

Following a series of quiet protests outside Revenue Canada offices, Gordon Stewart was apprehended by police at the Victoria Law Courts, taken to a hospital, put into seclusion and forcibly drugged for 10 days.

An overabundance of caution

ROB WIPOND

We're worried about each other's "mental health" a lot more than we used to be. But calling 911 for someone can be a disastrous approach, say victims of our good—or not so good—intentions.

The day before, John had interred his mother's ashes. But then came what he describes as an "unbelievable, incomprehensible incident" that, in his sensitive state, was "otherworldly" and "traumatizing."

John (who wishes to keep his name confidential) went to a Victoria recreation centre to try to clear his mind. He bumped into a friend and they talked into the wee hours. When John returned home, the lights in his condominium were on.

"I thought I must have leaned up against the dimmer switch when I was putting my shoes on," says John. Then he noticed an out-of-place binder, his laptop positioned differently, his email program opened. "Something was askew," says John. "It was like I was in some sort of parallel universe."

Had someone broken in? Visible money hadn't been taken. "It was just a really creepy feeling," he says. Having suffered a heart attack last year, and also taking medications for anxiety and help with sleep, the 50 year old felt a "physiological response" to the sense of "violation" and quickly took his medications. "I'm in no immediate danger," he said to himself.

At five in the morning, John was awoken by his phone ringing. A police constable introduced himself and said, "We're just wondering how you're doing."

"I'm sleeping," answered John through a sedated haze, recalling the disjointed dialogue as best he can several months after the incident earlier this year (he'd later obtain the police records). "My mom just died and I just cremated her and buried her. It's not a really good time."

The constable asked if police officers could drop by. "Someone's been trying to get ahold of you and they're quite worried."

The statement seemed strange to John, who'd been fielding calls and emails constantly from his and his mother's friends for weeks; however, the constable wouldn't name the caller or explain more.

Around 10 am John was awoken again by a firm, loud knocking. He groggily opened the door to two Victoria police officers let in by his building manager. They wanted to talk.

Embarrassed by his messy home, John suggested that he'd go to the washroom and then they could all sit in the condominium lounge. The police refused both suggestions, and soon John was standing uncomfortably in the building hallway being interrogated. The officers asked him very personal, informed questions about his mother, his lifestyle, and his health.

Did it occur to John to refuse to talk? "No!" answers John. "Because I couldn't believe it was happening, Rob. I didn't ask what my rights were...I didn't ask, 'Can we talk again after I've spoken to my attorney?' It was like an alien abduction. You're in the tractor beam, you are powerless, whichever way they tell you to go, you go. I'm not in the habit of being confronted by authorities, and I'm certainly not in the habit of being confrontational back."

"Do you have a plan?" said one officer suddenly.

"A plan for what?" asked John.

"Have you ever thought about suicide?"

"Sure, at different times, who hasn't?" answered John.

"Do you have a plan?" asked the officer again. "Have you tried to cut yourself?"

In recounting the story, John imitates his own flabbergasted response. "No! No!"

After half an hour, one officer commented, "You still don't know why we're here, do you?"

John responded, "I have no idea why you're here!"

"Someone's very concerned that you might harm yourself."

"Who? Who is this person?" asked John. "And why are you here and why aren't they here, if they care for me so much?"

The police admitted that they'd searched John's home the previous night as part of their investigation to decide if John should be taken to a psychiatric hospital. Currently on disability, John assured them that he was seeing several competent doctors regularly for his various physical and mental conditions, and wasn't feeling at all like killing himself. The officers eventually seemed satisfied. As they waited for the elevator, one officer answered again that they couldn't tell John who'd called them; "however," the officer added, with a finger pointing towards John's transfixed eyes, "you should be really thankful that you have people in your life that care for you this much."

The elevator opened and the officers departed, never to return. "I was just left reeling," says John. "I was nearly committed!"

