28 July 2003

From:

MindFreedom Support Coalition International 454 Willamette, Suite 216 PO Box 11284 Eugene, OR 97440 USA

To:

James H. Scully, Jr., M.D., Medical Director American Psychiatric Association 1000 Wilson Boulevard, Suite 1825 Arlington, Va. 22209-3901

Rick C. Birkel, Ph.D., Executive Director National Alliance for the Mentally III Colonial Place Three 2107 Wilson Blvd., Suite 300 Arlington, VA 22201-3042

Richard Carmona, M.D., M.P.H., F.A.C.S. The Surgeon General Office of the Surgeon General 5600 Fishers Lane Room 18-66 Rockville, MD 20857-1750

Dear Drs. Scully, Birkel and Carmona:

Attached please find our statement entitled "Fast for Freedom in Mental Health" that includes seven specific requests for you to provide reliable and valid scientific evidence.

We ask that you provide this evidence on an urgent basis, or that you publicly admit you are unable to do so. A panel of impeccably credentialed professionals, named in the statement, will review your responses against accepted standards of scientific method.

If a satisfactory response is not received in the near future, then on 16 August 2003, a number of members of MindFreedom intend to gather together and refuse solid food for an indefinite period as we continue to wait. Others intend to engage in solidarity fasts nationally and internationally.

As you know, one characteristic that distinguishes psychiatry from other helping professions is the extent of the authority it has been granted. Under certain circumstances psychiatrists have the legal sanction to confine individuals to institutions and administer procedures involuntarily, including electroconvulsive therapy (also known as ECT or electroshock).

Trusting that there exists a body of reliable and valid evidence that meets the standards of mainstream science, the public and media have generally supported the granting of this extraordinary authority. Some of mental health's leading entities such as the American Psychiatric Association (APA), National Alliance for the Mentally III (NAMI) and the Office of the Surgeon General have, in formal and informal arenas, encouraged this trust.

It is common to hear mental health leaders and organizations publicly claim that the so-called "major mental illnesses" are "proven biological diseases of the brain." We frequently hear claims that states of emotional distress result from "chemical imbalances." Moreover, the near exclusive support given this medical model of emotional distress by government -- and its resulting domination over healthcare -- has virtually eliminated client choice from among many other models that promise more effective and humane recovery.

Given psychiatry's influence over the lives and liberty of so many disempowered and traumatized citizens, it is reasonable to expect that the American Psychiatric Association, the National Alliance for the Mentally III, and the Office of the Surgeon General would welcome a request to provide, for review and subsequent media and public inspection, the scientific evidence upon which such claims are based.

Many well-credentialed professionals in the field of human behavior, as well as thousands of users and former clients of psychiatric services, are no longer willing to accept, on trust alone, claims made by the psychiatric profession. In our opinion, the APA, NAMI and the Surgeon General have all largely dismissed or ignored legitimate critiques of contemporary psychiatry's theories and research, and these critiques have rarely found their way into mainstream media. Important decisions by courts and legislatures, clients and families, ought to be based on strongly supported claims and specific references to cited research.

We ask that standards for evidence you provide include at least the following:

- \*\*\* Measures used are relevant, valid and reliable;
- \*\*\* Subject populations are selected by a sample method that is free of bias;
- \*\*\* Confounding variables are controlled for, and;
- \*\*\* Causation is distinguished from correlation.

We understand "public admission" to mean good faith efforts on your part to educate the public through at least two major media such as the *New York Times, Washington Post, Chicago Tribune, Los Angeles Times, National Public Radio, CNN*, etc.

We are aware that research studies can run to thousands of pages. Therefore, please respond only with those studies that you consider the best available in support of your claims and theories in a timely way. When responding with evidence, please send citations for the original publications or copies of the publications you are citing.

For your convenience, you may provide this evidence by mail, fax or e-mail.

Please send all responses by mail, or fax to:

Stuart Shipko, M.D. 97 W. Bellevue Dr. Pasadena, CA 91105

Fax: (626) 795-3527

Please send any e-mail communications to: Al Galves

Every effort will be made to review evidence and reply as quickly as practical.

Sincerely,

[signed] Mickey H. Weinberg, on behalf of the hunger strikers and panelists

David Oaks, Executive Director MindFreedom Support Coalition International

A Hunger Strike to Challenge International Domination by Biopsychiatry

This fast is about human rights in mental health. The psychiatric pharmaceutical complex is heedless of its oath to "first do no harm."

Psychiatrists are able with impunity to:

- \*\*\* Incarcerate citizens who have committed crimes against neither persons nor property.
- \*\*\* Impose diagnostic labels on people that stigmatize and defame them.
- \*\*\* Induce proven neurological damage by force and coercion with powerful psychotropic drugs.
- \*\*\* Stimulate violence and suicide with drugs promoted as able to control these activities.
- \*\*\* Destroy brain cells and memories with an increasing use of electroshock (also known as electro-convulsive therapy)
- \*\*\* Employ restraint and solitary confinement which frequently cause severe emotional trauma, humiliation, physical harm, and even death in preference to patience and understanding.
- \*\*\* Humiliate individuals already damaged by traumatizing assaults to their self-esteem.

