

MENTAL STILLNESS

MENTAL STILLNESS II



Rank Amateur

A self-determination evaluation

Tending the Goats

*The rising tide might lift all boats,
but cheap milk is a wild dog in a lambswool vest.
And a crying shepherd appears no more, nor less,
to a marketeer, than the treatable predominance
of some other countryman's woe.*

Introduction

The following articles articulate, twenty-three articles in all, a stance, a stand point, and please yet not so much *as* a counterpoint, and as much as I can make up here in my loft, on paper.

These articles describe a war of words, as is this the 'negotiation', the and at many times disgraceful face-offs which do occur here at the coal face *of* the otherwise termed 'treatment'.

Please for I treated psychiatry, this the bastion and source material *of* our understanding and thought patterning surrounding discussion *of* MH, MI, and PTSD, *to vaudeville*.

Which makes for some unfortunate reading; for perhaps might this also discussion loan over good insights, and in so much and as far as avoiding conflict, and conflicts, and have us all tending towards harmonies, all round.

Abstract

'There's a hole in my bucket ...'

We, and we as in all MI patients, and because we are called upon, and to *be* patient, and *forever-more*, such as *is the implication*, forthwith, and *at* a pronouncement, and via decree, and under such-what is a spurious positioning, and since and that, and near-*always and since* that spurious *im*-positioning, and *ever-since* witch-hunts, and *all manner of raising the spectre*, and of MI, and *via and of any* reactionary lexicon, and snideness ... for and under such *wholly overwhelming fire*, do we venture forth ...

And whilst being pretty much 'dociled', and by emotional blackmail, plus with the politic of the public place, do-such we land herein-upon the also blood-sport of politics, and which has, this blood-sport, and comedic intrigue, been bringing psychiatry to its knees, via mirth ... it, psychiatry, all the while, and to add insult to injury, trying to cut off my face despite my nose, and inviting itself to my breakfast table.

Such, and a common *re*-evaluation, and *of all of us* upon this the *Mission Impossible*, for one of the unspoken realities is that this the power of decree, enforceable *via* blackmail, is met with contemptuous and widespread '*fuck you's*', directed squarely *at* a medical fraternity and facility, that facility there-thus abusing its powers, and near wholesale.

Which is not to say that we do not have and do make great friends in the MI world, but the guts is that there's really nothing to be afraid *of*, apart from it-thus being implied *and* enacted – *a passing of our emotional parcels*.

Or / and to then come into the clutches of a man, (whom is described as an odd fellow – and there's a few of these), whom is out of touch with the rank and the file *of* humanity, and leaves simply *a swathe of destruction* behind, gadding about in his expensive clothes, laughing, (*and too and inadvertently and at himself, it pans out*) ... the death blow being placed here-also and, and in finality, and *by* the uber-myth '*Tiddalick the Frog*', a Dreamtime story *all about* thirsts for power, and how they are oft-otherwise maintained, and (and in this case more-also and via satirical humour, and appropriation), brought to bear.

MENTAL STILLNESS

Q: When is a therapy dog not a therapy dog?

A: When he has work to do

RENAMED SPADES

The quite variety of definitions *of* mental health on the Beyond Blue website speaks as much of a gathering of good men as it does the fact that they are hired, and that happiness pursuits are in cahoots with Big Pharma.

An ad-libbed script, enacted on a stage of terrible correlation and symbiosis between our requirement *for* exponential returns and our spiralling dismay brought about *by* the over-extension of economic rationalism into our mortgaged homes, manifests in a mangled clamour of renamed spades.

Might we never mind what we could possibly mean when we say such so, humanity, and truth, before revisiting the awe of a broader community, its values, and questioning this fray over *nay* but riches.

And envisage, counter-wise, by sidle and whisper, rather than by a subsequent spruik of a brutal elixir, the harness of that thousand-pound goodness, for which our hopes *are* an eternal symptom of all that has not, and all that needs be, prescribed.

DEAR TANDEM

I became aware of your organisation only recently, and only because I was afforded a gift, which sort of gives the game away I would expect because I believe these gifts are afforded only to consumers. Of carers I know something, of recovery too, I expect.

For a good seven years ago I wrote an essay. And the essay was titled '*Undiagnosis*'. And that title was lifted from Professor Simon Baron-Cohen's '*Autism and Asperger's Syndrome – The Facts*', page 44, from under the subheading '*Can the diagnosis be removed later?*' – later being after the advent of a diagnosis. Now, I ran with this concept, and the mob at the Victorian Mental Illness Awareness Council said to me at the time: 'How far are you going to take this?' in reference to the essay. And also now, I still have a diagnosis, on paper, yet I did take the principle to its obvious conclusion.

Professor Baron-Cohen states that an 'undiagnosis' would take '*just as thorough re-assessment of the individual*'. Yet I postulated that indeed the way to enact an undiagnosis is not to sit back and re-answer the questions, but to supersede the very person handing them out, the diagnoses, to transcend the stipulations of psychiatry. And it worked! I furnished my professional with a six page treatise outlining the concept then I carried it out. I dismissed him (and then tucked back under the very next session). His final words to me as I departed the clinic for the very last time were – 'thank you'.

What could possibly be errant of one's spirit at the drawn awe of sanity's maven?

Madness ends where humanity begins. Recovery never does, end, it resolves. Resolution may it never cease, and if community treatment (read: socialisation, *society*) ever does, fail, we will all be (everyone) in need of a decent equilibrium. I believe that a recovery is the complete absence of symptoms, and a *complete recovery*, just like you hear the docs say, is when you close your eyes and nothing but nothing seems to have changed.

Madness, to my mind, is a crisis of meaning, and whether new meanings need to be created or original meanings re-installed is really a question for the individual. The greatest impediment, again to this perception, to a resumption of the normal, or the creation of something which I have heard called a '*new normal*', an *adaption* if you will, is the very diagnosis itself and the identification with it in the mind of the patient and in the (sometimes) approach of the carers (and the wider community) be they professional or other.

And I could write a whole 'nother essay on the most unfortunate dynamic that is set up in relationships where one party is deemed now and forever more to be afflicted, mentally. The very belief that one is at best sub, or potentially and for ever more depleted, and at worst inhuman, is the great millstone of any consumer, and the great prejudice of the wider community.

And I have read in the paper of consumers beseeching the government to do something about stigma whereas I feel it is up to the individual as it is up to all individuals to decide by which and with what one *identifies*, to work somehow within one's *limitations*, and should indeed life prove fruitful, to transcend those limitations as well.

Should indeed it make a difference, and I can only use work as a measure, I have just come off the back of three years part-time, and plan potentially to resume full-time. Whether my diagnosis amounts therefore to an *impairment* remains to be seen. The bulk of the impairment is in the belief structure that is placed there by the notion that mental illnesses are for life and that one must create a 'new sense of self' in order to become better. What would be so wrong with one's original sense of self? Are we talking about identity here, or the soul, which, it has been argued, is eternal? And would it not ideally, this identity, old or new, therefore *not* contain an identification with an illness?

I have forwarded my definition of recovery, which is the same definition as one would find in a dictionary or a regular medical journal, or indeed would be what we are talking about when we sit down to a cup of tea and a stroke of the cat after a hard day at work, to professionals in the industry only to be fobbed. I encourage this entity to think about the logic of undiagnosis and of Eastern philosophies where apprentices by the necessity to human evolution supersede their masters and those masters as we know are blessed in the knowledge of a job well done.

