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# Ontological Insecurity and Psychic Suffering: A Contrapuntal Reading of R. D. Laing's Theory [1960 – 1970] in the Neoliberal Landscape

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For Jazz. We did it.

## Abstract

We live in a time in which 'mental health' problems have been described as the 'epidemic' of gravest concern. The incidence of 'mental health' problems is increasing year-on-year, yet we remain fixed on one course of action with a psychopharmacology trajectory of understanding and treatment; this being the basis of our psychiatric system and the default medical encounter, it too readily insists upon all forms of psychic suffering being reduced to chemical imbalances within the brain.

It is against this backdrop that I introduce the potential and necessity for a return to the theory of R.D. Laing. Laing was a psychiatrist whose most prominent mark was made in the 1960s. With an unwavering commitment to establish more humane treatment for those diagnosed 'schizophrenic', he developed a philosophical method of enquiry grounded in existential-phenomenology. Through this methodological lens, Laing argued that 'intelligibility' of experience could be revealed within even the most psychotic of patients. It is only with intelligibility that a true knowledge of persons can be gained, and help given. Laing provides us with a theory to challenge the all-compassing dominance that psychiatry wields upon the self, allowing us to consider how psychiatric discourse affects society beyond diagnosis, and think differently about what constitutes 'mental illness' and diagnosis.

This thesis clarifies and develops Laing's theory from 1960 to 1970, offering a contrasting reading to the modular format frequently represented within secondary sources and producing instead a unified framework. Emphasising and reworking the concept of 'ontological insecurity' as a logical, but painful, existential response to dysfunctional interpersonal dynamics within our worldly immersion. Supported further by his lesser appreciated concept of 'self-consciousness', a political application is developed that highlights the potential value of Laing's theory as a means of understanding our current 'mental health' situation. In the process of conducting this re-evaluation, scientism is drawn into focus. Extending beyond the clinical encounter and placed within the interpersonal dynamics of everyday existence, it is proposed that western culture is increasingly allowing itself to be defined within a scientific paradigm that incurs a collective existential degradation. This is a significant source for ontological insecurity and thus contributes to the experience of psychic suffering.

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## Part 1. Introduction

R.D. Laing's theory was developed in the 1960s: a time of intensity and change within the political and medical world. Politically, people were marching for a more equal society. In contrast, psychiatry was increasingly developing and implementing medical 'treatments' that denied basic civil liberties. Laing brought these two worlds together. Armed with an existential-phenomenological methodology, he aimed to humanise psychiatric treatment and establish respect for those caught in its grasp.

Whilst some would like to disregard Laing as a relic of a time that no longer holds relevance, the evidence suggests that the trajectory of politics and psychiatry, the conditions that brought him to prominence, have only intensified. Even more worryingly, for all the technological and biochemical development, 'mental illness' diagnoses are higher than ever: an 'epidemic' of grave concern within contemporary culture. The question posed in this research is whether Laing's theory is capable of traversing this timeline and offering much needed insight into this dire situation.

This contrapuntal reading of R.D. Laing analyses his publications between 1960 – 1970 through a 21<sup>st</sup> century lens and within a contemporary context.

Contrapuntal reading is thus theorized as an act of (re)reading, of making space for narratives and subjectivities that have no room in canonical texts specifically around lines of supposed historical fact. (Pande, 2018, p. 106)

Contrapuntal readings are more familiar in works of colonialism and race; the familiarity of this application lies with Edward Said (2003). This research intends to (re)read Laing's theory which was developed in the 1960s and make space for it to be considered within a 21<sup>st</sup> century, neoliberal, western context.

Laing's theory was contentious when it arrived, and this has amplified since. As is evident in many secondary sources, efforts are seemingly committed to justify the value of either side of the polemic: Laing as a renegade of a bygone era or a revolutionary overlooked to our detriment. The consequence of this argument is that the very essence of his theory becomes lost; furthermore, his theory becomes static, framed within the influence of longstanding interpretations that preserve his perceived irrelevance.

This thesis will be focussed through a concept analysis methodology, undertaking a close reading of Laing's written work, supported where necessary with reference to influences he directly acknowledges. Resulting from the voluminous readings of Laing, from different positions and agendas, multiple theoretical structures and readings have been imposed on Laing's theory. The deconstruction of each concept may appear descriptive, but each chapter involves a stripping away of these multiple readings, a process that does not intend to dismiss these multifarious readings, but rather consider their value afresh with direct reference to Laing's original texts. Through this process of excavation, I intend to reveal a philosophical core to Laing's theory, enabling an argument to be reached for a political causation of ontological insecurity. Many of the chapters and concepts developed in this process operate as independent frameworks that can be drawn into future discussions to consider an application of specific elements of Laing's theory.

The ultimate destination of this thesis is to assemble these concepts within a totality, demonstrating their capacity to be read as a singular, unified, Laingian framework. Applied in contrast to current canonical texts, exemplified by the psychiatric paradigm, and the cultural narratives that this medical discourse helps inform, a space will be created for a Laingian framework to be considered. This will be focussed toward appreciating a political cause of ontological insecurity, considering how this may offer insight into the current 'mental health' situation. Applying Laing's theory toward causation incurs an emphasis on, what can be simplistically represented at this early stage as, individual components of the inner or outer world. This approach facilitates a thorough analysis of ontological insecurity and its cause; however, it must not detract from an appreciation for the structural interrelation and balance of inner/outer experiences for a sense of ontologically security to be achieved.

The terms of ontological insecurity and psychic suffering contained within the title will be unpacked as this research develops but require positioning from the outset to ensure a base understanding.

Ontological insecurity is a concept developed by Laing, defined as a description of experience and this stands in opposition to a diagnosis of 'illness'. Ontological insecurity is an existential position whereby 'the ordinary circumstances of living threaten his low threshold of security' (Laing, 1960, p. 42). The descriptive quality of this definition was grounded in the social intelligibility Laing's research revealed from three locations: the family, the clinical, and the political. Working across these locations, this procedure is frequently represented in secondary sources in a fragmented and atomised format. However, this

thesis will propose justification for the process underpinning ontological insecurity to be structured into a totalising meta-Laingian theory.

With specific attention to the development of *process* within this theory, the contentious proposition of *cause* is discussed. This is highly controversial because Laing rejected the insinuation that his theory dealt with aetiology or causation of 'mental illness' (Mullan, 1995). However, this thesis will offer that his protestations do not negate a process of causation that incurs psychic suffering, understood as an experiential state rather than a psychiatric disorder. This plays directly into Laing's theory of interpersonal dynamics, with misaligned communication patterns between self and other, creating 'spirals' and 'knots' within the construction of phantasy. The phantasy construct will be discussed later as *the content of the ego* (see Chapter 7, *Self-Formation: Ego*). However, the proposition for a process of formation of spirals and knots enables a causal link between ontological insecurity and the experience of psychic suffering to provide insight into the current increasing incidence of 'mental illness' diagnosis.

Laing offers a critique of the 'mental illness' model, but crucially without dismissing the notion that 'mental illness' can exist. Rather, it is a critique of the over-representation of illness diagnosis within western society, when in reality the experience of the individual sufferer is often more accurately a reflection of ontological insecurity. Developing the link between psychic suffering and ontological insecurity contributes further to a unique interpretation of Laing's theory and strengthens the potential for application in contemporary culture.

Although providing a theory to resist the authority and dominance of the terms 'mental illness' and 'mental health' within contemporary culture, these terms are currently the most established point of reference within everyday language. 'Mental illness' (and 'mental disorder') at its limit is understood herein broadly as a diagnosis identifying a defective organism, a medical / psychiatric abnormality within an individual, this being represented most strongly as a chemical imbalance within the brain. 'Mental health' is a broader term which can be used to describe a positive state of mind, or the field that encapsulates both positive ('mental health') and negative ('mental illness') states. Laing's theory operates within this field, but this thesis tries to pull away from this discourse that ultimately leads to an understanding of the self as organism, but an inevitable slippage occurs when needing to position what I describe as 'psychic suffering' within a contemporary context. For these reasons, each of these terms will be encapsulated within inverted commas ('mental illness' / 'mental health') to indicate their contested status; the preferred terminology here will be that of 'psychic suffering'.

A significant limitation is acknowledged in that Laing commits no attention to the analysis of power relations, thus incurring blind spots with regard to race, class, gender, sexuality etc. This thesis briefly engages with gender and class, but because its concern is with Laing's general philosophical framework and the possibility of a philosophically-driven approach to psychic suffering, it does not deal in detail with his failure to consider the central identity concerns that were gradually emerging in the period under consideration. Without dismissing the implications of these blind spots, they fall outside Laing's philosophical focus which was applied to the constant existential forces within the everyday that inhibit our existence, or more accurately, cause ontological insecurity. This ontological focus is maintained in this thesis with recognition of its limitation and the potential for future research to address this with the attention it deserves.

As we now move into Part 1, *Introduction*, several aspects will be drawn into focus to provide a contextual backdrop for this entire thesis. This section will outline the methodological approach to this research, it will explore the contemporary 'mental health' system with reference to Laing's contrasting theoretic approach, a definition and description of modern psychiatry will be discussed to position the rationale underpinning Laing's theory, and will highlight some of the primary obstacles that serve to detract from his contemporary consideration.

# 1. Methodology

## Research Aim:

The aim of this research is to a) re-evaluate the theory of R.D. Laing, and b) apply the concepts identified to contemporary culture. Long-standing interpretations continue to define Laing's theory and their accuracy relies upon a continuation of themes sustained in secondary sources. This thesis will return to Laing's theory as the bedrock to deconstruct and analyse concepts at the point of origin before reforming them as a totalising theory. The application of this new interpretation will be focussed upon the 'mental health' situation in contemporary culture.

Through this reading of Laing's theory, (re)applied to current existence, it will be argued that the discourse by which we now understand ourselves and others is amplifying ontological insecurity thus lowering our resilience to cope with the hazards associated with everyday existence; this is reflected in the increasing incidence of 'mental illness' diagnosis.

## Methodological Design:

A methodology is the lens through which the totality of all research is focused; developing a clear and structurally sound methodological lens enables a thorough re-evaluation of Laing's theory, ensuring loyalty to his theoretical intent, justifying reliability and validity for potentially all findings, including those that may have been overlooked, obscured, misplaced or forgotten. As will be shown, contemporary representations of Laing are heavily influenced by longstanding secondary sources and criticisms of Laing's theoretical vagueness. A strong methodology is vital for understanding Laing's intentions and exploring how the theory can be applied to our current situation.

Many accounts of Laing's theory reproduce major concepts as independent and isolated structural elements. The pervasiveness of this atomised representation, I must admit, (mis)shaped my own interpretation of Laing for a sustained period. Following a chronological approach, I was drawn to *The Divided Self* with a broad interest in what I initially determined was 'mental health'; this was followed by *Sanity, Madness and the Family*, and rounded off with *The Politics of Experience*. These three books are widely recommended as the backbone to Laing's theory: a psychiatric encounter (*Clinical*), the family-nexus (*Familial*)

and a political context (*Political*). These appeared as three sites of investigation whereby Laing's methodology is applied and his findings organised.

At this point, I started to engage with secondary texts, many of which utilised Siegler et al.'s (1969) 'models of madness' framework: a universal framework detailing seven different approaches to the analysis of schizophrenia. Increasingly, these locational characteristics, the primary characteristics I had identified within Laing's theory, not only started to reveal a more definitive atomised structure adopted by previous writers, but the boundaries of these contexts became accentuated and reinforced as individual theoretical frameworks. My initial identification of three locational characteristics was being absorbed and concretised into a modular structure that reverberated throughout secondary sources with varying opacity, the clinical, familial and political finding a prepared and well-established home within the 'models of madness' within the conspiratorial, psychoanalytic, and psychedelic models respectively. The question which began to emerge was whether this absorption of ideas was through compatibility or the seduction of perceived authority? Either way, the atomised format, its rigid boundaries and the belief that each location then provides a further demarcation for an application of separate theories (including different theories of ontological insecurity), started to dominate and define my own analytic framework. To what extent had others followed this momentum, contributing to its perceived authority? Furthermore, were other theories equally as pervasive in constructing Laing's theory?

### Philosophical Analysis

Philosophical analysis is also known under the term 'conceptual analysis' and this may be a more useful description for the intent underpinning its application in this research.

'Conceptual analysis' is frequently used within medical research as a means of ensuring dense theory translates into accurate practice. Complex, theory-laden concepts are deconstructed, ensuring each of the compositional parts is identified, clarified and their implementation as a whole is understood and therefore executed correctly (Dominguez-Rué, 2019).

The method of conceptual analysis tends to approach [...] a problem by breaking down the key concepts pertaining to the problem and seeing how they interact.  
(Drake, 2018, p. 109)

Consideration of Laing's theory is hindered by several significant 'problems' which are perceived to exist within the theoretical structure he produces during his first stage of publishing. The importance of these 'problems', of which an accusation of theoretical contradiction is a main contributor, rests frequently on an unquestioned assumption of the reliability of established secondary sources, rather than Laing's own words. This is something that caused me concern.

In response to this concern, this thesis conducts a concept analysis of Laing's theory, focussing on his written work foremost, supported where necessary with reference to his philosophic influences, and carefully extracting the analytic detail developed in secondary sources without automatically accepting their wider structural implications. The aim is to develop an accurate representation of Laing's theory, reflecting the structure he intended, and interacting in a structure he designed, rather than follow representations that have established themselves to such an extent they are maintained in secondary sources without critical enquiry as to their origin or accuracy.

My research is restricted to Laing's written, published work between 1960 – 1970. This period will be referred to as 'Laing's first phase of publishing' and is chosen due to the thematic connectedness of each text. This period produced a series of highly interrelated texts, each of which contributes to the development of a theory that extends through the individual, into the family-nexus, and beyond into the political realm, a trajectory of thought that inevitably implicates psychiatric services.

Each chapter will analyse different concepts present within this first phase, extracting information from all relevant texts. Highlighting the specific concepts which play a substantive role in his theoretical framework, each concept will be deconstructed through a philosophical lens. Secondary sources provide a further valuable source of insight but will be included with caution ensuring that their value is warranted with a fresh critical evaluation.

Through this close reading of Laing and his influences, a master principle is argued that each of these components work cohesively, interacting as a totalising framework.

This totalising framework, reflected most profoundly through the concept of 'ontological insecurity', will be drawn into a political context, amplifying the contrapuntal reading of Laing's theory within contemporary culture and considering the potential of his theory to add value. The notion of the political is used in a Laingian sense, which will be discussed in detail

but can be positioned from the outset as the potential for a macro application of theory: a widening focus that encapsulates society and culture.

This thesis will build toward the claim that Laing develops a theory that reveals a primary cause of psychic suffering related to our politically contextualised existence. It will be argued that the discourse by which we now understand ourselves and others is amplifying ontological insecurity thus lowering our resilience to cope with the hazards associated with everyday existence as reflected in the increasing incidence of 'mental health' diagnosis.

#### Background and Rationale for this design:

Laing remained loyal to the capability of philosophy to gain the truest form of knowledge into all questions about what it means to be a person. This thesis echoes that premise, continuing with philosophical enquiry as methodology. This is not continued out of nostalgia for Laing's intentions, but in recognition that a concept analysis complements Laing's methodology. This will be to an advantage as each of the concepts are drawn together in application to a contemporary context, ensuring continuity and compatibility as Laing's own theory and the methodology of this thesis work together for consideration of a contemporary application.

## Structure of the Thesis

### *Part 1: Introduction*

Overview of the main theme to be discussed and developed throughout this thesis.

#### *Chapter 1. Methodology*

The outline, methodological design, philosophical analysis and rationale for this methodological design are detailed, providing the lens by which this research will be focussed in order to ensure the greatest clarity and accuracy of findings.

#### *Chapter 2. Why Now?*

Establishing the rationale behind this research, this chapter identifies the current need for new and innovative ways to approach 'mental health' in response to the escalating incidence of 'mental illness' diagnosis. This introduction places the potential for Laing within a contemporary medical context and also gestures towards the barriers that impede such consideration.

#### *Chapter 3. The Dividing Character*

Creating a division between his personal and written persona, Ronnie and Laing respectively, the contribution of Laing's personality (Ronnie) to the mythology is explored. Several primary controversies exist within the narrative of Laing's career that continue to present a significant barrier to his relevance, both then and now. It is argued that these prominent controversies exist beyond the confines of his written word. Through these critiques and controversies, the intended focus applied to his writings is refined, justifying a research parameter centred on written publications only between 1960 – 1970, *The Divided Self* to *Knots*, respectively.

#### *Chapter 4. Laing, Psychiatry and Resistance*

Laing positioned his theory against the prevailing discourse of psychiatry. In this chapter we contextualise the rationale and value of this position. Four contexts are discussed: a history of modern psychiatry, voices of resistance in Laing's era,

modern psychiatry post-Laing, and finally, the potential for Laing within the service-user movement.

## *Part 2: The Return to Philosophy*

Falling within the primary parameter of existentialism, Laing's methodology embraces the totality of experience. In Part 2, this methodological approach is deconstructed into two components: an existential-phenomenological methodology, and a theory of self-formation. Although presented in a structure that is not contained within his writing, this reinterpretation and alternative representation does not distort the tenets of Laing's theory; rather, it enables finer details of the mechanisms and operation of process to be identified building a more substantial Laingian methodological framework. It is from the foundation built in Part 2 that the contexts of Laing's research are re-evaluated in relation to the political problem of 'mental illness', offering greater insights from the intelligibility he gained.

### *Chapter 5. A Laingian Methodology*

This chapter unpicks and outlines a clear existential-phenomenological framework that underpins the entirety of Laing's work. A definitive methodology for approaching the self will be achieved through deconstructing and evaluating the unique contribution of both existentialism and phenomenology, before reassembling them into their collaborative and singular form, demonstrating their continuing structural presence throughout Laing's theory.

### *Chapter 6. Self-Formation*

Developing the existential basis of Laing's methodology, primary components of the self are highlighted. These include the premise of a totalising ego and a non-unconscious consciousness. Overlapping with either component is the development of the construct of phantasy. Although all of the elements obtained are present within Laing's theory, this chapter highlights and amplifies the components of the self construct in our daily existence complementing the methodological approach developed in the previous chapter.

### *Part 3. Ontological Insecurity*

Delving deep into Laing's theory of ontological insecurity and identifying forgotten and overlooked components within this framework, Part 3. will consider its application to psychic suffering and thus its ability to translate in some capacity to discourses of 'mental health' beyond the realm of schizophrenia and medicine. This is the realisation of rupture within being-in-the-world. The concept of ontological insecurity as a premise of psychic suffering, existing outwith diagnosis of 'mental illness' and disorders, and yet also having application to these, is outlined. Emphasising a detriment to relatedness (with one's self and others) as a consequence of the rupture, a theoretical platform is developed that allows a changing application of ontological insecurity to be contained within a single framework. Self-consciousness, a sleeping concept that gains little attention after *The Divided Self*, becomes a key component in stabilising this potential for consistency rather than conflict. The proposal here is that ontological insecurity is a cause of a lack of relatedness.

#### *Chapter 7. An Empirical Concept*

This builds the base framework of ontological insecurity developing its structure with reference to direct and indirect influences named by Laing. Two specific components to be clarified are the notion of this being existentially informed but not existential in the traditional form. The second component will outline the perceived changing application for ontological insecurity between the family and political context.

#### *Chapter 8. As a Totality*

This chapter challenges the notion of a changing application for ontological insecurity. Approached firstly through an analysis of concepts of normality, the primary focus will then draw into contention the frequently repeated atomised representation of Laing's theory as a collection of models. This broader atomised conversation will consider whether Laing himself intended his theory to be considered as a totality or as a modulated structure; this has implications for continuity in the application of ontological insecurity. In the next section, the concept of self-consciousness will be woven with ontological insecurity to enable greater cogency to this concept when it is applied throughout the family and political context.

### *Chapter 9. Self-Consciousness*

Ontological insecurity becomes reframed with reference to self-consciousness. This development opens up the concept of ontological insecurity for more substantial analysis, enabling a more nuanced interrelatedness of inner and outer worlds to be considered, providing the groundwork for process or cause to be explored, and helps mitigate the perceived conflictual application of ontological insecurity in the contexts of the family and the political.

### *Chapter 10. Psychic Suffering*

Having developed the framework of ontological insecurity and offered a reinterpretation, justifying the structural importance of greater appreciation of the concept of self-consciousness, this chapter contextualises the potential for this framework to benefit current discussions of 'mental health' as an inclusive concept that addresses psychic suffering beyond the limitation of diagnosis, further illuminating a pathway to consider a process of causation.

## *Part 4. A Political Process*

Three locational characteristics reveal themselves within Laing's theory: the family, the clinical, and the political. This has contributed significantly to atomised perspectives of Laing's theory. Negotiating the temptation to follow this well-established format, Part 3 focusses on the political content within Laing's theory, outlining its intention to be addressed as a totality. The aim of this chapter is to outline a rationale to draw on concepts from the family and the clinical, and to develop a structurally sound framework that holds relevance within a contemporary political setting.

### *Chapter 11. The Political*

This chapter discusses Laing's credentials to be considered as political thinker. The political aspect of Laing's theory is frequently regarded as a separate, disconnected and contradictory framework to that developed within the family. Developing Laing's political framework, I consider the integrity of alternative applications of ontological insecurity utilised during this stage. It will explore his relationship to counterculture, the new-Left, and considered the limits of his contribution to political theory. More specifically, it defines what is meant by 'political' within Laing's theory and how a

thematic fit with the counterculture is developed through Laing's philosophic methodology. The political actions of Ronnie bled into his theoretical writing and its reception more so than any other. In addressing these specific controversies and critiques, the substance of Laing's writings become more vivid and a clearer framework is outlined.

### *Chapter 12. Interpersonal World*

Laing's theory of interpersonal dynamics was introduced within his focus upon the family context. In the atomised format, this has led to it being contained and limited to the parameters of this context. In this chapter I argue that Laing's research on the family and the theory this produced was never intended to be constrained. This justifies an opening for Laing's extensive theory on interpersonal dynamics and interpersonal perception to be extended into the political realm. Addressing the family context, feminist critiques of Laing are discussed as a means of considering whether his theory is limited to this domain.

### *Chapter 13. Ontological Discontinuity*

Analysing the political as site that continues the operations of the interpersonal world, this chapter considers the discourse of scientism: an aspect more synonymous with Laing's focus on the clinical context. The absorption of scientific terminology as the most accurate means of explaining and understanding the person, in all forms, is outlined as causing a severe existential degradation. The inability to relate to others (and one's self) through the medium of scientific discourse is determined as a cause of ontological discontinuity and thus ontological insecurity. Pulling all strands from this thesis together, an argument will be presented that the discourse by which we now understand ourselves and others is amplifying ontological insecurity and thus lowering our resilience to cope with the hazards associated with everyday existence.

### *Concluding Remarks*

Illustrated with assistance from Sartre's play, *Huis Clos*, the collective experience for ontological insecurity that encapsulates western, neoliberal, contemporary existence is summarised. Moving through the cause of ontological insecurity, we find ourselves considering what is missing and how this might be (re)engaged. The necessity for a space of 'self-reflection' within a conception of self is explored.

*Coda: Laing and the COVID-19 Fallout*

During the process of writing this thesis, a global pandemic has changed the world landscape as we know it. Although COVID-19 is a respiratory virus, the mitigating actions which have been taken to prevent its spread have caused significant mental health concerns. In this section I reaffirm some of Laing's primary concepts as a valuable source of guidance as we plan to respond to this imminent 'mental health' crisis.

## 2. Why Now?

In this chapter, I introduce Laing's theory into the contemporary landscape of 'mental health', specifically and directly extrapolating his methodological approach, developed in the 1960s, into the current domain. This serves to highlight immediate compatibilities and limitations before we delve into a more thorough philosophical analysis of his theory, including the component parts of this methodology in Part 2.

### Desperate times call for desperate measures

The critical situation of western 'mental health' has been sensationally defined as the 'epidemic' of gravest concern facing modern existence (Whitaker, 2011). The UK National Health Service (NHS) provides a stark picture to accompany this, outlining an alarming incidence of 'mental health' diagnosis, with year-on-year increase, and most crucially admitting that this situation is beyond the management of current treatment strategies (England.nhs.uk, 2016). However, regardless of increasing incidence and insufficient means of support, western health providers remain fixed in their loyalty to the dominant psychopharmacology regime – a belief that 'mental illnesses' are caused by biochemical deficiencies inside the brain with drug 'therapy' as the go-to response for treatment (Rose, 2019).

Whether the current 'mental health' situation constitutes an 'epidemic' is debatable. Numerous commentators suggest a multitude of interwoven professional factors are contributing to overdiagnosis within the psychiatric field (see Paris, 2015; Frances, 2013; Rose, 2019). A critical point within this thesis is identified by Rose (2019), suggesting in addition that changing attitudes and increasing emotional literacy by the sufferer are affecting the expression of psychic experience within the western world, with this potentially translating into increased diagnosis rates. Collectively, these sources advise caution toward what can be understood as an 'epidemic,' stating that diagnosis is not necessarily reflecting 'illness' per se. What can be said with some authority is that the public is reaching out to medical and therapeutic services for help with its mental state and that psychopharmacology is not necessarily managing this demand.

Psychopharmacology is a well-worn path, a journey started in the 1940s with the discovery of antipsychotic drugs and subtly modified to accommodate expanding diagnosis categories in the decades since (Gitlin, 1990). The disheartening reality is that substantiated and viable

questions are increasingly being levelled about the efficacy of this approach, specifically the actual benefit to the sufferer of the psychiatric reliance on drug treatment. Joanna Moncrief (2008) is a highly vocal critic of the efficacy of psychiatric drug treatment, going as far as to call it a 'dangerous fraud'. Rose (2019), whilst cautious about the long-term benefits, states that drugs, in some cases, may have some benefit in the short-term. I find myself leaning towards Rose's assertion, that psychiatric drugs can play an important role in providing respite and distance from the causes of psychic suffering, a lifeline in what can be overwhelming and immediate suffering. Short-term drugs may provide a window of opportunity, to revalue and mitigate the 'real' source of our anguish (which Laing would argue locates more frequently in worldly existence, and not as a result of a defective organism – this perspective of psychiatry is discussed in the following chapter). Unfortunately, chemical intervention is too readily the default solution and prolonged use dominates current treatment strategies. One could say, cynically, drugs are not used as an opportunity to gain control of an unhealthy environment but rather they become the means to manage our participation within it.

The commitment to this approach not only continues to concretise psychopharmacology as the only respectable framework within psychiatric care but it appears to testify that availability, self-sponsored 'efficacy' and a narrow understanding of cost efficiency are the primary factors influencing investment, research and treatment, rather than the actual benefit to those who suffer (Bentall, 2009; Rose, 2019).

In the spring of 2017, several newspapers dramatically reported on the return of Electroconvulsive Therapy (ECT) as a recognised treatment strategy within the NHS; this was supposedly under ethically approved and very specific conditions such as resistant schizophrenia and depression, where all previous measures have not succeeded long-term (Baghai and Möller, 2008). This highlighted the controversy associated with a treatment process that involves 'anaesthetising the patient and passing electricity through the brain to induce seizure' (*The Guardian*, 2017). The efficacy of this method is widely contested but even if it is effective in symptom reduction, it is universally agreed that no-one really knows how it works. Developed in the 1930s, it fell from grace in the late 1960s and early 1970s as vocal opposition became louder, deeming its use inhumane and torturous (Shorter and Healy 2007). The reintroduction of ECT does little to suggest innovative thinking but it could also be read as a distress signal, urgently telling us that alternative treatment strategies need to be identified. Its resurgence is alarming and a cause for concern.

In light of this 'desperate time', for some, however, the suggestion of a return to R.D. Laing, a psychiatrist most prominent in the 1960s, is a desperate measure too far (Lieberman and Ogas, 2015). I argue that it is against this backdrop that Laing has never been more necessary and valuable.

The temptation when discussing R.D. Laing is to be drawn into scandal and myth, accounts re-telling and detailing the antics associated with the personality 'Ronnie' but which also, tragically, increasingly permeated his professional practice. Hype and sensationalism overwhelm and too readily displace any concerted attempt at an application of his theory (Bark, 2009). This chapter will avoid this temptation and focus on Laing's theory; the pitfalls of personality will be addressed in Chapter 3, *The Dividing Character*. Now we will ask how Laing's theory can aid our understanding of 'mental illness' and influence diagnoses. If, in the process, perceptions of Laing, specifically his theory, change – this would be a welcome by-product.

### *The DSM Mind*

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM) is a classification of mental disorders with associated criteria designed to facilitate more reliable diagnoses of these disorders. With successive editions over the past 60 years, it has become a standard reference for clinical practice in the mental health field. (DSM-V, 2013, p. xii)

The desire to classify and categorise 'mental illnesses' and 'disorders' (nosology) has existed in a variety of forms for the past 2,000 years. The most recent and detailed is the DSM, currently in its fifth edition (DSM-V). The DSM came to fruition in the early 1950s, developing together with the increasing influence of psychopharmacology<sup>1</sup> and as a response to perceived shortcomings of the ICD-6. The ICD-6 was the 6<sup>th</sup> revision of the *International Cause of Death* published in 1948 by the World Health Organisation (WHO); this was the first revision to include a classification of 'mental disorders' (it also changed the name of the ICD to *International Statistical Classification of Diseases, Injuries and Causes of Death*). Although the DSM and ICD were different,

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<sup>1</sup> Lithium was the drug that propelled this change. The medicinal impact of lithium gained attention during the 1940s and following research, was introduced to the NHS in the 1950s (Gitlin, 1990).

It is important to realise there is a lot of convergence between the two international systems of diagnosis, and that it is also possible to convert the diagnoses of one system into another. (Tryer, 2014, p. 283)

Depending on geographic location, one will typically encounter the ICD or the DSM manual; however, the underlying premise for both systems is to provide a comprehensive nosology for 'mental illness' and 'disorders'. In something of a role reversal, although the ICD is produced by the WHO, since 1980 and the publication of DSM-III, it is the DSM that has progressively asserted itself as the global standard reference for clinical practice regarding the health of the western mind (Tryer, 2014; Watters, 2010; Blashfield et al., 2014).<sup>2</sup> DSM-V is the most recent and advanced manual at the time of writing this chapter.

The cultural importance gained from a diagnosis resulting in a recognised categorisation from within the DSM has significant implications, enabling an individual to have potentially unseen and debilitating psychological experiences socially and legally recognised. This enables a series of interventions to be actioned, designed to assist in the management of symptoms and promote a better standard of life for the suffering person (Frances, 2013; Rose, 2019). However, *standardisation*, the principal component of psychopharmacology that enables more reliable diagnoses — argued here as the primary tenet of nosology — serves as one of the major stumbling blocks to the integrity of this entire approach and ability to help those suffering. As I develop this thesis, further threads stemming from this desire to standardise are shown to impact increasingly upon the wellbeing of the individual. Ultimately, it will be proposed that the scientific underpinning of nosology and therefore DSM, ICD, Research Domain Criteria (this will be discussed below) etc all enact an existential degradation upon persons.

The standardisation of the medicalised subject is a theme explored at length in Watters' (2010) *Crazy Like Us: The Globalisation of the Western Mind*. With vivid examples, Watters demonstrates how the DSM framework is applied beyond its intended western demographic and the severe consequences that follow. Existing culturally specific alternatives in treatment and understanding, that to a westerner would fit within a framework of 'mental health', have been, and are being, displaced as psychopharmacology increases its presence and

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<sup>2</sup> Although the NHS (nhs.uk. 2012) state 'clinicians in the UK predominantly use the ICD-10 system to diagnose mental disorders, while the DSM classification system is mostly used for research purposes', the conspicuous use of the term 'predominantly' is an important caveat. As reported by Tryer (2014), the global influence of the DSM imbues it with perceived authority and as such creates a 'general belief that it is in some way "more accurate"'.

dominance on the global stage. The tragedy is that 'mental health' outcomes in these different geographic locations are no better, in fact possibly worse, as a result of this medical imperialism caused by an attempt at a standardisation of the subject (Mills, 2014; Watters, 2010).

The flashpoint of this globalisation occurred in 1980 with the publication of DSM-III (Regier et al., 2013). The timing of this is of great importance. Responding to critical research, DSM-III moved away from the previous theory-laden psychodynamic foundation of DSM-I/II (a time when the ICD possibly had a greater foothold within global psychiatry) and developed a symptom checklist built on logical empiricism to accompany disorder description.

The guiding aim of logical empiricism was to establish a sharp separation between observational or descriptive statements and statements of theory. (Fulford and Sartorius, 2009, p. 30)

This shift toward the *empirically observable* was in no small part influenced by the early advances happening in neuroscience at this time (Rose, 2019); politically; it marked the intensification in capitalist principles resulting in the evolution to its neoliberalism form: a seismic change in the characteristics of the politico-economic ideology that stimulated geographic expansion. The relationship between ideological conditions and medical science may not seem immediately relevant; however, Althusser's *Generalities Theory* explains how ideology and science work hand in hand to create a self-reifying process, producing a closed loop that mutually qualifies their value-authority and integrity (Ferretter, 2006). To borrow a term from Haraway (1991), they produce a 'god-trick': by increasing scientific detail, pursued in the interest of a specific ideological direction, a knowledge base is produced. The *trick* is that the ideological bias inherent within the process and classification of findings is presented as being neutral, and therefore an absolute authority within the body of knowledge, an essence of existence and a step closer to the language of *God*. DSM-V is the most current and arguably globally influential diagnostic manual and it is a prime example of a 'god trick' where science and ideology combine, working together and facilitating the globalisation of the psychopharmacological approach, undertaking a modern-day psychiatric crusade by preaching the wonder of western thought, in all its guises, to an international audience – neutralising its inherent western bias and proclaiming its knowledge to be absolute. Frances (2013, p. xii) refers to DSM-III, in a manner applicable also to subsequent editions, as the 'bible' of psychiatry.

Unfortunately, the DSM's increasing application as a *standard* for a global subject, steeped in the colonising assertion that the western mind is the only mind, would appear to be failing. Subsequent research has failed to evidence any benefit to indigenous cultures or those directly suffering and, in actuality, the opposite appears true – causing problems where none previously existed (Mills, 2014; Watters, 2010). However, its increasing geographic application further contributes to the god trick, concretising the (self-qualifying) authority of the entire psychopharmacological approach. Despite numerous internal controversies (see Houchin et al, 2012; Krueger, 2012; Pai and North, 2017; Hartlage et al., 2014), the publication of DSM-V showed no signs of arresting or changing course with regard to the standardisation of a global subject or its application of medical imperialism.

The next question is, then, how does the DSM, particularly its fifth edition, fare beyond the grave concerns of a colonising standard reference, where it retains focus on its intended target audience, that of the western mind?

Numerous commentators raise significant concerns about the inconsistencies that surround diagnostic reliability (see Leader, 2011; Morrall, 2017; Rose, 2019) and, responding to this critique, each successive DSM edition has developed the breadth and/or depth of *classification criteria*.<sup>3</sup>

Each new edition of the DSM has included more categories of disorder, seemingly endlessly expanding the kinds of conditions that are amenable to psychiatric classification and intervention. (Rose, 2019, p. 7)

It is the susceptibility of this manual to subjective interpretation that has encouraged increasing detail to be added to each DSM but as Leader (2011, p.115) outlines, the process of diagnosis is only becoming harder as a result of this action: 'The current vogue for the endless cataloguing of symptoms makes proper diagnosis more and more difficult'. The desire to produce a *standardised* diagnosis is ultimately resulting in a dearth of information that remains just as open to subjective interpretation, and as the number of categories increase and the definitions of these categories extend, a wider net of disorders is created. Unfortunately, the wider the net, the greater the catch.

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<sup>3</sup> A slight reduction in categories is present in DSM-V compared to DSM-IV with several categories being amalgamated.

## *The Post-DSM Mind*

It is not an exaggeration to say that being a teenager in late capitalist Britain is now close to being reclassified as a sickness. (Fisher, 2009, p. 21)

Fisher (2009) highlights the implications of the extension of diagnostic categorisation, stating that even the *normal* experiences of teenage existence can be incorrectly subsumed within the categorisation criteria. The most recent edition of DSM-V, produced after Fisher's observations and no doubt responding to other such criticisms, increased the detail and checklist criteria within each category. However, further concern is raised for the investment strategy underpinning the National Institute for Mental Health in the DSM – (in)directly affecting the entire outlook toward neurobiological responsibility. As discussed below, this is a further demonstration of how the pursuit of psychopharmacology is concretised through DSM-V without securing diagnostic reliability.

The National Institute of Mental Health (NIMH) – an American (but globally influential) research centre that spearheads the psychopharmacological approach and is heavily involved with the American Psychiatric Association and therefore the DSM – has produced an independent diagnostic process called Research Domain Criteria (RDoC). This encourages all future research from 2013 to bypass a diagnostic process that accepts *corruption* through subjective interpretation, instead moving toward a tangible empirical scientific process: an 'objective' standard of diagnosis. Although the DSM retains central importance within the RDoC by providing the criteria for 'mental disorders', research is to be driven forward with a neurobiological impetus (Clark et al., 2017). Defined as a research focused tool, as Tryer (2014) states, the ambition for the RDoC is that neurobiological correlates will underpin the future qualification for DSM diagnosis itself (possibly for the RDoC to consume and replace the DSM entirely) and efforts are already moving toward this end.

Highly problematically, there is no data at this time to support the correlation of neurobiology with mental disorders.

We cannot, then, conclude that structural brain imaging demonstrates that psychiatric disorders are brain disorders [...] We are no closer to making the link

between genetic sequences, molecular events, patterns of neural activity and mental states. (Rose, 2019, pp. 109 and 113 – 114)<sup>4</sup>

Rose points out that, on leaving his role as NIMH Director in 2013, Thomas Insel admitted that the trajectory of scientific advancement during his tenure, characterised by the pursuit of pure biomarkers, had made no discernible difference to those who actually experience and suffer from 'mental illness'. Rose, along with numerous other commentators (see Paris, 2015; Frances, 2013), is nevertheless not opposed to the potential for neurobiology to contribute toward the understanding of 'mental health' but encourages patience in reaching this point, even more so regarding diagnosis. The consensus would appear to be that the science does not yet match the ambition; therefore, we need to curtail our confidence in neurobiology alone and invest more thoroughly in refining the existing DSM paradigm. There is, however, a single underlying theme that unites all the research: a rejection by modern psychiatry of 'its long-standing psychosocial perspective' (Paris, 2015, p. xii).

Paris (2015) and Frances (2013) state that we need to remember that the DSM is a part of a *biopsychosocial* framework and not forget the vitally important psychosocial dimension. Rose (2019, p. 189) advises us to 'begin research with the person in their social milieu'. Whether in the laboratory or the consultancy room, wariness is needed toward the omnipotence of the bio component, its consequential displacement of any consideration toward the individual's circumstances and its drastically reductive process of standardisation that increasingly divorces the subject from their contextual existence. But it is easy to see why this occurs. Even if formally DSM-V remains within a biopsychosocial model, in reality, investment in research and treatment is dominated by a trajectory of thought that increasingly isolates the person from their environment, attributing 'mental illness' to brain diseases and broadcasting 'chemical imbalances' as the primary key to understanding causation and cure.

In the face of overwhelming neuroscientific and neurobiological authority within the psychiatric field, how do we re-engage with the psychosocial and to what avail?

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<sup>4</sup> Dementias (Alzheimer, Parkinson diseases) are an exception showing diagnostic consistency with neuroscience results (Rose, 2019).

## Navigating the neoliberal mindscape

Laing's philosophical approach can be instrumental in re-attuning our attention to what can be considered a psychosocial footing within the 'mental health' arena and, furthermore, a means of resisting the increasing influence of logical empiricism within the DSM which is causing so many issues. To realise this potential requires acknowledging Laing's divisive character and negotiating the voluminous scandalous and mythological representations that divert focus from his theory and detract from its application in contemporary culture. We will invest more time into this aspect in Chapter 3, *The Dividing Character*. It is important to acknowledge a major criticism produced by Juliet Mitchell (1974) from the outset. Mitchell stated that the seductive qualities of Laing's poetic form and language often disguise the fact that a lack of rigorous structure is present in his theory, and nowhere is this more evident than with his *science of persons* – the very foundation of the claim we might make for Laing's counter-cultural relevance in the current DSM structured medical world.

Application in the contemporary setting, therefore, needs to respond to such criticisms and return to his catalogue of published works, possibly seeking further clarity where needed. Only then do we have the tools to move forward with a Laingian application. Nevertheless, criticisms such as Mitchell's provide the opportunity to drive forward Laing's theory, developing a more specific application in contemporary culture and, in turn, enabling a more accurate appraisal of his contribution. Responding to Mitchell's observation, this thesis does not suggest or continue that a 'science of persons' was achieved by Laing. Instead, through a concept analysis methodology that begins in *Part 2: The Return to Philosophy*, I focus on the structural underpinning of Laing's theory, with specific attention to his own existential-phenomenological methodology, defaulting to Laing's source of origin where ambiguity remains present.

This application of Laing's theory provides some leverage to consider the current limitations of DSM-V, the increasing reliance placed on logical empiricism and the continuing prevalence of the psychopharmacological approach. Standing in complete contrast to the pursuit of standardisation, and its resultant reduction of the subject, Laing reminds us of the context of the sufferer, the uniqueness of individual experience and the value of social intelligibility.

The frustrating realisation is that many of the concerns voiced by contemporary critics of psychiatry mirror those made by Laing, yet he remains unnamed and unacknowledged.

[W]hen you have a hammer, everything looks like a nail [...] drug treatment for every patient is rationalised by the overuse of existing diagnostic categories. (Paris, 2015, p. 5)

It is good to know and use the DSM definitions, but not to reify or worship them. (Frances, 2013, p. 21)

These two brief examples echo Laing's concern over the determinism incurred by the *initial way we see a thing* and the reductive distance that is inflicted by placing the DSM (or whatever scientific manual comes next and constructs our psychiatric words) before the patient's own experience. This does not necessarily mean doing away with the DSM in its entirety,<sup>5</sup> but we need to place the patient first, and this means embracing their *being-in-the-world*.

The application of purely biological models has done great harm to psychiatry, downgrading the importance of psychosocial factors. (Bracken et al., 2012, cited in Paris, 2015, p. 61)

Laing was hostile to alternative discipline names,<sup>6</sup> remaining loyal to the tradition of philosophy that he found more than capable of wrestling with the timeless interest for understanding of the self. But times have changed, and the either/or debate is now more dominant than ever, incurring a cleavage and resulting in the DSM-V and psychopharmacological approach. Laing's philosophically inclined theory provides us with the means to embrace and re-engage with the psychosocial, by drawing attention to exactly what is being lost and forgotten and by reminding us of the entirety of forces that act upon the person.

Whether a product of actual illness or over-diagnosis, the current 'mental health' 'epidemic' would be more readily addressed if we heeded this advice. To diagnose more reliably, we need to understand psychic suffering more thoroughly. And this starts from Laing's existential-phenomenological methodology, a potentially powerful key to developing truly an

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<sup>5</sup> As per the radical propositions of Timimi (2013): a current advocate, vocal within the Campaign to Abolish Psychiatric Diagnosis Systems such as ICD and DSM (CAPSID).

<sup>6</sup> 'We have an already shattered Humpty Dumpty who cannot be put back together again by any number of hyphenated or compound words: psycho-physical, psycho-somatic, psycho-biological, psycho-pathological psycho-social etc., etc'. (Laing, 1960, p. 23)

understanding of the self without destroying it through reductive, objective science: a *science of persons*.

## The Relevance of Laing

It is in the context of these highly politicised debates that Laing's early critique of the depersonalising tendency of psychiatric diagnosis comes alive once again.

As a psychiatrist, I run into a major difficulty at the outset: how can I go straight to the patients if the psychiatric words at my disposal keep the patient at a distance from me? How can one demonstrate the general human relevance and significance of the patient's condition if the words one has to use are specifically described to isolate and circumscribe the meaning of the patient's life to a particular clinical entity?

(Laing, 1960, p. 18)

Laing's comment is simple yet profound:

The initial way we see a thing determines all our subsequent dealings with it. (Laing, 1960, p. 20)

Problematically, through approaching the sufferer's experience pre-armed with a standardised medicalised framework (*psychiatric words*), a bias is immediately incurred that insists on interpreting a person's experience to fit, appease and complement a clinical framework.

Laing stated that 'our experience of another entails a particular interpretation of his behaviour' (Laing et al., 1966, p. 15). The medical system and its discourse hold a pervasive power base within contemporary culture and its structural influence extends beyond the consultation room and, as highlighted by Rose (2019, p. 3), shapes 'the very experience of living' for us all. It is little wonder that within its own direct hub of power, the psychiatrist applies this medicalised frame of reference with authority and the patient can too readily accept this without question.<sup>7</sup> It is this powerful discourse that determines exactly how the

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<sup>7</sup> There is evidence of patients resisting this power dynamic ( see Chapter 4, *Laing, Psychiatry and Resistance*) however this remains unusual and is even less possible at the immediate point of contact with psychiatric services (see Morrison, 2005).

sufferer will be interpreted and instils a distance between patient and professional. In contrast, Laing's position asserted the singularity and intelligibility of the human subject.

My thesis is limited to the contention that the theory of man as person loses its way if it falls into an account of man as a machine or man as an organismic system of its processes. (Laing, 1960, p. 23)

To think of 'man as a machine' is to reduce a person to compositional parts: a body removed from environment, a brain isolated from body, a neuro pathway detached from the brain – the means for 'achieving' the standardisation discussed previously, epitomised currently through DSM-V, and even more so with the likely extended application of RDoC in the future.

The resistance Laing held toward the early inclinations of psychopharmacology within the clinical psychiatric approach is attributed to his pre-medical education received at Hutchesons' Grammar School, an institute that nurtured and encouraged philosophical thought (Laing, A., 1994).

[Ronnie] saw the empirical world through the eyes of a dedicated, albeit confused philosopher. Philosophy was, he thought, in opposition to medicine. (Laing, A. 1994, p. 34).

In contrast to his more scientifically grounded peers at medical school (and beyond), Laing's initial exposure to existentialism and phenomenology continued to determine all his dealings with the empirical world, contrasting significantly with the discourses of medicine that imposed a very different way of seeing the subject. It was this theoretical position that encouraged Laing to declare a necessity for a *science of persons* to be developed.

The science of persons is the study of human beings that begins from a relationship with the other as person and proceeds to an account of the other still as a person. (Laing, 1960, p. 21)

Laing's revolutionary approach inverted the established relationship of authority by empowering the experience of the suffering person over that of the status assumed by the medical professional. This new approach involved two significant and interrelated changes that quashed any notion of standardisation, unsettling established ideas governing the understanding of psychic suffering. These were firstly, 'to set all particular experiences within the context of his whole being-in-the-world' (Laing cited in Collier, 1977, p.17) and secondly,

drawing on Wittgenstein in order to assert that 'the thought *is* the language' (Laing, 1960, p. 19).

No matter how unconventional and unorthodox the presentation, Laing stated that the words spoken by the sufferer (not the *psychiatric words* forcibly applied to the sufferer's experience) portray an actual account of their 'feelings and actions' (Laing, 1960, p. 31). Understood in their whole experience, their being-in-the-world, the patient rightfully retains a valued identity as a person and not simply a machine, or an organismic system of its processes (or a sequence of chemical activity within the brain mapped against a set of arbitrary labels in a DSM manual). A science of persons would therefore guide the medical professional to engage with 'the experiential-gestalts' of the suffering person; to view, in their connection, the arrangement of parts within a moment, 'seeing the world through another person's eyes' (Collier, 1977, p. 23). What Laing offered was a polemic against standardisation: to drop all preconceived ideas structured by psychiatric words and to instead accept and value the sufferer's frame of reference (*thought as language*), embracing the entirety of their interpretation of experience, their world. Only with this change in approach could any real understanding be gained of the subject. But one major hurdle stood in the way of engaging with this alternative approach: a hurdle that is more prominent and problematic than ever before.

People feel they have to translate 'subjective' events into 'objective' terms in order to be scientific. (Laing, 1967, p. 102)

The attempt to translate human experience into an objective value framework – i.e., empirical observations inherent within the DSM and even more so with the neuroscientific focus of the RDoC – was perceived as a standardising process of violence that corrupts the inherently subjective quality that defines existence. This was a continuation of Laing's criticism of the medical tendency to reduce an individual to mechanistic components, as it was through this procedure that an objective analysis was claimed. The reduction to constituent parts alongside the conversion of subjective to objective, dehumanised the subject meaning that any real understanding was lost. For Laing, understanding the subject properly was essential to understanding psychic suffering and this required accepting the being-in-the-world, embracing that a person exists within a context, a brain within a person. It is the resistance to standardisation through accepting the unique experience that comes from the context of his whole being-in-the-world (including the person in their social milieu) that holds the key to unlocking the enigma of psychic suffering that eludes our current psychopharmacological approach.

## Intelligibility

Howarth-Williams (1977, p. 174) argues that *intelligibility* is the 'central, unifying concept in Laing's work', operating on multitudinous levels and being a prime component in Laing's theoretical opposition to the reductionism of biological psychiatry. This is demonstrated most influentially in Laing and Esterson's 1964 publication *Sanity, Madness and the Family*. This book, containing 11 case studies, set about testing the hypothesis laid out in *The Divided Self* that, with the application of an existential-phenomenological methodology, intelligibility would be found in the previously incoherent language of those diagnosed as 'schizophrenic'.<sup>8</sup> Consequentially, this questioned whether 'schizophrenia' was an 'illness' at all.

We have tried in each single instance to answer the question: to what extent is the experience and behaviour of that person, who has already begun a career as a diagnosed 'schizophrenic' patient, intelligible in the light of the praxis and process of his or her family nexus. (Laing and Esterson, 1964, p. 27)

Applying a theoretical framework embodying existential-phenomenology (the base methodology for his intended *science of persons*), this research proved that intelligible content could be revealed within schizophrenese babble<sup>9</sup> and this in turn evidenced that the symptoms experienced by the sufferer were directly relatable to the context of their world. This was not simply a brain illness; it was an intelligible response to the most tragic of circumstances, with consequences exacerbated by the subsequent process of being absorbed into the psychiatric system and defined as a patient.

Laing accepted that each patient demonstrated a set of clinical attributes falling outside 'normal' experience and used the term 'ontological insecurity' to explain and differentiate their experience. He defended this as being unlike a negatively constructing label (i.e., 'schizophrenia') by claiming that it was nothing more than an accurate description of experience (Guy Thompson, 2015). This defence is often used to counter Szasz's (2009, p.

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<sup>8</sup> <sup>8</sup> Agreeing with Laing that schizophrenia was not a disease or illness but retaining 'psychiatric words' for what appears to be ease of understanding, the American critic of psychiatry Theodore Lidz (1972, p.154) stated that what we call schizophrenia is the 'essential mental disorder', an experience that exists at the absolute extreme. Its understanding would therefore facilitate insight into all other experiences of psychic suffering.

<sup>9</sup> Lidz was also an advocate of social conditions in the development of schizophrenia, emphasising the role of the family with his research, beginning in the 1940s. The intelligibility of the sufferer's language was not an overt consideration for him until after reviewing Laing's work (see Lidz and Lidz, 1949; Lidz, 1972 for this changing dynamic).

51) critique that Laing's work still invested in the 'power of diagnosis' by reinforcing the binary between those with 'mental health' and 'mental illness' and simply renamed this binary as ontologically secure / insecure. However, Laing refused to accept a diagnosis and subsequent illness label of 'schizophrenia' stating that this was an example of experience being held accountable, force-fitted, to a medical discourse resulting in a loss of understanding. Without denying, ignoring, or minimising the painful experience of suffering, Laing and Esterson (1964) proposed that by revealing intelligibility they had achieved a better knowledge base and understanding of the person's experience. In other words, they had achieved a more accurate diagnosis, only made possible because they approached the sufferer with a clean slate, avoiding the psychiatric words that construct the psychopharmacological framework and through that define the patient.

With statements such as a 'mental health' and 'epidemic' being used to describe conditions within western culture, and serious concerns being raised toward the efficacy for the dominant forms of diagnosis and treatment, questioning whether these forms address the issue or feed it, the time is ripe to consider alternative means of tending to this issue. The time is ripe to conduct a re-examination of Laing's theory.

Laing offers a theory, or at the very least several concepts, that allow a revolutionary approach to understanding 'mental health'. What he demonstrated through studying 'schizophrenics' extends to all 'mental illness'; any consideration of social intelligibility with regard to psychic suffering is superseded by the pursuit and dominance of the logical empiricism that defines the DSM and ICD. Furthermore, social intelligibility does not appease our cultural need for objective scientific authority to validate our suffering.

The conditions that brought Laing to prominence have not subsided, they have intensified. The static representation of Laing's theory from the 1960s and influential historic secondary sources, even within a background noise of controversy and criticisms for a lack of structural clarity, retain potential. Over the course of the following chapters, we refine focus to a Laingian framework, with reference to these controversies and criticism.

The most relevant concepts will be deconstructed, analysed and ultimately composed into a single, totalising theory that can be applied to the macro issue for understanding our current predicament. Honouring the foundation and staple characteristics of his theory, this could possibly clarify the ambiguity of his existing contribution to 'mental health' but, more importantly, has the potential to produce valuable insights beyond the limitations of the DSM, capable of truly helping those experiencing psychic suffering. From the research highlighted,

all the signals suggest that this is a viable investment to address our current desperate time, a desperate measure to the existing order, but also a potentially valuable and welcomed resource to those in need.

### 3. The Dividing Character

'Short of anything criminal, what could be so dire as to ostracise such humane and person-centred thinking from consideration within this situation we find ourselves?' This was the question posed to me by a friend having read the previous chapter. The inference being that Laing's potential seems evident for consideration, so why does he remain a mental-health-pariah within mainstream medicine and psychiatry? The mental health landscape has changed since Laing's day, the 'brain revolution' epitomised by the RDoC testament to that fact, but this does not undo or negate the potential of Laing's theory which was already resisting that specific trajectory of 'progression'. My answer is therefore that we need to remember that Laing was a highly controversial character and even his name brings about passionate and divisive responses. This chapter will outline some of the main events within Laing's career that gravitate toward the involvement of his personality rather than his theory. In illuminating these events, it is my hope they can be negotiated more effectively in the future, enabling focus to be held more easily on his writing.

Laing's legacy to psychiatry and mental health professionals is both vast and ambiguous. (Burston, 1996, p. 238)

The question of Laing's relevance, which directly impacts his perceived potential in contemporary application, arises periodically since his most productive time in the 1960s (for example, Howarth-Williams, 1977; Burston, 1996; Guy Thompson, 2015). As recognised in Burston's quotation, whilst his legacy is 'vast', a decisive outcome is far from conclusive. Existing research presents a conflictual terrain, at once supportive and dismissive, neither position necessarily correlating with the polemical opinion they may hold towards his character. Some feel his impact was minimal, others believe his work significantly shaped the process of psychiatric medicine.

Everyone in contemporary psychiatry owes something to R.D. Laing. (Clare, 1992<sup>10</sup>)

Laing has not influenced in any appreciable way either psychiatrists, or psychoanalysts, or the wider net of theoreticians. (Kotowicz, 1997, p. 110)

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<sup>10</sup> Interview with Laing, In the Psychiatrist's Chair, BBC Radio 4, (original interview with Laing 1985)

Kotowicz and Clare provide two clear examples of this conundrum, illuminating a concern associated with all research but particularly pertinent with the hyper-critical response to Laing. Whom do we believe when each position provides a well evidenced pathway to justify their ultimate decision? These existing accounts provide no further clarity for a declaration of allegiance or support. Therefore, a different approach needs to be employed.

It would be extremely unusual to find a mental health professional who claimed to be applying a Laingian approach in his/her daily work. (Coppock and Hopton, 2000, p. 88)

A serious consideration must be directed toward the questionable aspects of Ronnie's personality with regard to the contemporary response to legacy. As Coppock and Hopton's (2000) quotation above outlines, one would be hard pressed to find medical professionals openly declaring that they are operating within a Laingian theoretical framework and the negative characteristics and behaviours which manifest in scandal and mythology must play a part in this.<sup>11</sup> In some ways, Laing has become his own worst enemy. He admitted to wanting to be acknowledged as a respected psychiatrist and academic, yet without the Professorship he desperately sought from Glasgow University, and no structured Laingian theory to speak of (Mullan, 1995), his own behaviour must be factored into this outcome. Challenging the medical profession, and all authority systems in general, was never going to endear him to the gatekeepers but the notoriety of his antics have been instrumental in negatively contributing to his credibility as both a practitioner and unfortunately, as a theorist.

Addressing this balance in the PhD thesis '*Descandalising Laing*,' Bark (2009) concludes that Laing has a substantial theory frequently dismissed, due to an inability to look beyond his behaviour often transmuted in mythology. Laing's theory is therefore open to misinterpretation and inaccurate criticism. Bark's meta-analysis presents a strong argument for Laing's relevance, for his influence within the 'mental health' arena, and most importantly, the continued credibility of his theory. Bark outlines that the attention directed towards the all-consuming antics surrounding his personality, in a wealth of secondary accounts, dominates to such an extent that ultimately, and incorrectly, it detracts from the positive impact of his work and theory.

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<sup>11</sup> Niche organisations such as the Philadelphia Association and Arbour's Association acknowledge Laing's influence at their inception, but they stop short of declaring themselves operating with adherence to a Laingian framework.

