STREET SPIRIT INTERVIEW WITH LEONARD ROY FRANK (7/03)

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INTRODUCTION

Electroconvulsive Brainwashing
The Odyssey of Leonard Roy Frank

by Terry Messman Street Spirit

Leonard Roy Frank's name is spoken with something approaching reverence by those movement activists, journalists, psychiatrists and psychiatric survivors who have come to know his work in exposing the abuses of psychiatry over the past 30 years. He has the bearing and intensity of an Old Testament prophet as he speaks gently and thoughtfully, yet with a deep urgency, of the countless lives that have been destroyed or irreparably damaged by what he describes as "psychiatric atrocities."

Without hesitation, those activists who have built a nationwide human rights movement to resist psychiatric abuses compare him to past movement builders such as Gandhi and King.

David Oaks, executive director of MindFreedom and a leading activist in the national movement of psychiatric survivors, says flatly, "Leonard Roy Frank is the Gandhi of the psychiatric survivors' movement. He's really helped bring a powerful spiritual discipline to this movement, similar to the work of Martin Luther King. Certainly in the 20th century, Leonard would be one of the foremost challengers of psychiatry, especially electroshock."

Both in appearance and in his outspoken activism against injustice, Leonard somehow calls to mind such prophets as Isaiah and Jeremiah. Interestingly, Leonard was led to an in-depth study of those Biblical prophets through his immersion in the writings and activism of a devout Hindu, Mohandas Gandhi.

In fact, as we trace Leonard's life journey, it becomes tempting to blame his reading of Gandhi for his incarceration in a psychiatric facility and the torturous, life-endangering mistreatment he underwent there. But it was also Gandhi who supplied him with all the vital clues needed to later stage an uprising against the forces of psychiatric oppression.

Leonard Roy Frank was a very conventional young man when he moved to San Francisco in 1959. A business graduate of the Wharton School at the University of Pennsylvania and an Army veteran, he went to work selling real estate for a downtown San Francisco firm.

What happened next also was not that unusual for a young man in San Francisco. While employed as a realtor, a businessman without any interest in spirituality or activism, he innocently opened up Gandhi's autobiography, and found something deeply stirring and meaningful in the Hindu activist's

reverence for all life, his spiritual depth, and his dedication to nonviolent social change.

Somehow, by reading Gandhi, Leonard had wandered into the whirlwind. He immersed himself in studying the spiritual mentors that Gandhi described in his autobiography. For the next three years, Leonard virtually dropped out of mainstream society, and spent his days voraciously reading Henry David Thoreau, Ralph Waldo Emerson, the Bhagavad Gita, the Bible, depth psychologist Carl G. Jung, historian Arnold Toynbee and the mythologist Joseph Campbell.

While reflecting on these newly discovered insights, Leonard became a vegetarian, grew a beard, left his job selling real estate, and devoted himself exclusively to these spiritual pursuits. Hundreds of thousands, perhaps millions, of youth followed this very path in the later 1960s and 1970s. Leonard Roy Frank's mistake was to do it a few years ahead of his time.

He paid a very serious price for taking Gandhi so seriously. His parents had him involuntarily committed to a psychiatric hospital, and Leonard was confined for a season in hell. For the next seven months, he was imprisoned and forced to undergo what can only be characterized as psychiatric torture - 50 insulin-induced comas and 35 electroshock procedures.

Many years later, Leonard was able to obtain his medical records. Jeffrey Moussaieff Masson, the author, former psychoanalyst and critic of Freud, described the content of his medical records.

Masson wrote: "Leonard Roy Frank, who has been very active in the movement, managed to get his 'medical' files from the 'hospital' where he was incarcerated.... The documents reveal clearly that Frank's five major symptoms, in the eyes of the doctors who examined him, were: he was not working; he had grown a large, full beard; he had piercing eyes; he was a vegetarian; and, in the words of the medical examiners, he 'lived the life of a beatnik - to a certain extent.' When he was taken, involuntarily, to a psychiatric institution, he developed a sixth symptom: he did not recognize that he was ill. Therapy consisted of artificially induced insulin comas and electroconvulsive shocks. The psychoanalyst who diagnosed Frank as a 'paranoid schizophrenic' also suggested removing his beard as part of the therapy....

"The doctor who actually gave the shock treatments wrote to Frank's parents: 'We have increased the frequency of the shock treatments this week to a total of five treatments, namely one daily, as I wanted to have him a little more confused and clouded at this time if we are to remove the beard so that he would not be too acutely aware and distressed by this procedure.' "

It was all to no avail. Their torture-disguised-as-therapy failed to turn Leonard Roy Frank back into an obedient, conformist, real-estate salesman. Forty years later, he still is a vegetarian, still has the piercing eyes, and long ago grew back the beard. He still reads Gandhi, Thoreau and Jung in search of spiritual and political wisdom. In that sense, he still "lives the life of a beatnik - to a certain extent."

In every sense, Leonard became even more of a rebel after these horrific experiences. He grew into a dedicated nonviolent activist, helping to build the movement of psychiatric survivors and leading prophetic protests against electroshock, forced drugging, and psychosurgery.

But it would falsify the picture to understate the amount of devastation that psychiatrists did to his brain with the insulin coma/electroshock procedures.

California psychiatrists deliberately put Leonard and many other patients into brain-damaging comas by injecting large doses of insulin to reduce blood sugar and trigger a "physiological crisis" marked by irregularities in blood pressure, breathing, pulse and heart rates. Patients underwent an excruciating ordeal, manifested by what Leonard described as "incontinence and vomiting; moans and screams (referred to in the professional literature as 'noisy excitement'); sobbing, salivation, and sweating; severe restlessness; shaking, spasms, and sometimes convulsions."

The crisis intensified for hours until the patient was plunged into a life-endangering coma. Brain cell destruction occurred as the "sugar-starved brain" began feeding on itself for nourishment. Patients were left in the coma for an hour, then revived by the administration of glucose and sugar. Sometimes subjects could not be restored to consciousness and would go into prolonged comas, resulting in more severe brain damage and sometimes death.

The insulin coma treatments could have ended Leonard's life. Years later, he was stunned to learn that Max Fink, a doctor who headed the insulin treatment ward at a Long Island hospital, reported that the death rate from insulin coma was anywhere from one to ten percent.

The staggering total of 50 insulin comas and 35 electroshock procedures he was forced to undergo literally erased his memory for the past few years, thus eliminating all of what he had learned from Gandhi, Thoreau, Jung, et al. during what he called his "conversion period." The memory loss stretched back even further. He soon found that his entire college and high school education was gone.

Even worse, he was left with a serious learning disability. "I also had to relearn much of the English language," he said. "I had forgotten the meaning of many once-familiar words and had difficulty using correctly the words I understood."

Since insulin comas had erased his political and spiritual studies in a process he today denounces as "electroconvulsive brainwashing," the first act of resistance Leonard committed was to re-read all his books and retrieve those insights from the oblivion of insulin coma.

The second act of resistance to psychiatric abuse was to join the editorial group that produced the legendary publication, Madness Network News, in the 1970s and '80s. Madness Network News was a beautifully designed publication that gave voice to psychiatric survivors and featured groundbreaking investigative reporting on electroshock, neuroleptic drugs, tardive dyskinesia and other forms of psychiatric mistreatment.

The third step in overcoming the injustices he had suffered was helping to organize the Network Against Psychiatric Abuse (NAPA). NAPA activists used the philosophy of Gandhian nonviolence to build a movement that used civil disobedience and colorful protests to resist electroshock, forced drugging and slave labor in California psychiatric facilities. NAPA achieved significant reforms through these nonviolent campaigns that helped protect the rights of mental-health consumers.

