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The Ecology of Insanity

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THE ECOLOGY

OF

INSANITY

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PREFACE

Illness is like an unhewn stone which cuts the hands of anyone who tries to work with it.

A. Siirala

I have conceived this study to be a philosophical propaedeutic to a theory of psychotherapy, or to a theory of healing in general, of the person. There is a philosophical dimension to therapy because there is the question of living one's truth and the moral obligation to speak one's truth to those around one. It is feasible to conceive the problem of madness to be one of the battle of truth and untruth; Kierkegaard once remarked that 'he who cannot reveal himself cannot love, and he who cannot love is the most unhappy man of all.' It seems that the schizophrenic has been characterized as unable to reveal himself.

This study has been called a study of the ecology of insanity because I am concerned with schizophrenia as a language of relationships with a person's environment or situation. M. Siirala remarks: 'The split between theological, philosophical, and medical models of encounter is, in my opinion, the chief reason for the preservation of the philosophically unsound delusion of an autonomous observer-position' of the therapist with respect to illness.

A true study of the schizophrenic would require the monumental kind of 'autobiography' such as Jean-Paul Sartre did of Jean Genet.

It will be noted that I tend to regard insanity and truth as moral categories here, but I want to make it clear that I make
no judgment on any individual who may have been judged insane by any person. The moral evil lies in the inability of people to communicate because they have been taught to lie or because they live in a society that lives on lies or what Laing calls 'pseudo-events', where truth has been exiled. Like Laing I remain open to the possibility that people clinically judged insane may be more truthful, free and loving than so-called 'normal' man of our society.

This work is part of my own search for the way, the truth, and the life, and there are many who have helped me on this way whether by books they have left behind or in face to face confrontation. I am grateful. Professor Edward Maziarz told me what he saw and what he thought of my work as it developed: I appreciate his sensitivity and daring.

When one is involved in the conflict of culture, as I believe schizophrenia to be, it is neither advisable nor possible to be detached and an observer, nor do I make any claims to be outside the boundaries of the madness that I describe. In such a study as this, one must, be, as Hegel says, steeped in what one is knowing. In doing this one runs the risk of foundering in the conflicts and being lost oneself, of confusing fact and fantasy. I had a capable guide.
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A. My Own Development

1. Reversals:

This paper will reflect a journey of about two years that I made into the field of psychotherapy and also will be an attempt to situate myself in the world of the healing-revealing ministry to which I have committed myself. The key to both healing and growth is revealing. This will emerge as a theory of truth, and will incorporate a science of disclosing and revealing and an interpersonal method of investigating personal perspective. I have found that there is no greater peace than that which I know when someone knows my whole intentional life in an accepting way, that is, knows the nature of my life of what is called 'reaching out' at that time. What I am speaking of seems to be the moment of what Maslow calls 'peak experience'.

I believe this paper reflects a reversal, both in our culture and in my life. The reversal is reflected in my belief in the efforts of the Freudian left and other fronts of liberation, in the discoveries of J. H. van den Berg in the psychology of historical change and in Michel Foucault's study of the history of psychiatry and the relation of madness to society. I think Heidegger's return to the pre-socratics and his search there for the meaning of truth and McLuhan's writings, of the reversals in contemporary culture are some of the elements I try to reflect in this study. I am concerned with revolution in our culture and with what this does to the healing of people. I regard the whole of man's intentiona-
lity as interrelated and believe that it must form a balance which is not determined by cognition, but perhaps by some unknown that takes the form of law.

I have found the reversal with which I am concerned reflected in the statement of college students with whom I work: 'I want to let you into my mind and I want to get into your mind.' On questioning them, I find that they don't mean 'mind' in the sense of cognition but the whole of a person's intentionality, especially feelings. They recognize a strong urge and need to communicate themselves. I have found no greater block to revealing than the fear of feeling, which according to Rollo May is the particular protective device of people of our age. The fear arises both from the fear of aggression or power on the one hand, and from the fear of loving that comes with the revealing on the other hand. The reversal is reflected in a movement that is based on such beliefs as 'love drives out all fear.'

2. The Discovery of the 'You':

I remember there was a time in my past characterized by a strange new awareness, a little frightening, when I became gradually more aware that I wasn't the only one in the world. It was the emergence of consciousness of the other, more a growing reflective awareness of myself as related to another outside of myself who was just as much an 'I' as I am. This was a frightening, or rather, awesome discovery for me.

There was a time in the emergence of human consciousness
as a whole when this discovery was made for mankind. It was the
discovery of intersubjectivity by men like Feuerbach, a discovery
that is only a couple of hundred years old. It was Feuerbach who
discovered that there is a You who is just as much 'I' for self as
I am for me. This discovery took a long time to spread itself
throughout human consciousness; it came first to philosophy and then
to common sense and is at last emerging in psychological thinking.
Recently psychology has tried to deal with intersubjectivity; H. S.
Sullivan did the most to introduce the intersubjective into psychology
and Talcott Parsons does much to bring it into sociology. R. D.
Laing is making interpersonal relations the basis of his whole study
and he is doing it as a psychiatrist, psychological theorist and
philosopher.

However, merely recognizing the presence of the other,
the You, did not get me out of solipsism that at times bordered on
despair; only knowing the You could do that but it did not succeed.
There always seemed to be a barrier between the self and the other
and an impossibility of communication. How could I know that the
other's communications to me were really what was meant to be
communicated? How could I be sure that I was not merely making
them up? I this awareness it is still difficult to avoid the
despair of the possibility of communication. But then I discovered
that the striving for full communication may be very well the
adequate communication; that even the realization of misunderstanding or the understanding of a disagreement can be the ground of personal meeting of two people. This study, then, is partly my
attempt to understand the way out of solipsism or isolation of peoples from others and so to discover the meaning and means of therapy.

3. Interdisciplinary Study:

Often I have had to ask myself how useful is a study that is conceived as broadly as this one. And I have answered that whether or not it has been useful for anyone else, it certainly has helped me to keep a total perspective as well as try to investigate particular elements. I am searching for a central insight that unifies dis-ease phenomena and such statements as the one by David Cooper that we ought to turn around the signs at the doors to psychiatric prisons to see ourselves as inmates of a larger bin. This patter notion is common in the leftist theories of psychiatry and implies a need for cultural revolution. What is implied by such an approach is that our society is the victim of a generally held self-deception, that is normal is healthy. I am not attempting to discover the genesis of dis-ease or schizophrenia or the physiological or neurological correlates, but rather a phenomenology of dis-ease, and I hope to do this by moving into the various human sciences for parallel insights that they have to offer. Thus this is not a work of analysis but of synthesis whose central insight is that expressed in the title.

While it would be a mistake to confuse phenomenology and psychiatry or psychology, I am particularly impressed by the influence of the phenomenological method on these fields. Some of
the greatest practitioners of the phenomenological method are or were great psychologists, Karl Jaspers, Jean Sartre, William James, Maurice Merleau-Ponty to name some. I believe that Laing will be a significant one of them. However, a complaint has been leveled against phenomenological philosophy that it has not adequately dealt with the problem of the intersubjective. I am mindful also of what De Waehlens has said that whereas in the past philosophy relied on mathematics and physics for its data, philosophy for the present must turn to psychology. It is also significant that I am interested in psychotherapy and have delved into the contemporary movements. Thus it is that I have turned to a psychiatrist for this study.

I have chosen Laing because I believe that he is very significant, and I saw this before I came across what he has written himself.

We believe that the shift of point of view that these descriptions both embody and demand has a historical significance no less radical than the shift from a demonological to a clinical viewpoint three hundred years ago.²

4. Politics and Therapy:

Before I begin this investigation of Laing and the movement he is heading in London, let me take issue with Dr. Busse in the statement quoted in Halleck's The Politics of Therapy, that the psychiatrist must be politically neutral, that 'psychiatric services should be continued as patient oriented activities designed to reduce pain and discomfort and to increase the capacity of the
individual to adjust satisfactorily. 3 Embodied in this statement is a philosophical position that has been challenged, since the classical age of the Greeks and still is challenged, that is Hedonism. Another implication that I take issue with immediately, is that so-called 'psychiatric disorders' that is, what I see to be regarded as psychiatric disorders in our society are to be prevented. I do not believe that therapy is to establish comfort nor that disease is necessarily bad.

But along with this claim that the psychotherapist ought not be politically neutral because to be so is only to pretend to be so, I think that it is very important that the therapist make quite clear what is his political and religious commitment and what it means to him in as much daring as he can afford at the time and continually more as the therapy proceeds. The fact that I am Christian and committed to the ministry of healing and preaching is significant to those who come to me for assistance and for those who read what I write. But just as significant as that is the attempt to keep the meaning of these commitments continually open to inquiry and development.

Everyone lives by values which he has chosen and of those who deny this it can only be said that they have not chosen to find out in a reflective way what values they live by. No person fails to convey to others what his 'values are if the others are not closed to him. Therapists are in quite an ideal situation to communicate values because they deal with people who are psychologically and otherwise vulnerable, and these people may trust them.
The most honest thing a therapist can do for his patients is eventually to lay out on the table all his commitments and choices. The client may then choose whether he wants to expose himself to being aided in the direction the therapist has found meaningful for his life. But here comes the catch: If the psychiatrist tells his clients his presuppositions and commitments and terms will they return for therapy? The choice is seduction of the client in some way, or open invitation to accept or reject the therapist's position and aid. I believe it is better to extend the open invitation.

I have chosen the field of psychotherapy for my studies recently because I see there a focus for all the human disciplines and for the kind of totalizing that Sartre has called for in inquiry. In researching the questions of therapists today one comes across studies of historical and cultural change, of political change and its implications for societies, of the emergence of the world community; there are studies of man's environment on different levels, of his values and his hopes. And the direction to the solution of these questions and areas can only be the one that opts for and strives for the development of all people on earth. It is to the search for that direction that I here commit myself.

It is a search that challenges the political environment of professional men of the healing arts, of the clinical perspective.

5. The Clinical Bias:

It is interesting to note how words change their meaning
throughout history; recognizing our prejudices often is achieved by examining our use of words. I have used the word 'dis-ease' to indicate the state of being not at ease or being uncomfortable. We have been taught to use it for a condition in which the body has been invaded by foreign matter against the person's will or in which something has got control of it and is destroying it, so that all we have to do is to fight the invaders with other foreign substances that we bring in of our own will. I have been taught in the past that dis-ease is pathological and that means that my body has turned nasty in some way (or it may be my mind) and worthy of rejection by other people; at least they will be afraid of it. But 'pathology' is Greek in its origin and it has to mean the 'voice', 'speech', or 'word' of something. It comes from words related to pathos which mean 'what befalls one', 'suffering', 'misfortune', 'calamity', or even 'passion' or 'affection'. I believe that dis-ease finds its voice in what we call 'pathology'. There are, however, some people who are what we call 'insane'; who are, if we go into the Latin origins of the word, not sound, whole, safe, unharmed, free, reasonable, sober, self-possessed, discrete. These words are all descriptive of a group of people we lock away because we regard them as unsafe to have around because they may contaminate us with whatever has invaded them to make them that way.

But the common attitude to dis-ease is that it is abnormal, and more than that, that it is somehow bad and that the dis-eased person should be excluded from society into a special social structure. When the medical model of illness is followed, an
abnormality is structured in terms of symptoms, and these are to be eliminated. We have chosen as our main concern schizophrenia, which is the main 'mental disease' of our time. Laing points out that it is commonly believed that

there exists a condition or group of conditions, usually termed, since Bleuler, schizophrenia, characterized by certain forms of experience and certain ways of behaving that are taken to be the symptoms and signs of some disease or group of diseases of unknown origin, but largely genetic-constitutionally determined.4

Because Laing's research is radically different in its results from what has been done in the study of schizophrenics in the past, Laing asks us to try to read without presuppositions. He claims that this understanding that he will present is new and previously unheard of.

According to his studies, there seem to be no 'generally agreed objective clinical criteria' that can be used to diagnose schizophrenia nor does he find a consistent pattern of going into schizophrenia and coming out of it. There seem to be no organic structural changes.

But the psychiatrist too often acts in the presence of a pre-diagnosed patient as though schizophrenia were an established fact.

He then has to discover its 'causes' or multiple 'etiological factors', to assess its 'prognosis', and to treat its course. The heart of the 'illness' all that is the outcome of the process, then resides outside the agency of the person. That is, the illness or process, is taken to be a 'fact' that the person is subject to, or undergoes, whether it is supposed to be genetic, constitutional, endogenous, exogenous, organic or psychological, or some mixture of them all. This, we submit, is a mistaken starting-point.5
My essay is also an attempt to challenge some clinical presuppositions such as those emphasized in this passage from Laing.

**B. Philosophical Context for Laing.**

1. Laing's Project:

   My own way to self-consistency in its latest phase really was aided very much by Laing and it is for this reason that I make him the center of my own project here. In his work there is an orientation and a philosophy and there is a method of interpersonal research for the study of a person's experienced situation in his world. The project and philosophy are contained in this passage from *The Politics of Experience*.

   In the last fifty years, we human beings have slaughtered by our own hands coming on for one hundred million of our own species. We all live under constant threat of our total annihilation. We seem to seek death and destruction as much as life and happiness. We are driven to kill and be killed as we are to let live and live. Only by the most outrageous violation of ourselves have we achieved our capacity to live in relative adjustment to a civilization apparently driven to its own destruction. Perhaps to a limited extent we can undo what has been done to us and what we have done to ourselves. Perhaps man and woman were born to love one another, simply and genuinely, rather than to this travesty that we call love. If we can stop destroying ourselves we may stop destroying others. We have to begin by admitting and even accepting our violence, rather than blindly destroying ourselves with it, and therewith we have to realize that we are as deeply afraid to live and to love as we are to die. Laing is concerned with the fact that violence is so much part of human relationships and investigates the various ways of people doing violence to one another.
The method, 'the interpersonal perception method', is designed to research the experience people have of each other in a dyad, or in the group, and the level of meeting, and the degree of communication of the experience of each other. Research in intersubjectivity is new on the scene.

2. Our Project in Outline:

There is a certain class of people who are excluded from society because their communication of their experience to others by language or by other forms of expression is considered to be out of the ordinary and crazy. I propose to examine the forms of this communication and wonder if it conveys experience that is crazy. The expressions of these we call 'schizophrenic' is certainly not normal or ordinary but since normality is the criterion for designating those who are crazy from those who are not crazy, the concept of 'normality' ought to be examined. There is a group of therapists and theorists that regards normality as true insanity. However, whatever our criterion of validation of people's experience, it somewhat amounts to some form of verification by context and the problem of context of contexts comes up. Laing has found the theory of Sartre to be helpful.

I have undertaken to explain the nature of illness of various forms under the general concept of 'dis-ease' and often expand the term 'insanity' to a broader use than is customary; the word usually is referred to 'mental' illness but I have used it often to refer to illness in general of dis-ease. All forms of dis-ease I believe to be an expression of a relationship to the environment; so
I study the ecology of dis-ease, regarding 'discomfort' also as dis-ease. Recognizing the place of family and relationships in dis-ease and health I would suggest that a study of health could also be done in the same way as an ecology.

Language is learnt in a context and is a relatedness to the context, a convention by which certain experiences are communicated or presumed to be communicated. Language is learned first in the family and if the language or expression is out of the ordinary then it is necessary to look back and see if the original families of those designated schizophrenic are also out of the ordinary. Laing did this and found the language and behavior of the schizophrenics makes sense in the context of their families; hence Laing spends much effort investigating the nature of the family and groups as do other members of Tavistock Institute.

3. The Problem of Totalizing Meaning:

Right at the beginning of the Critique of Theoretical Thought Herman Dooyeweerd says that 'meaning is the mode of being of all that is created.' And meaning is also the nature of our self-hood. Philosophy is the attempt to make us aware that 'the inter-modal coherence of all the aspects of the temporal world' refer eventually to a totality. Philosophy is theoretical thought directed to a totality. Philosophy is theoretical thought directed to total meaning. Philosophical thinking is the work of a thinker who is involved in his thinking and in many other functions in the temporal world. And this thinker will do philosophy in terms of the many modes
of being, so that it is a different thing to do philosophy as an academician from doing it as a psychotherapist.

I have an actual function in the modal aspect of number, in space, in movement, in psychical energy, in organic life, in psychical feeling, in logical thought, in historical development, in language, in social intercourse with my fellowmen, in economic valuation, in aesthetic contemplation or production, in the juridical sphere, in morality and in faith. In this whole system of modal functions of meaning, it is I who remain the central point of reference and the deeper unity above all modal diversity of the different aspects of my temporal existence.7

So it is always I who am at the center of my efforts of philosophy. I cannot establish the totality of meaning now nor give it its basic structures, but I can begin. I believe that the search for total meaning is the same as Sartre's search for total intelligibility in the Critique of Dialectical Reason and Hegel's search for absolute knowledge or awareness in the program outlined in the Phenomenology of Spirit, or E. Lonergan's search for the universal viewpoint.

Laing seeks to make madness and going mad intelligible and eventually finds himself caught up in schemes seeking totalization. He finds himself caught up in the dialectics of interexperience and interbehavior and between sanity and madness in such a way that he has to immerse himself in the struggle before his terms can begin to define themselves. They are defined by the process of the struggle. I am more interested in Laing's insights into the nature of interexperience and its relation to interbehavior than in judging his theory of schizophrenia.

Any philosophy which takes as its starting point the self
of the other (whether the other be person, subject, or various levels of the non-human) and concentrates on either one exclusively neglecting the relationship, will eventually be lost in solipsism. One begins with self in terms of the other or with other in terms of the self and with the relationship of one to the other. This means that our study will have to be guided by the idea of a totality of meaning but that part of the study of the I and the other in relationship must include the initial study of self according to Socrates' dictum 'know yourself'. But this pushed to the limits ends in solipsism, if we do not recognize the totalizing effort of critical reason. The sciences have much to contribute to the knowledge of man, but no compilation of all the special sciences can answer the question of man's central self-hood.

Human I-ness functions, to be sure, in all modal aspects of reality. But it is, nevertheless, a central and radical unity, which as such transcends all temporal aspects. The way of critical self-reflection is, consequently, the only one that can lead to the discovery of the true starting-point of theoretical thought.8

I see the study of madness in our culture as needing a totalizing kind of study, and the study of dis-ease is part of the totalizing effort of thought. Sartre attempts to understand psychoanalysis and psychotherapy within this totalizing effort.

While I attempt in my philosophizing to adopt the position of a totalizer, I also find or judge that there is a need to be in touch with the empirical sciences. If I stand in the face of the suffering of mankind and of those around me I am least likely to go spiralling off into some remote phantasy system as I think philosophers are apt to at times. I am also mindful that some German philosopher has observed that the history of philosophy is
remarkably remote from the pain of human beings.

4. The Dialectical Method:

I am interested in man at his limits in his relationships to others and to himself. It is the healing ministry that is my first concern and this healing is primarily the act of reconciliation. It seems to a just generalization that the appropriate ministry to any illness or dis-ease is by reconciliation. The emergence of historicity into reflective consciousness necessitated the dialectical method. In the transition from classical to modern thinking, analytic reason has evolved into dialectical reason. According to Sartre, analytic thinking cannot cope with historical process and merely distorts perceptions to fit conceptions,

by distorting our concrete experience by secondary reifications, extrapolations, and abstractions, so that we knead it into a form that analytic reason can cope with.

