

*Madness, Citizenship and Social Justice:
A Human Rights Conference*

Simon Fraser University

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Plenary Lecture

**Prospects for a Nonviolent Revolution
in the Mental Health System
During a Time of
Psychiatric Globalization**

or

**How We So-Called Lunatics
May Help Save Your Mad Planet!**

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Are any of you normal?

Do not panic! There is a rumor of an outbreak of normality among attendees of this conference. I need to do a normality screening with my rubber chicken. This is like airport security screening.

You are doing great.

This normality screening was devised by a clown troupe in Italy led by my friend Patch Adams, who is a clown and physician. I have conducted more than 1,000 normality screenings, including inside a conference of hundreds of psychiatrists.

Oops, what is this? My rubber nose is squeaking! Please answer a few brief screening questions, everyone, at the same time:

"Are you alive?"

"Why does asparagus play soccer on the moon?"

"Can you make a loud animal noise?" Please do so now. Really. Louder.

However you replied, even if you did not respond, you are officially free of normality. Congratulations. All rumors of normality turn out to be false.

The organizers of this conference are free of normality. I thank everyone at Simon Fraser University Institute for the Humanities and the Department of Humanities. Ever since I communicated in 2005 with Professor Robert Menzies about his dream of this event on Madness and Citizenship, I have appreciated the abnormally brilliant way in which he effectively builds bridges between academia and activism, thank you.

I am free of normality, too. Back in the 1970's I was a college student from a working class family on the south side of Chicago. All of my grandparents were immigrants from Lithuania. Both of my grandfathers were coal miners. I attended

Harvard on scholarships. I had severe mental and emotional problems. I thought the CIA was making my teeth grow. I thought the voice of God was on the radio. I thought technology, including the TV, was a living force on Earth that talked to me. I saw a spaceship hovering in my bedroom that looked like Lithuanian straw folk art.

In my sophomore, junior and senior years I was locked up in psychiatric institutions five times. Some psychiatrists labeled me *schizophrenic*. Others felt I was *manic depressive*, now known as *bipolar*. In the psychiatric label bible -- the *Diagnostic and Statistical Manual* -- these are types of *psychosis*.

I was locked up in Harvard's psychiatric institution, McLean. Mental health workers would hold me down on a bare mattress in an empty cell. They forcibly injected a powerful psychiatric drug into my butt. I spent days alone in the cell, and I remember pounding my fist at the impenetrable steel mesh on the windows. I vowed, "When I get out of here I am going to help change this mental health system." That cell turned into my recruitment room for my career as a human rights activist in mental health.

In my senior year a Harvard volunteer agency referred me to a grassroots group near campus. The group had sprung from the social change turmoil of the early 1970's. They had a radical name: *Mental Patients Liberation Front*. I managed to graduate from Harvard in 1977, *cum laude psychotic*. Since then I have had the privilege of working with thousands of fascinating human beings all over the world who have been given a psychiatric label, or who are allies. I like to say I have had a front seat watching the human spirit come back over and over and over again.

We are all sometimes known as the *mad movement*. There's little agreement about the best language for us. *Psychiatric survivors* for me means we are individuals

who experienced human rights violations in the mental health system and lived to tell about it. *Mental health consumers* for me means using mental health care in an empowered way, like choosy customers. There are no perfect words. But I have a request. Please do not call me *mentally ill*. People can call themselves that, but calling me by that phrase lends too much power to an already-powerful medical model.

Not all of us in the mad movement have a "crazy label." Among us are dissident mental health workers, curious researchers, courageous advocates, compassionate family and concerned members of the general public. We are all citizens. When we unite I glimpse democracy beginning to shape the future of the mental health system.

It is time to hear about mental and emotional well being from the perspective of those labeled crazy. We folks on the sharp end of the needle have a voice. We have some tips that could help save your mind, your life and even your planet.

Today a few experts might mistakenly call me *normal*. I have not used the psychiatric system for more than thirty years. I'm married to a wonderful, loving woman, Debra. We are tax-paying homeowners with a nice big garden. For these past two decades, I've directed a respected nonprofit human rights group in this field, MindFreedom International, that unites 100 sponsor and affiliate groups.

I suspect, though, that many of my beliefs would still be labeled by some mental health professionals as *delusional*. Or *nuts*. Here are a few.

- **I believe** tens of thousands of us so-called mad citizens and allies are making history by transforming how we as a society approach the whole subject of the mind.

