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BRENDAN STONE

Abstract

With reference to two journals written by women hospitalized with psychotic disorders and subsequently published (Hart, 1997; Jefferson, 1975), I examine the role of writing in the context of acute ‘mental illness’¹. In particular, I suggest that simply recording the everyday may help psychotic patients to (re)fashion a coherent sense of selfhood.

Madness and Identity

A feature common to the multifarious conditions grouped under the designation of ‘mental illness’ is the disruption of a coherent sense of selfhood: in the midst of disturbance the very foundations of personality seem to shift, mutate, even disaggregate entirely. This phenomenon has been widely observed and recorded by both clinicians and ‘patients’. In the mainstream of psychiatric opinion it is axiomatic that the psychological process known as dissociation, which involves troubling alterations in the sense of self, is common to a wide range of psychological disorders and is particularly acute in cases of psychosis (see Saxe et al., 1993; van der Kolk, 1995; Bleuler, 1966; Jaspers, 1962; Freeman et al., 1958; Federn, 1952; Fabrega, 1989; Helmsley, 1998). Notwithstanding disagreements over aetiology, commentators from the more critical fringes of the human sciences and the humanities concur. Thus David Mann (1991: 216) insists that “psychiatric ailments […] can be understood as losses of self”; Robert Young (1995: para 28) comments that, for the psychotic, “fragmentation of self becomes the norm”; James Glass (1993: 27) writes of the shattering of a “core sense of self”; and Marta Caminero-Santangelo (1998: 103) describes “the absolute powerlessness of one who cannot completely claim the ‘I’ for herself”.

Those deemed mad commonly reiterate such assessments. Lara Jefferson (1975: 24-5) describes madness as a “flood […] swirling about me […] sucking me under”, lamenting that: “There is only a shadow remaining of the person I used to be” (ibid: 19); while Linda Hart (1997: 14) describes her psychosis – manifest as auditory hallucinations of the hostile voice of her dead father – as “closing me down and taking me away from the world”. For Hart
this closure of selfhood is linked to a muting of her own voice and a felt loss of agency: “Today my father has attempted to get control of my mind. He does it by subtle means. Taking away my speech, closing me down and taking me away from the world”. Moreover, the voice repeatedly urges her to kill herself, and conjures up images of death, decay, and absence. When Hart records that, “his voice became more insistent. He told me my skin was coming off and that I could disappear” (p.33), madness manifests as an impression of bodily disintegration – a powerful image of the nullification of the self.

My argument is that by means of writing – and specifically in their records of the everyday – Hart and Jefferson are actively reforming their fragile senses of selfhood. This is not, however, immediately apparent. Hart’s text, in particular, is a fairly mundane record of everyday life on the hospital ward: descriptions of interactions with friends and relatives who visit, and conversations with nurses and doctors. Although (quite briefly) recording episodes of distress, there is very little psychological analysis or revisiting of the past. While Jefferson’s text is more self-consciously literary and addresses the dynamics of writing in the context of severe distress more explicitly, it too is overwhelmingly preoccupied with the everyday and concentrates on the lives of fellow patients rather than her own.

Notwithstanding their journals’ contents, both writers attribute dramatically beneficial effects to their writing. In one of Hart’s final entries, and on the day before she returns to work, she declares: “Writing this journal has kept me on the edge of sanity. Without it, I believe I would have tipped over into the chasm of madness from where I could not be reached” (352-3). Jefferson describes her diary as a “ladder of words – strong enough, and long enough – to reach out of this” (112), and specifically links her continued existence to writing:

The flood that was swirling about me was sucking me under – and the pencil I had in my hand was a straw to be caught. It was just a straw – but I caught it – and now I have kept my head above water for a while. (24-5)

At the end of her journal, shortly before she is transferred to an open ward, Jefferson also declares that writing has been instrumental in her recovery: “I kept writing in an effort to escape [madness] […] I have sat through floods of raving and built a barrier – a breakwater of small black words around me” (236).

What is it, then, about their diaries which prompts Hart and Jefferson to denote them as key factors in recovery? On one level, it is not difficult to see how asserting a ‘voice’ in the context of a journal might alleviate the erosion of voice which Hart describes as concomitant with psychosis. That is, in the diary the ‘voice’ on the page is perhaps more identifiable the writer’s, rather than emanating from an external source. To write, therefore, may be to counter
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voicelessness. However, it is less obvious how through writing, and through a writing which rarely attempts to ‘understand’ the self, or to delve into psychological history, one might – to any significant degree – reform a shattered identity. How can, in Hart’s case, recording one’s meals, the weather, the names and occupations of those one is hospitalized with, one’s occasional trips out at weekends, affect something as fundamental as identity?

To attempt to answer this, I want to turn first to that strand of theory which challenges notions of the self as transcendental essence, and instead posits ‘identity’ as an effect of language. An influential example is Emile Benveniste’s Problems in General Linguistics, in which he claims that it is through using language, through speaking, that we establish what we recognize as human identity. Thus, he argues that “it is in and through language that man constitutes himself as a subject, because language alone establishes the concept of ‘ego’”, and, famously, that “subjectivity is only the emergence in the being of a fundamental property of language. ‘Ego’ is he who says ‘ego’” (1971: 224).

