

Member Webinar: International Day of Persons with Disabilities

2024 Theme:

*“Amplifying the leadership of persons with disabilities for
an inclusive and sustainable future”*



Session Co-Chaired by

Dr Amrit Sachar, RCPsych Joint Presidential Lead for Equity and Equality

Dr Amrita Joottun, Equity Champion, RCPsych General Adult Faculty

Remembering Dr Onikepe Ijete



Dr Onike Ijete worked closely with RCPsych to promote greater equity for disabled psychiatrists until she sadly passed away in 2023.

We remember **Onike** for her lived experience that she shared, her endless energy and enthusiasm, her ability to quietly but effectively push for change that would benefit all people with disabilities and for making our workplaces more disability friendly.

BLURRED: **Disability inclusion in medicine**

3 December 2024



Today's speakers

Dr Sharad Philip, MD

Assistant Professor

Department of Psychiatry, Clinical NeuroSciences,
and Addiction Medicine, All India Institute of Medical
Sciences (AIIMS), Guwahati

Dr Shevonne Matheiken

International medical graduate from India

ST6 in Old Age Psychiatry in East of England.



INCORPORATING STORIES OF ADVERSITY IN JOURNEYS OF DIVERSITY

Training and Practice Challenges for Psychiatrists with Disabilities in India

Sharad Philip, MD
Assistant Professor

Department of Psychiatry, Clinical NeuroSciences, and Addiction Medicine
All India Institute of Medical Sciences (AIIMS), Guwahati



GOVERNMENT, HEALTH

Can a Blind Doctor Become a Psychiatrist?

22/02/2022



Photo: Hush Naidoo Jade Photography/Unsplash

DR SATENDRA SINGH

SC allows visually impaired doctor to appear in MD Psychiatry counselling

ANI 19 February, 2022 03:30 pm IST



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Text Size:

New Delhi [India], February 19 (ANI): The Supreme Court has granted interim relief to a visually impaired doctor by allowing him to appear in state counselling for admission for MD Psychiatry.

Bengaluru

Bengaluru: Despite poor vision, this NIMHANS psychiatrist has a unique way of seeing patients

Dr Philip, a psychiatrist at NIMHANS, has a unique way of seeing patients. In fact, he doesn't see them at all.

Sridevi S

Updated on: 18 Feb 2018, 12:27 pm · 3 min read



BENGALURU: When Sharad Philip, a 32-year-old man, was handed his medical degree at NIMHANS in December 2017, an extraordinary thing happened. First, his classmates began to applaud, then their families, the faculty and university officials joined in. And within a few minutes all the people in Convention Hall stood up and cheered. Philip's face shone with pride.



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11:19

As an eighth grader in suburban Philadelphia, young David Hartman had already decided on a career in medicine. That dream was profoundly influenced by years of medical care he'd received himself, since birth, for a congenital eye disorder.



Carilion Clinic psychiatrist Dr. David Hartman is retiring after practicing psychiatry in the Roanoke Valley since 1982. Hartman has been blind since age 8, and getting into medical school was a challenge. He is pictured in his office on Wednesday.

HEATHER ROUSSEAU, The Roanoke Times



◀ **DocsWithDisabilities Podcast**

Ep 1: Nichole Taylor

Ep 2: Erene Stergiopoulos

Ep 3: Laura Pratesi

Ep 4: Marley Doyle

Ep 5: Nichole Taylor, Part 2

Ep 6: Michael Argenyi

Ep 7: Alexandra Adams

Ep 8: Satendra Singh

Ep 9: Bonnie Swenor

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Ep 4: Marley Doyle

DocsWithDisabilities Podcast

Ep 4: Marley Doyle



Dr. Marley Doyle, MD

Dr. Meeks interviews Dr. Marley Doyle, a psychiatrist with a visual disability. Through a recounting of Dr. Doyle's experiences, they touch on several items, including the ethical responsibility to disclose a disability, the difficulties surrounding disclosure, the choice of a specialty that will not impose concerns regarding patient safety,

mentorship specific to disability, the critical need for role models and messaging around disability accommodation.

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Ep 10: Sarah Sternlieb

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Ep 24: Ruta Nonacs

DocsWithDisabilities Podcast

Ep 24: Ruta Nonacs

Dr. Ruta Nonacs, MD, PHD




Dr. Nonacs is a staff psychiatrist with the Perinatal and Reproductive Psychiatry Clinical Research Program at MGH, with an appointment as an Instructor in Psychiatry at Harvard Medical School.

