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What I would like to do together with you today is to examine the question of psychosis, and those suffering from psychosis, in relation to the notion of spirituality with which we are often confronted in these people. I am a psychoanalyst, and a child psychiatrist, and I will use psychoanalysis to help us think our way around these things. I will probably refer to 'patients' because this is a traditional term in both psychiatry and psychoanalysis but more importantly the term patients is derived from the Latin *patiens*, which means to suffer from or to endure something. That is, it is the suffering that is important to address and if we work with these people it is because they suffer and we need to work with the suffering that they bring to us.

I would like to look at spirituality, not so much in terms of preconceived systems of spirituality, but rather the way spirituality is referred to in everyday speech. That is, spirituality as it is spoken of, rather than, say, what we might think it is. This is perhaps the only way a psychoanalyst can take up any particular notion. Then I would like to look at what we mean by psychosis and for this purpose it will be helpful to look at both the psychiatric and the psychoanalytic notions of psychosis. After that we might see in what way we could address the significance of spirituality in the suffering of the person with psychosis in order to begin to think about how we might work with this spirituality.

My title refers to three different instances of the *psyche* as soul or spirit, that of *psych*osis, of *spirit*-uality and of *psycho*-analysis. So what we are speaking of is a type of itinerary of the soul or spirit.

The Greek $\psi v \chi \eta$ or *psyche* conveyed the senses of: 'breath, spirit, life; living being, person; soul of man, heart, spirit'³ and so on. The terms we can put forward today to cover this semantic field are those of *soul* and *spirit*, those pertinent to the topic of spirituality. However we find the word *psyche* both in psychosis and again in psychoanalysis. Psychosis literally then is an affliction of the soul and perhaps we can develop it in this way today.

Spirituality

No doubt there are many different notions of spirituality, from notions of communion with nature, that is, a pantheistic tendency, many spiritual tendencies of different sorts, including what people talk of as personal forms of spirituality, and of course many forms of organised institutional spirituality in the shape of religions. So this makes it difficult to characterise spirituality in a 'positive' way. That is, it is difficult to say what spirituality *is* because it is a different thing depending on who you talk to.

But how is spirituality spoken of? In the clinical field people talk about the different domains of experience: the physical, the mental, the social, the cultural, and so on. But then the question is raised: What about the spiritual? That is, the spiritual is the part that is missing.

I presented a paper at a psychiatry conference entitled 'From Cell to Soul' whose theme was the convergence and integration of the mind and body. My presentation mounted an argument against this constant tendency for integration, for things to always be One, for the mental 'the mind' and the physical to be reduced to the same thing. Strikingly at the conference there were a lot of papers about spirituality. Following my paper a question was asked as to where I put the spiritual into this schema. Again the 'spiritual', in the question posed, is the missing bit. It occurred to me that the 'spiritual' could be placed precisely in the gap, in the division between the mental and the physical, or in any other gap that appeared.

The largest public protest held in Australia was in Sydney in the 1990s when 30,000 people took to the streets when the Rugby League team the *Rabbitohs* was being wound up, under the banner 'Reclaim the game'. An article in the newspaper said that the protesters "were protesting about what rugby league had become, which is corporate and marketed and slick but lacks soul".⁴ Here again the soul is what has been sold out, the bit that lacks and which we are attempting to retrieve.

In *The Age* newspaper recently there was an ad for a comedy show by the presenter Adam Hill. It contained a blurb from a newspaper that read: "If you are not cheered up by this, you have no soul". This was quite a blow to most of us who are unable to be cheered up by it. But again this 'no soul' is the bit that is postulated to be lacking. The soul is put forward as that which would, if only we had it, make good what is missing.

A patient of mine recently said: "I am trying to find a meaning in my life: In that way it is a spiritual search". Here 'spiritual' is also what is missing, but it is linked to a 'search'. A search for what is missing is a search for wholeness. We could say that there is no end to that search. In medicine we say that if there are many treatments to a condition, it is because there is no good one. Similarly the plethora of forms of spirituality testify to there being no one answer, or even no ultimate answer, no answer, no point at which the search can stop, apart from with death, of course. This is not Good News for Modern Man.

Psychosis in psychiatry

Most of us would be familiar with how psychiatry currently views psychosis. That is, that a diagnosis of psychosis is based upon a number of broadly defined symptoms and signs (a very impoverished account of these compared to traditional psychiatry which had very careful descriptions of mental phenomena). These are hallucinations and delusions, disordered patterns of thought and speech, behavioural signs such as reduced eye contact and emotional signs such as a reduced affective response to one's own thoughts and to others called 'emotional blunting' as well as other emotional changes. The psychiatrist is thus interested in the presence or absence of these signs and symptoms and their severity. In other words, the psychiatrist of today is not really interested in the content of the symptoms, that is, the actual details of the patient's thoughts and speech. Hence he or she is not particularly concerned to address questions of spirituality except perhaps to categorise these, for instance as 'religiosity' or 'religious delusions'.

