

SCHIZOPHRENIA

AND

FAMILY VALUES

BY ALEX FERENTZY

Family values may not have worked for the Republican party in the last U.S. election, but they enjoy considerably more success in helping to shape the agenda in specific areas of institutional practice. For example, groups composed of the families of diagnosed schizophrenics called "The Friends of Schizophrenics" have gained a more powerful voice, both within the psychiatric literature and in the popular press, than their schizophrenic relatives whose interests they claim to represent. Twenty years ago, a book entitled *Schizophrenia and the Family* would have been operating under some version of one of the popular Freud/Marx syntheses of the day. Psychoanalysts, existentialists, situational analysts and others conceived of the families of schizophrenics as a reactionary unit of oppression. Essentially, our families (as smaller and in some sense representative units of capitalism) drove us nuts. Whatever the problems of this obviously simplistic perspective, it at least allowed the introduction of social, theoretical and experiential issues into the discussion of the cause, etiology and meaning of schizophrenia. If people such as R.D. Laing were not strong theorists, they were at least strong practitioners.

However the weakness of their theory was matched by their inability to detach their findings from their theoretical assumptions when the evidence contradicted them. Over this twenty year period there has emerged a dominant, reductive (and very profitable) biological approach to schizophrenia and a focus on the family as the context of therapeutic intervention. Today, a book with the same title, *Schizophrenia And The Family* (Anderson et al., 1986), would accept the family as the essential framework of the therapeutic process and, unlike twenty years ago, could ignore the organization of society as an element of oppression.

The rise and fall of R.D. Laing's theories and influence offer a microcosm of the exodus of radical thinking on this subject and the downfall of the Freud/Marx synthesis, particularly on this continent. Further, this story reflects the naivety of the 60s in North America and its premature radical consensus. It is also an example of a science caught within its positive and liberal premises and a critical practice that cannot reconstitute itself when its theoretical assumptions are shattered.

Of more immediate interest is how family values entered into this debate before, and considerably

more effectively, than Dan Quayle's attack on Murphy Brown and the "notoriously" liberal media. The current attempt by the Ontario government to bring in advocacy legislation has encountered the wrath of the Friends of Schizophrenics, an organization that is to the psychiatric patients' rights movement what Real Women is to feminism. This legislation (Bill 74 An Act Respecting the Provision of Advocacy Services to Vulnerable Persons) and the responses to it show how issues of human nature, subjectivity, institutional power and ideology become entangled and how schizophrenia not merely affects a conception of human nature or a specific institutional practice, but also reflects how we deal with, what breadth of issues we bring to, and what paradigm we use on social issues.

In *Sanity, Madness and the Family*, R.D. Laing and Aaron Esterson presented a series of interviews with schizophrenics and their families. They found a constant pattern of double bind relationships in which the schizophrenic was inevitably at the bottom of a hierarchy of contradictory and hidden deals within the family. Some were as obvious as the denial to the schizophrenic that he or she was being talked about covertly when it

was obvious that the family members had been doing just that. Others were more complicated but the point is the same: Laing and Esterson felt that they had discovered clear patterns of oppression within the modern family. Like the class structure of capitalist society, the family had a boss, middle management and workers, and in this economy of rational subjectivity, schizophrenics were the underclass.

As we can see from the final report of the 1990 provincial enquiry on mental competency, edited by David Weissstubb, the idea of an economy of rational subjectivity is actually embedded in legal/psychiatric practice:

"In this regard competency to make psychiatric decisions may be considered to be one dimension of the multi-dimensional competency matrix which helps to shape the relationships and relative power of individuals in society. Competency or capacity within any one dimension may be seen as forming a continuum ranging from absolute incompetence at one end to absolute knowledge and rationality (a sort of super competence) at the other, and along this continuum the wider the compe-

tency gap between any two points the greater the relative power of the more competent over the less competent. Within the medical competency division while lawyers, judges and average lay persons are considered to be normally competent, and therefore relatively more competent than patients whose competency is in question, the medical profession is seen (by virtue of education and professional accreditation) as being super competent and therefore more competent than average or less than average persons."