This is an idealistic model. I live and have lived side by side with, by, and of all manner of manifestations of (magnificently) maladroit minds. (And one wonders whether all minds are by nature *sui generis*). Yet I speak with all seriousness when I suggest that the dismissal of the DSM and its *entire implication* from the comprehensions of the patient is the key to a recovery, intrinsically. What constructs a patient re-maps a psyche with is a whole other study (though one might cue art here), but let us not map it with a *deviation* over all other and sundry potential and possible permutations of meaning which all and everybody entrusts

every day and has done throughout these eons to inform the mind. (One wonders also whether this age of sinister glamour (too) is widely ripe for re-appraisal).

It's a massive undertaking, the reconstruction, but tell someone that they are never *really* going to get better and you have just bricked up the very light I am offering at the end of a tumultuous tunnel. Change is inevitable. I am not saying that madness does not take a toll, yet might not future joy be reneged by the very schema that we must employ (temporarily?) to rally our forces in the name of normality.

MISSION IMPOSSIBLE

‘Mental illness’ means no more than one’s common and garden ‘human suffering’, perhaps though pressed to and beyond that boundary where mere men forgo a sense of humour – *‘abbandonare ogni speranza voi che entrano qui’*.

Our species’ timeless wish to find panacea and absolution, and our dear fears for our souls should we indeed expire prior to the discovery *of* a transcendence, stretches further into the past than anyone would wish it into the future.

Yet should we dispense with these sinister implications that our modern medicalizations make *of* madness in the public mind, to the point of resembling witch hunts, and relegate technology perhaps *behind* such powers as myth and legend (and reflection (and forgetting)), might we discover that this eternal hope of humanity has resulted in conundrum and tomes towering far above and beyond in comprehensiveness any incarnation of any manual and thus stipulatory practice.

The question is not whether all beings, all animals for instance, possess self-awareness, or self-*awarenesses*. The question is: can they suffer? Which is to say that necessarily inherent in our understanding of ourselves is perhaps an acknowledgement that suffering is a passage moreover an affliction, and to attempt to identify such transmission as an abject ever-more rather than a signalman’s arrow pointing *in* the direction of wisdom is to deny the direct correlation between capacity and dominion.

TRICK CYCLIST

And we'll leave out the part about the flat-topped copper who thought I was squarely on his time, and the really telling bit, where the pen flopped across a bottom line leaving a scratch looking much like as if he brought only the document forward best upon which to test the thing. It meant nothing to him. All his conclusions were totally forgone. I was thinking something *completely* different...

Trying to second guess all the things that people haven't done yet, let alone what's not there, that's the job of jobs, I'd know! And when the surf is up, well, I just do something high class with my brain that only I can fathom – I've danced on ceilings, made up words, some meanings mean what they like, I've inverted cardboard boxes and done tricks upon my bike!

And then the time I cornered him, so he stuck his finger in his mouth! And then the lies come thick and fast, and they start laughing at your jokes, I hope the big man's listening here, this has gotta be a hoax, and then deny the painted clear, one starts to feel a pity, for his sake should he try this shit on out there in the city.

APERSONAL ILLEGIANCES

The thing about MI, amongst other ‘things’, is the wholesale attributing of a near all and sundry *of* ailments, physiological and otherwise, *to* the unsuspecting MI, *and* by a near all and every *allegiant of* psychiatry, resulting in a *being of disallowance* of a common and garden *human frailty*, and by rights *of* a generalization, and is thus an also subsequent *deprivation of intimacy*.

For, what *is* a *sympathetic response*, if not a connection borne *of* a mutual suffering, a loving, a laughter, and borne out, again, as we are, humanity, by work and relationships, aka *team efforts*.

For it is when we *stylise the human condition* via meaningless paraphernalia *such as* the glossary *of* a DSM, that we create top-tier discrimination, middling-descriptors, and a widespread societal malaise *of* paranoia, quite and near commensurate with Pfizer’s burgeoning bottom-line.

Our ‘duty of carers’, looking over and upon, and speaking down to the gathering of silent-eyed ‘mental health survivors’, and ‘lived experiences’ ... spare us, honestly, your *need to be needed*, and if things get any worse, not that they be nearly, dearly, you’ll just have to stop ‘helping’.

THE POWER OF SUGGESTION

This is all about my most favourite moment of my stay in High Dependency, and it was during a *meeting*, or *appointment*, or whatever you'd like to call it, and it was attended by myself, a psychiatrist, who was called – I'm not printing his name here – and this spectacular giant of a man who was a psych nurse. He was a whole lotta other things as well 'cause you really have to mix it up a bit on a station like that.

I remember that he had dark skin, wore white gym shoes, and had no tolerance for bullshit of any flavour or variety, and he had this big, deep, booming voice which put the freakin' wind up anyone who was acting up or being a right nut, whilst simultaneously reassuring all the goodygoodygumdrops like me.

I can still hear him now. He was the shit. And I mean this in the very, very best possible way.

Anyway, we were in this meeting – him, I, and this smug, wish-wash sort of a so called doctor whom you just knew loved having all of his fish swimming around in a really tiny barrel – and my big mate was swapping roles all over the place, asking tricky questions, making jokes, and really trying to trip me up to get a better idea of where my mind was at. What a clown! And then he asked me this question:

'Could you, implant a thought, in someone else's head?'

Now this is just the sort of impenetrably ludicrous type of question you get asked inside psych wards because the officers of these wards really *do* reckon that *you* really reckon that you can actually do stuff like plant thoughts inside people's

heads, or have them plant thoughts inside yours, which, however, in actual fact, you can. It's called suggestion.

Though in response to such a question in such a situation you don't want to say: 'Yes, that's easy, of course you can implant a thought in somebody else's head, it's called suggestion', because if you say that, they will think you are being smart. You can't say such a thing in a ward, because it disrupts the power distribution in the room, which leads to things getting rather hairy. You could be advised not to challenge a power structure to its face by appearing any smarter than those who might want to incarcerate you.

If you say 'suggestion, obviously', then they get all chummy, and try to be your mate, which one does *not* want, so you try to think of something plainer and more slip-slide to say, and then because you are appearing absent minded, they get suspicious, and get the impression that you are a crackpot. I didn't answer anything. And that's because I was thinking, *hard*, about the awesome possibilities of that question and had to refer that one up to Jung. How would he have replied? It was *for my mind*. So I just sat there with this sort of pleased and overwhelmed sort of expression on my face and said: 'Well...ummm...?' – and they came readily to the conclusion that I was fucked in the head. They extended my stay in the hospital at that very moment.

Now, one thing I would like to do now that I'm free, is to bump into my elfish mate and give him the nod as we pass in the street. He was OK. I have come face to face with a couple of the other officers from the ward since relocating to over this side of town, whom, I do assume, live around the area. I've seen one of them at least twice.

And the second time I struck him I thought ‘Good...’, and I sort of steered to the right, across the footpath, because I’m OK with doing that every now and then. I tilted my head in his direction, held my breath, and then made a funny sort of buzzing noise with my tongue. I twisted my gobbler all the way around to my ear hole, pinned him with my eyeballs, and said: *‘Bzzzzzz-Paching-a-Whocca!!!’* ... and had a really big crack at implanting a fucking thought right inside his fuckin’ head!!

