

# The Psychology, Psychiatry, Psychoanalysis Nexus: “Mental Disorders” Drives Big Pharma Profit and Social Control

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*A century ago the fledgling, brand new “science” of psychology was still in the throes of struggling for cultural and academic recognition, acceptance and respect as the latest still unproven member of modern science. The Austrian neurologist Sigmund Freud was credited as the “father of psychoanalysis.” With Freud as psychology’s chief pioneer, the study of the mind and human behavior was then long on theory and short on practical, evidenced-based proof. The burgeoning academic discipline of psychology – psychiatry – psychoanalysis was still in its infantile stage in comparison to the long established bastions of the modern scientific method – the standard natural sciences of physics, chemistry, biology and medicine. These physical sciences more than adequately met the rigors of the scientific method through understanding and explaining life’s material forms to the extent that their basic theories governed by established natural laws of practical application produced a consensual, accurately measurable means of both predicting and controlling matter with a very high degree of proven success.*

On the other hand, psychology/psychiatry had no luxury of any unifying basic formulas, equations, laws or quantitative application that could accurately predict, much less control, human behavior. The complexity of the human mind as it relates to behavior has always rendered prediction and control virtually impossible. Moreover, scientific prediction and control of the human species raises all kinds of ethical questions that run counter to democratic principles and free will. Hence, the closest proximity to being able to collect “scientific data” through analyzing observable behavior that could easily be quantified was through the developing branch of psychology known as [behaviorism](#).

Russian scientist Ivan Pavlov with his bell and salivating dogs established the widely accepted phenomenon linking a stimulus to a conditioned response called classical conditioning. The seminal work of James Watson, William James and later B.F. Skinner forwarded the notion that rigorous scientific inquiry could focus on human behavior as the primary unit of observable analysis. Skinner’s concepts of operant conditioning and reinforcement as the explanatory driving force behind behavior also fit neatly alongside Freud’s rudimentary tenet that humans are motivated by drives to seek pleasure/reward and avoid pain/punishment. Effects of positive and negative reinforcement could readily be scientifically measured and assessed. Thus, the behavioristic component within psychology helped legitimize the discipline as a science.

Out of the fundamental need to further develop the science of psychology evolving from the dominant medical model came the related study and practice of psychiatry, trained medical doctors who specialize in the human mind combining study of its physical correlate the brain

with behavior. Abnormal psychology developed as yet another sub-branch within the field that delved into deviant behavior and psychopathology. As a scientific discipline at the turn of the twentieth century, the formalized study of the human mind and behavior in its initial formative stages as a still wannabe science recognized only [seven “known” mental disorders](#): mania, melancholia, monomania, paresis, dementia, dipsomania and epilepsy.

As the functions of the brain and its effects on abnormal behavior were further studied and delineated, a pressing need to classify the growing number of identifiable mental disorders manifested in 1952 with the very first published edition of the [Diagnostic Statistical Method of Mental Disorders \(DSM\)](#). The American Psychiatric Association Committee on Nomenclature and Statistics in its DSM-1 listed a total of 102 mental disorders. A half century later in 1994 the DSM-4 enumerated a whopping 365 mental maladies. And with the latest DSM-5 out in 2013, the massive list of mental disorders is now up to 374.

The proclivity for the psychiatric field to pathologize humans through exponentially increasing mental disorders can be the speculated result reflecting a deepening level of scientific knowledge, empirical evidence of society’s worsening mental health condition and/or the increasing linkage between psychiatry and Big Pharma’s greedy thirst for record-setting profits. The latter explanation takes into full account the unholy marriage between psychiatry and the ever-powerful pharmaceutical industry. Invention of new diseases leads to more Big Pharma profit.

Moreover, the alarming partnership merger between Big Business and Big Government combined with America’s morphing from a deceased democratic republic into an emerging fascist totalitarian oligarchy best illustrates this phenomenon that now has nearly every American able to be diagnosed with a specific mental disorder. Where there is no ethical or moral consideration for what’s best for the human population, having this convenient DSM tool leading the mental health system to in effect be able to certifiably declare virtually anyone with a diagnosable mental disorder ultimately becomes the perfect vehicle/weapon for abusive tyranny and oppression. Institutionalization in lock-up facilities like insane asylums, prisons and FEMA camps looms large in the feds’ not-so-hidden agenda, especially the [United Nations Agenda 21](#).

