Reports: Human rights in psychiatry. Options for emotional support.

Inside this issue:

- * New coalition forms
- * Electroshock update
- * Freedom posters!



NEWS * issue #18 * July 14, 1990 * FREE

Even a snowball in July has a chance...

Not only does this snowball have a chance... We're going to show you how to "snowball" the posters in this issue into a powerful campaign to break the silence about human rights violations in psychiatry. But why should you?

As you probably know, psychiatric survivors form one of the poorest groups in society. We're isolated. We're given terrible labels that lead people to distrust us.

So important news — on electroshock, alternatives, and political action — is often ignored by the media.

In the last few years, the government has given more funding and recognition to psychiatric survivors. We now have conferences, drop-in centers, and advocacy groups.

But government funding tends to shy away from strong human rights protests, lobbying, and controversial media. (After all, the U.S. does not fund Greenpeace, does it?)

And that means we need to use self-help to get out urgent messages. We need to turn to other social change movements for mutual support. Mainly, we need to act.

Dendron News has been publishing for two-and-a-half years. The past seventeen issues have been packed with news, views, resources, letters and more — all about human rights and alternatives for psychiatric survivors.

But this is a special issue. We've printed thousands.

This issue isn't just for you. It sums up current news, so you can share it with others.

Inside you'll find half-a-dozen posters. They are a convenient size so you can easily photocopy them. Plus, you can write to *Dendron* for extra free copies (please send a donation for postage).

You might not agree with all the posters. But with those you do, please join in this campaign! If you and others copy, hand out, post and mail these posters, then the news will grow *like a snowball rolling down a hill*.

Look at these posters as a tool to break the walls of silence on crucial news. Let us know how you do!

If we don't do it, who will? If not now, when?

And if you want to join the network of *Dendron* readers, consider subscribing (see back page). You're also encouraged to mail in your articles, letters, art and poetry.

In struggle & support,

David Oaks, Editor

The Support-In:

A new coalition starts to fight forcible psychiatric procedures!

by Janet Foner, Co-Coordinator

A new coalition, with the proposed name of "The Support-In," was launched in mid-May 1990 with a number of successful events held throughout the U.S. and Canada. Of special note: Though primarily led by psychiatric survivors, this coalition is open for membership to the general public.

From May 11 to 15, The North
American Support-In to Celebrate
the Human Spirit was held at the
American Youth Hostel and other
sites in New York City. Some
15,000 psychiatrists were arriving
in town for the American Psychiatric Association Annual Meeting. The
Support-In was a counter-conference—
including protests and a festival of
alternatives— with a goal of "breaking
the silence about psychiatric oppression."

The event was a great first victory for this coalition, thanks to many hard-working unpaid organizers, and to about 150 participants who worked cooperatively together to see that a supportive community was formed for five days.

Buoying the spirits of everyone was the knowledge that simultaneous events were being held in other parts of North America. Protests, public forums, picnics, and other Support-Ins were held in various sites, including Georgia, Colorado, California, Oregon, Massachusetts, and Toronto, Canada.

All these events also broke the silence in our own movement: That we can take strong stands on human rights issues, that we can have events without just depending on mental health funding, and that we can gather harmoniously to take action.

In New York City, highlights included: A peace-keeping meeting formed peace teams... who were never needed. A spirit of fun-loving spontaneity and sharing (of food, space, information, emotional support) pervaded the conference. An ongoing coalition was formed, met, and decided on its guiding principles. And we even had our own colorful t-shirt (see resource guide in this issue of *Dendron*).

A new word: Support-In. You've heard of Sit-Ins from the Civil Rights movement. You recall Teach-Ins from the anti-Vietnam war days. What is a Support-In? It can be legal, but it still takes courage. A Support-In is when individuals, mutually supporting each other emotionally, break the silence about psychiatric oppression.

For example, in New York City, in front of a small audience of psychiatrists at their APA Annual Meeting, a half-circle of 22 psychiatric survivors (and two professionals) put their arms around each other, and talked about people who psychiatry had killed.

