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is psychology
science?



Author: Tio

Review: Ray

Proofread: Ray

Design: Tio

Year: 2014

Summary :

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Is Psychology Science ?

I want this to be a detailed article full of real life examples, critics of psychology and its methodologies, failures of psychology, and even its achievements. Please take this article not as a critique of psychology, but something to think about. The purpose of this article is to spot the unscientific methods of psychology, if there are any, but only so that psychology can be improved, not destroyed.

From mental diseases to evolutionary psychology, I will try to analyze it as much as possible, although I understand that psychology is not all that I will describe. Its methods and disciplines are many, perhaps too much to be properly analyzed in an article.

 My quest on analyzing psychology started 7-8 years ago, at the age of 18.

I started doing this because I came across all sorts of “psychological tests” on the internet, and the notion of “mental disease” which described behaviours that I had previous to that age. And I mean: behaviours, multiple.

I could have easily been “diagnosed” with ADHD, bipolar, tourette syndrome, panic attacks, severe insomnia, severe depression, severe anxiety and suicidal behaviour. And those are just a few. If I read through the DSM (the official manual for psychological disorders), I will find at least 20-30 other “diseases” that would fit perfectly to the way I behaved. I was shocked about this finding, but I knew that I had solved/changed all of those “problems” (patterns of behaviour) on my own, so they couldn't be actual “diseases” if I did so. Let's face it, you don't cure cancer just by thinking differently about the world.

First, let me tell you how severe those mental states were. You may be shocked to know how many “mental diseases” one can have. I had tons of tics and “strange” patterns of behaviour.

If psychology is not science, then what are the implications ?



Finishing the song

I had tons and tons of tics, from physical, almost involuntary movements, to language tics. But a very strange one was: if I was thinking of a song, I had to finish it in my head before doing anything else. You may find it hard to believe, but I couldn't sleep if I didn't finish singing the song in my head. I got rid of that by changing my mind about it.

Foot over cracks

Another tic was to always step with my right foot over cracks in the ground. I paid so much attention to it that I could have been hit by a car and never notice. My leg physically hurt if I didn't do that, but by changing my mind about it and seeing it as a stupid behaviour, I eventually forced myself to stop it. ([video](#))



The symmetric touch

If I scratched my left eye, I had to scratch the right one as well. Scratch one leg; had to scratch the other one, too. You may find it funny, as I do now, but you have no clue how bad and uncontrollable it was. I just couldn't stop it at the time, but solved it after two years or so when I changed my mind set and willed myself to stop it because it is nonsense. It felt strange when I stopped, but I managed to overcome it.

The heart-blinking

I was obsessed with eye blinking, and because it's something you do all time, if you think about it much, it becomes stressful in a way, knowing that it's an involuntary and constant movement. For me, this "blinking" became an obsession – to the point that I could barely keep my eyes open.

The same thing happened with my heart. Since it was another organ with involuntary and constant movements, it obsessed me to the point where just the thought of my heart beating could bring on a panic attack. I had this "problem" for two years or so. It felt strange that I have something inside me which ticks, like a clock...what if it stops ? :) I can joke about it now, but I had multiple panic attacks because of that. Sometimes I felt chest pains and would think that I was having a heart stroke and panicked. I felt like my heart was beating too fast or too slow.

The thing is, I solved it after having a medical exam that showed that there was nothing wrong with my heart. From that day on, I have not encountered that symptom again.

Hyperactivity

When I eat, for instance, I don't stay at the table, I just can't (well I actually can, but prefer not to). I have lots of energy and I am all around the house with the plate in my hand, eating. In school, I felt like running out of the class many times because of the boring program, and developed a foot-tapping movement because of it, which is now viewed as directly related to the Tourette syndrome.

I was always very energetic and sometimes paid attention only on what I wanted to pay attention, ignoring the rest. I never preferred one musical genre, or movie type, or any particular sport, or any particular style of anything. I always "tasted" from everything, rather than focusing on one main thing. Though sometimes, if I really like something, I can spend much time doing that thing. For instance, I love documentaries and sometimes I can even watch 12 hours a day and not get bored. Does that make me an ADHD candidate? If so, can I include my friends? Because most of them are similar. The only difference is the details of what they enjoy doing.

I also remember fights with my sister, some which came close to endangering our lives. We would fight for hours at a time, causing a huge stress for our parents. I remember my sister calling my mother at work and screaming for help in the middle of a fight. Although it may sound horrifying, this was a normal thing all kids were doing for various reasons (you have this, I don't, and so on). All kids were like that.

Depression

At one point in my life, I became "depressed" for about 3 years or so; till the age of 18, I think. My room and my computer were my life for this period of time, since I rarely went out. I knew I was depressed and the reason why, but I never considered it as a "disease".

The reason?

Mainly, I was so frustrated because people didn't see the world as I did. Because of that, I refused to talk to people, seeing no point of connection between me and them. I lost all of my friends because of this, and I had been quite a popular kid in school before this happened.

I couldn't understand how people could believe in gods, how they couldn't see that school has no value at all, or that we live on a giant sphere among all of these wonders beyond everyday life....how could they not wonder about those things? I felt like I was living among blind-deaf people with whom I couldn't communicate; how not to be depressed?

By that alone, depression is a normal reaction to a depressive situation.

Anxiety

I developed a "fear" of people when I was depressed. I hated so much to talk to any of them, and even a face-to-face casual meeting with any of the people I knew felt stressful to me. When I had to buy something from town (luckily, it was a small town), I had to go around it to get to the store, to avoid meeting anyone on the path.

I was like that because I felt like I had no subjects to discuss with them and they were all annoying, always asking questions I knew I couldn't answer sincerely: "Hey man, where have you been? Why don't you come out as much?". What should I have told them?: "Because you are morons who believe in supernatural gods and do not feel amazed by the wonders of the universe: atoms, galaxies, cells....I have nothing in common to talk about with you, so I avoid you."....

It wasn't a movie, so I didn't have an audience to say: "Yeah, this guy is right. He says the right things." No, real life is different, so I preferred avoiding them. Did I suffer from "anxiety"? Yeah, right, I was sick by being curious among incurious beings....



Insomnia

Even today, I cannot sleep well. But, why is that? ...I always wonder.... My simple answer is that I have so many thoughts in my head that it's impossible to just close my eyes and shut the hell up. I tried all the methods: hot bath before bed, a hot cup of milk, doing exercises, not eating 3 hours before sleeping, even rose petals on the bed (that one was beyond stupid, but I was desperate).

I tried to count sheep, but then I was wondering from what animals did sheeps evolve, and went so far with that idea that I ended up thinking of how the universe was formed. I tried to think of a TV static signal, as if I had no thoughts (no connection) so maybe I would fall asleep, but did you know that this is actually the cosmic background radiation; the evidence for the big bang?.... So how could I not think of it for hours? Once I tried for 12 hours to fall asleep, I even took breaks to eat something so I won't die of starvation. Nothing worked, ever.

So, is this insomnia? Really? I just see it as being too curious and wanting to do something with the time I spend living. Also, if I wasn't forced to wake up at 6am to go to school, I could have gone to sleep when I felt like it, as I do now, and be able to properly sleep. So, at the very least, it should be called school-induced-insomnia, or work-induced-insomnia.

Self image

Another thing I was obsessed with was the fact that I was very skinny and, until the age of 16, very short. I didn't like to talk to people face-to-face because they were so tall compared to me. A blues dance was stressful for me as well, because all of the girls were taller than me and I was completely shy as a result.