There have been significant increases in mental health calls to police in recent years. Plausible explanations include cutbacks to social services, growing homelessness, and unhelpful treatments. However, the biggest factor may be one that no one is discussing. According to rough calculations provided by Victoria Police Department Information Manager Debra Taylor, VicPD gets about two or three mental health calls daily of the kind that prompted police to visit John. About 18 of 20 are coming from people who aren't physicians. Evidently, in the wake of extensive TV advertising, news coverage, and public education about mental health, people are increasingly calling 911 to report each other's behaviours.

But how do police decide whom to take to hospital? What happens when they do? And what are the true motives of these callers? For months afterwards, John wondered what "friend" of his would deliver him to the brink of incarceration in a psychiatric hospital—none of his friends ever admitted to it.

Vince Geisler, on the other hand, knows for certain it was no friend of his who made the call.

Dare not sound too upset

Vince Geisler was laid off for financial reasons after two years as the South Island field technician for Vancouver's Navigata Communications. Geisler says he and Navigata's human resources director never got along. There is disagreement about exactly what got said in their final conference call, but Geisler admits he became angry and hung up. He then went into his home workshop.

"I started to do some welding," says Geisler, "just to kind of focus my attention on something else so I'm not sitting there brooding." A couple of hours later he decided to go to Hillside mall for lunch but stopped mid-step when he spotted a van and police with guns drawn.

According to police records, the street had been cordoned off by about ten officers, including an emergency tactical team with assault rifles. They called Geisler out. He walked over and asked what was going on. Geisler was “calm and cooperative” state police records. Police told Geisler that he was being arrested under Section 28 of the *Mental Health Act*, slapped handcuffs on him, and loaded him into the van.

“I’m like, ‘What in the hell?’” describes Geisler. He says this was when he uttered the first of many clear, firm requests to be allowed to contact a lawyer, which were refused.

At the Royal Jubilee Eric Martin psychiatric hospital, a psychiatrist asked Geisler how he was feeling.

“I said I’m feeling a little stressed out because I’ve just been laid off and I’ve been basically kidnapped and hauled off here and I’m being denied a lawyer,” recounts Geisler.

Geisler learned that Navigata’s HR director had called Victoria police, alleging that Geisler had said, just before hanging up, “I may as well walk off, put a gun in my mouth, and blow my brains out. You’ve ruined me.” For his part, Geisler says he wasn’t feeling suicidal (“For a job? Seriously?” he says.) and believes he may have said, “I feel like I’ve been shot.” His wife of 16 years suggests Vince sometimes uses dramatic language when he’s upset that some might take too literally. “He can be a little volatile that way with his speech,” Carol says.

Police had then determined that Geisler, a hunter who also sometimes worked in bear territory, had five registered rifles and shotguns, and a handgun. When Geisler hadn’t answered his door (his workshop was in the basement and he didn’t hear knocking), police had suspected Geisler had barricaded himself.

Misinterpretations escalated further in the hospital.

Geisler told psychiatrist Diana Ingram that he didn’t understand the police actions. Geisler mentioned his medications for ADHD and chronic pain from an old injury, but forgot to mention an antidepressant (often prescribed off-label for ADHD). Geisler said he wasn’t depressed, and in the circumstances understandably downplayed suggestions he was “under stress.”

All of this served to indict Geisler.

In her assessment, Ingram described Geisler as being “limited” in his “insight” about police concerns, and “not totally truthful” about his stress. She wrote, “It certainly would appear from his prescription of an antidepressant that he has been on for some time that he has been depressed and which he has denied. Given his lack of honesty and forthrightness, for his safety he is being detained...”

Geisler was locked in seclusion and ordered to change into a hospital gown, and his wife would be prevented from seeing him. “It’s kind of like a cell, and there’s nothing in there except for a toilet in the corner and a mat on the floor,” describes Geisler. “If anything would have alleviated the fear and the stress, it is actually having somebody that I can trust, somebody I’m paying to represent my interests, or somebody I love who I know inherently will represent my interests, to talk to, to go between, to find out what’s going on. But I was isolated. Cattle have more rights being transported to the abattoir than a person does under the Mental Health Act. Seriously. It’s ridiculous.”

Geisler was officially labelled as “incapable of appreciating the nature of treatment and/or his or her need for it” and, at 5 pm, security entered Geisler’s room led by a nurse carrying a Dixie cup with pills. Geisler says he was told the drugs would calm his nerves—and if he didn’t take them, they would force him to.



