**DONALD TRUMP IS MENTALLY ILL:**

**CLINICAL PSYCHIATRY MAKES A DIAGNOSIS**

**(4th Ed.)**

**by Francis Baumli, Ph.D.**

**Abbe L. Sudvarg, M.D.**

***(A PREFACE)***

On May 24, 2017 we presented, via the **Daily Kos** online forum, a draft of the below article and received inconsistent, even baffling, replies. Many people believed that the general thesis set forth: Donald Trump is proved to be mentally ill by the criteria of the average psychiatrist’s bible, the DSM-5, is an assertion that we the authors do not have the professional credentials to set forth. Yet other readers commented that our thesis is too elementary because any lax observer of Donald Trump could not but perceive how mentally ill he is, and therefore the academic tone of our pedagogical exercise wasn’t even called for. So one group was scolding us for not having credentials; another group was wondering why we bothered to write something which is so obvious we didn’t even need credentials.

Since our credentials are at issue with some people, allow us to properly identify ourselves:

Francis Baumli has the Ph.D. in philosophy, with extensive background in both neurology and counseling psychology. He worked as a counselor for many years under the auspices of the APGA (American Personnel and Guidance Association) and has done much scholarly work which includes publishing on the association between phenomenology and psychology.

Abbe L. Sudvarg, M.D. is a board certified specialist in Family Medicine, whose practice includes diagnosis and treatment of mental health disorders.

Something which is especially pertinent here, and deserves being emphasized, is the fact that when we initially considered doing this article we thought we would be a trio of authors—with a certified psychiatrist as this paper’s first author. He, however, citing the “Goldwater Rule” as it is called, chose to absent himself from this clinical exercise because of the personal, professional, and legal risks involved. In short, he could lose his license to practice medicine.

For those unfamiliar with the Goldwater Rule, we present it here as follows:

AMERICAN PSYCHIATRIC ASSOCIATION

THE PRINCIPLES OF MEDICAL ETHICS

WITH ANNOTATIONS ESPECIALLY APPLICABLE TO PSYCHIATRY

2013 EDITION

[The specific pertinent rule is:]

*3. On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement.*

So the two remaining authors of this paper went ahead and published it. As to the question regarding our own veracity as believable authorities on Donald Trump’s mental health, there is the simple fact that one of us thought of this approach first, and together we did it first. The “it” being simply the fact that within one week of Donald Trump being elected we sat down and began the task of spending over 500 hours erecting a thesis which proves (yes; proves) that Donald Trump is mentally ill. We have not been content with clucking our tongues, wagging our heads, and saying, “Ain’t it a shame.” We went to work and verified our judgement about Donald Trump’s mental illness by using the established rules and criteria of psychiatry.

Are other mental health professionals willing to join with us? We do not care about getting all the credit for what we started. What we really want is other people’s companionship and help so this crusade to entirely discredit Donald Trump, now and for all of history, can succeed.

**AN ALARMING THESIS:**

For many conscientious citizens of the United States, the election of Donald Trump as President caused a great deal of anxiety. Perhaps this anxiety was healthy because to accept him unmoved by anxiety would have involved becoming apathetic, anaesthetized, even callous.

Many citizens were less concerned about Donald Trump being President than they were about the fact that so many Americans, apparently exorcising their inner demons, voted him in to office. Many men voted for him because they have felt emasculated by politicians who blithely ignore their concerns—even their existence. Disgusted by this unsavory state of affairs, they voted for a man whose loud, chronic, and self-confident blustering gave them something to grab on to: “He ain’t afraid to say what he thinks!” or, “At least he’s a man who’ll get the job done,” or, “He’s a businessman, not a corrupt politician.” As for the women who cast a significant number of votes for Donald Trump, how he attracted them is more difficult to understand. Some commentators have claimed that women who voted for Trump did so because deep down they hate themselves, i.e., they share his misogyny. This explanation is easy, artificial, rhetorical. Also, it scarcely seems true. Percentage-wise, more men voted for Trump than women did, but still, the women who voted for Trump do not seem to evince one bit of self-hatred. Rather, the female vote for Trump seems to have come from three obvious places. First and perhaps foremost, women voted for Trump because they already were Republicans and they felt that, whatever reservations they might otherwise have about the man, loyalty to their party came first. Second, many of these women were casting a vote against Hillary Clinton. Memories and continuing suspicions around the Whitewater scandal have scarcely disappeared. Moreover, the continued allegations about her imprudent, possibly illegal, use of computer messages and documents dogged her to the end of her campaign, arousing considerable distrust among voters. Finally, there was blithe irresponsibility, namely, “Boys will be boys.” So whatever misogynistic things Trump said about women was dismissed as the kind of locker room talk all men supposedly do.

Some people who did vote for Hillary were not enthusiastic about her. But they did seem to feel that because Hillary was part of the old blueblood establishment, she would at least crave the respect of her political cohorts, trying to appear reasonable and responsible most of the time. Also, if she did have clandestine activities to hide, then while hiding them she also would try to attenuate them.

