CITIZENS COMMISSION ON HUMAN RIGHTS

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. Its co-founder is Dr. Thomas Szasz, professor of psychiatry emeritus and an internationally renowned author. Today, CCHR has more than 130 chapters in over 30 countries. Its board of advisors, called Commissioners, includes doctors, lawyers, educators, artists, business professionals, and civil and human rights representatives.

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.

FOR FURTHER INFORMATION:

CCHR International 6616 Sunset Blvd.

Los Angeles, CA, USA 90028 Telephone: (323) 467-4242

(800) 869-2247 • Fax: (323) 467-3720

www.cchr.org e-mail: humanrights@cchr.org





A Public Service Report from Citizens Commission on Human Rights



In the 1940s, psychiatry's leaders proclaimed their intention to infiltrate the field of the law and bring about the "re-interpretation and eventually eradication of the concept of right and wrong."



RECOMMENDATIONS

First and foremost it must be recognized that every person is responsible for his or her own actions and must be held accountable for them.

State and federal legislators should repeal any laws permitting the insanity defense and diminished capacity pleas.

Let the judges and jurors decide questions of criminal intent as they did before psychiatrists introduced illogical ideas about what is "right or wrong."

Caution: No one should stop taking any psychiatric drug without the advice and assistance of a competent non-psychiatric medical doctor.



This publication was made possible by a grant from the United States International Association of Scientologists Members' Trust.

- 1 Thomas Szasz, Insanity: The Idea and Its Consequences (John Wiley & Sons, New York, 1990), p. 239.
- 2 G. Brock Chisholm, "The Reestablishment of Peacetime Society: The Responsibility of Psychiatry," William Alanson White Memorial Lectures, 23 Oct. 1945, Psychiatry: Journal of Biology and Pathology of Interpersonal Relations, Vol. 9, No. 1, Feb. 1946.
- 3 John Rawlings Rees, M.D., "Strategic Planning for Mental Health," *Mental Health*, Vol. 1, No. 4, Oct. 1940, p. 103-4
- 4 Edited by Jeffrey Schaler, Szasz Under Fire (Open Court, Chicago, 2004), p. 201
- 5 Margaret Hagen, Whores of the Court, The Fraud of Psychiatric Testimony and the Rape of American Justice (HarperCollins, New York, 1997), p. 110.
- 6 Ralph Adam Fine, Escape of the Guilty (Dodd, Mead & Company, New York, 1986), pp. 224-226.

- 8 Dr. Tana Dineen, Ph.D., Manufacturing Victims, Third Edition (Robert Davies Multimedia Publishing, Quebec, Canada, 2001), p. 86.
- 9 David Faust and Jay Ziskin, "The Expert Witness in Psychology and Psychiatry," *Science*, Vol. 241, 1 July 1988, p. 32.
- 10 Transcript of Sentencing by the Honourable Associate Chief Justice Oliphant, Winnipeg, Manitoba, Her Majesty the Queen and Robert Bliss Arthurson Accused, 7 Oct. 1994.
- 11 "Diet Mulls Fate of Mentally III Criminals," The Japan Times, 8 June 2002.
- 12 Kenneth S. Pope, "Sex Between Therapists and Clients," Encyclopedia of Women and Gender: Sex Similarities and Differences and the Impact of Society on Gender (Academic Press, Oct. 2001).

PHOTO CREDITS: Cover: Don Mason/Corbis; 9A: Bettmann/Corbis; 9B: Bettmann/Corbis.

© 2004 CCHR. All Rights Reserved. CITIZENS COMMISSION ON HUMAN RIGHTS, CCHR and the CCHR logo are trademarks and service marks owned by Citizens Commission on Human Rights. Printed in the U.S.A. lims #FIO 19137

sexually abusing their patients. Some studies estimate that the figure is as high as 25%.

According to a 2001 study, one out of every 20 clients who had been sexually abused by their therapist was a minor, the average age being seven for girls and 12 for boys. ¹² The youngest sexually molested child was three. These are hardly "experts" our courts should be deferring to.

Psychiatry has had the opportunity to prove itself but has instead proven to be a colossal failure. The cost to society has been catastrophic, not only in terms of money. The first step is to remove psychiatric influence from the courts, police departments, and prisons.

