

Foreword (*Martin Zinker*)

Peter Lehmann originally subtitled this collection “Scattered Texts from 45 Years,” which is a veritable understatement. Everything is well organised in this volume. Lehmann always writes clearly, thoughtfully and reflectively. He has consistently developed his positions and arguments over the years. Today Lehmann and his collaborators, among others Judi Chamberlin, Maths Jespersen and Peter Stastny, are rightly regarded as prominent exponents of the global movement for support of people with psychosocial disabilities, which radically departs from the traditional paradigm of biomedical psychiatry and is committed to the principles of the Convention on the Rights of Persons with Disabilities: person-centred, community-based, recovery-oriented and rights-based.

Lehmann anticipated and influenced today’s unambiguous position of the United Nations and the World Health Organisation on psychiatry. For both organisations, it is now undisputed that psychopharmacological treatments can only be carried out with informed consent, that there can no longer be any substitute consent, that coercive measures must be abolished, and that all support must be in accordance with the will and preferences of the person concerned (WHO & OHCHR, 2023; WHO, 2025).

Mainstream psychiatry seems unwilling to accept this and is calling for more coercion in the support system, in Germany most recently with a position paper on the administration of electroshock without informed consent (DGPPN, 2025). Henceforth it is not surprising that psychiatry is increasingly caught up in the maelstrom of tougher domestic policies when asked how to prevent extreme acts of violence committed by persons with suspected psychiatric disorders (Berndt, 2025). Lehmann discusses the renaissance of the controversial electroshock in detail.

Lehmann does not shy away from controversy, neither with established psychiatry nor with other actors, be they reform-oriented organisations or associations representing (ex-) users and survivors of psychiatry. He tells his personal story and wants to encourage the many people who have had similar experiences; he also succeeds in doing this with the so-called experts in the support system. I first met him in 1995, when he was invited to give a lecture at a psychiatric hospital in Kaufbeuren, Bavaria. His presentation was well prepared and backed up with sources, as one would expect from a good training, but rarely receives. At that time however, it was revolutionary that the speaker himself had lived experience with psychiatric institutionalisation – and for me, it became a lasting and encouraging memory.

However, his personal story also shows how far the doctors involved had strayed from the Hippocratic oath, given that the treatment clearly did him more harm than good, and how he, as a *patient*, left his role as a patient behind, courageously stopped taking the neuroleptics prescribed by his doctors and became an author, scientist, publisher and activist.

Humanistic anti-psychiatry is not a fashionable discourse, but a necessary perspective in an age in which mental health is increasingly subsumed under a biological, economic, individual-psychological or security logic. Lehmann draws on his extensive expertise to ask the central questions: Who is served by the psychiatric system? How can people in mental distress be helped in the best possible way in accordance with their will and preferences? And how can they help themselves while being protected from psychiatric violence?

This book is not only a plea for a more humane and democratic support system – it is a call for empowerment, debate and solidarity. Lehmann succeeds in bringing together the experiences of those with lived experience, scientific analyses as well as political demands in a dialogue that is both provocative and inspiring.

Readers should not expect an easy read – but a necessary one. Those who are prepared to question familiar perspectives will find this work a powerful contribution to the debate on coercion, autonomy and alternatives in the psychosocial support system.

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