But Hillary lost, Trump won, and although many people were distressed and depressed by this, other people were using his win to justify their racism and rancor. The “crackers” were less inhibited about showing the mean-spirited part of their personality. The racists were more openly abusive toward Muslims, blacks, Jews. Other people who voted for Trump would later seem bewildered by what they did—they were unsettled, even frightened, by the loosening of civilized constraints. Some expressed their prejudices outwardly but also felt inwardly depressed and without mooring. The euphoria they felt at Trump’s election was transmogrified into lives of sometimes quiet, sometimes noisy, desperation. These people were scared of the future, their motives at the ballot box now seemed remote and vague, and they felt bewildered by their lack of emotional and moral equilibrium. Fundamentally they were, in the true sense of the word as defined by Plato, unhappy.

However, like most unhappy people, they did not quite understand why they were unhappy; likely many of these people did not even understand that they were unhappy.

This paper can help such people understand their unhappiness. Also, its language can help people discuss their unhappiness so they can feel less frustrated and lonely with it. Instead of merely referring to the “Trump funk” as many people did after Trump won the Presidency, they can now understand how their inchoate feelings may actually stem from the fact that, at a gut level, they sense that Donald Trump is mentally ill.

“Donald Trump is mentally ill.” This is a stern and, given the public office he held, a damning judgment. It has such magnitude that it warrants, even demands, explanation—an explanation so thorough as to constitute a proof based upon the rules, categories, and judgmental bases that are used in the strict diagnostic criteria as applied by the medical field of psychiatry. Scientific accountability compels us to utilize, and adhere to, psychiatry’s strict standards of exactitude when it comes to making any judgment that someone is mentally ill because there is much stigma inflicted upon a person who receives this unyielding pronouncement. But the present case can be set forth with evidence showing that Donald Trump not only warrants, he even invites, such a diagnosis. His persona, behavior, and destructive potential are so ubiquitous and colossal (not to mention lethal) that the populace needs (nay, deserves) to be warned.

In truth it is not difficult to demonstrate that Donald Trump is mentally ill; the evidence is so compelling that the mere consideration of this possibility, by many an unbiased layman, would warrant suspicion and quickly lead to the inevitable, damning conclusion: Trump’s autocratic demeanor has already brought our country to the brink of dangers which are potentially lethal for the entire human race. Evidence supporting this fact must be promulgated in all haste.

All those people who voted for Donald Trump, and now are confused and unhappy with his “rule by bluster,” might better understand their confusion if they can perceive that Trump not only is racist, misogynistic, and tumultuous, he also suffers from (even as he tries to enjoy) three alarming personality traits which diagnose him as certifiably mentally ill. These are:

**1. Narcissistic Personality Disorder.**

**2. Conduct Disorder.**

**3. Antisocial Personality Disorder.**

We shall avail ourselves of the Diagnostic and Statistical Manual of Mental Disorders (also known as the DSM-5[[1]](#endnote-1)) for the sake of proving, within the rubric of psychiatry, that Donald Trump indeed possesses two of these three realms of mental illness now as an adult and possessed the second one in his youth (which is the only time a patient can possess it since its diagnostic criteria cannot apply after age 18). The process of showing that he is afflicted with these disorders will, at the same time, explain what these illnesses are.

The first, “**Narcissistic Personality Disorder**,” is perhaps the mildest of these three mental illnesses in its overt manifestations. These manifestations often cause distress and harm for others who are closely associated with the mentally ill person, but they usually do not have destructive consequences as wide-reaching as the other two illnesses Trump is afflicted with, i.e., these consequences are distressing for close associates, but they do not directly threaten the world or even a segment of society. The main destructive tendency of **Narcissistic Personality Disorder** is the fact that, given the sense of entitlement and grandiosity the patient assumes for himself, this disorder tends to serve as fuel for other, more blatantly or immediately destructive, personality disorders, i.e., the narcissistic dysfunction is like pouring gasoline on the flames of proximal mental illnesses, allowing the crippled personality to transform into a raging and dangerous inferno.

It is interesting to note that in the DSM-5 there are 9 traits which define the **Narcissistic Personality Disorder**, and for the person to warrant being defined as a **Narcissistic Personality Disorder**, that person must have at least 5 of these 9 traits.[[2]](#endnote-2) Donald Trump has them all.[[3]](#endnote-3)

As we proceed to list these diagnostic criteria, and others later in this article, we will in most categories list but one example to illustrate each criterion since this is all that is required by the DSM-5, even though under most of these categories it would be tempting, and easy, to give several—even a manifold—of examples.

The DSM-5 notes that the diagnostic criteria for the **Narcissistic Personality Disorder** involves, “A pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:”[[4]](#endnote-4)

“**1**. Has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements).”

This trait is exemplified by his statement, “I know more about ISIS than the generals do. Believe me.” (This statement was made long before he became President, i.e., military Commander-in-Chief, way back at a campaign event at Iowa Central Community College in Ft. Dodge, Iowa, November 12, 2015.)

“**2**. Is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love.”

# We can see this trait in Donald Trump’s claim that: “We are going to build the wall and Mexico will pay for it.” (First press conference after the Presidential election, on 1/11/17.)

# To comment briefly, and bluntly: What power does Trump have to make Mexico foot the bill for such a wall?

“**3**. Believes that he or she is ‘special’ and unique and can only be understood by, or should associate with, other special or high-status people (or institutions).”

Examples of Donald Trump’s adherence to this trait proliferate, as in his attachment to the game of golf. As of this writing he owns 15 golf courses, and in a Fortune Magazine interview (7/1/15) the following exchange took place:

**[Q.]** **So you’re not a fan of the new innovations and ideas to change the game, open it up a little.**

[A.] I don’t think it’s going to help anything. Golf should be something beautiful, elegant, something people aspire to play eventually.

