DEINSTITUTIONALISATION with Mali Hermans

**Pauline:** You're listening to No Health Without Abolition, Deinstitutionalisation with Mali Hermans. If you've just tuned in, hi, I'm Pauline Vetuna and I'm the Disability Day Worker for 3CR's 2023 broadcast.

In this program, you'll hear a great interview with Mali Hermans. Mali is a disabled and neurodivergent Wiradjuri and European woman living in Meanjin, so called Brisbane.

Mali is an organiser, writer, community worker, and socialist. Deeply invested in disability justice and abolitionist work. Committed to challenging ableism. And the many oppressive systems and institutions it remains embedded within. I wanted to find out more about the advocacy work that Mali does.

And specifically, her trip to the United Nations COSP16 Summit. Where she made a number of presentations with NGO Queensland Advocacy for Inclusion. COSP16 stands for Sixteenth Conference of States Parties to the Convention on the Rights of Persons with Disabilities. It took place in June this year.

**Pauline:** Deinstitutionalisation is abolition, and we can't even begin to talk about health sovereignty for all disabled people, which is the theme for this year's broadcast, without talking about deinstitutionalisation.

Later on in the show, you'll also be hearing from self advocates with lived experiences of institutionalisation give their opinions on where this vital abolitionist work needs to go in the future.

But first, let's listen to my interview with Mali. So Mali, as part of the civil society forum on the first day of COSP16, you presented an intervention and in it, you posed a question to everyone in that forum. About how was it even possible to imagine the future that sustainable development goals foresees for all of us?

When people with disabilities are still being institutionalised and segregated from communities in the present? Could you talk about what institutionalisation and segregation looks like today? And how even though asylums were dismantled over 30 years ago, institutionalisation is still happening in other ways?

**Mali:** Yeah, so this was an important intervention that myself and others from Queensland Advocacy for Inclusion made at COSP16. And this was largely in response to the deinstitutionalisation guidelines that the CRPD, so that's the Convention for the Rights of Persons with Disabilities, committee released last year, or at the end of 2021.

And basically what we wanted to do is draw attention to the fact that deinstitutionalisation has not been achieved in Australia. To this day, people with disabilities are still being institutionalised in a variety of settings. And a lot of these settings are often advertised or spoken about in a way that implies they aren't institutions.

So for example, under the NDIS, a lot of people with disabilities are living in supported or specialist disability accommodation, including places like boarding houses or disability group homes.

A disability group home is a place where, for instance, perhaps four or five people with disabilities all live in a purpose built house together. A lot of the time you don't have the opportunity to choose who you're living with, to choose or have input into the daily routine of that institution.

**Mali:** A lot of the time doors are locked, so people can't leave. They're effectively institutionalised. These settings are often cut off from the rest of the world. So we definitely saw that during the COVID pandemic, for example, in which disability group homes and other places.

Even psychiatric wards, for instance were put into lockdown and people effectively had no contact with the outside world, with their families, with other supports in their life that don't live in these segregated settings.

The other reason that we really drew attention to how institutionalisation still exists today is because of the findings and the testimony that we have been hearing from the Disability Role Commission.

All of the evidence regarding places like forensic disability units, or even psychiatric wards, point towards these places being just as violent as institutions of the past.

And this violence, is enabled by this same logic of institutionalisation that still exists in these settings. There are absolutely horrifying stories that have been published on the Disability Royal Commission's website talking about everything from quite severe physical, emotional abuse, sexual abuse is very common in these places, particularly for women with intellectual disabilities.

**Mali:** A lot of the time, these settings also don't fall under family and domestic violence legislation. So for instance, if you're a person with disability living in a group home, that setting is your home. That setting is a place in which you can experience domestic violence from caregivers.

However, in a lot of states and territories, you would not be able to pursue that through existing domestic and family violence legislation because these places aren't considered homes.

So I think even that logic shows us that these places aren't really made to be homes. These places do not facilitate people living independently in the community and having choice about how they live, their lifestyle, who they want to live with. I can speak personally to the story of my mum, who was institutionalised in a disability group home in Canberra.

