

POWER THREAT MEANING FRAMEWORK

TheMHS Consumer Day 2021

Amanda Waegeli

and

Trish Tran



Acknowledgement to Country

- We wish to acknowledge the traditional owners of all the lands in which we are on as we meet together online.
- In particular we would like to acknowledge the Wadjuk noongar people, the traditional owners of this land in which we are here in Perth, Western Australia.
- We pay our respects to the owners past present and emerging and acknowledge their strength and courage on their journey to overcoming the impacts of trauma, colonisation and oppression.
- This is their land and always will be.

Trauma amongst us

- We acknowledge that there are many people here today who have experienced emotional distress because they have experienced trauma.
- If you notice today that something in the content triggers a trauma response, we want you to know that trauma responses are often innate and cannot be helped.
- People with unresolved trauma can be easily triggered. People who struggle with the impacts of trauma are not weak, coping with trauma is not about willpower.
- While people can recover from the impacts of trauma, we know you can't just move on, it takes time.
- We trust that you will draw on your own self care strategies and supports first, but we also want you to know there is help available.
- Blue Knot Helpline is a good place to start 1300 657 380

Emotional/Mental Distress

- One thing we all have in common is that we have all had experiences of emotional distress.
- Usually in order to get help and support we have let (usually trained professionals/ experts) make meaning of our experiences.
- The way they look at our experiences and make sense of them matters because this can then influence our way forward.





**FRAMEWORK
IS LIKE A LENS
OR WAY OF
LOOKING AT
SOMETHING**

The biomedical model



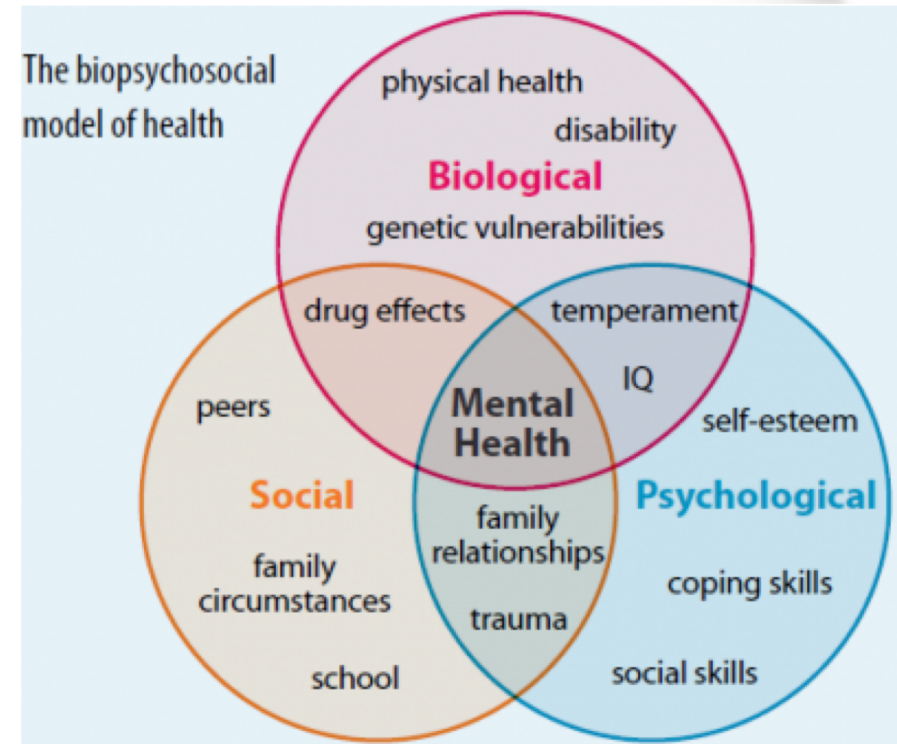
- The biomedical model of mental illness treats mental disorders in the same way as a broken arm, i.e. there is thought to be a physical cause.
- The doctor will judge that the 'patient' is exhibiting abnormal behavior by asking questions and observing the patient.
- This model has been adopted by psychiatrists.
- Supporters of the medical model consequently consider symptoms to be outward signs of the inner physical disorder and believe that if symptoms are grouped together and classified, the true cause can eventually be discovered and appropriate pharmaceutical treatment given.

