
INVOLUNTARY COMMITMENT AND FORCED PSYCHIATRIC DRUGGING IN THE TRIAL COURTS: RIGHTS VIOLATIONS AS A MATTER OF COURSE

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A commonly-held belief is that locking up and forcibly drugging people diagnosed with mental illness is in their best interests as well as society's as a whole. The truth is far different. Rather than protecting the public from harm, public safety is decreased. Rather than helping psychiatric respondents, many are greatly harmed. The evidence on this is clear. Constitutional, statutory, and judge-made law, if followed, would protect psychiatric respondents from being erroneously deprived of their freedom and right to decline psychiatric drugs.

However, lawyers representing psychiatric respondents, and judges hearing these cases uncritically reflect society's beliefs and do not engage in legitimate legal processes when conducting involuntarily commitment and forced drugging proceedings. By abandoning their core principle of zealous advocacy, lawyers representing psychiatric respondents interpose little, if any, defense and are not discovering and presenting to judges the evidence of the harm to their clients. By abandoning their core principle of being faithful to the law, judges have become instruments of oppression, rather than protectors of the rights of the downtrodden. While this Article focuses on Alaska, similar processes may be found in other United States' jurisdictions, with only the details differing.

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BE PART OF THE SOLUTION; NOT THE PROBLEM



The story the American Psychiatric Association and individual psychiatrists (Psychiatry) have been telling their patients and the public is not true.

There are no proven chemical imbalances or other known brain defects that result in what gets diagnosed as mental illnesses.

Most of the drugs given to treat people diagnosed with mental illness are no better than placebo and many cause tremendous physical problems.

The second generation of so-called "anti-psychotics" (neuroleptics) are effective for few and harmful to all. Contrary to drug company hype, they are not more

effective than first generation neuroleptics and far more harmful.

Largely as a result, the disability rate of people diagnosed with serious mental illness has increased 6-fold on a per capita basis since the introduction of the supposed miracle drug Thorazine in 1954.

Largely due to the use of these drugs, the life expectancy of people diagnosed with serious mental illness is 25 years less than the general population.

The stimulants used to treat Attention Deficit Hyperactivity Disorder and the so-called antidepressants have dramatically increased the incidence of people diagnosed with bipolar disorder and converted it from a good prognosis diagnosis to one that is quite poor.

The ubiquitous use of psychiatric drugs is at least halving the percentage of people who recover after being diagnosed with a serious mental illness; it appears about 80% of the people presenting with an initial psychosis can recover if they are not given and maintained on psychiatric drugs.

The American Psychiatric Association and individual psychiatrists are either fooled or complicit to the extent they do not publicly acknowledge **and act on** these facts.

Sources: [Anatomy of an Epidemic: Magic Bullets, Psychiatric Drugs, and the Astonishing Rise of Mental Illness in America](#), by Robert Whitaker; and [Scientific Research by Topic](#) on PsychRights' website.

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