Introduction

This document is a Human Rights complaint that explains how I, Naomi Belhassen, was imprisoned, abused, and tortured at the Health Sciences Center in Winnipeg, Manitoba, Canada, from February 14-27, 2019. My abusers were doctors. First, false allegations were used to obtain a Form 2 for a mandatory psychological assessment under the Mental Health Act. Then, the acting psychiatrist that interviewed me, Dr. Nwankwor, fabricated our interaction on two occasions to imprison me. Dr. Nwankwor prescribed heavy doses of medication that I did not require to make me incapacitated, which he later denied. The doctors insulted me in my medical file without my knowledge to entice the rest of the staff to ridicule and humiliate me. Throughout the incarceration, I was not allowed to know any accusations, the reason for my detainment, or have any advocacy. I was trapped in a hostile environment and was told that if I run away, the police would be called, and force me to return.

I was imprisoned in a mental health facility due to an increase in intelligence over a stereotype of my abilities. The reason why I was tortured was that I would not admit to having a disability or take medication for having a disability since more capabilities over a stereotype without dysfunction should not qualify a disability. When I refused to admit to something that did not exist, I was imprisoned and tortured through constant disrespect from the hospital staff and told to take medication that I did not need. Finally, on February 26, I was told what was recorded from my first interview with Dr. Nwankwor, which enabled me to refuse participation and demand immediate release. Since I could deduce that he fabricated our interaction, I was able to leave my imprisonment at the Health Sciences Center.

To understand the violation of human rights in my situation, it is essential to understand the various ways in which mental disorders violate the human rights protected in the Universal Declaration of Human Rights, the Convention on the Rights of Children, the Canadian Human Rights, the Canadian Charter of Rights and Freedoms, the International Covenant on Civil and Political Rights, and all other Human Rights legislation. Mental disorders do not exist; they are a sham. Mental disorders take people’s expressions and diagnose a disability without informing patients what symptoms were used in diagnosis. The more unbelievable a mental disorder is, the more the recipient of a mental disorder reads about it, then the more influential it is in their self-identity. The disability results from the diagnosis becoming a self-fulfilling prophecy caused by the inevitable influence of identifying with the negative stereotype that is written in the description.

The ‘symptoms’ of a mental disorder are expressions, but they are not the same as the descriptions, which describe inabilities that were not qualified. People do not have intellectual inabilities unless there was substantial brain damage because all individuals have a choice. The academic articles provide untrue, unsubstantiated, and fearmongering descriptions of academic studies that were cited from previous research but never occurred. Academic integrity is assumed with academic authority; therefore, the evidence is not required. None of the studies used in psychology and psychiatry are valid because scientific results from stereotypes and discrimination are impossible. People who seem to have
Mental disabilities are emotionally abused and unable to have justice from the disqualification of credibility resultant from a diagnosis.

Mental disorders are discrimination and need to be prohibited immediately. They prevent equality, freedom of expression, livelihood abilities, and legal rights to anyone since anyone can qualify for a mental disorder. Mental disorders are unconstitutional and need to be prohibited unless there is severe physiological or intellectual impairment already occurring caused by significant brain damage that consequently results in an inability for self-protection. However, this qualification is a fraction of one percent of the current and growing massive population qualified as having a mental disorder. Mental disorders urgently need to be abolished because they damage individual potential by depriving individuals of their dignity, which creates inequality, poverty, and destroys our democracy. This document is organized in sections that are all necessary for understanding my human rights complaint, which is contained in the last section.
Violation of Equality Legislation

Mental disorders, also known as mood disorders, are health conditions that recognize expressions of thoughts, behavior, and emotions as violations which are prohibited by equality provisions protected in Human Rights legislation. Mental disorders are not physiologically detectable. No x-ray, blood work, biochemical imbalance, laboratory test, or exam finding establishes the presence of a mental disorder; they neither result in illness nor disease and do not imply intellectual or social inability, limitation, or dysfunction. A mental disorder can be identified as an increase in intelligence or creativity over average populations. Also, no cures for any mental disorders have ever been discovered. Psychiatrists vote on what is or is not considered a mental disorder, which implies political motivation. The symptoms that establish the presence of a mental disorder are expressions that deviate from social norms. Mental disorders are the enactment of intellectual discrimination under the guise of scientific merit for medical purposes, which is dangerous, unconstitutional, and undemocratic because social norms cannot be used to determine what is or is not a mental disorder in a multicultural society.

Although the terms medical doctor, medical science, and the scientific method are assumed to be alike for both physiological illness and mental disorders that create mental illness, the two processes are incomparable due to different methods of identifying and treating ‘normal’ and ‘abnormal’ states of health. When a physician uses ‘normal’ and ‘abnormal’, the ‘normal’ state identifies appearance at birth and whether it causes or will cause physiological impairment. ‘Abnormal’ is a disruption of the normal state or the indication of physiological impairment. For example, a birthmark is ‘normal’ by appearing at birth; however, the sudden appearance of a birthmark is ‘abnormal’ and may identify a physiological impairment such as internal bleeding or a blood disorder. The abnormal state is physiologically detectable and measurable with objective tests and the effect of treatment as measurable and comparable. Consequently, medication is administered to create or reinstate a previous state or one without the cause of physiological impairment.

In contrast, mental disorders use discrimination to identify the ‘normal’ and ‘abnormal’ states of health. To be diagnosed, a minimum number of symptoms from a list under a specific type of disorder need to be directly or indirectly apparent. Symptoms are expressions, such as thought, behavior, and emotion, which can be evident from a conversation with a doctor or reported to a doctor by a third party. For example, if a symptom was jealousy, then the subject would describe behaving in a way that could be identified as displaying jealousy, or a third party could make accusations without evidence to qualify the symptom of jealousy. However, the first limitation with this method is that a human is not only one state; therefore, selecting only certain expressions to substantiate the evidence in support of a thesis, the mental illness, is a biased sample that is prohibited by the scientific method. A second limitation is that ‘abnormal’ compares the subject’s expressions to expressions made by ‘normal’ people, which is discrimination. A third limitation is that medication is given to restrict the subject’s expressive abilities to act like ‘normal’ people, which is again, discrimination. Qualifying mental disorders through social norms have the assumption that normality is the standard of goodness; however, individuals in a democracy should strive to be exceptional since competition provides opportunities and enables
societies to excel. Mental disorders use the fallacious logic recognized in ‘appeal to normality’ which states that social norms are not synonymous with the ideal function of a created system.

