

Prepared remarks by David W. Oaks, director, MindFreedom International for the 15 November 2006 opening of the conference "NARPA: Social Justice - The Time is Now!" in Baltimore, Maryland.

Back to Our Roots: Unite With Other Social Justice Movements for a Nonviolent Revolution in Mental Health!

How may we may all unite for a nonviolent revolution not only throughout the mental health system, but throughout the world, a nonviolent revolution of social and environmental justice as never before seen on Earth? Some might say one would have to be crazy to even ask such a question.

Well, as my friend David Webb from Australia said in a recent international Mad Pride teleconference, "I am glad to be mad!"

I am so glad this NARPA conference theme is justice, reconnecting to other movements, the roots of our movement.

I draw upon lessons from my 30 years of human rights activism in our social change movement affectionately known by some as *The Mad Movement*. I learned these lessons along with many long-time participants and leaders in the National Association for Rights Protection and Advocacy. What a wonderful dessert at the end of this mad mad meal, to celebrate 25 years of NARPA with you all. Here's to many future mad mad meals, all with the taste of justice!

Whatever our social change movement calls itself, our movement has always included not only psychiatric survivors and mental health consumers, but also advocates, attorneys, researchers, family members and friends, mental health professionals and workers, experienced and inexperienced, and the general public. Our social change movement has always included a wide diversity of backgrounds and perspectives. All are valued leaders in our mad movement. Thank you all so very much for your work for human rights and alternatives in the mental health system.

I also thank the organizers and leaders of this NARPA conference, especially Ron Bassman for his support on this talk. And thank you NARPA for these 25 years. NARPA has meant so much to me since the first NARPA conference I attended, and there are too many of you to name. A NARPA workshop on coalitions is where Janet Foner and I began our plotting, and NARPA is the group that launched the coalition that became MindFreedom International. Thank you. Here is my perspective as a human rights activist on the state of the mad movement today.

The bad news. Here, in such a wonderfully mutually supportive space, here is where we can look at this nightmare, as we must.

There is a global emergency today in the mental health system. That emergency is spreading internationally, everywhere, including poor and developing countries. This is a global emergency of fraud, force and fear manufactured and fueled by an enormously profitable mental health industry which by some measures is one of the most profitable in our planet's history. This is a global emergency that is

traumatizing, damaging and ending the lives of millions of people who are, by some measures, among the most powerless in our society.

This global emergency is a tsunami of human rights violations, with waves of unscientific and defaming psychiatric labels... of psychiatric drugging without adequate informed consent, advocacy and alternatives... of continued use of torture inside institutions such as restraints, aversive therapy, electroshock... of ongoing isolation, segregation, impoverishment and discrimination... of a criminal lack of choice and options for good housing, decent jobs, and humane alternatives to the traditional mental health system.

What has changed in 30 years? The warnings from our social change movement have come true. Back then the monster of psychiatric oppression was mainly torturing and terrorizing our people inside the back wards of psychiatric institutions. Now that monster of psychiatric oppression has crawled over the institutional walls. Today it is found in our communities, our neighborhoods, our homes, our schools.

Our home ought to be our castle. But in 42 states, we find the immoral unethical atrocity of thousands of citizens court ordered to take powerful psychiatric drugs against their will, while living in their own homes out in the community. The millionaire Stanley family is paying to finish off the other eight states. We resist each step.

Laurie Flynn who led the National Alliance for the Mentally Ill as it spread these horrendous laws, leads a massive "TeenScreen" program, one of many mental health screening programs that are now in the USA school system. It may seem like a good idea to find a troubled kid. But TeenScreen and other similar screening programs

march thousands upon thousands more young people to the front door of the current mental health system without adequate advocacy, information or alternatives. Behind that front door young people often end up in the embrace of the psychiatric industry, putting more young people at risk of a lifetime of psychiatric drugs and discrimination.

