

A ROUGH DRAFT FOR THE TRANSLATOR OF MICHELE'S KEYNOTE

I am pleased to be here today.

Thank you, Vicente and others_____. I love Mexico and visited many parts of this beautiful country over the last thirty years but this is my first time in Puebla. Also this is my birthday, so it is a double special day.

I am delighted to be at a conference of **psychologists.**

Each of our specializations-- Ed psych. Counseling, social, neuropsych,community, clinical--represent different **branches of the same tree.**

Of all the academic pursuits, we are the field most interested in the **relationships between brain, the mind, and society.**

Whatever our specialization, the true job of a psychologist is to love and preserve the brain as an

organ AND the mind-- that thinks and imagines, dreams and can envision a new future for society.

My life experience is in the clinical world, so I will speak to that today. But I hope that all the fields represented here will have something to take home with them from this talk.

The Focus of my talk is THE SPEEDING UP OF SOCIAL TIME AND the impact that TIME PRESSURES have upon our STATE OF MIND and UPON THE STANCES we take in life. I will explain how I learned that TIME is an important variable in therapy and I will explain what TIME has to do with TRANCE STATES or STATES OF MIND and WHAT IT HAS TO DO with our problems and How we handle them.

It was in the early nineteen-eighties that

I realized that the human experience of time had changed forever and that psychological methods hadn't caught up with that change.

This change became clear to me in my own home, the first night I was to use a brand new microwave.

Until that night, I had cooked a nice dinner for my family of four.

THAT night, My four year old son was playing Nintendo in the living room and he asked me, "Mom, When will dinner be ready?" and I looked at this new dial on the big microwave oven, and instead of saying half an hour as I always had, I said, " 35 seconds," ...and he said, " That's too long!"

And I understood,
even as I threw out the microwave in protest,
that my son
was already living in a dimension of time

that was different
from what I had known
and that if this NEW perception of time
was not part of the understandings in
psychotherapy,
the field of psychology was off the mark.

NOW, this issue of time is even more
evident. Fast forward in your mind with
me to one week ago in my therapy office.
A couple comes into my office,
and no sooner had they settled into their
places on the couch
than each of them SIMULTANEOUSLY
Pulled out their cell phones from their
jackets, as if drawing a gun from their
holsters.

EACH one had A saved text about what
had irritated them about the other the
week before.

Before they could read their texts to me,
the husband said to his wife: Listen, I
don't like how my mom is treating you on

FACEBOOK.

I want you to know that it is OK with me if you UNFRIEND MY MOTHER.

Today, in this world of nanoseconds, economic pressures and social and political upheaval, our longer slower therapies do not always address the URGENCIES our clients feel in the moment. For all of us TIME, TIMING and our SENSE OF TIME is NOW perhaps THE CENTRAL issue in determining the therapies we need.

Perhaps we have learned to swim in the river, but suddenly we come to a rapids and we have no idea how to handle it, or a sink hole appears, and we have no idea how to be in the moment with this new challenge. And this new time urgency that began as

minds competing with technology,
leaves us open to quick fixes like the
dreams of the magic pill,
rather than what we need
which is new skill.

It is My dream that psychologists and
some psychiatrists,
even working individual by individual,
can help the people of the world
to deal with the pressures of time
without jumping without just cause to
medications, as if there is something
defective about our brains.

This means having tools to help our clients
be present in this moment.

Every day in my office I watch the
beauty of minds, like flowers with time-
lapse photography, opening.

I want to talk to you about a tool that I
developed

that I refer to as Trance and Stance.
I will tell you how I first learned about
this tool and I will demonstrate this tool
to the whole group and I will show how I
used it with several clients.

I call this tool or technique my Prozak
without addiction or side effects
And it is designed to deal with the
present fast pace of life,
both internally and externally.

So I am going to tell you the story of how
I first identified this approach or
technique and how I developed it over my
lifetime.

It was 1974, and I was a 27 year old
Psych Ph.D., conducting one of the first
controlled studies comparing a new drug,
just out called Ritalin,
with placebo and family therapy
for a group of boys now identified with a
VAGUELY DEFINED SYNDROME that was

HYPOTHESIZED WITHOUT EVIDENCE
BASED RESEARCH that made young boys
jumpy in their classrooms.

I was doing this as a student of Jay Haley
and Salvador Minuchin, at Phil Child
Guidance Clinic and Children's Hospital of
Philadelphia.