Mental disorders use an invalid method of identification of mental illness because Human Rights legislation prohibits discrimination. Section 15 (1) in the Canadian Charter states that “every individual is equal before and under the law and has the equal protection and equal benefit of the law without discrimination...”; however, judging expressions as acceptable when expected from the status quo is a violation of equality legislation. A mental disorder is only the unpopularity of thought, behavior, or emotion. If other countries nurture the people that are exceptional while North America medicates the same people into submission, extraordinary people will be unable to compete, and both national function and international competitiveness is impeded. For a democracy to thrive, being average or normal cannot be the goal; being exceptional should be the goal with society nurturing individuals to reach their potential instead of sabotaging their potential.

Mental disorders are unconstitutional because they violate all equality legislation. Article 1 of the Universal Declaration of Human Rights states that “All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.” In contrast, mental disorder destroys dignity, community, equality, and brotherhood through applying, teaching, and instructing intellectual segregation. The recognition of inferior and superior intellectual abilities are mental disorders which violates the equality that is fundamental to all Human Rights legislation. Article 7 of the Universal Declaration of Human Rights provides everyone equality without discrimination with entitlement to equal protection both against any discrimination and incitement to discriminate. However, mental disorders create an intellectual hierarchy that can identify anyone considered ‘abnormal’, which means that discrimination is the entire foundation of mental disorders. In 1948, the Universal Declaration of Human Rights was a tremendous achievement because of the united efforts of all regions of the world to set a standard of humanity and mental disorders destroy this achievement, which is why mental disorders and mental illness needs to be abolished.
Violation of Charter’s Fundamental Freedoms

Mental disorders violate the Charter’s Fundamental Freedoms since expressions are used to identify mental disorders which opposes the Freedom of Expression legislations. To qualify for a mental disorder, a minimum number of symptoms are required to be identified from the list of symptoms of a specific mental disorder. However, a physician’s use of ‘symptoms’ and ‘symptoms’ of mental disorders are incomparable because symptoms of mental disorders are expressions such as being argumentative, impulsive, irritated, confident, creative, goal directed, energetic, annoying, defiant etc. If three of these symptoms are required for diagnosis, then if the psychologist or psychiatrist qualifies the minimum amount, the subject is diagnosed with a mental disorder. One problem with this method is that anyone can have the symptoms triggered from situations making diagnoses inaccurate. For example, if the subject was waiting for two hours next to someone talking on a cell phone after receiving a parking ticket, when the doctor asks the subject the same question three different ways to probe deeper, the subject may answer in a way that is annoyed, defiant, irritated, and argumentative which would qualify symptoms for a mental disorder. However, there is no mental disorder unless all expressions are mental disorders which would make humans more acceptable as robots.

A second problem with using certain expressions as symptoms of mental disorders is that selecting certain expressions is a biased sample subject to confirmation bias. If all expressions are symptoms of mental disorders, then qualifying expressions as mental disorders is sensical; however, if only certain expressions are mental disorders, then selecting certain expressions indicates selecting evidence in confirmation of a theory which is a biased method of diagnosis. A third problem is that expressions are reflective of social norms. For example, someone from an island in the Caribbean that moves to a post-Soviet state will have different expressions, therefore, in a multicultural society identifying certain expressions as acceptable while others as unacceptable is not considering the diverse norms that can account for expressive diversity. A fourth problem with using expressions as symptoms is that Freedom of Expression is protected by Human Rights legislations.

Articles 18 and 19 of the Universal Declaration of Human Rights (UDHR) protects freedom of thought, conscience, religion, belief, opinion, and expression. The UDHR protects freedom to hold opinions without interference and to seek, receive, and impart information, and ideas regardless of frontiers. Mental disorders are interference and identify expressions as mental disorders and having mental illness in violation of section 2 of the Canadian Charter that protects freedom of expression. Article 20 (2) of the UDHR provides freedom of association and states that no one is compelled to belong to an association. However, a mental disorder, disability, or illness is compelled association with intellectual inferiority caused by expressive capability. Article 30 of the UDHR states that nothing in the Declaration can be interpreted as implying that any State, group, or person has any right to engage in any activity or perform any act aimed at the destruction of any of the rights and freedoms set forth herein. Therefore, since Fundamental Freedoms and equality are both violated, prohibiting mental disorders to protect
society from intellectual discrimination is necessary, required, and obligated by the legal, educational, and political authorities.
Mental Disorders Violate the Rights of the Child

One in four children is given a mental disability, which is the annihilation of the future potential of society. A child’s exceptional expressive abilities are the ones identified as symptoms of a mental disorder. Children use expressions in place of verbal communication since they have not developed enough communicative skills to communicate verbally. Therefore, expressions that become intellectual gifts are prevented from being developed because when a child is given a mental disability, a false perception of inability is created that suppresses a child’s development. Furthermore, the oppression of a child’s expressions through medication results in the child’s failure to communicate distress and endangerment. Also, any objections a child makes against child abuse are discredited due to the invalidating stigma of mental illness.

