HARMING ARTISTS

Psychiatry Ruins Creativity

Report and recommendations on psychiatry assaulting the arts

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IMPORTANT NOTICE
For the Reader

The psychiatric profession purports to be the sole arbiter on the subject of mental health and "diseases" of the mind. The facts, however, demonstrate otherwise:

1. **Psychiatric "Disorders" Are Not Medical Diseases.** In medicine, strict criteria exist for calling a condition a disease: a predictable group of symptoms and the cause of the symptoms or an understanding of their physiology (function) must be proven and established. Chills and fever are symptoms. Malaria and typhoid are diseases. Diseases are proven to exist by objective evidence and physical tests. Yet, no mental "diseases" have ever been proven to medically exist.

2. Psychiatrists Deal Exclusively with Mental "Disorders," Not Proven Diseases. While mainstream physical medicine treats diseases, psychiatry can only deal with "disorders." In the absence of a known cause or physiology, a group of symptoms seen in many different patients is called a disorder or syndrome. Harvard Medical School's Joseph Glenmullen, M.D., says that in psychiatry, "all of its diagnoses are merely syndromes [or disorders], clusters of symptoms presumed to be related, not diseases." As Dr. Thomas Szasz, Professor of Psychiatry Emeritus, observes, "There is no blood or other biological test to ascertain the presence or absence of a mental illness, as there is for most bodily diseases."

3. Psychiatry Has Never Established the Cause of Any "Mental Disorder." Leading psychiatric agencies such as the World Psychiatric Association and the U.S. National Institute of Mental Health admit that psychiatrists do not know the causes or cures for any mental disorder or what their "treatments" specifically do to the patient. They have only theories and conflicting opinions about their diagnoses and methods, and are lacking any scientific basis for these. As a past president of the World Psychiatric Association stated, "The time when psychiatrists considered that they could cure the mentally ill is gone. In the future, the mentally ill have to learn to live with their illness."

4. The Theory That Mental Disorders Derive from a "Chemical Imbalance" in the Brain Is Unproven Opinion, Not Fact. One prevailing psychiatric theory (key to psychotropic drug sales) is that mental disorders result from a chemical imbalance in the brain. As with its other theories, there is no biological or other evidence to prove this. Representative of a large group of medical and biochemistry experts, Elliot Valenstein, Ph.D., author of Blaming the Brain says: "[T]here are no tests available for assessing the chemical status of a living person's brain."

5. The Brain Is Not the Real Cause of Life's Problems. People do experience problems and upsets in life that may result in mental troubles, sometimes very serious. But to represent that these troubles are caused by incurable "brain diseases" that can only be alleviated with dangerous pills is dishonest, harmful and often deadly. Such drugs are often more potent than a narcotic and capable of driving one to violence or suicide. They mask the real cause of problems in life and debilitate the individual, so denying him or her the opportunity for real recovery and hope for the future.
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INTRODUCTION

A Message to Artists

Every great society has its creative minds—its true artists. From Ancient Greece and Rome, through the Renaissance to the world today, mankind has revered men and women of exceptional artistic ability.

As renowned American writer Henry James once said, “It is art that makes life.” His words are no less true today, for indeed, artists are the individuals who dream our future and create the realities of tomorrow. True, so do engineers and businessmen and visionaries in other fields, but by and large the futures they create revolve around our material well-being. It is the artist who lifts the spirit, makes us laugh and cry and can even shape the spiritual future of our culture. It is artists who make life.

This explains, then, why artists remain the most cherished of human assets the world over.

Unfortunately, in many cases, they are assets we have lost too soon—losses that have left us poorer. In recent decades we have all mourned the untimely deaths of great artists who enriched our lives, yet left before their work was done. Luminaries of literature, the screen, the theater and the concert stage, names such as Ernest Hemingway, France’s great writer Antonin Artaud, jazz singer Billie Holiday, Judy Garland, Marilyn Monroe, Vivien Leigh, Kurt Cobain, Michael Hutchence, Phil Hartman and many, many more.

Faced with even this partial list, it would be easy to form the impression that the lives of artists are unavoidably tumultuous and that for some, the pressures of success bring demands too great to be borne. It would also be easy to believe that to be a successful artist you must be neurotic or some sort of tragic figure.

None of this is true.

In each of the cases above, hidden influences worked to ensure the deadly outcome. The truth is, each of these great artists and many of the others who have left us were offered “help.” Instead they were betrayed and placed on a path which assured their destruction.

This betrayal came through the direct or indirect influence of psychiatrists or psychologists, who claimed they would help but were, in effect, a destructive influence that left these artists dreadfully damaged—or dead—after their foundations of strength and certainty were torn away.

Today there is an added urgency that this message be heard and understood, for the assault upon artists of every genre has only increased in both volume and efficiency. The weapons now include an array of deadly drugs that masquerade as therapeutic cures, just as the prefrontal lobotomy once did. In Hollywood, the mecca of the entertainment industry, those mind-altering and addictive psychotropic drugs are exacting too high a cost in creative lives.

Quite apart from the devastation being spread within the ranks of artists themselves, we must not forget: Artists create the future of our culture.

Is this the future we face? One in which we will follow these leaders of public opinion into the brave new therapeutic world of stunted creative personalities, ruined families, wasted lives and self-destruction?
If this seems alarmist, then review the figures below—they show what the future holds unless some drastic changes are made quickly: Currently, more than 20 million children around the world are prescribed mind-altering psychiatric drugs, including antidepressants that both United Kingdom and United States drug regulatory agencies have warned can cause suicide and violent behavior. Indeed, the increasing incidence of school shootings and violent crime among teens can be traced to the proliferation of these drugs being prescribed them. Millions are also prescribed stimulants that are more potent than cocaine.

Among these millions, consider how many potentially great artists will never fulfill their destiny? And how will our culture suffer from their absence?

We have mourned the great artists we have lost too soon. Let’s not grieve for more.

The Citizens Commission on Human Rights International prepares up-to-the-minute information and studies that assist authors and scriptwriters with material and facts on the subject of psychiatry. This has included the book, *Shadowland*, the story of actress Frances Farmer; compelling evidence provided “60 Minutes” in Australia, which led to national television awards for the program, and case studies for documentaries aired on Channel 4 UK, in Germany, Italy and in other countries. In fact, CCHR’s international headquarters is in the heart of Hollywood on Sunset Boulevard and houses a state of the art permanent museum, “Psychiatry: An Industry of Death,” with 14 one-of-a-kind documentaries on various aspects of psychiatry—ranging from its dark history to its role in the Holocaust; from detestable ethnic cleansing and apartheid programs and racism to the harmful and often fatal effects of its treatments such as dangerous and addictive psychotropic drugs, electroshock, psychosurgery and stimulants used for child drugging.

The Museum and CCHR’s decades of research are resources for screenwriters, television scriptwriters, playwrights and novelists. We urge you to work with us to further disseminate this information; and protect those artists who need help, ensuring that our future is not betrayed.

Jan Eastgate  
*President*  
CCHR International

Anne Archer  
*Actress*

Nancy Cartwright  
*Actress, author*

Juliette Lewis  
*Actress*

Bruce Wiseman  
*President*  
CCHR United States

David Campbell  
*Composer, recording arranger*

Chick Corea  
*Jazz composer, pianist*

John Novello  
*Composer, musician*

Raven Kane Campbell  
*Singer, composer, playwright*

Isaac Hayes  
*Composer, musician, actor*

David Pomeranz  
*Singer, songwriter*

Geoffrey Lewis  
*Actor*

Harriet Schock  
*Songwriter, recording artist*
In 1916, German psychologist Hugo Münsterberg wrote *The Photoplay: A Psychological Study*, officially setting into motion psychology and psychiatry’s influence over cinema. Münsterberg claimed the film industry could be “fraught with dangers” that required psychological “advice.”

In 1924, Samuel Goldwyn of Metro-Goldwyn-Mayer tried to get Sigmund Freud to help devise “a really great love story.” Freud, who was critical of artists, declined. Yet, his now-discredited theories were widely adopted at the time by the film industry.

Psychiatrists, such as Karl Menninger, used the film industry to finance their own movement and agenda.

On the advice of psychiatrists and psychologists, studios sent actors for psychoanalysis, which often led to them being placed on powerful mind-altering and addictive drugs that would eventually ruin their careers and lives.

Nazi psychiatrists wrote a series of scripts later known as “The Killing Films” and used the German film industry to propagate their false and destructive racial hygiene theories.
At the end of the 19th century, two developments took place in Europe, which would greatly influence the way many would view themselves and society. In 1879, in Leipzig, German professor of psychology Wilhelm Wundt announced with great authority, albeit with no scientific foundation, that man was no more than a soulless animal, a mere product of his environment. It was a statement that signaled the birth of experimental psychology and a new direction for psychiatry.

In the late 1890s, in Vienna, Austria, Sigmund Freud declared man to be a product of his childhood misfortunes and sexual hang-ups. Along with this equally unproven theory, which has since been largely discredited, came a new subject: psychoanalysis.

Wherever people have applied the fundamental concepts of these practices, society has experienced radical changes. Arts and entertainment are among the fields that have been greatly and adversely affected by them.

In the early 1900s, signs plastered on storefronts in Hollywood advertised “PSYCHOANALYSIS, READINGS” for $3 to $5. As countless artists were attracted to Hollywood at the time, they were bombarded with Freudian messages.\(^1\)

A passage from Celia Bertin’s biography on Princess Marie Bonaparte, an eager student of Freudian psychology, gives some idea of how his ideas caught on: “Freud was now so famous that Hollywood asked him to cooperate in writing scripts based on world-famous love stories, starting with ‘Antony and Cleopatra.’”\(^2\) Samuel Goldwyn of Metro-Goldwyn-Mayer (MGM) fame sailed to Europe in 1924 with a mission: to get Freud to help devise “a really great love story.”

Freud declined. Little wonder. Of art and artists, Freud said: “Meaning is but little with these men [artists]; all they care about is line, shape, agreement of contours.”\(^3\) Yet, although he was no lover of the cinema or stage, Freud had no problem becoming an “an avid interpreter [critic] of the arts.”\(^4\) Helped in many ways by Hollywood, Freudian thought quickly entered the mainstream culture. By 1925, a popular song had the title, “Don’t Tell Me What You Dreamed Last Night, for I’ve Been Reading Freud.” The movie “Blind Alley” (1939) starred Ralph Bellamy as Dr. Shelby, lecturing on the supposedly thin line dividing madness and sanity. Even Fred Astaire played a “dancing psychiatrist” who fell in love with his patient (Ginger Rogers).\(^5\) Of course, in the movie it all worked out all right in the end. Unlike in real life, where that movie image falls away quickly before the truth of the matter.