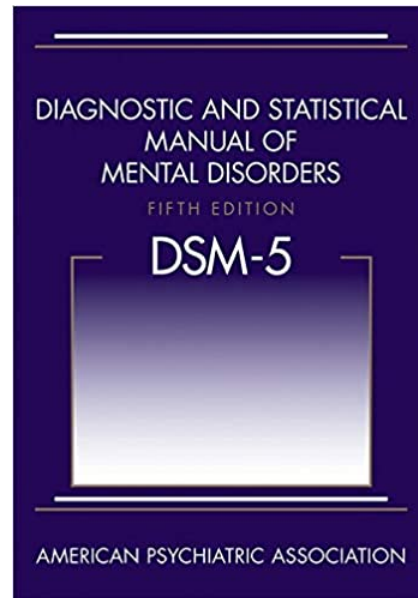
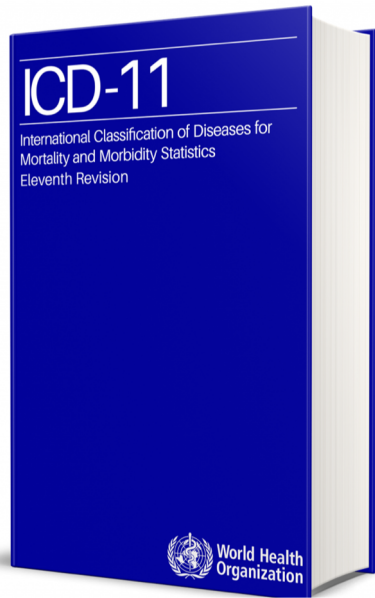
Other frameworks

The Holistic Model



Biopsychosocial





DSM-5 AND THE ICD-11



Psychiatry's Bibles and
ideologies

Problems with Diagnoses

- Diagnosis is often presented as the **only way** of thinking about distress
- Diagnosis works well for **physical illness** but illness models are not suitable for mental distress
- Diagnosis can be **victim blaming** "The child has conduct disorder", "The teenager has bipolar" etc.
- Diagnosis does not support people to tell their story, and so their life **story often remains unheard**
- Diagnosis can be hugely damaging in terms of telling a person in distress that they have an illness. 'We **turn people with problems into patients with illnesses.**' (Lucy Johnstone)
- **Diagnosis can give the message** that the best people to help you are **medical staff** who **know about drugs** rather than deeply empathic people who are not afraid of intense emotion and know how to connect with you verbally and non-verbally on a profound level
- **Psychiatric labels don't make any reference to a person's life** context hence can **deny the impact** of lived experience.

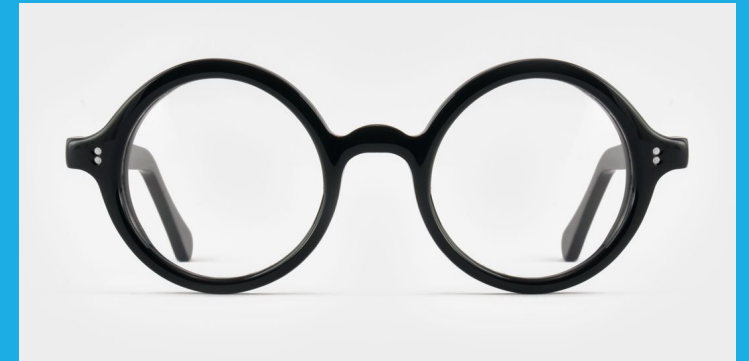
The above adapted from <https://www.madinamerica.com/2018/03/dr-lucy-johnstone-power-threat-meaning-framework/> - Mad in America and The Power Threat Meaning Framework, BPS)