In this conception of the economy of the subject, the 'economy' is directly related to institutionalized power and the ability to determine the competency of the subjectivity of others. In fairness, this is merely a formal hierarchy and competency is connected to super-competency only after the fact, and not implicitly. By contrast, R.D. Laing's idea was of an unconscious economy of the subject where the parents (or, broadly speaking, the winners in the family context) were specifically, and individually responsible for the lack of rational subjectivity on the part of their schizophrenic offspring. The attribution of blame makes the parents of

schizophrenics morally culpable and the schizophrenics victims. This is then linked with an underlying concept of reason (taken rather awkwardly from Marx) which we no longer find necessary. Actually, the institutional expression of the economy of the subject is much more straightforward: the inherent contradiction that people are *a fortiori* less competent than the "super-competent" doctors is technically not a double-bind since it is admitted here or at least brought into the open. When, for example, they say we have power over you because our education and social position give us this power, at least the power structure is clear, regardless of what one's position is in relation to this power. Laing wanted more. He wanted to be able to humiliate a middle class family and say that certain individuals were to blame. Further, his insistence that schizophrenics were not crazy, but on a voyage of self-discovery, while the parents of schizophrenics were their oppressors was contradictory at best. If there is nothing wrong with being schizophrenic what is he blaming their parents for?

This type of research, which linked madness to a more general critique of society, was actually fairly well received (at least by comparison with the vacuum of social and politi-



cal thinking in mainstream psychiatry today). If anything the reality of double-binds is more common than Laing and Esterson suspected. Far from being limited to the family, we find the same kinds of deals in office politics and elsewhere. Mainstream psychiatry has made one major criticism of Laing and Esterson's work. The families of schizophrenics are not that unusual. The amount of double-binds (which involves both a contradictory deal and the negation of the existence of this deal) in a schizophrenic's family is not altogether unusual and it is not clear whether the excess of double-binds can be attributed to the families themselves (as schizophrenogenic), or to the stress of having a schizophrenic family member. In fact mainstream psychiatry has gone much further than Laing and Esterson in a number of areas. It has dropped the need for blaming specific family members and made an important distinction between families that are good for schizophrenics to return to and families that are not, based on a measure of expressed emotion in those families. Further, cross-cultural studies of schizophrenia indicate that extended family structures help

the psycho-analytic and existential left even to debate the biologists, thereby delaying the development of a position which accepts the biological evidence as descriptive, but rejects the normative interpretation of that description. This silence between the biological and psycho-social approaches allowed the grooming of a generation of social workers and other health care professionals who thought the parents of schizophrenics were guilty of some vague subjectivity crime. Parents of schizophrenics were harassed not only by the traditional institutional structure, its red tape and self-protection, but also by a collection of left-wing hippie do-gooders who were variously located within the institution. In this

context, it is not surprising that these families began to organize themselves both to get some straightforward answers from the system (what is schizophrenia?, what is the cure? how long does it last? is it inherited? what can we do?), and to push for increased consultation with the medical community. If the answers to these questions were nuanced with complicated psychoanalytic, sociological or political ideas by the old guard, there was an emergent simpler

approach to schizophrenia in the form of biological reductionism.

At this point in the story, a complex of political, economic, cultural and scientific forces comes together. First, there are the above-mentioned parents of schizophrenics looking for answers and input. Second, there are major advances in the understanding of genetic reproduction which accelerates interest in this area. Next, we have a rationalization of biological

research for maximum profitability. The impact on medicine and psychiatry becomes increasingly clear as multinational pharmaceutical companies organize seminars, influence doctors and researchers and everyone makes more money. In fairly straightforward capitalist rationalization, the search for profit re-aligns research goals, diagnostic criteria and psychoanalysis (which is

altogether useless for any serious mental disorder in any case) are replaced by biology and behaviorism (which is just as useless, but at least less complicated) and so on. These psychiatrists were able to give the parents of schizophrenics the answers they wanted to hear: namely that schizophrenia is a genetic disease which they do not completely understand yet, but which is controllable with maintenance drug therapy. The parents' groups came to equate the red tape and the theorizing with an all-encompassing attack on the family. We see here a fairly typical populist backlash against an overzealous left that presumes that it can impose a context-free truth onto communities or families without taking their day-to-day considerations into account. As a consequence, we have a swing to the right and yet another push for the elimination of politically critical research, the maximization of profit for corporations and the elimination of expensive government programmes.

