



**Psychiatric Violence,  
Deinstitutionalization,  
and Community-Based  
Justice for People with  
Psychosocial Disabilities**



**A.L.C.E**

Abolición de lógicas de castigo y encierro

## Who We Are

ALCE (Abolición de Lógicas de Castigo y Encierro) is a grassroots organization in Colombia led by survivors of psychiatric violence, psychosocially disabled people, neurodivergent people, and human rights advocates working at the intersection of disability justice, anti-carceral struggles, and community-based alternatives to psychiatry. Since 2021, we have worked to challenge forced psychiatrization, institutionalization, and coercive practices in the mental health system while building collective responses grounded in autonomy, solidarity, mutual support, and life in the community.

Our work is unique because it combines advocacy, socio-legal accompaniment, research, community pedagogy, mutual support, and cultural transformation within a single survivor-led model. Rather than approaching people with psychosocial disabilities as passive patients, ALCE recognizes them as political subjects, knowledge producers, and experts by experience capable of leading social transformation and creating alternatives outside coercive systems.

## Why This Work Matters

Across Latin America, people with psychosocial disabilities continue to face forced institutionalization, involuntary hospitalization, overmedication, restraints, surveillance, and practices carried out without informed consent. Although these practices are often justified in the name of “care” or “treatment,” they result in the deprivation of liberty, social exclusion, trauma, and long-term violations of autonomy and legal capacity.

The global mental health model continues to prioritize psychiatric infrastructure and biomedical interventions while failing to invest in community-based supports, peer-led responses, supported decision-making, housing, collective care, and systems that allow people to live with dignity in their communities. According to an ongoing investigation conducted by ALCE Initiative (manuscript under review, 2026), at least 455,534 psychiatric hospitali-

zations were recorded in Colombia between 2019 and 2024.

2019.....2024

455.534 psychiatric hospitalizations



There is still insufficient transparency regarding the actual duration of these confinements, whether they were truly voluntary, and the coercive procedures involved; many of which may amount to torture or cruel, inhuman, and degrading treatment, despite being formally justified through deeply flawed informed consent practices within the healthcare system. This is a deeply concerning reality that affects not only adults with disabilities, but also children and adolescents within the protection system. According to figures provided by the Colombian Ministry of Health, in 2022 more than 14,000 children were institutionalized, including nearly 500 between the ages of 0 and 8<sup>1</sup>.



This has particularly severe consequences for people who are also trans, queer, racialized, poor, criminalized, or otherwise marginalized and affects people from all over the region. Regional civil society organizations have documented cases of people confined for decades, sexual violence committed by staff, prolonged isolation as punishment, forced medication, and severe violations of legal capacity and informed consent during a Regional Thematic Hearing before the Inter-American Commission on Human Rights (IACHR)<sup>2</sup>. Reports from organizations such as Redesfera<sup>3</sup> and Disabi-

1 INICIATIVA ALCE. Concepto: la institucionalización como violencia. Manuscript under review. Colombia, 2026

2 Inter-American Commission on Human Rights. Regional Hearing: Violations of the Rights of Persons with Disabilities and Older Persons in Care Institutions. USA. 2025

3 REDESFERA Latin American Network for Mad Cultures, Psychosocial Diversity, Justice, Buen Vivir, and

lity Rights International (DRI)<sup>4</sup> show that these institutions — historically funded by both states and private actors in the name of “care” — function through paternalistic and punitive logics that systematically violate human rights. Testimonies from survivors in countries such as Colombia, Argentina, Mexico, and Guatemala reveal recurring patterns of abuse that form what ALCE identifies as an “ecosystem of confinement.”

These ecosystems of confinement are sustained through the systematic denial of legal capacity, forced institutionalization, substitute decision-making, and degrading conditions inside institutions. Despite the recognition of legal capacity under Article 12 of the CRPD, people continue to be deprived of liberty and subjected to treatment without free and informed consent.

At the same time, anti-rights movements increasingly rely on pathologizing narratives to frame trans people, neurodivergent people, and psychosocially disabled people as unstable, dangerous, or incapable. These narratives reinforce coercive responses and legitimize new forms of confinement and normalization under the language of “mental health,” “protection,” or “public safety.”

