

Chapter 1 : A war over mental health professionalism: Scientology versus psychiatry

Schizophrenia and the Church When I was a young man I got involved in the Church. While I was a member of this particular Church a very good friend of mine developed schizophrenia.

I thought it would be helpful to see and to read. In the manic phase, you often feel like you can do unreasonable things, like be able to decide all the best decisions for the church, or commit to too many activities and not be able to fulfill that commitment in the long run. With schizophrenia, you see and hear things that are not there and fully believe they are true. Most often it is paranoid schizophrenia, and the things that seem to be true are telling you that others are out to get you. Both make you believe things that are not true, and they seem absolutely irrefutably true. Also either one can cause you to be incapable of living on your own, even if perfectly managed with medicine. For example, I currently work in a nursing home entirely devoted to the mentally ill - these people have doctors and nurses closely monitoring the medicines and making sure they are taking them, and yet they are still not able to live alone, and they still get in fights and all kinds of trouble. Also, these mental illnesses come in waves - for years they can be more severe, then for years they can back off. They also often get increasingly worse as one gets older - i have seen women who were brilliant and solid in college be overcome by either one of these and end up in a group home or nursing home for the rest of their lives - completely unreliable, and yet still longing for marriage and still wondering why none of the great men at church ask them out, or why they have not been promoted to the highest level of ministry leadership within the church. I went asking for help knowing how to set boundaries and also what to be able to expect from someone who has both of these diagnoses. While everyone is not the same, certainly, then I discovered that the constant 3 steps forward and then 3 steps backward is what life with a schizophrenic is like. We can certainly hope and pray, and we can continue to gently point out the lies when they are being believed, but the way it typically works on this fallen sinful earth and therefore the way that God allows it to work is that the lies are irrefutable to her and that we are just out to get her by telling her that they are lies. The psychologist suggested that we do two things: Then leave the ball in her court to put two and two together to see that this happens frequently and that she may be convinced that a thought is true and then the thought is always shot down in the end. And if she is going to be able to put two and two together, then that will be an amazing work of the Holy Spirit. Then leave it at that and even encourage the person that she is mad at to call her and tell her that they love her. But we can also set good boundaries with her by saying things like when she says that she is going to quit the church then we are not going to let her keep making decisions in whatever ministry team she is involved. So that presents a combo of grace where we overlook a lot because of the illness and of personal responsibility where we give her a consequence if she is going to choose the path again of threatening to leave the church where she is a member and has made a commitment. One last thing - I Corinthians I confess that I often see her as very dispensable - as a trouble maker causing the same problems again and again, and as one who just takes from the Body! But the Holy Word of God tells us absolutely otherwise. I pray that God will work in all of our hearts to see this truth and to live according to it.

Chapter 2 : Member Stories | SARDA

Free and confidential support group for people with Schizophrenia. Meets second and fourth Thursday at pm at the Fairview United Methodist Church.

It gives people the words to bring every part of themselves--even mental illness--to God in worship. Moore and Shea used the vertical habitsâ€”words that build relationships with God and othersâ€”to create safe, simple, and inclusive worship for youth and adults affected by mental illness. Create a space of safety, welcome, and trust Most youth Moore works with have a history of trauma. Both tasks require authenticity, constancy, availability, tolerance for being tested, and establishment of appropriate boundaries. He is a constant prayer warrior for all of us. Keep worship simple, experiential, and interactive Since mental health issues usurp mind share, simple worship works best. Someone may need to briefly leave worship because of medicine, stress, or feeling overwhelmed by crowds. He or she can more easily return and reconnect if each worship element builds on a central thought. The activity is the vehicle by which we gain access to their interior space and world. Within seconds the girl returned to the present moment. Support group members loved taking responsibility for the coffee time after worship. Ideally, churches that truly welcome people will make room for their gifts. Shea knows a man with schizophrenia who enjoys working in the church nursery with others. Accept us if we sometimes need to back out for an episode of mental illness, just as someone with a physical illness would be accepted. Buy *The Worship Sourcebook* , the resource Cheryl Shea used to develop worship services for an adult mental health support group. Buy the book *Soul Surgeon* by Cheryl Shea. Sometimes the whole group would drum, instinctively finding rhythms that sounded good together. Join online conversations and find resources about churches and mental illness in the Disabilities Concerns discussion network. Browse worship resources for people affected by post-traumatic stress disorder PTSD caused by war. Start a Discussion Who keeps track of individuals and families who deal daily with mental illness? What structures does your church have in place to offer support and respite? How might using the common language of the vertical habits help your church more fully integrate people affected by mental illness?

Chapter 3 : schizophrenic Alcoholic | Christian Forums

This can be Alcoholics Anonymous, Narcotics Anonymous or Cocaine Anonymous. Write in a journal 2 times a week They are mandating juveniles to the same meetings as felons and sex offenders.