Leonard also became a formidable scholar on psychiatric issues. He helped edit and publish two highly influential books and many magazine articles on the subject of psychiatric abuses. He edited The History of Shock Treatment, and was co-editor of The Madness Network News Reader. To read those two books

today is to be amazed at the wealth of scholarly information and far-seeing insights that have been influential in educating a new generation of authors on these issues.

Beginning with Random House Webster's Quotationary in 1998, Leonard Roy Frank has created a series of books published by Random House that gather together some of the wisest quotations and axioms from the world's most profound scholars, authors, activists, historians, philosophers and spiritual thinkers. Every month, Leonard publishes an anthology of those quotations in Street Spirit, entitled "Poor Leonard's Almanack."

It's a highly ironic turn of events that he has become a successful editor publishing the very same kinds of spiritual and political insights that psychiatry once tried to eradicate from his brain. His life is living testimony to the truth that full recovery from psychiatric abuse is indeed possible. You simply can't keep a good mind down, not even with 85 insulin comas and electroshocks.

During the interview, as I listened to Leonard Roy Frank's ideas about nonviolence, peacemaking and spirituality, it seemed all the more outrageous that such a gentle thinker was attacked by the powers that be, taken captive, silenced, electroshocked and purposely sent into life-threatening comas.

What happened to Leonard was chilling, but his first-hand experience of psychiatric torture pushed him to begin organizing for the rights of psychiatric survivors. Oppression can beget liberation in spirits strong enough to take the worst punishment and survive. Leonard bounced back stronger than ever and put his studies in the nonviolence of Gandhi, Thoreau, and Jesus to work in creating a movement for the voiceless victims of our time.

"Truth crushed to earth will rise again." If his psychiatrists had ever bothered to read Gandhi and King, they might have realized that Leonard would survive his soul-crushing captivity, and rise again in the struggle for justice.

INTERVIEW

The Street Spirit Interview with Leonard Roy Frank

Interview by Terry Messman Street Spirit, July 2003

STREET SPIRIT: You have been one of the most prominent activists questioning the legitimacy of psychiatry and condemning its abuses. What led you to become such an outspoken critic?

LEONARD ROY FRANK: My run-in with psychiatry happened back in 1962 and '63. About two years before this encounter with psychiatry, I had been undergoing some personal changes in terms of my lifestyle and my beliefs. I decided the person I had been before was not the person I really wanted to be, and I knew I was going to have to do a lot of growing.

A number of books influenced me greatly, including Mahatma Gandhi's autobiography. With Gandhi's book, I was first introduced to the ideas of

nonviolence and social change by peaceful means and vegetarianism and spirituality.

Gandhi also inspired me in regards to civil disobedience. After getting involved in the psychiatric survivors movement in the early 1970s, I personally engaged in acts of civil disobedience with other people in the movement in a number of cities. I was arrested in Toronto, New York City, Berkeley, and in Sacramento, where we conducted a 30-day sleep-in in then-Gov. Jerry Brown's office to protest the forced drugging and involuntary slave labor of psychiatric inmates in state hospitals.

SPIRIT: Looking back, it seems that this early immersion in Gandhi was preparing you for your future role in the resistance movement led by psychiatric survivors.

LEONARD: Yes. My studying of Gandhi was not merely an intellectual exercise. It was all preparatory to actually living out these ideas in my life, including civil disobedience for social change.

Then I investigated a number of the books that Gandhi recommended in his autobiography, including Henry David Thoreau's essay on civil disobedience. I read the New Testament and the Old Testament. Then I started broadening my reading. I became very interested in the historical writings of Arnold Toynbee, and I read Emerson and other works by Thoreau. Joseph Campbell's book, The Hero with a Thousand Faces, had a big impact on me.

I was not only reading these books, but I was beginning to practice the ideas in these books in my everyday life. I became a vegetarian; I became very interested in spiritual matters. I began to see the world and myself with new eyes.

SPIRIT: No wonder you ended up in trouble with mainstream society, because those books were instrumental in launching the whole 1960s counterculture. You were just a few years ahead of your time.

LEONARD: I was a little bit ahead of my time; and when my parents got wind of this, they became very concerned about what was going on with me. After reading these books, I came to challenge not only what I had believed and how I had lived previously; but I began to reflect on society at large, and I saw that there were a lot of things going on that were very damaging to our well-being and negatively affected the community, family life, child-rearing practices and relationships.

So suddenly everything was up for grabs in terms of my values. Later, I learned the expression that what was needed was a revaluation of all values, in the phrase by Nietzsche.

SPIRIT: Were you a real estate agent when you began going through these changes?

LEONARD: Well, I had been a real-estate broker in New York, where I was born and raised. I had graduated from the University of Pennsylvania where I was a marketing major, then I was in the Army for a couple years. Then I became a real estate broker in New York and then in Florida. At the ripe old age of 28, I moved to San Francisco, thinking that this was a better area to practice my business. I went to work for a downtown real estate firm.

After a few months, I began to get interested in these other things, and lost interest in real estate. I started reading more and more, and became less and less interested in bricks and mortar, and more and more interested in things of an intellectual and spiritual nature. I became interested in philosophy and religion and history and spirituality and politics. This was very troubling to my parents. I wasn't troubled by this change at all; I thought this was an opening up, and that I was really growing. It was a wonderful experience to me. I didn't feel this was a dangerous path to be

going on, or that I was going to be getting into any deep trouble. I felt that it was really necessary to take some time to really rethink all these things in order to decide the direction that I wanted to take with my life. I was doing that for about two years in the early 1960s, and during that time frame, my parents visited periodically and they became, predictably, more upset with the kind of person I was becoming, because I was moving off into a completely different direction.

SPIRIT: Just five years later, thousands of young people would be going in exactly that same direction, away from conformity and mainstream jobs, and into political and spiritual rebellion. But you were a premature member of the counterculture.

LEONARD: I wasn't really a hippie in any sense of the word, other than that I was rebelling against the status quo and everything it stood for. But in terms of my lifestyle, I wasn't leading an outrageous life or dressing in strange clothing or doing things that would cause me to be thought of as a nuisance in any way. I was, instead, spending a lot of time in the library and second-hand bookstores and buying all these books and reading them. I was building up a whole library of books and studying and rethinking things.

My parents decided this was not the right thing for me and they urged me to see a psychiatrist. I had already done some reading in the writings of Freud and Jung, an eminent psychiatrist, during this period. I was very favorably impressed with Jung because he did have a component of his belief system that dealt very specifically with spiritual matters and human development and growth and awareness and mythology and lots of wonderful things. I'm still, to this day, very influenced by the writings of Carl Jung. His book, Memories, Dreams and Reflections, is one of my favorite books.

SPIRIT: That's Jung's autobiography where he looks deeply into his own spiritual growth, visions, and dream symbols.

LEONARD: Yes, his autobiography. But from Jung's books, there was no indication of what psychiatry was really all about. Jung was just describing what we call "talk therapy," psychoanalysis in the case of Freud; and in the case of Jung, it was called analytical psychology. But I didn't have any knowledge of what psychiatry was all about - that is, real psychiatry as it is practiced in institutions.

SPIRIT: You were interested in Jungian psychotherapy, but had no idea what psychiatrists did in state mental hospitals?