**[Q.] Is that elitist?**

[A.] It may be elitist, and perhaps that’s what golf needs. Let golf be elitist. When I say “aspire,” that’s a positive word. Let people work hard and aspire to some day be able to play golf. To afford to play it.

“**4**. Requires excessive admiration.”

Donald Trump’s appetite in this realm amounts to emotional gluttony; for example, in a national White House press conference on Feb 16, 2017, Donald Trump claimed he had the “biggest electoral college win since Ronald Reagan.” (Actually, with the exception of George W. Bush, every President since Ronald Reagan, in every election, has won more electoral votes than Trump did.)

“**5**. Has a sense of entitlement (i.e., unreasonable expectations of especially favorable treatment or automatic compliance with his or her expectations).”

Here Donald Trump is nothing less than a strutting prima donna. At the Thursday night Republican Presidential primaries debate on 3-3-2016, which took place in Detroit, the question was posed as to whether the U.S. military should obey illegal orders from a potential President. His well-televised answer was: “If I say do it, they’re gonna do it. That’s what leadership is all about.”

“**6**. Is interpersonally exploitative (i.e., takes advantage of others to achieve his or her own ends).”

In this gruesome practice Donald Trump has about as much conscience as a Sherman tank, especially when the matter is sexual assault, as was well documented on October 7, 2016, during the [2016 United States Presidential election](https://en.wikipedia.org/wiki/2016_United_States_presidential_election). *The Washington Post* released a video and accompanying article about then Presidential candidate [Donald Trump](https://en.wikipedia.org/wiki/Donald_Trump) and television host [Billy Bush](https://en.wikipedia.org/wiki/Billy_Bush) having “an extremely lewd conversation about women” in 2005. In the video, Trump indicated that he might start kissing a woman that he and Bush were about to meet during the filming of an episode of [*Access Hollywood*](https://en.wikipedia.org/wiki/Access_Hollywood), a show owned by [NBCUniversal](https://en.wikipedia.org/wiki/NBCUniversal). Trump then said: "I don't even wait. And when you're a star, they let you do it, you can do anything ... grab them by the [pussy](https://en.wikipedia.org/wiki/Pussy#Female_genitalia)."

“**7**. Lacks empathy: is unwilling to recognize or identify with the feelings and needs of others.”

While still a contender for the Presidency, and giving a speech to a large crowd, with not a trace of inhibition he openly mocked and mimicked the physical disabilities of Serge Kovaleski, reporter for The New York Times, at a Nov. 24, 2015 rally in South Carolina.

“**8**. Is often envious of others or believes that others are envious of him or her.”

His arrogance, on this score, is both colossal and craven. Only days after being sworn in as President, Trump insisted to Congressional leaders who had been invited to a reception at the White House that he would have won the popular vote had it not been for millions of illegal votes. The Washington Post, on 1-23-2017, made sure to get their facts right on this story, but Trump does not seem to care about facts. He has many times claimed, with not a shred of evidence, that widespread voter fraud caused him to lose the popular vote to Hillary Clinton. Even though he won the Presidency via an Electoral College victory, Trump obviously remains envious of the fact that Hillary received more popular votes than he did.

“**9**. Shows arrogant, haughty behaviors or attitudes.”

Here Trump is an egocentric Mephistopheles constantly trying to prove his alpha status. One quails at the task of giving examples because, in truth, there is not a plurality of examples; rather, there is one continuing, unending example. But a garish “high point” of this attitude came out when he appeared on the MSNBC show “Morning Joe” on March 16, 2016 and co-host Mika Brzezinski asked him what experts he was relying on for advice about foreign affairs so that, if he won the election, he would be fully prepared in this area as soon as his Presidency commenced. His response was, “I’m speaking with myself because I have a very good brain ... . My primary consultant is myself ... .”

The second mental illness which afflicts Donald Trump is defined in the DSM-5 as **Conduct Disorder**.[[5]](#endnote-5) We will later review some of the alarming intricacies of how **Conduct Disorder** (as a kind of younger sibling), is related to Donald Trump’s third mental illness, **Antisocial Personality Disorder** (as the elder sibling). But let us, for the present, focus on the task of revealing how the DSM-5 shows that Donald Trump, during those crucial years when the diagnostic criteria for **Conduct Disorder** apply to his childhood, indeed was afflicted with this illness as is defined by what follows:

“**A**. A repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated, as manifested by the presence of at least three of the following 15 criteria in the past 12 months from any of the categories below, with at least one criterion present in the past 6 months.”[[6]](#endnote-6)

Let us first address the last sentence of this stipulation, i.e., that there be “at least one criterion present in the past 6 months.” With regard to Donald Trump this criterion is met during six crucial years from ages 13 through 18 when, because of a spectrum of behavior problems, Donald Trump was sent to a military academy for late grade-school and high-school training. This is readily verified in two available sources. First, in the words of Donald Trump himself, “When I turned thirteen, my father decided to send me to a military school, assuming that a little military training might be good for me. I wasn’t thrilled about the idea, but it turned out he was right. Beginning in the eighth grade I went to the New York Military Academy in upstate New York. I stayed through my senior year, ... .”[[7]](#endnote-7)

The matter is stated more bluntly by one of Trump’s biographers, to wit:

“Donald got into lots of trouble—so much that his father shipped him off to the New York Military Academy in upstate New York to develop discipline when he was a teenager.”[[8]](#endnote-8)

Clearly, at any time during those five years when a diagnosis of **Conduct Disorder** for Donald Trump would have been warranted regarding any referenced “past six months,” this stay in a military academy for discipline problems serves to fulfill this criterion. Others of the below-listed behavioral problems would have occurred at several different times which would have allowed their being referred to as having happened during the “past six months.”

