### **Abstract**

The relatively new method of autoethnography as valid research is used in this paper. The method combines a personal and introspective approach with the academic research method. By reflecting on her experience of psychosis, the first author (LF) attempts to show how psychotic symptoms, such as delusions or paranoid perceptions, have a symbolic meaning and could relate to previous traumatic experiences. She uses Winnicott's concept of the 'true' and the 'false' self and applies it to psychotic illness. Using auto-ethnographic details of her experiences, she indicates how trauma, and associated falsification of its understanding, led to distortion, i.e., a false reality, a symptom typically associated with psychosis. A brief comparison is then made of her experience to two other published auto-biographical cases. In light of this self-analysis and careful reading of key psychoanalytic texts, the author explores and explains what, in her experience, may lead people to act in a manner not typical of their true being and how this might explain the rare dangerous behaviour that can occur in some psychotic cases. The understanding of psychosis as 'madness' (i.e., to be without reason) is revealed to be due to lack of understanding of its possible underlying causes.

Key Words false self, psychosis, symbolic meaning, trauma

Does Madness Really Exist? An Autobiographical Analysis of Psychosis as a Response to Trauma and Not a 'Mad' State of Mind

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## Introduction

We usually refer to madness as something utterly 'irrational' or 'insane'. In psychology, when people evoke madness, they are usually referring to psychosis. In his exploration of the work of Lacan, Leader [1] for instance identifies madness with psychosis, in all its forms. The two most severe forms of psychosis can be considered to be schizophrenia and bipolar mood disorder. We do know that several conditions such as paranoia and personality disorders have been considered as part of psychoses, and that some forms of depression also include psychotic elements. Alongside these understandings,

it may be useful to consider the work of Christopher Bollas [2], a contemporary psychoanalyst, on whether psychosis is madness i.e., irrational behaviour. In a recent book on his clinical work with patients who suffered from psychosis, he writes, "It is important to make a distinction between 'psychosis' and 'madness'. Schizophrenics are psychotic but they are not mad . . . Madness refers to the creation of a chaotic state of affairs driven by the acting out of unconscious fantasies".[2,p.36] Implicit in this statement is that, for him, there is meaningfulness, not chaos, in psychosis.

As first author of this paper (LF), I have experienced psychosis and lived with the diagnosis of schizophrenia for a period of forty-six years. Through my experiences and doctoral work on the link between psychosis and trauma, I have other ways of viewing 'madness'. As result of my careful reading of core psychoanalytic literature and my own self-analysis and recovery, I believe that what characterises psychosis is what appears to be a lack of understanding of reality. The person experiencing psychosis faces a reality that others may not understand or relate to. While it can be confirmed by those

who have been close to someone experiencing psychosis, that the often delusional, paranoid, or hallucinated reality of these people is a different reality from the one experienced by others, I suggest that those symptoms or manifestations are not irrational or insane. I argue and show that, once we understand what those symptoms are expressing and what they symbolically represent, they can acquire an intelligible meaning pertaining to the background of the individual experiencing those symptoms, including traumatic experiences.

To highlight this, I have begun this paper by concentrating on existing theoretical understandings of how, in psychosis, the 'true self'has been repressed and becomes hidden. I considered Winnicott's [3] concept of the 'true and false self' and how it relates to psychosis, and I included the contemporary work of Bollas and his understanding of what happens to the 'I' in psychosis.

In the later section of this essay, I have presented some auto-ethnographic details of my own case of schizophrenia, and I have attempted to show how my delusional, or paranoid, world had profound meaning and was the production of a 'reality' of trauma that had been denied—its understanding forbidden to me by the trauma itself. Because of this denial, the truth (reality) of the event continued to try and manifest itself in a 'psychotic' (i.e. symbolic) manner. I have briefly compared my case to two other published auto-biographical case studies, which indicated similar psychological processes. Finally, I have tried to explore a difficult area of psychosis, which is when people act in a manner different to their true being and can be threatening to themselves or others.

## Theory: Winnicott and Bollas

The works on psychosis of Winnicott [3-5] and Bollas [2,6] are utilised to analyse the autoethnographic data through theory. Their work on what happens to the self in psychosis provides understanding and meaning to my symptoms and shows how these are relevant to understanding other psychoses. What seems common to Winnicott's and Bollas's observations and understandings is the fact that, during a psychotic illness, the 'true self', also called the 'subject' or the 'I', is unable, or has serious difficulties, to exist and be.

Winnicott (1896-1971) was a highly esteemed psychoanalyst, paediatrician, and theorist. He developed the concepts of the 'false' self and the 'true' self, and of being a 'good enough mother' (caregiver). Winnicott recognised that a mother could only be good-enough, since the idea of a perfect environment is an impossibility of life. In his understanding, a child who has not experienced a good-enough early environment, i.e., a good-

enough mother or whoever takes her place, will be unable to develop a strong true self, but will instead be overwhelmed by anxieties. When the mother/caregiver fails to be 'good enough', the child develops a false self as a defence to cope with his/her reality. This false self is characteristically compliant, initially with the mother (or whoever is in her place) and will lack the ability to be spontaneous or creative.[3] Winnicott contends that we all need a false self to deal with life, i.e., in those social situations when we may need to conform or comply with external forces, yet the 'true' self would take over when the integrity or wellbeing of the subject is at stake.