A young psychiatrist from my clinic came
back with a first professionally produced
video of THE FATHER OF HYPNOTHERAPY,
Dr. MILTON Erickson's work
to show to Salvador Minuchin, ONE OF
THE FATHERS OF FAMILY SYSTEMS
THERAPY.

Sal, who was my boss and mentor, invited
me into this private viewing.

And the rest is history, as they say.

Dr. Erickson's subject in the video was
Mondy, a beautiful, fair skinned African
American woman in her twenties.

She reported to Dr. Erickson that she

became overwhelmed entering social situations, her heart racing, her mind spinning.

NORTH AMERICAN PSYCHIATRIST TODAY:

If Mondy were seen by 99% of N. Amer. psychiatrists today, she would be given a ten minute interview without any blood tests or xrays, and she would leave the office with a medical diagnosis as if she suffered certain biochemical brain deficits and would be medicated.

Mondy's medical records would state that she suffered social anxiety syndrome. And she would be prescribed Paxel. (It is like assuming fevers are caused by taking too little aspirin.)

DR. ERICKSON PSYCHIATRIST AND PSYCHOLOGIST:

Dr. Erickson, was both an M.D. psychiatrist---

who was cautious in the prescription of

medications, because he preferred to work with the whole mind and body, and not by heightening certain capacities at the expense of others---

and a Ph.D. psychologist, with a pragmatic problem solving approach to human difficulties.

Let's see how he treated this problem with Mondy in the video I watched with Sal.

He asked her EXACTLY what situations made HER feel anxious?

She got nervous when she had to walk into a room with other people in it. She became self-conscious.

He went deeper and deeper into the specifics of this state for her...the unique details.

He entered into the world of THIS
MOMENT BEFORE SHE ENTERS A GROUP.
THE WORLD OF THAT MOMENT FOR HER.

To do so, he used trance to explore what exactly went on inside of her mind, in order to connect with her emotionally so that he could establish a POWERFUL THERAPEUTIC RELATIONSHIP and to identify what was going on inside of her that was producing AN AGITATED STANCE in certain social situations.

THIS PARTICULAR ANXIETY:

He did not look at her complaint as if all people who feel anxious suffer the same underlying unitary defect.

He pondered: What's this anxiety making her feel, think and do that isn't working for her NOW.

IN THIS MOMENT. (Walt Whitman leaves of grass; color red for you)

DEEP CONNECTION THROUGH THOUGHT DETAILS:
IDENTIFY HER CURRENT TRANCE AND

THE RESULTING maladaptive STANCE:

He used trance

TO HELP HER BRING HIM INSIDE OF HER MIND. I will be explaining this in depth later.

When she revisited the feeling she got approaching a group, she was showing herself many disturbing memories like old T.V. shows in her mind that were playing old programs over and over.

The worst old program was a beating she got with a hairbrush by her mother for doing something naughty when she was a child.

Erickson had her relive and memorize that most terrible experience of humiliation and shame that was unconsciously triggered for her when she thought of entering a group.

He learned that JUST BEFORE entering a

group, She imagined the group as big and powerful like her mother was, and herself, small and beaten, as a child. She showed physical changes, she grimaced and winced and her body tightened and contracted during the reliving of the beatings, her rate of respiration changed.

Now Erickson KNEW what was triggering HER anxiety. Not someone else's anxiety, as if it were just a brain problem with no mental or emotional content.

Now, still in THE WORLD OF THE MOMENT SHE ENTERS INTO BEFORE GOING INTO A GROUP,
He then had her turn to a DIFFERENT CHANNEL in her OWN mind where she remembered herself feeling quite the opposite, of happy times.

She remembered playing with abandon chasing ducks. She was the big powerful

force and she was laughing and dancing and clapping her hands as they were flapping their wings and hopping about to escape her.

She was playing with abandon. Without self-consciousness.

During the reliving of these memories, she smiled, opening her eyes, still in trance, her face radiant with a child's mischief and delight. When she did he beamed approvingly at her. Giving her a heavy dose of unconditional love to look at and to use to project onto groups.

STILL IN THE MOMENT BEFORE SHE WOULD NORMALLY BECOME ANXIOUS, He had her go back and forth from one state to another:

From the shameful and humiliated state of Mommy's bad girl taking a painful beating with the brush again and again, to the happy child playing with abandon, chasing

ducks. And he taught her to move quickly to the good one.

Then he taught her how to take that beating, the imagined disapproval of others, that everyone was looking at her with disapproval and judgment, like her mother had done and have that trigger her to switch to her happy self and instead project onto the faces of the people in the group a loving look. The kind of look people might give to a happy child playing with abandon. The kind of look he was giving to her.

