

To: IAAP

From: Judy Kuriansky

Re: Report of meeting of NGO Committee on Mental Health, Working Group on Human Rights and Mental Health, held at the UN Church Center.

Invited Speaker: Kate Millett, feminist and activist at the forefront of women's movement from the 1970s.

Summary: Discussion about the protection of human rights for persons with disabilities (blind, deaf or psychiatric) and their right to make choices, given that there are few resources for such populations in many countries, and given the need to encourage countries to develop relevant policies.

Comments and quotes by Ms. Millett: Ms. Millett's speech started with self-disclosure about her personal battle with mental illness. She expressed frustration of being "up against governments of countries that go along with convention of viewing people with disabilities' and her hope that the "UN will have a better plan... and more elastic solutions to how a society deals with individual behaviors that are different, and permit people to exercise greater freedom." She added that, "A sticking point is that people with psychiatric disabilities want to protect society from madness." Given her role in the early days (in the 1970's) of the "women's movement," as a feminist promoting women's issues and women "speaking out," she elaborated on her point that, "The position of women in the world is getting worse because of fundamentalism. In Africa women are being exterminated and despoiled because of predatory male behavior, because we have no authority to say 'no'." Her major message then in America, as now to the international community, is that, "Women need to get their voice."

Commentator: Gary Belkin, Dep't Chief of Psychiatry, Bellevue Hospital, New York University [gary.belkin@med.nyu.edu](mailto:gary.belkin@med.nyu.edu) 263-6220, discussed the controversy over differences between persons who are blind and deaf, and those with psychiatric illness.

A debate ensued over the definition of disability. It was pointed out that there is no standard definition across countries, so labeling gets

disabused, leading to fears in third world countries and problems with insurance companies in other countries.

With regard to an upcoming convention about disabilities, some groups/consumers/users do not want psychiatric disabilities identified separately from other disabilities except as a listing; but others disagree, and do want psychiatric disabilities considered separately from other disabilities, because they feel that people with psychiatric disabilities have important issues that may not be covered by the convention if all disabilities are considered together.