Mental disorders are invalid because they are not disabilities; they are expressive abilities. For example, Bipolar Disorder requires only three symptoms for diagnosis. Clinical symptoms for diagnosis are inflated self-esteem or grandiosity, decreased need for sleep, increased talkativeness, racing thoughts, distractibility, and an increase in goal-directed activity. Therefore, if someone is creative, talkative, and goal-directed, then that person can obtain one of the worst types of mental disabilities. The only evidence of brain differences with any mental disability is an increase in brain activity. However, the people who have been confined in mental hospitals and tortured to the point of committing suicide have a decrease in brain mass in the same areas that had increased activity, the prefrontal lobe. Therefore, a false attribution to brain mass decrease is associated with this mental disorder when it is resultant from the effects of confinement and torture of kind and sensitive people in mental hospitals. Suicide is caused by feelings of devastation and hopelessness from discrimination. Bill Gates, Thomas Edison, or Leonardo DaVinci could be diagnosed as Bipolar due to their intellectual abilities demonstrated by their creativity and innovations. If no mental disorders have cures, then there are no cures for any mental disabilities because mental disorders do not exist; they are an intellectual holocaust.

Another example is Oppositional Defiance Disorder, which requires four symptoms to obtain a diagnosis displayed to someone that is not a sibling and showing a pattern of expressions for longer than six months. Clinical symptoms for diagnosis are: often loses temper, is often touchy or easily annoyed, is often angry and resentful, often argues with authority figures or, for children and adolescents, with adults, often actively defies or refuses to comply with requests from authority figures or with rules, often deliberately annoys others, often blames others for his or her mistakes or misbehavior, has been spiteful or vindictive at least twice within the past six months. Oppositional Defiance Disorder is not a mental illness; it is a hurt child that feels betrayed by someone trusted. If the child is given a disability, it enables child abuse by discrediting the ability to protest. No cures for any mental disabilities have ever been found; therefore, medication is intended to be taken throughout the entire life. Children are medicated so that they do not develop their expressive abilities, which is child cruelty.

Another example is the most dangerous mental disorder, Antisocial Personality Disorder, which is a classification that includes serial killers, child murderers, and rapists. To be diagnosed with Antisocial
Personality Disorder, the child needs to be 18 and display a pattern of behavior since 15. However, a minimum age limit is nonsensical for an authentic medical condition. Three of the following symptoms are required for diagnosis:

1. Aggressiveness, irritability, or impulsive behaviors
2. A chronic pattern of attempting to deceive others, including lying, the use of fake names, or cheating
3. Repeatedly engaging in unlawful acts
4. Repeated problems sustaining important personal obligations, such as those related to personal relationships, work, school
5. Chronic issues with reckless or irresponsible behaviors
6. A consistent lack of remorse or consistent indifference regarding their own actions and how they affect others
7. A pattern of behavior that has been established early in the person’s development (before the age of 15)

The manipulation is due to the false method of diagnosis. The symptoms that qualify a mental disorder are expressive abilities, whereas the descriptions contain unqualified inabilities that will create a false perception. For example, the description for Antisocial Personality Disorder states, “Some professionals describe people with this constellation of symptoms as "stone cold" to the rights of others. Consequences of this disorder can include imprisonment, drug abuse, and alcoholism. People with this illness may seem charming on the surface, but they are likely to be irritable and aggressive as well as irresponsible. They may have numerous somatic complaints and perhaps attempt suicide. Due to their manipulative tendencies, it is difficult to tell whether they are lying or telling the truth.” False identity is resultant from the description due to providing identifying qualities from physiological evidence of brain use and perspective, which is not public knowledge. Then, the description contains a negative stereotype that suggests suicide, being an alcoholic, going to prison, and being senselessly aggressive. Furthermore, relationship problems are provoked by suggesting untrustworthiness. The source of this reference is a psychology website, but citing it is not necessary since hate-speech from negative stereotypes are the only types of descriptions in this field.

The damaging effect of a diagnosis from a medical professional is that the child believes that mental illness exists. Diagnosis of a mental disorder is a manipulation that creates a false identity. The symptoms that qualify a disability are expressive abilities; however, the symptoms used in diagnosis are never told to the patient; only the name of the diagnosis is provided. Later, when researching the meaning of a diagnosis, descriptions contain demeaning, derogatory, negative stereotypes of inabilities that were never qualified, which creates a false self-perception. Therefore, all mental disabilities are incorrect from using an invalid diagnosis method. The disability is resultant from the belief in authority and that the word 'doctor' has a symbolic value from representing healing, trust, and safety.

Another method demonstrating that mental disorders violate children is by teaching negative stereotypes of gender roles while pretending to abolish outdated gender stereotypes. Biological sex is physiological, whereas gender is the societal expectation of male and female social norms. However,
children do not know what social norms are until learning about them with negative stereotypes. Psychology states that someone can be born into the wrong biological sex that doesn’t match their internal identity of gender. Therefore, they should change their biological sex to match their gender stereotype. However, that is nonsensical. If gender is a social construct, then enticing people to change their physical representation is illogical since a social construct can be violated.

Gender Identity Disorder confuses children and encourages regrettable life-changing decisions. For example, ten years after sex reassignment surgery, suicide is 20 times more likely than comparable peers. Children need to be protected from the damage caused by medical charlatans. When a qualified expert in mental health advises patients, the effect on behavior, decisions, and perceptions are substantial, especially if the patient was emotionally abused. Doctors cannot teach children about their gender identity because their theories are wrong. For example, psychology attests to Two-Spirited people in Aboriginal culture as historical evidence of Gender Identity Disorder, which is inaccurate. Historically, when Aboriginal men did not want to participate in group hunting expeditions, they remained at the camp, dressed in female clothing, and took part in group work and activities. However, psychology falsely attributes female clothing with gender identity forgetting that Aboriginal culture is matriarchal, which means that the purpose of dressing in female clothing was to represent higher social status. For instance, in a patriarchal culture, women dress like men without changing their identity. Therefore, in a matriarchal culture, when men wore female clothing, it represented higher social status, not female identity. Also, Aboriginal communities were egalitarian and communal, making changing gender identity nonsensical.