When I grew up, I kept the same weight but almost doubled my height. Therefore, I was extremely skinny and so stressed about it that for all of my high school years (4 years without exception), I never wore short pants and very rarely wore t-shirts.

Moreover, I sometimes had 2 or 3 pairs of pants and up to 4 blouses on, just to look more "fluffy". And this happened even in the summertime when outside temperatures were 40C (100F). It was so painfully uncomfortable.

What made me change my mind about this? I changed when I realized "beauty" (the self image, the way someone looks) is something purely cultural, imaginary, and with no logic at all. Becoming scientific about this issue made me realize its stupidity. After that, I was no longer stressed about such things anymore.



Suicidal behaviour

I wanted to kill myself at the age of 16. I think I got to that point 3 times or so, but only one time did I really try. What made me do that? The depression state. The environment.

My first try came from an "I don't give a damn" state-of-mind. I had a problem on one of my feet (ingrown toenail), but it became quite severe. I was bleeding quite a lot, and each day when I got home from school, I had to change my socks and wash them so my parents would not see the blood. I didn't care about myself at all. I was bleeding all day and it progressively became worse over time. It got so bad that even my walk was deformed. I had this open wound for more than a year, which could have turned out quite severe. That's how little I cared about myself. So maybe that was a form of suicide? If so, it's a funny one, but the attitude that led to it is quite scary.

The hard try: Hanging myself. I had a TV cable in my room and I thought, "That's it, I will do it!" - although I could have used a spool of thread since I was so skinny (1.7m or 5.5 feet and only 36 kg or 80 lbs). I actually put the cable around my neck and was ready to do it, but it hurt so badly that I stopped.

Then I realized that I was being completely stupid for wanting to do that. Life is a game, even if the rest of the people are blind to the world's problems or the amazing understandings of reality that science has discovered so far. I will have to live, no matter what, because one day I will die and this is my only chance to experience the world. Actually, the lack of a religious belief made me not even think about doing it anymore, because I was scared that I would die and that would be it. It's not like I'll be seeing my own funeral.

**If religion saves some people's life,
the lack of religion saved mine.**



RESUME

Ok, so, this is a tiny part of my crazy life. It wasn't like that all of the time, though. I had a breakdance team, many friends, I played football and so many other things. But from the ages of 12 through 18, I've been through many unpleasant situations which created the many tics and "strange" patterns of behaviours I had.

I don't want you to think that I solved all of those problems overnight, although I actually did for a few of them. Most of them took me awhile to deal with. It wasn't too pleasant to force myself to behave differently and overcome those tics or behaviour moods. But the important thing is that I could, on my own, get rid of all those behaviours, which modern psychology calls symptoms of "mental diseases" and are most often treated with drugs.

So, with all those tics and behaviours, I could have been diagnosed with many mental "diseases", put on multiple drugs (with side effects) and eventually, I think, would likely have transformed into a zombie, doing way more harm than good.

My own life experience can be more valid than what many experienced psychologists analyze and diagnose, because I know how it feels to have such symptoms and I know what "treated" them. But, I may also be wrong since the easiest person to fool is yourself. That's why we should take a look at the science of psychology and "mental diseases" from a 3rd perspective; one that critiques it with scientific evidence.

Science and Psychology

You need to keep in mind a very important aspect of diagnosing "mental diseases": they are ALL diagnosed using ONLY observation of behaviour. There is no way for a psychologist to look at someone's brain and tell if he or she has schizophrenia, anxiety, is depressed or has any other "mental disease".

From Wikipedia: "A mental disorder or psychiatric disorder is a psychological pattern or anomaly, potentially reflected in behavior, that is generally associated with distress or disability, and which is not considered part of normal development in a person's culture. " Psychologists have a book called DSM (Diagnostic and Statistical Manual of Mental Disorders) that contains definitions of various "mental illnesses" and most if not all of them are VOTED on to be included in the manual.

Allen Frances (Chair of the DSM-IV task force) concerning the new DSM-V:

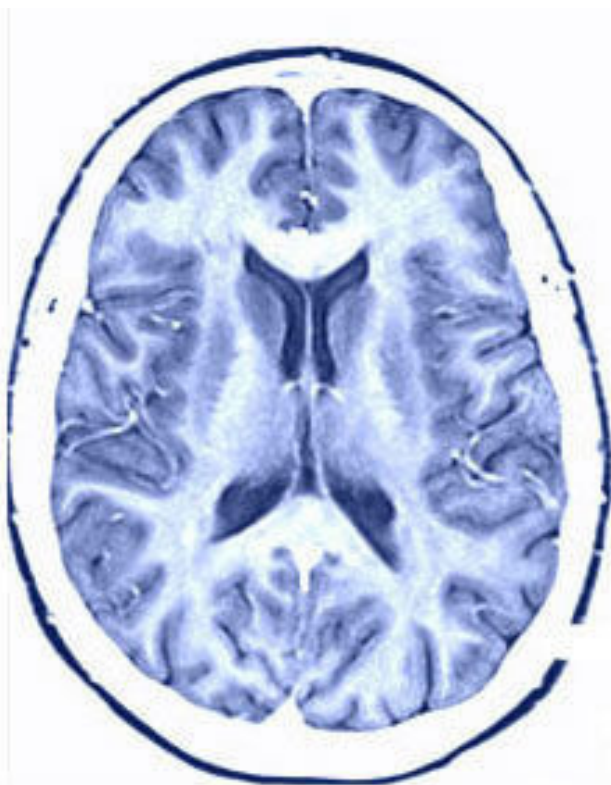
"In June 2009, Allen Frances issued strongly worded criticisms of the processes leading to DSM-5 and the risk of "serious, subtle, (...) ubiquitous" and "dangerous" unintended consequences, such as new "false 'epidemics'". He writes that "the work on DSM-V has displayed the most unhappy combination of soaring ambition and weak methodology" and he is concerned about the task force's "inexplicably closed and secretive process.". You can see this 2015 lecture by Allen Frances describing in detail his critique about diagnosing people with 'mental disorders'.

When a medical researcher wants to identify a new illness, he or she acquires images of the responsible pathogen, discovers its vulnerabilities, creates a treatment that's vetted in clinical trials, and then publishes his or her findings. That's how modern medical practice is managed. When a psychologist wants to identify a new illness, he gets together with like-minded psychologists, they hold a secret meeting and they vote. That's how psychology is managed. And this alone makes such diagnoses unscientific, to say the least.



Take [Alzheimer's disease](#). It's true that it is diagnosed mostly by analyzing human behaviour, since the causes for Alzheimer's disease are not properly understood.

Although it looks like a "mental disease" because of the methods of identifying it, the difference between Alzheimer's and, let's say, ADHD is huge. ADHD is a pattern of behaviour with no exact bio-chemical correlation, while Alzheimer's: "Although the causes of Alzheimer's are not yet fully understood, its effect on the brain is clear. Alzheimer's disease damages and kills brain cells. A brain affected by Alzheimer's disease has many fewer cells and many fewer connections among surviving cells than does a healthy brain."



NORMAL



ALZHEIMER'S:



We don't say that people with Alzheimer's are absent-minded and try to change their behaviour, but we instead look for a bio-chemical cause of their memory loss.

Williams Syndrome is another example. I have a friend who seems always happy, calm and overall a very nice guy. I've never heard him curse or witnessed him being violent, and he says that he never was like that. My other friends and I realize that there is something different about him, but being "different" is not something new. We also knew other people like him, so it wasn't a big deal.

