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# Capacity development for empowerment in Mexico City: Women with psychosocial disabilities managing peer support, advocacy and self-representation

➔ By Disability Rights International together with **Collectivo Chucan**



**Topic area:** Enhancing the empowerment of women with psychosocial disabilities.

## Background

DRI is a US based organisation that campaigns for the promotion of human rights and full participation of people with mental disabilities across the world. Using the experience of legal professionals, mental health professionals, human rights advocates, people with disabilities and their families they investigate and document human rights abuses. Their work is helping to improve legal and service systems, assisting governments to develop laws and policies that promote community integration and human rights enforcement for people with disabilities

(<http://www.driadvocacy.org/about/>).

Mexico has ratified both the Convention on Elimination of Discrimination Against Women (CEDAW) and the Convention on Rights of Persons with Disabilities (CRPD) and in 2011 adopted a Law for the Inclusion of Persons with Disabilities. However, DRI has been collecting evidence since 2000 to show

that women with psychosocial disabilities continue to be segregated against their will in poorly administered mental hospitals, deprived of their right to make their own decisions and at high risk of sexual and gender-based violence (DRI, 2010 Abandoned and Disappeared: Mexico's segregation and abuse of children and adults with disabilities). Women in particular were disempowered, unaware of their rights and isolated either within their own families or through segregation in psychiatric institutions. Women (and men) with psychosocial disabilities were experiencing overly frequent hospitalization in psychiatric institutions and general marginalization with health staff frequently treating them as objects rather than respecting them as equal citizens.

In response to the realisation that there was no representative group of people with psychosocial disabilities in Mexico, **Collectivo Chucan** was established in Mexico City.

## What happened?

DRI have been supporting **Collectivo Chucan** for the past three years to develop their skills and capacity as self-advocates but they realised that **Collectivo Chucan's** ability to effectively advocate for the rights of women with psychosocial disabilities was still limited. And until women are able to speak out for themselves they remain at risk of abuse and gender-based violence. The lack of effective advocacy was rooted in the fact few women were visible in **Collectivo's** discussions so this project was set up in order to develop an approach to improve the self-representation of women.

The aim of the project was to establish a women's group within **Collectivo Chucan** and in order to achieve this they focused on building the capacity of one woman in particular who had shown an interest in taking on a leadership position to champion the rights of women with psychosocial disabilities. On becoming a gender officer in **Collectivo** she was given intensive training running groups, leadership,

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disability and human rights and mentored by some of the male leaders within *Collectivo*. Having gained the necessary skills and confidence herself, she was then supported to work with other women, teaching them the same skills and knowledge she had gained. Before long a new group of women with psychosocial disabilities had been established with *Collectivo* and was beginning to offer peer support to even more women. The original leader is now highly respected, presents a radio show, and recently reported at the Inter-American Human Rights Commission. All members of the women's group are now engaged in visiting institutions to research the situation regarding the reproductive health of women with psychosocial disabilities, and continue to raise awareness about *Collectivo*.

### **What worked?**

Focusing intense levels of capacity building support to develop the skills of one leader proved particularly effective in that she was quickly able to apply her knowledge to motivate and skill others. Supported by the project and mentored by other *Collectivo* leaders and DRI she became a very important role model which motivated other women. Even when she had to step down as leader for a while, there were enough skilled people to continue leading the group. As a group they developed a particular mix of support including peer counselling and mutual support, and most importantly assistance during mental crises. The shared experiences of the women ensured that they were able to develop highly appropriate mechanisms for support which actually contributed to a stabilization of members psychosocial situation and a general reduction in the need for hospitalization.

### **What changed?**

The most significant changes have occurred amongst the women with psychosocial disabilities. There has been a real sense of

empowerment with the women regaining their capacity to take key decisions affecting their lives (including linked to reproductive health); seeking peer support during times of crisis, rather than relying entirely on medical professionals; and speaking out as self-advocates for the rights of people with psychosocial disabilities. This has affected families too, many of which are now more accepting of the need for members with psychosocial disabilities to make their own decisions. Although *Collectivo Chucan* had always provided mentoring and peer support to women with psychosocial disabilities it wasn't until this project started that they realised the need for women themselves to be represented in leadership and decision-making positions. Male members of the collective now recognise the unique and diverse contribution that women members bring to the organisation are committed to ensuring they are able to participate equally in the group's decision making. All members now support gender equity as a key principle of the Collective. More broadly, health staff in the hospitals they visit on a regular basis have started to treat them with more respect and generally the Human Rights Movement has begun to accept the need to understand psychosocial disabilities and access to justice as a rights based issue.

### **What did we learn?**

Human rights training was key to empowering the women during the early stages of the project. Understanding that their individual impairment was not the most disabling factor in their lives but that they could change the way they were treated by using rights as a tool was highly effective. Once they understood what kinds of discrimination they were facing they could do something about it; especially by working together with others in similar situations. There is still a need to broaden out the groups' knowledge and understanding of relevant rights documents. So far they have focused mainly on disability rights and the

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CRPD. In fact CEDAW offers a lot of additional opportunities for this women's group so in the future it will be important to learn more about this rights treaty.

So far the group is still only active in Mexico City so although it does carry out advocacy at national level, it is not yet representative of Mexico. It will be important in the coming years to expand the women's group into new states around Mexico. That's so that more women with psychosocial disabilities can benefit from the group's support and to ensure a more truly representative voice. Longer term funding to support the development of groups like this are needed for sustainability. It does take time to develop the confidence, skills and capacity to maintain groups like this and they cannot expand without additional resources.

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