

# **Mental Health and Social Control**

Anarchist Communist Federation

1998

# Contents

<b>Bedlam</b> . . . . .	3
<b>Schizophrenia</b> . . . . .	3
<b>Asylum</b> . . . . .	4

It is a fairly common belief that mental disorders are a medical problem, a disease like any other. This, however, is not necessarily the case and is often completely false. The history of psychiatric care is plagued with falsifications and the effect of politics. We need only think back to the attempts to save money that led to the last government's 'care in the community' policy to see that this is the case.

Until the last century the care of the mentally 'ill' was not left in the hands of doctors at all.

The majority of asylums were run by charities and the church. Doctors fought desperately for what they considered their exclusive right to treat the sick. This led to the creation of 'psychiatry' and the abuse of human rights which has continued to the present day.

## **Bedlam**

An 'illness' favoured by psychiatrists to justify their continued dominance of the mental health field is schizophrenia. In fact there is very little evidence that such a condition actually exists, though that hasn't stopped biologically based methods being used to "treat" it. Following the doctors take-over of the asylums the standard of care actually dropped dramatically and this change actually resulted in the creation of institutions such as the infamous Bedlam. The medical emphasis also led to treatments such as lobotomisation and, later, electro-convulsive therapy. These barbaric methods of treatments were akin to torture, yet the latter remains in use today. Indeed it can be argued that the main role of psychiatry is not treatment at all, but social control.

The most obvious concern posed by psychiatry, other than the nature of the treatment, is the use of sectioning (involuntary incarceration in a mental institution). Not only are mental patients subjected to imprisonment, they are also treated with drugs whose use would be illegal with any other group of patients. For example, the neuroleptics used to treat psychoses are often totally ineffective, usually not particularly effective, and have horrendous side-effects including dyskinesia, a disorder of the nervous system which affects the facial muscles and is irreversible. In addition many delusional patients find it extremely difficult to live after having been "cured" as they have lost a valuable part of the meaning in their lives. The question can be posed, why "cure" people who behave strangely if they harm no-one and are happy the way they are? The answer is social control.

## **Schizophrenia**

A couple of ways in which this manifests itself are apparent in 'DSM-IV', psychiatry's diagnostic manual. The criteria by which schizophrenia is judged is (1) the patient does not act in a socially acceptable manner, they are social misfits, and (2) they suffer from socially unacceptable delusions. Notably, this does not include religions, which are, of course socially acceptable delusions. This caused problems for the World Health Organisation survey of schizophrenia because what is and what is not socially acceptable varies from culture to culture. Nevertheless, they did find far fewer relapses in Third World countries- our society (i.e. advanced capitalism) actually fosters mental disorders by denying those it brands "mentally ill" a useful part to play in society.

Perhaps the worst example of psychiatry as social control was undoubtedly the eugenics programme enacted under the Nazi dictatorship in Germany. This writer lost a family member during this period. Suffering merely from temporal lobe epilepsy, she was branded genetically

too impure to be part of the German Reich. This elimination of the 'mentally ill' owes much to the work of the Psychiatrist Kallmann, who claimed to have proven that schizophrenia was genetic. His definition of schizophrenia was even more blatantly social control orientated than that used today, he included petty criminality and, Organise! readers take note, political dissidence!

The activities of the Nazi's, however, were an exaggerated version of mainstream psychiatric practice which continues to this day. People who think and act differently from the majority continue to be incarcerated without trial, poisoned with "therapeutic" drugs or practically electrocuted. Neither should we forget all those given lobotomies, throughout the 50s and 60s, some because their husbands thought they talked too much!

## **Asylum**

So what is the answer? Obviously some people do need appropriate treatment- some even request it. But what must not be allowed to happen is a return to the old asylum system as recently recommended by Frank Dobson. Yes, 'care in the community' has failed, but this is not because the idea is necessarily flawed. As usual the problem is resources and money. Charles Crosby, a researcher at the University of Wales at Bangor, found that a real care in the community programme would be preferable to care in institutions but that it would cost a lot more.

It seems obvious that all anarchists and libertarians should be fighting to defend the rights of the 'mentally ill'. In the long term we must aim to create a society which does not breed social alienation but rather creates a truly human community where difference is celebrated.

The Anarchist Library (Mirror)  
Anti-Copyright



Anarchist Communist Federation  
Mental Health and Social Control  
1998

Retrieved on May 14, 2013 from [web.archive.org](http://web.archive.org)  
Published in *Organise!* Issue 49 – Summer-Autumn 1998.

[usa.anarchistlibraries.net](http://usa.anarchistlibraries.net)