In this episode, Dr. Nonacs discusses identifying as a doctor with a disability, her experiences with training and employment and the changes needed in medical education.



The amazing journey of Dr Sarthak Kamath

Diagnosed with DMD at 3, he is the first person with the disease to don doctor's coat

 By Dr Veenabharathi/ Photos: Bhanu Prakash Chandra | Issue Date: September 11, 2022

| Updated: September 04, 2022 13:59 IST



Ruk jaana nahin tu kahi haarke... Kaaton pe chalke milenge saaye bahaar ke (Do not stop even if you feel lost, you will meet the shadow of spring even as you walk on thorns.)



Dr. Hallowell

THE HALLOWELL ADHD CENTERS



Edward (Ned) Hallowell, M.D. is a board-certified child and adult psychiatrist and world authority on ADHD. He is a graduate of Harvard College and Tulane Medical School, and was a Harvard Medical School faculty member for 21 years. He is the Founder of The Hallowell ADHD Centers in Boston MetroWest, New York City, San Francisco, Palo Alto and Seattle.

He has spent the past four decades helping thousands of adults and children live happy and productive lives through his strength-based approach to neurodiversity, and has ADHD and dyslexia himself.



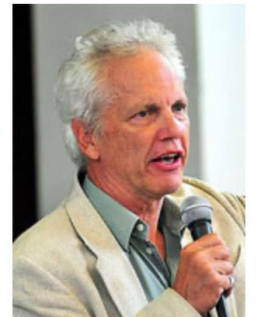
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Daniel B. Fisher, M.D., Ph.D.

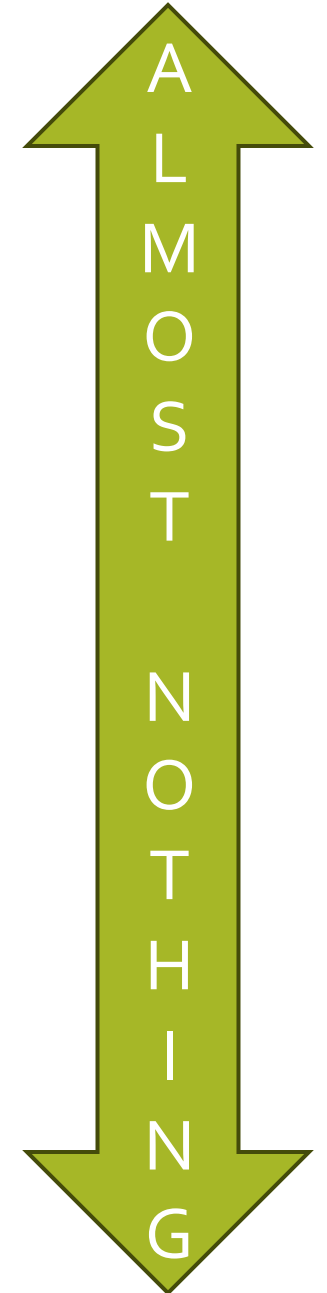
Recovery From Mental Illness and Becoming a Commissioner – Dan is a person who has recovered from schizophrenia. He was hospitalized several times prior to becoming a psychiatrist. He is one of the few psychiatrists in the country who publicly discusses his recovery from mental illness. He is a role model for others who are struggling to recover, and his life dispels the myth that people do not recover from mental illness. His recovery and work in the field were recognized by his selection as a member of the White House Commission on Mental Health.



Education and Practice – Dan received his AB. from Princeton University, his Ph.D. in biochemistry from the University of Wisconsin and his M.D. from George Washington University. He is a board-certified psychiatrist who completed his residency at Harvard Medical School. He is presently Executive Director of the National Empowerment Center and a practicing psychiatrist at Riverside Outpatient Clinic, Wakefield, MA.

WHAT'S BEEN WRITTEN OFF?

- Lived experiences
- Contributions
- Very resilient, creators, problem solvers, and innovators amongst us
- Going on for decades now
- Who is missing out?
- What is known about their psychiatry training?
- What is known about how they are practicing psychiatry?
- What are their contributions to advancing psychiatry research?