For over two decades Harvard [psychologist Paula Caplan](#) has led a valiant crusade against the labeling of humans based on the proliferation of newly identified mental disorders dispersed by the bible for clinical diagnosis – the Diagnostic Statistical Method of Mental Disorders. Beginning with her 1995 book *They Say You’re Crazy*, Paula has long been a vocal critic of her own field of psychology and psychiatry, more recently noting that it has come to now identify 374 specific classifications of mental disorders according to the latest edition – 2013’s DSM-5. Just in the prior seven years since the release of DSM-4R, she maintains that 77 new mental disorders have sprung up joining the ever-expanding list.

Dr. Caplan cites “[Pathologizing Your Period](#),” as illustriously perverse evidence of the damage done by inventing artificial mental disorders (like Premenstrual Dysphoric Disorder) that are mere natural biological functions all to enhance the profit making machine of Big Pharma. Just to show that as a feminist she is not partial to rushing exclusively to the aid of just her own gender, Paula Caplan cites [Delusional Dominating Personality Disorder](#) as the bogus diagnosis directed at males. She concludes the DSM is unscientific, fails to improve health and causes severe psychological damage to the diagnosed. The Hippocratic Oath of “first do no harm” is fundamentally violated by mislabeling humans in the worst possible way.

Of course the pink elephant in every psychiatrist office is Big Pharma. In a case of clear conflict of interest, while Big Pharma is busily funding the American Psychiatric Association (APA), twenty white male psychiatrists from the APA full of biases against women, minorities and the poor are misusing their paid imaginations to creatively invent yet new mental disorders every few years. Hence, Big Pharma and the psychiatrists behind the DSM both possess the self-serving interest to label more people as mentally defective in order to justify giving them more drugs. Money, profit and greed are at the root of all this horrific propaganda and disinformation.

Because there's so little money to be made in prevention, efforts toward actively promoting stronger mental and emotional health amongst our overly stressed-out populace struggling for survival is not a high priority. The pharmaceutical and healthcare industries are more about keeping Americans unhealthy, morbidly obese on toxically saturated chemical diets that prove to be a breeding ground for heart disease and cancer. To maximize Big Business profits, by design the powers-that-be want us to continue living unhealthy lifestyles that require long term medical care.

As a practicing licensed psychotherapist employed in the mental health field for more than a quarter century, I can honestly say the mental health field is no different. For years it too has been engulfed and bought out by the sinister profit driven greed of Big Pharma. In the same way that the US health industry is not interested in curing cancer as a disease, as too much money is made from it, the amalgamation of the psychiatric and pharmaceutical industry is not about preventing mental illness, it's about expanding and exploiting it.

The calculated focus on "psychopathologizing" the general population to the absurdist degree of making everyone diagnosable translates into a mentally defective population perennially in need of a quick fix – compliments of Big Pharma.

Misdiagnosis of mental disorders is off the charts. The entire diagnostic system has absolutely no scientific basis. The DSM is mere bogus propaganda. Operating as a psychiatric Gestapo, the DSM and Big Pharma are all about power. There is no brain pathology that can be detected by scientific medical testing. Every mental disorder is invented. It is not like a physical disease that with tests can be detected as real. Anyone with a license, credentials and wielding differential power can diagnose someone as mentally ill, using it as a malicious weapon. I found social conflict to be the crux at the root of the problem. Those who conform and don't make waves are considered "normal" and those who do not conform and express a mind and will of their own are typically labeled deviant, abnormal, mentally defective and mentally ill. If you do not think like consensus reality, you can be misdiagnosed. Those who hold different beliefs are susceptible to being labeled "crazy." In the name of helping, mental health professionals can actually do grave harm.

Even the most respected prominent leaders in the mental health field like National Institute of Mental Health (NIMH) Director [Thomas Insel](#) has criticized the DSM for going too far and not being scientifically based, "NIMH will be re-orienting its research away from DSM categories." Investigative reporter Robert Whitaker and author of *Anatomy of an Epidemic* [stated](#):

When Insel states that the disorders haven't been validated, he is stating that the entire edifice that modern psychiatry is built upon is flawed, and

unsupported by science. . . If the public loses faith in the DSM, and comes to see it as unscientific, then psychiatry has a real credibility problem on its hands.

