

Mind Rape

How it happens

It is standard practice by members of the medical psychological and psychiatric professions to record the emotional state of the patient. Time factors often mean that the reasons for the patient's emotional state and the patient's background are never properly investigated. Thus incorrect assumptions and diagnoses may be made and the wrong treatment prescribed. Subsequent examinations may use the original record as evidence of a psychiatric condition. Incorrect diagnoses may result from this.

When medical treatments fail, some members of the medical profession tend to blame the patient rather than investigate the reasons for the failure of the treatment. For example:

- a) The original condition investigated incompetently can easily lead to incorrect analysis.
- b) An examination may be inaccurately documented purely in order to justify illegal or unethical actions by an unethical doctor.

In both instances the details of the examination will rarely be challenged. As a result the patient is neither properly assessed nor helped adequately. The high legal and social status of the examining medical professional enables them to escape blame.

Patients often find it hard to correct errors in their medical records. When disagreements arise during court actions, the judiciary tends to believe the medical expert rather than the patient. This violates the principle of 'full equality' in court hearings which is set out in the United Nations Universal Declaration of Human Rights.

Many members of the medical psychological and psychiatric professions fail to acknowledge and act upon the fact that social skills have to be learnt. Many in these professions do not recognise the problems caused by poor social skills, so a psychiatric condition is often inappropriately diagnosed.

Individuals with poor social skills are often subjected to considerable psychological pressure from society. As the patient gains the required social skills, the psychological pressures from society diminish. The reduction of psychological pressure often enables the patient to function better because they suffer lower stress. High stress often produces poor performance.

Psychiatrists

Many medical treatments by psychiatrists decrease the social skills of the patient - for example by causing sedation and impairing memory. Adequate handling of stressful conditions requires good social skills. Under the influence of many psychiatric drugs, it is difficult for a patient to interact adequately in society. Reduced social interaction and lack of social awareness under drug influence can, and often does, reduce the level of social skills with the result that the patient suffers increased social stress.

The long term result of drug therapy is that the patient appears to be easier to handle, but the real result is that the patient is more isolated from their surroundings. Their mental functioning and capacity both decrease. This reduction of mental capacity is often ignored by the psychiatric profession.

To put it very crudely the psychiatric evaluation may be: "What drug/treatment can I give the patient in order to shut them up and make them more manageable?" This is in contrast to "What help can I give the patient in order to enable them to manage their condition better?"

Psychologists

The medical psychologist examines stressful events suffered by the patient. This examination may cause the following train of events:

- 1) The patient is placed under a higher level of stress
- 2) The higher level of stress can shift the patient to a lower level of social functioning
- 3) The lower level of social functioning can cause increased stress from other people
- 4) The increased stress from other people can cause the patient's level of social functioning to decrease further.

These events could degrade into a feedback loop with further decrease in functioning.

Stressful events which occurred earlier in the patient's life will also be examined. During the examination the following may be ignored:

- a) Social skills that the patient possessed when the event took place
- b) The contrast between the lower skill base possessed by the patient when the event took place and the patient's present social skill base. Further stress could be due to identification of previous poor performance even though it was due to the lower skill base.
- c) The age at which the stressful event took place
- d) The expected social skills for the age at which the event took place
- e) The impact created by a high stress event, which can prevent learning of some social skills
- f) Social skill learning opportunities lost when an earlier high stress event alienated the individual from his established social environment - this would have greater importance in childhood and adolescence
- g) The age at which the Social skill learning opportunities were not present
- h) The length of time that Social skill learning opportunities were not present
- i) Alienation of the individual from their present social environment as a result of high stress.

The patient's realisation of lack of competence in handling a previous high stress event could result in increased stress on the patient. This pattern of stress is ignored by many medical psychologists.

In addition the following might be ignored by the medical psychologist during examination and diagnosis:

- a) The cognitive abilities of the patient
- b) The stress versus performance abilities of the patient
- c) The fall in cognitive abilities as a result of stress suffered by the patient
- d) The increase in social pressure on the patient caused by loss of cognitive ability.

Why it happens

The independence of medical psychologists and psychiatrists is undermined by conventional medical education which often ignores social factors. It could be advantageous to "mind rape" the patient in order: to save time, or to save money, or to avoid extra investigations, or to obtain a preferred conclusion for a report, or to meet patient throughput targets. This is in contrast with Patient and Professional working together. By working together the patient is helped to improve his methods of handling stress.

Why it continues to happen

It is very difficult for a patient, who has been mind raped by an unethical medical professional, to prove that his or her notes need to be rectified. This allows the unethical practice of mind rape to continue with impunity. The tendency by the judiciary to give more weight to the medical expert than to the patient, despite the right to equality under the United Nations Universal Declaration of Human Rights, also allows this practice to continue.

Many medical professionals fail to realise that often the patient needs to develop further social skills in order to handle situations of stress better.

If the patient gets worse as a result of treatment, the medical professional might decide that this is due to an underlying condition.

This ignores the fact that:

- a) The patient may need education in social skills in order to handle the stress of their present life conditions
- b) There was incompetent monitoring of the patient.

Why it will continue to happen

The blame can, inappropriately, be shifted to the patient so that none is attributed to the professional.