

Mental Health Litigation Division
Training Unit

NEWSLETTER

April 2021



Upcoming Webinars

Why Race Matters Speaker Series: The CPCS Training Department is pleased to announce their inaugural speaker series entitled, “Why Race Matters.” The Speaker Series will include inspirational calls to action, discussions on the history of systemic racism, data, how to litigate race in our cases, and how to advocate for our MHLN clients.

We encourage everyone to register for the April 26th session on the Harvard Study, including the separate MHLN-specific breakout session on how we can raise and litigate race in our mental health cases.

For more information about the Race Matters series, and registration link (note the April 26th breakout is an additional separate registration from the main session):

<https://www.eventbrite.com/e/why-race-matters-2021-spring-speaker-series-registration-146499795833?aff=email1>

Please also continue to check the [training calendar](#) for CLE opportunities. Also refer to the [MHL D training page](#) which includes non-CPCS trainings approved for credit and the link to the CLE Cognito form which you must submit for each approved CLE you have attended.

If you would like to attend a training that is not on the calendar or approved webinar list, email mruttenberg@publiccounsel.net with a description of the program and we will consider it for MHL D credit.

April is National “Minority” Health Month

April is National Minority (BIPOC) Health Month. There is a strong link between physical and mental health, and people living in poverty and under the constant threat of racism have worse health outcomes. These [social determinants](#) are among the reasons postulated to explain the disproportionately high prevalence of COVID-19 cases and deaths among minoritized racial and ethnic groups in the United States.

A recent [editorial](#) in the Journal of the American Academy of Psychiatry and Law advocates for forensic psychiatrists to employ “thoughtful forensic practice” to combat structural racism in their assessments. To do so, they should use language and self-examination critically, minimize harm and bias, and ground the personal narratives of the people they evaluate in their personal historical context. The Massachusetts Psychiatric Society has a [Resource Guide for Anti-Racist Action](#) that mental health attorneys may find helpful.

See also: [HHS Office of Minority Health](#) and [CDC Health Equity Considerations](#)

CDC Declares Racism a Serious Public Health Threat

On April 8, 2021, the director of the Centers for Disease Control and Prevention (CDC) declared racism a serious public health threat. The CDC highlighted several new efforts CDC is leading “to address racism as a fundamental driver of racial and ethnic health inequities in the United States.” The CDC has a new website [Racism and Health](#) “that will serve as a hub for the agency’s efforts and a catalyst for greater education and dialogue around these critical issues.” For more information see here: <https://www.cdc.gov/media/releases/2021/s0408-racism-health.html>

Resources for Culturally Responsive Behavioral Health

The Massachusetts Association for Mental Health announced a new resource hub for culturally responsive behavioral health that may be helpful for your BIPOC clients. See the announcement and more information here: <https://www.mamh.org/> and the hub here: [Massachusetts Network of Care Culturally Responsive Behavioral Health Resource Hub](#)

In addition, see this [Mass General Psychiatry BIPOC Mental Health Resources](#)

Research Shows Neurological and Psychiatric Outcomes from COVID

According to CNN.com, “as many as one in three people infected with [Covid-19](#) have longer term mental health or neurological symptoms, researchers reported on April 6, 2021. They found 34% of Covid-19 survivors received a diagnosis for a neurological or psychological condition within six months of their infection, according to the study in the journal Lancet Psychiatry. The most common diagnosis was anxiety, found in 17% of those treated for Covid-19, followed by mood disorders, found in 14% of patients.”

See the Lancet study [here](#).

Recent SJC Arguments

In the Matter of K.I. “Impounded Case” SJC-13081

As mentioned in the March Newsletter, MHLA Appeals Director Karen Talley argued [K.I.](#) on April 5th before the SJC, challenging the portion of c. 123 section 18(a) that allows the DOC Commissioner to override a court’s ruling that the person does not need the strict security of Bridgewater and can go to a DMH facility.

In the Matter of P.R. “Impounded Case” SJC-13068

On April 9th, MHLA Appeals Staff Attorney, Devorah Vester argued in [P.R.](#) whether the Matter of a Minor case decided last year applies to our mental health civil commitment cases in addition to section 35s. We are primarily interested in Minor’s requirements as to proof of “no less restrictive alternative” and the requirement that the judge make factual findings either orally on the record or in writing.

To watch the arguments, go to the Suffolk/SJC archive page and type in the case information: <https://boston.suffolk.edu/sjc/archive.php>

New Attorneys Joining the Guardianship Panel

We are wrapping up our Spring Guardianship Certification Training this month with mock trials, after which we will be welcoming new members to the MHLA guardianship practice. Congratulations to all the new attorneys who successfully completed the training and **a huge thank you to the many mentors, staff, and other volunteers who helped us with the training and the mock trials!**

April Book Recommendations

Caste: The Origins of Our Discontents, Isabel Wilkerson

The Protest Psychosis: How Schizophrenia Became a Black Disease, Jonathan M. Metz

Confronting Racism: Integrating Mental Health Research into Legal Strategies and Reforms, Robert T. Carter and Thomas D. Scheuermann