They were playing with her usual trance and stance followed automatically by her new trance and stance.

He trained her to open her eyes, feel triggered with upset, close her eyes and literally in the blink of an eye, to add into her old natural sequence a

feeling of playing with abandon,
a new internal and external trance, a
projection of love. He taught her a skill
instead of giving her a pill.

Now I don't have long term follow up on
Mondy, but after watching this video with
Sal Minuchin, at **age 27**,
that was when I decided to work
personally and directly with Erickson for
the next five years, until he died.
I knew I'd witnessed something I was not
being taught in graduate school!

Although I finished my four year research
on Ritalin, I had already concluded that
jumpy little boys needed to learn how to
concentrate. **They needed skill not pill.**

I began to understand that instead of a
diagnosis and a hypothesis of underlying
brain damage, which was becoming the

model of choice for the American Psychiatric Association, and was pressuring the Field of psychology as well,

Erickson gave Mondy the tools to discover THE AUTOMATIC TRANCE she was entering unconsciously in social situations, and to switch to the TRANCE STATE AND STANCE needed to spontaneously handle social situations.

He offered her a way to be present in the moment.

To give this moment a chance to be different from what she'd anticipated it would be.

THE VALUE OF TRAINING IN TRANCE & STANCE

Over the years I have begun to see training like that is the true individualized yoga practice for that person. Or the true tai chi sequence for that person.

Yoga was originally closer to that, a

process taught one on one with a guru who was to help you with a physical and spiritual practice tailored for each student. Even when our clients take yoga classes, study meditation, or learn to use trance states, they do not know how TO BRING THOSE PAUSES INTO the challenging moments and interactions specific to their own fast paced daily lives.

If they cannot ACT or TAKE THE BEST STANCE in the moment, automatically, drawing on these learnings, using their meditations and trances at the moment of need, they will be chronically overwhelmed and break down one way or another at their own point of biophysiological fragility.

In my latest book, *El Tao de una Mujer*, I wrote a verse about it that I'd like to read to you.

1. Practica

Como un pianista
toca las escalas
para perfeccionar
su actuación final,

o un hindú aplica
las posturas del yoga
a fin de mejorar su aptitud
para sentarse en calma,

decide qué quieres
o necesitas hacer,
y divídelo en etapas.

Practica esta danza diariamente,
hasta que la realices
con la rapidez del pensamiento.

Recurre a tus recuerdos y sueños felices
para que te ayuden a transitar
el camino que va
del desánimo
a la creación.

For the next 36 years, I have with considerable success developed these methods I first observed in Erickson's work with Mondy to clients whether they were survivors of our hurricane in new Orleans, Katrina, of torture or of domestic violence;
a wife depressed because after her husband left her;
a bread winner denied the life-long pension promised by his job;
a couple in which the wife's drug addiction is ravaging the whole family;
a little boy who becomes wild and out of control at school;
or a man who has panic attacks when he goes out dancing with beautiful women.

I also use it in my own life to learn ever more about being present here, now, in this moment we share.

Lets say some of us here in this room today would like rule out simpler possibilities first, before we refer the students we see or our clients or ourselves to the psychiatrist for the magic pill, and possibly leave an intact brain intact. Or even propose longer-term therapies.

Let's say we ourselves would like to live more in the moment and be able to have a wider range of responses available to us than the ones we usually use.

Now how did Erickson accomplish this important practice for Mondy, something she will need to do again and again and again, until it is automatic, just like tai chi, or sun salutation in yoga, or practicing the piano, or learning to sing a new song in a new way. How did he help Mondy move from a bad trance and an unhelpful Trance to a good trance and a helpful

stance.

SUBJECTIVE TIME AND SLOW MO:

I talked about entering into the world of this moment now I will tell you **how to do it.**

Erickson only wrote half of one book, and the rest were his papers OR books others wrote about his work.

This one book was about **subjective time or experiential time.** I saw this work as the most important thing Erickson understood.

And here was the only model in the field that was addressing time.

Erickson had his finger on the pulse of how people have control over themselves and how they lose control over themselves. He worked with what I will call. **SLOW MO.**

SLOW MO comes into play *in shock*.

Maybe most people here have experienced SLOW MO in an upsetting experience.

Like a car accident.

It is a capacity of mind that makes us remember and observe incredibly detailed.

To REALLY BE PRESENT.