I have no way of telling whether this worked out.

MENTAL STILLNESS II

Q: Does the Court Jester have a mental illness?

A: Who cares?

HUMOUR AND THE PRIMACIES

In January 2022 something transpired in the clinics of psychiatry, and across these, and the relationship and relationships, and within and across a fraternity.

Rank Amateur, a local Melbourne writer, made his psychiatrist laugh. And laugh and laugh and laugh.

What then followed were and was a concurrency – the *continuation* of this vaudeville, concurrent *with* a letter writing campaign, stretching forward two and a half years.

Mr Rank elicited great mirth from all comers – nurses, doctors, and students, and all the way *to* the Minister's office; yet and *absolutely zero response* were received, and to his written and highly critical campaign, and from *every and all aspects of* what Mr Rank does now dub *as* the 'mental department'.

The ins and outs of the psychiatric inter-relationship is oft beyond the experience of most citizens, yet not beyond their comprehension. Psychiatry has a and the *power of decree*, and over its subjects – anyone deemed sufficiently ill, mentally ill, or '*appearing to be*' mentally ill. In short, the State assumes *powers*, and *to* detain, amongst other powers, and the right to control anyone who cannot control themselves.

Yet and, and via this the 'meta-joke' (which is the joke which Mr Rank made up to summarise all the other, and such and *so well received* jokes) – *Q: Does the Court Jester have a mental illness? A: Who cares?* – did Mr Rank lampoon successfully

this the very keystone psycho-analytic, ‘mental illness’, the response being so uproarious that this (questionable) in fact terminology lost its meaning altogether.

Furthermore, for and to be specific, any man, or woman, please with the *right of veto*, should he or she *be* laughing, and to the line upon line of one of his subjects, and subjects over which he *is* exercising that power *of veto*, thus *forfeits that right of veto*, leaving the populace wondering all about the emperor’s clothes.

This discussion, and ramification, has major consequences for the human psyche. For and ever since our childhoods, and ever since – ‘*Guess what? You’re mad and I’m not*’ – has and have us humans been in good perhaps need of some means of distinguishing between the sane and the insane. This the deep desire and drive and to separate and ostracise those deemed unhinged, has resulted in these the great tomes of the psycho-analytics.

Yet, and please and with the now ubiquitous ‘relevance’ and of the double-speak *of* ‘Mental Health’ do we still yet make a distinction *between* normality, those who’s suffering and sufferings have endpoints, and thus hope, *and* those who’s suffering *is eternal*, indeed those whom are damned.

Psychiatry, and our faith in thus, (*and by extension* as does society), damns its subjects with abject ever-mores, wedding those subjects, and via emotional blackmail (among other stratagems), *to* itself, guaranteeing a captive audience, and *in return* it satisfies its own need to be needed.

This the *nature* of our relationship *with* madness, and suffering, and the symbiotic relationships which develop within the psychiatric industries are investigated in this publication.

WAGGING THE DOG

Psychiatry, and after the fact, and after the fact that its and this-thus the paradigm *is subverted*, [and for the fact here-that and for-also because I *hoodwinked it*, which is to say that I got them, near-everybody I came in touch with for the best part of twelve months at a psychiatric clinic and/or office, *including* the sitting psychiatrist, laughing, uproariously, and with my *full* appreciation *of* the such-therefore ramification *of* laughing, *intact*, and *the knowledge* of the such *consequence*, philosophically, and *of laughing at my jokes* while I and were subject *to* emotional blackmail and to an Order, also intact, and hidden from their point of view], continues to insist upon its control order.

Which is to say straight away that it, psychiatry, and psychiatrists, is and are complacent in their powers, and are wishing to engage in a battle over a CTO, eventhough the war is already won. For such is the jetstream and philosophical discussion having psychiatry's base rationale and belief in inherency threatened, *successfully*, and by lampooning its very own primal and blind fears, it being complicit in that lampooning, completely self-disclosing without realising that it were doing so.

Which is to say that a paradigm subverted is a paradigm perhaps getting ready *to shift*, *such that* now our power that would or were-be is *in arrears*, it is that power which we are thus *concerned about*, especially herein that it continues to try to save its face, *insisting*, *gamely insisting*, and upon batting on, its CTO maintained, even though the googly caught it looking the entirely other way, a now *full year ago*.

And batting on anyway, while we are all putting up with its belligerence, and cock-surety. Will the dam burst? What is the future of our herein and our current full acceptance and *of* inherency, the *mainstay* of this 'paradigm of suffering', and belief in, and of, a to be suspicious *of*, and supposedly *sub-standard* mind? And *when* this a purported one of those minds has cracked it up to buggery and back, and by spinning the dog along by its own wagging tail.

DEAR MINISTER

Please and for to place my papers in perspective, for the most of discussion points here (quite setting aside this the fracas over this a CTO) ...

'... the responsibilities that does power and privilege indeed *owe* to subsequent parties, and subsequent to their footfall moreover', *Regaling Psychiatry*.

And points please plus too *at* ethos, here-this the ethos *of* the oppressed virtually invisible, nearly, and to and perhaps always, the free market ethos, for good instance. Other ethoes would-may exist, which is and does face us all and *to* the light on the hill, good governance *being* proactively embracing, and in all-every humbling ways.

For this discussion, please sincerely, parts off and straight down the road here *to* Barak Estate, Port Melbourne, where the big bad wolf wants to blow down the people's now straw houses. The effect of bulldozing away people's homes and histories, and futures, native and interconnected, and to this our now-hereupon threatened fabric, is the very same as psychiatry inviting itself through my front door, and opening by asking after my mother.

My return gambit, is to praise mirth, dispensing with my first victims, and of the control aspect, some twelve months ago. The new shrink were forced to admit that he would not be compelled, irrespective, and did not only bring his mates to our duel, but also and insultingly handed across a Christmas card in the same motion *and in the same hand* as the Report, and in the same handwriting of the same man who had invited himself to my breakfast table.

I'm exploiting the fact that my opponent thinks I am sub-human, and actively demonises me, which I know I am not, and nor will be, which such sets us back, and *to* explanations, and to one-way respects, and now that my joker has trumped in miraculously on his jack of spades. *My* house of cards, please placed here and *by* a cause of justice, for in the pursuit of otherwise principles, and home truths, near-also getting blown away in the process.

DEAR THE DAX CENTRE

This faceless man, and please being that the phraseology - 'medicated' - means 'prescribed' *and* '...for a reason', proposes to *be* tempted to comment and *upon* currency, and in the public sphere.

And please this-thus being the *currency of thought* please, surrounding this the good bulk *of* discussion *of* Mental Health.

Mental Health – aka 'peace of mind' – aka ends and endings *of* suffering – which is our all-otherwise introspection.

And introspection *being* a preoccupation, giving rise please to the adage – *have you ever stopped to think and forgotten to start again?*

And please bearing with me...

For myself does also and plainly ratify that *laughter is the best medicine*, letting us jettison please this the 'recovery model', which attempts to describe and think and talk about something which exists good-only *in* actions.

For-and we would obviously *be* rather laughing, than talking about it.

For the industry *has laughed, unknowingly, and at itself, and at* the keystone psycho-analytic (and also phraseology), being that – 'Mental Illness'.

For I propose, and predict, a *shift in paradigm*, and of this thus entire discussion *of* MH, for and whether this the term MH, and in its counterpoint and *to* MI, is also jettisoned, and suffers the same demise.