Mandating the mentally ill patients to 12 step programs that dont like therapists and tell many participants not to take their meds. Wow,that sounds like a swell idea! AA likes to call their unique demographics that are made up of violent felons, sexual predators, serial rapists, murders and the seriously mentally ill many whom are suicidal , a wonderful place to encourage teenagers and younger minors to come join! AA is famous for stating that the meetings are just a microcosm of society. Limitations Of 12 Step Programs 12 Step programs designed for people whose problems are primarily substance abuse are generally not recommended for people who also have a mental illness. These programs tend to be confrontive and coercive and most people with severe mental illnesses are too fragile to benefit from them. Heavy confrontation, intense emotional jolting, and discouragement of the use of medications tend to be detrimental. These treatments may produce levels of stress that exacerbate symptoms or cause relapse. The scene in court includes, left to right, Jeff MacLean, deputy district attorney; Joe Simich, probation officer; Rebecca Blaney, public defender; and a client reporting to Judge Hernandez. Washington County Oregon At the start of a recent Mental Health Court session, the year-old judge tells the crowd he shredded his ankle his first time snowboarding. One of the defendants, diagnosed as a bipolar alcoholic, says falling is the best part and volunteers to teach the judge how to do it right. Another time, a meth addict with a bipolar diagnosis says she is discouraged that her theft conviction keeps her from getting a decent job. The banter puts the mentally ill defendants at ease. Hernandez shows he believes in them and trusts them. The rapport between judge and defendants, along with intense supervision and hard work by a team of court, corrections and mental health staff, has helped the special court navigate the ups and downs of its first year. Earlier, Hernandez sent the man to jail on a probation violation. One woman died from a heroin overdose. Some participants attempt suicide, abuse alcohol or use illicit drugs. Some miss appointments and classes. Every session, the judge metes out jail time or community service to those who slip up. One woman with a bipolar diagnosis used to be hospitalized several times a week, threatening suicide. Heather Wiegele, 30, who was diagnosed as bipolar at age 13, was convicted of drunken driving and skipped out on her probation. She says she appreciates that Hernandez, who told her she had to comply or go to jail, is tough but fair. The judge conferred with the rest of the team and said she needed to get a job and finish the program here. She drank, took 60 of her anti-anxiety pills and ended up in the hospital. She has a landscaping job and has moved into the Coop. What kind of treatment would a defendant be ordered to complete? Each defendant will have a treatment plan that addresses their unique needs and community safety. The treatment plan could include mental health treatment, medications, inpatient or outpatient chemical dependency treatment, Alcoholics Anonymous, domestic violence treatment, sex offender treatment or other specialized treatments as recommended. What are the primary goals of Mental Health Court? Does the Drug Treatment Court Program have special conditions? To finish the program, the minor must: Write in a journal 2 times a week They are mandating juveniles to the same meetings as felons and sex offenders.

Chapter 4 : Schizophrenics Anonymous - Wikipedia

Member Stories. The following are stories told in their own words by Schizophrenia Alliance/Schizophrenics Anonymous members.

While I was a member of this particular Church a very good friend of mine developed schizophrenia. The first thing I was told was that my friend was possessed by demons and spirits. That there was no hope for this person and this person was on their way down to hell. The sad thing about the whole thing was that the Christians there had me convinced that this was true. Meanwhile I was developing schizophrenia myself. When my schizophrenia got to the point where it was in full bloom and I started using drugs and alcohol again I was told the same thing about me. They told me that I was full of demons and spirits. This was after I left the Church. I was having difficulty living up to my religious beliefs because of my mental illness so rather than being a hypocrite I left. A few years later I met a fellow and he attended a Church. We became very good friends. I started going to Church with him. I told him right up front the day we met that I had schizophrenia. This fellow showed me a book called "Pigs in the Parlor". It was about people that had schizophrenia were possessed by demons. In fact a whole legion of demons. Every symptom of the illness was caused by a different demon. Of course he told me that I was full of demons. For awhile there he had me convinced that it was true. I started asking around looking for a Minister that performed exorcisms. I was in a big mess mentally and psychologically. After awhile I muddled through all this and came to the point where I no longer believed that I was possessed by demons. By the grace of God I came to believe this. Even though I still suffered from the symptoms of my illness believing that I was not possessed by demons brought some relief mentally and psychologically. A few years later I was with a Christian from the first Church I was involved with. He even went as far to say that the Schizophrenia Society was of the devil. This really upset me. When I went home I told my Mom about this. She got angry, called him up, to tell him off. Not only did I experience stigma and discrimination from him but outright denied it. I still have my Christian beliefs. I need to find a Church that does not believe that mental illness is caused by demon possession and does believe that mental illness is a real biological disease. But that is still not good enough. I would probably still encounter other forms of stigma and discrimination there. I probably would not be accepted by the Church community. I would be left out in the cold there. Look at the gay community. They were rejected, stigmatized, and discriminated against by the Church. But they solved the problem. They started getting together all across this great country of ours and started their own Churches. So now we have gay people able to get together, worship God together, have fellowship together, and help and encourage one another with their Christian faith and walk. Get together, worship God, have fellowship together, and help and encourage one another in our Christian faith and walk. Not only that if people that are not consumers want to attend our Churches we would gladly receive them into our Churches and let them be members if they so please. But there is an obstacle. Consumers that believe in Christianity need to find each other so that they can get together and start our Churches. We can all share in giving sermons at Church services. Those that have a gift for it. We can organize the way we want our Churches to be governed. Eventually have our Churches scattered all over this great country of ours. The gay community did it.

