

The Option Method Institute

Education based on the teachings of Bruce Di Marsico

www.ChooseHappiness.net

The Myth of Mental Illness

Bruce Di Marsico

Option Therapy has a point of view that distinguishes it from other therapies. Part of that point of view is that mental illness is seen as a social myth, and that it does not actually exist in any of the ways that we could use the term "illness," or "mental illness."

You see, when people used to behave differently from other people it never made any difference to anyone except that they bothered them, and if this was two, three, four thousand years ago if you "bothered" somebody you got punished for it, or punished in some way, depending on how many people you bothered. If you bothered the community you were considered a renegade or an outlaw or something like that, usually expelled from the community or punished within the community. It was considered a strictly social, cultural means of achieving normality for the community, called harmony, peace, or law and order — whatever you want. And it seemed that there were people that would respond to these kinds of treatment in ancient times, and after they were punished or ostracized, they would come around to the social norms of behavior.

Now there were those people who would never come around, and they were a problem because that meant that this system of getting people to conform was not working, and after they tried everything, perhaps they would kill them. But if killing just did not fit into the other taboos of the culture, and the way the person bothered people was not that severe, was not that serious, they said that he was possessed by an evil spirit. So, "possession by an evil spirit" was a term to describe somebody whose non-conformity was not bad enough to be killed, whose non-conformity was so consistent that punishment did not make any difference. After a while, in fact, in some cultures and societies it was said that these people were not possessed by evil spirits but by the gods, i.e. "struck mad by the gods." Again, the whole implication being that "We cannot do anything about them, so let us refer to what they do as having come from somewhere other than from this

life we know." And, it was a social designation that was what was meant by "madness."

The Greeks had great respect for a mad person. A mad person, again, was a person who would dare to say things and to do things that were not capital offences, remember, and that no amount of punishment would appear to change. Only certain classes of people that were allowed to be mad. For instance, if you were a slave and you were mad, that would not be considered from the gods or the devils. You would just be killed. But if you came from a rich family, then you were entitled to be eccentric, which is pretty much the case today.

But in either case, the whole idea of mental illness has its social implications from the very beginning. Somewhere along the line — now this continued, by the way, all the way through the Middle Ages — it was attributed to various things, usually sin. Apparently in Roman times it was believed to be evil spirits, and then it was possession by devils, and then later on in the Middle Ages it was considered to still have been devils, but as a result of sin now, perhaps of the sin of the parents. It was due to certain helplessness on the part of society to deal with it, that they had to resort to this terminology.

The mentally ill person was called "crazy," an "animal", whatever, because they could not be made to conform. If their non-conformity was not threatening to the political structure they were called "crazy." If it was threatening to the political to the political structure, they were called "traitors."

It was alright if you thought you were god, as long as you went around ranting and raving on the streets. But if you still thought you were god and gathered around you a small group of followers and plotted to overthrow the government, to enthrone you and install you in your godhead — well, that was a little different. Nobody could afford that kind of craziness. By political designation that man was

not called insane, but he was called rebellious. By and large such people were locked up and put away.

Along came a movement called "Psychoanalysis" that said "Hey, maybe it has nothing to do with devils or evil spirits. Maybe it has to do with our own attitudes toward these people. Maybe it has to do with their attitudes toward themselves. Maybe this is very much a human problem. Maybe it very much has human causes."

And Freud and his followers began to investigate so-called "madness" and they gave it a new dimension. They said: "This is not evil. It is something else. It is 'sick,' and we should not look at these people as evil any more. We have to make a great step forward in humanity and view these people as sick." What is happening today with drug addiction, with alcoholism, it is getting very humane and very "in" to view these people as sick — not rotten.

So, Freud was a physician, his followers were physicians, and when he said "sick" he meant "sick." He meant "sick" just like cancer just like a broken leg, just like the common cold. In fact, the neurosis he talked about was as common as the common cold. And he seemed to be very comfortable with that.

But he used a medical model, and at that point in history it would seem to be a great step forward to say that men were no longer evil but that some of them were sick.

But who were the people we were talking about? People who did not behave the way we would like them to. People who bothered us. We still called them something other than people; we still said they were something other than people like ourselves. They were basically people who bothered us, and we changed and traded the word "evil" for the word "sick." And we have gotten rid of the witch doctors and the priests and installed psychoanalysts, psychiatrists. But the so-

called "sick people" were still being put in jails, but the name of the jail was changed to "hospital." They were still being tortured, but it was called "therapy." It still is called "electro-shock therapy." They used to whip them in the Middle Ages to make them conform, and now they just rack their whole body with electro-shock treatment. "I'll get you out of it somehow. I'll snap you out of it."