And what we are now speaking of is *human psychologies*, how they contrast, and *organizational psychologies, and of fraternity*, such as the psychiatric profession, plus relationships across *power divides*.

And understanding that the activity of *talking shop to the customer* is where-though meta-languages are best confined to the higher echelons.

Nothing like a meta-phor, should poetry poke it's nose into the discussion, speaking also of echelon.

For to write here-also, is to wish to appear in good natures, so as to impress upon the Gallery perhaps interest *in* exhibition, (and via installation), and of these the enclosed ideas.

DEAR RANZCP

Please, your office please may be aware of indeed a and the volume and perhaps timbre *of* communiques which myself has directed thence-forth. Please, it is not my current interest nor necessarily *in* my interest, and to continue indeed this critique, justifiably or otherwise, and irrespective.

And setting aside please the umbrage I would and do feel considering this the current set of matters, that of a psychiatry and *as my audience*, and a regaled audience at that, and coinciding as thus does, and with the existence of a CTO, for please that perhaps and now that a or the paradigm *has been subverted*, any thence-thus discussion regarding that or a CTO is a) compromised, and b) eclipsed, and by indeed this the threat upon the, and/or a currency of, a set of beliefs/notions, stemming from the thus subversion, *and* any good subsequent discussion and debate which thence-thus ought please follow.

Please be prepared to couch the profundity of a fraternity laughing and at the good joke: Q: *Does the court jester have a mental illness?* A: *Who cares?*, and wholesale. And whether please we as a society, and *as a fraternity*, considering please mine own also deep respects and sincere regard *for* that fraternity, and medicine and medicines in general, are prepared also to *respect* that and this comedy, (which is an artform, (*and laughter being* the best medicine)), and to which I have *treated* that fraternity, and over the past twelve months, and respect also the fact that an alternate and now *proven* ideology exists, and also now, parallel.

Please be appreciative of the fact that myself is constantly referred to and back *into* the adversarial condition, even though, and *via* comedy, have

circumvented that dynamic, also irrespective, and all told, and the thus contradiction and of a fraternity *insisting* upon that dynamic, based upon the *existence of an MI*, whereas this the comedy, and the comedy *so well received*, points considerably, and otherwise, and to its, MI's, *non-existence*, the then thus discussion being at sincere cross-purposes, respectably, and regrettably.

Please, a response commensurate with this a subverted paradigm, and the perhaps and also ramification *of which*, and of which I can assure I am fully appreciative.

DEAR PROFESSOR [CENSORED]

This engineering graduate of [CENSORED] University casts his light now in writing, moreover. And setting aside a some of these our poetic licences, might and may I divert your attention, please, and to this set of documents.

For, I took psychiatry's pants down, and in a one of its clinics, not out of spite, sir please, nor planning, yet from out of the nature of a system which includes primal fears, among other factors, including an adversarial mindset.

The profundity of such, and it *being an already flipped switch, per se*, and shot in the arm of our philosophies *of* control, and some might say fair play, *and* human values, does eclipse any now fracturousness playing out at the coalface.

Which is to say please that such pointers *as* these documents do map out ever more kindly in the jetstream, than they do fluffing about here perhaps in the low clouds of non-discretionary government, and stonewalling.

And who's pen is mightier than who's sword, is a discussion which does pale, please, should we choose to look *past* licence, and concentrate upon consideration, and considerableness.

For and should a man with veto laugh, and to the line upon line of myself, towing the line, and myself being *subject to* that veto, irrespective, then such right to veto *is* forfeited, thus leaving the populace wondering all about the emperor's clothes.

I would like you to consider my point, also irrespective, and nonetheless, for and a purpose of influencing these on the ground procedures is not my forte, begiven please the legitimacy all-otherwise of this perspective.

DEAR BEYOND BLUE

Dear regards your witness to this thread. Other witness stand by at this terminal, and at point of entry *and* discussion. Please have it known, please. For, and via reams of documentation, dissemination, and publication, and of which, do I proffer also the following -

For, and for-of our primal fears, fears *of and for* the unhinged, fears for our own minds and well to doings, which is a wherewithal, do we justify, entirely apparently, and via these also ongoing discussions and experience, emotional blackmail.

We do such and for the specific fears and for-of, and as has been suggested *to* myself, *and to my face*, and *by* a female psychiatrist, herself cradling a personal mobile phone in her lap, that subjects of this system are or may well be 'dangerous', and for and to the also wellbeing, and safety, and or damaging to, the otherwise well-being of the (*and me to my*) unit, and *to a factor of prejudice*.

The fact that the actual psychiatric word, which is a made up word, and which means the killing and or murder and of one's parents, please begging yours, is not and hardly well-known nor publicised, has no real bearing on this matter.

The what of concern, and for the fact that hereon, and herein, and should and have we attempted *to* cut off the tree at the very base, and for that tree to have kept growing, fully purposed, and *irrespective*, and via also the care arm of that system, among other and profound factors, and for-of and irrespective *to* the MH system, is that it must near be acknowledged that self-determined is such a nature, and such nature is herein self-determined.

For and as for what has transpired, and in and of the clinics of psychiatry, that of a regaled and laughing psychiatry, and regaled by a one of its 'subjects', and priorly victim of its *attempts to* emotionally blackmail, do we turn to the adage, and the long forespoken, for human kind is 'animal whom laughs', and that 'laughter is the best medicine', *and* that I am Jester, and joker, and *the one who has been telling the jokes*.

And moreover, the fact that any laughing man lets another by, and through, is at the root of psychiatry's now desperate attempts to have a CTO nor lifted (and indeed extended), for is the severeness of a medical department wishing to save its face, a one already lost, for and as has and have I 'passed by' irrespective, and of, and from-of that Order, and Order of the State, for such and I do bring with me the rug that sits at the base of psychiatry, and its base rationales, which is that MI even exists.

Be it known please of the song of The Angels, '*Shadow Boxer*', as *does* a person subject to profound betrayal, box, and should that boxer even realise, whom, and in this case psychiatry, and Government intervention(s), and its blackmails, be what *is* internally threatening, for such is the result of all emotional blackmails, and *is the damage which psychiatry is doing*, and *in the name of care*, thus it being that exploitation of the distressed and of the meek and powerless, is and indeed a purpose and a *personal purpose*, which is to say that self-interest cannot be denied, and purpose of psychiatry, should it nor wish to desist and *from* emotionally blackmailing, the cutting off of faces despite noses, indeed denounce the practice, and now that it has laughed.

DEAR MIND

Dear please, these the facets of human relationships are as colourful and brilliant as they are prone to grey shades, following however patterns, and grooves, and oh to see eye to eye !

For these please, the attached papers, are yet to be shared with an entity brave enough, begging yours, to reply via email, let alone set aside time for a face to face meeting, except for Mind.

Please for relationships *with* my otherwise engagements have reached a new horizon, whereby it is *my* fault that he, the new nurse, is afraid of me.

And that he thinks that it is strategic to say so, and *to my face*, that he *is*, scared.

And which it *is*, advantageous, for to voice such open frailty and reluctance to instigate some poise and bluff, and in such (clinical) context, is a good step towards 'you're dangerous', and a Code Grey.

Such otherwise fruitless foray, being to cower and expose one's soft underbelly before a counterpart, has laughable effect, and in a man's world, of course.