From Dr Vidur Makkar

'Navigating life and a demanding medical career as a psychiatrist with a severe locomotor disability has presented many challenges. My journey began after a spinal cord injury, which required me to rejoin my second year of medical school under a supplementary batch, despite having previously been a strong student. While I was determined to become a psychiatrist, this meant adapting to a new set of academic and personal obstacles'.

- Academic assessments brought their own set of hurdles.
- Writing exams was particularly challenging due to my physical limitations, so I had to rely on a scribe.
- My mother, a dedicated advocate, put her own career on hold to support me, acting as my scribe and caregiver throughout my exams and practical work.
- I also needed a full-time attendant to assist with daily tasks, including getting in and out of the car, navigating the hospital, and other assisted services essential to my day-to-day activities.

- In addition to my hospital duties, I had to incorporate a rigorous physiotherapy routine, often dedicating three hours each day before starting work. This ongoing regimen was crucial for maintaining whatever physical mobility I could retain.
- Beyond the physical and logistical challenges, there was the social dimension. Facing society, friends, and colleagues with a disability required resilience, especially in situations where I felt overlooked or defined solely by my limitations. Maintaining a positive attitude and a professional demeanor was essential, even in the face of misunderstanding or marginalization.
- Each of these experiences has shaped my journey, teaching me resilience, adaptability, and empathy—qualities that I believe are crucial for my role as a psychiatrist.

TIME to change - TIME to acknowledge – TIME to welcome - TIME to learn

- Onus from the UNCRPD Article 27 states: *Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities.*
- List out universal design.
- Assistive technologies.
- Reasonable accommodations/adjustments.
- Accessibility.

Ruta Nonacs:

'What drew me to psychiatry is probably the level of acceptance that that career path offers. I think psychiatry was more welcoming to people who were different or didn't fit in.'

'What I've learned from being in medicine for the past 25 years is that physicians in general have had a lot of suffering. I think most physicians don't talk about the stuff they've had to deal with, but I think some of the best physicians have dealt with things that have happened to them or around them, whether it's being in a war-torn country and having to immigrate to the United States, whether it's being in a situation where they were exposed to a family member with mental illness and have to hold together the family or a variety of things.'

Marle Doyle:

'The further I get in my training and the more leadership positions I take on, I have to be honest, the easier it is to disclose. I have felt a little bit freer to say what I need. And I think that just gets back to one of the things that I feel like I got in my medical training was this fear that it's a weakness. That if you disclose, people are going to think less of you or that you can't do your job. But in truth it's really not. I truly believe it's a strength because I think it you to relate to patients in a lot of different ways. It has this wonderful life experience that it gives you.'

Going Forward

UNIVERSAL DESIGN FOR PSYCHIATRY TRAINING - more inclusive principles.

1. Equitable use to be usable by people with diverse abilities.
2. Low physical effort delays onset of physical fatigue.
3. Perceptible information resources - multiple formats of presentation - visual auditory, tactile.
4. Flexibility in methods used to demonstrate trainee's acquisition of knowledge and skill.
5. Mechanisms for feedback/learning from each case - compilation of what worked and what helped alongside what did not.

REASONABLE ADJUSTMENTS : INDIVIDUALIZED & SET UP IN CLOSE COLLABORATION WITH TRAINEES.

1. **Respecting dignity:** adequate space-respecting body size, shape, reach posture and mobility.
2. **Flexible scheduling/structuring of programs:** broken up, protracted segments of training, e.g : LTFT-Less Than Full Time.
3. Integration/incorporation of **assistive technologies** : screen readers, sight narrators/describers, speech to text and vice versa in routine clinical use.
4. **Additional/extended supervision and mentoring.**

5. Buddy/near-peer mentoring.
6. **Flexibility** in assessment methods.
7. Extended time to complete requirements built within flexible structuring options.
8. **Clear policies** for requesting and reviewing accommodations/adjustments.
9. Inclusion of other psychiatrists with disabilities in mentoring/support
10. Clarity in patient care protocols and multidisciplinary teamwork.

ONUS is on US – Let's Own It!