This has been particularly noticeable when introducing Laing as my theoretical focus, in the action of a subtle change in title by which others, on several occasions, have readdressed my research. My formal introduction has sometimes shifted to the more familiar, personal, nickname of 'Ronnie,' a process I have not experienced or witnessed in any other theorist. It appeared that those affiliated with Laing frequently addressed him affectionately as 'Ronnie' to demarcate themselves from the less engaged. There was also something further in this affiliation: it somehow embraced Laing's personal qualities which extended beyond the purely theoretical. The suggestion underpinning this shift appeared to be that my own use of 'Laing' was an indication of naivety, not having established myself with the in-crowd and a consequence of not understanding Laingian theory.

As tempting as it was to affiliate myself with the term 'Ronnie' in order to broadcast a depth of reading and substantiate a claim for respect within this theoretical domain, to embrace this personal nickname that Laing encouraged to chosen others, I doubled-down on this conscious and deliberate act as a way of resisting the pull toward this established group. I never met R.D. Laing, I was never asked to call him 'Ronnie' directly and, more so, my only connection to his career is through his published work as R.D. Laing. As my involvement, understanding and familiarity with Laing's body of work developed, the 'Ronnie' and 'R.D. Laing' distinction seemed to assist in identifying two very significant aspects of his legacy: his personality (Ronnie) and his theory (Laing). I suggest this division helps to illuminate why Laing is overlooked or cast to one side, ignoring a significant resource that could be so beneficial to our approach to 'mental health' in contemporary culture.

In a truly Laingian fashion, it must be remembered that Laing is neither one nor the other: both are one within his totality. This enforced and plastic format is aimed to better forewarn and prepare the reader for criticisms that are often levelled at Laing with respect to each theoretical component that will be discussed in the later sections, assisting in promoting the relevance and value of his theoretical integrity. The intent behind this approach, utilising a concept of a split existence (not dissimilar to Laing's own concept), is to qualify an inversion of the common trajectory of theory that, as Bark (2009) states, gravitates toward mythology and scandal. Through illuminating the main aspects and characteristics which culminate in these sensationalised and dramatic accounts, largely accountable to his personality and too often dominating focus, a justification to bring to the fore the often-overlooked importance and centrality of theory underpinning Laing's career will be developed. Focussing primarily on 'Ronnie' in this chapter, we pave the way to approach this thesis with a theory-first methodology.

## Ronnie

I really got close to him on a personal level. That's also when I began to call him "Ronnie", following the example of his friends. (Capra, 2015, p. 41)

It seems strange to hear Capra, a respected physicist, write with such schoolboy affection of another academic, even more of someone outside his own theoretical field. But Ronnie appeared to have this effect. Capra (2015, p. 41) writes with an intended distance and a measure of mockery of the 'friends and disciples' at Laing's side, yet his quotation demonstrates that being able to call him 'Ronnie', as did his friends, carried with it a desired status: he was accepted, part of the elusive in-crowd, connected to the man beyond the textbooks.

We start to understand this effect more with insight into Laing's seemingly normal behaviour in everyday life during his heyday. Speaking to a fellow shopper in Kings Road, Chelsea, as he waited once again for the assistant to bring him a correct pair of sandals, Ronnie joked that, 'I suppose I could go barefoot but I'm a doctor, you see, and there are some people that might think it odd' (Mezan, 2015, p. 13). Already a qualified and published psychiatrist, the shopper in question, Peter Mezan, was a fan who recognised him immediately. Ronnie notoriously was not simply a name on a book: he was a figure who existed in a real and tangible way, equally at home (and frequently, equally found) in the hipster hangouts and pubs as he would be at his Kingsley Hall residence (Burston, 1996). He not only spoke to the uber-cool collective of 1960s counterculture, he practised what he preached, he was there. Even from this brief encounter in the shoe shop, we see his charismatic capacity and willingness to playfully juxtapose his professional status and disdain towards its symbolic authority (Crossley, 1998).

Reflecting the liberal attitudes of the sixties generation, he was also no stranger to drug experimentation. Whether personal or professional, his interest in LSD as a form of therapy and personal growth became folklore. The 'Acid-Marxist' was a name used equally to rebuke or embrace him; either way, it affiliated him further with the growing under-ground and counterculture movements (Mullan, 1995). As tempting as it is to be drawn into Laing's attitudes toward the psychedelic experience and drug use, this is a rabbit warren that takes us further and further from our focus. Suffice to say, his personal and professional interest in mind-altering drugs endeared him further to the alternative culture of this time.

Laing is always described as charismatic, cultured, and confident, renowned for his exceptional ability to connect with another; whether individually, in a group, or lecturing to a crowd, those who discuss this experience talk about his ability to captivate. Documentary films, *Did you used to be R.D. Laing (1989)*, *All Divided Selves (2012)* and the fictionalised account of his time in Kingsley Hall, *Mad to be Normal (2017)*, all stress the magnetic and hypnotic effect he had, emphasising it to such an extent that they seem to paint him as a messianic figure. Whether this seemingly excessive representation is an intentional means to ridicule the myth that surrounds the person or a genuine effort to portray the adulation within the accounts retold, either way, both attest to the notoriety of his performance, and how his interpersonal ability was adored and revered.

Always woven within the narrative is the sub-theme of the struggling and tortured artist, the musician, exorcising his demons at the piano and losing himself and his troubles as he played (Mezan, 2015). Kirsner's (2015) use of the poignant title of Nietzsche's book 'Human, all too human' to describe Laing's struggles with the complexities of life and theory is well founded. Once again, these difficulties further endeared him to his followers, his artistic soul enhancing his growing iconic status. He even released a music album, *Life Before Death (1976)*.<sup>12</sup>

Tragically, as the flipside to this narrative and accompanying the music as a consistent presence, alcohol never seemed to be far from his person. The more affectionate pieces will discuss the 'glass of cognac' deftly being handled as he held court in the evening (Capra, 2015, p. 41) but all too often the films and secondary accounts tell a darker and more destructive story. Always capable of overindulgence, as his career progressed some form of substance became his faithful companion, his uninvited 'plus 1' (Guy Thompson, 2015). In a podcast recorded during a Birkbeck conference, *Sanity, Madness and the Family / Family Life: An Urgent Retrospective (2015)*, Lucy Johnstone discusses how Laing excused himself at the beginning of a lecture, returning 20 minutes later clearly 'worse for wear' (notably, she retains the formality of 'Laing' and distinguishes her interest in his theory from the man himself). Laing was defiant about the impact and severity of his drinking, demonstrated when he defended himself against an accusation of being intoxicated during an interview with Gay Byrne, not with denial but rather questioning the interviewer's closed perspective to alcohol (*All Divided Selves*, 2012). But eventually not even his charisma and sharp mind could outmanoeuvre his substance reliance (abuse). Although cleared of any and all wrongdoing, accusations of intoxication and misbehaviour during professional practice contributed to him

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<sup>12</sup> Available to listen to online at [rdlaing-lifebeforedeath.com/listen/index.html](http://rdlaing-lifebeforedeath.com/listen/index.html)

being struck off the medical register in 1987 (a detail difficult to locate in texts – but recorded by his son, Adrian Laing in the biography, *R.D. Laing: A Life*, 2006). Even Guy Thompson (2015), a long standing and loyal friend of Ronnie, acknowledged the increasingly negative impact drinking came to have:

[on] many occasions during the last decade of his life he showed up for public lectures (always well attended) inebriated, arrogant, and rude. (Guy Thompson, 2015, p. 1)

The darker side to his character was not purely restricted to the alcohol either (however, I would suggest the two were frequently related), dually described as,

painfully provocative and delighted in upsetting his followers' most cherished assumptions about themselves, sometimes to shattering effect. (Guy Thompson, 2015, p. 2)

Ronnie knew he had a theoretical mind capable of performing in the most demanding of gladiatorial arenas but like a cat playing with a mouse, sometimes he would choose to toy with his audience merely to demonstrate his might. Capra (2015) talks about being on the receiving end of such an exchange and the ostracised, isolated feeling it gave. However, with a complexity befitting Ronnie's character, with a sly wink and whisper in Capra's ear, Ronnie tells him this is not an attack but a theatrical performance for the benefit of an unwitting audience; he thanks him for participation and asks if he is comfortable to continue. Whilst the intricacy of Ronnie's approach is difficult to fathom, so too is the delight and honour with which Capra seems to cow to Ronnie's whim. Those who revered him suggest that this method was a means of ensuring he constantly disrupted the potential for scientific dogma. However, it also seems to indulge his narcissistic delight in intellectual superiority (Guy Thompson, 2015). Whether used to knock down, embrace, or coerce, his ability to connect to the other is time and again demonstrated – hence the ability to cut so deep.

Within this darker and more tragic aspect to his personality, in a poignant and ironic twist of life imitating art, for all the emphasis Laing seemingly placed on the family for promoting 'mental health' and wellbeing, some of his own children found this to be his greatest limitation, particularly those from his first marriage. In an interview with the Guardian (2008), his son Adrian (fifth child, first wife), when asked what it was like having R.D. Laing as a father, responded: 'a crock of shit'. The inference is that he improved with age (Laing, A, 2006).

Ronnie remained professionally active until his sudden death aged 61 in 1989. However, the difficult aspects of his character increasingly permeated his professional practice and career (Guy Thompson, 2015). In addition, his theory changed focus and the charisma, charm, intensity and uniqueness once so acute became less and less evident. Nonetheless, the legacy of his work in the 1960s and the cult icon status he achieved continued to sell out auditoriums providing him with a chalice, perhaps a poisoned one, which continued to secure him financially (Guy Thompson, 2015; Crossley, 1998; Sedgwick, 1982; Kotowicz, 1997).

Mullan described Laing as capable of being a 'seductive saint or the devil' (cited in *The Independent*, 2008). This quotation succinctly captures the polarities described with Laing's character; the exaggerated terms *saint* and *devil* emphasise the associated excitement and sensationalism which support the conditions that Bark (2009) stated led to mythology and scandal.

The epicentre of scandal and mythology is frequently directed toward his time with Kingsley Hall, arguably the personification and climax of Ronnie's career performance: a place where his personality and theory are infused in practice. To appreciate the impact of Kingsley Hall on Ronnie (or vice versa), if that can be truly done, one must first appreciate the foundation bricks of the Antipsychiatry Movement and Philadelphia Association upon which it was built. It is on this pathway that Laing's theory starts to become more visible.

### *Antipsychiatry*

[A]ntipsychiatry, the informally constituted British group, [is] best known through the work of R.D. Laing. (Brown. 1973, p. 60)

The movement which controversially became known as 'antipsychiatry'<sup>13</sup> formed throughout the early 1960s with a collective of 6 individuals. In the first wave, it was Laing, Esterson and Cooper and, as momentum gathered, post 1965, Redler, Schatzman, and Berke were introduced to the mix (Burston, 1996). Each of these qualified psychiatrists united under a common premise and ethos, galvanised within the teachings of Laing's *The Divided Self*, to

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<sup>13</sup> None of the members but Cooper endorsed the name 'antipsychiatry' (Coppock and Hopton, 2000; Mullan, 1995). Laing vehemently rejected the term, stating that their (the working collective's) aim was not 'anti' psychiatry, it wasn't to dissolve and destroy psychiatry, but rather, it was to reform and refocus its practices, to empower the experience of the sufferer. This was ultimately the cause of the demise of Laing and Cooper's already fractious relationship (du Plock, cited in Dryden, 1996).

reconsider what constitutes madness and sanity and question the social control function that the role of psychiatry performs. Unlike previous criticism of madness and the medical profession, this movement came about at a time when the psychiatric profession was well established, holding a stable and authoritative place within culture. However, the integrity of this professional strong-hold was tested significantly when, unlike previous criticism which were directed toward a specific or singular procedure or treatment, the Antipsychiatry Movement produced a targeted attack on the entirety of their organisation and worse still, staging this attack from within the very ranks of the organisation (Crossley, 1998).

Whilst the Antipsychiatry Movement focused on the 'mental health' arena, to greater or lesser degrees depending on which member was speaking, common to their theory was the belief that causation of 'mental illness' and responsibility for the brutal forms of treatment which exacerbated the intensity of symptoms, lay in the very foundation of our political conditions<sup>14</sup> (Cooper, 1967; Laing, 1967; Barnes and Berke, 1970). The connection and involvement with the counterculture scene and politics increased the visibility and impact of the Antipsychiatry Movement within wider society; however, this came at a cost. As the counterculture faded into the memories of the late 1960s early 1970s, so did the perceived transformative potential and validity of the Antipsychiatry Movement (Coppock and Hopton, 2000).

Whilst antipsychiatry constituted six principal members, the point to emphasise is that Laing and *The Divided Self* were the nucleus to this movement. But this movement needed traction in the 'real world'.

### *Philadelphia Association*

Under the lead instruction of Laing, a charitable organisation named the Philadelphia Association (PA) was successfully registered in April 1965 (Howarth-Williams, 1977) and it was this charitable status that was key to allowing its theoretical premise of what was becoming antipsychiatry to progress.

Laing created with several colleagues a charitable body, The Philadelphia Association, to give a new community legal grounding. Free from the rules of the

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<sup>14</sup> The political content and controversy of Laing's theory is addressed in Part 4: *A Political Process*.

medical profession, Laing and his colleagues could set up the project according to their own vision. (Kotowicz, 1997, p. 75)

The seven founder members of the PA (Laing, Esterson, Cooper, Briskin, Blake, Cunnold, Sigal) varied in profession. They were psychiatrists, social workers, psychotherapists, artists and writers but they were all united under a single premise, the tenets of the yet unnamed and developing Antipsychiatry Movement but with a broader belief in creating something better for society (Coppock and Hopton, 2000). It was this belief in a better society and the fact it came from a breadth of professional diversity that helped cultivate a thematic fit with the counterculture. Although existing in some capacity prior, it was through this organisation (and more specifically, Kingsley Hall) that Redler, Schatzman and Berke, formed with Laing, Esterson, and Cooper to create a more discernible Antipsychiatry Movement (Burston, 1996).

The aim of the PA was to create experimental communities, in multi-occupancy houses, allowing individuals suffering mental turmoil, particularly those diagnosed as 'schizophrenic', to endure the natural process of madness in a safe and supportive environment without forcibly being subjected to medical intervention (Coppock and Hopton, 2000). Another way of looking at their aim is that it was intended to provide an environment free from the political / existential conditions which gave rise to, and reified, symptoms and behaviour which became diagnosed as illness.

Laing was undoubtedly pivotal in the development and manifestation of the Antipsychiatry Movement and the organisation of the PA but it is impossible to fully appreciate or understand either without consideration of the experimental communities they ran.<sup>15</sup> This is demonstrated most dramatically, perhaps excessively, through the Kingsley Hall residence: the jewel in the crown of the Antipsychiatry Movement and the most infamous community under the administration of the PA. Kingsley Hall embodies all that the Antipsychiatry Movement was during this period; it illuminates the operation and tensions within the PA, and places Ronnie firmly in the spotlight.

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<sup>15</sup> At a seminar conducted at UCL (2017), Dr A. Chapman recounted a conversation with Leon Redler, a surviving member of the Antipsychiatry Movement, where he was corrected that it was not a 'therapeutic' community but an 'experimental' community. The insistence on using 'therapeutic' on the PA website may be seen as an indicator of their changing, less radical ethos. Respecting Redler's account from his direct experience, and its suitability within the context to be discussed, it shall be continued to be referenced as an experimental community.

## *Kingsley Hall*

Laing was the impetus behind the Kingsley Hall experiment...which established a place where people could come and work out their emotional problems in a free<sup>16</sup> community setting. (Brown, 1973, p. 62)

Implementing the experimental aims of the PA for treatment of those typically diagnosed 'schizophrenic,' Laing also used the premises to conduct special events, maintaining the prominence of the Antipsychiatry Movement (and himself) with all things counterculture, hosting public seminars by David Mercer, Francis Huxley and, perhaps narcissistically, himself. It was also highly utilised in the organisation of the *Dialectics of Liberation* Conference 1967.<sup>17</sup> Laing created an inner-city commune, embracing the humanism so prevalent within 1960s culture and responding to the criticism of capitalist culture and medicine. Vibrant with culture and politics, it is no wonder it became a hive of activity, attracting the attention of celebrities, activists, and academics alike (Burston, 1996).

Laing discusses this time as being founded on principles which on reflection echo optimistic sentiments of anarchist theory. He talks about a place free from domination and hierarchy, depicting an image of a community steered by all where evening meals were the focal point and important matters from the day were discussed. Nightly gatherings (or endless parties, as Showalter, 1987, negatively perceived them) where spirits were kept high enabling residents to be engaged and connected (Mullan, 1995), were another reason that it attracted attention from celebrity friends (and negative attention from annoyed local residents and critical bystanders). However, Laing's intent and memory are not necessarily the most accurate depiction of the situation.

As momentum gathered within this already chaotic and disorganised community, Kingsley Hall seemed to mimic the lost island depicted by Golding's (1954) *Lord of the Flies*. Against and without the support of his founding colleagues, Laing's ethos and theory shifted towards the 'psychotic voyage' associated with his Transcendental Experience theory, professing that the psychotic process could be a gateway to a new dimension of enlightenment. Laing

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<sup>16</sup> I think it necessary to address this notion of 'free', so as not to create or allow misdirection from the outset; all therapists worked on a voluntary basis (Burston, 1996) but this was a fee-for-service arrangement (Sedgwick, 1982). Even though the fee was a collective responsibility and not for profit (Schatzman cited in Boyers and Orrill, 1971), there was still a cost implication.

<sup>17</sup> The importance of this event is addressed in Chapter 11, *The Political*.

seized absolute control through charisma, theoretic might and intimidation: qualities he held in abundance.

Clancy Sigal was the first member of the PA to leave, becoming disillusioned with Laing's growing mysticism, self-absorption and dictatorial approach. Sigal's resentment came to light in his 1976 book *Zone of the Interior*. Whilst stated as fiction,<sup>18</sup> it is widely regarded as a parody, a caricature, of the actual events which unfolded during his time at Kingsley Hall and in Laing's company. Willie Last and Ronnie Laing, Kingsley Hall and Meditation Manor, and the PA and Clare Council, are virtually inseparable (Burston, 1996). Gordon (1972, p. 64) refers to Laing as the 'Knight of Kingsley Hall' and, as with all good sarcastic quips, the intended humour of this comment is captured in its proximity to the reality. Fused with his growing guru-celebrity status within the counterculture, these accounts seem to support this image. This certainly rings true with the way Mary Barnes, in her account as a resident in this community, paints her picture of Laing (Barnes and Berke, 1970). Laing's prominent role was divisive and his move towards mysticism – the psychotic voyage – compounded that notion.

Within Kingsley Hall, utopian optimism was descending into dystopian reality. Any sense of structure, particularly at the request or suggestion of the other resident psychiatrist Esterson, was met with increasingly greater friction and hostility. Esterson, whilst accepting or more flexible towards the growing mysticism than other colleagues, was so perturbed by Laing's drug use, whether argued as therapeutic or not, and the increasingly disordered state within the community, that he questioned Laing's approach. This did not go down well, ultimately resulting in a scuffle with punches thrown and Esterson withdrawing from the PA in 1968 (his colleague Churchill joining him soon after). The proclaimed organic, non-hierarchical structure fundamental to Laing's vision of Kingsley Hall had changed.

Being the skilled politician that he was, Laing was playing favourites within the house, shifting his attention between individuals depending on what advantage they provided and what support he personally required. Residents were trying to outdo each other in the madness stakes, one-upmanship, feeling as if only those at the far reaches of the spectrum were gaining much sought-after attention (Burston, 1996). A former resident, Francis Gillet, stayed at Kingsley Hall between 1966 – 70 and during an interview with the Guardian newspaper (2012) stated:

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<sup>18</sup> A detail Clancy admits in the 2005 preface as protection against legal repercussions and libel.

Ronnie said, "Go mad, young man", and I did. I took him at his word, and I went as mad as I possibly could, and at no time did he try and stop me.

Those who opposed Ronnie were shunned but, likewise, those who supported him were often sharply curtailed for being sycophantic (Burston, 1996): a desperately unfavourable characteristic in Laing's eyes (Guy Thompson, 2015). Laing's physical position at the head of the table no longer seemed organic or innocent, his dictatorial approach was coming more strongly into focus. Short of residents chanting 'Kill the pig' and stealing Esterson's glasses (as per the climatic scenes of *Lord of the Flies*), the house seemed to be somewhat out of control and so did Laing. The house was becoming divided with a situation Burston (1996) describes as being like sibling rivalry. Added to this, any organised and structured form of therapy was drifting by the wayside – argued as being coercive towards adopting more typical or socially acceptable behaviour (Crossley, 1998). We can see where the collective conditions begin to support Redler's insistence that this was experimental, rather than a therapeutic community.

Despite his unpredictable style of leadership, Laing's charismatic presence had been vital to sustaining the fragile sense of cohesion that united this motley group of people. (Burston, 1996, p. 87)

After a relatively short period, Laing vacated Kingsley Hall in December 1966 and moved into a private residence with his new partner, Jutta Werner. At this point he undertook a more supervisory role at Kingsley Hall, delegating responsibility to Berke, Schatzman and Redler: three members who were gaining recognition within the Antipsychiatry Movement and importantly, were supportive of Laing's Transcendental Experience approach (Burston, 1996). Whilst Laing claimed that he maintained an active and full participation with the PA and Kingsley Hall after his departure (Mullan, 1995), Burston (1996) questions this, stating that his role fundamentally became about listening to the woes of the 'over-taxed' therapists, being more than prepared to send them back into the fray armed with nothing more than a pep talk (a skill, he was more than adept at). Laing admits that he no longer possessed the stamina to give Kingsley Hall the commitment it required and, as he faded, so seemingly did the sense of cohesion within the community and brotherhood (Mullan, 1995).

The importance of Kingsley Hall to the PA and Antipsychiatry Movement cannot be over emphasised. Effectively, it was only a rented property for the PA, leased for a relatively short duration of 5 years in what is now a 52-year lifespan, but it remains a fundamental part of its legacy. The PA has moved forward since this community, evolving and learning

(significantly) from this period, but it still retains a proud affiliation with Laing and the brave, bold experimental community that took place here. For the Antipsychiatry Movement, Kingsley Hall remains the focal point by which it is explained, understood and critically evaluated.

More than any other member, it is Laing who is associated with Kingsley Hall, and Kingsley Hall with Laing. And reflections on Laing, newspaper articles, films, and certain secondary sources, direct so much focus towards Kingsley Hall that Ronnie comes to dominate the entire representation and reflection of his theory. The sensationalism of his antics – the LSD, the alcoholism and the celebrity parties including bare-chested Indian wrestling with Sean Connery no-less (Paton, 2015) – is easier and more tempting for accounts to focus on than it is to rest on the substance of his theory and practice.

The book about Kingsley Hall is the one book we should regret Laing never wrote. (Kotowicz, 1997, p. 87).

Brown (1973, p. 65) speaks of a 'certain utopianism that cannot be translated into words' regarding Kingsley Hall and whilst this offers some justification for Laing's lack of writing on it, it fails to account fully for it. In Laing's transcripts with Mullan (1995), the underlying momentum seems more viably burnout and loss of interest. Pickering (2015) outlines that even though a prolific writer, Laing was fonder of the performance than the written format and for this reason, secondary sources provide vital insight into his undocumented practice: most prominently, his practice at Kingsley Hall.

In the absence of this book, however, rumours, scandal and mythology run rife. Clancy Sigal's 1976 story *Zone of the Interior* and the recent film *Mad to be Normal* (2017) become examples of the fictionalised reference points by which we claim an understanding of Ronnie and for many, his theory (unfortunately). Whether written during the 1960s, 1970s or since, secondary texts and theoretical responses seem to amplify a polemical position, adulation or attack. And the volume of attention becomes directed toward justifying him as a saint or the devil. Snippets of insight can be gained through interviews, articles and chapters directly involving Laing but these remain brief at best; I would argue that all they reliably evidence is that Laing was a divisive character. It is easy to see why 'mental health' professionals would distance themselves from him.

Ronnie was the person to create the necessary hype around his theory, generating the gravitational force which consolidated the organisations, brotherhoods, and persuaded

external bodies to invest.<sup>19</sup> Conversely, no-one would deny he was a flawed individual and his professional conduct requires more than a little re-evaluation. However, the substance that brought him to prominence, which provided the springboard for the Antipsychiatry Movement, the backbone for the PA and the inspiration for Kingsley Hall, was R.D Laing's work as a theoretician. Ronnie provided the ultimate ringmaster to this theory, stirring up energy, interest and support with his intoxicating manner. But unfortunately, this was a double-edged sword, also being the reason for a question mark placed over his professionalism and therefore the respectability of the theory. Laing possessed flaws and genius in spades and my own opinion is that neither aspect cancels out the other. Ronnie was a powerful personality and this personality was instrumental to the success of his theory. But his personality cannot be considered the representation of his theory – and unfortunately, too easily this reduction is made.

The different tack employed in this thesis, that aims to reconsider the potential for Laing in our current 'mental health' crisis, is to invert the trajectory of attention that gravitates toward his personality and the associated scandal and mythology, prioritising his written word and developing a contrapuntal reading for now. However, this is far from a simple and straightforward description of theory. If Ronnie caused controversy in person, his theory, reaching a far wider audience, was operating on a different level.

## R.D. Laing

I now had a life out there as R.D. Laing. It was a completely other frame of reference.  
(Laing 1988, cited in Mullan, 1995, p. 337)

The perception of a duality to his existence was not lost on Laing, with him reflecting on the theorist R.D. Laing as a separate reference to the person he felt he was (whether the person 'he felt' was the 'Ronnie' depicted by others and addressed previously would be an investigation worthy of his 1966 publication *Interpersonal Perception* but suffice to say that he, 'Ronnie' or not, thought of R.D. Laing the theorist as a separate entity to his self). I now continue this divided character theme with a synopsis of R.D. Laing the published theorist, providing a distinction from his 'Ronnie' persona and a foundation justifying his writing as the

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<sup>19</sup> It was ultimately Muriel Lester (joint owner of Kingsley Hall) and her direct support for Laing, which swung the balance towards the PA and allowed them to take charge of Kingsley Hall for a symbolic lease of £1 per annum (Burston, 1996).

source by which to focus the primary theme: the cause of psychic suffering in the current context.

Fourteen books were authored and co-authored by R.D. Laing: eight published in the first phase of his career (1960 – 70) and the remaining six in the second (1976 – 85). A high publishing activity with journal articles, edited chapters and forewords was also maintained throughout yet the most significant attention is always directed to the *New Left Review* (*NLR*), not for its content but the perceived political intent underpinning his decision to publish with this New-Left format.<sup>20</sup>

1960 – 1970 is undoubtedly the most popular period, both from a sales and impact perspective (Crossley, 1998). This first publication phase marked the most active and productive era of Laing's career, publishing more works and to greater critical acclaim than any other time. This time saw the publication of: *The Divided Self* (1960); *Self and Others* (1961); *Sanity, Madness and the Family* (1964 – with A. Esterson); *Reason and Violence: A Decade of Sartre's Philosophy* (1964 – with D. Cooper); *Interpersonal Perception: A Theory and a Method of Research* (1966 – with H. Phillipson and A. Lee); *The Politics of Experience and the Bird of Paradise* (1967); *The Politics of the Family and Other Essays* (1969) and *Knots* (1970).

Starting with *The Divided Self*, Laing's first solo effort which was published in book format and widely regarded as his seminal piece, is the foundation on which all his subsequent books were built (specifically within the first phase of publications) and viewed as the unifying text within the Antipsychiatry Movement (Burston, 1996; Sedgwick, 1982; Mullan, 1995, Kotowicz, 1997; Coppock and Hopton, 2000). In short, this text epitomises R.D. Laing. For this reason, although not his actual first publication, it marks the inception of R.D. Laing the published entity and will continue to play a pivotal role in developing a Laingian theory in the following chapters. This demarcates the beginning of Laing's first phase of publishing: a phase that encapsulates the working duration of the Kingsley Hall community (1965 – 70), a political involvement with the counterculture and ends with publication of *Knots* (1970). Such was the furore surrounding Laing during this period that when he published *The Politics of Experience and The Bird of Paradise*,<sup>21</sup> and *Knots*, they became best sellers through anticipation alone (Crossley, 1998). This was a time of hype and activity, personality propelling his theory and vice versa, but it was also an era of greater cohesion and focus

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<sup>20</sup> See *Appendix 1* for a chronology of publications.

<sup>21</sup> This is more commonly referred to as *The Politics of Experience* and will be addressed as such moving forward.

within his application. His early work focussed on the experience of the sufferer in a variety of contexts (medical, familial and political). This is widely regarded as his career-defining era (Sedgwick, 1982; Kotowicz, 1997; Crossley, 1998).

The second phase to his career follows the publication of *Knots* and begins with his sabbatical in 1971 – 72 when Laing journeyed to Ceylon<sup>22</sup> and India to pursue his interest in yoga and meditative practices. This hiatus finished with a series of publications in 1976. His return was defined by a significant change in his theoretical focus, retaining an undercurrent of ‘mental health’; the interpersonal context was replaced with intrauterine experiences – how experiences from conception to birth impact on lasting ‘mental health’ (Kotowicz, 1997). Laing reflected in later interviews that although his approach had changed, he felt the ultimate focus of ‘mental health’ had been retained throughout (Mullan, 1995). Unfortunately, this sentiment was not echoed by his readers and for all but the most hard-line supporters, this shift was perhaps a step too far (Sedgwick, 1982). That is not to say that his writings post 1976 were devoid of quality or completely divorced from his previous works: threads of consistency are evident throughout the entirety of Laing’s body of work (Burston, 1996). But post 1976, his books no longer held that same connection with contemporary culture. Certainly, the thematic fit between Laing with the counterculture, connecting ‘mental health’ with the wider political infrastructure, had dissolved (Crossley, 1998; Kotowicz, 1997; Guy Thompson, 2015).<sup>23</sup>

It is the first phase of publishing, between 1960 – 70, that provides the parameters to this research, deemed to be the most insightful, focussed, and valuable. The second phase is not dismissed but addressed sparingly to emphasise and develop clarity to this earlier work.

Addressing R.D. Laing’s theory in isolation from his personality ‘Ronnie’, the writing being separate from the writer, is aimed at negotiating much of the scandal and mythology associated with Laing’s reception. However, as we explore and analyse the published identity of R.D. Laing the divisive nature of his theory is brought into focus – we begin to see that it was not just ‘Ronnie’ that was a polemical character. Unlike the hearsay and (potentially) distorted recounts of Ronnie’s behaviour, staying focussed to his written word provides a fixed point to anchor this analysis.

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<sup>22</sup> Ceylon is the colonial name still in use at the time of Laing’s visit, now known as Sri Lanka.

<sup>23</sup> One could cynically question whether this was a further calculated act. Laing’s relevance seemingly being tied with the counterculture, as the counterculture faded maybe the intrauterine focus was his own attempt at a professional rebirth.

On occasion, his writing is also subject to scandal and mythology: some warranted and some incurred through vagueness, or rather perceived vagueness, which enables controversy to be injected into his theory. Much of this can be discussed and even mitigated with reference to his entire body of theory; however, where justified gaps remain, they subsequently invite question and a further analysis of Laing's theoretical influences is required. Laing is famous for the extensive nature of his reading and grasp of theories and an analysis of his influences risks falling into another deep and eclectic rabbit warren. This will not be purely an analysis of Laing's philosophic influences (amongst many other texts Howarth-Williams, 1977; Collier, 1977, and Beveridge, 2011, provide an extensive view of this) as this thesis is tasked with addressing the influences that enable us to identify the operational framework of his theory which can exist in a structural way and be applied to the experience of psychic suffering in our current situation.

Before we progress into Part 2 and start to develop and understanding for Laing's theoretical framework, Chapter 4, *Laing, Psychiatry and Resistance* explores the rationale underpinning Laing's theory in more depth.

## 4. Laing, Psychiatry and Resistance

[T]he theory of man as person loses its way if it falls into an account of man as a machine or man as an organismic system of it-processes. (Laing, 1960, p. 23)

The rationale underpinning Laing's theory is outlined in the above quotation, with Laing proposing that modern psychiatry is founded upon an epistemology that determines persons as a 'machine' or 'an organismic system of it-processes'. This proposition is paramount for developing the central argument throughout this thesis that modern psychiatry, and its cultural influence, is responsible for enacting existential violence upon those its discourse comes to define, furthermore qualifying the value of Laing's alternative theoretical framework to provide a solution.

The definition of modern psychiatry that supports this proposition was outlined in the previous chapter but remained unchallenged. Instead it provided a fixed point by which to juxtapose the potential need to reconsider Laing's theory. In this chapter, we explore the vision of modern psychiatry that Laing uses to qualify his proposition across four intersecting contexts: *Modern Psychiatry and Laing*, *Voices of Resistance*, *Modern Psychiatry Post-Laing*, and *Service User Movement*.

Modern psychiatry is defined in this chapter through an exploration of influential thinkers between the turn of the 19<sup>th</sup> century and 20<sup>th</sup> century, with Philippe Pinel and Emil Kraepelin presented as the most significant shapers of the epistemological landscape of 'mental illness'. Highlighting the central epistemological thread within the development of modern psychiatry, a question is posed as to whether Laing's proposition is revolutionary within the history of modern psychiatry.

Surrounding Laing's first phase of publishing, several notable theorists also voiced criticism and resistance toward modern psychiatry. Many of these voices are used throughout this thesis to contrast with Laing's theory and define his theoretical structure. However, collectively they also depict a landscape of critical thought within and against modern psychiatry which erupted at this juncture. The question explored here is whether Laing's proposition made a unique contribution.

Post-Laing two methods have established themselves as the primary treatment arms of modern psychiatry and contributed significantly to its governing epistemological structure:

talking therapy and drug interventions. Each of these treatment strategies were in application prior to Laing's arrival; however, focussing primarily on their contribution to modern psychiatry since the 1960s, we ask whether Laing's ideas retain continuing value.

The final section draws the service user movement into discussion, considering how their influence and authority within the contemporary mental health scene affects the usefulness of Laing's primary proposition. This movement differs from previous sections in that it approaches mental health treatment from the perspective of those typically referred to as 'patients'. As a movement that has increasingly established itself since Laing and occupying a structural position within policy making initiatives, it provides a context through which to consider how Laing's proposition complements or contrasts with the contemporary scene.

## Modern Psychiatry and Laing

This section provides a brief overview of the development of modern psychiatry, focussing from an inception point with Philippe Pinel's treatment of those that would now be deemed 'mentally ill' to Emil Kraepelin's consolidation of a psychiatric discourse. These figures do not provide an absolute point of origin, or an end of psychiatric history, but rather punctuate key moments that consolidate the trajectory of modern psychiatry. This selective history emphasises a central backbone of modern psychiatry and provides a contextual backdrop by which to consider the justification for Laing to assert that psychiatry was detrimentally defining *man as a machine or man as an organismic system of it-processes*.

The term 'psychiatry' was first used by Johann Christian Reil in 1808 to define the growing medical scientific approach to matters of insanity (Chase, 2018). Rallying against the chains and dungeons synonymous with the 'supernatural, diabolical or divine' medieval treatment of madness (Porter, 2002, p. 123), Pinel (1801) published *A Treatise on Insanity*, a pivotal influence at the turn of the 19<sup>th</sup> century that argued for the greater efficacy and necessary morality in the humane treatment of those who would now be deemed 'mentally ill'. Half a century later Daniel Hack Tuke (1854) published *Moral Management of the Insane*, which strengthened the values of this approach further. Collectively these influence carried across the Atlantic with Dorthea Dix inspired by their work (Chase, 2018); humane treatment was taking hold within the treatment of madness.

Although advocating humane treatment, the respective approaches of Pinel and Tuke differed significantly, highlighting a theoretic cleavage that has long dominated approaches

to 'mental illness', a cleavage that has existed prior to, throughout, and post the transition to modern psychiatry.

The debate about the mind versus brain is a recurrent theme in the history of psychiatry. It began with Plato and Hippocrates, continued into the nineteenth century, and remains with us today. (Chase, 2018, p. 34)

Pinel and Tuke are two exemplars of this question: where do we locate the experience of psychic suffering, within the mind (Plato and Tuke) or the body/brain (Hippocrates and Pinel)? This binary isn't quite as simple as it may appear and as we progress, a more complex dynamic for each position becomes apparent. Tuke's (1854) moralistic rationale located psychic suffering within the mind and retained a religious component with undertones of a soul. Pinel (1801), in contrast, held causation to occur as a result of bodily illness; he didn't dismiss the notion of a mind, but rather located the mind as a constituent component of the body. These approaches fall on opposing sides of this longstanding divide: *mind versus brain*, or more accurately, a mind independent of body versus a mind intricately bound with body.

Both were instrumental for introducing humane treatment into the world of 'mental illness', but it is Pinel whose influence becomes paramount in the history books, and this provides the first waypoint in our journey through modern psychiatry.

Pinel's influence and authority is accounted to his development of clinical observation for the study of 'mental illness'. Mirroring a medical methodology, Chase (2018) outlines that this approach developed a more organised, even reliable and accurate, understanding for those deemed 'mentally ill'. He was far from the first to offer a classification and diagnostic criteria,<sup>24</sup> but Pinel's definitions of 'mania, melancholia, dementia and idiocy' (Chase, 2018, p. 29), became a benchmark in defining and identifying different types of psychiatric illnesses.

A subtlety that resonates within Pinel's reception is the cross fertilisation of a medicalised approach and humane treatment, which seemed to propel the perceived authority of modern psychiatry. However, an important caveat exists to this implied connection; unlike Tuke, Pinel was not opposed to the more draconian measures that were previously commonplace, but rather he believed the more medieval methods should only be followed once the humane

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<sup>24</sup> As discussed in Chapter 2, *Why Now*, 'nosology' extends back thousands of years.

avenues were first exhausted (Chase, 2018). Pinel's ethos was unquestionably governed by perceived treatment efficacy, over and above any notion of ethical responsibility. I suggest this subtle yet definitive characteristic continues to reverberate beneath the surface of modern psychiatry. Disturbance of the mind is located in the illness of bodily organs; treating it as such promotes an ethical treatment of suffering and persons. Likewise, in reverse, ethical treatment becomes the lubrication by which a scientific medicalisation asserts itself upon an epistemology of the self.

Jumping ahead to the mid 19<sup>th</sup> century, a sudden, unexpected, and unexplained increase in the reported incidence of 'mental illness' affected Europe and the US.<sup>25</sup> In the face of increased demand placed upon facility admissions, the pioneering work of Pinel began to waver and older methods started to return. Wilhelm Griesinger, a German psychiatrist, however, was an important force in resisting this and maintaining Pinel's trajectory. In *Mental Pathology and Therapeutics* (1845) Griesinger reaffirmed – and progressed – the need for psychiatry to be pursued under humane ethics and with equal scientific rigour to any other matter addressed within medicine. Advocating and developing a structured, empirical, scientific, medical, investigative methodology for 'mental illness', Griesinger's approach was instrumental for connecting and isolating the brain as the organ responsible for 'mental illness' (Chase, 2018).

Griesinger's early insights into this neuroscientific domain were crude and ultimately incorrect, but his hypothesis of the brain housing the mind, was a monumental event in the trajectory of psychiatry, and a significant driver for concretising the organismic origin for 'mental illness' (Morrall, 2017). Griesinger's (1856) publication, and wider theory, reads as an intensification and amplification of Pinel's earlier work; wrapped within a cocoon of humane treatment, the intensification of empirical scientific principles in the approach to 'mental illness' gathered momentum. But like Pinel, although his work is couched in the frequently repeated attribution of humane treatment, we see the same lack of ethical duty. Humane treatment was engaged with as a pragmatic and calculated approach, enacted for better treatment outcomes but the more draconian methods remained in his arsenal (Morrall, 2017).<sup>26</sup>

At the turn of the 20<sup>th</sup> century, the forefather of modern psychiatry, regarded by many as the most important psychiatrist to have ever lived, is introduced, Emil Kraepelin (Beveridge,

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<sup>25</sup> Foucault will add a different theory to this 'unexplained' event later.

<sup>26</sup> This is not the extent of Griesinger's contribution to psychiatry. As we will see shortly, a social responsibility and consideration within 'mental illness' was engaged.

2011). Fully invested in the biological cause for all major 'mental disorders', Kraepelin recognised that before biological aetiology could be pursued within science, a standardised classification system needed to be employed (Morrall, 2017).

In 1904 Kraepelin published *Lectures on Clinical Psychiatry*. This collected work provided a framework for psychiatrists, and all practitioners in this field, to justify and undertake clinical investigation of psychiatric subjects and thus enable a 'concretising' of the nuances of experience that constitute 'mental illness' and 'disorder'. Taking what was previously deemed speculative and broad assertions with little solid evidential grounding, Kraepelin's work established a standardisation and expansion of diagnostic categories through empirical observations (Chase, 2018).

Kraepelin's ideas concerning neuro-pathology have much in common with biological research into causation and pharmacological treatments of the late-twentieth century onward. (Morrall, 2017, p. 54)

Kraepelin's (1904) dedication to clinical investigation and his creation of an early diagnostic criterion can be seen as *the* defining moment within modern psychiatry, a critical moment within the treatment of 'mental illness' that remains with us today. Kraepelin effectively sketched a blueprint for what would become the DSM and ICD. Whilst there is no suggestion that his work marked the end of history for the scientific medicalisation of 'mental illness', his theory crystallised and clarified the trajectory of influences such as Pinel and Griesinger and provided a clear roadmap to be followed.

Given the high esteem that Kraepelin's work held within the development of the medicalised scientific approach to 'mental illness' that defines modern psychiatry, it is little wonder that Laing (1960) had an extensive critique to level at Kraepelin's depersonalising, positivist methodology and the detrimental impact this had upon the psychiatric field he was operating within.<sup>27</sup> But of importance for this chapter, Kraepelin is presented by Laing (and several other historians of psychiatry – see Chase, 2018; Porter, 2002; Beveridge, 2011) as *the* major player responsible for collating the insights of earlier psychiatrists and gelling their theories into a cohesive framework, concretising an epistemological trajectory that determines persons as a 'machine' or 'an organismic system of it-processes'. Against this

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<sup>27</sup> Chapter 5, *A Laingian Methodology* analyses the contrast of Laing's methodology to the discourse of modern psychiatry. For a specific comparison and critique between Laing and Kraepelin, see Beveridge, A. (2011) *Portrait of the Psychiatrist as a Young Man: The Early Writing and Work of R.D. Laing, 1927 – 1960*.

backdrop, to borrow the highly contentious term coined by David Cooper, Laing's theory was truly 'antipsychiatry'.

However, although each figure contributes to a picture that illustrates a scientific evolution that defines the backbone of modern psychiatry, increasingly focussing upon an organic concept of 'mental illness' located within the brain, it is achieved through a selective emphasis on events, psychiatrists, and their contributions. Whilst I argue that this remains an accurate representation of the central line of discourse within modern psychiatry upon Laing's arrival (and continuing beyond), to position Laing's theory more accurately, we need to consider the wider, fuller picture. And this includes acknowledging the contributions of psychological and sociological theory within the psychiatric field.

From the emphasis of influences so far, the longstanding battle between Hippocrates and Plato is seemingly resolved; by the turn of the 20<sup>th</sup> century, let alone by the time Laing produced his seminal text, *The Divided Self*, in 1960, the mind had become fully embedded within the brain, Hippocrates seemingly the victor. But this ignores a major influence developing in parallel with Kraepelin that also had a significant impact on the shape of modern psychiatry.

Rejecting the dogmatic medicalised scientific charge, Sigmund Freud contributed an alternative approach to 'mental illness'. Much like the developments within the biological domain, Freud was building on an existing foundation. In the late 18<sup>th</sup> century, Franz Anton argued for a psychologised approach that attributed madness to blockages in the flow of animal magnetism between persons (Porter, 2002), a century later Jean-Martin Charcot, Freud's mentor, a neurologist was developing hypnosis in this same field (Morrall, 2017).<sup>28</sup>

Freud's influence, more so than his predecessors, was paramount in resisting an unrelenting consumption of 'mental illness' within biological psychiatry and its collapsing of the brain/mind into a singular entity (Chase, 2018). Freud's psychological approach ensured the mind remained firmly in contention for psychiatry, until the development of, and exclusion of psychoanalytic thought from, the DSM 3 in 1980.<sup>29</sup>

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<sup>28</sup> Both of these approaches are discussed with an element of derision, even mockery, in the sources addressed, an outcome perhaps for the perceived greater authority we find ourselves invested in the biological trajectory.

<sup>29</sup> The influence of psychoanalytic theory significantly deteriorated with the publication of the DSM-III in 1980, this change is referenced in Chapter 2, *Why Now*.

If we are to present Laing's philosophical approach as psychological, as per Freud – the influence of Freud being strongly felt within *The Divided Self* – and the role that the Freudian notion of an inner world plays within Laing's theory of self, we must also recognise its sizeable theoretical departures. The intricacies of these theoretical differences are woven throughout this thesis, but the impact of the social order, specifically within psychiatry's context, requires attention. The social, much as the psychological, has an integral part to play in the development of modern psychiatry. Laing (1966) criticised psychoanalysis for the absence of any discernible social component and emphasised the importance of social factors with equal vigour to psychological ones; but he cannot be considered the pioneer of social analysis within modern psychiatry.

This social thread can be identified for hundreds of years (Porter, 1987; 2002) but to anchor its relevance firmly within the framework for modern psychiatry, it is worth returning to Wilhelm Griesinger. Whilst instrumental in developing an organic premise for 'mental illness' and instigating the medical focus on the brain, Griesinger also acknowledges the significance of the interplay of the individual within society for the aetiology of 'mental illness' (Morrall, 2017). The brain might have been the ultimate location where 'mental illness' was believed to reside, but the role of society in causing brain illness retained value and importance in his research.

In the mid-20<sup>th</sup> century, Harry Stack Sullivan continued the fight for greater social consideration in mainstream psychiatry and controversially rejected the increasingly neurological trajectory developing.<sup>30</sup>

Sullivan had maintained that the close relationship between psychiatry and neurology was a false one, that it was a *misalliance*. The proper subject for psychiatry was disturbances in living, manifest by disturbances in interpersonal relationships. (Beveridge, 2011, p. 92)

The similarities between Sullivan and Laing come to the fore in this quote,<sup>31</sup> but the point to take is that Sullivan, a prominent psychiatrist,<sup>32</sup> was clearly distancing himself from diagnostic classification and its attempts to correlate neurobiological concepts as a means of

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<sup>30</sup> Laing references Sullivan's work directly in *The Politics of Experience*. In this title he critiques Sullivan for not respecting or valuing the insight of the psychotic with sufficient value.

<sup>31</sup> Beveridge (2011, p. 93) continuing that 'Sullivan anticipated, if not directly influenced, many of Laing's key ideas'.

<sup>32</sup> His involvement with the American Psychiatric Association (APA) committee, is testament to the respect his theory wielded within the psychiatric profession.

understanding 'mental illness' and was instead advocating the significance of negative experiences that occur within the social environment (Beveridge, 2011). Reaching across the Atlantic, Pearce and Haigh (2017) state that the seeds of social psychiatry (sown by psychiatrists such as Sullivan), saw rapid growth in the 1950 – 1970s and since then figures such as Laurence Hartmann have continued to fight for greater consideration of social factors within the discourse of psychiatry.

An accurate picture of modern psychiatry needs to include the acceptance and establishment of approaches counter to the prevailing neurobiological dominance. Sullivan highlighted the need for social theory to be considered within psychiatry, and furthermore, Freud established a structural place for psychoanalytic concepts within psychiatry.<sup>33</sup> However, although these influences are evidently present, with the benefit of hindsight, we know that these alternate approaches have been unsuccessful in changing the course of mainstream psychiatry. Modern psychiatry remains increasingly biologically reductive.

When Laing's theory arrived on the scene, psychological and social concepts were not absent from modern psychiatry, but the wheels set in motion by Pinel, more so with Griesinger, and concretised by Kraepelin were coming to fruition. Modern psychiatry saw 'mental illness' as a product of the brain and the array of treatment strategies administered most frequently and commonly reinforce this premise. The battle within psychiatry was clearly being dominated by the Hippocratic camp, but as Freud's and Sullivan's input evidence, aspects of Plato's argument were still in the fight and the debate about the *mind versus brain* remained alive.<sup>34</sup>

Laing was, in fact, participating in a long tradition of debate about the nature of mental disturbance ... between the belief that madness is a result of brain disease and the belief that it is a psychological or spiritual problem. (Beveridge, 2011, p. 64)

Laing's relevance in the 1960s is not that he was the first to voice rejection of the reduction of the person to a machine or a collective of it-processes, as this was long encapsulated within the *brain versus the mind* debate, but rather he appears to appreciate its importance

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<sup>33</sup> Harry Stack Sullivan and Lawrence Hartmann were both psychoanalytic practitioners.

<sup>34</sup> Chase (2018) depicts Kraepelin's focus with a different emphasis to those in the other sources addressed here. He states that Kraepelin 'bought into Griesinger's argument that mental illnesses must, somehow, be brain illnesses, but he doubted that neuroanatomy could provide all the answers.... consequently, he thought a lot about the mind ... he thought much less about either the soul ... or the brain' (Chase, 2018, p. 79). Presented within a context that science could not yet reach the lofty ambition of psychiatry, even within Kraepelin's work alone we see that the debate for the *mind versus the brain* was alive.

at a pivotal moment, revitalising the need to reopen this discussion. The 1950s and 1960s were a consolidating moment in the history of modern psychiatry, the scientific means of understanding the self fusing with the development of the DSM / ICD<sup>35</sup> becoming a cultural anchor to standardise and universalise psychiatry, and the people caught in its grasp. The discourse of modern psychiatry may not have been perfectly refined, but the writing was on the wall, and Laing seems to have been one of those who noticed. Modern psychiatry was consolidating its position as the absolute authority over the self.

## Voices of Resistance

Pausing for a moment to take stock of Laing's arrival, Peter Sedgwick (1982, p. 3) states that during the 1960s and 1970s a revolutionary move was witnessed within and against psychiatry by several 'ideological celebrities'. Stating that Laing was one of many arguing for change and revisionist thinking, he highlights Goffman, Foucault, and Szasz as other voices of importance. Extending this further, I suggest that the inclusion of Bateson, Scheff<sup>36</sup> and Barton from this era also contribute further to a basis by which to contextualise Laing's contribution to, and against, psychiatry.

Many of the theorists, the ideological celebrities discussed in this section, provide a contrast to clarify the structure of a Laingian theory. However, each are landmarks themselves within a landscape of resistant voices that present critical thought toward the authority of psychiatry over the self. This section does not frame their theory through a Laingian lens, but offers brief insight into their main concepts, collectively mapping an ideological terrain of critical thought.

### Thomas Szasz, *The Myth of Mental Illness* (1961)

Mental illness is a myth. Psychiatrists are not concerned with mental illnesses and their treatments. In actual practice they deal with personal, social and ethical problems in living. (Szasz, 1961, p. 262)

Szasz produced a theory that challenged the structure of modern psychiatry. Publishing widely in books and articles, across a career spanning 60 years, he maintained a consistent

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<sup>35</sup> This is discussed in Chapter 2, *Why Now*.

<sup>36</sup> No less because Bateson is acknowledged frequently and Scheff also gains recognition within this era directly by Laing (see *The Politics of Experience*).

focus, delving deeper to support and strengthen a critique of the treatment of mental illness. Creswell (2008) states that the theoretical pillars that supported the entirety of his work, demonstrated profoundly in *The Myth of Mental Illness*, involved challenging the epistemology and ethics of modern psychiatry.

Szasz's epistemological challenge refused to accept that 'mental illness' existed. Echoing the title of his seminal text, he stated that 'mental illness' was not a 'fact of nature' but a 'man-made "myth"' (Porter, 2002, p. 1). It was proposed that the rationale for the creation of this myth was to control and coerce society into accepting prescribed moral norms (a premise shared with Foucault as we will see later). A central unifying theme underpinning his entire body of work, is that the term 'mental illness' is an oxymoron. *Illness* refers to something with a discernible (neuro)biological marker, but *mind* refers to an element of existence beyond a definitive bodily location. The term mental illness therefore becomes a metaphorical term referencing metaphorical forms (Morrall, 2017). Szasz was not opposed to the possibility of mental illnesses having a neurological origin, nor was he opposed to research driven toward this focus, but he said that without evidence, these experiences remained a matter of the mind, a problem of living rather than bodily illness (Szasz, 1960), an identification of aberrant behaviour (Moncrieff, 2008). There is a close proximity with Laing's position here – both questioning the notion that such a thing as 'mental illness' existed, qualifying this assertion on the lack of biological evidence available. This commonality can mistakenly lead to suggestions of more general compatibility. But, leading us into our next theoretical pillar, Szasz argued that we should not differentiate those identified, incorrectly, as 'mentally ill', and he accused Laing of continuing to promulgate a theory that maintained a process of othering these people. The intricacy of this will be drawn upon later within the thesis.

The ethical challenge Szasz levelled at psychiatry must be positioned firstly in the knowledge that he was not against psychiatry (reinforcing his absolute rejection of the term 'antipsychiatry'); rather he advocated the need for revision of its entire theoretical structure. Without a concretised location of biological illness within the brain, psychiatry needed to rid itself of the perceived need to be contained and recognised as an epistemological value authority within the natural sciences and instead respond to its true focus as a social science that attended to problems in living (Creswell, 2008).

Negating biological determinism and affirming the role of environmental factors in a person's experience of 'mental illness', Szasz argued that freedom of will and moral responsibility remained with the individual. This highlighted the ethical dilemma that modern psychiatry

failed; psychiatry should not possess the power and authority to compel patients to receive treatment, and this was Szasz's rationale to separate the state and psychiatry (Bentall, 2009).<sup>37</sup> Respecting the sufferer's autonomy, Szasz stated that the patient had the right to opt in or out of psychiatric engagement. Stressing this point further, Rose (2019, p. 174) states that from a Szaszian libertarian position 'those who clung to their illness label were malingers who should take responsibility for their own problems in living'.

Szasz and Laing were both highly vocal critics of the abuses that modern psychiatry inflicted through forced treatment methods. However, where Laing campaigned to eradicate many of these treatment strategies from use, Szasz wanted to ensure that their application was only administered with the consent of the person involved. For Szasz, empowering the individual to take responsibility for their decisions was fundamental.

Often discussed within the same context, Szasz and Laing were psychiatrists, both vocal for the need of revisionist thinking for the profession of psychiatry, and as highlighted in the brief examples of epistemology and ethics, although similar in certain respects, their theories interacted with significant friction (Bentall, 2009). This friction provides useful critical insights into Laing's theory and will be developed through this thesis, but we must recognise that Szasz's theory warrants independent recognition.

#### Scheff, Residual Deviance (1966)

Echoing the base premise of labelling theory developed in the late 1950s and continuing to operate under its name,<sup>38</sup> Scheff developed and modified its application to mental illness (Scheid and Brown, 2010). A primary component of this development was the identification of 'residual deviance'. Scheff (1966) stated that certain norms within a culture, norms learned and engrained throughout our most formative years, become absolute – taken for granted. These norms are later defined as a 'residual category' or rules:

If people reacting to an offense exhaust the conventional categories that might define it (e.g., theft, prostitution, and drunkenness), yet are certain that an offense has been committed, they may resort to this residual category. (Scheff, 1970, p. 15)

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<sup>37</sup> This feeds into the further belief that mental illness could not be used in mitigation for criminal activity (Bentall, 2009)

<sup>38</sup> For instance, Scheff, T (1974) The Labelling Theory of Mental Illness. *American Sociological Review*. Vol.39 (3), pp. 444 – 452.

Deviance from this residual category of norms is termed 'residual deviance' and relates to behaviours that unsettle more fundamental, unspoken agreements of normality, rules of normality which ensure security of comfort for those involved in a social encounter and context:

The typical norm governing decency or reality, therefore, literally "goes without saying," and its violations unthinkable for most of its members. (Scheff, 1966, p. 55)

Scheff states that violation of these residual rules is easily identifiable – behaviours that fall outside the parameters of an essential (sociologically determined) 'norm'. But, without a clear category to be arranged into, unlike 'crime, perversion, drunkenness, and bad manners' (Scheff, 1966, p. 55) – categories depicted in Becker's (1963) labelling theory, residual deviance falls into the fuzzy and blurred label of 'mental illness'. More than a standard label, mental illness creates a messy and unpredictable framework, preventing consistent codification (a point that further highlights the lack of objective reality to psychiatric discourse).

The most pronounced example of residual deviance, with clear violation of unspoken residual rules, occurs in those deemed schizophrenic. Reinforcing schizophrenia as the exemplar of ideologically determined categorisation (and therefore its cultural and historical inconsistency) Scheff (1970) argues,

[The] vagueness of the concept of schizophrenia suggests that it may serve as the residue of residues. (Scheff, 1970, p. 17)

Schizophrenia once again is presented beyond a deficit model of mental illness, furthermore as a social construct. Scheff therefore produces a sociological theory encompassing the cause and lived experience of mental illness. Mental illness, exemplified in the diagnosis of schizophrenia, is the product of deviating from, and continuing to exist beyond, socially prescribed norms. The judgement received for this deviance is enforced not only by society collectively, but by the individual themselves; I have crossed the lines of what is deemed acceptable, normal. The links between Scheff and Laing are not as tightly interwoven as with Szasz, but a thematic resemblance remains; mental illness is dependent upon culturally defined parameters of normality and not evidence of bodily illness.