“I DON’T WANT TO BELITTLE rape, but I felt like I had been mentally raped. I felt so violated by the people who are supposed to have my best interests.”
—Vince Geisler

He woke up 16 hours later. “I’m looking around, what the hell just happened... For about five minutes, I didn’t even know where I was,” describes Geisler. “I’m groggy, I can barely even stand up.”

Geisler says he was still “looped” when another psychiatrist interviewed him that morning. This psychiatrist wrote that Geisler had “no suicidal or homicidal ideation” and “no evidence of a formal thought disorder” and immediately discharged him.

“I don’t want to belittle rape, but I felt like I had been mentally raped,” says Geisler. “I felt so violated by the people who are supposed to have my best interests.”

Geisler next discovered that police had applied for a court ban on him owning guns. The reason? Because, police argued, Geisler had threatened suicide and been incarcerated in a psychiatric hospital. However, the judge ordered Geisler’s guns returned and even demanded police clarify their records so that the event wouldn’t be a “lifetime millstone” that could precipitate similar miscues again. “I want such an entry [in police records] to very clearly articulate the fact that the court has found that there are no issues related to the public safety or Mr Geisler’s safety in relation to firearms,” the judge wrote. “I want that in very bold and express terms.”

It was small vindication for Geisler. He says he now suffers severe anxiety and has not been able to return to working since the incident in 2011. “I had been taught that we live in a country where you have

certain inalienable rights. I was shocked at how those rights were just utterly washed away in the blink of an eye.”

I ask his wife if she’s seen changes in her husband from the apprehension. “It traumatized him,” says Carol. “There’s still in him a sense of fear in an employment setting, because of the sense of betrayal from the company that he was working for that led to this.”

Vince’s complaint against the police officers was dismissed. He then wrote to VicPD’s Police Board, arguing that police should always allow people apprehended under the *Mental Health Act (MHA)* to retain a lawyer without delay pursuant to Canada’s *Charter of Rights*. He was told that the Board had asked Chief Jamie Graham to “investigate” the issue.

Geisler didn’t know that after Gordon Stewart had complained years before, Graham had been “investigating” the issue for years.

Dare not protest

Gordon Stewart provides a seminal example of how *MHA* apprehensions can be easily prompted and steered by anger, fear, gossip, incomplete facts, falsehoods, and highly subjective interpretations—making the *MHA* a dangerous interpersonal weapon.

On May 24, 2001, Stewart parked his truck outside Revenue Canada’s Victoria offices with a banner hanging from it saying, “Canada’s Dishonest Tax Police,” and talked with passers-by about his forthcoming self-published book.

Stewart’s tale is long and complex, and twists continue into the present. But basically, in 1990, Revenue Canada determined that Stewart owed about \$5000 in taxes for his struggling small arborist company, which he argued he didn’t owe. They repeatedly seized Stewart’s bank account, garnished his wages, and coerced payments. In 1999, however, Revenue Canada issued a “notice of reassessment” and returned to Stewart \$11,266.03 they’d leveraged out of him over ten years. It was a lot of money to Stewart, a man generally of modest means with a wife and four children today in their teens, and he decided to further research Revenue Canada’s workings and write a book about his experiences—which soon led to new conflicts.

It was most likely Revenue Canada that called police about Stewart while he was promoting his book, even while the police record described Stewart as “rational and calm” and “does not want to hurt anyone or anything, just wants to protest out front of the [Revenue Canada] building.” Revenue Canada definitely called police the next day when Stewart came in to discuss an issue related to his book. “We stood by and the [Revenue Canada] director met with Stewart and all went fine,” stated the police record.

On May 29, Stewart went to the courthouse. Concerned that Revenue Canada might try to confiscate key document evidence he’d obtained about their mistakes (they’d seemingly already tried), he wanted to obtain a peace bond to help prevent that from happening. He asked Crown Counsel to call Victoria police, so they could all meet and sort out a bureaucratic runaround that he’d been getting about how that might be done.

