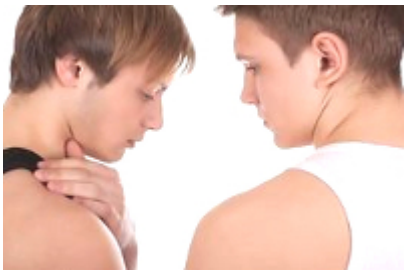
ANTI-PSYCHIATRY IN MASSACHUSSETTS



Here is a letter sent by us in January 2016 to the board of Massachusetts Resistance regarding the proposed ban on reparative psychotherapy in their state. In this letter we present a deeper understanding of same-sex attractions, the underlying psychiatry and anti-psychiatry and an analysis of gay activism.
Dear sirs,

You have asked our advice on the proposed ban on sexual orientation change efforts in Massachusetts.

Around four years ago I willfully changed my homosexual orientation to become straight for non-religious reasons when I turned 59, through reading the books on reparative therapy by Joseph Nicolosi.

Becoming ex-gay

His books were mind blowing: his insights turned out to be all you need. It was all there, waiting for me for all those years. I am sorry they were not available when I was sixteen, and if it is left to current gay-lib with its proposed nationwide ban it will stay that way for generations to come, a regret that I will have to learn to live with. When I was 16, I witnessed intolerance to gay guys, straight is the only way to go. Now at 63, I am witnessing efforts the other way around, gay is the only way to go, equally as intolerant.

Reparative therapy works, at least if you deeply love and want the idea of becoming heterosexual and it is all your heart desires, at all costs. If you are ambivalent, take my advice: go do other things in life. You must deeply love heterosexual guys and their way of life and loving. If you don’t, do not waste your time in this area, life is short.

Internal strife in gay-lib

Gay-lib has always experienced ideological development since my joining in 1969. There are deeply opposing views inside the organization. There is no one gay-lib. A great struggle of (ideological) power reigns within, and in recent debates, some small groups and individuals have become quite extreme, as is equally the case within the feminist movement, where for example radical lesbian feminists claim that being lesbian is the only way for each and every woman to go. Most women don’t agree; same applies to other discussions within gay-lib. Moderates say “come talk with us” to reach ever more consensus, radicals say “come fight with

us (Dutch COC says ‘Vecht mee’)” to reach a winner-takes-all situation.

Professional point of view on the proposed ban

I am not going to defend reparative therapy. It has all been described in detail at Narth.com. The most important duty of a legislative council is not to just listen to arguments for or against one or other proposed ban, but to investigate the situation which will arise for professionals and their clients if new legislation is instituted.



In other words, the question is: after the ban, what then? Because as legislator I am responsible for the situation I have just created. Have I considered it, am I fair, have I taken all scientific information into account, and above all, first and foremost, is it my call? Or are there any other ways to help society with looking into problems? Is a protocol an option? After all, protocols are a way of establishing an on-going train of self-regulation, be it fire brigade, paramedics or the animal cops.

But legislation petrifies any debate and deprives the professional community the right to trial and error. Legislation should be a last resort, not the first one on any issue.

How often has this issue been proposed to you as a legislative council? Are you sick and tired of it? Or is this the first time? Is the fire brigade chief prepared to look into it, or are you already putting him out of business as legislative council because little old ladies or some transgenders are dissatisfied with what they perceive is happening inside the fire brigade department or psychiatrist’s office?

In regard to transgenders, their hormone treatments make them exceptionally vulnerable to mood swings and deep depressed feelings. Every woman in her period know this. Transgenders desire a, medically totally unnatural, “correction”of their hormone balance. Research has proved that 50% of these people commit suicide before the age of 21, mostly due to the hormone treatment they feel they “need”. 70% kill themselves before age 59. Patients with anorexia nervosa, another distorted view on your own body, have a suicide rate of 10-20%. But transgenders under “recovery”, as they label themselves, are the biggest high risk patient group. Hormone treatment kills due to its psychological effects: a premenstrual syndrome which you have never seen the likes of before, with its dramatic effect on mood and thinking. Are these deeply disturbed people to run the show before a legislative council for all the youth in Massachusetts, while these people have no professional expertise?