Chapter 5 : Vertical Habits and Mental Illness in Worship

Houston Schizophrenia Anonymous. 79 likes. Welcome to Houston's very own Schizophrenia Anonymous page. We help support those with schizophrenia and.

This article has been cited by other articles in PMC. Abstract Both geographically and historically, schizophrenia may have emerged from a psychosis that was more florid, affective, labile, shorter lived and with a better prognosis. It is conjectured that this has occurred with a reflexive self-consciousness in Western and globalising societies, a development whose roots lie in Christianity. Every theology also presents a psychology. Six novel aspects of Christianity may be significant for the emergence of schizophrenia—“an omniscient deity, a decontextualised self, ambiguous agency, a downplaying of immediate sensory data, and a scrutiny of the self and its reconstitution in conversion. Christianity, conversion, indigenous psychology, proprioception, proto-schizophrenia, schizophrenia, self Paul, you are beside yourself, too much study is sending you mad. Before considering evidence for the nonuniversality of schizophrenia, we have to bear in mind that any attempt to search for the illness beyond its current perspective leads to the obvious objection that overt schizophrenic symptoms, though present elsewhere, may be apparent only within an already modern and Westernised perspective. Barrett , finding the Iban of Borneo have difficulty understanding his questions about two first rank symptoms, thought insertion and thought broadcasting, argues in a related way. His three Iban individuals contrasted with 39 European Australians in a matched psychotic sample who experience these symptoms are all converts to Christianity. But equal numbers of Iban and Australians experienced auditory hallucinations. Traditional Iban notions of thinking, he proposes, are much more embodied, tied closely to emotion, will, and desire: Nevertheless, past commentators have inevitably made judgements in relation to their own categories of illness, and putting their own conclusions together can never be fully persuasive: We can take these comments with a degree of caution. Not only colonial prejudice and Victorian anxieties: Imperial psychiatrists in Africa like Tooth and Carothers as, more recently, Lopez in Brazil, Beaglehole in Hawaii, and Dhunjibhoy in India later commented on the infrequency of schizophrenia among communities relatively untouched by colonialism or Westernisation as reviewed by Torrey in but on the high frequency of toxic, confusional, or organic symptoms found in apparent schizophrenia the primary illnesses here may of course have been an infection , but we have to be aware of their fairly prejudicial colonial mindset. Yet the Nigerian psychiatrist Adeoye Lambo agrees that schizophrenia among nonliterate Yoruba is less likely to be associated with systematised chronic delusions and is more confusional, anxious, transitory, and affective, whilst urban Yoruba have the same pattern of schizophrenia as educated modern Europeans. It is perhaps better to rely on anthropologists taking into account the local concepts of personhood and illness who draw rather similar conclusions. Ackernecht cites some early field studies. In Ghana, Field however argues the association between education and schizophrenia is simply that the former makes the illness more visible, but Fortes in in a different and more administratively remote area, argues rather differently. He carried out his initial fieldwork among the Tallensi of northern Ghana in the s, and then revisited them with his wife, a doctor and medical psychologist, in the s. He thinks there were no others and that early death or social concealment by the generally tolerant Tallensi were unlikely. By contrast, among the same villages in the s, with local missionisation and some primary education, Fortes and Mayer find 13 cases, and more in neighbouring areas: Most of the 13 had previously worked in urban Southern Ghana for a period, either as domestic servants or unskilled labourers. Firth , p. Reviewing data from Ireland and Istria, Murphy , p. Devereux proposes schizophrenia as a psychose ethnique, a product of violent processes of acculturation and oppression Devereux, , p. Leff , p. Historical variation Early Babylonian, Egyptian, Hebrew, and Indian texts refer to what we may take as insanity: Clarke, but not in any systematic way; there is simply a general recognition of irrational behaviour along with a demonological explanation. Ideally the term used for this by physicians or other experts in earlier eras should be supplemented by popular lay perceptions Macdonald, and by detailed biographical descriptions Macdonald, , but the early experts did not amplify their diagnoses with the sort of description we need. Without such evidence we cannot easily accept such statements as this by Zilborg , p.