Erving Goffman, *Total Institutions* ([1957]1961)

A TOTAL institution may be defined as a place of residence and work where a number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life.  
(Goffman, 1961, p. 11)

Developing the article, 'Total Institutions' between its earliest presentation in 1957 and its most prominent publication in 1961, *Asylums*, Erving Goffman, one of the century's most revered sociological researchers, drew attention to how 'total institutions' shaped a sense of identity. He listed several examples of these institutions: care homes, prisons, military bases, spiritual retreats, but for our purposes its impact resonated most significantly with the residential psychiatric ward. A total institution, fused with the universal qualities of authority, control and inflexibility, was described as enacting a 'mortification of the self'. The psychiatric ward being a total institution par excellence, ensures that what Goffman calls a 'mortification' process is enacted upon the patient (inmate).

On an initial level, Goffman's sociological insights for the total institution perform an intensified account of Becker's *Labelling Theory*. However, whilst the environmental conditions certainly do amplify the severity of the label assigned, this is only part of the mortification process. The mortification of the self that occurs within a total environment involves two processes: a killing of the pre-diagnosed, pre-detained (sectioned) self, and secondly a re-birth defined by the psychiatric diagnosis / label.

[The patient] begins a series of abasements, degradations, humiliations, and profanations of self. His self is systematically, if often unintentionally, mortified.  
(Goffman, 1961, p. 24)

With a weakened or even destroyed sense of self, the subsequent step of assigning an adapted, socially acceptable, identity can occur – conforming to self-stigmatisation, a negative master status label is acquired. Musicki (2018), writing in *Mad in America*, states that the relevance of this theory remains as pertinent in the 21<sup>st</sup> century as it did in the late 1950s and early 1960s.

Laing and Goffman produce distinct theories, but a thematic overlap can be seen. Goffman is referenced by Laing in both *The Divided Self* (1960) and *The Politics of Experience* (1967). In the latter title, he goes beyond a general appreciation for his sociological

underpinning of mental illness, and acknowledges the credibility of Goffman's research to identify the direct relationship between the context and behaviour of the person diagnosed.<sup>39</sup> Both appreciated the consequence a psychiatric diagnosis imposed upon identity, but where Goffman located this in the intensified occurrence within a total institution, armed with the same diagnosis / label Laing alluded to society itself being capable of systematically enacting an existential mortification of the self.

#### Russell Barton, *Institutional Neurosis* (1959)

Where Goffman provided a theory that compounded affects overlapping with labelling theory within the detrimental environmental conditions of the total institution, Russell Barton's (1959) *Institutional Neurosis*, focussed on the latter in isolation.

Institutional neurosis occurs when the original purposes of an institution are ignored, displaced by or subordinated to increasing preoccupation with the rituals or symbols of administration or wealth of that institution. (Barton, 1959, p. 75)

Barton stated that the conditions of living in a psychiatric ward caused a form of mental illness. Reflecting the title of his book, he stated that *institutional neurosis*, was the product of a lack of nurturing within the ward environment, severed connections from the outside world – including losing friends and personal possessions – brutal and dominant staff, enforced idleness, overzealous drug medication, all accumulating into a general deterioration in perceptions of one's own life prospects. The resultant mental illness echoed these conditions:

This is a disease characterised by apathy, a lack of initiative, loss of interest, especially in things of an impersonal nature, submissiveness, apparent inability to make plans for the future, lack of individuality, and sometimes a characteristic posture and gait. (Barton, 1959, p. 76)

#### Gregory Bateson, Palo Alto Group (1956 >)

Gregory Bateson, more so than any other voice of resistance included in this chapter, plays a direct and structural role within Laing's theory (this is addressed in detail in Chapter 12,

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<sup>39</sup> In the 2017 Aldinetransaction Edition of *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*, Helmreich's new introduction reaffirms the connection for Goffman and Laing, highlighting their similar aims to revolutionise our understanding of mental illness.

*Interpersonal World*). Bateson was the founding member of the *Palo Alto* group who were responsible for renewed thinking into psychotherapy. Drawing together eclectic research in cybernetics, zoology and anthropology, Bateson turned attention to the psychiatric field, and here made a significant impact (Bulle, 2008; Charlton, 2010). Focussing again on the most intense of psychiatric 'disorders', schizophrenia, Bateson and his research colleagues, stated that:

[The schizophrenic] must live in a universe where the sequences of events are such that his unconventional communications habits will be in some sense appropriate.  
(Bateson et al., 1956, p. 253)

The premise was simple, the 'unconventional communication habits' of the schizophrenic must make sense in their own world. Their hypothesis was 'to identify key aspects of the communicational and interactional pattern in relation to which the schizophrenic's own style of communication had been developed' (Jones, 2012, p. 123). The primary communicational and interactional pattern identified is Bateson's seminal contribution, the 'double bind' theory. The double bind describes a series of events, repetitively unfolding within an individual's experiential context, creating a situation where they are damned if they do and damned if they don't, they are caught within a reoccurring, emotionally charged, series of catch 22 situations (Bateson et al., 1956).<sup>40</sup>

Bateson's theory preceded Laing and has been widely influential. Laing's theory shares a heavy engagement with patterns of communication in interpersonal dynamics, and as with the others influenced by Bateson, Laing references Bateson directly, specifically the double bind theory, and this will be discussed throughout this thesis.

#### Michel Foucault, *Madness and Civilisation* (1965)

Bookending our 'ideological celebrities', Michel Foucault provides a significant departure from the other voices of resistance discussed so far. If an argument can be made that Laing is the most well-known critic of psychiatry, Jones (2020, p. 24) states that 'Foucault is perhaps the most influential critic of psychiatry'.

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<sup>40</sup> it can't be a coincidence that Hellier's (1961) fictional book, *Catch 22*, was published shortly after Bateson's double-bind gained such attention.

*Madness and Civilisation*<sup>41</sup> was published in 1961 and an English translation in 1965.<sup>42</sup> Although Foucault's focus on psychiatry was short-lived, this text being its primary instance, the essence of his insights reverberates through the entirety of his works and remain keenly felt in application to mental illness (Sheridan, 1980).

We must try to return, in history, to that zero point in the course of madness at which madness is an undifferentiated experience, a not yet divided experience of division itself. (Foucault, 1965, p. ix)

Leaving aside the glaring contrast to Laing, in terminology if nothing else, Foucault's comment in the preface provides the context by which his theory of psychiatry is formed. Through an historical analysis, Foucault passes by many of the same key influential thinkers (Pinel, Tuke, etc.,) used in the development of modern psychiatry earlier, and establishes a significantly different perspective to the rationale underpinning its formation.

Foucault's investigation examines a period that predates our own, but the turn of the 18<sup>th</sup> century retains emphasis as a crystalising moment in the role of modern psychiatry. Contradicting the trajectory of thought thus far, Foucault states that it is not science and humane treatment that stimulated the consolidation of modern psychiatry (Sheridan, 1980), but the necessity to seize 'freedom and control' through 'knowledge and power' (Rorty, 2002, p. 3).

The reason for segregating the mad and other 'social deviants' from the rest of the population ... was not ... to do with a humanitarian concern ... or medical attention ... it was so these social deviants could be better controlled by the state. (Morrall, 2017, p. 32)

Where once madness ebbed and flowed, undifferentiated within society,<sup>43</sup> at the start of the *Enlightenment* and becoming more focussed at the time of Pinel and Tuke, madness was met with a distinct cleavage; there were those that were mad and those that were not. He argues that this was not the product of scientific progress as the trajectory of modern

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<sup>41</sup> Its French title, *Folie et déraison: Histoire de la folie à l'âge Classique*.

<sup>42</sup> An abridged version was published in French, 1963 and in English, 1967. The English title, *A History of Madness*.

<sup>43</sup> Those that were deemed mad were not always accepted and were often shunned from the community, driven into alternate means of existence. However, neither was madness deemed an absolute condition or reserved to certain individuals within the community, it could affect anyone, for a bout or a lifetime (Sheridan, 1980).

psychiatry would have us believe, but rather an opportunity for the 'tyranny of reason' to preside over social deviance (Sheridan, 1980, p.12). Modern psychiatry established itself as an ideological tool to enforce 'rational thought and behaviour from people' (Jones, 2020, p. 25), a means to ensure that civilisation would accept the rule of 'reason', a definition that favoured the powerful, and a demonstration that those who failed to engage in this practice could, and would, be punished.

What we call psychiatric practice is a certain moral tactic contemporary with the end of the eighteenth century, preserved in the rites of asylum life, and overlaid by the myths of positivism. (Foucault, 1965, p. 276)

The 'fuzziness of psychiatric episteme' (p. 34) provided the perfect discourse to ensure that 'the moral threat of the mad to the emerging bourgeoisie' (Morrall, 2017, p. 64) could be controlled and the stratification of the emerging capitalist societies would be protected. In the process of dissecting madness and constructing its experience into ever more detailed categories of mental illness, the positivist charge which propelled modern psychiatry, tightened its grip as the perceived authority which instructs on rational modes of thinking/being. The ability to enforce this rational thought upon society, whilst most profound in psychiatry's power to confine those deemed deviant – a power that remains today with the legal authority to section patients against their will, Sheridan (1980) also outlines how this ideology was reinforced through treatment strategies, including psychological therapy. (The ideological component of talking therapy will be discussed in the subsequent section primarily through the theory of Rose, however it should be remembered that Rose declares his Foucauldian influence throughout his works.)

In his interviews with Mullan (1995, p. 204), although stating that he was the first to translate and publish *Madness and Civilisation* (World of Man series) with Tavistock Publications, Laing continued that 'nothing I've written has been particularly influenced by Foucault's sensibility'.<sup>44</sup> For Foucault, much like Szasz, the function of social control inherent within modern psychiatry is a major propellant to his work, and this also reverberates throughout Laing's theory.

Ultimately, Foucault's theory has proved greater in influence and longevity than Laing's. Foucault's impact can be attributed to its enduring political relevance (Parker, 2014) and the

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<sup>44</sup> Laing adds a caveat to this statement that Foucault's writing on the panopticon influenced his work in *The Voice of Experience* (1982). This book falls outside the research parameters of this thesis.

compounding nature of his theory – retaining theoretic continuity in applications with different social phenomena; his theory changed focus, but the insights gained in each of these areas continued to complement and positively reinvest in the overall theoretical structure of his work, this being highly evident in application to mental illness (Sheridan, 1980). These qualities are often perceived to be lacking in Laing (see Chapter 3, *The Dividing Character*). Arguably, Foucault's analysis of psychiatry, the reason it came to be and the function it serves, remain as applicable to contemporary society as they did when they were published in 1961 (as Foucauldians such as Rose, 2019, continue to demonstrate).

Each of the voices of resistance in this section help to illustrate a landscape of critical thought within and against psychiatry. Their individual positions may derive from different vantages, but they converge on the necessity to reconsider what constitutes mental illness, how we help those affected, and the role that psychiatry plays in their support and treatment – and oppression. Laing is shown in this section not to be the epicentre of critical thought on mental illness but, rather, one of several notable and influential theorists active during this time of consolidating psychiatric power (the formation of the DSM / ICD, increased neurobiological research, and the infancy of antipsychotic drugs etc). Laing's theory overlaps and utilises aspects from these alternative theories, but likewise it remains independent and unique, as do the others. As this thesis develops, the individual qualification and uniqueness of Laing's theory, against this backdrop of resistant voices, becomes more apparent and refined. What can be said is that the proposition of the mechanisation of the self, although compatible with aspects from several other thinkers, remains primarily and most vocally announced by Laing.

## Psychiatry Post Laing

Looking beyond Laing's arrival in the 1960s, two primary and contrasting means of treatment have dominated modern psychiatry, drug and talking therapy. In this section we do not focus on the efficacy of each treatment but how these contrasting interventions contribute to a theory of self, and without getting ahead of ourselves, promulgate a single, common trajectory within modern psychiatry.

### The Drug Revolution

The drug revolution benefitted psychiatry in many ways: ideologically, professionally and financially. (Davies, 2013, p. 214)

As with most aspects of modern psychiatry, pinning down an exact moment that a drug revolution began is contestable. Drugs have been used in differing capacities for hundreds, if not thousands, of years, but we see a significant moment occurring within the vicinity of Laing's arrival and continuing since.

Joanna Moncrieff (2008) states that the 1960s marked a distinct shift in the ethos underpinning drug administration with mental illness, a shift that punctuated the beginnings of a drug revolution. Gitlin (1990) locates this earlier in the 1940s by highlighting the role of lithium research and development in first phase antipsychotics (neuroleptics) medication. Nonetheless, Gitlin and Moncrieff's research support and converge with each other, outlining that drugs were previously seen as a means of mitigating the symptoms of mental illness, but following an intensified research, development, and administration process, drugs have been increasingly presented as possessing the capability to *cure* mental illness itself (Moncrieff, 2008).

The drug revolution gained further momentum in the 1990s with the development of SSRIs (selective serotonin reuptake inhibitors), specifically targeting the treatment of depression. Instrumental in evolving the drug response from uplifting to curing, SSRIs negated many of the side effects associated with antipsychotics, particularly synonymous with the earlier phases, and became the poster-drug that 'evidenced' mental illness as caused by chemical imbalances within the brain, and therefore qualifying drugs as the golden ticket to rectifying this biochemical fault (Davies, 2013).

The trajectory and intensity of drug research, and the voracity of treatment application, has developed in tandem with the intensification of neuroscientific research. This relationship has been instrumental in accelerating and concretising the brain as the focus of modern psychiatry (one could propose a realisation of Griesinger's work). However, there is something of an anomaly with this relationship and the support they provide to each other (and the broader focus of modern psychiatry). To appreciate this anomaly, we must briefly venture into the efficacy underpinning drug treatment.

It's important to note that, as with antidepressants, there is no research confirming that antipsychotics fix any known brain abnormality or that they 'rebalance' brain chemistry to some optimal level. (Davies, 2013, p. 288)

There is a clear discrepancy, contradiction even, at work here. Neurological research has failed to provide any conclusive evidence to support the notion that mental illness is caused

by chemical imbalances. Furthermore, the treatment of mental illness under this hypothesis of psychopharmacology is equally questionable. Rose (2019) states that short-term drug treatment may have some benefit, and Davies (2013) acknowledges this with antipsychotic drugs specifically – however both question the efficacy of prolonged use. Davies (2013) takes this further to state that drugs may even damage long-term mental health. Moncrief (2008) is perhaps the most direct in her book title, *The Myth of the Chemical Cure*, continuing that any benefits associated with drug treatment are derived from misdirection, positive results more likely a placebo effect (and / or a manipulation of subtle variables) and not rebalancing chemical imbalances.

With the question of efficacy hanging over drug treatment, why is psychiatry so invested in its use? This brings us back to the quote introducing this section, whether we align with a positive or negative efficacy of drug treatment, the benefits of the drug revolution are unquestionably *ideological, professional, and financial*. ‘Big Pharma’ is the term given to the corporate propulsion of psychopharmacology, an external influence within modern psychiatry that performs a cyclic process underpinning and driving the drug treatment approach. Pharmaceutical companies not only design and distribute medical drugs, but they also finance the research which evidences their efficacy; a conflict of interest at best, a means to enact bias at worse, either way medication prescription has the potential to be guided by profit margins rather than health achievement. This influence also affects our political landscape, Big Pharma being both a product of, and an influence for, the neoliberal agenda – contributing to and reinforcing the individualisation of society. Through its influence ‘mental illness’ is scientifically pursued as an individual responsibility – or rather, any responsibility or even consideration attributed to the political structuring of society is nullified (see Davies, 2013; Moncrieff, 2008; Bentall, 2009; Fisher, 2009; Watters, 2010); a consequence vividly illuminated in Mark Fisher’s *Capitalist Realism* (2009). As discussed earlier, an instance of the god-trick, fusing science and ideology within the structure of psychiatry.

The point to emphasise is that the drug revolution has bolstered the ideology that mental illness is an illness, located in brain chemistry. Thus, the drug revolution is also the brain revolution. Professionally it provides perceived scientific rigour and authority to psychiatry. And financially, the profits attained as a result are staggering. All these benefits are achieved, even though the evidence to support efficacy is sketchy, if not corrupt.

## Talking Therapy

Various forms of **psychotherapy** predated **psychoanalysis**, but Sigmund Freud's work offered a new form of therapeutic 'talking cure', which arguably shaped all subsequent forms of psychotherapy. (Marks, 2020, p. 79)

Discussion of the influence of Freud and psychoanalysis has been limited to its contribution in the DSM I and II so far, however we must not overlook its importance as a therapeutic treatment. In the following chapters aspects of many psychoanalytic concepts are discussed to position Laing's theory, but the emphasis here is specifically on two other talking therapies: the humanistic approach and cognitive therapy. Involvement for psychoanalysis, as a treatment for mental illness, started to dip as these other approaches established themselves. Marks (2020, p. 86) states that the fall from favour for psychoanalysis as a treatment intervention within mainstream psychiatry<sup>45</sup> was due to a multitude of factors such as indefinite timeframes, cost implications, and perhaps most pertinently, the perception that its philosophical framework lacked a 'scientific and experimental approach'. Without mentioning Kraepelin, Marks is essentially stating that psychoanalysis wasn't falling in-line with the increasing medically scientific paradigm that modern psychiatry was set upon. Presented with competition from other talking therapies which better reflected these values, psychoanalysis lost its prestigious position.

The humanistic tradition is exemplified by the work of Carl Rogers. Originally termed non-directive therapy, as Rogers refined his therapeutic theory, it became known as the Person Centred Approach (PCA). The underlying hypothesis was that:

Individuals have within themselves vast resources for self-understanding and for altering their self-concepts, basic attitudes, and self-directed behaviour; these resources can be tapped if a definable climate of facilitative psychological attitudes can be provided. (Rogers, 1980, p. 115)

Rogers believed that a 'self-actualising' tendency, something akin to an innate drive, propelled an individual to fulfil the potential permitted within their environment. Promoting relationships of equality between therapist and client, and the creation of a therapeutic encounter embodying three core conditions, unconditional positive regard, congruence, and

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<sup>45</sup> This statement does not reflect or include those undertaking psychoanalysis as a private therapeutic endeavour.

empathy, the PCA theorised that the individual could grow within the therapeutic encounter to overcome the causes of their mental distress (Merry, 1995).

Following mainstream success within the broader treatment of mental illness from the 1960s, Rogers' and PCA's fate became reminiscent of psychoanalysis before it:

lack of enthusiasm for empirical trials among the person-centred community had resulted in it being less influential in socialised healthcare and insurance-based services than cognitive and behavioural approaches. (Marks, 2020, p. 93)

Modern psychiatry would appear to have reinforced its parameters for medicalised, scientific, principles, by again clearing another nonconforming obstacle from its path. Although falling from favour within mainstream psychiatry, the fundamental tenets within PCA of optimism, client focus and environmental determinants, has had a wider influence, affecting policies beyond the clinic to promote mental health. This is particularly evident within the service user movement, which will be addressed shortly. Laing's existential-phenomenological theory is distinct from PCA; however, rejecting the biologised account of mental illness and promoting a client centred approach provides a point of intersect for both of these theories, and this commonality may establish a pathway by which Laing's theory can (re)gain a footing within approaches to contemporary mental illness.

Cognitive Behavioural Therapy (CBT) is unquestionably the cornerstone of talking therapy within contemporary mental health treatment in the UK. The origin of CBT is located by Marks (2020) most directly in Behavioural Therapy (although acknowledging that some argue for roots as far back as 3<sup>rd</sup> century Stoicism). Emerging in the 1950s, building upon the classical conditioning of Ivan Pavlov,<sup>46</sup> B.F. Skinner researched operant conditioning, the ability to modify behaviours by giving and/or withholding punishment and reward.

For Skinner, it was important to focus attention on environmental factors because they can be directly observed and, if possible, changed, whereas internal conditions cannot be observed and altered directly. (Merry, 1995, p. 5)

The development of the behavioural approach was positively received for many reasons. Focussing on the empirically observable, it played to the clinical process that Kraepelin established as a foundational component to psychiatry; furthermore, it advocated specific

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<sup>46</sup> Conditioning dogs to salivate at the sound of a bell by associating the sound of the bell with food.

timeframes to achieve (perceived) scientific evidential outcomes. A significant departure from modern psychiatry, however, was that the mind (and so the brain), was deemed unimportant in the process of shaping behaviours that linked to psychic suffering.<sup>47</sup> Introducing the mind into this approach was the key to CBT establishing itself favourably within the structure of modern psychiatry.

With a primary focus originally on the treatment of depression (and stretching far beyond in the current treatment landscape, NICE, 2011)

[CBTs<sup>48</sup>] understanding of emotional disorders was built around the idea that depressive or anxious states were caused by a flaw in thought processing. (Marks, 2020, p. 88)

Beck and Ellis's merger of cognitive approaches developed through the 1960s and 1970s, theorising the self as a computer; when the operating system is faulty, illness is experienced, the key to rectifying this fault, is to remap the operating system, the mind, through therapist led learning and conditioning.

The main focus in CBT is eliciting the client's appraisal of the events that trigger anxiety, and then changing the underlying faulty belief that is assumed to be maintaining the problem. (Clarke, 2020, p. 297)

Starting with the person's belief system, their cognitive processes, CBT emphasised the relationship an initial appraisal event had on determining detrimental 'emotions, physical reactions and behaviours' (Clarke, 2020, p. 295). Although initially focussed on anxiety, the formula of CBT is now extended to a far broader application in mental illness. Remapping of mental processes became the key to resolving mental illness, the mind was therefore brought back into focus, but couched within a mechanised discourse.

CBT harnessed the empirically observable research techniques demonstrated within behavioural techniques, and by engaging fully with the NHS's 'gold standard' of randomised

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<sup>47</sup> Marks (2020) also notes that associations of Behavioural Therapy (and this continues to affect perceptions of CBT also) with brainwashing and coercion detrimentally affected its reputation. This is particularly important with its history of aversion therapy in homosexual conversion.

<sup>48</sup> This excerpt refers directly to the developers of CBT; Aaron Beck and Albert Ellis.

control research evidence, CBT asserted itself as the primary therapeutic approach within modern psychiatry.

In 2008 the NHS implemented the Improving Access to Psychological Therapies program (IAPT). IAPT was proposed as one of the most ambitious initiatives within modern psychiatry, a commitment to provide sufficient resources to ensure that depression and anxiety (primarily, but not limited to) would not be consumed by psychopharmacology. This was not a rejection of the psychopharmacological approach, but rather a triage approach to mental illness; first, talking therapies would be prescribed and where unsuccessful, or more intense suffering experienced (suggesting a more 'effective' treatment required), psychopharmacological intervention – drug treatment – would be pursued in tandem or take over.

Connected to the IAPT, the NICE (2011) Clinical Guidance document [CG123], section 1.2 outlines that 'a stepped-care model is used to organise the provision of services and to help people with common 'mental disorders'. I will return to this quote in a moment, but looking at this stepped-care model, each of the named disorders draws on PCA and CBT (CBT most heavily) or, as highlighted by Marks (2020, p. 89), therapies that 'take shelter under the umbrella' of these approaches. The IAPT initiative is advertised as a positive development within 21<sup>st</sup> century mental health care (NICE, 2011); regarding questions posed for the help / harm dilemma of drug treatment, talking therapy reignites the pursuit for humane treatment. To a certain degree it also keeps the *mind versus brain* debate alive, this being more acute with the underlying theoretical premise of PCA rather than the computer mapping ethos for the brain within CBT.

However, although an alternative to drug treatment, the outcome isn't nearly as distinct with regards to the overarching theory for how we perceive the person, relating to Laing's initial proposition.

An influential critique of talking therapy and psychology more broadly is offered by Nikolas Rose (1985) in *The Psychological Complex*. Reverberating with a Foucauldian basis throughout, Rose states that psychology is limited in its ability to offer an original contribution to mental health because it allowed itself to be seduced and shaped by the perceived authority of scientific empiricism.

It was through attempts to diagnose, conceptualise and regulate pathologies of conduct that psychological knowledge and expertise first began to establish its claims for scientific credibility. (Rose, 1985, p. 226)

Rose (1985) continues that the qualification of 'scientific credibility' is baseless when the evidence of pathology is not defined by organic illness but determined by culturally and historically prescribed norms.

Health, for the psychology of the individual, is not so much life in the silence of the organs as life in the silence of the authorities. (Rose, 1985, p. 231)

In a subsequent publication, *Inventing Our Selves* (1996), Rose extends the parameters of this theory to emphasise inclusion of psychiatry, psychotherapy, social psychiatry, and psychiatric nursing etc, under the term 'psy-complex'. Through the multitudinous influences of a 'psy-complex' the self has become individualised, and thus shaped within the political powers which permeate within 'psy' discourse, whether they are through talking therapy, psychopharmacology, or any other 'psy' permutation.<sup>49</sup> Encapsulating this strand of thought within the field of psychology, Parker (2014, p. 60) states:

What psychology refuses to do is to step back and notice how its description of us as *cognitive behavioural mechanisms* is actually a function of capitalist society. (Italics added)

Resonating with Foucauldian undertones, illustrated profoundly in the work of Rose (1985, 1996, 2019), Parker (2014) starts to tie several components of this chapter together. He reaffirms the notion that 'psy'(chiatry) was developed for social control and emphasises that what constitutes mental illness within psychology is no more than a politically prescribed set of ideologically desirable norms – which the scientific aims of psychology have incurred a blindness toward. Furthermore, by determining 'us as *cognitive behavioural mechanisms*', deviance from these politically prescribed norms, defined as 'mental illness', can be determined as an individual's faulty operating system, a mind that is in need of remapping, much like a computer. 'Psy'chiatry is the ultimate authority on what is normal and

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<sup>49</sup> Throughout this thesis psychiatry has been used to encapsulate all services that operate within the medicalised approach and response to mental illness, therefore already encapsulating the breadth of permutations Rose connects under the 'psy' term.

acceptable, and 'psy'chology possesses the ability to correct those that fall outwith these parameters.

From a Laingian perspective, it might be argued therefore that this kind of talking therapy is no different than psychopharmacology, only packaged within a more humane wrapper.

Talking therapy and IAPT are presented as beacons of hope within psychiatry, and in certain respects, they are. The potential harm of drug treatment is certainly lessened in the therapeutic realm.<sup>50</sup> But like Rose, I believe an unquestioning faith in the good of talking therapy to be misdirected. The question that must be posed is whether talking therapies negate Laing's (1960, p. 23) proposition against psychiatry that determines 'man as a machine or man as an organismic system of it-processes'. This relates directly to the *mind versus brain debate*, the inference being that modern psychiatry's emphasis on the brain is responsible for this reductive understanding of the self. However, fitting within a psychologising structure that views people as *cognitive behavioural mechanisms*, these talking therapies also contribute to the detrimental and reductive view of the self, specifically from a CBT position, but also within the wider premise of enforcing ideologically determined parameters of normality, ergo 'mental health'.

The greatest concern I have is that although talking therapies and the IAPT are designed to provide an alternative, reaching these services still requires passing through the medicalised system to access their service. This may be in the form of a telephone interview, and whether or not the person on the other end is a medical professional or not. As stated in the NICE (2011) guidance, IAPT is designed to 'organise the provision of services and to help people *with common mental health disorders*' (italics added) – so experiences are framed within a scientific medicalised referential standard from the first point of contact. Even the stepped-care model is categorised as per the DSM / ICD diagnostic format.

How then has the drug revolution and talking therapy post-Laing affected the value of his proposition? The drug revolution has undoubtedly reinforced and concretised the reductive theory of *a person as machine or an organismic system of it-processes*; essentially a brain. Talking therapy unfortunately passes through the same process before such treatment can be undertaken (IAPT), and the monopoly of CBT and its therapeutic derivatives, incurs a similar, perhaps not quite so drastic, reductive theory of self. If we can negotiate this

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<sup>50</sup> See Jarrett (2008) outlines a series of occasions whereby psychological and psychotherapeutic interventions can add further harm to those seeking help from their services.

medicalised framing that occurs from the outset of any engagement within mental health services, then perhaps the PCA is the approach that is least reductive in its theory of self – and this leads us directly into our final section, *Service User Movement*, a movement with a close relationship to the roots of Rogerian PCA.

## Service User Movement

Taking their cue in the 1960s from the various civil rights and liberation movements, and overlapping with several influences, including the voices of resistance detailed before, gave rise to what has become the ‘service user movement’. The seeds of a service user movement have long existed but nourished by the activism and critical thinking of the 1960s and connecting with the ethos of Rogers’ Person Centred Approach (Marks, 2020), and aspects of Thomas Szasz’s theory (Rose, 2019), an informal ‘organisation’ developed as patients gravitated toward its banner.

The service-user movement is not one unified group of activists. It is a collective name for a multitude of groups and individuals who have, over the years, tried to improve care and treatment towards those who have become too distressed or overwhelmed to function. (Lomani, 2020, pp. 50 – 51)

As the name suggests, the service user movement was created by, and for, those at the receiving end of psychiatry. Differing names are favoured by different factions and groups of the movement, but the essence of their message was ultimately the same – to empower those most maligned within the psychiatric system, providing a platform for their silenced voices to be heard and respected.

In the 1980s the service user movement gathered significant momentum. Armed with renewed interest in the writings of Foucault, the publication of *Discipline and Punish* (1977) – specifically its work on surveillance and control resonating with the existing support service user groups had already found in *Madness and Civilisation* – felt all the more relevant as a drastic political shift (capitalism to neoliberalism) was developing within 1980’s British society (Parker, 2014). Margaret Thatcher’s Conservative government simultaneously cut funding for mental health with one hand and established community-based mental health teams with the other. Those dependent on the resources of mental health care were facing an unprecedented time of change and reduced provision. The destruction of mental health

services was enormous, and the service user movement responded but could never do so on the scale required.

[T]he voice of the patient began to achieve a certain limited legitimacy: no longer merely heard as a symptom, provided it was expressed rationally and constructively and without too much passion, the voices of users of psychiatric services now were seen as essential elements in the management of a mental health system. (Rose, 2019, p.158)

The service user movement was not a single, linear, unified group, and their separate cells responded to the development of the 1980s in disparate ways, and this reinforced a structural, internal division; those that wanted to 'improve existing mental health services' – working *with* psychiatry, and 'those who wish to dismantle these services' – working *against* psychiatry (Lomani, 2020, p. 52). The argument over which side to fall on continues to affect the structure of the service user movement.

Working *with* psychiatry has led to important changes in policy and areas of activism being formally integrated into the system (Peer Support, etc). However, this close relationship always risks 'assimilation and co-option', the radical nature of the movement becomes sterilised and subsequently neutralised within the dominant force of the system, in this case psychiatry (Lomani, 2020). Burstow (2014, p. 43) reminds us that 'psychiatry only has the power it does because it is an extension of the state, is part of the apparatus of the state'; a reminder of Foucault and Rose's warning that the system of psychiatry should never be underestimated, hence those that refuse to work *with* and actively choose to work *against* psychiatry.

Testifying to the success and respect achieved by the service user movement through this period and building prominently since 1996, we are now at stage that policy level engagement is required with these groups throughout the mental health arena. Ensuring engagement with those they aim to help is a pre-requisite to achieve any funding request (see INVOLVE, 2012). Whilst this is a positive, we must consider the potential for assimilation and co-option to distort any radical potential, and this is why there are groups that continue to advocate the necessity to operate *against* psychiatry.

Lomani (2020) offers personal insight into the catch 22 of the *against* psychiatry camp within 21<sup>st</sup> century UK culture. Rejecting psychiatric diagnosis, deeming its scientific authority as baseless, a position reflected in many service user movement groups, Lomani states that

after the financial crisis of 2008, austerity measures had a significant impact on those who relied on support to manage their psychic suffering. The problem was, as the government purse strings were tightened on mental health services, the parameters by which one was deemed eligible for support became more restricted – and a registered diagnosis of ‘mental illness’ or disorder became non-negotiable to access support.

Whilst not framed within a Foucauldian lens, post-2008 seems to have been a perfect opportunity for the government to refine the mechanism that created the cleavage between those who are good citizens and those that are not. A chance to recapture the stragglers attempting to escape the *rightful* and *scientific* determination of psychiatry and as such, define their resistance and deviance as belonging to those with a mechanical or organismic system defect within their brain. But the fight goes on, and the multitudinous factions of the service user movement refuse to go away, challenging those ‘norms’ enforced upon them, and advocating the value of their own experience to inform better practice.

Service-user researchers tend to value lived experience over traditional academic research values such as positivism, objectivity and neutrality. This poses a threat to mainstream academia and inevitably disrupts the status quo within these settings. (Lomani, 2020, p. 63)

In the previous sections the proposition underpinning Laing’s theory is presented as refreshing the longstanding *brain versus the mind* debate at a pivotal moment in the evolution of modern psychiatry, articulating a unique voice within a crowd of contemporaries; and arguably retaining value in today’s psychiatry as during the 1960s. However, the achievements of the service user movement provide a different context and consideration for Laing’s work, to ask whether Laing’s proposition complements or contrasts with the broad ethos of the service user movement.

My immediate reaction is to passionately advocate Laing’s theory as a potential ally of the service user movement. The notion of ‘experts by experience’ is a key element of their movement and this ethos rings equally as true with Laing’s theory, reverberating most prominently within *The Politics of Experience* (1967) and undertaking a central part in the structural organisation of the experimental community, Kingsley Hall.

We respect the voyager, the explorer, the climber, the spaceman. It makes far more sense to me as a valid project – indeed, as a desperately urgently required project of our time, to explore the inner space and time of consciousness. (Laing, 1967, p. 105)

The aim of abdicating professional / patient status at the door of Kingsley Hall is a romantic thought but fails to really account for the ingrained social constructs Becker's Labelling theory draws to attention or indeed the reality of Kingsley Hall. Furthermore, however well-meant was Laing's intention to recognise and elevate the premise of previous sufferers to the role of experiential guides, although his work and theory was developed apparently within a shared and mutually respectful dynamic, I see no acknowledgement or recognition of the part played by these people: their names certainly do not adorn the spines of his books. In practice we can say that Laing failed to share the limelight. His theory rendered the voice of the insane 'intelligible', but he continued to speak on their behalf. This lack of empowerment stands in contrast with the aims of the service user movement.

If we direct attention to the theory and not the person however, a potential connection could exist with specific aspects of the service user movement.

The psychiatric user / survivor movement has offered a more fundamental challenge to the power of psychiatry, not only because of the criticisms that it, along with many others, has made of the claims to objective knowledge of 'mental disorder' and effective treatments for it, not only because of its well-founded criticisms of the actual practices of care experienced by those living under a psychiatric diagnosis, but also because of its articulation of alternative forms of knowledge of mental distress, linked to alternative modes of intervention and support for those experiencing profound crisis in their lives. (Rose, 2019, p. 172)

This extended quote is important because it captures in summary many of the principal components uniting the breadth of the service user movement. It also highlights that within certain quarters, particularly those groups that operate against psychiatry, campaigns are present to create a new episteme of psychiatry, alternative forms of knowledge beyond a deficit model of mental health. The desire to consider a whole new episteme of psychic suffering is something to which Laing's theory could be a useful ally.

The overarching message within this aspect of the movement mirrors Laing's proposition: the discourse of psychiatry, its positivist, empirical scientific parameters, enacts a violence upon those it comes to define. Psychiatry, for Laing as well as the service user movement, has indeed come to define persons as a 'machine or man as an organismic system of it-processes' (Laing, 1960, p. 23). For those pursuing a new discourse that avoids these established pitfalls, Laing's existential-phenomenological methodology and its rationale to embrace the experience of the sufferer, could be an asset.

What becomes apparent from the discussion in this chapter is the continuing relevance of the proposition that Laing asserts to underpin his theory, the statement that psychiatry '*falls into an account of man as a machine or man as an organismic system of it-processes*' (Laing, 1960, p. 23). Whilst it may not be unique within the history of the *mind versus the brain debate*, Laing realised its importance and drew attention to it at a critical juncture within the evolution of psychiatry. Furthermore, he provided a methodology to avoid its damaging consequence. With the trajectory of psychiatry continuing to reaffirm and concretise this perspective toward a theory of self, and the service user movement actively seeking means of reconsidering the epistemology of 'mental illness', the existential-phenomenological theory Laing advocates may prove useful. Considering this possibility is part of the concern of this thesis.

## Summary

Part 1. *Introduction* has prepared the ground to move forward with an in-depth analysis of Laing's theory, establishing areas of compatibility and contrast that exist within contemporary culture as well as highlighting prominent causes responsible for the controversy that misdirects approaches to his theory. It has identified a function for Laing within contemporary culture and modern psychiatry, the pressing necessity to consider alternate means of addressing 'mental health' as well as removing unnecessary debris from our path in differentiating Laing's personality from his written theory. Collectively, this has prepared the ground to begin the construction of a Laingian framework. We now move into Part 2: *The Return to Philosophy*; this is where the methodology of this thesis is applied in detail and a conceptual analysis begins, identifying the building blocks of theory as they are developed into a totalising Laingian structure.

## Part 2. The Return to Philosophy

In the following two chapters, we apply a concept analysis to Laing's use of existential-phenomenology, creating a framework for his methodology (Chapter 5, *A Laingian Methodology*) and self-formation (Chapter 6, *Self-Formation*). These chapters develop a series of concepts that produce the foundation for theory application moving forward. Laing does not represent his theory in this format; however, presenting it in this way makes it possible to address criticisms, develop structural integrity and draw out a theory of self and examine in detail existential-phenomenology: the philosophy that encapsulates all of Laing's work.

Two critiques play a substantial role in the format for the entirety of Part 2: Sedgwick's (1982) accusation that Laing's theory suffered from structural instability and Mitchell's (1974) claim that beyond the poetic form and prose, a defined theoretic structure is absent. Sedgwick argued that Laing's theory collapsed once any one aspect was pursued in detail. I argue that structural integrity, in any form, is compromised when any one variable is overly stressed, especially if this is not an anticipated force and the structure is not designed to cater to its load.

These critical perspectives have been instrumental in the selection of a concept analysis methodology in this thesis. In analysing the concepts that construct Laing's theory within each of these chapters, this research will respond to Mitchell's demand for greater theoretical clarity and develop and reinforce Sedgwick's requirement for increased structural integrity. Addressing both critiques, a methodological framework and theory of self-formation will be designed using his theory; where necessary, this includes revisiting his influences, constructed to fulfil Laing's overarching premise as succinctly stated by Howarth-Williams (1977) as *intelligibility*. Through this methodological process, I establish and interweave concepts within a Laingian theory capable of withholding integrity when its design purpose is identified and subsequently honoured.

Before delving into these structural aspects in the next two chapters, I want first to reinforce the justification for Laing's theory to be considered as a return to philosophy, specifically to existential-phenomenology. This inevitably intersects with numerous secondary sources that argue for a psychoanalytic interpretation to be considered as more influential within Laing's thinking.

We are so estranged from the inner world that there are many arguing it does not exist. (Laing, 1967, p. 46)

Laing's application of philosophy quite simply responds to this sorry situation. Arguing that a totality of *Being* involves valuing both inner and outer experience, he provides us with the tools, an existential-phenomenological methodology, that enables us to engage with the overlooked or dismissed experience of the inner world: an experience forgotten in the default medical approach to understanding the self.

Cautious philosophers might refer to the rise of 'existential phenomenology' or even 'phenomenological existentialism' but to the broader public it was simply the vogue of 'existentialism'. (Lawlor, 2010, p. 75)

Laing (1960) clearly designates his methodological approach as 'existential-phenomenology'; however, increasingly this is reduced to the singular term of existentialism – other than when he references phenomenology in isolation. Whilst this may reflect Lawlor's insight to a certain degree, it is also proposed that this is an acknowledgement of the balance of weight invested in existentialism within Laing's theory. Other than Chapter 5, *Laingian Methodology* in which the analysis deconstructs each philosophical contribution, subsequent references to existentialism are designed to reflect the dominance of this approach within his methodology.

Many people account much of Laing's success to a 'coincidence of a multitude of factors, including the right message at the most opportune time' (Guy Thompson, 2015, p. 1). Laing's political affiliation was undoubtedly well managed, as I will discuss, but to suggest that Laing capitalised on nothing more than an open door of convenient timing regarding the application of existential-phenomenology within his theory, both undervalues and discredits his achievement. Existentialism was far from a fashionable theory when Laing launched onto the medical and counterculture scene (Sedgewick, 1982). Peaks and troughs of interest had occurred since the Second World War but by 1960, it had already been cast aside and was certainly not *hip* at the time when Laing re-introduced it (Lawlor, 2010). Laing's ability to justify attention toward this already dusty theory warrants more credit than simply convenience; its success was testament to his capability as a theorist to make it relevant again (and one could also say the charisma of his person to deliver it).

Whilst the centrality of existentialist theory (including phenomenology) is declared from the outset in Laing's theory, there is a constant echo or shadow within his theory that people

account to psychoanalysis, often stating that it is more prominent and influential than Laing himself would admit. This influence will be addressed specifically at several junctures within this thesis; however, considering the constancy for the claim of psychoanalysis to be considered a significant influence within Laing's theory, and the disruptive impact this has upon the value of Laing's declared existential-phenomenological methodology, consideration of the broader context of psychoanalysis within Laing's theory is discussed next.

This association with psychoanalytic thought, in part, must be attributed to Laing's involvement with the Tavistock Clinic, a psychoanalytic institute where he began employment and psychoanalytic training in 1956, leaving in 1962 (Clay, 1996). Appreciating both Laing's relationship with this institution and its theoretical basis provides a grounding to establish the influence of more specific concepts as we progress. Laing's psychoanalytic training here was blighted with questions regarding the stability of 'Ronnie's' personality and his unconventional approach to psychoanalysis. However, following the written support of Rycroft, Milner and Winnicott, the establishment eventually approved his qualification (Laing, A. 2006; Burston, 1996; Beveridge, 2011) and in 1960 he was 'enrolled as a qualified psychoanalyst with the Institute of Psychoanalysis' (rdlaingofficial.com). This support evidenced how Laing was highly versed and knowledgeable in psychoanalysis although the reluctance of some to approve his qualification was also an early indicator of his penchant to resist authority and question its validity.

We see his most overt engagement with psychoanalytic theory in the *Self and Others* (1961) but even so, this is primarily used to outline and contrast his own unique theoretical approach. Footnotes throughout *Sanity, Madness and the Family* (1964), are also peppered with additional psychoanalytic concepts<sup>51</sup>; however, rather than engage with their assertions, he includes them to reinforce the claim that this is not the direction of his study, seemingly a nod to his capacity to use or discard them. His affiliation with the Tavistock during the writing of these titles specifically could be argued as something of a bias, his involvement requiring an acknowledgement from the establishment (Guy Thompson, 2000): a point discussed further as we address Laing's relationship to Freud. But it appears more likely that Laing realised the symbolic capital associated with his ability to wield this theory, more so due to the status he was afforded by identifying personally as a 'psychoanalyst'. Several of his book

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<sup>51</sup> Highlighting the potential for psychoanalytic theory to expound the case of Maya Abbot, Laing and Esterson add the footnote:

Although it is beyond the self-imposed limitation of our particular focus in this book to discuss these aspects, the reader should not suppose that we wish to minimise the person's *action on himself* (what psychoanalysts usually call defence mechanisms), particularly in respect of sexual feelings aroused towards family members, that is, in respect of incest. (Laing and Esterson, 1964, p. 42)

jackets proudly declare this qualification and we see its value to him most poignantly in the 1989 documentary *Did you used to be R.D. Laing*. His playful persona being used to proclaim superior parental knowledge in opposition to that of the education system, Laing punctuates his authority by stating 'if I was a psychoanalyst – which I am'.<sup>52</sup> The inference here being that this qualification trumped any other.

Psychoanalytic theory, whether he liked it or not, was a significant theoretical benchmark within psychiatry during this era, heavily influential within the American psychiatric scene. Thus the development of the DSM I and DSM II (Regier et al., 2013; Fulford and Sartorius, 2009) and, by proxy, cross fertilisation between the DSM / ICD (Tryer, 2014) (although it was the ICD which was more prevalent in the UK) as well as the disproportionate global influence wielded by America within all western medicine (Watters, 2010), not ignoring the status of the Tavistock, meant that this was a theory that required acknowledgement. I suggest that Laing used this theory as a contextual backdrop by which to locate his unique existential-phenomenological methodology and he also clearly used the status it afforded to imbue his own alternative approach with greater symbolic capital.

There was also a strategic element to Laing's involvement with psychoanalysis and this becomes most evident with his approach to Freud.

The greatest psychopathologist was Freud. Freud was a hero. He descended to the 'Underworld' and met there stark terrors ...We who follow Freud have the benefit of the knowledge he brought back with him and conveyed to us. (Laing, 1960, p. 25)

Laing reinforces a positive status for psychoanalytic theory, elevating the reputation of its forefather. However, in contrast to this one-dimensional public praise written in *The Divided Self*, we see a more complicated relationship toward Freud's theory in intimate and private notes written between 1952– 53:

Freud is still the great man but more and more 'the imbecile of genius' to me. Those ghostly hydraulics of the psyche! Mechanism. 19<sup>th</sup> [century] materialism translated into 'mental' terms. (Laing 1952/1953 cited in Beveridge, 2011, p. 71)

This criticism alone does not usurp the respect shown for Freud but it places a question mark against the unequivocal praise previously stated. Within the context of the further

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<sup>52</sup> Located 1hr 12mins 20 seconds.

criticisms, a level of disdain becomes apparent, rumbling beneath the surface toward Freud himself. In an interview with David Lunt, toward the end of his life, this undercurrent bubbles over:

Certainly Freud has achieved more than I have so far, it seems. At a certain level there's a limitation in Freud's overall vision, however finely he's filled out the edges of his vision with his own sensibility, in a form that will flow on to the twenty-first century. He's got a limitation of vision that I feel I've got an edge on. (Laing cited in Lund, 1990, p. 103)

In contrast to Freud, the target by which this is reasoned, Laing asserts his own theory to hold more potential than is acknowledged. As this sentiment becomes increasingly apparent, so too does the rigour with which he cuts out the influence of psychoanalysis within his theory. With a broad sweep of the sword, when reflecting on his entire career, Laing summarised:

I was never imbued with any Tavistock concepts. I never started using, in their manner, their idea of it [theory]. I was never a convert. (Mullan, 1995, p. 318)

Laing's relationship to Freud, the Tavistock and psychoanalysis, is complex and ascertaining a definitive stance beyond the detail available is hard. However, we can say that there was an advantage to positioning his theory within the established context, possibly a need to acknowledge his employer within these earlier publications, and it is difficult to avoid the proposition that his public praise and private condemnation of Freud was a calculated strategy, designed to extract maximal symbolic capital – a strategy in which, as Adrian Laing (1995) in the biography of his father states, he was more than proficient. With consideration of all these factors, the statement offered by Kirsner is imbued with far more than a brief compliment:

Laing did for the psychotic what Freud did for the neurotic. (Kirsner, 2015, p. 70)

*Experience* is the concept that separates and justifies Laing's methodology as distinct from psychoanalysis, and the importance of this concept is realised in the following chapters. His entire existential-phenomenological approach is geared to ascertain intelligibility of experience, universally: a proclamation that suggested a victory over Freud (Guy Thompson, 2000). Until Laing, arguably a general consensus was that those suffering from psychosis

were beyond therapeutic help<sup>53</sup> and not even Freud could decipher its condition – a position shared by Martin Buber and Carl Rogers. The basis for this rejection was the ‘lack of capacity for transference, and, by implication, for relatedness to others’ (Burston, 1996, p. 201).

Kirsner (1976, p. 124) makes an insightful observation that Laing’s theory was ‘no crusade against psychoanalysis,’ continuing that *The Divided Self* abounds with psychoanalytic insights deriving from the ‘English School’. I agree that Laing makes no seismic gesture against psychoanalysis in his publications but quite the opposite as his work is respectful albeit presented as a contrast. But this respectful gesture has inadvertently invited psychoanalytic connections to his theory, specifically where vagueness remains. The suggestion that his theory is ‘bound with psychoanalytic insights’ I find more problematic. Aspects of Laing’s theory can be interpreted within a psychoanalytic lens, sometimes offering a wider context and assisting in analytic depth and, where relevant, these will be highlighted. Laing (1967, p. 44) himself takes this stance in *The Politics of Experience*, stating that object-relations theories ‘go some way’ to explaining certain aspects of his approach (Chapter 7, *An Empirical Concept*). But most importantly, he qualifies this inclusion further by reinforcing the unrestricted capability of existentialism.

As will be discussed, Laing’s methodology is unique; it was through his embracing a philosophical concept of persons that he was able to achieve this elusive relatedness with the sufferer and thus discover value within a previously deemed incoherent world of psychotic experience.

Undoubtedly, psychoanalytic elements can be overlaid upon Laing’s theory, assisting with context and even offering some influence; where applicable, this will be highlighted. However, *when you are holding a hammer, everything looks like a nail* – the world was already holding Freud, the Tavistock and psychoanalysis; its influence was always going to be felt, especially where vagueness exists. What this early overview demonstrates is the necessity for caution when filling theoretic voids with an unquestioned application of psychoanalysis. In the following two chapters, I examine Laing’s theory, exposing where gaps and vagueness remain, but rather than seeking support from a more prominent

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<sup>53</sup> Writing at the same time as Laing, Rosenfeld was also developing Kleinian concepts to offer inroads into understanding the psychotic experience. A collection of written essays by Rosenfeld between 1946 – 1964 was published in 1965 under the title *Psychotic States: A Psychoanalytic Approach*.

discourse (as psychoanalysis has historically), I attend to the finer detail of his wider theory and where this is still found wanting, return to the influences that Laing himself declared.

## 5. A Laingian Methodology

One of the most difficult philosophies was brought to bear on one of the most baffling of mental conditions, in a manner which, somewhat surprisingly, helped to clarify both. (Sedgwick, 1982, p. 74)

Reinforcing the significance of this statement, Peter Sedgwick, one of Laing's staunchest critics, commends Laing's philosophic understanding and application within the 1960 publication *The Divided Self*. Throughout his career, Laing produced a medical theory grounded in philosophy which stood in stark contrast to the prevalent scientific discourse. *The Divided Self* is the best-known of his works in articulating this philosophic grounding; however, themes of an existential-phenomenological nature are evident throughout his career, even preceding this most seminal piece. In the infancy of his career, 1953, Laing wrote a vignette titled 'Nan', named after a patient within a poignant case study. In this piece, Laing highlights the importance of embracing the *entire experience* of a young woman's (Nan) arduous recovery from a prolonged coma and hypothesises how interactions helped shape the significant change in personality from her 'premorbid personality' (Burston, 1996). This early article was a sign of things to come, embodying all the philosophic components that structured the methodological framework for *The Divided Self*. This unorthodox approach to a philosophical application to psychiatry is rooted in the humanities-centred grammar school education he received (Clay, 1996; Laing, 1985) and although this schooling made 'acquiring the scientific *habitus* of the medical profession' more difficult (Crossley, 1998, p. 881), it provided Laing with a unique set of skills to assert his identity and ensure his human focussed theory could be translated into this well-established domain. These were also skills that combined and complemented the political and cultural environment of that time which are concepts discussed later.

*The Divided Self* provides the most rigorous description of his methodology and existential-phenomenological position (Sedgwick, 1982; Kotowicz, 1997; Crossley, 1998). In this book, Laing (1960) rejected the medical framework of the 1950s that was increasingly taking hold in the 1960s. Echoing the Cartesian model of dualism, he produced a unique and groundbreaking approach, discrediting an unnatural mind/body division and instead advocating a theory to accept and address the individual as an entire organism.

[A]n inhuman theory will inevitably lead to inhuman consequences. (Laing, 1967, p. 45)

He referred to psychiatry and the medical profession as a ‘science of alienated ‘normality’’ (Kotowicz, 1997, p. 67). Divorced from the essence of *Being*, these professions and the knowledge frameworks they applied were not only incapable of bringing about true knowledge of self but enacted a form of violence and damage to the individual.<sup>54</sup> The centrality of this component throughout Laingian theory is supported through the quotation above extracted from *Politics of Experience* (1967). Laing (1960, p. 20) stated conclusively that to gain true knowledge and understanding of the mind, we must embrace it within its totality: to look at the *person as a unitary whole*, a ‘being-in-the-world’. This perspective would, in turn, drastically change and enhance the levels of understanding previously acquired through the medicalised model.

Only this approach would bring about true knowledge of the self and uncover the ‘intelligibility’ (as stated by Howarth-Williams, 1977) of experience too often attributed to a reductionist allocation of the mind, psyche, or worse still – brain. To undertake this revision, to embrace the being-in-the-world and to achieve intelligibility, would require a methodology that turned to the philosophy of existential-phenomenology.

Existential phenomenology attempts to characterise the nature of a person’s experience of his world and himself. It is not so much an attempt to describe particular objects of his experience as to set all particular experiences within the context of his whole being-in-his world. (Laing, 1960, p. 17)

Phenomenology and existentialism are bracketed within the continental philosophy tradition, a movement conceived in the late eighteenth century. Originating from within the European boundary, continental philosophy tasked itself with being more ‘attentive to the world of experience and less focussed on a rigorous analysis of concepts or linguistic usage’ (Lawlor, 2010, p. vii).<sup>55</sup> Frequently, existentialism is qualified as a product of phenomenological enquiry, hence the cross fertilisation from notable thinkers such as Sartre, Heidegger, etc., philosophers who associated with both traditions (Lawlor, 2010). Even though this is not a universal position, as illustrated through the work of Husserl who applied phenomenological enquiry without arriving at existentialist thought (Collier, 1977),<sup>56</sup> this direct and

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<sup>54</sup> This is discussed later

<sup>55</sup> Within some circles the parameters defining continental philosophy are contested (Lawlor, 2010).

<sup>56</sup> To complicate matters further, the term ‘existentialism’ is frequently used to include phenomenology (Lawlor, 2010). This research will use the characters assigned to each in the subsections to differentiate when the umbrella term of ‘existentialism’ is used in this fashion.

uncomplicated relationship held between phenomenology and existentialism helps to ground Laing's unique approach.

The fundamental tenet of Laing's existential-phenomenological approach is that it promotes an engagement with the 'experiential-gestalts' of the person: to view, in their connection, the arrangement of parts within a given moment, to *set all particular experiences within the context of his whole being-in-the-world*. Importantly, this does not prioritise or reduce a conception of self to either/or, inner/outer, in any capacity, it embraces the totality of experience. Laing summarised this as 'seeing the world through another person's eye's' (Laing cited in Collier, 1977, p. 23). Laing draws on established philosophers operating in both philosophic fields, all of whom hold common and/or complementary theoretical characteristics; he clearly advocates the insightfulness of both named philosophies and their adopted collective methodology but his own application includes adaptations which create a unique methodological approach (Collier, 1977).

Laing's application of philosophical influences, although widely received as positive (see Sedgwick, 1982), is in no way classical or traditionalist and, as a result, incurs limitations and critical reviews from those situated more firmly within the philosophy world (Collier, 1977; Howarth-Williams, 1977; Deurzen, 2010). This has an impact on how to define and therefore understand Laing's methodology. Laing's focus was first and foremost toward the experience and behaviours associated with schizophrenia and therefore his niche application involved selecting relevant philosophical components to build a methodology which would aid the pursuit of intelligibility within this previously incoherent world (Guy Thompson, 2000). Laing was always clear that it was not his aim to produce a philosophically pure body of work and we must remember that he is selecting tools and concepts which facilitate the greatest insight to his focus of enquiry.<sup>57</sup> This undoubtedly incurred significant limitations but it is the purpose of this chapter to identify the conceptual aspects that provide a solid foundation and fill in any gaps (gaps which invite confusion or a misapplication of convenient theories rather than accurate theories) in order to substantiate a methodology that can confront and answer these criticisms and ultimately bear the strain of application in the contemporary setting.

The following sub-sections will explore the philosophical disciplines, existentialism and phenomenology, and analyse how they influence Laing's theory. It will look collectively at the totality of Laing's theory within the first phase of publication (1960 – 70) and identify the primary components which can be drawn together to illustrate Laing's existential-

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<sup>57</sup> This is discussed in more depth later.

phenomenological methodology. This will not be an exhaustive account of existentialism, phenomenology, or existential-phenomenology. Nor will it be a theoretical history of each philosopher Laing involves. The focus will be a history of the ideas which informed Laing's existential-phenomenological methodology, identifying the primary components that constitute his methodology. Although not restricted to *The Divided Self*, this book provides the most sizeable and significant proportion of the material for this framework.

## Existentialism

Only existential thought has attempted to match the original experience of oneself in relationship to others in one's world by a term that reflects this totality. Thus, existentially, the concretum is seen as man's existence, his being-in-the-world. (Laing, 1960, p. 19)

Laing's reverence for the existential tradition is consistent throughout his career, evident in his first solo publication in 1960 and reaffirmed in one of his final interviews in 1988 (Mullan, 1995).<sup>58</sup> In the above quotation taken from *The Divided Self*, Laing outlines the overarching influence of existentialism within his existential-phenomenological methodology: the totality of experience.<sup>59</sup> He states that the essence of a person's existence is no different from their full experience of that existence. Essentially, and crucially, the totality of experience is everything; it is the fact of our being-in-the-world.

As Laing continues, he gives us further insight into what he means by the 'totality of experience':

we should be able to think of the individual man as well as to experience him neither as a thing nor as an organism but as a person. (Laing, 1960, p. 22)

Illustrated against the prevalent medical model, a model continuing to this day, Laing stated that it is through embracing the individual's experience of the world, the 'experiential gestalts', that we gain true knowledge of their person. This was presented in stark contrast to

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<sup>58</sup> This unwavering respect toward the existential, and phenomenological, philosophers, none more so than Sartre, is somewhat unusual for Laing. Laing frequently and brazenly dismisses the status of his peers (see Beveridge, 2010; Clay, 1996), and this becomes particularly apparent in his reflective interviews with Mullan (1995) as he critically discusses previous colleagues and influences throughout his career. Existential philosophy and the theorists within it remain held in high regard.