LEONARD: Yes, as opposed to people going voluntarily to someone's office and talking about their personal problems and traumas. I wasn't interested in the psychiatric approach, but my parents became more and more insistent upon that idea. By 1963, I was a full-fledged vegetarian, I had grown a beard, and was not communicating well with my parents; and that was something that disappointed them a lot, and understandably.

So when I was not willing to see a psychiatrist, they arranged to have a psychiatrist see me. In order to do that, they had to commit me involuntarily to a psychiatric hospital. I was picked up by the police, or the mental-health police, whatever they were, and brought to Mt. Zion Hospital in San Francisco, where I was kept for a couple days. Then I was sent to Napa State Hospital for a couple months. Then I was sent to Twin Pines Hospital in Belmont, south of San Francisco.

SPIRIT: So you were involuntarily confined because you grew a beard, developed spiritual beliefs, practiced vegetarianism, and alienated your parents? **LEONARD:** Yes. And from my hospital records, the initial medical examiner's report said that I was living alone, spending a lot of time studying, and "was

living the life of a beatnik to a certain extent." Now this was between the beatnik and hippie eras, and those are the exact words of the medical examiner: "living the life of a beatnik to a certain extent." On that basis, I was denied my freedom. The records also mentioned I had grown a beard and had developed "vegetarian food idiosyncrasies," that was the phrase they used (laughing).

SPIRIT: In "Howl," Allen Ginsberg described some of the best minds of his generation going through that same fate as the price of nonconformity.

LEONARD: Exactly. But it wasn't just nonconformity, it was non-productivity. I just wasn't working. I was just holed up in my apartment studying, and they just assumed that if I was living alone like that, I had to be up to no good.

SPIRIT: How long were you locked up in psychiatric facilities and what kind of treatment did they impose?

LEONARD: I was locked up a total of seven and a half months. They tried to get me to accept electroshock and drugs at Napa State Hospital, and I refused. For some reason, they didn't force those treatments on me. It was only when I got to Twin Pines Hospital that they decided to go to court and get a court order authorizing them to administer insulin coma electroconvulsive treatment. The very next day following the court order, they started in with the insulin coma treatments in January. That lasted about four months.

SPIRIT: What did it feel like to go through an insulin-induced coma? LEONARD: It involved 85 shock treatments altogether. There were 50 insulin coma treatments and 35 electroconvulsive treatments. The treatment was the most horrible experience of my life. The treatment was so devastating, in terms of the brain damage it caused, that I had no memory of the months-long treatment period, other than coming out of the last coma, which was a perfectly horrific experience.

You're going in and out of consciousness as you recover your awareness. You don't do it all at once; it's a gradual process. When you become conscious, you become keenly aware of tremendous hunger pangs because part of the process of insulin coma is to bring you to a state of insulin deprivation. When you don't have any sugar running through your brain, that causes the brain to break down and that's why you go into a comatose state.

So I came to with unbelievable hunger pangs and saw these strangers hovering over this bed where I was strapped down; my memory had been wiped out, and I didn't know who any of these people were. And they were injecting me with needles to restore me to consciousness. Because if you're allowed to remain in a coma for an undue period of time, much longer than an hour, it not only destroys your brain cells, it can kill you.

SPIRIT: The psychiatrists subjected you to an experimental treatment that carried a significant risk of death?

LEONARD: Yes. The prolonged coma was one of the main reasons why people died from insulin coma treatment. One published study in the early 1940s indicated that nearly five percent of the people undergoing insulin coma treatment at state hospitals died as a result of that.

SPIRIT: In other words, every time they gave you one of those 50 insulin coma treatments, they were playing Russian roulette with your life.

LEONARD: Exactly. My life was greatly endangered, yes. I just read in the last year an article published by a very well-known psychiatrist named Max Fink, a well-known insulin/electroshock doctor still living today. Max Fink's article was describing insulin coma treatment, a procedure which he knew very well because he headed the insulin treatment ward at a Long Island Hospital back in

the 1940s and 1950s. He was reporting that the death rate from insulin coma was anywhere from one to ten percent. Here he was an authority in the field, and the best he could do, in terms of figuring out the number of people who died from this procedure, was one to ten percent. Well, there were tens of thousands of people who underwent this procedure over the years!

SPIRIT: That's a very high mortality rate. It must have led to countless premature deaths.

LEONARD: Thousands of deaths.

SPIRIT: What shape were you in when you came out of the series of comas? LEONARD: When I came out of it, I had a near-total loss of memory. I didn't know who these people were hovering over my bed as they were trying to restore me to consciousness. I didn't even know that John F. Kennedy was the president of the United States, although he had been elected nearly three years previously. Here I was, the person that was really up on what was going on in the world, but I didn't know that he was president. After a while, when I tried to figure out the extent of my losses, I realized that nearly three years of my previous life up to that point was entirely wiped out - including this period of tremendous growth.

SPIRIT: All that intellectual and spiritual growth was simply erased? LEONARD: All that was wiped out. I was regressed back to the point that I was before then. But not only that, there was also a tremendous wipeout of memories from my college and high school education. When I came out of the hospital and really began to understand the extent of my losses, I figured I was about at the level of an eighth-grader in terms of my intellectual development. I remembered certain courses I had taken, but in terms of the subject matter itself, the content of those courses, there was virtually nothing.

SPIRIT: So your memory, your spiritual and scholarly insights, and your academic studies all the way back to eight grade, much of that was stolen from you.

LEONARD: I would say that I was robbed of those memories. They were destroyed outright. The only way they could have accomplished that was by causing brain damage, because your memories are housed in your brain cells, and when your brain cells are destroyed, the memories contained in those cells are destroyed too.

SPIRIT: Yet your only "transgression" was to be immersed in the study of nonviolence, peacemaking, spirituality and social justice. It seems even more outrageous that these were the very thoughts they were determined to eradicate.

LEONARD: All these wonderful teachings were coming my way and I was adopting them in my life. And the purpose of this psychiatric treatment was to destroy my memory for this period. They wanted to regress me back to the person I had been before this period of transition and transformation began. And they largely succeeded, because after the shock treatments, I had only the vaguest memories of the things I had been reading. I remembered the titles of a few books, but the teachings were for the most part forgotten. I had to relearn them; and it was much more difficult because I no longer had a fully intact brain.

SPIRIT: The comas and shock treatments left you with global amnesia, but also with a serious learning impairment?

LEONARD: Oh, definitely. It became much more difficult to learn and memorize things. Even to this day, if I go to the supermarket and have more than three items to purchase, I have to write them down; otherwise I'll come back with only two of the three. My learning had been largely destroyed for virtually all of my adult life. Large pieces of my entire life were destroyed. I don't think of electroshock in terms of electroconvulsive treatment, which is the psychiatric term for the procedure. I speak of it as electroconvulsive brainwashing, because that is exactly what was done in my case, and what is done even to this day whenever electroshock is administered to anyone. There is always a degree of memory loss and the amount of the memory loss is contingent upon the amount of shocking being done, the intensity of the shocks, the number and frequency of shocks. What it really results in is a kind of euthanasia of the spirit.

SPIRIT: The death of the spirit?

LEONARD: Your spirit, in my view, is housed in your brain. If brain cells are destroyed, it lessens your ability to think creatively and to think spiritually of higher things. It brings you down several notches in terms of your level of awareness. It's a life-diminishing procedure because it's a thought-diminishing procedure. It reduces your ability to act on the highest human level, which is, in my opinion, spiritual.

SPIRIT: Considering what a prolific editor you are now, it's remarkable you recovered to the extent you did.