And of course, his emotions are his problem, and no business of mine.

Honestly, and what's more, for to be unaware, please and unthinking and of the content of these papers, please and of the immensity *of* consequence potential, does-will perhaps feed into such bizarre dynamic.

And does justify please some perhaps input and from the industry, via making please the time to speak with me, either in person, and or at good least over the telephone.

Please and kind regards Mind, and please, for this your and my good entity is thus far, and in two and a half years of one-way communiques, the very only that which has replied.

NO LAUGHING MATTER

In the game of sanity and madness, this our accepted arbiter, psychiatry, does *possess veto*, and over its subjects, and moreover via the statement that those subjects lack *insight*, and in this case and into their (and so called) illness, and generally speaking. For and lacking insight is always a matter *of* perspective, which is to say that one does not and never does presume moreover to be the and always the smartest man *in* the room, whether that room be a clinic or otherwise, because a) one might not be, and b) if one is not, then one would not necessarily know it.

Hence hubris, which is what psychiatry does display, also moreover, and as a characteristic, whereas this is predominantly a characteristic of the granting and thus possession *of* that veto, as stated, and also the and a characteristic of the system which does shepherd and corral the otherwise waylaid, and *via* control, *and* via emotional blackmail, and locked doors, those waylaid, and by what we do accept otherwise as a psychological discrepancy. Which is our best and winning card, our minds, and *to* our own minds, mostly, (notwithstanding doubt), which means that we do fancy ourselves to outshine the tiger if needs be, and all told, and also generally speaking.

For the psychiatric discussion really needs to be a discussion of what it is to be human, and to be humane, not a door stop with what it is to be insane, which and as a system moreover and mostly is such, and begiven that it is an intervention model, and based somewhat and primarily perhaps and *upon* humaneness, which is the realm of the fine arts, and such deft tone as ever were deployed and or required. And which is to say: for-and though now that psychiatry *has laughed*, and to a tune, and to the tune of a one of its '*subjects*', and at the coal face of what is termed a

‘negotiation’, and a negotiation to *have* that subject nor *be* subject and *to* that veto, and force of Order, and Orders, for human kind *are* animal whom laughs, and laughter *is* the best medicine, so perhaps psychiatry is not the smartest man after all, and in presuming such did and does and has doomed itself, and by failing to lift that Order, and by dismissing all comers even before they have entered the room.

What I am saying is that any animal whom lulls itself and into its own senses of security, which all animals and beings, we may or might presume will do, yet, and as is covered in this series of articles, psychiatry, and after the fact, has performed also *mea culpa*, and via attempting to defend its position, noting that, and *as a defence in this case*, certainly, that ‘dolphins laugh too’. Which has been covered already and by Mr Douglas Adams, and in his grand tome: *The Hitchhikers Guide to the Galaxy*, and *is* a comment and *upon* hubris, and presumptuousness, and viewpoint, and comeuppance.

Does the great ape possess dominion in not only his forest of trees and concubines, yet across the entirety of the known world? For known worlds *are* fickle, hence General Rumsfeld’s known unknowns, and unknown unknowns, and we are known to go charging out *into* the unknown with encouragement and necessity and confidence, yet and herein and hereupon, and despite the fact that psychiatry *is* laughing, and to the line upon line of one of its subjects, does it display that hubris, and belies its own inward facing, and insular nature, and what we have is an industry characterised *by* veto, beyond and above all other facets, or factors perhaps, and the way that that veto is and has been thus far and hereupon exploited, and *is* exploited and in the name of that fore-being control.

For, and yet and now that it *has*, and incandescently, and incessantly, and for ten months straight, laughed, and has *forfeited that veto*, and yet still refuses to comply with commonplace sensibility, moreover best wisdoms, perhaps now is the obvious time to wonder, and what indeed does psychiatry think that it is? And to have the review tribunal stacked with thus, and the Royal Commission, as if it is not a part, nor *of* moreover the primary and the dominant, and thus whom, too, and is also responsible for its *own* part of this the symbiotic relationships which are of the psychiatric system, *and* when negotiation with a man with veto is no negotiation at all.

Psychiatry is blinded, blinded by its hubris, blind to the possibility that other minds and sensibilities, and or that an alternate consciousness might crack it up, which it has, and yet and has thus far remained, it's officialdom, and for the best part of a year, blind too to this discredit and recrimination. Thus for any entity that *will not be*, nor *feel*, compelled, and *to* act, ie: lift an Order, and a heel from a neck, and after untold mirth, perhaps should not be laughing at all, and in the very first place.

And thus and hereafter all such discrepancy *of* natures be and are, those which do doom the also here-all *in*actions, and for merely not acknowledging that such full self-disclosure could occur, transpire, and can, and ironically, be not much more so poetically resolved, the relationships, and-for were, and are and into laughter, such so all needs be sufficiently, and any near said discrepancy, are and is there-thus, consequentially dissolved.

LET'S TALK ABOUT FEAR – REGALING PSYCHIATRY

Dear [CENSORED],

Please rather, and how do you do, me appearing facelessly at your good symposium this upcoming Thursday at [CENSORED] Gallery, might I herein relay a story, which is of playing court jester, and before the court of psychiatry, such court being the headquarters *of* fear, fears, fear mongering, whipping up fears, manipulating people's fears, and fear moreover, posting as it does, the human analytics, under languages only relevant indeed *after* a subject *has* been emotionally blackmailed, such and rendering said subject perfectly docile and compliant.

For, and all the jokes were *about* fear, he, the sitting psychiatrist, near peeing his pants please at this the story, among other stories, of augering one's sustenance and from pointing sharp sticks at otherwise unlit instances of fear, dear loathing, and states of need. For, and at a good half past twelve, midday the other week in the city, I did bail up a man point blank and say: 'I am more afraid of you than you are of me, I am hungry, so give me your lunch', which he immediately and readily did.

The relaying and of this story *to* psychiatry resulted in *such* fits of laughter, *and* guilt, as I did milk from its stock control lever all manners *of* mirth and capitulation, such that the RANZCP did resign, and open a door and *to* the VCA, such that my discussion might continue, and well enough indeed over the head and heads of this our current paradigm of suffering, opening doors as it does to indeed responsibility, and the responsibilities that does power and privilege indeed *owe to* subsequent parties, and events subsequent *to* and in this instance its interventions, and decision and footfall moreover.

Which is to say, and so dear to make your acquaintance, for and what I am about to say might well spook horses, for and I am banking on indeed the frolicking foal being herein enclosed in the complimentary wrapping paper / frameable art. Because when and we do, laugh, and *in* the face *of* fear, for yet and yes please my dear one does feel a mite bit relieved when indeed the subjects and thus the direction also faced is, and during such regalia, quite the opposite to the, and not so such as close to an edge.

Hence 'edgy'. Which oh so is the stock demand of publishing houses, and thus therefore a reader, and readerships, that I were wondering if indeed psychiatry just likes looking in, and *upon* people's fears, and from a safe distance, hence please the terrible, yet and terribly incredible gulf and disparity between the perhaps talent, and certainly means and oft articulation, between he *and* a subject, which is why only the relationship exists, *for* its disparity. And somehow of course it does come upon the poorest to allay the also fear in the good heart of near everyone, should he be prudent, and know what to say in order to moderate *and* allay, and in near entirety, the blind fears of a captor.

