

# THINKING ABOUT THINKING or *How to free yourself from a lifetime of being mentally manipulated*<sup>1</sup>

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This essay is not for religious fanatics or new age ideologues who refuse to accept, against overwhelming evidence, the fact that *homo "sapiens"* are a species of ape, with more than 98.5% of our DNA being identical to that of chimpanzees. For truly sapient readers who are willing and able to accept the reality of our present insoluble<sup>2</sup> predicament, here it is in a nutshell:

1. Human beings are biological organisms subject to the laws of Nature. We share the same DNA coding as all other living creatures. We cannot survive without the ecosystems we were evolved to live in, the same ecosystems we are now destroying at an exponential rate. There is no evidence humans were supernaturally created by some magical being(s) who gave us a divine "right" to consume, exploit and poison everything around us indiscriminately. That is simply a delusional, if conveniently self justifying, fairytale.
2. By means of random mutation and natural selection we, one particular species of ape, evolved a cleverness exceeding that of other animals. This freed us from many of the constraints (predation, infectious diseases etc) which previously kept our numbers in check. It enabled us to harness a one-time windfall bounty of fossil fuels to greatly increase our food supply. These have caused the human population to explode to plague proportions.
3. World food production has flatlined for several years and will decline soon due to multiple insults - principally various constraints (eg petroleum, water, fertiliser) and climate chaos. Humans now face a guaranteed massive die-off this century because of our failure to transition to zero emissions renewable energy systems and a steady state economy. Business as usual – the use of fraudulent schemes to delay the inevitable demise of this existing corrupt fossil fuel and greed based GIMME<sup>3</sup> establishment - is causing a runaway greenhouse effect<sup>4</sup>. Record breaking weather extremes have been occurring year upon year and will become exponentially worse. This will eventually destroy our entire agricultural capability along with any remaining natural habitats and ecosystems we might possibly derive sustenance from, thus rendering ourselves extinct (along with the majority of other species on this planet – the sixth global mass extinction).

For further elaboration of these matters please see:

<http://guymcpherson.com/wp-content/uploads/2013/10/1.WhatIhaveLearned.pdf>

<http://guymcpherson.com/wp-content/uploads/2013/10/2WhatWeShouldbeThankfulFor.pdf>

<http://guymcpherson.com/wp-content/uploads/2013/10/3WhatRemainstobeDone.pdf>

If there is no hope for humanity, what is the point of this essay? Firstly, as we agonisingly attempt to come to terms with our own self inflicted demise, achieving an understanding of how we arrived at this horrific nexus may provide a worthwhile cathartic effect. Secondly, such an understanding of human pathology will be absolutely essential to posterity, if by some unexpected "good"<sup>5</sup> fortune a tiny number of humans somehow make it through this impending genetic bottleneck to repopulate the planet. Repetition of our past transgressions by future survivors will guarantee human extinction in the longer term. But how can future survivors avoid the pitfalls of the past? To do so they need to understand the pathogenesis of our mistakes. It has been said that the only thing we learn from history is that we never learn from history. It is a glib quote which may very well be entirely correct, nevertheless if we do not at least try to learn from our past mistakes, future failure will be guaranteed.

How did we create this horrific situation? By our destructive actions, our bad behaviour. What facilitated our bad behaviour? We justified our bad behaviour by employing self serving narratives and myths based on dysfunctional thinking driven by an overweening sense of entitlement. What is dysfunctional thinking? Dysfunctional thinking is thinking based on flawed perception, on no evidence or on false "evidence" and/or on distorted reasoning. Dysfunctional thinking is not self correcting and leads to rigidly held belief(s) in false paradigms (ie delusions) and eventually adverse outcomes.

Conversely, proper thinking, what we (RW and GC) term "eufunctional" thinking, has the opposite characteristics. Eufunctional thinking is based on accurate perceptions of reality, on evidence which has been properly checked and validated and on logical interpretation and reasoning. Eufunctional thinking is self correcting (ideas can be modified or changed if better evidence comes to light and/or more sound reasoning becomes available) and ultimately leads to paradigms which most accurately reflect objective truth and reality. Furthermore eufunctional thinking *must* be guided by a strong ethical framework<sup>6</sup>. In order for individuals to promote the wellbeing of greater society and the greater planet, we must consider the short, medium and long term consequences of our actions on other people, other species and the environment. In short, we would define eufunctional thinking as reality based thinking guided by ethical principles. Unfortunately, eufunctional thinking is not easy to achieve. Furthermore eufunctional thinking inevitably places certain behavioural demands on the individual in order to achieve worthwhile long term outcomes: patience, restraint, sacrifice, diligence, discipline, perseverance, fortitude, reliability, trustworthiness, cooperativeness, fairness, kindness, generosity, empathy, compassion. Does this all sound familiar? It is how your grandmother said you should behave! How wise was she!

Examples of false paradigms based on dysfunctional thinking are:

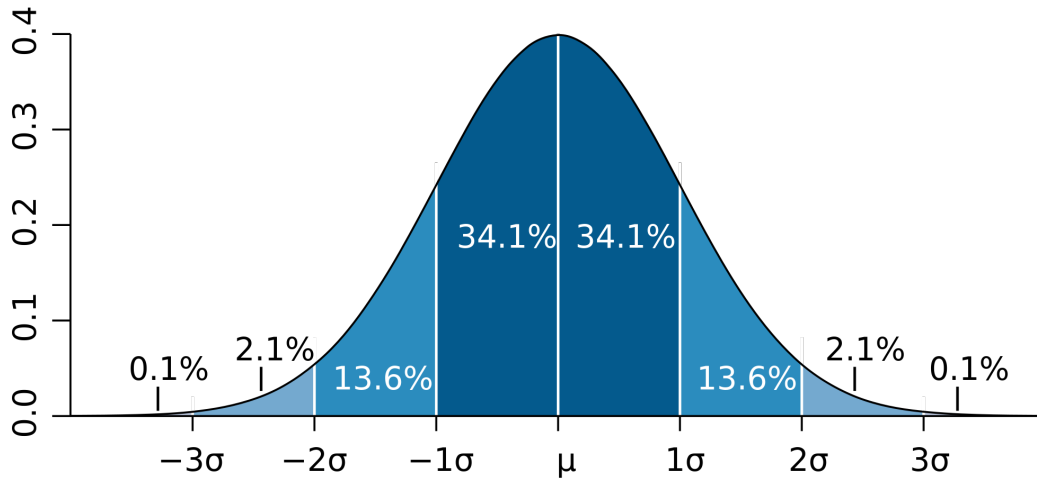
- All the accounts of every single religion regarding the creation and nature of our universe. These were all based on wild guesses and fabrications by ignorant ancient anonymous authors with no understanding of Nature
- Neoliberal economic theory. This is based on greed, false assumptions (eg humans always make rational economic choices, the free market solves all problems) and venal stupidity eg denial of externalisations, denial of the laws of thermodynamics, denial of the finite size of our planet, failure to understand or accept the essential necessity of adequate net energy inputs
- Technofantasy "solutions" to our predicament such as limitless cheap fusion (or "harmless" fission) energy, hydrogen as a fuel, mirrors in space to counteract global warming etc. These are based on hubris with no understanding of true science, the magnitude of the problems we face nor the factual constraints imposed by the laws of physics, chemistry and biology.

How did such dysfunctional thinking arise? Before we attempt to answer that we need to ask a number of other questions. What is "normal"? What is "abnormal"? What is mental health or wellbeing? What is mental illness or disorder?

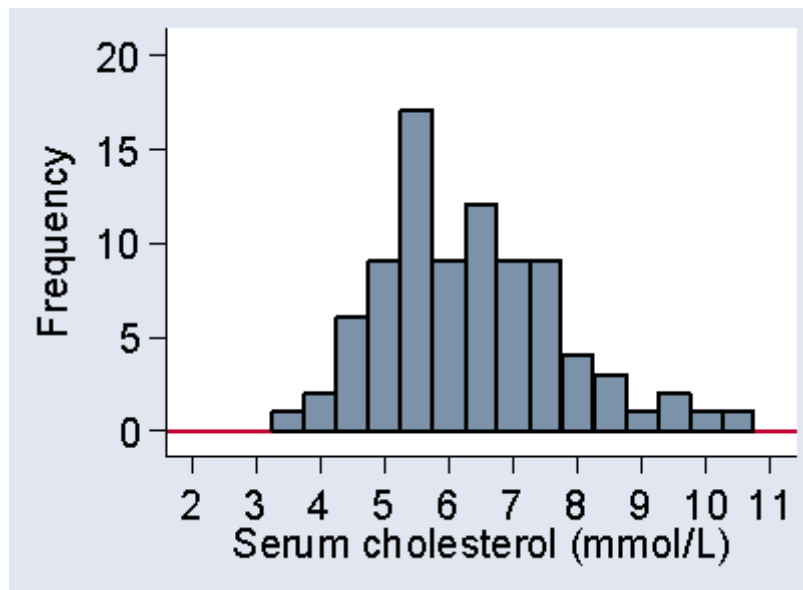
### **What is "normal"? What is "abnormal"?:**

Let us consider some examples in the fields of sociology and medicine as to what we conventionally regard as "normal". Statistically in some disciplines, the median, mode or mean may be chosen as the "norm". For example, normal IQ is defined as 100, the mean or average IQ in a population. Hence anything under 100 is considered below normal and anything over 100 is above normal. Thoughtful readers will immediately identify flaws with such a definition which we will not delve into here – that topic has been extensively debated elsewhere. Using a single number is of course too narrow a definition, hence in some evaluations, normality has been extended to include the range of (roughly) two standard deviations (SD) on either side of the mean<sup>7</sup> to encompass 95%

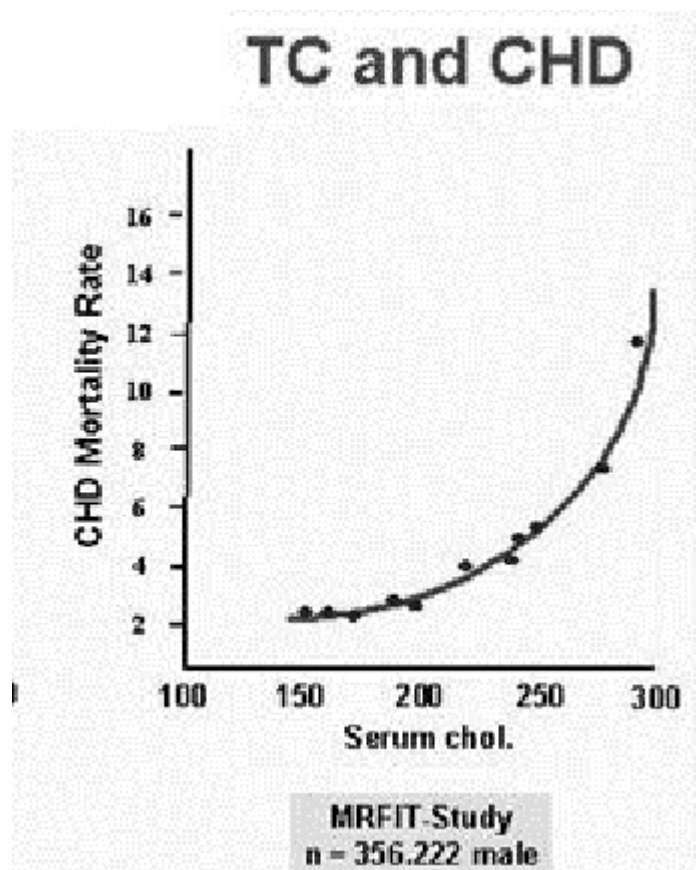
of a healthy study population. Hence if your serum electrolyte result shows your serum sodium concentration is above that upper cutoff limit, you are defined as having hypernatraemia and are regarded as metabolically abnormal unless proven otherwise. This "red flag" result obliges the medical practitioner to look for a cause of the "abnormality" and treat it. Similarly for hyponatraemia. Such a policy works well on the whole for practical patient management, but it depends on which parameter we are studying.