The Power Threat Meaning Framework

Towards the identification of patterns in emotional distress, unusual experiences and troubled or troubling behaviour, as an alternative to functional psychiatric diagnosis



January 2018



**POWER
THREAT
MEANING
FRAMEWORK**

Main aspects of the Framework

- 'What has happened to you?' (How is Power operating in your life?)
- 'How did it affect you?' (What kind of Threats does this pose?)
- 'What sense did you make of it?' (What is the Meaning of these situations and experiences to you?)
- 'What did you have to do to survive?' (What kinds of Threat Response are you using?)

In addition, the two questions below help us to think about what skills and resources people might have, and how we might pull all these ideas and responses together into a personal narrative or story:

- 'What are your strengths?' (What access to Power resources do you have?)
- 'What is your story?' (How does all this fit together?)



POWER

HOW DOES IT OPERATE IN MY LIFE?

POWER Here are some common examples of ways that lack of power can impact our lives:

- **Social/cultural power** – limited access to knowledge, connections and qualifications that make life easier often related to class, race and gender, which ease people's way through life and can be passed indirectly to the next generation
- **Biological or embodied power** – society values preferences, attributes and abilities that we don't have or identify with e.g. physical attractiveness, fertility, strength, embodied talents and abilities, physical health
- **Legal power** – systemic rules or sanctions limit our choices
- **Economic power** – we can't afford needed goods, services, activities or opportunities on a par with others
- **Interpersonal power** – basic relational needs for care, intimacy, and human protection are unmet
- **Coercive power** – we are subjected to violence, aggression, threats to frighten, intimidate or ensure compliance.
- **Ideological power** – values, language and meaning are defined by powerful others

(Johnstone, L. & Boyle, M., 2018a.)

*How does
it affect
you?*

THREAT How lack of power effects us

It feels threatening.

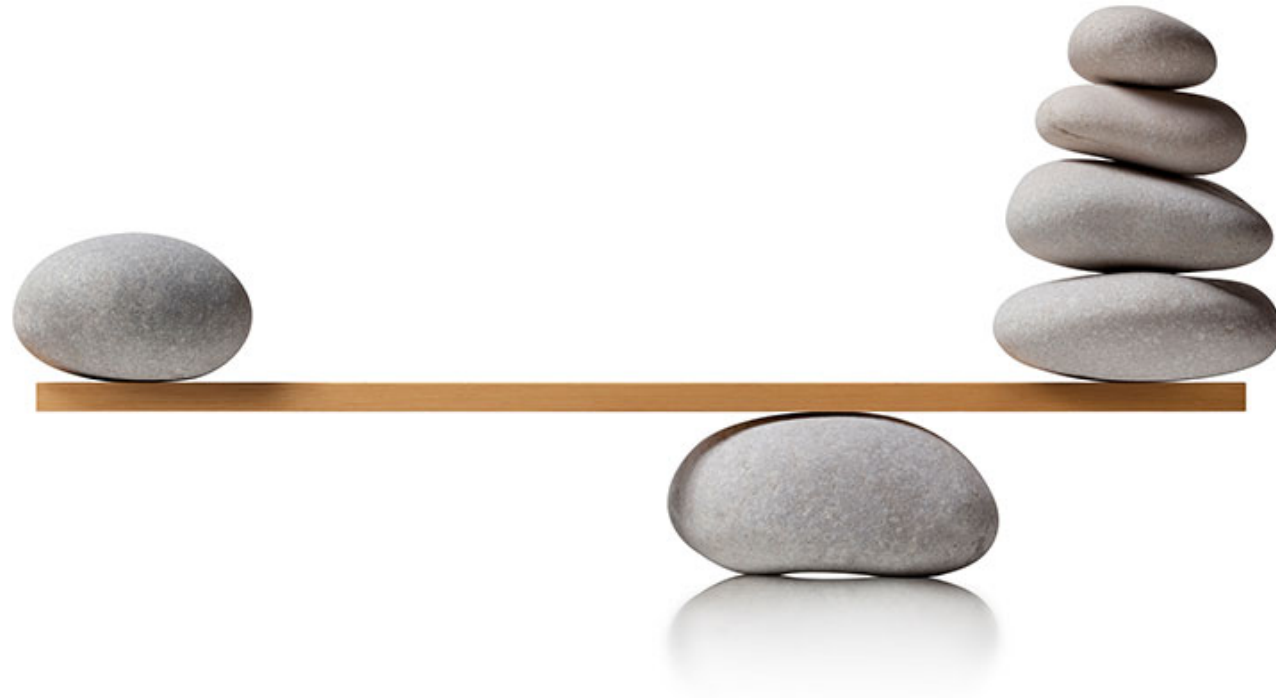
- Needing power and not having it is uncomfortable and often highly distressing.
- Some common feelings ('meanings') that arise from lack of power include:
- Unsafe, afraid, attacked, abandoned, rejected, helpless, powerless, hopeless, invaded, controlled.
- Emotionally overwhelmed and empty
- Bad, unworthy, isolated, lonely, excluded, alienated, trapped, defeated, failed, inferior, contaminated, evil, alien, dangerous, different, abnormal.
- Guilty, blameworthy, responsible, betrayed, shamed, belittled, sense of injustice or unfairness, sense of meaninglessness