You can hold a Support-In. It can be as small as a few people gathering in a living room. Or it can be part of a vigil at a "shock-shop," in front of TV cameras. With the support of others, people can dare to be emotional, can dare to break the silence.

Workshops, scheduled by Kate Sullivan, were held on many subjects, including interdependent living, co-opting your mental health system, disability rights, and fighting racism. Caucuses met of various survivor groups, including women, men, gays/lesbians, physically disabled, young adults, shock survivors, seclusion & restraint survivors, and attempted-suicide survivors.

The biggest highlights were two protests and a "Mad Celebration."

The first protest was held across from the huge Javits Center, where the A.P.A. was meeting. A circle of 50 people sang, held hands and had a "Support-In." Led off by Co-coordinator David Oaks with a burst of emotion, each of us remembered friends, relatives and others who had been killed by the psychiatric system. We then rallied in front of the entrance to the APA's annual meeting, until we were stopped by a very heavy rainstorm. Inside the hall, Mather Pfeiffenberger, Ron Thompson, Bill Cliadakis and others tried to interest the media in our issues. (We ended up with some newspaper and radio coverage. But the main lesson was: "Get bigger, get stronger, and the media will have to cover you.")

The second protest reached more passer-by, since it was held near the Rockefeller Center in front of a Hilton Hotel where shock doctors were having an all-day workshop about how to give electroshock. Signs included "Hey, hey APA: How many brains did you fry today?" Kate Millett, the feminist author, called upon people to "revolt against the jolt." She was about to begin her national tour for her new book about being a psychiatric survivor: *The Loony Bin Trip*. We wished her luck.

The Mad Celebration, coordinated by Gail Bluebird & MC'd by Howie the Harp, had moving performances. There was an original dance, called the Tree of Life, about surviving in shelters, performed by the mainly-black homeless group, Unforgotten Voices. Elaine Kolb, a disability rights activist, sang songs from her album, such as "A Crip Can be Hip." We were getting back to the roots of our movement: connecting to other oppressed groups. There was also poetry, and a jam with Bob Harris and others.

Twelve groups sponsored the Support-In, and about 20 groups and 200 individuals endorsed it. These will form the basis of a new coalition against forced psychiatric procedures. The principles for joining include being democratically run, opposing psychiatric coercion, and promoting humane alternatives.

Find out how to join the coalition by sending a note asking about "The Support-In" to: Dendron News, PO Box 11284, Eugene, OR 97440.

You could help get a public hearing in Congress on ELECTROSHOCK!



Throughout the U.S., electroshock is now making a comeback! Few people are adequately warned of the dangers, or offered a full range of alternatives.

In the spring of 1990, the American Psychiatric Association (APA) came out with new guidelines on electroshock, reassuring the public that shock is safe. But is it? The APA recommends that shock doctors tell patients that *only one in two hundred* people given shock end up with long term memory problems. However, according to a 1985 official federal report from the U.S. National Institutes of Health, *many* people report memory difficulties even three years after receiving electroshock.

The Food & Drug Administration (FDA) has classified electroshock devices as hazardous since 1979, and was required to investigate electroshock for safety. But the FDA may soon give shock a stamp of approval, without any investigation.

The public — including thousands who are shocked each year — have a right to know about electroshock hazards. Electroshock should be investigated for safety. *You can help!*

Take action! A Congressional subcommittee oversees investigating medical devices. You can write to the chair of this subcommittee, Rep. Henry A. Waxman, and ask for a public hearing on electroshock. You can also write to other members of his Subcommittee on Health & the Environment, listed in the box here by their state. Write to them at their Washington, D.C. address, given in the sample letter below.

If you live in a subcommittee member's home state, you have a special role in breaking the silence on shock! Congresspeople often listen more to their state's residents. It's extrapowerful if you live in or near towns they serve (in parentheses), but this isn't necessary.

So write now! And help find other individuals and groups who can also write soon!