<sup>59</sup> There is the additional aspect of 'experience of oneself in relationship to others'; it will be addressed in the subsequent chapter, *Self Formation*.

the scientific model forcefully trying to fit the individual to an objective model which insists on reducing the person to an organism, a collection of isolated components.

Highlighting the influence of Sartre,<sup>60</sup> we can see where the aspect of totality combines with experience to ensure Laing's ambitions for a more complete knowledge of the person are achieved.

If we admit that the person is a totality, we cannot hope to reconstruct him by an addition or by an organisation of the diverse tendencies which we have empirically discovered in him. (Sartre, 1953, p. 33)

Laing all but paraphrases this exact example in *The Divided Self*. Without dismissing the types of specific knowledge gained through empirical, objective research on isolated components, Laing uses the example of 'Humpty Dumpty' to communicate that no matter which scientific discipline we use to focus upon shattered parts, in isolation they provide no intelligible knowledge of the person.

There is some controversy as to whether, at this early stage, Laing's simplistic engagement with the totality of experience warrants acceptance as being structurally existential (Collier, 1977); however, as has been shown, this bears a strong connection already with Sartre's existential advocacy for a totality of experiences. Laing, throughout his first book, develops a foundation which embodies the existential tenets which Mullan (1995, p. 85) summarises as 'hostility to abstract theory for obscuring the roughness and untidiness of actual life'. At no point does Laing further deconstruct the totality of experience but retains this simple format which arguably translates to a wider, non-expert audience; perhaps, at this early point, this was part of his objective in wanting to emphasise the importance of experience and totality without sacrificing clarity. Although broad and potentially reductive, most accept this existential premise as constituting a large structural element in the entirety of Laing's work (Kirsner, 1976; Collier, 1977; Crossley, 1998; Kotowicz, 2005).

Collier (1977) penetrates further with his philosophic analysis of Laing's theory and identifies a solid existential basis that underpins and precedes the totality of experience. Focusing on the primary philosophical influences named by Laing – Kierkegaard, Heidegger, and Sartre –

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<sup>60</sup> A number of secondary reviews and Laing himself place Sartre at the forefront of a Laingian theoretical framework (see Kotowicz, 1997; Mullan, 1995; Collier, 1977), however this is refuted at length by Howarth-Williams (1977). Analysing the contribution of Sartre, Howarth-Williams states that Sartre is used to illustrate rather than develop his theory.

he offers three existential commonalities that resonate within Laing's methodology and thus can be offered as supporting a foundation by which to appreciate the *totality of experience*.

[1] man is free, in the sense of being compelled to choose between infinite possibilities... [2] he experiences his freedom in anguish... [3] the unpleasantness of this state motivates man to hide the fact of his freedom from himself by absorption in the conventional practices of everyday life ('inauthenticity'). (Collier, 1977, p. 17)

Collectively, the interaction of these three base experiences is described as defining the human condition. With such a bold aim as to define the human condition itself, it is little wonder that a question is raised about what can now be suggested as Laing's brief, perhaps even overly simplistic model. However, as we overlay this three-part structure, Laing may not directly have detailed each individual component but his body of work rests on a presupposition of their structural presence.

The three parts to this collective existential framework for experience establish two universal constants: [1] a potentially free self and [2] anguish, present in the basis of this potential as well as a third variable component [3] to seek comfort, refuge and stability in the conventional practices of everyday life. At its simplest, to engage and accept one's [1] potential free self involves an awareness of our most raw and essential self: the freedom to exist without constraint, restriction or the perceived necessity to adhere to social norms. As we increase this awareness for the freedom to live without restraint, by default we conversely become aware of our nonbeing, our mortality, the imminence and unavoidability of our death; to live is to die. It is the [2] awareness of freedom (conversely an equal awareness of death) that causes us anguish, introducing a constant anxiety into our existence. In avoidance of this anxiety, like an ostrich hiding its head in the sand to avoid danger, we [3] immerse ourselves in the 'absorption in the conventional practices of everyday life'. The notion of an 'absorption in the conventional practices of everyday life', as outlined by Collier, plays a pivotal role as we develop Laing's theory and this quotation will be used through this thesis.

This importance of this three-stage meta-analysis of the existential human condition gains more grounding as we direct attention to Heidegger. Contradicting the earlier focus of Sartrean input (Kirsner, 2015), Howarth-Williams (1977) states that the actual theoretical substance, particularly within *The Divided Self*, has more significant traits of Heideggerian

philosophy<sup>61</sup> (this supporting Laing's statement in his later life that, when writing *The Divided Self*, it was Heidegger who played the most influential role in its development – Mullan, 1995).<sup>62</sup> Although Heidegger's term of 'Dasein' is unused by Laing, this concept is intricately bound with the term 'being-in-the-world'. When we consider Laing's methodology with relation to the wider context of Dasein, a more substantial footing is gained.

(the 'fundamental structure') about a human being's existence (Dasein) is the nature of his being-in-the-world. (Howarth-Williams, 1977, p. 143)

Dasein, the being-in-the-world, is a pillar within Heidegger's entire body of work and although beyond any capacity here to describe comprehensively, Howarth-Williams provides a brief understanding with reference to Laingian theory that can also be overlaid with the three-part meta-analysis provided by Collier. [1] *Being* is the term given to the free self (denoted with a capital 'B'), [2] *Being* experiences dread/anguish because death is the only discernible anchor in existence and in avoiding this [3] *Being* seamlessly immerses itself within existence (being-in-the-world) and becomes the realisation of Dasein. Howarth-Williams provides a strong argument for the greater influence of Heidegger and this works in tandem with the separate acknowledgement for Heidegger's notion of Dasein in Collier's meta-analysis.<sup>63</sup>

Collier stated that experience ultimately involves an 'absorption in the conventional practices of everyday life'; Howarth-Williams refined and emphasised this final point further explaining that '(the 'fundamental structure') about a human being's existence (Dasein) is the nature of his being-in-the-world'. These influences illuminate different aspects of the self within Laing but it is Heidegger who consistently occupies a central role. This central influence is compounded further with reference to Heidegger's seminal text:

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<sup>61</sup> Howarth-Williams (1977, p. 143) states a second reason for acknowledging Heidegger's role: 'this being-in-the-world resolves into being-with, and being-one's self: that is, to understand the former involves grasping the impact and relevance of other people's existence for him'. This draws on the function of the 'other' and self-formation. Although this component is present within Heideggerian philosophy and a significant aspect of existential influence within Laingian theory, it will be through a Sartrean lens that the role of the other will be focussed upon more heavily in the subsequent chapter, *Self-Formation*.

<sup>62</sup> This declaration also continues to support his own belief that his theoretical standing belonged within the realms of the prestigious philosophical minds Sartre, Heidegger etc., rather than those of his Tavistock peers: a theme which ran throughout the transcripts with Mullan (1995).

<sup>63</sup> In addition, Howarth-Williams (1977) emphasises the responsibility for the 'other' in the becoming of *Dasein*, a concept which will be attended to in the subsequent chapter *Self-Formation*. This falls beyond the existential-phenomenological focus here.

Dasein grows into a customary interpretation of itself and grows up in that interpretation. It understands itself and grows up in that interpretation. It understands itself in terms of this interpretation at first, and within a certain range, constantly. This understanding discloses the possibility of its Being and regulates them. (Heidegger, 2011, p. 23)

Extracted from the English translation of *Being and Time* (1927), this single quotation emphasises that the possibility of *Being*, the free self, is always regulated by the interpretation and immersion of the world Dasein exists within. Herein lies the key to punctuating Heideggerian theory within a Laingian existential-phenomenological methodology: it is our interpretation of the totality of experiences which determines our being-in-the-world. It is not only the unique experiences we encounter, it is our unique interpretation of the totality of those unique experiences which determine our being-in-the-world and constitutes Dasein. In denying potential freedom, Dasein remains an 'inauthentic' position; however, Heidegger states that our aim is to find moments of 'authenticity' that allow us to gain perspective, realise our potential and acknowledge our participation in reductive processes.

This is the base existential state that underpins the human condition, the experience that unites all humanity. But it is not the human condition, the dilemma of existing in the awareness of *Being* and nonbeing, the definition of Dasein, the being-in-the world, that occupies Laing's theory. It is what Dasein encounters that Laing's theory is trained upon. Without jumping the gun to Part 3. *Ontological Insecurity*, Laing positions the focus of his theory, with reference to the human condition, using Tillich's notion of 'ontological insecurity'.

Tillich distinguishes three forms of anxiety: the anxiety of fate and death, the anxiety of guilt, and the anxiety of meaninglessness. This three-fold anxiety is viewed by Tillich, as no mere neurotic superficiality: it stems from the very nature of the human being, which is perched, so to speak, 'on the boundary' of being and non-being. (Howarth-Williams, 1977, p. 150)

Although Laing's theory does not necessitate application of religious content that completes Tillich's approach,<sup>64</sup> he was influenced significantly by the notion that to exist with anxiety is

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<sup>64</sup> Religion, spirituality, and mysticism played a big role in Laing's life, emphasised by his decision to undertake a spiritual retreat during his 1970-71 sabbatical in Ceylon and India, an experience recalled with great importance in his life reflections with Mullan, in the biographical *Mad to be Normal* (1995). We see numerous occasions throughout all his publications where he makes subtle gestures toward this interest. This subtlety becomes

to exist in a state of 'ontological insecurity', to exist without anxiety is to exist in a state of 'ontological security' (Collier, 1977; Kotowicz, 1997), albeit with his own adaptation and interpretation.

The ontological insecurity described in *The Divided Self* is a fourth possibility. (Laing, 1961, p. 51)

Without veering further into the concept of ontological insecurity, which will be addressed later, the illumination of a 'fourth possibility' is of paramount importance with regard to understanding the uniqueness of Laing's existential basis – an aspect seemingly constantly overlooked.

Despite the philosophical use of 'ontology' (by Heidegger, Sartre, Tillich), I have used the term in its present empirical sense because it appears to be the best adverbial or adjective derivative of 'being'. (Laing, 1960, p. 39)

Returning full circle to the primary source of Laing's methodology, *The Divided Self*, the footnotes denote three philosophers we have organically utilised to underpin Laing's existential credentials; it is within the context of this recognition with the identification of the fourth possibility that we reach the kernel of his unique application. The term 'fourth possibility' is made in direct relation to Tillich's three-fold anxieties, not in relation to the three-stage meta-analysis of the existential human condition that unites the previously named influences underpinning Laing although it complements this platform equally as well.

Laing's fourth possibility concerns the multitude of experiences that incur anxieties upon this human condition. It is a focus for the empirical, observable causes of experienced ontological insecurity. The human condition is the base experience that underpins Dasein,

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direct and explicit with *The Politics of Experience*, where he made his most radical propositions with the belief that a breakdown could well be a breakthrough to a higher and lost dimension of experience (this theoretic aspect falls outside the parameters of cause of psychic suffering and therefore receives minimal attention in this thesis). However, even if considering this aspect, he provides little in the way of structural theory regarding these elements and this negates their consideration and inclusion in this thesis. Supporting this decision, Laing states:

Existential thinking offers no security, no home for the homeless. (Laing, 1967, p. 47)

Laing's personal interest and commitment undoubtedly permeates into his writing but it fails to occupy any structural presence within his theoretical framework, being vague or visible in the gaps that remain unexamined. Either way, too little is offered to justify its inclusion without deviating from the focus of this research. My suggestion is that Laing's lack of definitive religious, spiritual, or mystical contribution was due to his ongoing pursuit of enquiry, a personal interest with which he had not yet found peace. What he did know, and could articulate with absolute clarity, was existentialism and existentialism destabilised the naive assumptions of our worldly context, making us 'homeless'.

an experience defined by a counterbalance of awareness for nonbeing and *Being*; it is this awareness that generates angst and motivates solace to be sought in the absorption of the everyday: the being-in-the-world. With greater and lesser degrees of awareness and the consequential angst, we all immerse ourselves within worldliness; however, the experiences we encounter are specific to each one of us. It is the experiences of the everyday, experiences that compound the human condition, which occupy Laing's thoughts and theory.

This final point provides the focus to ask why only a certain few experience ontological insecurity to a debilitating degree. Furthermore, it stimulates thought towards consistencies of experience which exist on a political scale and may correlate with the increasing incidence of psychic suffering in all its guises. Laing is essentially saying that ontological insecurity, and the angst this state of existence incurs, is a perfectly natural reactionary experience; it is not 'illness' or 'disease'. The question located in the fourth possibility is: what has occurred within the solace sought in worldliness that has caused *Being* to lose its positionality in-the-world? Guy Thompson (2000, p. 489) approaches this from a different angle but nonetheless locates a context for fourth possibility anxieties as being rooted in our experience, experience being the 'totality of everything we believe... and this emphasises the "political" nature of psychical suffering'. Again, I start to veer into what will be discussed in subsequent chapters.

Laing's methodology was attuning us as to what to look for when attempting to gain knowledge of the person; existentialism within this context therefore concerns the ontological focus and application. Through unpacking the statements and influences included within his work, it is offered that the use of existential theory rests most thoroughly within a Heideggerian foundation, with support from Sartre and Tillich. To embrace, study and understand the being-in-the-world, we must direct our focus to the totality of experiences as interpreted by the person, inclusive of the precarity of the human condition and the multitude of fourth possibilities: aspects that fall far beyond any psychiatric means of understanding the self. As we progress and explore the application of a Laingian methodology, focus for the fourth possibility will be expanded from individual experience to the wider experience of the person within the family nexus and furthermore to the political realm. As this focus expands from the micro to the macro, the individual moves increasingly from the specific to the universal.

An existential framing for psychic suffering draws into focus how angst, also referred to as anxiety, fear, etc, is a base constituent of existence; it always exists within us all. But our awareness of this negative, daunting, and potentially crippling emotion in its most acute form

is managed through our immersion within the everyday. It is the relationship between this immersion and awareness that Laing brings to the table and develops beyond a traditional existential framework: the notion of ontological insecurity incurred from the fourth possibility. Laing states that when our immersion within worldliness is compromised, our ability to manage this base existential angst is compromised thus heightening our awareness of its presence. This often becomes recognised through experiences associable with psychic suffering. This will be discussed at length in Part 3. *Ontological Insecurity*.

It was previously stated that, encompassing the interpretation of the totality of experiences, existentialism is fundamentally hostile towards theories which declare scientific knowledge of the subject and attempt to nullify the rough edges of existence. It is pertinent to be reminded of this broad argument as we step from existentialism to phenomenology.

## Phenomenology

The phenomenological aspect of Laing's methodology provides an epistemological framework to complement and enquire into complexities previously established within existentialism's ontological theory; essentially, it provides the strategy by which to focus on the interpretation of the totality of experience, a means to encounter another person without reducing them to an organism. Defining this epistemological approach, Laing employs the following formulation:

Man's being...can be seen from different points of view and one or other aspect can be made the focus of study. In particular, man can be seen as person or thing. Now, even the same thing, seen from different points of view, give rise to two entirely different theories, and the theories result in two entirely different sets of action. The initial way we see a thing determines all our subsequent dealings with it. (Laing, 1960, p. 20)

Under the primary phenomenological aim to acquire pre-scientific knowledge (Lawlor, 2010), Laing emphasises that if you approach an object of study through the lens of a preconceived framework – a scientific framework – the assessment process will induce a bias which honours and reproduces the inherent value authenticity already structured within that framework. Placed within a practical context, Laing stressed that the contact point between the medical professional and the person suffering was mediated through a pre-existing medical (scientific) framework authoritatively applied by the medical professional. As a result

of this scientifically structured medical lens, only empirical experiences came into focus and the sufferer is therefore reduced to an organism, made up of isolated and fragmented components.<sup>65</sup> With reference to his earlier example, the practitioner is attending to the shattered parts of Humpty Dumpty without gaining any real knowledge of the totality of the person.

Laing's phenomenological approach to the person is a staple part of his work and consistently demonstrated to evidence the efficacy of his approach to understanding the experience of psychic suffering. *Sanity, Madness, and the Family* (1964) was worked on by Laing in collaboration with Esterson as a means of testing the theoretical hypothesis detailed within *The Divided Self*.<sup>66</sup> that schizophrenia can be made intelligible. A clear example of Laing's phenomenological approach can be demonstrated through the case study of Claire Church, Family 3. Claire was institutionalised with a diagnosis of schizophrenia, in part due to her delusion 'that she had an atomic bomb inside of her' (Laing and Esterson, 1964, p. 75). Within the existing scientific, medical framework, the impossibility of this statement was further proof of the severity of her 'mental illness'. Laing's methodological approach attempted to understand Claire's language within the context of her existence (including and beyond her 'social milieu') rather than against the rigidity of the medical framework. Laing argued that Claire was not being literal but rather metaphorical with her choice of language (the validity of this assertion and the incorporation of existentialism will be picked up later as we consider the entirety of the existential-phenomenological approach). Laing stated that her words were expressing the anger she felt inside, stemming from the situation she found herself in; she felt she could explode with rage, hence the metaphor of the bomb inside her. The language she is using is not evidence of a defective organism (medical diagnosis) but the language is hiding the problem in plain view. This example, among many others, was used by Laing to highlight the unforgiving nature and drastic limitations incurred when the subject's experience is approached with a pre-conceived objectively driven, scientific framework; it misses what is in plain view.

Collier's (1977) deconstruction of Laing's phenomenological application identifies an additional layer of theoretical detail resonating throughout Laing's work and application, stating that this methodology rests upon two primary and structural phenomenological premises:

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<sup>65</sup> See Chapter 13, *Ontological Discontinuity*.

<sup>66</sup> *Sanity, Madness and the Family* (1964) will be used throughout this research to concretise Laing's theory and provide a bridge as we explore its application within a political terrain.

(a) 'pure' (presuppositionless) description of conscious phenomena as we experience them, not as we believe they might be in the light of common sense or scientific knowledge; (b) analysis of these phenomena in terms of intentionality, i.e. directedness towards 'objects,' which is said to be a feature of all phenomena. Thus a belief is a belief that..., a desire is a desire to...a sensation is a sensation of...The 'object' is that which fills the gaps in each case. It need not be real; e.g. ghosts are the object of fear of ghosts. (Collier, 1977, p. 17)

The temptation is to see Laing's work as an attack on science and extracting this quotation from context does little to soften that view; however, this would be an unjust interpretation. Laing is at pains to stress the necessity to reconsider what defines scientific value within medicine, to reconsider the authority given to the existing scientific objective paradigm and encourage embracing the qualities inherent within the flexibility of subjective value authority. Laing was not alone in this argument; others, such as Thomas Kuhn, were questioning the notion of absolute 'truths' within science more generally (see Kuhn, 1962) but Laing was focussed on the science of psychiatry. Within this domain, he reinforced the idea that understanding should not provide a framework by which forcibly to interpret a selection of specific symptoms but rather to accept that the 'experiences themselves' as the totality and the basis for scientific enquiry. It is in response to this that he advocates his 'science of persons'.

Identifying scientism as a major contributor responsible for enacting an existential degradation of the sufferer invites a connection to the philosophy of Kierkegaard, a theorist Laing declares second to nobody and perhaps his only superior (Lund, 1990; Mullan, 1995). Although overt reference to Kierkegaard's work is minimal (Howarth-Williams, 1977) subtleties reside that reflect a significant influence upon Laing's theory.

The nineteenth-century paper *Concluding Unscientific Postscript* (1846), written under the pseudonym Johannes Climacus,<sup>67</sup> illustrates the distaste Climacus held toward scientific paradigms being applied to the human subject and this thought runs deep within Laing's theory. Kierkegaard's body of work is couched within a religious context, inclusive of Climacus<sup>68</sup>. However, when we refine attention to *Section 2: The subjective problem, or how subjectivity must be for the problem to appear to it*, Climacus provides a passionate plea

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<sup>67</sup> Respecting Kierkegaard's instruction outlined in *Fear and Trembling* (2006), where appropriate, further quotations from Kierkegaard will be attributed to the authorship of the pseudonym.

<sup>68</sup> Laing himself was a Presbyterian by upbringing and a religious aspect to his work is often ruminating within the background (Burston, 1996) but this undercurrent within his theory is not addressed here.

which extends beyond Laing's initial assertion that subjectivity enables greater knowledge, by stating that without embracing subjectivity, we lose the pathway to inwardness, knowledge of the self and therefore others; we lose a connection to the essence of existence (of which contact with God is a part). Existentialism does not require a religious context, demonstrated by Sartre's complete rejection of God (Detmar, 2013) and it is without explicit affirmation or rejection that Laing's application is focussed in this research. Nonetheless, this brief input from Kierkegaard has lasting implications as we extrapolate Laing's findings from within the clinical to the political context

This trajectory of thought also overlaps with Buber's theory of *relatedness* and the notion of I-Thou and I-It qualities. Buber's insight, although afforded little more than a fleeting acknowledgement in *The Divided Self*, is developed more in *Self and Others* and *Interpersonal Perception*. Belonging more within the existential rather than phenomenological bracket, this distinction reveals a structural component to Laing's methodological framework that enables it to resonate throughout the entirety of Laing's theory and his application.

The basic word I-You can only be spoken with one's whole being.

The basic word I-It can never be spoken with one's whole being. (Buber, 1970, p. 54)

Laing's phenomenological process of enquiry, discussed most vividly within the self/other psychiatric encounter, is designed to embrace the totality of experience: a prerequisite to prevent a violence to the patient that reduces them to an object, organism, or It. Buber (1970, p. 96) applies his focus beyond the clinical context and gestures more broadly to the 'economy and the state' for creating a dominant discourse described as 'great objective fabrics' that are responsible for I-It relatedness. Extended to society at large, the premise remains fully compatible with Laing; the application of an objective correlate upon the self, regardless of domain, is a desperately reductive process that occurs to the detriment of the individual.

And in all the seriousness of truth, listen: without It a human being cannot live. But whoever lives only with that is not human. (Buber, 1970, p. 85)

Neither Buber nor Laing dismiss the value of qualities associated with I-It relatedness or the medical necessity for an individual to be examined in organismic terms but both agree that for the self to be defined completely within this realm occurs to the detriment, damage and

even dehumanisation of the person. Buber and Laing are also in agreement that society is increasingly moving toward discourses that resonate with I-It relatedness much to our detriment. The phenomenological component to Laing's methodology is designed to create the conditions required to promote relatedness between persons and achieve a truly experienced and shared encounter: an encounter between *Beings*, an I-Thou relatedness.<sup>69</sup> Laing describes this most prolifically within the psychiatric encounter of the clinical context and Buber's influence shows us how necessary this is for social relations without discrimination. The extension of this idea beyond the psychiatric encounter is not beyond Laing's theoretic capacity and revealing this application as we continue is instrumental to developing a totalising approach to Laing.

Phenomenology reverberates throughout Laing's work, not only in his proposed methodology but also his own application. In the progression and evolution from *The Divided Self* (1960) to his final publication within this first phase *Knots* (1970), Laing develops an approach which increasingly adopts poetic verse to illustrate his research findings.<sup>70</sup> It is this form, rather than the content, of *Knots* which is important. Laing's choice of a poetic format is operating on a frequency which disrupts the typical objective, scientific focus used to describe interpersonal communication and perceptions. As a result, it unsettles our approach to the more typical structures of knowledge and therefore the potential limitations they incur. Sartre called poetic representation 'comprehension' and the aim and potential within this form was more accurately to 'relive' the project of the other (Howarth-Williams, 1977; Suhl, 1999). Laing's broader connection with the arts runs throughout his entire career as seen in the poetic representation shown above, encouraging Kingsley Hall residents to express themselves creatively<sup>71</sup> and his own cathartic involvement with music and the piano most significantly. Without committing to a further analysis which would prove a tangent to this research, this investment in the arts, placed within the context of these philosophical influences, would also fit with the Heideggerian notion that art was the most direct medium for expressing and gaining insight into matters of existence (Lawlor, 2010): a means of withholding focus on *Thou* and not *It*.

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<sup>69</sup> Buber and Laing's use of the term 'experience' does deviate. Buber states that I-Thou relatedness is a transcendence of the I-It experience: relatedness surpassing experience.

<sup>70</sup> This increasingly poetic format remains visible within *Interpersonal Perception* (1966), but this particular publication also develops a code-like representation for his theory which arguably falls in complete contrast to the former.

<sup>71</sup> Mary Barnes (Barnes and Berke, 1970) is the most famous resident of the Kingsley Hall experimental community, in-part due to the painting she completed whilst following her *psychotic voyage*.

Laing's phenomenological application focuses on the influence it bears on epistemological framing. He demonstrates throughout his body of works, including beyond the first phase of publishing, the necessity to suspend the belief in absolute and objective truths if we are to gain any real insight or knowledge into matters of existence and the person. With this phenomenological foundation, Sartre's words can be re-inserted and the compatibility of both disciplines becomes even more apparent:

If we admit that the person is a totality, we cannot hope to reconstruct him by an addition or by an organisation of the diverse tendencies which we have empirically discovered in him. (Sartre, 1953. p. 33)

## Existential-Phenomenology

The term 'existential-phenomenology' I take to mean, not the use of the phenomenological method to arrive at existentialist conclusions, but a phenomenology which, rather than simply describing and classifying 'intentional phenomena', seeks to understand these as forming, in the case of each individual, a structured whole – his way of being-in-the-world. (Collier, 1977, p. 17)

Notwithstanding his acceptance of Laing's phenomenological method, Collier raises questions about the existential qualification. However, this concern is dependent on what we understand existentialism to be and the publication parameters by which we seek to define Laing's methodology. Through the theoretical foundation focussing on Heidegger's work and the notion of Dasein, it is proposed that existentialism within this context does not warrant the cleavage separating 'existentialist conclusions' from 'being-in-the-world' as Collier outlines. Using Heidegger, being-in-the-world has been demonstrated as an existentialist conclusion. It is neither limited to 'intentional phenomena' or avoidant but rather encapsulates it within the totality of theory. Through the foundation developed in this chapter, it is suggested that Laing's phenomenological method not only arrives at existentialist conclusions; it offers insight into the totality of experiences that define being-in-the-world. This argues the case for its ability to offer insight into the predisposition and precarity of the human condition when acted upon through Laing's description of empirical events occurring within the 'fourth possibility'.

It is the task of existential phenomenology to articulate what the other's 'world' is and his way of being in it. (Laing, 1960, p. 25)

Laing outlines his existential-phenomenological methodology with the greatest focus and detail in *The Divided Self*. However, by his own admission, *The Divided Self* lacked the evidential support to give credence to the claim that his methodological approach would provide intelligibility for the schizophrenic experience of sufferers. This was the impetus for the publication of *Sanity, Madness and the Family* (1964). In collaboration with Esterson, they applied an existential-phenomenological methodology to 11 case studies. A number of strict inclusion criteria are noted in the introduction; of greatest significance here, each of the case studies was assessed and diagnosed by two independent psychiatrists and, as per the medical-scientific model of illness, deemed to be schizophrenic as a matter of 'biochemical, neurophysiological, psychological fact' (terms clarified more directly by Laing and Esterson in the preface to the second edition, 1964, p. 12).

The following example is selected and extracted from the case study of Maya Abbotts.<sup>72</sup> It is used to highlight the stability of the existential-phenomenological methodology developed throughout this chapter. It also serves to illustrate how Laing's approach contrasted with the medical discourse of its time.

Maya's 'illness' was diagnosed as paranoid schizophrenia (p. 31) ...

...An idea of reference that she had was something she could not fathom was going on between her parents, seemingly about her.

Indeed there was. When they were all interviewed together her mother and father kept exchanging with each other a constant series of nods, winks, gestures, knowing smiles, so obvious to the observer that he commented on them after twenty minutes of the first interview. They continued however, unabated and denied...

...Another consequence was that she could not easily discriminate between actions not usually intended or regarded as communications, e.g. taking off spectacles, blinking, rubbing nose, frowning and so on, and those that are – another aspect of her paranoia. It was just those actions however, that were used as signals between her parents as 'tests'. (Laing and Esterson, 1964. p. 40)

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<sup>72</sup> The Abbott family case study will be a consistent point of reference throughout this thesis, providing continuity for numerous concepts that are developed.

Kendler (2016) gives an historic account of the presence of *paranoia* within medical texts, tracing its modern Kraepelin understanding to 1899. As discussed in the introduction to this thesis, since 1952 the standard of diagnosis used to universalise the practice of medicine was outlined in the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*. It was only in DSM-V, published in 2013, that *paranoia* was removed from the diagnostic assessment of schizophrenia (Tandon et al., 2013) although importantly it remains a significant symptom for the diagnosis of other 'mental health' issues (Kendler, 2016). The point being emphasised is that, during Laing's career, paranoia was a buzz word within the psychiatric field and a key point for diagnosis (and arguably still is). When Maya's ('sane') parents described symptoms befitting paranoia, it is little wonder that the psychiatrists, armed with their medical scientific knowledge framework, concluded a diagnosis of paranoid schizophrenic; the *tick-box* existed and the pen was trained to be purposely poised over the check-list looking for criteria to confirm. A tick that confirmed Maya with her 'abnormal' behaviour created an 'It' in some capacity.

Avoiding this immediate and luring pitfall which satisfied a structured medical training, Laing and Esterson accepted this behaviour for what it was: isolated data but not conclusive information. Even within the context of the interview (Maya misreading innocent actions as clandestine communications), unusual or out of context behaviour was again treated as further data but inconclusive. They sought to understand what this behaviour was for Maya, to link the behaviour to Maya's knowledge framework and not that of the prescribed objective system of diagnosis. They maintained an overall question, asking what knowledge was created when the entirety of experiential-gestalts presented a picture of her being-in-the-world. Over a period of 5 years, Laing and Esterson tried to assemble Maya's worldview, listening without judgement or adherence to a rigid 'scientific' paradigm and attempting to situate her experiences within her most influential social milieu: the family. They fostered an approach that enabled an encounter that promoted I-Thou relatedness, an encounter that kept Maya's qualities of *Being* alive. In applying an existential-phenomenological methodology, they stated that Maya's interpretations were not wide of the mark; her paranoia was based on sound observation but, crucially, it was discredited observation.

There is something of a contradiction when considering that Maya's interpretation of communicative actions required the external validation of the interviewers' recognition to gain value qualification. The catch 22 being that without external qualification, the intelligibility of these interpretations could not be anchored within experience. However, herein lies the overarching political engagement of Laing's theory. The value of Maya's subjective experience was discredited firstly by her family and secondly by the medical

authority. The frame of reference employed by Laing is an emancipatory one, empowering the previously downtrodden, dismissed, and diagnosed. Inverting the value authority relationship, Maya's disjointed, disconnected language and behaviour were empowered and as a result, Laing and Esterson were able to reveal the intelligibility of her previously deemed incoherent experience. This opened new avenues for thinking about suffering.

To summarise Laing's existential-phenomenological methodology: without enforcing a theoretical framework over the individual to interpret their experience (phenomenology), the individual will be accepted as a being-in-the-world, a being perched upon the precarity of being and non-being and resisting objective classification (existentialism). The scientific principles of psychiatry, structured by logical empiricism, are selective in the experiences they reveal – hence the self, through this lens, becomes an organism, located in the outer world only. Laing's existential-phenomenological methodology showed no such prejudice, reattuning an understanding of self that engaged with the totality of experience, the inner is given space to exist with the outer. There is no doubt that Laing's adaptive use of these traditional philosophical fields incurs limitations; however, the argument presented and tested within *Sanity, Madness, and the Family* is that it gave new insight, clarity and intelligibility to causes of psychic suffering residing in the murky depths of madness, schizophrenia, and psychosis. It also prevented further damage being inflicted upon the individual by reducing them to an It as defined by a medical standard.

Laing identified a need within psychiatric discourse to better understand the self and he proposed a solution with a return to philosophy. This underpinned his encouragement of the development of a 'science of persons' but, as recognised by Mitchell, this proposed framework never materialised. What he did provide was a clearly identified philosophical direction by which to pursue such a theory: existential-phenomenology. Once again, we find certain elements wanting with his application, namely vagueness in certain aspects. This vagueness, as we will see, has invited subsequent theories (specifically psychoanalytic thought) to be inserted as a means of shoring up its structural integrity. However, I believe that through this chapter, we have identified philosophical influences, both declared and resonating beneath the surface, highlighting the reverberation specifically for Heidegger, Sartre, Tillich, and Buber, thus revealing a wide basis for the qualification of a structurally sound existential-phenomenological methodological structure.

This exploration and further support does not change or alter the framework outlined by Laing but the initial building blocks for Laing's existential-phenomenological methodology have been analysed, clarified and its structural properties identified. As we develop his

theory in subsequent chapters, increasing the stress placed upon this theory, the additional support developed here strengthens Laing's theoretical base which enables potential shortfalls incurred due to the fragilities of his theoretical structure to be negotiated.

Perhaps a key element to the existential-phenomenological methodology Laing produced was that it gave a reason to approach understanding persons with wonder. Laing was not simply stating that psychiatry and the scientific principles it was founded upon were reductive; he was providing an alternative methodology to substitute into the self/other dynamic. Even to use the word 'methodology' as a means to describe the meeting of persons seems counterproductive at this point. It suggests a scientific context as well as a power imbalance and therefore a knowledge hierarchy. Laing's existential-phenomenology was therefore more an example of an anti-methodology: a means of resisting the cultural pull toward scientific authority as a way of understanding the self and a theory to undo the cultural 'knot' that the authority of psychiatric science has planted within western society. A knot that is more prevalent and powerful now than ever before.

## 6. Self-Formation

This chapter establishes a theory of self-formation from within Laing's theory, providing a conceptual framework for the person by which we can map the 'interpretation for the totality of experiences'.

Although the construction of an independent theory of self is a deviation from Laing's original theory, maintaining a concept analysis allows me to honour the core ideas. Through this analysis, I address important critical aspects that have previously caused problems for consideration of Laing's writings and this continues to help develop a strong structural base.

One term sums up the terrain on which we are to search for the meaning of the self and all interpersonal relationships. This term is Laing's far reaching conception of '*experience*'. (Mitchell, 1974, p. 236 – *italics added*)

Experience is the fundamental focus for Laing; his methodology sought to ascertain intelligibility of experience and now, in part response to that intelligibility, we consider how experience maps onto a theory of self. Identifying a definitive theory of self within Laing's work is difficult; in a truly existential manner, this aspect remains woven within the more prominent and primary concept of experience. It is proposed that a difficulty in distinguishing a clearly defined theory of self is encountered in part because of Laing's reluctance to deconstruct or isolate components for explanation,<sup>73</sup> a proposition exemplified by his approach to defining 'unconscious experience'.

I am aware that this difficulty could possibly be resolved by a careful definition of unconscious and experience, but in resolving the difficulty one seems to lose the baby with the bathwater. (Laing, 1961, p. 30)

Contravening Laing's advice, this chapter will do exactly what he warns against by deconstructing aspects of experience but recognising that they remain intertwined within a totality. This chapter will be approached in two sections: *Ego*, and *Other*. There is no intention with these sections to enforce a division between either aspect but rather to indicate the preference of focus each utilises. *Ego* examines the internal framework of the

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<sup>73</sup> An additional perspective could be suggested that Laing's reluctance to deconstruct or provide a thorough framework of self was a deliberate and intentional act by Laing to ensure his work did not contribute further to the reductionist and dogmatic theories dominating the scientific understanding of existence.

psyche; *Other* will be concerned with all external objects implicated with the ego. When I refer to the term 'self', it will be in a manner that embodies the existential singular totality of ego/other.

Relying primarily on the highly explanatory text *Self and Others* (1961) – a title alone that embodies the primary aspects of this chapter – complemented with the support of additional texts, a structured and focussed theory of self will be produced. As always, altering Laing's original format risks losing the simplicity and clarity respected so widely in his writing. However, Laing's theory of self is heavily dependent on a pre-existing existential knowledge; it adopts existential positions without context or definition, expecting the reader to possess a base understanding of existential tenets – in stark contrast to the detailed descriptive foundation underpinning his existential-phenomenological methodology. Without this foundational knowledge, his concepts and theory are more susceptible to engulfment within more dominant theories of self, with psychoanalytic structures possessing the most established influence to overpower what was a new and unique theory. For this reason, in this chapter more than any other (specifically as we examine what can be deemed the inner structure of self: the ego), we consider the complex relationship psychoanalytic theory plays and untangle this influence from Laing's intended existential framework.

Each component addressed will contribute to a foundation that is mindful of an intended totality, developing a clear and structurally sound Laingian framework of self. It is hoped that this approach will mitigate the requirement for a pre-existing existential foundation to understand many of his texts discussing the self.

## Ego

As previously noted, psychoanalytic theory was a strong influence in psychiatry during Laing's training and first phase of publication (heavily influential in the development of the DSM I and DSM II and by proxy, the ICD equivalent: manuals of significant power and influence during this period). The psychoanalytic construction of the psyche (a tripartite framework of the id, ego, and superego) plays a constant, if not always obvious, role in the construction of 'mental disorders' that structure psychology and psychiatry, even to this day (Tryer, 2014; Watters, 2010; Blashfield et al., 2014). The Freudian concept of a dynamic unconscious, to which this framework is intricately bound, holds an even greater structural influence and this permeates through to social discourse and beyond (Rajamanickam, 2008). It is not uncommon to hear the lay person discuss occasions of unforeseen personal

actions and/or behaviours occurring because their unconscious thoughts are being acted out, supporting the underlying notion of a psychoanalytically compatible unknowable and independent unconscious mental structure that operates beyond their own awareness. Therefore, when Laing uses terms such as 'unconscious' and 'ego', it is not without risk of being (mis)understood within this more prominent framework.<sup>74</sup> He confronts this potential (mis)understanding from the outset, declaring a complete separation from the psychoanalytic model and positioning his theory in a different theoretical space:

[W]e take a single man in isolation and conceptualise his various aspects into 'the ego,' 'the super ego,' and 'the id'... How, even, can one say what it means to hide something from oneself or to deceive oneself in terms of barriers between one part of a mental apparatus and another? (Laing, 1960, p. 19)

Reinforcing his existential-phenomenological approach, this statement outlines rejection of any theoretical framework which attempts to reduce or isolate the self to individual components, including psychoanalysis. Laing does, however, retain use of the term 'ego', albeit seldomly, as a synonym for the mind which he presents as the totality of mental processes. Using the term 'ego' carries significant psychoanalytic connotations and Laing's deliberate choice to continue with this phrase provides valuable insight into his theory of self.

The Freudian understanding states that the ego 'is the central structure containing the systems Cs – consciousness' (Frosh, 2012, p. 71). Through Laing's rebuttal of the tripartite psychoanalytic perspective, yet continuation of the use of the notion of the ego, he is making a clear statement that the ego is the totality of mental functioning. More accurately, he is asserting that the ego is a *conscious* totality of mental functioning. In dismissing the notion of an id, super ego and the unconscious, Laing is asserting a complete departure from psychoanalytic theory.

Complicating this position, however, Laing acknowledges several psychoanalytic theorists in footnotes of *The Divided Self* as informing aspects of his theory of self,<sup>75</sup> the most prominent being Fairbairn, Guntrip and Winnicott coupled with later acknowledgement in *The Politics of Experience* of Bion and Klein. Collectively, these names represent major players associated with the Object Relations School (ORS), and although psychoanalytic and developing from

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<sup>74</sup> Made all the more complicated by the knowledge of Laing's psychoanalytic training and his frequent reference to his qualification in this discipline.

<sup>75</sup> They are acknowledged in specific respect to the 'false self' concept. This will be discussed in Part 3, *Ontological Insecurity*.

the foundation of Freud, their notion of the ego is significantly different from its Freudian roots, extending to their concept of the unconscious; these differences help to illuminate aspects of Laing's theory.

Focussing on Guntrip and Fairbairn's theory, they both support a notion of the ego being primarily and initially whole, a complementary base structure to Laing. But they differ significantly in the perception of the ego's division or separation into fragmented objects. Whereas Laing states that the self splits in response to adversity having a detrimental impact on being-in-the-world, for Guntrip and Fairbairn and arguably the ORS generally, fragmentation is a necessary outcome to manage the frustration of the ego's needs and desire. Against Laing, a certain degree of splitting is a necessary management strategy for existence and it is through this splitting process that the unconscious comes into being (Frosh, 1987).

The ORS contrast with Freud in that the unconscious is a reactive development within the self, as opposed to an existing element. But, whether formed or elemental, the constitution of an unconscious structure is universal – and Laing's theory is a steadfast rejection and denial of this notion of an unconscious structure. The unconscious in this capacity universally complies as a place of psychic activity that contains repressed drives; it is a mental process responsible for primary momentum to our psychic lives and therefore our existence, a process described by Frosh (2011, p. 29) as being 'alien', hidden, and '[operating] outside the control of the "I" or "ego"'. For Laing (1960 and 1961), the ego is the totality of mental functioning; therefore, an unconscious in the Freudian, psychoanalytic sense, could not exist in addition, outside, beyond, or independent of it.

It is necessary to expand on this detail because, somewhat problematically on a first reading, Laing continues to use the term 'unconscious' through his collected works within a variety of contexts: 'unconscious phantasy' (Laing, 1960, p. 57), 'unconscious experience' (Laing, 1961, p. 30) and 'unconscious' (Laing, 1965, p. 27). This poses the question: how can Laing's theory and definition of the ego withhold use of the term unconscious?

Answering this question requires an understanding of a term that overlaps once again with psychoanalytic theory, specifically Kleinian theory.

The foundation of the ego as a totality of mental functioning is grounded in Laing's theory of 'phantasy' constructs (Laing, 1961; Laing, 1966). The term 'phantasy constructs' again draws ORS comparisons. Echoing Klein's application, phantasy constructs are described as the content of the ego, akin to an internalised framework of information; phantasies are units

of knowledge which establish themselves as a referential source of subjective guidance. Phantasy systems intersect, overlap, and congeal with other phantasies and, through the influence they exert (including imagination, memory, and perception, etc.), they become our life-story: the internalised knowledge framework which informs and guides all aspects of our existence.

The normal state of affairs is to be so immersed in one's immersion in social phantasy systems that one takes them to be real. (Laing, 1961, p. 38)

Laing's state of normality<sup>76</sup> [or commonality] is detailed as an immersion in one's social phantasy system. Using Kleinian terminology but arguably in a manner that is designed to reflect and articulate existential theory, Laing's 'social phantasy system' is a crucial element in his theory, establishing a framework by which the absorption in *worldliness* (as outlined in the previous chapter) is mapped into the ego. Social phantasy constructs play a primary structural role in Laing's theory of self-formation; they create the web of discourse (knowledge) that connects our interpersonal relationships, expanding from the intimate to the political and collectively underpin the 'conventional practices of everyday life' (Collier, 1977, p. 17). Our ability to engage with these social phantasy constructs allows our inner and outer worlds to interact in relatively peaceful coexistence.

Laing provides a wealth of detail in *Self and Others* and *Interpersonal Perceptions* for the process of phantasy construction through the interpersonal experience of ego/other.<sup>77</sup> It must always be remembered that phantasy constructs cannot be isolated and contained purely within the ego but exist in the experience between individuals, ego and other; they construct the self. Burston (2000, p. 105) unpacks this further, contending that although Laing never explicitly details them in this way, his theory suggests that phantasies operate on a social macro/micro scale, collectively uniting society under 'religious creeds, political ideologies, and dull, unreflective scientism...And on the micro social level, social phantasy systems include a startlingly diverse range of family mythologies and organizational myths and metaphors'. Social phantasy systems, whether micro or macro, are therefore absorbed by the self and subsequently participated with and reinvested into both domains, ego and

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<sup>76</sup> 'The [common] state of affairs' is perhaps a more accurate term in this context. Normality within 'mental health' is explored in Chapter 8, *As a Totality*.

<sup>77</sup> Phantasy constructs are not purely a part of the inner-world of the self. Due to informing and influencing behaviours and knowledge toward the outer-world, other and self, they underpin the basis and qualification for being-in-the-world. Phantasies are the pathways facilitating the self-forming experience between self and other, creating, maintaining and continually evolving through shared experience with the other and it is only through this ego/other worldly experience that their development is understood.

other: a cyclic and continuously evolving process.<sup>78</sup> This aspect is picked up in detail in the following section; however, it serves two initial functions being raised here: firstly, to consider the role of phantasy constructs through a lens trained on the ego, facilitating a further development of Laing's concept of the unconscious and secondly, that the social phantasy construct, although dominated with talk of a dyadic context, extends into the multiplicities of macro relationships.

It is important to remember that the internalisation of experiences that constitute our social phantasy construct are not universal; they do not operate in a singular, linear, direction, depositing in the self (the shared experience of ego/other). Hence the reality that only certain members within a family nexus develop 'schizophrenia' and furthermore that, although 'mental illness' disproportionately affects certain groups within society i.e., those of lower socioeconomic status (class), it does not affect every member. Experience is always dependent upon perception and interpretation. Interpretation is highly infused with our understanding of that experience; therefore, our prior existing phantasy constructs will influence our interpretation of any given experience. Perception affects the selection and reception of experiences and this helps determine which experiences are given priority or disregarded. Interpretation affects perception and perception affects interpretation. Whilst dominant themes of experience will be internalised within the social phantasy construct, this will not be without the influence of interpretation and perception. Whether dominant in the macro or micro, they will be influenced by the very substance of the phantasy construct and also play an important role in the construction of phantasy. Ideology influences the interpretation of the family nexus, whilst the perception of the family nexus influences the interpretation of political ideology as a continuing and cyclic process. This process maps onto Laing's existential fourth possibility, affecting the interpretation of the totality of experiences, our *worldliness*, and substantiating a non-concrete, personalised reality of the ego, albeit with commonalities and consistent themes (Laing et al., 1966). Although Laing never declares as such, it could be offered that the only fundamental phantasy construct is the awareness of *Being* and nonbeing; however, interpretation of the totality of experiences has a significant impact on how this affects our experience of angst and subsequent immersion in the everyday. This leads us neatly onto the concept of consciousness and our awareness of social phantasy constructs.

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<sup>78</sup> This providing a direct link to the influence that Dasein and interpretation plays in our self make-up (see Chapter 5, *A Laingian Methodology*)

Laing (1961) builds on this initial foundation, developing the complexity of phantasy to operate beyond our immediate awareness but crucially to remain experienced by the ego. Developing this concept to highlight his distance from the Freudian notion of ‘unconscious experience,’ he states that in the established psychoanalytic understanding the terms ‘unconscious’ and ‘experience’ were diametrically opposed; conjoined they form an oxymoronic statement.<sup>79</sup> It is impossible, he argues, for a psychic event to be contained within a separate and unknowable compartment of the mind (id/super-ego – the unconscious) and to retain a definition of ‘experienced’ – a quality only capable within consciousness, therefore the ego.

Laing retained the term ‘unconscious experience’ and applied it to qualify the same psychic events that psychoanalysis placed within an unknowable and separate unconscious mental process; however, his existential basis made a seismic change to its definition. Unconscious experiences were deemed as uncommunicated psychic acts; we do not contemplate or acknowledge their presence and process, but we act upon them.

The ‘unconscious’ is what we do not communicate, to ourselves or to one another.  
(Laing, 1961, p. 32)

With the description of being ‘uncommunicated’, traits of Lacan’s notion of an unconscious structured by language come to the fore: a psychic system developed and constituted by the repression of signifiers protecting us from unbearable thoughts (the repression of signifieds rarer and more synonymous with psychopathology – Baily, 2009; Lemaire, 1970). Lacan, being a prominent player in the psychoanalytic field before, during and since Laing, was acknowledged briefly in *The Politics of Experience* and Burston (2000) states that Laing saw potential in Lacan’s thinking, even if he ultimately disregarded its influence. Post Laing, we also see other psychoanalytic and non-psychoanalytic theorists proposing variants of the unconscious that relate highly to this ‘uncommunicated’ aspect – for instance, the social psychologist Billig (1999) produces a ‘discursive unconscious’, stating that everyday language has the capacity to be both ‘expressive and repressive’, creative of our states of consciousness. However, whilst we can be drawn to the similarity of language and communication to embed Laing’s theory in prominent and established existing psychoanalytic / psychological theory, it is what constitutes the unconscious that separates Laing.

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<sup>79</sup> See Laing (1961) *Self and Others*, p. 22

The unconscious for Laing defines psychic acts undertaken with a type of autonomy, without consideration, reflection, or recognition. The caveat to this definition was that in extreme cases, where an individual was unaware or unable to register the phantasy constructs influencing this unconscious experience, Laing stated that the individual was 'split' and psychosis may result.<sup>80</sup>

Emphasising the role of experience within the ego, a logical question arises as to why anyone would continue or maintain processes detrimental to health, happiness, or wellbeing, or even truth. If unconsciously experienced (Laing states that our phantasy constructs remain accessible), then why not revalue and realign negative psychic acts? It is these problems that lead Collier<sup>81</sup> to question the qualification of Laing's theoretical framework of self, specifically regarding his interpretation of the unconscious.

No argument is presented by Laing to show that the Freudian explanation in terms of the unconscious is inapplicable. Rather it is seen as unnecessary because there is an explanation ready to hand. (Collier, 1977, p. 35)

Collier suggests that although Laing employs different terminology (a suggestion that the above analysis would question), the Freudian premise of an unconscious and the mental components connected with it – the id, the super ego – remain compatible with Laingian theory, particularly from a theoretical vantage of repression. However, the second sentence of this quotation reveals more than a flippant remark underscoring the lack of substance in Laing's rejection of the psychoanalytic unconscious. It asserts a loyalty within Laing's theory to existentialism as a pre-existing theoretical framework encompassing the self. It also suggests an adherence to a more scientific view (in the Laingian sense) that the simplest possible explanation of a phenomenon is always preferable. Why assume an invisible unconscious when you can see what is happening 'on the surface'?

This identification is key to unpacking Laing's theory of self, specifically how we can conceive of an ego totality and its incorporation of unconscious experience within it.

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<sup>80</sup> This split is focussed on at length in his first publication *The Divided Self* (1960). However, in *Self and Others* (1961), he suggests that splitting is common to all persons, it is only when the disjuncture between inner and outer (therefore self and other) becomes too severe, an absolute cleavage, that this split incurs psychosis. This will be addressed in Part 3. *Ontological Insecurity*.

<sup>81</sup> Collier's text is openly supportive of psychoanalytic theory.

Following *The Divided Self* (1960), Laing shows an increasing tendency in subsequent texts not to invest as thoroughly in an explanation of the foundation or context of theory he utilises. This is particularly pertinent with *Self and Others* (1961) and the existential tenets it employs – this being the book most concerned with providing a theory of self (his use of ‘Bad Faith’: a Sartrean component, being indicative of this). Laing’s reduced foundational development of theory is particularly evident with his sparse discussion of what constitutes unconscious experience.

Describing a simple interpersonal dynamic involving a two-person dyadic relationship, Laing (1961) explains that there are three primary modes of experience involved: imagination, memory, and perception. Perception (hearing, seeing, etc) is the priority experience which keeps us grounded and connected to the other but this encounter is dually informed by imagination and/or memory. On occasion, imagination and/or perception may become the dominant mode of experience and this has the capacity to compromise the communication between the individual and their other. Crucially, Laing states that although unaware that memory and imagination have become dominant, they are nonetheless experienced.

Peter is split. He is unconscious of his imagination [and/or memory], at that moment.  
(Laing, 1961, p. 31)

Peter’s experience for a partial and momentary split is therefore described in the context of being a natural and acceptable ontological experience. As we will see in the following chapter, more substantial splits are the cause of significant psychic suffering. Returning to the point in question, this is the most substantial and vivid acknowledgement as well as description of the unconscious within Laing. For myself, this descriptive example is too brief when considered in isolation to substantiate a claim for Laing’s use of the unconscious as distinct from the more prominent psychoanalytic understanding, providing support for Collier’s (1977) assertion that Laing’s theory can be defined within a psychoanalytical framework.

It is the surrounding discussion of the self which offers a more illuminating account of the unconscious. Laing (1961) continues to voice his respect for, and influence by, Sartre; he draws extensively on Sartre’s theory to illustrate his own theoretical concepts. Sartre proves a useful and complementary theorist to support such brief explanations and develop a more substantial Laingian theory of self, particularly with reference to the unconscious.

Existential psychoanalysis<sup>82</sup> rejects the hypothesis of the unconscious; it makes the psychic act coextensive with consciousness. (Sartre, 1953, p. 49)

Predating Laing, yet consistent with his theory, Sartre states that all psychic acts are experienced, not only by the individual but within the shared context of ego/other (at this stage, we will stay focussed on the individual). To be experienced, the psychic act must be within consciousness; it cannot be buried within a hidden, unknowable, separate functioning aspect of the mind – as per the psychoanalytic notion of an unconscious and specifically the driving impetus associated with the id.

[E]ach time that the observed consciousnesses are given as unreflected, a reflective structure is superimposed on them – a structure that is thoughtlessly claimed to be unconscious. (Sartre, 1937, p. 18)

Within the totality of a single consciousness, Sartre provides a differentiation between unreflected<sup>83</sup> and reflected<sup>84</sup> experience, providing two types of consciousness. Unreflected experience is synonymous with autonomy; it is my reactive experience to the other/world beyond, incurring the annihilation and disappearance of awareness for the ego and I am positioned seamlessly within the objects of the world which surround me. Through reflective experience, I make my own consciousness the object of awareness; 'I am watching myself acting' (Sartre, 1937, p. 20) and it is through this act that the (object that is the) ego is created.<sup>85</sup> In a purely unreflective state, the ego is (defined by) action.

Complementing this Sartrean infusion, Laing (1961) tells us that thoughts associated with phantasy constructs remain experienced but not always in awareness. Using the theory of unreflected consciousness, phantasy constructs are experienced as instantaneous; we are the thought. Therefore, no awareness or consciousness is registered toward engaging with the content and construct of our phantasy system– most importantly, thought remains experienced, hence guiding our existence. However, when we question or consider those thoughts, our awareness is directed toward the ego. This reflective experience upon consciousness opens awareness to the phantasy system, allowing us insight into the rationale guiding our actions, states and qualities of mind. Importantly, Sartre outlines how

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<sup>82</sup> *Existential psychoanalysis* being the application of existentialism to matters of the psyche (see Sartre's 1953 book of the same name for further details).

<sup>83</sup> Sometimes referred to as *pre-reflective* (Sartre, 1957).

<sup>84</sup> Sometimes referred to as *reflective* (Sartre, 1957)

<sup>85</sup> Reflective thought creates, not discovers, the ego/self.

reflective experience does not guarantee a transparent or mirror-like insight into the ego but rather has the potential to distort and refract the knowledge contained within (this offers some explanation as to why we maintain potentially detrimental phantasy constructs).

At no point within *Self and Others* (1961) does Laing refer to an unreflective or reflective conscious process and as a proud Sartrean scholar, evident through his extensive use of Sartrean theory throughout this publication, a question could be asked as to why? He was no doubt aware of these terms; therefore, his omission could be indicative of him not wanting his theory to be fully defined within this framework. However, I propose that Laing's theory is built upon the presupposition of existing knowledge of this Sartrean foundation. This is no more evident than when Laing (1961, p. 112) qualifies an example by stating '[e]ach cannot sustain his 'bad faith' without any explanation, definition or context. 'Bad faith' is a staple concept of Sartrean theory and a pivotal component confronting the question as to why we maintain and continue to be guided by phantasy constructs detrimental to health, happiness, wellbeing and even truth, even when accessed through reflective consciousness.

[T]he one who practises bad faith is hiding a displeasing truth or presenting as truth a pleasing untruth. (Sartre, 1957, p. 72)

Very simply, 'bad faith' is the act of lying to oneself. It is a vital component which Sartre uses to underpin the three stages of existentialism defining the human condition discussed in the previous chapter. Bad faith is the reason for living inauthentically; it justifies how we live at one and the same time with the awareness of potential freedom but willingly remain immersed within the estrangement of worldliness. This existential human condition is concretised by bad faith.

Inserted within Laingian theory, bad faith extends and provides a valuable understanding of the self (supported by Laing's singular use of the term). Phantasy constructs are specific to each individual, constructed and shaped by the ego/other experience. This places significant emphasis on the personalised qualification of interpretation woven within the totality (of experience). Individual experience constructed and maintained through the interpersonal relationships between ego and other creates a unique referential web of phantasy constructs; negative constructs are secured by bad faith. The critical question surrounding bad faith, however, (whether unique to the individual, applied to societal norms, or the existential crisis encompassing the human condition) is: why we adhere to it?

The goal of bad faith ... is to put oneself out of reach; it is an escape. (Sartre, 1957, p. 89)

Sartre (1957) states that bad faith is practised because bad faith is faith. We place our faith in the socially constituted object we perceive our ego to be (being-in-itself) rather than the potentially free ego it is capable of realising (being-for-itself). The solidifying factor to this faith is in the omnipotent and ever-present anguish experienced by the individual in the realisation that a choice exists to ignore or refute this lie: a choice that triggers an experience of the daunting prospect of potential freedom and with that the human condition, drawing awareness of *Being* and nonbeing into the reflective state of consciousness. It is the fear of the unknowable potential of freedom which binds our faith to the lie; better the devil we know.