HAVE THEM remember SUCH AN EVENT.

Let me give you three examples.

1. When I was asked about our Oakland earthquake, in the 1980's, I said, Oh, it wasn't that bad.

With a man remembering molestation by mother under age of four.

Big handsome man, I wanted to jump in his arms and have him save me.

Bad for him.

Instead calmly helped.

But the imp part of this story is that it was 20 seconds not 20 minutes during which I did all this.

2a. It can also contract time....so that a

long thing positive or negative can be experienced as happening faster than the clock moves.

I spent 7 hours with Erickson one day.

When he asked me how long we'd been together I guessed four hours.

2b. One of **Betty Erickson's** only published papers she wrote that during her labor with one of her children "she watched the hands of the clock spin."

I call this slow mo. Subjective time.

When EXPERIENCED TIME DOES NOT MATCH THE CLOCK TIME. THIS BECOMES A SKILL WE CAN USE TO DEAL WITH THE RUSH OF TIME IN MANY WAYS.

It happens in a heart beat. IN THE BLINKING OF AN EYE. In a specific instant. In a moment....In an instant, time opens up like a huge chasm for a person and there whole sense of life can be up for grabs.

SKILL BEFORE PILL

So let's think how this works.

The mind is like cable television. There are many channels on the mind and you can turn on one or the other of the channels.

Hypnosis depends upon this activation of several different channels within the programming of what the western world calls the unconscious mind.

In the method I am talking about today, and hope to demonstrate in my two workshops today and tomorrow, we want to pinpoint the moments that make a person automatically turn on a certain channel in their mind, a certain state that I am calling a trance state, and from that place they adopt a certain stance that does not work for them.

Before I close my talk with two cases,

one with an individual and one with couple
that demo in workshops,

I would like to demonstrate for those of
you interested

Three minutes of clock time vs. three
minutes of slo-mo time I want to take 3-6
minutes of egg-timer time to show you
experientially how dramatically our minds
can change states into a positive state
for those of you interested in an
experience.

To have the effect of a positive
meditational/hypnotic experience, right
within the flow of your life right now,
allow our 3-6 minutes,
one or two turns of this egg-timer to help
you right here and now to feel a bit of
what it means to shift to an alternative
state of mind.

Those of you who do not wish to
participate may just quietly observe.

Slo-mo is where we get the new training.
It is where our brain has the most play to
relax and let the mind shift....

FIRST WE MUST STOP THE CLOCK.

I will read from El Tao de Una
Mujer.....two of the verses,

Designed to help stop the clock and enter
into the slow-mo mind, where we can
practice to shift stance quickly.

GROUP INDUCTION DEMONSTRATION

8. Tu mente

Así como tu aparato respiratorio
hace cuanto puede
para asimilar del aire lo que te es útil
y dejar ir lo que no lo es,

así como tu aparato digestivo
hace cuanto puede
para asimilar lo que te es útil cuando comes
y eliminar lo que no lo es,

así también tu mente está en su derecho

de asimilar lo que te es útil
y dejar ir lo que no lo es
con cada aliento.

AHORA, EN ESTE MOMENTO POR
ALCANZAR LA CALMA:

4. Alcanzar la calma

Inhala, y luego
exhala, lenta
y profundamente.

Recuérdate:
"Hice cuanto pude
hasta ahora
con respecto a todo
lo externo a mí.

Tengo todo el tiempo que necesito
en el tiempo que tengo".

Mientras tu cuerpo naturalmente
vuelve a inhalar,
echa a volar tu fantasía.

Observa cómo cambian de forma las nubes.

THE GROUP TRANCE-STANCE EXPERIENCE:

Here in this conference,
you may have a moment when you feel
you do not belong, you are not as smart
as someone else, or your job is not as
good, or you do not feel as special.....

From that place,
from that precise moment,
you may have a series of memories you
don't like or tend to behave in a way you
do not like

Your unconscious mind knows the way to
shift to another state.

I want you to take two minutes of clock
time to remember a time you felt
unconditionally loved for who you are,
more than for your job or your education
or your status, for your being.

Appreciated. In one moment of your life.
Allow yourself to enter into that place in
which you felt totally acceptable and
worthy just being who you are. Memorize

that moment. Were there The smells of food cooking or flowers, the sounds of music or ocean, was someone looking into your eyes, was the temperature warm or cool. Feel that moment in which you knew in the core of your being that you were as valuable on this planet as anyone.