Laurie Flynn takes credit for creating the President's New Freedom Commission, and said a main purpose was promoting mental health screening. And, indeed, in goal four of the core recommendations of that Commission, President Bush said he wishes to make such screenings "common practice." We will resist this from school districts to the Senate, which ought to finally agree with the House and pass the Child Medication Safety Act.

One of the main changes in 30 years, is that this crisis is no longer about a distant minority. This crisis is about your family, your neighbor, your co-worker. It is a majoritarian crisis.

To borrow from a famous poem attributed to Pastor Martin Niemöller, "Psychiatry came for those on the back wards, I remained silent; I was not on a back ward. When they locked up more mental patients, I remained silent; I was not a mental patient. When community mental health came for my neighbors, I did not speak out; I did not have a psychiatric label. When psychiatry came for me, there was no one left to speak out."

Thirty years ago, based on our experience and evidence, we warned that many psychiatric drugs could cause addiction, mental and emotional problems, brain damage and death. Today, mainstream medicine has confirmed many of these warnings.

Let me be clear that I am pro-choice on personal health care decisions including taking prescribed psychiatric drugs. Many of our MindFreedom members make difficult choices every day to take psychiatric drugs despite fully knowing the hazards and alternatives. One lesson I've learned in 30 years is that our social change movement must avoid the blind alley of fighting over an individual's personal and private choices. I have made these agonizing choices and it was no one else's business. But let us also be clear that we must openly address the human rights violations related to psychiatric drugging. When one approach so dominates and bullies our society, government, health care system, and people with psychiatric labels, then this domination itself is a crisis, and must be addressed.

Some of you have heard my personal story. I will sum it up. My recruiting room to this work was a solitary confinement cell in McLean Hospital. I was a working class kid from Chicago attending Harvard University on a union scholarship. I experienced severe and overwhelming mental and emotional challenges. At times I thought the CIA was making my teeth grow, that the TV and radio were personally talking to me, that others could read my thoughts, and much more. Five times in my sophomore, junior and senior years I ended up in a psychiatric institution. The first time they drove me to McLean through its beautiful forested grounds I remember looking out, thinking, "I do need a break. I could rest here."

I did not find rest. I found trauma. I found coercion to take psychiatric drugs. I found that my human rights were gone. I was diagnosed as both schizophrenic and bipolar. More than once I was dragged into solitary confinement, held on a bare mattress by about a

half dozen mental health workers and forcibly injected in my ass. As I spent the next few days in solitary confinement, one time I pounded my fist into the steel mesh screen on the window saying, "I want to change this." That was my recruitment. I later remember a psychiatrist sitting down with me and explaining that because of my genetic chemical imbalance my only choice was to take powerful neuroleptic psychiatric drugs the rest of my life. He was wrong.

In my senior year, 30 years ago this Fall, a Harvard social service agency referred me to our movement, and I joined Mental Patients Liberation Front. In my final lock-up, MPLF activists lobbied McLean and fed me legal information to get me out. The mental health system asked my family to get a court order to hold me. My family through my mother replied, "If our David wants to try freedom, we'll support him." In a few months I took my last psychiatric drugs, forever. My 89 year old mother is now our number one volunteer.

So let us try freedom today. What has changed in 30 years? There is some change for the better. Whether I am meeting with mental health officials in Eugene, Oregon, or Lane County, or Oregon, or with World Health Organization officials in Switzerland and Italy... I do witness some positive effects of our movement.

I am at least hearing new words from the mental health system. I am sincerely glad. Self-determination. Peer support. Empowerment. Advocacy. Person-centered. Self-direction. Trauma-informed. Wholisitic. Alternatives. Transformation. Recovery.

Yet, how is it I can go to a government-funded mental health transformation conference on self-determination or peer support or empowerment or advocacy or recovery... Yet I seldom hear anything,

for example, about the role the psychiatric drug industry plays in human rights violations?

What new version of the book 1984 has the mental health system funded? Are we to be self-determined to subservience? Are we to be peer-supported into placidity? Empowered into enslavement? Advocated into addiction? Recovered into Risperdal?