Stewart says he wasn’t acting abnormally. An unnamed security person actually made the call, but between the police record’s vagueness and sections censored from Stewart’s view, it’s apparent only that this caller requested removal of an “unstable” person and provided “no other information.” When police arrived, both Stewart and police records indicate no conversation took place. Police instantly handcuffed Stewart and ushered him to a waiting van, even though there’s no indication in police records that he’d been threatening or



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disruptive. Had some muddling of the message occurred passing from Stewart to Crown Counsel, the caller, and then police? Had police decided that if they get three calls about you in a week, odds are you must be crazy, no discussion needed? In any case, after they'd detained him and denied his request to call a lawyer, police described Stewart as becoming "very emotional," and took him to hospital.

His partner of 28 years, Rita Dutsch, had talked with Stewart just an hour earlier, and says the sudden apprehension was a complete shock and utterly perplexing. "Gordon's a really calm guy. He doesn't get upset. He's never had mental health issues his entire life." No one ever interviewed her, she adds.

At the hospital, with Stewart still cut off from contacting counsel or his family and becoming increasingly confused and concerned about what was happening, Dr J. Stempien began his analysis of Stewart's "agitated" but "in control" status: "Police were called to Revenue Canada, I am not exactly sure why. I can only assume [Stewart] was being somewhat threatening at Revenue Canada." Starting from these demonstrably false assumptions ("When I said I was at the courthouse, did he think I was delusional?" comments Stewart), Stempien then tried to render judgment.

"On one side, the story sounds one of paranoia with Mr Stewart saying Revenue Canada is out to get him, he is worried for the safety of his wife and children, he thinks Revenue Canada is going to do him away," Stempien wrote. "On the other hand," Stempien continued, there was clear corroborating evidence that in fact, "Revenue Canada has been out to get [Stewart], they admit to making some mistakes, it sounds like they have been very hard on him financially, and not having good reason to be so." Stempien then tried to reconcile these conflicting versions of reality: "[Stewart's] insight seems reasonable up to the point where he says 'Revenue Canada is going to blow away my wife and children.'"

"I never said that," states Stewart, and it's not clear from the records if Stempien heard those provocative words, or whether they came to him second or third hand like the other false information. Stempien also didn't discuss whether "blow away" might be dramatic vernacular for, say, "drive into abject poverty." So, weighing those provocative words alongside police concern that Stewart "may try to do something," Stempien decided, "it is best" to hold Stewart longer.



Vancouver Police Constable Brian Montague

Reviewing many such records of Stewart's apprehension, it's difficult not to conclude that, regardless of whether or not Stewart really did act "irrationally" at any point, the vastly greater madness was these *ad hoc*, poorly investigated, haphazardly documented, unfair and hurried processes by which people imposed hugely consequential judgments upon him, and him alone.

Montague acknowledges that police give more rights to suspected criminals than to people suspected of having mental disorders.

Stewart was put into seclusion and forcibly drugged, still vainly demanding a phone call and *Charter* rights. "I was doped out and really weak," Stewart says. The next day he did reach a lawyer and learned he could only appeal his incarceration after three weeks—but he felt better, he says, just having a lawyer. He was held and drugged for ten days because, he believes, after day one he was refusing to speak to any more psychiatrists. "I'm holding my ground," he describes, "as a Canadian citizen." On day eleven he buckled and spoke with a psychiatrist, who promptly discharged him. "I said, 'Just like that? Free to go?'" describes Stewart. "I felt like running, but I walked."

Duty of care

VicPD wouldn't provide anyone to be interviewed. However, Vancouver Police Department Constable Brian Montague offered helpful insights into police perspectives. Montague is Media Relations Officer with the VPD.

Montague says that of the thousands of mental health calls VPD fields annually, "Very few of the calls that we get would be from a physician." Relatives, co-workers, bosses, friends, landlords, or passing strangers are more likely to be reporting on someone they've seen seeming depressed, missing work, acting strangely, or posting worrying comments online. "If we get called, there's a duty for us to attend," adds Montague. "Someone will go in every case." Callers' identities usually aren't revealed.