There is a certain difficulty in studying persons, which is the difficulty that was the origin of this study, and that is the problem of quantifying human experience. Experimental method has been somewhat successful in quantifying human behavior, and, for a long time, behaviorism reigned supreme in psychological theory and research. But the difficulty of moving beyond a theory of person based on behaviour to include experience is becoming central to the human sciences.

Lonergan, following Husserl, has tried to trace the emergence of scientific method of the modern world from the classical
idea of the sciences. The classical idea demanded absoluteness, necessity and universality. As well as the classical method, we now have

a statistical method that rests on the empirically residual character of coincidental aggregates of events, and there is a dialectical method that is necessitated by the lack of intelligibility in man's unintelligent opinions, choices and conduct.10

The classical sciences limited themselves to what was essential, necessary and universal while modern science

aims at the complete explanation of all phenomena, and so modern studies of man are interested in every human phenomenon. Not abstract man but, at least in principle, all the men of every time and place, all their thoughts and words and deeds, and the accidental as well as the essential, the contingent as well as the necessary, the particular as well as the universal, are to be summoned before the bar of human understanding.11

In his latest writings, Sartre attempts to incorporate the attitude and discoveries of modern science about men with an attempt at total knowledge. He is seeking a totalization 'of the whole of existing socio-historical knowledge.' It is a tall order to fill but the achievement does not consist in fulfilling such a scheme but in developing totalizations that are totalizations up to the present time which a day after will be depassed in favor of a new totalization, probably by someone else. So human science is never ending and its conceptualizations may be overturned tomorrow.

Both Sartre and Laing believe that the conceptions of psychiatry are the totalizations of the past and are being overturned and transcending.
5. Sanity is Revealing:

I have indicated already man's most important need to communicate himself to others as much as he needs to communicate himself to himself. He must learn to dissolve boundaries within himself and between himself and others or an inherent need to do so may drive him to a violent way of dissolving these boundaries, psychosis. Norman Brown says

The net-effect of the establishment of the boundary between self and external world is inside-out and outside-in; confusion. The erection of the boundary does not alter the fact that there is, in reality no boundary. The net-effect is illusion, self-deception; the big lie: Or alienation. 'Le premier mythe du déniers et du decans: l'alienation se fond sur deux termes.'

'Sanity' is the word we shall use for the condition of one who is able to reveal himself. 'Insanity' the word for the condition of a person who is unable to reveal himself to the people around him, who is in a situation in which he cannot communicate his intentional activity, motivation, values, and believe himself to be acceptable to them. It us continue to call that person insane who finds no one around him who accepts him but still believes himself to be valuable and ultimately, or unconditionally, acceptable. Truth is not defined in terms of a certain group of people. It has its basic structures revealed in traditional human spiritual life and has achieved some level of development in the present life of the spirit in our world today. But the world today is not my criterion of truth though it is very much as I live my life. Truth is on the way.
One of the clearest and most concise statements on the genesis and nature of what I would really call 'psychopathology' is a rather long passage from the writings of Kierkegaard.

Do you know that there comes a midnight hour when everyone has to throw off his mask? Do you believe that life will always let itself be mocked? Do you think you can slip away a little before midnight in order to avoid this? Or are you not terrified by it? I have seen men in real life who so long deceived others that at last their true nature could not reveal itself; I have seen men who played hide and seek so long that at last madness through them obtruded disgustingly upon others their secret thoughts which hitherto they had proudly concealed. Or can you think of anything more frightful than that it might end with your nature being resolved into multiplicity, that you really might become many, become, like those unhappy demoniacs, a legion, and you thus should have lost the inmost and holiest thing of all in a man, the unifying power of personality? Truly, you should not jest with that which is not only serious but dreadful. In every man there is something which a certain degree prevents him from becoming perfectly transparent to himself and this may be the case in so high a degree, he may be so inexplicably woven into relationships of life which extend far beyond himself that he almost cannot reveal himself. But he who cannot reveal himself cannot love, and he who cannot love is the most unhappy man of all. Your own tactic is to train yourself in the art of being enigmatic to everybody. My young friend, suppose there was no one who troubled himself to guess your riddle—what joy, then, would you have in it? But above all, for your own sake, for the sake of your salvation—for I am acquainted with no condition of soul which can better be described as perdition—stop this wild flight, this passion of annihilation which rages in you; for this is what you desire, you would annihilate everything, you would satiate the hunger of doubt at the expense of existence. To this end you cultivate yourself, to this end you harden your temper; for you are willing to admit that you are good for nothing, the only thing that gives you pleasure is to march seven times around existence and blow the trumpet and thereupon let the whole thing collapse, that your soul may be tranquillized, yes, attuned to sadness, that you may summon Echo forth—"for Echo is heard only in emptiness."
For Kierkegaard unrevealing is unsanity. This loss of the awareness of being given to oneself and the will to annihilate the self, of which he speaks, this loss of the ability to love, is clearly what Karl Jaspers calls metaphysical evil. I have moved rapidly to the point of calling insanity metaphysical evil.

I have claimed that there is a two-sidedness to insanity, or the inability to communicate with those around one; it is the reason I choose the title 'the ecology of insanity'. But I am not pretending here to judge the responsibility of the individual insane person or those who are about to enter upon the pathway of psychosis, because I regard madness as relational. Society, both the 'psychotic', (the one out of touch with society), and the others around, bears the combined responsibility.

People hide because they are afraid and often they have reason to be afraid; for the same reason they are unable to love. Laing's work with schizophrenics seems to validate the thesis that children are mad because their families taught them to be that way. And psychosis is the process of moving from one orientation to the world to another orientation to the world; some people become trapped on the way. So Brown could say:

It is not schizophrenia but normality that is split-minded; in schizophrenia the false boundaries are disintegrating. 'From pathology we have come to know a large number of states in which the boundary lines between ego and outside world become uncertain.' Schizophrenics are suffering from the truth.10

But who wants to join the loneliness of the mad-man? One has to be in pain or one must be ardently seeking the truth or one has
developed his grounds so deep that he knows both the perspective of the normal and rational man and the perspective of the psychotic and incorporates them both. Such a man has incorporated the Apollonian and Dionsian dimensions into his life.

And so we can now recognize many dichotomies in our lives and in the tradition of our thinking. Some of these dichotomies have taken on substantive characteristics as we established our boundaries. We think of a person's inner life and his outer life as two different substances. Or, a person has some health in him but he has a bit of sickness as well; a virus got inside him. Such dichotomies ought rather to be seen as dialectical schemes. We do experience ourselves as inner as well as outer and there are times that we feel more outer than inner; we move more without, and other times we move more within. And our choice which way to move is not fully intellectual but it is the process of inner-outer and outer-inner that predominates in the growth of the person.

6. The Flight from Self-deception:

In Socrates' view, the man who did not reflect on his life, on his motivation, did not value his significance in the world, in short, was not becoming more and more aware of himself, was really cheating himself. And from the time of Socrates to the present, people have continued to ask such questions about their significance in the world and they have done it as a community of inquirers, challenging each other to less and less self-deception.
Beginning with Plato and Aristotle, philosophers have developed structures of integration through symbols that are meant to clarify for the individual his relationship to himself and his place in the world and in the community in which he lives. Many relationships can be discovered, basically the relationship to the world, the relationship to the body, the relationship to the fellow man and to the past and future. These are the relationships that will be significant to psychotherapy.

Some people experience discomfort, lack of well-being with others or need for reconciliation with other people; they experience themselves as radically split apart. I believe that all people experience some of this disease in our culture, and the way out of it is by reconciliation with self and the others who are significant to one and by a ruthless flight from self-deception.

The way to truth is not that of feigning doubt as many philosophers thought, but of seeking self-awareness, of finding 'where one is at' in relations with self and with the others and with the situation in which one happens to be. The search implies a willingness to enter into a rather ruthless process toward self-honesty, what Laing calls moving out of phantasy systems, of derealization and rerealization of 'reality'. One will then find doubt enough without pretending it, and as Laing shows quite clearly, to pretend a position and then to pretend it away is not to bring one back to one's starting point. Truth is that process of unfolding that begins with the awareness of me-in-the-world which is arrived
at through experience, description and reflection.

The way to truth does not lie in the adopting of an absolute standpoint outside of relationships and processes. One cannot become real by becoming a solipsist. Any method of finding oneself will incorporate what John Dunne has called 'passing over', a search entailing the moving over into another's standpoint on life by a process of dialectical moments that lead toward nothingness in what Hegel called the 'path of doubt' and the 'highway of despair' or what the New Testament calls the 'quest of the way, the truth, and the life.' When one takes on the task of pursuing the personal issues of one's life in memory, anticipation, motivations, and the rest, one will find oneself able to pass over from the standpoint of (one's) life those of others, entering into a sympathetic understanding of them, finding resonances between their lives and (one's) own, and coming back once again enriched, to (one's) own standpoint. Many things in (one's) life become known to (one) only when resonances of this kind are generated. This process of 'passing over', as I shall call it, is a method by which personal questions can be broadened and pursued in a much wider context than they would ordinarily be in an autobiography or creed. It tends to bridge the gap between personal knowledge and public knowledge and to give the seeking and finding that occurs on the strictly personal level something of the communicability of public knowledge.

But I must remind the reader that the method for which I am searching here is a method of psychotherapy, not a method for this paper. The method of establishing communication with others when communication has broken is to begin to communicate. I shall use the word 'schizoid' to designate the man whose ability to communicate himself to others has broken down. There are people
who exist in this state at different degrees of incommunicability for different extensions of time. There are others who begin the process from the state gradually or abruptly; these are the ones I shall call psychotic. They are regarded as psychotic while they are in the process of moving from normality to health or authenticity, and unfortunately some become trapped in this stage or are prevented by others from working through it. Laing has described this last group in the following way:

Some 'psychotics' look on psychoanalysis as a relatively safe place to tell someone what they really think. They are prepared to play at being patient and even to keep up the charade by paying the analyst, provided he does not 'cure' them. They are even prepared to pretend to be cured if it will look bad for him if he is having a run of people who don't see to be getting better.20

The flight from self-deception as far as I see it for this study is a flight from that normality which is, unfortunately, the goal of much of psychotherapy.

C. The New Questioning of Disease

1. Boundaries:

In The Order of Things, Michel Foucault quotes a passage from Borges which is supposed to be from a Chinesse Encyclopedia.

Animals are divided into; (a) belonging to the Emperor, (b) embalmed, (c) tame, (d) sucking pigs, (e) sirens, (f) fabulous, (g) stray dogs, (h) included in the present classification, (i) frenzied, (j) innumerable, (k) drawn with a very fine camel hair brush, (l) et cetera, (m) having just broken the water pitcher, (n) that from a long way off look like flies.21

Certainly this is strange—the product of a mad man? It is an
introduction to a study of ordering. The classifications proposed here by the Chinese Encyclopedia blow apart our conception of ordering in time and space but lead back to a kind of thought without space, to words and categories that lack all life and place, but are rooted in a ceremonial space, overburdened with complex figures, with tangled paths, strange places, secret passages, and unexpected communications. There would appear to be, then, at the other extremity of the earth we inhabit, a culture entirely devoted to the ordering of space, but one that does not distribute the multiplicity of existing things into any of the categories that make it possible for us to name, speak, and think.

I suggest that the other side of the earth is not just a geographical other, though this seems to be what Foucault means here; I am suggesting a similar 'other side of the earth' that we meet in some people of our culture who are called 'insane'.

There are fundamental codes of a culture that give man the empirical order of his life and his familiar context. Then, also, there are theories and interpretations of order in general by sciences and philosophy. But what happens when man finds his culture and theories and interpretation inadequate or wonders if it all is conceptual constructs and he is alone with no stable way of ordering his world?

Some people do lose contact with the familiar structuring of the world of the community in which they live and it is with those who experience this dissociation in a painful way that we are concerned in this study. Laing and M. Sírals, who will be important for us, both attribute this dissociation to destructive family life where reliable structuring ought to have been acquired in a neat
or nexus. If the culture is disturbed, familiar ways of ordering will be shaken with consequent anxiety which may be destructive if there is not a prior habit of acceptance and trust, a willingness to die freely. This willingness is the liberating of structures of behavior and experiencing and reflects what I in the last chapter describe as the passing from normality through paranoia to self-consistency.

I refer often to the exclusion of the other and calling him mad (and I wonder if he is mad because we constitute him so); discrimination is an important element of a study of insanity. My position on this is very well put by Foucault.

The history of madness would be the history of the Other—of that which, for a given culture, is at once interior and foreign, therefore to be excluded (so as to excercise the interior danger) but by being shut away (in order to reduce its otherness); whereas history of the order imposed on things would be the history of the Same—of that which for a given culture, is both dispersed and related, therefore to be distinguished by kinds and to be collected together into identities.23

He goes on to ask what would happen if we studied disease as both disorder 'the existence of perilous otherness within the human body, at the very heart of life; and as a natural phenomenon with its own ordering, types and constants.

My study is an attempt to research dis-ease as such a natural phenomenon and as a disordering. I do not acknowledge the notion of the unconscious except as intentional; there is indubitably a primordiality of experiencing that has not been ordered by waking consciousness, but there is not the Freudian container of
destructive impulses that must be contained. There is a language of dreams that is difficult to understand when one is awake. And there is the experience, being half awake, of knowing one has dreamt and knowing the sense of the dream; then a little later when we are fully awake the dream is a puzzle. There is good reason to think that this kind of dream language was the common waking experience of preliterate peoples (at least those before the emergence of the phonetic script) and that the development of phonetic script made schizophrenia possible when it allowed us also to achieve distance. This point I shall discuss in chapter five.

2. Permissible Psychotic States:

By permissible psychotic states I do not mean normality which I regard as the 'unfortunate condition' but states that I believe are similar to psychoses but which I think are necessary and fortunately are still permitted in society. I think that there is a law of the human spirit that demands that people at certain specified, though indeterminable times, must be allowed to go psychotic. And if this is not permitted the person will be forced to work out the conflict of growth in more somatic forms of diseas, that is, as neurosis.

The most common form of permissible psychosis is 'falling in love' and Freud recognized this as a psychosis. When a person becomes involved in this process his whole world is turned upside down, he is caught in conflicts he does not understand, his
phantasy life goes wild and his emotions or feelings are strong and frightening. All this is his attempt to work out his relation with the other to uncover his pretenses and phantasy systems in which he is caught in relation with the other, as he tries to discover if the way he is relating to the other is his way or the way he has been taught. So the two people in love ask themselves whether they might be merely making each other up. This is, I think, psychosis, and it is certainly necessary; it is the Dionysian overcoming the Apollonian for a time, and when that happens it is frightening or at least dangerous. It is the breaking down of perspectives in a radical way.

Perhaps mysticism in the past served this need for people to go psychotic, though it is a way of self-discovery not so popular in our times. M. Foucault pointed out in the book *Madness and Civilization* that the Enlightenment exiled unreason from our society, but that can only be done by pushing it underground. Unreason will out some way; it is not for man to decide whether he will be crazy, for he must do it daily or he will eventually do it catastrophically.

It is significant that our youth is rediscovering the mystical way and even that they are turning to the Orient for guidance. But often they have found substitutes for the process of healthy, or acceptable, psychosis—various forms of drugs and cults that may often do permanent damage. It is on this point that I disagree with Siegler, Osmond and Mann in their review of Laing; psy-
cbedelia is a model of psychosis and justifiable as such and I
doubt that it is any less psychosis than what psychoanalysis tra-
ditionally meant by that term.

Karl Jaspers claimed that the ultimate source of philosophy
is the 'will to authentic communication' and 'loving contest'. The
contest is a loving contest in which each man

surrenders his weapons to the other. The certainty
of authentic being resides only in unreserved
communication between men who live together and vie
with one another in a free community, who regard
their association with one another as but a pre-
liminary stage, who take nothing for granted and question
everything. Only in communication is all other
truth fulfilled, only in communication am I myself
not merely living but fulfilling life.23

Like Jaspers I regard the imperative to unlimited communication as
an unconditional imperative. It is part of the method of flight
from self-deception that I have been speaking of. It begins with
the perspectivity of man's knowing and will investigate complicated
levels of perspective to indicate the difficulties arising when
perspectives become confused in relationships. I believe that a
theory of truth and a theory of sanity can be defined in terms of
one another. This belief underlies the work of Laing into schizo-
phrenia and interpersonal relations. We need to get beyond the
representationalism of the Enlightenment and Kant's assumption of
noumenal man which seems to be quite a bit supportive of the diffi-
culty of the questions of the possibility of communicating with
other people. Here we have Laing's difficulty; does the other
really communicate himself and is his expression to be trusted?
We might suggest that the dissolution of boundaries in authentic
communication is like that in psychosis.

3. Prophetic Insanity:

Let us return to Kierkegaard's insight that to be 'insane' is to be a self-deceiver and a deceiver of others. Schizophrenia is said to be a state of split personality, a divided self as Laing puts it; there is a self that is communicated and there is a self that is not communicated, a hidden self. To the extent that we all hide, or are unable to reveal, we are schizophrenic. Society has standards by which some are diagnosed officially as schizophrenic. These are legal structures and may say nothing about excluding others from this group of people. We exclude those who are for different reasons dangerous to us.

It is always difficult in any age to distinguish between the madman and the prophet. In history they seem to act much alike. Rollo May's schizoid person becomes schizoid to stay sane in a schizoid world. May believes that psychological conflict has a prophetic function. The schizoid is that way because his defenses are not good enough; he is not fooled by the games that fool the majority. May believes that these people have a sort of tacit awareness (he does not use Polanyi's words) of the healthy way of living in the near future.

The Ecumenical Institute uses the word 'solitary' for persons who set themselves alone in order to be more sensitive to the needs of people and cultures or, it would follow, those who have become more sensitive to the needs of the culture. The so-called
anganese' include a lot of very creative people.

The psychotic is the person whose solitary is out of step with his society. Revolution takes place by means of these solitaries done on the rim of the psychotic abyss, unrelated to the social vehicle of the day, while at the same time the revolutionary remains utterly a part of that vehicle.

I recognize Ronald Laing as such a solitary; I can imagine the pain of a total commitment to values which his colleagues question in great part and the pain of his own self-questioning. I have heard the word come from England that 'he is generally to be regarded as a little crazy.'

I have made a similar commitment; it is to truth, freedom and love worked out in relationships with the community in which I live. I know that I cannot but examine Laing's work in the light of my own values and search. No matter how hard one tries, one cannot escape the question of values in such a project as I am here doing, since the judgment that someone is behaving unreasonably is a value judgment.

Rollo May's recent book Love and Will is a study of prophecy and psychotherapy and he brings these two close together. As a matter of fact, he shows the danger to the prophet who lives on the edge of the communal consciousness, that he may go psychotic.

The individual completes the creative work vastly relieved and more a person than before—but also maimed. We often hear the statement after a harrowing task which took years, 'I'll never be the same again.' It is the hurt after the struggle, the imminence of a neurotic or schizophrenic break, though the person may simultaneously be more a person after the wrestling. Van Gough was maimed; Nietzsche was maimed; Kierkegaard was maimed. It is the danger of the razor-blade edge of heightened consciousness.
on which the creative person lives. No man shall see
God and live; but Jacob did see God—and had to—and, though he lived, he was maimed. This is the
paradox of consciousness. How much self-awareness
can a man bear?

But then again, it may be better to enter full life maimed than to
go with one's parts intact into hell.

May distinguishes his contemporary schizoid personality
from the medical designation of schizoid, the pre-schizophrenic.
I think there is no distinction except that the medical designation
is a mistake. May's schizoid is normal alienated man trying to move
out of his alienation. A schizophrenic break or psychosis is a
violent passage through paranoia without establishing self-consistency.
The passage through paranoia is necessarily the path from
normality, and I shall explain that in the last chapter.