LEONARD: It took me years of restudying and re-examining things I had been reading prior to the insulin comas. I remembered the title of Gandhi's book and certain other titles of books that I had read - I remembered maybe 10 or 15 titles altogether, although I had read hundreds of books during that two-year period. I went right back and reread those books. I reread the Bible, I reread (French philosopher) Henri Bergson, I read all these books again. There was some dŽj^ vu, like ideas that were a little bit familiar to me; but for the most part, it was like I was reading the material fresh.

SPIRIT: That's exactly what Robert Pirsig describes in his book, Zen and the Art of Motorcycle Maintenance. He said his deepest intellectual personality was destroyed by electroshock and he had to go back and retrace his intellectual footprints and recapture what he had lost. He would have flickering moments of deja vu when he vaguely remembered that his earlier self had passed that way before, and had those insights before.

LEONARD: That's a wonderful book. What he did, he took a trip on his motorcycle in order to try to relive these experiences; whereas, I took my journey in my apartment. I did the very same thing by reading, studying, going to the library a lot. I reacquired the knowledge that had been destroyed and then went on to acquire new knowledge as well.

SPIRIT: One of the things you eventually did in response to this dehumanization was to become one of the leading activists in the psychiatric survivors movement.

LEONARD: Yes, I became active in the movement in 1970, '71.

SPIRIT: Did that help you deal with some the psychiatric abuses done to you? LEONARD: It was validating in a sense. It gave me the opportunity to do what I had determined I was going to do if I ever had a chance. This is something I don't think I've spoken publicly about before. I can remember almost as soon as I had become aware of what had happened to me - that I was in the hospital and all this assault had taken place and my memories had been destroyed - I

made up my mind that this was something I was going to fight against, if I ever had the chance.

I recognized it immediately as an atrocity that had nothing to do with therapy or trying to help me in any sense of the term. It was a tremendous violation of my humanity and I was going to fight it if I ever had the chance. Years after being released from the hospital, I got on board with the Madness Network News, which was first published in 1972. I was one of the people responsible for putting that out.

SPIRIT: That was a legendary publication. Many activists still revere it. Even people who never had any contact with psychiatry or the psychiatric survivors' movement still remember what a seminal human rights journal that was.

LEONARD: it was a marvelous period. There was a book that came out of that as well, Madness Network News Reader, published by Glide Publications in 1974. By then, I was operating my own art gallery in downtown San Francisco. I ran that gallery for five years. It was a wonderful location, and this was used as a meeting place for the organization that was to evolve out of Madness Network News. In 1974, a good friend of mine, Wade Hudson, and I decided to form the Network Against Psychiatric Assault (NAPA). We used my art gallery as our headquarters, and we used to hold our meetings there, and we would have forums and do a lot of organizing work.

SPIRIT: Looking back on the history of the psychiatric survivors' movement, NAPA was truly a groundbreaking organization. It was one of the most dedicated group of activists fighting psychiatric assault, renowned for its struggles against electroshock in Bay Area hospitals.

LEONARD: When we began, in 1974 and 1975, we were organizing against the use of electroshock at Langley Porter Neuropsychiatric Institute, the UC Medical Center. We were holding public demonstrations there that were very vibrant and got a lot of media attention, television, radio and newspaper.

Eventually, we caused such a stir that the San Francisco Board of Supervisors conducted hearings on electroshock use in San Francisco. From those hearings, they actually called a moratorium on the use of electroshock in San Francisco, and that lasted for several years.

SPIRIT: Have they resumed the use of electroshock?

LEONARD: Unfortunately, they're still doing electroshock in San Francisco. They resumed electroshock in the 1980s.

SPIRIT: Many people think these kinds of things aren't being done anymore. The fact that psychiatrists still use such an assaultive treatment as electroshock is stunning, especially after all the work that groups like NAPA did to get it outlawed.

LEONARD: You know, it's an important point to make that one of the most crucial activities that NAPA engaged in during those early years was lobbying for legislation in California that would regulate the use of electroshock and lobotomy in our state. We were successful in having legislation enacted; it was run through by John Vasconcellos, an assembly member from San Jose. As a result, California became the first state to regulate electroshock.

SPIRIT: The bill gave people some legal safeguards?

LEONARD: Yes, protections. Not very good protections, but at least it was a step in the right direction. Since that time, my understanding is that about 30 states around the country have such legislation; but California was the first, and NAPA was the initiating group that led to the enactment of this legislation.

We also demonstrated against psychosurgery at the Federal Building. And we held a sleep-in in 1978 in Governor Jerry Brown's office. That lasted for 30 days, and led to an investigation that uncovered more than 20 questionable deaths of patients in state hospitals. Also as a result of that, there was an investigation into the use of drugging and forced labor in California state hospitals. So we did a lot of good work. We helped develop our movement in those early years.

SPIRIT: In retrospect, many people see that lobotomy, electroshock and insulin coma are very crude assaults on the higher functions of the brain. But there's a common perception that psychiatry has progressed by utilizing the so-called antipsychotic drugs - both the neuroleptics such as Thorazine and Haldol and the newer atypical drugs such as Zyprexa and Clozaril. Do you think the drugs are a step up from lobotomy and electroshock?

LEONARD: Well, I think of the drugs as being a more sophisticated form of brain-damaging treatment. The crudest form, of course, was the lobotomy, then next comes the insulin coma, and then the electroshock. And now it's the socalled antipsychotic drugs and antidepressant drugs and the stimulant drugs. These have largely replaced the use of the crudest forms of brain-damaging procedures. But you can produce the same effect with these psychiatric drugs as you do with the lobotomy if you administer the drugs over a long enough period of time in large enough doses. It's just as simple as that. In other words, we're talking about a continuum of treatment, with lobotomy at one end and the psychiatric drugs at the other end. They are all braindamaging; it's just that the lobotomy is very quick. You go in there with a scalpel and you cut the brain connections and right away you produce an immediate effect: the person is dehumanized, they're robbed of their mental sharpness, and they're turned into vegetables, in a sense. With the electroshock, it takes a little bit longer with a series of shock treatments. That will have the same numbing effect and a dumbing-down effect, but it takes longer.

With the drugs, it takes still longer, and the desired effect, from the psychiatrist's point of view, is a person who is vegetable-like, who is very dependent and needy, and is just sort of sitting around, spaced out - but is not causing any trouble and is very easily managed. Someone who doesn't complain a lot and doesn't say an awful lot because they're functioning at a subhuman intellectual level.

SPIRIT: Because they've lost a lot of their higher brain functions and even their emotions and basic personality, just as with the lobotomy. **LEONARD:** Exactly. The chemicals also destroy healthy brain tissue, just like the lobotomy, only it takes a longer time.

SPIRIT: A greater percentage of the population is subjected to these brain-damaging treatments than ever before.

LEONARD: The numbers involving these new techniques are staggering. For antipsychotic drugs alone, there may be five to ten million people on these drugs. These psychiatric drugs are not just given to people in institutions. Now people can be drugged against their will in their own homes. It's possible for someone's own home to be turned into a mental ward.

SPIRIT: You're talking about forced outpatient treatment?

LEONARD: Yes, it's called involuntary outpatient treatment. With a court order, the psychiatric police can come to your house and forcibly administer drugs to you on a regular basis. That's happening throughout the country now, in 30 states that provide for involuntary outpatient treatment.

SPIRIT: Along with the growing tendency to use antipsychotic drugs in lieu of therapy, psychiatry has also greatly expanded the number of diagnoses that call for the prescription of psychotropic drugs. What used to be called shyness and introversion is now called social anxiety disorder and drugs such as Paxil are regularly prescribed. This expands the number of people being drugged by millions.

