1. **imbalance of power**

   a\ the victim *is/may be* questioned without the right to have legal representation, nor any advice being given as to his/her rights
   
   b\ the victim may be forcefully ‘medicated’ and made to participate in ‘interview(s)’ at any time
   
   c\ legal representation can be denied by the hospital’s official(s)
   
   d\ *no rights need be granted to the person’s own Therapist to even visit as is/was the case with Garth DANIELS!!*
      
      - effectively someone can be held *incommunicado!!*
      
      **YOU’RE TREATED WORSE THAN AN ACCUSED TERRORIST!!**
   
   e\ the “Statement of Rights” should include the pertinent sections of the NSW Mental Health Act 2007 No 8 (i.e. s14 & s15) and include a written explanation of the meaning of these sections
   
   f\ *No hospital be allowed to Involuntarily Admit anyone without a Magistrate’s agreement obtained at a proper hearing.* A maximum of 4 hours be allowed, from the commencement of detention, before the commencement of this hearing.
   
   g\ all ‘interviews’ should be visually and audio recorded, and made available to the person’s legal representative, **AS WOULD BE THE CASE WITH A COMMON CRIMINAL!!**
   
   h\ Once the hospital or its staff, have *not* complied with any legal requirement or obligation, the hospital’s right to representation at any legal proceeding(s) to establish the patient’s/victim’s suitability for release from the hospital, should be revoked.

2. **psychiatry is completely unscientific**

   As Psychiatry has no explanation for a patient(s) ‘hearing voices’, and I understand there is/are no proper active investigation(s) being conducted into this phenomenon, so therefore it is **SIMPLY GAME, SET AND MATCH** to the situation of PSYCHIATRY NOT BEING A SCIENCE. A science has answers to outstanding matters/observations OR is investigating – see <12_'Black_Holes'.docx>. **There is no recovery from this position!!**

   *The other point is that Psychiatry has irresponsibly ignored the importance of the report(s) of ‘hearing voices’ from the patient/victim. I call this one of the twelve "Black Holes” in Psychiatry! (see <12_'Black_Holes'.docx>)*

3. The book Psychiatrists reference in determining which particular ‘illness’ the person is suffering, the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), is simply an **assemblage of invented disorders** where the likelihood of any particular ‘disorder’ being added to this ‘inventory of disorders’ *(with each disorder being just a collection of symptoms)* being increased with the volume in which it is presented as well as the number of times it is presented. I’ve read that this process of amending/’updating’ the DSM being described as *"like a trading-room floor"*. The other point is that the name/’label’ associated with the patient’s problem(s) is irrelevant in determining effective, long-term treatment as the problem(s) is coming from the person’s SUB-conscious mind, so access to this part of the mind needs to be attained (i.e. through **Dreams, Hypnosis, Art Therapy, Sandplay, Meditation**, etc.).