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PSYCHIATRIC JARGON AND THE MYSTIFICATION OF UNHAPPINESS

As the society we live in drives ever more people into anxious and depressed states of mind, there is an increasing popular interest in psychiatry and related mental health fields. Wanting to understand why we are unhappy, we naturally look to those professions which claim to possess that understanding.

But somehow, the more we become familiar with psychiatric literature and practice, the more confusing it all becomes. It seems so remote and complex and never really seems to be talking about the problems we are experiencing. Most of us get turned off quickly and continue to view the mental health disciplines as foreign countries. They present us with a cold and intricate jargon made up of terms which require a dictionary to be understood. Most people, especially patients, hear these terms thrown around all the time. Partly because of our fear of appearing ignorant we don't ask what is meant by them. Or if we do ask, the answers are usually complex and unsatisfying. The terminology, which is supposed to pertain to our feelings and experiences, further mystifies and alienates us.

We soon arrive at the conclusion that we can never comprehend such complicated language and ideas. This conclusion reinforces our feelings of helplessness and powerlessness and is just one example of the way in which psychiatry produces the opposite of its stated goal of helping people to better understand themselves.

~~Our~~ <sup>One</sup> possible reaction for the patient is simply to subordinate herself to the therapist-as-expert, giving away all of her powers and taking a passive role in the therapeutic process. Doing so, however, soon leads to even greater frustration; as every patient knows and as statistics show, therapists

do not possess magical curing techniques. They are often more confused that the patient as to what should be done.

Psychiatrists though have a good deal invested in not admitting to their impotence. They have power, status and salaries of \$50,000 to protect.

One way they preserve their status is by posing as professional experts i.e., carrying on the pretense that, by nature of their training, they alone are qualified to treat emotional problems. The creation of a complex and inscrutable jargon is indispensable to the illusion that psychiatrists are uniquely qualified in the area. If we viewed "mental illness" as ordinary human problems, the role of the psychiatrist as king-pin in the mental health field would be seriously threatened. Naturally, psychiatrists -- as a highly organized and powerful interest group -- resist this demystification.

But demystification must occur if mental patients are to make progress on the road ~~of~~ to liberation . We must see that we -- ordinary people with serious though understandable problems -- are capable of taking our affairs into our own hands and of collectively removing the sources of our unhappiness.

To achieve these goals, we will have to reject psychiatric theory for ~~want~~ what it is -- a confusing network of ideas which fail to describe or understand our experiences. Moreover, we will have to develop a human, social theory of personal misery and a vocabulary which is not professionalized and medicalized, but which is understandable to everyone.

The issue of language and terminology is not trivial. Language grows out of real social conditions and gives expression to personal and social consciousness. Words are not arbitrary. As history shows, every social movement has radically altered both the perceptions and vocabulary of its society. Terms like "nigger", "chick" and "queer" express not just the bigotry in attitudes, but also the real, material oppression which blacks, women and homosexuals suffer each

and every day. The struggle to change the material conditions begins with a change in consciousness and thus in the language which reflects dehumanized attitudes toward oppressed people.

The mental patients liberation movement, which is just in its infancy, must develop a language which accurately describes and lends dignity to our feelings, experience and selves.

We have all discovered at Politics Night how difficult it is to find the words to describe what goes on inside us when we are freaking out. Our mental landscape, which has been invaded by psychiatry, is dotted with signposts that read: phobias, schizophrenic reaction, paranoid delusions, psychopath, neurotic anxieties and the like. We know these terms are misleading and alienating. So we grope for words which are more natural and human. We talked of freaking out, feeling miserable, scared, lonely, suspicious, angry, up-tight etc.

We are just beginning to move out of the shadows of the psychiatric signposts to communicate in our vocabulary based on our experience, not on some "experts".

We are coming to realize that we -- patients and ex-patients-- are the experts. And the more we throw off the stigma of "mental illness", the more we will feel free to speak to each other in our own words, and thus to understand each other in ways that distant professionals never can.

We are realizing that terms like neurotic, psychotic and mentally ill fall in the same category as nigger, chick and queer.