Speaking of credibility problem, the latest misguided revelation from psychiatry in its urgent need to psychopathologize and label people is that anyone who is discerning about what they ingest in their bodies for obvious health reasons is also now diagnosable with a mental disorder. According to the latest version of the bible for clinical diagnosticians – the DSM-5, a person who demands to know if the food they consume is a GMO Monsanto-infested poisonous product, they must be suffering from [“Orthorexia nervosa,”](#) a so called condition that is “a pathological obsession for biologically pure and healthy nutrition.” Another defective label is currently used on any individual who loses a little memory as part of the natural aging process short of dementia. They are now suffering from a psychiatric illness called [Mild Neurocognitive Disorder](#) (MND).

If any young person is a nonconformist who dares questions authority, they are now quickly diagnosed with the label [Oppositional Defiant Disorder](#). Of course a sizeable segment of the more gifted and creative students in our dumbed down educational system can easily grow bored with the dull delirium of classroom dogma. Because the slow repetitive pace in the classroom is clearly not challenging or stimulating enough for the gifted to avoid becoming restless and antsy, soon deemed a discipline and/or management problem, they then systematically get mislabeled with [Attention Deficit Hyperactivity Disorder](#) (ADHD or ADD) and instantly prescribed damaging Big Pharma drugs.

Psychiatrist Colin Ross is a refreshing renegade within his field because he accurately indicts his profession for pushing drugs to the near exclusion of no longer practicing any psychotherapy. He expressed his observations regarding his [fellow colleagues in psychiatry](#):

I also saw how badly biological psychiatrists want to be regarded as doctors and accepted by the rest of the medical profession. In their desire to be accepted as real clinical scientists, these psychiatrists were building far too dogmatic an edifice... pushing their certainty far beyond what the data could support.

I was employed in countless settings where psychiatrists would routinely arrive at the facility and see twenty or more patients within an hour or two in a cattle call ritual and then be on their merry way to their next pit stop, all the way to the bank at the end of the day. Though there are good psychiatrists and bad psychiatrists in the same way there are good therapists and bad therapists, my view of the psychiatric profession is that most are just drug pushing Big Pharma whores.

Virtually all the drug studies show that [there is no difference between antidepressants and placebos in children](#) suffering from mild to moderate depression. Yet the side effects are horrendous with weight gain, increased cholesterol levels and adverse effects from toxicity. The psychiatry field has brainwashed our culture into believing that mental illness is caused by [imbalances in the biochemical system of the brain](#) and that psychotropic prescription medication is the answer in helping to restore balance. Yet science fails to back up that bogus claim.

There is no evidence that low Serotonin levels are the root cause consistently found in

depression. Just as many people with depression have high levels. It's been a Big Pharma myth that antidepressants address "low" Serotonin levels. And then for years we've been hearing about how Prozac and other antidepressants like Paxil and Zoloft have contributed if not actually caused hundreds of [suicides and homicides](#) especially amongst adolescents. The Journal of the American Medical Association even admitted years ago that the fourth leading cause of death annually in the US is from medication side effects. Death from painkillers alone have [tripled in the last twenty years](#). Big Pharma is literally killing us.

In [2013 the DSM-5](#) circumvented the rising criticism that psychiatrists are creating more disorders just so that Big Pharma can make record setting profits by deceitfully sub-categorizing a litany of yet even more ways to diagnose more people but technically not significantly increase the total number of disorders. This calculated manipulation is symptomatic of the deception that is inherently rampant in the field of psychiatry as well as our society at large. With the recent decades of financial crisis, high unemployment, increased poverty and impoverishment, destabilized family structure, more families struggling to feed themselves and make ends meet, surrounded by threatening global conflict and war, our population in fact is becoming more stressed out and the state of this nation's mental and emotional health is in fact becoming increasingly unstable. The combination of our overall population suffering more in conjunction with increased pathologizing of new diagnoses has actually caused [half of Americans to be diagnosed](#) with at least one mental disorder within their lifetime. Some critics would argue that virtually everyone can now be diagnosed with a DSM mental disorder.

This gross over-diagnosing, misdiagnosing and subsequent over-drugging has reached an epidemic crisis in America. As a licensed therapist for many years, I encountered this problem constantly. Psychology/psychiatry is not a science. In contrast, medical science bases diagnoses on physiological evidence. The mental health profession bases its diagnoses on unchallenged, bogus premises, preconceived biases and subjective judgment that have all been proven false. Additionally, the diagnosis of mental illness too frequently becomes a lifetime sentence that's severely devaluing, debilitating and needlessly life crippling and tragic. I always detested the Diagnostic Statistical Manual (DSM) as morally repugnant and far more damaging than beneficial. In fact, if anything it engenders a false sense of superiority and potentially a criminally abusive power within the diagnostician at the complete expense and detriment to the diagnosed. In short, it offers little to no benefit whatsoever but a whole lot of harm.