Psychiatrists and psychologists are known to have the highest incidence of any healthcare practitioners for criminality, including sexual abuse of patients (women and children). The number of criminal prosecutions and license revocations for

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In 1936, psychologist Hugo Münsterberg was one of the first to suggest that psychologists, as alleged experts on the mind, should be hired to advise the film industry. Provocatively, he claimed that films could be "fraught with dangers" and that "the possibilities of psychical infection and destruction cannot be overlooked."[10]

More than 70 years later, his advice still echoes in the voices of his modern-day cohorts: "... Psychoanalytically informed criticism can be an extremely important aid to understanding the special hold that psychologists and psychiatrists has been on an increase for many years.

The fact that many of Freud’s now-dismissed theories were developed while he was an avid user of cocaine was not known at the time. His ideas and those of other psychoanalysts and psychiatrists also entered Hollywood through social channels, made fashionable, for example, by Adeline Jaffe Schulberg, wife of pioneer producer, B. P. Schulberg. As Bud Schulberg wrote: “The whole country ... seemed to be going off on one prolonged toot of bathtub gin, dance crazes, and a newly liberated sense of sex. It was fun to drink because you weren’t supposed to, to fornicate because Dr. Freud had now informed you that it was time to let your id take over from that puritanical superego. If the whole country was going to the party, why should Hollywood be any different? And if the Hollywood party was excessive, it was only because Hollywood had always been an excessive, speeded-up, larger-than-life reflection of the American Way.”[6]

Psychology: The All-Knowing Censor

In 1916, flanking Freud’s Hollywood invasion, psychologist Hugo Münsterberg wrote The Photoplay: A Psychological Study, officially setting into motion psychology and psychiatry’s influence over cinema. Münsterberg had studied under Wilhelm Wundt before heading Harvard University’s psychological laboratory in the late 1800s. “The [movie] screen,” he wrote, “ought to offer a unique opportunity to interest wide circles in psychological experiments and mental tests. . . .”[9]

Münsterberg was one of the first to suggest that psychologists, as self-appointed experts on the movies have on audiences," a 1987 book on psychiatry and the cinema asserted.[11] Beverly Hills psychotherapist Carole Lieberman also promoted a censoring role for her ilk when she recommended in the Los Angeles Times that psychotherapists be used to provide “expert opinion regarding psychologically damaging content.” She employed an ominous threat of governmental action to obtain acceptance of her idea: “If the movie industry wants to retain the privilege of self-regulation and stem the dangerous tide of censorship ... it needs to be more responsible.”[12]

A Profit-Making Agenda

Psychiatrists used the Hollywood set as a means of financing their own movement and agenda. Psychiatrist Karl Menninger “was well known for courting movie people, especially those who could...”

Actor Robert Walker was receiving therapy from psychiatrist Frederick Hacker, but on August 25, 1951, he went into shock and died after being given a powerful barbiturate while intoxicated. Years later, another therapist summed it up: “Hacker killed Robert Walker.”

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come up with hefty donations to support his clinic and research foundation.” There was another reason Menninger enjoyed mixing with producers and studio heads: they generated business for his clinic. Those who had met the psychiatrist “were soon shipping their [so-called] mentally unbalanced performers off to Topeka [Kansas] for treatment.”

One of these was Robert Walker, who co-starred with Judy Garland in the 1944 film, “The Clock.” After his separation from actress Jennifer Jones, Walker began drinking heavily. In 1948, he was arrested for drunk and disorderly conduct and given an ultimatum: submit to treatment at the Menninger Clinic or be fired.

Walker went to the mid-Western psychiatric facility and was also made to continue regular therapy with Los Angeles psychiatrist Frederick Hacker, who had trained at the Menninger Clinic. Not only was the psychiatric “therapy” ineffective, it killed Walker. On August 28, 1951, Walker went into shock and died after being given a powerful barbiturate. Four decades later, Los Angeles therapist Alex Rogawski was the first to be candid about this: “Hacker killed Robert Walker.”

The 1945 movie “Spellbound” was among the first productions to employ psychiatrists as consultants, listing May Romm as “psychiatric advisor” in the credits.

Psychiatrist Martin Grotahn emigrated from Germany at the invitation of Karl Menninger and worked at his clinic until 1945 before moving to Los Angeles. In 1950, along with Frederick Hacker and May Romm, he founded the Institute for Psychoanalytic Medicine of Southern California, a training center for analysts.

Grotahn admitted that he was attracted to Hollywood and movie stars because “I was anxious to make money.” Of course, Grotahn never permitted his opinion that “actors are almost impossible to treat successfully,” to prevent him from billing for his unworkable treatment.

The “Golden Age” of Psychiatry

Authors of Psychiatry and the Cinema, Professors Krin and Glen Gabbard refer to years 1957-63 as the Golden Age of psychiatry in the cinema. During this period, psychiatrists were portrayed as the “authoritative voices of reason, adjustment and well-being,” despite there being no evidence to substantiate this reputation. Psychiatrists featured in many films during this period and the money kept rolling in for them. Research grants for psychiatrists in the United States rose 580% between 1957 and 1963, and continued to rise. Since then, psychiatric research grants from the National Institute of Mental Health (NIMH) increased a further 1,632% (over $1 billion a year). In a failed attempt to understand humans, the NIMH funded studies on the behavior of Norway rat pups, the vocal learning of zebra finches, the reproductive behavior of whiptail lizards, and the behavior of crickets and flies.

By legitimizing themselves on the silver screen, psychiatrists popularized the fraudulent notion that drugs, shock treatment and psychosurgery held the secrets to happier living. A drug era was ushered in, spurred on unwittingly by Hollywood. Society has yet to recover from it.


During the years 1957 to 1963, through the work of Karl Menninger (far right) and other prominent psychiatrists, Hollywood consistently produced “idealized” psychiatrists in prominent roles in films. This avalanche of propaganda for the profession was directed toward a very real monetary objective; government grant appropriations to psychiatry leaped 580% from 1957 to 1963. Between 1963 and 2005, the external grants from the National Institute of Mental Health (NIMH) increased 1,632%.

U.S. National Institute of Mental Health grants to psychiatric research increased 580%.

The funding has continued to spiral upward.

Karl Menninger
In the 1930s, Nazi psychiatrists exploited Germany’s film industry to further their eugenics and racial hygiene agenda. Propaganda efforts were undertaken to garner public support for their programs that were offered as economic benefits while, in reality, they were investments in death.

Between 1895 and the 1920s, German psychiatrists devised the “scientific” justification for “mass killings,” first piloting the program on “mental defectives.” Indeed, psychiatrist Ernst Rüdin, who helped orchestrate Germany’s Sterilization Law in 1933 that destroyed the lives of hundreds of thousands of German citizens, boasted, “Only through the Führer did our dream of over 30 years, that of applying racial hygiene to society, become a reality.”

Two years before the Final Solution conference, which triggered the genocidal phase of the Holocaust, the first “killing tests” were conducted in psychiatric institutions; 18–20 people were murdered using gas, while psychiatrists and staff watched. Germany’s leading psychiatrists launched the “T4” euthanasia program—named after Tiergartenstrasse 4, the address of the program’s headquarters.16 Professor Don Schwartz, Professor of History, California State University, Long Beach, explained, “The Nazis gave them political support, financial support, and conversely the psychiatrists gave the Nazis a medical justification for their genocidal policies.”

Scripted by psychiatrists, “the film, documentary in style, sets out a perverted version of Darwinian teaching—that only the fit and strong should live. ...The script required that the patients be depicted with ‘demonically mad faces.’”

— “Selling Murder, The Killing Films of the Third Reich,” Discovery Channel USA
To achieve widespread acceptance of this murderous practice, T4 psychiatrists scripted or advised on propaganda movies. One film, “Dasein ohne Leben” (“Existence without Life”), indoctrinated the population with the idea that care for the sick was too expensive and that therapy for the “genetically diseased” was useless.\(^{17}\)

Another film, entitled simply, “Geisteskrank” (“Mentally Ill”), detailed how psychiatrists diligently examined the case histories and previous diagnoses of each patient to establish whether or not they were “ incurable.” The cameraman filmed through the peephole into a gas chamber to show the killing. The script reads blandly: “... the patients are exposed to the effect of carbon monoxide gas. The gas that streams in is completely odorless, and initially robs the patients of their powers of judgment and subsequently of their consciousness.” And as the patient draws his last breath, an unseen commentator says, “Without pain or struggle, and completely unaware, the patient is liberated by death.”\(^{18}\)

As the war drew to a close, the Nazis destroyed several other equally explicit incriminating films. However, unedited footage was found that was part of one such film, “Laws of Heredity.” Scripted by psychiatrists, camera crews dressed as “doctors” and toured the country’s asylums to set up scenes that stigmatized disabled people. As reported, “The film, documentary in style, sets out a perverted version of Darwinian teaching. That only the fit and strong should live. ... Everything that is weak in life will inevitably be destroyed by nature. In the last few decades, mankind has sinned terribly against the law of natural selection. We haven’t just maintained life unworthy of life. We have allowed it to multiply.” The script also required that the patients to be hit from below to depict them with “demonically mad faces.”\(^{19}\)

Supported by such unconscionable propaganda, psychiatrists murdered some 300,000—or more than 90% of the country’s mental patients—during a five-year period beginning in January 1940. More than 87,000 were children and young adults. Another 350,000 citizens were forcibly sterilized.

Hadamar (left) and other psychiatric facilities established killing centers to dispose of their patient populations. After killing them with gas, the bodies were incinerated in hospital ovens; the black smoke could be seen for miles around. Psychiatrists then exported their “successful” program into the concentration camps.
In the late hours of Saturday, August 4, 1962, the “candle in the wind” burned out. The 36-year-old woman born as Norma Jeane Mortenson, but known to the world as Marilyn Monroe, was dead.

She had been a true Hollywood phenomenon. Hailed for her serious acting as well as her worldwide reputation as the blonde bombshell, the star had nearly 30 films to her credit, including such hits as “Gentlemen Prefer Blondes,” “The Seven-Year Itch” and “Some Like It Hot.”

As with all legends, however, the image left by Monroe’s death is as much fable as truth: a publicly adored but tortured actress who chose the numb, giddy world of drugs and tranquilizers over the burden of reality—so much so that it finally killed her.

But behind the lurid headlines, the facts of Monroe’s life and the tragedy of her final days tell a different story.

Seven years earlier, as she neared the height of her career, an acting coach suggested she undergo psychoanalysis to “tap all her explosive energy.” Beginning in February 1955, Monroe attended analytic sessions with Margaret Hohenberg. Almost immediately, the analysis—with its constant questioning of motives and self—began to take its toll: Excessive introspection exacerbated her lack of self-confidence. Intuition suffered at the expense of a forced, conscious intellectualism that paralyzed her and pushed her further back into herself.