Another example demonstrating the need to prohibit mental disorders is that children can be diagnosed with intellectual disabilities that do not exist. Intellectual Disability, or Intellectual Developmental Disorder, includes both intellectual and adaptive functioning deficits in conceptual, social, and practical domains. According to the Diagnostic Manual for Mental Disorders (DSM-5) the following criteria is required to obtain a diagnosis:

1. Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience, confirmed by both clinical assessment and individualized, standardized intelligence testing.
2. Deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one of more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as school, work, and community.
3. Onset of intellectual and adaptive deficits during the developmental period.

The first problem with this diagnostic criterion is the seven subcategories of intellectual functions. When a child is intellectually gifted, mental abilities have specialized functions making a gifted child qualify as deficient. In contrast, a child with average intelligence has generalized abilities which will falsely indicate higher intellectual functions. Second, evaluating whether the level of function is insufficient, adequate,
or excessive is dependent on the comparison without independent value. Third, the child's independence could only be deficient since an independent child would not meet with a medical professional for a psychological assessment to determine their intellectual deficiencies since it is humiliating.

Also, Neurological Disorders are invalid. Psychologists and psychiatrists identify by age two a neurological disorder with delayed motor, language, or social milestones. For example, milestones are rolling over, crawling, walking, and talking. However, since babies cannot articulate the reasons, disability cannot be assumed since differences can not equate deficiencies. Neurological disorders are identified before the child enters grade school, and characterizations are impairments of personal, social, academic, or occupational functioning. However, assessment before grade school negates opportunity making the claim invalid. According to this classification, Albert Einstein would be diagnosed with neurological disorders and intellectual disabilities since he did not speak until he was four years old, which is far past his milestone expectations. The reason that he gave for not babbling like other babies is that he preferred to speak in full sentences, so when he first spoke at age four, he spoke in full sentences.

Another example is the diagnosis of Depression Disorder. Nothing is sadder than a doctor stating to a patient that physiological brain dysfunction is occurring that gives a future consisting of varying degrees of sadness, that other people do not have, and that this illness is a lifelong condition since there is no cure. Also, trying to explain to a romantic interest how a diagnosis occurred is humiliating and decreases the ability to have a romantic relationship. The diagnosis of Depression Disorder causes depression and causes people to commit suicide. The real cause of depression is hurt feelings due to unfair treatment; therefore, alleviating depression is with retaliation, explanation, apology, or obtaining justice. Depression is not a disability until a doctor states it is, which creates debility by describing a continued state that is unable to have a resolution.

Another example demonstrating the risk to children is exemplified with Addiction Disorder. Diagnosing a mild substance use disorder requires 2 of 3 symptoms, moderate requires 4 or 5 symptoms, and severe requires 5 or 6 symptoms for diagnosis. Diagnosis of substance use disorder can be applied to Tobacco, Alcohol, Cannabis, Hallucinogens, Inhalants, Opioid (Morphine), Stimulants (Cocaine), Sedatives, Hypnotics, or Anxiolytics (e.g., valium). One limitation when obtaining a diagnosis is that the substance identified as causing symptoms is unstated; the patient is only told that the mental illness of Addictive Disorder exists. However, instead of qualifying a problem or dysfunction, the usual withdrawal symptoms are used as symptoms of the disability. Resultantly, a diagnosis of Addiction Disorder can be given to someone quitting smoking, which will result in a false perception of an inability to decrease, prevent, or stop taking addictive, harmful, and debilitating narcotics.
Symptoms used in the Diagnostic Criteria for Addiction Disorder;

- Taking the substance in larger amounts or for longer than you're meant to.
- Wanting to cut down or stop using the substance but not managing to.
- Spending a lot of time getting, using, or recovering from use of the substance.
- Cravings and urges to use the substance.
- Not managing to do what you should at work, home, or school because of substance use.
- Continuing to use, even when it causes problems in relationships.
- Giving up important social, occupational, or recreational activities because of substance use.
- Using substances again and again, even when it puts you in danger.
- Continuing to use despite potential of a physical or psychological problem.
- Needing more of the substance to get the effect you want (tolerance).
- Development of withdrawal symptoms, which can be relieved by the substance.

Children are most susceptible to obtain a mental disorder due to the vulnerability of influence from authority figures. When a psychologist or psychiatrist indicates an increase of attention or interest to certain behaviors, then the child is more inclined to exaggerate behaviors to seem interesting and obtain approval. Since no recordings are kept of the interaction, no evidence is available to refer to when questioning the legitimacy of a diagnosis. Furthermore, mental disorders assume an inability to choose since choice negates the requirement of diagnosis. Therefore, since every mental disability still allows the recipient choice, then every diagnosis is a negative stereotype making all diagnoses discrimination. Children need protection from the lifelong damage caused by identifying which a negative stereotype that becomes a self-fulfilling prophecy.

Some of the human rights violated from the Convention of the Rights of Children are as follows;

- Article 2 (2) States Parties shall take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of the status, activities, expressed opinions, or beliefs of the child's parents, legal guardians, or family members.
- Article 6 (2) States Parties shall ensure to the maximum extent possible the survival and development of the child.
- Article 12 (1) States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
- Article 13 (1) The child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice.
- Article 15 (1) States Parties recognize the rights of the child to freedom of association and to freedom of peaceful assembly. (2) No restrictions may be placed on the exercise of these rights other than those imposed in conformity with the law and which are necessary in a
democratic society in the interests of national security or public safety, public order, the protection of public health or morals or the protection of the rights and freedoms of others.

- Article 16 (1) No child shall be subjected to arbitrary or unlawful interference with his or her privacy, family, home or correspondence, nor to unlawful attacks on his or her honour and reputation. (2) The child has the right to the protection of the law against such interference or attacks.

- Article 19 (1) States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

- Article 24. States Parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.