Returning this to Laingian theory, if the individual acknowledges the choice to readjust and amend a specific phantasy construct, they are opening consideration of the wider prospect of a potentially free self. The act of questioning is all encompassing, therefore immediately incurring anguish in the face of the unknowable terrain of unanchored freedom. Faith in the phantasy construct, whether detrimental or not, reaffirms faith in the object of the ego (being-in-itself).<sup>86</sup>

Bad faith ... implies in essence the unity of a single consciousness ... [dissolving the notion of a duality existing as] ... deceiver and deceived, the essential condition of the lie, by that of the "id" and the "ego". (Sartre, 1957, pp. 72 – 74)

The ego must be acutely aware of the lie to experience anguish. Therefore, the thought must be a pre-reflective experience, or unconscious experience in Laing's redeveloped use. The thought, the anguish and bad faith are all enacted as one within the pre-reflective experience of the conscious ego. If different aspects of consciousness and the psyche existed (as per the tripartite construction of the Freudian psyche or the fractured objects of the ORS), the instantaneous investment in the lie would falter; without experiencing the lie (the Freudian derivative of an unconscious), we would not flee the choice of potential freedom and remain immersed within the 'conventional practices of everyday life' (Collier, 1977, p. 17). Be it positive or negative, true or untrue, the lie is experienced as reality.

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<sup>86</sup> This can be overcome without an all-consuming existential crisis being experienced if the detrimental phantasy is countered with sufficient contrary experience and accompanying oppositional phantasy constructs or, in the most severe cases, guided existential psychoanalysis (see Sartre, 1953).

We undertake psychic acts that may be detrimental or even destructive as a process of bad faith; we [unconsciously] pre-reflectively experience the displeasing truth and anguish and we pre-reflectively accept the experience of the untruth contained within the phantasy construct. Even with reflective consideration, we may accept the lie based on two premises: firstly, the bad faith invested in the lie maintains the faith we have in the existential position in which humankind is immersed; secondly, even if we access the specific phantasy construct, there is no guarantee that our reflective experience will not corrupt the data present.<sup>87</sup> Ultimately, through disconfirming the truth of a single phantasy, we risk exposing the fragility of the entire phantasy system of the ego and therefore our existential stability in-the-world.

Using a Sartrean underpinning establishes a more complete platform to build a Laingian theory of self. Always emphasising the centrality of experience, the collaboration of Sartre/Laing reveals a solid theoretical framework for how all psychic acts can be unconscious experience and yet remain within the consciousness of the ego.

The mind is what the ego is unconscious of. We are unconscious of our minds. Our minds are not unconscious. Our minds are conscious of us. (Laing, 1965, p. 11)

Put very simply, 'we' are the ego. The acknowledged limitation to this isolation of ego is the necessity to embrace its inseparability from the other which we reach in a moment, explaining how experience unites ego and others as a being-in-the-world: the self.

This deconstructive analysis of Laing's concept of a non-unconscious (or indeed non-conscious) mind that operates with two levels of awareness (reflective and pre-reflective) is important in that it prevents the common tendency for this aspect of his theory to be drawn into a psychoanalytic structure – serving to undermine his instruction to be read within an existential-phenomenological context and destabilising the entirety of the theory built upon this aspect. Laing's use of an unconscious is significantly different to the more prominent psychoanalytic notion of the 'two minds' and, appreciating this difference, draws a critical component into the equation that refutes Collier's suggestion that Laing's theory remains compatible with a Freudian framework. Embedded within Laing's rejection of the unconscious is the rejection of determinism. The unconscious, whether innate (Freudian) or constructed (Lacanian/ORS), houses repressed drives and desires that provide the impetus for our psychic lives: the momentum to our existence. When conveyed in 'terms of linkages

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<sup>87</sup> Locating the origin of detrimental phantasy constructs is highly complex as we will discuss in the following section.

between conscious experience and their underlying unconscious determinants' (Guy Thompson, 2000, p. 487), the broad collective of psychoanalytic disciplines always arrive at a form of deterministic theory of self. The self is a predetermined product of unconscious desires and thoughts. This remains equally true of the psychopharmacological approach to the mental disorder and illness also; the illness is determined by chemical imbalances within the brain.

As stated from the outset, the existential foundation within Laing's theory of a potentially free self is vitally important. His concept of the ego provides a theory of differing levels of experiential awareness within the non-unconscious self and, as a result, the existential premise of a potentially free self becomes more defined. Acknowledging the similarities and contrast with varying members of ORS which deviate from a more traditional psychoanalytic construct of the unconscious helps to reinforce the theory's existential location and, importantly, removes any suggestion of an overlap with deterministic conclusions. Optimism and hope are present in the agentic fundamentals of the existential condition, a key element of Laing's theory and a clear distinction from psychoanalytic theory with which it is often blurred.

## The Other

Laing's concept of free will was presented with recognition of the importance of the other. It is Laing's ability to bridge both of these areas that makes his theory so important at this time. This section analyses concepts that reveal how the other is an inseparable component of experience and therefore an inseparable compositional part of the self. It is from this framework that we will develop a political application in the subsequent chapters.

Other people become a sort of identity kit, whereby one can piece together a picture of oneself. (Laing, 1961, p. 87)

Ego exists for alter.<sup>88</sup> (Laing et al., 1966, p. 6)

Building on the existentially informed, non-deterministic, conscious ego, framework of the psyche, we must now consider its inseparability from the other: the inner, ego, individual being intricately bound within a bi-directional relationship with the outer, other, persons and world beyond – ego influencing other, other influencing ego. This relationship has been

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<sup>88</sup> 'ego (self) and alter (other)' (Laing et al., 1966, p. 6).

hinted at in the section above in the context of being responsible for the forming process of social phantasy systems and now we draw our attention to it fully. Essentially, the ego cannot exist in isolation therefore the self is a constituent of the world it inhabits and the people around them: a being-in-the-world.

Unlike the situation with the ego, Laing provides an extensive account of the process of self-formation in the context of others; the texts *Self and Others* (1961) and *Interpersonal Perception* (1966) are instrumental in this focus. Through these books, and supported by other writings, Laing provides a detailed explanation as to how phantasy systems are created within the ego/other dyad; however, he extends the dyadic relationship by building the interpersonal dynamics of the family nexus and extending them to the political. This is a development that becomes most apparent in *Sanity, Madness and the Family* (1964) and *The Politics of Experience* (1967). The base premise remains the same in all permutations: the ego and other(s) are intricately bound in the formation of the self.

In Freud's theory, for instance, one has the "I" (ego), the "over-me" (super-ego) and "it" (id), but no *you*. (Laing et al., 1966, p. 3)

Acknowledging several philosophers that precede him, Laing states that too much emphasis is placed on the I, the individual and there is too little recognition for the other, you, for a means of understanding the self. Whilst pointing the finger at established theories from this era that commit this short-sightedness, 'classical psychoanalytic theories, object relations, transactional analysis, and [...] games theory' (Laing et al., 1966, p. 8), there is also recognition for what they bring to the table, particularly the notion of introjection and projection, overlapping within the classical psychoanalytic and object relation field.

Consistent with the theoretical basis established thus far, existentialist theory plays the pivotal role in establishing the parameters of Laing's theory, allowing other theories to contribute to Laing's ideas without consuming his conceptual framework.

It is doubly "I": it is the world revealing itself to me and it is "I" in relation to others, I forming my thought with the mind of others. (Sartre, 1953, p. 66)

As illustrated by Sartre (1953), the I (or ego) is informed by the others occupying the world beyond it and the ego thus influences the world beyond it. Ego and other are mutually dependent and their influence flows in both directions. Heidegger emphasised the idea of an individual embedded within a worldly context to an even greater extent than Sartre as is

particularly evident in the descriptive language Heidegger employs in the latter stage of his career; he avoids individual qualities such as intentionality and consciousness but rather focusses completely on the inclusiveness of being-in-the-world (Guy Thompson, 2004). This shift in language and collective focus is also evident within Laing and, whilst he retains terms such as unconscious experience (in the Sartrean context discussed previously), the balance of his terminology and therefore theory resides with worldly experience. Although this character of writing echoes certain Heideggerian traits, Howarth-Williams (1977) downplays the structural role of Heidegger here, contending that Laing's theory of self begins with Sartre as the primary source of influence.<sup>89</sup>

[E]ach a self to himself each an other for the other, together, in relation. (Laing, 1966, p. 7)

This basic illustrative dyad emphasises the mutual implication of ego and other with each existing for, and informing of, the other. But, as described in the previous section, phantasy systems are social contexts and therefore their development incorporates the polarities of the intimate direct relationships within the micro social formation of the family unit and the macro social formation of political ideology.

Placing the ego within its worldly context is the central component of existential theory woven into Laing's framework of self and it is this aspect which also introduces psychoanalytic theory, albeit initially from a negative position.

Psychoanalytic theory has [...] no way of placing the single person in any social context. (Laing et al., 1966, p. 8)

This critiquing of social capability, by omission, is used to highlight the value existentialism brings to the table: a theory embracing the further mechanisms which impact on ego formation. We see the compatibility of existentialism and the social context realised by Sartre, specifically a Marxist infusion consolidated and most apparent in the 1960 publication *Critique of Dialectical Reason*. The resonance of existentialism with the social/political context is reinforced by Laing and Cooper's (1964) analysis of Sartre's Marxist Existentialism in *Reason and Violence: A Decade of Sartre's Philosophy 1950-1960: a demonstration I*

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<sup>89</sup> Sartre's emphasis has been explained throughout the first section, *Ego*. The continuing importance becomes more qualified during the third phase of Laing's theory which Howarth-Williams states as his Sartrean-Marxism stage. The continuity of Sartre is vital as we aim to develop towards the ultimate goal of applying Laing within a political, cultural context.

argue that supports a general political connection rather than an advocacy of Marxism specifically (in Laing's eyes, perhaps less so for the fervent Marxist David Cooper).

The critique of the lack of social capability within psychoanalytic theory lies in the limitation of the concepts of projection and introjection: 'projection, a shift of inner to outer; introjection a shift from outer to inner' (Laing, 1961, p. 24). Laing questions the ability of these mechanisms 'as explanations of experience' (1961, p. 26) and later, in *Interpersonal Perceptions*, (1966, p. 6) states that as concepts they lack the capacity sufficiently to 'bridge the gap between persons'. But this was not a complete refutation of the ability of psychoanalytic theory to offer any insight into the role of shared experience. Whilst addressed to the concept of projection in isolation, the context of the following quotation equally envelops introjection.

It is to the credit of psychoanalysis that it has brought to light actions of this kind.  
(Laing et al., 1966, p. 20)

Heidegger and Boss in their *Zollikon Seminars* (2001) stated that the insights of psychoanalysis, rather than being incorrect, were more accurately insufficiently evaluated and as such prematurely concluded and consolidated. Laing takes a similar position. Discussing shared experience within psychoanalysis, one that loosely overlaps contextually with both concepts of introjection and projection, Laing states:

I am not saying that psychoanalysis *ends* at this level of inference. I am saying that unless it *begins* from there it will never get started at all. (Laing, 1961, p. 30)

I suggest that to understand Laing's theory of self-formation and to fully appreciate the inseparability of 'I' and 'you', ego and alter, in the formation of the self, we benefit from beginning from the insights already established in psychoanalysis although we must not be limited by where these concepts at their simplest are supposed to end.

Phantasies in which parts of others are taken into the self (introjection). (Segal, 1992, p. 35)

Approached through this Kleinian definition, a valuable theoretical junction is introduced which allows the merger of previously separated components: introjection and phantasy. Introjection in this capacity describes the process of making the outer inner, how we take the interpretations of experience and transcribe them (no matter how in/accurately) into the

phantasy constructs that compose the ego. This understanding, although not outlined by Laing, offers a solid foundation to envisage how the social environment, macro or micro, political or familial, and experience are mapped onto our ego and construct the phantasy system. With this concept of how the outer becomes inner, a greater appreciation of projection<sup>90</sup> can be gained.

Projection refers to a mode of experiencing the other in which one experiences one's outer world in terms of one's inner world. (Laing et al., 1966, p. 22)

Projection reverses this process; it is the means of inserting our phantasy constructs into the world outside. Much like a self-fulfilling-fantasy (or rather self-fulfilling-phantasy), our internal beliefs will impact on our behaviour towards an experience (or other) and this subsequently will shape to certain degrees their experience and behaviour. Essentially, introjection is the internalisation mechanism creating phantasy systems. Projection is our use of these phantasy constructs in determining our experiences of the other. Each concept, projection and introjection, impacts on the other and is continually evolving (and highly influenced by the values of perception and interpretation).

Embracing more existentially inclined terminology, *Self and Others* (1961) starts to advance this psychoanalytic concept and Guy Thompson (2004) offers an overview of this development.

[Laing is] providing a conceptual vocabulary that could help explain how human beings, in their everyday interactions with each other, are able to distort truth so effectively that they are able to affect other's reality, and their sanity as well. (Guy Thompson, 2004, p. 20)

Building on research he conducted with Esterson in the 1958 journal publication *Collusion Function of Pairing in Analytic Groups*, Laing (1961) turned his attention to patterns of behaviour beyond the therapeutic context and this simple bi-directional relationship. He identified several processes which can be grouped under two headings: two-person (or more) operations and individual operations. Two-person operations involve two or more persons acting to support the instigator's positive or negative introjections/phantasy constructs. These include: Complementary Identity; Confirmation and Disconfirmation; Collusion; False and Untenable Positions; Attributions and Injunctions. The individual

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<sup>90</sup> Projection also being prioritised within Kleinian and object relations theory.

operation is a single process containing two actions: Pretence and Elusion. The processes are described as follows.

### *Complementary Identity*

[W]e cannot give an undistorted account of a 'person' without giving an account of his relation with others ['imaginary, dreamed, phantasied, or 'real']...each person is always *acting* upon and *acted upon* by others...No one acts or experiences in a vacuum. (pp. 81 – 82)

The others tell one who one is. Later one endorses, or tries to discard, the way others have defined one. (pp. 94 – 95)

### *Confirmation and Disconfirmation*

A confirmatory act response is *relevant* to the evocative action, it accords recognition to the evocatory act, and accepts its significance for the evoker, if not for the respondent ... Rejection can be confirmatory if direct. (p. 99)

A succinct definition of disconfirmation is less apparent. Laing speaks about confirmation essentially being any response that respects a common 'wavelength' of communication, both players responding to the rules of the same worldly context whether in agreement (positive) or rejection (negative). In contrast, disconfirmation can be seen as an out-of-sync, disharmonious response as deemed by the rules of a common worldly context. The two players are misaligned in communication – this being highly relevant within the double-bind scenario.<sup>91</sup>

### *Collusion*

It is a 'game' played by two or more people whereby they deceive themselves. The *game* is the game of mutual self-deception. (p. 108)

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<sup>91</sup> see Part 3, *Ontological Insecurity*

### *False and Untenable Positions*

[A] person can put himself into a false or untenable position and be put in a false or untenable position by others. Position here used in an existential sense ... to what extent and in what ways the agent is disclosed or concealed, wittingly or unwittingly, intentionally or unintentionally, in and through action. (pp. 125 – 126)

### *Attributions and Injunctions*<sup>92</sup>

The 'victim' is caught in a tangle of paradoxical injunctions, or of attributions having the force of injunctions, in which he cannot do the right thing. (p. 144)

### *Pretence and Elusion*

Elusion is a relation in which one pretends oneself away from one's original self; then pretends oneself back from this pretence so as to appear to have arrived back at the starting-point. A double pretence simulates no pretence ... there is no end to this series of possible pretences. I am. I pretend I am not. I pretend I am. I pretend I am not pretending to be pretending ... (p. 45)

Each of these examples, which bleed into each other and blur the boundaries of isolated performance, demonstrates an extension to the introjection/projection framework beyond a direct, single stage process, ego – other (projection) or other – ego (introjection). Laing's examples create specific models of cyclic or continual relational patterns: introjection affecting projection, projection affecting introjection, etc. This reinforces the idea that these communicative processes shape the shared experience between ego and other thereby defining the perceptions and interpretations of experience and the social phantasy constructs that form between and within individuals.

However, these examples still fail to fully appreciate Laing's thinking on this mutual and cyclic relational pattern. In the appendix to *Self and Others*, we see early signs of his intended development of this model with a brief introduction to the framework that underpins all these models: Dyadic Perspectives.

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<sup>92</sup> An in-depth analysis of this concept is addressed in Chapter 12, *Interpersonal World*.

[O]ne has phantasies not only about what the other himself experiences and intends, but also about his phantasies about one's own experiences and intentions, and about his phantasies about one's phantasies about his phantasies about one's experience, etc. (Laing, 1961, p. 174)

This brief explanation illuminates a characteristic way people express themselves, which turns into *knots* – a multiplication of processes that permeate through to phantasy systems, affecting experiences, each compounding the other and resulting in a representation of reality. Whilst minimal at this stage, this proposal for a universal process underpinning all these two-person and one-person operations becomes the focus of Laing's 1966 publication *Interpersonal Perceptions*. This became Laing's means of establishing a dynamic model of the ego/other relationship, demonstrating how complex processes embed within, and maintain, phantasy constructs, created through meta(-meta<sup>(x)</sup>) perspectives and explaining how truth can be distorted and consolidated as reality.<sup>93</sup>

My field of experience is, however, filled not only by my direct view of myself (ego) and of the other (alter), but of what we shall call metaperspectives – my view of the other's (your, his, her, their) view of me. (Laing et al., 1966, p. 5)

Using Laing et al.'s (1966) examples covered in *Interpersonal Perception* (see pp. 64 – 76), the basic principles of this Dyadic Perspectives theory are demonstrated. This is a 'two-person, two direction' model. Laing et al.'s coding examples are included for demonstrative purposes.

### *Direct Perspective*

Eg. Husband's (H) perspective of his feelings toward his wife (W)

Coding: H(HW)

Means of attaining direct perspective of the husband:

- i) Do you love her?
- ii) Would you say 'I love her?'

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<sup>93</sup> Laing's emphasis rather being directed toward shared experience – a clear philosophical turn and more in-keeping with Heideggerian terminology (Guy Thompson, 2004). This also supports criticism voiced that Laing will explain his theory once but will not repeat in subsequent books, often presuming a reader's retrospective awareness.

### *Metalevel Perspective*

E.g. Wife's perspective of her husband's perspective of his feelings toward her

Coding WH(HW)

Means of attaining metaperspective of the wife:

- i) Do you think he thinks he loves you?
- ii) How would he answer the question 'she loves me?'

### *Meta-metalevel Perspective*

E.g. Husband's perspective of the wife's perspective of her husband's perspective of his feelings toward her

Coding HWH(HW)

Means of attaining meta-metaperspective of the husband:

- i) Do you think that you wife thinks that you love her?
- ii) How will he think you have answered the question 'I love him?'

Resonating with the Milan group's later development of family therapy using 'circular questioning' theory in the 1980s (a compatibility acknowledged by John Hills, a family therapist with the Tavistock Clinic and author of *Introduction to Systemic and Family Therapy*, 2013), Laing's model moves beyond the broad and blurred situational examples of two person and individual operations, now outlining the series of ego/other communications. Regardless of context, he is proposing that our interaction with the other is based on a series of ever deepening 'second-guesses' or meta-communications; the more consistent matches appear in shared responses, the more secure the relationship and the more we can invest confidence and trust in our own perspectives (ontological security). Conversely, the more disjunctions occur throughout these layers, the greater the insecurity towards others and eventually ourselves (ontological insecurity). When levels increase beyond third stage (meta-meta) perspectives, and when inconsistencies or disjuncture occur at mismatched and varying levels, the impacts become more subtle and therefore severe. Importantly, the potential anomalies or ruptures, where mismatched responses occur, are not only detrimental to the ego/other relationship but to the ego in isolation (or rather ego within the context of others). It is also important to contextualise that the ego/other dynamic mirrors the

inner/outer dynamic when conceptualised within the self as a being-in-the-world. Disjuncture with the other(s), if sufficiently significant, poses a threat to the inner/outer world relation. Whether positive or negative subjective value is impregnated by the other or ego, at any stage (Meta<sup>(x)</sup> = meta, meta-meta, meta-meta-meta level perspectives...) the cyclic process of interpersonal relationships and perceptions, increasingly alter either position. Each stage creates experiences which contaminate the phantasy constructs held individually and collectively; this is then reintroduced into the interpersonal relationship. The culmination of these ever-increasing levels is determined within this interpersonal perception as a meta-identity. However, this meta-identity is simply a deepening complexity of the individual (ego) and shared social phantasy systems.<sup>94</sup>

Laing's examples are most clearly depicted in the two-person dyadic relationship but he makes clear that the intricacies within these interpersonal models increase exponentially when we move from a two-person dyad to group dyads and beyond. This is evidenced profoundly in the group or nexus of the family in *Sanity, Madness and the Family* (1964) and, although vaguer, it also applies to the macro collective of the political context. The term 'dyadic' refers to a two-person dynamic and is therefore accurate of Laing's focus upon the ego/other relationship; however, this can also be limiting toward the social application of Laing's theory. The ego is always in relation to the other but it must be remembered that the other is infinite; every person with whom I engage and share experience is another and this experience overlaps and extends infinitely. It is more accurate in this context to think of Laing's theory as interpersonal communications or *Interpersonal Perceptions*, reflecting his later book title.

Once again, we see where Laing's turn to philosophy, applied to interpersonal communications, provides a highly psychosocial process by which the ego is saturated with experiences that encapsulate it. The manner in which these external dynamics become internalised within phantasy constructs, and therefore the ego, illustrates further how *displeasing truths or an untruth presented as a pleasing truth* (to borrow the previous Sartrean phrase) become part of our identity. The complexity, diversity and compounding

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<sup>94</sup> Whilst no mention of Lacanian influence is made within *Interpersonal Perception*, similarities regarding the relationship between the self and other, operating through interpersonal behaviour and knowledge, can be identified within Lacan's theory of the big 'Other' (Bailly, 2009) and 'Prisoner Dilemma' (Hook, 2013). This is one of the few theoretical connections between Laing and Lacan who otherwise operate with highly contrasting frameworks (see Guy Thompson, 2005).

nature of ego/other dynamics involved in this process also highlight the difficulty one would have in locating the point of origin to enable the addressing of a root cause.

The human race is a myriad of refractive surfaces staining the white radiance of eternity. Each surface refracts the refraction of refraction of refractions. Each self refracts the refractions of others' refractions of self refractions of others' refractions...  
(Laing et al., 1966. p. 3)

When we draw this together as a theory of self, reality for the individual is shaped by the experiences held between the ego and the other, the other being any single player but crucially connected within a social network of relationships from the intimate to the political. Laing's focus is trained on the construction process of our (meta)identity: an identity comprised of phantasy, unique to an individual, but always and constantly impacting on and by the continually refracting multiplicity of ego/other experiences. Extending beyond a psychoanalytic theory of introjection and projection, characteristics of these concepts provide an inroad and foundation for Laing to develop a compounding theory of shared experience beyond a single stage operation to appreciate the complexities of meta<sup>(x)</sup> perspectives. Approaching Laing's theory of self, specifically the inseparability of ego/other within, through a Sartrean lens, the internal stability of phantasy constructs is galvanised, particularly through unpacking the notion of bad faith and considering the impact of pre-reflective and reflective consciousness on Laing's use of unconscious experience.

It is important to note the language Laing employs throughout his theory of self, specifically with regard to phantasy systems. At no point does he refer to phantasy as *instructing* our life story but always as influencing our life story. This subtlety complements the existential-phenomenological methodology outlined previously. Laing's language tells us that the self is not constituted *by* otherness but rather is intricately bound *with* otherness. A concept of true or original self remains part of the ego: a concept of *Being* and therefore a free and autonomous self always present. As summarised by Guy Thompson (2004), the other may influence but I choose to be the individual I am.

## Summary

Part 2 has created the two structural columns that provide the foundation to support the entirety of theory moving forward. Both columns have been established through a concept

analysis of Laing's existential-phenological theory and, as represented by each chapter, produce a methodological framework and a theory of self-formation.

Laing's theory highlights the damage inflicted upon the person when perceived solely through the lens of scientific psychiatric discourse. The scientific methodology of psychiatry and medicine remains at a distance from the self, and its language and discourse enforce an organismic definition upon the self. In only engaging with the outer world of the individual, psychiatric frameworks perform a split upon their target of enquiry, receptive to select experiences from within the totality. Without engaging the full gamut of experiential gestalts, this approach fails to grasp true knowledge of persons. In contrast, Laing's existential-phenomenological methodology provides no such limitation or filter in its application to the person. The person in its entirety, inner and outer experiences, is engaged, their being-in-the-world is embraced. Laing provided reason to distrust the dominance of the psychiatry, and a rationale to justify following his theory, whilst this was initially intended as a guidance for clinicians to inform their understanding of persons, the premise extends to all encounters between persons. Laing's theory enables us to (re)connect as persons, I-Thou relatedness, and not as organisms, I-It relatedness.

The theory of self-formation is a deconstruction from within this existential-phenomenology methodology. The self is revealed as a totality of experiences, inner/outer, ego/other dynamic, experiences that are mapped onto the construct of phantasy. In a never-ending loop, the phantasy construct plays a major role in the interpretation for the totality of experiences which then affects how experiences are incorporated into the phantasy construct. But this is not purely a social constructivist theory of self, beneath this phantasy construct is the constant presence of our *Being* and nonbeing, the potential realisation of our free self and resignation over our inevitable death. We retain the ability to choose and act upon the events within our social context, although to enact this freedom can be a more daunting existential prospect than maintaining the conditions of our ontological insecurity, hence we endure and maintain the status quo through bad faith. This final point being of paramount importance as we move into the Part 3, *Ontological Insecurity*, and focus upon this detrimental experience.

Laing's theory is founded on the premise that part of the human condition is to immerse ourselves in everyday life in an effort to seek refuge from the existential angst caused by the presence of *Being* and nonbeing. Reversing this focus, Laing states that if we experience an un-nurturing environment, affecting the development of phantasy constructs, the ability to align experience between the ego and other is compromised which results in a disruption to

our worldly immersion and a resultant awareness of our base existential angst is awakened. This process introduces the concept of ontological insecurity.

## Part 3. Ontological Insecurity

In the previous section, *Return to Philosophy*, I described how Laing establishes a toolkit by which to gain truer knowledge of persons. His development and application of existential-phenomenology provided a contrasting methodology to the dominant model of medical psychiatry. Investing value in the authority of the sufferer's experience, the totality of experience, this methodology brought psychic and social elements back into the fold, socially adverse conditions having the potential to disrupt the precarity of the human condition. Underpinning this is a theory of self-formation, as summarised by Guy Thompson (2000, p. 489) as the 'totality of everything we believe is rooted in our experience'; what we believe constitutes who we are, and how our experience is a product of multitudinous interpersonal communications with the other. This methodological basis provides the terrain to map how psychic suffering is experienced.

The key concept in Laing's understanding of schizoid experience is 'ontological insecurity'. (Collier, 1977, p. 2)

Laing's concept of ontological insecurity is widely regarded as his defining theoretical concept, an opinion shared by many supporters and critics alike (Collier, Lidz, Sedgwick and several others in subsequent sources). In full agreement with this premise, this concept is developed further in this chapter, enabling it to be placed centrally as we consider Laing's potential to offer a political theory of value within the current 'mental health' crisis. It is my belief that the concept of ontological insecurity is where the true potential of Laing is revealed. It was this concept that allowed the lay-public, psychiatric professionals, diagnosed and undiagnosed sufferers to relate, in differing capacities, to his description of the processes and therefore causes of psychic suffering – hence the reception and popularity of his books.

Ontological insecurity occupied its most prominent position in Laing's first book, *The Divided Self* (1960), where Part 1, Chapter 3 was named after and dedicated to it. Remembering the critical acclaim many held (and hold) for the entirety of this seminal text, this chapter, the largest in the book, is its heart, containing vivid theoretical description and definition (Howarth-Williams, 1977). Steeped in existential-phenomenology, the influence and impact achieved by this uniquely Laingian concept, ontological insecurity, should not be underestimated, a position that will be argued throughout this thesis. That is not to say that the concept is not without controversy. An issue of inconsistency is often highlighted with

Laing's application in the family seemingly differing from that in the political context, the repercussions of this perceived contradictory application ultimately affecting the entirety of Laing's theory.

Part 3 examines Laing's description of ontological insecurity in detail, strengthening other ideas that appear with it and are often overlooked or missed in secondary representations, with the aim of establishing a theory that intersects with all the varying contexts that Laing addresses (clinical, familial, and political),<sup>95</sup> addressing the matter of consistency, and providing a means to connect with a notion of psychic suffering. This discussion builds heavily on the theory developed in the previous chapters; it was through Laing's existential-phenomenological approach to the individual that he was able to gain truer knowledge of the self, and through this, an understanding of the experiences that cause psychic suffering and how they confer social intelligibility upon it.

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<sup>95</sup> These contexts will be discussed later in Part 3.

## 7. An Empirical Concept

[The] ontologically secure person will encounter all the hazards of life, social, ethical, spiritual, biological, from a centrally firm centre of his own and other people's reality and identity. (Laing, 1960, p. 39)

The concept of ontological insecurity logically stands in opposition to, and in the absence of, its positive twin, ontological security. Laing describes the ontologically secure individual as a person with a rooted belief in their own and others' resilience allowing them to immerse themselves within, and navigate, ordinary life; very simply, a person with the capacity to cope with whatever life throws at them. At the outset, the presentation of ontological security was as a 'normal' state of being (Laing, 1960); a highly contentious premise within the existential field (Deurzen, 2010). Adding to this unstable position, Laing declared at a subsequent time period that the normal state of being was ontologically insecure – a seemingly diametrically opposed claim. This is a significant point that needs our attention and will be addressed as we continue. But let us not be drawn too heavily into the concept of the 'secure self' as this was not Laing's interest,<sup>96</sup> a statement in part supported by the brevity of his writing on this matter – almost entirely encapsulated within the quote above. Laing wanted to know, understand, and ultimately help those in need and so focussed upon the ontologically insecure individual, the person experiencing a disruption within their being-in-the-world.

The ontological insecurity described in *The Divided Self* is a fourth possibility. Here, man, as a person, encounters non-being, in a preliminary form, as a partial loss of the synthetic unity of self, concurrently with partial loss of relatedness with the other, and in an ultimate form, in the hypothetical end-state of chaotic nonentity, total loss of relatedness with self and other. (Laing, 1961, p. 51)

Although broached in the earlier chapters, we now analyse ontological insecurity with attention to detail. Tillich, an existential-theologist, is responsible for coining the term 'ontological security' (Collier, 1977; Kotowicz, 1997). Adapting the being/nonbeing dichotomy underpinning the human condition, Tillich's theory encompassed three anxieties: death, guilt and purposelessness (Howarth-Williams, 1977). Nonetheless, Tillich agrees that in the

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<sup>96</sup> Having completed the research of families with a diagnosed member as 'schizophrenic' in *Sanity, Madness and the Family*, Laing and Esterson were planning to provide a comparison with a research study with 'normal' families. This did not develop due to Laing's lack of interest in non-diagnosed families (Mullan, 1995).

avoidance of base anxieties (whether two or threefold), the individual exchanges their potential freedom for worldly servitude. Laing's description of the 'fourth possibility' (he could equally as well have stated it was the third possibility if referenced to Sartre, Heidegger or Kierkegaard), positions his focus for ontological insecurity beyond the three base anxieties directly associated with the human condition (again, two anxieties if we addressed this to other existential thinkers). The fourth possibility is the location where anxieties occur within our empirical experiences, within our everyday existence, these are anxieties produced as a consequence of socially adverse conditions (whether macro or micro). Moving forward the term 'fourth possibility anxieties' is adopted to emphasise this fuller involvement within our everyday life.

Situating fourth possibility anxieties is the defining and qualifying feature of Laing's application of ontological insecurity and the component seemingly overlooked by Deurzen. With explicit reference to the earlier work of Laing, a period in which Laing focused on the family, Deurzen states that ontological security is anything but the normal state of being in an existential sense, and that Laing, in stating this, makes a fundamental mistake.

[Laing] missed the point that ontological insecurity is the very foundation of the human condition. (Deurzen, 2010, p. 219)

Deurzen's issue with Laing is that he confused 'ontic' security, security within one's everyday environment, with ontological security, embracing one's potential freedom and individual authenticity.

Laing confused the ontic with the ontological [...] since he equated ontological insecurity with a pathological state of mind generated by negative family dynamics. (Deurzen, 2010, p. 219)

In Laing's defence, he missed nothing in this respect.<sup>97</sup> Deurzen's reproach of Laing is rooted in semantics and whilst philosophically she is correct, she is imposing a theoretical definition onto Laing's work that he had already addressed. Laing clearly advocates a non-traditional or rigid approach to existentialism, furthermore he specifically adds a caveat to his concept and use of the term ontological insecurity by stating that it applies to *empirical*

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<sup>97</sup> True ontological security within the existential understanding, is only gestured toward in *The Politics of Experience*, but this is not his pressing concern.

*experiences* that are placed beyond the base elements of the human condition, hence located in the *fourth possibility* or worldliness.

I have used the term [ontology] in its present empirical sense. (Laing, 1960, p. 39)

From Laing's position, the ontic-ontological distinction used by philosophers and highlighted by Deurzen, is seemingly collapsed, or perhaps even, seen as irrelevant. In Laing's theory ontological security requires ontic security; the necessity for safe refuge in worldliness is a prerequisite to manage the human condition. This premise also extends to its negative inversion, but with greater complexity. The ontologically insecure individual is either, a) caused by ontic insecurity; fourth possibility anxieties have disrupted the balance for being-in-the-world. Or, b) the ontologically insecure individual will be unable to attain ontic security; unable manage being-in-the-world, the cohesion for the totality is lost. Where more traditional existentialism typically follows the logic of b); the existential angst of *Being* preventing the capacity to immerse itself in-the-world, Laing's empirical focus upon fourth possibility anxieties turns this notion on its head. Laing pursues the opposite causal relationship a) without an existentially nurturing social environment, *Being* is left without an 'in-the-world' within which to immerse itself and seek refuge from the human condition. Regardless of the direction of the casual relationship, Deurzen's critique is a moot point, Laing clearly defines his intentional adaptation of traditional theory and his application of this concept holds true to this definition. This critique does however serve to emphasise the specifically Laingian quality that underpins Laing's notion of ontological insecurity. Experience is 'not 'inner' rather than 'outer'" (Laing, 1967, p. 17), equally as much it is not ontological rather than ontic, or vice versa. To have a sense of ontologically security we embrace the full gamut of experiential-gestalts; further support for the psychosocial capacity within Laing's theory

Using the reference point of the diagnosed schizophrenic, those whom Laing deemed to be experiencing the most extreme form of ontological insecurity, he illustrated how anxieties stimulated in each of various contexts (clinical, family, political) have the capacity to heighten the individual's acute awareness of the precarity of their own existence and death, inducing existential angst.

This aspect of ontological insecurity, its development within the fourth possibility and its subsequent awakening of existing base existential angst, is either glanced at within secondary sources or bypassed in its entirety, focus being channelled to the split, or divided experience, that defines the most severe ontologically insecure existences. As we move into

the experience of the split self, I want to emphasise the importance for the ability of fourth possibility anxieties located within our empirical worldly existence, to retain the capacity to unsettle the human condition as a major aspect of Laing's concept of ontological insecurity.

Locating the source of threat in the outer world, Laing stated that an individual takes protective measures to preserve the life of the inner world. The (coping) strategy employed is to disconnect the inner from the outer, placing the 'true' self out of danger by breaking the totality of the being-in-the-world, nullifying the threat by becoming more synonymous with a being-*and*-the-world.

[T]he ontologically insecure person is preoccupied with preserving rather than gratifying himself: the ordinary circumstances of living threaten his low threshold of security. (Laing, 1960, p. 42)

The 'preservation' Laing was talking about was the effort invested to sever all links from the perceived or actual threat located in the outer world. The outcome of this is a separation of their inner 'true' self from the outer world relation,<sup>98</sup> a rupture performed to protect their inner self from existential death, ultimately creating a structural split of the ego.

It is important to recall that momentary, fleeting, splits in the self can occur with relation to awareness of modes of experience (perception, memory, imagination), and this remains within the parameters of what Laing discussed within a normal, or secure, context. But it is the structural quality and extent of this rupture that determines ontological insecurity and its severity. Laing demonstrated this most profoundly within the context of schizophrenia, or rather the splitting of the self,<sup>99</sup> where he showed that such is the magnitude of ontological insecurity that a complete inner/outer split is experienced (Laing, 1960). Enacted in an effort to safeguard the integrity of the inner world and to protect the true self, unfortunately, this fractured totality creates a false self position, displacing problems and increasing the

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<sup>98</sup> Laing adopts interchangeable terminology to differentiate between these two binaries, with *inner* and *subjective* mostly used to describe the individual's own thoughts and experiences within the psyche. This inner world is also frequently referred to as the perceived 'true-self', their essence of being. *Outer* and *objective* are the most prominent terms used to describe experiences that occur in the world beyond their own psyche, including being the source of interpersonal relationships with others.

By 'inner' I mean our way of seeing the external world and all those realities that have no 'external', 'objective' presence. (Laing, 1967, p. 115)

A different theoretical interpretation using these alternative (epistemological) terms will be developed later in this thesis, but Laing's application and all subsequent secondary texts, retain all terms within the binary inner/outer, thus keeping a direct and simple framework.

<sup>99</sup> This aspect also resonates with Klein's Paranoid-Schizoid theory. Any direct connection with Klein is more tenuous than with Winnicott, but needs be acknowledged.

difficulty of managing the totality.<sup>100</sup> The full negative consequences of this splitting is addressed later but it is enough to understand at this point that although performed with the intention of preservation, in actuality it causes significant psychic suffering.

The example of the (mis)diagnosed schizophrenic, or rather the most severe cases of ontological insecurity, evidenced the propensity for psychiatry to treat this experience as an indication (symptom) of 'illness' or 'disease', when in actuality it is a true form of existential crisis. The worldly context of these patients, the environment of their existence, was no longer providing a suitably habitable home for *Being* to immerse itself and escape the angst of the human condition surfacing within daily life.

A pivotal moment in the claim for ontological insecurity to be considered a viable component within Laing's theory was the evidential support he garnered through empirical observation. These observations encouraged Laing (1960, p. 43) to conclude that 'three primary forms of anxiety [are] encountered by the ontologically insecure person: engulfment, implosion, petrification'.

### *Engulfment*

[B]asic security is so low that practically any relationship with another person, however tenuous or however apparently 'harmless,' threatens to overwhelm him. (p. 44)

Often the manoeuvre employed by the individual fearful of engulfment is isolation. However, this brings another form of engulfment, the fear of a void incurring complete aloneness. Without any safe third space, the individual is left in the untenable position that another's actions may destroy his autonomy, and with it his true self.

### *Implosion*<sup>101</sup>

The individual feels that, like the vacuum, he is empty. But this emptiness is him. (p. 45)

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<sup>100</sup> There is a strong Winnicottian similarity here, this will be discussed below.

<sup>101</sup> Laing (1960, p. 44) relates this to an 'extreme form of what Winnicott terms the *impingement* of reality'.

Much like the threat of engulfment, the individual fears being overwhelmed, but rather than specific to inter-personal contact, reality is the persecutor of implosion. The individual fears reality being uncontrollably sucked into the void of their subjectivity. Laing gives the violent illustration of gas rushing in and obliterating the vacuum.

### *Petrification*

A particular form of terror, whereby one is petrified, i.e. turned to stone. (p. 46)

The fear is that one may be petrified, or petrify another; to be turned into stone, or turn someone else to stone. Laing implicates this directly with depersonalisation. He describes depersonalisation as a technique used to deal with 'tiresome or disturbing' individuals, a process of refusing to acknowledge their feelings thus regarding them as having no feelings. Whilst Laing does not describe it in this fashion, this would appear to be akin to denying the other's human qualities and treating them as an inanimate object – a stone. Thereby the ontologically insecure individual may fear petrifying another through depersonalisation, and/or being petrified through colonisation by another.

Mullan (1995) suggests that the three anxieties – engulfment, implosion and petrification – are the kernel of Laingian theory, and to a certain extent they are. They provide an empirical grounding beyond philosophical speculative theory (Burston, 1996). They show us consistencies within the experience of ontological insecurity: the individual is terrified that the actions of another will saturate and destroy their autonomy and sense of self, and a resultant disturbance in the inner/outer world ruptures the totality of experiences for their being-in-the-world.

Laing did not describe it as such but this could equally be presented as compromising a Buberian capacity for relatedness with others and the outer world, or as if a Heideggerian insurmountable split of the ego totality ensues. Laing wasn't finished here though. Having justified the experience of ontological insecurity, he furthered his research, applying his methodology more thoroughly, and gained more intelligible data for analysis. Delving further into the experience of ontological insecurity (which surfaced in these three anxieties), Laing explored how these anxieties occur, revealing how ontological insecurity can develop. This is where Laing's theory becomes concerned with the family, this being the context of his research which extracted further social intelligibility from the experience of ontological insecurity. However, as I will argue, this theory is also relevant within his political application.

The term ontological insecurity stems from Tillich, but the main influence must be attributed to Heidegger (Mullan, 1995). Through wider reference to the pre-established discourse of Heidegger, addressed specifically in Chapter 5, *A Laingian Methodology*, Laing's concept of ontological insecurity gains a more substantial theoretical anchor to clarify and articulate the notion of a disharmonious link of inner and outer worlds, an experienced rupture within the totality of Dasein, an event that prevents the necessary relatedness to the achievement of being-in-the-world. Heidegger's influence will continue to be important as we develop this concept and consider its application within the family and political context.

At this point Heidegger strengthens the structural description for ontological insecurity as a rupture for the totality of self, a split within the being-in-the-world, *Being* separated from the *in-the-world*. Relating this further with reference to Buber, this split is the cause of a subsequent breakdown in relatedness with oneself and with others, this equally constituting a loss of reciprocal and bidirectional relatedness of inner and outer worlds. Creating an untenable situation for the self, the threat of annihilation – as evidenced in the three primary forms of anxiety – and the experience of ontological insecurity, is a more than justifiable cause of psychic suffering.

Exploring the experience of the split self as a means to describe a loss of relatedness with one's context, tends to be the focus for most secondary sources that invest in Laing's theory. This is an important aspect however, I will concentrate on its connection to psychic suffering, and how a split self, how ontological insecurity may be caused.

### *Object Relations, Presence and Absence*

Laing clearly saw his theory as an existential one, distancing it from the established psychoanalytic schools. However, with specific regard to ontological in/security, the discussion of a 'split totality', and connotations of a schizoid position, this terminology and elements within certain concepts resonate with existing object-relations theory and several psychoanalytic thinkers within, or in close proximity to, it (Beveridge, 2011; Mullan, 1995). This continuing link requires attention as we look to develop a clearly defined theory of ontological insecurity.

Laing's involvement with the Tavistock, coincided with a significant debate in the psychoanalytic field. Melanie Klein was pushing the boundaries antagonistically toward and against the traditionalist Freudian school, strengthening the position of the Object Relations School (ORS). Klein also applied her theory toward the shared interest of psychosis. As

Beveridge (2010, p. 84) notes, the influence of this debate was always going to permeate Laing's thinking, given that Laing 'drew on object relations theory to construct his account of the self'. Although Laing disputes this suggestion, stating in *The Politics of Experience* that ORS offers only limited insight into his theory, and contesting any notable influence in his interviews with Mullan (1995), his use of terminology such as splitting, true self, false self which echo Klein, Fairbairn and Winnicott, keeps a connection alive in his work.

'Splitting' is a key element of Klein's theory, a necessary process in the development of a healthy functioning adult. Splitting others and oneself into fragmented objects enables powerful emotions, originating within innate libido drives, to be compartmentalised and regulated. It is through this splitting *within* the ego, that is also a splitting *of* one's ego, and the management of these resultant objects that self-formation can be managed as a whole, regulating the individual and allowing the self to successfully participate in relationships with others (Segal, 1979; Segal; 1992). Splitting and unconscious phantasy (another major Kleinian term) are both terms adopted by Laing but differences in application are present.

Laing makes only one direct reference to Klein,<sup>102</sup> but whilst the terminology employed is similar, the idea of the ego being formed and structured by 'object-relations' is a framework that he distances himself from with reference to his existentially grounded theory of a total self. The premise of a split ego, a structural split i.e., a permanent aspect of the ego, is discussed by Laing as an action that ruptures the synchronicity/cohesion of the being-in-the-world, therefore a highly detrimental event that defines ontological insecurity. However, whilst the volume of Laing's attention is directed toward the consequence of a structural split of the ego and how this constitutes ontological insecurity, in contrast to the more Kleinian understanding for the necessity of ego splitting for psychic health, Laing doesn't unequivocally write-off splitting.

Let us return to the example previously discussed in Chapter 6, *Self-Formation*. Laing (1961) states that Peter becomes distracted during his interaction with another, thus causing him to lose track of the conversation (the primary mode of experience; perception, has been dominated by the alternate modes of experience; imagination and/or memory). Laing states clearly that Peter is 'split' but unlike all his other theory, the context of a split in this encounter does not fall within the parameters of ontological insecurity. Whilst very little theory is offered with this brief example for an ontologically 'acceptable' split, it is my reading that the difference is located in the fact that this is a momentary and partial split. Rather than

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<sup>102</sup> A brief note in *Self and Others* (1961) but this adds no structural influence or value.

illuminating a structural, therefore permanent, split of the ego, it demonstrates a changing awareness of different modes of experience. The experience may not be located within the locked vault of an unconscious structure, a compartmentalised element of the psyche created by a split, as per the Kleinian school; nonetheless, a split is still recognised by Laing within a non-detrimental ontological context.

Fairbairn (1952), operating from a basis compatible with Klein, provides us with a more socially guided concept of ORS and this brings Laing closer. The innate drives (libido) remain a powerful force but for Fairbairn their energies push us to form relational bonds with others. It is the disturbance in these bonds, particularly in the mother-child relationship, that result in excessive compartmentalising and fragmentation of the ego. Excessive splitting is a cause of 'mental illness'. Without dismissing an element of personal accountability, the individual is more a product of their environment, specifically the relationship formed with the mother. With Fairbairn, the recognition that relationships are the root component responsible for (ontological) security of the ego (self) – and in the negative they manifest in excessive compartmentalisation or splitting – bears more compatibility with Laing's extreme ontological insecurity as the foundation of a divided self (an excessive and compulsive inner split from outer). Nevertheless, the ORS broader assertion that some form of structural splitting of the ego is necessary and therefore healthy, holds a distance from Laing's overall stance.

Fairbairn's emphasis on the drive to achieve social relatedness being instrumental in the development of a healthy, secure, ego is an opening that will be further developed as we consider Buber and self-consciousness.

Several other theorists of this ilk are acknowledged fleetingly in the footnotes of *The Divided Self*, recognised for influencing the notion of a 'false self'. One particular name, Donald Winnicott, a theorist occupying a position in the aptly named 'Middle School' (situated between Freud and Klein but leaning toward further ORS influence) requires particular attention (Burston, 1995). The term 'false self' is a Winnicottian term and Laing's use of this places it firmly within this influence.

The True Self is the theoretical position from which comes the spontaneous gesture and personal idea. The spontaneous gesture is the True Self in action. Only the True Self can be creative and feel real. Whereas a True Self feels real, the existence of a False Self results in feeling unreal or a sense of futility.

The False Self, if successful in its function, hides the True Self, or else finds a way of enabling the True Self to start to live. (Winnicott, 1965, p. 148)

Kirsner (2015) states that the manner in which Laing's true self remains hidden behind the mask of the false self when developed within an unnurtured or threatened environment owes a lot to Winnicottian object relations theory. Winnicott voiced this directly to Laing when reading an early draft of *The Divided Self* (Mullan, 1995; Laing, A. 1994); however, Laing rejected the suggestion that Winnicott was instrumental in the development of any aspect of his theory. In his interviews with Mullan (1995, p. 119) he belittled Winnicott's capacity to have any such influence, calling him 'intellectually stultified' and in the biography written by Adrian Laing (1994) arguing that he was unaware of Winnicott's theory at the time of developing and writing this concept. Unfortunately, this is clearly untrue. Laing acknowledges Winnicott in the footnotes of page 44 of *The Divided Self*, recognising the similarities between *engulfment* and Winnicott's impingement theory – this acknowledgment could be an inclusion made following Winnicott's reading of an early draft and prior to its completion/publication, therefore not conclusive of his influence during the process of writing. However, in a letter sent to Winnicott, dated in 1958, Laing asks Winnicott to read an early draft of *The Divided Self* and in this request, he confesses:

It draws its inspiration very largely from your writing. (Rodman, 2003, p. 243)

The source of animosity toward Winnicott is unclear, but, in contrast to Laing's proclamations, the evidence points to the false self having significant indebtedness to Winnicott. A true self, an ontologically secure self, is the product of a nurturing and balanced environment, and in the absence of such conditions, a false self, an ontologically insecure self, is developed. Kotowicz (1997) adds an interesting perspective to this argument, stating that Laing's true self/false self dichotomy ultimately leads to an unresolved cul-de-sac, whereby no common resolution can be found in this all or nothing approach to existence – inner/outer, emancipation/alienation. However, Winnicott's object relations model provides a more advanced theory by providing a 'third space', a place of interaction and playing between these binary positions – therefore a less drastic and more socially representable theory. I address this perceived limitation with specific use of Laing's concept of 'self-consciousness' and develop it further as this thesis continues, suggesting that a more nuanced interpretation of Laing's theory is available that operates beyond the limitations of a polemical binary: mad or sane, secure or insecure, schizoid or 'normal' dichotomy that dominates the current application of his work.

Whether intentionally or not, and with or without explicit recognition, aspects of Winnicott's false self/true self theory (and Fairbairn and Klein's theory) are undeniably compatible with Laing's ontological insecurity model. ORS was a prominent discussion within psychiatric theory, and especially so within the Tavistock, at that time, so its terminology is likely to have permeated and influenced his own theory. However, the compatibility in the empirical manifestation and terminology adopted does not exclude the possibility that Laing reached this conclusion primarily through an alternative existential pathway. What we must also consider, as demonstrated with the conflicting evidence and statements about Winnicott, is that Laing's words might be more indicative of his desire to be considered separate than the reality of influence.

In his most direct statement on this, Laing (1967, p. 44) acknowledges object-relations theory's 'concepts of internal and external objects, of closed and open systems, go some way' toward explaining how interpersonal dynamics manifest in pathology. This seems a better resting point to conclude the influence of ORS than simply dismissing or writing it off. Using the example of Maya's story, we can 'go some way toward' speculating an analysis using object relations theory by highlighting an overlap or shared theoretical territory. During Maya's infancy (unfavourable) family dynamics have compromised her ability to identify 'objects' as independent of herself, with specific relation to the primary care givers, the mother and her constituent parts (good breast / bad breast) – each presented as objects in their own right. This developmental impediment has significant implications with regard to Maya's identification of the location of experience, particularly emotion etc; suggesting she might be asking herself, 'whose feeling is this?' This has a strong Winnicottian echo, acknowledged by Laing within his chapter on self-consciousness:

[A] necessary component in the development of the self is the experience of oneself as a person under the loving eye of the mother. (Laing, 1960, p. 116)

Although speculative, this analysis feeds further into later references noted in *The Politics of Experience*, where Laing briefly mentions the infant's relationship to the breast object and mother, attributing the origin of this notion to Freud whilst also acknowledging Winnicott and Bion by name, within a context that reverberates with a Kleinian influence. With a simplistic application of object-relations theory, that with 'good enough' management of object relations throughout the infant's life, the individual can identify and organise the plenitude of objects from inner and outer worlds which enables them to form a whole self and become a healthy functioning adult, an equally simplistic interpretation of Laing's theory can be drawn: Laing analysed the family specifically, his studies often revealed prolonged exposure to

adverse conditions during critical developmental periods (infant, child); and the parent (often the mother) undertook the primary role.<sup>103</sup> Maya's experience therefore created a social phantasy construct with an inability to locate herself as an independent object from her parents.

The complexity of Laing's relationship with psychoanalytic theory, particularly Winnicott, remains just that, complex. There is an undeniable compatibility of terminology, and components stemming from ORS, or those in close proximity, offer initial insight into certain Laingian ideas. But we must not allow this compatibility to consume or dominate Laing's theory otherwise the significant and sizeable departures in their frameworks will be lost (perhaps this is why Laing is at pains to create distance from these aspects of compatibility, to ensure its differences are not missed).

In clear contrast to ORS, Laing (1967, p. 44) states: '[o]bjects are the what and not the whereby of experience'. This criticism is the platform he uses to contextualise and justify his own methodological approach— not least of all, in objection to ORS insistence on reducing the self into component parts, the structural splitting of the ego, and the psychoanalytic compartmentalisation of a separately functioning unconscious system.

With an object-to-be-changed, rather than a person-to-be-accepted, simply perpetuates the disease it purports to cure. (Laing, 1967, p. 45)

Using this statement to consolidate his existential basis, more specifically a Sartrean influence, Laing (1967) states the process of relating to the object is more accurately an emphasis of presence and absence within existence. The identification of an object such as the mother's breast raises our awareness of its presence as a good breast and this conversely alerts us to its potential absence, thus deemed a bad breast, and vice versa. He juxtaposes the experience of absence and presence with a key component of existentialism, nonbeing, and by its inversion, *Being*. In ORS it is through the family conditions, primarily the relationship with the mother, that the self (child) is able to organise the disarray of objects, internal and external, and form a cohesive whole, a healthy, functioning self. In contrast, Laing states that it is not the organisation of objects that brings us into *Being*, *Being* is our original state. It is only through the process of being made aware of the presence of these objects, that we become aware of their potential absence. And, with absence comes an awareness of the possibility of nonbeing and this provokes awareness of our *Being*. We

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<sup>103</sup> A critical evaluation of Laing's research in the family will be addressed in Chapter 12, *Interpersonal World*.

enter back into the existential realm with this concept, as with Heidegger at the outset. But this is not without the potential to add value to the experienced everyday. It is by forming a self-concept capable of being deconstructed into objects, that our potential death or nonbeing is introduced and affirmed. However, through this realisation, we conversely become conscious of our *Being*. The awareness of *Being* and nonbeing is the '[t]he ultimate reassurance, and the ultimate terror' (Laing, 1967, p. 33); the existential crisis we wrestle with throughout existence, a crisis that becomes more acute when disturbed by fourth possibility anxieties.

We don't need ORS to build or understand Laing's theory, but it does offer a wider context as to what was happening at that time of Laing's writing and potentially how/why he was situated in these areas of thought. More importantly, it leads to this highly important additional layer of existentialist theory within ontological insecurity: the characteristics and interplay of presence and absence, or rather *Being* and *nonbeing*, which when brought into conversation with the subsequent focus of self-consciousness, reveal the potential of ontological security as a consistent concept within Laing's theory. Before we delve into self-consciousness, I want to re-establish the primary influence of Heidegger as underpinning ontological insecurity and use this to introduce more fully the criticism levelled toward Laing's consistency of application of ontological insecurity. This criticism of inconsistency, a criticism of contradiction even, has implications toward the entirety of Laing's theory being considered as a totality.

## The Changing Application of Ontological Insecurity

Heidegger is arguably the bedrock on which to ground this concept, unsurprisingly considering the indebtedness of ontological insecurity to the existential-phenomenological methodology which has already positioned Heidegger so prominently in its structure.

As we move forward, the most important aspects to take from Heidegger's influence are those which Laing directly articulates. He states that the rupture of an inner and outer world totality, their *Being* has lost relatedness *in-the-world*. It is the structural splitting of the self, creating a fault-line and division that separates the experiences associated with the inner world and the outer world that Laing states compromises the existential refuge sought in the everyday. Reproductions of Laing's theory frequently rest with the splitting of the self causing an inability to function within the social environment. However, delving further into Laing's theory and his influences, the cumulative effect of this spitting and the consequential loss of

existential refuge is also recognised as destabilising the precarious stability of the human condition, awakening our awareness to existential angst. This further angst giving more cause to the experience of psychic suffering endured in response to this splitting of the self that constitutes ontological insecurity.

Collier (1977) adds to this foundational influence stating that within the original Heideggerian context, Dasein – and therefore Laing's concept of the self - functions as an *individually inauthentic* position and conversely a position of *authentic commonality*; an absolute immersion within worldliness (authentic commonality) occurring to the cost of potential existential freedom (individual authenticity). This is the fundamental dilemma underpinning the human condition and therefore of being-in-the-world. This logically implies that Laing's use of ontological insecurity applies to a loss of authentic commonality. Semantics aside, Deurzen (2010) also agrees with the premise of this argument. Laing's description of ontological insecurity identified those whose adverse social environment was preventing solace in authentic commonality. This makes sense when applied within the family context: *authentic commonality* (and therefore ontic security) is the measure for ontological insecurity. However, turning his attention to the political, ontological insecurity suddenly and abruptly places no value on the measurement of *authentic commonality* and thus ontic security, implying instead that our worldly context is no longer a sufficiently nurturing existential environment that provides refuge for the human condition.

This changing dynamic within the application of ontological insecurity is illustrated best using the later metaphor in *The Politics of Experience* for plane formations. In the familial context, madness is presented as abnormal and contained within the bracket of ontological insecurity; the rogue plane is out of formation but crucially the formation itself is on a correct bearing. Those holding formation are presented as ontologically secure. In the political context, madness is potentially normal but confusingly now retains a qualification of ontological insecurity; the rogue plane is out formation but considering that the formation itself has lost its bearing, this is no guarantee of the rogue plane being off course. In fact, knowing that the formation has lost its way, this increases the likelihood of the rogue plane being on the correct course, or at the very least, being in a suitably distant position from the pack to enable greater insight into their deviation. In contrast to the previous model, the formation is now also recognised as ontologically insecure – whereas previously it was deemed ontologically secure.