— Donald Spoto, biographer, referring to Monroe’s “psychoanalysis”

Greenon was with Marilyn Monroe for more than six hours on the very day she was found dead from an overdose of psychiatric drugs.

“I’m trying to become an artist, and to be true, and sometimes feel I’m on the verge of craziness. I’m just trying to get the truest part of myself out, and it’s very hard. There are times when I think, ‘All I have to be is true.’ But sometimes it doesn’t come so easily. I always have this secret feeling that I’m really a fake or something, a phony.”

Monroe’s biographer, Donald Spoto, wrote of her therapy, “Excessive introspection exacerbated her lack of self-confidence. Intuition suffered at the expense of a forced, conscious intellectualism that paralyzed her and pushed her further back into herself.”

The actress eventually saw New York Freudian psychiatrist Marianne Kris, who prescribed the powerful barbiturates that Monroe abused until her
death. Kris also tricked Monroe into signing herself into a psychiatric ward, telling her it was for a physical examination and rest. Instead, Monroe was locked into a padded cell for two days, where she pounded the door until her fists were raw and bleeding.

In 1960, Monroe began seeing the psychiatrist who would drive her even deeper into her personal hell, Ralph Greenson. His control over her was swift and all-encompassing. “I was going to be her one and only therapist,” he wrote. He ensured she was maintained on a steady diet of barbiturates. “His tactic was disastrous,” wrote Spoto. “Instead of leading his patient to independence, he did exactly the opposite and effectively made her entirely contingent on himself … he was certain he could prevail on her to do anything he wished.”

On August 4, after spending six hours with Greenson, Monroe was found dead of a drug overdose by her housekeeper Eunice Murray.²⁰

Method Acting was in part based on the conditioning experiments of Pavlov.

**A Madness in the Method**

Robert H. Hethmon wrote in *Strasberg at The Actors Studio*, “Sometimes [the actor] faces the task of repeating himself tonight at eight-forty, when the curtain rises, freshly and creatively—and finds himself stale, constricted, mechanical, dead, a bundle of mannerisms and clichés.”

Method Acting was one means of attempting to overcome this and other acting obstacles. While today’s Method Acting schools practice a diversity of behavioral-styled, psychological techniques under the Method banner, the historical and technical origin of this approach dates from the late 19th century to French experimental psychologist, Theodore Ribot (1839–1916).

Ribot rejected spiritualist philosophy and combined psychology with biology, speaking of the “advantages” of “a psychology without a soul.” His theories were similar to, if not based on, those of the German behaviorist psychologist Wilhelm Wundt and Russian psychologist Ivan Pavlov—the key idea being that man is a stimulus-response and soulless animal. In fact, Ribot praised Wundt in his 1886 book, *German Psychology of Today*.

Founder of the Moscow Art Theater, director and acting coach, Konstantin Stanislavski, and later Lee Strasberg in New York, adopted Ribot’s “affective memory” techniques. Essentially, “The actor was asked to recall the details of an event from his own past. The recollection of these details would stir the actors with some feeling involved in the original experience, thus producing ‘mood,’” wrote Harold Clurman, author of *The Fervent Years*.

It sounds harmless. However, for some, they didn’t just recall, they re-experienced the incident. They didn’t just remember or create; they dove headfirst into some traumatic incident in their life—and remained there. And some actresses—like Marilyn Monroe—were simultaneously undergoing manipulative psycho-analysis, a dangerous combination. In such cases, unwittingly, acting coaches were playing Russian Roulette with their students’ minds.

Monroe made 23 movies in 7 years prior to psychiatry. She made only 6 films in the 7 years after psychiatric “care and guidance” began.
IMPORTANT FACTS

1. Psychiatrists have notoriously and falsely “diagnosed” the creative mind as a “mental disorder,” invalidating the artist’s abilities as “neurosis.”

2. While psychiatry purports to be a science, this has been successfully challenged by medical experts and scientists. Dr. Margaret Hagen, Ph.D., a Boston University lecturer and author, calls it “junk science.” “Unhappiness is a problem; it is not a disease,” she states.

3. Psychiatric theories perpetually remain theories; never moving any closer to facts or laws. They speak of “disorders” because they cannot prove the existence of criteria that make a “disease.”

4. Experts also refute psychiatry’s latest theory that a “chemical imbalance” causes mental disorders, with Dr. David Kaiser stating, “This is essentially a pseudo-scientific enterprise.”

Actress Vivien Leigh’s career is one of many cut short by psychiatry’s refusal to use standard medical procedures, ignoring her underlying physical illness and exacerbating it with psychotropic drugs.
For years, psychiatrists and psychologists have labeled the creative mind as a mental “disorder,” mischaracterizing an artist’s “feverish brilliance” as a manic phase of craziness, or melancholic performances as depression. Vision was redefined as hallucination.

Regardless of psychiatry’s total lack of scientific authenticity, the more entrepreneurial and ambitious psychiatrists have discovered a captive market in the entertainment industry. They have courted and seduced creative individuals—and made billions in the process. Psychiatry purports to be part of the sciences, a claim that is proven false by experts in methodology who point out that they cannot recognize any of the requisite criteria that distinguish a true science. What is the nature of a science? And what is the scientific validity of psychiatry and psychology?

According to Margaret A. Hagen, Ph.D., a Boston University lecturer, these are some of the key criteria for a science: “The findings discovered through observation in one laboratory must be replicatable in another laboratory. Data measured and gathered by one instrument must be the same as data gathered by another similar instrument. And thus the objectivity comes not from an individual practitioner but from a system that demands consistent and repeatable results.”

Dr. Thomas Szasz, professor of psychiatry emeritus, says: “If an ‘illness’ is to be scientifically meaningful, it must somehow be capable of being approached, measured or tested in a scientific fashion, as through a blood test or an electroencephalograph. If it cannot be so measured—as is the case [with] ... ‘mental illness’—then the phrase ‘illness’ is at best a metaphor ... and that therefore ‘treating’ these ‘illnesses’ is an ... unscientific enterprise.”

Convincing people that a chemical imbalance in the brain is the cause of their mental disturbance is evidence only of effective—albeit fraudulent—marketing. It’s helped to turn on 54 million people worldwide to antidepressants. Jonathan Leo, associate professor of anatomy at Western University of Health Sciences explains: “If a psychiatrist says you have a shortage of a chemical, ask for a blood test and watch the psychiatrist’s reaction. The number of people who believe that scientists have proven that depressed people have low serotonin [chemical] is a glorious testament to the power of marketing.”

Dr. Steven Sharafstein, President, American Psychiatric Association admitted in an interview with the media: “We do not have a clear cut lab test” to determine a chemical imbalance in the brain.
"Unlike medical diagnoses that convey a probable cause, appropriate treatment and likely prognosis, the disorders listed in DSM-IV are terms arrived at through peer consensus."

— Tana Dineen, Ph.D., Canadian psychologist and author

One psychologist described the level of “science” used to establish psychiatric disorders, “Diagnoses were developed by majority vote on the level we would use to choose a restaurant. You feel like Italian, I feel like Chinese, so let’s go to a cafeteria. Then it’s typed into the computer.”

And what are some of these mental “disorders”? Stuttering, Communication Disorder Not Otherwise Specified, Oppositional Defiant Disorder, Disorder of Written Expression, Mathematics Disorder, Sleepwalking Disorder, Nicotine Withdrawal Disorder, Phase of Life Problem Disorder and Caffeine Intoxication Disorder. DSM-IV lists the latter as occurring as a result of drinking 2–3 cups of coffee and experiencing five or more of 12 listed symptoms, including: restlessness, nervousness, excitement, insomnia, flushed face, increased urination, muscle twitching, heart palpitations and periods of inextinguishability.25

It is no wonder that the DSM is under attack. “[T]he current DSM is a compendium of checklist diagnoses: cursory, superficial menus of symptoms,” criticized Harvard Medical School’s Joseph Glenmullen. He warned that drugs are now being prescribed for a “burgeoning list of conditions,” including everyday life.

A study published in the journal Psychotherapy and Psychosomatics exposed how pharmaceutical companies who manufacture drugs for mental disorders funded more than half of the psychiatrists who defined the disorders for the DSM. In the case of depression, “bipolar” and psychotic disorders, 100% of the psychiatrists involved had undisclosed financial ties to pharmaceutical companies.

David Kaiser, a medical author who is trained as a psychiatrist, has condemned the DSM criteria: “This is essentially a pseudo-scientific enterprise that grew out of modern psychiatry’s desire to emulate modern medical science.”

This doesn’t mean that people do not have problems; mental travail and upsets exist. So-called schizophrenia, for example, can frighten people until one learns that its symptoms could be caused by undiagnosed, untreated physical complaints that can be effectively treated without nerve seizing, addictive and potentially deadly antipsychotic drugs.

Dr. Margaret Hagen, Ph.D., a lecturer at Boston University points out, “Unhappiness is a problem; it is not a disease. Low self-esteem also is not a disease. Eating too much is not a disease, and neither is eating too little. And, despite a huge lobby to the contrary, drinking too much alcohol is not a disease either ... the psychological establishment has defined virtually all less-than-desirable behaviors, from hatred of first grade to serial rape, as psychological diseases, and represents itself as uniquely able to provide the necessary ‘therapies’ for them.”26

Psychiatrists and psychologists should no more be let loose to diagnose the problems faced by those working in the arts, than a butcher should be allowed to operate on people. The consequences are staggering and dangerous.
DIAGNOSTIC FRAUD

Selling Psychiatric ‘Illness’ with Invented Disorders

From the first Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1952, which named 112 mental disorders, to the latest edition which now includes 374 such disorders, the criteria used for psychiatric diagnoses are a parody of science-based illnesses. Used by psychiatrists to bilk hospitals, governments and insurance, they give medicine a bad name. The billable list includes:

- Caffeine-Related Disorder
  DSM Page 212
- Conduct Disorder
  DSM Page 85
- Expressive Language Disorder
  DSM Page 55
- Mathematics Disorder
  DSM Page 50
- Disorder of Written Expression
  DSM Page 51
VIVIEN LEIGH 1913–1967

Of the stars that fell victim to psychiatric misdiagnosis and violent treatment, perhaps none is better known all over the world than Vivien Leigh. The star of “Gone with the Wind” and “A Streetcar Named Desire,” she received best actress Oscars for both films. Ironically, Leigh’s life was a tragedy of Shakespearean proportions.

Her troubles began in 1945. While performing on stage in “The Skin of Our Teeth,” Leigh experienced attacks of hysteria, alternated with bouts of exhaustion and exhilaration. Diagnosed with tuberculosis (TB), she continued performing until closing night. After six weeks of treatment in a hospital the TB showed signs of abating and she recuperated at home over the following year.