Of the 650,000 psychiatrists and psychologists worldwide today, at least 10% of them admit to sexually abusing their patients; 65,000 "professionals" whose "therapy" admittedly includes sexual abuse.

Thomas Szasz warns: "We have to restore the idea of responsibility, which is corrupted and confused by psychiatry, by the idea that something happened to you when you were a child and therefore you are not responsible 30 years later."

Contrary to psychiatric ideology, man is not just another helpless creature, without will or conscience, to be manipulated according to someone else's design. Underneath whatever confusions he may have, he knows he has the courage to confront and solve his problems, and he knows he has the ability to discern between what is right and what is wrong. He inherently knows it is the ultimate betrayal to try and persuade him otherwise.

In summary, Dr. Margaret Hagen, Ph.D., says: "Judges and juries, the people alone, must decide questions of insanity, competence, rehabilitation, custody, injury and disability without the fraudulent interference of so-called psychological and psychiatric experts.

"A democratic society imposes exactly these burdens on the average man and woman and on our judges and legislators. It is time that we give up our attempts to hand off the weight onto the shoulders of professional decision makers. It is past time that we throw out the whores and take back the courts and the justice system."

INTRODUCTION DESTRUCTION OF JUSTICE

here is a hidden influence in our courts, one which, while loudly asserting its expertise and desire to help, has instead betrayed our most deeply-held values and brought us a burgeoning prison population at soaring public costs. That influence is psychiatry and psychology.

In the 1940s, psychiatry's leaders proclaimed their intention to infiltrate the field of the law and bring about the "re-interpretation and eventually eradication of the concept of right and wrong."

The eminent Thomas Szasz, professor of psychi-

atry emeritus at the State University of New York, Syracuse comments that today "the phenomenon of psychiatrists examining persons to determine whether or not they are responsible is [a] common feature of our social landscape." At the same time, he recognizes that psychiatry is "the single most destructive force that has affected society within the last 60 years."

Shocking? No doubt. But also well reasoned and insightful. Dr. Szasz is an internationally acclaimed author of over 30 books. He has both the experience and the stature to declare that the psychiatric profession has been gradually but steadily undermining the foundations of our culture—individual responsibility, standards of achievement, education and justice. The bottom line, he says, is that "...psychiatrists have been largely responsible for creating the problems they have ostensibly tried to solve."

In the 1940s, psychiatry's leaders proclaimed their intention to infiltrate the field of the law and bring about the "re-interpretation and eventually eradication of the concept of right and wrong."

The rule of law and a functioning and fair system of legal administration sets apart enlightened

democracies from totalitarian states. Citizens have the right to rely on the system for their peace and safety.

Psychiatrist Karl Menninger jubilantly declared that a 1954 decision by the Federal Court of Appeals in Washington, D.C.—that a mentally defective person was not criminally responsible for unlawful acts—was "more revolutionary in its total effect" than the Supreme Court decision on ending the segregation of African-Americans from Whites. This decleration now has a prophetic quality.

That decision triggered an immediate increase of psychiatric courtroom testimony in the U.S., a development that spread rapidly around the globe.

Menninger had reason to rejoice. The ruling followed less than a decade after the leading psychiatrists of the day—Menninger being one of them—had set out to infiltrate the legal profession as part of their strategic plan for a global psychiatry. G. Brock Chisholm, co-founder of the World Federation for Mental Health (WFMH), bluntly told his peers at the time: "If the race is to be freed from the crippling burden of good and evil it must be psychiatrists who take the original responsibility."

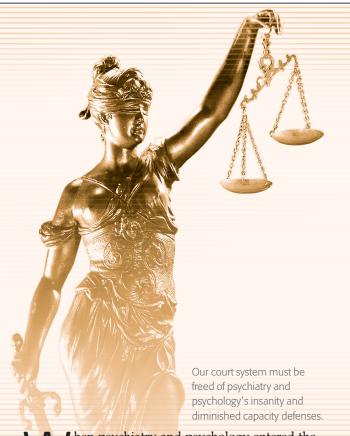
John Rawling Rees, a WFMH co-founder, stated, "Public life, politics and industry should all of them be within [psychiatry's] sphere of influence." He considered that the fields of law and medicine were the "two most difficult" to "attack."³

But attack they did, with the consequence that today, because of their influence, the system is failing. Now it is up to the many conscientious, hardworking and increasingly disheartened people within the system to realize this and rid it of these destructive intruders.