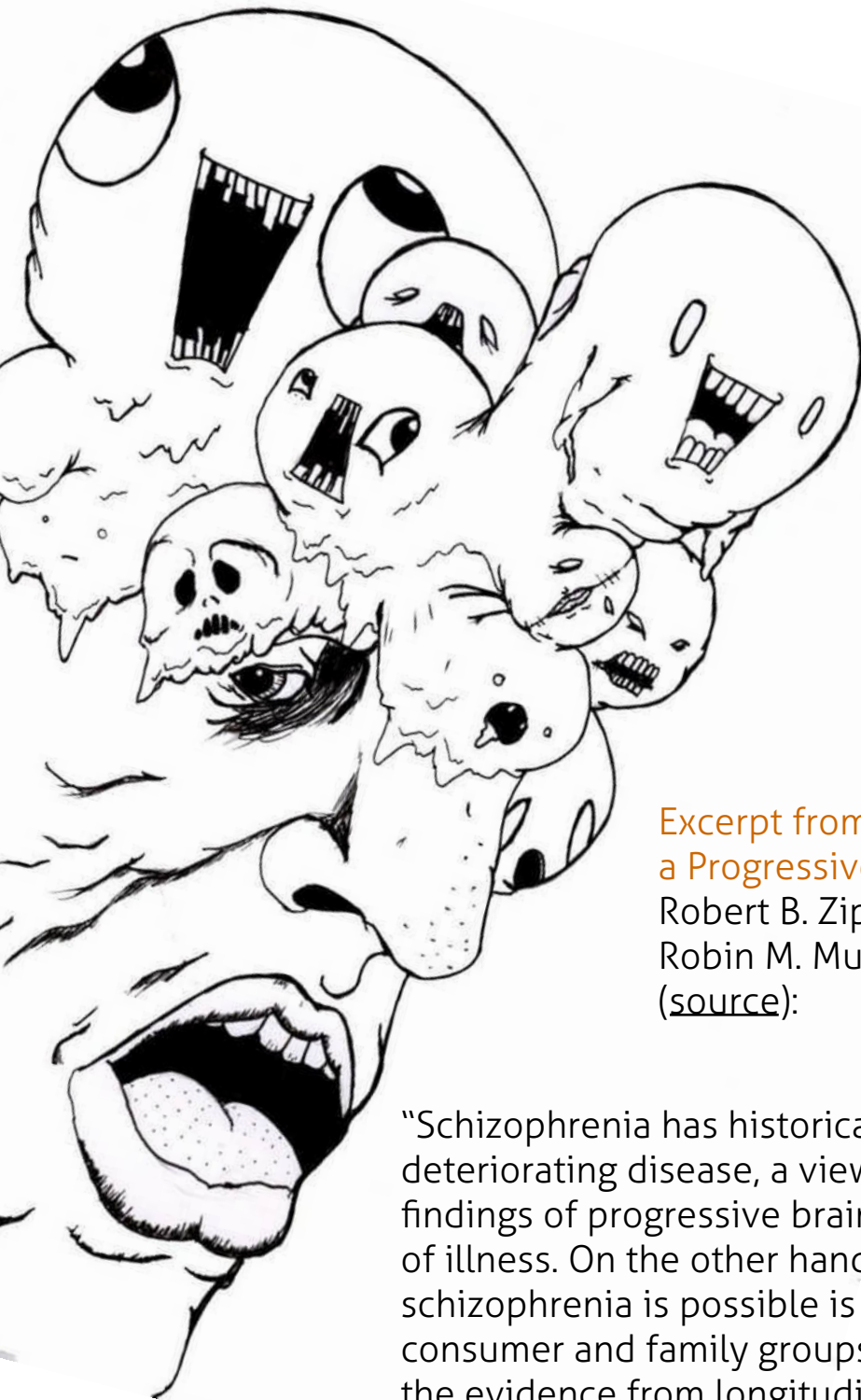
Then one day I saw this clip and I realized then that he has the same symptoms as the Williams Syndrome suggests: "distinctive, "elfin" facial appearance, along with a low nasal bridge, an unusually cheerful demeanor and ease with strangers; developmental delay coupled with strong language skills; and cardiovascular problems".

However, "Williams syndrome is caused by the spontaneous deletion of genetic material from the region q11.23 of chromosome 7. The deleted region includes more than 25 genes, and researchers believe that the loss of several of these genes probably contributes to the characteristic features of this disorder"

So, again, this is an example of another biochemical mark of a specific disease. We would have been able to tell he has Williams Syndrome just by looking at his behaviour, but you can test that in a scientific manner to confirm it, unlike a "mental disease".

The thing is, although the behavioural traits described by Williams Syndrome were present in him, some of them could be changed, or others can be found in people without the syndrome.

Schizophrenia seems to be the strongest point that psychology makes when it says it represents a real science, because they say schizophrenia can be a scientific proof that mental illnesses exists. So let´s talk about schizophrenia:



Symptoms: "delusions of being controlled by an external force; the belief that thoughts are being inserted into or withdrawn from one's conscious mind; the belief that one's thoughts are being broadcast to other people; and hearing hallucinatory voices that comment on one's thoughts or actions or that have a conversation with other hallucinated voices"

Excerpt from "The Myth of Schizophrenia as a Progressive Brain Disease" The authors, Robert B. Zipursky, Thomas J. Reilly, and Robin M. Murray, are all psychiatrists (source):

"Schizophrenia has historically been considered to be a deteriorating disease, a view reinforced by recent MRI findings of progressive brain tissue loss over the early years of illness. On the other hand, the notion that recovery from schizophrenia is possible is increasingly embraced by consumer and family groups. This review critically examines the evidence from longitudinal studies of clinical outcomes, MRI brain volumes, and cognitive functioning.

First, the evidence shows that although approximately 25% of people with schizophrenia have a poor long-term outcome, few of these show the incremental loss of function that is characteristic of neurodegenerative illnesses. Second, MRI studies demonstrate subtle developmental abnormalities at first onset of psychosis and then further decreases in brain tissue volumes; however, these latter decreases are explicable by the effects of antipsychotic medication, substance abuse, and other secondary factors. Third, while patients do show cognitive deficits compared with controls, cognitive functioning does not appear to deteriorate over time.

The majority of people with schizophrenia have the potential to achieve long-term remission and functional recovery. The fact that some experience deterioration in functioning over time may reflect poor access, or adherence, to treatment, the effects of concurrent conditions, and social and financial impoverishment. Mental health professionals need to join with patients and their families in understanding that schizophrenia is not a malignant disease that inevitably deteriorates over time but rather one from which most people can achieve a substantial degree of recovery.”

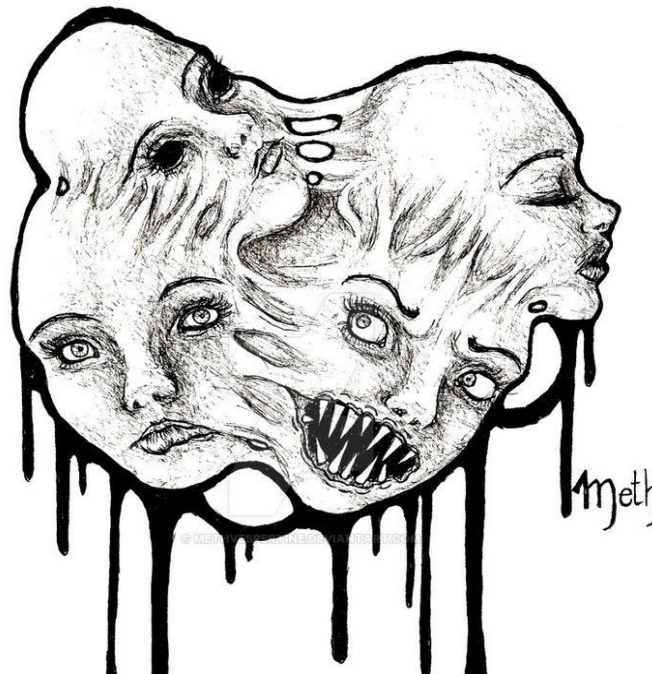
From “Schizophrenia Is Not An Illness” article:

“The “diagnosis” of schizophrenia is nothing more than a label describing the very behaviors it purports to explain. And a destructive label at that, in that it stifles and suppresses genuine exploration into the true cause(s) of the problem, and genuine remediation of the original skill deficits.