Bouts of hysteria, however, continued, exacerbated because she mixed alcohol with her TB medication. Isoniazid, one of the drugs prescribed at the time for TB, had side effects that included mental confusion and toxic psychosis.27

In the early 1950s, Leigh began seeing a psychiatrist. Typically, psychiatrists do not check for drug-induced mental behavior. While filming “Elephant Walk” in Ceylon, Leigh began having hallucinations, making it impossible to film. Desperately concerned, her husband, renowned classical actor Sir Lawrence Olivier, capitulated in light of psychiatric advice. She was flown to her native England, where she was admitted to a psychiatric facility.

Here, she was brutally packed in ice as part of her “treatment” and subjected to repeated electroshocks. It was the first of many terrors, and one that would affect her permanently.28 One time she even suffered burn marks to her head from the electric shock. Olivier was devastated by the change in his wife’s personality following the shocks: “I can only describe them by saying that she was not, now that she had been given the treatment, the same girl that I had fallen in love with.”29 She was now more of a stranger to me than I could ever have imagined possible.

— Sir Lawrence Olivier, commenting on Vivien Leigh after she received ECT

In May 1967, Leigh’s medical doctor informed her that the TB had spread to both lungs and her condition was critical. Her strength destroyed by years of electroshocks and psychiatric drugs, Leigh was unable to fight off the disease. She succumbed to it less than two months later. Psychiatry’s brutal treatments progressively denied Leigh her sanity, her marriage, her career and ultimately her life.
Judy Garland never had a problem taking her audience wherever she wanted them to go; this was her special magic from the first moment that she stepped on stage. In the winter of 1939, she starred in her seventh film, “The Wizard of Oz,” and recorded what would become her signature song, “Over the Rainbow.” That same year she pressed her hand and shoe prints into the concrete in the forecourt of Grauman’s Chinese Theater, the landmark on the Hollywood Walk of Fame; an international star at 17.

However, the price and pressures of such fame were high. Her studio contract required her to maintain a certain physical appearance—if she gained weight, she could be suspended without pay. She was prescribed antidepressants and amphetamines to control her appetite and barbiturates to help her sleep.

As Garland became more and more addicted to the drugs, her friends noticed alarming differences; a gaunt look from severe weight loss and dark-blue circles under her eyes. Garland was also introduced to psychoanalysis. At her first interview with psychiatrist Karl Menninger, he told her that “she had problems; they could become serious; she needed help”—immediately. Garland started seeing Menninger, his associate, Ernst Simmel, and, later, Frederick Hacker.

As the drugs took a progressively greater hold of her life, her behavior on the film set became erratic, disruptive and demoralizing to others in the crew. As later medical evidence showed, the drugs were gradually destroying her physically.

Gerald Frank, in his book Judy, revealed that with no relief in sight, by the end of the film “The Pirate,” Garland was “completely and desperately exhausted.” “She took the medication to wipe out her anxieties, and then when she attempted to do without pills … the result was a physical pain and a sense of suffocation that became so intense that she had to take the pills again … her cure became her illness.”

Under a psychiatrist’s orders, she began the first of many stays in psychiatric hospitals. In 1949, not yet 27 years old, she was subjected to the violence and degradation of electroshock. In the late 1950s, as Garland’s drug-induced health problems became critical, she was admitted to the hospital with her liver and spleen massively swollen and her whole body poisoned with fluids. Seven weeks later she checked out to make her third and final stage comeback. This time she was prescribed Valium, Thorazine and, at one time, 40 Ritalin pills a day.

Assertions that the source of Garland’s troubles was an inherent artistic neurosis (or similar psychobabble) came only from arrogant psychiatrists or psychoanalysts with purses to fill. In fact, she had formed her own firm opinion of her treating psychiatrists, as reported by Frank: “She was abysmally discouraged; her years of analysis had not helped her … she had no respect for psychiatrists, she had seen more than a dozen of them and they had all failed her.”

It was a realization that came too late. On June 15, 1969, Garland performed on stage for the last time at the Half Note Club in Greenwich Village. Six days later she died of a psychiatric drug overdose in a London hotel.

“She took the medication to wipe out her anxieties, and then when she attempted to do without pills … the result was a physical pain and a sense of suffocation that became so intense that she had to take the pills again … her cure became her illness.”

— Gerald Frank, author of Judy
IMPORTANT FACTS

1. Electroconvulsive Therapy (ECT, shock treatment)—the passage of up to 460 volts of electricity through the brain—can wipe out memory and, as such, has destroyed many great artists’ creative abilities.

2. Italian psychiatrist Ugo Cerletti “discovered” the brutal practice in a Rome slaughterhouse in 1938. Here, pigs were shocked using electricity before their throats were slit—a practice, Cerletti admitted, that inspired him to administer the method to humans.

3. ECT is still widely used, with hundreds of thousands subjected to it each year around the world—over 100,000 in the U.S. alone, where it is a $5 billion a year industry.

4. Psychosurgery—a brutal practice that destroys healthy brain tissue based on the false idea that it can “change behavior” for the “better”—continues to destroy lives, costing thousands of dollars per operation.

Tricked into a visit to the Mayo psychiatric clinic, Nobel Prize winning author Ernest Hemingway soon found himself subjected to a series of brutal shock treatments that destroyed his writing career and his life.
CHAPTER THREE
Cruel Electroshock, Destroying the Brain

If Nobel Prize-winning author Ernest Hemingway were alive today, he would probably conduct a heated argument with psychiatrists who hold him up as an example of “great writers with mental illness.” Stripped into a psychiatric institution, he was stripped of his clothes and his dignity, and given 20 electroshocks. Several weeks later, he confided, “What these shock doctors don’t know is about writers and such. ... They should make all psychiatrists take a course in creative writing so they’d know about writers ... what is the sense of ruining my head and erasing my memory, which is my capital, and putting me out of business? It was a brilliant cure but we lost the patient.”

In July 1961, days after being released from the Mayo psychiatric clinic, Hemingway committed suicide.

“Electroshock,” “shock treatment,” or “ECT” is pain inflicted in the name of therapy. It is just as controversial and destructive today as it was in 1975, when the film “One Flew Over the Cuckoo’s Nest” was released. At the time, psychiatrists gave patients up to 20 shocks a day, arguing that it could “wipe the mind clean and let it re-grow,” a phenomenon that is about as likely as growing back a leg after it has been amputated.

Psychiatrists continue to lie about the number of shock-related deaths. While publicly admitting to one death per 10,000 people, the mortality rate has been independently verified as being more on the order of 1 in 200, a rate 50 times higher. Even if a patient does not die from the ECT, the general average life expectancy is significantly reduced by the effects of this destructive procedure.

Proponents of ECT falsely claim that it is “safe and effective”—while having to admit that they have no idea how it works. This hasn’t stopped them from using it to make $5 billion per year in America alone, electroshocking more than 110,000 citizens and hundreds of thousands more in other countries.

Killing the Soul
ECT was developed by Italian psychiatrist, Ugo Cerletti in 1938 after experimenting on pigs in a Rome slaughterhouse. The electric shock stunned the pig sufficiently so that its throat could be easily cut, producing a swift death. Today, between 180 to 460 volts of electricity are sent searing through the human brain. A shock wave passes through the head, causing the brain to discharge energy in a very chaotic fashion.

“What these shock doctors don’t know is about writers and such ...
What is the sense of ruining my head and erasing my memory, which is my capital, and putting me out of business?
It was a brilliant cure but we lost the patient “
— Ernest Hemingway, Nobel Prize-winning author
This increases metabolism to a very high level, which deprives the brain of oxygen and destroys brain cells.\(^{36}\) This is, in fact, brain damage and the cause of spatial and time disorientation that always follows shock treatments.

The U.S. Food and Drug Administration’s (FDA) website reports the following effects from electroshock: Miscarriage, severe memory loss, seizures, tremors, dementia, and severe weight loss. Among the horrific incidents described is this: “A flash of fire erupted across the patient’s right cheek, resulting in mostly 1st and 2nd degree burns. The physician extinguished the flames immediately and provided treatment.”

Psychosurgery, another unscientific, yet brutal “treatment,” destroys healthy parts of the brain, with psychiatrists asserting this will somehow change behavior for the “better.” It was popularized in the 1930s and 1940s by Portuguese neurologist Egas Moniz and American psychiatrist Walter Freeman, and became best known through a procedure called lobotomy. Moniz said that to “cure” patients, “we must destroy the more or less fixed arrangements of cellular connections that exist in the brain.”\(^{37}\) A 12-year follow-up study concluded that his patients suffered relapses, seizures and deaths.

Freeman used electric shock as an anesthetic before forcing an ice pick beneath the eye socket bone into the brain of a patient; he then moved the instrument back and forth to sever the fibers of the frontal brain lobes. He dubbed his procedure “surgery of the soul.” Freeman traveled the country in a camper he called the “lobotomobile,” and performed his surgical intrusion in theatrical fashion for all who wanted to watch. The press dubbed his tour “Operation Ice Pick.”

With the procedure causing a 10% death rate, more than 10,000 people were killed worldwide during psychosurgery’s heyday. Freeman eventually lost his license to practice over a patient’s death from the procedure. Moniz, on the other hand, was twice shot by disgruntled patients, the second time fatally. Despite all this, psychosurgery is still performed in many countries today.

According to the National Council on Disabilities, an agency of the U.S. government, many of those subjected to ECT have been “physically and emotionally damaged and many believe that it has had long-lasting effects, particularly on memory.” In summary it said: “Mental treatment should be about healing not punishment. … Also, public policy should move toward the elimination of electroconvulsive therapy and psychosurgery as unproven and inherently inhumane procedures. Effective human alternatives to these techniques exist now and should be promoted.”

Both electroshock and psychosurgery cause irreversible brain damage and destroy mental abilities and, in many cases, the patients’ lives.
A HISTORY OF DANGEROUS TREATMENTS

Psychiatric practices that destroy healthy brain tissue, cause irreversible brain damage and destroy basic social skills are claimed to be “workable.” They include 1) psychosurgery (above), 2) contemporary electroshock (right), 3) insulin shock therapy (below) and 4) Metrazol shock (below right).

Today little has changed. Psychiatrists' “modern” treatments are still human rights abuses, and yet they continue to insist that their methods are superior. Failing to understand the cause of or achieve the cure for mental trauma, they routinely harm troubled individuals.
THE ‘DEEP SLEEP’
Deaths and Betrayal

Between 1963 and 1979, Chelmsford hospital was a tranquil-looking psychiatric facility in the outer suburbs of Sydney, Australia. But behind its nondescript exterior, lives were ripped apart with a cruel psychiatric technique called “deep sleep” treatment. People were knocked unconscious for up to three weeks with a lethal cocktail of barbiturates and sedatives. While in this drug-induced comatose state, they were shackled naked to their beds and subjected to painful electroshock treatments, sometimes twice daily. They awoke brain damaged, sick with pneumonia, nursing blood clots, and with an irreversibly altered personality. Some never woke; 48 people died.