Creativity seems to be the act of pushing the frontiers
of consciousness back beyond themselves, but this is dangerous
because

in the heightened consciousness which is necessary
for the fully creative act—as in the case of Blake,
Nietzsche, Kierkegaard, Ibsen, Tillich, and the few other
men who have challenged the position of God—
schizophrenia and the creative act go hand in hand.
And the individual may move back and forth from
one to the other. One can see the whole story in the
eyes of the person who has 'struggled with God and with
man and prevailed.'

So when I saw the eyes in the picture on the dust cover
of his books, I knew that Loing was a man I would really like to
get to know as much as reading his books and enlightening my own
experience through them could allow. And reading his works con-
firmed this; I wondered how a man who could write Knots and who
keeps such close company with schizophrenics and schizophrenia could
avoid being maimed and emerging, of dying and rising to a new life.

I believe in the life that Laing is revealing to us in his
work and I wish to get to know him more in this study as well as
providing some introduction into his beliefs. It will be a dialogue
between him and me and subject to the laws of the dyad that we are
two people speaking from our own perspectives, hopefully moving
toward some truth. The limitation from the beginning is that I am
writing my perspective on the interaction of Laing's perspective
and on my own. When I quote from some other author, I do so with
approval; I do not use him as an authority but only because he seems
able to explicate my experience more accurately and more concisely
than I can. I quote also to show that I am not alone in my thinking,
and only in so far as they reflect my own belief and experience.

4. The Search for Intimacy:

People are desperately asking now, Is is really possible
to love without being taken? Love seems to be a coverup for fear,
and so we must ask, Is this love? Two millennia ago John wrote 'in
love there can be no fear, but fear is driven out by perfect love.'
There is so much fear in our world and we stay apart lest we be
taken. It is fear that makes my study possible and necessary,
because if there were no fear there would surely be no people in
psychiatric hospitals, nor would there be people afraid to get close
to one another, which is the fear that grounds schizophrenia; fear
seems to emerge as the final emotion to be confronted in its full-
ness and the most difficult to face.

In the words of Henri Nouwen, we are left with the suspicion that the reality which we call 'love' is nothing other than a blanket to cover the real fact that a man and a woman conquer each other in a long subtle skirmish of taking movements in which one is always the winner who manipulates the other in the patterns of his or her life. Love seems to be unmasked as another taking of our fellow man and exercising of our subtle but pervasive power over him.29

The taking form of relationship relies on one's holding a person's secrets in readiness to use against him if the relationship becomes threatening to one. And our world seems so much to live on this form of being together. As Nouwen says it

these are the dynamics of war and hate. If we look at the thousands of people suffering in mental institutions, the millions of children crushed in the conflict between their parents, the endless number of people separated from each other and left alone, we wonder if anybody can ever escape the taking form of our existence. It is the taking form which brings destruction unless the power is ours.30

The question of whether that which we call 'love' really is love is quite central to Laing's work, and we shall explore later what he has to say on the matter.

Wilhelm Reich begins The Murder of Christ with a quotation from Rousseau.

Man is born free; and everywhere he is in chains. One thinks himself the master of others, and still remains a greater slave than they. How did this change come about? I do not know.

Reich points out that there has been in any age an attempt to solve this question of what he calls the 'emotional plague of man'. It is the 'trap'. And Reich attributes being in the trap to 'something
basically and crucially wrong in the whole setup of man's procedure of learning to know himself. Those who tried to get out of this trap suffered for it or were killed.

Criminals are people who find the exit from the trap and rush toward it, with violence towards the fellow man in the trap. Lunatics who rot away in institutions and are made to twitch, like witches in the middle ages, by way of electric shocks are also trapped men who saw the exit but could not overcome the common horror of approaching it.

It seems that to some extent or another we are all involved in the condition of people who hate themselves and everybody else, live lonely and forsaken in big crowds. They are deadly afraid of each other. They pat each other on the backs and grin with friendly grimaces; they must deceive each other lest they cut each other's throats. And each single one among them knows that each single other one is cheating. They hold conferences now as they did two thousand years ago to get 'final peace', well knowing that they cheat each other with evasions and formalities. Nobody tells what he thinks.

And so people learn to worship truth while living a lie and they live their lives confined by an armored character structure to what may be called 'just being human', and live their possibilities in phantasy.

Some people make dramatic breakthroughs into living, they break out through the cracks in the armor. But the armor is the product of 'careful' and intense education from birth. Reich was a genius, brilliant. He died in prison on the charge of selling cosmic life energy across the borders, and many of his writings were destroyed by the jury that indicted him. We could say in the light of his study that anything is therapeutic that facilitates
a breakout of the trap without the destructive expression of violence.

In the long run, I believe that it is the society or community in which one lives that eventually cures. But the therapist in the past has performed the function of committing patients to a certain symbol system of a community. However, the community may be dishonest or self-deceiving. It stands to reason, then, that if the community is healthy the individuals within it have the best possibility of being healed and of growing. Only in a dishonest community do we have the need of specialists of healing. 'Sickness, disintegration, or whatever symbol we use for dis-ease, is prophecy to the community that it is dishonest—a very good reason for the community to lock up its 'sick' people.

If we look at the evolution of living creatures, we find with the breakthrough to man the emergence of an ability to care, a moral sense, even the ability to risk one's life for another. And, as Polanyi says it, 'we realize that both this moral sense and our respect for it presuppose an obedience to commands accepted in defiance of the immemorial scheme of self-preservation which had dominated the evolutionary process up to this point.'

To make survival or self-preservation one's aim in life is not only to be unwilling to grow more human or to begin to transcend oneself but to become less than human. Man ought to be more concerned about caring than about being cared for, to be more concerned about giving than about receiving. The psychotherapist ought to be loving, giving, not just receiving a living and social
meaning from others. The renunciation of power and controlling relationships and the establishment of loving or caring relationships is the ground of therapy. In loving relationships there will be trusting and in the trusting relationship there will be ever increasing revealing, and not just revealing of political opinions but revealing of feelings, emotions, and most important, of values.

In theory of C.S. Peirce, love is the evolutionary force of the universe, and evolution is the process of revealing. The purposeful revealing of reasonableness is God.

Everybody can see that the statement of St. John (God is Love) is the formula of an evolutionary philosophy, which teaches that growth comes only from love, from—-I will not say self-sacrifice, but from the ardent impulse to fulfill another's highest impulse.35

So I believe that I am using Peirce's term 'agapism' correctly when I use it to include the forms of loving behavior that arise from 'the ardent impulse to fulfill another's highest impulse,' to enable him more and more to fulfill these impulses. A truly psychotherapeutic relationship is then agapistic, tending toward an increase of loving in the world. The clinical attitude has aspired to moral neutrality and it is for this very reason that its therapeutic effect is very questionable. Perhaps madness is a moral category.
ll. Dis-ease and Environment

If we look to the 'forces that make people patients' we note that behavior can be seen in terms of response to the environment and to biological stress. However, little is known of the biological causes of emotional disorder or whether it can be said that emotional disorder has biological cause, so we cannot concern ourselves with that here. But as Halleck points out, the psychiatrist is concerned with environmental stress, and that is the concern of my work in this paper.

The intellectual followers of Freud and Marx call the stress of the environment that takes the form of social institutions 'repression'. Laing and the workers of Tavistock have been concerned with 'violence' that men do on one another. There are some who discuss the necessity of stress in our lives. Victor Frankl certainly emphasizes his belief that without stress and anxiety we die. But there may be limits to a person's capacity to endure stress; perhaps part of growing up is to extend one's horizons of stress tolerance.

There have been many psychiatrists who have said that psychiatry today is a system of repression, just as much as are the social systems and institutions that cause people to end up needing psychiatric treatment. Of these the Freudo-Marxists are the most outspoken. There is a certain advantage and necessity of taking into consideration the most liberal or radical thinkers and the most outspoken; and there is an advantage to taking into consideration those thinkers who don't seem to be detached in a scientific way from their research. It is these latter who will be the first to be angry at what the environment does to people. Perhaps they
will exaggerate but it is those who will probably see first, like the prophets we spoke about, and the psychotics.

But we have been speaking of the contact of the insane with the environment. We must ask of the relation of the therapist with the same environment if it is possible for the therapist to interact with the same environment. It is the task of the therapist to relate to the same environment as his patient at some time in his life and to have learned to deal with it. As Halleck says:

If the therapist is to help his patient obtain real insight into the causes of his despair, the therapist must constantly try to expand his own awareness of the social and political environment so that he can share this awareness with his patient. 2

The therapist ought to be open with his client about his relationship to the environment or there is no point to being in touch with the environment, and I believe, no point to being a therapist. The only way the therapist can deal with the patient's judgements and phantasies about him is to bring them out into the open and to compare them with the therapist's own value judgements, and judgements about himself.

Bernard Lonergan pointed out that 'the only way to understand another's differentiation to consciousness is to bring about that differentiation in oneself.' 3 I would ask what differentiates insane consciousness from healthy consciousness and can the therapist incorporate this into his own consciousness. My paper is an attempt to approximate an understanding of the insane differentiation of consciousness and I think I can so approximate because Laing seems to have incorporated it into his consciousness. Laing
points out that we are able to understand the psychotic when we can understand our own psychotic possibilities.

A. Diseases as Symptom

Let us now examine in general the relationship of disease and environment and disease as the expression of the relationship of man to his surroundings.

Since the time of Hippocrates it is believed that the cause of disease is something that invades the body from without. The demons invaded a person and he threw a fit; or bacteria or viruses invade the body today and cause infectious diseases and cancer. If the defences are down or become weak the invasion takes place. So we can combine forces and fight off an epilepsy or tuberculosis or cancer. But this is to make a combination of symptoms into an entity. And so medical science still seeks 'disease demons' that attack healthy bodies and psychoanalysis found certain forms of damage caused by external entities distorting instincts. I am going to consider a theory which suggests that in the state of illness 'a person is alienated from the object of the affected function,' and is not merely invaded by alien powers.

We are raised to consider life in terms of self-preservation, and we ought also to consider it from the point of view of self-communication. Behavior may be the performance of a consummatory action or it can be a symbolic expression or communication.
Illness differs from health only with respect to the form in which the individual relates to his specific environment. Whereas healthy behavior patterns use the body organs, social conventions and language in a manner which establishes and maintains positive interaction with others, the symptoms of illness serve only as self-expression.

The deeper self 'asserts itself in the form of illness when the existential situation frustrates a specific need of the personality. Symbolic organ language is the last resort if needs cannot be expressed otherwise.

The most basic assumption that I see appearing in my paper is that the expression of a person is a revealing of himself. But this is far from an outrageous assumption and is the basic assumption of any phenomenological investigation of intersubjectivity. The only way we may know how a person feels is by his expression. But he may express his feelings or communicate them unwittingly or in ways he does not think he expresses it. Thus the behavior of a person may seem inappropriate to the situation; for example, the behavior of a man who laughs and jokes at his wife's funeral is strange and ought to be looked into. When a person's behavior does not make sense in the environment it is symptom. And Halleck has pointed out that 'symptoms are behaviors that arise from the need to influence what is often an oppressive environment; they are also efforts to change the environment.

Symptoms however, though they are a cry for help, are only indirect communication and need to be interpreted. Usually they do not produce the results that direct communication would, and, I would suggest, mostly produce the opposite consequences to those sought.
Thus the hypochondriac who uses physical disabilities to gain sympathy usually manages only to irritate those who originally had some interest in him. In the long run symptoms are an attempt to gain a certain control, and the medical approach has been to clear up the symptoms by setting an overbalance of some chemical in the body. This has only the effect of establishing a higher dam wall where the communication was breaking through and forcing a search for other weak places where the break through can be made. To deal with the substantive thinking of the medical sciences I have merely used the analogy of a dam that has sprung a leak; the leak then is patched up with chemicals and the water pressure forces its way through the next weak place. To continue this kind of thinking, we can suggest that psychosis is what we have when the whole wall crumbles at once.

The alternative to symptom treatment is to teach the patient how to communicate directly with those around him and to find other ways of dealing with the oppressive or damaging environment. The trouble with symptoms is that they may persist after the environmental circumstances they were to handle are removed and we shall refer to this point again at the end of this chapter.

Before the therapist tries to adjust his patient to the situation he lives in, which is the aim of behavior therapy in this country, the therapist has to ask himself: Is the situation worth being adjusted to? Otherwise we spend our time adjusting ourselves and others to a crazy and violent world till we end up, as Laing says, in a state of alienation 'achieved only by outrageous vio-
All therapists must be philosophers of the lived world or else they spend their time and wit inventing ways of suppressing the attempts of individuals to communicate the message of violence men do to each other and the attempts to change what needs to be changed in society.

B. Disease and Genetics

It seems that there are certain clear limits at which a sudden breakdown occurs and the process into disease becomes irreversible and it is interesting that this is the case both for cancer and for schizophrenia. I will suggest that genetic structure probably allows one certain normal biological potential to be used excessively.

Guilt, sickness and defect are, according to Siirala, 'securities for the debt of unlived life,' an alarm sent out by man's unrealized potentialities. Disease process is always to be understood as a challenge and though there is pain there is also the joy of discovery of new life if the alarm is heeded, of an aspect of life 'that is threatened by distortion or suffocation. Whenever an individual's presence is not sufficiently realized, either for himself, or his fellow-man, something of an appeal always takes its place.' The potentiality is both buried in the symptom and it is sounding the alarm through the symptom. The individual and the community are both closed to the alarm and open to it. The symptom is eventually transformed whether by suppression and silencing.
into another form or by liberation and integration to new life. If the community refuses to receive the alarm it will be transferred and the damage will go deeper; for example,

the symptoms will pass from speech impairment to the intestinal tract; from there to the skin; from the skin to the lungs; from the lungs to psychotic or psychopathic behavior. The next stop may be repression of fear, or escape-reactions, among the family members or the therapeutic personnel; then there may be crisis of the entire therapeutic institution; stands may be taken by adjacent organs in the community; and so on.

What has to be recognised that what was called 'transference' by the psychoanalysis is really the second transference. The original transference is the one by which the defect arises in the individual in which the community transfers its conflict to the individual; the therapist must be the means by which the individual is able to transfer the crisis back to the community, who is willing to allow this transfer to take place. The individual then is accepted and the community is able to allow itself to be challenged to confront the denied life in itself.

I have been insistent that the community denies itself life when it excludes those from itself that it calls crazy and I refer to Michel Foucault's study suggesting our extreme rationalism and the need to preserve rationalism is the reason we exclude the crazy, but only a certain amount. The disposition of the body to certain diseases, if we can really talk of disposition, is related to the environmental conditions and from this relation symptoms may develop. Some medical specialists suggest that illness is essential to the human condition and that if it were to be
eliminated something else would have to take its place. So the emergence of cancer on such a large scale in this century is attributed in some degree to the fact that we have practically eliminated infectious diseases from our society. If we do 'contact' infection we take a pill and the pain goes away; but we don't know what the pill is doing to the human race on the side.

Booth uses the example of epilepsy which he considers to be symptomatic of repressed aggressiveness and which can be dealt with by giving oneself to a service kind of work or by taking pills. It is true that diseases often run in families, but is this because something is passed on in the genes and breaks out when the invader is near or is it possibly, as Booth suggests, because the constitutional types attract each other sexually and inbreed, which should raise new questions for a different definition of incest?

Illness is the expression also of personality according to this theory. The type of chronic illness that afflicts a person at the end of life reflects the way of his relation to his situation in days of health. I would suggest that the last illness is the last working out of the integration of personality ('holiness' in the traditional sense) the reason, I suppose, in the past that religious communities regarded their sick as precious and 'bringing the grace of God' to the community. The last task a person has to do is to accept the final disease.
C. Disease and Historicity

In the past ages man has been somehow dominated by animals (in the pre-agricultural age of our evolution) and by the seasons (in the agricultural age) and at the same time by God. But in our age of technology man has become a controller. Today he is taught he is fully responsible for his existence; his aim is self-preservation and self-sufficiency, but this valuing system has its price.

It appears therefore consistent that those who are predominantly dedicated to values inherent in self-preservation will be rewarded with longer lives, but will also transform some vital organ into a self-sufficient object. It is also consistent that the common forms of therapy in cancer rely specifically on machines and on discoveries concerning the physicochemical aspects of biology.¹²

It seems that it is the function in man best endowed for life, the preferred function, that becomes sick, is dis-eased. For example, one could speculate that the lung constantly subjected to large quantities of poisonous gasses would develop special power to survive the onslaught, which it cannot get from the body. The lung is able to become independent, but in becoming independent it destroys itself. So Booth would suggest that each person comes to choose a relationship to such functions and 'physical disease seems to teach a negative lesson, that man comes through sickness unto death by living according to his own nature.'¹³ Booth points out that in this sense Kierkegaard described as 'sickness unto death' the 'will to be one's own self and to create one's own life according to a personal hierarchy of values.' David Cooper has made a similar suggestion: 'in an extreme statement, one might say that all lethal
diseases are suicide in the sense of a refusal to love.' I would suggest the possibility of loving one's dis-ease, and ask whether the only way of healing may not be by incorporating one's dis-ease into one's life in the sense that in the past the 'holy' thing to do was to resign oneself to one's dis-ease.

Each man has to set up a relation to the environment of balance between preferred function and functions he has taken for granted, between the different ways of establishing conformism. If he fails to do that 'illness sets the balance straight between preferred and neglected functions' and informs him that it needs to be done. Dis-ease is compensation. Jung found this principle in psychiatry expressed in his work on 'psychological types.' Sickness is the way towards wholeness, integrity, holiness. Religion has traditionally encouraged people to sacrifice what they are most capable at, or feel most strongly about, so that this integration of the whole personality takes place. It is possible that modern man the conqueror and achiever who does not 'make sacrifices' may find out that such a course he follows may be regrettable.

I believe that dis-ease is an expression of something and not something to be conquered; it points to conflict that needs attention. We have often to be forced into bed by sickness at times in our lives before we begin to see the way. When I began a chaplain's internship in a progressive hospital which subscribes to the principle of 'human ecology' I envied the doctors' magical powers and regretted my own incompetency, but eventually realised that chemicals and prescriptions only control symptoms whereas what
counted is the patient's relation to the environment. Sickness is man's choice, and I have long believed that a person dies when he is ready, and in a way that he chooses, excluding the unfortunate cases when death is the result of some violent accident. People who are in the ministry in its different forms ought help people die and understand their death as acceptable conclusion to their life. This point I shall develop in chapter six.

D. Madness and Historicity

From our discussion above of disease as the expression of a relation to the environment we move on to a discussion of mental disease as also an expression of relation to the environment.

Michel Foucault in his study of the history of insanity since the Enlightenment, Madness and Civilisation, points out that at the end of the middle ages leprosy had practically disappeared from the Western world. The leper had been the most feared of all men and different ways of excluding him from society had been developed with appropriate rituals, church and social, for the exclusion. These rituals and structures had been incorporated quite well into society and had become part of its structure and they remained when leprosy left. It almost seems that there were rituals of cleansing and exclusion with none to clean and exclude until somehow those rituals were transferred to another class of people who were regarded as insane of mind and ought to be put away lest they contaminate the rest of the people. According to Foucault it was the beginning of the age of reason. Reason excludes unreason, but is it
Just as madness as a social reality rose in what is clearly a response to social reality, we must not lose track of the fact that it remains a social reality. And we have no right to expect certain people to take it on our word that what they take to be reality is its inverse unless we are willing to admit the possibility that what we take to be reality may be inverse. And so we are caught in the question with the schizophrenic of what is the real. Schizophrenia is a cultural problem and it is a philosophical problem.