- Article 29 (1) States Parties agree that the education of the child shall be directed to: (a) The development of the child's personality, talents and mental and physical abilities to their fullest potential; (b) The development of respect for human rights and fundamental freedoms, and for the principles enshrined in the Charter of the United Nations; (c) The development of respect for the child's parents, his or her own cultural identity, language and values, for the national values of the country in which the child is living, the country from which he or she may originate, and for civilizations different from his or her own; (d) The preparation of the child for responsible life in a free society, in the spirit of understanding, peace, tolerance, equality of sexes, and friendship among all peoples, ethnic, national and religious groups and persons of indigenous origin; (e) The development of respect for the natural environment.

- Article 32 (1) States Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development.

- Article 36 States Parties shall protect the child against all other forms of exploitation prejudicial to any aspects of the child's welfare.

- Article 37 States Parties shall ensure that: (a) No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment.

- Article 40 (1) States Parties recognize the right of every child alleged as, accused of, or recognized as having infringed the penal law to be treated in a manner consistent with the promotion of the child's sense of dignity and worth, which reinforces the child's respect for the human rights and fundamental freedoms of others and which takes into account the child's age and the desirability of promoting the child's reintegration and the child's assuming a constructive role in society.
Violation of Dignity, Reputation, and Livelihood Rights

Psychology and psychiatry state that one in four children have mental disabilities, the result is that those people will eventually be unable to financially contribute to society and receive money from the government in the form of disability subsidies. Then, one in three people can suddenly have mental disabilities. Then, one in two people has mental disabilities, which is a dictatorship. Mental disabilities cripple our economy and ruin our democracy.

Roughly half the people that are homeless have a mental disorder. Those people were functioning in society that went through a stressful period since stress is the trigger for emotional unbalance. Then, those people went to a medical professional, obtained a diagnosis for a mental disorder, but instead of making their lives better as assumed with medication and medical professionals, the diagnosis gave them an identity of inability and mental defect combined with medication that made them lose everything in their lives. Mental disorders created the homeless epidemic.

The stigma of a mental disorder is incredibly debilitating because it uses a false classification method in diagnosis whereby disabilities are not qualified since no disabilities are used in the diagnosis of a mental disability. Therefore, the negative stereotype caused by the diagnosis is due to an inaccurate representation of an unqualified inability. Stigma is debilitating because it is offensive, humiliating, and untrue. Stating that expression is caused by a mental defect and remains in a continued expressive state is nonsensical and an insult to humanity.

Also, medication for mental disorders causes what it is treating as a side effect. For example, one of the side effects of the anti-depression medication is depression, or some of the side effects for antipsychotic medication is psychosis, anger, and loss of control. Prescribing medicines for expressions can still happen; however, instead of giving medication because of a mental disorder, the medication should be given because of the excessive expression that causes patient discomfort. For example, feelings of sadness can be the cause of a prescription of medication, which is beneficial to the patient as well since emotion is the cause of the medicine, not an inability to control emotion resultant from a mental defect.

The difference between people that are mediums and people diagnosed with Schizophrenia Disorder demonstrates the destruction of individual potential that results from a diagnosis of a mental disorder. People diagnosed with Schizophrenia take more than half dozen pills every day, which forms a dependency on medication to survive, and unpredictability of behavior without the medication. However, mediums, which are the same, have their own television shows, and current revenue in the United States is more than 6 billion dollars annually with expectations of continued growth. People with Schizophrenia Disorder are abused by being given a negative stereotype for identity, a false perception of inability, and the label of mental illness for being exceptional, making them become a social liability. People with mental disabilities do not abuse others unless they were confined, isolated, and abused in a
mental hospital; however, obtaining a diagnosis of a mental disability makes the recipient ten times more likely to be victimized.
Violation of Legal Rights

The Mental Health Act violates the legal rights for any Canadian because anyone can make false allegations against anyone else according to this Act, and the legal rights protected by human rights legislation are violated. Under the Mental Health Act, no allegations are told to the accused, no evidence is needed, and there is no penalty for false accusations. Written accusations are given to a magistrate, and if the description suggests a risk to self or someone else, Form 2 is signed, and the accused is escorted by police officers and forced to undergo a psychological assessment. The original accusations are not told to the accused, and any doctor can fill out forms to continue the incarceration without evidence, agreement, or penalty. Any information written in the medical file is not available until one month after leaving the confinement.

Patients are not protected from a doctor fabricating the interaction. No independent record of the interviews is available to protect the accused, and doctors can write whatever they want, and it is considered credible. No accusations are told to the accused, and no reasons are told for the continued confinement. Mental health facilities inflict emotional abuse on the people that are confined for no reason other than the abuser’s feeling of empowerment. Detention is in a one or two-room environment, and there is continual abuse from staff through humiliation and disrespect. Staff is enticed to abuse patients by the derogatory comments written in the medical file. Many people have committed suicide in these mental health facilities due to confinement, imprisonment, torture, and abuse, which is not investigated from the false assumption that the suicide was caused by mental illness. Medication is given to a prisoner without stating the reason why the medication is needed or providing the ability to independently research causes and side effects before giving consent. However, the abuse of patients in mental health facilities is well documented and common knowledge.

Under the Mental Health Act, anyone can be imprisoned and abused without knowing the accusations. There is no advocacy. The accused does not know the right to refuse medication or the need to apply for an independent review for a chance to be released. No translators are provided for people that are not native English speakers. Without applying for an independent review, forms can be filled by doctors without the prisoner’s knowledge resulting in incarceration for longer than six months before an independent review occurs. If the accused runs away, then the police are called, and the accused is forced to return. Astonishingly, Canada condemns torture in other countries while torturing Canadian citizens. The Mental Health Act denies Canadians their legal rights, knowledge of the accusations, and forces confinement violating Human Rights legislation.

Some of the violations that are from the International Covenant on Civil and Political Rights are as follows;

- Article 2 (1) Each State Party to the present Covenant undertakes to respect and to ensure to all individuals within its territory and subject to its jurisdiction the rights recognized in the present Covenant, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion national or social origin, property, birth or other status.
• Article 3 The States Parties to the present Covenant undertake to ensure the equal right of men and women to the enjoyment of all civil and political rights set forth in the present Covenant.