On the other hand, in our assessment of serum cholesterol concentrations, we do not use this method of defining the normal range as being two SDs on either side of the mean population value. Why not?



Looking at the graph above, we see that the population distribution of serum cholesterol concentrations roughly follows a bell curve, as is the case with most biological variables. In this example, the average population cholesterol is around 6.0mmol/l. If we were to use the "normal" range as (roughly) two SDs either side of the mean and label only the upper 2.5% of the population as having an abnormally high cholesterol, then only those above, say, 9mmol/l will be defined as having hypercholesterolaemia. The whole point of making measurements however is to identify the presence of disease or the increased risk of developing disease. In the case of serum cholesterol, it has been found in several population studies that the incidence of coronary events (and hence prevalence of coronary artery disease) rises sharply from 5.6mmol/l (or 220mg/dl) onwards.



*TC=total cholesterol, CHD=coronary heart disease. The x axis scale of serum cholesterol on the graph above only went as far as 7.7mmol/l (300mg/dl) because individuals with higher cholesterol levels were rare in that population*

This means that if we were to use 9mmol/l and above as the definition for hypercholesterolaemia, we would be missing the vast majority of individuals at risk of coronary events (those from 5.6 to 9mmol/l) in that population. In Bayesian terms, a cutoff of 9mmol/l will have very high specificity but very low sensitivity for the future prediction of coronary events. Of course, using a zero value cutoff (ie. including all patients with values above zero mmol/l in our reckoning) will have the highest sensitivity for the prediction of events (as it will encompass all the people in the population and therefore all the people who will eventually have events). However using a zero value cutoff has no specificity whatsoever (it is of no value in identifying normal people who will never develop coronary events). Hence we need to arrive at a compromise between good sensitivity and good specificity in our cutoff value, which is why we use 5.6mmol/l as "upper limit of normal" (and not 9mmol/l) in most of our laboratory ranges. This is despite the fact that 5.6mmol/l is around the average population value for serum cholesterol.

The actual considerations regarding individual patient lipid management are a good deal more complicated than that, however further elaboration is beyond the scope of this article.<sup>8</sup>

Suffice to say that we cannot use a "one size fits all" method to define what is normal or abnormal, it depends on the situation. Quite rightly, the medical profession has decided that it is *not* appropriate to define "normal" cholesterol as the average level in the population, as many such "normal" people will be headed for a heart attack<sup>9</sup> in the long run without risk factor intervention. The new average body habitus in the US and Australia is fast becoming that of obesity - which is certainly not healthy and therefore should not be regarded as "normal" either, merely common.

Let us ask however whether there is there a single crucial criterion we *must* use when shaping *all* definitions of normality or abnormality (or good health and ill health)? We assert that all definitions we decide upon must have practical utility based on real world outcomes. Practical real

world outcomes are the most important consideration when we fashion our definitions, otherwise our definitions will just be meaningless jargon, useless at best and misleading at worst.

### What is mental health or wellbeing? What is mental illness or disorder?

The definitions of mental health and illness have been ever changing and malleable from one version of the psychiatric diagnostic and statistical manual (DSM) to the next (currently DSM-5, May 2013). Indeed the psychiatric profession has been strongly criticised for their progressive "medicalisation of normality" leading to the excessive and inappropriate prescription of medications in the USA (at least 69% of the DSM-5 taskforce members had ties to the pharmaceutical industry). Some of the strongest criticism came from within the psychiatric profession itself, by prominent practitioners such as Dr Allen Frances, chair of the DSM-IV task force and Dr Bruce Levine. Psychiatrist Dr Colin Ross stated that the diagnostic and statistical manual is neither particularly diagnostic nor statistical and the manual itself admits there are no laboratory tests available to measure, confirm or refute the "disorders" mentioned in the DSM-5.

If the "top" psychiatrists and psychologists, the so-called experts, cannot agree on what is mental health and what is mental disorder or disease, can others offer anything better? We argue that we can. We believe the psychiatric profession can learn from other specialist medical and scientific disciplines, particularly those which practice "harder" science.

One loose definition of mental ill health has been "*any way of thinking that is harmful to the individual or others*". Such a definition has some merit in that it does focus on real world outcomes. However, the mental health professions themselves have not been applying their own definition appropriately (possibly for fear of offending those in power, who by that definition must be regarded as mentally ill psychopaths<sup>10</sup> or for fear of offending the majority of conformist people in the GIMME establishment, who by that definition must also be regarded as mentally ill – being deluded and cognitively deficient (ie stupid) – as they believe in nonsensical destructive ideology such as infinite economic growth on a finite planet).

We would prefer to discard the term "normal" mental health and replace it instead with what we term **mental eufunction**, defined as *reality based thinking guided by ethics (eufunctional thinking), which promotes behaviour leading to the wellbeing of the individual, to wider society and to the living planet.*

There may however be a hierarchy of priorities of wellbeing, one level of wellbeing having priority over another eg community needs taking precedence over individual greed. Such a view is entirely consistent with the way society tends to celebrate individuals who have contributed to the greater good, often at their own personal expense. Such individuals are then labeled as "altruistic" or "heroes", albeit retrospectively (often posthumously).

Those who fought for social justice in society have historically done so at considerable risk to themselves (having sacrificed their personal self interest and wellbeing in working toward a long term common good). Examples were slavery abolitionists and civil rights activists. Repercussions against them included social ostracism, loss of employment, violent retribution, imprisonment or financial penalty imposed by the prevailing corrupt establishment of the time. Such corruption was institutionalised then (eg legalised slavery or legalised apartheid) and it was necessary for the eufunctional minority to behave in an "illegal" manner to eventually change it.