Subcommittee on Health & the Environment: CA (Los Angeles) Henry A. Waxman, Chair

CA (San Diego, Chula Vista) Jim Bates CA (Fullerton) William E. Dannemeyer

FL (Clearwater, Plant City) Michael Bilirakis

GA (Macon, Dublin, Waycross) J. Roy Rowland

IA (Dubuque, Cedar Rapids, Clinton) Thomas J. Tauke

IL (Danville, Champaign) Terry L. Bruce

IL (Chicago, Oak Park) Cardiss Collins

IL (Kankakee, Bloomington, Lincoln) Edward R. Madigan

KS (Augusta, Emporia, McPherson, Pittsburgh) Bob Whittaker

MI (Dearborn, Monroe) John D. Dingell

MN (Coon Rapids) Gerry Sikorski NM (Santa Fe, Gallup, Las Vegas) Bill Richardson

NY (Baldwin) Norman F. Lent

NY (Flushing, Bronx, Nassau-Great Neck) James H. Scheuer

NY (Brooklyn) Edolphus Towns

OH (Mentor) Dennis E. Eckart

OK (Muskogee) Mike Synar OR (Portland) Ron Wyden

TX (Houston) Jack Fields

TX (Rockwall, Sherman, Tyler) Ralph M. Hall

UT (Provo, Salt Lake, Moab) Howard C. Nielson

VA (Richmond) Thomas J. Biley, Jr.

Write to Rep. Henry A.
Waxman — and to others on
his subcommittee — at this
Washington, D.C. address.

Sample letter:

Representative ______US House of Representatives Washington, D.C. 20515

Dear Rep. _____:

I am writing to ask that the Subcommittee on Health & the Environment hold a public hearing about the safety of electroshock devices, used by some psychiatrists. The Food & Drug Administration has not investigated electroshock, as it should. Please hold a public hearing soon! Thank you.

Sincerely,
[Your name]

Photocopy, hand out, mail and post this notice! Published by Dendron News, July 1990. For more information, write to Dendron News, PO Box 11284, Eugene, OR 97440.

Mental freedom means...

human rights in psychiatry poster #1

the right to choose!

Often, the current mental health system offers those of us who use it a very limited range of alternatives. Experts act is if it's a game of "us" against "them."

They try psychiatric drugs on us.

They try traditional talk or group therapy.

They try a locked ward, plus solitary confinement, with some restraints thrown in.

They try electroshock as a "last resort."

They devise model programs — for fixing our "problems" with jobs, skills, social life, etc. — that feel like something done to us, from on high.

And that's about it, too much of the time.

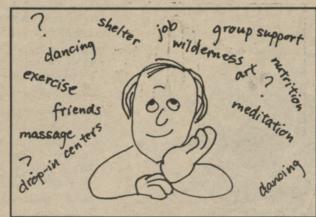
Some report they benefit from these approaches. But even many of these folks say they also want something *more*, something *different*.

And what about those of us who want and demand alternatives to this limited approach? When we are in emotional need, we can feel forced by circumstance to pick whatever's available. But if there's not much on the menu, it's time to try another restaurant.

What are the alternatives?

Many people say they are helped emotionally by support that looks at them as a WHOLE person and EMPOWERS them. (For short, call it the "W.E." model, if you really need a model.)

Helping the WHOLE person means focusing not just on our biochemistry, but also on our real life surroundings, such as our income, job, friends, social life, home, environment, nutrition, exercise,



and even if we are oppressed by society. For instance, racism and sexism and poverty can have a real effect on a person's emotions.

EMPOWERING us means we need a real amount of ownership in whatever is helping us. Even in heart attack survivors, doctors are finding that people who *take charge* of their own lives do better. *Forcing us* to do something can break our spirits, when our strong human spirits can help us.

Some people argue that biochemistry is the main problem, so chemicals (through pills) are the main answer. But the fact is that even when biochemistry is the main problem, countless things in our life *effect our biochemistry*. Some people choose to focus on pills as the answer, and that can

be their right. But what about those of us who want alternatives that in the long run might be less harmful and more powerful?

Once we are open to alternatives, countless possibilities arise. This is not about a "magic bullet" to quick-fix a problem. It's about choice.