“**1**. Often bullies, threatens, or intimidates others.”

There is ample evidence for this problem. Note that Donald Trump himself admits that, “Even in elementary school, I was a very assertive, aggressive kid.”[[9]](#endnote-9)

On this cited page, Trump also confesses to an even broader spectrum of behavioral problems:

“As an adolescent I was mostly interested in creating mischief, because for some reason I liked to stir things up, and I liked to test people. I’d throw water balloons, shoot spitballs, and make a ruckus in the schoolyard and at birthday parties.”[[10]](#endnote-10)

The aforementioned biographer sums all this up by tersely stating that Donald Trump, during these early years, enjoyed, “... provoking disputes with other kids.”[[11]](#endnote-11)

“**3**. Has used a weapon that can cause serious physical harm to others (e.g., a bat, brick, broken bottle, knife, gun).”

As to this criterion, there is straightforward and alarming evidence provided by Trump’s biographer, David Cay Johnston: “Neighbors have told stories over the years, including to me, of a child Donald throwing rocks at little children in playpens ... .”[[12]](#endnote-12)

“**4**. Has been physically cruel to people.”

About this scarcely minimal infraction, Donald Trump himself is surprisingly candid:

“Even in elementary school, I was a very assertive, aggressive kid. In the second grade I actually gave a teacher a black eye—I punched my music teacher because I didn’t think he knew anything about music and I almost got expelled.”[[13]](#endnote-13)

Trump’s biographer, Johnston, injects more emotional content here by claiming that, in describing this incident, Trump is clearly bragging:

“In his first book, The Art of the Deal, he [Donald Trump] boasts about slugging his music teacher in second grade because he didn’t think the teacher knew the subject ... .”[[14]](#endnote-14)

For specificity in diagnosis, it bears being noted that the DSM-5 lists three types of **Conduct Disorder**, and Donald Trump’s type is clearly what is called, “**312.81 (F91.1) Childhood-onset type:** Individuals show at least one symptom characteristic of **Conduct Disorder** prior to age 10 years.”[[15]](#endnote-15)

A garishly obvious symptom of **Conduct Disorder** in Donald Trump prior to age 10 years is the previously mentioned evidence for criterion number 4, which involved him punching his music teacher, giving that teacher a black eye, and almost being expelled from school.

Our inexorable conclusion is obvious: The above-listed three criteria demonstrate unequivocally that the mental illness termed **Conduct Disorder** afflicted Donald Trump during his childhood. We shall proceed to establish an equally solid case for a diagnosis of **Antisocial Personality Disorder** as it now afflicts him as an adult. But before we set forth the diagnostic criteria for **Antisocial Personality Disorder** as it applies to Donald Trump (in this process revealing and clarifying what those diagnostic categories are) some explanatory comments are in order regarding the relationship between **Conduct Disorder** and **Antisocial Personality Disorder.**

After the age of 18 a patient will not be diagnosed as having (mere) **Conduct Disorder** because, if they are 18 or older, then essentially the **Conduct Disorder** has already metastasized into an **Antisocial Personality Disorder**. Stated differently, **Conduct Disorder** is what we see a patient do at a younger age; **Antisocial Personality Disorder** is what that patient, at a later age, has come to be. A clinician would have allowed hope that within the emotional and moral malaise of **Conduct Disorder** at an early age the young person’s toxic impulses could still be rehabilitated. Not infrequently this hope is justified. But if the criteria which, in a sense, segue from **Conduct Disorder** into **Antisocial Personality Disorder** are still present in young adult life (age 18), the behavior by this time is often considered irremediable, i.e., there is less optimism for successful therapeutic intervention since the broader criteria which define **Antisocial Personality Disorder** have become solidified and entrenched.

If the relationship between **Conduct Disorder** and **Antisocial Personality Disorder** do not quite constitute a continuum from a youthful state of deviancy to an adult behavior that is either criminal or paracriminal, then at least we can better understand the **Antisocial Personality Disorder** if we consider how the developing psyche of the **Conduct Disorder** patient was a garish precursor, and at times (sic) a causal antecedent, to what would become an **Antisocial Personality Disorder**. In other words, the segue from **Conduct Disorder** to **Antisocial Personality Disorder** often involves a kind of osmotic transfer from one level of developmental maturity to the next. In some ways the same behaviors, as witnessed first in a child and then in that child who has become an adult, are closely related as the child’s untreated or unremedied illness contributes to, even becomes, an adult illness. Thus, when these two levels of dysfunction have characterized the same person, first in childhood and later in adulthood, these two afflictions share a boundary which connects rather than separates.

That third mental illness Donald Trump carries, as described in the DSM-5, is **Antisocial Personality Disorder**.[[16]](#endnote-16) This is a personality disorder that can be extremely dangerous, with far-reaching consequences regarding not only close associates but also the population at large. In truth, it has probably characterized too many of our world leaders, ranging from Julius Caesar, Napoleon, Hitler, Stalin, Mao Zedong, Idi Amin, even George W. Bush. (Any President who tries to euphemize torture by calling it “enhanced interrogation” is indulging a sociopathic malice, or callousness, of dangerous dimensions.)

