voices to be heard along with adult survivors. I provided a presentation of the findings of this research as highlighted above followed by a workshop where together we generated ideas of how to facilitate children's use of their agency in collectively contesting and resisting psychiatry