An attitude to have :

- Disability humility
- Disability justice
- Disability as diversity

What to avoid

- Protectionism
- Paternalism
- Enfeebling

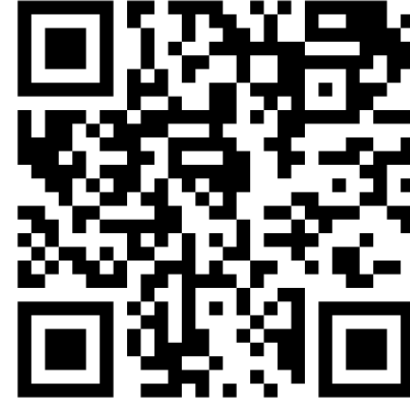


Scan for:

LinkedIn:



Google Scholar:



Research Gate: <https://www.researchgate.net/profile/Sharad-Philip>

e-mail: sharadphilip@aiimsguwahati.ac.in

NEURODIVERSITY REFLECTIONS

Dr Shevonne Matheiken

#IWDPwD

Follow me on X @GoCarpidiumDoc Find me on LinkedIn Shevonne Matheiken

December 3rd, 2024

1. OUTDATED UNDERSTANDING OF ADHD/AUTISM CAN LEAD TO DELAYED DIAGNOSES.

Autistic psychiatrists' experiences of recognising
themselves and others as autistic: a qualitative study |
BJPsych Open | Cambridge Core



Shevonne matheiken (she/her)
@GoCarpediumDoc

What (many, not all) doctors *THINK* ADHDers spend their days figuring out :
inattention,hyperactivity & impulsivity.

What (many) ADHDers *actually* struggle with:
chronic overwhelm, intense emotions,
hyperfocus, exec dysfunction, [#ADHD](#) tax,
RSD, poor sleep, planners & laundry.

07:53 · 11/01/2023 from Earth · **54K** Views

View analytics

219 Reposts **39** Quotes **1.1K** Likes **79** Bookmarks



2. NEURODIVERSITY MOVEMENT \neq ANTI-PSYCHIATRY

Adult attention-deficit hyperactivity disorder: time for a rethink? | BJPsych Advances | Cambridge Core

- Medical model - deficit and pathology based
- Social model of disability - differently wired brain, living in a world built for neurotypical majority
- Coproduction can bridge the wide chasm between
- Misinformation +++
Debates +++
- Services in dire crisis !!!

3. WE NEED BETTER UNDERSTANDING ABOUT AUDHD (AUTISM+ADHD)

[The sudden rise of AuDHD: what is behind the rocketing rates of this life-changing diagnosis? | Health & wellbeing | The Guardian](#)



4. DIFFERENCE IS NOT INCOMPETENCE

[ptc---registrar---summer-2024.pdf](#)

Blog : 'Different, not deficient'

C - Curiosity, not criticism

O - Outcome, not process

F - Flexibility

F - Feedback (personalise)