The perpetrator of these atrocities, psychiatrist Harry Bailey, was trained in Britain and Canada by psychiatrists who had worked on CIA and other intelligence agency mind control programs. He was considered the “White Knight” of Australian psychiatry, and so was able to attract many theatrical personalities.

Singer Helen Reddy’s sister, Toni Lamond, was a renowned, much loved and award-winning television and theater actress. In the 1970s, after a successful career in Australia, she moved to the United States, appearing on “The Johnny Carson Show,” and in such series as “Starsky and Hutch” and “The Love Boat.” However, her success came at a cost—an addiction to painkillers and an array of “uppers and downers.” She returned to Australia and met Bailey, who told her that she could be put to sleep and, upon awakening, “all your troubles will be gone.” She awoke from Bailey’s procedure after 10 days; she had lost weight, but not her pill addiction. Bailey convinced her to continue.

“deep sleep.” This time she was discharged from the facility with not only her addiction still intact, but with fading memory and feeling suicidal. Indeed, she tried to commit suicide a short while later. Once away from Bailey, Lamond was eventually able to kick her drug habit.

Another one of Bailey’s victims was singer Stevie Wright. In the 1960s, Wright was the lead singer of Australia’s number-one rock band, The Easybeats, and enjoyed a string of hits such as “She’s So Fine” and “Friday On My Mind.” At 18, he was headed for international stardom. By the age of 21, however, the fame was over. The band folded. Wright developed a heroin habit. He was admitted to Chelmsford hospital for “deep sleep” treatment. When he awoke after two weeks, his brain had been so badly damaged by the 14 electroshocks that for the next ten years he was incapable of writing any songs. In fact, he was never able to fully regain his former creative abilities. Wright ended up living on government disability benefits.

In 1979 Bailey’s reign of terror was over. His victims united with the Citizens Commission on Human Rights and government investigations were launched. Deep sleep treatment was banned, its survivors compensated and Chelmsford was closed. Bailey himself avoided his victims by committing suicide. However, modified forms of deep sleep treatment continue to be used in other countries, including South Africa, and as a “treatment” elsewhere for drug abuse.

VICTIMS’ BATTLE FOR JUSTICE:
More than 1,000 people were subjected to “deep sleep” treatment (DST) in Sydney, Australia. The deadly combination of a drug-induced coma and electroshock ultimately killed 48 people before it was banned in 1983. While the victims were compensated, the lethal DST is still used today in countries such as South Africa and for “treatment” of drug addiction.
The story of actress Frances Farmer’s life was portrayed by Jessica Lange in the 1982 movie “Frances.” It is a story of the savage, brutal and unforgivable destruction brought upon one of the most talented actresses of her time by psychiatrists.

Farmer was a beautiful screen and stage actress whose career lit up Hollywood and Broadway in the 1930s and 1940s. By age 27, she had appeared in 18 films, three Broadway plays and 30 major radio shows. She was compared to the great Greta Garbo.

Upset over a string of failed relationships and stressed by career demands, she was also addicted to amphetamines prescribed to keep her weight under control. Farmer was committed to a psychiatric institution in 1943. It was the ruin of her career as she spent the next seven years in mental institutions and was forced to undergo brutal and unworkable electroshock and drugs. She was also subjected to 90 insulin shocks. When she tried to escape, psychiatrists punitively administered more ECT in an effort to break her defiant and rebellious will. When this failed to turn her into a “model” patient, she was given “hydrotherapy”—stripped naked and thrown into a tub of icy water for six to eight hours. Unable to muster any resistance due to her drug-induced stupor, she was raped by orderlies and rented out as a sex toy for local soldiers: “One of the most vivid recollections of some veterans of the institution would be the sight of Frances Farmer being held down by orderlies and raped by drunken soldiers.”

Farmer’s last “treatment” was at the hands of Walter J. Freeman, psychiatry’s czar of lobotomy. Frances Farmer never regained her abilities. She realized that the psychiatrists had been “systematically destroying the only thing she had ever been able to hold onto in life—her faith in her artistic creativity.”

“Never console yourself into believing that the terror has passed, for it looms as large and as evil today as it did in the despicable era of Bedlam. But I must relate the horrors as I recall them, in the hope that some force for mankind might be moved to relieve forever the unfortunate creatures who are still imprisoned in the back wards of decaying institutions.”

— Frances Farmer

In an interview on E!, Entertainment, Frank Freeman, son of lobotomy czar, Walter Freeman, admitted that the photo [seen on page 21] is his father operating on Frances Farmer.

CHAPTER THREE
Cruel Electroshock, Destroying the Brain

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In the first half of the 20th century, many Jazz greats turned to heroin and illicit drugs to block out the powerful effects of racism, including Billie Holiday, Bud Powell and Charlie “Bird” Parker.

Often the artists would be prescribed powerful mind-numbing tranquilizers that were more addictive than the substance they were trying to withdraw from.

Charlie “Bird” Parker was subjected to powerful psychotropic drugs that affected him physically. He narrowly escaped electroshock treatment when a doctor recognized it would ruin his performance ability.

When Bud Powell was admitted to a psychiatric facility after being beaten up by police, psychiatrists refused to believe that he was a pianist and composer and diagnosed him with “delusions of grandeur” and put him in a straitjacket. He was electroshocked and drugged, which eventually led to his deterioration and death.

Billie Holiday sought help from psychiatrists in an effort to handle her devastating drug habit. The treatment failed and her life crumbled under her addiction.
CHAPTER FOUR
Targeting Icons of Jazz

Billie Holiday’s trade song, “Strange Fruit,” was a powerful commentary on racism, particularly the murder of southern black men by white lynching parties. Holiday spoke of the effects of racism: While performing with Count Basie in Detroit, she was told by white club owners that her face was “too yellow to sing with all the black men in his band. Somebody might think I was white if the light didn’t hit me just right. So they got special dark grease paint and told me to put it on. ... I said I wouldn’t do it. But they had our name on the contracts, and if I refused it might have played hell with the bookings, not just for me, but for the future of all the cats in the band.”

*Jazz Education* writer, Scotty Wright, reported that even famous African-American jazz musicians would suffer tremendous insults due to the color of their skin. As a result, there were a “heartbreaking number of musicians who turned to substance abuse, trying to block out the pain and indignity of their offstage existence, in order to be more open to and at peace with their art onstage.”

Heroin did to many jazz musicians in the 1930s and 1940s what psychedelics and tranquilizers did to rock musicians in the 1960s. Depressing the nervous system, heroin creates an illusion of “fearlessness and confidence, making players believe they could accomplish daring runs with carefree abandon.”

The casualty list was high: Billie Holiday, Bud Powell, Charlie Parker and more.

Trusting psychiatry to “cure” their addictions was a fatal mistake.

In 1946, Holiday tried to kick her heroin habit, admitting herself to a private psychiatric facility, publicly claiming she was there for treatment of a nervous breakdown. She paid $2,000 for a three-week “treatment” — a huge sum for its time. Within a year of her “therapy,” however, she was arrested on drug charges.

In 1946, “Bird” Parker was born in 1920. By the age of 15 he was a working musician, bringing innovative ideas to jazz and later, with others, creating *bebop*, which was considered to reflect the pain and despair of ghetto Blacks. In 1946, “Bird” was arrested in Los Angeles for drug...
ECT “could permanently impair [Charlie] Parker’s reflexes, reduce him to a manageable personality [and] a very average musician.”
— Dr. Richard Freeman, who stopped Parker from being subjected to shock, but not debilitating psychiatric drugs

possession and was incarcerated in Camarillo state psychiatric institution. He narrowly escaped being given electroshock after a medical doctor, Richard Freeman, intervened, saying, “It could permanently impair Parker’s reflexes, reduce him to a manageable personality [and] a very average musician.” However, he was still prescribed powerfulpsychotropic drugs. After being discharged from the psychiatric facility, he returned to the same racist and drug-ridden environment he was raised in. On March 12, 1955, “Bird” died of a heart attack caused by a drug and alcohol-related condition. He was 34 years old.

Bud Powell did for the piano what Charlie “Bird” Parker did for the saxophone. He also helped create bebop. Born in Harlem in 1924, Powell was a child prodigy. By the time he was seven, neighborhood musicians would take him with them so others could admire his playing. He made his first recordings when he was 19.

In 1945, suffering the effects of a severe police beating, Powell was admitted to Bellevue psychiatric facility for evaluation. On the admission form he wrote under occupation: “Pianist and composer of over 1,000 songs.” The psychiatrist diagnosed this as “delusions of grandeur” and put him in a straitjacket. Spending most of the year recovering from the beating and treatment he received, he suffered excruciating headaches, seizures and erratic behavior. In 1947, shortly after composing “Celia,” a tribute to his daughter, he was institutionalized for 11 months. While Charlie Parker had escaped electroshock because of the known irreparable damage it would do to his musical ability, Powell wasn’t as fortunate. Friend Jackie Maclean said, “Bud didn’t remember too much, actually, about his life prior to going to the hospital because of the [ECT] treatment they had given him ... I’d mention names to him and he had to stop and think and ask me, ‘Who?’”

 Arrested in 1951 on a narcotics charge, Powell was incarcerated in Pilgrim state psychiatric institution for another 11 months and subjected to more electroshock; his health began to deteriorate rapidly. In 1959, he moved to France where he continued being given Thorazine, a powerful tranquilizer known as the “chemical lobotomy.”

By 1964 Powell was bloated, his eyes vacant and he walked with a shuffle that betrayed his drugged condition. He died on August 16th of that year from a combination of liver failure, TB and malnutrition. Five thousand people lined the streets of Harlem to honor him on his last journey.
A Message from Chick Corea

Chick Corea, legendary jazz composer and pianist, has been nominated for 31 Grammys and is an 11-time Grammy winner. Corea’s rendition of Bud Powell’s music was produced in an album entitled “Remembering Bud Powell.”

An artist usually spends the whole first part of his life just developing his art form. Practicing, applying, apprenticing, delving into uncharted areas, learning by whatever method or methods he can. There’s no pay for this dedicated work. This is his investment into future dreams.

Successful artists have a quality of persistence that ignores setbacks, downfalls and difficulties with basic survival, like food and shelter—they just keep going toward their original creative goal. They keep true to the kind of effect they want to create with their art—they just keep going, no matter what.