Those who deal with the schizophrenic, especially the doctor, realize that they are themselves a part of that split life which they are encountering. . . The encounter with schizophrenia shows that the split life has emerged in a world where the communal nature of illness is denied; healing can be effected only through experiencing the illness as held in common. When schizophrenia is encountered as a common illness one discovers that there are also hidden in it possibilities of common healing. Both becoming ill and healing are events in the whole community organism.

So the function of the therapist is to commit the diseasে to a healing symbol system of the community. But what if the symbol system that is meant to heal is decadent? The sane person has been supposed in the past to be the one who followed some scheme of organizing his experience that was acceptable, to people around him who had adherents who were numerous enough that he would not be alone. In this way people found their centering. The crisis in our century is that many believe that the communities are falling apart, that common purpose is lost and it certainly is believed generally that the sane person is the one who searches to become
himself. I would suggest that someone like Herman Hesse is archetypal for the twentieth century, the search without common purpose; and this is the kind of desperate search. As Philip Rieff says

the debts incurred by conscience through warped and atrophied communal purposes are now being paid off at a usurious rate of interest. The lingering death of authorisation love has left behind hatred and violence, twin widows of dead love, free to stimulate in the culturally impoverished or disenchanted energies emancipated from conviction...There are colonies of the violent among us, devoid of any stable sense of communal purpose, best describes, I think, our present temporarily schizoid existence in two cultures—vacillating between dead purposes and deadly devices to escape boredom.16

E. Diseased Insecurity

In a letter to Ronald Laing introducing the English translation of his work Medicine in Metamorphosis, M. Siirala writes that his two assumptions are that 'schizophrenia is ubiquitous, or, in plain language, that everyone is schizophrenic...that is not, and cannot be, generally admitted: collective schizophrenia is not the subject of a bright collective consciousness. He begins his study with case histories of speech-disturbed children and in every case the child seemed to lack a nest in infancy. Parents were too concerned with an attempt to develop a higher standard of living—both gave almost no time to the child and the mother doubted her own femininity. Because the child was not born into a secure nest his attitude to being in the world is insecurity. Laing found in his studies of schizophrenia that this disease which manifests itself as 'ontological insecurity' arises when the experience of the child is invalidated in his original family.
M. Siirala claims that parents must be able to be a 'pole of inter-
communication.' and the child must be able to establish 'recipro-
cal comprehensibility' between him and his world. The parents
must also be able to grasp 'the total configuration, the unity of
meaning, in a person's verbal communication.' and able to get
beyond the content of words. 'A fundamental prerequisite for
speech development is a home that will accept the child to at least
some extent.' In cases illustrated in this book the parents were
ambivalent about their relationship to the children and most
escaped it by concern for high standards of living.

M. Siirala points out that 'the day has not only passed,
it has long since passed when we could visualize a healthy psychia-
trist confronting a sick patient.' In fact it is one of the main
obstacles to therapy to think that we can reduce diseases to mere
object-things, entities that can be studied in isolation. To do so
is to be subject of the 'delusion of reductive reification.'

M. Siirala is careful to begin at the beginning; it seems to be the
beginning that we have chosen.

Every child is a unique field of experience, an individual
world. This world must reach out other individual
worlds in 'I-thou' relationships, and to the common
worlds and world in 'I-we relationships. In other words
a major dimension of individual human development
consists of the possibilities of attaining reciprocal
comprehensibility. How far can mutual verbal presence
be reached between people? This depends on fundamental
non-verbal conditions. Moreover, the 'common world' the
world that receives each new individual into its
midst, must fulfill certain minimum requirements.
And the process of reception begins, not with delivery,
not even with conception. The reception has an immense
historical dimension which is, in principle, endless.
Every person is born into many complexes and families, and in these contexts he must find a structure for security and stability. This nest must mediate at least a minimum of mutual human presence. If disease is the result of objectification, the denial of a nest or structure of acceptance, the mode of therapy is not to be scientific objectification, classification or reification. The basis of therapy is encounter, providing what the person lacked from childhood, affection and love, and an honest sounding board for his experience. So if the source of disease is isolation and separation from healthy communication, therapy will not proceed unless the therapist assumes the responsibility of the rejection of the person which is the origin of disease. It is for this reason that David Cooper suggests that the psychotherapist should be the prostitute; he finds that according to derivation 'prostitute' means 'one who stands for' and would suggest that someone should stand for every person with whom the patient has not worked out his relationship.

Unless every person has met the prostitutes he needs in his life he will seek ways of working out his conflicts in his daily relationships and he will tend to pick the wrong people to do it. It is almost like the case of symptoms which we found usually achieve the opposite of what they are meant to accomplish. So So Jourard says that 'the people who live the ways of life typical to their "ecological niches" become ill because they behave in ways exquisitely calculated to produce just those outcomes.'
Paul Tillich wrote in the foreword of A. Siirala's *The Voice of Illness* that illness speaks of disturbed relations (this is why I have been using the word dis-ease' so broadly) between the individuals and a social group. Sickness may be a healthy reaction against sick society. Disease therefore becomes highly ambiguous and can be evaluated both negatively and positively.  

**F. Freud and the Ecology of Dis-ease**

According to Freud, in neurosis the ego in dependence on reality suppresses some part of the id, while in psychosis the ego in service of the id withdraws from reality. But Freud goes on to say that 'every neurosis disturbs the patient's relation to reality' or as I would put it, the symptoms described as neurosis reflect a relationship to the situation. Freud remarks that the 'neurosis consists in the processes which provided a compensation for the portion of the id that has been damaged,' this being of course a distorted relationship to the situation. We would expect that in the genesis of psychosis two steps could be discerned, of which the first would drag the ego away, this time from reality, while the second would try to make good the damage done and re-establish the subject's relationship to reality at the expense of the id.

So he says that neurosis and psychosis are both the expression of a rebellion of the id against the external world, 'of its unwillingness—or, if one prefers, its incapacity—to adapt itself to the exigencies of reality, to ἀναγκή (necessity).' So the person by
remodels it. Freud proceeds to remark that normal or healthy behavior passes between the two forms of pathology. Neurosis seems to be a passive dealing with reality by escape and psychosis an active dealing by changing it.

In psychosis, the transforming of reality is carried out upon the psychical precipitates of former relations to it—that is, upon the memory-traces ideas and judgments which have been previously derived from reality and by which reality was represented in the mind. But this relation was never a closed one; it was continuously being enriched and altered by fresh perceptions. Thus the psychosis is also faced with the task of procuring for itself perceptions of a kind which shall correspond to the new reality; and this is most radically effected by means of hallucination. .. A neurosis usually contents itself with avoiding the piece of reality in question and protecting itself against coming into contact with it. The sharp distinction between neurosis and psychosis, however, is weakened by the circumstance that in neurosis, too, there is no lack of attempts to replace a disagreeable reality by one which is more in keeping with the subject's wishes. This is made possible by the existence of a world of phantasy, of a domain which became separated from the real external world at the time of the introduction of the reality principle.27

G. Language, Constellations and Environments

An understanding of 'constellations' is useful for the discussion of language and presence and their relevance to the formation of a diseased way of being. So M. Siirala has used it.

According to Heidegger speech is the 'home of being' and in it man dwells. In language is man's capacity for reflection, that is, his capacity to understand, and the means of his integration with himself and his community. That is, presence is the means of his self-integration. The infant begins to learn the language and
then the self-integration in the basic family which if it has some reliability and stability has the quality of a nest. A person's sense of presence to people greatly depends on the way in which he was able to present to his parents and immediate family and whether the lesson was a bad one or not; if the lesson was bad he must go out and learn to be present to someone else, to the one we have called 'prostitute'.

The 'prostitute' as Cooper calls him must be able to be father and a mother, to be able to feel childlike in the relation to the patient. It is most important that the psychotherapist be able to take the role of the 'the ancient bisexual man-woman who at certain critical points explodes into a serious joke.' If the child does not meet the prostitute he does not free himself from his parents.

There is a certain continuum of mood between mother and child that can be symbiotically perpetuated indefinitely even into adult life, slaving many of us in an emotional no man's land in which we are in a state of not crying the uncried distress feeling of another (mother). And so the child grows up into an adult world and is lost and doesn't know what he needs. So there are many people who

go to parties in a search for a correct solitude, but inevitably get lost on the way because they are unclear of their need and would never imagine that they go to the party in order not to be there. So the true solitude is lost in a frenetic loneliness.

Siriála found that in the cases of diseased speech the presence of the child may have been recognized but the atmosphere was distorted by controversy, insecurity and instability. 'The
specific ground for an individual's speech and speaking is the history of the nest and the subsequent phases of his own presence.  

Here, then, we find direct correlation with the discoveries of Leing and others on the double-bind situation. The origin of speech disease and schizophrenia has much to do with the distortion of the existence of the parents and their consequent expression.

Language is the best testimony that man is not merely an individual but a fellow-man; it is 'among the most obvious dimensions of mutual integration between human beings.' Dis-ease of speech would certainly speak of dis-ease of relationships.

Though it may be the case that in our age we seem to have become particularly aware of man's need for care, it also seems to be a fact that we have evolved new forms of discrimination against certain groups. The discrimination becomes even more subtle because discrimination has also become socially reprehensible. And Sirala regards this discrimination as a key factor in the place of diseaze in our society. Discrimination must become rejection of the defects to which man is susceptible, a reiteration of the old belief that we reject others what we fear or don't like in ourselves. Rollo May, Harvey Cox, and others are concerned that we recognize our need to incorporate the daimon into our lives in a creative way lest it take over and destroy us. I can only suggest that unless we incorporate the daimons of our society we shall be destroyed by them. And our approach to dis-ease in our society may have the power to destroy our people.
Much of the rejection of the diseased person is an attempt to reject from our lives the recognition of dependency on others in ourselves. Siirala points out that we seem to dispel from our awareness at the same time our dependence on others and our differences from them. But both of these are necessary components of our lives. Instead of recognizing this we label the one with 'defect' as exceptional, (a polite form of ostracism) and an outcast because he is dependent. This is precisely to deny from ourselves that each of us is defective in some way; certain ways of being defective are prohibited in each society. We reject the others only because they remind us of our own limitations; they remind us that we are vulnerable and headed toward death. We reify death but the trouble is

the 'death-content' of our own mode of being—and the particular behavior this involves—remains hidden from us. When 'death' manifests itself in terms of sheer hopelessness, our own despair, we dare not experience it at all. We must locate it anywhere we can. This locating and avoidance form one dimension of the prevalent communal depression, from which the clinical depression of individuals derives.33

We have lost hope in the possibility that death to life may be redemptive, that there might be new possibilities of life contained in death. In failing to confront our own death in our lives we become resigned in a feelingless way, in a suicide that is too easily chosen. I see that the major religions of the world regard death as the possibility of new life; perhaps we of the twentieth century enlightenment prefer the half-chosen suicide to the possibility of being duped by the 'will to believe.'
The import of discrimination in any case is that it throws the burden for communal defects on one individual or a minority who must experience its agony alone. It is clear that despair is the basis of discrimination and the emergence of hope the way out of discrimination.

Language is any form of activity used to establish 'reciprocal comprehensibility' and in this sense every person is a centre of speech. 'The relative independence, cohesion, integrity, mobility, and differentiation of this life as a speech centre form dimensions of intelligence.' There are innumerable means of establishing mutual comprehensibility but only a few are chosen in a particular culture and others are rejected. Many possibilities of such revealing of self may be regarded as disturbances or defects or superfluous by some people; those that seem to the person to be necessary but are not acceptable to the community will also be regarded as defects, peculiarities. The community will not understand the language and regard them as crazy.

Siirala's purpose in investigating the dis-ease constellations is based on the belief with which I began this research—that dis-ease is the expression of a relation with the community or the environment in general. He found that the dis-ease of the individual could not be situated in the individual alone; 'the afflictions, defects and disease processes themselves provided a resistance, with a configuration organically related to the community's state of integration.' In a physical illness the community's failure to become integrated has gone past the individual to become
the burden of an organ. Responsibility for disintegration goes out of the community who should be the one responsible and beyond the individual to the organ. The consequence is that

the organ's fulfillment of its specific ability becomes difficult or even impossible under such circumstances; it has been given a responsibility that is not only un-amenable but beyond its capacity. It cannot bear it alone and breaks under the burden. Such vicarious illness—the organ suffering for the whole organism, and the individual suffering for the community—is, many researchers now believe one of the basic dimensions of being ill.36

People tell us about their world not only by physical symptoms but also by their verbal expressions. If we listen carefully to them they tell us how their world has changed lately, that is a lonely world or that it is dull, uninteresting. When someone describes his world he is describing himself and the relationship to the world. We have been speaking of this approach we are developing as the ecology of insanity. It is the relationship of the person to the environment, his world or situation that is expressed in a special way by dis-ease. J.H. van den Berg puts it this way:

the relationship of man and world is so profound, that it is an error to separate them. If we do, then man ceases to be man and the world to be world. The world is no conglomeration of mere objects to be described in the language of physical science. The world is our home, our habitat, the materialization of our subjectivity. Who wants to become acquainted with man, should listen to the language spoken by the things in his existence.37

So we listen to the language by which a person expresses his relationship to the objects in his life, and anything else of significance.

The Prereflective Body

We can distinguish between the medical point of view and
our own by using Van den Berg's distinction between the reflective and the prereflective. The reflective body is the one with organs as described in the textbook of anatomy or medicine; the prereflective body we not only have but are. A person becomes head when he thinks, stomach when he eats or sexual in intercourse. And we have suggested earlier that a person is diseased when he over-emphasises some such mode of being. We could imagine then that the person "with" an ulcer of the stomach is excessively 'gutsy' in a certain way in that he is burning his guts out or eating them up. Van den Berg describes the case of a man whose claim was that his heart was sick. But the physicians found nothing wrong with it. Point is that

physician and patient refer to two entirely different organs. The patient speaks of the heart of which it is said that it is 'in the right place' or no longer so whereas the anatomist cannot find even the minutest displacement. The heart that can 'leap into my mouth' that can 'sink' and that occasionally 'is worn on the sleeve' that can be 'broken' by words, by gestures or by a look which may very well be 'diseased' while all the physicians in the world unanimously declare that the heart they examine functions faultlessly...The patient's heart is ill, he is neither mistaken nor deluded, he has a perfectly real 'heart-ache.'

We have referred earlier to the fact that our society cannot face the dependence of its members on each other nor will it permit differences. But in past, it is to be noted, lovers made much of a certain kind of dependence on each other and of the differences of people. Van den Berg says that this is the peculiarity of love:

it arises from the particularities the beloved possesses,
particularities not found anywhere except in her. The special, exceptional qualities which usually form that which owing to the opinion of 'the others' is the cause of the bad footing on which one is with one's body yet may apparently be the first motive for love.19

Talking with a friend has the characteristic that both together 'try to enter' a particular subject as it is for the other. If they were not friends there could be the same use of words but the 'trying to enter into' would be lacking. If I am enthusiastic I set the other free to let me enter into what something is for him it is the most essential part of friendship to let the other free to let me into his world. This has particular relevance for our study because we are interested in getting in to the world of the schizophrenic or the insane person. How do we free the other enough to let us into his world? I suggest that it is first by accepting his world as real for him and wanting to be let into it; but one has to really want to get in without any judging or pretense. The reason the person is insane is that someone did not really want to get in and either rejected him outright or pretended to want it. I believe that the barrier that insane persons set up to prevent others from entering is proportional to the amount of wanting to get in that he needs from the other. By this I mean that, say, in the case of the schizophrenic, the person needs to be loved but is afraid of what he is accustomed to that has gone under the guise of love; he will refuse to let in that person who claims to love him until he has tested that reliability of that love by posing a solid barrier to be overcome by one who would enter his world. If the person cares enough to recognize the 'twinkle' to which I have
referred elsewhere he has begun to get into the other's world.

The Future in Therapy

Van den Berg remarks on the strangeness of the fact that psychology speaks so very little of the future and so much of the past. It seems that man thinks more of what is going to happen than of what has been in the past. There is a past that can be described as 'the past as it appears in the present.' What is important is not the past as a series of events as they were in the eyes of all around me but the past as a series of events for me, those times I perhaps misunderstood my parents or events that were so significant to me but insignificant to the perpetrators so that we each held them in different proportions, so that they had different emotional content for each of us. Some of these are what the psychologists call psychotraumas thought some of them were happy events. Still in all there was a certain amount of mystification, as Laing calls it, of which everyone is responsible. There is a sense that we can talk of the future as 'that which comes, as it comes to meet me now.' (Zu-kunft or a-venir) 'The future is most essentially that which finds expression in the way it comes to meet me.' If I am going to swim in the neighborhood pool there is a sense in which I am already in the pool. I am enthusiastic about going because of past experience of swimming and it is my feeling about being in it that determines how I shall place myself bodily in it. For anyone we could say that 'the past comes to meet him from the future.' It is such a past that determines whether we go swimming enthusiastically or hesitantly. Briefly, the present is 'the going to
meet myself as I throw myself as what I have become in the future.'

One who throws himself into the future throws himself into death but in our society we have managed to deny that death from our awareness quite effectively. We say 'one dies' instead of 'I am dying' and underneath this superficial rest there is a 'very definite smouldering disquiet.' 'The time of illness and dying may show what fire flares up from this smouldering.'

In emphasising that fact that 'man chooses the form in which he throws his past before him, he chooses the form in which he places himself in the future. He chooses a similar aspect of the future, that it becomes possible for him to live on.' If he has been injured and constrained in some way he may choose to experience the conditions that are less painful than going back to the situation before the injury. A life of health of the old kind may be too painful; physical disability may be far less painful than psychological stress of the responsibility of making decisions. To heal this person one does not examine the injury but the dialogue between the person and the situation from which the injury is the means of escape. The point of discussion is that psychotrauma is not an objective fact but the event highlighting the significance of the situation; 'the situation makes the psychotrauma possible or calls it into being: no psychotrauma without a difficult situation.'

The process of getting over psychotrauma is that of reviewing the situation and seeing the possibilities of choice and in a sense choosing a new past. He must choose to change his attitude to life and free himself from the past and his choices. The therapist does
not change the other; he is someone in terms of whom the other can work out his unfortunate habit of choice that has been his way of being since the trauma and choose other more fortunate ways of being with people.
III. THE IDEA OF A SOCIAL PHENOMENOLOGY.

A. A Game of Tennis:

To open up the questions and concerns of this section let us consider an example that Laing uses of a girl who imagined herself constantly in a tennis game in which she was the crowd, court, players and especially the ball.

the tennis ball, so small, so passive, yet so resilient, is the centre of the whole game, and of the whole spectacle. All eyes are on the ball. Though so resilient, it has not unlimited endurance. It is the medium worn out. True it has a lot of bounce. It is the medium of the relationship between the players. They apply spin, they try trick shots, they try to cheat. Sometimes they apply gentle shots, but only to win. No one is really interested in the ball, although it is so essential. They use it or want it only to win the game, to beat the other side. No one really cares about the ball. It is treated entirely ruthlessly, but what if the ball should rebel? If it cannot keep up with the beating it is taking, if it aspires to have some initiative, some way in how it should bounce, where it should go, it will be thrown away. For the game's the thing. It is not perhaps fundamentally a matter of winning game, but simply of perpetuating it. Suppose then that the ball metamorphosed. It might turn itself into a hand grenade and blow up the players. It might even turn into an Atom Bomb and blow up the whole Centre Court, the spectators, and half of London. It may be a time bomb, set to go off just at some critical point. What a revenge it would have! But if it explodes it will destroy itself.  