This alone is problematic, notes John. From police records, he believes he's determined who called about him and it was indeed a friend, says John—a friend diagnosed with schizophrenia who frequently calls ambulances for himself. "I cannot believe that they immediately started investigating me rather than investigating the source," says John. "It can and does have catastrophic impact on people's lives when the information is not accurate." John is worried about the impact of the record alone; Canadians have been turned back by US border services based on records revealing that they were once visited by police for mental health reasons.

Montague also confirms that police might in some circumstances apprehend someone under the *MHA* without even conversing, and says police have broad authorities in "exigent circumstances" to circumvent the requirements for search warrants and bypass due process rights to help people. When someone might be suicidal, says Montague, "If I knock on the door, am I going to stop there because there's no answer? Absolutely not...Under exigent circumstances, I could use as much force as necessary."

Is any vetting of callers done? Am I the first person to ask whether some callers might be overly sensitive, less than altruistic, or even lying with malicious intent to cause fear and trouble or get someone out of the way? "I don't think it's a case where it's never been discussed," says Montague. "From the police perspective, though, we can't afford to have those debates, because we do have a duty of care...We still have to go, assess the situation, and determine what's truly happening here."

How do police decide whom to take to hospital? Montague says Vancouver police

Solidarity—not charity

Reidar Christianson is a self-described “street warrior.” He says Reverend Al is one too—“Al will do anything in his power to help others.” Reidar, a long time alcoholic who shuns harder drugs, wears a leg brace these days, the result of a serious cycling accident eight months ago. He broke an arm and suffered ligament and tendon damage in his leg. He was ready to give up, he says, but “Reverend Al was behind me the whole way—he wouldn’t give me permission to give up.”

Besides moral encouragement and help with accessing resources, Al often gave Reidar a lift to medical appointments after his accident: “Al knew getting on a bus was almost impossible for me at that point,” says Reidar, who also explains how just a simple cup of hot coffee, when you are cold after a night on the street, can mean so much. “I know for a fact Al’s presence on the street has helped many hundreds of people.” Reidar himself is happy to report that he’s about to move into an apartment for the first time in years.

Al himself stresses that while his most important role is to be a loving presence in the lives of street people, he’s not doing it alone. He’s backed by the Victoria Dandelion Society, and its professional board, chaired by Ned Easton since its conception, and volunteers. Established just over two years ago, the Dandelion Society’s mission is to “foster respectful, restorative relationships with everyone who struggles,” so that people living on the street—usually lonely and alienated, often drug-addicted and/or mentally ill—know they matter and have inherent gifts.

Five mornings a week, Al and his volunteers hit the streets at 5:30 am in a van stocked with two huge coffee dispensers, boxes of baked goods, blankets and socks. They usually see about 80 people, in about 8 different Downtown spots. These rounds allow Al and his crew to find out if anyone is sick or suffering emotional distress. Is someone ready to enter housing? Does someone need to be in touch with police or a lawyer or need help filling out forms to get housing or social assistance or into treatment? Depending on what they’ve found, the volunteers’ days could take many shapes.

One of Dandelion’s volunteers (who is also a board member and generous donor) is Ann Cameron, who helps dispense coffee and compassion a couple of mornings a week. She has even brought her grown children to help some mornings. “I wanted my children to see that they are all people. We’re all the same. It could have been one of my own children.” She admires the hardiness and perseverance of the street population in spite of many obstacles. She points to a binner, saying, “He works harder than I do! And I get to go home to my nice comfortable house after working.”

Ann, who acts as general all-round ambassador for Dandelion’s program, has witnessed some heart-warming success stories during her involvement: people who go into detox and treatment and then maintain themselves, with help, in a home. Michele, for instance, is living in an apartment and has been connected to the help she needs for health issues including severe diabetes.

One-on-one support is crucial in the early phases of moving off the street or drugs. Besides helping someone fill out forms for a treatment program or disability allowance, support might mean ensuring that someone who has decided to go into treatment, gets a ride there as soon as they are released from detox. Sometimes, as on one recent morning, Al promises to find a pair of work boots, size 8, for someone who is determined to get work as a labourer.

