

Why anti-authoritarians are diagnosed as mentally ill, and how this helps america's illegitimate authorities stay in charge

By Bruce Levine on February 23, 2012

In my career as a psychologist, I have talked with hundreds of people previously diagnosed by other professionals with oppositional defiant disorder, attention deficit hyperactive disorder, anxiety disorder and other psychiatric illnesses, and I am struck by (1) how many of those diagnosed are essentially *anti-authoritarians*, and (2) how those professionals who have diagnosed them are not.

Anti-authoritarians question whether an authority is a legitimate one before taking that authority seriously. Evaluating the legitimacy of authorities includes assessing whether or not authorities actually know what they are talking about, are honest, and care about those people who are respecting their authority. And when anti-authoritarians assess an authority to be illegitimate, they challenge and resist that authority—sometimes aggressively and sometimes passive-aggressively, sometimes wisely and sometimes not.

Some activists lament how few anti-authoritarians there appear to be in the United States. One reason could be that many natural anti-authoritarians are now psychopathologized and medicated before they achieve political consciousness of society's most oppressive authorities.

Why mental health professionals diagnose anti-authoritarians with mental illness

Gaining acceptance into graduate school or medical school and achieving a PhD or MD and becoming a psychologist or psychiatrist means jumping through many hoops, all of which require much behavioral and attentional compliance to authorities, even to those authorities that one lacks respect for. The selection and socialization of mental health professionals tends to breed out many anti-authoritarians. Having steered the higher-education terrain for a decade of my life, I know that degrees and credentials are primarily badges of compliance. Those with extended schooling have lived for many years in a world where one routinely conforms to the demands of authorities. Thus for many MDs and PhDs, people different from them who reject this attentional and behavioral compliance appear to be from another world—a diagnosable one.

I have found that most psychologists, psychiatrists, and other mental health professionals are not only extraordinarily compliant with authorities but also unaware of the magnitude of their obedience. And it also has become clear to me that the anti-authoritarianism of their patients creates enormous anxiety for these professionals, and their anxiety fuels diagnoses and treatments.

In graduate school, I discovered that all it took to be labeled as having “issues with authority” was to not kiss up to a director of clinical training whose personality was a combination of Donald Trump, Newt Gingrich, and Howard Cosell. When I was told by some faculty that I had “issues with authority,” I had mixed feelings about being so labeled. On the one hand, I found it quite amusing, because among the working-class kids whom I had grown up with, I was considered relatively compliant with authorities. After all, I had done my homework, studied, and received

good grades. However, while my new “issues with authority” label made me grin because I was now being seen as a “bad boy,” it also very much concerned me about just what kind of a profession that I had entered. Specifically, if somebody such as myself was being labeled with “issues with authority,” what were they calling the kids I grew up with who paid attention to many things that they cared about but didn’t care enough about school to comply there? Well, the answer soon became clear.

Mental illness diagnoses for anti-authoritarians

A 2009 *Psychiatric Times* article titled “**ADHD & ODD: Confronting the Challenges of Disruptive Behavior**” reports that “disruptive disorders,” which include attention deficit hyperactivity disorder (ADHD) and opposition defiant disorder (ODD), are the most common mental health problem of children and teenagers. ADHD is defined by poor attention and distractibility, poor self-control and impulsivity, and hyperactivity. ODD is defined as a “a pattern of negativistic, hostile, and defiant behavior without the more serious violations of the basic rights of others that are seen in conduct disorder”; and ODD symptoms include “often actively defies or refuses to comply with adult requests or rules” and “often argues with adults.”

Psychologist Russell Barkley, one of mainstream mental health’s leading authorities on ADHD, says that those afflicted with ADHD have deficits in what he calls “rule-governed behavior,” as they are less responsive to rules of established authorities and less sensitive to positive or negative consequences. ODD young people, according to mainstream mental health authorities, also have these so-called deficits in rule-governed behavior, and so it is extremely common for young people to have a “dual diagnosis” of ADHD and ODD.

Do we really want to diagnose and medicate everyone with “deficits in rule-governed behavior”?

Albert Einstein, as a youth, would have likely received an ADHD diagnosis, and maybe an ODD one as well. Albert didn’t pay attention to his teachers, failed his college entrance examinations twice, and had difficulty holding jobs. However, Einstein biographer Ronald Clark (*Einstein: The Life and Times*) asserts that Albert’s problems did not stem from attention deficits but rather from his hatred of authoritarian, Prussian discipline in his schools. Einstein said, “The teachers in the elementary school appeared to me like sergeants and in the Gymnasium the teachers were like lieutenants.” At age 13, Einstein read Kant’s difficult *Critique of Pure Reason*—because Albert was interested in it. Clark also tells us Einstein refused to prepare himself for his college admissions as a rebellion against his father’s “unbearable” path of a “practical profession.” After he did enter college, one professor told Einstein, “You have one fault; one can’t tell you anything.” The very characteristics of Einstein that upset authorities so much were exactly the ones that allowed him to excel.