So the tennis ball can get out of the game only by destroying itself or it can survive only at the price of being in the game.

Laing suggests that the families of schizophrenics are like the tennis game in which a certain member of the family is chosen to be the ball so that the game can be played. And so he suggests that the
full concreteness of reality would require us to see persons as the agents-patients in an infinite number of subsystems within the totality of all the systems that together comprise the universe, and occupying innumerable different positions in these innumerable systems. The pattern of interplay between the original set or network of human beings which the new human being encounters as he or she enters the world, the way the infant learns to fit himself into the patterns of sight and sound, movement, smell, taste, touch already going on around him, and the dialectic set up between him and the dance as soon as he starts to try to join and contribute to it, sets the scene for the rest of life.2

These two sections from the writing of Laing have introduced us to the importance of family structure in the origin of schizophrenia and have also introduced us to his question of tracing structures back till totally comprehensive structures are found. In his search Laing has relied heavily on the recent work of Sartre so it is to Sartre that we must now turn in greater detail than we have earlier.

B. Sartre and the Total Picture.

The difficulty of finding a fixed base of operation of investigation in Laing's work is reflected by his own statement in the introduction to his work on Sartre.

We are concerned here with decisive developments in man's understanding of himself—as important for demystification of the present as Freud's and Marx's formulations, for instance, were in their day. Here we have a more ambitious theoretical venture than either Freud of Marx attempted—no less that a totalization, as Sartre would put it, of the whole of existing socio-historical knowledge. Here for the first time is a systematic theory spanning the whole range of individual phantasy, interpersonal relations, socio-technical systems, and inter-group rela-
tions. But this systematic thought is not a closed and finished system, this totalization in progress perpetually abdicates any pretensions or intentions to finished totality.\^3

We are to deal with variables of interpersonal perception, phantasy and imagination, communication, perspectives, illusions, and collusions, situatedness in groups and all the rest. Can we come to a theory or method that takes into consideration such variables? J.H. Van den Berg, in his attempt to work psychiatry within a historical context has preferred to substitute 'sociosis' for 'neurosis' suggesting that perhaps dis-ease is attributable to the situation at least as much as the person. We could say the dis-ease is in relationships of person to person and person to the broader context of culture as well as person to self. Rollo May has found the neurosis of his patients are predictive of culture transitions, suggesting the impossibility of studying psychotherapy other apart from the/human discipline including history. So a theory of psychotherapy must leave itself open to being surpassed by a better; it must even attempt to make itself replacable. We must point out also that we cannot now escape the belief that has been proposed before that the therapist is himself involved in the sociosis, that he is immersed in cultures that need healing.

In studying the relationship of, say, a daughter to the family, one must consider the girl in relation with each person, first, and then with combinations of family members. Girl-for-mother is not the same as girl-for-brother or even for mother and brother together. A person's behavior changes in relation to
different people, for the experience of the others is different and what is intended to be communicated to the various others is different. So behavior undergoes alterations as the person becomes different other to the others. And no one alteration is basic to the others. Alteration, for Sartre, is a form of alienation— one becomes non-self according to the person one is with, for an alteration occurs when my action passes from my-action-for-me to my-action-for-you. From being mine-for me it becomes other-for-the-other. The structural aspect of the transition to and from self-for-self to other-for-other Sartre calls alterity, and the movement he calls alteration. 4 According to the line of thinking of John Dunn which we have explicated it seems wrong to call alterations a form of alienation if we are to continue to regard alienation as violence as our usage usually does. But the point to be grasped here is that people do change according to the person they are with and they are experienced differently by different people. And not only this but they behave differently in different situations and even experience themselves in different ways. 6

But we are also interested in the relations of persons in a nexus. The relationships 'are characterized by enduring and intensive face-to-face reciprocal influence in each other's experience and behavior.' 7 In studying the family or nexus the aim is to discern 'structures, processes and effects as a system, not necessarily intended by its members, nor necessarily predictable from a knowledge of its members studied out of context.' When events, occurrences, or happenings may be traced to certain agents in the
group they are the outcome of praxis. When no agent can be found, the events are the outcome of process. 'What happens in a group will be intelligible if one can retrace the steps from what is going on (process) to who is doing what (praxis). Unfortunately it is impossible to give a totalization of any family or nexus. The account of any group is polarized 'around the intelligibility of the experience and behavior of the person who has already begun a career as a schizophrenic.'

The use of the Sartrean concepts is an attempt to avoid the common mistake of transferring pathology from the individual to the family or community, to extend the unintelligibility of individual behavior to the unintelligibility of the group.' The initial impact of transferring this biological analogy from one person to a multiplicity of persons is 'seductive' and Laing cautions us again such a confusion.

An understanding of Laing's use of Sartre's discoveries and method will help ease the philosopher into some of Laing's works where I think terms generally are used rather than defined, where basic constructs rely on the context for explication. On different levels terms develop new significances and new levels of concreteness.

We are referred to Kant's table of categories of four groups of three. The third arises by synthesis of the two. 'Kant's concept of synthesis is at least germinally dialectical in the Hegel-Marx-Sartre sense.' Sartre works from the first group of categories where totality arises from the syntheses of plurality
and unity, but what is important is that for Sartre 'there are no final totalizations in history. There are only totalizations-detotalizations-retotalizations.' History is understood in the terms of such process.

The Hegel-Marx thesis is that history is the process of totalization-detotalization. There are many ways of forming consistent views of certain events.

Each particular perspective, each particular point of view that is, precisely, each person, is the centre of his own world, but not the centre of anyone else's world—although many people long and strain to make themselves so. Each point of view is an absolute, and at the same time absolutely relative: the collisions between points of view are the occasion of the endless instability of humanity, the collisions are efforts at some measure of stabilization.10

Each perspective is absolute and yet relative so that each point of view seems the whole truth till another makes it relative and the process of surpassing the former moves on. When I perceive a number of people as one I constitute it as a group, social entity, social gestalt. And it seems for Laing and for Cooper that groups are such only because people constitute them that way.

Analytic reason was 'the reflection of the way the social scene was constituted at a certain period of history' and is no longer appropriate to man.

unless we think dialectically, in Sartre's view we falsify our perceptions to fit our conceptions, by distorting our concrete experiences by secondary reifications, extrapolations, and abstractions, so that we knead it into a form that analytic reason can cope with. We are led to use persistently false analogies, and we actually try to constitute the human reality into a form that does violence to its own nature.11
Analytic reason would give no correct understanding of the changing movement of history, the process which Hegel called aufheben and Sartre dépasser.

A totalization holds the field. It is challenged by another totalization. The first totalization loses its absolute validity, and becomes absorbed into the second, if the second is sufficiently encompassing. Thus it is negated as an absolute, conserved as a relative, and subsumed in the later synthesis. And this synthesis will in turn be subsumed in another, and this in another, and so on.¹²

Part of Sartre's thesis is that this is the process of psychotherapy throughout history. The nature of madness changes. Foucault's Madness and Civilization attempts to show how the nature of madness changes.

If we constitute people into totalizations, they are real in these totalizations as long as we constitutes them so, or invent them. And there are ways of keeping these totalizations as permanent as possible until they are overcome. We can have theories based on a particular perspective, a certain theory of the human sciences, and take it to any degree of abstraction, say, and loose the whole picture of man, doing violence to him. So perhaps we could constitute a group, call them schizophrenics because they fit certain criteria that we have decided on. And if they begin to cease to fit the criteria we can change the criteria or we can change the constitution of the group.

Any case history is an interpretation and a reduction. *A case history is the record of an encounter. It reveals as much about the doctor as the patient.*¹³ Responsibility consists in acknowledgments...
ledging more and more that by writing case histories we reduce and control. When we deal with people as opposed to the non-human, we deal with a subjective being who is constantly totalizing the totalizer.

The psychiatrist approaching a child patient is involved in a dialectic, a praxis. At the first impact the child sums up the psychiatrist (or psychologist, the physician or nurse), and the child's behavior depends on this totalization. The psychiatrist...is confronted by a totalization of himself, which is reflected in the child's eyes, symbolized by his gestures, implicit in every detail of his behavior.14

The encounter is changing the totalization of child by psychiatrist and of psychiatrist by child constantly; they constantly interact and are modified continually.

Only dialectical reason with its capacity to absorb partial theories, totalities, spirals approaches the overcoming of individual perspectives. It is possible, and easy, to bypass the human being and come up with

a theory of mind unrelated to the body, a theory of behavior unrelated to experience, a theory of the individual unrelated to society, a theory of society unrelated to the individual, a theory of person or society unrelated to the material world.15

Sartre sees the theories of sociology or psychoanalysis as partial realizations of moments in the dialectic that have not been grasped by dialectical reason but were blown up into total theories. A person who does not live the totalization venture of the dialectical method will be lost in some blind alley or diversion or in what Lonergan calls 'scootosis.' The method that we have conceived as 'the flight from self-deception' is the dialectical method.
A most elementary structure of growth can be described as the process of conflict and reconciliation.

We must endure this conflict, grapple with it, feel it in our insides. But then we must reconcile the conflicting elements--only to find ourselves embroiled in new conflict.17

This is another statement of the dialectical method of human development.

Laing describes Sartre's _Saint Genet_ as a detailed exploration of 'the phenomenology of institutional serialization' and other forms of institutionalization. 'All Genet's relations with the other, as Sartre describes them, are group relations. Genet is the other and also "third" to himself and to the other.' Sartre is concerned to explicate or at least indicate the ambiguities of language or especially of being human. He tries to show that human reality is ambiguous in its essence. The ambiguity is plain when we view a person from various perspectives or with various conceptual structures. For example, as Laing points out the statement 'I hate you' may mean psychologically 'I love you'. Languages are not able to express certain aspects of reality so that we are forced to express ambiguous facts in language that tries to be non-ambiguous. We can find ourselves with meanings that are beyond the possibility of expression in language. As Laing translates Sartre, 'all prose is failure. Yet the writer must play this game with despair if he is to honour his commitment to write philosophy which is not trivial.' It is easy to judge that Laing is preparing his readers for the complexities, ambiguities and impossibilities of his own
attempts to investigate the complexities, ambiguities and impossibilities of human interpersonal experience. Everyday language must be used to express experiences that are not everyday but the language must be pressed into service 'even if this involves turning language against itself, exploiting its deficiencies, its vagueness, and its contradictions.'

Elements of encountering between two people are experiences, perceptions and actions. These are communicable to different degrees and Laing attempts to discover a method of quantifying these elements of communication and of unravelling the various spirals that may develop in a relation of two people or more that confuse or destroy communication. I like this person and he likes me. It is important that he knows that I like him and it is also important that he know that it is important to me that he knows how important it is to me that he knows I like him. This is a possible beginning for analysis of a relationship and one can see that it could become quite complicated. It is just one side, because I don't know if he knows how important it is nor do I know what is important for him in the relationship. Laing has developed a method for investigating dyads and has expanded it for groups, which could be a way of unravelling tangles in, say, marriages and providing a way for the partners to be more truthful (revealing, communicative) with each other. And there is a level of understanding that other, of being understood by the other and of realizing one is understood. These three levels apply to both partners or each member of an encounter.

A person's experience cannot be expressed in language.
we have to refer a person's utterances to the concrete totality of
his life if he has already lived it or to our totalization of his
totalization-in-process if he is still alive. The structure of
language is always of being-for-the-other and my experience seeks
and draws back from verbal expression which is the objectification
of my subjectivity for the Other. Even inner language is speaking
to myself as other.

Psychoanalysis is a discipline and a technique which
belongs within the totalizing scheme. This is so for Sartre certainly
and seems the case for Laing. 'If we see personal life in Sartre's
terms as "constituted-constituting" as a synthetic unity of what we
make of what we are made of, of moulding ourselves out of how we
have been moulded,' then psychoanalysis seems generally to ignore
the active, constituting part of personal unity, Sartre's psycho-
analysis is in terms of the ultimate issues in a personal life it-
self—in terms of the project 'or original choice of self' (which)
provides the intelligible basis of all the acts and experiences of
the person.' Only when freedom is discovered, the choice to be
one's self before all determination, can the real person be found.

C. Interexperience

Laing begins his most famous work with a discussion of
social phenomenology, the study of the relation between experience
and experience. I experience the other's behavior and he expe-
riences mine. How are we related on the experiential level? I can-
not experience the other's experience though there is the other-as-
I-experience-him. So 'experience is man's invisibility to man.' But it is the true revealing. 'Only experience is evident. Experience is the only evidence. Psychology is the structure of the evidence, and hence psychology is the science of sciences.' I can begin with experiencing the other as experiencing and study his experience by making inferences from my experience of the other experiencing.

Social phenomenology is concerned with interexperience.

Since your and their experience is invisible to me as mine is to you and them, I seek to make evident to the others, through their experience of my behavior, what I infer of your experience, through my experience of your behavior.

The crucial problem of our study is the relation between experience and behavior and experience. Natural scientists observe behavior by experiencing other's behavior. If they knew the relation between behavior and experience they could work backward from the other's behavior to his experience.

The trouble, as Laing points out, is that the relation between behavior and experience is not problematic but mysterious, and the relation is quite basic to the natural sciences but there is no science of the relation. There are many modalities of experience, perception, imagination, phantasy, memory, reverie, and the rest, and we have, according to Laing, no right to regard any more important or more 'inner' or 'outer' than the other. The so called 'inner' is our way of experiencing bodies as theirs. Nor can we speak of a 'psyche' that contains our experience; 'my psyche is my experience, my experience is my psyche.'
So we can define the person in terms of experience 'as a center of orientation of the objective universe: 'in terms of behavior 'as the origin of actions.' A person is 'me or you, he or she, whereby an object is experienced.' Persons cannot be studied as scattered objects in space. 'Theoretically we need a spiral of expanding and contracting schemata that enables us to move freely and without discontinuity from varying degrees of abstraction to greater or lesser degrees of concreteness. Theory is the articulate vision of experience.' In personal experiencing a given field is changed into a field of intention and action. And then I as the center of experience and origin of action live in many worlds and relate to other centers and origins. So for the scientist of human person the observation of behavior is not enough. But Laing finds it necessary to state as axiom that in a science of persons 'behavior is a function of experience; and both experience and behavior are always in relation to someone or something other than self.' In human relationships the behavior of both persons is mediated by experience and the experience of both is mediated by behavior. There is no direct continuity between the behavior of both or between the experience, directly.

In our alienated condition we can still believe that people meet each other genuinely, or that the possibility is there. So we strive to take away the barriers between us, the masks and defences, the different ways that we have established to keep us apart and protected from each other. We attempt to discover the ways that we
have been taught since childhood to pattern our experience according to the general norms, the ways we should see others and behave toward them. And out of that we attempt to see the other and respond accordingly in the light of our values and goals. This conversion that we have been speaking of is the psychotherapeutic experience.

We are trying to reform psychotherapy in terms of the discovered awareness of the importance of experience and its relation to behavior so we need new theoretical constructs to deal with interexperience and its relation inter-behavior. We need also to be able to see these in the context of situations or contextual groups or systems and be able to place all this in the 'scope of a total vision of the ontological structure of being human.'

The old forms of psychology had no constructs to deal with the relations of people with each other. Freudian analysis conceived of parts of an individual interacting with each other. Some contemporary theorists incorporated the discovery of Feuerbach of the You standing opposite to an I and also being a You, but they seemed to be concerned only with the relationship in terms of quantifiable behavior patterns and omitted to attempt to analyse the experiences involved in the relationship. Games theory analysis and object-relations theory dealt with system of games or with objects and not with subject's. What is required for the full approach is

a phenomenology of experience including so-called unconscious experience, of experience related to behavior
of person related to person, without splitting, denial, depersonalization and reification, all fruitless attempts to explain the whole by the part.32

We can say that our concern is with 'two origins of experience in relation.' Since behavior can reveal or conceal experience we need to study these possibilities of concealment or revelation. And the therapist, or both people in dyad are caught in splits between inner and outer experience and inabilities to reveal their experience. 'Psychotherapy must remain an obstinate attempt of two people to recover the wholeness of being human through the relationship between them.'

Knowledge as the area of familiarity is a mixture of body knowledge, experiential and head knowledge, what has been communicated by symbol. Human reality is given or received basically on the level of personal experience and meaning. William James makes a distinction between knowledge by acquaintance and knowledge about. His empiricism consists in his belief that experience is prior to any conceptual analysis.

all the elementary natures of the world, its highest general the simple qualities of matter and mind, together with the kinds of relations that subsist between them, must either not be known at all, or known in this dumb way of acquaintance without knowledge about.35

James seemed to think that the less we analyze a thing the more our knowledge is the acquaintance type. Knowledge about a thing is knowing its relations, spelling out what lies in the fringes. And we can have knowledge about interpersonal relations and interaction and interexperiences. But what is not to experience another and be experienced by the other.
I mentioned earlier that I regard many modes of intentionality, emotions, senses, feelings... Intentionality is my contact with reality, as it presents itself structured. We may attend to certain areas of intentionality, but the others are always present. We may focus on certain modes of relation with objects or persons, but the others are in the background. In fact trouble starts when we try to deny certain modes. James speaks of the *binnenleben* the buried life of human beings... of the sort of unuttered inner atmosphere in which his consciousness dwells alone with the secrets of its prison house. This inner personal tone is what we can’t communicate or describe articulately to others; but the wraith and ghost of it, so to speak, are often what our friends and intimates feel as our most characteristic quality. 36

Von Eckartasberg speaks of 'landscapes of experience.' These reveal themselves to our selective attention, the combined landscape of perception here and now by means of the distance senses of seeing and hearing and the proximate senses of smelling, tasting, and touching, as well as the kinesthetic and qualitative self-awareness of my feeling flesh, hot or cold, tense or relaxed. 37

These landscapes of perception are the primary reality of conscious experience that give the other forms.

Being in touch with the world through the eyes, the ears, the nose, mouth and skin, in the immediacy but also at a distance, backward in time through re-membering, forward in time through projecting, being in touch in a wishing way (fantasy) and in a symbolic-conceptual, usually verbally mediated way—these are the ways in which landscapes of experience reveal themselves differentially. 38

Behaviorism, the experimental psychology of the past still tends to reduce intersubjectivity to observable patterns of action,
tended to reduce motivation to mere reaction to stimulus. An experiential approach to intersubjectivity takes seriously perception as the mode of participation in reality and the complexity of perspectivity. Action is a response or an attempt to communicate. There are structures of behavior, structures of perception, structures of motivation, and attitude, and no structure can be considered adequately apart from the others nor can any part of a structure. And then situate these structures within the various communities of which we are members and the picture becomes complicated. The analysis of structures of interaction is relatively simple compared with the analysis of structures on interexperience. But we have no choice but to attempt to deal with interexperience if we would honestly deal with persons in relationship and this seems like an impossible task. But we can be consoled in thinking that there was a time when it could not have been believed that inter-behavior could be quantified in the way it can be today.

These are the problems that concern Laing and they are difficult to deal with because he is a pioneer in the study.