However currently there is a rise of 'spiritual' or 'charismatic' treatments in psychiatry, which we could propose is a sort of symptomatic return of spirituality because of psychiatry's difficulty in addressing itself to the soul of its patients.

Nonetheless the name *psychiatry* also contains the same reference to the *psyche* or soul. It is combined with the word also from Greek $\iota\alpha\tau\rho\sigma\varsigma$ or *doctor*. In other words a psychiatrist is literally a 'doctor of the soul'. Some of us might feel though that in some ways psychiatry has lost its soul in wanting to reduce things to biology.

We can date the foundation of psychiatry to the French physician Philippe Pinel who is known for liberating the mad from their chains. More importantly he listened to the mad in order to search for what he called the "residue of reason" in their speech.⁵ Perhaps we might be critical of his attempt to reason with them but the important point is that he engaged with the productions of the psychotic, with the content of their speech.

He also at times staged their delusions. For instance in a patient who had persecutory ideas, who felt he was being accused of a crime, Pinel would create a court in which the patient was tried and then acquitted of his imagined crimes. In one sense the court is a representative of society, of a social bond that Pinel created around the patient, the sort of social bond promoted within the walls of the asylums of old.

Traditionally it was the doctor who had looked after the body and the philosopher who dealt with the afflictions of the soul. With Pinel's founding act of listening to the speech of the mad there was an introduction of a new role: the doctor took the place of the philosopher and assumed the care of the soul or *psyche*, as well as that of the body. Hence these early psychiatrists were called *médecins-philosophes* or *doctor-philosophers* and psychiatry became the study of *psyche* and *soma*, soul *and* body, although in recent

times it seems to have become reduced to just the body. In other words psychiatry has become primarily concerned with genes and neurotransmitters and brain scans and of course medications.

Prior to the mid-twentieth century, the traditional clinical practice in psychiatry addressed itself to the individual's suffering. This was before the advent of population-based approaches and normative data in which the patient became reduced to a particular instance of a generalised phenomenon. DSM is after all the *Diagnostic and Statistical Manual* in so far as it attempts to produce standardised diagnoses based on a *statistical* approach.

Traditional psychiatric clinical practice also had a diagnostic approach based on three major structures: those of neurosis, psychosis and psychopathy (another *psyche*!), the latter also being referred to as perversion or sociopathy.

Psychosis in psychoanalysis

In a footnote in his *Three Essays on Sexuality*⁶, Freud says the following:

The contents of the clearly conscious phantasies of perverts (which in favourable circumstances can be transformed into manifest behaviour), of the delusional fears of paranoics (which are projected in a hostile sense on to other people) and of the unconscious phantasies of hysterics (which psychoanalysis reveals behind their symptoms) – all of these coincide with one another even down to their detail.

Here Freud reiterates the classical psychiatric diagnostic approach with the three structures of perversion, psychosis ("paranoics") and neurosis ("hysteria"). However with psychoanalysis he is able to elaborate that these structures are underpinned by different mechanisms according to which something unacceptable or unassimilable is handled, and to the fate that this undergoes: disavowal for perversion, 'projection' (or foreclosure) for psychosis, and repression for neurosis.

With Jacques Lacan we are able to elaborate further on these mechanisms, and thus these structures. We can also clarify and state precisely what is unassimilable: a question of something that lacks, the fact that in a fundamental way we are divided beings, that we cannot be whole, that we cannot aspire to Oneness despite constant calls in the clinical field for 'holism'. This something lacking also bears upon the question of mortality as an important instance of the ways in which we are incomplete beings.

Freud called this 'castration' and we still use that term but not with the anatomical sense that Freud sometimes used it, even though it might be through anatomy that something of this is perceived or dealt with by each one of us.

Freud wrote up a history and commentary of a case of so-called paranoia, from the memoirs of the person himself, entitled *Psychoanalytic notes on an autobiographical account of a case of paranoia*, which is otherwise known as the *Schreber* case history.

Why mention Schreber in this talk here today? Because in many ways Schreber's history, at least the history of his illness, is not so different in its presentation and progression to that of many of the patients with psychosis with whom we work today. But also because Schreber, and Freud's working of this case, bring forth the same questions regarding psychosis that are theme of today's meeting.

We will cite a few things from Freud's Schreber case. For instance, in relation to our topic and how we have spoken of spirituality, he referred to his former physician, Flechsig, as a "soul-murderer".⁷ Here once again the soul is precisely what is missing, in this case presumed dead.