- **I believe** the psychiatric industry would like to screen everyone for mental and emotional problems, and place millions of new customers onto their powerful drugs.

Please understand that I am pro-choice about your personal health care decisions. If you know the risks, if you have access to a range of alternatives, if you willingly choose prescribed pharmaceuticals, that is your own business and nobody else's. I have been there. I know what it's like to beg for a psychiatric drug. I also know what it's like to quit psychiatric drugs, and care must be taken to do this well.

- **I believe** many of these psychiatric drugs can be addictive, brain damaging and deadly, but much of this information is covered up from patients and their families.

- **I believe** many psychiatric drug corporations acts like bullies by lying and choking out non-drug, humane options for mental health care.

- **I believe** there is no scientific evidence for claims by some in the psychiatric industry that a "chemical imbalance" is the basis for mental disorders.

- **I believe** much of the mental health industry is traumatizing, damaging and even killing millions of mental health clients who are, by some measures, among the most powerless in our society.

- **I believe** these human rights violations amounts to a hurricane of unscientific psychiatric labels... psychiatric drugging without informed consent or non-drug options... torture in institutions using restraints, aversive therapy, electroshock... isolation in the community with segregation, impoverishment and discrimination... a criminal lack of options for good housing, for decent jobs, and for humane alternatives to the traditional mental health system.

- **I believe** developing countries ought to be warned that this psychiatric hurricane is invading poor nations, and that this *globalization* of corporate psychiatry's human rights violations could impact hundreds of millions of people.

- **I believe** those of us who society perceives as having gone over the edge of sanity, and who have since returned, have something valuable to offer to citizens who are commonly considered *normal*.

- **I believe** our society is in extreme, global catastrophe such as the climate crisis, yet humanity seems transfixed in a hypnotic trance of passive conformity.

- **I believe** we so-called mad citizens may help humanity wake up from this so-called normality and reach some of its highest goals of social and ecological justice.

- **I believe** this is Mad Pride!

For centuries there has been a war between citizens called *normal* and citizens called *mad*. It is time to say to both, "Let's talk."

When people are unfairly divided by skin color, racism is traumatizing. When people are unfairly treated because of gender, sexism causes suffering. But humans often define ourselves as *the thinking or rational animal*. The minority of us perceived as irrational is considered inferior in our most basic essence, our chemistry, our genes. There is a name for this prejudice. I do not hear this word much. It is *sanism*. Sanism has a long history.

That story of the quivering line between normal and mad goes back millennia. Psychiatric institutions have existed only for centuries. It is revealing that it was mainly in the fairly-recent 1800's that the huge psychiatric institutions were first built. Europeans wanted to leave behind their centuries of religious infighting. For better or worse, the Western world was eager to urbanize, colonize and industrialize.

What to do about us eccentric citizens who do not fit in the Great Modernization? Country folk who spout bizarre beliefs? Joan of Arcs when they have no army?

Witches? Head injured? Fools? Developmentally disabled? Shamans? In the 1800's we strange others on the margins were seen as impediments in the transition to a rational citizen.

The extreme of this oppressive approach can be seen in how we citizens with psychiatric labels were eventually treated in Europe. In the 1930's, Nazi Germany targeted children diagnosed with mental disabilities as the very first group for mass murder. Psychiatrists helped develop the theory, methods and even the paperwork used in Nazi genocide. Never forget. Never again.

Unjust deaths continue to this day in the mental health system. I've seen too many autopsy reports. A major 2006 report by the USA National Association of State Mental Health Program Directors shows that the life spans of those in the public mental health system are 25 years shorter than the average American. Some researchers suspect psychiatric drugs play direct and indirect roles in this tragedy.

The ferment of the 1960's civil rights, women's, anti-war movement and others encouraged citizen activism. This churning change made community organizing seem to be a natural and obvious choice, even for those of us with psychiatric labels.

A spirit of liberation was expressed by Rev. Martin Luther King, Jr. Many times in his speeches, sermons and essays, MLK sounded a theme that seemed to anticipate our movement. He said, "psychologists today have a favorite word and that word is 'maladjusted.' And I say I am proud to be maladjusted. We ought to be maladjusted... Human salvation lies in the hands of the creatively maladjusted." In a speech on the First of September 1967, in front of the American Psychological Association, MLK said, "Thus, it may well be that our world is in dire need of a new organization, The

International Association for the Advancement of Creative Maladjustment." He asked us for this IAACM many times.

