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IMAGINING NON-CARCERAL FUTURES WITH(IN) MAD STUDIES

Pan Karanikolas

“Free the people, shut all institutions”

Created by a large team of disabled artists and activists in 2017, the Disability Pride mural in Footscray, Melbourne, where the brick wall meets Wurundjeri Woi Wurrung and Bunurong lands, has been called the “first” of its kind in Australia (MacFarlane, 2019). A week after the mural was created, Larissa MacFarlane, local artist, disability activist and organiser of the mural, went to photograph the mural and instead found a blank, brick wall. It so happened that the mural had been removed earlier that morning, the day after International Day of People with Disability. The mural, partially funded by the local council and the building’s owners, was intended to remain a permanent fixture on the wall. Subsequently, the local council issued a statement apologising and confirmed the mural was removed by their graffiti removal contractors (Tran, 2017). The Disability Pride mural was then re-made, making the mural you see today as you walk over the bridge across Footscray Station the “second” mural. On her blog, Larisa MacFarlane said:

“It was a shocking, heartbreaking moment for many of us. For some of the participating artists, it was their first time publicly identifying with disability and erasure of their stories hit hard. For other more seasoned disability activists, it came as little surprise to have our voice silenced yet again.” [...] “This is about identity. This is about my identity. This is about Rights [sic]. This is about the lack of respect that disabled people have in Australia, the real daily struggle that people face, and the very real fear of being marginalised once again. This is stuff that is rarely talked about outside the disability community and it is just too easy for the mainstream to dismiss.”

(MacFarlane, 2019)

Qadri and MacFarlane (2018) locate the mural within a larger tradition of graffiti, street and public art, which provides space for conversation and encounters about disability pride, culture and history (Qadri and MacFarlane, 2018). Part of the wall attests to the mass institutionalisation of disabled people. It reads:
FREE THE PEOPLE. SHUT ALL INSTITUTIONS.

We acknowledge Australia’s shameful history of incarcerating tens of thousands of people with disabilities, particularly people with intellectual disabilities and mental illness, in large scale institutions, hidden from view. People lived their entire lives controlled by others, denied choice, privacy, and their civil rights, never knowing freedom. We apologise to those who have suffered from decades of institutional violence and abuse. We honour those advocates and activists that have come before us and fought for freedom. However, institutions for people with disabilities are still operating in Australia today. We ask for your support by speaking up for the closure of all institutions in the name of justice, equality and freedom!

In this section of the mural, as Qadri and MacFarlane (2018) have documented, people have been invited into an active dialogue with the mural’s text, where additional graffiti has been added in brown marker. The writer has written:

Disabled ppl [sic] make up a SHAMEFUL percentage of ppl [sic] in prisons! And are often placed in fkn SOLITARY! + the rates are worse for aboriginal disabled ppl!”.¹

(Qadri and MacFarlane, 2018)

Last year, when I lived closer to it, I took photos of this part of the wall; to read and reflect more on what the wall had to say about the historical periods of mass institutionalisation of disabled people, interested in the enduring inheritances of the asylum system. The mural invokes the histories of former institutional sites, including asylums and psychiatric hospitals, many of which in the state of Victoria were closed (quite quickly) in the period known as “deinstitutionalization” in the 1980s and 1990s (Gooding, 2016). In this way, the mural memorialises, but it also contains within it a contemporaneous call to action. In doing so, it also makes the somewhat paradoxical point—in a period we might call “post-deinstitutionalisation”—disabled people, including those who are deemed “mad” or “mentally ill”, are still regularly disappeared from public life. The mural’s statement gestures towards these enclosures—the aged care facilities, group homes, psychiatric hospitals, residential facilities—all contemporary, interlocking sites of internment which make up what Ben-Moshe, Carey and Chapman call an “institutional archipelago” (Chapman et al., 2014:14). Life within, and shaped by, institutions “has been the forced historical reality, not the exception, for disabled persons” (Russell and Newman, 2001:63). Today, institutional “life” is often justified in the name of care, rehabilitation and “welfare”. However, it is the graffiti writer with their brown marker—the wall’s interlocutor—who has written explicitly about the hyper-incarceration of Aboriginal and Torres Strait Islander people—making an unambiguous connection to incarceration in prisons and other correctional sites.

A world without prisons: from “cops” to “care”?