There is no question that the dynamic of ontological insecurity shifts between the family and political context, and this event has plagued Laing with accusations of theoretical

inconsistency. The question that needs to be answered is whether this shift constitutes a contradiction, thus preventing Laing's theory from being considered within a single, totalising framework. The presentation of this shift or change in dynamic as contradictory relies heavily on the reductive assumption that Laing's theory is an atomised collection of components, that the contexts of the family and the political, are isolated from one another, producing a structure for a family model that is distinct and disconnected from a political model. To consider the changing dynamic of ontological insecurity we must address the wider question of atomisation.

## 8. As a Totality

To think of Laing's theory in the modern era, for most, is to think about an atomised theory, a fragmented collection of isolated and independent models. The simplest, most common and often repeated structure is the proposition that Laing's theory contains a familial and, separately, a political element, a separation intricately bound with the changing application of theory and/or definition of ontological in/security. Furthermore, the family is perceived as the strongest element, its place in the theory supported by rigorous empirical research, and this stands in direct contrast to a political element which fails against this benchmark (Sedgwick, 1982; Clare, 1973). In addition, my own analysis noted a significant clinical context, an aspect which in this simple format is typically subsumed within the period mostly dealing with the family. Each of the three identifiable contexts contributes sufficient content to warrant independent recognition and reflects what could be deemed the original and most influential analysis of Laing's theory to encourage a modular format, Siegler et al.'s (1969) *Laing's Models of Madness*.

Siegler and Osmond (1966, p. 85) developed an analytical framework consisting of seven models for universal application in the understanding of schizophrenia/madness:<sup>104</sup> 'medical, moral, psychoanalytic, family interaction, social, conspiratorial and impaired'. They deployed this framework as a template during the analysis of numerous theorists' work, and argued that most, if not all, theorists employ one or more models in their application to schizophrenia. In 1969, Siegler et al., applied this framework to Laing's publishing to date (a period encapsulating all the developments within his first phase of publishing), concluding that Laing's work presented three models of madness: conspiratorial, psychoanalytic, and psychedelic, all of which were operating to a certain degree within the theory of *The Politics of Experience* (1967).<sup>105</sup> A highly significant aspect to this research is that it was published with the assistance of a *NIMH General Research Support Grant* and support from the *American Schizophrenia Foundation, Inc.* This places research allegiance, and a potential for bias, firmly within the medical council (which Laing was so vehemently opposing), and as such medical discourse permeates through the entirety of its modulated structure. This influence must be kept in mind when reviewing their opposition and critique of Laing,

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<sup>104</sup> Siegler and Osmond expanded this framework to eight models in the later publication, *Models of Madness, Models of Medicine* (1974).

<sup>105</sup> Prior to this stage, Siegler et al., (1969) state that only two were present in Laing's theory, conspiratorial and psychoanalytic.

however it is equally as important not to be discarded simply due to its often-polemical position.

Howarth-Williams (1977) produced a more complex seven stage framework directly and only applied to Laing's theory. This framework incorporates greater fluidity between all stages, a quality distinctly lacking in Siegler et al.'s rigid and bounded approach; even so, the family and political remain the most prominent aspects. Siegler et al.'s *Models of Madness* was the most influential, reprinted as a chapter in the edited book, *Laing and Antipsychiatry* (1972), and instrumental in the family/political distinction referenced in several publications (see Crossley, 1998; Crossley, 2005, Laing, A, 1994; Good, 2002; Carpentier, 2002), the clinical context seemingly encapsulated within the familial analysis of subsequent studies.

The momentum behind these modulated and atomised interpretations, influenced significantly how I came to understand and define the rupture occurring at the structural juncture between the family and the political.

Siegler et al., identify the rupture as a consequence of Laing's transition from a psychoanalytic model to a psychedelic model, these models translating to the familial and political contexts, respectively. Having already outlined Laing's intent to distance his own theory from a psychoanalytic framework, I was further troubled by Siegler et al.'s insistence on using the sensationalised term 'psychedelic' to address Laing's Transcendental Experience and theory of Metanoia, both more apt names that accurately reflect the language and terminology within Laing's approach. By opting for 'psychedelic' Siegler et al., are making what is seemingly a deliberately contentious reference that gestures toward Laing's synonymy with LSD during this period but garners only the very briefest of acknowledgement in his written theory.<sup>106</sup> The content that substantiates the 'Psychedelic Model' is a major structural component of Laing's theory, the proposition that schizophrenia could be perceived as an existential retreat, a regenerative 'breakdown' capable of bringing about a breakthrough.

Schizophrenia is '...itself a natural way of healing our own appalling state of alienation called normality'. (Laing, 1967, cited in Siegler et al., 1969, p. 953)

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<sup>106</sup> Laing makes his most direct reference to the compatibility of LSD within the Transcendental Experience in *Metanoia: Some Experiences at Kingsley Hall* (1972). This was not published until after Siegler et al., had chosen this model name, and even then, this name deliberately leans toward a very scandalous aspect.

But it is folklore and not writing which suffuses the sensationalism of LSD use and treatment, within this model (which does not negate its accuracy entirely). Either way, Siegler et al.'s Psychedelic Model falls beyond the parameters of this research due to its focus on treatment and 'cure' as opposed to the process of causation, and they seemingly bypass the wider context for the political that this model sits firmly within.

Howarth-Williams, even with a more dynamic and fluid structure, identifies this same break in theoretical continuity occurring between the familial and the political, accounting this failure to an inadequately justified progression towards a Marxist application within Laing's theory.<sup>107</sup> The point to emphasise is that Howarth-Williams, Seigler et al., and many others, identify a family and political dimension to Laing's theory, albeit with a brief detour into Transcendental Experience, structuring each as separate entities and agreeing that Laing's political transition causes difficulty for considering his theory within a singular, cohesive and totalising framework, a problem widely reflected in secondary accounts (see Chapman, 2018; Burston, 1996; Burston, 2000; Sedgwick, 1982; Mullan, 1995; Clare, 1973).

All the evidence repeated in secondary texts points toward the family-politics split being a theoretical anomaly, a conflict Laing seemingly was uninterested in acknowledging or responding to. This is a major criticism continually levelled his way, and thus frequently used as evidence to disqualify the stability of his entire theory (contributing further to criticisms of a lack of theoretical integrity, as found in the political furore discussed later).

## Changing the definition of Normality

Acknowledging this changing dynamic within Laing's work, Burston (2000) opens discussion about the different concepts of normality that are employed at different stages, coinciding with a changing application of ontological insecurity.

[T]he psychopathological concept of normality posits universal norms of psychological functioning and/or relatedness to others according to which any individual may be judged disturbed, disordered or well. (Burston, 2000, p. 101)

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<sup>107</sup> Howarth-Williams places this occurrence between *Series and Nexus in the Family*, 1962, and *Sanity Madness and the Family*, 1964, far earlier than Siegler et al., who locate it firmly with *The Politics of Experience*, 1967, the reason for this ambiguity is discussed later.

Normality within psychiatry, both then and now, is defined by the psychopathological concept. Originating with the medical concept of normality, ergo health, the psychopathological approach to normality identifies deviance through two theoretical pillars: statistical and cultural qualification.

Laing's engagement with these concepts of normality (as with his definition of ontological insecurity) within the family and political context interact with these pillars differently, but Burston (2000) states that they universally oppose the standard definition that is psychopathological normality. I agree with certain elements of this argument but question others. In addressing Laing's engagement with each concept of normality, we develop more insight into why a change of application occurs with ontological insecurity.

### *The Normality Concept Applied in the Family*

Burston's (2000, p. 98) definition of the statistical aspect states that it is descriptive in format and qualifies 'the norm' by outlining the 'central tendency or prevailing trend'. He states that statistical qualification of normality is consistently applied throughout *The Divided Self* and I would argue that this corresponds fully with the family context: statistical normality highlights the prevailing status quo as a positive state of societal 'mental health', with madness represented most profoundly by the diagnosed schizophrenic. Using Laing's later figures in 1967, 1 in every 100 are schizophrenic; within the family context statistically the mad are therefore abnormal.

Laing's (1960) feelings toward the cultural concept of normality are more complicated and this is evident within the family context. This concept is significantly different to the previous, being highly dependent on a prescriptive format: it measures abnormality by deviance from moral or political standards etc.<sup>108</sup> As the name suggests, cultural normality varies dramatically geographically and historically, and these variants have significant implications as to whether something is deemed mad or bad, understood as medical or criminal, and ultimately determined as a legal or psychiatric case (Burston, 2000). This was touched upon earlier as we discussed the increasing dominance of the DSM in determining definitions (and treatment) of 'mental disorders' on a global scale, a move that is homogenising the cultural approach to madness – and not necessarily for the better. Laing discusses the cultural

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<sup>108</sup> This overlaps significantly with Becker's Labelling theory as discussed in Chapter 13, *Ontological Discontinuity*. The qualification of deviance being culturally manufactured.

concept at the beginning of *The Divided Self* highlighting epistemological value authority to illustrate cultural difference.

In contrast to the reputable 'objective' or 'scientific' we have the disreputable 'subjective,' 'intuitive,' or, worse of all, 'mystical'. (Laing, 1960, p. 25)

In this quotation, 'objective' and 'scientific' are firmly located as western values, 'subjective', 'intuitive' and 'mystical' being regarded dismissively from this perspective. Whether Laing would still be able to contrast the west versus the rest dichotomy in light of the increasing expansion and influence held by the DSM, is questionable, but even without this clear cultural contrast, Laing's statement serves to highlight the western cultural claim<sup>109</sup> to be the omnipotent and absolute authority on determining norms for the mind, supporting their moral and political prescriptions. Laing therefore relied on the statistical notion of normality and voiced criticism of the cultural aspect. Burston presents this as justification for Laing's opposition to the psychopathological concept of normality within *The Divided Self*, which we extend here to include the family context.

At this time, Laing was not alone in questioning the premise of psychopathological normality from a cultural perspective, Sedgwick and Szasz providing two associates in this argument, albeit for distinct and opposing reasons. Sedgwick's (1982) activism and writing during the 1960s highlighted that 'mental illness' is not anomalous within any culture. Its constant presence across all cultures, regardless of frequency, meant that it cannot be dismissed as statistically 'abnormal'. Szasz's (1961) approach did not disagree with this but emphasised the role of societal frameworks in ostracising those diagnosed as 'mentally ill'. He stated that if our societal arrangement, our cultural approach, was inclusive to their differing needs, they would not incur diagnostic labels that subsequently result in detrimental experiences that othered them from the outset.

Although approached from different positions, Szasz and Sedgwick both opposed the culturally qualified concept of abnormality; for both, 'mental health' issues needed to be re-considered as a form of normality. Laing's analysis of the family context also opposed this cultural concept but remained distinct from the analyses of Szasz and eventually Sedgwick. Sedgwick ultimately lost confidence in Laing for several reasons that I suggest were primarily political. Szasz consistently criticised Laing from the outset for maintaining the binary of identifying individuals as normal/abnormal with a thinly veiled attempt to disguise

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<sup>109</sup> and therefore its 'objective' and 'scientific' basis.

these sentiments within his own terminology of ontologically insecure/secure and as such, Laing did not refute the cultural qualification sufficiently to declare 'mental health' issues as a form of normality (Kotowicz, 1997).<sup>110</sup>

From this basis, I would support Burston's (2000) assertion that Laing structured his family context using a statistical qualification of normality. However, regardless of whether the causation of illness was socially intelligible or not, or whether he termed it schizophrenia or ontological insecurity, Laing still retained a cultural qualification for what is deemed normal. He argued the limitation of the western cultural bias, but this was still the standard (an identification of individuals who demonstrated symptoms fitting cultural deviance) that denoted the individual as a member of the statistical minority; therefore, he may have opposed this concept of normality, but he still adhered to it. I would argue that in Laing's focus upon the family, he questioned and was critical of psychopathological normality, but unlike Szasz and Sedgwick his practice was not actively opposed.

#### *The Normality Concept Applied in the Political*

Moving onto the political context, Laing's approach and opposition to psychopathological normality was argued with far greater effect. For Burston, the start of this shift towards a changed understanding of normality is evident from the very next publication of *Self and Others* (1961) and this places it closer, arguably within, the parameters of the family context for many. This is discussed further in subsequent chapters, but independent of exact date, it represents an obvious shift, with the inversion of statistical normality; it was now the 99% undiagnosed that were deemed abnormal, ipso facto the 1% diagnosed as mad constituted potential normality. This change in the application of statistical normality, or rather what constituted statistical normality within the political context, placed Laing's theory in full opposition to psychopathological normality (which was qualified heavily on the statistical qualification of normality). However, it was the role of the cultural concept of normality within this statistical inversion that took centre stage with this context. As highlighted above, Laing's criticism of the exclusive cultural authority held by the western view, was present from the beginning of *The Divided Self*. With a political framing Laing no longer simply criticised its qualification whilst accepting of its method of identifying deviance; he now turned the entire notion of western cultural diagnosis on its head.

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<sup>110</sup> Laing's argument against this accusation plays an important role in Chapter 13, *Ontological Discontinuity*.

[L]et us call schizophrenia a successful attempt not to adapt to pseudo social realities. (Laing, 1967, p. 57)

The condition of alienation of being asleep, of being unconscious, of being out of one's mind, is the condition of the normal man. (Laing, 1967, p. 24)

The plane formation itself is now trapped in a pseudo-sanity caused by, and maintained by, social phantasy constructs. When we bring the cultural concept into focus with the political framing, it draws existentialism back into the fold; peaceful existence within the cultural sphere is experienced only with the disavowal of our true potential for existential freedom. When involved and absorbed within pseudo-sanity, the statistically qualified 'normal' cannot see the wood for the trees. The medical profession unifies doctors, nurses and especially psychiatrists; such is their situatedness within the formation, they have lost the capacity for perspective and the scientific basis of this has instilled a false sense of superiority, qualifying the western cultural perspective itself as the absolute and only authority to grant normality. The outcome of this is that collectively we are fully entrenched in bad faith, living a life convinced of its authenticity but instead complicit in the conventional practices of everyday existence and ignorant of our lack of existential freedom.

At a glance, this statistical inversion and cultural re-qualification could be misconstrued as a movement toward Deurzen's (2010) definition of a traditional existential understanding of ontological insecurity; a recognition that the human condition exists as a constant state of ontological insecurity. However, the human condition, is never a direct or the foremost focus within Laing's theory.

Laing's new cultural concept illuminates the increasing toll our political existence places upon our ability to seek refuge from our base existential anxieties. Without the ability to immerse ourselves within worldliness, a requirement for the human condition, ontological insecurity is realised. Whereas it was previously certain families that were identified as a location of ontological insecurity, Laing was now stating that society itself was accountable for its onset; the political conditions no longer provide sufficient security for us to contain and exist within our bad faith, thus existential angst is increasingly part of our experience – and ontological insecurity ensues. Equally, we could phrase this as ontic security has now been lost. Laing's reasoning is that it was now impossible for *Being* to harmoniously integrate in-the-world; complicity in the social-phantasy-constructs was a pseudo-sanity, a madness. The psychotic on the other hand, with their disrupted social phantasy system are non-complicit in pseudo-sanity and are facilitated an outsider (potentially privileged) perspective.

Laing's political focus now challenged both pillars of the psychopathological concept of normality: the statistical aspect was completely inverted, and the western cultural perspective that he previously critiqued within the family setting was challenged. Essentially, the pendulum had swung too far; by the time he came to analyse our position within the political, his increasingly existential focus could no longer allow him to accept a culturally produced pseudo-sanity as ontological security. The status quo no longer determined normality or sanity; as the saying goes, it was now mad to be normal.

A temptation could well be to mediate the conflict of the political with the family as a matter of simply accepting a change to Laing's definition of normality. Burston (2000) appears to leave breadcrumbs leading to this destination but falls short of asserting this conclusion, possibly because whilst it may offer a perspective into this conflict, it does not resolve it. What must be said therefore is that Laing changes the qualification of normality in his approach at junctures that coincide with the family and political analyses.

As we identify and accept Laing's changing view of the cultural concept of normality, the role of existentialism is again reinforced – it was Laing's increasing commitment to, and investment in, his existentialist foundation that prevented him from accepting the political and moral qualities that sustained the conventional practices of everyday existence. The bad faith required to live in these conditions were no longer misdemeanours, they needed to be recognised as madness, causes of ontological insecurity. Laing's writings at this political transition were designed to wake us from a toxic slumber.

The definition of normality employed provides a wider context to changing dynamics and focus within Laing's theory between the family and the political contexts but fails to directly address ontological in/security. Within the family context, normality, as deemed by a statistical and cultural definition, constituted ontological security. By these same standards of normality, within the political context, the statistical and cultural concepts of normality now constituted ontological insecurity.

Laing himself never rejected them<sup>111</sup> explicitly, even though he apparently felt that he outgrew them. (Burston, 2000, p. 136)

Burston's analysis of the different normality concepts used within Laing's theory gives more context to the changes that unfolded during this timeframe. It acknowledges a significant

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<sup>111</sup> 'Them' in this context refers to the normality concepts.

shift and expands upon why it developed, locating this with Laing's initial critical acceptance and subsequent absolute rejection for the cultural concept of normality. But in stating that the changing applications of normality coexist within a universal framework,<sup>112</sup> although this encourages flexibility for the application of normality, it fails to offer movement toward resolution with the perceived conflictual definition of ontological insecurity between the family and the political, reflecting the same time markers.

Burston (2000, p. 138) ultimately qualifies the coexistence of normality concepts within the family and political context as 'logically antagonistic'. This position detrimentally impacts on the pursuit of a totalising theory within this thesis. Firstly, it confirms the idea of a modular structure within Laing's theory; a family model that is distinct and isolated from a political model. And secondly, it confirms the accusation levelled for a major theoretic conflict; both applications of ontological insecurity 'coexist' within the same theoretic framework, but with a changing definition of what constitutes normality (ontological security) their application is both 'logically antagonistic' and remains conflictual.

Although analysing the specific aspect of normality concepts, the flexibility Burston achieves between the family and the political context, gives reason to further consider the perceived absolute conflict for ontological insecurity in these same contexts. The context Burston identifies which is accepting of change within Laing's theory, helps to build a pathway with regard ontological insecurity.

### Atomisation or Totality

Such is the influence and presence of the modular interpretation in secondary sources, it precedes and dominates any other, arguably even Laing's own. Three contexts invariably surface in the application of Laing's theory: family, clinical, and political. However, I do not believe it was Laing's intention for these contexts to be perceived as anything other than residing within a totality.

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<sup>112</sup> Burston (2000, p. 138) justifies '*their peaceful coexistence under the umbrella of a pluralistic pragmatism*' and this is an unusual direction to take to accommodate both models within a single framework. Pragmatism is not outlined in Laing's primary texts and has not presented any viable benefit to contravene the existential basis employed thus far. But Burston's bold, and all too brief, statement that a *peaceful coexistence* can be identified within *pluralistic pragmatism*, is worth considering. Through delving further, a certain, albeit limited, resonance can also be formed with existentialism: firstly, the notion that 'existence is prior to essence' (p. 159) and secondly, that 'man is a problematic creature' (Hook, 1959, p. 160). These features fit with the three stages of existentialism underpinning Laing's work.

The initial way we see a thing determines all our subsequent dealings with it. (Laing, 1960, p. 20)

Although not intended for application in confronting the issue of a theoretical conflict, this pivotal quote again comes to the fore. Laing (1960) clearly advises us against studying the individual organs of the person and reducing them to a system of 'it-processes'. Using the example of Humpty Dumpty to illustrate his point, studying the shattered parts tells us nothing of his *Being*. Whether in the context of being-in-the-world, or his theoretical structure, I suggest the same ethos applies. Unfortunately, following the insistence on defining Laing's theory in this now familiar atomised form, a failure to perceive an interconnection of the theoretical components and contexts within the whole occurs. The key to addressing this conflict, therefore, cannot simply be an attempt to build bridges between the shattered parts of 'it-processes' or rather atomised modules; we must re-contextualise these concepts within a totality.

As Laing's prominence within 1960s culture was building, the preface to the second edition of *The Divided Self* was written in 1964 (the importance of this year will become clear shortly), with Laing writing:

One cannot say everything at once ... But let it stand. This was the work of an old young man. If I am older, I am now also younger. (Laing, 1960 / 1964, pp. 11 – 12)

In the knowledge that subsequent publications were already in print and more in the pipeline, his warning was clear: this book and its theory are not a stand-alone, it must be appreciated within the wider context of his other writings, after all – *one cannot say everything all at once*. Individual concepts and characteristics are present within any theory; however, this comment alone encourages his interpretation to be withheld and framed within a totality. Laing cautions the reader not to be captivated by his youthful confidence that underpins this early writing, stating *this was the work of an old young man*. It is only now that he realises his misplaced confidence in its presentation: *if I am older, I am now also younger*. For all that said, the essence of the book remains true: *let it stand* but retain its context within the totality.

Working from this premise, there is enough encouragement to readdress his theory within the context of the whole, and this draws less conspicuous aspects of theory into focus. This is particularly apparent with regard to the perceived conflict incurred regarding the definition of ontological insecurity and feeds directly into the topic of atomisation.

In the same year as he wrote the preface to *The Divided Self*, 1964, *The Politics of Experience*, was also under construction.<sup>113</sup> When read with conscious effort to embrace the totality as he advises above, he produces something that reads as acknowledgment of inconsistency surrounding the definition of ontological insecurity:

This identity-anchored, space-and-time-bound experience...gives us a sense of ontological security, whose validity we experience as self-validating, although metaphysically-historically-ontologically-socio-economically-culturally we know its apparent absolute validity as an illusion. (Laing, 1967, p. 113 – emphasis added)

This is important, yet so easily missed when read segmented. With something akin to a dialectic methodology his response is not one that admits a negation between the first and second proposition, however their mediation, requires a third superior action; Laing applies a retrospective amendment to his terminology. Our successful immersion within the conventional practices of everyday existence provides us with 'a sense of ontological security' and this is very different to stating that we actually achieve ontological security.

As discussed earlier, Deurzen (2010) is a fierce critic of Laing's concept and application of ontological insecurity, offering a critique that lost much of its value when we considered Laing's intended focus upon fourth possibility anxieties originating outside the human condition itself, and now, with the inclusion of 'a sense of' her criticism loses what little footing remained.

'A sense of' ontological security distances itself again from the necessary existential characteristics of freedom and authenticity of self, but instead refers to the ability to achieve peaceful coexistence between ego/other, inner and outer worlds, whether that denies freedom and authenticity (existing with bad faith) or not. We must always remember that Laing's (1960, p. 9) declared focus for all his philosophical application was 'to make madness, and the process of going mad, comprehensible' and he warns the studious reader that his study was 'not a direct application of any established existential philosophy'. Existential and phenomenological theory, including the concept of ontological insecurity, were selectively employed and assembled in the service of developing an understanding of 'madness'. It may not have been a theoretically traditional application, but his interpretation

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<sup>113</sup> With the exception of three chapters: Chapter 4: *Us and Them* (1962) and Chapter 7: *A Ten-Day Voyage*. Chapter 1 is undated but contained within the broader description 1964 - 1967.

shone much needed light onto the experience of psychic suffering and developed a more humane understanding of it.

The prefix of 'a sense of' plays a vital role. It continues to reinforce the necessity for flexibility in Laing's application, but more importantly, indirectly and subtly, it addresses the conflict between the changing application of ontological insecurity, blurring the boundary of the ontic and ontological, security in one's context and security within oneself.

Heeding Laing's advice in the preface to the Pelican edition of *The Divided Self*, for the precursor of 'a sense of' as qualification of his definition of ontological security and recalling the fourth possibility, creates a bridge for its usage between and within the family and political contexts, and this has positive implications for the continuity of theory. This loosening of the absolute binaries created at the outset gains even more impact as we re-inject part of the preface statement from the second edition of *The Divided Self* once again.

I was already falling into the trap I was seeking to avoid. I am still writing too much about Them, and too little of Us. (Laing, 1960 / 1964, p. 11)

The family context was distinctly an *Us* and *Them* structure, the ontologically secure and the insecure, the sane and the mad. By using 'a sense of' to pre-qualify and loosen the absolute status within *The Divided Self*, if we are not fully secure, by definition we are to some extent insecure. *Us* – anyone not in receipt of a diagnosis, therefore, find ourselves situated within the ontologically insecure realm of existence. This subtle but significant after effect imbues the totality of both models with a more existentially informed continuity.

Even with this addition included in the preface to subsequent editions, the repetition of the atomised and modulated framework, particularly that deriving from Siegler et al.'s influence, continues. And repetition appears to evidence its compatibility and authority to interpret and define Laing's theory, specifically reinforcing this perception of an absolute rupture. The qualities of being peer reviewed, medically presented, and the convenience of a predefined analytical framework are seductive qualities that I suggest entice many a reader to agree to accept its claims. Furthermore, its scientific form adds to its authority, lending itself to a perceived simplicity and facticity for our increasingly medicalised understanding of the self and psychic suffering. This gravitational pull toward the scientific classification stands in contrast to Howarth-Williams' philosophically inclined analysis, a point to consider regarding its lesser impact than that of Siegler et al., and even more worryingly, maybe even a reason for overshadowing Laing's own philosophically structured framework. Ultimately, Siegler et

al., present a concoction of authority moves that appease what Laing (1967) termed a desire to translate and frame subjective experience within objective scientific discourse.

As such it is easy to lose sight of how an atomised structure which holds such influence, presenting three distinct models, and asserting the familial/political dichotomy as diametrically opposed, did not originate with Laing. But that is not to discredit the value of such research, rather we need to reconsider and contextualise the priority it is given. Siegler et al.'s research, and all others of this ilk, provide a useful tool to help in analysing Laing's theory, enabling a depth and detail to be acquired, but accepted as a literal and accurate representation, these frameworks incur significant limitations.

The task, then, is to locate all of his statements which fit any of our dimensions, to put together all the dimensions which are compatible with each other, to see how many models result from this process. (Siegler et al., 1969, p. 947)

The drive to forcibly fit Laing's theory to accommodate their standard theoretic dimensions, produces strains and distortions that significantly impact upon the integrity and representation of Laing's theory; namely, a structure composed of three isolated, distinct, separate and disconnected models, which Laing himself never proposed or endorsed. Furthermore, attention is then directed toward appraising each module with differing value, identifying the familial module as the standard by which to contrast and measure the others, thus imbuing this framework with the greatest authority and dismissing the political (Clare, 1973; Sedgwick, 1982).

The question is how do we explore what I agree are three locational contexts whereby the mechanics of Laing's theory reside without becoming trapped in the preformed grooves that have served to steer interpretations of Laing's theory arguably to its distortion, detriment and seeming irrelevance? The answer lies in addressing it through a Laingian lens, and not, as has become the norm, to address Laing through a modular lens – perhaps another continuing consequence of the vagueness critiqued within Laing's methodology, inviting other theoretical frameworks to be applied to structurally support its application.

The additional information that Laing provides in the preface to the second edition of *The Divided Self*, and the quote extracted from *The Politics of Experience*, are geared toward clarifying his concept of ontological insecurity and its intricate engagement with empirical experiences. The necessity to include this further clarification implies Laing was aware of a need to clarify his theory. Before we refine our focus through this Laingian lens however, I

suggest that we must also consider the differences that surrounded Laing's publishing status and how this may have affected the representation of his theory.

Although critically acclaimed once published, *The Divided Self* (1960), encountered several rejections before 'Tavistock Publications (1959) Ltd' eventually took the book into hardback production in 1960 (Mullan, 1995). Laing was working within a psychoanalytic community and targeting his book for a contrasting medical market, he wanted to revolutionise the methodology underpinning psychiatric treatment – his theory already required persuasion to get it into print, perhaps simplicity was part of the compromise that aided that process. I find it hard to believe that Laing, with his extensive philosophical grounding, would mis-apply something as simple, yet important, as ontic and ontological, or switch the definition of ontological insecurity from a relatedness with one's context to oneself, indiscriminately. But maybe the trap for writing too much about *Them*, and too little of *Us*, was necessary to appease an audience structured so heavily on the understanding of a single binary, those with 'mental health', and those with 'mental illness'. Presenting his theory in a manner that enabled a direct translation of ontologically secure/insecure, respectively, was a necessary compromise that allowed him to keep his attention on those who were actually suffering rather than prioritise theoretical purity. My final suggestion would be that by 1964, when he wrote both quotes, he realised the damage a literal understanding was doing to his increasing existential focus, so he sought to clarify his position. This postscript addition within the preface by Laing and its interpretation here, does not provide a seamless resolution to the conflict, the ontic/ontological confusion remaining troublesome, but I believe the caveat Laing offered establishes an understanding that reinforces his focus on empirical fourth possibility anxieties that is far more consistent within the totality of his theory. Laing uses the term '[a sense of] ontological security' as indicating a peaceful coexistence between ego and other, a peaceful integration of inner and outer worlds, an experience of living with ontological security. This could equally be determined ontic security with 'ontological insecurity' – the individually is living peacefully within their worldly existence at the expense of existential freedom.

Or, to introduce the next section, it could describe an achieved balance of relatedness with one's world and oneself, two separate components that exist within the single framework of self-consciousness. Self-consciousness is an underappreciated concept within Laing's theory and one that develops more continuity for the application of ontological insecurity.

## 9. Self-consciousness

The concept of ontological insecurity developed in this section is a culmination of the theory analysed in the two methodological chapters. We see how Laing's existential-phenomenological methodology argued a truer understanding of the self and this revealed a structure by which to consider a theory of self-formation, both elements combining to form a unique methodology illuminating how psychic suffering, as experienced by some of most marginalised members within western society, (mis)diagnosed schizophrenics, can be described as an experience of a split or divided self, a ruptured ego which inhibits cohesion for being-in-the-world. The centrality of this concept is now reworked with greater emphasis directed toward the dual operation of self-consciousness, this being paramount as we start to reanalyse the intelligibility of research findings Laing evidenced within the family and speculated within the political context, drawing out components which resonate further within contemporary western society.

This interpretation reflects Laing's guidance to address his theory as a totality and develop concepts that promote continuity throughout the entirety of Laing's theory (first phase of publishing), including the application of ontological insecurity.

Reframing Laing's concept of ontological in/security with reference to self-consciousness was a key moment in my appreciation for the potential of this concept, and more widely, the value of Laing's theory. With both aspects residing within *The Divided Self*, their compatibility to co-operate effortlessly, adds valuable structural detail to the concept of ontological in/security. Within ontological in/security, self-consciousness develops a more nuanced relationship for the inner and outer world, ego/other dynamic, showing how both domains *should* work hand-in-hand. However, as will become apparent, one-sidedness related directly to this structure of ontological insecurity can be seen both within Laing's case studies and contemporary culture.

Considering self-consciousness is given its own dedicated chapter in *The Divided Self*,<sup>114</sup> yet gains little attention in applications to the family and less again to the political, its potential is woefully undervalued. This pivotal, yet often overlooked, aspect is directly related to ontological in/security, and exploring it enables a deeper understanding of the mechanisms relating to ontological insecurity and thus strengthens its potential for a consistent application

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<sup>114</sup> *The Divided Self* (1960); Chapter 7; Self-consciousness; pp. 106 - 119.

in a contemporary context. Refocussing ontological insecurity through a lens of self-consciousness, a unique and new dimension of thought toward Laing's theory is created, a means capable of flowing through all contexts and bridging models without conflict or deviation from his written theory, and a method of constructing a totality that withholds structural integrity and consistency in all social contexts – importantly, providing stability in the application of ontological insecurity.

Self-consciousness, as the term is ordinarily used, implies two things: [1] an awareness of oneself by oneself, and [2] an awareness of oneself as an object of somebody else's observation. (Laing, 1960, p. 106)

Self-consciousness is the basis for knowledge of oneself within the world. It is structured by the development of two components of awareness [1] *an awareness of oneself by oneself* and [2] *an awareness of oneself as an object of somebody else's observation*, relating directly to the experiential domains of the inner and the outer world, respectively. The ability to utilise this knowledge, self-consciousness, enables the being-in-the-world to function with a sense of ontological security.

Whilst we focus on the components of self-consciousness in detail moving forward, we cannot fall into the trap of enforcing a separation of either component. Throughout Laing's theory, the self is emphasised as the totality of experiences, demonstrated mostly as an enmeshing of inner and outer world experiences. It is through this dynamic, flowing, flexible, relatedness with both domains that being-in-the-world functions with a 'sense of' ontological security, *a person with the capacity to cope with whatever life throws at them*. The importance for the totality and fluidity within self-conscious is equally as vital for our ontological security. Anticipating what lies ahead, a greater focus to the detrimental impact for the dominance of one aspect, [2] *an awareness of oneself as an object of somebody else's observation* is realised within Laing's theory and subsequently reflected in contemporary culture. In turning focus to this aspect, I am not suggesting that this aspect in itself is negative but emphasising the affect of its disproportionality within our existence. Self-consciousness, as with the self, is not reductive to one or the other component or world. When we reside too heavily in any one domain, we live a divided or split existence, this being the essence of ontological insecurity.

Analysing the case study of Maya Abbot once again, the value of the self-consciousness framework becomes apparent.

## The Abbotts and Self-Consciousness

In the wake of a subtle communicative behaviour exchanged between the parents, identified by Maya and denied by her parents, Maya either does right by her own experience which involves refuting her parents' opinion, or she follows her parents' opinion and refutes her own experience. Damned either way.

The consequence [...] was that Maya could not know when she was perceiving or when she was imagining things to be going on between her parents. (Laing and Esterson, 1964, p. 40)

In established Laingian theory, the inability to distinguish different modes of experience, in this case perception from imagination, is a clear symptom of ontological insecurity, a proposition wholly supported in this thesis. In the reanalysis that follows, I delve further into the finer detail of how and why this blurring of inner (imagination) and outer (perception) develops and its impact on the self. No reference to self-consciousness is made in the description given by Laing and Esterson of Maya's predicament; however, the proposition here is that this event and several other consistent examples that surround and compound it, reveal a conflict between the domains of awareness within self-consciousness, two domains of awareness that complement the applications found within the political context as within the family context.

Considering the two aspects of self-consciousness within this scenario, Maya either invests confidence in her own opinion, heightening [1] *an awareness of herself by herself*, prioritising the value of her inner experience; or, she invests confidence in her parents' opinion, heightening [2] *an awareness of herself as an object of her parents' observation*, prioritising the value of outer experience. It is because these options stand in complete contrast, a classic double-bind scenario, that strain is placed upon the calibration of self-consciousness. Making such a choice would already have significant implications for Maya's ontological security. However, adding self-consciousness into this equation, an additional layer of depth is uncovered.

[W]ithin the phantasy of the nexus, to leave is an act of ingratitude, or cruelty, or suicide, or murder. (Laing, 1961, p. 43)

To invest and place confidence in her own opinion, although reaffirming [1] an *awareness of herself by herself*, would be an act of familial desertion that refutes the phantasy of the family-nexus. Even if this option is the sensible, healthy, action to take, Laing (1961) emphasises how big a responsibility this is to shoulder, a decision that requires extensive preparation prior to and beyond the rules of her family experience. In avoidance of this burden and aware that the 'game' is favoured with bias for her parents' authority, agreeing with their opinion and thus reinforcing [2] an *awareness of herself as an object of her parents' observation*<sup>115</sup> (devaluing her own opinion and thus weakening [1] an *awareness of herself by herself*), can appear less challenging for her ontological security:

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

(Laing, 1970, p. 1)

Being the vulnerable member of the family-nexus, i.e., financially dependent, younger, outnumbered, female etc., the odds are stacked in favour of accepting her part in the game and maintaining the homeostasis of existing interpersonal dynamics that constitute the phantasy of the family-nexus. The by-product of this agreement is not only that she remains immersed, trapped even, within an existentially incongruent environment but this also incurs an amplified [2] *awareness of herself as an object of her parents' observation*.

Isolated and spurious situations unfold that present such double-bind situations for us all, however, as Maya's story typifies, it is the consistent, voluminous and intense recurrence of double-bind scenarios that has significant implications upon the self. *Playing their game, of not seeing I see the game* ultimately creates a knotted phantasy construct, and as the consciousness of *not seeing I see the game* deteriorates, we internalise acceptance of the game, consolidating its rules in bad faith. Maya complains that she has been consistently prevented from '[u]sing one's own mind [and] experiencing for oneself' and from the experiences that form her social phantasy construct, we see how this justifies her inability to experience ontological security (Laing and Esterson, 1964, p. 35). With the addition of self-consciousness interwoven within this scenario, and its application to her life story more generally, situations are created whereby [2] an *awareness of herself as an object of her*

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<sup>115</sup> This is only an issue because of the (denigrating) contradiction with her self-reflection. The value of accurate recognition is addressed in subsequent chapters.

*parents' observation* takes priority; knowledge of herself within the world is increasingly framed through her parents' gaze, and as such, her experience, herself, is subjected to the dreadful realisation of the becoming of an object rather than a person.

Self-consciousness develops a more nuanced relationship of the inner and outer domain within ontological insecurity, offering a spectrum rather than the more typical binary structure presented within Laing's theory. This framework only requires minor amendment to work with greater continuity with Lidz's (1972, p. 154) statement; 'we'll know a hell of a lot about all the others ['mental disorders'] when we understand [schizophrenia]'. The inference underpinning Lidz's statement is that other experiences of psychic suffering, those diagnosed as less severe 'mental disorders' within psychiatry, still benefit from Laing's theory. However, with ontological insecurity playing the pivotal role in Laing's theory, its representation so far is a binary structure, a dichotomy of secure/insecure, normal/'schizophrenic,' healthy/illness etc – a criticism recognised earlier by Kotowicz (1997) as an unresolved theoretic cul-de-sac.<sup>116</sup>

Self-consciousness on the other hand, responds to this criticism by developing a symbiotic relationship for an awareness of [1] inner and [2] outer experiences, opening up this dichotomy into a continuum. Either domain remains at the extremity, but now the space in-between is brought into focus and given value. Ontological security through self-consciousness is depicted as holding a balance of awareness of each domain. Social conditions for their part – highlighted as (dysfunctional) interpersonal dynamics – have the potential to instil turbulence into this balance. Each domain is capable of being pulled apart, outer from inner, inner from outer, a gulf between them created and increasingly widened. Ontological insecurity within self-consciousness reveals itself as a disrupted balance of both aspects of awareness, no longer necessitating a seismic structural splitting of the self in dramatic and conclusive fashion but embracing the disharmony and space between.

The key to opening up the more nuanced relationship is the term awareness. When awareness is disrupted, the calibration of self-consciousness is corrupted, and the self is unable to regulate its worldly existence. In examining how the calibration of awareness within self-consciousness is disrupted, we now gain a vantage into the development or cause of ontological insecurity and therefore into a cause of psychic suffering.

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<sup>116</sup> See Chapter 7, *An Empirical Concept*.

Although calibration is universally presented as compromised within the double-bind scenario, the mechanism responsible for this disturbance (the source of the double-bind) always resides in the outer, fourth possibility of empirical experiences. Overlaid on a framework of self-consciousness, highlights a series of events that promote the sufferer to excessively engage with [2] *an awareness of oneself as an object of somebody else's observation*. Ontological insecurity is not however the acceptance of becoming of the object, but the disharmony caused by this domination of awareness within self-consciousness.

[I]n the schizoid individual both are enhanced and assume a somewhat compulsive nature. (Laing, 1960. p. 106)

Although Maya's being-in-the-world is dominated by the representational act of her parents, thus encouraging her to prioritise [2] *an awareness of herself as an object of their observation*, the effect on her self-consciousness and behaviour demonstrates an enhanced and compulsive relationship to both aspects. These continual double-bind events, always acting on one aspect [2], destabilises the entirety of self-consciousness, setting [1] and [2] in flux much like a pendulum swinging to and from either extreme. Maya desperately immerses herself in her books and own world at one moment, indulging an [1] *awareness of herself only by herself*; and, in the next moment, swings to a counterpoint, unsure of the value of her own experience and memory, thus requiring total faith in the other's consciousness to position her reality, her existence subject completely to [2] *an awareness of herself as an object of somebody else's observation*. Maya is unable to regulate either aspect of self-consciousness, the very definition of ontological insecurity. Without this harmony, Maya cannot apply self-consciousness, a knowledge base that enables her being-in-the-world, to function with ontological security. Without this capacity to appraise her worldly experience, individual double-bind situations are bound to cause an existential crisis.

## The Necessity of the Gaze

Although presented so far as a negative event, the necessity of [2] *an awareness of oneself as an object of somebody else's observation* is a staple ingredient within self-consciousness and thus the achievement of a sense of ontological security. Laing illustrates the value and necessity of this aspect of awareness using Kafka's 'Conversation with the Suppliant'.<sup>117</sup>

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<sup>117</sup> Laing's translation is different from all other publications which title Kafka's essay as 'Conversation with the Suppliant'. This thesis retains Laing's terminology for consistency. Introducing this short story, Laing (1960, p.

He needs other people to look at him [...] He needs other people to experience him as a real live person because he has never been convinced from within himself that he was alive. (Laing, 1960. p. 109)

Complementing a wider theoretical perspective from the Hegelian to Winnicottian, the essentialness of recognition for all subjects is depicted through its absence in the Suppliant's situation. The Suppliant does not begin in a place of ontological security, he occupies a schizoid position from the outset demonstrating an enhanced and somewhat compulsive relationship with both counterparts of self-consciousness. In the first instance the Suppliant starts with an extreme [1] *awareness of himself by himself*, he resides so heavily within his inner world that he has lost existential footing and a sense of belonging to, and attachment in, the 'real' world, a world that involves inner and outer experience. In response to this anxious position, he subsequently seeks recognition by others, this in turn activating [2] *an awareness of himself as an object of somebody else's observation*. By extension of existing in their observation, he exists in their world. The qualification of being seen embeds his *Being* in-the-world. In contrast to the unilateral negative previously discussed with the prospect of becoming an object, this quality suddenly becomes a paramount ingredient for ontological security but crucially, not in isolation or when dominant.

The Suppliant's extreme situation and initial ontological insecurity involves an absolute divorce from the outer and any involvement with the other. However, within Laing's case studies, this increased [1] *awareness of oneself by oneself* plays no part. The closest we may come to a realisation of this extreme situation is through the experience of prisoners in long-term solitary confinement. Studies of consistent, voluminous and intense periods of absolute isolation in this environment report notable and extreme 'mental health' issues (Haney, 2003). A less extreme but still disproportionate [1] *awareness of oneself by oneself* could be offered as a consequence of 'loneliness', also reported to have a significant impact on 'mental health' (Rose, 2019). Laing's emphasis is not to detract from the potential of this aspect to disrupt self-consciousness, but rather it highlights that [2] *awareness of ourselves as an object of somebody else's observation*, poses the most established threat to ontological insecurity.

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109) states 'Kafka's suppliant makes it the aim of his life to get people to look at him, since thereby he mitigates his state of depersonalization and derealization and inner deadness'.

## Self-Consciousness and Authentic Merging

It is here that Sartre's influence of presence and absence, a concept discussed by Laing in contrast to object-relations theory, becomes important. It is not just a harmony of each aspect of self-consciousness that establishes ontological security; each aspect brings about an intensified engagement with the other aspect. The increasing [2] *awareness of oneself as an object of somebody else's observation* heightens our [1] *awareness of oneself by oneself*. In the process of becoming the *object*, we conversely become more aware of our *thingness* – the fragility of *Being* is awakened by the conditioning of *nonbeing*. And vice versa. Once the balance of self-consciousness is disrupted, the pendulum is set in motion.

We see this demonstrated in Laing's analysis of the family: double-bind situations promote an environmental condition for the individual to prioritise [2] *an awareness of oneself as an object of somebody else's observation*. The consequence of this is not that the individual assumes, accepts, or adopts an awareness of experience through the gaze of another, thus becoming an object, but as demonstrated in each of the family studies and theory, disharmony of self-consciousness ensues. This disharmony results in instability, an *enhanced and somewhat compulsive* engagement with either aspect; the victim/sufferer becomes lost in a self-referential abyss of the [1] *awareness of oneself by oneself*, or defined and contained within the reductive representational act of the other consolidating [2] *an awareness of oneself as an object of somebody else's observation*. As illustrated in Maya's experience, dominated by existing within the representational act of her parents, this ultimately provides a hyperawareness of [2] *herself as an object of her parents' observation* – but this is far from a stable or fixed position, we see her swinging between either pole.

Without balance within self-consciousness, the ability to organically draw on either resource, Maya's knowledge basis to position herself within the world is corrupted and she is unable to navigate the hazards associated with *the conventional practices of everyday life*, and unable to ascertain ontological security.

Laing attributed the development of ontological insecurity to three theorists of primary importance: Heidegger, Sartre and Tillich. A minimal input is accounted to Buber; however, contrasting with this fleeting acknowledgment by Laing, Buber's compatibility at this juncture can be developed to add additional support to his notion of ontological insecurity. Buber's notion of 'authentic merging', is offered here as a chockstone to help consolidate self-consciousness as the means to stabilise a bridge between the changing application of

ontological insecurity, enabling a single concept, comprising of two components, to logically and cohesively coexist with the family and political context.

Burston (1996) makes a brief statement that characteristics within ontological security are taken from Buber's *Distance and Relation* (1950),<sup>118</sup> specifically that a sense of autonomy and separateness is connected to the capability of authentic merging. Building on this limited reference, an immediate contrast with the simplistic interpretation of an either/or Heideggerian concept, either individual authenticity or authentic commonality, is developed. Delving into Buber's original text (respecting Laing's tendency towards extracting only the detail that contributes directly to his intended structure), qualities that resonate with individual authenticity, autonomy and separateness, are also deemed qualities that facilitate authentic merging, which overlap significantly with authentic commonality. Interestingly however, Buber's theory is not placed in one or the other domain; authentic merging requires relatedness with oneself *and* relatedness with one's place of existence, whilst individual authenticity is necessary to engage with authentic commonality – and ipso facto, authentic commonality is a necessity to embrace individual authenticity. This extends to all aspects of Laing's theory, essentially embracing the totality of experiences as a means of realising oneself, a being-in-the-world. Staying with the focus of this chapter, Buber's notion of authentic merging could equally translate to [1] *an awareness of oneself by oneself*, is required to acquire [2] *an awareness of oneself as an object of somebody else's observation*, and vice versa.

The Buberian concept of authentic merging, a notion of *relatedness* to oneself and one's worldly context, reinforces the interconnection between the domains of awareness within self-consciousness, revealing a connection between the differing applications of ontological insecurity in the contexts of the family and the political. The relevance of this gains support from the subsequent publication, *Self and Others*:

[O]ntological insecurity ... encounters non-being, in a preliminary form, as a partial loss of the synthetic unity of self, concurrently with partial loss of relatedness with the other, and in an ultimate form, in the hypothetical end-state of chaotic nonentity, total loss of relatedness with self and other. (Laing, 1961, p. 51)

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<sup>118</sup> Burston dates this essay 1951. Biemann's (2000) translation of several essays, *The Martin Buber Reader: Essential Writings*, dates this essay in 1950.

What is more important here than the observation that ontologically insecure individuals encounter an inhibited capacity for I-Thou relatedness, the consequence of which is already explained within Laing's existential-phenomenological methodology, is that the location of this affects a total loss of relatedness with self and other. Buber's theory is no stranger within discussions of 'mental health'; the contribution of relatedness and its promotion of an I-Thou relationship a positive talking point within psychotherapeutic circles (see Garcia, 2015; Buck et al., 2015, Amari, 2019). However, rather than this reactive application employed by therapists to re-establish the qualities for relatedness, the involvement of Buber's theory within ontological insecurity allows us to consider how the absence of relatedness affects the ontological experience, possibly how its absence causes ontological insecurity. This will be a focus as we re-examine the contexts of Laing's theory, and re-analyse the notion of intelligibility to see if any greater potential is available than is typically associated with his body of work.

In summary, ontological insecurity is a very simple and yet profound concept, grounded in Heidegger's theory; in response to a perceived or real existential threat, a rupture to being-in-the-world ensues. There is a split between outer and inner, ego and other – a divided self. Without existential refuge in everyday worldliness, the individual is unable to retain a sense of both domains within the self. This inability to relate with the outer-world and others that constitute it causes psychic suffering in itself, compounding further the base anxieties of the human condition, existential angst, that become awakened. If the world we exist in generates anxieties too intensely (fourth possibility anxieties), the human condition itself is destabilised. We should avoid resting heavily on technical existential terminology, thereby sidestepping Deurzen's critique, concentrating instead on the essence of what Laing is saying: if a person's environment is not conducive to the base needs of being human (*Being*), any sense of security within the world is lost and psychic suffering is experienced. Laing evidenced this firstly in those (mis)diagnosed as 'schizophrenic', a statistical minority, who were shown to exist within an unconducive existential micro-environment (family-nexus). He subsequently theorised that this extended to western society: the statistical majority were experiencing sufficient fourth possibility anxieties to destabilise the cohesion of being-in-the-world.

If we retain Heidegger's theoretical influence and deem authentic commonality (and a disavowal of individual authenticity) a prerequisite of a sense of ontological security, it only applies within the family context and this presents a conflictual terrain with application to a political context. Trying to mediate this conflict by analysing the changing concepts of normality within Laing's theory, moving from a criticism of the cultural concept of normality to

an absolute rejection – which subsequently inverts the qualification of a statistically determined definition of normality – provides a description of the evolution of Laing's theory. However, this does not find a resolution; at best it rests on a conclusion for an antagonistic coexistence of two concepts of normality, and this only informs the basis for a change in application of ontological security.

In drawing attention to the operation of self-consciousness within ontological insecurity, emphasising its dual components softens the perceived absolute polarity, and enables this shift or contradiction between the family and the political to be considered as a reprioritisation: relatedness to oneself over a relatedness to one's environment, [1] *an awareness of oneself by oneself*, rather than a prioritisation of [2] *an awareness of oneself as an object of somebody else's observation*. Although this development does not resolve the issue of continuity of the application of ontological insecurity, it brings us a step closer to realising this. As we start to apply a concept of ontological insecurity within a political framing, the development of self-consciousness plays a greater role in considering their mutual presence within a singular framework.

## 10. Psychic Suffering

Before we analyse the operation of ontological insecurity within Laing's theory and develop these findings as a means of contributing insight into the current 'mental health' 'epidemic', there are two ancillary factors of this concept that are worth clarifying. Firstly, the proposition that ontological insecurity operates beyond the limitation of DSM diagnosis, and secondly, the notion that this framework enables insight into causation. Both are highly contentious suggestions but suggestions that nonetheless warrant attention and, I believe, contain significant value as we consider the potential within Laing's theory.

### Beyond DSM Diagnosis

Schizophrenia is really the essence, the essential mental disorder, and we'll know a hell of a lot about all the others when we understand it. (Lidz, 1972, p. 154)

The premise outlined by Lidz (1972), is that Laing's framework of ontological insecurity, located at the extreme limit of 'mental disorders' with schizophrenia, offers insight into all other forms of 'mental illness', regardless of the definition, classification or label given within an ever-densifying psychiatric model. This sentiment is stated differently but agreed with by Sedgwick:

'Ontological insecurity'... is said to lie at the heart of serious mental illnesses. (Sedgwick, 1972, p. 15)

Within the recognition of the broad and inclusive potential of a theory of ontological insecurity, the problem with Lidz and Sedgwick is that with their terminology they remain embedded and therefore invested in the psychiatric frame of reference. As we have discussed previously, Laing held major issue with psychiatric words, insisting that through pathologising experiences they perform reductively upon how we understand the person.

To illuminate the unrestricted potential of Laing's theory, I want to take a different tack by starting with an etymological investigation, a valued process by Laing.<sup>119</sup> I want to suggest that rather than refuting the process of 'pathologising', in actuality Laing was returning this

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<sup>119</sup> 'Perhaps we can still retain the now old name, and read into its etymological meaning: Schiz – 'broken'; Phrenos – 'soul or heart'.' (Laing, 1967, p. 107)

back to its etymological roots. From this basis we start realising the wider potential for the application of Laing's theory.

Pathologising: to view or characterise as medically or psychologically abnormal  
(Merriam-Webster – A definition circulating since 1649)

Laing commits significant energy from the outset of *The Divided Self* (1960) to encourage a move away from (psycho)pathologising. By the time he writes and publishes *The Politics of Experience* (1967), pathologising, in diagnosis and therefore treatment, is unequivocally portrayed as a detriment to the patient, an act that introduces further suffering into their experience and prevents the possibility of self-healing occurring.

We can no longer assume that such a voyage [madness, often (mis)diagnosed as schizophrenia] is an illness that has to be treated. Yet the padded cell is now outdated by the 'improved' methods of treatment now in use. (Laing, 1967, p. 136)

The trajectory of pathologising has continued along a psychopharmacological path compounded and accelerated from the 1950s and 1960s with the development and prescription of anti-psychotic drugs. We saw how this has become concretised in contemporary culture in Chapter 2, *Why Now?* Laing's statement is clear: it is better to do nothing and allow the process of 'illness', the voyage, to be experienced than to force it through a detrimental method that prevents any self-healing potential, a method underpinned by pathologising. This could be translated into Laing objecting to a pathologising of the human condition, a trend of thought increasingly relevant in contemporary culture, albeit he accepts these behaviours and experiences as occurring toward the outer spectrum of perceived normality. The current relevance of this line of thought is illustrated in an interesting article published by *The Guardian*, titled, 'Medicalising everyday life doesn't help anyone's mental health':

mental health is talked about using the language of epidemics, and has been commoditised into something to be ordered over the counter: professionals, pills and a side of talking therapy. (Massey, 2019)

Such is the pervasiveness of the current medical paradigm, even the term 'mental health' which freely circulates in western culture and is often used with a positive connotation (as it is in this article), still inserts oneself within the discourse of psychiatric, medical discourse and brings with it inadvertent consequences.

We need to be aware of the ways in which an individual's own perceptions and reports of their mental distress are shaped by the increasing availability and acceptability of the language of mental disorder. (Rose, 2019, p. 65)

'Psychiatric words' as Laing (1960, p. 18) refers to them, now mark the beginning of entry into the psychiatric system, commodification, privatisation – and an individualisation of experience. Personal responsibility ensues; maybe that is in the form of taking medication, or perhaps it is following the current self-help zeitgeist to change your thought patterns. Either way, through psycho-pathologising, a process that can begin with nothing more than the use of seemingly innocuous language which in reality, is loaded with psychiatric meaning, an 'existential degradation'<sup>120</sup> is committed upon the individual. Our experience becomes defined within the psychiatric domain, *Being* contained within the limitations of its discourse.

However, to pathologise the human condition, which means in this context to diagnose and medicalise the experiences and behaviours associated with existence, betrays the etymological underpinning of the word. The roots of pathologising lie in 'pathos' and 'logos'.

Pathos:           1: an element in experience or in artistic representation evoking pity or compassion  
  
                          2: an emotion of sympathetic pity     (Merriam-Webster)

The English use of 'pathos' predates 'pathologising' by more than a century, but although etymologically connected, is almost unrecognisable from the form it has become. To enact pathos is to experience compassion and pity for someone or something. This seems a far cry from the pathologising of the human condition, the diagnostic process, the reduction of self to a medical categorisation. Laing is not abandoning pathologising, he is advocating embracing a true logos of pathos.

Logos:           1: the divine wisdom manifest in the creation, government, and redemption of the world and often identified with the second person of the Trinity.

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<sup>120</sup> This term will gain major attention in Chapter 13, *Ontological Discontinuity*. It suffices at this point to acknowledge this as a detrimental experience.

2: reason that in ancient Greek philosophy is the controlling principle in the universe. (Merriam-Webster)

Logos is to gain true knowledge, to pursue the absolute universal principle. Pathologising, through its etymological meaning, *pathos*, and *logos*, is the exact point that Laing starts his journey within *The Divided Self*.

If it is held that to be unbiased one should be 'objective' in the sense of depersonalising the person who is the 'object' of our study, any temptation to do this under the impression that one is thereby being scientific must be rigorously resisted...Although conducted in the name of science, such reifications yield false 'knowledge'. (Laing, 1960, p. 24)

Laing is here not disregarding science, but stating that science, the process of achieving true knowledge, needs to negate its present form that insists on logical positivism or empiricist values being the 'controlling principle in the universe' (Merriam-Webster). Laing states that we need to find a different way of understanding the self, a more truthful way of appreciating the value and insight of subjective epistemology, this was the reasoning for his unique existential-phenomenological methodology. Only through respecting this difference will science gain any true understanding of the personalised essence of pathos, suffering.

[J]ust as Kierkegaard remarked that one will never find consciousness by looking down a microscope at brain cells or anything else, so one will never find persons by studying persons as though they were only objects. (Laing, 1967, p. 20)

Logical positivism and empiricism has an important place within medicine, but Laing wants to emphasise that this is not to be extended to all matters of the self. Within his methodology, Laing attempts to free himself from a multitude of detrimental effects that psychiatric words perform upon the self and one of these ways was through adopting terminology beyond the increasingly familiar scientific paradigm. This was a means to retune the focus to the experience of suffering and therefore gain real knowledge rather than to utilise existing psychiatric discourse that appeased and prioritised the meaningless pursuit of depersonalised nosology.

Although never categorised in this manner, we see three groupings of terms used in this pursuit: medical, normal, and philosophical.

**Medical:** schizoid (personality disorder), schizophrenic, psychosis.

Schizoid and schizophrenic represent separate recognised 'disorders' within the DSM-5; 301.20 (F60.1), and 295.90 (F20.9), respectively (DSM-V, 2013). They fall under the umbrella of 'psychotic disorders', mild and severe, respectively. Even though gaining more independent recognition since the DSM-III, published in 1980 (Klaus et al., 1997), they continue to be grouped under the symptom description of psychosis due to their phenomenological similarities. This explains their interchangeability throughout Laing's writing.

