

Bringing Antipsychiatry into the Halls of Academia

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I am delighted to be here today. The topic that we have been asked to address is a critically important one—our successes and challenges in introducing the fight against psychiatry into the halls of academia—what we as academics have been able to do, what challenges we have found, some of ways that we have discovered of meeting the challenges. All of us who combat psychiatry are engaged in a very important fight. While it is just one, academia is an important place to be waging that fight for it is a place where new ideas have a chance to gain currency. Now of course we would all like to believe that if we phrase our ideas well, good ideas will drive out bad. It is not so easy, however, for power and hegemony are stacked up against us. Accordingly, we have to be strategic if we are to successfully lay claim to this space. I feel strongly about staking out our claim to this space, and have been involved in this common enterprise for decades. So in their own way, has everyone on this panel.

While I have a broader base as a human being navigating the world, also as a community activist, I come to the academic fight *per se* from within a few different disciplines, always from an antipsychiatry position, and always as a faculty member. Basically the story which I wish to tell is my story as an antipsychiatry academic. Now insofar as academia is the venue, the most obvious place for us to wage such battles is in our courses--as content, as vantage point, as epistemology, and I have long been doing so.

The first department where I introduced an antipsychiatry perspective into course work was a social work department, the first time in 1980's at Winnipeg Education Centre (University of Manitoba). I introduced a critique of psychiatry only in passing into a course on communications which I was teaching. In fact, the critique in question was not about psychiatry *per se*. I was critiquing a particular communication style and was using psychiatric communication as an example.

This incident—for an incident it quickly became—constituted a moment of learning. A ten-minute example in which psychiatry appeared in an unfavourable light was sufficient impetus for resistance to mobilize. And one thing this incident teaches us is that while leeway exists in academia, and while there is such a thing as academic freedom—and this works for us—if we introduce any perspectives critical of psychiatry, we have a fight on our hands.

One week after this ten minute critique, I was called into the office of the head of the department to discuss an urgent request which the department had received from the Faculty of Medicine. In short, the letter in question stated that it would be a shame if students in my classes got only one perspective on psychiatry. Correspondingly, in the interests of ameliorating this unfortunate situation, they suggested that someone from the medical faculty be allowed to come into my courses and provide my students with the psychiatric perspective.

The very fact that something like this could happen speaks to power of the medical faculty in universities. Very few if any other academic units exercise comparable power. Note, while I am also blatantly anti-capitalist, schools of business have never argued they be allowed to come into my class and provide my students with a pro-business stance. Only medicine has this entitlement.

To his credit, the department head did not have a knee jerk reaction. He asked what I thought. Here, let me be clear, is where I could have erred. The wrong move would be to protest how outrageous this is. It would have been wrong not because what had happened was not outrageous but because it would be a losing strategy. What did I do? I stated that in the name of students having more than one perspective I would be very happy for medical faculty to come into my classroom and teach their perspective as long as—and this proviso was critical—in the name of introducing *their* students to multiple perspectives, I be invited into their classrooms to

introduce my perspective. I put this response in writing at his request, and it was delivered to the medical faculty. Needless to say, the issue was dropped like a hot potato.

Now this story is funny, but there is a point here. As academics, insofar as we do anything which threatens the status quo—and if we are not, we are not teaching anything meaningful—there will be pushback. A strategically good way of meeting opposition when it comes is to turn the tables. “Turning the tables” is one version of a more general strategy of “catching the opposition on the horns of dilemma”, and I wholeheartedly recommend it. What could they do? If they came back and said, “No, we only want to go into her classes; we don’t want her to go into ours,” they look bad, and I win. If they say, “Okay, let’s go to each other’s classes, besides that I gain access to a much bigger audience, I am likely to do a better job. Again, I win. Alternatively, if they drop the issue entirely, they look like cowards, and once again, I win.

What happened? They dropped the issue entirely. And minimally, there was a moral victory.

The next time and occasion where I introduced the fight against psychiatry into courses is a year later in a radical social work school at Carleton. Now this school was an optimal place to be—a place where the envelope could be pushed. Accordingly, I asked to be allowed to introduce a course critiquing psychopathology. The request was granted. This was a major victory. For the first time in social work history in Canada, there was a course introducing students to a counter-hegemonic understanding of psychiatry. It is good that we introduce counter-hegemonic perspectives into our courses whatever their locations, and whatever the nature of those courses. It is better yet when we introduce courses whose very content is a critique of psychiatry. An added advantage of these counter-hegemonic courses being ones which serve students in the helping professions is that professionals who emerge from your courses come out with a critical awareness. And we urgently need to help raise awareness here, or the other helping professions will increasingly become extensions of psychiatry.