Psychiatrists now realize that **Antisocial Personality Disorder** is as likely to result from a privileged childhood as from a painful childhood. While it is often manifest in patients who come from an early family milieu within which they were abused, it also is manifest in patients who come from a family milieu that so pampered their every whim one could rightly say they were obscenely indulged. (While too often their malicious tendencies were observed and excused with a displayed humor one could rightly say goaded them on).

The diagnostic criteria for **Antisocial Personality Disorder** are:

“**A**. A pervasive pattern of disregard for and violation of the rights of others, occurring since age 15 years, as indicated by three (or more) of the following.”[[17]](#endnote-17)

(Before listing the pertinent diagnosing criteria, a careful explanation is in order since this sentence, as written, could lend itself to misinterpretation.

The clause, “occurring since age 15 years” does not mean that the diagnosing criteria for **Antisocial Personality Disorder** must be present between the ages of 15 and 18 years. Rather, what is being stipulated as diagnostically necessary during this 3-year time period of ages 15 to 18 years is some degree of disregard for, and violation of, the rights of others. Intensive discussion in the DSM-5[[18]](#endnote-18) carefully explains that what is stipulated for this 3-year time period is that the person, before receiving a diagnosis of **Antisocial Personality Disorder**, “must have had a history of some symptoms of **Conduct Disorder** before age 15 years.”[[19]](#endnote-19) “The pattern [sic] of antisocial behavior [then] continues [from age 15 years] into adulthood [at age 18 years or later].”[[20]](#endnote-20) I.e., it is occurring since age 15, and it is embedded by age 18. At this point the finalizing and condemnatory diagnosis of **Antisocial Personality Disorder** can be levied.)

Proceeding now to the specific criteria which would unequivocally point to a diagnosis of **Antisocial Personality Disorder** in Donald Trump, we begin with:

“**2**. Deceitfulness, as indicated by repeated lying, use of aliases, or conning others for personal profit or pleasure.”

Donald Trump is a master at deceit as is well illustrated by a USA Today story (June 9, 2016) outlining how hundreds of people who have worked for Donald Trump, from dishwashers and painters to accountants and real estate agencies, along with attorneys who have represented him in previous lawsuits, are trying to collect money he owes them. Well into his term in office as President, at least 60 lawsuits, over 200 mechanic’s liens, along with hundreds of other judgments and government filings have been tied up in legal actions against Donald Trump’s business dealings. Virtually all of these actions have languished in legal limbo for almost a decade while Donald Trump continues to portray himself as an exemplary protector of the working class.

“**3**. Impulsivity or failure to plan ahead.”

Donald Trump conducted himself exactly this way in a glib tweet made May 21, 2015 which claimed, “I am going to save Social Security without any cuts. I know where to get the money from. Nobody else does.”

This is grandiose, clumsy, and impulsive posturing to say the least, given the complexities of the Social Security financial situation, and given that Donald Trump is at least partly right: Nobody else has figured out a way to solve the forthcoming Social Security deficits. He is indulging in a sophomoric bluffing game to suggest that he can solve Social Security’s problems.

But let us give a second example by which to illustrate this diagnosing criterion: Perhaps the most transparent, and alarming, example of Donald Trump’s impulsivity, and his failure to plan ahead, was revealed on Feb. 17, 2017, when with an impulsive tweet he imitated the rhetoric of the dictator Mussolini by sending out a message: “The news media ... is the enemy of the American people.” This message was bellicose and baiting, not to mention, untrue. Moreover, Trump did not at all plan ahead, i.e., he did not bother to consider the irate response this message would rouse from both the media and the American people.

**“6.** Consistent irresponsibility, as indicated by repeated failure to sustain consistent work behavior or honor financial obligations.”

The most telling example of this is what was reported on ABC News (April 21, 2011) regarding the fact that Donald Trump has declared bankruptcy in 1991, 1992, 2004, and 2009. In a cavalier manner he dismisses these financial fiascoes (expensive to the government, i.e., we the taxpayers) as, “It’s not personal. It’s just business.”

“**7**. Lack of remorse, as indicated by being indifferent to or rationalizing having hurt, mistreated, or stolen from another.”

As to this criterion, Donald Trump shows himself as a leering voyeur. Because he was part owner of the Miss Universe Organization from 1996-2015, he claimed that he had the right to indulge in lecherous conduct. For example, at the 1997 pageant for “Miss Teen USA” Trump went strolling into the young girls’ changing room, unannounced, just as they were changing in to their bikinis. These young girls, some half-naked, some completely naked, were mortified. None subsequently took legal action against Trump, but many complained, some of them to the media. One of these girls, in fact, later complained to Trump’s daughter, Ivanka, who merely shrugged it off, saying, “Yeah, he does that.”

This is not the first time Trump has mistreated others this way while showing no remorse. For years he has expressed glee about such conduct. In 2005 he boasted on the Howard Stern Show, “I’ll go backstage before a show, and everyone’s getting dressed and ready ... .” He bragged that his position as the pageant's owner entitled him to this kind of access, even as he seemed fully aware that what he was doing had caused much distress for these young women. "You know, no men are anywhere. And I'm allowed to go in because I'm the owner of the pageant. And therefore I'm inspecting it ... they're standing there with no clothes. And you see these incredible-looking women. And so I sort of get away with things like that.” (One wonders if it occurred to Trump, then or later, that since some of these girls were as young as 15 years, they weren’t exactly “women.”)