How can we know? However, there is some idea of chronic madness in tragedy Padel, , and Jeste, Del Carmen, Lohr, and Wyatt argue that these are historical descriptions of something like schizophrenia but that the symptoms have changed over time, whilst Devereux , p. Certainly something happens here. It is in the later Roman period that Philo recounts an actual case of a quiet and chronic madman Rosen, as does Aretaeus Zilborg, , p. And here we have a long gap between Hippocrates and Galen and the 17th-century English divine and astrologer, Richard Napier, who kept modestly detailed records and clinical descriptions of his patients. Napier or, rather, his biographer who examined the casebooks statistically finds a higher than expected proportion of young adults among those severely mentally disturbed, an association with villages with a transient population and those with a higher than average proportion of Puritans and Catholics both presumably more religiously observant than moderate Anglicans; Macdonald, , pp. These are all distinguished from melancholia and from what we would now term situational and neurotic complaints. Clarke, , p. Cognitive changes are sometimes noted: De Gordon in the 14th century mentions talking to oneself, failure to finish sentences or explain them, meaningless remarks and aimless wandering, affective lability and attempts to grasp the impossible and irrational with poor judgement as cited in B. Clarke favours such biographical data when we can get it, to avoid the emphasis on the obviously acute and frenzied cases which in the medieval period and later were dealt with by immediate physical restriction rather than observation. Clarke, , Chapter 9. Lunacy Latin *insania*, furor; Greek *mania* now was generally distinguished from *phrenyse* which occurred only with a fever B. Already in the 17th century, religious enthusiasm had been said to lead to insanity, and in the early 19th century it was recognised that there had been an increase in incidence in Western Europe, especially in the towns rather than the countryside, and especially in England , pp. In , rates of insanity were approximately 1 in 1, in Europe Scotland 1 in as opposed to 1 in in the United States in a survey that took into account bias and data selection. That until the s delusions seem to have been included as melancholic rather than manic symptoms Macdonald, , Chapter 4 , and that it was the florid and antisocial patterns which naturally came more readily to public notice may however of course both argue that recognition of schizophrenia or proto-schizophrenia was likely to have been reduced in the earlier period, to increase in the modern era when both facilities and diagnostic patterns resemble more closely our current procedures. Most medical interest has focused on the social response to psychosis: In this paper we focus on Christianity, not because Christianity is the single salient influence on the modern world, but because it is a significant one that has influenced indeed it has made possible the appearance of the industrialised and individualised world, so much so that a history of the West without Christianity would be meaningless. All universal at least religions provide not only an account of extramundane beings and our ultimate justification, with prescriptive norm, for social life, but also some account of the nature of humans and how they function. Though theology is obviously a social representation rather than an internal or external account of lived experience, it will be evident from the anguished quotations below particularly those from St. We have emphasised conversion because here the discrepancy between lived experience and theology is especially salient. The idea of the modern self famously provided by Geertz , p. A theology tells us what a person is, how people differ, how they act and are motivated, a theory of uniformity and difference; it offers a schema for the natural and ultrahuman worlds, for agency, and for influence; how appetites, emotions and cognitions arise, what they signify; and a schema of our ultimate destination as beings. Every theology involves its practical, everyday psychology of human life. Sass , following the work of the phenomenologist Wolfgang Blankenburg, proposes that psychological hyper-reflexivity is significant in schizophrenia: The initially tacit, including the processes of personal psychological functioning, now becomes the focus of awareness: Aspects of the self are experienced as akin to external objects as the tacit becomes forced, artificial and awkward, and to be examined. Living with this destabilising cognitive slippage and the loss of the tacit is made worse, says Sass, 9 by those modern societies which encourage the same tendencies, in which everybody increasingly lives in a less stable external world and is plunged into idiosyncratic internalised experience, into a set of fragmented pluralistic alternatives in which the act of choice itself becomes problematic, and in which the individual self is increasingly restricted in that its processes, indeed it itself become an object for scrutiny. The popular gods of later paganism, amoral and deceivable Origen, , p. While Christian universalism was to be characterised by