The artist must reach people with his art, no matter how hard the existing environment works against him. He must learn to keep his integrity whole, yet at the same time make sufficient money to keep the rent paid. Quite a trick.

It’s far from an easy path to follow, as any successful artist will tell you. In this, a very few stand out from the crowd and create a legacy of powerful and uniquely creative work which rightfully earns them the title of genius.

More often than not, however, a heavy price is being exacted for such artistic success—a price that has nothing to do with art, and everything to do with the deliberate manipulation and destruction of artists across all mediums. Bud Powell, an innovative genius in my field, is one who tragically paid this price.

I write briefly here, not of his formidable artistic gifts, which I have acknowledged elsewhere, but of the unnecessary and brutal psychiatric treatments, which increasingly threatened his most creative years, and finally extinguished the essence of his creativity.

“The true story about the pain, confusion and the crushed artistic dreams that psychiatry (and its cousins psychology and psychoanalysis) have brought to the artistic community is one that must be told and recognized.”

— Chick Corea, 14-time Grammy Award-winning jazz musician

The true story about the pain, the confusion, and the crushed artistic dreams that psychiatry (and its cousins psychology and psychoanalysis) have brought to the artistic community is one that must be told and recognized. Having no understanding of life or art, they cannot cure or truly help, and are extremely dangerous to your artistic health and growth. Seeking their brand of “help” to better deal with the inevitable pressures and stresses of being an artist, will only further confuse, weaken, and ultimately destroy your creativity.

I sincerely offer this advice to anyone who is in some way artistically active, and who is concerned for his or her own better success or survival.
IMPORTANT FACTS

1. Faced with the stress of fame and relationships that are always in the limelight, artists have been prescribed psychotropic drugs as a “quick fix” solution. For many it has been perilous and, tragically, led to death.

2. Producer Don Simpson, singer Chuck Negron (Three Dog Night), actor and comedian Eric Douglas, were all victims of failed psychiatric drug rehab programs that hooked them on psychiatric drugs and, ultimately, in the cases of Simpson and Douglas, led to their deaths. INXS lead singer, Michael Hutchence, was also a victim.

3. The U.S. Food and Drug Administration and other drug regulatory agencies have issued public warnings about psychiatry’s latest antidepressants causing suicidal and even homicidal effects. These are drugs that have been heavily promoted in films and television series, ensuring a deepening psychotropic drug culture.

4. The antipsychotic drugs [major tranquilizers] have also been exposed for causing poor concentration, emotional dullness, sexual dysfunction, leaking breasts, blood disorders and life-threatening diabetes.

The deaths of Kurt Cobain (Nirvana) and Michael Hutchence (INXS) can be traced to failed psychiatric drug rehab programs or suicide-inducing drugs. Stevie Nicks (Fleetwood Mac) said the tranquilizer, Klonopin, was worse than her cocaine habit and harder to withdraw from.
In his 1932 novel *Brave New World*, Aldous Huxley tells of a “utopian” but totalitarian society controlled by drugs: “And the dictator ... will do well to encourage ... the freedom to daydream under the influence of dope and movies and the radio, it will help to reconcile his subjects to the servitude which is their fate.”

Today, with the increasing prescription of mind-altering drugs, Huxley’s *Brave New World* is all too real.

As author Donald Spoto wrote in *A Passion for Life*, “Pills, shots, amphetamines, barbiturates—it was the arsenal of the good life, a sign of a busy and glamorous schedule, a regimen almost as popular as frequent visits to therapists and psychiatrists. ... But for many celebrities, Max Jacobson’s [“Dr. Feelgood”] ‘speed’ shot was the best of them all. This was an intravenous dose of amphetamines ... that provided an instant sense of enhanced mental capacity, diminished the need for sleep and brought an unnatural state of euphoria. Controversial but not yet illegal, it was prized by many until the horrors of addiction were evident.”

Spoto further wrote, “Jacobson’s roster of patients was long and impressive (among them were Tennessee Williams, Cecil B. De Mille, Zero Mostel, and Margaret Leighton), and the physical and psychological dependencies he created in them with his drugs brought the rich and famous constantly to his door.”

President John F. Kennedy, Elizabeth Taylor, Eddie Fisher, Andy Warhol, Johnny Mathis, Truman Capote, Otto Preminger and Anthony Quinn were also subjected to Jacobson’s chemical bomb. Debbie Reynolds, who was married to Fisher at the time, told the *San Francisco Chronicle* in 1989, “I didn’t realize what was wrong or what his going to Max Jacobson—the ‘speed’ doctor who was always ready to give celebrities their shots—would lead to. ‘Dr. Needles,’ I called him.”

Psychiatric drugs are highly addictive. Government warnings also reveal they have serious withdrawal effects and can drive people to acts of violence and suicide. Don Simpson, one of Hollywood’s most successful producers (“Top Gun,” “Flashdance,” “Beverly Hills Cop” and “The Rock”) was a tragic example of psychiatric irresponsibility. He was prescribed psychiatric drugs to withdraw him from his illicit drug use—one addictive chemical simply replaced another. On January 19, 1996, Simpson was found dead of a massive drug overdose at his home. Police found 80 bottles of prescription drugs in the house. An autopsy determined that a cocktail of cocaine and prescribed stimulants, antidepressants,
Psychiatry’s Celebrity Drug Pusher

For many years New York psychiatrist Max Jacobson ("Dr. Feelgood") injected amphetamines and other psychiatric drugs into the veins of dozens of the country’s most celebrated artists, writers and politicians, including Eddie Fisher, Anthony Quinn and Elizabeth Taylor. He specialized in prescribing and administering amphetamines not to treat “disorders” but to boost the mood of healthy patients. The most famous of the psychiatrist’s patients were President John F. Kennedy and the first lady, Jacqueline Kennedy. Jacobson would boast to anyone willing to listen that the Kennedys had given him a tie-pin in gratitude, stating, “I traveled with the Kennedys. I treated the Kennedys. Jack Kennedy. Jacqueline Kennedy. They never could have made it without me.”

Debbie Reynolds, who was married to Fisher at the time of his “treatment” by Jacobson, dubbed the psychiatrist, “Dr. Needles.” Ronald K. Siegel, a UCLA psychopharmacologist who has studied amphetamines, part of Jacobson’s drug cocktail, said that it initially creates “feelings of euphoria, energy and confidence. Continued use leads to depression, sleepiness and tolerance to the drug, sparking even greater use.”

Sedatives and tranquilizers had caused heart failure and death.

Former Three Dog Night singer Chuck Negron, who had undergone the same psychiatric drug substitution program as Simpson, and also failed to kick his habit, said: “They … sent me out on the road with different medications that were legal. … At one point, I ended up having a bigger habit on the prescription stuff than when I first checked in.” In 1993, the Medical Board of California charged the psychiatrist who ran the “detox” program, Robert P. Freemont, with gross negligence and unprofessional conduct for over-prescribing drugs and administering medications without proper follow-up exams. Freemont died before the Board finished its investigation.

On July 6, 2004, Eric Douglas, the son of Kirk Douglas and half-brother of Michael, died of “acute intoxication” from prescription tranquilizers and painkillers combined with alcohol. Ruled an “accidental overdose” by the coroner, the actor and stand-up comedian’s story is another tragic example of failed psychiatric rehab programs. A Los Angeles Times article on his death noted, “Court and medical board records indicate that Douglas’ final, fatal descent may have stemmed from treatment by a psychiatrist who has since had his license revoked by the Medical Board of California.” In 2001, Douglas filed a lawsuit against the psychiatrist, William O. Leader, who had treated him between 1997 and 1999. The suit stated that Leader’s near-lethal doses of psychiatric drugs so incapacitated Douglas, he was unable to care for himself and nearly died twice. According to the court documents, Leader also “prescribed drugs over the phone without seeing Douglas.” The lawsuit was settled out of court in May 2004.

While psychiatry misleadingly markets a false image of science and—without a shred of evidence—claims that “biochemical imbalances in the brain” cause mental disturbance and addiction, in reality, it seeks no more than the control and manipulation of people’s lives.

Consider these words of psychiatrist Nathan Kline and his cohorts in 1967 as they mapped society's psychotropic future for the year 2000: "Those of us who work in this field see a developing potential for nearly a total control of human emotional status, mental functioning, and will to act. These human phenomena can be started, stopped or eliminated by the use of various types of chemical substances. What we can produce with our science will now affect the entire society."
And affect society they have. Millions now take mind-altering psychiatric drugs. Psychiatrists prescribe them, ignoring their dangerous side effects and addictiveness, keeping the general public “woefully ignorant of the dangers” of them.59

Stevie Nicks, the incomparable lead singer of Fleetwood Mac, is testimony to this. In 2001, she released a new solo album—her first since 1993. She also went public about her eight-year absence from the music scene: she’d been addicted to a tranquilizer, Klonopin, prescribed to her by a psychiatrist. “I had just stopped doing cocaine,” she told Entertainment Weekly, “and it was like a month and a half after, and I was fine, totally fine. [But] to soothe everybody’s feathers around me, I went to a psychiatrist. It was a bad decision. ... It was so awful that I could go into a psychiatrist’s office and they could put me on this medication that nearly destroyed my career, nearly destroyed me, nearly destroyed my parents—because they just lost me for those years.”60 In another interview she said, “My creativity went away. I became what I call the ‘whatever’ person. I didn’t care about anything anymore.”61

But if the cocaine addiction was a nightmare, nothing prepared her for the withdrawal from a psychiatric drug. Klonopin is one of a class of tranquilizers called benzodiazepines. Medical studies show they can be addictive within 14 days of taking them. As such, according to medical advice, a person needs to withdraw from these slowly. Stevie Nicks spoke of the intense difficulty she had withdrawing herself off Klonopin: “I’m the one who realized that [the drug] was killing me ... I was in there [drug rehab] sick for 45 days, really, really sick. And I watched generations of drug addicts come in and go out. You know, the heroin people, 12 days ... and they’re gone. And I’m still just there.”62

Psychiatric drugs do not help a person achieve more creative abilities or more knowledge about life or the mind; they do not enable a person to solve his or her problems. They may cause a person to believe that his problems have been fixed, that he is better off, but all that has happened is that he has been made less aware, less in control. The original problem or distress is still there, unresolved.