LEONARD: The antipsychotic drugs are used by millions, but the antidepressant drugs may be used even more widely. The new antidepressants - drugs such as Prozac, Zoloft and Paxil - are being used by 12 million Americans. At first, antidepressants were given virtually only in cases of clinical depression - that is, for very, very severe depression. Now they're taken by people like they pop aspirin!

Whenever people feel uncomfortable about themselves, whenever they feel a little bit of anxiety or self-doubt, they pop one of these pills. There have been studies conducted in England very recently that indicate that the use of Paxil increases suicidal ideation amongst children. Doctors in England who prescribe that drug are urged or required to inform prospective users of that particular risk as a warning to them.

This story was covered as the lead story in the business section of the New York Times. But I didn't see this story on the evening television news programs at all. That's not the kind of story that these programs want to publicize because the advertisers for the evening network news programs are very frequently the pharmaceutical houses. A significant percentage of the advertising in the evening news is from the pharmaceutical houses; and you can be sure that they would haul out the red flag if they saw a news segment that was prejudicial to their product. So that's another form of social control.

SPIRIT: Loren Mosher, a psychiatrist and former head of schizophrenia research at the National Institute of Mental Health, recently said that the psychotropic drugging of children has escalated fourfold in the last decade. Is this an attempt to chemically subdue children who are simply reacting to school as kids have for centuries - by being bored or restless or disobedient or unruly?

LEONARD: Literally millions of children are being labeled with Attention Deficit Hyperactivity Disorder, or ADHD. They are children in school who are unruly and difficult to handle, kids who are upsetting to the equilibrium of the classroom. They're giving teachers a hard time, maybe giving their parents a hard time. Putting them on drugs is purely a social-control device. Stimulant drugs such as Ritalin and Adderol, for some reason, have a paradoxical effect that tends to space them out and calm them down and slow them down. So, instead of being their vibrant, youthful selves, they sort of just sit there and vegetate.

SPIRIT: But teachers may support the use of drugs because the students become obedient and conform in class.

LEONARD: They're perceived as being "under control" and well-behaved, but what's really happening is that these kids are spaced out. They're not in a better position for learning, because their minds have been slowed down and they're not as receptive to ideas. In the long run it's going to worsen their ability to develop themselves intellectually.

Furthermore, these stimulant drugs are like the speed sold on the street! The only difference is that with the stimulant drugs there's a lot of money being made by the drug companies; and the quality of the speed is much better than what you might expect to get if you were to purchase the speed from your local drug pusher. When you get it from the certified drug pusher - the psychiatrist or pediatrician or the regular medical doctor - you can be pretty sure that the quality of the drug is good.

But the quality of the drug doesn't change what it does to you; and what stimulant drugs do to you is stunt your growth. They tend to make you very jittery and restless and can cause nightmares and dizziness. It also has an effect on your growing brain. For young people, the brain will continue to develop until maturity. Stimulant drugs are capable of stunting your brain development. This is a terrible thing to impose upon a young person! It's also a gateway drug in the sense that children who are put on these drugs at an early age are much more likely to get involved in a drug lifestyle, whether they are drugged with street drugs or psychiatric drugs. That seems to be the pattern; it's not so easy to go off these drugs. The tendency is for kids, once they start on these drugs, to graduate, once they become adolescents, to another form of psychiatric drugs. Or if they're not getting the psychiatric drugs they want, they will experiment with alcohol and other kinds of drugs available on the street.

SPIRIT: This is the forced drugging of a generation - a vast social experiment that will have unforeseen consequences.

LEONARD: These young kids are being set up to be chronic mental patients. And we're not talking about a handful of troublesome kids. I've seen estimates of from two to eight million children who are on either stimulant drugs, antidepressant drugs, or a drug like lithium. That's a catastrophe in terms of what it's going to do to the upcoming generation. What is going to happen to these people who are drugged out when they become adults? Are they going to be able to lead meaningful lives and make a real contribution to society when their development has been stunted and they have become addicted to these drugs?

SPIRIT: Withdrawal from either speed or Ritalin is very difficult because these drugs are highly addictive. Many people say it's equally hard to withdraw from other psychiatric drugs.

LEONARD: Ritalin and other stimulant drug are labeled by the FDA as Schedule II drugs, with high abuse potential and high risk of addiction. They are very, very dangerous; that's why you have to get a prescription for them.

SPIRIT: Even the counterculture warned people that speed kills. It can push people into profound psychological breakdowns. Everybody knows that, except seemingly the psychiatrists prescribing amphetamine-like drugs to children. LEONARD: These stimulant drugs like Ritalin are very much like cocaine in terms of their chemical structure. For a medical expert to have placed before him a child on cocaine and another child on Ritalin, he would be hard-pressed to distinguish between the two because their effects are so similar. David Cohen, a professor of social work at Florida International University, Miami, stated: "The fate of a psychotropic drug in society has much less to do with its known, observable effects than with how medical and legal authorities choose to treat it. Witness the radically dissimilar fates of two substances with virtually identical effects, methylphenidate (Ritalin) and cocaine. One is prescribed to pre-schoolers as safe and even life-saving; the other is shunned as demonic. Witness also the behind-the-scenes revival of amphetamines: shunned three decades ago as addictive and dangerous, today the most frequently prescribed stimulant to children and adults, though not a single new fact about their pharmacology has emerged." [from the journal, Ethical Human Sciences and Services, Fall-Winter, 2001.]

So what we're doing is creating a drug-oriented society, and one of the major reasons for that is that it's so damn profitable. The Declaration of Independence talks about our being endowed with certain inalienable rights, including life, liberty and the pursuit of happiness. But today it seems more accurate to say that the pursuit of profit has replaced the pursuit of

happiness. And if life and liberty have to be sacrificed for profit, then so much the worse for them.

SPIRIT: Society seems to becoming more intolerant of the natural spectrum of human emotions and behavior and imposing more rigid social controls and prescribing ever more drugs.

LEONARD: Phillipe Pinel, a French psychiatrist, is considered one of the fathers of modern psychiatry and the "liberator of the mentally ill." He removed the chains and straitjackets from patients and brought about major reforms at the time of the French Revolution. At that time, he believed that everyone who was mentally ill fell into one of four categories: mania, melancholia, dementia and idiocy. Today, in the DSM, the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association, there are upwards of 400 different categories of mental illness. It's increased a hundred-fold since Pinel's time!

What they're doing is greatly expanding the areas where psychiatrists can intervene, in order to justify the control of people who step out of line or who have fallen out of line, people who are no longer fitting in. It's kind of scary when you think about it; but the main purpose of all these diagnoses is to justify involuntary governmental intervention into the lives of people who haven't broken any laws - they're just disruptive.

We have the criminal justice system, which is sort of an oxymoron; and then the psychiatric system which locks up people and puts them into prison as a way of punishing and controlling them — and also as an object lesson to other people in the community. Because virtually everyone in our society knows that if they step too far out of line, it could happen to them as well. The could be locked up and they could be forcibly drugged or even given shock treatments. That has a very sobering, chilling effect on people's conduct and behavior; and it tends to make people go along with whatever is happening, rather than rock the boat.

SPIRIT: Society seems to be imposing a rigid, corporate model of human personality. Corporations need obedient employees who can follow orders and conform socially. There are more and more social controls to ensure people behave that way, beginning in the school system.