belief, Greek and Roman religion had been orthopraxic, later with an idea that empirical knowledge of the gods was possible through divination, oracles or emergent fate: But gods and humans were in a reciprocal relationship where the former could be benevolent when men practised the correct ritual or sacrifice: Roman, like modern African, sacrifice was concerned with warding off disaster or to achieve practical benefits Peel, Omnipresent, he controlled every bit of the world, not just the area around his place of origin. Similarly the Hebrews who migrated from Palestine to Alexandria in the late Hellenistic period had had to do without a God in his Temple in Jerusalem; as they had to, more radically, after the destruction of the Temple and the expulsion of the Jews by Hadrian. Communication with God was now not only by a ritual of place but by an obligatory internal personal conversation—prayer. This God was universal, omniscient, and omnipresent: There was no escaping this God for He already knew what you were thinking, but one could try to plead with Him or placate Him in a silent conversation and he might respond personally: Missionaries, evangelising the Yoruba in the 19th century, consciously modelled their work on the Acts of the Apostles Peel, , p. Christianity pushed the pagans into a universal linear time of redemptive history and away from their cyclical local history Leach, Rather than, say, committing a particular crime in society, the Christian was born in universal sin which could be redeemed. For the Yoruba, their concern with a deferral of death was transformed into the promise of eternal life Peel, —or damnation. And ultimate control rested with Him, Creator and Master of the whole universe, throughout the whole universe. If God was independent of social context and place, then so was the individual self at least in its conversations with God as Dilthey argues. Religious status was no longer signalled by external signs circumcision , or social position the higher stages of the Roman priesthood had been occupied by aspiring politicians in the course of their career: But now an enduring part of the self, or an associate of it—the soul—had a connection to what might be called body and consciousness yet had some sort of ill defined association with them. In its earthly body it was in potential communication with God. Like God it was immaterial and immortal. The associated resurrection of the physical body, though an essential part of Christian dogma, has played an increasingly less important part in the Church [cf. For 19th-century pagan Yoruba who already accepted some idea of a hereafter, each village has its separate afterlife which had to be fused by the missionaries into a more universal schema Peel, , p. If the conversation with God was one to one, then each self-aware individual had then to make up their own mind on adherence—and thus the detached observer became the surveyor of the whole world Dumont, The missionaries in Africa constantly attempted to reach the inside of their converts, but bemoaned that the Yoruba did not seem to have any inward core to the self Peel, , Chapter 9. Everyday mundane self and experience were suspect and had to be interrogated. Immoral acts now become a part of you rather than something circumscribed and past to be punished by illness or crop failure: Francis de Sales , pp. There was a shift from practice to belief emphasised yet again in the Reformation with its particular emphasis on self-control [Max Weber] , and thus a focus on how you could believe, how you knew that you believed, and what it was to be sure Needham, But there never could be any certainty, as Calvin notoriously noted. Augustine quotes Galatians 5. The point of self-examination was to achieve a new self mastery to conquer what were taken as the more bodily emotions. Colombanus writes in a 7th-century sermon: Early monastic accounts emphasise a constant monitoring of mood and the practical management of mood, in fighting the demons of anger Goehring, ; Stewart, Secular introspective scrutiny in printed autobiographies as well as in private letters can be dated from the mid century in England, emerging out of the religious confessional literature Skura, ; Barker ; cf. In Christianity there was now a clear Platonic separation between the world of everyday experience—mundane, temporary, and compromised—and the real other world which was beyond sensory perception. Ignatius , p. Origen , p. Live a dying life—dead to self. Our current world was impermanent but we had been redeemed from the sin of Adam through the Incarnation: It is particularly the immediate material aspects of our current world—food, sex, comfort, anger—that must be downplayed through fasting and self-denial, and engagement with them deprecated Origen, , p. This involved the individuals themselves who to an extent become questionable and unreal.

Chapter 6 : Resources – Nami Birmingham

Schizophrenia Advocacy – Schizophrenia Education This request came in from a researcher at a Texas University - please help him if you have a few minutes to spend responding to his survey, and if you have had any involvement with a Church with regard to a brain disorder like schizophrenia (or other mental illness).

Of course, Alcoholics Anonymous—the subject and setting of much of the book—embodies this idea. Crazy people in AA meetings often say smart things. In this excerpt, Mary recounts the experience of trying to invalidate the AA program by revealing that the crazy people in AA are incapable of offering sound advice. In it, she seeks counsel about her failing marriage from a schizophrenic named Jack. Jack of the red curly hair, skitter-eyed Jack, who “on being introduced to me first” explained that he had a little touch of the schizophrenia, as he held his index finger one inch from thumb. Mostly he stays medicated enough to hold down a job at the box factory. So I start whispering my tale of marital woe to Jack, who sits in the hunched posture of somebody tensing against a blow. Eventually, I wind down and ask, what should I do? And I wait for the word salad of his scrambled cortex to spew forth. Instead, his eyes meet mine evenly, and he says “as it seems everybody says” You should pray about it. What Jack says issues from some still, true place that could not be extinguished by all the schizophrenia his genetic code could muster. It sounds something like this: Get on your knees and find some quiet space inside yourself, a little sunshine right about here. Jack holds his hands in a ball shape about midchest, saying, Let go. Surrender, Dorothy, the witch wrote in the sky. I want to surrender but have no idea what that means. He goes on with a level gaze and a steady tone: Yield up what scares you. Yield up what makes you want to scream and cry. Enter into that quiet. And pray to be an instrument of peace. Where there is hatred, let me sow love; where there is conflict, pardon; where there is doubt, faith; where there is despair, hope! What if I get no answer there? Fulfill the contract you entered into at the box factory, amen. Make the containers you promised to tape and staple. Go quietly and shine. Those not impelled to act must remain in the cathedral! He kisses his index finger and plants it in the middle of my forehead, and I swear it burns like it had eucalyptus on it. Like a coal from the archangel onto the mouth of Isaiah.