In reading Winnicott's thinking on the true and false self, it appears to us that he viewed psychosis as characterised by the presence of a strong false self, which could overwhelm and overrun the true self. In addition, Winnicott [3] stated that "the more psychotic disorders are seen to be closely related to environmental factors" (p.10); in other words, the external realities and experiences of a person can induce psychotic episodes. As Alford [7] wrote: "Winnicott was interested in the way the very existence of the self is endangered by trauma: trauma at a young age, and later trauma that calls forth the false self in all of us" (p.264-5). If trauma leads to the false self and trauma is "closely related" to psychotic disorder, then the false self is strongly present in psychosis. It is our understanding that in psychosis the emergence of the true self is less likely to occur because it has been silenced or overshadowed by the false self.

The contemporary psychoanalyst Bollas (born 1943) is a widely read author and psychoanalyst. He has recently written of his analytic work with people who became psychotic, suggesting that if we can "Catch Them Before They Fall" (as per the title of his book), we can prevent the trauma of hospitalisation and explore, through dialogue, the events which could have triggered a breakdown. Bolla's views on schizophrenia are that it is a condition where the "I'—the speaker of being has departed".[2,p.76] He shows how difficult it is for the true self, in psychosis and particularly schizophrenia, to exist. In his recent book When the Sun Bursts: The Enigma of Schizophrenia' [2], he presents the case of Megan, one of his long-term patients: "At the time I noticed that only rarely did she use the first-person pronoun'l', and it would be uttered in a rather surprising way, as if she were ejecting it".[2,p.69] Megan herself is quoted as saying: "I don't think I have been here all these years, just images and words and feelings passing through my mind. My mind was here but I was not".[2,p.69] Here Bollas is suggesting that the true self (the I) was absent during the period of Megan's psychotic illness.

After years observing what happens when someone becomes psychotic, Bollas writes: "We witness a splitting of the self:

a subjective transformation giving birth to a psychotic self, emerging from the destruction of the former subject".[2,p.93] Using Winnicott's explanation of the true and false self, I have understood this as the consequence of the false self, becoming central, and the true self, being hidden and/or repressed. My specific perspective and experience would suggest that the imposed distortion of reality had established itself and thereby destroyed my 'truth' as an individual.

I have attempted to show what significance this understanding of the power of the false self has, by presenting my own case of what was diagnosed as paranoid schizophrenia. I have particularly focused on a trauma I went through over forty years ago with my knowledge and understanding of how this has been central to my developing psychosis, and how for the healing process to occur, it required my facing and understanding that trauma, as well as the more general understanding of myself and my past experiences. I only gradually discovered the details of the following narrative over many years: initially, I did not remember the event, and when I remembered something, the terrifying and intentional violence of my attacker remained hidden from my memory which hindered and delayed an understanding of my response at the time of the attack, and instigated the subsequent years of symbolic psychotic symptoms.

## Trauma and psychosis

In the past, the main focus in researching the causes of psychosis had been largely centred on finding hereditary/ genetic factors. These have not been found as of yet, and many researchers in that area, such as Murray [8], recognise that there are likely epigenetic factors of interaction between genes and negative life experiences. The research in the field of genetic vulnerability is continuing.

In more recent years, many authors such as Morrison [9], Morrison et al.[10], Garety et al.[11], Jansen et al.[12], Larkin and Read [13], Chapleau et al.[14], Bendall et al.[15], Knafo [16], and De Masi [17] have argued that trauma or traumatic experiences can lead to psychosis, rather than genetic factors.

Not all people who have experienced trauma will develop psychosis, yet there is no conclusive research finding that has explained why that is. Are there protective factors? Or would it depend on the severity of the trauma? While this research continues, I have presented how and why, to my understanding, my experience of trauma led to psychosis.

## Methodology

The methodology used for this paper, and my doctoral studies more broadly, is autoethnography, a recent development of qualitative methodologies. An early mention of it was found by Reed-Danahay [18] in an article by Karl Heider dated 1975. As a method, autoethnography interweaves personal, introspective accounts with academic research methods. It uses an analysis of the researcher's autoethnographic experience to shed light on the possibilities of other people's experience.

This method was chosen because it allowed me to analyse my subjective experience in an academic and scientific manner. Researching into the unconscious processes of other people (research participants) could have been potentially harmful. I could only use myself as subject. I am not aware of any other work exploring similar perspectives, consequently reflecting on my experience and my understanding developed over the years I could use myself in the depth I needed to explore how my psychosis formed. With this method I used psychoanalytic theory as a way of understanding my 'hidden from view' and/or repressed material. Using psychoanalytic-autoethnography is a recognised method; see for instance Garratt [19] and Midgley [20]. To read other autoethnographic works of people who experienced psychosis see Johnston [21], Fixen [22], Williams [23] and Casselle.[24]

I have tried to use my utmost honesty and integrity in doing this research, to allow the reader to be able to identify with the story narrated. I have remained self-critical and reflexive, with guidance and supervision throughout the research. These are also crucial aspects necessary for autoethnography.

