

Notes from:

The First Cause of Everything Bad in the Mental Health System: Psychiatric Diagnosis Action Think Tank

Presented September 28, 2018, at NARPA conference by Paula J. Caplan, Amy Smith, Steve Stone, and Lauren Tenney

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Introduction

Psychiatric diagnosis is the first cause of everything that happens in the traditional mental health system – and by extension – in mental health courts, in choice of various approaches and rejection of others, and much more. If a professional does not diagnose a person who seeks help, in principle they are not supposed to recommend any treatment or “treatment”; but once they have assigned any psychiatric diagnosis, they can recommend virtually anything in the name of treatment of that alleged disorder.

One of us (PJC) has been an expert witness in a lawsuit for a plaintiff whose life was nearly destroyed by three therapists who did horrible things to her. But the jury failed to find any of the therapists guilty, on the grounds that what they did was consistent with the “standard of care.” As most people who attend NARPA are aware, the standard of care in the traditional mental health system is often at best not helpful and at worst harmful, even leading to death. And it all begins with psychiatric diagnosis.

The fine people who work on one case at a time to prevent harm in that system have often attacked psychiatric drugs, forced institutionalization, forced outpatient commitment, physical restraints, electroshock, deprivation of legal rights in a wide variety of ways, and so on. But sorely needed are ways that go right to the root cause of all of the harm that begins with psychiatric labeling.

Our fundamental aim has the potential to save people who seek help from enormous harm and to save rights P&A people from having to do so much work that, though so often brave and terrific, is piecemeal.

The Three Major Myths about Psychiatric Diagnosis

The three major myths about psychiatric diagnosis are (1)that it is scientific, (2)that it helps reduce human suffering, and (3)that it does not lead to any harm. Books like *They Say You're Crazy: How the World's Most Powerful Psychiatrists Decide Who's Normal* and other publications listed at psychdiagnosis.weebly.com reveal that psychiatric diagnosis is unscientific, and that book in addition to *Bias in Psychiatric Diagnosis* and other publications and videos at the abovenamed website show that it rarely, if ever, helps reduce human suffering. As for the third myth, a vast array of kinds of harm can result from psychiatric diagnosis, ranging from plummeting self-confidence to loss of employment, child custody, rights to make decisions about one's legal and medical affairs and other human rights and even to death (again, see publications and videos at psychdiagnosis.weebly.com).

Some lines from Diana Spore's presentation at the 2018 Pat Risser RSVP Conference reflect some additional kinds of harm:

Receiving the [psychiatric] diagnosis and the "after effects" may be traumatizing, and you may not receive trauma-informed care. You may lose control over who learns about your diagnosis and when.... You may find yourself encountering loss of friendships, loss of colleagues, family power struggles in which you are powerless, in which family members assume that they can make decisions for you regardless of what you want. Receiving a psychiatric diagnosis may "catch you off guard." There may not be time to develop psychiatric advance directives, to block family members from making decisions about your care.... You may find yourself treated like a prisoner by family members, as if you are no longer safe to be around, as if you should not be left alone. When you receive that label, you may simply be viewed as "nuts." ...You may fear paramedics coming to your home because you know what may transpire the second it is revealed that you have a psychiatric diagnosis, fear what will happen in the emergency room, fear what may happen if you go back into a psychiatric ward due to treatment faced in the past. You may avoid talking about suicidal ideation, about having developed a plan of action, about making an error with taking your psychotropic medications.

Tragically, the full number and variety of kinds of harm remain unknown. New ones continually become evident as more survivors come forward to describe their experiences.

Actions to Prevent Harm

Sorely needed are ways to reduce and prevent the harm from psychiatric diagnosis.

So many ways to help are available, and happily, they range from ones that require only a few seconds and no funding right through to expensive, major undertakings. They are listed here starting with the ones requiring the least time and no money through to the major ones.

Anyone wishing to help can contact paulacaplan@gmail.com with a note to say specifically what you would like to do about which of the following.