“**B**. The individual is at least age 18 years.”

As of this writing, Donald Trump is 78 years old. And the behavior, per what is set forth in “**A**” above, has been manifest, sometimes sporadically, other times chronically, from ages 15 to 18 and throughout adulthood to the very present. Examining the history of Donald Trump as a growing boy yields results that are relatively scanty, as perhaps they should be, given that young people have a right to privacy in their family environs as they are growing up. Yet, with Donald Trump, what he was busy manifesting during this childhood time is so garish as to have become public knowledge and suffices to meet the diagnostic criteria, as has already been set forth in our portrayal of his **Conduct Disorder**, as diagnosed by the DSM-5. We refer to the fact that he was still in military school during these three crucial years from ages 15 to 18—an account of this period of time (what some people would consider an incarceration) having already been given.

“**C**. There is evidence of **Conduct Disorder** with onset before age 15 years.”

The reader would be well advised to note how the arrogance associated with **Narcissistic Personality Disorder** gives additional meaningfulness to early manifestations of **Conduct Disorder**. The evidence for Donald Trump’s **Conduct Disorder** before the age of 15 years is well documented by examples already given in the above discussion of **Conduct Disorder**. In fact, all those examples refer to behavior that occurred before (also sometimes after) Donald Trump was 15 years old.

For the sake of better understanding the sheer energy of **Conduct Disorder**, the reader would be well advised to note how the arrogance associated with **Narcissistic Personality Disorder** was perhaps given early momentum and chronicity by **Conduct Disorder**. And for the sake of better understanding the persistence of **Antisocial Personality Disorder**, three traits which must characterize this sociopathy bear emphasis:

1. A person must have demonstrated characteristics of a **Conduct Disorder** before the age of 15. This has been proved, as in the evidence about his throwing rocks at little children in playpens, and giving his teacher a black eye when he was in the second grade.

2. A person must demonstrate some of the characteristics of antisocial personality behavior between the ages of 15 and 18. This is already documented in our discussion of Donald Trump’s **Conduct Disorder**, especially in his having been sent to a military academy where he “put in time” for his late grade-school and all of his high-school “education.”

3.A person then has to be able to have been diagnosed as having an **Antisocial Personality Disorder** by the age of 18. This diagnosis might not actually be made by age 18 if, for example, the person is not being scrutinized by a psychiatrist, much less diagnosed. But the person has to be 18 for this diagnosis to finally be made, since by the age of 18 the precursory behavior of **Conduct Disorder** is now considered an entrenched part of the **Antisocial Personality Disorder**. All this has been demonstrated in the several traits we have discussed which define the young Donald Trump as being afflicted with the concerning facets of **Conduct Disorder**, and in the several characteristics which prove the presence of his **Antisocial Personality Disorder**.

Thus a diagnosis, amounting to a dictum, is established: Donald Trump is not merely an unusually verbose and boastful man, he is a mentally ill patient as defined by the unyielding criteria of no fewer than three categories of the DSM-5 which is the standard guide currently used for diagnosing mental illness. Donald Trump has **Narcissistic Personality Disorder** now, during his youth he was afflicted with **Conduct Disorder**, and now as an adult he is encumbered by the colossal sociopathy of **Antisocial Personality Disorder**. In short, Donald Trump is mentally ill on three major counts. (Consider the simple fact that watching two minutes’ worth of Donald Trump blustering and bullying his way through a press conference is a convincing indicator of his emotional disarray.)

Convincing and uncompromising as this diagnosis is, there remains a problem which accompanies it like an opaque and odious aura. Namely, this diagnosis, although made under the rubric of the DSM-5, is not what a logician in a philosophy department would call “epistemically serious.” I.e., the many premises intended to prove Donald Trump’s mental illness are not as strong as is the observable and obvious conclusion those premises support. This is because Donald Trump’s mental illness is so blatant, chronic, and ubiquitous that the mere spectacle of his persona and his actions is more convincing as an indicator of mental illness than the DSM-5’s diagnostic criteria are. This is how uninhibited and uncamouflaged are Donald Trump’s garish mental disorders.

It nevertheless is the case that solid science needs to be advanced for the sake of bolstering a judgment as to Donald Trump’s mental illness, given that some people would want to disagree with this diagnosis. Hence it is important to demonstrate the promulgated thesis of Donald Trump’s mental illness by using the diagnostic authority of psychiatry because it is an academic, clinical, and scientific repository of knowledge about what is healthy and unhealthy in mental functioning. And let us not forget: psychiatry is a branch of applied medicine. Every psychiatrist is a medical doctor.

The case against Trump is so well established that no serious clinician could deny it, and even the vigilant layperson who might read this article will likely be convinced by the preponderance of evidence as established in the three previous categories herein set forth, which diagnose (nay, convict) Donald Trump of serious mental illness.