Findings from this study cannot be generalised; transferability may be achieved by readers who can learn about themselves and others from an engagement with the work. Ellis [25], a key author in autobiographical methodologies, stated: "Our lives are particular, but they also are typical and generalizable, since we all participate in a limited number of cultures and institutions. We want to convey both in our stories" (p.751).

I have found in this way of working that I have gained insights out of an intensive analysis with an analytical psychologist (from the school of Karl Jung) for three years, followed by work with psychologists and psychiatrists, and many years of self-analysis. My intense work (three times a week) with the analytical psychologist gave me insight into my unconscious thoughts and associations. I learned to understand myself and my motivations. This three-year period of analysis, along with my studies and readings gave me the skills to introspectively continue my self-analysis.

I have had to utilise self-analysis over the years as professionals in the past were not interested or willing to support my desire to pursue the understanding of the trauma I had experienced. I have suspected that, in many cases, professionals thought my wish to explore my images of being raped were delusional. In more recent years I have worked with a clinical psychologist, who has helped me understand many of my symptoms, but this work with him could only occur after I had worked on my memories of the trauma and could articulate it more clearly. Through his careful attention to the details of my attack and subsequent psychotic experiences this has helped me reach my current level of mental well-being where I no longer experience the psychotic symptoms that have plagued me in the past. I have been able to make sense of my symptoms through the painful recalling of past events and working through their impact on my body and mind.

I started keeping a diary as soon as I could after the trauma as a way to try and process what was happening to me. Writing down my thoughts, feelings and what I understood them to mean helped me to cope, in part, with my struggle. I had a constant search trying to find the reason why I had suddenly become so unstable, confused, troubled, as I had been functioning and feeling well before. These diaries have contributed to my current doctoral research by recalling past ideations and allowing further reflection regarding their significance in light of theory and today's understanding. For example, in 1993, I wrote: "Those that are completely (I think) are also those that know. And those that know cannot say it." Here I recognise seemingly psychotic thinking that I now understand as indicating my feeling of not being my true self. My use of the words 'those that are' meant to convey my understanding then of being under the power of something, which today I explain as the false self being formed following the trauma. It was also a recognition of my not knowing what had happened, not knowing I had been raped. On the same day I further wrote: "It all feels very primordial. It is as if it is a primordial explanation of what reality is, 'magical". I could not understand reality anymore, everything had become strange and difficult. These perceptions were, at the time, very frightening to me.

The following narration, although coherent now in its account of the events, has taken many years of analysis to uncover the truth of what occurred.

#### The Trauma

I was walking with someone I considered a friend. Nowadays I would call him a friendly acquaintance. He started saying how people did not understand me. I didn't think this was particularly true, but it made me think he was caring towards me, and it gave me warm feelings of trust towards him. We were walking amongst rocks in an isolated place. As I had climbed on a higher rock, he grabbed my ankle from behind and pulled me to the ground below. I fell backwards onto the rocks from a height of about 80cm to 1.3m (I cannot clearly remember). The impact was violent; I was surprised I had not broken a limb and that I was still alive. Had I hit my head on one of the rocks

I could have died.

I did not feel pain, but that may have been due to the shock. I could not move for several moments as my body did not have any strength or coordination. I thought there was an explanation for my friend's behaviour but, as I finally was able to raise my head and look up, I saw him at a little distance looking at me with no intention of helping me. I realised then the gravity of the situation.

Several minutes later, when I finally managed to stand up and walk, I tried to walk away. I was still weak and unsteady on my feet. He prevented me from going. I started fighting him, but I soon realised that I stood no chance. He was much bigger and stronger. While we were fighting, he had an expression which, looking back on it now, seems bizarre: it was one of laughter and enjoyment, as if he was a superior male playing with a woman as a cat with a mouse. My anger welled up and, using the last bit of strength, I gave him a strong push, trying to take away that laughter. My thought was: 'You may kill me, but you are not going to laugh about it!'

As I thought this, the full awareness that I was about to die, and by a violent death, hit me; I started to be overwhelmed with fear and began to shake violently. He tried to reassure me by rubbing my arms. After a while he became guite agitated in reassuring me, as though he cared. This was utterly incongruous with my understanding of how someone intent on causing harm would feel towards his victim. His actions stopped me suddenly; they paralysed my emotion and my thought, and I painfully had to take into consideration that I might have been wrong in my understanding. My instinct of his destructive intentions did not want to listen, but the drive for survival and logic forced me to take this into consideration. I still did not give up on my not trusting him. For several minutes, this was followed by him withdrawing respectfully and me starting to feel reassured, and then him coming closer and my becoming afraid and shaking again. This continued for a long while.