(Johnstone, L. & Boyle, M., 2018a, p. 37.)

THREAT responses

- Here are some examples:
- Preparing to flee, escape, seek safety, flashbacks, nightmares, overworking
- Hypervigilance, insomnia, impulsivity, attention/concentration problems
- Panic, phobias, distrust of others, suicidal thinking and actions, confusion
- Freeze response, dissociating (losing track of time/place) numbing, denial
- Giving up, 'learned helplessness' low mood, loss of faith and hope, feeling entitled,
- Hearing voices, suspicious thoughts, holding unusual beliefs, self neglect, distrust
- Anger, rage, aggression, violence, reduced empathy, submitting, appeasing
- Using drugs, alcohol, smoking, over eating, self injury, collecting, hoarding.

Survival (coping) responses



MEANINGS



What sense did you make of it?'

(What is the Meaning of these experiences to you?)

Are they symptoms of a mental illness?

Are they survival coping strategies to help you rebalance the power imbalances in your life?

Who's meanings matter?

We can write and rewrite our own stories in ways that are balanced, meaningful, helpful and empowering for us.

My medical meaning for my emotional distress

- I have a serious mental illness, a psychiatric disability
- I possible inherited it?
- I am bi polar, I will always be bi polar
- I will have to take medication for the rest of my live
- I probably wont be able to work
- I will have to go on the disability pension because even though sometimes I'm ok, the illness means I will probably have relapses.
- I will have good times and bad times, ups and downs
- I must stay on my medication, and go to hospital some times as this is the best treatment for my mental illness.

My PTMF meaning for my emotional distress

- I am a person who had a tough childhood which included the trauma of physical and emotional abuse and neglect, abandonment and institutionalization.
- In order to get through these powerful experiences, I needed to adapt and find ways to survive.
- As a teenager with limited knowledge, understanding and access to resources, I experienced, homelessness and poverty leading to more trauma, physical and emotional abuse.
- I was sad and angry at the world around me, my life experiences taught me it was not a safe place and I creatively took on patterns, thinking, and ways of being and doing in order to survive.
- As an adult, I found I was still using a lot of these threat responses to power that I had developed as a child and teenager, and this was not working very well for me in my relationships with self and others, employment and life in general.
- Now that I know more about how power operates in my life, I can draw on my resources and own strengths to learn new ways of responding to these power imbalances, and manage my emotional distress much better.