She very much did not want to live in a group home. She wanted to live in accessible housing with my dad, who at the time was a young person institutionalised in aged care.

And he didn't have access to accessible housing either. And despite their wishes to live together they ended up in these institutional settings because of a lack of accessible and available public housing, but also because of the way that the NDIS functions.

**Mali:** A lot of the time, the NDIS will deny requests by people applying for SDA. Wanting to live by themselves because it is, quote, not cost effective. If you can put five or six people in a congregate setting in which they share supports, so perhaps you only need three carers on shift at any one time.

That will save the NDIS money compared to every one of those people living independently in their own home and having access to care there.So there's also this profit motive behind the growth of institutionalisation.

So I hope that kind of explains the way that institutionalisation is still present. And is a very big and looming reality for many people with disabilities. If you're not already institutionalised, there is always the threat of institutionalisation.

Whether it be on a temporary basis, so institutionalised in a psychiatric ward, in which you often have a lot of your human rights taken away from you, or whether it be on a more long term basis by being sent to live in a disability group home, an aged care facility, et cetera, because there is literally nowhere else to go.

**Pauline:** I was reading another intervention you presented and co-wrote during a roundtable at COSP16 that emphatically calls for the full and immediate implementation of the deinstitutionalisation guidelines, the full and immediate implementation of the optional protocol for the Convention Against Torture, and the immediate release of all people with disabilities held in indefinite detention.

Could you explain why you and Queensland Advocacy for Inclusion are calling for the implementation of these guidelines and the implementation of that protocol? And how people with disabilities are currently held in indefinite detention?

**Mali:** So the reason that myself, QAI, and a lot of other disability advocates from across so called Australia are calling for the full implementation of these guidelines is because they set a precedent that we didn't have before.

They provide us with a framework for fully implementing deinstitutionalisation across every part of the community. But more importantly, these guidelines were created and designed by people with disabilities. They were not created and designed by able bodied people.

And they very much were not created and designed by people in power who often have a profit motive or have a carceral motive to continue institutionalising people with disabilities.

One of the most important parts of the deinstitutionalisation guidelines is not only calling for the immediate facilitation of moving people into the community and into community based living so that people with disabilities are no longer segregated from the rest of society.

**Mali:** But it also calls for redress and reparations. Which I think is a really important conversation to have. Particularly because in the Disability Royal Commission's final report, the idea of redress and reparations for the extreme and ongoing violence that our community faces was not mentioned.

So redress and reparations, according to the DRC, is not on the table, despite the horrifying abuse and violence and degradation and human rights violations that we heard time and time again.

So these deinstitutionalisation guidelines are a really useful advocacy tool for us to be able to make the argument that redress and reparations are a critical part of moving towards a more inclusive society in which institutions where people with disabilities are segregated are dismantled.

**Mali:** I think importantly too, in the conversation around what deinstitutionalisation actually looks like.What redress looks like. What reparations look like.

These guidelines are really unique in that they make a very clear statement in saying that the perpetrators of violence, abuse, neglect, exploitation are not to be involved in having any say or having any power in the process of facilitating reparations, redress, deinstitutionalisation.

We know, no matter what community you belong to, often when the state is responding to harm, the state investigates itself. I'm thinking right now of black deaths in custody and the way that police officers and the police force often investigate themselves.

And because there is no independent investigation, we know that the outcome of those processes always favour the state and they never favour the oppressed community in question.

So to have such a high level document really clearly outline that perpetrators of violence are only to engage in redress and reparations through accountability, rather than having power through that process, is a really important tool for us to use and keep calling for, in terms of future movements towards deinstitutionalisation in Australia - but also in the more immediate present in terms of responding to the final report of the Disability Royal Commission.

**Mali:** These guidelines also very clearly emphasise that institutionalising people with disabilities is a human rights violation. And in particular, more violent and oppressive forms of institutionalisation, like indefinite detention of people with disabilities need to be abolished immediately.