I reached a point where I did not know what reality was. Was I facing death, or did I have a friend in front of me? Was there an explanation for his behaviour? I feared I was going mad; it felt like fear of total annihilation. I had to resolve the dilemma; my survival was at stake in that decision. It did not make sense that he would want to kill me. I then looked into his eyes trying to beg with my expression 'Can I trust you?' but I could not speak. His eyes showed anger initially, followed by what seemed to be his understanding of my silent question and he started nodding in reassurance. I capitulated and decided I had been wrong. As doubt still was in me, I forced myself to believe in him; I thought 'he is kind, like my father is kind', and projected onto him the image of kindness I had of my father.

As I accepted this 'distorted' reality, I was then overwhelmed by a sense of profound guilt, for 'I had accused an innocent man'.

When I completely calmed down, I thought things were going to be all right. He then took me by the hand and led me to the side to lie down. As this was happening, I gave up completely, I could not fight anymore, I was complying fully and unable to put any resistance of either thought or action.

I realised then that he wanted to have sexual intercourse. As he was putting me to the ground, in a hazy way, I thought: 'I am making love to a friend'. I didn't believe in the idea, but I had seen movies and read about it being a meaningful thing. As I thought this, I felt a strong pain in my heart, as if my heart was being wrenched from my chest.

I had for one moment, as he was coming closer, the image of him as he was in reality: an image of rape and violence. This disappeared immediately from consciousness, and it was replaced by guilt. My body could not participate in the act; I felt guilty for that, my mind was following the thoughts and meanings that had preceded the act, having forced myself to believe in him. As it finished, I was overwhelmed with retching motions, feeling sick at what had happened. My consciousness only thought of hiding it from him, for fear of offending 'such a kind friend'. I thought I had chosen the act, but I started chatting to him. I remember him having an expression on his face of ridiculing me.

I do not remember how I returned to the camp. I remember vaguely in the days that followed going around with my clothes soiled by the flow of menstrual blood and my not hiding that, not even the blood running down my legs. My attacker must have been in the camp in the following days, but I cannot recall his presence. The day he left with his brothers he called me to say good-bye and I waived back, not remembering what had happened. I met him once again a month or two later in a hotel in New Delhi and I remember saying to him that I could swim and did not need a life buoy. I am not sure what I meant; I think I meant something about my managing without help. It certainly was a strange thing to say. I did not see him anymore after that. I was told he was ill and I have had the fantasy since then that, maybe, from my odd conversation, he understood how he had driven me into madness and now he had become ill because of the guilt.

#### An analysis of the thought processes that occurred

It has become my understanding that his irrational behaviour is a form of psychological violence towards my emotions and my mind. Behind the conscious thought of 'making love to a friend', there was a deeper unconscious fear of him, but at the time, and for many years, I was not aware of this terror. My unconscious reasoning included the thought that 'I must do what he wants'. What I now know is that this fear had not gone

away. The impossibility of his innocence had not vanished. It had gone out of consciousness, but the fear was still there, driving the force of the guilty thoughts I had experienced when I 'decided' he was not harming me. By feeling guilty, I was complying with the meaning he was providing to the situation. It was as if he was saying he was innocent, and his entire psychological and physical violence was forcing me to accept his innocence, something that my true self, somewhere deep inside, knew wasn't real.

To accept such a distorted reality, I had to relinquish my mind, as I could not trust my mind to be able to know what was happening. It was as though I had ended up putting myself in the position of an infant trusting the adult to guide me. I had put my whole being in his hands, trusting him like a child.

Why did I do this? I had become unable to trust my mind by his incongruous act of seeming agitated in reassuring me, as if worried about me, and the following skirmish. His reassurance and then my fear and doubt had all compounded on me as psychological violence. The process of recognising the reality and impact of this event has occurred over many years, through self-analysis, psychoanalysis and core reading psychoanalytic texts on thinking processes and on psychosis. It has been only recently, with the help of my present psychologist, that I was able to understand that the rapist was unable to take responsibility for his actions. I now understand that, somewhere in his mind, he was justifying his actions.

Through exploring the events which led up to the attack, and his actions afterwards, I have enough evidence, from various emerging details in therapy, that enabled me to reflect that he indeed must have had some serious psychological problems. His very expression and behaviour at the time of the attack had something deranged about it. My mind had received these incongruous acts like a blow to the head, as if being hit; I was unable to think it through. My mind had become paralysed through his violent actions. My rational thinking had appeared to be faulty, and fear could do the rest.

I now know that, within that thought – that he was a kind man (like my father) – was an attempt to make sense of things and complying to him. Therefore, having sex was performing an act of compliance, as if by choice. But that wasn't my truth, although I continued to hold this false belief for many years after this incident. I was 'thinking' entirely contrary to my true being. No part of my true self, if conscious, would have accepted the act.