D. An Algebra of Interexperience.

Laing's most recent book Knots is a summary of confused and dishonest relationships abstracted to some degree that they can be fitted into a variety of circumstances and persons. As a preface to the book Laing writes:

The patterns delineated here have not yet been classified by a Linnaeus of human bondage. They are all, perhaps, strangely, familiar. In these pages I have confined
myself to laying out only some of those I actually have seen. Words that come to mind to name them are: knots, tangles, fankles, impasses, disjunctions, whirligigs, binds. I could have remained closer to the 'raw' data in which these patterns appear. I could have distilled them further towards an abstract logico-mathematical calculus. I hope they are not so schematized that one may not refer back to the very specific experiences from which they derive; yet that they are sufficiently independent of 'content', for one to divine the final formal elegance in these webs of maya.

Then to illustrate the content of the book we can take the first pattern and perhaps the most simple to understand and recognize in our lives. It is easy to see that it is part of the story of the tennis game that we discussed earlier.

They are playing a game. They are playing and not playing a game. If I show them I see they are, I shall break the rules and they will punish me. I must play their game, of not seeing I see the game.

And an important conclusion to another of these 'poems':

Can Jack and Jill terrified that each and the other are not terrified become terrified that each and the other are terrified, and eventually, not terrified that each and other not be terrified?

This is part of the story of psychotherapy.

Then there is the mystification of the girl Ruth, and this serves as a good introduction to our discussion in the next chapter.

X is good. All not-X is bad. Ruth is X. If Ruth were Y she would be bad. But Ruth appears to be Y. Thus Y must be the equivalent to X, in which case Ruth is not really not-X, but is 'really X. Moreover, if Ruth tries to be, or is, Y, she will be bad. But Ruth is person X, that is she is good, so Ruth cannot be bad, so she must be mad.

The mystification here is that it is necessarily bad to be or do
non-\( \bar{x} \) and necessarily good to be \( x \).

Now let the symbol \( (---\rightarrow) \) represent the view of someone on some relationship and the double arrow represents a relationship; then \( a \rightarrow (b \rightarrow c) \) is \( a \)'s view or synthesis of the relationship between \( b \) and \( c \). \( a \rightarrow b \rightarrow (ac) \) would be \( a \)'s view of \( b \)'s view of \( a \)' relation to \( c \), and \( b \rightarrow (ac) ; a \rightarrow (bc) \) is \( b \)'s view of \( a \)'s relation to \( c \) compared with \( a \)'s view of \( b \)'s relation to \( c \).

The reader who wishes to venture into the complexities of logics and algebras for considering unconscious fantasy is to be referred to the second edition of Self and Others for the issue is quite complex and to pursue would make this paper too long and unwieldy for my purposes. However the issue of fantasy systems and structures will be important for our discussion of mystification in the next chapter.

Since we act not only in terms of our own experience but also in terms of our experience of other's experiences of us, Laing has been concerned with how the other's experience of us is communicated and how accurately it can be communicated. It is important to understand each other and to know whether we understand the complexities of the various levels of communication.

**A** stands for agreement and **D** for disagreement

**U** stands for understanding and **M** for misunderstanding

**R** stands for realization that there is understanding or misunderstanding and **F** for failure of such realization.

So the combination RUAUR would mean that there is agreement of the two people and both realize that the other understands that there
is agreement. Or F M D M F would mean that there is disagreement on some issue and each fails to realize that the other misunderstands that there is disagreement.

So these are the possibilities of these combinations:

<table>
<thead>
<tr>
<th>Realization understanding</th>
<th>Failure Underst. Misunderst.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement</td>
<td>R U A</td>
</tr>
<tr>
<td>Disagreement</td>
<td>R U D</td>
</tr>
</tbody>
</table>

I have my perspectives on people I know and they are different from the perspectives others have on these others-to-me and the others have various perspectives on me. But the situation becomes more complicated when the other tries to communicate his perspective to me. I then acquire a metaperspective, my view of the other's view of me. The metaperspective is an important part of Being's philosophy and research into therapy. In so far as I have many metaperspectives so I acquire many metaidentities, that is what I think is my identity for the other. Such thinking now, seems to me to make the psychological construct 'identity' as it has been used quite inadequate. So we take into ourselves the identities that we have for others, a basic way of constructing a group also. What psychologists mean by identity or self-identity is a fusion of my way of seeing myself and my way of seeing your way of seeing myself and it is an unending task to differentiate the two; since birth I have internalized other's perspectives of me. I may even internalize other's incorrect perspective on me.
E. Interpersonal Perception Method.

It is not as important to have agreement of opinion in a dyad as to be understood and to feel understood.

Understanding can be defined as the conjunction between the metaperspective of one person and the direct perspective of the other;

being understood is the conjunction between the meta-metaperspective of the one person and the metaperspective of the other;

the feeling of being understood is the conjunction of one's own direct perspective with one's own meta-metaperspective.

And out of such needs to be understood, to be cared for, to be trusted, to be powerful over the other, and the rest, there develop spirals of mistrust and dishonesty that are difficult to untangle and which can break down with much expenditure and release of energy and possible psychosis. But they can also be untangled slowly. Often the way out of spirals is by simply clarifying important words in the dialogue of the dyad. I have often suggested to people such recourse as the following: ask him to describe to you exactly what he means when he says he loves you. It necessitates each persons' knowing his own and the other's values by which he lives.

But often the dyad becomes too entrenched in misery and causing misery that it is extremely difficult to get out of it. The only way seems to be a systematic and mutual 'disarmament'. It is the purpose of the Interpersonal Perception Method to clarify for the therapist the nature, of the disagreements and misunderstandings and the failures to realize. It is designed to measure and provide understanding of the interpenetrations, or the conjunctions and disjunctions, of two individuals in respect of a range of key issues with
which they may be concerned in the context of their
dyadic relationship.  

we take the fulcrum of understanding away from the relationship
that has been developed and controlled in a professionally deter-
mined setting to place it

inside the dyadic experience and interaction of everyday
life, where transference, counter-transference and non-
transference processes co-mingle in ways that are only
beginning to be studied, much less understood.  

In therapy it is difficult to objectify 'inner experiences'
and to determine the influence of the therapist on the patient. It
is necessary, therefore, to study the dyad and find new categories.
A new psychoanalytic theory should postulate 'that human behavior
is predominantly oriented towards making, maintaining and develo-
ping relations with others.'  

Growing up involves a process of
constructing a body of experience 'relating to that balance of giving
and taking, of satisfaction and control, which has proven to be
viable in the person's relationships with others.'  

The person
central 'ego' relationship system), as the basic structures of rela-
tionships is open to interaction with such other structures of
relationships. There are some internalized systems of relationships
split off from the central 'ego' relationship system and more closed.
They involve phantasy relationships resulting from intense emotion-
ally charged experiences of frustration,' and are the cause of what
are colloquially called 'hang-ups' -- things which cause crises,
disruptions or breakdowns in communication. And these crises, dis-
ruptions and breakdowns can be the situation for creative break-
through.
The IPM is designed to gain the reports from two subjects on their view on the part the play in life processes of the interaction with each other. Laing indicates the three troubling issues that led to the development of the method.

The behavior of persons in families seems to rest upon a matrix of unquestioned and often, to them, unquestionable assumptions or expectancies concerning the different members of the family.45

So through certain intermeshed perspectives understanding was maintained. In the same way misunderstanding was maintained. Laing wished to determine the properties of this 'undetected experiential field.'

If this experiential field existed, what was the dialectic of the interplay between it and the persons who comprised it? And how did it relate to change in any or all of the family members, or between them, or in the family as a group?

We were specifically concerned with the relationships between young adult schizophrenics and their parents.46

The method could be used to investigate the relations of points of view or perspectives in a dyad situation or even be expanded to investigate groups.

The IPM questions try to evaluate a dyad on the basis of sixty issues on six levels ranging from the most healthy state of interdependence with autonomy to extreme denial of autonomy. The test tries to ascertain whether the two agree or disagree on their individual perspectives on an issue, then whether one understands the other's point of view or misunderstands it and then, whether one realizes he is understood or misunderstood or fails to so realize (the meta-metaperspective.) To bring a dyad from an unheal-
thy to a healthy state it is more important to cause a shift from $M$ to $U$ and from $F_u$ (failure to realize there is understanding) to $R$ than to cause shift from $L$ to $A$. A high $F$ score, particularly a high $F_u$ would indicate a very poor relationship, suggesting that they don't know where they are at with each other.

It is true that humans look for common meaning to their existence, to find with other's a shared sense to the world, to maintain fundamentally similar structures of experience--that is, to maintain common sense, or consensus. When behavior is experienced differently by the two parties all sorts of factors come into play. Behavior is interpreted according to learned schemes and values. For example, Mr. Jones does not inform Mrs. Jones he is not coming home. He does not feel it is necessary. She feels that if he were not sleeping with another woman he would have let her know. She interprets all his behavior to support her belief. Whenever there is a situation of scandal, 'I am concerned as much about what "they" think, and about what "they" think I think, as I am about my own direct perspective.'

Not only do we have dyads in which there are interrelations of two people but we have the interactions of dyads with each other and with society; so the situation of interexperience becomes increasingly complicated. Laing spends much effort to explain the complexities of groups interacting and the members in the groups in The Politics of Experience. 'There is no simple formal isomorphism running from the relation of self to self, through person to person, to person and society. At each greater level of concreteness new
elements are introduced, requiring us to constitute a new gestalt which incorporates within it, as part of the larger pattern, the simpler ones.' For example let us structure the relationship between the East and the West, their spiral of mistrust. 

\[ W \rightarrow E \rightarrow W \rightarrow E \rightarrow W \rightarrow \ldots \rightarrow (W \leftarrow E) \leftarrow E \leftarrow W \leftarrow E \leftarrow W \leftarrow E \leftarrow W \leftarrow E \]

So when we have my fear of the other compounded with my fear of his fear of my fear of him, with my fear of his fear of my fear of his fear... Laing asks: 'does my terror in fact increase? when does my brain turn to jelly?'

The future of East and West depends upon East-West finding some way of resolving their reciprocal mistrust enough for each to throw away their means of deterrence. The behavior of both seems however, designed to maximize terror rather than mitigate it.

And so we have the situation that I quoted from Reich early in this essay where the nations seek final peace knowing that they deliberately deceive each other. The strategies of confusion or dishonesty, call them 'power games' are basically the same in the dyad as they are in the overall perspective of one society interacting with another. Cooper and Laing both claim that the revolution that is therapy in the individual is the same revolution that is therapy for cultures. There can be no really personally effective therapy for cultures. There can be no really personally effective therapy unless there is therapy of the situation the person lives in. It could be therapy of the family the subculture or even of a country and hopefully of the world. Laing correctly suggests unwinding spirals of mistrust as a viable alternative to screwing spirals of mistrust up so much
that they explode. He quotes T.C. Schelling:

He thinks we think he thinks we think...he thinks we think he'll attack: so he thinks we shall: so he will so we must.53

The only way out of dishonest spirals is the risk of bilateral disarmament; this is the thesis of psychotherapy that I expound in this essay.
IV. THE MYSTIFICATION OF PERSONS

Cooper has written his latest book, The Death of the Family to show how the family of one's origin is the originator of the 'politics of experience'. The nuclear family as it is in our capitalist society is 'an ideological conditioning device, and 'the ultimately perfected form of nonmeeting, and therefore the ultimate denial of mourning, death, birth and the experiential realm that precedes birth and conception. It is the paradigm of social institutions and its progenitors live on inside the lives of descendants long after they are dead. Therapy will be the process of seeing through this family and summing up one's past to lay it aside. The process often takes the form of paranoia through to self-consistency. This process we shall look at later in the last chapter; now we must look into the nature of this alienation.

A. Mystification

Laing takes the term 'mystification' from Marx who used it 'to mean a plausible misrepresentation of what is going on (process) or what is being done (praxis) in the service of the interests of one socioeconomic class (the exploiters) over or against another class (the exploited)'. If we represent forms of exploitation for forms of benevolence we can con people into thinking that we are helping them when really we are harming them for our own gains. Laing uses this conception of mystification to analyze
certain person to person relationships. It is one way of handling conflict or dissention in a dyad or triad and we have seen how the experience of the girl was mystified in the tennis game.

To mystify is 'to befuddle, cloud, obscure, mask whatever is going on, whether this be experience, action, or process or whatever is "the issue". It is to substitute the false for the true whether it be issues, processes of what is experienced or being done. One may be in the state of mystification without knowing it though it is also common to feel mystified, or confused or deceived. Usually the mystification is complicated by the act of mystification of the act of perceiving the mystifications in one's life. So one may have been mystified in childhood and then taught it is naughty or punishable to discern this mystification. Later one may be taught that it is mad to do so and that the punishment is to be locked up with other 'crazy people'. We sense mystification when we sense conflict that is being avoided, or that there is a false or that there is confusion over important issues. The common way to mystify a person about his experience 'is to confirm the content of an experience and to disconfirm its modality (regarding perception, imagination, phantasy, and dreaming as different modes of experience.)' Thus the mother tells the child that he is only dreaming, or imagining, or tells the child that he feels such and such.

Sometimes it happens that some people think they have the right to determine the experience of another. This being calls 'the politics of experience'. Just as often people think they
are under obligation to experience according to the direction of others. Actions or experiences of a person are validated against the orientation of his group or family. A good therapist is the one who can discern the axes of orientation of the group and how the group constrains the members to conform its behavior and experience. What the families of schizophrenics failed to recognize is that 'the other human being is not only another object in space but another center of orientation to the objective world.' The issue of person perception is the basic issue for the families he studied. So in therapy it is necessary for all including the therapist to share their individual perspectives to attempt to pick out the certain axes of orientation 'in terms of which the actions of the family are evaluated by particular others.' This is necessary because active mystification 'consists in disguising, masking, the praxes and/or processes of the family in befogging the issues, and in attempting to deny that what is the issue for oneself may not be so for the other.' It is necessary 'if our perception of the central issue is disjunctive with the perceptions of the family members themselves.' If, for example, the family sees any attempt to attain autonomy as mad and evil and stifling dependence as sane and good it will regard as mad and evil any therapist who tries to help the child toward autonomy. Mystification is an action of self on other or of self and self. It may also be an action of the self on self regarded as other. By it one seeks to induce in the other some change for the self's own security by means other than directly stating one's position or feeling about the other.
Mystification converts the praxis, what the person does, into process, which is impersonal series of events with no author. Mystification is not a pathological process of a family or group but a praxis constructed by the members.

The function of mystification is to maintain the status quo or stereotyped roles and to fit people in moulds that have been determined. Parents may maintain their rigid preconceptions of how they and their children ought to be and remain impervious to the emotional needs of their children 'that threaten to disrupt their preconceived schemata, and they mask or conceal disturbing situations in the family, acting as if they do not exist.' This state which Laing has called 'mystification' has been adequately correlated by other psychologists and psychiatrists such as Bateson and his co-founders of the double-bind theory and Laing's own colleagues at Tavistock.

Laing found that in the families of schizophrenic patients mystification was used frequently to control the experience of the patient. 'We have never yet seen a preschizophrenic who was not in a highly mystified state before his or her manifest psychotic breakdown.' Psychosis can usually be seen as an attempt to get out of the state of mystification and is generally opposed by the other members of the family. They then teach the patient that he is going crazy and push him so much into intolerable situation or 'untanable position' that he undergoes psychotic breakdown.

B. Mystification as Violence

The word 'violence' has been an important part of Laing's
vocabulary in his writings since his work on Sartre, _Reason and Violence_, and it is an important for Laing's co-author in that work, Cooper.

The history of violence in our lives is long. Laing suggested that very often the first act of violence done on a child is its mother's first kiss. If mystification begins so early and becomes so much a part of us it is because we have been taught to deny that it has happened. Exploitation must seem to be benevolence, so we must interiorize the violence we do on others onto ourselves. We can, if we try, destroy our capacity to see what is right at some other time by destroying our ability to see. Laing claims that this is done to us from the day of our birth and that we do it to those we 'bring up' in the world.

From the moment of birth, when the Stone Age baby confronts the twentieth-century mother, the baby is subjected to those forces of violence, called love as its mother and father, and their parents and their parents before them, have been. These forces are mainly concerned with destroying most of his potentialities, and on the whole this enterprise is successful. By the time the new human being is fifteen or so, we are left with a being like ourselves, a half-crazed creature more or less adjusted to a mad world. This is normality in our present age.9

It almost sounds like Laing is proposing what has been traditionally known as the 'theory of original sin.' Laing's greatest complaint is that what we call 'love' is really its opposite, violence. 'Love lets the other be, but with affection and concern. Violence attempts to constrain the other's freedom,' and so make him conform to what we want him to be. And so we destroy ourselves by
doing violence under the pretense of love. If we have been taught to experience certain things and not to experience other things then our experience has been alienated, and if our experience is alienated then how can our behavior not be also?

Laing claims that social science is based to a great extent on this violence that is mystification of experience. Positivism does that by pretending that its subject is data when really it is capta, it masks the world and serializes 'the world of the observer, by turning the truly given into capta which are taken as given, by denuding the world of being and relegating the ghost of being to a shadow land of subjective "values".' The data or 'given' are not really what is given but what is taken, or capta, from the world of happening.

The positivist sciences do not realize that things and persons cannot be studied on the same level; there is an 'ontological discontinuity between human beings and it-beings.' when two people meet there are two worlds of experience meeting and if the study is not of two worlds of experience we do more violence to human beings. 'Gone is any sense of possible tragedy, of passion. Gone is any language of joy, delight, passion, sex, violence.'

Laing finds that what the family teaches children is that their aim in life ought to be 'gaining pleasure from the esteem and affection of others.' The family is a system established to guarantee each member protection from the others by mutual agreement. The members will adapt to certain norms and to a mad society and they are safe.
The family's function is to repress Eros; to induce a false consciousness of security; to deny death by avoiding life; to cut off transcendence; to believe in God, not to experience the Void; to create, in short, one-dimensional man; to promote a respect for work; to promote a respect for 'respectability'.

So if we now admit the possibility that our experience is alienated, a frightening thought, then what is real in experiencing? Because it really is frightening, leaving us in a position of ontological doubt or insecurity, we can see how easily a society would exclude people whose experience inverts their own. Laing then suggests, it is certainly more than an hypothesis or 'let's pretend', that we call the schizophrenic the one who either could not adapt, or refused to adapt to 'pseudo-social realities.' As he suggested in The Divided Self in his definition of insanity, Schizophrenia is a label affixed by some people to others in situations where an interpersonal disjunction of a particular kind is occurring.

This is the nearest one can get to an existential-phenomenological definition of insanity; what is the criteria is not pathology but disjunction and some are outcast from 'sanity' because they disagree with the majority, or better, with normality. Of course if this disjunction is accompanied with sufficient anxiety or panic a psychotic break may occur which separates the person further from the community he lives in.

It is the family that is the beginning place for alienation, as we have already indicated. A most common form of this alienation is the making of competition the basic motivation. Laing claims that to make competition the pivot of action is to exclude love from the
society or group. Laing claims that competition is based on or motiva-
tivated by hate. We are taught to succeed by someone else's failure, 'a form of torture foreign to... noncompetitive cultures.' We
teach them to dream not of success but of failure and educate them
into bondage rather than into freedom and creativity.

Children do not give up their innate imagination, curiosity, dreaminess easily. You have to love them
to get them to do that. Love is the path through
permissiveness to discipline; and through discipline,
only too often, to betrayal of self. Of course Laing means by 'love' the mystification of love, normal
usage. The trick of destroying ourselves and calling it love is
amazing and the act by which we cover up the trick mystification,
is truly human tragedy.