Outlaws



The proposed ban means that all professional discussions with minors are outlawed there where sexuality is seen as something fluid, changing or mixed. It means that the world view of a small radical portion of gay-lib becomes dominant at the expense of other less radical gay-lib views, and then petrified in law. This not only affects the work of professionals, but stifles all debate within the emancipation movement itself. Opposing views within the professional community and the gay community on addressing the subject of human feelings, have become the ping pong ball of politics. As though professionals need state violence to do their job. Above all, the ban is a direct onslaught on heterosexual feelings; it is discriminating against heterosexuality as such. We is heterophobia and homo-sexism.

After eradicating opposition, the radical minority within gay-lib, who are homo-sexist, insist for minors exclusively having what is called Gay Affirmative Therapy (GAT). But within the psychiatric community, these activities are not considered psychotherapy proper.

Psychiatry proper

Why are they not? Gay Affirmative Therapy is not evidence based, it does not rely on any substantiated body of knowledge and it makes use of a diagnostic system that is not upheld by any psychiatric organization in any country. The scanty research (if it exists at all) is based on studying social interactions within a hostile anti-gay community and this is then generalized to a world view, applicable worldwide.

There is no research available on sexual orientation issues with teenagers from the GAT world view. GAT is based on experience with gay-lib activism and on anecdotal accounts from adults with a traumatic past, looking back in anger.

GAT stems from the workshops of newly recruited activists, who learn to make their way around within a small political pressure group. It stems from the scripts for the introduction weekends. Over the years, these workshops have been intellectualized, and with the help of sociologists, grounded in new sociological theory, read not psychotherapeutic theory or bodies of knowledge. Looking back in anger at the level of society became a recurring theme.

Sexual and physical abuse within the gay community is a topic which only recently has been researched. Lesbians physically abuse each other at a rate of 50% during their relationship, the figure rises to a staggering 75% if the other female partner mentions also feeling heterosexual urges. There is a great amount of hostility in the minds of various homosexuals and

lesbians.

Legislative policy

For the psychiatric community, stories coming from resentful adults will not do. Professional (and legislative) policy must be based on research with a representative, large sample of all kinds of teenagers, irrespective of their identities, living in the here and now, not on the testimonies of gay or transgender adults who tell their stories from way back when. Too often we as unbiased psychiatrists find these stories to be biased, emotionally colored and when coming from activists of any kind (religious extreme, gay-lib extreme, right or left wing extreme or otherwise), all too often limited in scope to the paradigm or prejudice of the activist group, although often unknowingly to the motivated members of the activist group itself.

GAT is biased or limited in its world view, in that it is based on a social discrimination model. But this does not ring a bell in The Netherlands, Belgium or Scandinavian countries, where forms of social discrimination have been ameliorated decades ago. The Netherlands has upheld upholds same-sex marriage for the last fifteen years, and in recent cabinets, up to 40% of the ministers in one cabinet were openly gay. It was no problem. Three of them were Christian Democrats, proving the non-existence of religious bigotry in northwestern Europe. Being gay is no big deal in the western parts of the EU.

The psychotherapeutic interest of professionals is not the prime instrument to deal with social issues in one or other town or community in a certain historical time period. Psychotherapy has a universal appeal and should be appropriate in any Western country or community. It is all about healthy functioning of your mind, not about the social hangups in the place you happen to live or have lived.

Paradigms

The underlying paradigm of American GAT is that human beings are divided into two groups: heterosexual and homosexual, with a small category called bisexual for those who protest. GAT upholds that 3 to 6% of the population are gay, know that they are gay, have always known that they are gay, and have always suffered from repression and discrimination. The rest of your fellow man is basically heterosexual. This unsubstantiated world view is not true and it will not do.



In the UK, the government wisely decided in January 2015 to do the above mentioned research under a large sample of youngsters themselves and under adults, gay and straight, in the here and now, and published it in November 2015 (click here). The results must have been a great disappointment for British gay-lib. We see that in the UK 49% of youngsters, when asked, say they experience or have experienced considerable amounts of homosexual feelings or homo-erotic attractions leading them to wonder if they were gay. By age 25, only 3% say they have adopted an exclusive homosexual identity.

Teenage years are always turbulent

As a psychiatrist, there is but one conclusion to be drawn from this scientific paper: the teenage years are a period of changes in identity, of confusion, and of experiments. Sexual orientation change efforts? Yes, teenagers do it all the time. There is no argument against discussing sexual orientation change efforts. Why? Because teenagers already try out their own experiments in different forms of sexuality. We see in this study that half of all teenagers wrestle or fool around with sexual feelings. Ultimately 90% of these teenagers do not adopt a homosexual identity.