The guilt as the act started was a guilt that was driven by fear, a guilt aimed at survival and, of course, a guilt that was complying with his meaning, obeying to him. Different levels of thinking

were taking place, with the conscious thought consisting of guilt for having thought he was about to kill me. I now know that my body unable to participate was the only part of me that still knew the truth. Chatting to him at the end of the rape, I understood only many years later, was my trying to make sure he wouldn't still decide to kill me. Hidden underneath all that had happened, remained my fear that I could be killed at any moment.

From my psychological explorations of the traumatic event and its link to my psychosis, and through my autoethnographic doctoral work, it is now clear to me how I had become entirely split between an inner, unknown, unprocessed reality [26] of rape and trauma, and a conscious distortion of what had happened. Those familiar with Laing's work will be reminded of his notion of the 'Divided Self' [27] and his idea of what happens in schizophrenia. He postulated that, in schizophrenia, the person is given conflicting messages, the self becomes divided between these messages, and driven mad by the inability to resolve the dilemma. It has taken me over forty years to completely unravel the distortion and be able, now, to perceive the truth. The following section links the symbolic understandings of some of my dominant psychotic 'symptoms', gathered from my analysis and a review of the diaries I have kept for the past forty-six years.

# My delusions and my understanding of their explanations

During each period of my acute psychotic illness, part of my delusions consisted of believing I was the daughter of God. I now understand how this delusional belief provided compensatory elements to my feelings of being inferior, but in particular, it related to my efforts to make sense to myself of the act of having intercourse with this man as an act of kindness and self-sacrifice on my part. My mission to save humanity, which was part of my delusion, was a continuous meaning-making process, wherein I was trying to escape the overwhelming sense of guilt and make sense of my self-sacrifice. This meaning-making can be explained as the mind's search for truth, a seeking of the explanation that has gone wrong.

Following my strong Catholic upbringing, the words condemning the great 'prostitute' and several similar passages, for example in the book of Revelations, were impossible for me to read for years, as I was identifying with them. I experienced a double guilt: the one caused by the distortion that had me believe the aggressor was 'innocent', and hence the guilt I felt for mistrusting him, and the real me who had thought against my own principles (even as my body remained paralyzed by what I now know to have been unconscious terror). While I was

not conscious of any aspect of such guilt, it still affected me powerfully. Its main driving force were fear and the distortion that accompanied it. I have recognised that my moral principles, stemming from my upbringing and the religious and moral education I had received, played a part in my guilt. However, I do not think the events of my early childhood were the cause of my psychosis, and it is beyond the scope of this paper to explore those aspects further.

Amongst the hallucinations I experienced, there were images of: someone raping me; abusive sexual images; someone forcing me to think what he wanted or he would punish me; someone trying to possess me, often beside me in bed. I have come to understand that the reason I saw such images was because my mind was communicating to me the reality of the event in the only way it could, through images and symbols since I had never processed or digested what had occurred. In this regard, Bion [26] had explored how the mind can be unable to process traumatic events, and his own experience during WWI taught him how the mind can struggle in this regard. In his analysis of Bion's life and in particular his war experience, Brown [28] describes how being bombarded "by sensory fragments reduced Bion to vomiting in order to evacuate the sensory overload and must have also taught him, in retrospect, how the desperate mind madly discharges experience that cannot be abstracted" (p.1200).

I would experience my hallucinations most of the time, especially if I was under stress or tired. I understand them to be the constant attempt of my psyche to try and find my truth, which I needed in order to heal. During periods of my psychosis, I had feelings of anger towards my father for having created me, as if he had made me to be as he wanted instead of letting me be myself. I felt compelled to think and act through an imposed will. I now know these feelings were the outcome of the internalised obedience and sense of inner guilt that the trauma had formed in me. At the same time, I loved my father, and it was painful to experience these emotions. I eventually saw how these images were once again my mind trying to bring in reality by finding a 'culprit'. The culprit I had symbolically chosen (my father) was a safe one and I had indeed projected the image of him into the aggressor at the time. In order to be able to believe the aggressor had no ill intentions, I had consciously thought he was kind like my father was kind. After all, that is how he had been till then. Fixed in my psyche was a thought process, once again, not understood in reality. As the rapist with the trauma had 'created' a 'false me', a false self, I then perceived myself as having been created by my father. In these images and false beliefs (hallucinations) was the truth attempting to find expression.

My paranoid perceptions were usually ideas of people talking about me and making derogatory comments. I would hear the odd words being spoken or see people laughing and I would think they were talking derisively or laughing about me. I now see that in reality there were neither such conversation happening nor such laughter directed at me. At the time, I would have been too distressed and fearful to be able to fully attend to the conversation. Today, I understand I outwardly projected guilt onto others; I did not know its real origin hence it existed outside of me. During a psychotic episode, it was as if I was talking to and was spoken to by 'God'. In reality, the god in my delusion was the internalised rapist who existed as a form of supreme power in me. In later years, my recognising and defying such cruel god was the start, perhaps, of the challenge to the abuser's power over my mind.

## Two autobiographical accounts of psychosis

As I had chosen an autoethnographic approach to my research into the link between trauma and psychosis, I identified two published accounts by authors who had written of their psychotic illness and recovery. I have compared these accounts with my own understandings, and they have extended my thinking into the possible causes of psychosis and the journey to recovery.