We want far more than buzz words, tokenism and a few model programs. We want a nonviolent revolution.

I at least see some new faces. Today, in city, county, national or international meetings about us, it is not unusual to see an individual with a psychiatric diagnosis at the table. Today, in many countries, it is possible to find community centers, advocacy programs, conferences, support groups that are run by psychiatric survivors, mental health consumers, dissident mental health professionals, advocates and other allies.

I am glad to witness new words, faces and programs. But I remember when I entered McLean's admitting room I was handed a nice brochure with nice words about advocacy, respect and human rights. A few minutes later I was held down and forcibly drugged. McLean had a clients council. But when I spoke out at that clients council I was again forcibly drugged. I remember.

We know that for hundreds of years our society has had a war against people considered mentally and emotionally very different. We are discovering we have a mad history, the history of psychiatric survivors and allies speaking out individually and in groups over the centuries. Whenever we have had a chance, we spoke out about the need for liberty, empowerment, peer support, humane care.

Never forget. Last year, MindFreedom held a protest in front of the Washington, D.C. headquarters of PhARMA, the pharmaceutical industry's central organization. A number of us then went to the Holocaust Museum which then had a special exhibit called *Deadly Medicine*. And there we saw how people labeled with mental disabilities, especially young people, were the first group targeted for mass killing in Nazi Germany. Psychiatry developed the theory, practice and even the paperwork used in mass killing on us.

We remember. Never again. Deaths continue in the mental health system. I remember the autopsy reports. Studies show our life spans are on the average 15 years shorter. Some researchers suspect that the hazards of the psychiatric drugs play a role.

Today at NARPA we are speaking out about the domination of the psychiatric drug industry. No one can stop us.

Let me use neuroleptic drugs as an example, the drugs typically given in forced psychiatry. Thirty years ago psychiatric survivors and our allies warned about the dangers of the neuroleptic psychiatric drugs. Our movement even testified in congress about this.

Neuroleptics are also known as *antipsychotics*. They include dozens of drugs from Thorazine, Haldol, Mellaril and Navane -- all of which I was given -- to newer atypical drugs such as Clozapine, Risperdal, Zyprexa, Seroquel and Abilify. We warned that all these drugs may cause brain damage. In the last few years, mainstream science has used modern research methods, MRI scans, CT scans, animal studies and autopsies to link high-dose long-term neuroleptics to structural brain change. Even the hateful web site of E. Fuller Torrey's Treatment Advocacy Center that viciously calls for even

more forced psychiatric drugging has a page admitting that these drugs are linked to structural brain change. The debate is over.

Let me emphasize the kind of brain damage we are talking about. We are talking about the fact that after taking long-term high-dosage neuroleptics the front of the brain -- our frontal lobes, the higher part of our brain -- can actually shrink so much this is visible in brain scans. We are talking about actual less gray matter. We are talking about swelling in other parts of the brain. And these changes are of course often linked to even worse mental and emotional problems, and can make it even more difficult to quit the neuroleptics.

I know that a few sow doubt and spew smokescreens about neuroleptic-induced structural brain change. Some argue that other studies show that the brains of young people who never had neuroleptics are sometimes different, too. Let me emphatically say that the studies I am referring to cut through those smokescreens. For instance, there are long-term studies of structural brain change showing the changes are dose related, that the more neuroleptics, the bigger the structural brain change. Some of these brain changes can be replicated in animal studies. The medical profession at the very least acknowledges that this issue is a serious concern that is worth researching and discussing.

But while I can read about these concerns about neuroleptic brain changes in the medical literature, I do not hear about neuroleptic brain damage in other places. I do not hear about neuroleptic brain damage at mental health system conferences. I almost never read about it in informed consent materials for neuroleptics, when such material even exists. I almost never read

about neuroleptic brain damage in mainstream media as they debate whether or not we ought to be forcibly drugged against our will. I almost never hear legislators or judges address neuroleptic brain damage before they create and enforce the laws that allow us to be forcibly drugged in our own homes.