By today’s standards, Saul Alinsky, the legendary organizer and author of *Reveille for Radicals* and *Rules for Radicals*, would have certainly been diagnosed with one or more disruptive disorders. Recalling his childhood, Alinsky said, “I never thought of walking on the grass until I saw a sign saying ‘Keep off the grass.’ Then I would stomp all over it.” Alinsky also recalls a time when he was ten or eleven and his rabbi was tutoring him in Hebrew:

One particular day I read three pages in a row without any errors in pronunciation, and suddenly a penny fell onto the Bible . . . Then the next day the rabbi turned up and he told me to start reading. And I wouldn’t; I just sat there in silence, refusing to read. He asked me why I was so quiet, and I said, “This time it’s a nickel or nothing.” He threw back his arm and slammed me

across the room.

Many people with severe anxiety and/or depression are also anti-authoritarians. Often a major pain of their lives that fuels their anxiety and/or depression is fear that their contempt for illegitimate authorities will cause them to be financially and socially marginalized; but they fear that compliance with such illegitimate authorities will cause them existential death.

I have also spent a great deal of time with people who had at one time in their lives had thoughts and behavior that were so bizarre that they were extremely frightening for their families and even themselves; they were diagnosed with schizophrenia and other psychoses, but have fully recovered and have been, for many years, leading productive lives. Among this population, I have not met one person whom I would not consider a major anti-authoritarian. Once recovered, they have learned to channel their anti-authoritarianism into more constructive political ends, including reforming mental health treatment.

Many anti-authoritarians who earlier in their lives were diagnosed with mental illness tell me that once they were labeled with a psychiatric diagnosis, they got caught in a dilemma. Authoritarians, by definition, demand unquestioning obedience, and so any resistance to their diagnosis and treatment created enormous anxiety for authoritarian mental health professionals; and professionals, feeling out of control, labeled them “noncompliant with treatment,” increased the severity of their diagnosis, and jacked up their medications. This was enraging for these anti-authoritarians, sometimes so much so that they reacted in ways that made them appear even more frightening to their families.

There are anti-authoritarians who use psychiatric drugs to help them function, but they often reject psychiatric authorities’ explanations for why they have difficulty functioning. So, for example, they may take Adderall (an amphetamine prescribed for ADHD), but they know that their attentional problem is not a result of a biochemical brain imbalance but rather caused by a boring job. And similarly, many anti-authoritarians in highly stressful environments will occasionally take prescribed benzodiazepines such as Xanax even though they believe it would be safer to occasionally use marijuana but can’t because of drug testing on their job

It has been my experience that many anti-authoritarians labeled with psychiatric diagnoses usually don’t reject *all* authorities, simply those they’ve assessed to be illegitimate ones, which just happens to be a great deal of society’s authorities.

Maintaining the societal status quo

Americans have been increasingly socialized to equate inattention, anger, anxiety, and immobilizing despair with a medical condition, and to seek medical treatment rather than political remedies. What better way to maintain the status quo than to view inattention, anger, anxiety, and depression as biochemical problems of those who are mentally ill rather than normal reactions to an increasingly authoritarian society.

The reality is that depression is highly associated with societal and financial pains. One is much more likely to be depressed if one is unemployed, underemployed, on public assistance, or in debt (for documentation, see “[400% Rise in Anti-Depressant Pill Use](#)”). And ADHD labeled kids do pay attention when they are getting paid, or when an activity is novel, interests them, or is chosen by them (documented in my book *Commonsense Rebellion*).

In an earlier dark age, authoritarian monarchies partnered with authoritarian religious institutions. When the world exited from this dark age and entered the Enlightenment, there was a burst of energy. Much of this revitalization had to do with risking skepticism about authoritarian and corrupt institutions and regaining confidence in one's own mind. We are now in another dark age, only the institutions have changed. Americans desperately need anti-authoritarians to question, challenge, and resist new illegitimate authorities and regain confidence in their own common sense.

In every generation there will be authoritarians and anti-authoritarians. While it is unusual in American history for anti-authoritarians to take the kind of effective action that inspires others to successfully revolt, every once in a while a Tom Paine, Crazy Horse, or Malcolm X come along. So authoritarians financially marginalize those who buck the system, they criminalize anti-authoritarianism, they psychopathologize anti-authoritarians, and they market drugs for their "cure."