Having been tricked and having tricked ourselves out of
our minds, that is to say, out of our own personal
worlds of experience, out of that unique meaning with
which potentially we may endow the external world,
simultaneously we have been conned into the illusion
that we are separate 'skin-encapsulated egos.' We lose ourselves and pretend that we have found ourselves. It
could be that what we call reality is socially shared hallucination
and what we call sanity is collusive madness. These are the ques-
tions of Self and Others.

And so we become addicted to other persons instead of
loving them. We destroy ourselves and cling to someone we have in-
ternalized and pretend to be ourself.

Now love becomes a further alienation, a further
act of violence. My need is a need to be needed,
my longing a longing to be longed for.

We have others make us suffer and then have them soothe the sufferings.
There is some of this in what is called 'falling in love' which I have already suggested to be a form of psychosis.

The violence we perpetrate and have done to us, the recriminations, reconciliations, the ecstacies and the agonies of a love affair, are based on the socially conditioned illusion that two actual persons are in relationship. Under the circumstances, this is a dangerous state of hallucination and delusion, a mishmash of fantasy, exploding and imploding, of broken hearts, reparation and revenge.19

But in losing themselves in such a love affair lovers can sometimes find themselves, at times really meet and celebrate. I have suggested this by my understanding of psychosis as a road from normality to sanity for those who take it and persevere; A theory suggesting the therapeutic possibilities of 'psychosis' will be developed in the last chapter.

What is important is that the whole of experience of a person be admitted as valid. This is especially important in therapy or in any relationship; if we deny part of ourselves we deny ourselves.

When violence masquerades as love, once the fissure into self and ego, inner and outer, good and bad occurs, all else is an infernal dance of false dualities. It has always been recognized that if you split being down the middle, if you insist on grabbing this without that, if you cling to the good without the bad, denying one for the other, what happens is that the dissociated evil impulse, now evil in a double sense, returns to permeate and posses the good and turn it into self. 20

This is the generation of real pathology, normality. The way of therapy is by acknowledging that which we can't face in ourselves, fleeing from self-deception, confronting and getting to know the
shadow, anima and self according to Jung or incorporating the daimonic lest it overtake us as May points out. I intend to come back later in this chapter to consider the normal 'love' in our society.

C. Families and groups as fantasy systems.

Family is a system comprising persons in relationships, that is, persons behaving toward each other and experiencing each other's behavior and experience. Laing means the family of origin 'as experienced by the infant.' He is concerned with the family as experienced which 'comes to be internalized,' with the 'relation between the structure of the family as observed by us, and the experiential structures that are an encurable part of the individual's personal phantasy system.'

The family as Laing understands it is a type of fantasy presence' and he has described fantasy presence in many of his works, especially Self and Others.

Let us outline the relations in a family of four people.

S-->(F=M) Son's view of relationship between father and mother
S-->(M=D) Son's view of relationship between M and daughter
S-->(F=D) Son's view of relationship between F and D
S-->(D=S) Son's view of relationship between D and S

Then take these patterns from each person's perspective, then

D-->(S-->(F=M)) Daughter's synthesis of son's synthesis of relationship between F and M ....... then a higher perspective

S-->(D-->(F=M)) What the son thinks his sister thinks he thinks about his parents' relationship
These sequences could go on into a tabulation not only of the relation of one member to the others individually but his relation to dyads and triads and then relations between dyads and onto other perspectives. Then the patterns could be traced over generations. And so, as Laing analyzed in The Politics of Experience) the family could regard itself as an us as opposed to a them. And each of the us gets his identity by being one of the family as opposed to the others: the family synthesis is really inside him and not only his internalization of the synthesis but the internalizations that the others have made are taken in by him also. It gets rather complicated. And so the family, according to Laing

is united by the reciprocal internalizations by each... of each other's internalization. The unity of the family is in the interior of each synthesis and each synthesis is bound by reciprocal interiority with each other's internalization of each other's internalization...22

Many groups are established this way. Laing suggested that the Christian experience is one of co-inherence, of having 'inside himself the same internalized presence' that all the brothers in Christ have. He says

perhaps the most intimate way we can be united is through each of us being in, and having inside ourselves, the same presence. This is nonsense in any external sense, but where we are exploring a mode of experience which does not recognize the distinctions of analytic logic.23

This realization is the basis of group mysticism.

Having introduced ourselves to the notion of fantasy systems in the constitution of the family, let us now, without getting into the subtleties pursued in Self And Others, investigate further...
the notion of internalization in families for it is important for the rest of this essay.

What is internalized when we internalize our family or group is merely relations between people. 'If it is the family as a system that is internalized, then what is "internalized" are relations between persons, things, part-objects, part-persons or objects in isolation.' For example, the parents are not internalized as individuals but as being apart or close, divorced, together... And then there is the fact that two people as husband and wife may not get on well but appear to do so when considered as father and mother, that is, in relation to the child. The family involves two acts of synthesis: by one act the we is formed and by another a they is formed and the they is formed on the basis of excluding some and including others. Of course in the family there may be other acts of synthesis forming the children into a we and the parents into a they, and so on. There is to be agreement in the family on the construction of the synthesis to a necessary point and then each can be seen to have internalized his own synthesis and the synthesis formed and internalized by the others. It comes about that the family as fantasy is seen as a system in which one is', a continuation of the womb, as a container of members. By internalization is meant 'the transference of a pattern of relations from one modality of experience to others: namely from perception to imagination, memory, dreams, phantasy.' Laing believes that it is not objects that are internalized as psychoanalysis has claimed, but rather relations; 'the individual incarnates a group structure.'
My experience of the family, then, would be the family as I experience it, which is outside of me, but this is then internalized or brought inside.

This internalization of the family may have strange consequences. The family system inside may be the terms in which the self deals with the self; the self may deal with the self as father dealing with mothers, or other ways. The self then has internalized a structure of relating that he may use in future as the basis of his relating with others. 'The family as a nexus is most often internalized as a scheme in terms of which a set of actual relationships in the external world is perceived and lived.'

A sequence of moves is internalized which has undergone transformation. A child may internalize some drama of childhood and the pattern of relationships in the drama reflect his relationship with other people for the rest of his life until he can recognize it and get out of the trap.

Laing refers to the 'Magic Theatre' of Hesse's Steppenwolf; 'the different dramas are different theatres and not simply different acts of the one drama.' But it can be seen in such cases that there is a dramatic pattern of experiencing that has been internalized in the past that is recognizable in all of the plays. The ending is usually the same. Thus the child who has experienced rejection in some dramatic way will continue to experience rejection in his relations, almost seeming to design his own rejection by others, until he sees the ways in which he arranges the drama so that others will reject him. It could almost be called a 'self-fulfilling
fantasy!' This kind of self-fulfilling fantasy is like the symptom we mentioned earlier; both are designed to communicate indirectly one's needs and both end up generating behavior opposite to that desired.

In the family we learn the 'politics of experience', the various ways of defending our experience and structuring it according to expectations. But it happens that in life persons attempt to act on the experience of other persons, in order to preserve their own inner world, just as we know that obsessional for instance frequently arrange and rearrange the external world of objects in order to preserve their inner worlds.27

A person tries to regulate the inner world of others just to preserve his own. So if the family is experienced as inside the self (to be in the same family, means having the same "family" inside oneself), autonomy will entail destroying the internalized family, a move that may be very threatening to members of the family. And the person who attempts to do so may be described as sick or crazy and the autonomy of the individual is required to be sacrificed to the preservation of the family. But it is essential that each person arise out of this immersion in the family as fantasy system if he is to develop his possibilities.

D. The Violence of 'Love'

I said earlier that I would return to the notion of loving in our society, the normal love, that is the disguising of violence.

It is often said of the schizophrenic that he is incapable of love, and while I would not make such a judgment I believe that
someone who seems so desperately to need to be loved is also terrified of being loved. Love dissolves boundaries and the schizophrenic knows enough of the dissolution of boundaries that he knows the terror of it. But it is true that everyone needs to feel understood and accepted, to have his total existence recognized; this frightens the schizophrenic. But there will be more on this in the next chapter.

Sartre has placed great importance on the role of terror in constituting relationships and groups in his last work the *Critique of Dialectical Reason*. Laing summarizes him thus:

Where circumstances have occasioned the invention of love as the practical bond between the lynchers, violence is the very force of this lateral reciprocity of love, and terror is the counterpart of violence, engendered and invented by the group itself. Indeed, all the internal conduct of individuals in pledged groups (fraternity and love as well as anger and lynching) draw their terrible power from terror itself.

And so Laing says in his own discussion of groups in *The Politics of Experience*:

Under the form of group loyalty, brotherhood and love, an ethic is introduced whose basis is my right to afford the other protection from my violence if he is loyal to me, and to expect his protection from his violence if I am loyal to him, and my obligation to terrorize him with the threat of my violence, if he does not remain loyal. And so the double action of destroying ourselves with one hand, and calling this love with the other, is a sleight of hand one can marvel at.

But then, I would suggest that a definition of love is contained in Laing's definition of Psychotherapy; 'an obstinate attempt of two people to recover the wholeness of being human through the relationship between them. This instead of the normal alienation
of love, the concern with whether the other needs my love, whereby two people spiral into what they think is being 'in love' and which is the reciprocal need to be needed. And as Laing asks, our question is: 'which is the greater misfortune, to love without being loved or to be loved without loving?'

But this discussion of the normal unfortunate state of 'love' is but a prelude to a discussion of schizophrenia and the idea of therapy.
V. CONCLUSION: THERAPY, THE WAY OUT OF MYSTIFICATION.

Alan Watts tells the story of a Chinese sage whom someone asked, 'How shall we escape the heat:' referring to the heat of suffering. The sage replied that one should go right into the middle of the fire and there no pain will trouble one. He refers to The Divine Comedy where Dante and Virgil find 'that the way out of Hell lies at its very center.' Cooper says that one passes thru paranoia to find oneself and Laing claims that one must often pass through one's psychosis to health. And there may be something to what Nikos Kazantzakis wrote:

If the road leading you to your liberation is that of disease, of lies, of dishonor, it is then your duty to plunge into disease, into lies, into dishonor, that you may conquer them, you may not otherwise be saved.

Normon Brown writes that 'the norm is not normality but schizophrenia, the split, broken, crucified mind.' Then, 'it is not schizophrenia but normality that is splitminded; in schizophrenia the false boundaries are disintegrating.' The patient has regressed to the time before the first lie and everyone knows his thoughts; he participates in the world mystically. 'The mad truth: the boundary between sanity and insanity is a false one.' Psychoanalysis is designed to break down barriers according to Brown, and to reunite the human race by new symbolic universes. That is why May regards this as an age of therapy. According to Brown
Dionysus, the mad god, breaks down the boundaries; released the prisoners; abolishes repression; and abolishes the *principium individuationis*, substituting for it the unity of man with nature. In this age of schizophrenia, with the atom, the individual self, the boundaries disintegrating, there is, for those who would save our souls, the ego-psychologists, 'the problem of Identity.' But the breakdown is to be made into a breakthrough... as it says in the New Testament: 'He that findeth his own psyche shall lose it, and he that loseth his psyche for my sake shall find it.

Some people begin to find that normality is inadequate and feel the demand to 'go down' to find some deeper kind of sanity but it is frightening to confront the psychotic potentialities in oneself, that is to challenge the limits or to meet oneself at one's limits. The existentialists have emphasized the limits as the points at which one grows, but one cannot do this confronting alone. Jaspers stresses the imperative to ultimate or unlimited communication as the precaution against being lost and the only really successful way to find and transcend one's limits.

Any person who helps another make this journey to find one's depths, the centering of one's self in the world, the origin of communication or expression to other, we shall call the 'Therapist'.

A. Leaving One's Family

Perhaps the best book on theory of therapy for our age that I have come across is David Cooper's *The Death of the Family*. Since we have regarded the real damage done to people as the mystification caused by the nuclear family and the various internalizations of that family, it follows that we can call therapy 'the process of leaving one's family'. The method, then, is based on the
idea of Freud that each of us transfers bits of our original family experience in the 'family of origin' to each other in the new family we develop of procreate. To be freed of all, we have to undergo a progressive depopulation of the room. There are two people, 'therapist' and 'patient' and they occupy these roles because the room is filled with people, the families of both over generations. Hopefully the families of the 'therapist' is small. The procedure is then to identify every person in the room and as the person is identified he is asked to 'leave the room.' Eventually we are left with 'two people who are free to meet or leave each other.'

Cooper suggests that the greatest damage is that we are not permitted to doubt; we are 'totally conned out of any curiosity.' We must be allowed to doubt our origins if we are really to discover ourselves.

If we no longer doubt, we become dubious in our own eyes, and can then only opt to lose our vision and see ourselves with the eyes of others—and the eyes of others... will see us as duly secure and securing of others.

The destruction of doubt sensation and of the experience of living one's body' can be traced back to a need for 'human grouping' which originates in the family. One is taught to renounce self, to glue on bits of other people, and then to ignore the difference between the otherness in one's self and the self sameness of one self.' 'Such 'passive submission to invasion' by others is alienation and clearly part of what Laing means by the 'alienation of experience.'

Laing and Cooper regard paranoia as the way out of normal alienated experience, the beginning of man's freedom. We read of,
say, the schizophrenic who claims that someone is poisoning the air she breathes and she has been hospitalized for 'delusional fantasies.' And then the environmental experts come along and protest the destruction of our air by pollutants. Perhaps all paranoid delusion is a sensitivity to persecution.

It would not be therapeutic to deny the experience of that girl since, according to Laing, the origin of normality and schizophrenia is the invalidation of a person's experience consistently enough till it is destroyed. Therapy must attempt to discern meanings, that is, to interpret experience.

Cooper has described a structure of conversion that is worth outlining. Sanity and madness are not polar opposites but both meet at the opposite pole from normality which is really the unfortunate condition. Conversion is moving from normality through what I would imagine to be a dialectic of sanity and madness. In fact it seems to be incorrect to imagine a sane person who is not at times mad, but in a society that outlaws madness no one can afford the luxury of madness; thus Sidney Jourard's wise statement that society needs 'respectable check-out places.' In the following scheme from Cooper the arrows represent metanoia which means 'change from the depths of oneself upward into the superfices one's appearance.'
In Cooper's scheme the eknoia state is that of the adjusted, obedient, well-adjusted, well-condition citizen, really being out of one's mind. There is a certain profit to this way of living including a good job, comfortable life...

Paranoia is the condition of being beside one's self, not quite out of one's mind, but split. The process to this is depressive, mournful, as is the process beyond it. After another process we move to noia, being self-consistent, 'in unlonely aloneness that is open to the world.' Then another metanoia is

the fluent movement between the actively autonomous self and the self (—and world)—transcendence (anoia)—moving through the cancelling-out of self-performation in a moment of ani-noia. There is, then, finally, no longer any question of states of being, and the illusory security represented by such states.

One could try to move from eknoia through paranoia right to anoia without truly attaining noia. Psychosis or Psychotic breakdown
seems to be one of the outcomes of such an attempt. And to love may sometimes mean to allow others the right to paranoia or noia and to the pain and loneliness it entails, to allow them to move at their own pace while being totally attentive to them. A person has at some time to discover his aloneness in the world, though there seems to be a taboo against it, and, I am certain, he has to discover a new ability to communicate from that aloneness to other selves.

When a person has undergone the process outlined in this section of separating himself from his family, he may go back to it for it is no longer a family of blood brothers and sisters and parents. It will be those who share the search for truth in an intimate way, free and loving. Maybe some of the new family of searching will be relatives in some degree of consanguinity, but this is not important any longer.

What Cooper has been saying about the journey from normality to self-transcendence, that it cannot safely or healthily be done without the discovery of self-consistency, has much relevance in the contemporary renewal of the spiritual life in western religion: I have seen people try to make the leap in various forms of attempted mysticism or prayer and in some of the Pentecostal revival. I recognize the leap has been made when I become aware of my own boredom in the face of an apparently enthusiastic monologue of someone who claims to have received the 'Spirit.'

B. The Experience of Aloneness

It is possible that it is common for women in our society to distinguish between 'loneliness', the painful condition, and
'aloneness'; I do not hear men make the distinction but I believe that the experience of aloneness is important for human growth. Cooper made the observation that people often go to parties because they want not to be there. They go when what they really need is to be alone. Cooper even suggests that there is a taboo an implicit prohibition against experiencing one's aloneness in the world. Halleck speaks of a need for privacy, and this is a necessity, but Cooper is speaking of more than that.

Since the taboo against experiencing one's aloneness is established to protect the family, in psychiatry as anti-family, what one has to do in it is to discover a fluent dialectic that moves all the time on the shifting antithesis between being-alone and being-with-another. It is this antithesis that we must examine further if we are to discover how a person, deprived of the lifeblood of his solitude in the first year of his life, later, in a moment of great anguish, invents his separateness in the world.

One must discover this aloneness in childhood or one is driven mad in late adolescence or becomes a normal citizen or works out in relationships; it is still the process of leaving home.

In the traditional nuclear home one has experienced oneself as glued to others in a sense of incompleteness and based on this sense of incompleteness. One gets one's completeness by the family. In the home one has also been defined in a role. Being a well-brought-up, eccentric, normal person means that one lives all the time relatively to others, and this is how the falsely splitting system originates in family indoctrination, so that one functions all the time in social groups in later life as one side of another of a duality.
In the home we learn also social controls that are far more than necessary to live healthily in the world and a sophisticated system of taboos that bar the meeting of the members with each other. So this being freed can be understood as 'seeing through' one's family. When we say 'see through' we mean 'demystify', in the sense of, I suppose we could say, 'I see through your attempt to mystify or confuse me.' When we see through our family and the significant people in our lives we are returned to our aloneness.

The taboo on tenderness in the nuclear family makes both the experience of aloneness and intimacy difficult. Because of this taboo members of the family hide so-called 'sexual feelings' from each other, and, proceed to establish taboos to protect themselves from meeting each other. I believe this spreads into the larger society so that strange repressions of sexuality by fears along with calculated stimulation, takes on, in my opinion, the dimensions of a conspiracy against altruism in our society. A strange morality (even a politic) of censorship that favours disguised violence to blatant violence, that is afraid of sex unless it is introduced in some strange or deceptive or manipulative way, witnesses to the presence of this conspiracy. If social organizations can establish taboos and then keep its members preoccupied with what is tabooed it can control people effectively and keep them blind to the highest human values. Sex is not as socially subversive as love because there is enough fear of sex to keep it within safe bounds; consequently the suppression of love is essential for any society that wants to
resist change. But let us take a look at what I think is one of man's basic needs, intimacy or love.

C. The Conditions of Intimacy.

I already made it clear in the first chapter of this essay that I regard love as basic to any theory of therapy. I have pointed out in the second chapter that psychosomatic disease symptoms are usually the cry for help and that the help comes first as care, acceptance, love. Then in my presentation of schizophrenia, it became clear that what the schizophrenic suffered most was a fear of love of having the boundaries of self dissolved in the presence of another person. I made the point that falling in love was psychosis and that in a sense loving is a form of psychosis; psychosis is the dissolution of boundaries.

However there were forms of psychosis that were painful, in which the dissolution of the boundaries of self were feared because it threatened the very existence of the person. Consequently, though he desperately needed to be loved, the schizophrenic was terrified of it. Then I made the point that what the schizophrenic feared from 'love' was justified since the love he had received did threaten and had seemed almost to destroy him. But this was not love but parents' desperate need for security and to maintain family structure. I referred to the work of M. Siirala who found that disease arose from the inability of parents to be affectionate with their children. So, contrary to the myth that one destroys the one one loves, the truth is that one damages the one one tries to possess because of
one's own insecurity.