For Benveniste, therefore, verbal expression doesn’t express what is there anyway. Rather, in Anthony Kerby’s summary, expression “generates the subject […] presupposed by it”: “the disclosive power of language is formative of the subject” (Kerby, 1991: 74 and 82). And, particularly germane to my discussion here, Kerby notes that “soliloquy” – talking to yourself – “is especially important to the question of self-identity” (ibid: 72).

Benveniste’s ideas presage less abstract work in psychology and neuroscience undertaken on the role of self-talk. The neuropsychologist Alain Morin, for example, has written extensively about how our sense of self is related to ‘inner speech’ – the process by which we speak to ourselves in our own heads (see Morin, 1993, 1995a, 1995b, 2003). He contends that the self forms a “coherent picture of what it is” by “talking to itself about itself”, and that inner speech is critical for the development of self-awareness – which is not only dependent upon but “almost synonymous with our ‘inner voice’” (Morin and Everett, 1990: 341).

On alleviating mental distress, Morin and Everett (1990: 351) suggest that “low self-conscious subjects” might be taught “to talk to themselves about themselves”, and note that “when irrealist cognitions are at the core of clients’ problems, introspective self-talk could be learned to identify and change maladaptive self-talk”. In a similar vein, the neuroscientist Bernard Baars (1997: 77) describes schizophrenia as an inner speech “that has run out of control”, and suggests that a possible treatment might be to “teach schizophrenics to speak to themselves in different voices, at will, to regain control over the inner voice”.

My suggestion is that the journals of Hart and Jefferson are examples of such an exercise in soliloquizing. And this is obviously significant if through self-talk they are also – to follow Benveniste and Morin – constructing
themselves as ‘selves’; agents who can act and can speak, rather than be acted on, and ‘spoken’, by psychosis. If madness is intimately bound up with the dissolution of the self, then to strengthen a sense of selfhood may also be to attenuate madness. Psychiatrists Larry Davidson and John Strauss (1992: 131) have addressed this point, claiming that “an enhanced sense of self” can help sufferers by providing them with a “refuge from their illness” and a “foundation upon which they may then take up the work of recovery in a more active [...] fashion”.

There are two points to emphasize here. Firstly, I am invoking self-talk as a process by which the self, in a willed and self-conscious movement separates itself from the flux of existence and speaks to itself – and which here is externalized in textual form. Secondly, the way that these diaries reclaim selfhood is not (only or primarily) by telling stories, by establishing a narrative. Rather, identity is primarily established by means of assuming the subject position of an ‘I’, simply by speaking/writing as an ‘I’, or to adapt Benveniste: ego is she who says ego.

On this last point, it is obviously true that speaking in and as an ‘I’ is a part of most personal speech. But what is happening in these texts is, I think, subtly different from what we might call ‘everyday speech’: this is why I have highlighted self-awareness and will. Baars (1997: 131) hints at this when he emphasizes teaching schizophrenics to speak to themselves at will, and when he points out that experientially there is a major difference between “very similar voluntary and nonvoluntary actions”. But to elucidate this point in more detail I want to return to the more abstract realm of theory – specifically Maurice Blanchot’s essay ‘Everyday Speech’.

Blanchot’s purpose in this essay is to redeem the quotidian from its tainted status as an unexamined and hence unlived existence (after Socrates’ maxim) by indicating, and to an extent celebrating, its subversive undercutting of comforting illusions of self-presence and ideals such as value and judgement – “the everyday […] designates […] a region or a level of speech where the determinations true and false, like the opposition of yes and no, do not apply” (Blanchot, 1993: 242). For Blanchot, everyday speech represents “an unspeaking speech that is the soft human murmuring in us and around us”; and includes ‘unwilled’ semi-conscious un-decided-upon speech/thought. In normal life, he contends, the “everyday escapes” because it “is without a subject” (ibid, 244). That is, everyday (inner and outer) speech is typically absentminded and unaware of itself: in this realm of everyday speech/thought we are barely conscious of ourselves as selves, Blanchot claims that everyday speech tends to be feared as it represents “the power of dissolution”: the forgetful unaware state of everyday speech is the antithesis of the fortress-like ego which bolsters itself by excluding and denying otherness.

However, Blanchot notes that potential dangers lurk in the realm of everyday speech, and these are, I suggest, particularly important to consider in
the context of mental disturbance. He points out that because the “day-to-day indifference” of the everyday “cannot be assumed by a true subject (even putting into question the notion of a subject)”, it “tends unerringly to weigh down into things”, and is a medium in which “alienations, fetishisms, and reifications” may flourish because of the lack of an engaged awareness to resist and divide the unconstrained flow of impressions (245). Moreover, the individual labouring in a monotonous existence who has only the everyday is “he for whom the everyday is most heavy” (244).