This confusion of forces makes it difficult to examine the organization of these groups of the Friends of Schizophrenics (there are regional, provincial and national versions) to see if they started out with reactionary intentions or just turned out that way. Simultaneously, we could blame the naivety of the sixties' 'radical' synthesis and the romanticism of the Freud/Marx approach to critiquing society. We now know, for example, that there is no authoritarian personality even if we've all met the anal retentive, conservative bureaucrat that this term evokes. Both Freud and Marx present us with theoretical and practical problems today that were not so obvious twenty five years ago; this helps to explain why Laing could not go beyond his particular theoretical framework. The point that was missed was that

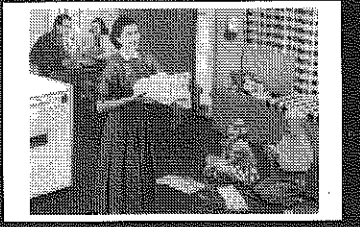
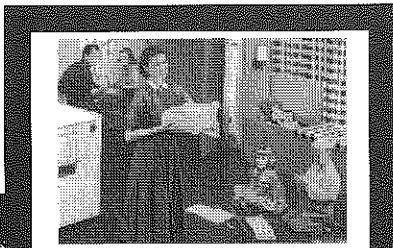
widespread psycho-social oppression of the nature that Laing was hypothesizing might not be localizable to specific families, or even specific individuals. The focus on the family itself might be an overvaluation of the role of the family in the development of the individual. Part of the problem surely lies in attempting to criticize the family using the family as a fundamental conceptual frame of analysis (i.e., as in Freud). One wonders why the issues of work, technology and patriarchy weren't thrown into the mix. In any case, both the relationship of schizophrenics to their families and the structure of the authoritarian personality turn out to be at least as irrational and complicated as the market and society within which they are developed.

While I make no attempt to explain what schizophrenia is, let me present some of the complexity one gets into in any discussion of schizophrenia that attempts to go beyond specific research areas. This

complexity has helped spawn two generations of dissident thinking. The relationship of class to the institutionalization of schizophrenics is often dismissed because of the divergences in different countries. For example in the U.S. the working poor are hospitalized more frequently in large urban centers than in smaller communities or in the country. Meanwhile in India, according to Richard Warner in *Recovery From Schizophrenia: Psychiatry and Political Economy*, it is the middle class that is most frequently institutionalized as schizophrenic. One hypothesis is that it is members of the class most exposed to the prospect of dropping to underclass status and life-threatening poverty who are the most likely to be institutionalized for schizophrenia. It is therefore arguably the people with the greatest class related stress, and not a specific transcultural (or even trans-urban) class, who are at greatest risk. Seemingly straightforward biological research is even more complicated. While drug therapy is by and large considered the most useful intervention, it is actually negatively correlated with cure rates. By cure one can only mean remission, which happens spontaneously

(i.e., without the help of psychiatrists) about forty per cent of the time, but only when there has not been long term maintenance drug therapy. Genetic studies are also confusing. The most significant work comes from studies with identical twins of schizophrenic parents (who are raised separately), but they show a concordance rate of 50% percent (rather than the expected 100%); Thus we are left with the idea that there is an inherited predisposition for schizophrenia which requires an environmental trigger. Further, there is some evidence that those people with schizophrenic relatives have a