Chapter 7 : The schizophrenic church (edition) | Open Library

Edition Notes "Project by the Institute of Ethics and Society, San Francisco Theological Seminary, commissioned by the Division of Lay Education and the Office of Church and Society of the Board of Christian Education, the United Presbyterian Church U.S.A."

Find articles by Stephen A. Manca Find articles by Terra A. Abstract Over 60 years ago, founder L. Scientology emerged from Dianetics, which Hubbard hoped would replace the psychiatric profession. In this article, we discuss how Scientology attempted to position itself as a rival profession to psychiatry and the consequences of those attempts. This war began with Scientology founder, L. Ron Hubbard " , and continues under his successor, David Miscavige b. Scientology began as Dianetics, which was a supposed alternative to other s mental health therapies. Finally, we conclude by discussing how Scientology attempts to undermine psychiatry by its oppositional campaign, while remaining unable to provide a workable, effective alternative to psychiatric pharmaceutical practice. Professionalisation, Scientology, and psychiatry Abbott stated that early professionalisation theories prioritised the structure of professions, as if they lacked history, emerged homogenously, and progressed towards a similar end. In addition, professions usually have a single set of ethics, which dictate behaviour for dozens to hundreds of schools and affiliated professionals Abbott, , p. Attributes such as these are applicable to Complementary and Alternative Medicines CAM , including Scientology " although Scientology has alternative practices and beliefs beyond health concerns see Kent, c ; Manca, Professionalisation theories about battles for power and authority explain the structure of the professions system, which involves constant struggles between and among professions to maintain dominance over their jurisdictions Abbott, , p. The ability of a profession to sustain its jurisdictions lies partly in the power and prestige of its academic knowledge. Abbott, , pp. Dain, , p. In the s, however, psychiatry was losing on both fronts. Psychiatry up to the early s In , the American Medical Association was founded and opened membership to psychiatrists Grob, , p. At that time, psychiatrists refused to join because they received higher status and greater income than medical doctors Abbott, , p. This status, however, declined as psychiatric practices raised public controversies. Between World War I and World War II, psychiatry utilised several controversial therapeutic interventions to treat some severe conditions. The most common of these controversial treatments were insulin shock treatment and electro-convulsive shocks in response to severe, chronic depression, and prefrontal lobotomy ostensibly as a response to severe behavioural problems Grob, , pp. Lobotomies, however, caused irreparable brain damage in patients, greatly reducing their quality of life and ability to function. Worldwide, there may have been up to , lobotomies performed Rodgers, , p. An additional factor that diminished the professional image of psychiatry between the s and s especially in America was the widespread use of psychoanalysis Dain, , p. Even so, psychiatry maintained that it was based in scientific knowledge Abbott, , p. Generally speaking, public acceptance of a profession requires measured results, but professions create the basis for measuring those results through the abstraction of knowledge. This abstraction, rather than scientific evidence, allows professions to measure results and treat problems such as illness or mental health through profession-specific practices Abbott, , p. In addition to these internal issues, psychiatry faced substantial external influences following World War II. External forces can disturb directly the system of professions by opening new task areas for jurisdictions or destroying old jurisdictions Abbott, , p. One war-related external factor that impacted psychiatry was the unexpectedly high levels of psychiatric casualties and resultantly high need for mental health treatment Gifford, , p. Nonetheless, other psychiatrists widened divisions within psychiatry when they criticised psychoanalysis and emphasised the importance of either preventative community programs or the reactive asylum-based therapeutic care that had dominated the field since the s Grob, , p. Attempted professionalisation of a pseudo-science Pseudo-sciences use research techniques and results that the scientific community and other rigorous researchers do not accept. While undertaking such techniques, moreover, pseudo-sciences claim to practice science Hansson, Within such frameworks, both L. Ron Hubbard and the psychoanalysts of his time practiced pseudo-science. At the very least, both therapeutic psychoanalytic psychiatry and its Scientology contender based numerous treatments on