This means that an approach meant to affirm a gay label is inappropriate, it is to be considered as overkill, and to be too narrow minded to deal with the teenager confusion which, for 90% of the youngsters, ends up in a non-homosexual identity. We consider GAT for these 90% to be potentially harmful. We strongly condemn any ban on psychotherapy.

Critique of Gay Affirmative Therapy

GAT is new on the health market, and it is being pushed by radical factions within gay-lib. The psychiatric community hardly looks close enough at the rhetoric, fearing that such scrutinization would be labeled homophobic by the activists.

When analyzing GAT rhetoric, we observe the diagnostic system of GAT implying that resistance to a gay label constitutes “internalized homophobia”. If you resist the gay label, or do not appreciate the gay scene or flamboyant and outrageous behavior, you are suffering from a “mental condition”. This diagnostic system was fabricated around 1997 and is acknowledged by GAT and GAT alone. Other mental conditions have also been fabricated: parents suffer from the “internalized covert cultural sexual abuse syndrome”, and are considered a danger for their child. Youngsters are led to believe that they have been traumatized, specifically in regard to their “innate” sexual orientation which has, according to GAT, always been there: the “born that way” ideology.

In the year 2000 Australian research with identical twins has proven this ideology to be wrong. In 89% of all identical twins in which a homosexual identity is mentioned, the other identical brother or sister identifies as heterosexual. Meaning that sexual orientation is in no way defined by genes, by hormones or biological influences during pregnancy. It develops later, due to psychological factors. There is no such thing as an innate homosexuality, because then 100% of affected twins would be gay, and they aren't. Not by a long shot, only in 11% of the cases are both identical twins. You are therefore not born that way. The 'born that way' hypothesis is unsustainable.

Youngsters are led to believe that their destiny is the gay scene and GAT considers it every clinician's duty to "push" youngsters to the gay community. Many youngsters feel uncomfortable with this; GAT then labels that uncomfortable feeling with yet another fabricated diagnosis: the "social minority syndrome". Society is to blame for your insecurities and doubts, and society is to be improved. Mental health is reduced to skills in achieving social change.

As gay activist and filmmaker Rosa von Praunheim stated in the elaborate title of his groundbreaking 1973 movie: "Not the gay guy is perverted but society all around" ("Nicht der Homosexuelle ist pervers, sondern die Situation, in der er lebt"). The movie, which was televised on all TV stations in 1973, is actually a disappointment, and only shows a perverted gay guy; it does not deliver if you wish to see what mistakes society is supposedly making and how you as a straight guy could learn from it. But the one-liner has nevertheless become mainstream ideology for groups of gay activists around Europe.

GAT is anti-heterosexuality

GAT in no way appreciates or affirms a heterosexual identity. Urges towards the opposite sex are considered to be brainwashing, and the youngster is led to denounce "his internalized hatred of his true gay feelings and gay culture", a culture which according to GAT is innate. Babies are born with their own gay needs and culture and it is their ignorant parents who do not recognize their girl or boy. In much the same way as the parents of Superman did not recognize that their kid was conceived out of kryptonite. All his suffering stems from this malfunction of the parents; the GAT guys replace Freudian theory with a developmental theory of their own fabrication. There is no body of knowledge or research to support or substantiate any claim made by GAT on this subject. It is pseudo-scientific quackery.

How is it possible?

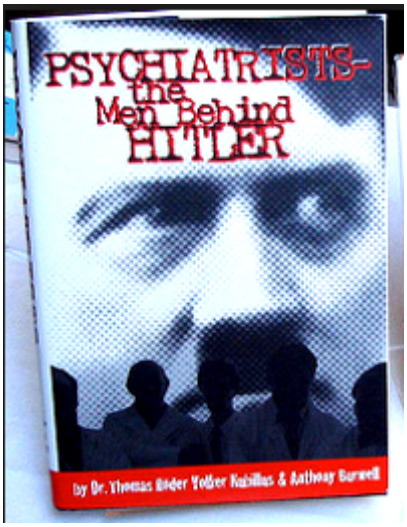
In dismay many see what extremist factions of gay-lib are fabricating, it seems to be an outright war on heterosexual feelings during puberty and the subsequent teenage years. Where is all this coming from? It is quite simple: the infiltration of the Gay Liberation Front by anti-psychiatry and its fore-bearer the Scientology Church movement.

What is Scientology?