Those Germans who opposed Hitler in the 1930s did so at the extreme risk of being imprisoned, tortured and executed. We assert that such people, the minority in their society at the time, demonstrated strong mental eufunction and it was in fact the majority of the German populace then who were deeply mentally dysfunctional. After all, Hitler acquired power by majority vote. The majority were engaged in thinking and behaviour leading to harm in their own and other societies, even while labouring under the delusion they were somehow morally justified in their actions. The majority were gripped by a collective madness. The only appropriate eufunctional



response would have been utter contempt for majority German opinion and their "leader" who was voted in democratically. In that situation the *only* way to change it, contrary to Neville Chamberlain's view, was to kill the German masses and reduce their country to rubble.

Thus we can see that mental eufunction has nothing at all to do with holding a majority opinion. There was a time when the majority of people believed the Earth was flat. Conversely, just because a person holds a minority opinion does not mean they are necessarily correct or eufunctional. They could be just as deluded as the majority but just hold a different delusion. Just because the majority flatearthers were wrong did not mean a chap who believed the Earth was doughnut shaped was correct. The real test for mental eufunction is not whether it is a majority or minority opinion. It is whether the mentality is based on good evidence, reason and ethical principles.

Now let us ask: **What is sanity? What is insanity?** Is there a clearcut line between them? The answer to the latter question is yes, maybe and no. Before we proceed, a few definitions may be useful.

**Intelligence**, in its most basic form, is nothing more than the ability to accurately identify true patterns. For example, in an IQ test a subject may be asked which number (or letter or polygon etc) does not belong in a sequence. The intelligent subject quickly and accurately identifies the common pattern to those that belong and determines the odd one out. The less intelligent will take longer to identify the pattern. The cognitively deficient will completely fail to identify the true pattern. Some may fabricate claim to a nonexistent (false) pattern which does not bear scrutiny. The pinnacle of intelligence is exemplified by those geniuses who discovered true <sup>11</sup> patterns in Nature which mere mortals hitherto never suspected eg Newton's  $F = Gm_1m_2 / r^2$  or Einstein's  $E = mc^2$ .

**Hallucinations** are the perception of things which are simply not there, they do not exist in the real world. They are generated entirely within the subjects' brain due to biochemical, pharmacological or electrical disturbance. Examples include the classic auditory hallucinations or "hearing of voices" in schizophrenics, visual hallucinations induced by LSD and complex hallucinations, often of a religious nature, in temporal lobe epilepsy.

**Illusions** are perceptions which are wrongly interpreted by the subject eg a person sees a coat draped over a dummy in a dim room and concludes it is a ghost.

**Delusions** are beliefs in elaborately constructed frameworks which have no basis in fact, evidence, logic or reality. A delusion is an individual's incorrect explanation for a particular set of circumstances eg a patient finds himself locked in a padded cell and concludes he is Napoleon imprisoned on Elba. Delusions may be shared by two people (folie à deux), by groups (eg religious cults) or entire populations (mass delusions). Most delusions are in fact not held by psychotic patients, they are held by supposedly normal people in the general population. They sometimes take the form of conspiracy theories. However just because many conspiracy theories are delusions does not mean that all conspiracy theories are delusions. For example we know for certain, decades after the events occurred as a result of the freedom of information act, that the CIA conspiracies to overthrow the Iranian government in 1953 and Chilean government in 1973 (among others) were entirely true - these are historical facts beyond any dispute. If a conspiracy theory is plausible and has a strong basis in evidence and reason, then it has credibility, even if not yet proven.

Here is a somewhat old-fashioned **categorisation of mental disorders** (a basic list, simpler and less comprehensive than ICD-10 or DSM-5, but is useful enough for our purposes):

- Neurodevelopmental disorders: eg mental retardation, autism
- Other cognitive disorders eg dementia
- Substance abuse / addiction
- Minor mental illnesses or "neuroses" – eg anxiety, depression, obsessive-compulsive disorder, conversion disorders

- Major mental illnesses or "psychoses" – eg schizophrenia, affective disorders (major depression, bipolar affective disorder, mania)
- Personality disorders – eg psychopathy, sociopathy, narcissistic personality, disorders of "type" similar to the major or minor mental illnesses eg schizotypal, hypomanic etc

There is a world of difference between a subjectively applied sloppy label and an objectively derived disciplined diagnosis. For example, in cardiology there are strict objective criteria to be met before we can reach a confident diagnosis of (left) heart failure:

- The gold standard index is an elevated left atrial filling pressure (or mean PCWP) which requires invasive cardiac measurement and hence in practice is almost never done.
- However even without that we can reliably use various other surrogate assessments such as the combination of the serum BNP, echocardiogram, chest Xray and reduced  $VO_2$ max to make a robust diagnosis.
- Even without those, we can often make a reliable clinical diagnosis on the basis of typical symptoms and signs if the patient has full-blown heart failure.
- How do we verify the diagnosis? It is confirmed when the appropriate treatment leads to the expected result eg administration of a diuretic and ACE inhibitor reduce the LA filling pressure and improve the patient's symptoms, signs and eventually serum BNP. The story does not end there however. Heart failure is a syndrome, it is not a complete diagnosis in itself. It is of vital importance that we further refine the diagnosis to identify the underlying cause of the heart failure eg valvular disease or coronary disease etc. Any cure, if feasible, always requires the identification and specific treatment of the underlying cause.

Unfortunately the soft fuzzy nature of psychiatry is such that it is usually impossible to reach an objective diagnosis in the same manner as the "harder" medical disciplines. Most of the time only subjective labels can be applied, which can be extremely problematic, not to mention stigmatising.