Schreber is described as being "full of ideas of pathological origin, which have formed themselves into a complete system",⁸this fullness or completeness pertaining to a Oneness or wholeness. Furthermore, (to quote Freud): "He believed that he had a mission to redeem the world and to restore it to its lost state of bliss. This, however, he could only bring about if he were first transformed from a man into a woman".⁹ This bliss, no doubt is a sense of Oneness with God, a Oneness which religions and spirituality often promote.

Schreber believed that divine miracles or "rays" passed from the heavens into his body as "female nerves"¹⁰ that had already passed over into his body, and out of these a new race of men would proceed, through a process of direct impregnation by God. He also believed that when a man dies his spiritual parts undergo a process of purification before finally being reunited with God Himself: "creating anything, God is parting with a portion of Himself".¹¹

In other words, in Schreber's beliefs, he is part of God, with he and God together they constitute a Oneness. And "In the course of their purification souls learn the language which is spoken by God himself, the so-called "basic language".¹² This is the language of all languages, the language which then is *One*, which does not lack, in which all can be said. This of course makes it different to any language of mere mortals.

At one point Schreber becomes convinced of the imminence of a great catastrophe, of the end of the world. After his recovery, which began from this point onwards, Schreber considers that there has been a profound change in the world even though in appearance everything is the same as it was before. Nonetheless he does not doubt "that during his illness the world had come to an end and that, in spite of everything, the one that he now saw before him was a different one".¹³

For Freud, this 'end of the world' is an expression of an internal catastrophe, which is attributed to the external world. In other words, it is a sort of complete symbolic collapse of his world of the sort that we might see, not uncommonly in patients, from a psychiatric point of view, in the early stages of their psychotic illness. To return to what we were saying earlier, this symbolic collapse is also co-extensive with the inability to assimilate something, in that something undergoes a process of what Freud refers to as 'projection'. But for psychoanalysis the symbolic collapse of one's world, the loosening of meanings and designations in language, the failure of metaphor in language, this symbolic collapse *is* the psychosis.

So then after this collapse, the psychotic must reconstruct his or her own world on a different basis. Here we can cite Freud once more: "And the paranoic builds it up again, not more splendid, it is true, but at least so that he can once more live in it. He builds it up by the work of his delusions. *The delusional formation, which we take to be the pathological product, is in reality an attempt at recovery, a process of reconstruction*" [Freud's italics]¹⁴.

At this point Freud gives a lovely citation regarding such a reconstruction of the world from Goethe's *Faust*:

Woe! Woe! Thou hast it destroyed, The beautiful world, With powerful fist! In ruins 'tis hurled, By the blow of a demigod shattered!

Mightier For the children of men, More splendid Build it again, In thine own bosom build it new!¹⁵

So then what cannot be assimilated, what can not be integrated or taken on by the subject must be dealt with by one of the three mechanisms. Freud calls this 'projection' for the psychotic but he also refers to this as 'being abolished', at least in this translation. With Lacan it is also translated as 'foreclosed', a different mechanism to the repression of the neurotic. Here we have Freud again: "It was incorrect to say that the perception which was suppressed internally is projected outwards; the truth is rather, as we now see, that *what was abolished internally returns from without*".¹⁶ [my italics]

So what returns from without is precisely that which the psychotic patient experiences as coming from outside, in the form of noises, voices, influences, poisoning, persecution, God's influence, or whatever other symptom the subject experiences.

Here we see that the psychoanalytic view of psychosis is very different to that of psychiatry. For psychoanalysis the diagnosis of psychosis is made not from signs and symptoms, but rather from a particular relation to one's speech, and the mechanism used by the subject in dealing with what lacks, which we referred to earlier as *castration*.

For those of you who are anxious to get to more practical matters, this has important implications for treatment. For one thing the aim of working with someone with psychosis would not be to 'remove' or to attempt to reason away the delusions which are the mechanism that the psychotic uses in order to construct some stability in his or her world.

Psychoanalysis and spirituality

We could say that the primary concern of psychoanalysis is that of the soul. In fact the word Freud uses in German to refer to the subject is *Seele* or 'soul'. There is a lovely little book by Bruno Bettelheim called *Freud and Man's Soul*¹⁷ which deals precisely with this question and how the translators have destroyed this aspect of Freud's work. In the English translation, *Seele* is given as 'Psychic apparatus'. Psychoanalysis literally loses its soul with such a translation.

Both psychoanalysis and spirituality put forward that there is an Otherness, there is something Other, beyond how we see ourselves, beyond what we know of ourselves. In other words that when we speak, we say more than what we mean, more than what we intend. So this Otherness, for psychoanalysis at least, is conveyed through our speech. Freud discerned this notion of an Otherness in the productions of dreams ('the Other scene'), slips of the tongue and the pen, jokes, bungled actions and other symptomatic phenomena of speech.