For Hart, the ‘fetishisms’ of everyday speech include the virulent antipathy and ceaseless murmur of her internalized father: subsumed by this, she is in danger of complete capitulation to an unbearable everyday comprised of hostility and fear, or as she puts it lost in a “chasm of madness”. Deprived of a coherent ‘I’, the psychotic is akin to a character trapped in a nightmarish fiction without a narrator. So while Blanchot’s aim is to challenge discourses which valorize the atomised sovereign self, for the psychotic the dissolution of a strong sense of self is already a lived reality, and is manifest as suffering. There is little danger – or even possibility – that those who have such intimate knowledge of the radical contingency of the ‘I’ could ever retreat behind the ramparts of a fort-like ego.

Although these diaries speak of the everyday, they are not, therefore, everyday speech as Blanchot describes it; rather, they represent its inverse – self-aware embarkations into language. Moreover, in my estimation they are willed linguistic constructions of selfhood; the strategy which is of most importance in these texts is the conscious formulation of simple sentences in which ‘I’ assumes the place of subject, or which, having assumed that placing, describes and comments on existence. Thus, for instance, this seemingly unremarkable entry by Hart (1997: 11): “I haven’t yet had eye contact with Pam. She wears the same clothes each day and night and her black hair gets more and more greasy”. Here, as Benveniste might have it, by taking up the position of the first person, a position from which a self might be articulated is also taken up. A sense of selfhood, or even the possibility of selfhood, is thus established which enables Hart to look outside herself from that position. In the context of a psychosis which has effectively closed Hart down as an agent, saying ‘I’ in this willed and conscious way is significant.

This dynamic can be further illumined with reference to Lev Vygotsky’s influential theory of the development of ‘inner speech’. True inner speech, Vygotsky contends, is characterized by abbreviation. That is, we tend to speak inwardly to ourselves in a very shortened form, and not as if we were speaking to someone else. This is because: “We know what we are thinking about; ie. we always know the subject and the situation. And since the subject of our inner dialogue is already known we may just imply it” (Vygotsky, 1986: 243). Even disregarding their written form, then, these grammatically coherent diaries do not conform to a Vygotskian model of inner speech. Yet Vygotsky’s
prerequisite for the functioning of inner speech – of ‘always knowing what we are thinking about’ – can hardly be said to apply to the being-states described in Hart’s and Jefferson’s journals. In their accounts, they do not know and cannot predict the direction of their thinking because their thoughts seem to come from outside. Moreover, abbreviated inner speech may be an unattractive modality for the psychotic in that its gaps and ellipses may present openings for the irruptions of psychotic forms of thought to ‘enter’ and colonize the self. There are resonances here, it seems to me, with Blanchot’s notion of the reifications and fetishisms flourishing in the realm of everyday speech.

The journals do evoke, however, the developmental precursor to inner speech, which Vygotsky calls (after Piaget) ‘egocentric speech’. This represents a transitional stage between speaking to others and inner speech, and occurs when the child, having mastered speaking directly to and with others, begins to speak aloud to itself while in the company of others. It represents a conversation with the self which “occurs only in a social context” in which the child assumes “that his egocentric talk […] is understood by those who surround him” (Vygotsky, 1986: 231). It “already has the function of inner speech”, but “remains similar to social speech in its expression” (235).

Significantly, a prominent motif of Hart’s and Jefferson’s journals is an acute awareness of others, of the social, interpersonal, and dialogic. Rather than extensively detailing their own symptoms, both are preoccupied with other people – hospital staff, other patients, friends; and in addition their texts take into account and allow for possible or actual readers. On this latter point, Hart actively plans for and allows staff and friends to read her journal, and her writing is spoken about by others who encourage her to publish it: before she is released she learns that extracts will indeed appear in a mental health journal. In her journal, Jefferson constructs an imaginary reader of her text or an alter ego and her writing often takes the form of a dialogue with this ‘other’. Far from a manifestation or psychosis, this is a consciously worked out strategy. At other moments she directly addresses an imagined reader outside the text.

These factors suggest to me that there may be similarities between the Vygotskian child practising voice and carving out linguistic territory, and the narrative work undertaken by Hart and Jefferson. If these adults hospitalized with psychosis are to practice egocentric speech, they cannot talk aloud to themselves without running the risk that such behaviour will be interpreted as pathological. So instead they write – and feasibly their texts can be read as written versions of egocentric speech: their writing is understandable by others; in their diaries they imagine others reading the texts; their texts continually picture others, and are read by others.

Morin’s and Baars’s – and Vygotsky’s – reflections may need to be modified slightly if they are to fit with psychotic experience. But, read in conjunction with the deliberations of Benveniste and Blanchot, their work aids an understanding of the processes and potential of journal writing in this
context. Notably, the model of selfhood I have outlined here is not the atomistic, privatized “fortress-like ego” which Blanchot resists, but is dependent on others: the dialogue with the self – from which a meaningful sense of identity emerges – is formed in a socially inflected context. Most significantly, reading such texts through the lenses of these disparate discourses reveals that in these apparently mundane stories we actually witness the manifestation and outworking of a mode of existence, the trace and culmination of an existential process worked out on the page.

Notes

1. The term ‘mental illness’ can be problematic for those who live with acute mental distress. Generally I prefer to use ‘madness’ as the term does not so overtly tie distress to a biomedical model.

References