Uncon can continue when you brush your teeth tonight or when you wake up tomorrow and brush your teeth, that you will spontaneously feel appreciated. And you can unconsciously shift from feeling less than to feeling good enough.

Those of you who want to continue your meditational shift, do so, and the others can listen to the rest of the talk. END OF GROUP INDUCTION.

Now, in closing I want to tell you about two clients that I saw in which I used Trance and Stance tools.

The first case was a handsome young Asian man in his late thirties, who came to me in a deep depression.

He'd gone to the family psychiatrist who saw him for ten minutes and prescribed anti-depressants and then he heard about me and decided to work with me instead.

My goal was to find out what was making him sad.

He reported that he just couldn't seem to do anything. He barely could get out of bed in the morning. He'd always been a happy guy.

What was the immediate cause, I asked? Hoping he would STOP CLOCK TIME AND BEGIN TO LET ME INTO HIS MIND.

His beautiful young wife, the love of his life, had just been diagnosed with terminal cancer.

He could understand her being paralyzed with sorrow, but why him?

He was supposed to take care of her.
She was the one with the disease.
His sorrow compounded with shame.

Clearly all of this would be cause enough
for depression. But I wanted to know
about HIS DEPRESSION. To go inside of
the moment in his mind where he got lost
and incompetence became his stance.

So we used STOP THE CLOCK AND GO
INTO SUBJECTIVE TIME.

I tell you this story because we can
NEVER KNOW WHAT WE ZOOM INSIDE
A PERSON WHEN WE USE SLOW MO TO
GO INSIDE.

In trance, he reported that what was
hard for him really was he felt helpless.
He felt that once she died he could not
take care of himself. He couldn't go on
without her.

Now we had the problem identified.
The so-called depression was underneath

his fear of being unable to take care of himself.

Using my SLOW-MO time trance induction, I asked him to search for a moment in his life when he had felt he could take care of himself.

He recalled THE COLOR BLUE.

BLUE? What could that mean?

I asked that he look closer.

BLUE WHAT?

AH: a blue glass pitcher.

WHERE? I ASKED.

in the refrigerator of his childhood home.

At first he and I were both surprised.

When I asked him to tell me more about the blue glass pitcher, he revealed that he was four years old and the fridge was very big and on a shelf, his mother had left him the blue bottle filled with milk and a box of cereal, because he had said he was a big boy and he could wake up and make breakfast for himself.

It is Saturday morning. Everyone is asleep but him. He goes to the fridge and sees the big blue glass milk pitcher and he knows he can make his own breakfast and he feels proud and competent. This memory alone did the job for him.

So let's track what happened. He imagines his wife is gone. That is where his anxiety starts. Not in the caretaking. He is afraid he can't go on. He is powerless, helpless without her. He is regressed from pain back to before the age of 4. We introduce a rest as in music, a pause, and have him shift to a different mental state. His own memory of competence.

He comes up with the medicine that is the antidote. And what do you think it is?

Before I close let me mention a couple:
A couple in a long-term relationship comes in complaining about their sex life but

they are shy to discuss it. Now that we know the problem they want to talk about it directly.

I tell them we can talk about whatever subject they like. Other subjects will metaphorically address this underlying issue.

She says she baked him a platter of Christmas cookies and there were many varieties. She'd prepared all day. He walked in the door, saw the platter, raced over with enthusiasm and began downing some of them. She wanted to kill him and he felt absolutely baffled. What did she want him to do? Ignore the gorgeous cookies?

If we looked at details about the man and woman, we could see how she might call him a narcissist and he might see her as borderline, offering and then withholding.

What if we just look at the hypnotic sequence.

What is making her suggestion to him unclear? We suggest the wife let the husband know AT JUST THE RIGHT MOMENT how much she would like him to ADMIRE the cookies.

What if the husband trusts that the wife does want him to enjoy the cookies, but that she needs him TO SLOW DOWN, APPROACH MORE SLOWLY and ADMIRE THE COOKIES before he touches them. Different way of thinking and observing. Think about it!

This couple went home and made love after the cookie story sequence of interactions was countered.

When I met Erickson in my late twenties, he said that I was too young and too pretty to be taken seriously and that I needed to wait until my hair was as white as his to express my opinions....well....if it weren't for my hairdresser Frank, clearly it is my time to express my opinions!

