



# 'Suicide was just nothing'

NEW YORK (AP) — A man who has tried it and failed calls suicide disappointing.

"There was nothing, just nothing," recalled Al for Alfred Alvarez, 42, who gulped down 45 sleeping pills 11 years ago and survived after doctors thought he would die.

"I thought death was going to be dramatic and fascinating, like the last reel of an Alfred Hitchcock movie where everything was explained, but nothing was explained," said the British critic and author.

Alvarez said the experience taught him "that there weren't ever going to be any answers, even in death . . . and that in itself is already the beginning of happiness."

As a result, he said, "you learn that the world is a stinking place, not even a dramatic place."

"But you have to make a life for yourself. I'm a different person. Now I expect less."

Alvarez compiled his thoughts and research on the nature of suicide in a new book, *The Savage God*, which he says he wrote to "possibly help someone."

*written May 1972*

*M. W. Cole*

In the book Alvarez pac-  
tures many of the myths about  
suicide. Sweden does not have  
the highest suicide rate;  
Hungary does. Young  
romantics are not the most  
likely to kill themselves at  
Christmas time; it's middle  
aged 45-to 65-people who are  
suffering the pangs of debt —  
and it reaches its peak during  
early summer.

Alvarez said dentists and  
doctors had the consistently  
highest suicide rates, "largely  
because they have access to  
drugs, and maybe it has  
something to do with having  
money."

Alvarez, who studied suicide  
victims from Socrates to his  
friend, poet Sylvia Plath, said  
that today "the only common  
factor in suicide is  
loneliness."

He listed other charac-  
teristics of the potential  
suicide.

"If a person talks a lot about  
suicide, he's not joking.  
Chances are, he'll do it."

How else to recognize it?

"You can tell when someone  
is depressed. Suicide is an  
intensification of that  
feeling."

The author suggested  
several ways to handle a  
potential suicide.

"Get him to a suicide  
prevention centre, or a  
psychoanalyst, or to a friend.  
That loneliness is the  
precondition.

Once you can break through  
the tight self-enclosed circle,  
you're OK."

In Hemiker, Eugene, Mental Illness &  
Social Work p. 76

G. W. Brown Changing Patterns of Care  
of The Schizophrenic Patient. Brit.  
J. of Psychiatry: Social Work  
Vol VII, 1963. Fewer re-admissions  
among patients who don't return  
to their family.

*Law. Province May 17/72*

# Murder by moonlight

United Press International

MIAMI—The full moon over Miami has inspired songs, romances, works of art and, according to a team of research psychiatrists, murders and mayhem.

Drs. Arnold Lieber and Carolyn Sherin, writing in the American Journal of Psychiatry, believe they have confirmed what the comic books have been saying for years: The full moon brings out the madness in men.

Lieber, a senior resident in psychiatry at the University of Miami medical school, found that during the new and full moon — the times of the maximum tidal forces — there was a sharp increase in the number of murders in the Miami area.

The research team correlated the murder rate with the moon phases over a 15-year period and charted the results on a moon phase graph.

Their studies showed that

## Do biological tides upset human body?

Dade County's murder rate began to rise about 24 hours before the full moon and reached a peak at the full moon, then declined until the new moon, when another lesser increase in murders was noted.

Lieber said the murder - moon phase chart, when it was completed, looked surprisingly like the chart of ocean tides at Key West.

He believes the moon may create "biological tides" in the human body, which is composed of 80 per cent water. The biological tides, he believes, cause slight changes in the body chemistry and hormones.

Most scientists are finding the rhythms but are not speculating on what's causing them," Lieber said. "We believe we have established a scientifically sound relationship of lunar periodicity."

Lieber's research team believes that the biological tides and resulting bodily changes trigger temporary insanity in persons with "borderline" cases of emotional stability.

Lieber said he also noted a "general restlessness and disturbance in our psychiatric wards" during periods of full and new moons.

He admitted his findings have been greeted with skepticism by some of his colleagues, "but the data is there and we let it speak for itself. This is complete speculation, but I feel that eventually we are going to show that any organism, human or animal, is an integral part of the universe and responds to changes like variations in the solar and lunar cycle," he said.

*Walt*

*in your search*

*you might see three*

*Dr. James J. Stangor*

*03/3/72*

WALT GERRON  
235 OSBORNE AVE  
NEW WESTMINSTER

# COUNTER CONFERENCE



## ON ANTIPSYCHIATRY AND PSYCHIATRIC VIOLENCE

"If one is to speak of violence in psychiatry, the violence that stares out screaming, proclaiming itself as such so loudly that it is rarely heard, is the subtle, tortuous violence that other people, the "sane ones", perpetrate against the labelled madmen. In so far as psychiatry represents the interests or pretended interests of the sane ones, we may discover that, in fact, violence in psychiatry is pre-eminently the violence of psychiatry."