Only a few years after MLK's speech the first psychiatric survivor groups in this era emerged, such as We Shall Overcome in Oslo, Norway and the tiny Insane Liberation Front in Portland, Oregon and Project Release in NYC. One organizer was Howie the Harp who composed a ballad for the new movement called *Crazy and Proud*.

There were other movement heroes. Judi Chamberlin wrote a book called *On Our Own*, comparing her experiences in a state psychiatric institution with a more empowering alternative, since closed, here in British Columbia. My friend Ted Chabasinski experienced forced electroshock at the age of six in New York State. Ted spent his entire youth in a psychiatric institution. Leonard Roy Frank was an early dropout from the business world who turned to mysticism; he was given multiple forced electroshocks. I was able to attend several of the annual gatherings back then called the *International Conference for Human Rights and Against Psychiatric Oppression*. I wrote for *Madness Network News*. The movement spread in Europe, Canada, New Zealand and Australia, without e-mail.

Allied mental health professionals played a role. At about the time I was in a psychiatric cell, psychiatrist Loren Mosher was head of the USA National Institute of Mental Health's schizophrenia division. Loren created a model known as Soteria House where people could find mental and emotional support without the usual bullying and over-drugging so many experienced in the mental health system. In 1998 Loren famously resigned from the American Psychiatric Association, denouncing it as the *American Psychopharmaceutical Association*. Loren died in 2004 and is missed.

In the 1980's government and mental health system funding helped start a few drop-in centers, support groups and advocacy centers. Given how poor our constituency is, funding from the mental health system seemed necessary. But, on the other hand, it also seemed this money threatened to co-opt or "cool out" the fire of activism and protest.

This is not a criticism of advocacy groups that accept funding from the mental health system and the government. System funding is crucial to accomplish the goals of a social change movement composed mainly of low-income citizens. However, those groups that receive government and mental health funds ought to pause and take care to acknowledge, appreciate and nurture an independent mad movement. After all, what would the environmental movement be if all of its activity were funded by the government and the oil industry, if there was no Greenpeace?

Today our movement encompasses thousands of citizens, including you, and hundreds of diverse groups working for a voice for people in the mental health system. There are no where near enough of us, but psychiatric survivors and mental health consumers are running housing programs, peer support groups and advocacy systems. There are non-drug alternative clinics, networks of mental health professionals and authors criticizing the psychiatric system. There are newsletters, conferences, web sites and e-mail lists. There are universities that have academics working with us, including on research guided by psychiatric survivors.

I'm asked what changes I've seen in 32 years of mad movement work. There is some change for the better. When I meet with local mental health officials in our small

city of Eugene, Oregon, USA, or with leaders of the World Psychiatric Association, as I will again this September 2008, I witness some positive effects of our movement.

I hear new words from mental health leaders such as *empowerment, peer support, advocacy, trauma, alternatives, recovery* and *self-determination*. Today, in a policy meeting about us, it is not unusual to see us, such as an individual with a psychiatric diagnosis, at the table.

We've had a global impact. For years, MindFreedom and World Network of Users and Survivors of Psychiatry have had teams of psychiatric survivors in meetings inside the United Nations headquarters in New York City. MindFreedom is the only group of its kind accredited by the United Nations as a Non Governmental Organization. We have Consultative Roster Status, which gives our members the ability to attend UN meetings. Led by Celia Brown, an amazing African American psychiatric survivor from New York City, our MindFreedom team of psychiatric survivors participated in UN meetings resulting in an international treaty on disability rights -- called a convention -- that became legally binding internationally last month.

The UN's health agency is the World Health Organization (WHO) based in Geneva, Switzerland. Benedetto Saraceno, MD, from Italy, is WHO's mental health director. We met with him and he agreed to declare a "global emergency" of human rights violations in the mental health system. Dr. Saraceno said, "I think that, indeed, there is a global emergency for the human rights of people suffering from mental health problems. I insist on the word 'global' as people tend to believe that these kinds of violations always occur somewhere else when, in fact, they occur everywhere."

But we want more than buzz words, tokenism and a few model programs. Mild reform is a trap. We want a nonviolent revolution. Just like so many other social change movements, we must turn to activism and protest, in our own mad ways!