People express mildly delusional ideas all the time. Listen to any talk radio show. Listen to politicians railing against their opponents. Listen to religious zealots. Listen to racial stereotypes. Listen to people who insist that the Earth is only 6000 years old. Listen to golfers after they’ve played a bad stroke. Listen to people who get passed over for promotion, etc., etc., etc.. The processes that promote this kind of mildly delusional speech can lead to severe delusions if the conditions are ripe.”



Eleanor Longden: The voices in my head:



[Dr. Paris Williams, PhD :](#)

“The National Institute of Mental Health, on its Schizophrenia home page, proclaims confidently that “schizophrenia is a chronic, severe, and disabling brain disorder”, a statement you find on nearly every major page or publication they have put out on the topic; and yet if you spend a little more time looking through their literature, you will find that they admit that “the causes of schizophrenia are still unknown”. Similarly, the American Psychiatric Association also confidently proclaims that “schizophrenia is a chronic brain disorder”, but then they acknowledge on the very same page that “scientists do not yet know which factors produce the illness”, and that “the origin of schizophrenia has not been identified”.

The strong bias towards the brain disease theory is clearly evident in the literature of these and other similar organizations, and yet the message comes through loud and clear that we still do not know the cause of schizophrenia. Even the U.S. Surgeon General began his report on the etiology of schizophrenia with the words, “The cause of schizophrenia has not yet been determined”. It would appear, then, that it is simply not appropriate to claim with such confidence that schizophrenia is the result of a brain disorder.”

I also asked a friend who was diagnosed with schizophrenia to write his life experience for this article:

“ Since I was a young child, I have always struggled to deal with my authoritative parents, and with a society that seems to have never understood me. As a kid, I suffered constant verbal abuse, spankings and a few times was even beaten up. My father was the worst at doing this, sometimes he would be away for a few weeks on a business trip, and now I realize that those were the most peaceful moments I had in my childhood, I remember becoming sick in my stomach from fear the moment I noticed he walked in the door.

Emotional trauma can be much worse than actual physical trauma in these situations. The fact that I came from a family of very educated people seems to have made matters worse, being humiliated by some random kid that can hardly pronounce words is one thing; being humiliated by a highly skilled orator is another. My father was my worst nightmare, and also my hero for his ability of fixing anything he put his mind into, and the encyclopedia like knowledge about anything I could ask him, which are skills that I have learned and have served me well throughout my life. Looking back to my days in school, I can see now that many children had similar family histories, and some had it even worse than me, but each child chooses to deal with it in a different manner. I became a very kind kid who was often quiet, keeping my problems to myself, while some kids saw in me the opportunity to enact the anger they felt at their parents, by picking on me and sometimes even beating me up (nothing serious though). I guess those kids who see the world as an opportunity to reenact their own suffering in others are the ones who later tend to become the narcissists and sociopaths, while the kids who keep their suffering to themselves, and even try to absorb the suffering of others are the ones who later tend to develop depression, schizophrenia and autoimmune related disease.

I had a feeling of profound sadness throughout my childhood, and it became increasingly worse during adolescence, at age 17 could no longer work and had problems graduating in my middle school/ computer technician degree. After missing about half of my classes, I failed to get my computer technician degree and was only allowed to finish middle school because of good grades.

Then I became silent. The most people could get off me was an "oh" or an "ok". I would not leave the house, brush my teeth, and I showered only once a week, all that while having constant suicidal ideas and being very self aware of how miserable my life had been up to that point. With the exception of the Internet, I had completely closed myself from the outside world. My mother would not say much about the situation but seemed to be increasingly worried. My father was a constant reminder of how lazy I was for having quit my job and spending my days doing nothing except play computer games and use online forums. I don't think he had enough empathy to see that I was sick.

At age 19, my mother started taking me to see doctors. At one point I ended up at a psychiatrist and was diagnosed with catatonic schizophrenia. I had already diagnosed myself with depression at age 13 (while not telling anyone), but was not expecting the schizophrenia diagnosis at all. To understand what catatonic schizophrenia is, it's necessary to understand the underlying causes of catatonic behaviour. A person who won't move or speak might seem insane and incapable of motor control, but the truth is that this is a survival strategy used by people and non-human animals alike. It's used to deter attacks and can be the only strategy someone might have at their disposal in order to survive.

But if we are living in a society built by humans for humans, where the dangers of actual physical harm seem far fetched when compared to a mouse, why does it still happen? It still happens because our brain has evolved in a very dangerous environment, an environment so dangerous that living without the protection of the tribe was the equivalent of a death sentence, so even now, humans would consider peer rejection to be as dangerous as being chased by a tiger, and some even consider the fate of being rejected by a crowd of people to be worse than death. Even today, children would not be able to survive without the support of their immediate family. So when a child experiences peer rejection from caregivers, she will go to great lengths in order to stop the rejection from happening again. If a child suffers constant rejection when talking, she will stop talking, and if a child suffers constant peer rejection in his actions, he will stop moving.

Now let's talk about the drugs. They are called drugs for a reason, and when it comes to sedation and addiction, there are very few drugs worse than the ones used under psychiatric "treatment". The biggest danger of these drugs is the fact that they will (usually) not kill you, even if you take them every day for decades; the danger lies in the fact that the more you use it, the more addicted you become. The danger is also in thinking that the drug is harmless, and that side effects are actually symptoms of the mental disorder people say you have, instead of being directly caused by the medication.

I started taking antipsychotic medication at age 19 and only managed to stop at age 29. Before I started taking it, I've never had any trouble falling asleep, and never had the kind of anxiety outbreaks I had after taking it. But when doctors told me that these were symptoms of a disease I had, it seemed ok to start taking even more medication in order to deal with these symptoms.

There's one thing called withdrawal that, surprisingly, even doctors don't understand. It happens when your biology gets so used to a given substance that it will start behaving erratically until it's taken again. What doctors don't understand is that the medication they are prescribing actually causes a lot of the symptoms related to a given mental disorder. Even if you take medication every day you will feel withdrawal. You will feel it mostly just before the time you usually take it and if you take medication during the night, this means it will become impossible to sleep without it. This is a very serious problem, and one I had to face when I decided to quit. So what I did was try to taper it out, by reducing the dosage little by little within the timeframe of about 2 years. I had done this without being instructed by doctors, who told me the medication will be necessary for the rest of my life. During the last 6 months of tapering, I got to the point where I was able to sleep while taking less than the minimum dosage of only 1 medication. So what I did after that was to get the pills to be manipulated by a specialised pharmacy, so that they are half or $\frac{1}{4}$ less powerful than the minimum dose available.

After getting to $\frac{1}{4}$, I stopped taking it. Even all the years of withdrawal did not prepare me for what happened next. I suffered incredible anxiety, disorganized thought and was unable to sleep for about 4 days. I suffered all that alone, just after becoming well enough to leave my parent's house and go live by myself. Wonder if would have survived quitting it cold turkey.