With specific reference to schizoid and schizophrenia, Laing (1960, p. 17) acknowledges using existing medical terms but states 'I shall not, of course, be using these terms in their usual clinical psychiatric frame of reference'. They are not acknowledgment or qualification of 'disease' and are used in what is an existential and phenomenological context. I find it useful to accept that any medical terminology used by Laing, is done so to identify individuals culturally grouped under diagnostic labels, but more accurately individuals experiencing 'a psychotic way of being-in-the-world' (Laing, 1960, p. 17), terms that place *Them* beyond the comfort of what is deemed normal for *Us*.

**Normality:** insanity, madness, alienation.

There is a long history of the usage of these terms, but as Morrall (2017, p. 3) tells us 'there is no shortage of viewpoints of madness ... [and] ... there is no one position which is uncontroversial and irrefutable'. Laing's application of these terms describes a form of deviance evidenced in behaviour whereby the individual is detached from their worldly context and thus acts in a manner beyond the socially (statistically) prescribed and accepted qualification of normality. This usage overlaps significantly with the medical terminology, hence some compatibility in these terms initially. This definition and compatibility become more complicated as his theory progresses and statistics are no guarantee of identifying the inverse, sanity/normality – this message coming to the forefront in *The Politics of Experience*, where the claim that it is now *mad to be normal* is floated. With a political focus, and incorporation of the Marxist term 'alienation' alongside insanity, madness, Laing strengthens the premise that we are all immersed within a context of madness but unable or unwilling to see this. It could be offered that insanity, madness, alienation, are more acceptable Laingian terms for differentiating between individuals who fall outside a common ideal of social normality rather than terms of medical discourse that enforce a diagnosis and thus qualify certain experiences as evidence of 'disease'.

**Philosophical:** divided self, split self, ontologically insecure.

These terms are argued by Laing as descriptive, rather than medically labelling (Collier, 1977), thus preventing immediate absorption into the existing psychiatric paradigm and the associated reductive and damaging consequences. Instead, they illuminate and inform; they are referencing a divided or split existence, insecure in its nature of *Being* (ontology). As descriptive terms, they are not complicit in the medicalised approach to pathologising. Laing states that they attune to the sufferer's experience, and therefore it is offered that they promote a truer *logos of pathos*.

It is with respect to the intended aim of these descriptive terms, qualities that I believe re-engage with the etymological essence of pathologising (*pathos* and *logos*), that this thesis centres on the term ontological insecurity and introduces a further term of 'psychic suffering'. Ontological insecurity holds firm as the central concept of Laing's theory, and the inclusion of psychic suffering is more than an arbitrary choice. Psychic suffering is strategically employed to distance this research from a medicalised, psychiatric, epistemology of the psyche, even more so with Rose's (2019, p. 65) warning that medical language structures the lay-person's 'perceptions and reports of their mental distress'.

The concept of ontological insecurity was not directly related to psychic suffering but as a disruption of an individual's ability to integrate their being-in-the-world; nonetheless, psychic suffering indirectly enters the equation. The divided self, an ontological split, is enacted as a coping strategy; however, divorcing one's inner from outer world leads to a self-referential existence, behaviours that lose contextual understanding that cement our position within worldliness, distancing the individual from the perceived 'norms' of the social context, highlighted previously with the behaviour of 'schizophrenese babble'. Laing discusses the suffering caused within this ruptured experience as a consequence of a deterioration in relatedness – it is the ontological distance, incurred as a result of falling beyond the 'norm' that causes divided selves to be treated differently, as existentially lesser. In this respect, what becomes increasingly apparent is that the levels of psychic suffering endured are an experience that could be avoided if their environment (the multitude of ego/other relationships, from the family to the clinical and beyond) embraced a phenomenologically guided approach to their experience. Essentially, this would mean that sufferers' experience were not forcibly fitted to a rigid protocol of societal norms, which by their very essence deny them their unique and individual experience. It is not therefore the rupture in itself that is held primarily accountable for the experience of suffering, but rather the impact this has upon the

ability to establish and maintain interpersonal relationships – a key element facilitating relatedness.

We must also include the impact of this rupture on the stability of the human condition. In losing relatedness to others and by proxy one's worldly existence, *Being* has lost the capacity to immerse itself in-the-world. With the conditions necessary for being-in-the-world disrupted, the base elements of existential anxiety surface within our empirical existence. Laing ultimately proposed the transcendental experience model, whereby if interpersonal dynamics did not contribute further to the rupture, a self-healing, potentially enlightening process could ensue. The link may not have been direct; nonetheless, a connection between ontological insecurity and psychic suffering existed.

With respect to the focus of this thesis, the most pertinent proposition ascertained from Laing's research was that 'illness' or 'disease', as demonstrated in those (mis)diagnosed, was nullified; schizophrenia, arguably the furthest and most severe end of the 'mental illness' spectrum, was deemed as an experience rooted within, and caused by, the social milieu. At its simplest, ontological insecurity is therefore not 'mental illness'.

This could lead to a suggestion that Laing outright rejected the biomedical model of 'mental illness', but this would be inaccurate (a contributing factor to his friction with Szasz). What Laing said was that symptoms of ontological insecurity, 'a psychotic way of being-in-the-world', are too frequently misconstrued, misdiagnosed, as evidence of a 'disease' – this contributing further to the increasing dominance of the psychiatric discourse and the necessity to appease its diagnostic process and recognise its authority. But this does not dismiss the notion that mental disorders exist, a position declared most vividly in *Self and Others* (1961, p. 104) by differentiating 'real card-carrying schizophrenics' from the subjects of his research. Laing is simply saying that the diagnosis of 'schizophrenia' is woefully over-represented within psychiatry, and we could extend this premise to the entirety of 'mental illness'.

In no way did this detract from the psychic suffering experienced by the individual but instead by discrediting its belonging within a diagnostic framework (DSM etc); rather, it illuminated that treating it as an 'illness' would provide no treatment. When you are holding a hammer, everything looks like a nail – anything to do with psychic suffering, is focussed through a medical lens (we could argue that using a hammer in certain cases would be no less damaging!). The 'mental disorder' diagnostic process, psychiatry, was therefore

consuming an experience, a human experience, that did not require medicalising, and did not belong within its jurisdiction.

The caveat to this differentiation, is that those suffering ontological insecurity are not mentally ill, but those that are mentally ill are incredibly likely to be ontologically insecure. We will discuss this more in the clinical encounter and the Conspiratorial Model, but essentially the medical treatment of 'mental illness' is a process that creates the perfect conditions for ontological insecurity to develop; a necessary existential split of inner from outer, self from other, in an effort to preserve one's existence.

This reinforces the universality and potential of Laing's application in addressing all forms of psychic suffering, including the capability as Lidz states to help in understanding all the other 'mental disorders'. Laing's theory is not bound by diagnostic specificity, it targets ontological insecurity, a concept that resides within and beyond diagnostic classification. Therefore, at a time when incidence levels of 'mental health' diagnosis are increasing significantly, with very real questions being asked about the representation of this as illness per se, in approaching ontological insecurity, we are more likely to help those suffering and not 'mentally ill', and those 'mentally ill' who are suffering also. Ontological insecurity offers a window to envelop 'mental health' disorders and embrace psychic suffering without being prejudicial toward disorder types or even whether a diagnosis has occurred or is warranted.

Although the term psychic suffering reflects the descriptive qualities associated with ontological insecurity, this was not a term Laing employed. It is used in this thesis to both reflect this compatibility and establish a distance from Laing's original works and theory. This distance becomes important as we develop the next section, presenting a highly contentious proposition, certainly within classically Laingian circles, that Laing presents a framework by which to understand a significant cause of psychic suffering, a cause that runs from the intimate to the political.

## A Theory of Causation?

Laing has become notorious as the man who blamed schizophrenia on families.  
(Shariatmadari, 2013)

Taken from a mainstream newspaper, *The Guardian*, this quote succinctly highlights a common (mis)understanding that impacts upon the entirety of Laing's theory: that 'blame'

was apportioned within Laing's theory. Placing this blame within the family plays into a further misconception about the limitation of Laing's theory to the family in isolation; this is addressed in the following chapters but let us first confront the issue of blame.

To be capable of directing blame it must logically follow that Laing identified and implied a source of causation. A counterargument quickly adopted amongst many Laingian scholars to this much-repeated accusation is that a grave misunderstanding of the research hypothesis of *Sanity, Madness and the Family* (the publication typically held accountable for instilling or justifying such a claim) has been made. The argument is that Laing and Esterson are questioning the notion of 'schizophrenia' as an illness and in no part are attributing blame in any direction, to the family or otherwise.

We have tried in each single instance to answer the question: to what extent is the experience and behaviour of that person, who has already begun a career as a diagnosed 'schizophrenic' patient, intelligible in the light of the praxis and process of his or her family nexus. (Laing and Esterson, 1964, p. 27)

The inference is that Laing (and Esterson) were questioning the notion of 'schizophrenia' as disease. And, having presented a viable argument that 'experience and behaviour' of a person diagnosed 'schizophrenic' is more socially intelligible than previously thought, their research hypothesis achieved its aim. Reiterating the basis of his entire theory and research in his interviews with Mullan, Laing makes this point absolutely clear,

*I'm not talking about aetiology of schizophrenia, I've always said that.* (Laing, 1987, cited in Mullan, 1995, p. 379)

The necessity to respond to this accusation at the latter stages of his career (and life), reaffirms the bluntness with which he felt the need to defend his theory. On initial glance it seems a concise dismissal of any and all consideration of causation. However, in specifying 'aetiology' and 'schizophrenia', Laing's refutation only addresses illnesses and diseases which fall within the psychiatric paradigm. By omission, Laing's defence does not negate the proposition that he *is* talking about a cause of ontological insecurity and therefore psychic suffering.

We could return to the hypothesis above once again, as many Laingian scholars do, asserting that intelligibility of 'experiences and behaviours' was Laing's research aim and use this as a further basis to dismiss any notion of causation. But this defence relies on the

premise that intentionality nullifies the outcome, that blame, and by default causation, was not intended and therefore blame and causation is not relevant within the findings. Writing in *The Guardian* newspaper, Hillary Mantel (2008), a novelist and advocate of Laingian theory, no stranger to the finer details of this hypothesis, states, the outcome of the research findings implicate a level of culpability:

[Laing] and his co-workers suggested that the way some families worked could generate psychotic behaviour in one member, who was selected, more or less unconsciously, to bear the brunt of family dysfunction.

When we consider the hypothesis of *Sanity, Madness and the Family* alongside *The Divided Self* as a pair,<sup>121</sup> we start to unpack the relevance and suitability of causation within the definition of his theory.

[The theory's] basic purpose was to make madness, and the process of going mad, comprehensible. (Laing, 1960, p. 9)

Howarth-Williams (1977) emphasised *intelligibility* as the key component of Laing's theory, a direct product responsible for making the experience of madness (ontological insecurity) *comprehensible*. Reanalysing the intelligibility that Laing achieved, this thesis looks to focus on the subsequent component of *process* also present within the hypothesis. By the very definition and inclusion of process, Laing is declaring an intention to reveal 'a series of actions or operations conducing to an end' (Merriam-Webster). To comprehend process, a location of cause is required to complete the operations that end in ontological insecurity. The aim in the following chapters is to re-examine the intelligibility gained from within several contexts, namely the clinical, the family, and the political and to reveal and reprioritise the concept of process, specifically identifying a causal point of origin.

## Summary

Part 3: commits to a single concept, *Ontological Insecurity*, this being widely regarded as the pinnacle of Laing's theory, a premise that is echoed in this thesis. However, the concept that is frequently reflected in secondary sources, implements a narrow appreciation of the theoretical complexity of Laing's idea. This limited appreciation plays a significant role in

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<sup>121</sup> *Sanity, Madness and the Family* (1964) conducted 11 empirical case studies to test the hypothesis proposed in *The Divided Self* (1960), binding both publications under the same theoretical umbrella.

sustaining the proposition of a conflictual application for ontological insecurity as representative of either being abnormal or normal and is instrumental in the demarcation of two distinct and isolated models within Laing's theory, the family and the political. In deconstructing this concept, drawing further support from theory already intertwined but overlooked, the possibility of considering ontological insecurity to be a constant and stable concept is presented. This is key for its potential application in contemporary culture.

Building on its earlier introduction, ontological insecurity as an empirical concept, focussing on fourth possibility anxieties, was fully analysed. At its simplest, Laing was stating that experiences located in our environment possessed the potential to disrupt our immersion within the everyday and this in turn destabilised the base anxieties of the human condition. Experiences of existential angst are not indicative of 'illness', but an awakening of a base element of the human condition, caused in this instance by a failure of our social context to provide safe refuge.

The description of ontological insecurity as a divided or split self, gained a more nuanced understanding by emphasising the two-pronged framework of self-consciousness. This framework also enabled both applications of ontological insecurity, typically perceived as conflictual, to reside within a single framework. The family and the political context both present examples of an environment which are instilling [2] *an awareness of oneself as an object of somebody else's observation*, and thus displacing [1] *an awareness of oneself by oneself*. The outcome of this experience is that the balance of awareness that constitute self-consciousness is set in flux, initiating a slippery descent into ontological insecurity.

In the final instance it was outlined how ontological insecurity causes psychic suffering in two ways; it inhibits the ability to establish authentic merging and establish relatedness with others, and secondly it disturbs the base existential anxieties, and this bring angst back into our experience. And as contentious as this statement is, collectively Part 3 has enabled a cause for ontological insecurity to be proposed within the process of disruption of self-consciousness.

The concepts developed within a Laingian methodology and a theory of self-formation, provide the two primary pillars, which provide the support for the concept of ontological insecurity to be assembled. Reintegrating the primary component of self-consciousness into this upper level, and weaving in further indirect Laingian elements, enables a further level of support to establish a clear and structurally sound Laingian theoretic framework has been built.

Until this point, the contemporary context has remained at a distance, but with the structure of a Laingian framework now developed, an application to consider the potential of Laing contrapuntally is ready. In Part 4, I reconsider the intelligibility Laing gleaned from his research in three contexts, the clinical, family and political. Rather than approach each individually, I weave each context together with an ultimate focus toward a political theory of ontological insecurity, a means of considering the increasing incidence of 'mental health' diagnosis, as a product of politically caused ontological insecurity.<sup>122</sup>

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<sup>122</sup> When I consider cause, I am not suggesting a single element, an absolute point of origin responsible for the onset of ontological insecurity, I am looking for a consistent factor that occurs within the experience of ontological insecurity that plays a significant and tangible role in onset.

## PART 4. A Political Process

In reaching Part 4, the Laingian framework developed in the previous chapters provides a lens by which we can now identify and analyse further components from within Laing's theory. Applied with a focus to develop insight into the political causation of ontological insecurity, the theory analysed through this lens is reinvested into this theoretical framework, adding further detail and support to its structure.

Due to a less typical application of the term 'political', Laing's qualification for producing a political theory is analysed, leading directly into the question as to whether a political theory of integrity is evident within his work. Both of these elements are discussed at the outset. Responding to a critique of a lack of theoretical structure within the political aspect of Laing's theory, interpersonal communications, a primary experience of the ego/other dynamic that construct phantasy systems, are drawn into focus. The concern is particularly with a negative process of interpersonal communications contained within the theory of the 'double bind', this being mapped onto the process of ontological insecurity. In what might appear a deviation, Part 4 also addresses critiques directed at Laing's research within the family. These criticisms are addressed with the aim of identifying whether Laing's theory of interpersonal communication is limited to the family or can be extended to the political domain.

Based on the premise that interpersonal dynamics operate equally as effectively in the construction of phantasy within the political domain as in the family, the implications of scientism structuring the political landscape and western society as a whole is explored. Extrapolating Laing's findings identified within the clinical context onto a macro scale, scientism is revealed as a primary source of ontological discontinuity, inhibiting relatedness between self and others. Mapping this onto self-consciousness, it is offered that this influence within the structure and discourse of society devalues and lowers our resilience to the hazards associated with everyday life. Collectively affecting ontological in/security – it provides a direct link to the increasing incidence of 'mental illness' diagnosis within contemporary culture.

## 11. The Political

As we concentrate on a political focus within Laing's theory, it is necessary to revisit an aspect that would be equally placed within Chapter 3. Laing's political activities bleed into his theory and it is from within this merged framing that the qualities of Laing's political theory become more apparent and defined. However, when Ronnie is brought into the mix, controversy is never far behind. It was Peter Sedgwick (1982), a fully-fledged member of the new-Left and directly involved in the *New Left Review*, who was perhaps the first and remains the most vocal (posthumously) to declare Laing an imposter within the political realm. Considering the active and committed political position Laing was perceived to occupy, particularly through his association with the counterculture movement, this accusation was shocking, and the reverberations from it have permeated beyond the political, generating questions about the integrity of all aspects of his work, theory and character.

Addressing the question of political integrity, the basis of Sedgwick's attack, is fundamental for ascertaining whether a politically productive content is embedded within Laing's theory. Before we confront integrity however, we must consider what constitutes the political within Laing.

A political theme was evident, albeit subtly, from the outset of *The Divided Self*. Developing from a central questioning of the authority of the medical infrastructure in its treatment of 'mental health', it enabled readers to extrapolate these same questions toward the entirety of the political system. Laing's publications continued along this trajectory and with *The Politics of Experience* he took a more direct and explicit political stance, an intent clearly indicated in the book title. Between *The Divided Self* and *The Politics of Experience* (1960 and 1967), a more prominent political identity was assumed by associating with Left-wing organisations, punctuated with a marked shift in his writing, notably publishing three journal articles in the *New Left Review (NLR)*: Series and Nexus in the Family (1962); What is Schizophrenia? (1964), and One-Dimensional Man [Review] (1964). What may have been a vague political affiliation at the beginning, was seemingly solidified through this involvement with the *NLR*, as recognised by its editor (Perry Anderson at this time):

RD Laing is one of us. (Sedgwick, 1982, p. 113)

For those outside of this closed and specific community, 1967 was the pivotal moment Laing's political identity was confirmed to a wider audience. In addition to witnessing the release of a major publication with 'politics' in the title (*The Politics of Experience*) it also marked Laing's involvement with the *Dialectics of Liberation Conference* (DLC), events that coincided with the peak activity of the counterculture movement.

The Congress on the Dialectics of Liberation ...was a bold attempt to 'demystify human violence in all its forms, and the social systems from which it emanates, and to explore new forms of action'. (Dialectics of Liberation, 2017)

The DLC brought together a vast array of political thinkers – Huxley, Marcuse, Ginsberg, Carmichael – each a major player in their own respective field – anthropology, critical theory, poetry, and civil rights (Kotowicz, 1997; Dialectics of Liberation, 2017). Uniting them all was their desire for social change and as Nuttall (1970) alludes to in his attendance and writing around this event, each were figures that politically engaged groups and individuals were holding onto in the hope of learning a new and better method of living. The list extends far beyond these thinkers and, of course, the 'antipsychiatrists' were also out in force. The organisers of the entire event, Joseph Berke, and his associates Cooper, Redler, and Laing, all used this platform to air their views (one could also say, perhaps cynically, to promote and enhance their stock in front of a passionate, committed and politically active crowd).

The DLC was one moment when Laing came together with the radical political movements that were happening during his time, though not always with his recognition. Anti-war, the CND, Women's Liberation Movement, Sexual Freedom, and Civil Rights were no longer slogans for the minorities, but figures like Malcolm-X, Martin Luther King, Che Guevara, Betty Friedan, gave them purpose in everyday life.

A cohesive cultural theme, a political consciousness, was emerging through the 1960s; movements to confront power bases of inequality within society were forming. It was one thing to have a theory, a purpose, a justifiable claim to challenge the political status quo, however, as with all the figures above, every movement needed a talisman (Nuttall, 1970). With a presence and strength to carry such responsibility, Laing was the talisman to mobilise his theory.

Given Ronnie's character, charisma and charm, this was the perfect setting for him to inspire and intoxicate an audience with his thinking (Burston, 1996). Kotowicz (1997) alludes to Laing taking a decisive role in both the organisation and running of this politically motivated

conference; Laing makes no such claims. Either way, by opening the conference, a rally saturated with different factions of the counterculture movement, his influence was front and centre, and read by many as an act which cemented his political position within the counterculture and also the new-Left. This was the event that justified a political lens to be firmly held over all his publications, but Sedgwick illuminated that this political identity was only sustained with significant omissions.

Although initially a supporter of Laing, Sedgwick (1982) ultimately came to vehemently refute his past affiliation. He stated Laing's political connection was a sham, shown to be hollow when he opted to take a career hiatus in the formerly named Ceylon (Sri Lanka) in 1971, a time when Ceylon was caught in fierce political turmoil and the rising Marxist rebellion was in the process of being suppressed by British, Soviet and Indian government forces. This act alone was enough to destroy any personal or professional respect held by Sedgwick and such was his disappointment, even anger, that republications of his work post 1972 were re-edited to remove all hints of his previous positive reception of Laing (Kotowicz, 1997).

This challenge continues into Szasz's criticism of Laing also. In *Antipsychiatry: Quackery Squared* (2009), Szasz levels a sustained attack at Laing's supposedly revolutionary commitment to confront and address the abuses of psychiatry. Supported with vivid personal examples, Szasz questioned the true intentions of Laing's authenticity, integrity and morality on the basis that his approach was more evident of business acumen than psychiatry, politics, or even any true desire to benefit those in need. In scathing attacks which undercut the credibility of Laing's political integrity and continue to do so, his critics accused Laing of peddling whichever spiritual, medical, Left-wing commodity he could to support and fuel his guru status (Coppock and Hopton, 2000).

Unquestionably these criticisms raise concerns about Laing's political integrity, but whether they undermine the substance of the political content within his theory is less conclusive. Approaching the same crucial events that ground Sedgwick's (1982) and Szasz's (2009) attack,<sup>123</sup> Crossley (1988) offers a very different perspective on Laing's involvement with politics.

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<sup>123</sup> Szasz's criticism of Laing has already been discussed in Chapter 8, *As a Totality*. His theory will continue to provide a critique and contrast of Laing's theory as we progress.

## A Thematic Fit

There was a deeper thematic fit between Laing and the counter-culture; the ideas that he had been thinking about in relation to psychiatry emerged as major concerns in the counter-culture. (Crossley 1988, p. 885)

Laing's developing relationship within the political realm is discussed here in a manner that emphasises the resonance of his wider theoretical substance, particularly his philosophical underpinning, with the counterculture first and foremost; the virtues of his existential-phenomenological methodology being read to have implications for society as a whole – embracing Nuttall's (1970) *hope of learning a new and better method of living*. As Laing sought avenues to navigate the censorship he was encountering within the psychiatric field, the political world of the counterculture provided him with a prominent and less inhibited platform, and this increased his compatibility with them further. With only a subtle, yet effective shift in rhetoric, the psychiatric language that underpinned his previous works was increasingly diluted, and his methodology was directed to this new, political audience. Unsatisfied with simply being read, Laing wanted action, and involvement with the counterculture, and its close bonds with the new-Left provided him with a strategy to achieve this.

Laing championed the ideas of the counter-culture, lending them the symbolic power that his cultural and symbolic capital, qua trained medical doctor, generated. (Crossley, 1998, p. 885)

It was through this thematic fit, requiring only slight adjustment, that Laing's approach engaged so pertinently with the counterculture and by proxy, the new-Left. The seemingly welcomed by-product of this changing dynamic was Laing's newly acquired status as 'counter-expert'; an attribution he accepted with very little reluctance (Eyerman and Jamison, 1991). A crucial element to this newly forged political identity was Laing's knowledge and application of Marxist theory (Mullan, 1995), but this is also the source of significant confusion. Laing appreciated the ability of Marxist theory to offer an effective critique of contemporary culture (Laing and Cooper, 1964), and utilised it throughout his theory to achieve this aim – but his guru-like status within the counterculture was achieved without being greatly enamoured with Left-politics or Marxism and at no point did he declare such allegiance. Laing later reflected that he placed no confidence in the capacity of the new-Left, the broader political umbrella that contained and directed much of the counterculture, to offer

any conclusive escape route from our collective madness (Mullan, 1995). Nonetheless, selective Marxist sentiments (discussed in more depth shortly) contributed significantly to the thematic fit between Laing's philosophical underpinning and the counterculture's resolve to effect change in society.

The 1960's counterculture would later be described by sociologist Stuart Hall as nothing more than a 'crisis within the dominant [capitalist] culture,' though at the time such figures as Marcuse saw in the young hippies, Beats and freaks a fundamental challenge to the values of capitalist and state socialist systems. (Owen, 2011, p. 220)

Sedgwick, and several other like-minded political commentators, interpreted Laing's initial involvement as belonging to the category of political action, akin to Marcuse. And within this framing, a laissez-faire attitude towards the political situation of Ceylon, a major factor cited for Laing's deteriorating relationship with the counterculture, was rightfully perceived as a complete turn against Left-wing ideals. But in contrast to Sedgwick's action orientated interpretation, arguably the substance within Laing's theory is more geared toward Stuart Hall's other aspect, positioned by a theoretical rather than practical dynamic with the counterculture, and it is here that Crossley's thematic fit gains a more organic footing. The theoretical substance within all of Laing's publications, the overtly political and the politically subtle, remains consistently within the branch of the counterculture, developing a critique of the capitalist status quo from an existential-phenomenological position, a position Laing continued to reaffirm in some of his final interviews (Mullan, 1995).

Accuracy of representation however often plays second-fiddle to the scandal and mythology that surrounds and follows Laing (Bark, 2009), a perceived political U-turn seamlessly fitting this narrative. Avoiding this tempting and established focus, a serious question can be asked as to whether Sedgwick and other Left-wing activists allowed themselves to buy into a myth which they themselves had constructed or interpreted. Laing had published in the *NLR*, presented at the DLC, and thus held a connection with the counterculture movement, grounded in a shared thematic fit of radical politics and existential-phenomenology, and by proxy, connecting Laing with Left-wing politics. But, to my knowledge, what he produced was theory critical of the political status quo that remained attuned and faithful to his existential-philosophical foundation and although this established a critical perspective that in many parts overlapped with a Left position, nowhere did he overtly proclaim a committed and invested belief in the political solutions of the new-Left or indeed Marxism.

Laing's work was politicised and radicalised...but his concern was never with the big 'P' politics that concerned the Left. His concern was with politics in the wider, less doctrinal and party-based sense. (Crossley, 1998, p. 885)

Laing's actions with the *NLR* and Dialectics of Liberation Conference undeniably conflict with his apparent indifference towards the political situation in Ceylon. But this also clarifies Laing's political substance. There is a disjuncture present between what is being said and where it is being said. As stated by Crossley, what is actually being said is consistent but not indebted to political affiliation. Where it is being said allows, even encourages, new-Left, even Marxist associations to be formed. The where, I would argue, is a calculated decision that lends itself to an audience that Laing's personality craved and thrived upon. The *NLR* and Dialectics of Liberation Conference were political events which provided opportunities to further advertise his theory to a wider and motivated audience. But with attention to the actual, more philosophically inclined, substance of his theory, the political gains a consistent identity.

Sedgwick's critique rightfully and helpfully unsettles an absolute affiliation with Marxism and the new-Left, an affiliation that is too easily assumed from the interplay of his publications with the *NLR* and participation at the DLC. In response to this, directing focus toward the substance of Laing's theory, a more consistent political definition is evident. Even then, it cannot be a reductive approach that is directed purely to *The Politics of Experience*, seemingly the approach taken in many secondary texts. We must explore the full implications of the thematic fit, justifying the premise that Laing's existential-phenomenological methodology is equally as capable of being a tool to understand the political subject as the psychiatric subject. In application to the patient, it reveals the mechanisms affecting their experience of psychic suffering. Laing would argue that his existential-phenomenological methodology fares no different in application to our political 'alienation' (Laing, 1967).

As we look to develop a Laingian totalising theory, the observation that it was never the big 'P' politics concerning the Left that occupied Laing's theorising, but rather, how elements from within his theory complemented the wider, less doctrinal and party-based sense of politics, is of paramount importance. This view does not dismiss the political turbulence associated with Laing's career, but reaffirms the necessity to remain attuned, always, to his theoretical, written, content. Very simply, Laing identified similarities in his theory and the political which correlated, a thematic fit – and even by focussing on this thematic fit, it does not absolve his political theory of limitations and gaps, which will be highlighted. This is

where we need to centre our approach to Laing's political theory, continuing the detailed methodological framework developed previously and applying it to the intelligibility Laing gathered from the breadth of his empirical observations in the family, clinical and political realms.

Establishing Laing's political potential therefore requires more than purely jumping into *The Politics of Experience* or restricting our attention to the events surrounding 1967, a mistake frequently made which echoes the reliance on modular structures. Nevertheless, *The Politics of Experience* is a highly concentrated location of political thought, which isn't a bad place to start.

## Mad to be Normal

From an ideal vantage point on the ground, a formation of planes may be observed from the air. One plane may be out of formation. But the whole formation may be off course. The plane that is 'out of formation' may be abnormal, bad or 'mad' from the point of formation. But the formation itself may be bad or mad from the point of the ideal observer. (Laing, 1967, p. 98)

A pivotal component of the political focus is the notion that western society is collectively and unknowingly experiencing the effects of madness, alienation, ontological insecurity. Using the metaphor of the plane formation to depict society at large, the notion of a statistically qualified sanity (a qualification that certainly ran more throughout *The Divided Self* and the family context, and underpins the wider belief of medicine and society) is problematised, unsettling the taken for granted idea that the condition of the ordinary person, the person occupying the central tendency of society, is normal – and by normal, sane.

The condition of alienation, of being asleep, of being unconscious, of being out of one's mind, is the condition of the normal man. (Laing, 1967, p. 24)

An immediate compatibility enabling Marxist comparison becomes evident with Laing's description of the political, or perhaps more aptly cultural, experience sharing more than slight similarity with the Marxist notion of 'alienation':

Human beings create a world through labour relations that dominates and dispossesses them ... The individuals rationalise their powerlessness and learn to accept its inevitability as a positive good. (Freenberg, 2014, p. 39)

Unlike the Marxist account however, the experience of the 'normal man' is not simply alienation, a sense of estrangement, powerlessness, and a general loss of human potential; the 'normal man' for Laing is deteriorating into a state of collective madness. This places the political subject firmly within the realms of ontological insecurity, experiencing some form of rupture of the totality of inner and outer world.

I discussed previously the perceived shift in the application of ontological insecurity between the family and the political and offered the framework of self-consciousness to mediate this often accepted contradiction. I want to draw attention here to the timeline that separates the family model from the political, and thus witnesses the sudden shift in the idea of ontological insecurity as applied in these two registers.

As stated before, several theorists place this occurrence in 1967, reflecting the events and publication of that year, but this overlooks a significant structural aspect – that each chapter in *The Politics of Experience* is accounted to a collection of previous essays written between 1964 – 1967 (as detailed in the book's preface). Even if we account the political turn in Laing's theory to this earlier date of 1964, it continues to support a demarcation with the family context that starts with *The Divided Self* in 1960 and rounded off with *Sanity, Madness and the Family* in 1964. But even this distinction is unsettled when we appreciate that the notion of an insane society has been mooted since the early 1960s.

We are asleep, but think we are awake...We are mad, but have no insight. (Laing, 1961, p. 38)

Laing was voicing concern about the common state of existence encapsulating western society, in *Self and Others* (1961), at a time when the focus is usually understood to be on the application of ontological insecurity to the family. The conventional practices that underpinned participation within the external world, what we deem as normality, were already being vividly declared as divorced from all things enriching to the self; it was described as an alienated and mad existence. What was a brief comment, easily missed, in *Self and Others* however became a central and explicit notion throughout *The Politics of Experience*, a development that falls within Adrian Laing's autobiographical suggestion that his father employed a calculated strategy to capitalise on the political climate to increase his

appeal with the counterculture (Laing, A. 2006). Szasz's criticism of Laing's business acumen seems to have more than a little justification.

It seems to be that now we are all 'divided selves'. (Mitchell, 1974, p. 239)

As summed up by Mitchell (1974), Laing's theory was increasingly suggesting that we are all split or divided to some degree. This does not result in the detached, incoherent existence associated with the total severance of inner/outer in the 'schizophrenic', but by necessary implication, we are all operating and existing with ontological insecurity and as such, returning to Sedgwick (1982), the heart of 'mental illnesses' beats within us all. This notion seems all the more accurate with the increasing rates of 'mental health' diagnosis at this time.

The medical model now lay in ruins. There was little sign of the physician Laing making contact with those he as well as others recognised as ill. In its place one found banality. (Clare, 1973, p. 20)

Whether marked with a definitive start date or not, Anthony Clare (1973) captures the mood for many professionals engaged with, and inspired by, Laing's earlier work when they encountered Laing's evolution to the political (and transcendental) period. Speaking with respect, even adulation, of *The Divided Self* (and therefore the concepts within the family and clinical context), Clare's response to the context encapsulated within *The Politics of Experience* was a stark contrast. Clare stated that the highly generic, nihilistic proclamations, which lacked the clinical evidential support that punctuated and lifted his earlier work to prominence, made this 'new' political focus baseless. Howarth-Williams (1977) strengthens this line of argument, citing further criticisms by Tyson (1971) and Holbrook (1968).

This is going too far! (Howarth-Williams, 1977, p. 123)

Much of what is written regarding this time is geared toward a criticism of the Transcendental Experience model, nonetheless, due to its interrelation with environmental conditions, the political aspect within Laing's theory is dually under attack. Unquestionably Laing draws the political more and more into focus, reaching a pinnacle in 1967, but to impose this as its originary point is to disregard significant material produced beforehand that admits the political premise, on some level, that sanity and statistical normality are not correlated.

We are all murderers and prostitutes – no matter to what culture, society, class, nation one belongs, no matter how normal, moral or mature one takes oneself to be. (Laing, 1967, p. 11)

With highly charged and dramatic descriptions to emphasise his point, this quote epitomises why the political focus is associated with the latter stages of his writing, and it is also easy to appreciate why criticisms are directed at Laing that his political theory amounted to little more than broad political statements echoing generic insult toward the political hegemony of western ideology. As we progress, these statements are shown not to be the extent but rather the platform by which to dive into the substance of Laing's wider theory if we are to navigate his political contributions successfully.

These highly evocative quotes also reveal a limitation that will continue to resonate in his political framework. Laing leaps to the collective with sweeping statements of condemnation, accusing *we, us, society* for being *asleep, without insight, unconscious* – to a madness that encapsulates our existence. Although reference to a collective 'we' underscores the political intentions of his theory, when we consider the context he was writing in, a time of monumental political activism that was drawing attention to inequality and injustice on a scale rarely seen before, to describe everyone as 'asleep' – is not only insulting, but inaccurate. Turning this criticism back onto Laing, he demonstrated neither in theory nor in practice any wider consideration of the power dynamics that were so vocally being drawn into the political environment surrounding him.

It is one thing to elevate and advocate the value of one's own theory, but these collective statements of condemnation dismissed the value of those around him; furthermore, they revealed significant limitations and gaps in his own political framework. However we define Laing's political theory, it does not wholly reflect the sentiments of many political commentators from this era (Segal, 2007; Bhambra and Demir, 2009), who have documented the liveliness of the radical political scene. Indeed, Segal (personal communication) asks scathingly, '*Who exactly was "asleep"?*' This issue becomes more vivid in the following chapters as two of the movements addressing power relations, Marxism and Women's Liberation (feminism), especially the latter, are drawn into focus.

In relation to this critique of Laing's politics, it is important to recall that his theory was not intended as a general account of society (or at least, not initially), but rather focused on the oppression of those most maligned within the psychiatric system, whose cause he always championed. This is the foundation from which he built his political theory, developing a

framework that revealed constant existential forces within the everyday that collectively inhibit our existence, or more accurately, cause ontological insecurity. Two components come to the fore as we begin this political exploration: interpersonal dynamics and scientism.

In the following chapter we cross-fertilise this political backdrop with Laing's theory of interpersonal dynamics, a theory which is typically bracketed within the family and remains atomised in this context.

## 12. Interpersonal World

The confusing relationship Laing holds to Marxist theory marks our entry into analysing the political context and it is this that directs our attention toward the interpersonal world.

Sterilising the very essence of Marxist theory, Laing dismisses its relevance and extends his own outlook across all stratifications and sensitivities within a society structured by capitalist politico-economic ideology, reinforcing a point that is made clear in a final interview with Mullan,

How ridiculous to say that it's due to capitalism. (Mullan, 1995, p. 380)

The sentiment of this extracted quote continues to reflect the theme unfolding in his thoughts throughout his first phase of publishing and reiterated at this later date: a problem exists within capitalism, but it is not capitalism itself. A serious question can be posed here as to whether any theory unconcerned with an analysis of economic power, could be considered Marxist. And Laing never makes such a claim (Mullan, 1995). Characteristically, Laing cherry-picks elements of Marxist theory to develop his own theoretical framework.

Marxism...remains the indepassable philosophy of our time because the circumstances which gave rise to it are not depassed. (Laing and Cooper, 1964, p. 39)

*Reason and Violence: A Decade of Sartre's Philosophy 1950 – 1960* (1964), in addition to summarising three of Sartre's seminal texts,<sup>124</sup> contextualises the relevance of the Marxist-existential tenets within Laing's own methodological approach. More fundamentally, this publication also reiterates the premise underpinning the thematic fit; Laing's political consciousness is always refracted through existentialist thought. When extracting quotes from this publication, we need to consider the influence of Laing's co-author, David Cooper, a fellow member of the Antipsychiatry Movement, in this exuberant and uncompromisingly direct narrative. Cooper was by all accounts the most politically radical and militant of the antipsychiatry group. That said, Laing was no shrinking violet and his ability to command respect in this domain also warrants recognition. Reinforcing the perspective that Marxist

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<sup>124</sup> *Questions of Method* (1960), *Critique of Dialectical Reason* (1960) and *Saint Genet, Comedian and Martyr* (1952).

theory provides an unsurpassed tool to deconstruct our current circumstance, Laing and Cooper, reaffirm its implication for self-formation.

It is perfectly true, then, that man is the product of his product; the structures of a society created by human labour define for each one of us an objective point of departure. (Laing and Cooper, 1964, p. 52)

Through a selective (one may also infer an inconsistent) Marxist lens, Laing now supports the notion that 'man is the product of his product'; seemingly confirming the importance of class power relations in the formation of identity, and by continuation, the cause of our ontological insecurity. Despite this kind of comment, to view Laing as a Marxist would be to over-simplify his position, with its overriding commitment to existentialist-phenomenology. Laing stated that capitalist ideology was not the essential problem responsible for our collective ontological insecurity. Furthermore, he nullified the power relations involved in the 'culture, society, class, nation one belongs [to]' (Laing, 1967, p. 11) – negating some of the core commitments of 1960s political activism.

Without dismissing these problematic complications, we can extract, with reference to Laing's theory of self, that capitalist existence is a social force responsible for an inhibited experience of self (ontological insecurity). But, having removed all notable power relations from this quasi-Marxist framing, the theory is emptied of its most exacting elements.

A significant and perhaps the most importance deviation from Marxist theory opens here, an opening that also illuminates the necessity to invest in the theoretical content that is typically bypassed through reason of belonging to other, therefore irrelevant, models. This investment is vital for the development of the thematic fit, which reveals a Laingian political framework.

Sanity today appears to rest very largely on a capacity to adapt to the external world, the *interpersonal world* and the realm of *human collectivities*. (Laing, 1967, p. 116 – emphasis added)

The notion that the self is constructed within social forces unites both Laing and Marxism and this process is consistent in the analysis above. Laing however, never employs the term or gestures towards a Marxist concept of 'collective consciousness'. Instead, he uses the term 'human collectivities' and this instils continuity with his earlier theory of self, specifically that collectively we are always united through social phantasy constructs. Social phantasy

constructs are a distinct theory of self and thus different from a Marxist understanding of a collective consciousness or class consciousness.

Laing defined normality as a state of unconscious complicity in 'social phantasy systems'. (Burston, 2000, p. 105)

By placing social phantasy systems within a macro framework, not only is Laing's theory extended beyond the parameters of the family-nexus, but this system of self-formation is equally as receptive to the wider ideological conditions that permeate through society. The political context is illuminated equally as a 'realm of human collectivities' and as accountable to the 'interpersonal world'. The political is thus equally involved in constructing the social phantasy system – thus the formation of self.

Following secondary texts, which are overly reliant on *The Politics of Experience*, results in a vague and broad gesture that capitalism equals madness. This results in a lack of detail and the accusation of Laing's political content being nothing more than philosophical speculation, unbecoming of a man imbued with the symbolic power and influence of a psychiatrist (Siegler et al., 1969). But the sentiments of Laing's political statements need to be contextualised within his wider theory to gain their full value. We develop a foundation for the thematic fit with what may feel like a detour from the political, an analysis of the family. But it is the family that gives us the basis to understand the mechanics underpinning Laing's theory of interpersonal dynamics. From a basis of interpersonal dynamics within the family, we can start to consider the potential of an interpersonal world connecting human collectives on a political scale.

### Inserting the family within the political

The first empirical building block in Laing's theory of interpersonal dynamics was observed in the playing out of the good-bad-mad scenario, a scenario encountered in the context of the family-nexus.

Julie acted in such a way as to appear to her parents to be everything that was right. She was good, healthy, normal. Then her behaviour changed so that she acted in terms of what all the other significant others in her world unanimously agreed was 'bad' until, in a short while, she was 'mad'. (Laing, 1960, pp. 181 – 182)

The three stages, good-bad-mad, were outlined by Laing as typical in the process of how an individual could find themselves following the well-worn path to inauguration as a career psychiatric patient. Relatedness, although not identified as such, plays a consistent role throughout.

The three stage scenario was first included in the final chapter of *The Divided Self* (1960), *The Ghost of the Weed Garden*, and is continually referenced throughout Laing's further case studies. Kotowicz (1997, p. 24) describes the good-bad-mad scenario in the following way; 'the "good" period is when the child never gives any demands...Then comes the "bad" spell...it most often takes the form of a tirade of accusations against the mother, the father, or both... [the parents] consult a specialist, a psychiatrist. The diagnosis is made, and the child is now recognised as mad'. Applying his existential-phenomenological methodology to this scenario, Laing questioned the validity of the established order that accepted the attributions as defined by the parent and medical professional [Person 2], instead prioritising the perspective of the sufferer [Person 1].

With his lens firmly trained upon the sufferer's experience [Person 1], the intelligibility gleaned from this context was indicative of an individual that had 'failed to achieve autonomy' (Laing and Esterson, 1964, p. 97). Without autonomy, they were unable to immerse themselves within ordinary life – 'from a centrally firm centre of his own and other people's reality and identity' (Laing, 1960, p. 39). Autonomy is a prerequisite, intricately bound within the structure of ontological security, providing the ability to locate themselves within their worldly context. In the first stage, they fail to demand autonomy as a child, although without any obvious or externally observable conflict. Laing's suggestion can be understood as a version of the way the child's 'true' self is internally denied facilitating complicity with the outer external world, represented as the significant and authoritative position of the other, the parental figure. The perceived good stage produces a different conflict experienced as inner turmoil for the child. Having failed to establish autonomy at this early stage, with a feeling of greater capacity to value their 'true' self arising as a teenager (a time of cultural and physical empowerment), the attempt to (re)claim this position is met with confrontation by the parents. In this instance, by honouring an inner 'true' self, turmoil is then experienced in contact with the outer world, the parents. This confrontation is met with a new attribution of being bad. Sartre proves useful in considering confrontation:

Conflict is the original meaning for his being-for-others. (Sartre cited in Collier, 1977, p. 6)

Sartre's contribution is a complicated and far from consistent influence within Laing's theory, and the suggestion that to understand Laing is to know Sartre, fails to appreciate important differences that define their uniqueness. Sartre felt that conflict was instrumental in the establishment of consciousness as a property of experience, conflict creating distance between oneself and the other. In Laing's theory, however, conflict is discussed in the negative, with an intensified and violent implication contributing to the cause of ontological insecurity. Conflict with oneself during the good phase, conflict with others in the bad phase. Extreme conflict, conflict beyond the 'norm', correlating with the development of ontological insecurity.

Perhaps a more appropriate suggestion to support the issues raised within both the good and bad phase would be approached with further reference to Buber's (1950) essay *Distance and Relation*. Buber states that to establish distance from others is a prerequisite to developing relatedness, relatedness being a key element of ontological security.

[O]ne can enter into a relation only with a being that has been set at a distance or, more precisely, has become an independent opposite. (Buber, 1950, p. 207)

Distance provides the human situation; relation provides man's becoming in that situation. (Buber, 1950, p. 209)

In the good phase, Person 1 has failed to set a distance between themselves and Person 2, to establish the terrain of their existence. Having failed to achieve this in the first instance, relatedness between the self [Person 1] and the other [Person 2] is inhibited. Conflict is not necessarily the cause as per Sartre, but rather a consequence. Relatedness is the constant that supports Laing's assertion that conflict contributes to the disconnection of the individual from their outer context, preventing a pathway between self and other being established. This ultimately results in a failure to locate their being-in-the-world and establish ontological security.

Buber's (1950) essay however was intended for a more collective, worldly context, a context that resonates with Laing's concept of the political, and identifies that an excessive and detrimental distance has become the norm, contradicting the natural order of relatedness as the primordial and default position. This perspective is supported and seemingly recognised as even more prevalent in our current age (see Gerhaart, 2010; Sennet, 1998). Examining the first two of the three stage scenario, the good and bad phase, Buber's insights give these empirical observations a firmer basis to consider their impact on ontological insecurity, and

invite extension to a broader societal application. Buber and Laing also converge in that hope remains present within this tragic circumstance. The freedom to act and manipulate the structures that facilitate our relatedness is always retained, whether individually or politically, to increase or decrease the distance between relationships or to master the relationship to society, enabling the conditions for the I-Thou to flourish, and ontological security to be gained. The situation is never terminal.

Returning to the three-stage scenario, the final stage marks the beginning of the clinical context. This encounter is the concretising component, the enrolment of the Conspiratorial Model, whereby the micro authority of the parent that has deemed the child 'bad' combines with the societal application of scientific authority through the psychiatric profession, diagnosing this demanding, challenging, and 'abnormal' behaviour as illness, madness. Caught in the catch 22 of the Conspiratorial Model, the sufferer is no longer a product of their environment, they are mad, ill, psychotic. I need to hold off discussing the Conspiratorial Model as the analysis of the clinical encounter serves a more important function in the following chapter.

The three-stage good-bad-mad scenario is a descriptive account of the experience of ontological insecurity, an early, invaluable tool within Laing's toolkit that empirically verified his theoretical assertions thus evidencing a non-illness status for those (mis)diagnosed as schizophrenic. The consequential rupture of inner and outer realms that define ontological insecurity is shown through the inability to contain relatedness with oneself and others simultaneously. This lack of relatedness contributes significantly to the destabilisation of balance within self-consciousness.

With a short introduction of Buber's two person dyadic in *The Dividing Self*, Chapter 8: *Collusion*, further writing was committed in the *Appendix: A Notation for Dyadic Perspectives*, a demonstration of Laing's (1961) intent to carry out a deepening analysis of these empirical observations. The subsequent publication, *Self and Others*, continued what was primarily a reflection of the two-person dynamic, illuminating the inseparability of ego and other; however this was extended significantly by the time he reached *Interpersonal Perceptions*, revealing the multiplicity of interconnected relationships. Demonstrated within the family-nexus, but by no means indicated as restricted to this environment, the base ingredients for the social phantasy construct were illustrated as being performed through interpersonal dynamics. As opposed to the role of interpersonal dynamics in self-formation, we now consider the role of *misaligned* interpersonal dynamics and the consequence they involve for the individual. This is where we start to piece together a more detailed

perspective on ontological insecurity, not simply the experience, but the preceding and maintained events that contribute to the *cause* of the rupture, the *cause* of ontological insecurity.

## Misaligned Communication – The Double Bind

The framework for ontological insecurity is outlined within *The Divided Self* (1960), including the three-stage scenario. However, a vital component, highly visible in the case studies undertaken in *Sanity, Madness and the Family* (1964), is taken from the subsequent text of *Self and Others* (1961): Bateson's double bind situation. The double bind situation illuminates how detrimental interpersonal dynamics significantly impact upon the social phantasy construct. Through the inclusion of Bateson's double bind model, we see how relatedness is not only involved in the outcome of the ontological process, but from the outset.

The 'victim' is caught in a tangle of paradoxical injunctions, or of attributions having the force of injunctions, in which he cannot do the right thing. (Laing, 1961, p. 144)

Summarising the double bind, Laing introduces two components, attributions and injunctions. An attribution happens when Person 2 states to Person 1 a characteristic ascribed to their *Being*. In response, it is expected that Person 1 will confirm and conform to that attribution. The injunction is the relational pathway created between Person 2 and Person 1 (Holtby, 1973). Attributions and injunctions are created and maintained within the shared experience of both persons.

In the case of a double bind situation, a process of misaligned interpersonal dynamics has occurred within this shared experience, instigated and amplified by Person 2 who holds an authoritative position, typically a parental or significant other, over Person 1, who occupies the position of victim. Person 1 is beholden to the power imbalance possessed by the authority of Person 2.

Quoting directly from Bateson's 1956 thesis, Laing (1960) highlights six necessary ingredients for a double bind situation to unfold:

1. 'Two or more persons' are involved
2. 'Repeated experience'

3. 'A primary negative injunction'; Person 1 is expected / required to conform to the threat of violence, physical, emotional, etc., from an other.
4. 'A second injunction conflicting with the first'; potentially inscribed through a different, subtler, means of communication. This will retain the threat of violence but convey a contradictory message to the primary negative injunction.
5. 'A tertiary negative injunction prohibiting the victim from escaping from this field'; caught between the necessity of only two options, the victim's position may be further compounded by 'capricious promises of love, and the like' from the other.
6. 'Finally, the complete set of ingredients is no longer necessary when the victim has learned to perceive his universe in double bind patterns'; the presence of any one or more may induce panic or rage, potentially attempting to overcome these injunctions with hallucinatory voices.

(Laing, 1961, pp. 144 – 145)

Without using the terms of inner/outer, Bateson's process of primary, secondary, tertiary injunctions provides a theory that complements the binary rupture within Laing's ontological insecurity framework. The inner (Person 1 / victim) is presented with conflictual messages to manage the expectations of the outer (others, including, but not limited to, Person 2). In the last ingredient Bateson states that the victim may experience hallucinatory voices to overcome and manage their predicament, a demonstration that the rupture has become complete. The totality is split, and the individual focusses all efforts on *preserving* the inner world (Person 1's self) and severing connection to the external world (Person 2's dominance).

The double bind situation is a prime example of irrational interpersonal dynamics, demonstrating the capacity to create and maintain *knotted* social phantasy constructs that consume an individual's experience and detrimentally affecting their engagement with the world, and thus their sense of ontological security. In the good / bad scenario at least several of the necessary ingredients for the double bind situation are present: two or more persons, repeated experience, power indifference, a primary injunction. This may well be accompanied by further secondary and tertiary injunctions, but this simple good/bad format has created conflict – or rather, disharmony between inner/outer and is contained within the violent atmosphere of either inner turmoil or conflict with the outer world of parents. An additional, crucial aspect to this process is that this all plays out during a prime development age of the individual, all conditions that prevent achievement of autonomy and a successful

integration of inner and outer worlds within a totality of experiences. The social conditions have created an environment uncondusive to relatedness, initially with the other and ultimately with oneself. Thus, the calibration of self-consciousness is unsettled, authentic merging is inhibited, and ontological insecurity ensues.

Bateson's double bind theory reverberates throughout Laing's publications, evident throughout *Self and Others* and *Interpersonal Perceptions*, and even when not directly declared, the process is actively present and easily identifiable throughout the extended case studies (see *Sanity, Madness and the Family*). Laing (1961 and 1966) outlines how interpretations arising from our interpersonal dynamics have the potential to induce *spirals* of (mis)communication patterns, misaligned pathways that compound one another and ultimately consolidate as *knots*, a tangle of disrupted, complex and confused pathways that distort information and create unhealthy contexts for relationships to be established and managed. A double bind emphasises the amplification of these irrational interpersonal dynamics. As highlighted earlier, interpersonal dynamics are building blocks for the social phantasy constructs, the basis of the self. Once infiltrating and structuring the social phantasy construct, it is not only in the relationship with the other that the individual is 'caught in a tangle of paradoxical injunctions, or of attributions having the force of injunctions, in which [they] cannot do the right thing' (Laing, 1961, p. 144), it is also within themselves. The very basis of their social phantasy system has been constructed misaligned, confused and as such, becomes ontologically insecure.

Through the illumination of the spirals, knots and the manifestation of the double bind, we see how irrational interpersonal dynamics are a source of deteriorating relatedness and act as a cause of ontological insecurity, and are also the consequence of ontological insecurity.

Unfortunately, ontological insecurity and interpersonal dynamics are not the remembered feature of this aspect of Laingian theory. It is the family that continually takes centre stage – namely Laing's apparent critique of its function. Importantly, interpersonal dynamics of the kind described by Laing are central to some contemporary therapeutic approaches, stemming particularly from the Milan Group (Jones, 2002), typically converging under 'family therapy' or 'systemic family therapy'. This therapeutic model relies heavily on communication theory of the sort Laing uses in *Interpersonal Perceptions* and *Self and Others*, echoing sentiments of spirals and knots (albeit without acknowledgement of Laing but with recognition of Bateson). Circular questioning is employed as a strategy to illuminate processes within family therapy (Campbell, 2003). Not forgetting Buber's continuing influence on relatedness, it is frustrating that the substance of Laing's theory is displaced

when these concepts are accepted and respected in alternative quarters. Once again, the desire to embellish sensationalism surrounding the mythology of Laing seems to win, the argument that 'Laing blamed the family for schizophrenia' (Shariatmadari, 2013) continuing to dominate the headlines and negatively affecting any potential consideration in the current climate.

## Critiques of the Family Context

Laing's synonymy with the family is a double-edged sword. No doubt this aspect to his research increased his status and respectability as a theorist within the psychiatric domain, providing rich theoretical and empirical insights, but its success must also be considered as a factor in the reductive misrepresentative of atomisation. Themes from his later works, those directly relating to politics never gain the same traction; they are frequently overlooked and criticised for lacking the evidential support that grounded the family context in *Sanity, Madness and the Family* (Clare, 1973).

In the previous section, I argued that Laing's discussion of a political dimension necessarily requires consideration of wider reaching aspects of his theory, specifically the process and operation of interpersonal dynamics, concepts typically confined to the family context alone. In this section, I look specifically to the family context and identify aspects that address whether this area was intended by Laing to be separate or part of a wider framework, a discussion that necessarily overlaps with the negative light this shone on the role of the family and women.

The continuing emphasis placed on the family must be accounted in part to the terminology that saturates secondary sources: the technically accurate 'family-nexus' referred to more frequently and conveniently as 'the family'. This seemingly harmless abbreviation that Laing himself employed is implicated with the misconceptions surrounding Laing and the family.

A group, whose unification is achieved through the reciprocal interiorisation by each of each other, in which neither a 'common object,' nor organisational or institutional structures, etc. have a primary function as a kind of group 'cement,' I shall call a nexus. (Laing, 1962, p. 11)

Taken from a lesser-known article, *Series, Nexus and the Family*, Laing's definition of the *nexus* describes clearly that a family may be, and typically is, a nexus, but a nexus is not

limited to a family. The characteristics of a nexus require that it necessarily involves two or more players and extends without limitation providing it avoids becoming an organisation or institution, centrally cascading rules rather than showing reciprocal influence between members. It can also occur in any group whereby the collective of members internalise and collude to sustain shared dynamics, rules, qualities etc which have not been centrally prescribed. The nexus becomes the contextual in-the-world that *Being* is immersed within. The family was the specific nexus on which Laing's application of an existential-phenomenological methodology was focussed, but the idea of the nexus has been lost, resulting in a reduction of focus to the family in isolation.

Focussing on *Sanity, Madness and the Family*, several important factors are revealed that illuminate why this misdirection happens. There is no getting away from the fact that the constant within each study, the primary protagonist in each of the interpersonal dynamics, is the family itself, often the mother.<sup>125</sup> This in itself would not have been as damaging had the family retained its contextual position within the framework of a nexus, however even the title of the book stops with 'the family' instilling a reductive reference point from the outset. This change is also apparent in the definition provided in the introduction, contrasting with the earlier definition from *Series, Nexus and the Family*. In this introductory definition, the term nexus is less commanding.

We are interested in what might be called the family nexus, that multiplicity of persons drawn from the kinship group, and from others who, though not linked by kinship ties, are regarded as members of the family. (Laing and Esterson, 1964, p. 21)

The reason that nexus becomes less conspicuous is obvious when *Self and Others* and *Interpersonal Perception* are considered. The rules that underpin the qualification of a nexus and the interpersonal dynamics of the family make it a *nexus par excellence*, hence Laing focussing his empirical observations and research on the family. However, through increasingly omitting reference to the nexus within the structure of his theory, particularly evident in his book title, a significant detail of Laing's study becomes vaguer – the impact of dysfunctional interpersonal dynamics; the family is simply the richest context to analyse its operation.

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<sup>125</sup> This is addressed in detail below.

Cynically, I must also admit that I can't dismiss the proposition that Laing allowed, possibly encouraged, this misunderstanding to circulate for his own publicity, himself contributing to the sensationalism and controversy surrounding his antagonism toward the family by omission of a correction. On rereading the definition of a nexus provided in the later and better-known 1964 book, *Sanity, Madness and the Family*, in comparison to the fuller description present in the 1962, *Series, Nexus and Family*, I believe sufficient direction is present to avoid this misunderstanding. However, without being prepared on my initial engagement, I, like others, was drawn to focus on the family itself rather than seeing it as the representation of a nexus.