Yes, I know neuroleptics are also associated with many other problems, such as diabetes and weight gain and so much more. Yes I know there are studies questioning neuroleptic effectiveness. But structural higher level brain damage is what places neuroleptics in the same ball park as psychosurgery, as lobotomy. There is a reason almost everyone is against forced psychosurgery -- because nearly everyone knows in their gut that forced lobotomy is so intrusive and irreversible that it steps over the line of our core values. Long-term high-dosage forced neuroleptics step over that same line. It's time for everyone to know that in their gut, too.

Why is there such silence in our own movement events? I CAN think of two reasons. First, we have learned from decades of political infighting and division in our movement that we need to unify. Activists wonder, "How can we unify to break the silence about the power psychiatric drug industry, when so many of us choose to take prescribed psychiatric drugs, and others do not?" And second, too many activists also wonder, "How will we possibly get our next government grant if we challenge the psychiatric drug industry?"

We can talk about the psychiatric drug industry domination in a unifying way. In MindFreedom International, some wonderful leaders thought about this, and came up with a hunger strike which we held three years ago. Several dozen people, including a core group of six

in California that I joined, fasted with this demand, among others: We asked the psychiatric industry to prove its claims of a *chemical imbalance*. Where is the evidence of this medical model? Every day Pfizer tells the public that their product Zoloft "fixes" a chemical imbalance. We asked, where is it? Show us the chemical imbalance. Prove it!

This hunger strike led to international media attention. It also led to a debate between our scientific panel, which was composed of mental health professionals and researchers, versus the American Psychiatric Association. We had a back and forth you may view at our web site www.MindFreedom.org. The APA had no proof. No studies. No citations. We charge the mental health industry with fraud.

If your personal belief system is that spirituality or nutrition helps your well being, you are welcome to that belief. I share it. If the mental health system pushes just one type of prayer or one type of counseling or one type of food, if it mainly suppresses all other options, we would ask, "By what right? By what special evidence do you justify the domination by this one model?" Asking does not make us anti-spirituality or anti-nutrition or anti-psychiatry. Asking makes us pro-freedom.

This debate may seem theoretical. It is real. This Spring I had the opportunity to give a workshop in Istanbul, Turkey to a room full of the most oppressed psychiatric survivors I have met. Individual after individual had reported to Mental Disability Rights International, which conducted an investigation, that they had experienced forced electroshock against their will.

The world has been told they must be like the West, they must be modern and scientific. In the mental health field that means the medical model. Drugs are expensive. Electricity is everywhere. So if a poor developing country wants a western mental health system, that can mean more electroshock, often without anesthesia. That is electricity through the brain with eyes wide open, fully aware.

This is not as much a medical model as it is a *domination model* with a mantra of *label, label, label, drug, drug, drug, shock, shock, shock*. The domination model is globalizing as never before. The World Bank and World Health Organization and other large organizations are promoting multi-billion dollar campaigns to bring western style mental health to hundreds of millions of people in poor developing countries. This Western export is missing something. The export has labels, drugs and shock. But this export hardly includes any of the advocates, alternatives, troublemakers, and activists that also exist in the West.

The globalization of psychiatry is a chemical crusade by faith-based pharmaceutical fundamentalists. This crusade is everywhere. Here in the USA, more and more prisoners are given psychiatric labels, and go to mental health courts. We witness the merger of the mental health industry and the prison industry. We witness the emergence of a huge chemical prison industry. We say that one hundred percent of prisoners deserve safe, humane, voluntary services. Zero deserve to be pushed onto psychiatric drugs.