These drugs have now been accepted so extensively, and psychiatry has so aggressively marketed itself as a branch of medicine, that they are now seen as prescription medicines, not the life-threatening agents they really are.
In 1998, Brynn Hartman murdered her husband, comic Phil Hartman—known for his work on such popular TV shows as “Saturday Night Live,” “The Simpsons” and “Third Rock from the Sun”—before killing herself. She had been taking a Selective Serotonin Reuptake Inhibitor (SSRI) antidepressant, which the coroner found in her system along with alcohol and cocaine. A subsequent lawsuit filed by the executor of the Hartman estate claimed that Los Angeles psychiatrist Arthur Sorosky had given Mrs. Hartman samples of the antidepressant in March of that year and that in the weeks before the shooting, she told friends of side effects that made her feel “...like she was going to jump out of her skin.” It further stated that she contacted the psychiatrist for help four days before the incident—he merely suggested she cut the dosage in half. A lawsuit filed by family members was settled out of court.63

Whenever and wherever tragedy and violence of this nature occur, psychiatrists notoriously shift blame for the act to the person’s “mental illness.”

Dr. Joseph Glenmullen of Harvard Medical School and author of Prozac Backlash says that people who take SSRIs can “become very distraught. ... They feel like jumping out of their skin. The irritability and impulsivity can make people suicidal or homicidal.”64

The FDA and The European Medicines Agency’s Committee for Medicinal Products for Human Use have warned that SSRIs’ cause anxiety, agitation, panic attacks, insomnia, irritability, hostility, impulsivity, akathisia (severe restlessness causing violence), hypomania (a condition like mania but not as bad), and mania, both in adult and pediatric patients being treated with [SSRI] antidepressants...” 65

The FDA’s strongest alert, a “black box” also warns the public that the drugs cause suicide in children and adolescents. Subsequent warnings have been issued citing specific SSRIs that cause homicidal tendencies.

Dr. David Healy, director of the North Wales Department of Psychological Medicine, who has undertaken extensive research of SSRIs, concludes: “What is very, very clear is that people do become hostile on the drugs.”66 The antidepressant, Paxil, carries a warning that it can cause homicidal thoughts.

As the Washington Times’ Insight magazine headlined in their article on the Columbine High School shooting in 1999, “Though shocked by bizarre shootings in schools, few Americans have noticed how many shooters were among the 6 million kids now on psychotropic drugs.” 67

The ringleader, Eric Harris, had been taking the antidepressant Luvox with side effects that include mania, irritability, aggression and hostility.68 Mania can produce in individuals “bizarre, grandiose, highly elaborate destructive plans, including mass murder,” according to psychiatrists’ own reports.69

In 1997, Michael Hutchence, lead singer of the Australian rock band, INXS, killed himself after combining alcohol and a suicide- and violence-inducing antidepressant. The coroner determined that Hutchence “hanged himself with his own belt and the buckle broke away and his body was found kneeling on the floor and facing the door.”

INXS guitarist Tim Farris told media, “I can’t be angry at Michael ... I think the world [people] should be very careful about taking antidepressants ... people should realize that they’re putting things like that into their bodies.”70

In 1997, singer and songwriter Elliott Smith was an Oscar nominee for best original song, “Miss Misery,” which was featured in the movie “Good Will Hunting.” He produced two more CDs and was working on another when he was found dead.
on October 21, 2003, apparently from a self-inflicted stab wound to the chest. A Los Angeles psychiatrist had been treating Smith for alcohol and drug use. The coroner found “prescribed levels of antide-
pressant and attention-deficit-hyperactivity-disorder medications in his system, including clonazepam, mirtazapine, atomoxetine and amphetamine.”

Actor Spaulding Gray became famous in 1987 for his movie monologue, “Swimming to Cambodia.” He also played the lead role on Broadway in Gore Vidal’s “The Best Man.” For much of his life, he battled the false diagnosis of “hereditary depression” despite no scientific evidence that depression is a genetic or an inherited condition.

In 2001, nearly crippled by a car crash, Gray spent 31 months recuperating. However, despite the fact that—as friends said—he was suffering a skull fracture and physical trauma, psychiatrists diagnosed depression and prescribed a cocktail of psychotropic drugs. In the wake of treatment failures, the inevitable admissions to psychiatric facilities followed, as did attempts at suicide. His wife, Kathie Russo, spoke of the therapists: “They all would basically spend 10 minutes and send him on his way.” As new psychia-
tric drugs and therapies failed, the downward spiral continued. “You name it, he’s been on it. Antidepressants, anti-
psychotics. He was on Depakote the first time he tried [jumping off a] bridge. He was on such a high dosage, he was really out of it,” she said.

“Tardive dysthesia” (nerve-seizing) frequently cause difficulty in thinking, poor concentration, nightmares, emotional dullness, depression, despair and sexual dysfunction. Physically, they can cause tardive dyskinesia—sudden, uncontrollable, painful muscle cramps and spasms, writhing, squirming, twisting and grimacing movements, especially of the legs, face, mouth and tongue, drawing the face into a hideous scowl. They also induce akathisia, a severe restlessness that has been linked to assaultive, violent behavior. A potentially fatal effect is “neuroleptic malignant syndrome,” which includes muscle rigidity, altered mental states, irregular pulse or blood pressure and cardiac problems. As if that were not enough, silent coronary death “may be one of the most serious threats of prolonged drug use,” wrote William H. Philpott, M.D., and Dwight K. Kalita, Ph.D., in Brain Allergies.

Newer antipsychotics: One in every 145 patients who entered the clinical trials for four atypical (new) antipsychotic drugs died; yet those deaths were never mentioned in the scientific literature. Thirty-six patients involved in the clinical trials committed suicide. Other severe side effects include blindness, fatal blood clots, heart arrhythmia (irregularity), heat stroke, swollen and leaking breasts, impotence and sexual dysfunction, blood disorders, painful skin rashes, seizures, birth defects, extreme inner-anxiety and restlessness, diabetes and death from liver failure.

Due to their dangerous side effects, no one should stop taking any psychiatric drug without the advice and assistance of a competent, non-psychiatric, medical doctor.
LSD destroying creativity

A

fter LSD’s discovery in 1943, psychiatrist Werner Stoll was one of the first to investigate and map how the drug could be used for psychological control. Enthusiastically received by other psychiatrists in the 50s, LSD became the perfect vehicle for psychiatry to promote the concept of improving life through “recreational,” psychotropic drugs. [In fact, all psychiatric drugs have, at some time, ended up as street drugs.]

Psychiatrist Oscar Janiger lured hundreds of writers, musicians, actors and filmmakers into taking LSD, with claims of “vivid aesthetic perceptions” and “greater appreciation of the arts.” By the turbulent 1960s, LSD had become the symbol for “New Age” thinking and living. However, LSD induced the very “madness” psychiatrists claimed to be able to cure.

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LSD induced the very “madness” psychiatrists claimed to be able to cure. Brian Wilson of The Beach Boys, Jimmy Hendrix and many others found their lives and careers devastated under the weight of these delusions and the accompanying depersonalization.

Brian Wilson—The Beach Boys

In the 1960s Brian Wilson and The Beach Boys’ unique California sound captured the spirit and imagination of America and the world with hits like “California Girls,” “Good Vibrations” and “Surfin’ USA.” However, in 1965, at the age of 23, Brian took undiluted LSD for the first time. The drug would change his life for the worse. As he wrote, “My home life was most tumultuous. Marilyn [my wife] complained that the LSD had changed me…. I didn’t see it then, but she was right. The change was gradual. Like a slow allergic reaction. I slept later. I was subject to wider, more unpredictable mood swings, crying one minute, laughing hysterically the next for no reason. I ate tremendous amounts of sweets. I refused to be sociable.” Wilson withdrew from touring with The Beach Boys and limited his involvement to writing songs. Eugene Landy, a clinical psychologist and reputed “pioneer” in drug treatment, was contracted in 1976 to treat Wilson. His controversial method required that he have “total therapeutic authority over the patient and the patient’s environment.”

He prescribed Wilson psychotropic drugs, including tranquilizers.

The control was too much for other members of The Beach Boys, who fired Landy. But Wilson’s drug addiction continued to ruin his life. Landy was engaged again after Brian overdosed on a combination
of alcohol, cocaine and psychoactive pills. In January 1983, Landy insisted on complete control of all aspects of Brian's life—at a cost of nearly half a million dollars. Two years later, when Landy requested even more money, a desperate Carl Wilson gave away 25% of Brian's publishing royalties to cover the costs of continuing the program. Eventually Brian realized himself that he was "... a goddamned prisoner ... I have no hope of escape." Long-time friend, Gary Usher, reported Landy to the U.S. Attorney General. In February 1988, the California Board of Medical Quality charged Landy with ethical and license code violations. Landy voluntarily gave up his license to practice for two years. When he requested reinstatement in 1992, the Board opposed it.\(^\text{80}\)

Unlike most stories of psychiatric and psychological abuse, with the loving support of family and friends, the artistic genius and spirit that is Brian Wilson beat the odds and returned to writing and recording.

**Del Shannon: 1934–1990**

"His voice is like a siren," Mike Campbell (lead guitarist for Tom Petty) said. "There is only one voice that does that sound, and that is Del Shannon's."

That voice has now been silenced. Del Shannon—real name Charles Westover—was an American rock legend in the 1960s with hit songs that included "Runaway," "Keep Searching (We'll Follow the Sun)," "Little Town Flirt" and "Do You Want to Dance?" Shannon taught himself to play guitar at age 13 by listening to country-western singers on radio. At 27, he wrote the innovative song "Runaway," recorded it on January 21, 1961 and by April 1 it was a number-one U.S. hit. It also reached number one in 21 countries, and more than 200 artists, including Elvis Presley and Bonnie Raitt, recorded cover versions.\(^\text{81}\)

After his initial success, musical tastes changed and Shannon's career declined in America, although he still enjoyed success as an artist and performer in England. By 1990, he was well on his way to making a comeback. Unlike many other performers, Shannon organized all of the scheduling of his shows himself, a stressful task considering he was planning a European tour. To handle this stress, he was referred to a psychiatrist who prescribed an antidepressant, which is known to cause suicidal tendencies.

On February 8, 1990, Charles Westover shot himself in the head with a .22 caliber rifle. With him died the hopes, dreams and artistry of Del Shannon.

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My husband was "a well-informed and physically healthy man and father, [who] died violently after taking Prozac for only 15 days."\(^\text{82}\)

— Leanne Westover, wife of Del Shannon
People across the world were stunned by the news of Kurt Cobain’s sudden and shocking suicide in 1994. Widely hailed as the “John Lennon of his generation,” Cobain’s name was also synonymous with disillusionment and unhappiness—he had spoken, written lyrics and sung about suicide. He was the “poet of pain.” Yet one question echoed around the world—why?

Cobain was already a long-standing victim of psychiatric-styled “help,” where solutions are as desperate as the situations they continually fail to resolve. The truth is that from his preschool years, those who had diagnosed him as “hyperactive” had placed Cobain in a chemical straitjacket. An energetic, talented and creative child who liked to draw and sing Beatles tunes, Cobain was one of the growing wave of children who, since the 1960s and 1970s, have been exposed to addictive, mind-altering drugs under the guise of “educational help.” Cobain was a Ritalin child.