• Article 7 No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

• Article 9 (1) Everyone has the right to liberty and security of person. No one shall be subjected to arbitrary arrest or detention. No one shall be deprived of his liberty except on such grounds and in accordance with such procedure as are established by law. (2) Anyone who is arrested shall be informed, at the time of arrest, of the reasons for his arrest and shall be promptly informed of any charges against him. (3) Anyone arrested or detained on a criminal charge shall be brought promptly before a judge or other officer authorized by law to exercise judicial power and shall be entitled to trial within a reasonable time or to release. It shall not be the general rule that persons awaiting trial shall be detained in custody, but release may be subject to guarantees to appear for trial, at any other stage of the judicial proceedings, and, should occasion arise, for execution of the judgement. (4) Anyone who is deprived of his liberty by arrest or detention shall be entitled to take proceedings before a court, in order that that court may decide without delay on the lawfulness of his detention and order his release if the detention is not lawful. (5) Anyone who has been the victim of unlawful arrest or detention shall have an enforceable right to compensation.

• Article 10 (1) All persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person. (2) (a) Accused persons shall, save in exceptional circumstances, be segregated from convicted persons and shall be subject to separate treatment appropriate to their status as unconvicted persons;

• Article 14 (3) (d) To be tried in his presence, and to defend himself in person or through legal assistance of his own choosing; to be informed, if he does not have legal assistance, of this right; and to have legal assistance assigned to him, in any case where the interests of justice so require, and without payment by him in any such case if he does not have sufficient means to pay for it; payment by him in any such case if he does not have sufficient means to pay for it; (e) To examine, or have examined, the witnesses against him and to obtain the attendance and examination of witnesses on his behalf under the same conditions as witnesses against him; (f) To have the free assistance of an interpreter if he cannot understand or speak the language used in court; (g) Not to be compelled to testify against himself or to confess guilt.

• Article 15 (1) No one shall be held guilty of any criminal offence on account of any act or omission which did not constitute a criminal offence, under national or international law, at the time when it was committed. Nor shall a heavier penalty be imposed than the one that was applicable at the time when the criminal offence was committed. If, subsequent to the commission of the offence, provision is made by law for the imposition of the lighter penalty, the offender shall benefit thereby.

• Article 16 Everyone shall have the right to recognition everywhere as a person before the law.
Article 17 (1) No one shall be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, nor to unlawful attacks on his honour and reputation. (2) Everyone has the right to the protection of the law against such interference or attacks.

Article 18 (1) Everyone shall have the right to freedom of thought, conscience and religion. This right shall include freedom to have or to adopt a religion or belief of his choice, and freedom, either individually or in community with others and in public or private, to manifest his religion or belief in worship, observance, practice and teaching. (2) No one shall be subject to coercion which would impair his freedom to have or to adopt a religion or belief of his choice. (3) Freedom to manifest one's religion or beliefs may be subject only to such limitations as are prescribed by law and are necessary to protect public safety, order, health, or morals or the fundamental rights and freedoms of others.

Article 19 (1) Everyone shall have the right to hold opinions without interference. (2) Everyone shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of his choice.

Article 20 (2) 2. Any advocacy of national, racial or religious hatred that constitutes incitement to discrimination, hostility or violence shall be prohibited by law.

Article 26 All persons are equal before the law and are entitled without any discrimination to the equal protection of the law. In this respect, the law shall prohibit any discrimination and guarantee to all persons equal and effective protection against discrimination on any ground such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.
Brain Differences

Understanding that people use different brain areas for specialized purposes to form a community is essential to appreciating the symbiotic functions of psychopaths and people with emotions. Each type of brain function wants cooperation, improvement, and harmony, except for sociopaths which use the same brain functions of psychopaths. Therefore, understanding sociopath’s perspective and motivation to destroy society is fundamental to avoid detrimental effects. Also, understanding the strengths, weaknesses, and historical function of psychopaths in helping their community is essential to understanding their importance and purpose.

The Reptilian complex is a basal area of brain function that provides both the psychopaths and sociopaths perspectives. The characteristics described in psychology of psychopaths’ lack of emotion, low confidence, lack of imagination or creativity, and perceived social hierarchy of value is caused by using the Reptilian complex. The characteristics do not describe a personality type, they describe an area of brain usage which means that any decisions that are attributed to this specific brain function are negative stereotypes because people have choices. Psychopaths are leaders, warriors, and heroes, and have been throughout history, which is attributed to the function of the Reptilian complex combined with pride and fearlessness. However, although sociopaths also use the Reptilian complex, they have the opposite function because of connections to fear receptor during brain development. After losing pride, pride is no longer guides decision making for sociopaths; therefore, they can commit shameful acts without a sense of shame and only see an accomplishment.

The difference between a psychopath and sociopath is that a psychopath wants to protect their community; whereas, a sociopath wants to prevent their community members from succeeding by preventing their success caused by their feelings of worthlessness, threat, and inferiority. Sociopaths attack others they perceive as having admirable qualities to prevent the admirable qualities from developing because they fear being perceived as inferior, weak, and worthless because they fear other members will attack them; however, the fear is unfounded because attacking people perceived as weak and vulnerable is only considered an accomplishment for sociopaths. People with emotions do not like hurting others due to empathy and psychopaths compete for dominance or to provide for their group. One way to explain the difference between a psychopath of a sociopath is when a psychopath has Post Traumatic Stress Disorder (PTSD), the state of fear and panic in PTSD is the sociopath’s perspective. Therefore, due to cognitive differences, sociopath’s have no reason to attack their own group members making their fears unfounded and actions nonsensical.

A difference between criminal activity between a psychopath and sociopath is that sociopaths victimize vulnerable, weak, and helpless people and perceive it as an accomplishment. However, an accomplishment is only through overcoming something considered difficult because if anyone can do an action, then the action has no value. Sociopaths victimize vulnerable, weak, and defenseless people because in their perspective, it is an accomplishment because of the significant threat admirable people pose. People with pride are not able to perceive the accomplishment because they assume that the
sociopath has a sense of self-value. However, the accomplishment is because the sociopath overcomes feelings of worthlessness to victimize others. Therefore, when victimizing people that are admirable, they perceive themselves overpowering their powerful adversary, which gives a false sense of accomplishment.