I enjoy hearing about some of the creative protests and cultural events that educate the public that are sprouting up all over the world. For the past decade a Mad Pride movement has grown, similar to Gay Pride. Mad Pride celebrates all of humanity's uniqueness and freedom with events in about a dozen countries.

For example, a Mad Pride Bed Push has been held for several years in England, and that has spread to the USA and Canada. In a Bed Push, activists dressed as mental patients in hospital gowns push a hospital bed on wheels that has a mannequin strapped in four-point restraints. The mad activists push the bed through the streets to escape the psychiatric system educating thousands with humor.

One of the largest Mad Pride events is by MindFreedom Ghana Africa. Bonkersfest in England attracts thousands. Mad Pride Ireland just had a 5,000 person event.

What has changed during these decades? The warnings from our social change movement have come true. When I started this work the monster of psychiatric oppression mainly terrorized the back wards of psychiatric institutions. Now, as we warned, that monster has crawled over the institutional walls. Today it is found in our communities, in our neighborhoods, our homes, our schools.

Our home ought to be our castle. But throughout the world we find the atrocity of thousands of citizens court ordered to take powerful psychiatric drugs against their will

while living in their own homes out in the community. There are even mental health delivery services that go to your front door every day to assure you take your drugs.

The psychiatric system is increasingly prescribing psychiatric drugs for children, and marketing in our schools. There are mental health screening programs in many USA schools. It may seem like a good idea to find a troubled youth. But TeenScreen and similar programs march thousands of young citizens to the front door of the mental health system without advocacy, information or alternatives. Behind that door young citizens often end up in the embrace of the psychiatric industry, putting more young citizens at risk of a lifetime of psychiatric drugs and discrimination. The USA government announced it intends to make such screenings "common practice."

When I entered the mental health system in the 1970's as a teen, I was almost broken by the experience. The forced drug injections in solitary confinement wore me down. The most powerful blow, though, was when a psychiatrist sat down with me, looked me in the eyes and claimed I had a chemical imbalance, and I must take psychiatric drugs the rest of my life. That psychiatrist was wrong.

Thirty years ago our movement mainly focused on the human rights violations of force and fraud in the mental health system. What has changed is that today the mental health system harms the human rights of most citizens through a third "f," a special brand of fear, a fear that there is no alternative to the conventional mental health system. Psychiatry has largely choked out choice in mental health. Families with a member in crisis deserve more than just a bag of pill bottles and a court order.

There ought to be a full range of voluntary, humane, safe options and alternatives offered to all who choose to use them, including mutual support, jobs,

housing, peer run programs, nutrition, advocacy, quality counseling and other wholistic approaches. A range of choices to achieve mental well-being is not just a good idea. It is guaranteed by the United Nations Universal Declaration of Human Rights.

But why does a young person who has major mental and emotional problems have to live in Finland to find government-supported non-drug alternatives?

The usual excuse is two words: "more money." But the problem is deeper than "more money." Poor nations have something to teach the richer nations. In two major studies, WHO researchers visited citizens who had been diagnosed with serious mental health problems in a selection of both rich and poor countries. WHO found that those in less developed nations were far more likely to fully recover and reintegrate back into society. In other words, nations with less money, less psychiatrists and less psychiatric drugs appear to have a far better chance. More money is not enough.

Thirty years ago, movement activists in richer nations predicted that the labeling and overdrugging we saw in the back wards would some day target the general public. More money was spent. Our prediction came true.

We have another prediction for you today. Please prevent this from coming true. The crisis of globalization of psychiatric human rights violations is going global. I had the opportunity to give a workshop in Istanbul, Turkey, to a room full of psychiatric survivors in a psychiatric community center. I was moved as I heard several psychiatric survivors tell a similar story one after another. As documented by Mental Disability Rights International, a number of these Turkish psychiatric survivors had experienced involuntary electroshock in horrible psychiatric institutions. Against their will and without anesthesia, they were held down fully conscious as electricity pulsed through their

brains and they had a convulsion. The procedure was repeated over and over for weeks. Although anesthesia would not have protected their brains from the blast of electricity, this "direct shock" meant they were held down with their eyes wide open and totally aware. This electrical waterboarding is torture.

The developing world has been told they must be like the West. They must be modern and scientific. In mental health that means the medical model. Drugs are expensive. But electricity is everywhere. So if a poor developing country wants to be like the richer nation, that can mean more electroshock. That is what we are seeing.