Did this happen without any push back whatsoever from social work profession? Of course not, but I do not have time in a speech this size to outline what unfolded. If anyone wants to hear more, feel free to inquire further during question period.

The next place where I had the opportunity to introduce the battle at the course level is at OISE—Ontario Institute for Studies in Education. As a faculty member of the Department of Adult Education and Counselling Psychology here, I have been able to introduce critiques of psychiatry into a number of courses, and I would have to say, my adult education colleagues especially have been very supportive. It is an integral part of my trauma course—and here psychiatry enters in not as a resource for traumatized populations but as a traumatizing institution. It enters even more formidably into a community development course which I teach called, “Creative Empowerment Work with the Disenfranchised”. The latter is really important. The fact that I am able to teach such courses with little opposition is an indication of how far things have progressed since late 80’s. In late 80’s it was impossible to introduce even a ten minute critique by way of example without major opposition. Now I able to teach a course one of whose major themes is precisely how to mobilize against psychiatry.

So far, I have been focusing in on courses. The university being a huge resource, it also provides other avenues and resources for combating psychiatry. Most people here are familiar with many of these, and so I do not want to go into them in depth. In passing, however, let me name a few. They include: ordering books and films for the library which are critical of psychiatry; use of university space for movement events; academic publishing—and I am delighted that one of the presenters is presenting on creating online journals which critique

psychiatry—involvement of students in our organizing. The university provides manifold opportunities. Our job is to be aware of them and avail ourselves of them.

That said, I would like to focus in on a resource which I used recently and which is not so obvious—my will. Obviously, this does not fit everyone's circumstance, but here too is a playing field on which a fight with major consequences can be waged.

A couple of years ago, I introduced clauses into my will that would set up scholarships at University of Toronto precisely in this area. More explicitly, after I die, scholarships will be set up funding masters and doctoral students doing dissertations either in the antipsychiatry area or the area of mobilizing to end homelessness. Correspondingly, priority will be given to students who are themselves psychiatric survivors and/or have experienced chronic homelessness.

An import caveat about universities and bequests—the fact that you make a bequest in no way obliges the administration to accept it. In fact, at University of Toronto, a bequest must be approved by three levels of administration—the relevant Dean, the university lawyer, and the president of the university. Did the University accept the scholarships without a fight? Not exactly.

What was the initial response? They asked for a number of changes, three of which were major and had the potential of seriously undermining the purpose of the bequest. The first is a standard one which faces all people who leave money to University of Toronto and to which to date all had acceded—that I insert a disclaimer clause, stating, in effect, that if in the opinion of University of Toronto, the money could best be used for other purposes, they can indeed use it for any other purposes at their discretion. The second major change requested is that no priority be given to psychiatric survivors. The argument here is that priority should not be afforded survivors as the identity in question is a stigmatized identity, and so no survivors would actually want priority. The third requirement is that the scholarship essentially be tamed down and made general. The argument here is that otherwise no department at OISE would see it as within their mandate and therefore wish to administer it.

Now I had a fight on my hands, and I knew it. The first part that I tackled was the disclaimer clause. The ostensible point of the disclaimer clause, or so it was presented to me, is that over time words and conceptualizations become obsolete, and so unless the university is given a free hand, they will find themselves with pots of money that they are unable to use. Now indeed, that can become a problem for universities administering the provision of wills. However, to give a university carte blanche with your money, and especially in an area which is counter-hegemonic, is unwise to say the least. My solution was to create my own disclaimer clause which set out alternative framing that would come to apply if words like “homelessness” were deemed to have lost their meaning or indeed if psychiatry as an institution no longer existed.

While it was hardly their preference, introducing my own disclaimer clause helped, but it hardly addressed all of the university's concerns. The thing about being in a fight, however, is to know what leverage you have. I had two sources—allies (and in these fights, our allies are indispensable) and money. Allies helped me go a long way to winning two of the skirmishes.

At my request, the Mad Students Society provided me with a statement that they were in support of the scholarship, and indeed, that as psychiatric survivors, they wanted psychiatric survivors to have priority. This effectively took care of one of the major objections.