But what does that mean? What is hyperactivity? And exactly what is Ritalin?

Leading pediatric neurologist, Dr. Fred Baughman Jr., says hyperactivity is “an illusion, a contrivance [and] a deception.” Without a shred of scientific evidence, psychiatrists claim the symptoms of this “disorder” include: often fidgets with hands or feet or squirms in seat; often leaves seat in a classroom; has difficulty playing or engaging in leisure activities quietly; is often “on the go” and often talks excessively.

Ritalin is an amphetamine-like drug that in children reportedly acts as a tranquilizer. It is a Schedule II drug in the same abuse category as opium, cocaine and morphine. Highly addictive, withdrawal from it can cause suicide. Side effects include: loss of appetite, weight loss, inability to stay asleep, heart palpitations, drowsiness, joint pain, nausea, chest pain, hallucinations and can increase bizarre

By the time he was famous, Kurt Cobain was already a longstanding victim of psychiatric-styled “help.” He’d been prescribed Ritalin for “hyperactivity” as a youth, …

The drug is more potent than cocaine and, according to medical studies can predispose the user to later cocaine abuse.
and abnormal behavior. It is also more potent than cocaine and medical studies show that it can predispose a child to later cocaine use.

In Cobain’s case, the drug kept him awake. Consequently, sedatives were prescribed to counteract this effect. Despite psychiatrists’ claims that stimulants can help a child study, Cobain remained a poor student who dropped out of high school.

After years of taking addictive prescription drugs, the progression to street drugs easily followed. Cobain’s battle with heroin addiction would become widely known over the years, as he repeatedly tried and failed to resolve his dependency.

Compounding this were untreated chronic medical conditions that affected him his entire life—including a curvature of his spine that was aggravated by the weight of his guitar around his neck and a “burning, nauseous” stomach that often drove him to feelings of suicide. Abdominal pain is a side effect of Ritalin. Cobain used heroin because it “quenched the fire in his gut.”

Cobain’s drug problem became critical. In desperation, wife Courtney Love and several friends enrolled Cobain in a psychiatric drug recovery center. Thirty-six hours after admission, he fled from the program and in a small room above his garage in a quiet Seattle neighborhood, ended his life with a single shotgun blast to his head. Heroin and the addictive psychiatric tranquilizer Valium were found in his bloodstream.

In his suicide note, he alluded to two things that led to his fatal decision—the stomach pain that had haunted him for years, and his agony over his music, about which he wrote, “I don’t have the passion anymore.” Chemically nullified, the music was gone and with this, Kurt Cobain was deprived of his prime reason for existing.
1. The artist is superior to psychiatrists’ materialistic and authoritarian “sciences” that can blunt the creative mind by redefining it as “madness.”

2. Usually the person giving out the broad, sweeping generalities about another is the one who fears they would perish if others become strong, bright or successful.

3. Psychiatrists chose to ignore what medical experts have been saying for years; for example, according to one Canadian study, “No single psychiatric symptom exists that cannot at times be caused or aggravated by various physical illnesses.”

4. People in desperate circumstances must be provided proper and effective care. Sound medical attention, good nutrition, and a healthy, safe environment will do wonders for a troubled person.

The entire activity of psychiatry with its drugs and shocks invalidates individuals. The true artist, like the incomparable Judy Garland, inspires the beauty in all of us. Psychiatry and psychology deny it.
The world needs its artists. Judy Garland and Marilyn Monroe’s deaths were avoidable. Michael Hutchence, Kurt Cobain and Del Shannon’s suicides could have been prevented. Yet similar tragedies continue today because of ignorance about the methods, means and motivations of psychiatry and psychology.

So much in the public eye, an artist will attract negative interest as well. Certain people will likely enter the artist’s life and in different ways, manage to feed off his energy and creativity as an artist—in a parasitic relationship. This includes the “friend” or critic who covertly sees the artist or his work as something to belittle; the “friend” who advises: “You work too hard, why don’t you slow down?”; the director who comments after you’ve given your best shot at a scene, “Now, can we do it again and this time, try acting!”

Finding themselves in such a situation, artists should be wary of the “help” that may be offered. In comparing the lives of many artists who died tragically, there are similarities—their fears of failure, their naiveté in the face of manipulated careers, the stress of competition, physical difficulties, and more. The common thread through many of these stories is that the help these artists accepted betrayed them. That false “help” was psychiatry and psychology.

Though it cloaks itself in pseudoscientific jargon, psychiatry is not a science but a hoax. Whatever their claims, psychiatrists create unhappiness in many ways.

To those who ask, “What is the alternative?”, there is an answer: People in desperate circumstances must be provided proper non-psychiatric care. Sound medical attention, good nutrition, a healthy, safe environment and activity that promotes confidence, will do far more for a troubled person than repeated drugging, shocks and other psychiatric abuses.

Researchers report: “The most common medically induced psychiatric symptoms are apathy, anxiety, visual hallucinations, mood and personality changes, dementia, depression, delusional thinking, sleep disorders (frequent or early morning awaking), poor concentration, changed speech patterns, tachycardia [rapid heartbeat], nocturia [excessive urination at night], tremulousness and confusion.”

Further, “No single psychiatric symptom exists that cannot at times be caused or aggravated by various physical illnesses.”

Rest and food in a safe environment can help greatly.

These noninvasive means provide the mentally distressed person with a truly humane chance to make it through their difficulties.

The artist can be a powerful and greatly beneficial influence on society. Society in turn needs to take care of its artists. And artists need to take better care of themselves.
1. If you or someone you know has been abused or harmed by psychiatric treatment, report this to your nearest branch of CCHR or send us an e-mail (see our website); we will assist you in whatever way we can.

2. A significant portion of people’s misplaced reliance is on the “expertise” of psychiatry and psychology for the diagnosis and handling of emotionally distraught individuals. Foremost, persons in desperate circumstances must be provided proper and effective medical care, not psychiatric drugs and shock “therapy.” Sound medical attention, good nutrition, a healthy, safe environment, activity that promotes confidence and effective education will do wonders for a troubled person.

3. If you are ever taken to a psychiatric facility, including a psychiatric drug detox/rehab center against your will, immediately call an attorney. Do NOT consent to treatment. Do not sign anything without an attorney present.

4. Support government policy that outlaws physically damaging psychiatric practices.

5. If psychiatrists are portrayed in film, television and other art mediums, their image should sharply reflect the complete lack of science underlying their theories and “diagnoses” and the harm inherent in their treatments and practices. Visit “Psychiatry: An Industry of Death Museum” at CCHR’s international headquarters in Hollywood for facts, research and story ideas.
Citizens Commission on Human Rights International

The Citizens Commission on Human Rights (CCHR) was established in 1969 by the Church of Scientology to investigate and expose psychiatric violations of human rights, and to clean up the field of mental healing. Today, it has more than 250 chapters in over 34 countries. Its board of advisors, called Commissioners, includes doctors, lawyers, educators, artists, business professionals, and civil and human rights representatives.

While it doesn’t provide medical or legal advice, it works closely with and supports medical doctors and medical practice. A key CCHR focus is psychiatry’s fraudulent use of subjective “diagnoses” that lack any scientific or medical merit, but which are used to reap financial benefits in the billions, mostly from the taxpayers or insurance carriers. Based on these false diagnoses, psychiatrists justify and prescribe life-damaging treatments, including mind-altering drugs, which mask a person’s underlying difficulties and prevent his or her recovery.

CCHR’s work aligns with the UN Universal Declaration of Human Rights, in particular the following precepts, which psychiatrists violate on a daily basis:

Article 3: Everyone has the right to life, liberty and security of person.

Article 5: No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

Article 7: All are equal before the law and are entitled without any discrimination to equal protection of the law.

Through psychiatrists’ false diagnoses, stigmatizing labels, easy-seizure commitment laws, brutal, depersonalizing “treatments,” thousands of individuals are harmed and denied their inherent human rights.

CCHR has inspired and caused many hundreds of reforms by testifying before legislative hearings and conducting public hearings into psychiatric abuse, as well as working with media, law enforcement and public officials the world over.
THE CITIZENS COMMISSION ON HUMAN RIGHTS

investigates and exposes psychiatric violations of human rights. It works shoulder-to-shoulder with like-minded groups and individuals who share a common purpose to clean up the field of mental health. We shall continue to do so until psychiatry’s abusive and coercive practices cease and human rights and dignity are returned to all.

Julian Whitaker, M.D.,
Director, Whitaker Wellness Institute,
California, author of Health & Healing:
“CCHR is the only nonprofit organization that is focused on the abuses of psychiatrists and the psychiatric profession. The reason it is so important, is that people do not realize how unscientific the psychiatric profession is. Nor does anyone realize how dangerous this labeling and drugging of people has become. So the efforts of CCHR and the successes they have made is a cultural benefit of great magnitude.”

Dr. Lois Achimovich,
Consultant Psychiatrist, Australia:
“It is hard for those who have been unaffected by the psychiatric system to understand the desperation many people feel when incarcerated and treated against their will, with little or no recourse to independent appeal or judicial intervention.

“Through education, advocacy and community action, CCHR has made a genuine contribution to the movement towards voluntary and humane engagement with the psychiatrically disturbed.”

David Heatherington
Editor in Chief,
London Independent Locals,
United Kingdom:
“... the ongoing campaign by CCHR is ... quite simply ... a great story! How many other regional newspapers carry front-page stories about the errors of psychiatrists or run major features on the subject of psychiatric abuse, fraud and criminality? Independent Local Newspapers is delighted to be involved in this noble and important campaign and will, I am sure, run many more stories in future inspired by the efforts of CCHR. Keep up the good work.”

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Education is a vital part of any initiative to reverse social decline. CCHR takes this responsibility very seriously. Through the broad dissemination of CCHR’s Internet site, books, newsletters and other publications, more and more patients, families, professionals, lawmakers and countless others are becoming educated on the truth about psychiatry, and that something effective can and should be done about it.

CCHR’s publications—available in 15 languages—show the harmful impact of psychiatry on racism, education, women, justice, drug rehabilitation, morals, the elderly, religion, and many other areas. A list of these includes:

- **THE REAL CRISIS—In Mental Health Today**
  Report and recommendations on the lack of science and results within the mental health industry

- **MASSIVE FRAUD—Psychiatry’s Corrupt Industry**
  Report and recommendations on a criminal mental health monopoly

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- **REHAB FRAUD—Psychiatry’s Drug Scam**
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**WARNING:** No one should stop taking any psychiatric drug without the advice and assistance of a competent, non-psychiatric, medical doctor.
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