So in Australia we have hundreds of people with disabilities. These people with disabilities are often people with intellectual disabilities or cognitive impairments and these people are often First Nations people or people with disabilities who have come from backgrounds of severe trauma, poverty, oppression, and often are held in what might be called a forensic disability unit or a forensic health unit.

These places are akin to jails. A lot of the time, people are held in cells, have no human contact, can be held in solitary confinement for decades, and this all happens without being charged of an offence. And that is not to imply that if someone is charged of an offence that they should be subject to those conditions.

**Mali:** But a lot of the time, people with disabilities are held indefinitely because laws in Australia allow for this to happen and allow for people to be continually held in these settings because they are deemed perhaps as a threat to the community.

And this logic traces back to some of the earliest violence that we saw during the frontier wars and during the beginning of colonisation and settler colonial violence in Australia, in which particularly First Nations people with disabilities, but also other people with disabilities are seen as a threat or are seen as deviant and therefore are seen as needing to be confined and locked away and hidden.

So that's the reality for a lot of people with intellectual or cognitive impairment that end up in the criminal legal system is they end up in this kind of no man's land in which they have no exit date.

They have no prospect of knowing how long they're going to be detained for. People's disabilities end up being exacerbated. People acquire new disabilities in this process and ultimately people with disabilities are disposed of.

**Pauline:** Gosh, that was an excellent breakdown, thank you. So I want to read an excerpt of a written statement that you helped write and edit for Queensland Advocacy for Inclusion for a COSP16 presentation.

***"In concluding comments to the most recent periodic report of Australia by the UN Committee Against Torture, serious concerns were raised about the arbitrary and indefinite detention of people with disabilities in psychiatric institutions and forensic disability centres, including highlighting over representation of First Nations people, the use of restraints, seclusion, and disproportionate periods of detention.***

***Despite these concerns about torture of people with disabilities, a visit by the UN Subcommittee On the prevention of torture was suspended and ultimately canceled last year. Due in part to a refusal to allow visits to psychiatric institutions and the forensic disability service in Queensland together with non-cooperation and entirely from New South Wales."***

**Pauline:** How have these states simply refused this transparency and with what justification? If you can comment on this. And what do you see as the mechanisms through which these actions by the states can be overcome?

**Mali:** So the cancellation of the UN Subcommittee on the Prevention of Tortures visit in Australia is near unprecedented. This has only ever happened twice. Including the cancellation in Australia. I might need to fact check this but I believe that the other state that had a cancellation was Rwanda. And that was during a period of active genocide.

And what happens as a signatory to the Convention Against Torture, Australia comes up for review every four or so years in which we are required to provide an update on progress in implementing this convention and an update on how compliant we are.

Of course, Australia, as the very carceral, violent settler colony that it is, is always questioned by the UN in regards to a range of practices that violate the convention.

But one of the biggest ones that prompted the suspension and subsequent cancellation of the visit, was this refusal from Queensland Health not allowing any of these independent inspectors into psychiatric institutions or the Forensic Disability Service. These independent inspectors deliberately visit Australia to be able to see inside these places of detention.

To be able to observe the conditions in places of detention. To be able to actually have access to and hear first hand from the people being detained, what their life is like in those settings, and what human rights violations they might be experiencing.

**Mali:** So for Queensland Health to refuse access to these settings very much implies that either there is something to hide, or that Queensland Health knows that these institutions are not compliant with the Convention Against Torture.

And we know this anecdotally, whether it be from different advocacy services who support people in these settings, or even some of the evidence from the Disability Royal Commission.

We know that violence happens so regularly in these settings because the nature of these segregated settings is that they are a breeding ground for violence and abuse. In New South Wales, the same happened in regards to police watch houses and cells. And I know, New South Wales, at the time of denying entry, shifted blame onto the federal government.

**Mali:** New South Wales knew that these settings would not be compliant, but framed it in a way to say that the reason these settings aren't compliant is because they're not getting enough funding from the federal government to bring them up to the base standards that would need to be met to call these places human rights compliant.