In the Middle Ages they said it was for your sake because you were going to go to Hell. They still say it is for your sake, because you are crazy and we want you to be sane. They never admitted in the Middle Ages that they wanted these people to conform because they would be more comfortable that way, and they still do not admit it now.

Why do they hunt out these people? Why do they find them? Because they do not conform.

And so what I am coming to say is that the term "mental illness" is a very unscientific one for a number of reasons: it has absolutely nothing to do with science, and it has everything to do with politics. The word "mental illness" is a political term. It means "people who I am not comfortable with," people who our society is not comfortable with."

It is unscientific, too, as a conceptual framework because it refers to it as an illness, implying that there is a health, calls it a sickness implying that there is a state of well-being and that we know what that state is and we know what the sickness is.

No one claims how they know, so that along came some people to say "Well, we are trying to cure these sick people but we haven't really been justifying it, so we'll take statistical samplings and we'll establish what we call a "norm" That will give us a little more justification. And so along about 1900 the birth of Psychology as we know it today was meant to justify psychotherapy in many, many ways. If I

develop a norm then I can decide who does not fit that norm, and it will have a new religious quality to it. It will have the weight of authority behind it, and I can point with quite clear decisiveness that these people do not conform. They are "abnormal." Enter the word "abnormal" now, with some real statistical reality.

Illness implies diagnosis, implies pathology. It implies nomenclature. And so we have that today. So somebody comes in, we name the illness, we diagnose it and say its "paranoid", for example. Then we say "it has three causes, and we can trace the whole history and origin of this disease, and it is really pathological. Then, we can prescribe. We can say "O.K., then a certain course of treatment is necessary." The implications being that a paranoiac is suffering from a disease different from — let us say — an obsessive compulsive is suffering from. Otherwise why would I use the two different terms?

And then the causes and origins of these diseases are different. And of course the method of treatment will of course be different. See, as in medicine and in the other healing arts you do not treat a headache as you would treat a broken leg. That is what is also implied by psychotherapy. You would not treat paranoia as you would treat obsessive compulsiveness. But nobody ever asked why not. We just accepted the medical model that these were separate diseases and they respond better to certain kinds of treatment. And some respond better to some kinds of treatment than another kind of treatment.

So we went out to prove our case, that there were different diseases with different causes, and they were treated differently. Because we began with that premise that apparently that is what makes the difference. There is no virus, so how can you call it an illness?

When we talk about ourselves as being sick, let us say with a cold, or with a fever, or with whatever, that is something that happened to us you see. It happened to us. Our bodies were invaded by a virus, or hit by an automobile, or something. But

somehow it was something we passively received and for which we were a victim — as in the word "patient," which means "sufferer."

And so we were seen to have suffered, some kind of a thing happening to us. That was just accepted in mental illness too. The poor person is suffering from this disease. The word "suffering" was used in the same way that it was used in "suffering from a broken leg," implying that it happened to the person, and then "the disease" implying that there was an external cause again. And of course using the word disease meant external cause, nomenclature, diagnosis, without prescription, all a false justification. It had never been questioned.

And yet, if ever you pinned down a psychotherapist he would say "Yes, of course it comes from the person. It doesn't come from outside. Yes, of course I deal with the patient."

So if the causes (and they are if it is a disease) are from outside, then no amount of psychotherapy with the individual would help, would it? And if the reason why we are the way we are is because that is the way our mother and father made us, well then it seems to me that we need our mother and father in the therapy session, to remake us and help us be born again and be remade, if it is so true that is what made us the way we are. There is a whole question of not having a choice.

In ancient times a man could not be healed except by the grace of God or the grace of the gods. In later times a man could not be healed unless by the grace of the psychoanalyst. But somehow external intervention was seen as to be necessary and some miracle had to be worked because apparently this was a disease that was inevitable. And yet the admission that there is a therapy is a denial of its inevitability.

Option Therapy is an existential humanistic approach which starts asking questions, and starts with, the whole medical model of mental illness is a myth.