- David Cooper, psychiatrist.

The Mental Patients' Rights Committee of Vancouver is part of a revolution in consciousness of growing international proportions dedicated to eliminating the psychiatric dehumanization of Man. We are peacefully picketing and demonstrating our protest against the workshop at Riverview Hospital on "The Potentially Dangerous Patient" which, according to a news item in The Vancouver Sun (Tuesday March 20, 1973 p.8) heralds what is headlined as "a study of potential killer patients".

In the view of the Mental Patients' Rights Committee, the underlying premises of such a study are false and immoral and its implications for the further denial of basic human rights and degradation of those defined as "mental patients" is shocking and terrifying to contemplate.

All human beings, including the "Mental Health" workers undertaking this study are "potential killers" whether our ancestry stems from Cain or from Australopithecus Africanus. Also, we are all "potentially" dangerous to various persons or groups of persons depending upon our philosophical beliefs and our power to translate these beliefs into social action. The extermination of more than eight million persons in Nazi Germany was possible because of the false belief in the inferiority and "dangerousness" of a group identified and defined by the wicked philosophy of one man and the pervasive dissemination of this false belief by a powerful and unopposed propaganda machine.



Institutional psychiatry is a product of a false belief. So-called mental illness is not illness. From the viewpoint of the individual it is an existential problem. From the viewpoint of others it is a socially unacceptable conduct. If the conditions of the individual is brought to bear, the usual safeguards which give the individual a sporting chance. If the conditions are a "medical" problem, ideas of responsibility are obscured by the metaphor of "illness" - and thus the door is left wide open.

Society - and psychiatry - have to answer in years to come for the destruction of human potential, the confinement and atrocities of "treatment". We, of the Mental Patients' Rights Committee, believe that this study should not be added to by selective criteria of "dangerousness" among a population of confined "mentally ill" persons, the staff of mental hospitals, and what they do to persons entrusted to their care. They do these things, and the underlying what is done would be to protect the public.

The Riverview study on "potential killers" compounds the already pervasive "illness" by reviving older myths of "madmen" and enhancing the "dangerousness" of those who are odd or different. It is unfortunate that such overgeneralized and more deeply entrenched beliefs, without a particle of corroboration in the scientific literature, associates conducted an extensive study concerning the "dangerousness" of "mentally ill". Their conclusions were:

"Crime rates are not higher among mental patients than among controls in the general population. that the reverse is true



psychiatry,  
proclaim-  
rarely  
that other  
inst the  
ry repre-  
sts of the  
t, violence  
ence of  
chiatrist.

Vancouver  
growing  
nating  
re peace-  
t against  
otentially  
s item in  
8) heralds  
iller pat-  
ts Commit-  
are false  
ther denial  
se defined  
ing to con-

health"  
l killers"  
Austral-  
ntially"  
rsons  
our  
action.  
persons  
false  
" of  
phil-  
ation  
osed

Institutional psychiatry is also based on a false belief. So-called mental illness is not mental and not illness. From the viewpoint of the labelled individual it is an existential problem in living. From the viewpoint of others it is socially unacceptable conduct. If the conduct amounts to crime and the individual is brought to trial there are procedural safeguards which give the accused at least a sporting chance. If the conduct is defined as a "medical" problem, ideas of justice and fairness are obscured by the metaphorical rhetoric of "health" and "illness" - and thus the doors of tyranny are left wide open.

Society - and psychiatrists in particular - will have to answer in years to come for the systematic destruction of human potential by involuntary hospital confinement and atrocities inflicted in the guise of "treatment". We, of the Mental Patients' Rights Committee, believe that this burden of accountability should not be added to by searching for special criteria of "dangerousness" among the already victimized population of confined "mental patients". A study of the staff of mental hospitals (including psychiatrists), what they do to persons entrusted to their care, why they do these things, and the validity of the premises underlying what is done would be far more relevant.

The Riverview study on "potential killer" patients compounds the already pervasive mythology of "mental illness" by reviving older myths about the "atrocities of madmen" and enhancing the public's fear of those who are odd or different. It is particularly unfortunate that such overgeneralized fears are being generated and more deeply entrenched when they lack any particle of corroboration in fact. J.E. Rappeport and associates conducted an extensive review of the literature concerning the "dangerousness" of the "mentally ill". Their conclusions were:

"Crime rates are not higher among ex-mental patients than among corresponding persons in the general population; indications are that the reverse is true." (emphasis added).