better prognosis than those without. At the same time it is not clear what percentage of diagnosed schizophrenics might have that genetic predisposition. So one can more accurately talk of the schizophrenias as a group of related disorders. The major problem in the literature is the attempt to solve or sidestep this complexity by all sides in the dispute. Perhaps most frightening is the tendency of psychiatrists to extrapolate beyond their expertise and deal with social and political issues beyond their ken. Even more amazing than the diversity of approaches and research findings is this ignorance of both the limitations of their own investigations as well as the solid work done in other areas. For example, the information on class relationships is largely ignored, partially because there is no great profit potential in that area, but also because psychiatrists basically "just don't get it." They attribute ideas like downward socio-economic drift (over generations perhaps) to the fact that



spread out the emotional conflicts simply because there are more emotionally significant people with a wider range of personality and affective mannerisms to talk to. So while the nuclear family may be a psychological minefield, blaming individual family members is a contradictory proposition. This attribution of blame inevitably becomes scapegoating of the weakest link. In fact psychiatrists went looking for the schizophrenogenic mother (it's all mom's fault in other words); this was not convincing for long, but offered an accurate snapshot of society. Lock up the economically unproductive and blame their mothers.

Significant, though, is the loss of the critique of society from the understanding of schizophrenia. This process was assisted by the unwillingness on the part of

schizophrenics (as sub-competents) would generally do worse and tend towards the lower or less functional strata of the population, ignoring that this implies that schizophrenics in India are upwardly mobile and that schizophrenics in smaller towns and the countryside are stable socio-economically.

In any event, the Friends of Schizophrenics are quick to respond to any development that might have an impact upon schizophrenics. They oppose the current patient's advocacy legislation that the NDP in Ontario is introducing because it removes the family as the primary locus of social action. Their articles appear in the newspapers where they spread disinformation and instil a sense of fear in the general population about madness in the streets, and so on. The recent killing in Toronto of a schizophrenic by a cop is a good example. The Friends of Schizophrenics responded that this was unfortunate and that families should be better informed, but they did nothing to alleviate the public impression that schizophrenics are dangerous. Nor did they make a plea for training programmes for police officers. In fact, schizophrenics are less dangerous than

so-called normals, but this is another issue. The basic point which the Friends of Schizophrenics make is that the family is the proper locus of analysis and treatment and that any legislation which purports to deal with issues on a broader social basis amounts to an attack on the family. Notice as well that they do not call themselves families of schizophrenics or relatives of schizophrenics, but rather the cosier 'Friends' of schizophrenics. As the saying goes, "with friends like these..."

The family may have been given too much exposure during this entire debate and we can learn something from what is common to the failures of R.D.Laing and Dan Quayle. Insisting in public debate that complex issues be brought back to the family for analysis might well be a losing proposition, whether this is done on the left or the right. The best thing to do may be to ignore this ideological construct (and most efficient consumption machine) called the nuclear family and hope it just goes away. At the very least it is a mistake to use a theory of family interaction to critique the family (i.e., Freud) and it is confusing at best to blame families (i.e., Laing), for what are broad issues of subjectivity and power.

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Further Reading

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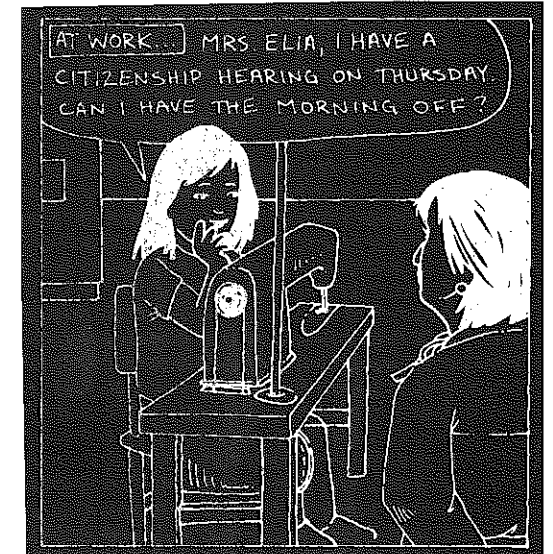


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EXCURSIONS