I personally, as an abolitionist, don't think any cell or institution can ever be called human rights compliant. But that was the logic of New South Wales and I'm sure a similar logic from Queensland government.

 I personally haven't heard the Queensland government's justification for why they denied the subcommittee entrance into segregated settings. So really it's this kind of jurisdictional blame shifting between state, federal governments.

This happens a lot in regards to the criminal legal system, in which states and territories are responsible for places of detention, as well as for the health system, in which there are more segregated settings and sites of detention, whether they be hospitals or psychiatric wards.

And there doesn't seem to be cooperation between the state or the federal government in regards to this. It's just a back and forth blame shifting. And so subsequently, nobody in power takes accountability for these places.

**Mali:** In terms of mechanisms through which these actions by the states can be overcome, I very much see a place for a federal Human Rights Act, as well as for states and territories that haven't introduced Human Rights Acts, to introduce them in a uniform way so that they speak to what could be a federal piece of legislation as well.

However, I don't want to place hope in legislation or in the state to overcome this issue. Because in Queensland, only a month or two ago, we watched our state Human Rights Act be overturned to enable locking up children. Particularly Aboriginal children with disabilities in adult watch houses.

So I'm not under any illusion that human rights legislation actually will help us uphold, or will ensure the state will uphold human rights. Regardless, it's an important mechanism, at least for advocates, to be able to hold governments to account.

But really, ultimately, the mechanisms I see as being really worthwhile in overcoming these issues is actually organising and building struggle within the disability community to enable the voices of people who are locked up in these segregated settings to be heard by the broader community.

**Mali:** Because right now, these voices are deliberately locked away. They're deliberately silenced. And because of that, it is very easy to perpetrate human rights violations if the broader community isn't aware.

I definitely see, a place for organising and for the broader disability community to to really start platforming and speaking to the violence and torture that the most marginalised disabled people are facing right now.

Too often, conversations in our community are had by very privileged people with disabilities who have access to a level of wealth, often have racial privilege by being white.Perhaps are men who are not queer for instance. And because of this conversations in our community are really limited.

So I think, through bringing the voices of people in segregated settings and starting to really speak to the ongoing violence happening in institutions in every conversation we have about disability in this country can be one way that we start to address this issue in the face of what I very much believe will be continuing ignorance and continuing disposal of people with disabilities. by our government.

**Pauline:** Yes, thank you for that. Finally, I wanted to ask you about where you think deinstitutionalisation advocacy needs to go in the future and perhaps speak to how important it is to the goal of abolition more broadly.

Now, you already touched on this with your answer just now, with regards to the disability advocacy space in this country. More broadly though, what can grassroots abolitionists, even those outside formal or professional advocacy spaces, and those who do not have a direct experience of this issue, do to support deinstitutionalisation advocacy, in your view?

**Mali:** So as a disabled abolitionist, this is a question that is always on my mind. I think one of the biggest things that we can do right now, is start weaving the question of disability into our conversations about abolition. I deeply admire and respect the abolitionist community in so called Australia.

But too often, disability is treated as a fringe issue. Too often. It is a lone disabled voice in an organising meeting or in a room drawing attention to the different institutions that exist outside of prisons and youth detention centres as we know them.

In the book, Decarcerating Disability, by an academic and disabled person from Turtle Island, Liat Ben-Moshe, Liat, along with some of their colleagues, coins the term "carceral archipelago". And I love this phrase because what it implies is that we are not just as abolitionists seeking to dismantle prisons.

**Mali:** I feel like that is a kind of common misconception about what abolition means, is that it just means tearing down prisons and, that is the scope of things.

Of course, I don't think many abolitionists think this, but this is what a lot of people who are maybe new to the idea of abolition, perceive this movement to be. However, if we take Liat's idea of the carceral archipelago, you can start to actually visualise all the little islands in society, the chain of islands in society that are underpinned by carceral logics.

And you can start to see and place different systems on those different islands. So we can look at. forensic disability centres on one island. We can look at the child stealing system, or the so called child protection system in Australia on another island.