This recalls a story I (GC) overheard over ABC Radio National a year or two ago. It goes something like this: a young girl was restless and fidgety in school, she seemed unable to concentrate on her studies and to lack focus. Her mother brought her to a psychologist for help. Following the interview, the psychologist turned on some music and took the mother out of the room, leaving the door slightly ajar to observe the girl alone. After a while the girl started moving rhythmically to the music, got up and started gyrating and pirouetting gracefully. "I've got it!" the psychologist declared. "Your daughter is a Dancer!" Her mother subsequently enrolled the daughter in ballet school, she became the top student and ultimately became the prima ballerina of the national ballet company and one of the most celebrated dancers in the world. Would the mental health professionals of today be capable of such wisdom? Or would they be persuaded by the toxic influence of the drug companies to slap a quick and dirty label of ADHD on the child and ply her with Ritalin to make her "behave"?

In the case of organic brain diseases (eg dementia, frontal lobe strokes) where the problem is demonstrable by independent objective testing such as an MRI, it is possible to make a robust diagnosis. Strange thoughts and behaviour may occasionally occur as a result of organic brain disease. For example on rare occasions a stroke or head injury can induce "*foreign accent syndrome*" where the patient speaks their native language with a foreign accent. Delusional beliefs may also sometimes occur as the result of structural brain damage. For example, "*alien hand syndrome*" is the belief that one's hand does not belong to oneself but has its own independent life. It is usually caused by stroke or other brain damage, particularly in the areas of the corpus callosum, or frontal or parietal lobes. Certain syndromes may have different underlying causes in different patients. For example, Capgras syndrome is the delusional belief that a spouse or other close family member has been replaced by an identical looking impostor or several doubles. It has been reported in patients with dementia or epilepsy and after traumatic brain injury, which are all clearly organic causes (ie. objectively demonstrable structural or electrical pathology). In this syndrome however

we see an overlap between clearcut organic brain syndromes and other psychopathology, because most patients with Capgras syndrome have schizophrenia without any other brain disorder.

There is strong evidence that the fullblown major mental illnesses (schizophrenia and the major affective disorders) are actually organic disease entities caused by underlying biochemical/neurotransmitter abnormalities (hence such patients lack insight and are not amenable to psychotherapy). Psychoses are largely determined by genetic inheritance (although environmental triggers are also important) and respond, often spectacularly well, to specific pharmacologic agents. Unfortunately these medications are not without side effects. By their nature, the psychoses are quite different from other mental "illnesses". Thus we can observe a clear boundary between some types of organic insanity (the psychoses) and ideal sanity (the mentally eufunctional person).

Unfortunately the boundaries are blurred in most other psychiatric conditions. They are not amenable to objective diagnoses, therefore subjective labels are resorted to, which may or may not be used appropriately and may or may not be helpful. Even though psychiatrists use checklists of criteria, the criteria are themselves subjective. Furthermore there is considerable overlap between those people labeled with "mental disorders" and the "normal" (whatever that is) population in the form of traits which may be similar to but not as severe as the typical neuroses or psychoses eg schizoid, paranoid, obsessive etc. Some "abnormal" traits may actually be advantageous, indeed essential, to perform well in certain high functioning professions eg good physicians tend to be obsessional with a meticulous eye for detail so that no important information is missed. In addition, it is clearly inappropriate for psychiatrists to label normal reactive depression and grieving as abnormal (thus requiring medication). Indeed, inappropriate merriment in the face of a tragedy should be regarded as abnormal. It is unnatural and absurd for the psychiatric profession (and American culture) to expect all people to be "positive" and display a cheery disposition 24/7, irrespective of their circumstances, failing which they should be medicated. Bring on the curmudgeons!

One problem not discussed or studied very much in psychology is the existence of psychopaths or sociopaths, the terms sometimes being used interchangeably. It is estimated they constitute 1% to 2% of the human population. Some psychologists argue that since we have become such a populous species, psychopaths have flown under the radar. This is however untrue. Psychopaths are in fact not hiding. They are thriving and possibly constitute far more than 2%. They are politicians and major stakeholders in very public positions. In a small town, it is very easy to detect and avoid a psychopath. However, in the cities and in very large workplaces/corporations, they find the ideal conditions to adopt phoney facades and possess the manipulative know-how to jump straight to the top. They then unashamedly make decisions that fuel mass delusions to suit their personal gain. Since they are in privileged positions, they most likely give birth to numerous offspring who may inherit and/or mimic such psychopathic tendencies. Despite the overwhelming proportion of psychopaths being male, dare we also mention Rebekah Brooks? Of course, Rupert Murdoch, maker and unmaker of prime ministers and governments, may well be the apex psychopath on the entire planet. Such people lie without compunction, are utterly self serving and have complete disregard for any harm they cause to others, even death. They vigorously deny any responsibility unless caught redhanded, in which case they are good at feigning regret so that they can escape punishment and be free to commit worse crimes in the future. They lack remorse. Moral of the story: psychopaths are governing our world and most people have not even noticed! **12**

Experience has proven that the "toxic" personality disorders are impossible to treat. They are not amenable to medication (assuming they would be compliant) nor psychotherapy. They can learn to disguise their tendencies temporarily but will revert to type in the long run every single time. As such, avoidance and ostracism may be the only strategies.



## How dysfunctional thinking and behaviour have been promoted in the "normal" population:

### *A. The seduction of the reptile brain and the cultivation of irrational fears*

The vast majority of the population are not psychotic and may not meet the precise definition of any of the fullblown mental disorders. And yet how is it that they can be persuaded to believe in ideas which are patently untrue such as religious delusions, WMDs in Iraq or denial of anthropogenic global warming (AGW)? As the saying goes, those who can be persuaded to believe in lies can be made to commit atrocities – as demonstrated in the examples of "holy" wars, the invasion of Iraq and the impending genocide of future generations (and many other species) due to AGW, the worst atrocity of all time.

The puppet masters of our society have cleverly devised systematic methods of indoctrination using seductive propaganda to brainwash the masses and in so doing have immensely enriched themselves, the "0.1%".