This modern approach to mental health is not as much a medical model as it is a *domination model* with a mantra of *label, label, label, drug, drug, drug, shock, shock, shock*. This domination model is globalizing rapidly. The World Bank and World Health Organization and other large agencies are promoting multi-billion dollar campaigns to bring western mental health to millions of citizens in poor developing countries. This newest Western export is missing something. This export package has labels, drugs and shock. But hardly ever does the package include advocates, alternatives and activists that exist in the West.

The globalization of psychiatry is a chemical crusade by pharmaceutical fundamentalism: *pharmentalism*. The WHO estimates that 450 million people in the world have a mental disability, and 400 million are not in "treatment." So our global Mad Nation has a population far larger than the U.S.A. Unchecked and unchallenged, world domination by this corporate medical model could mean that over the next few decades hundreds of millions of more people in our world -- so stressed by war, economic

imbalance and ecological crisis -- could be put on psychiatric drugs or electroshocked without adequate advocacy, information and alternatives.

Today, a child on Ritalin or Prozac is typically North American or European. The number of USA children prescribed some psychiatric drugs tripled from the 1980's to the 1990's. If the psychiatric drug industry has its way, the face of a child on psychiatric drugs will increasingly be from Asia, from Africa and from South America.

I am inspired by leaders in poor countries. One of the main organizations in our mad movement is in Pune, India, led by my friend Bhargavi Davar, with a staff of more than a dozen. They educate, they protest, they help more than 1,000 clients a year, their leadership for a global nonviolent revolution is essential.

What has changed? When our movement began we warned that psychiatric drugs could cause brain damage. Science has proven us right. I'll touch on just one particular family of drugs that is typically given during forced psychiatric procedures, the type given to me: *neuroleptics*, also known as *antipsychotics*. They include dozens of drugs from Thorazine or Largactil, Haldol, Mellaril and Navane -- all of which I was given -- to newer neuroleptics such as Clozapine, Risperdal, Zyprexa, Seroquel and Abilify.

Neuroleptics are now given to children as young as three, to seniors in nursing homes. In the last few years, mainstream science has used modern research, MRI scans, CT scans, animal studies and autopsies to link high-dose long-term neuroleptics to structural brain change. Let me emphasize one kind. Many studies indicate that long-term, high-dosage neuroleptics, can actually shrink the front of the brain -- our lobes linked to higher level functions. The shrinkage is so great it is visible in brain scans.

Just like with the climate crisis, some corporate defenders sow doubt about this brain crisis. But studies cut through those smokescreens. Some defenders say the shrinkage is from underlying "mental illness." But many of these brain changes have also been produced in non-human animal studies. Some defenders even wonder if brain shrinkage may be good for us. But such changes are often linked to worse mental and emotional problems, and can make it difficult to quit the neuroleptics.

I read about neuroleptic brain changes in the medical literature. But I do not hear about neuroleptic brain damage in the media, mental health conferences, legislative assemblies or court rooms. No informed consent sheets I have seen warn anyone. Patients and their families may be the last to know.

I know neuroleptics are also associated with other physical problems, such as diabetes. Eli Lilly went to court to try to stop me and seven others from leaking documents about how their psychiatric drug Zyprexa causes diabetes. Eli Lilly lost, the cat is out of the bag. But damage to the higher-level brain system is what places neuroleptics in the same ballpark as psychosurgery, as a lobotomy.

Who will hear our alert, that the mental health system is causing an epidemic of chemical lobotomy to millions of citizens, and is threatening to lobotomize millions more in poor countries? We can easily be pigeon-holed as simply anti-drug. But we are not in a civil war between choosing to take or not take a prescribed drug. There are MindFreedom members who willingly take prescribed psychiatric drugs. But we are united in overthrowing domination by any one model in the mental health system.

If you personally believe spirituality helps your well being, I personally agree. But if the government and mental health system pushed one form of prayer as the only

answer for mental problems, if it suppressed non-prayer options, if it claimed science had proven its prayer was the only true way to healing, we would ask, "By what right? By what special evidence do you justify the bullying by this one model?" Asking these questions would not make us anti-spirituality. Asking makes us pro-freedom.

There ought to be an enormous united initiative throughout the health, human rights and disability fields to provide support and technical assistance so that the voices of psychiatric survivors can be heard, especially in poor and developing countries. We also need to hear from advocates, attorneys, dissident mental health workers, and concerned family members who question the mental health system.