LEONARD: These drugs in the short term will have that kind of effect on people. What it does to their humanity is another thing altogether, because it makes it much more difficult to be spontaneous and creative. So, in the short term, it's producing the desired effect by making people more machine-like. But in the long run, it's creating a population of zombies and robots and psychiatric drug junkies. That's what we're becoming, and it's affecting millions and millions of people. What kind of society are we moving towards? Is this an improvement? Are we really solving our problems? Or are we avoiding the real personal and social issues that things like drugs and involuntary commitment mask over?

SPIRIT: It's been called the "medicalization of human suffering." Psychiatry pushes the medical model of mental illness. Emotional and psychological issues are medicalized and turned into supposed brain disease. So people are drugged instead of given therapy or emotional support.

LEONARD: Part of the problem is that psychiatrists see themselves as medical doctors. So if they think of themselves as doctors, they have to be treating disease.

SPIRIT: And giving people pills or performing surgery.

LEONARD: And wearing white coats. It makes them look like doctors because they're prescribing pills. This makes them feel good about themselves and it

also covers over the real role that psychiatrists play in our society, which is that they're agents of social control. The public goes along with it because they assume that if doctors are doing it, it's got to be okay. Doctors are one of the highest-prestige professions in Western society, just like the priests were during the Middle Ages. Each and every one of the Inquisitors was a priest first. And the public assumed that if the priests were doing it, it had to be good. People were being burned at the stake. This wasn't for punishment; this was a way of saving their souls. It was a small price to pay when you consider that otherwise they would have been damned to hell. And in our society, instead of being damned to hell, the worst thing that can happen to you is for you to become chronically insane. So from the psychiatrists' point of view, these drugs, as bad as the effects might be, are a lot better than suffering from incurable schizophrenia and mental disorder.

SPIRIT: Hand in hand with the medicalization of human suffering is what might be called the "chemicalization of therapy." Every year, we see less real therapy, and more drugs prescribed. What role do the large profits that pharmaceutical companies make play in this whole scene of multiplying diagnoses and drugging larger sectors of the population?

LEONARD: The drug companies have profited enormously from what you call the "chemicalization of therapy." With 12 million on antidepressant drugs, you can imagine the kinds of profits they make.

Eli Lilly is the manufacturer of Prozac. At one point, I think that particular drug was bringing in \$3 billion a year in revenues for Eli Lilly. Now that drug has been replaced by Zyprexa as a revenue-producer, one of the atypical antipsychotic drugs. The sales of that drug, based on the most recent quarterly reports, is upwards of one billion dollars; if you were to extend that out over the period of a year, the sales are about four billion dollars a year. That represents maybe a third of Eli Lilly's total revenue. So you can imagine the importance that drug plays in the bottom line of that corporation. Everyone's heard of Prozac, but relatively few people have heard of Zyprexa, but Zyprexa is a huge seller. It's only been sold for eight or nine years, but it dominates the market. It sells for anywhere from 10 to 30 times as much as the old-style neuroleptic drugs. That's another reason for their widespread use these days.

SPIRIT: Profits leveled off for the older neuroleptics like Thorazine and Haldol. Along comes Zyprexa and its negative side effects haven't had time to become evident yet, so they're able to sell it for so much more money as a wonder drug.

LEONARD: The revenues are tremendous. The reason why people are paying more for Zyprexa is that the drug is claimed to be as effective or more effective than the old-style neuroleptics, and with fewer side effects. The truth of the matter is that the side effects are very similar in some ways. There may be less tardive dyskinesia with the atypical antipsychotic drugs; but what you have with the atypicals and especially Zyprexa, is tremendous weight gain, and accompanying the weight gain is diabetes - a life-shortening disease. One study indicated that three percent of people taking the atypical antipsychotic drugs developed diabetes over a six-week period. But these drugs are not just being given for six weeks; they're given for months and years. You can imagine the long-term effects that has on the human body.

One of the worst problems is called neuroleptic malignant syndrome, which involves rigidity, fevers, seizures and confusion. It can result in sudden death. Robert Whitaker, in Mad In America, estimated that between 1960 and 1980, when people were not being informed about this risk of neuroleptic malignant syndrome, upwards of 100,000 human beings died as a result of this one symptom.

SPIRIT: Whitaker also reported that the huge profits give pharmaceutical companies power to influence the outcomes of drug tests, corrupt university research into drugs, and buy influence from the American Psychiatric Association.

LEONARD: The effect of all this money flooding into the coffers of pharmaceutical houses is very corrupting, not only to the shareholders and corporations, but to psychiatrists and the whole mental health system. Because with these tremendous profits, pharmaceutical companies are able to buy off the people who might otherwise challenge the use of these drugs.

They're able to influence the psychiatric profession directly because they advertise so heavily in psychiatric journals. They pay psychiatrists for the research they do in helping to get their drugs approved by the Food and Drug Administration. They sponsor psychiatric meetings. They give honorariums to psychiatrists who will tout their products. So the corrupting effect is tremendous. The psychiatrists and the pharmaceutical houses really work handin-glove with each other. I call it the psychiatric-pharmaceutical complex. It's a very, very powerful force in our society. It's a very dangerous force, and all the more so because it is not recognized as a threat to liberty.

SPIRIT: Most people are unaware of its power, scope and influence? LEONARD: Yes, people just are not aware of it as being any kind of problem. People just go along with it because psychiatry and the mental-health belief system is equivalent to a secular religion. People don't challenge these ideas. They assume that it's the truth. It's the premise that you start your argument from; you don't challenge these premises.

People believe in it; they hold onto it because it provides them with two of the things you really need in our society, when you have problems with people undergoing changes. There has to be hope for them that things will get better. The psychiatrists provide hope in terms of their coming up with new pseudomedical procedures that are supposedly going to benefit them and cure them of their so-called "diseases."

The second thing psychiatry provides is absolution. Whenever you have problems amongst people, there are bound to be other people related to them who feel guilty for their loved ones having these problems. Parents feel guilty about their children having problems. Psychiatrists come along and they say, "This is not your problem. You didn't cause it. These problems are caused by faulty genes or a chemical imbalance or a brain disorder of some sort." So this is their way of absolving them of responsibility. Right away, when parents hear something like that, they immediately feel good about themselves. So they go to the psychiatrist, and the psychiatrist is in the same role as the priest in absolving people of their guilt feelings. And it works. Those are two of the major reasons for the widespread popularity of the institution of psychiatry. It plays a very, very important role in society, in addition to being a social-control force.

SPIRIT: Psychiatry was a social-control force in years past by widespread incarceration of hundreds of thousands in state hospitals. With deinstitutionalization, it's not as easy to confine someone for abnormally long periods of time. Does that mean there is a lessening of psychiatry's power as a social-control mechanism?

LEONARD: There are still many forms of forced treatment. With involuntary outpatient treatment, which we talked about before, instead of your being in the mental hospital, the mental hospital is placed inside your head. You can be just as restricted on chemical restraints as if you were locked up on the psychiatric ward.

But I don't even like that term, "deinstitutionalization." It's really trans-institutionalization. People have been shifted from one institution to another kind of institution. For instance, the state hospitals used to be crowded with elderly people. Now those same individuals who would have gone to state hospitals 30 and 40 years ago end up in nursing homes. In nursing homes, 50 to 60 percent of the people who reside in them are on one or another kind of psychiatric drug.

Many people also have been transferred to board-and-care homes, some of which can serve as mini-state hospitals, in terms of the restrictions placed on the individual. In order to stay in some of these board-and-care homes, you have to be taking a psychiatric drug, just as if you were in a state hospital, you would be forced to take a psychiatric drug.