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the Right to Delirium. Regional Report on the Situation of the Rights of Persons with Psychosocial Diversity in Latin America. Coordinated by Alberto Vásquez, Pao Yauri Bellido, and Lorena Berrios. Consultant: Grecia Guzmán Martínez. Santiago, Chile: RedEsfera, 2023.

4 DRI. Crimes Against Humanity: Decades of Violence and Abuse in Mexican Institutions for Children and Adults with Disabilities. <https://www.driadvocacy.org/reports/crimes-against-humanity-decades-violence-and-abuse-mexican-institutions-children-and-adults>

## ALCE’s Approach

ALCE’s work is based on the understanding that psychiatric violence cannot be addressed only through legal reform or only through clinical responses. Survivors of psychiatric violence require holistic, community-centered responses capable of addressing the long-term effects of confinement, forced treatment, isolation, stigma, and institutional trauma.

Our model integrates:

- Mutual support groups led by people with lived experience.
- Rights-based legal accompaniment and advocacy.
- Community pedagogy through the Escuela Popular Loca.
- Research and documentation on psychiatric violence and institutionalization.
- Political mobilization in first person.
- Promotion of alternatives for crisis response and community living outside coercive systems.

This integrated approach allows ALCE not only to denounce violence, but also to create practical alternatives rooted in autonomy, solidarity, and collective care.

## Key Messages

### **Institutionalization Is Violence**

Forced psychiatric practices — including involuntary hospitalization, forced medication, restraints, and treatment without informed consent — must be recognized as forms of violence, torture, and cruel, inhuman, and degrading treatment. Naming these practices as violence is essential for guaranteeing truth, accountability, and prevention.

### **Justice Must Be Defined by People with Disabilities**

Processes of justice and reparation for survivors of psychiatric violence cannot be built exclusively from legal or medical frameworks. They must be grounded in the experiences, needs, and understandings of justice expressed by psychosocially disabled people themselves. For many survivors, justice means recovering autonomy, rebuilding community ties, accessing housing and support networks, and being able to live free from coercion and institutional control.

### **Community Living Requires A Care and Support System**

The right to live in the community cannot exist without real investments in housing, income, peer support, accessible services, collective care systems, and non-coercive crisis responses. Deinstitutionalization requires the redistribution of resources away from psychiatric institutions and toward community-led alternatives. It also requires health systems to include the vision and needs of people with disabilities to generate people-centered solutions.

### **Mutual Support and Community Networks Save Lives**

Peer support and collective networks are not secondary forms of care; they are essential infrastructures for survival, dignity, and autonomy. Community-led support systems reduce isolation, create spaces for collective healing, and generate alternatives to coercion and abandonment.

### **Nothing About Us Without Us**

People with psychosocial disabilities, neurodivergent people, and survivors of psychiatric violence must lead the design, implementation, and monitoring of all policies and programs affecting their lives. Lived experience is not symbolic participation; it is critical expertise.



## What We Are Calling For

- Recognition of forced psychiatric practices and institutionalization as forms of violence and torture.
- National and regional deinstitutionalization strategies with timelines, budgets, and direct participation of psychosocially disabled people and survivors.
- Reparation frameworks centered on autonomy, community living, memory, and collective justice.
- Investment in peer-led, community-based, and non-coercive systems of support.
- Full protection of legal capacity and supported decision-making.
- The inclusion of survivors and experts by experience in all spaces of decision-making related to mental health and disability policy.
- Creating alternatives to institutionalization that center autonomy and provide and human centered deescalation of crisis.

## Why ALCE's Approach Is Important

ALCE's work demonstrates that it is possible to move beyond models based on confinement, control, and medicalization. By combining legal advocacy, mutual support, pedagogy, research, and community organizing, our approach addresses both the structural causes and the long-term effects of psychiatric violence.

Our work is not only about denouncing harm. It is about building the conditions for life, dignity, autonomy, and collective care outside institutional systems. It is about creating futures where psychosocially disabled people, mad people, neurodivergent people, and survivors of psychiatric violence can live in community, with rights, support, and self-determination.

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