One only begins the way to loving by a decision that one is valuable, and so lovable, and that jealousy and insecurity are damaging to the self. It is jealousy that is the usual mystification of love in our society. The road of therapy is the way one comes from jealousy and painful insecurity to losing. There must always be another, a therapist. Loving can only begin with the self. There is no amount of loving by any number of people that can teach me I am worthwhile unless I am willing at some point to make a kind of a 'leap of faith'. This is the unconditional acceptance of one's self that Kierkegaard believed placed man before God and allowed him to rise out of despair of his salvation.

One cannot love others unless one can first love oneself. Cooper says

before one can love another, one has to love oneself enough. Before one can love another of the opposite sex, one has to be able to love another/others of the same sex 'enough'.

And then the minimum condition for love between two people is the experience, after a great deal of relationship work, of tenderness—which is the positive residue of feeling after all negativity, resentment, hostility, envy and jealousy have been dissolved away frequently enough and deeply enough. If one tightens one's definition of love considerably, this feeling amounts to trust. This means an end to secrets, no relationship act carried out behind anyone else's back, although privacy, antithetic to family-modeled secrecy, always remains a possibility.

But such a state of openness takes a lot of hard work and pain, making mistakes, and the ruthless flight from self-deception.
It will be the experience, even though there are others supporting, that pain cannot be shared; it must be suffered alone. Clarification comes from solitude. It means that one must rid oneself of jealousy which is parasitic attachment. There is certainly room for the promise but this must not be from a sense of insecurity. The only way is to become free of the other. One has to recognize that 'the most liberating thing that we can do for other people is to do the thing that is most liberating for oneself.' And the most liberating is that which brings the most joy, not happiness that is based on insecurity, but joy that is at both ends of the pole with despair and pain in the middle. A two-person relationship that chooses or allows a self-evolving definition rather than imposing a certain definition has a chance of being joyful.

Since the schizoid person is detached, withdrawn and feels unable to get close to people, though he wants it desperately, he also feels vulnerable to them. He shows so little of his real self to others that the others don't know him and he feels that he is a non-entity. Now there are two ways out for him. The first is to develop his controls so that he no longer feels vulnerable to others. I doubt that such a course is possible; the schizoid is the person in our culture who has found that the cultural defenses are inadequate. The second way, and I believe the way to health, is to confront one's self in one's vulnerability, though this is terrifying. But such a person needs a relationship of trust to accomplish this.

As we have pointed out already, what the schizoid and
schizophrenic do not need is the detachment of the therapist; they need to be known in the way that is the fruit of Eros and loved in the way that is the fruit of Agape.

D. Therapeutic Eros.

There is much written lately on the relationship of the therapist to the patient, and the writers speak of a kind of knowledge that is Eros. James Dye describes this kind of knowing in a way that suits my purposes.

Erotic knowledge has its own form of detachment which is as demanding as scientific detachment. It consists in suspending one's various pragmatic roles in order to give his undivided attention to another person.²⁰

He suggests that the ordinary expression 'to know intimately' is not to be rejected as mere metaphor, nor is it a merely animal form of knowing. Rather it may indicate a high point of human knowing. And erotic knowing is not to be thought and as uncontrolled and impersonal; when healthy it is 'normally conscious, deliberate, evaluative and exploratory.' It may even be that the emergence of truth requires some loss of consciousness or planning, a break-out of the old forms of consciousness. Erotic experience is a more involved knowledge and possibly more knowledge than the detached, disinterested inspection which implies prejudice in favour of the visual or tactile senses eliminating the emotional knowledge. One experiences the other not mere states of one's self reflected in another; the problem of other minds' does not arise for erotic consciousness.
The point that is most important for therapy is that eros requires the dispensing with masks, games, defenses from others that preserve us from losing ourselves in the other.

If I maintain the roles extrinsic to this relationship, the experience is hardly erotic, even though all my over actions may be similar. The condition for revelation of the other is my own psychic nakedness; I experience the other as other-knowing me. It is this distinctive mode of awareness which probably constitutes eros' greatest relevance for the theory of knowledge. Erotic experience is the ultimate form of 'I-Thou' relationship, with the possible exception of religious experience.²²

It has been thought in the West since Plato, that eros is irrational and not fully human. All forms of intentionality of humans are human; sexuality is evaluative for humans and so is erotic knowing both conscious and deliberate and exploratory. The Old Testament writers used 'know' to designate sexual intercourse. The point is that we cannot divide people into parts so that some forms of knowing are animal and higher forms are human.

But the evaluative judgment of another's worth that is characteristic of human eros implies responsibility. To say that I love someone is to make a judgment of the person's value and to make a commitment to be honest to that person. As Dr. Tyrell says in his book When Love is Lost

The basis of love is the judgment of an individual's value, independently of the immediate emotions he stirs up. I can make a commitment to his value and still help the individual to face my feelings as well as his own. I can hardly pretend to love everyone equally. It would be a counterfeit sort of love that always demanded emotion and feeling for its love. Values and judgments of worth may endure while feelings and emotions change frequently.²³
If, as Laing suggests, the feeling of vulnerability is the evidence that we have that there is a self hidden from others, and if this vulnerability is a general experience of our relationship with others, then the vulnerability must be faced head on. This facing, however, is not to be indiscriminate for it would be destructive to make one's self vulnerable to just anyone; vulnerability is the relinquishing of power over into the hands of others. One still must be cautious for there are people who would destroy the vulnerable person. But the dilemma comes in that one who experiences general vulnerability has, at some time, to find acceptance in his vulnerability.

Nakedness is truly dangerous and frightening, but it is the only way to full trust; it is the key to ecstasy. Beverly Axelrod writing to Eldridge Cleaver shows her awe at the possibility of really knowing someone and the fear of attempting.

What an awesome thing it is to feel one's self on the verge of the possibility of really knowing another person. Can it ever happen? I'm not sure. I don't know that any people can really strip themselves that naked in front of each other...

There is both ecstasy and anguish in nakedness. We are often so exposed, as Karl Jaspers says, 'that we constantly find ourselves facing nothingness. Our wounds are so deep that in our weak moments we wonder if we are not, in fact, dying from them.'

But, as I pointed out earlier, the way out begins with love of one's self. Tyrell says

If we could but love ourselves, with our failures, and their results, we could begin to be honest with others. If we loved ourselves, we could demand to
know ourselves as we really are and could face ourselves. We could stop hiding from ourselves, and we might begin to accept the responsibility of our strength. We could stop damaging ourselves.

Then the next stage is what I have called earlier, after Being, the process of 'mutual disarmament'. In his work as a psychotherapist Tyrell has found that this kind of disarmament is necessary for the kind of trust that allows growth to take place.

The ultimate impact of the power form of life is an entrenchment in the impossibility of love. For love demands the truthful disarmament with significant others in our lives, the willingness to chance that under fear and anger there is a core of worth, and that in a community of honest vulnerability, true affiliation can be discovered and enjoyed; that affection can lead to love; that hope can be found in anger; and that concern can rise above fear.

Cardinal Newman remarked that it was truly amazing that those things we were so ashamed to share with other people, the fears, failings, and the rest, but which we all surely experience, keep us apart when they could be a basis of communicating ourselves to each other. They keep us apart because we fear that if we let others know we regard ourselves at times as inadequate, they will have something to hold against us.

This fear that keeps us apart is the fear of letting others know that we still experience ourselves in ways as 'immature' and childish. Cooper suggests that it takes a man to 'live out the reality of the woman that he is.' But even more than that it takes a mature man 'to live out the reality of the child that he is.'

Then Cooper suggests that

To commence the use of the word 'neurosis,' let us regard it as a way of being that is made to seem
childish by one's fear of the fear of others about one's becoming childlike.26

Neurosis is a way out of normality, just as psychosis is, for when one has come to the stage of being called 'neurotic', one has begun to make one's way out of that paralyzing position of being caught by what people think. As Cooper explains it:

'In neurosis', one lends false primacy to the reactions of others and then collusively and obligingly invites their fear into one-self. Neurosis, then, is a complex strategy (that inevitably gets arrested) of fighting one's way back into one's head, first, and then back into one's body, 'and then'... 27

Neurosis is a step in the right direction, with the process gone wrong, just as psychosis is paranoia gone wrong.

We have seen that disease expresses the relationship of a person to the environment and that it may prophesy to an unusual sensitivity of the person that he is 'too' vulnerable to be comfortable. The defect, however painful an affliction it may be, need not always imply unhappiness. It may not even imply always misfortune or impoverishment of either the community or the individual. As M. Siirala claims, 'the individual's happiness is in the continuous unfolding of his experience, and also in the fruitfulness of his suffering.' The criterion of happiness is the ability to grow into one's self.

A defective fate, then, is structured in terms of the reflectivity between the self and the community. An individual's defect is entwined in the texture of history, both the individual's and the community's. The defect constitutes an unpaid debt, to life. The defect contains a hidden and undeveloped potentiality, needing expression, demanded by life as a debt, a return for the offer of life. Life demands life. As a
debt to life, the defect thus constitutes a challenge—to search for a way through the defect to the 'hidden treasure' that underlies it. What looks like a debt on the surface thus out to be a cache of treasure, of 'unlived life', awaiting unfoldment and development. The defect is an invitation to discover the individual and communal potentialities that have so far remained unlived, locked up and concealed in defect constellations. Sometimes the reverse side of the defect contains more than an ordinary undeveloped potentiality: an interesting special talent may inhere in it, now manifesting as a defect.28

Defects, then, may draw attention to special talents or potentials that otherwise would be overlooked by the individual or by the community.

Madness is a way of being in the world in the condition of having one's trust invalidated. What is needed in healing is not the denial of the past but its affirmation and also the acceptance of the present as valid—all experience, fantasy or whatever. To be obsessed by guilt over one's past necessitates denial of the past or of the future. It is extremely difficult to affirm the past without being tied down by feelings of guilt or using one's past to dispense one from responsibility for the future. We must celebrate the past and move on to create the future out of the present. Marcia Cavell writes of Laing and other contemporary writers

the liberation that the spokesmen for the New Left and for the new theology speak about will celebrate illusion—defined as all that, which the notion of rationality in our culture leaves out—feeling, fantasy, and dream—as the true reality. It will unite what we say with what we think and do, feeling with thought, unreason with reason, mind with body, us with ourselves and each other. It will join us in genuine community.29
I like the point she makes about the hero of Oedipus Rex: the past, not the future was unalterable for him and what counted was the choice of how to respond to the past for the sake of the future. Guilt feelings and regrets are a prison house in which we tend to hide from the responsibility of the future, symptoms of unhealed relationships. This is the sense of "scruple" something small that "hangs us up" at a certain level of development.

E. Dying One's Deaths

There is still one element that has not been dealt with and that is most essential to any consideration of therapy; that is death. Perhaps there is no greater taboo in our society than the taboo against confronting death head-on. The reason is that death-taboo is buried under all other taboos combined. Death is feared because it is the great unknown of our lives and seemingly the ultimate power over us all for there is no way in which we can avoid submitting to it. But I suggest that this death is but a paradigm to many deaths in our lives.

I have spoken of the death of the dissolution of boundaries in schizophrenia, love and other forms of psychosis, though I did not call it death. Nietzsche suggests that the process of death is quite common in our lives. He writes in Ecce Homo: 'One must pay dearly for immortality: one has to die several times while still alive. The myths of emergence of the hero speak of his death and resurrection, through trial, confusion, doubt and then break-
out into new life.

John Dunne spoke of a 'search for God in time and memory,' by undergoing a search for time within mind and then for a time out of mind. Time out of mind is the time before one's birth and after one's death. Cooper claims that we have to immerse ourselves into the time before birth and before conception and also immerse ourselves into the time after death, before we can be able to understand our mourning.

While therapy in the past made the strengthening of controls the aim of its efforts, believing that underneath the conscious level of life there was a monster that broke lose if it was not adequately restrained, part of the modern therapy has made a point of teaching people to abandon restraints and to teach people to 'express themselves'. So it is that 'sensitivity training' attempts to teach people to express their feelings, oblivious of the fact that a person who loves himself truly will have no trouble with the expression of feelings. What comes first is the work of discovering one's self and then loving one's self.

We need to see the difference between true control or discipline and false control that breeds hatred, and we need to see the necessity of discipline. Cooper describes the difference thus:

I know businessmen who drink excessively and yet carry on with 'responsible' work. This is false control because it suppresses the reality of feelings of hostility, but more deeply, it suppresses feelings of love. In itself it is usually an indirect aggression against the principle person in that person's life.
The effect, however, is to produce a death state within life that amounts to an immense subterranean hatred of the world that is often paraded as love and benevolence and reliability and efficiency and this might fool anyone because the rationalizations are endless.31

To get out of this 'almost womb-like security of the death in-life state' without merely changing or reforming the structure of the state usually calls for some radical crisis in one's life. The observation is often made that this country is in mourning, grieving, and doesn't really know it; I concur. Until we really acknowledge our grief, we shall remain in a numbed or shocked state of normality.

There is still room for promises; how could there be therapy without them? Laing's patients ask someone to stay with them, and they will go right to the depths through their psychosis if someone makes the promise to stay. As I suggested earlier people will come out of schizophrenia if they trust someone to love them and if they find, on the other hand, someone who is trustworthy, who will stay with them. Real control, or discipline takes the form of promise.

A promise that runs through every form of departure, every voyage of death and rebirth—the promise to stay wholly and holy in the world, in a redefined sense of the sacerdotal. Discipline, then, is a mode of staying in the world, in the sense of being actively engaged in the world through the thick and thin of ecstatic joy and the most far-reaching despair. The promise that defines discipline, however, must be made not only internally but also, at least implicitly, to others. The pain of the promise is immense: it is a terminal agony that one passes through to see one's life and the world from the other side of a certain death.31
The promise must be registered in the world with a promised refusal of the possibility of backing out of it. Control is a ritualistic conditioned system of behavior whereas discipline has the nature of a fundamental choice or option that determines one's sense of openness and rightness.

Dis-ease breaks apart the structures of false control that both protect the person from damage and hold him from the risk involved in the dissolution of boundaries in loving and growing. A long tradition of false morality by control developed in our society over centuries is being subverted. Where the subversion originates, I don't know, but perhaps it arises from man's need to undergo a change of heart, a need that had been made clear by the complexities and new sensitivities developed in an age of dramatic change, this age that Rollo May called schizoid.
NOTES

Chapter One.

1. cf. Strasser, p. xi
2. *Sanity, Madness and the Family* (SMF) p. 27
3. Halleck, p. 11
4. SMF. p. 16
5. SMF. p. 18
7. Looyeweerd, p. 4
8. ibid., p. 51
10. Insight, p. 30
11. Collection, p. 262
12. RV. p. 10
16. *Love's Body*, p. 159
17. *Self and Others* (SO) p. 30
18. Dunne, p. 2
19. ibid. p. ix
20. SO. p. 28
21. *The Order of Things*, p. xv
22. ibid. p.xix
23. ibid. p.xxiv
24. Soul on Ice, p.146.
26. Image, no.9, sect.17
27. Love and Will, p.171
28. ibid. p.172
29. Intimacy, p.27
30. ibid. p.28
31. The Murder of Christ, p.3
32. ibid. p.5
33. ibid. p.23
34. The Tacit Dimension, p.52
35. Collected Papers, vol. 6 (6.289)
36. Rieff, p.235

Chapter Two.
1. Halleck, p.21
2. ibid, p.55
3. Doctrinal Pluralism, p.61
4. A. Siirala, p.3
5. ibid. p.17
6. Halleck, p.68
7. ibid. p.69
8. Halleck, p.70
9. PB. xiii
10. M. Siirala, p.126
11. A. Siirala, p.9
12. ibid. p.19
13. ibid. p.20
14. Cooper, p.103n
15. A. Siirala, P.94
16. Rieff, p.11
17. M. Siirala, p.21
18. ibid. p.15
19. ibid. p.23
20. ibid. p.26
21. ibid. p.1
22. ibid. p.2
23. ibid. p.3
24. Jourard, p.83f
25. A. Siirala, p.v
26. Rabkin and Carr, p.193
27. ibid. p.194
28. Cooper, p.103
29. ibid, p.105
30. ibid. p.106
31. M. Siirala, P.28
32. ibid. p.33
33. ibid. p.37f
34. ibid. p.42
35. ibid. p.47
Chapter Three.


2. ibid. p.123f

3. RV. p.10

4. ibid. p.118

5. Chapter One, p.


7. ibid. p.21

8. ibid. p.22

9. RV. p.11

10. ibid. p.11f

11. ibid. p.13

12. ibid.
13. M. Siirala, p.8
14. ibid, p.8f
15. RV. p.15
16. *Insight*, ch. 6
17. Stierlin, p.vii
18. RV. p.17
19. ibid. p.18
20. ibid. p.20
21. ibid.
22. ibid. p.23
23. ibid. p.25
24. *The Politics of Experience*
25. ibid. p.18
26. ibid. p.19
27. ibid. p.20
28. ibid. p.21
29. ibid. p.23
30. ibid. p.25
31. ibid. p.48
32. ibid. p.52
33. ibid. p.54
34. ibid. p.53
35. William James, *Principles*, vol. 1, p.221
36. *Talks to Teachers*, p.101
38. ibid. p.339f.
39. c.f. FIS. p.109
40. Interpersonal Perception Method, p.29
41. ibid. p.38
42. ibid. p.38f.
43. ibid. p.39
44. ibid. p.40
45. ibid. p.46
46. ibid. p.46
47. ibid. p.127
48. ibid. ch.7
49. ibid. p.137
50. ibid.
51. ibid. p.138
52. ibid. p.139
53. ibid.

Chapter Four
1. Cooper, p.6
2. ibid. p.3
3. ibid. p.4
4. 'Mystification, Confusion and Conflict.' p.343
5. ibid. p.345
6. ibid. p.347
7. ibid. p.351
8. ibid. p.360
9. PE. p.58
10. ibid. p.61
11. ibid. p.62
12. ibid. p.63
13. ibid. p.64
14. ibid. p.65
15. ibid. p.67
16. ibid. p.70
17. ibid. p.71
18. ibid. p.73
19. ibid. p.74
20. ibid. p.75
21. FIS. p.108
22. ibid. p.111
23. PE. p.92
24. FIS. 111
25. ibid. p.113
26. ibid. p.116
27. ibid. p.119
28. DS. p.119
29. RV. 138
30. PE. 93, 72
31. ibid. p.53
32. IPPM. p.34
33. I have prepared a discussion of schizophrenia in the light of these studies. However, because of the present length and complexity I have decided not to present it here.

Chapter Five.

1. Watts, *The Wisdom of Insecurity*, p.90f
4. *ibid.* p.159
5. *ibid.* p.160
6. *ibid.* p.161
7. *The Leath of the Family*, p.15
8. *ibid.* p.6
9. *ibid.* p.8
10. *ibid.* p.11
11. *ibid.* p.12
12. *ibid.* p.13
13. *ibid.* p.14
14. *ibid.* p.23
15. Cooper develops this, pp.25f
16. *ibid.* p.42
17. *ibid.* p.45
18. *ibid.* p.51
19. *ibid.* p.52
20. Dye, p.33
21. ibid. p.31
22. ibid. p.33
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27. ibid. p.83
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The thesis submitted by Rev. Dominic Burke, S.V.D., has been read and approved by members of the Department of Philosophy.

The final copies have been examined by the director of the thesis and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the thesis is now given final approval with reference to content and form.

The thesis is therefore accepted in partial fulfillment of the requirements for the degree of Master of Arts.

January 20, 1972

Signature of Adviser