Table Group Discussion Questions

1. Who gets to define our experiences is also a version of power – In Australia and New Zealand who holds the power to define distress and unusual experiences? Who should?
2. The PTM Framework looks at our relationship with power rather than diagnosing experiences as 'symptoms' – do you feel this would be helpful and is a workable approach? (Why or Why Not?)
3. How do you see the role of Power within Mental Health Services?
4. What are some of the possible threat responses or survival adaptations which consumers would be using during their connections with service providers?
5. What can consumers in the consumer movement do to rebalance power in the system so that others can "Hear our roar?"



PLEASE TYPE YOUR QUESTIONS

The good news



- Just as important the PTM framework recognizes that power operates positively (not just negatively!)
- The power of personal agency and social action can be developed to create meaningful individual and societal outcomes.
- In other words, we can rebalance power in ourselves - for example, how we treat ourselves in the face of vulnerabilities.
- Instead of blaming ourselves or others we can work to rebalance power in disabling relationships, systems and social dynamics in the world we live in.
- This, potentially, heals all of us.

In conclusion

The Power Threat Meaning Framework offers all of us the tools to create new, hopeful narratives about the reasons for our distress that are not based on psychiatric diagnosis and find ways forward as individuals, families, social groups and whole societies.

Further resources

All resources are available for free to download from the website:

<https://www.bps.org.uk/power-threat-meaning-framework>

You tube links

Power Threat Meaning Framework

<https://www.youtube.com/watch?v=tFSmTJR4cGU>

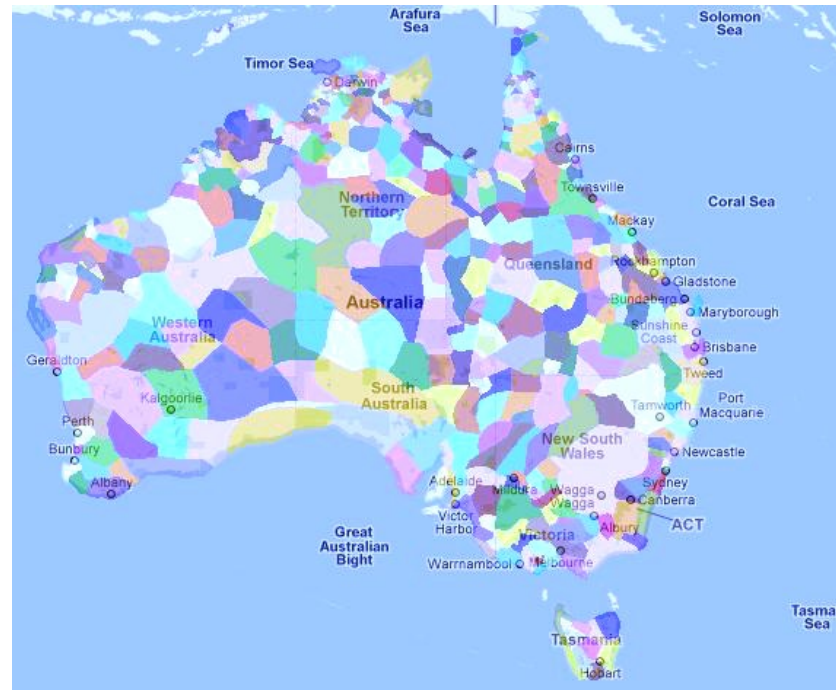
Power Threat Meaning Framework - Lucy Johnstone - October 23, 2018 – CPH

<https://www.youtube.com/watch?v=tkNWQdVB4Fo>

Listen to radio interview with Lucy Johnstone

<https://www.madinamerica.com/2018/03/dr-lucy-johnstone-power-threat-meaning-framework/>

Acknowledgement Of Country



Using the Collective Voices of LGBTIQA+ Lived Experiences to create cultural change



Connection And Wellbeing Australia
Bella Broadway (she/her)



Acknowledgement of LGBTIQABB&SG+ Community Leaders



Homo/Bi/Trans/Phobia and Intersex Discrimination in Mental Health and Suicide Prevention