The feeble rationale rigidly holding onto the dubious notion that the diagnostic system is beneficial maintains that clustering symptoms of behavior together into an organized classification system allows for greater understanding that leads to more accurate diagnoses and subsequent greater treatment efficacy psychiatrically with prescribing specific Big Pharma drugs to treat specific disorders. I disagree totally. Misdiagnoses and prescribing drugs that too often only exacerbate and cause residual permanent damage is the commonplace norm. In very limited instances I observed drugs reducing symptoms significantly that merit the outweighed negative effects. Overall I found that both the labeling and the drugs each do far more damage than good.

This business of branding people with negative labels as deviant and abnormal that are often internalized and worn for life, i.e., clients eventually seeing themselves as permanently damaged goods, certifiably crazy. Diagnoses are simply based on a few fleeting moments of observable behavior that clinicians subjectively mistake as symptoms of DSM mental disorders because they are tuned in and trained to see the world solely



through their pathological lens. To me that's pure BS. Even a halfway decent healing practitioner looks to find and recognize client's strengths and talents and builds on them to raise awareness, enhance self-image and confidence. It's the difference between seeing the glass as half full or half empty with always the half empty assessment producing both a poor prognosis and usually equally poor treatment results. Stigmatization becomes a lifelong sentence and albatross that shackles and destroys humans. Society needs to be educated in order to realize as humans we all possess some degree of flaws and problems. And just because one might believe someone else has more, they are no less a person. Increased understanding brings increased compassion.

Both our culture and mental health profession has long held some serious misconceptions about the taken for granted veracity of the diagnostic system. It's been based on fallacies and pervasive misinformation purposely disseminated for profit. Labeling hapless individuals with mental disorders while still in their youth causes young people to identify themselves by their diagnoses and subsequently internalize their role as mentally ill persons. I saw firsthand the deleterious effects that labeling had on them. My own experience found those honest and brave enough to openly display a degree of difficulty adjusting to such a sick, fake society that breeds mass alienation as ours are actually healthier than those deemed well-adjusted who thrive in an unhealthy, toxic culture based on social Darwinism, competitive aggression, greed, deception and amoral blind ambition. Moreover, I found many of the so called professionals in the mental health field to be more pathologically "mental" than those they so quickly judge.

More of the blind leading the less blind a la the gem of a 1967 cult classic called "The King of Hearts." The film plot revolves around a French village that's been hastily abandoned by the local villagers leaving the normally locked gate of the insane asylum unlocked while just outside town the two armies of World War I line up to systematically destroy each other. The beautiful irony of this surrealistic Fellini-esque world is shown through the joy of living so fully and gently in the moment by the so called crazy people who in fact are far more skilled and gifted in the art of living than the so called "normals" in uniform nearby who are busily annihilating themselves. The moral lesson depicted a penetratingly deep wisdom that has never rung truer than the madness gripping our technologically driven, modern world that currently has humanity on a collision course toward total self-destruction.

Ultimately the diagnostic labels say far more about the pathology of the so called professional subjectively judging, or more accurately put, misjudging others according to their own biases, warped tendencies and misplaced values. Yet unfortunately this misapplied labeling can give license to abuse and put people permanently away. As each new revised DSM is issued every few years, the list of mental disorders keeps growing exponentially. This again says more about those who come up with so many new ways to misjudge and psychopathologize other human beings than it does about those being judged. It also indicates a growing pathology within a sick culture that is so focused on branding others as less than so called normal, which doesn't even exist in actual human form since it's a mere statistical construct. Yet this is the expected outcome when a sick and broken political and economic system rotting and decaying morally from within merges with a sick and broken mental health system that keeps conjuring up such an extremely twisted and warped lens by which to judge other humans. If it weren't so potentially damaging and sinister, it would readily be thoroughly laughable.

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*[Down.](#) It examines and focuses on US international relations, leadership and national security issues. After the military, Joachim earned a master's degree in Clinical Psychology and worked as a licensed therapist in the mental health field for more than a quarter century. He now concentrates on his writing and has a blog site at <http://empireexposed.blogspot.com/>.*

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