We trust that the information will help those of goodwill and integrity correct a system that is failing its citizenry. The decent, the productive, the vast majority of us, deserve no less.

Jan Eastgate President, Citizens Commission on Human Rights International

CHAPTER THREE THE RETURN OF JUSTICE



hen psychiatry and psychology entered the justice and penal systems, it did so under the subterfuge that it understood man, that it knew not only what made man act as he did, but that it knew how to improve his lot. This was a lie.

These professions, themselves, have a disproportionately high proclivity towards crime. In many cases, those who have acted as apologists for fellow psychiatrists' crimes, were later exposed and arrested for similar criminality.

Of the 650,000 psychiatrists and psychologists worldwide today, at least 10%, or 65,000, admit to

this, and viewing what has transpired since, is that psychiatry can certainly *not* be described as a *science.*" [Emphasis added]

In the courtroom, case after case proves the inability of psychiatrists to predict the acts of criminals. In a 1976 article in the *Rutgers Law Review*, authors Henry Steadman and Joseph Cocozza concluded, "There is no empirical evidence to support the position that psychiatrists have any special expertise in accurately predicting dangerousness."

With 20 more years of research to draw from, Terrence Campbell wrote in a 1994 article in the *Michigan Bar Journal*, "The accuracy with which clinical judgment predicts future events is often little better than random chance. The accumulated research literature indicates that errors

"Psychiatric expertise in the prediction of 'dangerousness' is not established and clinicians should avoid 'conclusory judgments in this regard."

> American Psychiatric Association

in predicting dangerousness range from 54% to 94%, averaging about 85%."

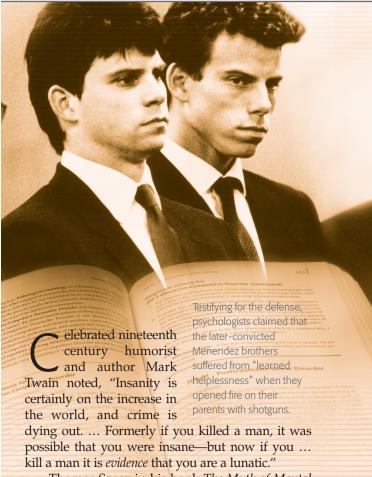
An APA task force admitted as much in its 1979 Amicus Curiae Brief to the U.S. Supreme Court, in which it stated, "It has been noted that 'dangerousness' is neither a

psychiatric nor a medical diagnosis, but involves issues of legal judgment and definition, as well as issues of social policy. Psychiatric expertise in the prediction of 'dangerousness' is not established and clinicians should avoid 'conclusory judgments in this regard.'"

In 2002, Kimio Moriyama, vice president of the Japanese Psychiatric Association further admitted, "...[I]t is impossible for [psychiatric] science to tell whether someone has a high potential to repeat an offense."¹¹

Despite such admissions, the concept of "dangerousness" is still used in courts and during involuntary commitment procedures of so-called "mental patients."

CHAPTER ONE BREAKDOWN OF LAW AND ORDER



Thomas Szasz in his book *The Myth of Mental Illness*, points out: "The introduction of psychiatric considerations into the administration of the criminal law—for example, the insanity plea and verdict, diagnoses of mental incompetence to stand trial, and so forth—corrupt the law and victimize the subject on whose behalf they are ostensibly employed."

Although the insanity defense is introduced in less than 2% of all criminal trials, it is one of the most



"Why not just flip pennies or draw cards? Why not put on a blindfold and choose without being able to identify the patients? It could hardly hurt [a diagnostic] accuracy rate that hovers at less than one out of three times correct."

— Dr. Margaret Hagen, Ph.D., author of *Whores of the Court*

controversial and hotly debated issues in criminal law. Professor Francis Allen said of it, "The issue of criminal responsibility has attracted more attention and stimulated more controversy than any other question in the substantive criminal law."