These human rights violations and crimes against human decency must end. While the history of psychiatry offers little hope that change will arrive quickly, initial steps can and must be taken.

At the very least, the public has the right to know IMMEDIATELY the evidence upon which psychiatry bases its spurious claims and treatments, and upon which it has gained and betrayed the trust and confidence of the courts, the media, and the public.

## WHY WE FAST

There are many different ways to help people experiencing severe mental and emotional crises. People labeled with a psychiatric disability deserve to be able to choose from a wide variety of these empowering alternatives. Self-determination is important to achieve real recovery.

However, choice in the mental health field is severely limited. One approach dominates, and that is a belief in chemical imbalances, genetic determinism and psychiatric drugs as the treatment of choice. This medical model is sometimes termed "biopsychiatry." Far too often, this limited choice has been exceedingly harmful to both the body and the spirit.

Governments and the mental health industry use extensive taxpayer funding, judicial edicts, and repressive laws to enforce a biopsychiatric approach. The mental health system rarely offers options other than psychiatric drugs, and still more rarely offers people full, accurate information about the hazards of psychiatric drugs. The mental health system is coercing increasing numbers of people to take psychiatric drugs against their will, even on an outpatient basis in their own homes. Electroshock, even forced electroshock, is quietly making a comeback.

Biopsychiatry is now one of the most profitable of all industries and its power is globalizing rapidly. The World Health Organization and the World Bank have multi-billion dollar plans to spread biopsychiatry to developing nations.

Given all these facts, citizens have a right to ask:

"Has science established, beyond a reasonable doubt, that so-called 'major mental illnesses' are biological diseases of the brain?"

"Does the government have compelling evidence to justify the way it singles out for its primary support this one theory of the origin of emotional distress and of pharmaceutical remedies for its relief?"

Both public and personal health and safety are dependent on the answers to these questions.

This fast is not about judging individuals who choose to employ biopsychiatric approaches in an effort to seek relief. We respect the right of people to choose the option of prescribed psychiatric drugs. Some of us have made this personal choice.

We must act in the nonviolent tradition of Cesar Chavez and Mahatma Gandhi by saying "No!" to oppression with our bodies and spirits through fasting, while affirming the humanity of those people to whom we make our demands.

"If you see injustice and say nothing, you have taken the side of the oppressor."

-- Desmond Tutu

WE THE UNDERSIGNED WILL REFUSE ALL SOLID FOOD for an indefinite period of time as we await our challenge to be met by the following:

- 1. American Psychiatric Association (APA)
- 2. National Alliance for the Mentally III (NAMI)
- 3. Office of the Surgeon General of the United States

WE ASK THAT YOU PRODUCE scientifically-valid evidence for the following, or you publicly admit to media, government officials and the general public that you are unable to do so:

- 1. EVIDENCE THAT CLEARLY ESTABLISHES the validity of "schizophrenia," "depression" or other "major mental illnesses" as biologically-based brain diseases.
- 2. EVIDENCE FOR A PHYSICAL DIAGNOSTIC EXAM -- such as a scan or test of the brain, blood, urine, genes, etc. -- that can reliably distinguish individuals with these diagnoses (prior to treatment with psychiatric drugs), from individuals without these diagnoses.
- 3. EVIDENCE FOR A BASE-LINE STANDARD of a neurochemically-balanced "normal" personality, against which a neurochemical "imbalance" can be measured and corrected by pharmaceutical means.
- 4. EVIDENCE THAT ANY PSYCHOTROPIC DRUG can correct a "chemical imbalance" attributed to a psychiatric diagnosis, and is anything more than a non-specific alterer of brain physiology.
- 5. EVIDENCE THAT ANY PSYCHOTROPIC DRUG can reliably decrease the likelihood of violence or suicide.
- 6. EVIDENCE THAT PSYCHOTROPIC DRUGS do not in fact increase the overall likelihood of violence and suicide.
- 7. FINALLY, that you reveal publicly evidence published in mainstream medical journals, but unreported in mainstream media, that links use of some psychiatric drugs to structural brain changes.

Until the above demands are met to the satisfaction of an internationally respected panel of scientists and mental health professionals, we plan to drink only liquids and to refuse solid food for an indefinite period of time.

Signed by Fast for Freedom Participants:

Initial core group committed to fasting:

Vince Boehm Krista Erickson David Gonzalez David Oaks Dawn Rider Hiromi Sayama Mickey Weinberg, LCSW

Initial scientific panel to review evidence:

Fred Baughman, MD
Peter Breggin, MD
Mary Boyle, PhD
David Cohen, PhD
Ty Colbert, PhD
Pat Deegan, PhD
Al Galves, PhD
Thomas Greening, PhD
David Jacobs, PhD
Jay Joseph, PhD
Jonathan Leo, PhD
Bruce Levine, PhD
Loren Mosher, MD
Stuart Shipko, MD