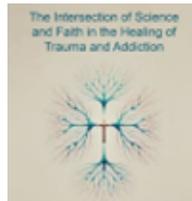


# The Hollow Core of Modern Psychiatry: Where Have the Healers Gone?

**Jeffrey E. Hansen, Ph.D.**



Let's talk about psychiatry—the most fragile, insecure, and pretentious discipline in all of medicine. A field so desperate to be taken seriously as “real medicine” that it hides behind a veil of Latin phrases, fabricated diagnoses, and a DSM that grows fatter and more absurd with every edition. Psychiatry doesn't just lack scientific integrity—it lacks spine. It's a profession populated not entirely, but overwhelmingly, by doctor-wannabes who covet the stethoscope but are stuck pushing pills for problems of living.

Take Dr. Robert Spitzer, for example. Revered architect of the DSM-III, he helped launch a whole new era of psychiatric categorization. He was hailed as a reformer, someone who brought “scientific structure” to a chaotic field. But here's the truth: much of the DSM-III was cobbled together by committee consensus, not clinical evidence. As British medical anthropologist Dr. James Davies uncovered in his damning interviews, Spitzer openly admitted that diagnoses were voted in and out based on popularity and opinion—not hard data. In short, psychiatry's holy text was written more like a political platform than a medical manual.

But it gets worse.

Spitzer was the same man who helped de-pathologize homosexuality in the 1970s—arguably his most courageous and science-aligned moment. Then in 2001, he published a study suggesting that highly motivated individuals could, in some cases, shift their sexual orientation through reparative therapy. The backlash was swift and brutal. The LGBTQ+ activist machine turned on him, the APA recoiled in horror, and Spitzer—once the rebel reformer—caved like a paper straw. By 2012, he publicly apologized for the study, saying he regretted it deeply. Was it a sincere reevaluation of flawed methods? Maybe. But to anyone with eyes, it looked like what it was: a spineless retreat to protect his legacy.

He folded. Gutless wonder.

And let's talk about psychiatry's larger track record. Joseph Witt-Doerring, a former FDA reviewer and courageous whistleblower, has laid out a brutal case: the field has consistently pushed psychotropic medications with little regard for long-term outcomes and overwhelming evidence of harm. The SSRIs that were supposed to revolutionize depression? We now know



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they perform just marginally better than placebo—and come with sexual side effects, suicidality risks, and long-term withdrawal syndromes. And yet, they’re handed out like candy.

The industry hides behind jargon and peer-reviewed garbage that’s little more than pharma-sponsored marketing. It’s all a farce—a house of cards built on the illusion of “chemical imbalances” that were never proven and yet were used to sell billions of dollars of meds to vulnerable people looking for hope.

And if you dare speak up? If you challenge the orthodoxy? You’re excommunicated.

Ask me how I know.

I published articles critiquing this exact mess—challenging the overprescription of meds, the lazy diagnostic culture, the ideological capture of mental health—and I was promptly deplatformed by CMDA. Let that sink in. A Christian medical organization chose fear and conformity over truth and courage. They folded, just like Spitzer. Just like the APA. Just like every institution that’s afraid to offend the new high priests of ideology—be they corporate or cultural.

But this isn’t just academic for me.

I lost my twin brother to the tragic aftermath of psychiatric misprescribing. He carried deep trauma. There was a time when the meds helped him. But they were kept going too long, changed too often, or carelessly stacked—and the system never really addressed the core pain underneath. I can’t say psychiatry caused his death. But I will say—without hesitation—it contributed to it. And I’ll say that with my whole chest.

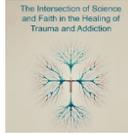
And I’m not just a grieving brother—I’m a survivor myself. As an identical twin with a shared history of complex trauma, I too wrestled with the fallout. When life hit hard in midlife, I reached out for help. At first, the medications helped. Then came the overprescription. SSRIs that numbed more than healed. Benzodiazepines prescribed long-term with no warning of the storm to come. I never abused them. I asked my prescribers if I should taper. No, they said. Use them as needed. You’re fine.

They were wrong.

I developed akathisia. Sleepless nights. Crawling nerves. A nervous system in revolt. It added years to my healing. It nearly took my life.

My brother wasn’t so lucky.

So no, I don’t trust this system anymore. Not as it’s currently run. Not while it remains in the death grip of pharmaceutical companies and ideologues. And not while it keeps punishing anyone who dares to say the emperor has no clothes.



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I'm not against medicine. I'm not even against psych meds when used responsibly and sparingly by people who actually give a damn. I know good psychiatrists. There are faithful, grounded clinicians out there trying to hold the line. But as a whole? Psychiatry has become the soft underbelly of modern medicine—bloated with pharmaceutical influence, terrified of controversy, and utterly lacking in courage.

So I'll say it plainly: The DSM is not a Bible. Psychiatry is not hard science. And most of what passes for "mental illness" today is better understood as trauma, meaninglessness, disconnection, and unresolved pain—not brain defects needing pills.

Spitzer caved. The APA caved. CMDA caved.

I won't.

And if you're reading this and you've been gaslit by psychiatry—told you're broken, diseased, disordered—when what you really are is wounded and human?

Don't buy their lies.

You're not a disorder. You're a person.

And there's a better way.

—Jeffrey E. Hansen, Ph.D.

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