A “case history” such as this can not be set forth with the dispassionate attitude that is normally used when assessing a patient. Rather, Donald Trump must be unabashedly exposed as a mentally ill man because of the danger he, as a public figure, poses to our world. He is macho, arrogant, irrepressibly and dangerously impulsive. He is not rational, but rash. In the emotional realm he is not stable, but sociopathic. Conjoin an early **Conduct Disorder** which now has the full-blown sociopathic dimensions of an **Antisocial Personality Disorder**, with his lack of moral conscience and lack of impulse control, and the result is a man whose conduct is mentally deranged. When he became President of the United States (“the most powerful man in the Western Hemisphere”) he was in a position to be even more dangerous. Any modern President of the U.S. is the man who knows the nuclear code and could potentially launch a nuclear strike, thus immediately causing a full-scale nuclear war that is impartially (universally) fatal. We have generally felt that we can trust a modern President to not inflict this peril upon our citizenry. But the egocentric, brash, impulsive Donald Trump who lacks a moral conscience has never deserved this trust. Put bluntly, Donald Trump as President, potential President, or has-been President (with his right-wing cohorts) shoves us way too close to the possibility of nuclear annihilation.

This fiery terminus caused by a nuclear war could perhaps be avoided by circumstances. For example, a dangerous President could be impeached, not only by members of the political party opposing him from the beginning, but also by members of the President’s own party who have become appalled by the ignorant and inflammatory oratory. These very people, once the President has done the hard work of cleansing the country of the policies they hate the most, could hastily impeach and remove from office that President, and then arrange for someone such as the Vice-President (who we hope would be more civil and sane) to complete the details of their agenda in a politically savvy manner. Other aspects of the political world can allow hope too. For example, the judicial branch eludes the purview of a President’s power in many crucial ways. Although this role has diminished given that the appointment of Chief Justices who support a current President are often the ones sitting on the bench, there remains the fact that some Chief Justices do retain convictions about the separation of the executive and judicial branches. Or perhaps a President as dangerous as Trump was could be derailed by a consortium of Senators from both parties who form a de facto, cohesive committee which meets with the President on a regular basis, carefully steering that figurehead in a safer direction with manipulative flattery. Or perhaps the children of a President can curtail their parent’s policies and power despite their lack of political experience by appealing to loyalty and love (traits which even sociopaths often possess), thus distracting a President from dangerous and impulsive proclivities. It well may be, however, that the most likely bulwark against a President’s narcissistic, sociopathic, errant conduct could come about because of the penchant of Presidents for appointing, or hiring, a disproportionate number of military personnel for civilian posts in the Cabinet and at other high levels of administration. These military personnel come from a background which involves much experience with confronting foreign military might with our own military might. These personnel know the intricacies, the diplomatic difficulties, and also the occasional impossibilities of such confrontations. If these military-minded people were to witness a President about to launch a nuclear war, they might instantaneously come together as a modern-day praetorian guard, and the shocking scenario of our own President being arrested, put in hand-cuffs, and these personnel taking power in an emergency military coup is not difficult to imagine. Of course, such military intervention would initially be a relief. But then, with the military as our rulers, what would come next? (Aside from a terminal diagnosis for our republic and democracy.)

Maybe this praetorian guard is already in place and functioning, On Jan. 6, 2021 when the infamous capitol insurrection took place, Donald Trump, after delivering a speech not far away, ordered his Secret Service guards to take him directly to the riot at the Capitol. Stating that the route there, and also the riot itself—which included the presence of rioters armed with knives, pistols, and rifles—made the trip unsafe, the Secret Service refused to take him. They claimed that their paramount duty was to protect the President. Therefore, discharging this duty took precedence over Trump’s order. Accounts are inconsistent as to how Trump reacted to this refusal (some state that his reaction was bellicose and violent, others that he was civil and mild-mannered) but the fact is Trump gave an order and the Secret Service refused to obey. Since power is defined as the ability to say no and get by with it, this means that at least in the Capitol insurrection the Secret Service had more power than the President. This very well might mean that if an enraged Trump had ordered a nuclear strike, the Secret Service—for the sake of protecting the President and the rest of us too—could have said no and prevailed. The Secret Service, working under guidelines and orders from government officials, is perhaps our modern-day praetorian guard which has the sanity and wisdom to protect the best interests of we the people.

Donald Trump’s mental illness, during his Presidency and afterwards, has been easily observable to the average practitioner of counseling psychology, transparently visible to many of our average citizens, and in this essay it is underscored by comprehensive diagnostic criteria provided by psychiatry’s ubiquitous edifice—the DSM-5. Donald Trump is an unstable, unpredictable, dangerously impulsive and mentally sick man who was at the helm of our country. He could, on the basis of impulse, whim, anger, or pompous pride use executive order to wreck havoc on this country’s domestic programs and unleash capricious military commands that could be globally and utterly destructive.

Do American people really want a President who is this mentally ill, this dangerously impulsive, in their political midst? We would like to think not, because we prefer to believe that our populace is not suicidal. However, these people did vote Donald Trump in as President of the United States. Can we now hope that, with the advantage of hindsight, our citizenry is aware that during the time this country had a mentally sick man as President we ran the risk of nuclear self-immolation?

But maybe the American populace is not yet ready to admit that Trump and his ilk are deranged and dangerous. Maybe the people who elected Trump as President were themselves acting rashly. If indeed this was, and remains, our democratic scenario, then Donald Trump is scarcely a lonely man.