SANITY'S MAVEN

The and bordering upon a fundamental belief, and in the exact and inexact existence *of* MI, Mental Illness, for and via a laughing psychiatry, and laughing entirely sufficiently, and over a good six month period, were for this to, and for the perhaps paradigm, and new paradigm *of* suffering, to be ushered in, please, for is and also via the logical and philosophical *of* laughter and as our best medicine, and humans *being* the animal whom laughs, do we begin please to make up the mind *via our sanities*, indeed rather than this please study such as pointless *as* madness. Which does point, such revelation, to this threat upon the said belief, which pans out rather eloquently and to the mind being *made up of confidences*, moreover, which and yes if are also threatened, *meanings*, is happy, *the mind*, to appropriate and *adopt* the specified and priorly widespread 'mindset', upon which does psychiatry reside, fundamentally, *and* theoretically, *and* philosophically.

Which is to say that 'constructs of mind' can fail, and can be propped otherwise and *by* a 'mindset', *irrespective of that mindset*, or mode, and some such called failsafe mechanism, or an automated and semi-autonomous routine, which is the same routine as I did herein choose to maintain, of acting the joker, which is the most of a spanner in the works of the machine. For and the analytical set of languages need *be* inhaled prior to these one upon one meetings, and sprayed less around the traps as any other set of jargons, for now that we are moved on from 'belief' and back *to* 'construct of mind', then perhaps we need no longer believe in MI, and so on and so forth...

Evenly speaking, and what greater wish for other than tendencies *towards* harmony, and that the intervening-machine be as well-oiled as good machines are,

which is not to say that people do generally like to have things their own way, and such does introduce a complexity and complex of emotions revolving unfortunately around the primal and the fears, and fears being personal and of personal purvey, and centred also around belief, such do we please introduce an instance whereby, and despite undue pressure and duress, did the subject nonetheless, educate, entertain, and maintain the floor, and such and can to this day, be justified, and to pose this the question: Who else would like a wang at adopting also a voice of reason, and maven status, and now that psychiatry has laughed?

SOMEWHERE ALONG THE LINE

‘And the oppressor is *very* cagey about lifting his heel from anyone’s neck’,
The Impossible Gentleman

This summary, for please, and to this, and I do know, many other minds, for does this case quite and too feasibly demonstrate and provide a proof of the critical failing of our current understanding and rationale and of what is chosen to be called or nominated as ‘mental illness’ (and all ramification of such nomenclature), and which I would and do otherwise and denote as our ‘*paradigm of suffering*’.

Please, and though and as an also critical aside, I can only and but lay praise at the feet of a system which *does* provide an often good, to acceptable, array of relationships thus providing arguable support to individuals and people suffering acutely, and does thus allow an individual to *have* relationships otherwise, whereas perhaps an and the also weight of dependence would-does preclude regular interaction and tendency all-round *towards* a harmony, or harmonious resolutions, and recoveries, and from expected stresses and the strains of living.

However, for it is the open-endedness, and *thereof* diagnoses, and how indeed we understand them that is of *serious* issue here, for and via our highly lauded and noted to the point of cliché, *adversarial system*, one side of which is indeed a one, and a powerful entity and party at that, *insisting, gamely insisting*, that it’s subjects speak and directly to and from a defensive position somehow expecting it to, its subordinate(s), and at base, justify it’s and their own existences, ostensibly; aka *make a case* for it’s *sanity*, and *sanities*. For also in this opaque mix of tricks, and trick linguistics, is, of course, *emotional blackmail*, and why indeed does this exist is a question which does arise and does conversely prove the character failing of the system and its officers, which does find it *necessary* to engage in thus, and the thus

moral turpitude of those officers which do otherwise indeed carry out it's consequence, the consequence(s) of a failed, and failing rationale.

For, and the phrase is '*...somewhere along the line...*'. For somewhere along this line, this line of constant and consistent improvement, which for we all do strive, for and as much as '*three steps forward and two steps back*', and '*good, better, best*', are highly regarded and general understandings of the way in which lessons *are* learned in these our broader worlds, for in some good fact somewhere along this line, and herein I will relay the good detail of some of these engagements, of late, for indeed proofs *are in* puddings, and, as prior stated, I have not one moment's interest in providing an argument *for* a sanity, only and hereon providing some summary of the moments whereby I did and trounce *any number of officers* of this system, all told and during and under still the unresolved slights, being they, among others: 'how is your mother?', and 'I have been speaking to your sister'.

Please, and I do quote here, at length, from an essay composed some fifteen years ago:

"Anyway, we were in this meeting – him, I, and this smug, wish-wash sort of a so called doctor whom you just knew loved having all of his fish swimming around in a really tiny barrel – and my big mate was swapping roles all over the place, asking tricky questions, making jokes, and really trying to trip me up to get a better idea of where my mind was at. What a clown! And then he asked me this question:

'Could you, implant a thought, in someone else's head?'

Now this is just the sort of impenetrably ludicrous type of question you get asked inside psych wards because the officers of these wards really *do* reckon that *you* really reckon that you can actually do stuff like plant

thoughts inside people's heads, or have them plant thoughts inside yours, which, however, in actual fact, you can. It's called suggestion.

Though in response to such a question in such a situation you don't want to say: 'Yes, that's easy, of course you can implant a thought in somebody else's head, it's called suggestion', because if you say that, they will think you are being smart. You can't say such a thing in a ward, because it disrupts the power distribution in the room, which leads to things getting rather hairy. You could be advised not to challenge a power structure to its face by appearing any smarter than those who might want to incarcerate you.

If you say 'suggestion, obviously', then they get all chummy, and try to be your mate, which one does *not* want, so you try to think of something plainer and more slip-slide to say, and then because you are appearing absent minded, they get suspicious, and get the impression that you are a crackpot. I didn't answer anything. And that's because I was thinking, *hard*, about the awesome possibilities of that question and had to refer that one up to Jung. How would he have replied? It was *for my mind*."

Chummy. And is a very dangerous thing to happen, such, and in a closed (and locked) room, for and indeed when sufficiently a, and / or the, entrenched power distribution is still *at play*. For and just now recently, the and my, please so called 'case manager', were on the phone to myself *insisting, repeatedly*, upon helping. 'How can I help?' he stated time and time over, half a dozen times, and not too much deeper into the conversation he did *trip over his words*, which is a *definitive indicator* of something being amiss with one's base rationale, the rationale for the phone call, or indeed the entire rationale for the interaction and engagement. I did and at this stage in the conversation inform the case worker that I had in fact

indeed 'won' the conversation, to which he protested, profusely, and *entirely unnecessarily*, for I informed him that there were just no way that I was going to lose a stoush whilst I was sitting at and in *my own home*. The insistences, and *game insistences*, continued, much the much insultingly, such and until only I told him that he were '...in my ring'.

Subsequently, and *sincerely moreover*, and upon our otherwise first meeting, a couple of days later, (and this is setting quite aside the *levels of suspicion* these officers have for and what is merely misunderstandings, and suspicion of their subordinates, indeed when does their ground merely *get* shaky), the said same officer were in *fits of laughter*, exclaiming his now mirth and moreover obsequiousness, wanting indeed to have good access to my file of writing, for hope that it too contained equally uproarious and entertaining content. No sooner, as does the chum, remove his fingers and from your pie, than does he thus wish to sniff further for some also insights into it's good ingredients and recipe, moreover for-of his now *imposed* respect, imposed by the fact that he cannot help himself laughing, indeed enjoying his such and so hitch upon the rise.