A year later, 2020, and the Black Lives Matter movement has again highlighted the crisis of racist violence, inherent within policing and in prisons. In reaction to the killing of George Floyd in Minneapolis, the spotlight in Australia has been on large Black Lives Matter rallies, called for and organised by First Nations activists and on behalf of families and loved ones of those who have died in custody, at the hands of police and in prisons. As so many have pointed out, it was the death of George Floyd in Minneapolis, this event on the other side of the world, which motivated this action, despite the fact that the struggle for justice for so many other
Aboriginal and Torres Strait Islander people who have died in custody remains a constant fight on this continent (Liddle, 2020; Whittaker, 2020). However, with these flashpoint moments have been swelling movements for radical change, including the call to defund, or abolish, police and prisons, heard in places and in ways where they previously may not have been. The prominence of such ideas, of abolitionism and anti-carceral politics, activism and theory is surely due to the tireless activist work of many groups locally, including (but of course not limited to) Sisters Inside, a Queensland-based organisation supporting criminalised women, Sydney's Justice Action, a prison advocacy group and Melbourne's Flat Out, a support and advocacy service for criminalised women leaving prison, which grew out of the anti-carceral feminist activism in Victoria (Carlton and Russell, 2018). Many of these groups have been a part of the prison abolition movement, domestically and internationally, since the late 1980s. Despite informing the ideas of various social movements for some time, the uptake and influence these ideas and political imaginaries in the space of a few years feels rapid, pronounced. In 2017, Ellen O'Brien wrote of a prison abolition event held in Sydney, Manifesting a World Without Prisons, by the collective Queer Provocations that “prior to the start of the event, comments were made by the panellists about the number of attendees”, much larger groups of people than they had seen at events during the law few years (O'Brien, 2017).

Passing the mural last year, I wondered then about the histories (and ongoing present) of confinement, spatial surveillance and control for those deemed, or who appear to be, mad or “mentally ill”, and the vital intersections and connections with struggles committed to ending the racist violence of policing; radical visions of a better society and world. As abolition’s influence and demands gain further prominence, there has been increased conversation about the divestment of funds away from police and correctional service portfolios towards investment in health services, in particular “mental health care”. A recent online event hosted by the Institute for the Development of Human Arts (IDHA), an organisation based in the United States, interrogated these calls to “replace ‘cops’ with ‘care’” (IDHA, 2020). Despite the seemingly innocuous statements for more funding for mental health services, these suggestions signify a failure to appreciate how, like policing, coercive mental health “care” historically and presently functions as a tool of social control, through legal powers of detention, the use of involuntary interventions and the regulation of those viewed as “mad”. There is a real need here for survivor knowledge to be put into much closer conversation with these debates and the politics, scholarship and demands of carceral abolition. It is a timely moment to explore these ideas and contemplate the relationship between Mad Studies and anti-incarceration philosophy, politics and ideas.

Carceral abolition is grounded in anti-segregationist philosophy and ideas, and calls to dismantle and put an end to spaces and modes of incarceration for the violence and social harms they inflict, weaving together the demands of other radical movements for social change. Within a settler-colonial context such as Australia, criminalisation, segregation and imprisonment are (and should be) conceived of as techniques constitutive of settler colonial regimes and their exercise of power. In Australia, under the eliminatory logic of settler colonialism (Wolfe, 2006), police represent and embody “one of the most enduring and deeply entrenched legacies of British colonisation” (Porter, 2016:26), The ongoing genocidal violence of deaths in custody, child removal policies and the over-policing of Aboriginal communities can be traced back to the state’s (illegitimate) genesis with the mounted police who fought frontier wars. Many Aboriginal and Torres Strait Islander people who have been criminalised or incarcerated have experienced severe emotional distress and trauma. As Wadjularbinna Nullyarimma, Gungalidda Elder and member of the Aboriginal Tent Embassy puts it: “We cannot flee persecution to another country because we are spiritually connected to our own ancestral lands. So jails and mental institutions are full of our people” (2020). To understand the confinement of those
experiencing “madness” today we need this historicisation, locating practices with attentiveness to their contingencies and divergences from confinement in the female factories, in convict labour, orphanages, missions and reserves, the very violent foundational structures of settler colonial states.

Abolitionism itself, expressed by some of the leading figures in the anti-psychiatry movement and those who call for the abolition of mental health law, is not a novel concept for the expansive, inter-disciplinary field of Mad Studies. Since the development of the Convention on the Rights of Persons with Disabilities (CRPD) in 2006, scholars, advocates and human rights groups have supported the position that mental health law is discriminatory and impinges on rights to liberty, autonomy and bodily integrity; and should be abolished, accompanied with moves to integrate supported decision making (Wilson, 2018). While not a mainstream view or demand, the abolition of mental health law has been “clearly and repeatedly articulated as a political goal” by advocates, human rights groups, and scholars; despite states like Australia making interpretative declarations that they do not interpret the CRPD as requiring the abolition of forms of substitute decision-making (Wilson, 2018). Psy-centred knowledge, its connected institutions and the mental health industry are deeply embedded in, and inform, civil legal systems (such as mental health law, disability and guardianship law) and criminal legal systems of control. The involuntary detention, involuntary psychiatric “treatment” and legalised use of force against persons experiencing mental and emotional distress is written into the fabric of mental health law, psychiatric practice and substantiated by paternalistic, ableist and “sanist” legal doctrine. Today, in our “post-deinstitutionalisation” period, involuntary “treatment” has moved from psychiatric hospitals and institutions and entered the space of “the community”, through the introduction and uptake of community treatment orders (CTOs) enabling forms of “chemical incarceration” (Fabris, 2006, Fabris, 2011, Fabris and Aubrecht, 2014). Despite the prevalence and rates of use of compulsory treatment orders and the rate of involuntary admissions to mental health wards in public hospitals in Victoria, mental health policy and public “mental health” discourses remain incredibly (tellingly) silent on involuntary medico-legal interventions under mental health law (Light et al., 2012).