E - Exams

E - Extra processing time

5. 'MASKING' NEEDS TO BE EXPLORED

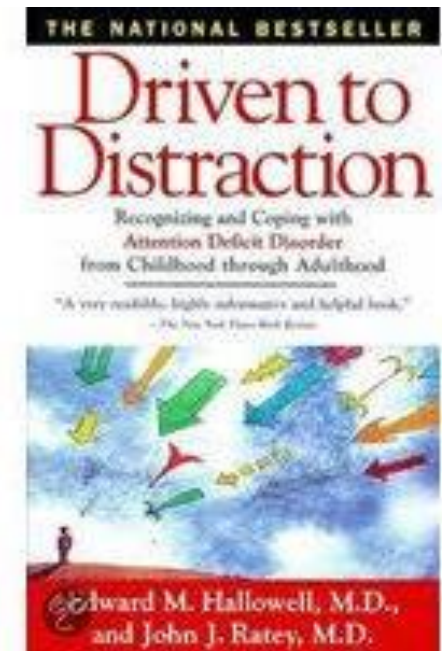
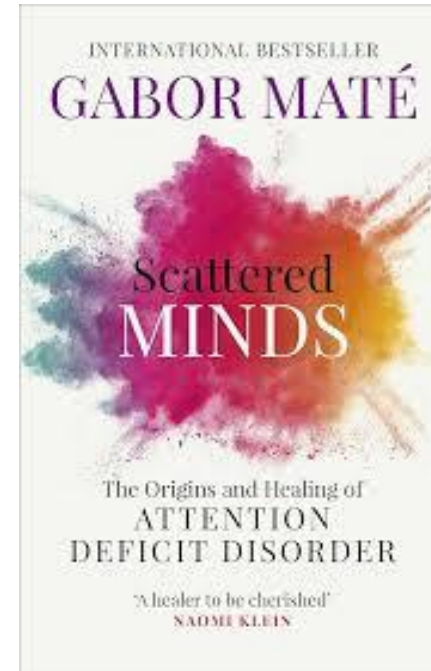
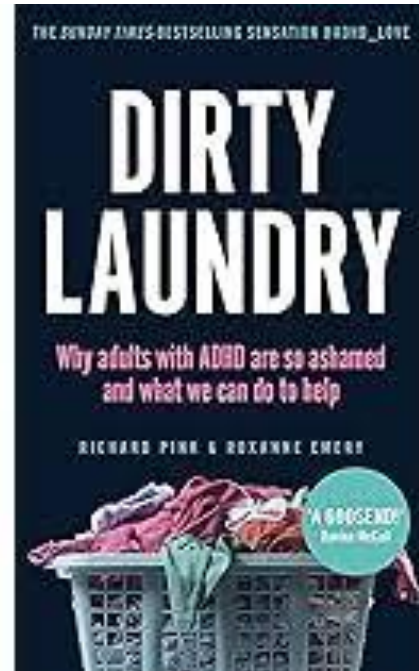
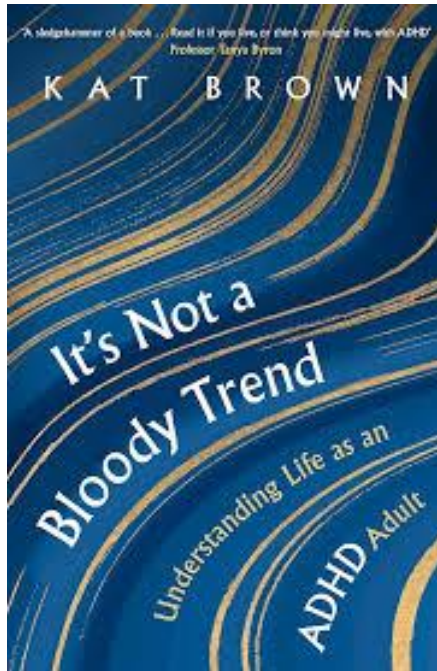
- Spiky cognitive profile
- Spoon theory
- 'High functioning' ??
- Internal/mental hyperactivity
- Intersectionality

'THE DIFFERENCE BETWEEN DIVERSITY AND INCLUSION IS...
BEING INVITED TO A HOUSE
AND
BEING ABLE TO REARRANGE THE FURNITURE'

Jane Silber (singer-songwriter)

ASSUME LESS, BE CURIOUS, ASK MORE

BOOKS TO CONSIDER:



YOU ARE NOT ALONE

Facebook peer groups

- Association of Neurodivergent doctors
- Doctors Inclusive Neurodivergent Group (DING)
- Tea and Empathy
- International medical graduates in the UK
- Physician Mums group UK (PMGUK)

Access to work (DWP)

- Can apply even while awaiting formal assessment, as per Equality Act 2010
- You can get funding for things including ADHD coaching, equipment such as Dictation software, and ND awareness training for team

Right to Choose

- Via GP, NHS accredited
 - Shorter wait times
- e.g Psychiatry UK, ADHD 360, Care ADHD

RCPsych resources

COMING SOON!

Guidance on reasonable adjustments for employers

CPD module for supervisors/managers of neurodivergent doctors

[ADHD in adults: Good practice guidance](#)

[Autism and mental health](#)

GOOD DISABILITY ALLYSHIP



A

Advocate for disability rights
And think about those affected by intersectionality

L

Language
Use inclusive language. Don't use offensive outdated terms and ask how the person would like to be described

L

Listen & Learn
Believe disabled people's experience - they are the experts. Educate yourself about ableism, disability and its impact. Learn about intersectionality

Y

Yield
the floor. Lift the voices of disabled people. Promote and sponsor their voices. Don't speak for or over disabled people

S

Speak up
Use your privilege to promote change. Be an active bystander if you hear offensive language or discrimination

H

Hire
Hire, promote and appropriately pay disabled people. Disabled people are far less likely to be in work, have a significant pay gap and have higher living costs.

I

Include
Promote policies that foster inclusion, work WITH disabled people to create them. Use the Social Model of Disability that removes barriers to access

P

don't Presume
that all disabilities are obvious. Ask if you are unsure about something. Know your limits, you aren't the expert



Free Members' Webinar: International Day of Persons with Disability

Disability inclusion in medicine

Thank you for joining – please complete the feedback form