In another case, a psychiatrist, having *been* informed, indeed *warned*, and by myself, that unless there were indeed a change in the method of proceedings that things *would get hairy*, as they well do, (and did), and when a telephone call and from myself were answered *by he*: 'What can I do for you? – um er um er – how can I help?'; which is frightful, disingenuous, and duplicitous. Of course, such so, is indicative of the also tripping over of oneself to indeed *gamely insist* that he *must be in control*, for otherwise how else would he indeed *be* justified, indeed *self-justified*, to *near* carry forward with such a dynamic.

For and I do and still and do stand by also the document '*Junk Mail*', and for also levelling some criticism indeed at the MHT, and Counsel, for indeed metering scant

discipline *to* the Services, and for indeed abandoning sensitive material *to* the public domain, and as a *matter of course*, indeed seeing a *need to argue* about how indeed one does *deliver mail*, thus questioning OHMS.

And, of course, how and where sourced the *right*, and to have a heel on a man's neck *and* find humour in the situation, is quite beyond me. Though, and I do know that it is this, and his, the psychiatrist in sincere question, and the community's completely misplaced belief, and *false belief, in inherency*, that does condemn his actions, his good lack of control, and the mechanism, for indeed as is the medicines he such so desperately reluctantly (and *guiltily*) swallowed, is as also, your good please the basis for the MHT's considerations, indeed good and *uncommon* sense.

Might I too also add, that always, and along this trajectory, have I invited psychiatry to the discussion table, and always near always have I been fobbed off, ignored, and derided, and to a and the point of plain stonewalling. '*Psychiatry is guilty perhaps of protecting its turf*', is recorded on their website, or were, and please until I did endeavour *to* engage. What we are speaking of is a 'profession' near hell bent, *to the point of emotional blackmail*, of indeed protecting the very mechanism (and belief) which does allow it to manipulate the fears of the community, and indeed devour it's subjects, and maintain a super-valency, *and line its pockets*, and via swinging it's and that spooked community's all guns *in the direction of* the otherwise waylaid, thus and gripping tremendously to the now defunct idea and *of inherency*, should indeed this it's entire castle implode *to* dust, and fall and into it's own cavernous, and empty, moral vacuum.

POINDEXTER

Psychiatry is based primarily upon catastrophe, and inquisition, thinking itself mild enough to indeed, and wizened, (whereas this is a muchly of it being accustomed *to* having the meek and the powerless trotted before it, and at its behest), and to think itself as (and going by this the latest series of incidents, which did and have transpired in now what is *my* clinic (and since the dear doc could not dare call a meeting, for I had to do so, and then call it off, and closed)) and as maven of sanities, when the art department is ever-silently looking in, and surveying the whole sordid and sorry messes of men whom simply *cannot* walk a talk, and whom are also near silently walking back and forth, not nearly warm, until this Jester did spring one upon them, and from behind, speaking into the face which it is now trying to save, the one it had already lost.

And I'm not joking, for the sorry flop of a man, slouched in an office chair, and telling me between bouts of checking out my shoes and the floor and stuff, and when *the* bastion of the humanities and the humane, and my act, and from which stemmed its prior and unbridled mirth, and which dwarfs the history *of* psychiatry, the arts, and as a discipline, *is nothing if not* (and since psychiatry *did* laugh and incandescently and at Court Jester's jokes), pithy. For and a supremely serene gentlemen did once opine that human kind *are* 'animal whom laughs'— and for thus does psychiatry via its worm like authority figure proffer, and as an antidote for my cast iron argument (which is that the *being* of joker is the one telling the jokes), that 'dolphins laugh too', can you believe? No, I said, coyotes laugh, as do kookaburras, you must be a bird brain, and words to that effect, for if you are presuming a sense of humour in a porpoise, then I say 'so long, and thanks for all the fish'.

LAUGHTER IS THE BEST MEDICINE

A man, an entity, a sworn medical practitioner, laughing, (*and his offsider, laughing*), and to the line upon line, towing the line, and for half an hour straight, and laughing himself sick, (*and the near entirety of staff members encountered at that clinic and over a ten month period, also laughing*), and to-of the humour and of court jester, and when that jester *is and is legally required*, and for fear of sanction, and via *force of Order*, and to *comply*, generally speaking, and *with his*, the practitioner's *decree*, which is *not* funny, Orders, and otherwise, then and of course and as *of Mythbusters*: 'I reject your reality, and substitute my own'.

For thus and the fraternity has *accepted my reality*, indeed *come under my powers*, if only and *of mirth*, yet and laughter *being* the best medicine, is and has (*and as we all are and at this time of all-mutual concern, in need of, comic relief*), availed itself indeed of *my*, respite services, which for please let us not underestimate the *courage*, and *tremendous preparation* required indeed to administer.

For, and emotional blackmail will send an any mortal, and *into* a purgatory, should he indeed accept the proposal (which is to *reply to an email titled*, and to indeed reply *also* and to the and a clinically also administered question: *how is your mother?*), and thus, and for an every other reason, those being statements of and to the absurd, I am not nearly interested in arguing a case and for my own sanity, moreover, proving it should I herein be required to do so, and via a and of the grounds hereon of *returning myself* to and back into, and via also our community's and the fraternity's good natures, an, and a realm of, humanity, and the humanities, for when indeed a power, and *has* the power to send one insane, to that power one

does not re-apply in a *revisionary and speculative mode* such as to be *'let back in'*, indeed rather one re-enters the room from and of one's *own volition*, hence *self-determination*.

Please also and for I do and herein quote also and from my 2016 essay titled please, *'Dear Tandem'*:

'Professor Baron-Cohen states that an 'undiagnosis' would take *'just as thorough re-assessment of the individual'*. Yet I postulated that indeed the way to *enact* an undiagnosis is not to sit back and re-answer the questions, but to supersede the very person handing them out, the diagnoses, to *transcend the stipulations of psychiatry*. And it worked! I furnished my professional with a six page treatise outlining the concept then I carried it out. I dismissed him. His final words to me as I departed the clinic for the very last time were – *'thank you'*. What could possibly be errant of one's spirit at the drawn awe of sanity's maven?'

Thirdly, and via also the report and incident of *'Junk Mail'*, whereby I did and also prove a good aspect and of *superseding a stipulation*, a legal stipulation, (and though by provision and/or proviso), and was and were indeed when the Services did abandon their specific Report and *into* the public domain, and via leaving it half hanging out of a letterbox, for and indeed if an individual *is subsequent* to indeed a threat and of *being* ostracised, (and at the very littler consequence), then indeed he *will be the judge*, and of his thereon future(s) and thereby, for us and thus are and were entering into trust elements and of said Services and their duty(s) of care.

And though for please should we be and speaking and of near primacies, and those of belief, then please feel and well free and to re-think, for-of irrespective of these

and the outcome, and of this a forthcoming Hearing, the true and truer contexts of these events, transpiring as they indeed have, and how indeed they reflect upon bigger pictures, and the base rationale that we do and have and will-must near on apply, and to 'abjectivities', for though and of course is at issue our full proposal, (herein in question), that those 'abjectivities' are *and be* 'ever-mores' moreover signalman's arrows pointing indeed *in the direction of wisdom*, (sufferings *being* the and a near eternal pre-occupation of theology and the smith alike), and may well be for all other time required contemplation.