The most disturbing thing though, was that a doctor wanted to have me considered lawfully mentally disabled. That means I would be officially retired from work and have some financial advantages related to it, which I have refused to do. This is very strange, because I was able to work even during the treatment, after I managed to recover from the child abuse. Nowadays, I can successfully work and do so in regular basis. In fact, I have become quite successful and skilled in my work.

Nowadays I look back and wonder why I didn't think there was something wrong with being prescribed antipsychotic medication, while not actually having psychotic symptoms. I have mentioned before my curious nature and the joy of being able to figure things out. I have mentioned those things because they are, by far, the most powerful tools at my disposal and I've used them to get out of my self-inflicted prison. In order to get out of my prison cell, I would need to understand what was going on, would need to understand it better than the doctors and psychologists at my disposal, because the best they could come up with was telling me I had an incurable disease and to get used to the fact that I will need medication for the rest of my life. I'm not very fond of what people think I can and can't do, and have no respect for people who demand their ideas to be accepted without questioning. Because, as my father has shown me, anything can be fixed and any everyday normal guy can do a better job than an expert, if there's enough effort put to it.

Over the years, this kind of attitude became the key for recovering my self esteem. Everyone is aware that a hammer is a tool, but most people are not aware of the existence of mental tools, even if they use it every day. In the same way that a resourceful mathematician would solve 5×266 by dividing 266 by two and adding a zero ($= 1330$), instead of doing the laborious multiplication, you can use mental shortcuts to deal with distress and control your anger. Mental tools can't be bought though, they have to be learned and practiced if you want to become any good. And this is what I did. I've taught myself as much as I could about psychology, philosophy, behaviourism, psychiatry and many other subjects, and then put into practice what I had learned by going to University, meeting new people and finding my lovely girlfriend.

I hope that my experience can help others in a similar situation. "

A few question I also asked him:

Q: What was the treatment ? What were the drugs exactly and how much you had to take a day and for how long ?

“At first I was diagnosed with severe depression and prescribed Solian as an antidepressant, took it for about 1 month and honestly could not detect if it made any difference. After that I was diagnosed with catatonic schizophrenia and prescribed Zyprexa, in a couple months I had gained about 4kg already and it would have me killed if I were to take it for 10 years. So I quit it and started on Geodon, it started out on low dosage 40mg and it gradually increased to 160mg after 3 years. After getting to 160mg, my mother started to become really concerned about the side effects and we searched for other doctor’s to see what they think. One doctor reduced my dosage back to 40mg for about 1 year (which is strange since other doctors think that’s not enough for any kind of treatment). After that, another doctor increased it to 80mg and, after diagnosing me with social anxiety and detecting my insomnia, prescribed me Klonopin (benzodiazepine) in drops format (15 drops a day). I took the 8mg of Geodon and 15 drops of Klonopin for about 3 years.

After that, I started talking to my doctor about other kinds of treatment, and stopping everything altogether, she then considered changing my diagnose to Schizoaffective disorder and convinced me of trying other medications to see if there were ones with less side effects. So then I tried Abilify (slept over 16 hours), Lithium, Fluoxetine and Topiramate (terrible stomach aches) in the period of a few months. At that point, I start feeling like a lab rat and decided to go back to the lowest dose of Geodon alone and tamper it out. That is all I can recall from memory right now.”

Q: Did you have any health problems related to the medication you took ?

"Health problems include parkinsonism (drug induced parkinson), insomnia, blurred vision, dry mouth, weight gain, anxiety, low blood pressure, heartburn (which is actually caused by a biological problem and was only aggravated by medication), dizziness, disorganized thought, irritability, and then after taking the medication I would sleep for about 14 hours and still be so sedated after waking up that would have some very slow motor control and speech for about 1 hour. All of those were gone after I stopped the medication."

Q: How did they diagnose the "disease"? What were the tests? Was there a medical exam (like scans, etc)?

"The test was composed of people talking to me, and blood tests. Nothing wrong was detected in the blood, and I was told that a brain scan would not be necessary, because if I had a tumour in my brain I would:

- a) be dead already and
- b) not have the full cognitive functions I have"

For more information about how "mental diseases" are diagnosed watch "[The DSM: Psychiatry's Deadliest Scam](#)" and [read the criticism of DSM](#).

"Because some areas of psychology rely on research methods such as surveys and questionnaires, critics have asserted that psychology is not an objective science. Other concepts that psychologists are interested in, such as personality, thinking, and emotion, cannot be directly measured and are often inferred from subjective self-reports, which may be problematic." ([source1](#)) ([source2](#))

Read the article "[Building Science](#)" by scientist [Paul Lutus](#), a comprehensive article full of examples and scientific references to why psychology is not a science, at least not yet.



psychologists and



psychiatrists criticizing



psychology:

One of the most aggressive critics of psychology and “mental diseases” was professor emeritus of psychiatry [Thomas Szasz](#): "If you talk to God, you are praying; If God talks to you, you have schizophrenia. If the dead talk to you, you are a spiritualist; If you talk to the dead, you are a schizophrenic."

Szasz made a very good point when he said many times that, although you cannot scientifically prove the existence of any “mental illness”, many times you are forced to get treatment. This is both wrong and scary.

You can read Szasz’s books, which includes responses to his critics ([link2](#)). Also you can watch many of his lectures and interviews on [youtube](#).



Another well known criticizer is [Jeffrey A. Schaler](#), Ph.D., professor of psychology.

Professor Schaler goes as far as saying psychologists are like nazists, since they want to control human behaviour using pseudoscience.

[Listen to a radio interview with Jeffrey A. Schaler](#)



[Lucy Johnstone](#), psychologist: "We have known for a long time that terms such as 'schizophrenia' are scientifically meaningless. They are not actually 'diagnoses' in a medical sense, since they are not based on patterns of bodily symptoms or signs. Instead, the criteria consist of a ragbag of social judgements about people's thoughts, feelings and behaviour. The people who are so labelled may well have difficulties and be in urgent need of help, but this is not the way to help them."

" 'Diagnosing' someone with a devastating label such as 'schizophrenia' or 'personality disorder' is one of the most damaging things one human being can do to another. Re-defining someone's reality for them is the most insidious and the most devastating form of power we can use. It may be done with the best of intentions, but it is wrong – scientifically, professionally, and ethically. " ([source](#))

In the words of the official DCP/BPS response, drawn up by the past DCP Chair, Professor [Peter Kinderman](#): 'Clients and the general public are negatively affected by the continued and continuous medicalisation of their natural and normal responses to their experiences; responses which undoubtedly have distressing consequences... but which do not reflect illnesses so much as normal individual variation... This misses the relational context of problems and the undeniable social causation of many such problems.'

Professor [Richard Bentall](#) speculated that '...the main beneficiaries will be mental health practitioners seeking to justify expanding practices, and pharmaceutical companies looking for new markets for their products.' Professor [Til Wykes](#) warned, 'The proposals in DSM 5 are likely to shrink the pool of normality to a puddle.' Professor [David Pilgrim](#) described DSM as 'a form of collective madness for all those complicit in the continuing pseudo-scientific exercise.'

Also, critical psychiatrists led by Dr [Sami Timimi](#) courageously submitted a petition to the Royal College of Psychiatrists urging the abolition of formal psychiatric diagnostic systems.



And many more psychologists, psychiatrists and other scientists are criticizing psychology.

"A Biologist And A Psychologist Square Off Over The Definition Of Science"

"Professor Robert Spillane - ADHD is a complete myth"

Nobel Prize winner [Richard Feynman](#) was a longstanding critic of the field of psychology, at a time when psychology seemed more like a science than it does now (before neuroscience presented more effective methods).