In his memoirs, Judge Schreber [29] refers to the idea of a 'soul murder'. Schreber (1842-1911) had been appointed as the chief justice of the supreme court of the state of Saxony (Germany) before developing his psychosis. In his book, he described his mental illness, his delusional ideas and his hospitalisations and treatments. In certain passages, Schreber spoke of thinking he had been a victim of this 'soul murder'. I find this description very apposite for what happened to me. I was murdered in my core being by being forced to deny my truth.

There is not a conclusive explanation of Schreber's psychosis, although many people over the years, including Freud [30] have investigated it. I interpret his use of the words 'soul murder' as his unprocessed perception of his inner experience. Maybe Schreber, like myself, was denied expression of his true self and had been forced to internalise and accept the will of another.

Similarly, in her autobiography 'The Words to Say It', Marie Cardinal [31] describes a 'thing' that controlled her in her psychosis. We find that this thing was her internalisation of her mother, and her mother's attitude towards her. It seems to me that this is akin to one's own self being taken over, the 'soul murdered'.

In terms of my own psychology before the trauma, which I have had to face to fully understand my reactions and my thinking, I

recognised that I had to deal with my Catholic upbringing with its religious beliefs about sexuality and the impact those beliefs had on me in response to the trauma. Equally, I had to resolve ambivalent feelings towards my mother and idealisation of my father. I had to integrate my understanding and experience of both my parents, face my anger at their imperfections and reach an acceptance of their imperfect humanity. Both my religious education and my parental upbringing contributed to the formation of my personality, by giving me not only moral principles but also a sense of self and a way into life. This process enabled me to then look at the trauma, and helped me distinguish between elements formed out of my early life and elements pertaining to the direct consequence of the violence. This is an important distinction to make because each aspect of my life has had an impact on who I am and how I think. To be able to distinguish the consequences specific to the trauma, I needed to understand what stemmed from my upbringing and other aspects of my life; only then could I more clearly see and understand distortions in my thought. I could then focus on the entire psychological impact of the trauma.

### The fear of and about psychosis

I now wish to address a particular area that is a cause of great anxiety and fear about psychosis; that is, the area when the behaviour of a psychotic person is contrary to their 'normal', 'true' being. I hope that by considering the underlying causes of the irrational behaviour of many people who become psychotic, it will eventually lead to a better understanding of why and how extreme forms of psychosis can even lead to (rare) acts of aggression and even to murder. I can only use my own example, and I do not claim to be able to fully explain other people's experiences, especially considering that each of us is unique and therefore each case needs to be considered in light of its individual history and psychology.

I have explained and explored above how I had been forced to deny my being, my mind, and accept the distorted thinking that the aggressor's behaviour had forced into me. I began to think as though I was possessed by him and under his complete power (it is worth noting how this fits with the ancient view of possession by spirits, which we now explain as psychosis). The fear of death, the psychological violence, and the inability to trust my own mind all combined into a conviction that my entire body and mind was under his control. Consequently, my thinking and emotions had adjusted to this distortion of reality, as a mind will constantly try to make sense of things. This meant that I believed myself to have willingly taken part in the sexual act. I believed somehow that I had loving feelings towards him (a false and extremely painful distortion, which took me a long time to overcome). I therefore believed myself

to be a wanton sexual being. As mentioned earlier, I felt I had been created by the experience; a new false 'me' was formed in that distortion.

In the following years I found myself in several circumstances having sexual encounters with people which did not make sense to me. They were against my feminist principles, and I can only describe them as nightmare situations. One could argue that I had lost my self-esteem and that this was the consequence, which is also true. What I was eventually able to notice, however, was that each of these occasions had been triggered by a man's, sometimes even slightly, aggressive behaviour. If the man concerned had asked me for my consent, I would have been able to refuse. What was happening, I understand now, was that my fear was taking over: as a defence, the false self, created/formed the day of the trauma, was activated. I was using what I had learned that day about what I had to be to make it through a dangerous situation. One can imagine the consequences in terms of confusion with regards to my identity, my sense of guilt for such behaviour and the fear becoming greater including fear of myself, of who I had become: someone whose behaviour I could not understand anymore and who had become immoral to my own eyes.