Some alternatives are available now, and are proven to work for some people. Others need to be created and funded. When you think about it, many alternatives are common sense and have been around since human beings evolved. After all, everyone has emotional problems at times.

Emotional-support workers sometimes feel threatened by these alternatives. They think it means fewer jobs, and less control over their lives. But actually, many humane alternatives require hiring more workers, to truly help people as equals instead being psychiatry's police officers.

Alternatives that have helped the whole person, and empowered them, include: • User-run support groups, drop-in centers, housing. • Meeting basic human needs of adequate shelter, nutrition and income. • Taking political action together to change our society, and overcome powerlessness. • Mutual support between equals. • And inexhaustible other options, too numerous to list, including exercise, trips into nature, hugs, massage, meditation, prayer, friendship, good jobs, creative arts, and on and on... What are your alternatives?

Dendron News wants to report your favorite alternatives. In 50 words or less, describe a way that you like to gain emotional support. (You can send in more than one entry.) Send your entry to Dendron News, PO Box 11284, Eugene, OR 97440. And please photocopy & distribute this poster!

Mental freedom means...

human rights in psychiatry poster #2

the right to know!



People "treated" for emotional or mental problems are often kept in the dark. Here's one example:

December 11, 1990 is the 40th anniversary of the first testing of Thorazine, a powerful psychiatric drug. Since 1950, dozens of brands in this family of drugs — which are called the "neuroleptics" — have been put on the market.

And now a new, very expensive neuroleptic — called *Clozapine* — is being given to people.

Yet, despite 40 years of use, drug companies are still covering-up some of the long term hazards of all neuroleptics. Doctors often don't warn people about very real dangers. In fact, it is common practice to physically-force injections inside institutions, or to obtain a court order to coerce time-released injections outside institutions.

Of course, some people report they benefit from neuroleptics. That's their right. The issue is not pro- or anti-drug. The issue is: Everyone has a right to know the effects of drugs they are given.

Little known facts:

- On December 11, 1950, French researchers chose Thorazine by testing various chemicals on rats in a search for what they called "maximum behavioral disruption." They chose Thorazine when the rat became confused and unable to decide whether to climb a rope for food.
- Neuroleptics are among the most powerful and widely used drugs in all of medicine. Some 3,000,000 Americans are given the drugs.
- Neuroleptics are often given blatantly to control behavior as a chemical strait jacket especially when used, as they often are, on elderly nursing home residents, prisoners, children, and people labeled "retarded."
- According to psychiatrist Dr. Peter Breggin, there is significant clinical and research evidence that the neuroleptics produce brain damage in about half of long term users. This not only includes a well-known twitching ("tardive dyskinesia"), but also a general loss of higher-level mental functions, known as dementia. Some call this the lobotomy effect.
- Clozapine, the newest neuroleptic, may cause less tardive dyskinesia. But there is evidence that this may be because Clozapine might instead cause a *worse* lobotomy effect.
- Many of the neuroleptic's hazards are only seen when the drugs are stopped. In other words, "withdrawal" from these drugs can reveal even worse mental problems than there were before the drugs were started. The person is therefore often just put immediately back on neuroleptics.

What are neuroleptics?

The family of drugs called "neuroleptics" are also called "anti-psychotics" or "major tranquilizers." Neuroleptics are far stronger than minor tranquilizers such as Valium.

You might recognize some of the common brands: Haldol, Prolixin, Navane, Clozapine, Mellaril, Stelazine, Compazine, Thorazine, Dartal, Daxolin, Lidone, Loxitane, Moban, Orap, Permitil, Proketazine, Quide, Repoise, Serentil, Sparine, Taractan, Tindal, Trilafon, Vesprin.

An excellent description of most psychiatric drugs, their effects, and withdrawal advice is called "Dr. Caligari's Psychiatric Drugs" and can be obtained for \$6 from NAPA; 1442-A Walnut #432; Berkeley, CA 94709.

Dendron News, which published this poster July 1990, also has information: Write Dendron News, PO Box 11284, Eugene, OR 97440. Please photocopy and distribute this poster!