In wikipedia (click here) we read: “Scientology is a body of beliefs and practices created in 1954 by American science fiction author L. Ron Hubbard (1911–1986). He was diagnosed as a paranoid schizophrenic. After developing the pseudoscience Dianetics after World War II as an alternative to psychiatry, Hubbard lost the rights to its seminal publication Dianetics: The Modern Science of Mental Health in 1953. He then recharacterized the subject as a religion and renamed it Scientology, retaining the terminology, doctrines, the E-meter, and the practice of auditing. Within a year, he regained the rights to Dianetics and retained both subjects under the umbrella of the Church of Scientology.

“Hubbard’s Dianetics had already encountered considerable opposition and controversy, first by deriding medical psychiatry and proposing an alternative, then by proposing to treat traumatic events from past lives. Controversies and legal problems surrounding the new church have continued throughout its brief existence. Scientology’s status as a religion is often a point of contention. Germany classifies Scientology as an “anti-constitutional sect” (verfassungsfeindliche Sekte). In France, Scientology has been classified as a cult by public authorities.

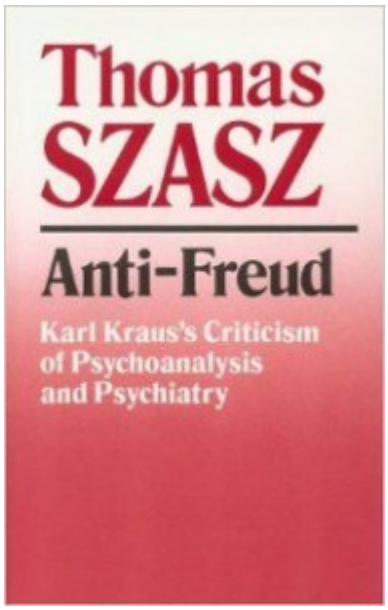


“Scientology is vehemently opposed to psychiatry and psychology. Psychiatry rejected Hubbard’s theories in the early 1950s and in 1951, Hubbard’s wife Sara consulted doctors who recommended he “be committed to a private sanatorium for psychiatric observation and treatment of a mental ailment known as paranoid schizophrenia.” Thereafter, Hubbard criticized psychiatry as a “barbaric and corrupt profession”.

“Hubbard taught that psychiatrists were responsible for a great many wrongs in the world, saying that psychiatry has at various times offered itself as a tool of political suppression and “that psychiatry spawned the ideology which fired Hitler’s mania, turned the Nazis into mass murderers, and created the Holocaust.” Hubbard created the anti-psychiatry organization Cit-

izens Commission on Human Rights (CCHR), which operates Psychiatry: An Industry of Death, an anti-psychiatry museum.

From 1969, CCHR has created campaigns to stand against psychiatric treatments, electroconvulsive shock therapy, lobotomy, and psychotropic drugs. In 1969, anti-psychiatry founder Thomas Szazz collaborated with Scientology in the formation of the Citizens Commission on Human Rights" so we read in wikipedia.

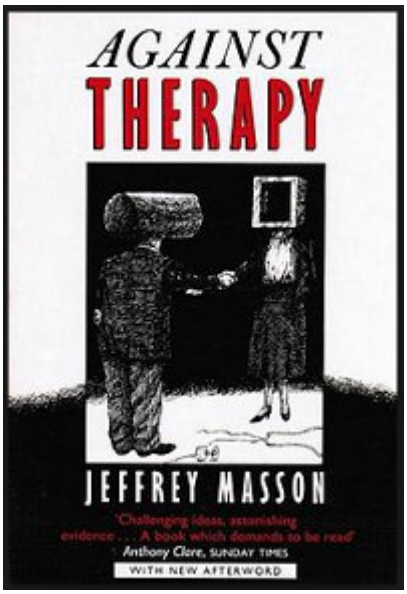


What is anti-psychiatry

On this subject wikipedia (click here) says: "Anti-psychiatry is the view that psychiatric treatments are often more damaging than helpful to patients, and is a movement opposing such treatments. It considers psychiatry a coercive instrument of oppression due to an unequal power relationship between doctor and patient, and a highly subjective diagnostic process.

"Anti-psychiatry originates in an objection to what some view as dangerous treatments. Examples include the now heavily obsolete electroconvulsive therapy, insulin shock therapy, brain lobotomy, and the over-prescription of potentially dangerous pharmaceutical drugs. An immediate concern would be a significant increase in prescribing psychiatric drugs for children. There were also concerns about mental health institutions.