Freud's [32] concept of the compulsion to repeat has helped me in analysing these complex and contradictory emotions and behaviours. Freud postulated the idea of some people having a compulsion to repeat and re-enact a previous trauma as an attempt to process and resolve it. This notion of compulsion as a form of communication was explored further by Betty Joseph in her work on repetition compulsion. Joseph [33] wrote about the symptom of repetition compulsion, initially identified by Freud in the repetitive play that children used to 'work over in the mind an overpowering experience so as to make oneself master of it' (p. 17). Joseph stated that the enactment of the compulsion cannot bring resolution to the individual as it carries 'a particular balance between destructiveness and love, and how the very nature of this balance in itself can lead to no progress, but only to a blind compulsion to repeat' (p. 17).[see also 33, p.254]

These contradictions and agonies were within my own mind. How could I have acted so differently from what I had considered right? I did become quite confused about what was right or wrong; I didn't seem to be able to stay in one frame of mind. I would go from trying to cleanse my spirit and hold on to my thinking, to those moments when my mind would think differently, and I would act differently. When the distortion took over, I found that I had lost touch with my more sensible mind: my thinking was taken over by the false self. Of course, where sexuality is concerned, society gives different messages

and values to what is appropriate and what isn't. I think, regardless of what is or isn't moral, those acts were immoral to me because they were not my choice but, rather, the result of an internalised violence. My inner reality about each of those encounters was of being raped again.

What I would like to leave as thoughts for the reader and academic community to consider are, firstly, an understanding that the mind can lose its lucidity, its grip on reality, because of having been taken over due to the abuse by another. My understanding is of the possession by the other that takes place as opposed to the more unconscious feelings of guilt, inadequacy, worthlessness etc. that occur in neurosis. Secondly, I wonder to which extent the mind can lose such lucidity. Knowing myself to have acted entirely against my true being, how much can someone else be driven to such extremes? I suspect only an entire life history could unravel the whole puzzle. I am not trying to justify people's behaviour, and I do not know if it is possible to lose one's mind to the point of not distinguishing what murdering means, but I do certainly think that it becomes very difficult to reason with one's mind when one is the victim of trauma, as I had been, and experiencing it under the power of another's mind.

In his Clinical Diary [34], writing about his patients B (Alice Lowell) and R.N. (Elisabeth Severn), Ferenczi described how, since their trauma, they were acting from the imposition of an 'alien will'.[34,p.17] He died before completing his work, but he seemed to be describing the same psychological effects, as that which happened to me, on these two women following their serious experiences of childhood trauma. My co-author (LN) and I argue that this 'alien will' may be, at least in part, the cause of the self-directed harm, internalised or externalised violence, and out of character behaviour people with psychosis may exhibit.

#### Conclusion

I have attempted to show how, in my case of psychosis, the psychotic symptoms were an indication of a true self that had been forced into hiding, repressed by the experience of extreme terror and psychological violence, and how a false self became a dominant form of reality in my life. It hasn't been possible to describe and explore my previous vulnerabilities, which perhaps made it possible for such a distortion to occur. However, I am certain that the main reason for the distortion lies in the trauma itself and the drive to survive. A whole case study would consider the way one reacts to a situation, but while I recognise that I did have some vulnerabilities, I do not think I had more than the average person. My recovery has required me to explore and face all of my past, not just the trauma. I could not deal with the trauma unless I was clear what

part my own psychology had played in it, how my upbringing and past experiences were making me react to the trauma.

I think the description Bollas [2] uses regarding the 'split' in psychosis is the most useful in explaining the process I have uncovered. He states that '[w]e witness a splitting of the self: a subjective transformation giving birth to a psychotic self, emerging from the destruction of the former subject". [2,p.93] This statement has more meaning now and perhaps I have given a bit more understanding of why this can happen.

Similarly, Winnicott's explanation of the false self in psychosis [3] is an evident reality in my schizophrenia and, I think to some extent, in all psychoses, and I suggest that this can be particularly the case as a consequence of trauma. What we define as trauma can have many faces and explanations, and the purpose of this paper is to draw attention to the link between a terrifying trauma with an imposed false understanding and its effect on person's mind, their sense of reality and act to diminish or entirely repress their true self.

As I progressed in understanding and integrated what had happened to me, I have gradually resolved my psychotic symptoms. I have not had any psychotic symptoms for over two years, and I only have some lingering remaining feelings of guilt on which I am currently working and hoping to resolve. I remain with some remnants of fear towards men in general, that I suspect I will never be able to entirely overcome.

Alongside the recent movement of Mad Studies that started at Toronto Metropolitan and York Universities in Canada, this paper aims to recognise the expertise that stems from lived experiences of mental distress, and it works to challenge the discrimination that results from diagnoses of 'mental illness'. We hope we have succeeded in showing that psychosis is not madness, but that it is or can be a psychological response to one's traumatic experiences. More is needed to understand the reason why some people become psychotic, and we believe that their 'madness' will be always revealed not to be so. If psychosis is not madness, then the question remains: does madness really exist?

## References

1.Leader, D. What is madness? Milton Keynes: Penguin Books. 2012

2.Bollas, C. When the sun bursts – The enigma of schizophrenia. New Haven – London: Yale University Press. 2015

3.Winnicott, D.W. The maturational processes and the facilitating environment. London. The Hogarth Press and the Institute of Psychoanalysis. 1965

4.Winnicott, D.W. Collected Papers – Through Paediatrics to Psycho-analysis. London and Aylesbury: Tavistock Publications. 1958

5.Winnicott, D.W. Fear of breakdown. International Review of Psychoanalysis.1, pp.103-7. 1974

6.Bollas, C. Catch them before they fall. London: Routledge. 2013

7.Alford, C.F. Winnicott and Trauma – Psychoanalysis, Culture & Society. 18, pp. 259-76. 2013.