In other words, the Other for Freud, this Other scene, is the unconscious which is produced through these means, whereas for religion this Other is God.

In 2007 the French analyst Jean Allouch published a book entitled *Is Psychoanalysis a Spiritual Exercise*?¹⁸ In a way it is surprising that his conclusion was affirmative, that psychoanalysis *is* a spiritual exercise. Part of his argument is based on what we have just

said regarding Freud but also following on from the spirit of the letter of Freud. For instance in French a joke is a *mot d'esprit*, literally a 'word of the spirit', a spirited word.

But this spirituality discerned by Allouch also finds its inspiration in the philosophical schools of the ancient Greeks, to whom we are indebted for the word *psyche*. What we put forward earlier, that it was the task of the philosopher to care for the *psyche* or soul, is not just as an arid intellectual exercise, but truly addressing the soul in the question of ethics, which is that of the act.

Remember that this is the *spirit*, best exemplified in Hegel's work the *Phenomenology of Spirit*¹⁹ in which the Spirit, which, like for psychoanalysis, is linked to language and history. The word used in the German philosophical tradition is *Geist*, literally spirit.

For the ancient Greeks also, the *psyche*, the soul, is intimately linked to the $\lambda o \gamma o \varsigma$ or *logos*, that is, to speech and discourse. The pre-Socratic thinker Heraclitus stated: "But of this account (*logos*), which holds forever, people forever prove uncomprehending, both before they have heard it and when once they have heard it".²⁰ So the *logos* goes beyond what one comprehends or understands. For Heraclitus, it is a question of being able to hear the *logos* despite what is being said. For psychoanalysis it might be to hear the unconscious, despite what is being said. For the psychotic this might be by hearing voices.

For the Greeks the *logos* was the function of divine thought, the thought of the Gods: divine thought is able to accommodate opposites. Heraclitus again says: "God is day and night".²¹ Here there is a unity of opposites, the co-existence of day and night which mortal man (man who lacks, is castrated) is not able to accommodate. Nonetheless for Freud the unconscious is able to accommodate opposites, it is "exempt from mutual contradiction".²²

Here we might have to broaden up the definition of God and say that He is *all that is unable to be thought or spoken*. That is, in reference to what we were saying earlier about spirituality, God is all that is missing or lacks, the missing part that we continue to search for and which ultimately we never find.

Language, the *logos*, produces meaning but there is always something that remains, something that is not reducible to meaning. For Freud this is the unconscious (and for Lacan it is the real as impossible, that is, the impossible to be thought or spoken).

If, as we said, psychosis is an affliction of the *psyche* or soul, then it is also an affliction of the *logos*, an affliction of discourse or reason.

Language produces meaning but there is always something that remains, that is not reducible to meaning. A psychotic patient of mine, a young boy, repeats and writes constantly in his work with me, the words "bes bes bes". He says he does know the meaning, that it is a secret. Then it must remain without meaning. This word has a spiritual function for him; it designates him in a particular place and time, it perhaps is the only thing that locates him in the world he is attempting to construct for himself. It is important with the psychotic to be able to listen, to hear in their speech something beyond the ordinary meaning that we constantly attempt to impose.

In the Garden of Eden it was the serpent who introduced language. But inevitably in doing so it spoke with a forked tongue. In other words this forked tongue implies that something escapes meaning, the forked tongue implies a division. What Adam and Eve lost in being banished from the Garden of Eden was communion with God, that is, being *One* with God. Some religions of course attempt to return to this in some way through the sacrament of communion.

It is this Oneness that we have spoken of in regard to the search of spirituality, a search to be one with nature, to be one with God, a search that always has to continue in one way or another while we are alive. In other words it is a search which must in some way fail. Perhaps it is our fate that we have to battle on nonetheless.

The problem for the psychotic though is that he or she *is* One with God; he or she is One with God as in Schreber's communion of with God for instance.

St Paul said to the Galatians, "be one in Christ"²³, that is, be *a part of* a community, a community of which each member is a part. In other words to be *part of* a community means that each one is missing something. To want to be part of a community requires that each one of us recognise that we lack something. This need for community is a need for others, a need to be with others, a need to share something and to belong to a community. This is in contrast to the psychotic who is outside of the community. He or she does not participate in society, he or she is *apart from* others.

Nonetheless many people with psychosis attempt to form a social bond even through their religiose sentiment, joining a church for instance, which for the particular patient may be a first tentative step to being a part of a community.

In our work with the psychotic, we can attempt to restitute a community with them, we can attempt to found a fellowship. The notion of participation requires being *a part of* something rather than a whole with God, which is to be *apart from* other mortals. To work with the psychotic patient then, the spiritual work, is to attempt to assist them in moving from the *One* to the part.

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