The next ally—and they also set to rest a major objection—were my colleagues. I began by approaching the one department at Ontario Institute in Education which had other faculty who worked in closely neighbouring areas—Sociology and Equity Studies. Essentially, I asked them if they would consider passing a resolution supporting the scholarship and expressing their openness to administering it. The next time the department met, they passed such a resolution. Now obviously, if having one department in hand was good, having more than one was better. Accordingly, I approached the Adult Education and Community Development (my program) with a similar request. The immediate response was that if Sociology and Equity Studies could administer such a scholarship, surely Adult Education could. Adult Education, in turn, passed their own resolution. The relevant statements and minutes were subsequently submitted to the administration.

Now my allies had essentially solved much of the problem. There were still concerns over the disclaimer, however, and there were still a number of other issues. When you get this far, however, it is important to know the power of money.

One thing about offering money is, ultimately, you have significant leverage. You can go elsewhere. At this point, literally, over half a year had passed. When it became blatantly obvious that no end was in sight, I made it clear that if the scholarship were not accepted more or less as described, I would take my money elsewhere. In fact, I named the two university programs in Canada that were next on my list. Now the bequest had still not be cleared by the Dean, albeit, she was favourably disposed, and still had to land on the desks of the university lawyer and the president of the university. I held my breath after issuing what was essentially a friendly ultimatum.

Three difficult days passed. Then I received word. The Dean had written to the president, stating that she wanted the scholarship. The president had been in touch with the university lawyer. The scholarship had been accepted as drafted.

This may seem like small victory but it was not. Long after I am dead, students will be funded to pursue research in this area. That essentially guarantees the continuation of the area at this university and likely its expansion. Moreover, it will inevitably generate new knowledge and lend it legitimacy.

Finally, I would like to highlight an academic avenue open to academics, survivors and activists alike and which is being actualized at this very moment by each and every one of us. We can create and participate in conferences like this one, also like the groundbreaking Madness Conference, which Dr. Menzies over there was so instrumental to. The beauty of an international conference is that it at once gives rise to scholarship, legitimates the area, and helps the movement spread. I am delighted that we are doing this now, and I am proud of my department and indeed OISE for its support—and let me be clear—very generous support of this conference. Let there be no mistake, however, if you mount a conference such as this, there will be people in the university who will not like it and are only too willing to be vocal about it.

What happened in the case of the PsychOut Conference? Repeatedly, complaints were sent by faculty to the office of the president of the university. These complaints were subsequently forwarded to the Dean, who in turn, sent them to the head of the department, who in turn drew

them to my attention as Chair of PsychOut. Additionally, there was one complaint sent directly to the head of my department. The most common complaint was over it being called a University of Toronto Conference. Optimally, the objecting faculty would have preferred it be seen as a conference unconnected with the university, which just happened to be held at the university—a description that belied the fact that I am a faculty member at the University of Toronto. Minimally, if had to be associated in some way with the university, they preferred that the term “A Conference of the University of Toronto” be removed and replaced by a term like “A Conference of the Department of Adult Education and Counselling Psychology”. This was the complaint that had most traction. Behind it, though, lurked a far more formidable grievance. To give you feel for the letters, I would like to read just two lines from a letter from one such colleague. “Imagine my dismay when I received a notice advertising an antipsychiatry conference hosted by your department! Can this be true?” (Private correspondence, April 24, 2010)

Now there is an old rule in community organizing—pick your battles. Given the generous support of OISE, including the Dean, the best thing to do was not fight the battle on the level of fairness, in fact not fight at all—just solve the problem. And solve it, we did. We got rid of the descriptor a “University of Toronto Conference.” We called it instead “A Conference of the Ontario Institution for Studies in Education at the University of Toronto (Department of Adult Education and Counselling Psychology) (See <http://ogs.library.utoronto/index.php/psychout/index/about.>) In no way did this detract from the conference. It got the issue out of the Dean’s hair. And it protected the Institute in the process.

To sum up, much can be done in the halls of academia to advance the battle against psychiatry and in the process, the struggle for a kinder more tolerant society. We can advance it through course work. We can advance it through ordering of books, the use of space for movement events, the launching of publishing initiatives, mounting of conferences, our very wills. I invite colleagues, survivors, and fellow activists to use it in these and whatever other ways you can find. Be aware, though, that if you push the envelope, there will be opposition.

When it comes to dealing with opposition, there are a few pieces of advice that arise from my story, and I would like to end with these: First, be on lookout for ways of turning the table. Second, know who your allies are. Third, know when you have a winning hand and play it (and money goes a long way to giving you a winning hand). Fourth, pick your battles. Fifth and finally, do not be discouraged. Hegemony is a hard thing to fight, especially for those who are students, especially those who are psychiatric survivors. Ultimately, however, the power of truth and the lessons of history are on our side.