8.Murray, R. at ISPS (International Society for Psychological and Social Approaches to Psychosis) International Conference. Liverpool, 7-9 September 2016.

9.Morrison, A.P. The interpretation of intrusions in psychosis: an integrative cognitive approach to hallucinations and delusions. Behavioural and Cognitive Psychotherapy. 29: pp. 257-76. 2001.

10.Morrison, A.P., Frame, L. and Larkin, W. Relationship between trauma and psychosis: A review and integration. British Journal of Clinical Psychology. 42: pp. 331-53. 2003.

11.Garety, P.A., Kuipers, E., Freemn, D., Pebbington, P.E., A cognitive model of the positive symptoms of psychosis. Psychological Medicine. 31: pp. 189-95. 2001.

12.Janssen, I., Crabbendam, L., Bak, M. et al., Childhood abuse as a risk factor for psychotic experience. Acta Psychiatr Scand. 109: pp. 38-45. 2004.

13.Larkin, W. and Read, J. Childhood trauma and psychosis: Evidence, Pathways and Implications. J. Postgrad Med. 54: pp. 284.90. 2008.

14.Chapleau, K. M., Bell, M.D. and Lisaker, P.H. The relationship between post-traumatic symptoms severity and object relations deficits in persons with schizophrenia. British Journal of Clinical Psychology. 1-13 (online) DOI: 10.1111/bjc.12033. 2013.

15.Bendall, S., Jackson, H.J. and Hulbert, C.A. Childhood trauma and psychosis: Review of the evidence and directions for psychological interventions. Australian Psychologist. 45 (4): pp. 299-306. 2010.

16.Knafo, D. Going blind to see: The Psychoanalytic Treatment of trauma, regression, and psychosis. American Journal of Psychotherapy. 70 (1): p.80. 2016

17.De Masi, F. Psychosis and analytic therapy: A complex relationship. The International Journal of Psychoanalysis. Vol. 101, Issue 1, pp. 152-68. 2020

18. Reed-Danahay, D.E. Introduction, in Reed-Danahay D.E. (eds)

Autoethnography. Rewriting the Self and the Social. Oxford; Berg pp. 1-17. 1997

19.Garratt, D. Psychoanalytic-Autoethnography: Troubling Natural Bodybuilding. Qualitative Inquiry. 21(4), 343-53. 2015

20.Midgley, N. 'The inseparable bond between cure and research': clinical case study as a method of psychoanalytic inquiry. Journal of Child Psychotherapy. 32(2), pp.122-47. 2006

21.Johnston, M.S. Through Madness and Back Again: An Autoethnography of Psychosis. Journal of Autoethnography. 1(2):137-155. 2020

22.Fixen, A. 'Communities in Crisis': A Autoethnography of Psychosis Under Lockdown. Qualitative Health Research. Vol. 3(12) 2340-2350. 2021.

23. Williams, S. Recovering from Psychosis. Empirical Evidence and Lived Experience. London: Routledge. 2015

24.Casselle, G. Gayle's autoethnography and academic achievements despite having a schizoaffective disorder. Conference Publication. https://rune.une.edu.au/web/handle/1959.11/5422.2009.

25.Bochner, A. and Ellis, C. Autoethnography, personal narrative, reflexivity. Researcher as subject. In Denzin, N.K., Lincoln, Y.S. (eds). Handbook of Qualitative Research 2nd edn. Thousand Oaks, London, New Delhi: Sage Pub. pp. 733-68. 2000.

26.Bion, W.R. Learning from experience. London: H. Karnac (Books) Ltd. 1991

27.Laing, R.D. The Divided Self. London: Penguin Books. 1990

28.Brown, L.J. Bion's discovery of alpha function: Thinking under fire on the battlefield and in the consulting room. The Interntional Journal of Psychoanalysis. 93. pp. 1191-214. 2012.

29.Schreber, D.P. Memoirs of my Nervous Illness. New York: Review Books. 2000

30.Freud, S. The Schreber Case.London: Penguin. 2002(1911)

31. Cardinal, M. The words to say it. London: Pan Books Ltd. 1984

32.Freud, S. Beyond the Pleasure Principle. In J.Strachey (Ed.) The Standard Edition of the Complete Psychological Works of Sigmund Freud (pp.7-64). London: Hogarth Press and the Institute of Psycho-Analysis. 1955

33.Joseph, B. An aspect of the repetition compulsion. Psychic equilibrium and psychic change. London: Routledge 1989. In Nicholls, L. "Touching the void". Mountains as transitional objects: Climbing as a defense against anxiety. Psychodynamic Practice. 14:3. pp. 249-62. 2008.

34.Ferenczi, S. The Clinical Diary of Sándor Ferenczi. J. Dupont (ed.), M. Balint and N.Z. Jackson (trans.), Cambridge, MA: Harvard University Press. 1932 (1988)

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