Science has not discovered a chemical balance in the brain. But our movement discovered a power imbalance between one of the richest and most influential industries, and some of the poorest and

most marginalized people. Those of us who have been on the receiving end of a power imbalance, like any oppressed people, know what that can do. Psychiatrists like Sally Satel at the American Enterprise Institute, a voice for organized wealth, have apparently not experienced our end of the power imbalance -- the sharp end of the needle. We know power imbalance acts like the mute button on your tv's remote... muting out the sound of feelings, thoughts, and dreams.

In my thirty years I've seen what can unmute the mute button: the power of peer mutual support. I do not just mean peer support between psychiatric survivors, but peer support between everyone -- between advocates and mental health workers and family members. Our friend the late Loren Mosher and his Soteria House showed that effective peer support is not just between those with labels. Peer support is between human beings, labeled or not. We must unite this engine of peer support with the engine of activism. It is peer support that has sustained me. It sustains our movement. It can sustain you.

Thirty years ago our movement was small and almost entirely self-funded with no money from the government. Today, the vast majority of activity in our field is in some way funded by the government and mental health industry. We at NARPA and MindFreedom are independently funded.

We must never automatically denounce our friends who are system funded. What I've learned is that war between the independent movement and the system-funded movement is self-destructive. We need both approaches. Ask yourself, "What would the environmental movement be like if it were almost entirely funded by the oil industry and the government?" System funded groups need

to respect the independent movement, and that respect would start by acknowledging its very existence.

Right here in NARPA heroes and heroines have shown us the power of peer support, also known as community organizing. Peter Breggin, Loren, Howie the Harp, Judi Chamberlin, Rae Unzicker, Celia Brown and so many more. You can't all be listed. You heroes prove mutual support is unstoppable and inexhaustible.

We call for mutual support to resist court-ordered forced drugging of people in their homes out in the community. MindFreedom itself does not own an underground railroad. But we have proudly helped a number of individuals create underground railroads for themselves to evade and escape their involuntary outpatient psychiatric drugging. MindFreedom has a campaign to ask a few communities to create *landing zones*, that is, a town with enough support, housing and advocacy to assist those escaping outpatient forced drugging by leaving their county or state. They need a safe place to land, a new psychiatric sanctuary movement.

Thirty years ago our movement mainly focused on force and fraud in the mental health system. What has changed is that today the mental health system harms the human rights of most people through fear, fear that there is no alternative to the traditional mental health system. Psychiatry and the drug industry have, over the decades, choked out choice and other options in the mental health system. This is the richest nation in the history of the planet. Families in crisis deserve more than just a bag of pill bottles and a court order.

Choice in mental health care is not just a good idea. It is a human right. Why does a young person who shows signs of what is

called schizophrenia have to live in Finland to find government-supported non-drug alternatives? This is not just about money. The World Health Organization studies show that the best recovery rates are in the poorest countries with the least psychiatrists. MindFreedom will hold a conference in Connecticut in July 2007 on a campaign to increase choice in mental health care.

Over the decades, the general public slowly became more comfortable addressing challenging issues like land use planning, energy policy, public transportation, and more. When it comes to mental health, well-meaning citizens tend to have a one-word position: "more," more funding, more resources, more horrible laws. Democracy must learn to get hands on with the issue of mental and emotional well being.

One way to choice is voice. The public and decision-makers must hear our voices loud and clear. There are so many examples of how to do this it would be hard to list. It seems there are more authors and speakers and artists who are questioning the mental health system than ever. There are newsletters, conferences, web sites, e-mail lists and more. There are universities and academic researchers, including participatory research influenced by psychiatric survivors. Tragically, no university I know of has a movement archive.

For several years, MindFreedom and World Network of Users and Survivors of Psychiatry have had teams of psychiatric survivors in meetings inside the United Nations headquarters here in New York City, resulting in a proposed international treaty on disability rights.

A Mad Pride movement celebrates all of humanity's uniqueness and freedom with cultural and protest events. I loved hearing about

the Bed Push that has been held for two years in England. In a Bed Push, activists take a hospital bed on wheels and strap in a mannequin in four point restraints. The activists wear costumes, including patient pajamas, and hold props like huge hypodermic needles. And they literally push this bed from city to city, for 50 miles. This small group of activists looks like they had a blast and has educated the local people they meet.