- A regular, prescribed dosage of neuroleptics can and does kill many people through choking, heart and brain problems.
- Some people on neuroleptics for years have slowly gotten off of them successfully, often using a great deal of personal support.
- There are effective alternatives to overuse of psychiatric drugs, for those who want them. Unfortunately, many of these are not funded or offered, partly because immense profits go to one of America's richest industries: pharmaceuticals.

the right to refuse!

Today, in the 1990's, the U.S. government has a war against drugs. But it also has a war to forcibly drug its citizens.

The U.S. tells people to "Just say 'No' to drugs." But there are thousands who the U.S. does not allow to say "No" to drugs.

These are people who are physically forced, pressured or coerced to take

powerful psychiatric mind control drugs. Inside institutions they are threatened with being held down and injected. Outside institutions they are coerced, at times by court order or eviction, to take their "meds."

This isn't just about psychiatric inmates.

It's also about children required to take ritalin (a form of speed) to attend school. It's about 40% of elderly people in nursing homes given psychiatric drugs to manage their behavior. It's about the huge number of people labeled "retarded" who are given the drugs in group homes for no medically indicated reason, except as a chemical strait jacket.

And, in February 1990, the U.S. Supreme ruled that prisoners have absolutely no rights to refuse forcible injections of psychiatric drugs, simply to maintain routine prison "security."

There are less deadly alternatives.

What makes all this an even worse crime, is that in all of these cases there are better, safer, more humane ways to help.



And what makes this all even more tragic, is that the drugs used can cause brain damage, addiction or even death.

For instance, "neuroleptics" such as Mellaril, Thorazine, Navane, Clozapine, Stelazine, Compazine are often given. The effect of injections of certain neuroleptics, such as Haldol and Prolixin, can last for weeks in the body. All neuroleptics can cause brain damage, including a lobotomy

effect, in about one-half of long term users. Even a regular, prescribed dose can kill by choking, heart or brain problems.

In many states, a person with a psychiatric label can be court-ordered to report to their mental health facility for regular injections of Haldol, Prolixin, etc. If the person does not show up, they can be immediately locked up. For certain refusers, the state sends out a vehicle with attendants to forcibly administer the mind control drug *in the person's own home*.

Silence is complicity!

Forcible or coerced drugging is an outrageous violation of basic human rights. That the people drugged are vulnerable or have been labeled by a professional is no excuse: Fascism always attacks those least able to resist. At least at first...

Please photocopy this poster. Hand it out. Mail it. Post it. You can break the silence!

For more information, write to *Dendron News* (which first printed this July 1990) at PO Box 11284, Eugene, OR 97440.

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Here's a sample check list of resources to help your campaigns. Please copy it and pass it on. This is only a partial listing.

newsletters, etc.

✓ newsletter: National Association of Psychiatric Survivors; PO Box 618; Sioux Falls, SD 57101

✓ newsletter: Counterpoint; Westview House; 50 South Willard

RESOURCES for human rights & alternatives in PSYCHIATRY

Street; Burlington, VT 05401

✓newsletter; buttons: Alliance; 826 Euclid Ave.; Syracuse, NY 13210-2541; (phone) (315) 472-5232

✓newsletter & human rights conference: NARPA &

Tenet newsletter; Bill Johnson; c/o MHA of MN; 328 East Hennepin Avenue, 2nd fl.; Minneapolis, MN 55414; phone: (612) 331-6840

✓newsletter: Psychiatric Survivors; Alice M. Earl; 1097 Longmeadow Street; PO Box 60845; Longmeadow, MA 01116-0845

√news packet, speaker,

author: Teleconference; Judi Chamberlin; Center for Psych. Rehab., B.U.; 730 Commonwealth Avenue, 2nd Fl.; Boston MA 02215; phone: (617) 353-3549 (or) (617) 628-8438 ✓newsletter: Dendron News, PO Box 11284, Eugene, OR 97440.

speakers, etc.