SPIRIT: Why do you think forced psychiatric treatment is unethical?

LEONARD: Well, forced treatment is fundamentally wrong as a denial of freedom without due process of law. It's against the spirit of the U.S. Constitution. And the French Declaration of the Rights of Man from 1789 - this was the document which helped initiate the French Revolution - states that liberty is the right to do whatever you want to do so long as you don't harm others. When you lock someone up on the basis of what he or she thinks, you're really instituting a kind of preventive detention. You're saying the person may be dangerous; but a person shouldn't be denied their freedom on suspicion of being dangerous. They should only be denied their freedom when they are found guilty of breaking the law and actually hurting other people. A basic principle of freedom is being violated by each and every kind of involuntary psychiatric lock-up.

That's why it's really a perversion of the justice system in our society that there are literally millions of people who are denied their freedom for long or short periods of time on the say of a psychiatrist who is theorizing that a certain person might be difficult or might cause some kind of trouble or might be dangerous. And while locked up, they can be forcibly given drugs; they can be denied their rights to communicate and to move about freely; they can have their mail opened without their consent.

There are many, many restrictions placed on people living in institutions, especially these days when so many people in psychiatric facilities are mixed in with people who are penal-code offenders. Many innocent people are put into mental hospitals on the basis of their supposedly being dangerous. And when psychiatrists talk about people as being dangerous, it's just because the person has socially unacceptable ideas or conduct. That's not a just basis for denying an individual his freedom or denying any of his rights.

SPIRIT: Yet California politicians keep trying to expand the reasons for which we can impose forced treatment on people.

LEONARD: Well, I think that's just an attempt to drive the homeless people into psychiatric treatment of one kind or another. It's a way of punishing them, and a way of controlling them, and a way of getting them out of sight, because the homeless are very problematic to conventional members of society who don't want to have them around. They're very annoying to them. It's not good for business and not good for profits. So the more people you can put into this psychiatric compartment, the easier it is to maintain law and order in the community, supposedly; and the easier it is to keep the people who are powerful in our society pleased with the way the system is operating.

SPIRIT: Many efforts to expand forced psychiatric treatment are aimed directly at homeless people. Everything homeless people do is on public display, and is criminalized. Someone grappling with an emotional issue in the privacy of

their home is not as likely to be subjected to forced psychiatric treatment as a homeless person going through emotional turmoil on the streets.

LEONARD: Yes, because when you're on the street, you're very, very visible. And people don't like you by virtue of the fact that you are obviously a homeless person. There's a tremendous prejudice against homeless people, just like there's a tremendous prejudice against people who are labeled mentally ill. You combine those two prejudices and you have a person who is doubly stigmatized, and it's a very, very difficult label to bear.

SPIRIT: Since insulin comas were used to destroy your spiritual and political insights, it seems important to take a closer look at what you were studying in those days, and recapture the very ideas that psychiatry tried to eradicate. What impact did Gandhi's autobiography have on you?

LEONARD: It just opened me up to a lot of things that I'd never given any thought to - spirituality and nonviolence and civil disobedience. Prior to that time, I think of my life as having been two-dimensional; with the reading of Gandhi, it became three-dimensional, and with further reading, in technicolor as well.

SPIRIT: You hadn't had strong spiritual leanings before?

LEONARD: None whatsoever. No interest at all in that area. Gandhi's book opened me up to another area of life which was not even on my radar screen. With Gandhi, the emphasis was on active nonviolent resistance to social injustice. I glommed on to that one, because back in 1960 I had just never heard of that idea. He was able to use this idea in a very practical way, leading ultimately to the independence movement and the liberation of India from the British Empire.

Gandhi said, "Exploitation is the essence of violence." From this it follows that not exploiting others is the essence of nonviolence. This principle of not taking advantage of others is central to my code of conduct, as it was to Gandhi's.

Gandhi was a vegetarian not only for health reasons, but for moral reasons. This is tied in with the Indian idea of ahimsa which means not causing harm, or harmlessness. He realized that the treatment of animals for food production was a very cruel method, and that for that reason alone we should be kind to animals as well as to human beings.

SPIRIT: These ideas were not only new to you. Back in 1960 there weren't many people talking about pacifism, nonviolent social change, and vegetarianism. LEONARD: Not that I can remember (laughing). Not at all. Another interesting thing about Gandhi, and this had a big influence on the way I was going to begin conducting my life, is that he spoke about his "experiments with truth." That was something that I adopted for myself almost immediately, and I realized I was going to have to examine my ideas and do a lot of experimenting to find out what was really going to be valid and workable in my own life, and that involved a lot of trying out of new ideas. So then I really started to get interested in the books that he had spoken of in his autobiography.

SPIRIT: One of Gandhi's strongest influences was Henry David Thoreau.

LEONARD: And the Bhagavad Gita (the Hindu scriptures), as well. So I read the Bhagavad Gita and I read Thoreau's essay on civil disobedience. It was from Thoreau that Gandhi got the ideas of nonviolence and non-cooperation. One of Thoreau's important principles was that an individual who was determined to do the right thing should never associate with a government or any other institution which was unjust. He believed that he shouldn't associate with the American government at that time, in the late 1840s, because the government supported the institution of slavery; it was a

slaveholder's government. Thoreau said that you couldn't associate with such a government without disgrace. He also thought the Mexican-American War was an unjust war and in protest against the war, he refused to pay his personal tax, and he was put in jail for that.

SPIRIT: It's interesting that it was through Gandhi, a devout Hindu, that you became interested in the Jewish and Christian scriptures. Gandhi revered the teachings of Jesus.

LEONARD: Gandhi was very inspired by the New Testament and the life of Jesus. I felt it would be wiser on my part to read the Old Testament before I got into the New Testament because the New Testament was based on the Old Testament, with some very important changes. So I read the Old Testament first and I was very impressed with the life and teachings of Moses and the prophets, especially Isaiah, Jeremiah, Ezekiel and Amos.

SPIRIT: How did the message of the prophets shape your thinking?

LEONARD: Their general message was that if the goal and purpose of life is to become one with God, the way to do that is through the way we live our lives. If we live our lives in a way that is oppressive to other people, if we exploit others, if we rob them and take advantage of them, then that is a transgression. It is that which prevents us from getting close to the higher spiritual power. It is that primary teaching which seemed to be emphasized over and over again in the teachings of the prophets. They didn't care a whole lot about the ritualistic aspects of the religion. The prophets got down to the major issues, the essentials, which is leading a good life, a holy life, one that is based not only on devotion, but on deeds as well.

SPIRIT: Especially on doing justice to the poor. That was of central importance in all of the four prophets you mentioned.

LEONARD: Social justice, and not merely avoiding evil, but doing good and helping others and being righteous. Pursuing justice. They didn't just say "allow justice to happen." They said, "justice, justice, thou shalt pursue." That's an extremely important principle. Where there is injustice, religion is a farce. You can have all the church-going and synagogue-going you could want, but unless people live a righteous life the rest of the week, attendance at religious services is virtually meaningless. It's just a waste of time. You have to combine devotion and deeds together.

SPIRIT: The Sermon on the Mount was a major influence on Gandhi's dedication to nonviolence.

LEONARD: Well, certainly. The teachings about being a peacemaker - there's the essence of nonviolence. We have a responsibility to make peace wherever we can to bring about a just society. We can't have a just society in a warlike situation, in a military situation. Without peace, there can be no justice; and without justice, there can be no peace.