The largest reported Mad Pride event was when MindFreedom Ghana in Accra held a 200 person street march, along with a symposium, tv and radio events. There ought to be concerted international effort to supply the support and technical assistance needed to empower emerging voices in developing nations.

Just last week, a Mad Pride planning event heard from activists in Australia, New Zealand, Canada, UK, Ireland, USA and Ghana!

Getting our voices out to the public is an antidote to discrimination. The psychopharmaceutical complex and the military industrial complex share the same trick: frightening the public about safety and security, and claiming only they have the only fix. We have been falsely portrayed as having an inherent tendency toward violence. This stereotype has been fed by incidents of violence by people labeled with psychiatric disabilities. Getting our voices and faces out to the public is one step toward our rehumanization.

We can learn from our roots. Back in about 1970 our mad movement did not just spring out of thin air, or from a government grant. People with psychiatric labels have rebelled for centuries. That's why there were locks on the doors. But there was something about the sunlight, soil, air and water of the culture in about 1970 that

made it seem obvious and natural for psychiatric survivors and dissident mental health professionals to unite internationally, yes, even before the Internet.

Our movement was inspired and nurtured by other social change movements, especially the civil rights movement. As the great psychiatric survivor hero Leonard Roy Frank has told our movement many times, we must revisit the lessons from Martin Luther King, Jr. and one of the sources of MLK's inspiration, Gandhi, about the power of nonviolent action. I am not a pacifist, but I feel we must learn from other social change movements, including the civil rights movement, about the proper use of nonviolent direct action and civil disobedience in our movement.

One simple step MindFreedom has taken is to publicly reaffirm our dedication to nonviolence in our activism, with each other and with our opponents, especially with our opponents.

When I speak about a movement for nonviolent revolution, I am not only speaking about a nonviolent revolution in mental health, I am speaking about a global nonviolent revolution for social and ecological justice for all. Thirty years ago, that's what we meant when we talked about "The Movement." Call me crazy, but I believe that the Mad Movement plays a role in helping this great global nonviolent revolution emerge, as it must emerge.

Remember, MLK said the movement was more than black and white, it was about justice for all, and reconciliation for all in a beloved community. Are we ready for his beloved community?

Many times in his speeches, in a variety of ways, MLK referred to psychology and said, "Human salvation lies in the hands of the

creatively maladjusted." At least ten times over a five year period MLK called for a new organization, including in front of the American Psychological Association, when he said, "Thus, it may well be that our world is in dire need of a new organization, The International Association for the Advancement of Creative Maladjustment." That would be IAACM. No one ever formed that group. Until now.

It makes sense that the mad pride movement ought to finally help make his dream a reality. I am proud to announce MindFreedom has filed an assumed business name for MindFreedom under IAACM, with the goal of helping to breathe life into MLK's vision, to be shared with all.

Our movement began by connecting to other movements, and we must do so again. In recent years our movement has had great successes in connecting with the cross-disability movements and the human rights movement. For me personally, one of the most rewarding connections is the environmental movement. If you have not seen the film *Inconvenient Truth* by Al Gore, about the greenhouse effect, I encourage you to see it. I also recommend the book by physician Jared Diamond, *Collapse*. If the survival of humanity were based on continuing the practice of psychiatry dictating to us what is normal or not, there may possibly be an argument for psychiatric oppression. But the jury is back. It turns out that Al and Jared have very strong evidence that what is called 'normality' may collapse the our entire planet's ecology.

The psychiatric experts have an intimidating weapon. They argue that because the mind is so complex, only experts have any insight into its workings. Let us challenge this. The cutting edge of

science, such as in the intersection of neuroscience and complexity theory, admits it knows very little about the mind. Based on the little they know, they hypothesize that the mind cannot be reduced to a machine. The mind apparently emerges from dynamic feedback on the edge between chaos and order.