Edward Bernays was probably the most influential person in history that no one has ever heard of. He was the nephew of Sigmund Freud (Bernays' family emigrated from Vienna to the USA when he was a child, however he kept in touch with "uncle Siggie" who he visited during holidays). Bernays subscribed to Freud's view that the natural tendency of human beings was to be governed by the irrational Id (or reptile brain) rather than by the rational Superego (or frontal neocortex). He used this knowledge, not to promote rational thought for the benefit of humanity, but to exploit human irrationality to manipulate the masses to consume products they did not need and could even be harmful. In so doing he was immensely rewarded by big business and became extremely rich. Unbridled capitalism and the free market at work. Bernays was spectacularly successful in employing the media to persuade young women to smoke <sup>13</sup> (hence was responsible for untold numbers of cancer and emphysema related deaths). He also paved the way for the US corporate corruption of Latin American countries (as in the case of the overthrow of the Guatemalan government by the United Fruit Company in 1954). It is ironic that Goebbels was a self confessed student of Bernays' tactics and utilised the ideas from this Jew to promote brutal pogroms and the mass murder of six million other Jews.

Bernays' legacy has been far reaching and enduring in the way corporations now systematically study and exploit the consumer mind to advance their profits. They have finely tuned their tactics to manipulate the reptile brain. What makes certain dysfunctional thoughts so appealing, leading to delusional ideas so entrenched, that people latch on to them like limpets on rocks from which they cannot be pried? It is largely related to having an inflated image of the self, or the self as part of a "superior" group eg the "master race". It is about self aggrandisement.

All of us were born with **innate infantile egocentricity** and needed to learn socialisation. As infants we all believed we were the centre of the universe, that everyone around us existed only for our own gratification and everything we wanted had to be given to us immediately for free with no effort required on our part. We believed we were special and important and nobody and nothing else mattered. Furthermore we had no idea that actions had consequences, that eating a bucketful of candy could make us sick. For many people, that mindset never really went away and lay at the back of their brain ready to be seduced and to dominate once again, given the right encouragement.

Hence the strategy of advertising has been to appeal to the infantile egocentricity of the unthinking reptile brained masses seeking immediate gratification. To influence their behaviour using shallow flattery, to hold up a mirror to their primal desires. Examples of such messages:

- *You are special, you are unique, you are better than everyone else! You must show off your superiority to the world by buying this superduper, exclusive, limited edition toilet plunger / nosehair trimmer / giant suppository, which has been endorsed by the celebrity(ies) you admire! Then you too will become a glamorous, magnificent sex magnet, just like them!* or

- *You can have it all and have it now and shouldn't worry about the future because nothing else matters! This credit card enables you to enjoy the lifestyle of millionaires right here, right now! Why? Because you deserve it! Do not delay or you will miss out!* (special conditions apply in small print and you may lose your house if you default in your debt) OR
- *You are entitled to enjoy all the conveniences and luxuries resulting from fossil fuel based technologies, it is your birthright to enjoy them now and forever! There are no adverse consequences! Hence AGW is not real! It is a hoax, evidence be damned! The scientists are lying and are a serious threat to your way of life!*

Bernays was also influential in the political sphere and his ideas shaped the kind of consumption focused and poll driven bogus "democracies" we have today. In an *Observer* article in 2002, Tim Adams wrote that Bernays "*thought that the safest way of maintaining democracy was to distract people from dangerous political thought by letting them think that their real choices were as consumers. He believed, and argued to Eisenhower, that fear of communists should be induced and encouraged, because by unleashing irrational fears, it would make Americans loyal to the state and to capitalism.*"

After the Cold War, the GIMME establishment's frantic search for a new bogeyman against whom the masses could project their irrational fear was finally realised on September 11, 2001. Bush the lesser exhorted immediately after the twin towers fell, that the duty of good Americans was to go shopping - a thoroughly brainless activity which would keep feeding the corporate beast and prevent the public from thinking about the real reasons behind the terrorist attacks.

How ironic that Bernays' idea of maintaining "democracy" was to whip up fear and divert the attention of the herd towards trivia rather than encourage participation in sane decision making in society. To abandon circumspect thought and relinquish true freedom to depend on central patriarchal authority for their "security" in the manner of irrational infants. It was the very antithesis of true participatory Liberal Democracy - which should advance courageous, progressive, thoughtful rule "of the people, by the people and for the people". It was entirely about reinforcing the power structure of an undemocratic corporatocracy. Clearly, the deviously manipulative Rupert Murdoch is the modern successor to Edward Bernays, only magnitudes worse.

### **B. Social learning and mimicry, obedience to authority and conformity:**

It is inherently human to believe everything that is fed to us by authority figures – it is called social learning. From an early age, we mimic and believe everything passed down to us from those we depend on (be they parents, elders or religious figures) and it has been found that we even replicate behaviour when it makes absolutely no logical sense to do so (chimps actually perform better than human children in this respect: <http://psycnet.apa.org/journals/dev/47/4/1050/> )

This is one feature that sets us apart from other primates – we see, replicate, believe, even when it makes no logical sense to do so. We do it because it is inbuilt and receive positive feedback as it nurtures acceptance within the group. We like people who copy us - even if it is just subconscious social mimicry. When what we are taught proves dysfunctional, this is not so much "mental illness", but learned delusion as a species that we need to overcome - a difficult task given we have naturally evolved this fatal trait. This adaptation is also very much tied up in religiosity - where again, people believe what they are exposed to when logically it absolutely makes no sense. Social learning causes us to believe very strongly what those around us tell us to believe and to do precisely what we are told to do even when it makes no sense. Like anything, there is a rank or scale of delusional ideas - some are more delusional, some are less. Delusions when revisited repeatedly become self reinforcing. If you think about something enough, the pathways solidify and you can more easily retrieve the information. Thus certain people become proficient at reciting chapter and verse of the bible which they use to justify whatever it is they want to do and shut out any other forms of thinking.