We can look at the welfare state and how punitive systems like Centrelink and applying for the DSP or Newstart is. How punitive access to the NDIS is. And you start to see how all of these different systems are underpinned by a carceral logic that is based on locking people up, is based on punishment, is based on.

Dehumanisation, and is very much grounded in the belief that some people in our community are disposable, and some people in our community aren’t. And it is people who are racialised, people who are disabled, queer and trans people, migrant and refugee communities, who are often considered disposable by the state, and find themselves cycling between the different islands in this carceral archipelago.

**Mali:** I really love this analogy too, because often, when you are standing on one island, it can be really hard to see the shores of the other islands.It can be really hard to zoom out and see the bigger picture and see the chain reactions that happen between these systems.

An interaction with Centrelink for a disabled Aboriginal mum might then lead to an interaction with the child stealing system that then leads to an interaction with youth detention or even jail for this mum.

And so I think if we view carceral systems in this kind of archipelago like sense, you can see why it benefits the state to deliberately keep these systems obscured from one another.

So I think what grassroots abolitionists, outside of formal and professional advocacy spaces - and I personally think it is our advocacy outside of these spaces, that is the most important advocacy we can be doing.

**Mali:** But it is our advocacy regardless that starts to illuminate this carceral archipelago and starts to show the underlying logic in all of those different systems that can then lead us to not only challenging these logics when they are being proposed in new systems.

I very much anticipate that as a result from the findings of the Disability Royal Commission or even the findings of the NDIS review that I believe will be released soon. We will see a range of proposals from both federal and state and territory governments that appear as if they're responding to harm but are still grounded in this carceral logic because that's what the state does.

That is how Australia as a settler colony operates and it will never operate differently. Because it is in the bones of this colony. It is the underpinning logic of so called Australia. I think that is one of the most important things that grassroots abolitionists can be doing, and bringing into our conversations more about abolition.

The other thing that I really want to emphasise too, is that abolitionists, particularly prison abolitionists, who very much bring their lived experience to advocacy, and bring incredibly important conversations about the future... but I think what grassroots abolitionists can be doing is looking to learn from past struggles of disabled people and looking to the history of deinstitutionalisation in Australia.

**Mali:** So one thing that I always think of is the way that the criminal legal system is heading, under this very dystopic form of late stage capitalism that we're entering, and that we have entered, is that prisons are not just places with four walls. Often people might be at home with ankle monitors on, or there are all these new and emerging systems of surveillance to essentially keep people still imprisoned, even if they aren't within four walls of the prison.

And I think this is the same if we track institutionalisation within Australia of people with disabilities. We have this movement to close the big institutions. That happens. We believe we've achieved deinstitutionalisation. And yet then we have this institutional creep in which these kind of new and more obscured forms of institutionalisation are introduced.

And I think there are really important learnings from how and why that has happened that we can apply when we're looking at other settings, like prisons, like youth detention centres. And so that would be the other thing that I would encourage grassroots abolitionists to consider is, what can we learn from this past struggle?

**Mali:** And also, how can we bring in more people with disabilities into our movement? Into abolitionist struggles? And how can we ultimately start to unpack all of the spaces in which carceral violence continues to operate.

**Pauline:** Mali Hermans, thank you so much for your time. Are there any other comments that you'd like to make?

**Mali:** In talking about abolition and talking about disability as grassroots abolitionists, I think it's really important that we acknowledge what is currently happening in Palestine, the ongoing genocide, specifically in Gaza, as well as ongoing settler violence in the West Bank and all of occupied Palestine.

 And I really want to draw attention to the way that disability justice and abolition require an end to these settler colonial projects. Because we know the violence of settler colonialism creates and exacerbates disability, and it makes conditions impossible for disabled people, particularly Indigenous disabled people and others deemed as a threat or a burden to the state, as we were talking about before, to survive and to thrive in.