As Susan Stefan said so well in a memorable keynote here at NARPA, we are more complex than that. We are more complex than a chemical balance. The only true chemical balance is death.

From quantum theory to string theory, scientists are discovering that reality is far, far weirder than generally thought... that none of us has an absolute grip on reality... in fact that it may be impossible to absolutely grip reality.

In other words, what is generally called 'madness' may be at the very core of the human experience. The border between 'mad' and 'normal' is not absolute, that border is shifting, it is changing and it is porous. I am not saying "Abolish these borders." I am saying be smart and compassionate about these borders, know that we create them. Humanity must first recognize the universality and ubiquity and indeed the occasional necessity of the experience of extreme and overwhelming distress, and of extreme and overwhelming altered states.

One can have amazing influence on a complex system, in what is known as the butterfly effect. Very simple small actions may have long term unpredictable and immense effects.

Today, we have a society at war with its environment, with its poor, with each other. We have a globe in overwhelmingly extreme

distress, but locked into passivity, as in a trance state. We, the movement for a nonviolent revolution in the field of mental and emotional well being, have a role to play here. We can educate citizens about the crucial power mutual support plays in unmuting the mute button, breaking the trance state, and reviving despairing human spirits. We can explain that unique and unusual thoughts, feelings, behavior, passions, beliefs, are not all necessarily inherently bad. In fact, for society to change, a first person must have a different vision, a creative maladjustment, an unshared belief... And an 'unshared belief' is in the official definition of *psychiatric delusion*.

"Creative maladjustment" is one of the sources of that change. All creative maladjustment is not good. However, perhaps all changes for good may involve creative maladjustment.

What is your creative maladjustment? How can your creative maladjustment work in a spirit of mutual cooperation with others? In other words, what is your role in the nonviolent global revolution?

Let us begin again with those basic core principles about mutual support, free minds, empowerment, self-determination, human rights... and recognize that as we have always said we can have an enormous butterfly effect. How can a movement choose to succeed? We can choose to unite despite all obstacles and chasms, despite all arguments and grudges, despite all anger and divisions.

For hundreds of years the mental health system has dominated, controlled and even killed. What is different now in the mental health field is that there are thousands of individuals and groups, who are active, mobilizing, informed and potentially open to a nonviolent revolution.

One thing that has changed in 30 years is that now as never before we have a movement that is creating its own media through print, radio, Internet, photography, web sites. We have people exploring and promoting all kinds of humane and effective alternatives to the mental health system. There are advocacy and activist groups in so many areas of the world. As never before, we have access to and friends in important international social change movements, especially on disability and human rights.

So yes, there is a global emergency of human rights violations in the mental health system. Yes, there is an overwhelming power imbalance. But there is also still an international movement with experienced leaders and groups and allies. Our people have experienced labels and drugs and solitary and shock, and have still kept organizing and speaking out. In our movement are people have experienced discrimination and homelessness and poverty, and have still kept the spirit of resistance alive. The mad movement has taken on the most powerful mind control apparatus of the richest empire in history, and by using the powerful engine of mutual support and the human spirit we have not given up. We will never, ever, ever give up. Who is the mad movement? The mad movement is composed of human beings for social and ecological justice who cannot be stopped, who will not be stopped.

Five hundred years ago, peasant rebels sang an anthem of the free mind, a song that the Nazis would one day ban.

The title is *Die Gedanken sind frei*, which in German means "Thoughts are free." I will end with a few lines for a global nonviolent revolution for freedom.

Die Gedanken sind frei
My thoughts freely flower,
Die Gedanken sind frei
My thoughts give me power.
No scholar can map them,
No hunter can trap them,
No one can deny:
Die Gedanken sind frei!
I think as I please
And this gives me pleasure,
My conscience decrees,
This right I must treasure;
My thoughts will not cater
To duke or dictator,
No one can deny--
Die Gedanken sind frei!

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