The extent of police powers under mental health laws mean that police are often the first responders to mental health crises and incidents. In Victoria, where I live, under the Mental Health Act (2014) (Vic), legislation grants police the power to detain and transport a person experiencing a mental health crisis for a mental health assessment, if they are satisfied that a person appears to have a mental illness and is at risk of harming themselves or another person. People expressing distress, usually in public are targeted (or as it is more commonly framed, are “over-represented”) in incidents that involve fatal and non-fatal police violence. In the state of Victoria, there is an existing record and history of police responses to mental health incidents involving fatal shootings of those experiencing mental distress (McCulloch, 2000). A “mental health crisis” can be thought of as a “criminalisable event”, to draw on abolitionist language, as initial contact with police can act as an avenue into the criminal legal system and criminalisation (Stanley and Ebscohost, 2018). Many who face violence and come into contact with the criminal legal system are those who face a myriad of interwoven oppressions, the forces of poverty, systemic racism, ableism, family and domestic violence, deprivation and housing insecurity. None of this is incidental; the management of public “order” and maintenance of social control remains one of the main activities and functions of policing, and those deemed mentally ill are often conceived of as “problem people”, who come to the attention of police in public and are presumed to be dangerous and violent.
Critical intersections and imaginaries: Mad Studies and carceral abolition

If policing and the internment of people thought to be mentally ill is one of the main ways madness and mad subjects are managed—how does (or should) Mad Studies approach and understand this? Is it an issue, or subject of inquiry for Mad Studies? How is Mad Studies conceived of broadly as scholarship, epistemology, frameworks and related activism engaging with the problem of policing, especially for those who are also targeted for their location within a dangerous matrix (racism, ableism and sanism)? Conversely, how can carceral abolition activism and theory become more engaged with the critical counter-discourse Mad Studies provides to dominant discourses of “mental illness”, sensitive to the violence of psychiatrisation that is often experienced by psychiatric survivors? In attempting to understand and develop a more complete account of our “post-deinstitutionalised” landscapes, where those thought to be “mad” are managed in new ways: trans-institutionalised, or in “community settings”, where community care models (whether public or privately run services) retrain their “institutional, medicalized, and individualised modes of care” (Hande and Kelly, 2015), perspectives that draw on the broader context of neoliberal punitiveness, I think should be instructive for Mad Studies. As mad scholars, researchers and activists, I want to make the case for engaging with these flourishing and rich critical discourses for the ways in which they intersect with Mad Studies, with so many other fields of inquiry standing to benefit from incorporating mad ways of knowing and doing.

As Qadri and MacFarlane (2018) reflected, the erasure of the mural and the need for the artists to re-make it raised difficult questions. In her blog, MacFarlane (2019) points out that the mural’s removal spoke to ongoing and everyday acts of silencing, the removal of disability and disabled people from public-political space. To this we can also add that when it comes to the memorialising of historical institutionalisation, the “accidental” removal symbolised colonial forgetting, mis-remembering and disappearing of the past. The mural stakes a claim that the various spaces built on segregationist philosophies—both the prison, the asylum, the institution—are not just a part of a “dark history”—but their inheritances reverberate all around us today. I hope to see, and be part of, ways that Mad Studies can chart a course of scholarship, knowledge and practical work towards non-carceral futures, that directly challenges the notion that police will continue to interface with the “mad” and the distressed. The contours of Mad Studies, and its legitimate subject of inquiry should be bold, broad and expansive enough to look at the myriad forms in which madness is managed. I hope to see mad scholarship and activism embrace the broad vision that abolitionist praxis, theory and scholarship offers and is imagining. From Manus to Nauru, where the violence of the Australian border is transmogrified into offshore prison camps, to our psychiatric hospitals, it is the violent, dispossessing act of our founding as penal colony that remains the major underlying dynamic of Australian society today—and such it is impossible to extricate mad people’s history from this history.

Notes

1 For images of the mural, see: Qadri, D. & MacFarlane, L. 2018. Disability pride is back. *Public Pedagogies Institute Conference*. Victoria University.
2 Section 351 of the *Mental Health Act 2014* (Vic).
Doing Mad Studies

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