***(A PERSONAL POSTSCRIPT)***

Here is proffered a final rendering of this article. The most obvious change for this final draft is that Francis Baumli’s name has been moved to “first author” status. This is because he was the one who first had the idea to do this piece, he did all the outlining and writing, while Abbe Sudvarg helped in crucial ways: being a sleuth at finding examples from the news media for illustrating Trump’s pathologies, and helping Baumli decipher some of the language in those news accounts which at times was virtually indecipherable, not because it was difficult but because of the appallingly poor writing style. She also helped by lending insights, cautionary advice, and proofing. Now, by the end of this fourth draft, Francis Baumli has put in over 500 hours on this article; Abbe Sudvarg has put in about 30. Her name had been put first in the previous drafts because of Abbe Sudvarg’s “M.D.” credential. We believed this credential would prove valuable for when the article was first published electronically on the **Daily** **Kos** website. But that foray of May 24, 2017, in our opinion was a virtual flop on that website.

Why do we think this commentary on a political matter was a flop? The readers’ comments were few, and the indexes which indicate whether these readers shared the article with others did not comprise a significant accounting. Worse, the readers’ commentary, for the most part, was—in a word—juvenile. With few exceptions comments by readers were ejaculatory, glib, shallow. Their writing style was clumsy, exhibitionistic, rarely even serious. Reading such language could only cause any writer who has set forth ideas with care and finesse to quail and then sadly ponder the declining literacy rate in the U.S. In the second posting of this article on **Daily Kos**, done on Sept. 21, 2017 readers reiterated their earlier criticism that the two authors’ credentials are suspect because they are not psychiatrists. It was depressing to realize that these criticisms, claiming the two authors lack properly credentialed educations, for the most part came from people who seemed to have almost no education at all.

Now we are not worrying about credentials; instead we are posting this work on the website for Baumli’s publishing business. So here is a final posting, with the hope that this article’s final version (only slightly revised from the first two) may encounter a few educated readers who have the passion, and also the conduits, for directing our commentary into political action. We hope that this article may serve as a groundwork by which to forever remove Donald Trump, his cohorts, and his dangerous followers from the political scene. Should that happen, this article will have accomplished its primary goal, and our world will be vastly safer.

***(A METHODOLOGICAL POSTSCRIPT)***

***This article has now been published four times. The first two publications appeared in the online forum Daily Kos on:***

***May 24, 2017***

***and again in the same forum on:***

***Sept. 21, 2017.***

***The third publication was in the “Baumli’s Mirror” section of the website for Viaticum Press International. This date was:***

***Dec. 27, 2017. There this essay presided for many years during President Donald Trump’s reign, subsequently during the four-year Presidency of Joe Biden, and now it is revised, refined, and revivified for a fourth appearance on the Viaticum Press International website. The first three publications of this essay bore the title:***

**PSYCHIATRY HAS SPOKEN:**

**PRESIDENT DONALD TRUMP IS MENTALLY ILL**

**Now, with this fourth publication, the essay has a new title:**

**DONALD TRUMP IS MENTALLY ILL:**

**CLINICAL PSYCHIATRY MAKES A DIAGNOSIS**

**ENDNOTES**

1. DSM-5, American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders: Fifth Edition, DSM-5 (TM) (Washington, D.C./London, England: American Psychiatric Publishing, 2013). [Note: Since there are so few books cited in this paper, usual abbreviations for subsequent citations of this book will be eschewed in favor of merely using: DSM-5.) [↑](#endnote-ref-1)
2. DSM-5, p. 669. [↑](#endnote-ref-2)
3. DSM-5, pp. 669-670. [Note: These nine traits are all listed on these two pages; therefore, we will not give a separate citation for each trait.] [↑](#endnote-ref-3)
4. DSM-5, p. 669. [↑](#endnote-ref-4)
5. DSM-5, pp. 469-475. [↑](#endnote-ref-5)
6. DSM-5, p. 469. [Note: The three traits listed are all on pp. 469-470; therefore, we will not give a separate citation for each one.] [↑](#endnote-ref-6)
7. Donald J. Trump with Tony Schwartz, Trump: The Art of the Deal (New York: Random House, 1987), p. 50. [Note: Since there are so few books cited in this paper, usual abbreviations for subsequent citations of this book will be eschewed in favor of merely using: Deal.] [↑](#endnote-ref-7)
8. David Cay Johnston, The Making of Donald Trump (Brooklyn, New York/London, England: Melville House, 2016, p. 17. [Note: Since there are so few books cited in this paper, usual abbreviations for subsequent citations of this book will be eschewed in favor of merely using Making.]

   [↑](#endnote-ref-8)
9. Deal, p. 49.

   [↑](#endnote-ref-9)
10. Deal, p. 49.

    [↑](#endnote-ref-10)
11. Making, p. 17. [↑](#endnote-ref-11)
12. Making, p. 17.

    [↑](#endnote-ref-12)
13. Deal, p. 49. [↑](#endnote-ref-13)
14. Making, pp. 16-17. [↑](#endnote-ref-14)
15. DSM-5, p. 470.

    [↑](#endnote-ref-15)
16. DSM-5, pp. 659-663. [↑](#endnote-ref-16)
17. DSM-5, pp. 659-660. [Note: The four traits listed are all on p. 659; therefore, we will not give a separate citation for each trait.] [↑](#endnote-ref-17)
18. DSM-5, pp. 659-663. [↑](#endnote-ref-18)
19. DSM-5, p. 659.

    [↑](#endnote-ref-19)
20. DSM-5, p. 660.

    ***(Written: February 14, 2017***

    ***to April 4, 2017.)***

    ***(Here posted: December 27, 2017.)*** [↑](#endnote-ref-20)