- (1) Sign two petitions, and spread the word about them.** These are:
<https://www.change.org/p/everyone-who-cares-about-the-harm-done-by-psychiatric-diagnosis-endorse-the-call-for-congressional-hearings-about-psychiatric-diagnosis>

and

<https://www.change.org/p/boycott-the-dsm-a-human-rights-issue>
- (2) Therapists who, for whatever reason, assign psychiatric labels can attempt to reduce harm to their labeled patients/clients by writing ON THE PAGE WHERE THEY WRITE A DIAGNOSIS something like this:** “The fact that this person has been given this label must not be taken to reflect anything about their ability to be a good parent or employee or to make decisions about their lives or other important matters. If anyone seeing this has any questions, I will be happy to respond to them at any time.”
- (3) Educate yourself by reading the material and watching the videos at psychdiagnosis.weebly.com**
- (4) As an instructor or a student, introduce relevant materials, such as from psychdiagnosis.weebly.com, into academic courses/programs.**
- (5) Hold book (or articles) group discussions of writings about this topic.** Lists of these are at psychdiagnosis.weebly.com

- (6) **Put pressure on professionals** to inform those who seek their help about the facts about psychiatric diagnosis and ways the professionals will do their best to protect them from diagnosis-caused harm and to use better approaches, presenting a huge array of alternative, nonpathologizing approaches (more than two dozen are already in very brief videos on this Harvard Kennedy School website from a conference organized some years ago about veterans and their loved ones, but the approaches can be useful to anyone
<http://www.youtube.com/playlist?list=PL51E99E866B9D735E>)
- (7) **Hold readings or create productions of CALL ME CRAZY** (a rather inferior-quality video is available at <https://www.youtube.com/watch?v=6myXKiXGuUA&t=5s> where it is followed by a panel discussion), a comedy-drama with music about psychiatric diagnosis. The script is available from paulacaplan@gmail.com
- (8) **Donate (even a bit is helpful! And it is tax-deductible) or help raise funds to create a brochure** in which we will educate the public about psychiatric diagnosis, thereby empowering them to know what to question and challenge when they or their loved ones seek help for emotional suffering, in part by exposing the crucial role of psychiatric diagnosis, as well as the three major myths about it, i.e., (1)that it is scientific, (2)that it helps reduce human suffering, and (3)that it does not lead to any harm. **To make a tax-deductible donation, make out a check to VIDCAPT (this is the nonprofit), write “for psych dx brochure” in lower lefthand corner, and send it to: VIDCAPT; c/o Paula Caplan; 44 Maryland Ave. #1205; Rockville MD 20850**
- (9) **Brainstorm with us about ways to pressure the American Psychiatric Association to keep, and make public, records of reports they receive about harm from psychiatric diagnosis, including announcing this endeavor in a presentation at APA conferences and reporting this information in one of their journals. Then brainstorm about ways to collect such reports and convey them to the APA and make them public ourselves, whether or not the APA will.**
- (10) **Work on demanding Congressional hearings about psychiatric diagnosis.** One way to do this is listed in (1) above. But if you would like to volunteer to expand this project in any way (granted that it is difficult as long as the Republicans control the House and Senate), please contact us.

- (11) **Donate (any amount is gratefully accepted and tax-deductible) or help raise funds for a major documentary about psychiatric diagnosis. To make a tax-deductible donation, make out a check to VIDCAPT (this is the nonprofit), write “psych dx film” in lower lefthand corner, and send it to: VIDCAPT; c/o Paula Caplan; 44 Maryland Ave. #1205; Rockville MD 20850**
- (12) **File a lawsuit as a test case to challenge psychiatric diagnosis.** (Class action suits are not a good idea at this point.) If you are an attorney or know of one who would be willing at least to read some material about possible grounds for a lawsuit, please let paulacaplan@gmail.com know. The great lawyer Susan Stefan has said that the courts know psychiatric diagnosis is unscientific but do not care and that they proceed as though it were scientific. Our panel read many court decisions in which psychiatric labels were used, and it is clear that even those judges who acknowledge that *some* such labels are unscientific and therefore uninformative often write as though *other* diagnostic labels *are* scientific. We know that the chances of winning a lawsuit about psychiatric diagnosis may be no better than chance (perhaps even worse, given how deeply ingrained psychiatric diagnosis is in the minds of so many judges and how all-at-sea they feel at the prospect of reliance on diagnoses being taken away from them), but there always has to be a first case...and a second and a third and on and on until we get significant movement. We have an enormous amount of material in forms that are lawyer-friendly for use in motions and briefs.