Institutional



Cultural



Interpersonal



Internalised



Microaggressions



External Barriers for LGBTIQ+ people



Lack of LGBTIQ+ peer services (existing under resourced)



Not prioritized as population



Uninformed mainstream services



Systems and Structures are not Inclusive



Stereotypes and Misinformation



Internal Barriers for LGBTIQ+ people



Internalized Homo/bi/trans phobia and intersexism



Exploring and Questioning



Expecting discrimination or lack of knowledge



Vulnerability and capacity to disclose



Fear of consequence



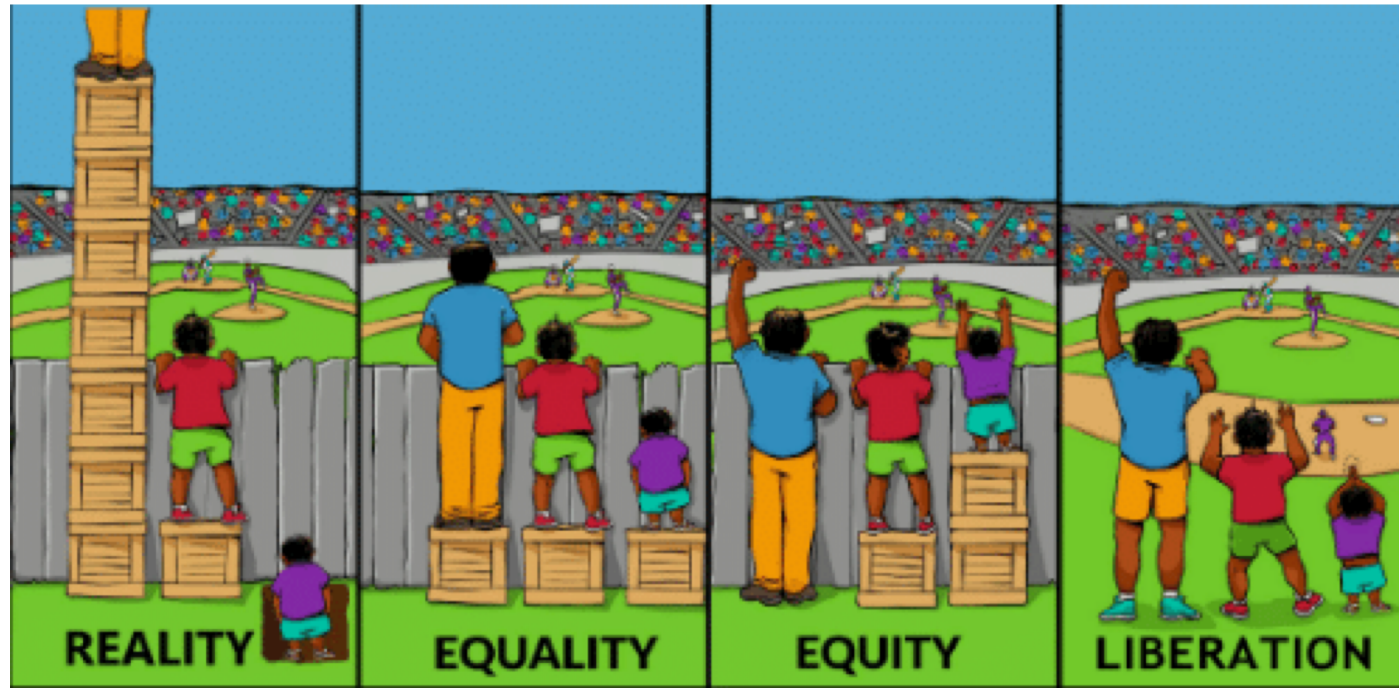
Things are pretty good for LGBTIQ+ people now, Right?

71% of LGBTIQ+ people aged 16-27
did not use a crisis support service
during their most recent mental
health crisis

SOURCE: National LGBTI Health Alliance - SNAPSHOT 2020



“We treat everyone the same”



**theMHS**
CONFERENCE