This friendly help is given with no judgment or strings attached. In a newsletter of the Dandelion Society, Al explains it this way: “There is another way to live with those who can’t quite fit into a society of competition—a society that prizes individualism, efficiency, and profit over people,



Reidar Christianson and Reverend Al Tysick

community, and relationships. Theology for me is not simply words and worship. It has to do with the way in which words find flesh; it has to do with following the words and putting them into action. That’s why we put our shoulder to the plow together—not as ‘cared’ and ‘cared-for,’ as ‘haves’ and ‘have-nots,’ but as friends. It’s about solidarity—not charity. With this in mind, we offer mutual respect and relationship, and the unconditional acceptance that each unique and valuable person deserves.”

Al’s days often include a visit to the hospital to check on someone who is ill or injured. Sometimes he visits the jail. He puts them in touch with other community resources, depending on their needs. Besides being a loving presence in their lives, “We’re sort of a catalyst,” Al explains, emphasizing that he avoids duplicating other service organizations’ work. “Our city has some great resources; there are some great programs like Streets to Homes,” says Al. But many on the street aren’t ready and will need help when they are. The Dandelion Society, with its special type of outreach, provides the missing link.

The Dandelion Society doesn’t rely on or seek government money. “Taking government money would limit what we can speak out about,” notes Al, who says the problems are getting worse, with people living outside throughout Greater Victoria.

Donations of any amounts are welcome to the registered charity. As are socks and gently-used sleeping bags. The Society relies mostly on volunteer staff, with minimal paid stipends, and has no facilities of its own, so nearly all funds received go towards the direct needs of those they serve—a pair of pj’s in the hospital, a bus ticket, a set of clothes upon release from jail, a pair of reading glasses or work boots, personal effects to help with hygiene and habitation on the streets—things the rest of us tend to take for granted. Donations can be made through the website. Al says most of those who donate are ordinary people giving small contributions, often pensioners and others who don’t have a lot to spare themselves. “We rely on the community to support our mission.”

The Dandelion Society

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get mental health training and try to always bring a psychiatric nurse, but admits, “That’s a tough question to answer because we’re not mental health professionals; we’re police officers...Every situation is different.”

Nevertheless, Montague acknowledges that police give more rights to suspected criminals than to people suspected of having mental disorders. I ask if part of the reason is because police assume a psychiatric hospital is a safe, good place, and therefore, even if their assessment proves incorrect, no harm will be done.

“I think I agree with you,” replies Montague. “Our officers are under the understanding that if they make that decision to apprehend someone and take them to the hospital, they will get care there, and good care.” Montague adds, though, that one of the reasons Vancouver police have been publicly pushing for more mental health services is so that police could potentially direct people towards other services. “Years ago, the police were the last resort when it came to mental health, and we’re becoming the agency of first resort. And we shouldn’t be,” says Montague.

No one from our psychiatric hospital was available for an interview, but VIHA media liaison Sarah Plank provided some written answers. A patient will be informed of their rights upon admission to hospital, wrote Plank, “if the patient is able to understand the information at that time.” A patient will be refused contacts with family only for “clinical or other valid and important reasons.” And a patient will be forcibly drugged right away only based on “prudent yet timely clinical judgment.”

Are rights bad for your health?

Stewart has been campaigning to change BC’s *Mental Health Act* to comply with Canada’s *Charter*. “I agree with detaining a person,” says Stewart. “Taking them in a safe room, now you can let the rest of the process take place: a call to a lawyer, a call to family. Forcing me to remove my clothes and drugging me, that’s not justified.”

Geisler agrees. “Unless the person is trying to grab anything he or she can to harm themselves, there’s nothing that’s so expedient about a mental health issue that it requires them to railroad you through the system,” he says. “It’s not like you can just drop dead from being bipolar...I think it’s more convenient [for staff to tranquilize you], but I think that does far more harm than good because it builds mistrust.”

BC’s mental health laws were challenged in 1993; however, the plaintiff had a long psychiatric history and was sometimes in dangerous situations. Justice Donald therefore concluded that care would be slowed and harmed if patients had due process rights. “Canadians want to live in a society that helps and protects the mentally ill,” he wrote.