In his now-famous 1974 CalTech commencement address "Cargo Cult Science", Feynman says:

"I think the educational and psychological studies I mentioned are examples of what I would like to call cargo cult science. In the South Seas, there is a cargo cult of people.

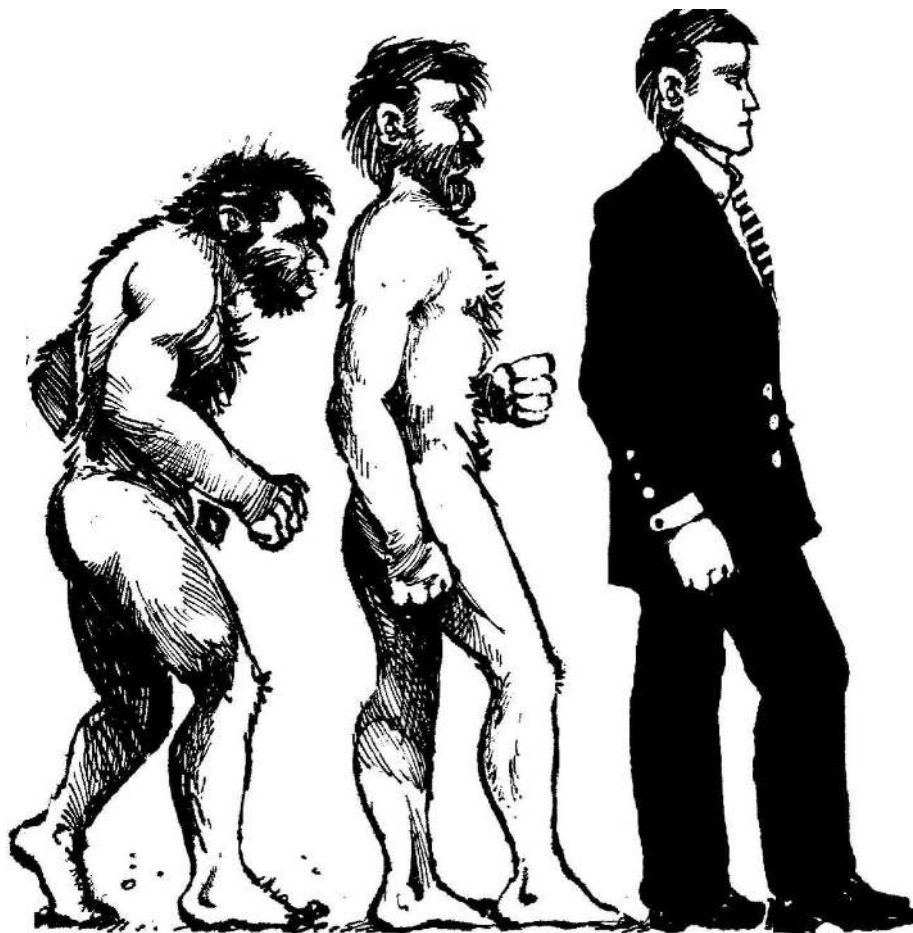
During the war, they saw airplanes land with lots of good materials, and they want the same thing to happen now. So they arranged to imitate things like runways, to put fires along the sides of the runways, to make a wooden hut for a man to sit in, with two wooden pieces on his head like headphones and bars of bamboo sticking out like antennas — he's the controller — and they wait for the airplanes to land. They're doing everything right.

The form is perfect. It looks exactly the way it looked before. But it doesn't work. No airplanes land. So I call these things cargo cult science, because they follow all the apparent precepts and forms of scientific investigation, but they're missing something essential, because the planes don't land."

Evolutionary Psychology

" Critics of evolutionary psychology accuse it of promoting genetic determinism, panadaptationism (the idea that all behaviors and anatomical features are adaptations), unfalsifiable hypotheses, distal or ultimate explanations of behavior when proximate explanations are superior, and malevolent political or moral ideas. " - [Wikipedia](#)

I recommend you also read our special issue on Evolution and Purpose where we touch upon this subject - [link](#).



Experiments proving how unreliable psychology can be

One of the best known experiments depicting the unreliability of psychological evaluation is the [Rosenhan Experiment: On being sane in insane places](#).

[Watch the experiment](#). Read more about the experiment [here](#).

A recent experiment was done for a BBC documentary called "How Mad Are You":

"Ten volunteers have come together for an extraordinary test. Five are 'normal' and the other five have been officially diagnosed as mentally ill. Horizon asks if you can tell who is who, and considers where the line between sanity and madness lies."

The experiment was a complete failure for psychology. The top psychologists elected for the show couldn't tell who is sane or who had a "mental disease".

You can watch the full documentary [here](#).



Huge failures of Psychology

Being homosexual is a mental disease: "Psychology was one of the first disciplines to study homosexuality as a discrete phenomenon. Prior to and throughout most of the 20th century, common standard psychology viewed homosexuality in terms of pathological models as a mental illness."
Wikipedia

Remember what happened to Alan Turing? If you don't know who he is, then perhaps you should thank him because you have a computer. He was the one who basically invented computers. But he was "gay". He was sexually attracted to men, and because being gay was a "mental illness" in that period of time, he was forced to get "treatment" for it. Pumping pills in him and the entire image that psychologists at that time created around him, led him to committing suicide.

Watch this amazing documentary about Alan Turing's life to see how amazingly intelligent he was and, despite that, how mistreated he was, dying at the age of only 41. This documentary explains how psychologists tried to tread him of "homosexuality".

So how is it that homosexuality was a "mental disease" at one time, but then suddenly it wasn't? Keep in mind that they did not discover anything new about being homosexual; they just gave up on classifying it. Some institutions still label it as a "mental illness", even today. It's like saying that lung cancer is a disease and so we prescribe a treatment for it, but then you realize it was just a normal thing and stop treating it.

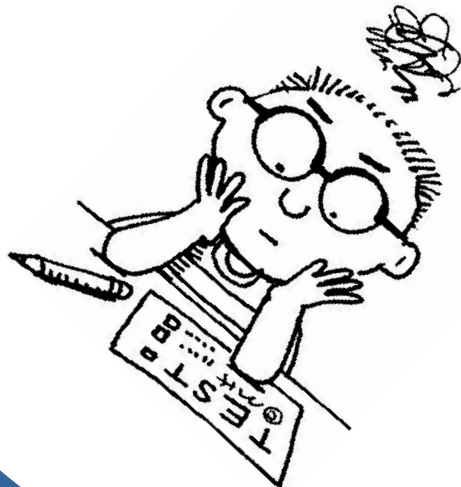
There are many other such failures in which a "mental illness" was diagnosed using non-scientific methods and resulting in human suffering, but then later categorised as pseudoscience.



Some are smart, some stupid: The interest in "intelligence" by psychology dates back thousands of years, but it wasn't until psychologist Alfred Binet was commissioned to identify students who needed educational assistance that the first IQ test was born. So psychology invented such a test, which again and again, proves nothing, just stigmatize people in an erroneous manner.

Watch these documentaries to understand how and why an IQ test is useless: [What Makes a Genius?](#) and [Battle of the Brains](#).

Such examples of stigmatization are not rare at all for psychology.



Being black is a mental disease:

Drapetomania was a "mental illness" in 1851 that supposedly caused black slaves to flee captivity. Now we may all see it as ridiculous to say slaves are "mentally ill" because they want to escape slavery, but this diagnosis was considered normal in those days. ([source](#))

Black people (negroes, they were called then), were seen by psychology as being "mentally ill" in many different circumstances, just because of their skin color. They were even considered low minded; an inferior race.