A SPOONFUL OF SUGAR

Fairly bearing wisdoms aside, for and apart from this the hanging of a hat and half on the fact that I am and / or were climbing ladders rather indeed than laying down to a foreman, and that writing herein in existence, and ranging into the philosophical, and theorem and theistic, and of the MH system, (and critique of course also as well), while also engaged in a clinical setting, *in practicum*, can sometimes not auger so brightly.

And given the also newness and new variety of pugilism now being experienced in said clinic, which is of having a doc laugh *and* feel guilty, and *at the same time*, for please the energy and otherwise ingredients necessary to place such humour on *such an edge*, and in such a context, (such a sizeable spoonful of sugar), and before perhaps what is innately, and certainly institutionally more powerful entities, is now nearly beyond mine (despite the privilege) own available stamina and as court jester to maintain.

And these, and other written proposal and making of case, and otherwise representations, I do have in, and at all sorts of levels of responsibility in the industry and otherwise, and for we have '*Catch 22*', and such *is* mentioned in correspondence, along with my written work, and *to* Professor and Mr Fels, along with appeals for academia to look closely at relationships across the fraternity of MH, and specifically on the subject of, and with and through the prism of the organisational psychologies.

And as much *as* the nature of the discussion need to my mind required, and to make perhaps an inroad of sorts, *and* potential ramification(s), and into what I could define as complexes, and across the board, for ever should there be one,

discussion or ramification, and at the necessarily highly discrete kind of moment or moments I would need surmise from this a position of somewhat solitude that would be required for at least a some resolution, would be or were, and are and described to me to be, or as to be, 'highly politicized'; please let be not the personal also overly political.

Yet and please, for via the conduit into Orygen of email I did propose, and though, and to Mr McGorry, that the 'bridge between Seymour and Puckapunyal were a bridge too far', which set, and sets my limit and of jurisdiction to comment at the very same time as assuring that I had thought deeply of the reach of these waves of communication so prevalent in our new and newly also hyper-connected societies, and would and how (new) senses of humour, and sincerely otherwise saccharine replies, and combined with our best also medicines, and our seemingly full acceptances of thereof, *and without action nor review*, places balances *into critical voice*, as much as a move: 'check', and nor wishing still to encourage resignation in a counterpart (or opponent (as of adversarial systems)), (or and by seeking such it were such that he nearly were foe), and is this, the said same balance of '*Seven Types of Ambiguity*', Elliot Pearlman.

I can only slice the garnish so fine, and a please for insistences, irrespective, and in full lights, yet crossing and into these ideals and realities, which have helps coming from and to and in all directions in communities, and during this the pall and umbrella of pox, and otherwise, and though *and the response and responsibility*, and of the medical fraternity, for and it being super-incumbent, is as much more-extra worry as it is perhaps giving needingly adversity yet perspective, and *perspectives to* contexts, and to these any, and please certainly many, of my also lights and discussions.

In short, no mechanism (apart from the lifting of an and the Order, for good instance) is or would there be to say 'yes I acknowledge your best medicines are running low, pardon me please these insistences also of asking the inane, and the practical of intrusive behaviours, and line, and attitude', yet an audience / profession which does not know *why* it is laughing, and without near invite, and is laughing at its own expense, and *laughing itself sick*, and given the context, is an audience also needing of good respite.

AFFORDING FRAILTY

Treatment these days, psychiatric treatment these days, is as much the documented interplay between, because not so much in Freud's day, and I'll get to that later, a psychiatrist, and documented by his offside, riding shotgun in a Formica office full of smoke and moving mirrors, on a laptop, and resting on his knee.

And the writing is that he does on that laptop indelible, in as much as psychiatry does not process in Word, for its documentations are not apparently editable, nor is it aware, self-aware, and this is the between of sadnesses, of the superiority complex of a scorpion vs the poise and justice and thin thin skin of an *inferiority* complex, which the scorpion legally put there.

Because in Freud's day, he flanked behind and alongside and at the shoulder of grief, sitting behind the left shoulder of his subjects and looking the very same way, for as not to lock powerful eyes upon those whom and whose are hurting, and such and he did not near think he were fording on the back of an amphibian, yet travelling downstream steering from behind.

And what modern psychiatry, and the well-being industry which rests upon it, does, as a whole these days, is damns its subjects with abject ever-mores, guaranteeing a deepening pool of serfs, choosing another frog, and another frog, and another frog, ad infinitum.

Which is why, and up until the, and this point, where we are *profiling children*, the industry is expanding, rather than bringing about its own obsolescence though effective measure, and an acknowledgement that a human frailty is as of our very natures, not something to be exploited via a vexed question delivered eye to shy eye.

TIDDALICK THE FROG

Once upon a time, a long time ago, in the Dreamtime, lived a frog called Tiddalick.

Tiddalick was the largest frog in the entire world. One very warm morning, he woke up with feeling very, very thirsty and started to drink the fresh water. He drank and he drank and he kept drinking until all the fresh water in the entire billabong was gone!

When the other animals arrived at the billabong to get their morning drink, they found it was all dried up. This made them very sad.

They knew Tiddalick the frog had drunk all the water. They knew they needed to come up with a plan to get the water back, but they didn't know how. They thought and they thought and they thought until they realised that the best way to get the water back was to make Tiddalick laugh. If they could make him laugh then all the water would come spilling out of his mouth and back into the billabong!

The first animal to try and make him laugh was the echidna. She rolled herself up into a tight little ball and rolled down the bank of the billabong like a bowling ball! The kangaroo laughed and so did the emu, but Tiddalick didn't laugh.

The next animal to try and make Tiddalick laugh was the wombat. The wombat stood up on his hind legs and danced around in a circle until he fell over in the dirt! The Galah laughed and so did the goanna, but Tiddalick didn't laugh.

The next animal to try and make Tiddalick laugh was the kookaburra. She perched herself on a branch close to Tiddalick and told her funniest story. It was so funny

that she burst out laughing! But Tiddalick didn't laugh. He just sat there with his big belly full of all the water.

Finally, the snake decided to try and make Tiddalick laugh. She started to dance and dance, wriggling and squirming all over the ground until she eventually tied herself into a knot. The knot was so tight that she struggled and struggled to untie herself but was stuck! Tiddalick watched snake struggle around, trying to untie herself, and let out a small chuckle. That small chuckle turned into a rumbling in his tummy before it turned into a great big belly laugh! The water came gushing out of his mouth and filled the billabong back up once again.

Afterword

The upshot were – two men and a nurse sat sitting straight enough in a near-featureless room; and it were proposed, by myself, that if the man were *not prepared to concede a point*, then there were not much point talking, either, and in any case; he then-after relinquishing control, and at the flick of a pen, and no sooner than needs be, psychiatry, holding out for three years, all the while the regalia continuing; a regalia and an *extreme energy investment*, and-for almost immediately then-thus, and *upon* discharge, landing myself in ICU, *and with a pure exhaustion* (from moreover going psychiatry's *dancing bear*), and of and at the very same hospital and campus.

There's a hole in my bucket, there's a hole in every man's bucket – dearly please, make what one will of these assertions, this dissertation, please being of and for, and please may I repeat, all other time required contemplation.