The violence that we're currently seeing being perpetrated by the "Israeli" state on Palestinians, we need to consider as inherently disabling, and the destruction of homes, neighbourhoods, roads leading to hospitals, the relentless bombing of hospitals and schools and refugee camps that we've seen, all of this violence, prevents disabled Palestinians from receiving the essential care that they need.

The arbitrary arrests, the denial of free movement, the caging of human beings, whether momentary or prolonged, especially when we talk about the imprisonment of Palestinian children who are 10, 11 years old… very similar to what we see here in so called Australia with First Nations children, often with disabilities being detained at 10 or 11.

These are all matters of not only abolition, but disability justice. And it's important to draw out those links as abolitionists.

**Pauline:** I encourage anyone who's interested in learning more about contemporary institutionalisation in Australia, and who wants to hear from people with lived experience to watch the deinstitutionalisation COSP16 panel video on the Queensland Advocacy for Inclusion YouTube channel.

**Pauline:** I'll put a link on the 3CR website when all of the audio for today is published. The video is really important for a number of reasons, but I think most of all because four incredible people, who are survivors of institutionalisation, or currently trying to survive it, speak frankly about their experiences, and also talk about what needs to be done.

I'm going to play their responses to the question, how effectively Australia is implementing deinstitutionalisation, and what work still needs to be done.

**Annabelle Oxley:** I believe that Australia, at this point, has failed. You will notice when I spoke earlier, I did not give details. That's mostly because, for me, it is an ongoing process and threat.

When you discuss the NDIS as an entity, it has many great successes. But none of those successes have come as a result of the support that the NDIS has shown the supported disability accommodation and large support agency industry. A lot of what we've seen is an extension of what we've seen from the past.

There is a lot of burnout. There is this expectation of being grateful for care and there's no real means of recourse as a disabled woman. I believe that not only have we failed in terms of creating new institutions with a fresh coat of paint, but we have also more or less chosen to turn our back on the goals of the NDIS.

**Annabelle Oxley:** To focus on funding goals rather than the needs of participants. As time goes on, we see ourselves more and more drawn to the models of old where funding was consolidated. Funding which led to injuries on my part, injuries on Kerry's part, and a hole in my wall, that I only managed to get patched less than five years ago.

Despite it being there for almost two years before that. I believe that as the world becomes more aware of coercive control, we should name SDA for what it is. It is coercive control and coercive institutionalisation, and it provides no recourse for the minorities within minorities that exist within the disability community.

Therefore, we as a nation and as a global community must not turn our backs on SDA or our agencies. But what has happened once can happen again, and as we saw throughout the Disability Royal Commission, what happens is the lives of those most vulnerable are ruined. Thank you.

**Brianna Bell:** Thank you, Annabelle. Maurice, are you happy to speak now?

**Maurice Quirk:** Absolutely. I think Australia is doing a pretty poor job at implementing deinstitutionalisation, in part because it seems as though we enjoy patting ourselves on the back for the fact that these services exist for supporting people with disabilities, for supporting mental health crisis without actually interrogating the abuse and the experiences of people in those facilities.

And I think in the case of mental health and psychiatric care one particularly significant flaw in the system is the reliance on police as first responders for mental health crisis. It's just one example of the institutionalised violence that takes place within institutions, but I think it's a particularly significant one.

**Maurice Quirk:** I personally have, in calling an ambulance for mental health crisis, because I was at risk to myself, I have had police officers come to my house with weapons which makes the situation a lot more dangerous than it needs to and is a very inappropriate way to respond to someone who is in crisis. Especially since it puts them at increased risk of violence.

Should those police officers assess them as, perceive them as being a risk, especially for people who are in demographics that police generally view as more threatening. I am not particularly tall. I'm not a particularly big person. I'm white. I'm at less risk of police violence. And yet, in those moments when there were police in my house, when I was in psychiatric crisis, I felt so profoundly unsafe.

**Maurice Quirk:** And even more unsafe than I was just by myself. And that police violence has been evidenced in New South Wales recently last week with the tasering of a 95-year-old who had dementia in an aged care facility. And that woman has sadly since passed away due to the incident. And that's just one example of the way that mental healthcare - "care" in quotes.