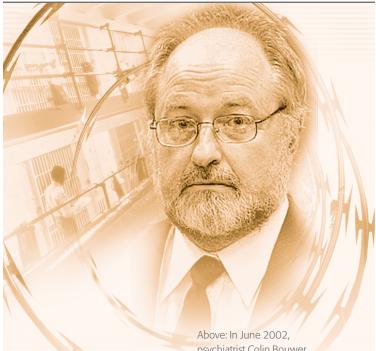
Dr. Margaret Hagen, Ph.D., a Boston University lecturer in psychology and law, says that there only *appears* to be a low percentage of insanity defense use: "The statistics are true when we look only at straight cases of Not Guilty by Reason of Insanity." But what changes the picture significantly are defenses such as "diminished mental ability," which induce prosecutors to bring a lesser charge as well as cases in which the alleged mental condition reduces the amount of time served.⁵

Furthermore, the insanity defense is not based on science. According to trial judge Ralph Adam Fine in *Escape of the Guilty*, "Although psychiatry clothes itself in the trappings of science and seeks to influence the standards by which we decide criminal responsibility, strict reliability in its diagnoses is rare."

Chief Justice Warren Burger was incensed about the lack of a scientific basis for psychiatrists' testimony, whose opinions were in conflict with each other: "No rule of law can possibly be sound or workable which is dependent upon the terms of another discipline whose members are in profound disagreement about what those terms mean."

Consider the 1994 case when two California juries became hopelessly deadlocked in the trials of

CHAPTER TWO PREDICTING DANGEROUSNESS?

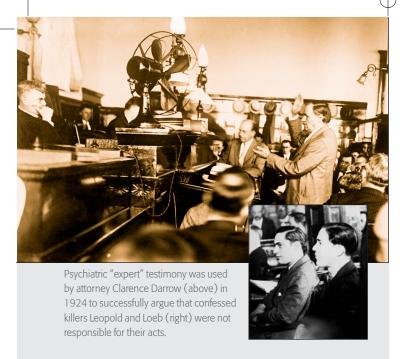


A t the 1994 sentencing of a convicted child killer to life in prison, Winnipeg Associate Chief Justice Oliphant quoted a report

psychiatrist Colin Bouwer, the former head of psychological medicine at the University of Otago, New Zealand, was sentenced to life imprisonment for murdering his wife.

written long before the crime by the Director of Forensic Psychiatry for the Province of Manitoba. In 1989, predicting the dangerousness of the defendant, the director had written: "There is nothing to indicate that he is an antisocial individual and he is not prone to expressions of aggression or violence...I do not feel that he represents a physical threat to...the community in general...he is not, in my opinion, a dangerous person."

After reading this aloud in his court, Justice Oliphant adjudicated, "My comment, having read



Never questioning the lack of science to this, the Court of Appeals for the District of Columbia adopted the defense of "irresistible impulse"—an impulse that could "override the reason and judgment and obliterate the sense of right and wrong."

■ 1954: On July 13, 1951, Monte Durham, a 23-year-old man with a long criminal and psychiatric history, was convicted of housebreaking, despite his insistence that he was not guilty by reason of insanity. That Presiding Judge David Bazelon of the U.S. Court of Appeals in Washington, D.C., overruled this decision in 1954, turned the standard of right or wrong on its head and opened the door wide for psychiatric testimony in the courts, was not a coincidence. He was undergoing psychoanalysis himself.

■ 1957: Abe Fortas (later an Associate Justice on the U.S. Supreme Court), assessed the impact of the Durham decision stating: "... [T]he law has recognized modern psychiatry. ... Its importance is that it is a charter, a bill of rights, for psychiatry and an offer of limited partnership between criminal law and psychiatry."

■ 1966: Another judgment by Bazelon established "the right of a mental patient to appropriate treatment." Psychiatrists interpreted this as their right to *enforce* treatment.

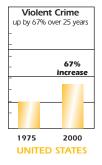
Erik and Lyle Menendez, adult brothers who had brutally murdered their parents in the family's \$4 million (€3.3 million) home. A team of psychiatrists, psychologists and therapists were hired to build their defense. Psychologist Ann Tyler testified that the brothers suffered from "learned helplessness" as a result of intense, repeated abuse. Another psychologist, John Wilson, claimed the boys had "post-traumatic stress disorder."

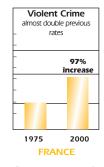
What managed to paralyze the two sets of twelve men and women was the fact that no two psychiatrists could agree on the brothers' mental diagnosis and the psychiatric notion that criminality is excusable. Despite the "expert" testimony, the brothers were convicted.