Just a few decades ago the average citizen was intimidated by topics such as energy, urban sprawl, international trade, and gender preference. The public back then was far more likely than now to defer to "experts" on these topics and to stay silent. We have a long way to go. But today it is more common for a citizen to explore these topics. We are in the beginning stages of citizens becoming confident enough to address mental and emotional well being.

Our mad movement began by connecting to other movements. We must do so again. One of the most rewarding connections is the environmental movement. Some of you may have seen the film *An Inconvenient Truth* by Al Gore, about climate crisis. This is my favorite mental health movie. Why? The jury is back. The numbers are crunched. Al Gore has proof that what is called *normality* is shredding the very fabric of the whole planet's ecology.

To you experts who defend psychiatric abuse, your time is running out. You have had an intimidating weapon that is out of ammunition. You argued our mind is so

complex only you have any insight into its workings. You reduced our brain to a machine and claimed you were the only mechanics in town.

But neuroscientists on the cutting edge of brain research admit they know very little about the mind. Based on the little they suspect, they hypothesize that the mind cannot be understood as a machine. The mind appears to emerge from dynamic feedback loops on a complex edge between chaos and order far from equilibrium.

Today there are revolutions throughout science. Complex emergence displaces *mechanistic reductionism*. Quantum theory posits we cannot absolutely “grip” reality. Physicists plumbing the depths of subatomic particles say that what we are call “reality” is weirder than they ever imagined. Mathematicians studying what they call “string theory” hypothesize hidden dimensions.

What has been called *madness* is the core of the human experience. If any one of us is mad, all of us are in the same mad boat. We all need each other, every single one of us. Eliminating the Amazon rainforest may destroy a rare plant that is tomorrow's cancer cure. Eliminating all extreme mental states may destroy tomorrow's prophet.

Citizens cannot dominate complex systems. But one can have influence in what is known as the butterfly effect. The late scientist Edward Lorenz asked, "Does the flap of a butterfly's wings in Brazil set off a tornado in Texas?" Simple small actions have long-term unpredictable immense effects.

We can teach citizens about the power of mutual support in unmuting their mute button and reviving morale. We can teach citizens that all strange thoughts are not necessarily good, but all change for the good has begun with one strange thought such as, "Let us outlaw slavery." In his best seller *Collapse: How Societies Choose to Fail or*

Succeed, physician Jared Diamond finds that some cultures self-destruct, while others learn to think well enough as a group to survive.

When I speak about the movement for nonviolent revolution, I am not speaking only about mental health. I am speaking about a global nonviolent revolution for social and ecological justice for all. Call me crazy, but I believe that the Mad Movement plays a role in a great global nonviolent revolution that must emerge. I conclude:

What is your creative maladjustment? What is your role as a leader in a great global nonviolent revolution? Despite all arguments and grudges, despite all anger and difference, be mad enough to unite and lead MLK's International Association for the Advancement of Creative Maladjustment.

Mad citizens experienced labels and drugs and restraints and shock, and never gave up. Mad citizens experienced discrimination and homelessness and poverty, and never gave up. Mad citizens took the worst hit the mental health system could give, and never gave up. Who is the mad movement? The mad movement is composed of human beings for justice who cannot be stopped, who will not be stopped, you!

One of our nonviolent weapons is the mind itself. Our peaceful ammunition is inexhaustible. Historians know that 800 years ago there was a German poem that would become an anthem for peasant rebellions for freedom in 1500's. This song is a tribute to the free mind. The Nazis would one day ban it. The title is *Die Gedanken Sind Frei*, which in German means, "Thoughts are free."

Rubber chickens up in the air, my mad friends. Please sing along:

Die Gedanken Sind Frei [Thoughts Are Free]

Die gedanken sind frei
My thoughts freely flower
Die gedanken sind frei
My thoughts give me power
No scholar can map them
No hunter can trap them
No one can deny
Die gedanken sind frei

I think as I please
And this gives me pleasure
My conscience decrees
This right I must treasure
My thoughts do not cater
To duke or dictator
No one can deny
Die gedanken sind frei

And if tyrants take me
And throw me in prison
My thoughts will burst free
Like blossoms in season
Foundations will crumble
The structures they tumble
And freely we cry
Die gedanken sind frei
Free people will cry
Die gedanken sind frei!

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