“In the 1960s, there were many challenges to psychoanalysis and mainstream psychiatry, where the very basis of psychiatric practice was characterized as repressive and controlling. The bedrock of political medicine is coercion masquerading as medical treatment, so we are led to believe. What transforms coercion into therapy are physicians diagnosing the person’s condition an “illness,” declaring the intervention they impose on the victim a “treatment,” and legislators and judges legitimating these categorizations as “illnesses” and “treatments”, according to wikipedia.



Anti-psychiatry is harmful

In the seventies and eighties of the previous century this system of belief led to an extreme amount of misunderstanding and neglect of mentally incapacitated individuals. It was an unprecedented drama. In the nineties, we managed to abolish this train of thought from all mental health services in Europe. At least for heterosexuals.

The niche of gay-lib

But we overlooked a small niche or pocket of anti-psychiatry: the Gay Liberation Front. By labeling all dissonance as homophobic, gay-lib has achieved an immune status from social critique. There is a politically correct eggshell around gay-lib activism and we fear that new legislation will petrify this shell and turn it into rock.

This will turn out to be the ultimate end of free discussion and speech on sexual orientation matters. State violence, which is ultimately violence, is being sought to deter and terrorize any who dare state another world view, opinion or paradigm. The revolutionary of yesterday is slowly but surely becoming the tyrant of tomorrow, as happens after so many revolutions.

The ideology of Scientology, a movement created by a paranoid schizophrenic, has subsequently infiltrated other organizations. To this day we see infiltration into the anti-psychiatry movement, gay-lib and due to pressure groups the White House.

Infiltration in the White House



Obama speaks with Jarrett in a West Wing corridor.

In May 2015 White House senior advisor Valerie Jarrett bought into the public pressure of the anti-psychiatry attack on psychotherapy, enforced by the radical lesbian feminist pressure group called Born-perfect (click here). The group states that gay women are perfect and that society is sick and inherently abusive. State force is needed to put an end to the supposed force used by all psychotherapists who are not gay themselves. She made a video statement for a ban, in order to, as she says, put a stop to electroshocks, lobectomies and coercive compliance to intolerant and harmful social norms. These statements come directly from anti-psychiatry.

Every psychiatrist knows that these sorts of psychiatric practices have been obsolete for decades, but no regular psychotherapist or psychiatrist has been consulted by the White House. Regular psychotherapists are observed to be bad, vicious and secretive people who cannot be trusted. Jarrett knows for sure that there is “overwhelming scientific evidence” out there which would clearly show how harmful psychiatry is. Obama signs right on the dotted line in September 2015.

This “knowledge”, this “scientific evidence” is the beliefs of anti-psychiatry. No real article is to be found to substantiate these claims. Anti-psychiatry has an intuitive feeling about science, all of its own. In regular psychiatry, we call this a Flying Dutchman, the legendary ghost ship manned by dead sailors in the nineteenth century that everyone knew all about, but that no-one had actually seen for themselves.

All scientific facts in regular psychiatry are labeled myths, lies and fabrications, meant to brainwash and coerce innocent victims into compliance to degrading and inappropriate, inhumane standards. The world needs a new order in psychiatry, and the use of state force against regular psychiatry is the way to go. The ideology of anti-psychiatry is on its way to becoming mainstream. And as far as their paranoid rhetoric is concerned, the slogan appears to be ‘fear sells’.

Paranoid delusion

Scientology and anti-psychiatry is seen by us to be paranoid delusional. What is being created is a folie à deux, meaning madness by numbers. People with a paranoid delusion more often than not succeed in dragging others into their paranoid frame of mind. At the level of society, Flying Dutchmen constitute a real and alarming problem. Every regular psychiatrist knows: paranoid people are dangerous people. They are not victims of aggression as they claim, they fabricate aggression themselves and then project these uncomfortable vices onto others. They know for sure.

GAT unacceptable

Gay Affirmative Therapy is in my view unacceptable and harmful, due to the ideological founding in the ideas of anti-psychiatry. The latter denies problems at a personal level and insists that society, the external environment, is the root of each and every form of distress. Psychiatric labels are to be seen as instruments of coercion.

This world view is then to be brought over to every youngster who is vulnerable due to his or her sexual confusion. In GAT every notion of regular psychiatry, psychotherapy and psychoanalysis is turned 180 degrees around.