At this point in my life, I am old enough to say, and this is my birthday today!, that my life's work has been about the power of human interactions to heal people mentally and emotionally or to make them sick or even to die, as in voodoo. I have studied human interaction at all its levels, from family interactions in my book Using Hypnosis in Family Therapy in which I became the Mother of the integration of Hypnosis and Family Therapy, that drive children or members of a couple mad, to social forces from torture by the state In my book about the Chilean Dictatorship with a foreword

by Isabel Allende: Hope Under Siege: Terror and Family Support in Chile, to spiritual levels of interaction among people, In El Tao de Una Mujer.

In musical notation there is a symbol called a rest. Keith Jarrett.....STOPS. No matter how fast the piece, a rest takes the place of a note that is played and heard in the rhythm of the music, but the rest is not played or heard.

It is a silence
that is essential
to good music.

We need to help clients learn to bring their trance states, Their SLOW MO, their rest notes right into the ongoing interactions in their lives, right into the environments that would otherwise trigger them FASTER THAN THOUGHT to get stressed and overwhelmed.

The martial arts teach us that we need to know many stances in life that we can move to quickly to handle any challenge at hand.

We as therapists now need to teach our clients how to UTILIZE their SLOW-MO states to attain the PROPER STANCE for any one moment.

This is a tall order. But it is as necessary as understanding their early childhood relationships or processing their feelings.

If they cannot ACT on these learnings, they will be chronically overwhelmed and break down one way or another at their own point of biophysiological fragility.

I used to ask my clients if I could give them a mild depression.

Since I had to diagnose for them to be paid back. You still may have to give clients a diagnosis of mild depression, so

they can get reimbursed, but you might also want to propose that they become non-violent urban warriors.

People who have the skills necessary to stand up to the challenges of this moment....to save their own minds and hearts.

And to heal with unconditional love.

I come to today from Oakland California, the home of the OCCUPY movement, 99% fighting back the quick fixes and devastation of the 1%. So I close today saying to you:

OCCUPY YOUR MIND IT IS YOUR FINAL AND OWN TERRITORY. Don't let anyone conquer your mind.

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www.michelerittnerman.com

EVIDENCE BASED FINDINGS AND REPORTS:

Mental Diagnosis Manual, called the DSM, was first developed in 1840 had two diagnoses, idiocy and insanity.

Insanity was popularized in 1952 when drugs and insurance companies came into the picture. And the DSM began to compete in size with a manual 5,000 years old, called THE OLD TESTAMENT.

46 % of adults studied by the NIMH between 2001 and 2003 qualified as mentally ill at one time in their life by the APA standards.

Ten percent of Americans over age six take antidepressants according to the former editor of the New England Journal of Medicine, Marcia Angel.

Since drug created, in 1987, the diagnosis has tripled.

One in four N. American children is medicated. Based on a review of studies sent to the FDA that have not been reported by the drug companies

that had reported only positive results, with 42 trials of six anti depressants, that included all results Most were negative and 82 percent showed that placebo were as effective as any of the drugs.

When studies used placebo with side effects that matched those of each drug, there was NO DIFFERENCE BETWEEN the two, except that the drugs have harmful long term side-effects including dependency and addiction.

No underlying conditions proved. Like saying people have fevers because they don't take enough aspirin.

ADHD market saturated, so now bipolar.

Drugs produce a shift in state, with massive side effects, i.e. symptom substitution, low sex drive, loss of appetite control, suicidal feelings, the list goes on.

The US is accused of Globalizing the American Psyche in a book by that name.

Medicalizing human nature.

Distracting us from the social arrangements that make us sick nervous and unhappy.

The drug companies have seen our breakdowns due to our disrupted community lives, and our excessive burdens as an opportunity to sell us on the idea that we are inherently chemically defective, born imperfect and damaged, and that we are mentally sick.

Psychiatrists paid more than any other medical profession by the drug companies.

Anti psychotics are the best selling drug in America, more successful than cholesterol reducing drugs.

She also reports the difficulty in dealing with withdrawal from the drugs. And asks since the years of prescribing why has the number of mentally ill skyrocketed, instead of decreased?

In 1994 The task force that created the DSM IV in 1994 now lament that they contributed to three false epidemics. Childhood autism, bipolar disorder

and attention deficit.

“Clearly our net was cast too wide and caused to medicate many people who might have been far better off never entering the mental health system.”

Time is money. Time off is from work.

COULD OUR DRUG-based PARADIGM OF CARE BE FUELING THIS MODERN DAY PLAGUE?

Irving Kirsch believes antidepressants are useless and Robert Whitaker that psychoactive drugs are useless and they are only about placebo effect and even harmful. FROM BRAINLESSNESS to MINDLESSNESS.