Jesus' sayings about being merciful and that those who are merciful will receive mercy — that was a step up from the Old Testament. The emphasis in the New Testament is somewhat different from what you find in the Old Testament. It's a question of emphasis. And here the emphasis is on loving one's neighbor, and not only one's neighbor as you have in the Old Testament, but loving one's enemy. Now that really was a new ideal; something that hadn't been heard before. Jesus was a fantastic human being, and many people feel that his teachings have been betrayed in terms of the failure of people to practice his ideas.

SPIRIT: You said that another book that influenced you greatly was Joseph Campbell's Hero with a Thousand Faces.

LEONARD: The theme of his book was what Campbell called the "monomyth." He brought together the teachings from a host of myths from various cultures across time and geography, which he said represented the development of the individual and of the entire species. He saw this monomyth as a three-step process: separation, initiation, and return. The individual decides it's time to pull back from everyday life and reevaluate his or her life. To do that, you really need to take some time out. You can't be fully occupied in the world. You're trying to transcend the world, at least for a time. That period of time is what I call the transition or transformation period.

SPIRIT: That's what you went through in withdrawing within yourself to explore Gandhi, Thoreau and Jung.

LEONARD: It's during that period when the individual confronts himself at the deepest level. He begins to pay attention to the inner processes and to his dreams; he begins to rethink his values and the important events of his life. He tries to get a sense of where his life is headed. All along the way, he comes in closer contact with the deepest forces within, forces of a spiritual nature. Some people would think of it as a way of being in contact with God.

At some point during this period of separation, there is experienced a kind of initiation, a sense that you've achieved a certain level of growth and awareness, and it's time to return to the workaday world. You have learned certain things about yourself and about the spiritual realm; and you want to share that with other people to assist them in their growth.

The powers that be will resist this. I think Campbell used the term "Holdfast" to epitomize the forces that are waiting to prevent your bringing back to others your experience, because that would represent a threat to the status quo. "Holdfast" wants the status quo to remain in place because "Holdfasts" - whether in the form of parents or government figures or CEOs or religious leaders - don't want to have any dramatic changes. They're getting along very, very well. And they perceive you as a threat to their interests, and they'll do what they can to stop you.

SPIRIT: In your case, "Holdfast" incarcerated you and used insulin coma to literally erase what you had learned.

LEONARD: This is where I think psychiatry plays the role of "Holdfast" in our society. Psychiatry wants to prevent this inward search from happening. They deny any value at all to myths. The very notion of withdrawal – they even have, as a major symptom of schizophrenia, the word "withdrawal." When you pull back from society for a while, and you don't associate with other people all that much, they call that withdrawal, and it's a major symptom of schizophrenia.

SPIRIT: Mainstream psychiatry also tends to be very intolerant of dreams, visions, fantasies and mystical states.

LEONARD: Well, they regard all of that as delusional, as an escape from reality. They themselves haven't experienced anything like that; and they don't believe that anyone else can experience something like that in any meaningful way. To them, what is a spiritual experience can be defined as a psychotic episode.

What they regard as schizophrenia, others with a spiritual turn of mind would think of as mysticism. Because they're in denial about God and spirituality. For psychiatrists, being scientifically oriented, being geared to think only in terms of a reality that can only be placed under a microscope, anything beyond that which is non-material has no reality, so they deny its significance altogether.

SPIRIT: The psychiatrist Carl Jung was a major exception to that rule. He saw the great value of spirituality, mysticism, myth and religious symbols. He taught that no one could achieve psychological wholeness without a spiritual life.

LEONARD: He certainly was an exception - and look at how unpopular he is in mainstream psychiatry because of his ideas. As a matter of fact, he came up with ideas that psychiatrists would be horrified by. For example, he said, "We have forgotten the age-old fact that God speaks chiefly through dreams and visions."

SPIRIT: That was the cornerstone of his vision of psychology. He saw the deep value of religious symbols and dreams and even of hallucinations, so-called. **LEONARD:** Yes! Jung was a real problem, as far as psychiatrists were concerned. What psychiatrists call an hallucination, a religious person would speak of as a vision.

SPIRIT: So Jung was another of your prime influences during this period? LEONARD: Oh, definitely. Although I found some valuable teachings in Freud, nothing compared to the wisdom of Carl Jung. Even to this day, I still read Carl Jung's writings and am fascinated by them. And often I think I have a real understanding of Jung, but then I get into one of his books and realize that there are still things that I have not yet understood.

SPIRIT: There is depth beyond depth in Jung, an immense mountain of insight. Frank: There is so much depth. Especially his memoir, Memories, Dreams and Reflections. That's just a marvelous book in explaining how he grew, how he had this relationship with Freud and then they split apart. And how he was cut off from the world and went through a period of withdrawal after his split with Freud. During that time he had to come up with new ideas to sustain him. It was during that time, particularly, that he became very interested in mythology, and in the hero's journey. He was a living example of the hero's journey.

SPIRIT: Your own life journey is another example. You withdrew from society to reflect on deeper values, gained new insight, and came back to reshape your life. The powers that be put you through the nightmare of confinement. Yet you survived and went on to fight for the rights of others.

LEONARD: I saw it that way, in terms of my withdrawal. I often wondered what would have been the situation if I hadn't been locked up and assaulted with shock treatment, and how much further would I have progressed on that path if I had been allowed to follow it to its conclusion. And the return was forced upon me. I didn't willfully say, "Well, now I'm returning." The psychiatric police knocked on my door and I was locked up. I didn't go happily into the psychiatric institution. I was taken there by force. It was the power of the state that prevented me from continuing what I was doing, when I had not violated any law. This was a kind of preventive detention based on a psychiatrist's theory.

SPIRIT: That's why you liken your ordeal to brainwashing, because the shock treatments erased years of study.

LEONARD: We talk about brainwashing as carried out by the Soviet government or the Chinese government during the Korean War; but we neglect to see the similarity between that style of brainwashing, and the brainwashing that had been carried out by psychiatrists long before that period. After all, shock treatment was introduced in the U.S. in the 1930s.

SPIRIT: The Soviet Union sent political dissidents to psychiatric wards and used neuroleptic drugs to silence dissent.

LEONARD: They certainly used neuroleptic drugs on dissidents, and there were reports published widely in some of the better newspapers and journals about the horrific effects of these neuroleptic drugs on Soviet political dissidents.

It was clear that these drugs had a very dehumanizing effect and that they were experienced as torture by these prisoners; whereas, the same drugs were being administered to Americans in psychiatric institutions forcibly, against their will. Those cases were treated as though the individuals were actually benefiting from the drugs. The same psychiatric drugs that were considered to be harmful and torturous in the Soviet Union were considered to be beneficial and humane in this country.

The truth of the matter is that the effects in both countries were precisely the same: they have a dehumanizing effect on the individual. They lessen your ability to think, feel and act - in other words, your ability to be human. It's a form of psychiatric drug pacification.

SPIRIT: How could the U.S. media deny the torturous effects of these drugs when they were reporting on those very effects experienced by Soviet dissidents?

LEONARD: We have what are called Holocaust deniers - people who claim that the Holocaust, the destruction of the Jewish people in Europe during World War II, never took place, or it happened on a much smaller scale than history reported. They're called Holocaust deniers. Today, we have psychiatricatrocity deniers - people who are unwilling to recognize the harm caused by involuntary commitment and forced treatment, whether with drugs, electroshock or insulin shock. They're fooling themselves in just the same way the Holocaust deniers are. Maiming the brains of millions of Americans over the last 30 years with electroshock, lobotomy, and antipsychotic drugs is an atrocity, and forcing these drugs on children is an atrocity.