Mimicry did confer survival advantage in the past and, augmented by our cleverness, has

enabled us to realise incredible technological advances (we replicate what we are shown with the incentive to surpass the skills of the expert teaching us - something chimps never got the hang of). Our killing machines have never been so effective.

Another human trait which had important survival value (as it unified tribal societies in the pursuit of common goals) was that of conformity, the deep emotional need to belong to a group, to be socially accepted by others. Social conformity now plays a huge part in our contemporary denial of resource depletion, denial of AGW, continued habitat destruction and - oddly enough - wars over whose made up god is better. Groupthink (which is actually centrally manufactured by the GIMME establishment using Bernays' tactics and is disseminated by PR<sup>14</sup> skills - eg Fox "News") triumphs over reality based thinking. Conformity and unquestioning obedience to authority are unhealthy bedfellows. The ease with which it is possible to invoke such thinking and behaviour and the adverse consequences thereof were demonstrated in a number of famous seminal studies.

Blind obedience to instructions from authority, even if thought to cause fatal harm to an experimental "subject", was shown to be easily imposed on common people in the experiments by Stanley Milgram. He showed that ordinary American people could be cajoled into harming others by an authority figure who supposedly knew what they were doing. This went a long way to explain the atrocities committed by ordinary German people in World War II and showed that this trait was not unique to Germans.

Philip Zimbardo in his Stanford role playing experiments demonstrated how educated American college undergraduates could degenerate into thuggish brutes by merely adopting the uniforms and simulated environment of prison guards.

Solomon Asch showed that an individual on a panel of peers would rather agree with the obviously incorrect majority (who were secretly in collusion with the experimenter to provide the same wrong answer to a simple question eg which was the longest line in a series) rather than go out on a limb and state the obviously correct answer. It takes courage to stand up and speak the truth and contradict the majority, even on a matter as neutral as which line is the longest.

### **How can we counteract and immunise against dysfunctional thinking and promote eufunctional thinking?**

*Question: How many psychiatrists does it take to change a lightbulb?*

*Answer: Only one, but the lightbulb must really, really want to change.*

A change of mindset among the herd in this GIMME establishment is only likely to come about when large numbers of them begin to die off. Even then, most will probably embrace new delusions eg they may fabricate blame against minority ethnic groups or refugees (vulnerable scapegoats they can take their frustrations out on) or adopt more extreme religious pseudoexplanations, rather than accept the scientific and factual truth of our predicament. The favoured paradigm of the reptile brain is always one which promotes self aggrandisement while blaming others for all bad outcomes. Only mature people beyond the stage of infantile egocentricity are able to accept responsibility for their actions. This clearly excludes people like Tony Abbott.

If people eventually become receptive to change, this will be our strategy: to establish a "counter-Bernays" philosophy which promotes thinking and behaviour on the basis of rationality, ethics and courage (as opposed to Bernay's appeal to irrationality, egotistical amorality and fear). This essay will be the basis of such a philosophy. All children must be taught to think for themselves, to learn critical thinking from an early age and need to be psychologically immunised against bullshit delusions. This goal is easy to state but difficult to do, particularly as we know how Bernays' appeal to irrationality among the masses has been so spectacularly effective. If it proves impossible to convince future survivors to adopt eufunctional thinking and behaviour, in the long run we will just have to accept that *homo sapiens* was an evolutionary dead end. A failed experiment. A parasite or cancer on this planet with no possibility of redemption.

## CONCLUSIONS:

1. Certain people who are supposedly mentally "normal" are causing most of the harm in the world today<sup>15</sup>. Practical outcomes are the most important consideration when defining terms and describing such people as normal is not appropriate. They are in fact mentally dysfunctional.
2. Accordingly it is clear that Prime Monster Tony Abbott (monstrous refugee abuser, sanctimonious God botherer, fossil fuel industry stooge and gobal warming denier) and his ilk (eg Bankers, Industrialists, Rupert Murdoch, the Republican Tea Party) are among the most extremely mentally dysfunctional of all people. In the old parlance they are batshit crazy psychopaths. Islamic terrorists are just as mentally dysfunctional but are much less dangerous to the world.
3. Because of the devastation these people have wrought (Abbott and his ilk, not the Islamic terrorists), we face a massive die-off this century. If, against all odds, a few people do survive the massive die-off, but the survivors fail to devise ways of living based on eufunctional thinking and behaviour, they too will perish from the Earth from self inflicted stupidity and human extinction will be complete. However this will probably be a good thing for the sake of all other living creatures.

Dear old departed Kurt Vonnegut suggested that humanity should paint this sign on the walls of the Grand Canyon for future visitors to our devastated Planet to read:

**"We could have saved the Earth but we were too darned cheap"**. Only he did not use the word "darned".

For our part, we would recommend this big sign in bold letters:

***Advice to future occupants of this Planet from former dumbass tenants:***

1. ***It is much more important to be wise than to be clever***
2. ***If you wreck your environment you will die***

- *Rebecca Willis is a psychology graduate whose research focused on the evolution of primate behaviour. She obtained her permaculture design certificate many years ago.*
- *Geoffrey Chia is a curmudgeon*