When sociopaths attack humanity in a group, they use counter-intuitive disguises to avoid apprehension. Sociopaths were the Nazis that disguised as politicians, the teachers that abused the Aboriginal children at residential schools, and the priests that molested children. Sociopaths choose their disguise carefully so society cannot react due to the nonsensicalness from defying expectations. This time, they are attacking society disguised as doctors, so society will not respond or know how to make sense of their behavior. Sociopaths are the psychologists and psychiatrists that are attacking people they feel threatened by due to perceiving their own inferiority. Which is exemplified by their history of performing lobotomies and recent effort to make pedophilia a sexual orientation. Before redaction from the public backlash, the Diagnostic Manual of Mental Disabilities (DSM-5) recognized that pedophilia was a sexual orientation but then explained it away by stating it was a typo. For sociopaths, pedophilia is a sexual orientation because admiration is the cause of the desire to molest children and inflicting emotional abuse on child development results visual signs of debility that symbolizes their self-importance without perceiving a negative quality.

Also, psychopaths may falsely assume sociopaths are similar because they both use the Reptilian complex; however, sociopaths know how to manipulate psychopaths and manipulation can instantly deprive psychopaths of their courage, perspective, or ability to react. If a psychopath is influenced from a position of power to act immorally, they become powerless. The historical function of powerlessness through unethical behavior was to provide safety to their community. However, psychopaths have no warning of the incredible damage resultant from unethical behavior because they lack the fear or incentive without coercion. Unethical decisions will also distort the psychopath’s value system so that victims will be perceived as having less value than the victimizers. However, any value changes in perceived worth are illusions to prevent the shame that unethical behavior creates. Therefore, maintaining ethics and human rights are both essential for democracy because of the weakness that results and the vulnerability of perception changes.

Throughout history, psychopaths were essential to the survival of their communities, which is why pride is essential for their function. Psychopath perceives social values from the perspective of an animal in a pack and lack emotion due to the Reptilian complex’s brain usage. The historical function of psychopaths is the leaders and warriors that protect their communities caused by their pride that is essential to their function and decision making. Psychopaths protected people with emotions and were essential for communal living. Psychopaths did not need emotions due to leadership and warrior functions since they create a liability caused by emotional damage or susceptibility to emotional manipulation. In films, psychopaths are in action movies because they are the lead characters. Currently, psychopaths are almost all police officers, politicians, judges, lawyers, military people, athletes, leaders, and firefighters.
To understand the historical function of the psychopaths, picture a group of children playing in a community throughout the world and throughout human history. The adults pretend not to watch the children as they played but look for a child with certain expressions. The children that shared were kind, and polite were not valued because they were normal and not essential to their survival. When a child displayed expressions of a psychopath, that child would have incomparable value for the survival of their community. Psychopath children compete for dominance, lose their temper quickly, become distracted, are emotionally insensitive to peers, fiercely competitive, strong-willed, and potentially hyperactive. When a village discovered that a child was a psychopath, they celebrated from knowing that the child would eventually protect, guide, and provide for their community.

Psychopaths lack emotions because emotions are for the social interaction of community members. Emotions are to create social harmony, bond families, and guide decisions: guilt or shame to deter adverse choices and self-esteem to reinforce the right choices. Rulers, leaders, and warriors give and follow orders, so they do not need to create social harmony or form bonds. They need to be most responsive to other people admiring them so that they are led by community members to make the right decisions. Instead of emotions, pride is the basis of their decision making which protects the people in their community because pride incites the desire to protect community members.

Psychopaths have been the warriors and leaders throughout human history because they are genetically predisposition to keep their communities safe. Lack of emotions enables them to defend their members incomparably because the competition is subject to exhaustion, manipulation, or trauma, while the psychopath has immunity. Also, destruction gives a positive response if required for the survival of their community members since it displays symbols of power and status. Consequently, the lack of intrinsic values of self-esteem is also beneficial to redirect a psychopath since the smallest member of their community can shame a psychopath into preventing the desire to hurt community members. Shame makes a psychopath instantly worthless, which is why freedom of speech is essential to guiding psychopaths in leadership positions in a democracy. Psychopaths require the opportunity to have their decisions challenged to ensure that the best decisions were made since they cannot anticipate the emotional damage of people in their protection.
My Human Rights Complaint

To better explain what transpired, background information is provided to understand who I am and what happened to me. I taught children in Asia for six years, and lived in Berlin for three years, pursuing fine arts. I cycled from Berlin to Istanbul and enjoyed long-distance cycling. I have an undergraduate degree with a double major in German and Psychology. Then, over the last four years, I worked at the University of Manitoba, assisting students with disabilities by writing academic papers and taking in-class notation. A couple of years ago, I wrote a patent for imaging in cosmetic tattooing. The same week that false allegations were made to obtain a mental health assessment, I defended my patent to the United States patent office against one owned by L’Oréal cosmetics. If granted, I would have a three-month window to file national patents anywhere in the world. I worked hard to be able to capitalize on that opportunity. I enjoy writing patents because it is a beautiful experience, like drawing or painting.

Even though I traveled more than 40 countries, what I experienced at the Health Sciences Center was incomparably worse than anything I have ever experienced anywhere in the world. Mental health facilities have a history of abusing patients, and many patients have committed suicide in these facilities due to the torture, isolation, abuse, and humiliation. Community support programs were established to protect people with intellectual disabilities from abuses that were occurring in mental health facilities. However, as I experienced, mental health facilities were neither outlawed nor improved to provide protective measures to prevent abuse of patients from continuing. Sadly, there is nothing crueler than enabling the emotional abuse of people that are victims of abusers.