"Benjamin Rush, MD., signer of the Declaration of Independence, Dean of the Medical School at the University of Pennsylvania and the "Father of American Psychiatry", described Negroes as suffering from an affliction called Negritude, which was thought to be a mild form of leprosy. The only cure for the disorder was to become white. It is unclear as to how many cases of Negritude were successfully treated."

"In the late 1960s, Vernon Mark, William Sweet and Frank Ervin suggested that urban violence, which most African-Americans perceived as a reaction to oppression, poverty and state-sponsored economic and physical violence against us, was actually due to "brain dysfunction", and recommended the use of psychosurgery to prevent outbreaks of violence. " ([source](#))

Even if it works, It may not be a science

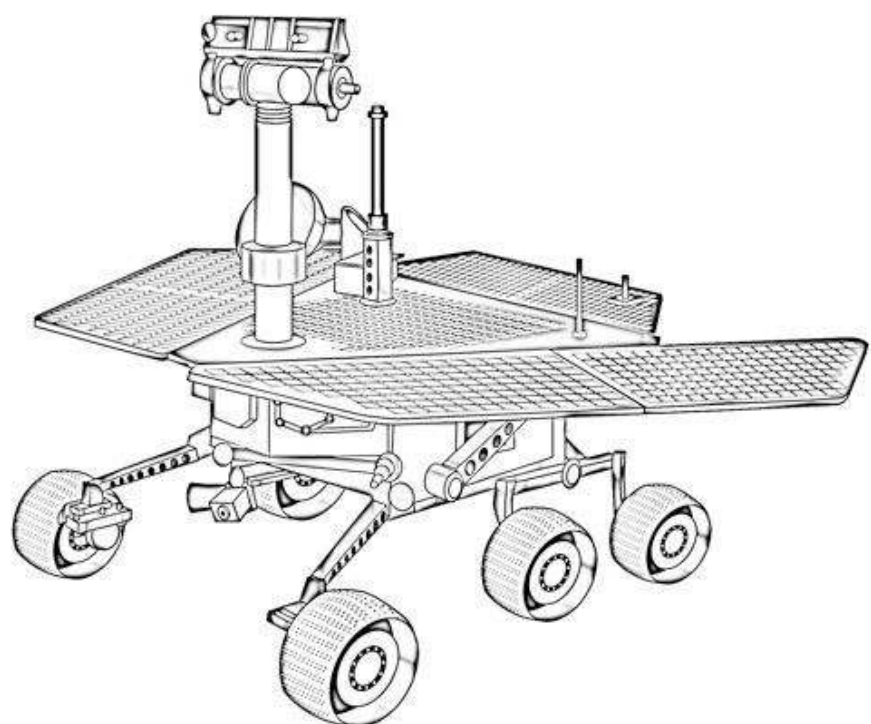
Let's be honest, psychology came out with some pretty interesting experiments and studies which helped many individuals with problems and scientists overall. There are many people who, thanks to psychological studies, now live a better life; even helped by drugs that psychologists or psychiatrists prescribed.

Some of the most remarkable ideas of psychology that I found were done by the well-known psychologist B.F. Skinner: Operant conditioning ([video](#)); Superstition experiment ([video](#)). Interesting studies like: The Homeostatic effect on human behaviour ([video](#)), The Bystander Effect ([video](#)), The Milgram Experiment ([video](#)), The Asch Experiment ([video](#)), The Stanford Prison Experiment ([video](#)), and many others prove that psychological tests try to be scientific and may be useful in many cases. But as this entire article has shown, these experiments and their results fall short because the human being is only being viewed as a simple machine instead of the complex animal that it is.

We can analyze 4000 people and observe that 80% of them associate the red color with danger. But 4000 people are not 7 billion, and such notions are learned and will change with environmental conditions. When I used Windows as my pc operating system, all errors were displayed in red, so I associated red with "danger" & "error". Since I now use Ubuntu Linux and the errors are in orange, everytime I see something orange blinking on my screen, I associate that with a system error or "danger", instead of the red color. Actually, on my Ubuntu desktop theme, red means "updates available" and I associate it with a positive thing. So you see, things change in human behaviour in response to environmental changes.

Imagine the Mars rover Curiosity. This robot-on-wheels is on Mars analyzing the soil and we all know basically how it was made and who is controlling it. What if there were Martian psychologists analyzing Curiosity? They would likely deduce that “he” has an obsession with rocks, is not a social creature and perhaps is a bit depressed. Just by looking at the behaviour, you can only make assumptions. You will not understand how Curiosity works without being an engineer. So even if the methods and the meticulousness of analyzing behaviour are applied, it may not count at all to identify what you are witnessing.

In the same way that you cannot diagnose a disease without bio-chemical evidence of it, if just 20% of a group of 8000 people predisposed to heart attacks are religious, we cannot say that being religious decreases the chances of having a heart attack. That is just an assumption based on something you selected randomly (their religion beliefs). What if fewer of them watched The Simpsons? Could you say people who watch The Simpsons are less likely to have a heart attack in their life?



In the same way, if someone experiences schizophrenic-like behaviour and you, by some methods, help him overcome them, it may not be because of your intervention.

Then consider witchcraft: If a guy goes to a witch because he has strange fears of shoes, and the witch tells him he is cursed, instructs him to kiss an old tree each day at 6am and to put vegetable oil over leather shoes to get rid of the fear, and then the guy does that and gets rid of the fear, can we say the witch's methods are scientific because they worked? Of course not.

There is also a thing called "the placebo effect". ([video](#))

You can measure if someone's health improve after taking a psychological treatment (drugs), but can you prove that it was because of the treatment itself, or the result of a placebo effect? Was it the pill you gave him, or just his mind believing he should get better because of the presence of a pill?

If my horoscopes tells me that today will be a lucky day and I will make money, and I later find \$50 on the street, it doesn't mean the horoscope and its methods are scientific just because I happened to find \$50.

Correlation is not cause.

So you see, even if psychology "treats" many people, that alone proves nothing of being scientific. Witchcraft "cured" many more lost and frighten people than psychology did.



Making Money

Watch "The Marketing of Madness" for more about how money influences psychological diagnostics based on drugs that create many millionaires, as this is yet another important topic to consider.

I am not suggesting this is happening, but think about it: Over the course of a half-hour, sometimes a bit more, sometimes less, a psychologist can diagnose you with a "mental disease" and put you on a drug treatment. It's very easy to sell drugs this way.

What if drug companies are lobbying to sell their drugs by making psychology look like a science when it really doesn't qualify as such? I am just saying to think about it and watch that documentary.

We are all Crazy

Let's think a bit deeper about this: A "mental disease" is a description of patterns of behaviours seen as abnormal in a specific culture. These patterns are voted to be approved and categorized as illnesses and even psychologists recognize they are just spotting some possible symptoms and not the "illness" they are looking for. So, can't we all be "sick" because of that? What is sane after all?

Being too active is a problem; too passive is another problem. Having violent thoughts and expressing yourself through violence is a problem. Having aggressive thoughts and not express yourself physically is called passive violence, which is seen as yet another problem. If you talk too much or not enough, those are both problems. And so on...

