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Why Do Libertarians Ignore the Therapeutic State?

by Sheldon Richman

It's a truism that libertarians care about liberty. For libertarians, liberty belongs to the individual. Groups are free only in the sense that each member is free. A group free to coerce its members is, in the libertarian worldview, a contradiction in terms. This position is straightforward, and it ought to be uncontroversial. Facts and logic are on its side.

Unfortunately, the libertarian position has been compromised because most libertarians tacitly or explicitly accept gross violations of liberty and self-responsibility as long as the violated individual has been officially placed in a particular category of persons to whom normal ethical and political principles do not apply.

Before elaborating, let us pause to acknowledge some nuances in libertarian theory. Mainstream libertarianism finds no violation of its principles when parents make decisions for dependent children. Children are acknowledged to be under the stewardship of their parents and unprepared to live as self-responsible individuals. Moreover, parents, as providers, are regarded as justified in setting rules for those who depend on them for shelter and sustenance. They may properly tell their children, "As long as you live under my roof, I set the rules."

Similarly, libertarians do not typically object if emergency medical care is rendered to someone who is unconscious. The reasonable assumption is that the person would want the care. Once the person is again conscious and making decisions, care can no longer be rendered without consent. A third case where decisions may be made without consent is that of an adult with, say, Alzheimer's disease who is obviously unable to care for himself. In that case, a spouse or other close relative is empowered to make decisions in the stricken person's interests. The attending physician is typically not the guardian and has no authority to do whatever he deems necessary for the protection of the ward or anyone else. The guardian must approve medical procedures.

I've taken this seeming detour because I want those classes of people distinguished from another class of people who are also treated like children or incompetents, yet who are neither. Nevertheless, decisions can be legally made for them against their will, not by a parent and not by a spouse, but by a psychiatrist.

That class of people is the so-called mentally ill.

Treating the “mentally ill”

A person diagnosed as mentally ill and judged to be a danger to himself or others has practically none of the rights enjoyed by the rest of us. Notice the failure to distinguish between harm to oneself and to others — a basic distinction in libertarianism. Such a person can be committed to a hospital and forcibly administered drugs and other brutal psychiatric interventions. Or he can be subjected to “outpatient commitment,” according to which he will be compelled to take drugs. If he refuses, he can be hospitalized, that is, locked up. It is estimated that some two million people are committed against their will in the United States each year.

Also, under the diagnosis of mental illness, a person may ask to be excused for having committed a crime. The insanity plea can even be entered on behalf of a defendant against his will. If acquitted by reason of insanity, a defendant is “hospitalized,” not “imprisoned.” But that only means that he, unlike a criminal, is locked up for an indefinite period and forcibly given drugs and other “treatments.”

All such people are “diagnosed” purely on the basis of their behavior and their statements. This may come as a surprise, since the media is full of stories about supposed “brain disorders” as the causes of mental illness. In fact, psychiatrists do not perform physical exams on people, much less do brain scans. Besides, if mental illnesses were really brain illnesses, they would be treated not by psychiatrists, but by neurologists, as real brain illnesses (Alzheimer’s, Parkinsonism) are.

Someone need not commit a common-law crime to come under suspicion of mental illness. The “expert” judgment of “danger to self or others” is not a scientific conclusion. It is a prediction about unpredictable human beings. The psychiatric profession’s record of predicting dangerous acts is not impressive. Psychiatric confinement thus is preventive detention, which ordinarily is recognized as a violation of libertarian principles, not to mention Western legal tradition.

Liberty and mental illness

Why should this subject interest libertarians? If the law permitted individuals to be committed to a religious institution and subjected to exorcism whenever a clergyman certified that the subject was possessed by the devil, libertarians would protest loudly. Such a legal framework would be decried as a monstrous crime against humanity. And that charge would be right.

Yet when something similar happens in the name not of religion, but of science and medicine, most libertarians ignore, if not accept, it. This is strange, to say the least, but it gets little discussion in the libertarian literature. Why?

That's what Thomas Szasz would like to know. It's a question he explores in his newest book, *Faith in Freedom: Libertarian Principles and Psychiatric Practices* (Transaction Publishers). The present essay is not a book review, but rather a brief discussion of some of the themes Szasz covers in *Faith in Freedom*, which I recommend to anyone who cares about liberty.

This book will be controversial, in part because Szasz bluntly discusses the "mental health" views of some libertarian heroes, including Ayn Rand, Nathaniel Branden, Murray Rothbard, Ludwig von Mises, F. A. Hayek, Robert Nozick, and Julian Simon. But the book is more than a study of libertarian thinkers. The first half is a provocative theoretical discussion of libertarianism, economics, and psychiatry. Particularly fascinating is Szasz's linking of psychiatry with establishment economics. (He understands how Austrian economics differs from the rest of economics.) Szasz shows that in both cases an agenda for social control is disguised in the terms of value-free science. In fact, he demonstrates, neither is a science, like physics or biology, but a pseudo-science, or scientism. When an economist proposes a regulation, a price control, or a tax in the name of economic health, he resembles a psychiatrist who proposes to hospitalize, drug, or electroshock people in the name of mental health. In both cases, the pseudoscientist advocates the initiation of physical force (or the threat of such) against innocent people without acknowledging that fact.

Thomas Szasz's best-known book is *The Myth of Mental Illness*. In this brief article I cannot detail his position on why mental illness is a myth and why psychiatric interventions constitute aggression. He has done this in some 25 books and hundreds of articles over the last half century, most recently in *Liberation by Oppression: A Comparative Study of Slavery and Psychiatry*. The title indicates Szasz's political position. In briefest summary, he argues that the term "mental illness" is a category error. It refers to behavior (including statements), but behavior is not illness. In real medicine, an illness is a health-threatening defect in cells, tissues, or organs. Mental illness refers to bad or disturbing behavior (which may or may not violate the criminal law). Thus mental illness is metaphorical illness. The idea that illness can cause behavior undercuts the very idea of "person": human action has reasons, not causes. In his book *The Meaning of Mind*, Szasz elaborates one of his most fundamental points: mental illness cannot be real illness because "the mind" is not a body part. As he once put it, "mind" is a verb, not a noun. Thus it is not something that can become sick.

If that is so, then psychiatry is revealed as pseudo-medicine, psychiatric diagnoses as lies, commitment as preventive detention, and involuntary treatments as assaults. In sum, Szasz has dubbed the union of psychiatry and state the Therapeutic State.

This brings us back to the theme of *Faith in Freedom*: Why have libertarians, including some of the greatest ones, been willing to take at face value a profession, psychiatry, that was born in the arms of the state and that is authorized by law to initiate violence against those who have violated no one's rights?

One reason is surely intellectual modesty — the belief that psychiatry is an esoteric specialty which people outside the profession are incapable of judging. But that excuse will not do. As Szasz writes,

From social scientists — that is, from students of human affairs, especially if their interests encompass issues of individual liberty and personal responsibility — I believe we ought to expect more: they ought to be able to familiarize themselves with the few truths and many falsehoods about the medical specialty called ‘psychiatry.’ Why psychiatry? Because psychiatric interventions — in particular civil commitment and the diversions from the criminal justice to the mental health system — are the most common and most widely and uncritically accepted methods used by the modern state to deprive individuals of liberty and responsibility. I regard psychiatry as a major threat to freedom and dignity. This is why I criticize certain libertarians not only for uncritically accepting mental health clichés that justify the psychiatric status quo, but also for averting their eyes from the conflict between liberty and psychiatry.

Szasz holds up a mirror to this glaring aspect of libertarianism — and the image is not attractive. But it has to be done. Every libertarian should read this book.

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