## Footnotes:

1. Several years ago, as a follow up to my (GC) previous essays on ***How to identify truth / achieve wisdom*** [http://guymcpherson.com/home/doomstea/public\\_html/guymcpherson.com/wp-content/uploads/2014/01/WISDOMSeekingTruth-by-Chia-for-NBL.pdf](http://guymcpherson.com/home/doomstea/public_html/guymcpherson.com/wp-content/uploads/2014/01/WISDOMSeekingTruth-by-Chia-for-NBL.pdf) and ***How to make good decisions*** [http://guymcpherson.com/home/doomstea/public\\_html/guymcpherson.com/wp-content/uploads/2014/01/WISDOMDecisionMaking.pdf](http://guymcpherson.com/home/doomstea/public_html/guymcpherson.com/wp-content/uploads/2014/01/WISDOMDecisionMaking.pdf), I intended to write an essay entitled "*How to con like a neo-con, with particular reference to the lesser Australian lying rodent*". That lying rodent was of course former Prime Monster John Howard of "children overboard" and "never ever GST" fame. My impetus to write the "rodent" essay waned after Howard was tossed out of office. I then directed my efforts toward trying to engage with the Labor government to advance sustainable policies, which proved utterly futile. Now that the even more monstrous Tony Abbott has gained power, abolished the Science Ministry and is driving us ever faster towards perdition with the prospect of near term human extinction, I have been motivated to write this new essay "*thinking about thinking*", with the kind contribution and advice from RW, although all errors and provocative language in this essay must be regarded as GC's alone. This essay would have superseded the "rodent" essay anyway, had that been written.
2. Insoluble, insofar as human survival is regarded as a "solution", which we, as humans, implicitly assume. To non-human species, surely the only solution to their suffering and impending extinction will be the elimination of all human life on earth, the most final of final solutions.
3. ***Government-Industrial-Military-Media-Economic*** establishment
4. Overwhelming evidence shows we have already triggered multiple runaway greenhouse effects which are now impossible for us to control <http://guymcpherson.com/2013/01/climate-change-summary-and-update/>



5. Again, from the point of view of future non-human species (if they possessed sufficient cognitive understanding), human survival will actually be a very bad thing if we proceed to repeat the same atrocities of the past. Even back in the Stone Age, humans rendered the megafauna extinct everywhere outside Africa we went (although our mass extinction capability only reached global proportions with the utilisation of fossil fuel and nuclear power)
6. The topic of what constitutes an ethical framework is vast and well beyond the scope of this article. The reader is referred to works by ethicists such as Peter Singer. Nevertheless as a rough guide to what is ethical, we can utilise the universally accepted "Golden Rule" which has been independently advocated by and instinctively understood by all human cultures around the world. As previously mentioned in GC's "armadillo" essay [http://guymcpherson.com/home/doomstea/public\\_html/guymcpherson.com/wp-content/uploads/2014/01/1TheMeaningOfLifeToAnArmadillo.pdf](http://guymcpherson.com/home/doomstea/public_html/guymcpherson.com/wp-content/uploads/2014/01/1TheMeaningOfLifeToAnArmadillo.pdf), the Golden Rule was "originally stated as 'do not do unto others as you would not have others do unto you' (analects of Confucius) and centuries later, as 'do unto others as you would have others do unto you' (some guy from Nazareth). Funnily enough, verification of this wisdom of the ages has been demonstrated as the best interactive strategy from computer simulations of the 'prisoner's dilemma' scenario." Being ethical has thus been mathematically proven to be an entirely rational strategy.
7. <https://sites.google.com/site/physiologysite/normal-reference-range-table>
8. "High" cholesterol - ie a serum total cholesterol concentration above which intervention is advisable to reduce clinical risk - is dependent on many other cardiac risk factors eg presence of other vascular disease, age, diabetes, hypertension etc. This is known as management by absolute risk. Mentioning subtypes of lipids and lipoproteins is even further beyond the scope of this article.
9. In the past, infectious diseases were the principal cause of death, however with the advent of sanitation, vaccination and antibiotics, vascular disease (heart attacks and strokes) has become the main cause of death (at least in "first" world countries) - heart attacks being more common than strokes. Addressing cardiac risk factors such as high serum cholesterol has been very effective in dramatically reducing heart attack deaths in the past few decades.
10. Kurt Vonnegut on psychopathic personalities: "To say somebody is a PP is to make a perfectly respectable medical diagnosis, like saying he or she has appendicitis or athlete's foot. The classic medical text on PPs is *The Mask of Sanity* by Dr. Hervey Cleckley. Read it!" [http://inthesetimes.com/article/kurt\\_vonnegut\\_vs\\_the/](http://inthesetimes.com/article/kurt_vonnegut_vs_the/)
11. True patterns in Nature have elegant explanatory power and their paradigms mesh well with other proven paradigms. True patterns in Nature are verifiable by real world experimentation, observation and measurement and also have strong predictive power eg the Big Bang theory predicted the existence of cosmic microwave background radiation which was later subsequently discovered, thus verifying the theory.
12. <http://theinternetpost.net/2013/04/20/bush-and-obama-dangerous-narcissists/>  
<http://theinternetpost.net/2012/01/05/psychopaths-caused-the-financial-crisis-and-they-will-do-it-again-and-again-unless-they-are-removed-from-power/>
13. Bernays used his clever media skills to convince the young women of the day that the cigarette was their means of self expression, their symbol of defiance against an oppressive patriarchal establishment, that they could become the equal of males by lighting up these "torches of freedom". Kurt Vonnegut, who I keep quoting, was himself famously addicted to cigarettes, as unfortunately were most World War II veterans. He acknowledged it was a foul and disgusting habit that he was unable to shake and called the cigarette a stick with "a fire at one end and a fool at the other".
14. "PR" in medical terminology stands for "per rectum" - ie. the act of sticking a finger up your rectum. "PR" in general terminology stands for "public relations", the difference between the two being...er...actually there's no difference between them.
15. Those fossil fuel propagandists who find AGW denial no longer tenable have adopted another tactic. They are actively perpetrating the lie that all individuals and all companies are equally culpable when it comes to AGW - as they attempt to shift the media focus away from themselves onto individual responsibility and individual lifestyle change. Research published in the journal *Climatic Change* showed that just 90 companies were responsible for 63% of human greenhouse gas emissions.  
<http://www.theguardian.com/environment/2013/nov/20/90-companies-man-made-global-warming-emissions-climate-change>  
"There are thousands of oil, gas and coal producers in the world," climate researcher and author Richard Heede at the Climate Accountability Institute told the Guardian. "But the decision makers, the CEOs, or the ministers of coal and oil, if you narrow it down to just one person, they could all fit on a Greyhound bus or two."