dubious research. Even with its limited success rates, psychiatry survived this period because of cultural legitimacy and state support, which Scientology never gained. For example, in the nineteenth century, before medicine became more successful at curing disease than homeopathy, homeopathy fell in popularity because it lacked cultural legitimacy Abbott, , p. Likewise, for numerous reasons about which we lack the space to elaborate, psychiatry maintained cultural legitimacy despite its often-divided knowledge base. Yet, Scientology probably influenced psychiatric practice beyond what one would expect, given the problems that psychiatry had with both its public and legal claims to legitimacy. Hubbard a former fiction and science fiction writer who lacked medical, psychiatric, or other health care training developed pseudo-scientific mental health techniques and related claims that lured some people away from psychiatric and other medical treatment. Indeed, Hubbard integrated his techniques into a professional-looking system replete with journals and doctoral titles, which encouraged followers to regard themselves as knowledgeable beyond the confines of the psychiatric and medical professions. For example, in his book, *Dianetics: The Modern Science of Mental Health*, Hubbard marketed unique therapies as solutions to problems that legitimate professions of the early s could not relieve. Hubbard divided the mind into three components in a way that was similar to psychoanalysis. These components included the reactive mind, somatic mind, and the analytic mind Hubbard, b , p. Dianetics offers a therapeutic technique with which we can treat any and all inorganic mental and organic psychosomatic ills, with assurance of complete cure in unselected cases. Hubbard, a , p. A system for the analysis, control and development of human thought evolved from a set of coordinated axioms which also provide techniques for the treatment of a wide range of mental disorders and organic diseases. Hubbard, , p. Kent, c , p. Claims of what-turn-out-to-be spurious credentials are commonplace among pseudo-scientific persons who seek professionalisation Pratkanis, , p. Dianetics is not psychiatry. It is not psycho-analysis. It is not psychology. It is not personal relations. It is not hypnotism. It is a science of mind and needs about as much licensing and regulation as the application of the science of physics. Hubbard, b , p. In doing so, professions maintain the public image that they are unified, but internally, they are quite heterogeneous Abbott, , p. The *American Journal of Psychiatry* also rejected the article. Those rejection reviews have not survived, but numerous reviews from psychiatrists and other doctors have survived after Dianetics hit the bookstores. Examining reviews from and , we found three main types. First, supporters argued that Dianetics offered significant insights for health care professionals. Second, dismissive professionals disregarded its relevance entirely. Third, defenders of psychiatry attacked it as a threat to their profession. We provide a sample of numerous critiques that appeared in various s magazines and journals. Supportive reviewers claimed that Dianeticists were possible complementary professionals who could work alongside medical or psychiatric professionals as would a nurse or chaplain. For instance, a review in *Science Digest* stated, [i]t would seem that there is no harm, and probably some benefit, in two persons testing out dianetic methods on one another, provided that they do not try to take on the job of the doctor, or of the psychiatrist dealing with psychotics. Reviewers defending psychiatry attacked Hubbard and Dianetics. As we mentioned, professions such as psychiatry dominate power relations at the expense of other professions Abbott, , p. In return, by January , medicine and the supporting profession of law aggressively counter-attacked Dianetics. Few contemporary psychiatric professionals and their supporters publicly critique Scientology. Nonetheless, their accusations demonstrate that Scientology remains an undesirable and crafty opponent. Likewise, a medical doctor wrote an article requesting that mental health professionals counter Scientology attacks Fritz, Other mental health professionals offer guidance about the potential difficulty of treating patients affiliated with Scientology and other organisations that are hostile to psychotherapy Rosenfeld, Professions exist as an interconnected system of diverse jurisdictions that seek to annex new areas through cognitive domination Abbott, , p. Dianeticists and Scientologists believed that they had created new knowledge in an effort to annex a jurisdiction. Scientology initially used anti-psychiatric documents to appeal unsuccessfully to legitimating groups and organisations such as the American government and the public. Following this pattern, Hubbard reduced psychiatry to an ineffective and dangerous version of Scientology. In *Dianetics*, he condemned psychiatric and medical techniques: Many persons investigating the treatment of the mentally ill by psychiatrists and others in charge of mental institutions are prompted, when they discover just what the pre-frontal lobotomy, the

trans-orbital leukotomy and electric shock actually do to patients, to revile the psychiatrist as unworthy of his trust and accuse him of using it to conduct vivisection experiments on human beings¹. By contagion of aberration such people have been subjected to enormous stresses in this work, having had their own engrams in continual restimulation. They can be cleared [by Dianetics] and their experience is valuable. In one document, Hubbard even attempted to legitimate Scientology by aligning it with American values while claiming that psychiatry, psychology, and psychoanalysis respectively came from Russia, Germany, and Austria Hubbard, , p. In response, Hubbard restated his determination to bump psychiatry from these areas: The following year, Hubbard intensified his war efforts. The original purpose was to clear Earth. The battles suffered developed the data that we had an enemy who would have to be gotten out of the way and this meant we were at war. Hubbard [probable author], , p. Nearly two decades earlier, a IAS bulletin asserted that psychiatrists and psychologists cause crime: So what IS the cause of crime? The treatment of course! Electric shocks, behavior modification, abuse of the soul. These are the causes of crime. There would be no criminals at all if the psychs [sic: These claims combined with powerful images, such as a cartoon sketch on the front cover of the first international edition of a Scientology newspaper called Freedom that represented psychiatrists as horned, goateed, cloven-hoofed, pointed-tailed devils performing electro-shocks and lobotomies on the peoples of the world College of Scientology, , p. When Hubbard supplemented his pseudo-scientific claims with supernatural allegations, he both prevented Scientology from gaining professional legitimacy from the public and offset legal and medical criticism.