GAT upholds new ideas, without reference to any scientific research. 3% of children would be born gay, their mother is smothering because (according to GAT) she feels the need to protect her “gay baby” from an abusive society (there is no such thing as a gay baby), dad is emotionally or physically absent because (according to GAT) he rejects dissident human beings and imposes the abusive norms of a sick society, he is actually punishing deviant behavior like an instrument of a repressive world.

In GAT youngsters are set up against their parents and taught to see how they are “sexually abused” by them. If there is no sexual abuse, then there is “cultural sexual abuse”. If that cannot be demonstrated in the client, then there is “covert or hidden cultural sexual abuse”. If the youngster does not buy this rhetoric, then he or she suffers from “internalized covert cultural sexual abuse”; no wonder he is not aware of it. If the youngster finds the therapist to be talking crap, then the youngster is made aware of his “internalized homophobia” against the GAT therapist. Bottom line, GAT always wins, the kid always loses. GAT guys have an answer for everything, not a doubt in the world.

All gay youngsters are to be taught their “innate culture”, and are to learn to identify with the gay scene. Anything short of this is “homophobia”. All problems stem (according to GAT) from a repressive and unnatural society, confusing kids into thinking they have problems. They don’t, society does. In this way, GAT frees youngsters from having problems. The more you leave a so-called closet, the more free you are, and the more your sexual orientation problems will evaporate. Correct psychotherapy for gay kids is learning to deal with the vio-

lence, coercion and oppression caused by the heterosexual myth. A new developmental pseudo-psychology is invented, “the phases of coming out”, and this theory contradicts all psycho-analysis.

None of GAT is substantiated by any scientific research. It is contrary to all that psychiatry stands for.

How is this movement possible?

In 1973, the anti-psychiatry movement managed to have therapy directed at sexual orientation issues, labeled as unethical. By rule, any scientific research at universities has to pass the ethics committee. No approval will be given because it is “unethical”, hence no scientific research on the matter. Research by psychiatrists on homosexual issues has effectively been outlawed. Therefore GAT can get away with any claim it likes, because there is no scientific research out there to contradict them. And gay-lib intends to keep it that way. Hence, the notions of anti-psychiatry and Scientology have all the room they want.

A ban on Gay Affirmative Therapy for minors

We need a ban on Gay Affirmative Therapy for minors. It may be harmful for most teenagers who end up straight anyway, and that is the vast majority of kids with doubts about homosexual feelings. But it is also harmful for kids who in the end choose a gay lifestyle, because the GAT rhetoric leads kids into ghetto thinking, a form of segregation, with its us/them thinking and all the loneliness, isolation and estrangement from society at large that it entails.

The fight against the proposed ban on sexual change efforts must not only, in my opinion, consist of defending reparative therapy or whatever it is called. The fight must also consist of exposing the alternative which the extremists are putting forward. The GAT guys must first learn to address the scientific community with sound science, and not anti-psychiatry rhetoric. And they must be pushed into it. Only then can they be part of the necessary professional debate. Banning professionals by state violence in the way extremists are doing now, is stifling debate, forever if their rhetoric is turned into law. Because the whole subject will be off the agenda for a long time to come.

Professional arena, the only way to go

All discussions belong in the professional arena, and in the professional arena only, not in the legislative arena. Youngsters are not to fall into the hands of Gay Affirmative Therapy. GAT is to be chosen, only after you have reached the age of 21, and are strong enough to withstand the pressure that the GAT so-called “therapists” exert on you. They have all the answers, you don’t.

Anti-GAT is not anti-gay. As an ex-chairman of a local gay-lib let me say that most homosexuals don't share the GAT world view that you are either 100% gay or 100% straight and born that way. To be quite exact, according to the recent UK government study on the issue, three quarters of all British homosexuals and 75% of the general British population, don't hold this view. Based on this research, we may conclude that these GAT people are a small minority, masquerading as spokesmen and women for a whole community.

GAT stems from anti-psychiatry and the ideology of Scientology. It is just not the way to go. On any issue, for that matter. Kids have a right to an unbiased and broad approach on sexual issues during their years of searching and wondering. We need to end narrow mindedness and the one track mind of GAT.

Conclusion

We are witnessing a weird development in the legislation of Massachusetts. Problems with unwanted sexual organs? A highly ethical matter. Problems with sexual labels? An unethical and therefore criminal subject. You are allowed as a psychiatrist to counsel people who wish to "correct" their inappropriate sexual organ. But after the chop or after a new one has been sewn on, you are not allowed to counsel them on how to use it.

27th January 2016

Job Berendsen, MD.

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