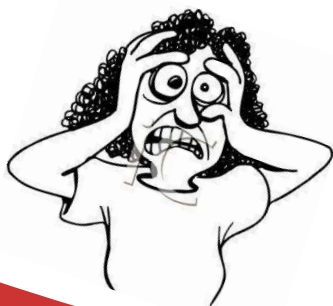
"I've always preached that everyone is crazy, it's just a matter of degree, duration, and timing," said Rob Dobrenski, a psychologist in New York City and author of *Crazy: Notes On and Off the Couch*. "Take a look at the current DSM—if you have a lot of time to kill. There are some incredibly benign diagnoses in there, at least one for pretty much everyone out there, myself included." ([source](#))

With Psychology being so unreliable in diagnosing "mental illnesses", even an online test can "determine" a "disease" with about the same accuracy as psychologists get when using a questionnaire. It was even used in the 70s as an accepted norm for diagnosing "mental illnesses".

I took several such online tests to see if the results are the same and found that, mostly, I am depressive, schizophrenic, I have anxiety and many more such "illnesses".

I found the questions so vague and some so bizarre, I honestly couldn't answer rationally any of them. You should try it for yourself.

My sister is obsessed. She has a light tan and sometimes spends 4-5 hours a day at the beach in the summer to make her skin darker. The sun creates a lot of heat and this is a huge discomfort, but she does this anyway, even if she is increasing the risk for skin cancer by exposing herself to the sun that much. I have a friend who was obsessed with his long nose. He eventually underwent surgery to make it small. Another friend was obsessed with his tan. He felt it was too dark, so every morning before school he used a white facial cream to lighten it. Another friend, a girl, has so many obsessions that I can't keep count: She wants to heighten her legs through a medical surgery. She says her elbows do not look too sharp, her hair is too rare and one particular toe is not the right shape. I'm not inventing any of these stories; they are completely real.



Almost everyone I know has or at one time had such obsessions: too short, too skinny, too fat, too shy, too aggressive, and so on.

And those examples are not even the extreme ones. How many people are religious on this planet? Just 88.6% according to Wikipedia. So, 88.6% of the world population suffers from schizophrenic-like behaviour. Before getting angry at me because of this comparison, let me make you aware that I am not the one who describes the schizophrenic symptoms. Psychology itself describes it as follows:

“The relationship between religion and schizophrenia is of particular interest to psychologists because of the similarities between religious experiences and psychotic episodes; religious experiences often involve auditory and/or visual hallucinations, and those with schizophrenia commonly report similar hallucinations, along with a variety of delusions and faulty beliefs. A common report from those with schizophrenia is some type of a religious delusion - that is, they believe they are divine beings, God is talking to them, they are possessed by demons, etc. In a study of patients with schizophrenia that had been previously admitted to a hospital, 24% had had religious delusions. This has led some researchers to question whether schizophrenia leads an individual to become more religious, or if intense religiosity leads to schizophrenia “





Please, watch for yourself and try to spot who is diagnosed with schizophrenia, and who is a religious individual. Maybe you can spot the religious people by what they are talking about....but is the story creating the disease?

Christians ([video](#)), Muslim [exorcism](#) ([video](#)), Pope Francis ([video](#)), Jesus Camp ([documentary](#)) Watch [Penn and Teller's "Bullshit"](#) show to see how many people on planet Earth present schizophrenic-like behaviours and how many of them made a job out of it (psychics, witches, and so on)

I know a family in which one of the children was diagnosed with schizophrenia and his father, who is a priest, prays for him to get better. Consider the irony.

Most people get stressed if their hairstyle is not the way they want it to be, or if the shoes do not match the dress, or a black cat has run in front of them and thus, bringing "bad luck", as they say. Many read horoscopes and try to guide their life by them, others play nonsense video games for hours a day, some others are almost obsessed with physical exercises...we can even call 'crazy' the ones who get married because they are paranoid about losing their partners, plus there are thousands of conspiracy theories with millions of followers. Some of us may experience schizophrenic-like symptoms because of the movies we see or books we read. Someone standing in a dark room may panic because of ghost-related ideas he or she may have heard. [Watch this documentary](#) to see how such feelings can be triggered in so called "normal" people.

We all have different life experiences and we all end up having different characteristics. Some may endanger their health because of their way of behaving (smoking, drinking, not sleeping, etc), some may endanger the life of others because of the way they think ("In 2009, Kent Schaible, the two-year-old son of Herbert and Catherine Schaible, contracted bacterial pneumonia. Kent could have been saved by doctors, but his parents didn't give him that chance. Instead, they prayed for ten days... and, to nobody's surprise, that didn't help." - [source](#)) and so on.

We cannot deny these patterns of behaviour are real, but if you want to know what creates them, we need to use science, not assumption.

On the other hand, I wouldn't want psychology to just disappear. Are plenty of people out there who need help to overcome behaviour related problems. But I would really want science in psychology and, if that is not to be, then at least the psychologists and researchers dealing with psychology should be dead honest about their studies and present them to the public as such.

If you do a study on 9000 people by giving them a glass of milk and leaving them alone in a room for 30 minutes and you observe that 70% of male subjects drink the milk but only 20% of females drink it, then present it this way and don't draw the conclusion that men are more selfish than woman. Or that men is more impulsive than woman. You cannot properly relate that. What if the females from this study do not usually drink milk because of their cultural beliefs ? Or other such scenarios that you cannot identify or imagine ?

And if the details of the experiment itself can change how the subjects would normally react, then the results must be recognized as less revealing. For instance, if I knew about this glass of milk experiment, that alone would have changed my reaction if I were participating as a subject in the experiment.

We all have friends and families and we often give them advice or help them when they are upset or going through rough times. Many people drink alcohol or smoke when they feel alone or sad. But being a friend or drinking a beer doesn't make me a scientist, nor does it make the methods I apply scientific. It's just typical human behaviour.

There are many books about personal development and, even if they help improve people's life, it doesn't mean they represent science.

People have a complex set of behaviours that change all the time. You can find patterns in those behaviours and use these patterns to manipulate or predict them. But is unreal to think this is science when human behaviour is so dynamic. After all, ask meteorologists how hard is to predict the weather.

Please psychology, be as scientific as possible because it's in all of our best interest to do so.

Lucy Johnstone - psychologist:

“ We already have a situation where the strongest defence of DSM is: ‘We know it’s flawed, but it’s the best we have – what could we do instead?’ The simple answer is, ‘Stop diagnosing people.’ ”

Also read "More Thinking about Alternatives to Psychiatric Diagnosis" by Lucy Johnstone who proposes a different labeling of the behavioural traits. To not stigmatize people, but rather transform diagnostics such as "schizophrenia" into "Schizophrenia/psychosis triggered by the stress of job loss." so that we can understand the environmental causes and act upon them or, rather, help the individual deal with them better. This is a very interesting aspect: When we enlarge our field of view and realize that psychology and its methodologies are engulfed into a structure which we call a system, in our case the monetary system, then we are better able to understand that psychology and other disciplines are touched, if not directed, by the larger system they adhere to.

Therefore, even if you lose your job and become depressed, and we then use a different kind of labeling that doesn't stigmatize you with a fake "illness", the best psychologists today can only push you toward accepting your situation, and that's all they can do. They will not find you a job, or provide for your necessities of life.

So even if we make psychology more scientific, we need to seriously think about this. To think that even if people have problems, those who would help them with today's psychology are most likely to focus on trying to get them to accept the situation they're in and that's all they will do.

Today's psychology works on the individual, which is a byproduct of the environment they are raised in, attempting to adjust the individual to existing insufficient systemic conditions. Human behavior cannot be studied apart from the cultural environment and we should work toward removing the root causes of these problems. We need to revamp our entire social structure to ensure that people are not pushed into developing such negative behavioral traits. This means we must take an honest look at the global monetary system itself and the values that it generates, including the relationship between people, our living conditions and the preservation of the environment. In order to positively affect the lives of people, we have to know what factors act upon our behavior and design an environment that generates less abhorrent behavior.





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