On February 14, false allegations were made by my estranged sibling, causing me to undergo a mandatory psychological assessment. I was accused of seeing ‘brain-eating zombies’ and yelling at them on the street. A magistrate signed a Form 2 based on those accusations, which resulted in having two police officers escort me for a mandatory mental health assessment. I brought the creative writing document I wrote entitled ‘Zombies’ in case I needed to explain the title since I could not think of anything else that could be considered controversial. At the hospital, I waited for ten hours to see a doctor. I decided to get something to eat and left the room I waited in since I did not know I was obligated to stay. A security guard directed me back to my room, then pinched the back of my arm and twisted the pinch to increase the pain before locking me in. Instead of using language, inflicting pain was considered acceptable. A different culture is created in mental health facilities in which abuse of patient is standard.

The first interview I had was with Dr. Nwankwor, a psychiatrist, and Dr. Sutherland, a psychiatrist in residency. The first question they asked me was if I was dating anyone with five different methods. I was polite, but the doctors were bizarre. We spoke about my job, my patent, and I was asked about my belief in zombies. I explained I used the term as a metaphor in a creative writing project. Then, I gave Dr. Nwankwor the creative writing document I wrote, and he read it for ten minutes, and camera evidence
shows him handing it back without showing his colleague. I was told that I might have to stay for 24 hours. Initially, I started crying while I spoke because I was jeopardizing my jobs, and I did not want to stay with people that I did not feel comfortable with. However, when Dr. Nwankwor kept repeating himself to watch me cry, so I shut off my vulnerability and accepted that the situation was beyond my control and waited for an opportunity to leave.

The staff humiliated me, as documented in my medical file. A method doctors use to insult patients and incite abuse from staff is to make derogatory comments in the medical record but attribute them to a third party by stating that it is ‘collateral’ information. From the first day, ‘collateral’ comments described me as sexually promiscuous, described me as stupid, and mocked me for thinking that I could make money from my patent. When I received my medical record, I saw that Dr. Nwankwor filled out two forms to detain me with accusations of seeing ‘brain-eating zombies’. He wrote that I was a risk to myself, someone else, and in a severely deteriorating condition; however, he later stated in his response letter to my complaint that I was not a risk to myself or anyone else. Also, in our second meeting, we were only alone for 3 minutes, so his accusations were impossible as camera evidence will show.

I was confined for two weeks without knowing the accusations or the reason for my detainment. I was told to take medication without being able to know the reason why medication would be needed. Comments in my medical file were written by doctors to incite staff to disrespect and humiliate me. I was imprisoned and tortured at the Health Sciences Center because I would not state that I had a mental disability or take medication. I was told that if I run away, then the police would find me and make me return. I was not allowed to go out of a two-room environment for a week. Then, I was permitted to go for a walk once a day for an hour, if a family member was with me. The doctors would not speak to any of my family members that were visiting me regularly and wanting to testify that there was no reason to detain me. Every day I was told to take medication because I was sick; however, the staff refused to tell me any reasons for needing medication. The nurses would taunt me by stating that the doctors almost know what I have, and they have the same opinion, but without telling me any other information. Luckily, I refused all medication and stayed calm throughout the incarceration. The nursing staff was trying to drug me with high doses of Lorazepam and Haloperidol, which the prescribing doctor later denied prescribing. Not taking the medication saved my life.

Even though I was told that I could email my work to maintain having jobs, a nurse refused to let me while her colleague watched a movie on the computer. She slowly explained that I would not be working anymore after this situation because I would be on social assistance for having a disability. She stated that I would not be permitted to send an email because there was no reason to save my job since I would no longer be working. It made me sick to think of being on social assistance. The nurse indicated the only reason to keep me at the hospital. They obstructed my ability to file my patent internationally and make me lose my jobs. Everything that I worked for years on was destroyed for no reason.
Two doctors facilitated Dr. Nwankwor to imprison me. One told me the wrong information to deter me from filing for an independent review, and the other recorded that my patent was a psychotic delusion based on a stereotype. Dr. Jwely told me on my second day that the longest doctors could detain me by filling out forms without my knowledge was two weeks, and he advised me not to file for an independent review. However, they could have detained me without telling me why for six months. Therefore, Dr. Jwely intentionally lied to mislead me so that I did not file for an independent review. Luckily, I filed anyway, but the appointment was in two weeks. Also, I met with Dr. Perelli, and when she asked me about my patent, I explained it to her. Then, she filled out a Form 6 to detain me for having a psychotic delusion, she did not think I was smart enough to write a patent, and she attested to me being a risk to myself and someone else. However, she pretended to believe me when I spoke without asking me for proof that I could have provided since googling my name was all that would be required because the patent is public record. I did not assume that professionals with their stature and responsibilities used stereotypes to determine credibility, nor did I assume that my stereotype was inability.

Finally, on February 26, I was told what was written in my first interview with Dr. Nwankwor and could deduce that he fabricated our interactions. I finally had enough information to refuse participation because I was not safe since a doctor can make any accusations without my knowledge or ability to defend myself. Since I was not a risk to myself or someone else, and the date for the independent assessment was fast approaching, I was permitted to leave. A month later, after my release, it was my first opportunity to obtain my medical file. When I read it, there was no reason ever presented to detain me. There was no record of me being a risk to myself, someone else, or having any deteriorating conditions. I had perfect health and conduct every day. The accusations against me were seeing 'brain-eating zombies' and that writing a patent was considered a delusion. Although the document I wrote entitled zombies was in my medical file, it was later removed. However, comments in my medical record from nurses refer to it being included, which disproves the accusations that were used to detain me.

My patent was granted in March of 2019. Although I had a three-month window to prosecute my patent internationally, due to the incarceration, I lost both my jobs and was unable to finance international prosecution. When I was incarcerated, I warned the medical staff that staying at the hospital would make me lose my jobs and be unable to finance the international application of my patent. However, they confined me, tortured me, and delighted off my potential misery.