Chapter 8 : The Vulnerable Church: BIPOLAR AND SCHIZOPHRENIA

Schizophrenics Anonymous is a peer support group to help people who are affected by schizophrenia and related disorders including bipolar disorder, schizoaffective disorder, psychotic depression and psychosis.

Its desire to clear the planet of psychiatrists is public knowledge. But their own track record in the treatment of mentally ill people is alarming. There are numerous examples of a Scientology family devastated by the direct consequences of its faith. Elli Perkins, a devout Scientologist and popular member of her community, treated her schizophrenic son Jeremy as recommended by L Ron Hubbard: He stabbed her 77 times and then mercifully forgot what he had done. This not only deprived his family of a much-loved mother but ended his own chances of a normal life. The death of Elli Perkins continues to make headlines but it is not unique. Mentally-disturbed individuals who are deprived of psychiatric medication will repeat this pattern, so long as the cult continues to maintain its mindless opposition to all psychiatric treatment. Here are three more cases, two of which ended in tragedy. The writer said she had been a Scientologist for 16 years, during which time she became an ordained minister of Scientology. Her mentally-ill daughter was treated throughout this time in the approved Hubbard fashion - with vitamins and isolation. Lisa died and Jeremy is now in a secure mental hospital. The only advice which Scientology gave to Christa Martin was heartless in the extreme: Despite being threatened on one occasion with a kitchen knife, she persisted with the standard CoS treatment until her daughter was taken to hospital for the ninth time. The daughter then decided to take the medication offered. But her mother escaped death by a narrow margin and her daughter lost her childhood to a nightmarish mental aberration. Christa Martin had been a friend of Elli Perkins. Opposition to psychiatry and to psychiatrists is currently used by CoS leadership as a focus for mindless violence. Videos are shown which feature scenes of psychiatrists being killed by automatic weapons, recalling the mind-bending rants used by the Nazis in pre-War Germany. Anyone who permits a member of their family to take drugs is declared PTS, a potential trouble source, and told to disconnect from the sick person. She chose sanity and her daughter but the girl suffered years of torment until her mother left the cult. Scientologists are programmed to believe that they are the most important people on the planet and that their leaders have access to the secrets of the universe. This often overrides a genuine personal desire to help others. Christa Martin tells that, with the help of her husband, she escaped. She now talks about Scientology as one would talk of a life-threatening illness. I restored my marriage, I salvaged my business, and I am available to help my children. True JOY is pervading our lives at last. How evil can one be? He could be so evil as to hack the souls of his very devoted. Tragedy overtook another Scientology family in Australia in July In Revesby, a suburb of Sydney, New South Wales, Linda Walicki, an untreated psychotic of 25, killed her father aged 53 and her brother aged 15, and then attempted to kill her mother Sydney Morning Herald, 7 July Linda was diagnosed with mental illness late in but turned down the treatment offered by Bankstown Hospital because her parents were Scientologists. Unfortunately a magistrate at that time refused to sign an order which would have obliged her to continue her treatment. Was he irresponsible, badly informed, or influenced by the arguments brought by Scientologists? Captured on video, a spokesperson for the Sydney org at first denied any knowledge of the Walickis. In fact they were sufficiently devoted to Scientology to refuse psychiatric treatment for this very sick and much loved family member, and Mr Walicki is said to have been a top recruiter for the CoS. There is no doubt about their allegiance. But it is typical of CoS priorities that instead of supporting a bereaved family, they will back off, lying furiously if usually ineffectually, in an attempt to distance themselves from the negative publicity produced by their own actions and beliefs. Gary Beals 32 attacked his father, Arthur Beals, and his mother, Lawana, with a knife, and then shot his father with a handgun. Gary was a Scientologist. The CoS had talked him out of seeking psychiatric help while bleeding his bank account dry. He blamed them for his crime. There are many more, more than one might imagine, for the Church of Scientology not only prevents its members from seeking effective medical help but promotes psychotic episodes almost as a matter of course. There are, astonishingly, standard techniques such as the Introspection Rundown for dealing with psychotic episodes. Can someone please persuade the cult that in this case Ron got it wrong?

Chapter 9 : Alcoholic Prayer, Schizophrenic Counselors and the Nazareth Principle | Mockingbird

bipolar and schizophrenia Here is my dialogue with fellow church members about dealing with one with whom I work closely who is diagnosed with both bipolar and schizophrenia. I thought it would be helpful to see and to read.