However, since then, BC’s committal criteria have expanded significantly, no longer applying only to those in dangerous states. Simultaneously, the definitions of mental disorders have broadened considerably—the US National Institute of Mental Health states 25 percent of our population is now mentally ill at any given time. And people are reporting concerns to police much more often. So it’s unclear how BC judges would regard a case like Stewart’s or Geisler’s today, where gossip gets people incarcerated; where it’s an impossible task to distinguish vague disorders from uncomfortable behaviours and potentially-somewhat-dangerous tendencies; and where psychiatrists can just as likely cause serious harm as healing.

It’s precisely in this context, then, that Geisler and Stewart argue all the more strongly that all potential psychiatric patients must have due process rights respected and strictly followed to minimize traumatizing mistakes.

More people are coming around to their perspective.

The Commission for Public Complaints Against the RCMP in 2008 wrote, “Individuals brought into police custody under the authority of mental health legislation are unquestionably detained or arrested. Accordingly, all such individuals are guaranteed rights under s.10 of the Canadian *Charter of Rights and Freedoms*. These include...the right to retain and instruct counsel without delay...” A Canadian Department of Justice report states that upholding *Charter* rights makes good mental health sense, too, because “the traumatic circumstances surrounding an arrest or detention may well serve to exacerbate underlying mental health problems...”

Ontario, the Yukon and other provinces have written *Charter* rights into their mental health laws—most importantly, requiring separate, distinct tests and processes before someone can be deemed incapable of understanding and forcibly drugged.

Stewart also wants Victoria police to at least submit written apprehension records to hospitals, to prevent factual mistakes and third-hand accounts. In BC, the RCMP

and some municipal police departments already do exactly that. “It’s our policy to provide that information in writing in the form of a report to the doctors so there’s no confusion as to what our observations are, what the information is that we’ve received,” explains Vancouver police’s Montague. “We find that it’s good practice just to make sure that everyone knows what’s going on.”

But Stewart has been stonewalled in his efforts to change BC laws or Victoria police practices. After *Focus* began inquiring, in June of 2013 the Victoria Police Board finally responded to Stewart, stating that allowing *MHA* detainees to contact lawyers “is a matter of police discretion.” They ignored the question of written reports. The Police Complaints Commission criticized VicPD’s Board for taking three years to respond to Stewart’s policy complaint (Stewart had earlier complained unsuccessfully about the arresting officers), challenged their key arguments, and urged them to “investigate further.”

Stewart suspects that VicPD’s reluctance to discuss or change their policies relates to Chief Graham’s other role as a director of the BC Schizophrenia Society—prominent proponents of forced psychiatric treatment.

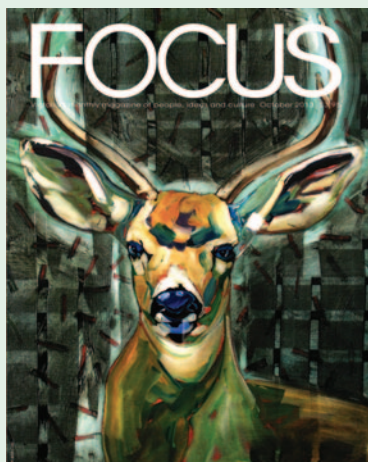
Asked why hospital doctors aren’t demanding written police records to help their clinical assessments, VIHA’s Plank wrote, “We have identified this as a gap and are working to connect with the local police departments to jointly develop a standardized process.”

“I don’t want to go public with this story, I don’t want anyone to know my business,” says Stewart. “But I started this [complaint] process in 2001...Are they going to end this any time soon? Are they going to change the policies for other people so that it doesn’t happen to them? It needs to be told, so people can understand that, yes, this can happen in Canada.”

But Stewart says he won’t risk releasing his book and taking on Revenue Canada again until our laws change. “Could somebody call police and give them misinformation again?” he says. “I think I would be stupid if I wasn’t concerned.”



Rob Wipond has won a Jack Webster Award as well as a Western Canada Magazine Award for his writing in *Focus*. After writing this feature, he says he’s worried we’re descending into psychocracy.



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