In Australia relies so heavily on the police and other types of institutionalised violence in order to manage people who are in crisis and perceived as a risk because they are in crisis. The focus is not on helping them.

It is managing them. And, I think these are really... these are aspects that are really inherent to the system and that won't go away unless we have a serious upheaval of the way we think about response to mental health crisis and response to vulnerable people in crisis in general.

**Brianna Bell:** Thank you for sharing. Sam, are you happy to share now?

**Sam Peterson:** Same. Not nearly enough. Attitudes have to change, but in order to do that they need support for the attitudes to change, so there needs to be funds to do that. Otherwise, these attitudes get all burnt out and continue the cycle of institutionalisation.

**Brianna Bell:** Thank you, Sam. We'll now go to Judulu, if you're happy to comment.

**Uncle Judulu Neal:** Well they, down at the bottom line, a lot of my people are still locked up. There's people in the prison who they cannot take to court because of you know, certain that thing. They can't, and they're just left in prison. You can't leave people with mental health sitting in prison without the help.

And because we've got a community full of stressed out people who, so stressed that the level of suicide, and all this, just keep on building, because you, Yarrabah says institution itself, where's the goodwill of the Anglican Church? They left us there. Where's the goodwill of government to start negotiating or talking to us about the return of our children.

That's an institution in itself. They're institutionalising us. So we don't do the job that we under law and Spirit of, think to, that we have to do for our people. Institutions, there's a better way.

We didn't have those sort of things in our thing because there is a code of conduct and law that talks about respect and all that sort of thing. That code of conduct has been smashed.

**Uncle Judulu Neal:** The values of that code of conduct are being oppressed because they don't carry the values of our people. To institutionalise someone means you've got a problem. That you cannot look after your mob. That we, and our mob that have been institutionalised, we can't break that sort of thing until we get back to our law and culture and our spirit.

But to institutionalise anybody it's a shame. Unless you've got a good reason. But we got a law that can cover all that. Institutionalised is not a way to go for anything. These people need help. H E L P. That's what they need. And people around ‘em. You can't leave them people in the prison system because that's not humane, that's not human.

**Pauline:** You just heard, in order, Annabelle Oxley, Maurice Quirk, Sam Peterson, and Uncle Judulu Neal, all of whom have lived experience of institutionalisation. You can learn more about their experiences, their stories. In their own words, in the video I mentioned prior to playing that clip.

You've just listened to No Health Without Abolition, Deinstitutionalisation, with Mali Hermans. We'll close now with a song by Heidi Everett, a disabled independent producer, artist, writer, mental health and arts advocate. Innovator and herself a survivor of a psych ward. Stay tuned for more Disability Day Health Sovereignty Programming.

**Heidi Everett:**

*Your love is like an anchor in my heart*

*Dragging me under the waves*

*It doesn't matter how long we've played the part*

*How these times stays the same*

*Your face comes up and I go crashing down*

*Fire fights for air*

*I can't go back and I can't go on*

*How can this be fair?*

*Oh, how I wish this ache would undo, but then I lose you*

*I'm drifting on a tide again with you*

*Nothing but the stars to pull us through*

*I wish that I could float away with you*

*Love is such a dangerous thing to do*

*When you've got no love to lose*

*I pulled up the anchor and checked the stars*

*Waiting on a perfect day*

*Navigate the rocks gathered deep inside my heart*

*How far can I make before you realise*

*I climbed out of the blue*

*Stay where you are I'll come find you*

*I'm drifting on the tide again with you*

*Nothing but the stars to guide us through*

*I wish that I could float away with you*

*Love is such a dangerous thing to do*

*When you've got no love to lose*

**Speaker 1:** You being disabled doesn't make you a burden or a stressor on a relationship. That's just what capitalism is teaching us. It's teaching us that if we're not well, we're not successful. No it's totally not the case.

**Speaker 2:** You're listening to 3CR's International Day of People with Disability broadcast.

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