✓author, speaker: Kate
Millett; 295 Bowery; New York, NY 10003

√speaker, consultant,

trainer: Janet Foner; 920 Brandt Avenue; New Cumberland, PA 17070; phone: (717) 774-6465

✓author, speaker: Don Weitz; 100 Bain Avenue; #12 The Oaks; Toronto, Ontario m4k 1e8 CANADA; phone: (416) 461-7909

✓author, speaker: Dr. Peter R. Breggin; 4628 Chestnut Street; Bethesda, MD 20814; phone: (202) 652-5580

✓author, speaker: Huey Freeman; PO Box 84; Urbana, IL 61801

other info

✓electroshock info:

Committee for Truth In Psychiatry; Marilyn Rice; 2106 South Fifth Street; Arlington, VA 22204

✓electroshock info:

Leonard Roy Frank; # 603; 2300 Webster St.; San Francisco, CA 94115

√tardive dyskinesia

info: TD/TD Nat. Assoc.; Sonja K. Kjaer; 4244 University Way, N.E.; PO Box 45732; Seattle, WA 98145-0732

✓audio tapes: Dennis F. Nester; 4510 East Willow Avenue; Phoenix, AZ 85032

✓ video tapes: President of National Mental Health Consumers Association Paul Dorfner; White Light Videos; 7 Kilburn Street; Burlington, VT 05401

T-SHIRT!

This beautiful three-color design, created on a Macintosh II computer, represents a mutual support group as seen from above. Around the design it says: "Support-In to Celebrate the Human Spirit." In the middle it says: "Break the Silence about Psychiatric Oppression." One of a kind! All cotton.



T-shirt: \$10 each. Indicate size & quantity:smallmediumlargeextra-largedouble-extra-large (Add mailing charge of \$2. to any order under 5 shirts.)
Also available (in large size only): Tank top: \$8. Long sleeve: \$12.
Name
Address
CityStateZip
Make check or money order out to: Dendron. Mail to: Dendron, PO Box 11284, Eugene, OR 97440

[Flip over page to see opposite side for Dendron subscription coupon!]



It's just not normal... to subscribe to



Not yet, anyway! Your subscription helps you network with — and build – a diverse and unique and growing movement.

Dendron rings the alarm bell about important human rights campaigns. Plus, Dendron reports success stories from people exploring alternatives for emotional support. Dendron also reviews resources, such as videos, books, conferences, buttons and funding sources. And Dendron is fun, too, with creative humor, art (thank you Kate Sullivan & Debra Nuñez for drawings in this issuel), poetry, interviews and more. Subscribe now! Join the network!

Dendron back issues!

\$1.50 each.

All of the below issues, \$25.

Alternatives '88 Conference gathers more than 1,000 ex-inmates. 17: as an alternative. Parent's alliance tries censorship. 11: Psychiatric Spirituality & psychiatry: The inquisition continues. Creative spiritual issue (\$3.) on taking action: Kate Millett tells her story. Psychiatric Federation of Mental Health Consumers forms. 1,200 ex-psychiatric teleconference networks. D2: Interview with R.D. Laing. Wilderness U.S. Supreme Court hears forced psychiatric drugging case. World US Supreme Court approves forced drugs. 115/16: Special double 17. Chapter from Kate Millett's new book; electroshock cover-up. effect of psychiatric drugs. U.S. government censors psychiatric emergence. 11: Psychiatric drugs cause brain damage epidemic. racism blasted. Clozapine: A kinder & gentler brain damage? 114: Thorazine, Lithium & shock. D6: Co-operation or co-optation: How critic. Protest of American Psychiatric Association meeting. 012: group. Psychiatry & war. Break the silence, by George Ebert. [3]. Controversies split the Movement. Kids' lib. ☐4: Inside a self-help inmates gather at U.S. alternatives conference. 13: Lobotomy Mass media coverage. Survivor theatre. 010: Anti-electroshock Psych. drugs harm brain. Psychiatry's link to pesticides. Federal demonstration. Success story of "street crazy." Human rights covered.Self-help solitude & scream rooms. □9: What are the Forcible drugging, how does it feel? Animal abuse linked to drugs: role of force, death, profits. Black civil rights lessons. alternatives? Movement unity. 18: Campus mind control. can we work with professionals? Gay & lesbian rights. US

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