We are not talking about a virus, you are not talking about anything you can put under a microscope, you are not talking about an illness. You are talking about how people feel, and what they do to themselves. And you are talking about people's behavior and how they act upon themselves. You are talking about how people choose to be. And when you say "illness" you are implying that they did not want to be that way, that they had to be that way. Why should we make that implication without finding out? Why do we decide that all of our so called crazy people or our so-called normal people are "products?" See, it is a nice battle: are we products of our environment or are we products of our heredity? Not even allowing another possibility, that we are not products at all. That our behavior is not a product of either our environment or of our heredity. That our behavior is what it is because it is what we choose it to be.

Now, if you want to know why we choose it to be, that is where Option Psychology comes in. We find that all behavior is chosen. All behavior other than that physical, biological behavior which is the study of the physio-biologist. And that what are commonly called "emotions," or "emotional disturbances," or "emotional states," etc., are very freely and directly chosen by the person who is so-called "suffering" this. The person is not suffering it by any means, in the sense that it happens. They suffer in the sense that they feel bad. But they are not suffering in the sense of the original meaning of the word, which was "suffer something": something happens to me. I am very passive when that happens.

Every person who is very unhappy walks into my office and says things, you know, like "This makes me mad. I hear voices coming into my head. They are doing this to me. They are doing that to me. Everything makes me be what I am. I am pretty much helpless. Elevators make me afraid." This makes me that." Always talking about things "making" them, very much in the sense of their own helplessness, and believing it very much. But that does not make it true, does it, just because they believe it? It would be very unscientific for the doctor to believe

you when you walked in and said "I have appendicitis, would you please remove my appendix?" what kind of a physician would that be? But, you walk into the psychoanalyst's office and say "My husband makes me unhappy, would you please remove my husband?" And you will start upon a course of therapy to enable you to get the strength to kick your husband out of the house. But in some sense buying the story that something is happening to you, and that you have got to develop the strength to fight against it, talking about such things as "weak ego, weak self, strong self," all implying that we need strengths that we do not have in order to fight this world that we live in. The world that is constantly grinding us down and making us sick.

Buying the presumption without asking "Is it true?" Just what if it was not true? What if it was not the world that was making us sick, but that it was us that was making ourselves unhappy? Because that's what we were believing, that the world was making us sick, perhaps.

Just what if the paranoiac was not really hearing voices, or was really hearing voices? It is very unscientific to begin with either direction. But to label the person as a paranoiac implies that we really know what is going on. But we do not know what is going on. All that has been happening in psychotherapy and psychoanalysis, more and more, is that we more and more learn that we do not know what is going on. But we act as if we know. We feel very helpless, we feel like neophytes, we feel very courageous and very heroic entering into this unknown, uncharted area of the human mind. It is a lot of baloney.

That we know ourselves is one of the principles of Option Psychology. That we do know what it is all about and that fact, in entering into the therapeutic relationship between the doctor and the patient that is the beginning of challenging? The denial that we do know what it is about. And so the patient comes in and says "Doctor, you tell me what is wrong with me. Doctor, you help

me find out what is wrong with me.'" And he says "yes, we'll search through your history and subconscious and find out those things that are being hidden from you." How could they possibly be "being hidden" from you? Who else is there in your body besides you?

You are hiding them from yourself. But you do not say that to the patient. All right, you might say it after a while. Then the patient says "Oh, I'm hiding it from myself." How do you know what to hide if you do not know what it is in the first place? If I said to you: "Don't think of the word hippopotamus for the next ten seconds," how many of you could do that without knowing that you are not supposed to think of the word hippopotamus? And so you have to think "Don't think hippopotamus" and already it is too late. "Don't think of what my mother did to me— what? What did she do to me? Oh, yeah. Don't think about...oh yeah.'" And you have to go back and forth thinking about what you are not supposed to be thinking about.

If there is such a thing as repression, suppression, loss of memory, the unconscious, it means knowing what you know and denying it — that's all. It doesn't mean not knowing it. It can't mean not knowing it. If you didn't know it then it couldn't be there, and then you wouldn't know what to repress, suppress, or forget. You knew what to remember when you started this so-called "search." If you didn't know where "hidden" thoughts were in the first place, you found them when you discovered that they were "hidden".

So, there's a complete lack of faith in the patient, and a complete ignorance. Very frequently, the therapist, believes the patient doesn't really know what's going on and "I'm going to help them." In Option Therapy we know that that's not true.

And we find this: in examining people, in examining how they are who they are and what they do, we find that everything that they do follows from a belief that they have. And everything that they feel follows from a very real belief. So, that

goes for us. Everything we feel and everything we do is based on very, very real beliefs that we have. Our emotional responses are chosen.