

["The Shame of Medicine: The Depravity of Psychiatry," *The Freeman*, 59: 21-22, (July/August), 2009.
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The Shame of Medicine: The Depravity of Psychiatry

by Thomas Szasz

The practice of medicine rests on cooperation and the ethical-legal premise that treatment is justified by the patient's consent, not his illness. In contrast, the practice of psychiatry rests on coercion and the ethical-legal premise that treatment is justified by the mental illness attributed to the patient and must be "provided" regardless of whether the patient consents or not. How do physicians, medical ethicists, and the legal system reconcile the routine use of involuntary psychiatric interventions with the basic moral rule of medicine, "Primum non nocere," a Latin phrase meaning "First do no harm"?

The answer is: by the medicalization of conflict as disease, and coercion as treatment. Carl Wernicke (1848-1905), one of founders of modern neuropathology, observed, "The medical treatment of [mental] patients began with the infringement of their personal freedom." Today, it is psychiatric heresy to note, much less emphasize, that psychiatry-as-coercion is an arm of the punitive apparatus of the state. Absent the coercive promise and power of mental health laws, psychiatry as we know it would disappear.

Ever since its beginning approximately 300 years ago, psychiatry's basic function has been the restraint and punishment of troublesome individuals justified as hospitalization and medical care. For two centuries, all psychiatry was involuntary psychiatry. A little more than 100 years ago individuals began to seek psychiatric help for their own problems. As a result, the psychiatrist became a full-fledged double agent and psychiatry a trap. The film "Changeling"--written by J. Michael Straczynski and directed by Clint Eastwood--is a current example.

The story, set in Los Angeles in 1928, is said to be the "true story" of a woman, Christine Collins, whose son, Walter, is kidnapped. The police are corrupt, and little effort is made to find Walter. Months pass. To repair its damaged image, the police decide to stage a reunion between an abandoned youngster pretending to be Walter and his mother, played by Angelina Jolie. Unsurprisingly, she realizes that the fake Walter is not her son. After confronting the police and city authorities, she is vilified as an unfit mother, branded delusional, and incarcerated in a "psychopathic ward," where she is subjected to the brutalities of sadistic psychiatrists and nurses, and watches fellow victims being punished by electric shock treatment--ten years before its invention. So much for the truth of the story.

Clueless about the true nature of the psychiatric terrorization to which the Jolie character is subjected, film critic Kirk Honeycutt praises Clint Eastwood who "again brilliantly portrays the struggle of the outsider against a fraudulent system. . . . 'Changeling' brushes away the romantic notion of a more innocent time to reveal a Los

Angeles circa 1928 awash in corruption and steeped in a culture that treats women as hysterical and unreliable beings when they challenge male wisdom.”

The Jolie character does not simply challenge “male wisdom.” Instead, her actions illustrate the insight of the Hungarian proverb, “It is dangerous to be wrong but fatal to be right.” The psychiatrist as brutal agent of the state enters the story only after the mother proves--by securing the testimony of her son’s teacher and dentist--that “Walter” is an impostor. The psychiatrically incarcerated individual’s greatest crime--for which psychiatrists cannot forgive her--is that she is innocent of lawbreaking and objects to being deprived of liberty.

Medicalized Terrorism

Psychiatric coercion is medicalized terrorism. So-called critics of psychiatry--who often fail or refuse to distinguish coerced from contractual psychiatry--are unable or unwilling to acknowledge this disturbing truth. As a result, the more things change in psychiatry, the more they remain the same, as the following conveniently forgotten example illustrates.

On May 21, 1839, Elizabeth Parsons Ware (1816-1897) married the Reverend Theophilus Packard. The couple and their six children resided in Kankakee County, Illinois. After years of marriage, Mrs. Packard began to question her husband's religious and pro-slavery beliefs and express opinions contrary to his. In 1860 Mr. Packard decided that his wife was insane and proceeded to have her committed. She learned of this decision on June 18, 1860, when the county sheriff arrived at the Packard home to take her into custody. The law at the time stated that married women “may be entered or detained in the hospital [the Jacksonville State Insane Asylum] at the request of the husband of the woman or the guardian . . . without the evidence of insanity required in other cases.” Mrs. Packard spent the next three years in the Asylum. In 1863, due largely to pressure from her children who wished her released, the doctors declared her incurable and released her. Mrs. Packard stayed close to her children, retained their support, founded the Anti-Insane Asylum Society, and published several books, including *Marital Power Exemplified, or Three Years Imprisonment for Religious Belief* (1864) and *The Prisoners’ Hidden Life, Or Insane Asylums Unveiled* (1868).

The Beginning, Not the End

Little did Mrs. Packard realize that she was living at the beginning, not the end, of the Psychiatric Inquisition. Today, “inquiry” into the minds of unwanted others is a pseudoscientific racket supported by the therapeutic state. Millions of school children, old people in nursing homes, and persons detained in prisons are persecuted with psychiatric diagnoses and punished with psychiatric treatments. Nor is that all. Untold numbers of Americans are now psychiatric parolees, sentenced by judges--playing doctors--to submit to psychiatric treatment as so-called outpatients, or face incarceration and forced treatment as inpatients.

The subtext of films such as “Changeling” is always subtle psychiatric propaganda seeking to make people believe they are witnessing past “psychiatric abuses.” The truth is that every new psychiatric policy or practice labeled an “advance” is a step toward making psychiatric deception and brutalization more legal and more difficult for the victim to resist.

As I write this column, I learn from an “antipsychiatry” website that a man named Ray Sandford is being subjected to court-ordered outpatient electroshock treatment.

“Each and every Wednesday, early in the morning, staff shows up at Ray’s sheltered living home called Victory House in Columbia Heights, Minnesota, adjacent to Minneapolis. Staff escorts Ray the 15 miles to Mercy Hospital. There, Ray is given another of his weekly electroconvulsive therapy (ECT) treatments, also known as electroshock. All against his will. On an outpatient basis. And it’s been going on for months.”

As the forced psychiatric treatment of competent adults living in their own homes becomes the “standard of medical practice,” the failure to provide such betrayal and brutality becomes medical malpractice. In a democracy people are said to get the kind of government they deserve. In a pharmacocracy they get the kind of psychiatry they deserve.

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