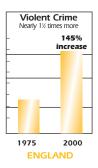
How did we go from a society that distinguished right from wrong to one that "understands" all and punishes nothing? The answer lies in Brock Chisholm's goal for psychiatry—that therapy be aimed at eliminating the concept of right and wrong—and, bolstering this, the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders (DSM)* and the mental disorders section of the *International Classification of Diseases (ICD-10)*.

"Unlike medical diagnoses that convey a probable cause, appropriate treatment and likely

CRIME AND VIOLENCE SOAR







Psychiatry's increasing influence in criminal justice has produced only escalating crime rates internationally. Although incapable of either predicting future dangerousness or of rehabilitating criminals, psychiatrists still testify in court on behalf of the highest bidder, asserting that offenders are not responsible for what they have done, but are instead "victims" of fictitious mental disorders. The result is rising crime, as lawbreakers are put back on the streets to wreak more havoc, unrepentant and uncorrected.

10 mole havoc, diliepentant and unconfected. 7

prognosis, the disorders listed in *DSM-IV* [and *ICD-10*] are terms arrived at through peer consensus"—a vote by APA committee members—and designed largely for billing purposes, reports Canadian psychologist, Dr. Tana Dineen.⁸ In other words, there is no objective science to it.

In a survey conducted on the Australian judiciary about their views of "expert" witnesses, Dr. Ian Freckelton, one of the nation's leading authorities on the medico-legal maze, found a widespread crisis of confidence in psychiatry as a forensic tool. Judges "think it's a soft science," he

"Although psychiatry clothes itself in the trappings of science and seeks to influence the standards by which we decide criminal responsibility, strict reliability in its diagnoses is rare."

 Ralph Adam Fine, trial judge, author of Escape of the Guilty said, noting the *DSM* has strict caveats against its use in court.

According to the DSM, itself, "When the DSM-IV categories, criteria, and textual descriptions are employed for forensic purposes, there are significant risks that diagnostic information will be misused and misunderstood." And it is "not sufficient to establish the existence for legal

purposes of a 'mental disorder,' 'mental disability,' or 'mental defect,'" in relation to competency, criminal responsibility or disability.

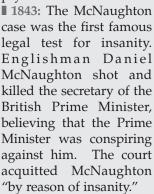
Studies show that psychiatrists and psychologists do not make more accurate clinical judgments than laypersons. For example, Vincent "the Chin" Gigante, the boss of a New York crime family, was convicted of racketeering and murder conspiracy. Feigning mental illness for more than 30 years, whenever he went to trial, the mobster hired psychiatrists who testified that he suffered from "paranoid schizophrenia, dementia and Alzheimer's Disease." In 2003, Gigante admitted he was a fake and had knowingly—and easily—misled the highest paid psychiatrists for three decades.

Yet during trials, in sentencing and in probation hearings, psychiatrists are still called upon for their opinions. And, sadly, these opinions are considered.

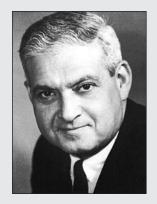
INSANITY DEFENSE THE BEGINNING OF THE END

A brief history of the Insanity Defense follows:

■ 1812: The "father of psychiatry," American Benjamin Rush, wrote his Medical *Inquiries* and Observations ироп the Diseases of the Mind, claiming crime to be a curable disease. Viewing murder and theft as symptoms of this disease, he sought to have the perpetrators transferred from the control of policemen to that of psychiatrists.



■ 1924: Nathan Leopold and Richard Loeb, two young Americans, were charged with the senseless killing of a younger com-



Judge Bazelon (above)
"succeeded in deforming liberty by ostensibly reforming criminology and psychiatry—an enterprise whose worth he gravely misjudged, partly by thinking that it is good, when it is evil, and partly by believing that it rests on new discoveries when in fact it rests on old deceptions."

Dr. Thomas Szasz,
 professor of psychiatry emeritus,
 author of *Psychiatric Slavery*, 1977

panion. Prominent psychiatrists, including William Alanson White, the president of the APA, were hired to explain the state of mind of the offenders. White testified that the young men's murderous behavior was the "product of impulses contrary to their conscious ideals but expressive of certain strange unconscious strivings that ... overwhelmed their control."