Laing's synonymy with the family can also be attributed to how his case studies conclude with *praxis* (this also playing a large part in the presentation of *blame*). The Sartrean concept of *praxis* and *process* are briefly discussed in the introduction to *Sanity, Madness and the Family*, explaining how the actions in a family (a nexus more accurately) can be understood in one of two ways. Again, a fuller definition is provided in the previous publication, *Series and Nexus in the Family*.<sup>126</sup>

When what is going on in a group can be traced to the authorship of its members it will be termed praxis...

[Process is] divorced from the intentions or praxis of any single person, and yet they seem to determine, control, condition, individual and group behaviour. Group actions appear to be generated without anyone's express desire and without anyone being able to see the possibility of an option, much less to exercise it. (Laing, 1962, p. 8)

Summarily, *praxis* traces the actions within the family to an author or authors, and *process* occurs seemingly without authorship. Both impact on our experience, thus shaping our social phantasy constructs and therefore the formation of self. Laing acknowledges both at numerous junctures indicating that he remained committed to them as ideas throughout his career. However, in *Sanity, Madness and the Family*, and all his case study examples, *praxis* take centre stage and *process* gains no further empirical attention.

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<sup>126</sup> Even though Laing and Esterson's intention for *Sanity, Madness and the Family* was to focus on the empirical observation of family case studies and not theory specifically, considering the importance of these concepts, I am at a loss as to why Laing did not include greater detail in this text or direct the reader to the previous article *Series and Nexus in the Family* (1962).

Returning to the example of Maya Abbott, we see the emphasis placed on family *praxis* to contextualise the negative experience and behaviour of a person as a diagnosed 'schizophrenic'. In addition to illustrating the consequence of the double bind, irrational interpersonal dynamics, and the loss of relatedness, it also shows further how the family becomes the dominant focus.<sup>127</sup> The example of Maya is representative of all the family studies in *Sanity, Madness and the Family* and all other Laingian publications: a universal double bind scenario as depicted by the sufferer's paradoxical inner experience and traced to a specific author within the outer experience of the family. This evidences the primary premise of Laing's methodology and theory that is commonly associated with the family, that dysfunctional interpersonal dynamics play a significant role in understanding the experience associated with psychic suffering.<sup>128</sup>

Having a definitive author within each family study, the prerequisite of *praxis*, as the focal point for an irrational context within the family, is favourable for Laing's empirical observations for two scientifically interwoven reasons: 1) it provides a fixed and definitive location to qualify *intelligibility* within the sufferer's assertions, and 2) attaining this fixed location for *intelligibility* qualifies the overall efficacy of an existential-phenomenological methodology. Each component complements the other and concretises the evidential circle from hypothesis to outcome.

We had to stop somewhere and so decided the cut-off was to be the nuclear family.  
(Laing, 1987 cited in Mullan, 1995, p. 274)

Concluding his research at this cut-off enabled his findings to be specific; intelligibility gained, the hypothesis proven, Laing's theory verified. However, the intelligibility discovered within the family-nexus, by resting on the conclusion of *praxis*, negates the flexibility developed by reaffirming the inclusion of nexus, and instead points an even more accusatory finger at a specific author residing within the family, the mother. This development arguably closes down the application of Laing's theory rather than opening it up to wider application in the political.

Gender blindness is a criticism that has long dominated a feminist critique of Laing (Showalter, 1987; Mitchell, 1974) and this directly feeds into the question of whether this theory remains within the family. Laing's research disproportionately affected women,

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<sup>127</sup> Maya Abbot's family study will be highlighted within Patemen's (1972) article in the final chapter.

<sup>128</sup> This is ascertained from the *intelligibility* revealed with the application of an *existential-phenomenological methodology*.

exemplified in the 'mother-dragon' (the ironic term used by Segal during the Birkbeck conference 2015) frequently being assigned the responsible author of *praxis*, and 'schizophrenic' patients always being a female member of the family. Laing was not only blaming the family; he was blaming women within the family.

There is unquestionably good reason for these accusations to be made; others including Showalter (1987) have continued this criticism, but in approaching Laing's theory and work through the text of Mary Barnes,<sup>129</sup> failed to adequately acknowledge the distance between this patient and Laing (Kotowicz, 1997). *Mary Barnes: Two Accounts of a Journey through Madness, by Mary Barnes and Joseph Berke* (1972) was neither a book by R.D. Laing nor endorsed by him (Mullan, 1995), and as a result, Showalter's passionate analysis of Laing loses credibility (Kotowicz, 1997). Showalter demonstrates again how easy it is to be swept up in secondary texts operating with a Laingian theory and assume that these are directly associated with Laing himself (a point I am contesting in this thesis). Another feminist critique of Laing that comes from a psychoanalytic vantage is Mitchell (1974), stating that there is a significant lack of understanding or appreciation of patriarchal culture within his analysis of the family, highlighting his lack of oedipal consideration, a societal staple within this patriarchal culture, which she states needs to be confronted if his theory is to be taken seriously. As highlighted at the outset of this thesis, Laing's theory is notably short-sighted, blind even, to any consideration of identity politics. His interest is in rescuing understanding of the self, but this is without any appreciation for the systemic practices that disproportionately affect certain groups within the community, in this case women, but it extends exponentially to all marginalised and discriminated groups. Essentially, Laing's lack of consideration of gender inequality in his theory, equally reflects his lack of analysis of power relations more generally, including structural features of class, race and imperialism. The critique levelled from feminist positions illustrates this issue and highlights the difficulty in expanding Laing's theory of interpersonal dynamics into the macro, political realm.

The common Laingian defence against well-structured feminist arguments by referring to the intent underpinning the research hypothesis of *Sanity, Madness and the Family* (intelligibility was the aim and not blame of the family), fails to appreciate the many places where Laing, inadvertently or not, allows a focus to fixate on the family and women. At best, such a defence offers that when Laing *cut-off* his research having proved his hypothesis (social intelligibility), he abandoned responsibility for the further implications of his findings and in doing so, left the family and women firmly in the firing line. At worst, is the inference that he

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<sup>129</sup> Showalter's criticism was directed with a considerable lack of empathy, or solidarity, for Mary Barnes herself.

did not just *stop somewhere*, he found a particular, patriarchal place to stop. Thus 'schizophrenia' was the consequence of family *praxis* and this originated with the mother and affected the most vulnerable member, that is the daughter – otherwise he would have had a scientific (and ethical) impetus to necessarily continue his investigation and delve into the wider political praxis (or ideological process etc), that cascades into the family and impacts upon the female members disproportionately (as per Mitchell's critique). From a feminist position, it is this political enquiry that is missed and thus misrepresents women within the family, and women within society. As stated by Segal:

The problem was that Laing just never got to grips with the real power dynamics of those nuclear families he studied, or their cultural and political context. (Segal, 2018, p. 110)

Laing didn't simply fail to get to grips with the power dynamics of the family, he failed to appreciate – or at the very least acknowledge – power dynamics residing in virtually all social hierarchies, apart from psychiatry's social power. In the case of the family, Laing's inability to confront power inequalities resulted in his theory actively supporting patriarchal domination.

There are numerous caveats in Laing's writings used in response to this criticism of a disproportionate focus on women within the family: he lambasted the 'schizophrenogenic' mother theory that had gained traction in the previous decade, going as far as to call it a 'witch-hunt' (p. 189); he reminded his readers that fathers and siblings contribute to the family dynamic<sup>130</sup> (Laing, 1960); and he qualified the reason all diagnosed 'schizophrenics' in the case studies were female was purely a result of administrative access (Laing and Esterson, 1964).<sup>131</sup>

A problem I have with each of these defences, is that they were written prior to *Sanity, Madness and the Family*, the text responsible for consolidating the opinion that Laing blamed the family. Can they still be considered a viable defence when evidence gathered afterwards seemingly contradicts them? This must place a question mark on their validity. The by-product of Laing's achieved intelligibility clearly placed the parent, typically the mother, as the primary player within the family context regarding the irrational interpersonal

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<sup>130</sup> *The Divided Self; Chapter 8*; 'The Case of Peter' is a male patient with the author being his father. Offering some balance, albeit woeful in the wealth of female patients and mother authors.

<sup>131</sup> Esterson was professionally involved with both East and West hospitals, female admission wards only (Laing and Esterson, 1964).

dynamics and this typically manifested with a female sufferer. It is easy to see why Laing was accused of blaming the family and worse still, blaming the mother within the family. This accusation was not lost on Laing either. Laing did not dispute that the mother plays a consistent role within the dysfunctional family dynamics for each of his studies, continuing that this appears to reflect wider societal demographics for families with a diagnosed schizophrenic member (Kirsner, 1976). However, this was no admission of guilt for blaming the family, no-less the mother.

In an effort to try and re-centre Laing's intent upon the master structures of existential degradation that affect all members of western society, we can balance the attention directed toward the female 'casualties' which take an unprecedented focus in the reception of his research, by highlighting that Laing also discussed the case study of Peter (patient) and his father (*praxis* author) in *The Divided Self*; two males caught up within an irrational and dysfunctional familial *praxis*, resulting in the same outcome. As stressed in the wider context of Laing's writings, particularly *Self and Others* and *Interpersonal Perceptions*, and developed above, it is the negative development of *knots* and *spirals* within dysfunctional interpersonal dynamics that affects experience – no attention is paid to the variable of gender (whether determining of author or patient). Essentially, the fact is that the primary carer, who is often the mother, occupies a significant role within the interpersonal dynamics of all families. Therefore, the primary carer/mother, plays a significant role within the [dysfunctional] interpersonal dynamics of the ['schizophrenic's'] family.

Whilst this ameliorates some of the criticism directed at Laing for his 'attack on women', it does not negate the undeniable reality that the attention directed to the mother, as the main intersection and hub within the family, and the daughter, as the most susceptible recipient, is disproportionate.

Laing's intended focus was ultimately the impact of irrational interpersonal dynamics on ontological in/security, but the intent underpinning this focus does not nullify the wider implications for its outcome. He aimed to reveal and liberate on the one hand, but whether inadvertently or not, Laing actively invested in patterns of interpersonal dynamics that contributed to gender inequality within the social hierarchy. It would appear that Laing was determined to produce evidence for the interpersonal dynamics theory without thinking through all the (political) implications, accepting women within the family as collateral damage. Mitchell's and Segal's critical insight and that of the wider feminist movement is an accurate presentation: Laing's theory insufficiently acknowledged his role in the political oppression of women. This point is as relevant now as it would have been then.

Despite this political limitation, Laing's work evidenced that irrational interpersonal dynamics, are a cause and consequence of ontological insecurity, and are capable of unfolding in any nexus (therefore beyond the family and the praxis authorship of the mother). Despite the problems described above, Laing's analysis of the family, outlines a theory of interpersonal dynamics intended to apply both to 'the interpersonal world' and 'the realm of human collectivities' (Laing, 1967, p. 116). This is articulated clearly by Laing in this lesser referenced source: *The Study of Family and Social Contexts in Relation to the Origin of Schizophrenia*.

[W]e may expect that the irrationality of the family will find its rationality when placed in its context. And so on ... presumably through meta-meta-meta- ... contexts, until one arrives at the contexts of all social contexts, the Total World System (TWS).  
(Laing, 1967b, p. 141)

Through the feminist lens we see that Laing failed to highlight master structures of interpersonal dynamics that maintain inequality within established social hierarchies; furthermore, he did not acknowledge this potential. Perhaps most damagingly, he even continued to assume these master structures. This does not invalidate the political potential of Laing's interpersonal theory, but rather it shows its limitations.

Having highlighted the centrality of interpersonal dynamics and their ability, in the negative, to damage relatedness, compromising ontological insecurity (thereby affecting further the ability to achieve relatedness), and clarifying their capacity to *not* be reserved to the family(-nexus), we now analyse the political meta-meta-meta...context to identify whether Laing's theory provides insight into an interpersonal dynamic occurring on a societal scale responsible for producing ontological insecurity.

### 13. Ontological Discontinuity

Having illuminated the place of interpersonal dynamics within Laing's political theory, I now introduce the clinical context into the political (in contrast to its more usual encapsulation within the family context). Exploring the clinical strengthens numerous aspects of a political theory, most significantly the operation of scientism. Scientism will be argued as a consistent force within the interpersonal world, then and now, that causes ontological discontinuity. The claim scientism holds to authority within contemporary culture stems from the seeds of the *Enlightenment*, and it imbues the psychiatric episteme with a perceived absolute power to understand persons. With the ability to define and enforce what is deemed 'normal', 'acceptable', and even 'safe', scientism is the kernel of psychiatry that provides it with social and political power. Scientism also underpins the dominant psychopharmacological approach and supporting the rationale of Big Pharma and the neoliberal agenda, 'mental illness' being an individual problem, a problem rooted in brain chemistry (see Chapter 4, *Laing, Psychiatry and Resistance*). Scientism is the power relation revealed within Laing's theory that justifies a political definition.

The error fundamentally is the failure to realize that there is an ontological discontinuity between human beings and it-beings.

Human beings relate to each other not simply externally, like two billiard balls, but by the relations of the two worlds of experience that come into play when two people meet. (Laing, 1967, p. 53 – emphasis added)

Laing is stating that the politically induced experience of madness, which we know to be severe ontological insecurity and thus an experience of psychic suffering is caused through 'ontological discontinuity'. This is another example of an overlooked and therefore underworked statement relating directly to Laing's political context, with secondary texts not appreciating its importance at all.

Ontological discontinuity is a concept that although not defined within a Buberian framework, resonates with it. The analogy of human relatedness within the capitalist landscape mimicking two billiard balls is an apt description of Buber's I-It qualities, a condition of relatedness inhibiting the ability to embrace 'authentic merging'. Ontological discontinuity as a form of I-It relatedness is the thread that when unpicked, and further supported with the Laingian framework developed previously, within the political reveals the conditions that

promote this detrimental form of relatedness on a societal scale, resulting in ontological insecurity. And it is through extrapolation from Laing's findings within the clinical context that the process of ontological discontinuity within the political becomes more apparent and relevant within a current context.

The primary foundation ascertained within the clinical setting fits the definition of Siegler et al.'s, *Models of Madness* as the 'Conspiratorial Model' (CM). The CM remains a fertile point of debate within psychiatry, usually stemming from the work contained within the bracket of antipsychiatry (see Timimi, 2013; Bracken and Thomas, 2001; Bracken et al., 2012). The process of labelling or diagnosing continuously circles within the debate about who it serves, the sufferer or the system (Robitscher, 1979; Stolzenburg et al., 2017). Laing's analysis of the clinical setting adds an additional layer concerning scientism to the contents of the CM and this establishes a specific and uniquely Laingian quality to his work; it is not simply the consequence of a label but the scientifically structured 'mental health' label or diagnosis and its existential consequence. At this time of increasing 'mental health' diagnosis, and less discriminate use of psychiatric discourse, Laing's insights from the clinical setting seem more vital than ever.

The analysis of the psychiatric encounter runs consistently, with varying emphasis, throughout all publications of the first phase, overlapping within the political and family contexts (and most typically acknowledged within the family). Even so, the analysis of the clinical setting is not directly situated within either domain. Rather, it runs parallel with both, and manages to exist in both without confronting the conflict associated with the contrasting application of ontological insecurity.

The current process of diagnosis (DSM / ICD guided) is a prime example of the conspiratorial process, demonstrating the clinical setting's instrumental capacity to impose a significant ontological consequence on the patient (victim), reducing the sufferer to 'man as a machine or man as an organismic system of it-processes' (Laing, 1960, p. 23).<sup>132</sup> It was in response to this reductive process that Laing advocated the necessity for his existential-phenomenological methodology that underpinned his *science of persons*. The potential to consider this was explored at length in Chapter 5, *A Laingian Methodology*, the sustained and detailed analysis undertaken outlined the capacity for Laing's methodology to be considered anti-conspiratorial.

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<sup>132</sup> See Chapter 4, *Laing, Psychiatry and Resistance*.

This current chapter illuminates how scientism is woven within the fabric of our political landscape and how the effects of this mimic traits of the Conspiratorial Model, causing wide reaching ontological damage beyond that of the patient / psychiatrist dynamic.

Siegler et al.'s universalised Conspiratorial Model definition provides a base understanding for Laing's operation of the clinical context; we see their similarity highlighted when we contrast their descriptions.

The person labelled is inaugurated not only into a role, but into a career of patient, by the concerted action of a coalition (a 'conspiracy') of family, G.P., mental health officers, psychiatrists, nurses, psychiatric social workers, and often fellow patients. The 'committed' person is labelled as a patient, and specifically as 'schizophrenic,' is degraded from full existential and legal status as human agent and responsible person. (Laing, 1967, pp. 100 – 101)

Schizophrenia is a *label* which some people pin on other people, under certain social circumstances. It is not an illness, like pneumonia. It is a form of alienation which is out of step with the prevailing state of alienation. It is a social fact and a political event. (Siegler et al., 1969, p. 948)

Siegler et al., note that the CM can be seen to varying degrees in several other theorists' work.<sup>133</sup> However, the construct of an abstract model with the capacity for universal application, with specific reference to Laing, is a major limitation. This model does not include, nor adequately consider, the connecting strands of theory that intricately interweave within a Laingian approach. Equally it is offered that Siegler et al.'s focus on the 1967 publication of *The Politics of Experience*, misses significant building blocks that occur in his preceding publications that provide a fuller contextual understanding of the specificity of Laing's analysis of this setting; namely, the interpersonal world developed from the family context shown previously, and as will become very apparent in this section, the role of scientism and ontological discontinuity. Siegler et al.'s definition, terminology and analysis are therefore a springboard to consider the specificity of Laing's application, but a more extensive exploration of wider theory is required to appreciate its full value.

To develop a specific Laingian version of a CM, a prominent component shared within Siegler et al. and Laing, is the concept of labelling: schizophrenia is a label, not an 'illness'.

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<sup>133</sup> The Conspiratorial Model is most associated with Thomas Szasz's theory (Collier, 1977; Kotowicz, 1997).

Labelling theory was developed through the 1950s and Becker published a seminal text in this area in 1963 titled *Outsiders: Studies in the Sociology of Deviance*, and it is surprising that neither Siegler et al. nor Laing make any reference to this theory when it seems so relevant.

At its most simple, we see the primary thematic element running through each theory and theorist:

deviant behaviour is behaviour that people so label. (Becker, 1963, p. 9)

Schizophrenia is a *label* which some people pin on other people. (Siegler et al., 1969, p. 948)

the person labelled is inaugurated not only into a role, but into a career of patient. (Laing, 1967, p. 100)

Within this thematic similarity, the CM marks itself as different by applying the concept of labelling theory specifically within the medical system, medical labelling, diagnosis. Scheff (1966) delved solely into the medical arena, continuing under the auspices of labelling theory, and makes several observations that contribute further to our focus. His observations centred around the social characteristics that encapsulated the labeller, the labelled, and the situation(s) they encounter, outlining the hubris of powerful forces created within this wider dynamic and bringing micro-political conditions into consideration, emphasising the true extent that a label is 'a social fact and a political event' – as per Siegler et al.'s definition. Scheff evidenced how wider political perceptions continue to be confirmed, reinforced and translated through intimate social interactions; a concept that could equally be described as interpersonal dynamics. The example of 'hearing voices' illustrates this well. In certain cultures, and religions, hearing internal voices, voices within one's head that are not deemed to be one's own, *can* (not always) be understood as a privileged, honoured connection to a deity. In stark contrast, in the medicalised western world this experience almost certainly is defined as indicative of 'illness', more specifically, schizophrenia (Watters, 2010). A label is therefore given/ascribed when a behaviour is deemed deviant within the context of the societal and/or political norms one inhabits. Laing uses this idea within his own theory from the outset when he offers a definition for sanity/psychosis.

I suggest, therefore, that sanity or psychosis is tested by the degree of conjuncture or disjuncture between two persons where the one is sane by common consent. (Laing, 1960, p. 36)

The label assigned to the event of hearing voices provides a good example of the political and social degree of disjuncture and its effect. Staying with the above, within certain cultures there is a desirable conjuncture, therefore it incurs no deviant label, and the individual is not outcast as an 'offender'. In the medicalised west however, the disjuncture is significant and as a result, the acquisition of a label inserts the individual into the medicalised system that devalues their existential status.<sup>134</sup>

What Becker's insight reaffirms is that the process of being labelled is far from a single hit or injury to the self, a process that again complements Laing's theory of self. Once the label enters the interpersonal dynamics of the ego/other dynamic, it increasingly consolidates itself within the social phantasy construct, a process that Becker terms 'deviance amplification'.

What labelling theory helps to emphasise is how diagnosis affects one's relatedness to oneself and relatedness between others (ego/other[s]), encapsulating and saturating being-in-the-world, generating the required inertia to achieve the master-status of 'career patient'. This introduces a significant obstacle to the achievement of ontological security.

This consequence of labelling theory becomes even more pronounced should the sufferer be detained in a psychiatric ward, one of several 'total institutions'<sup>135</sup> as defined by Goffman (1961). Offering a situation whereby labelling theory is amplified through the application of authority, control and inflexibility – the components of any total institution – a standardisation of the patient happens in tandem with the denial of any individuality, resultingly the person assumes the diagnostic label ascribed to them. This is the most drastic implementation of the CM possible: the identity/label assigned becomes the only valuable marker existentially reinforced for the individual. The individual is their diagnosis.

When we talk about 'mental health' care within 'total institutions', it could be easy (or rather, morally convenient) to assume their consequences are no longer as valid in 21<sup>st</sup> century England. Events such as the government paper in 1971 titled 'Hospital Services for the

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<sup>134</sup> Sanity qualified through *common consent*, at this stage it highlights the compatibility of *disjuncture* measured by *common consent* and *deviance* measured by politically and socially made rules or norms.

<sup>135</sup> Others included; care homes, prisons, military bases, and spiritual retreats.

Mentally Ill', the 1990 legislation 'National Health Service and Community Care Act,' and locally nurtured projects such as the 'Supporting People Initiative', have contributed significantly to 'mental health' treatment and care moving within the community setting and away from the residential psychiatric wards (Killaspy, 2006) – resulting in 'committed' patients accounting for only a minority of those diagnosed or experiencing psychic suffering.

Unfortunately, however, 'within the community' is very different to being a 'part of the community', the lasting negative connotations associated with diagnosis/label – stigma – are just as prevalent in today's culture as they were then, leaving sufferers isolated and ostracised and experiencing a disheartening, even damaging, lack of integration. Regardless of location, the consequence of diagnosis continues to detrimentally affect qualities of relatedness. Their existence, although removed from the 'mad house', remains consumed by the negative connotations associated with their diagnosis. We must not forget either, that psychiatric wards still exist, whether sectioned or not, and the beliefs associated with these labels still have perceived validation.

As a proponent for change within the psychiatric profession, the immediate and naïve reaction would be to assume that Thomas Szasz would be supportive of R.D. Laing – but as noted previously this could not be further from the truth (Burston, 1996). Szasz (1961), a fellow psychiatrist located in the social-constructivist camp, was arguably the firmest proponent of the CM (Collier, 1977; Kotowicz, 1997) and a continual advocate for seismic changes and revision toward the abuses of psychiatry and the treatment of those identified as 'mentally ill'. Amongst a catalogue of negatives directed toward Laing, Szasz accused him of failing to respect the fundamental premise of revisionist thinking through continuing to present schizophrenia within a binary format. He argued that calling it schizophrenia or ontological insecurity, the outcome remained to label the individual as (negatively) different from the rest of society (Kotowicz, 1997). Therefore, Laing was instrumental in maintaining the CM.

Szasz argued that Laing was merely ... perpetuating the same hoax as the psychiatrists Laing condemned. (Guy Thompson, 2015, p. 25)

Kotowicz (1997) summarises Mitchell's (1974) opinion highlighting its complement to Szasz and concluding that Laing is not as revolutionary as is often portrayed, with his theory failing to collapse the difference between schizophrenia and sanity. This is a common criticism, with others including Jan Gordon (1972) reinforcing the contradiction in what Laing is saying

and doing. In response to this criticism, Guy Thompson (2015) states that Laing defended the use of 'ontological insecurity' because it was not a label but a description.

In speaking of a person this way [ontological insecure] we are not really diagnosing him, we are simply describing what it is like to be him. (Guy Thompson, 2015, p. 30)

There is little argument that Laing maintained a binary, and this raises a serious doubt over seeing him as applying the CM, particularly from the perspective of anti-stigma. Philosophically inclined terminology or not, a rose by any other name, a diagnosis by any other label etc. Laing was employing terminology free of specific connotations i.e., schizophrenia, but as Szasz criticises, he still maintained the master connotations, and therefore stigma, associated with the essence of the medicalised framework of 'mental health' – that there are those that are normal, and those that are not. Criticism from within the medical profession was consistent and expected, but Szasz's criticism, at least initially, was unexpected and landed with force. Advocating change himself (but certainly not 'anti' psychiatry<sup>136</sup>), Szasz levelled a criticism at Laing's methodological approach from a new, politically libertarian vantage point, but more damagingly, from a proximity so close to Laing's own theory it was difficult to dismiss. However, Laing's defence, albeit not responding directly to Szasz, is the key to appreciating the extent of Laing's theory within the clinical context, building upon the foundation of the CM without being restricted by its standardised boundaries. An adaptation that I argue is more needed than ever before.

Laing's concern is not with generic labelling or the associated stigma primarily, it is with the specificity of psychiatric labelling. Almost returning full circle to the development of Laing's methodology, from the beginning of *The Divided Self*; 'psychiatric words' are held accountable for placing the patient's experience at distance and preventing relatedness and thus any real knowledge of self being gained. As we will see in the next section, the detrimental ingredient of 'psychiatric words', which will be outlined as scientism, is far from contained within the clinical context of the psychiatric encounter, it runs within the DNA of our entire political existence.

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<sup>136</sup> Szasz is an advocate of psychiatric change that continues to be associated with the term 'antipsychiatry' (Loughlin and Miles, 2014), which was a term he always vehemently rejected and vocally stood in opposition to (Szasz, 2009).

## Scientism

Placing scientism firmly within the political crosshairs is a pivotal moment for realising the potential within Laing's theory, as it employs each of the concepts developed throughout each chapter and embraces them as part of a totality. To understand the political connection with scientism, we must first back track and appreciate the foundational disdain Laing held for 'psychiatric words', the medical language that dominates our understanding of 'mental illness' and 'mental disorders'. Psychiatric words are the product of the prevalent scientific discourse of this era, systemised incessantly with its positivistic, objectivist values, and empirical methodologies. This scientific system is often critiqued under auspices of the term, 'scientism'. Scientism is the basis of the 'inhuman theory' that is psychiatry (Laing, 1967, p. 45), that facilitates the deconstruction of the self into an organismic set of individual components.

[S]cientism entails a metaphysical commitment to naturalist, reductive, or emergent materialism and tries to define science in a way that includes not only a commitment to empirical methods, but also to this particular metaphysics. (Williams and Robinson, 2016, p. 3)

Williams and Robinson (2016) assert that the question of scientism, or rather its critique, is more necessary than ever within western culture and by proxy neoliberal existence, with its epistemologically dogmatic and bullish charge unhelpfully permeating and influencing research within the humanities, social sciences and even religion at an increasing and alarming rate. Loughlin et al. (2013)<sup>137</sup> apply the sentiments of this criticism directly within the medical framework and argue that this does a great disservice to knowledge acquisition, specifically in reference to what is deemed here as the self. This argument becomes ever more relevant as we reveal the further existential consequences using Laing's theory. Scientism punctuates Laing's rejection of the absolute faith placed in what he often refers to as an objective (and positivist) authority given to western science at the dismissal of anything not contained within that bracket.

Laing stated, and this is highly important, that by placing the patient's *Being* within a world structured and dictated by a language and discourse accountable to scientism – the psychiatric encounter – not only did this exacerbate the experience of psychic suffering (as

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<sup>137</sup> Strangely, although several historical figures are associated and implicated with antipsychiatry in Loughlin's research, Laing is a notable omission.

per Siegler et al.'s 1969 definition and application of the Conspiratorial Model) but crucially, and even more detrimentally, this inflicted an existential degradation upon them; a truly Kierkegaardian notion. The importance of Laing's initial overview of this concept is worthy of repeating:

The 'committed' person is labelled as a patient ... [and] degraded from full existential and legal status as human agent and responsible person. (Laing, 1967, p. 101)

This is the unique element within Laing's analysis of the clinical encounter, fusing scientism within the CM. The being-in-the-world in the context of this psychiatric system, is reduced to a less-than being. A label ring-fences potential, shaping possibilities and the availability of choice – but a psychiatric label compounds this. Laing saw the psychiatric label as the killing of the thing-in-itself, we are making the patient stand before us as defined by a reductive language prescribed by psychiatric words, the patient as an object. By enforcing the discourse of objectivist, positivist, logical empiricism as the only authoritative means of defining the self, we penetrate no further than the outer shell of experience and suffocate the language that gives life-blood to the inner world. Without the means to connect with the inner world, the patient is no longer understood and respected as subjective, beautifully complex, and a unique *Being* with full existential status and possibilities. They stand within the gaze of medical discourse, they become an object, an *It* of psychiatric study, chained to an objective, positivist, scientific framework. Reduced from all the potential of the unknown and the currently unknowable, that the sane are afforded, the individual *is* the diagnosed disorder. This is akin to the self-fulfilling cycle for the development of a self-concept (as per the more generic labelling theory aspect that underpins Siegler et al.'s Conspiratorial Model), but with Laing's understanding they are reduced to a lesser person, a person no more than the text on a scientific manual. Once ascribed within this scientism they lose the prospect of agency. They become determined.

Iatrogenic: induced inadvertently by a physician or surgeon or by medical treatment or diagnostic procedures (Merriam-Webb definition)

If we can call psychiatric diagnosis and the acquisition of a psychiatric label a medical treatment, Laing's analysis of the psychiatric encounter accuses it of inducing an iatrogenic process, causing symptoms exacerbating the experience of psychic suffering and misconstrued as 'illness' by the psychiatric profession. This specific aspect of Laing's theory is echoed in the work of the clinical psychologist, David Smail.

Not only are psychology's claims to offer an *objectively valid* understanding of and a *therapeutically effective* concern with the ills which beset us false, but it is more than possible that psychology, far from minimising, actually compounds our difficulties. (Smail, 1987, p. 45)

Smail's trajectory of thought throughout his theory reverberates with Laingian sentiments but gives little more than a courteous nod in recognition of its influence.<sup>138</sup> Smail is more overt with his fusion of scientism and the CM and this makes the detrimental impact of scientism more pronounced, but in my opinion, nothing greater is added to Laing's, perhaps subtler, insights. If anything, Smail's theory – offering a social constructivist approach to 'mental health', echoes the one-dimensionality I criticised in the psychiatric paradigm, only this time it relies on the social in place of the biological element. Laing, as we now know, acknowledges the social environment as the home of fourth possibility anxieties, and this then unsettles the existential human condition itself – addressing the missing psychosocial aspect of the intended biopsychosocial framework of 'mental health'.

With or without acknowledgement and accepting of its limitations, Smail's theory shows a continuation of Laing's line of thought criticising the application of scientism to the self beyond the 1960s. Both remain influential in certain circles of academic thought, as their approach to the wider treatment of 'mental illness', 'disorders' – psychic suffering – stands in stark contrast to the belief in objective, empirical, positivist, science that underpins the highly influential and powerful DSM, ICD and other related frameworks.

Laing's theory coincided with the increasing medical imperialism of 1960s 'mental health', communicated through the scientific ethos underpinning the ICD and DSM manuals which were gaining a strong hold in psychiatric diagnosis and treatment. In the time since, these scientific values have gained further power, underpinning the research trajectory and funding applications that inform the most recent DSM-V, ICD-10, and RDoC (Paris, 2015; Frances, 2013; Rose, 2019).

Even more worrying, although intended for application with 'mental health disorders', contemporary psychiatric discourse is increasingly permeating everyday language and allowing a medical codification of the human condition itself. The way we talk about the experience of self, regardless of positive or negative states, is guided by this medical and

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<sup>138</sup> See *Taking Care: An Alternate to Therapy* (1987), p. 134; *Illusion and Reality: The Meaning of Anxiety* (1984), p. 136; *The Origins of Unhappiness: A New Understanding of Personal Distress* (1993), pp. 35 – 36. Always referenced with a positive inflection but lacking any recognition of structural influence.

therefore scientific terminology (Rose, 2019); terms like depression, bipolar, PTSD, OCD are as common within the lay narrative as the professional. This has significant implications for the claimed efficacy of the anti-stigma campaigns that evidence UK 'mental health' diagnosis rates are moving from 1:4 ratio and closer to 1:3 (Lubian et al., 2016). Whether these diagnostic figures reflect 'mental illness' per se is a pertinent question (Rose, 2019).

The pressing concern within this Laingian context is that society is ever more willingly walking into, and accepting of, 'mental health' diagnosis labelling, resulting in the figure mentioned above, that almost one in three individuals within British culture are now defined by scientism as 'mentally unhealthy' (Corker et al., 2013). The buzz phrase developing from anti-stigma campaigns,<sup>139</sup> benefitting from celebrity and royal endorsements, is that *we need to talk about 'mental health'*. I'd argue that we also need to think about *how* we talk about 'mental health'. It is unquestionably a benefit to reduce stigma, but we also need to consider the implications of normalising and naturalising the psychiatric words that are responsible for existential degradation. The very term 'mental health' inserts oneself within this predefined medicalised, scientific discourse, from the very outset.

Laing's research and theory within the clinical encounter illuminates that scientism structures the framework by which we mediate relatedness to the self and form a construct of self-consciousness, whether directed outwards to others, or internally towards oneself. The consequence for all matters of this scientific transition of self, is an I-It quality of relatedness and thus, existential degradation (hence Laing's advocacy of existential-phenomenological methodology, a *science of persons*). When we consider the current approaches to stigma reduction and the treatment of 'mental health', the existential degradation incurred by the application of scientism to the self needs to be considered.

## Extrapolating Scientism into the Political

The clinical setting, explored to this point with the CM centrally, becomes the place that the consequence of scientism is most vividly illustrated; scientism enforcing an existential

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<sup>139</sup> A current wave of interest in 'mental health' stigma began with the World Health Organisation (WHO, 1999) outlining that 'prioritising action to reduce stigma is a main concern.' That same year the NHS responded to this instruction and included it within the *National Service Framework for 'mental health' Modern Standards and Service Models* (1999), a document outlining their intentions to confront and address this matter. In 2008, the *Time to Change* organisation (time-to-change.org.uk, 2008) – we could even call it a movement — took hold of this torch and ran with it. In collaboration with numerous charities and Kings College, their first and arguably foundational campaign, *Stigma Shout* began.

degradation upon self-understanding. However, scientism undertakes a far more extensive role within Laing's theory once we appreciate that the CM is merely one means of its mobilisation. As we will now see, scientism is woven within the entirety of our political landscape and cultural existence, it may not be a 'total institution' in a physical sense, but the intensified and all-consuming presence of scientism becomes the inescapable accelerant responsible for the ultimate in collective 'existential degradation'. The pathway to inwardness, the key to appreciating the essence of existence, could we also say, the necessity for I-Thou relatedness, is being lost and with it, the conditions required for ontological security to be formed.

To paraphrase the quote which introduces this chapter; *human beings are relating to each other like two billiard balls* and thus we are relating to each other as a collection of organismic it-processes (to use Laing's terminology), ignoring the essential qualities of *Being* that defy rationalisation and reification. This is the consequence of our worldliness being mediated through politically couched scientism. Our ontological insecurity, our madness, is framed within the substance (or lack) of our relatedness. This is the subtle nuance and variation within Laing's political context that once revealed is impossible to ignore and gains more traction when we attune our analysis to this framing, re-energising an under-appreciated intricacy of Laing's insight into the wider consequence of scientism.

Natural scientism is the error of turning persons into things by a process of reification that is not itself part of the true natural scientific method. (Laing, 1967, p. 53)

Although scientism is discussed by Laing solely within the clinical setting, the psychiatric encounter, a series of links, specifically within *The Politics of Experience*, highlights that the damaging ontological consequence of scientism applies as a political constant that affects society at large. Essentially, scientism is woven throughout the fabric of western cultural existence, the consequence of existential degradation is exposed to us all.

Although this aspect is overlooked within Laing, the implications of this idea reappears within subsequent theories. Perhaps unsurprisingly, considering his overlap with the CM, this is especially visible throughout the 1980s work of David Smail. Approaching Laing's political theory through Smail helps to emphasise the structural component of scientism.

Thus people may spend a lifetime trying to achieve an objective standard (as human being) which in fact does not exist at all, and in so doing by-pass, discount or try to invalidate their own subjective experience. (Smail, 1987, p. 91)

Our objective culture operates precisely to obscure from our view what goes on in our own lives, and hence offers us no help when we start to discover for ourselves the nature of our predicament. (Smail, 1984, p. 159)

Echoing Laingian sentiments, the breadth of Smail's theory presents a strong thematic resemblance; we start to see a clearer path for an extension beyond the ego/other relationship of the patient and psychiatrist.

What becomes apparent is the universal pursuit of certainty, epistemological uncertainty being associated with existential distress. Smail (1983, p. 54) comments, '[U]ncertainty and confusion ... gives rise to psychological distress'. The refuge from this anxiety is sought in the culturally promulgated, and false, promise of security located in the infusion of culture and scientism. The consequence of this immersion is the abandonment of our subjective experience for an appeasement of objective value authority. The problem is that instead of satisfying our need for epistemological certainty, subjective experience does not translate into an objective framework. Therefore, we lose the pathway to our inner experience, which is a vital component within our being-in-the-world. The poignant quote that 'an inhuman theory will inevitably lead to inhuman consequences' (Laing, 1967, p. 45) was previously used to build Laing's existential-phenomenological methodology, but the mistake lies in limiting its application to the psychiatric encounter alone.

People feel they have to translate 'subjective' events into 'objective' terms in order to be scientific. (Laing, 1967, p. 102)

The most obvious application of this quote is to continue its placement within the *science of persons* encouraging the necessity to 'think of the individual man as well as to experience him neither as a thing or as an organism' (Laing, 1960, p. 22). This ties in almost seamlessly within the clinical context, but importantly, Laing and Smail are in agreement that an objectivist value-authority reference system, which is pervasive throughout western culture, is an incompatible framework for understanding matters of the self. Smail outlines, more vividly, the highly influential interrelationship of scientism within western culture and links this directly to a detrimental impact on the collective self. In contrast, Laing is typically misunderstood as belonging to the clinical context in isolation. But once Laing's application is realised within the political sphere, this link provides an inroad that originates long before Smail and extends theoretically beyond with greater consideration for aspects that embrace a psychosocial element. Essentially, we see that the internalisation of an objectivist value-authority framework has inhibited our very ability to understand *Being*, others and self. The

pervasive relationship of self and science, a relationship forged under the influence of psychiatry, is the cause of ontological discontinuity within society, and ultimately the source of ontological insecurity and thus psychic suffering.

The point I'm trying to make is that this habit of mind, based on binary distinctions, was exactly the habit of mind that Laing was all the time trying to undermine. (Guy Thompson, 2015, p. 23)

Ontological discontinuity bears too much compatibility with Buber's notion of authentic merging and relatedness for this to be ignored. This concept has been discussed at several junctures regarding the establishment of Laingian theory. Here again, we return to the foundational point that ontological security requires an interpersonal dynamic that promotes relatedness. Adding to this foundation, Buber's (1951) theory of relatedness is highly dependent on the social structure; the social structure is capable of manipulating the dynamic of relatedness so that it encourages or discourages authentic merging. This again links with Laing's theory of the political. In Laing's existential-phenomenological thematic fit to the political, the undercurrent of Buber's existential notion of relatedness plays a pivotal role – a role far more significant than Laing's fleeting acknowledgement would suggest.<sup>140</sup>

## Ontological Discontinuity in the 21<sup>st</sup> Century

The importance of ontological discontinuity – relatedness within one's self within society – does not end with Laing's era either. Although not discussed in Laingian, or Buberian terms, we see the underlying sentiments of this framework continuing to garner attention in critiques of contemporary culture.

Short-term capitalism threatens to corrode his character, particularly those qualities of character which bind human beings to one another and furnishes each other with a sense of sustainable self. (Sennett, 1998, p. 27)

Sennett's observation, among many others, is that now more than in any historic period before, the working patterns materialising within new-capitalism (hot-desks, short-term contracts, no accrued benefits associated with long-term devotion, etc.) are eroding significant qualities of self, namely loyalty and commitment, and this is weakening the bonds

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<sup>140</sup> Howarth-Williams (1977), Collier (1977) and Burston (2000) are in the minority of theorists that recognise the influence of Buber with regard to its application.

between people and affecting our sense of collective cohesion. The language may be different to Laing, but the sentiment is the same; relatedness is deteriorating and ontological discontinuity more present in the post Thatcher-Reagan neoliberal climate.

The relevance of Sennett's research does not stop with ontological discontinuity and his work adds an additional consideration into the mix, namely an analysis of social capital to be cross fertilised with Laing's theory.

Cultural capital plays a significant role in the experience of a 'corrosion of character' – this being the individual consequence that runs parallel to reduced societal interconnectedness within new-capitalism. Introducing disproportionality into the equation, it follows that ontological discontinuity is experienced more acutely by those penalised within the neoliberal structure, those lower in cultural/socioeconomic capital.

Another factor disproportionately distributed within politico-economic ideology is 'mental health' incidence, lower socioeconomic status correlating with increased 'mental health' diagnosis.<sup>141</sup> Broad statements equating neoliberalism with 'mental health' problems however conceal the finer details that contribute to this positive correlation. Either way, ontological discontinuity is a real presence within contemporary culture, as is 'mental health' diagnosis – both appear to be increasing as political hegemony increasingly saturates and dominates society (Fisher, 2007; Cohen 2016).

Lyndon West (2016) continues a trajectory of disproportionality with research overlapping the notion of ontological discontinuity, but rather than focussing on the *corrosion of character*, he analyses the *corrosion of community* and relates this directly to a context of 'mental health'.<sup>142</sup> Identifying the lack of investment in community spaces as a major factor associated with the increasing incidence of 'mental health' issues, West draws our attention to the need for the psychoanalytic notion of 'recognition'.

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<sup>141</sup> This picture comes to the fore through numerous publication; Fisher, 2007; Gerhaart, 2010; Watters, 2010; Harvey, 2010; James; 2008; Cohen 2016,). Summarised neatly by Marmot et al., (2010), 'Children and adults living in households in the lowest 20% income bracket in Great Britain are two to three times more likely to develop "mental health" problems than those in the highest'. Although dated, the relationship only seems to be strengthening and increasing.

<sup>142</sup> This is a secondary thread within his research. The primary focus is community relatedness and racism / fundamentalism. This in itself could present an interesting means of considering a different offset of behaviours associate with ontological insecurity, a breakdown in relatedness, but it remains beyond the scope of this thesis to engage with here.

Self-esteem is nurtured as individuals feel recognised as making important contributions to a group's well-being, and this in turn enables them to better recognise others...processes of self-recognition create the possibility of recognising different others and provide a basis for stronger social solidarities. (West, 2016, p. 14)

An individual who feels valued or positively recognised is more likely to recognise and value others, and community spaces, often relied on most by those of working-class heritage, are a vital resource to enhance the cyclic process of recognition; spaces to reduce the experience of ontological discontinuity. Contrasting with our current time of austerity (or the wake of austerity) with funding cuts and ever greater centralisation, against a more optimistic backdrop of the 1960s and 1970s,<sup>143</sup> West states that spaces to promote recognition are in short supply. The necessity of the gaze is again brought into focus and the consequence incurred upon the [2] *awareness of oneself as an object of somebody else's observation*.

[H]uman flourishing requires sufficient experience of recognition...and from this stronger social boundaries can flow. (West, 2016, p. 4)

Without recognition, we experience anxiety, placing us firmly within the Laingian realms of ontological insecurity. In response to this anxiety, he states that 'mental health' is deteriorating and, of additional concern, xenophobic, racist and fundamentalist attitudes are becoming more prevalent. I will return to this additional point very shortly but first want to reiterate what both Sennett and West add to this discussion. Essentially, ontological discontinuity is increasingly experienced within neoliberal culture, relatedness is deteriorating within this ideology, not only throughout the system but disproportionately affecting those in 'lower' status positions.

Laing stated that ontological discontinuity is a major factor affecting ontological security and thus contributes to the experience of psychic suffering, and we see at this time more than any other record diagnosis rates of 'mental health disorders'. The opportunity for Laing's insights to be further developed and applied in this setting seems important.

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<sup>143</sup> There is no suggestion that this was an idyllic period – let us not forget that this was a time of Enoch Powell's Rivers of Blood speech (Hewitt, 2005) – but rather the trajectory of multiculturalism was moving in a positive direction, albeit gingerly. The basis for this positive direction, of which democratic education programs are proposed as playing an important role are grounded in the second aspect to his argument.

To this point however, neither Sennet nor West, although drawing relatedness to the fore, have stressed the matter of scientism within the political context. Here I want to reintroduce what may appear a tangential or unrelated connection to the negative political attitudes that West states are becoming increasingly prevalent within post-industrial cities, those communities that are the most needing in *recognition*. This link proves a firm pathway for further considering our political and ‘mental health’ situation at present.

In the absence of recognition and its consequential presence of anxiety, an increased desire for a sense of belonging is identified by West. This is illustrated profoundly with relevant communities gravitating toward xenophobic, racist, even fundamentalist attitudes that reveal themselves with political choice and activity with prohibited and dangerous extremist groups.<sup>144</sup> The attraction of these groups is that they offer not only recognition, but a fixed sense of identity, belonging, and understanding by which to secure oneself. The perceived uncertainty within multiculturalism – where no recognition (relatedness) has been established, is replaced with absolute certainty for a fixed, absolute and rigid understanding of oneself.

We can be attracted to groups of the like-minded because *the issue of not getting it is resolved in the abolition of complexity*. (West, 2016, p. 174 – *Italics added*)

The issue of ‘not getting it’ is defined as ‘feeling confused, misunderstood, or inadequate [...] in intimate or wider social life’ (West, 2016, pp. 173 – 174), a description not unfamiliar to the anxiety laden premise of ontological insecurity. The resolution for West is the ‘abolition of complexity’; certainty of self is sought in an effort to mitigate the effects of a lack of relatedness.

With minor adaptation, it could be proposed that ‘the abolition of complexity’ that negates the void caused by a lack of recognition (ontological discontinuity) and resultant ontological insecurity, is equally appeased by belonging to a narrative defined by scientific parameters. Using West’s observation, scientism is the substance we attach to in an effort to fill the emptiness caused by our lack of relatedness and to offer a sense of listless confusion and disconnection the means, the discourse, the language, to be understood. Having the capacity to understand ourselves is a prerequisite for self-recognition and thus recognition of

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<sup>144</sup> West uses the example of Stoke-on-Trent, a run-down, post-industrial city, infamous for electing a British National Party (BNP) councillor in 2002 and more recently being the ‘Brexit capital’ of the UK, as indicative of numerous pockets within UK society.

others. This is a good explanation as to how we confront ontological discontinuity and why scientism acts so perniciously in this regard.

However, Laing is not stating that our pursuit of absolute epistemological certainty is a reactive measure; we do not react to the loss of relatedness by seeking a scientific reification of ontological experience. Scientific reification of ontological experience causes our lack of relatedness. Moreover, it is this scientific means of relating to each other that diminishes the qualities required for an I-Thou relationship to flourish, and instead replaces them with I-It qualities that enforce an existential degradation. Laing's insights provide an alternate interpretation for West's research, the recognition we seek in a location that 'abolishes complexity' is a product of the increasing authority we are placing in science (psychiatry) that promulgates the belief that the self is capable of finding such certainty.

The outer divorced from any illumination from the inner is in a state of darkness. We are in a state of darkness. The state of outer darkness is a state of sin – i.e. alienation or estrangement from the *inner light*. (Laing, 1967, p. 116)

In shrouding the inner light from illuminating the outer world, the light of the inner becomes invisible too. As scientism becomes the primary means of understanding the outer, it then becomes the only available source to illuminate the inner. Stepping back to the theoretical framework of the Conspiratorial Model, the interpersonal dynamics we engage with in our relationships, not only within the psychiatric encounter, but universally, are couched in a discourse that existentially degrades the other and thus shadows them in darkness. Scientism underpins the interpersonal dynamics of western neoliberal existence in its entirety, this outer discourse is responsible for smothering the light of the inner from our experience, and as such is a cause of ontological discontinuity, and our collective ontological insecurity.

We have reified the ideology of capitalism, through science amongst other things, to believe this is the absolute qualification of what is right. This plays into the confidence of the DSM, ICD, even more so the RDoC, that all proclaim that there is an absolute discourse by which to understand existence, and psychiatry is no different. But the qualification of psychiatry no longer remains located within medicine (whether it ever did fully). As Rose (2019) has stated, psychiatry influences every aspect of living. This has a direct input on culture's reliance on science, and culture's reliance on science normalises our acceptance of a scientific (and not an ontological) approach to the self.

Ontological in/security is used as a means of contextualising experience within contemporary culture by Anthony Giddens' (1991) in *Modernity and Self-Identity*.

All individuals develop a framework of ontological security of some sort, based on routines of various forms. People handle dangers, and the fears associated with them, in terms of the emotional and behavioural 'formulae' which have come to be part of their everyday behaviour and thought. (Giddens, 1991, p. 44)

Constructing a framework of ontological in/security using an eclectic array of theoretical influences - Freud, Sullivan, Erikson, Winnicott, and Laing to name a few - Giddens' use of this concept echoes Laing's on two significant themes. The first is his presentation of a definition of a 'sense of' ontological security, as opposed to an actual, traditional existential definition. The second is his adoption of Laing's position that an ontologically secure 'person will encounter all the hazards of life, social, ethical, spiritual, biological, from a centrally firm centre of his own and other people's reality and identity' (Laing, 1960, p. 39).

Reinforcing the connection of political conditions with the formation of identity, Giddens (1991, p. 32) states that 'for the first time in human history, 'self' and 'society' are interrelated in a global milieu'. Without romanticising the past as a time of security and absence of anxieties, Giddens describes contemporary culture in terms of 'high modernity' – a political era structured with, and by, absolute faith in technology and science. Rather than directing his theory toward a cause of increased sources of anxiety, Giddens suggests that our existence within high modernity is failing to provide the conditions (trust, motivation, etc..) required to develop ontological security, and without this quality of identity, we do not possess the resilience to navigate the anxieties associated with everyday existence.

Giddens' notion that it is not an increased burden of anxieties and stressors that cause ontological insecurity but rather the formation of identity within high modernity that prevents the acquisition of ontological security has proved highly influential. The clarity with which this is illustrated helps to refine an important focus within Laing: we do not reach for scientific certainty of self to appease ontological insecurity, or at least that is not the point of origin. The scientific means of understanding ourselves is the source of ontological insecurity. Feeding into further power relations, a quality lacking in Laing's theory, scientism's pervasive influence upon self-identity, as highlighted through the work of Sennet (1998) and more so West (2016), is disproportionately distributed within social hierarchies, illuminated here within class, but without reason to suggest it is limited to this aspect.

I now consider how we can map this theory through scientism, into Laing's existing theory of the family and politics, preparing the ground for how they complement a framework of self-consciousness and therefore ontological in/security in both domains. This will highlight how Laing's theory can be considered as a totality and draw further into focus his continuing relevance.

## Meta-Context: Epistemology and the Family

The most prolific research conducted by Laing is unquestionably within the family. It is reanalysed here as the embodiment of the nexus-par-excellence, utilising its rich findings without being drawn toward familial properties or kinship ties. The focus is instead on the interpersonal dynamics that unite the formation of the (family-)nexus, highlighting compatible elements which continue to overlay with the development and structure of self-consciousness. Building from an infrequently cited article by Patemen<sup>145</sup> (1972), *Sanity, Madness and the Problem of Knowledge*, a different lens is applied to the analysis of family-nexus that opens consideration toward the discipline of epistemology. Although not designated a 'meta-context' by Patemen, the identified epistemological theme establishes a deeper level of functioning for the interpersonal dynamics of the family, warranting this 'meta' description.

[I]f Maya needs anyone, it is an epistemologist, not a psychiatrist. (Patemen, 1972 p. 23)

Patemen's article is one of the few texts that identifies an epistemological factor within the experience of psychic suffering, arguably the only one to do so within the interpersonal dynamics of the family. In doing this, Patemen reveals a meta-context, a context that is unconfined to the parameters of the family-nexus. With an epistemological framing, Patemen's theory is operating within the same field as scientism and provides further ways of arguing how this means of understanding is the cause of existential degradation. Situated within the family context, these insights provide further connections to be identified that build toward a logical formation within a political domain.

Patemen's analysis is a reinterpretation itself of Laing and Esterson's 1964 research (*Sanity, Madness and the Family*). Although he does not focus upon the double bind scenario to

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<sup>145</sup> The most notable citation of Patemen's (1972) *Sanity, Madness and the Problem of Knowledge*, is briefly within Howarth-Williams (1977).

inform his analysis, the importance of this concept, as recognised through this thesis, warrants its inclusion. Fortunately, with only slight adaptation, a complement to the level of detail and insight achieved by Patemen, his research overlays easily to incorporate this experience. In doing this, it further emphasises and anchors three of the components he discusses; a) the parents disqualify Maya's epistemological truth claim, b) the parents designate themselves in the role of absolute, and only, epistemological authority, and c) the parents corrupt Maya's epistemological appraisal system. (It is important to remember that Maya's relationship with her parents would more accurately be described as an interpersonal dynamic consisting of an author(s) and sufferer, reaffirming the qualification of this being a nexus within a familial context.)

Applying Laing's self-consciousness framework also has significant and insightful bearing as we start to develop a connection to the political in the subsequent section: a) Denying Maya's truth claim, Maya's [1] *awareness of herself by herself* is devalued and dismissed; b) by her parent's occupying a position of absolute epistemological authority, Maya's experience, Maya's reality, and thus Maya, exists only within the [2] representation act of the parents objectifying gaze; c) Without a functioning epistemological appraisal system, the development of a reliable awareness of inner and outer experience, the pre-requisite for balanced self-consciousness, is disrupted. All experience, regardless of the domain, becomes unpredictable and threatening – ontological insecurity guaranteed.

Maya's parents consistently deny the truth of her statements and thereby undermine any developing mastery of epistemological criteria and/or her perceptions themselves. She is thus disabled from achieving a [epistemological]<sup>146</sup> mastery of the world. (Patemen, 1972, p. 22)

Consistent within all the interpretations offered so far, a tension is present in two domains. On one hand we have the parents, who exist in the outer domain, who present themselves as the gatekeepers of epistemological truth. On the other, we have the sufferer looking toward the inner world of subjective value-laden authority. The parents have cultivated an interpersonal dynamic that reinforces the authority of their own experiential statements within the nexus, and this in turn has suffocated and dismissed the sufferer's experience as unfounded, unreliable, untrue.

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<sup>146</sup> In the original text, Patemen uses the term 'cognitive' here. Earlier in the text Patemen also states the interchangeability of the term 'epistemological ('cognitive' would be a possible alternative)'. Epistemological provides better continuity with the context of this piece without deviating from its intent.

Maya's [2] *awareness of herself as an object of another person's observation* is galvanised within her parents perceived epistemological authority. Maya's [1] *awareness of herself by herself* is completely dismissed – and the only way of learning how to understand truths and qualify her experience (and thus escape this complex maze of *knots*) is held by the very source responsible for this dismissal. The double bind consistently unsettles the harmony of self-consciousness, Patemen's imbued epistemological theme complements and develops this further. Through fusing epistemology within the double bind process, a meta-context is identified that amplifies the impact within the interpersonal dynamics. Building further upon the framework of self-consciousness, Maya has no ability to ascertain what is real, factual, true, and thus no capability to calibrate her balance of self-consciousness with regard to the two components of awareness, to allocate her experience within a corresponding domain and navigate her being-in-the-world. Her perception of experience counts for nothing but confusion. Her [1] *awareness of herself by herself*, has been dismissed and devalued to such an extent that it now presents as a void of uncertainty. What Patemen's theory helps to draw into focus is that not only do the double bind experiences contradict within this interpretation, they corrupt her epistemological appraisal system. And in doing so, this directly allows us to argue that it disables her ability to embrace the totality of experience required for self-consciousness.

The qualities that underpin the 'epistemological authority' and qualify the parents as such, remain vague within Patemen's article. If we keep focus to the family in isolation, which I am reluctant to do even briefly, his analysis rests on the description that the power imbalance resides in the parent-child dynamic, a dynamic that imbues the parent/adult with a structural and real authority that transmutes into being the holder of truth and knowledge, an epistemological authority, within the family, felt most prominently by the child. However, this does little to assist our application to the nexus unrestricted to the familial.

I suggest a different approach. For the suffer, epistemological truth is confirmed solely in an authority located beyond their self, placed instead in the outer world and it is for this reason that they discredit, devalue and dismiss the authority of their own subjective, 'lesser' epistemological system; thus, Maya's inner world of experience is shunned. Patemen's theory as with Laing and Esterson's original research, may remain embedded within familial praxis but his identification of epistemological meta-context has more potential than his short article realised.

Teasing this epistemological thread, a thread that already resides within Laing's theory and is frequently missed or associated with the CM in isolation, the connection for a consistent

application of ontological insecurity as a loss of relatedness with one's social context becomes more apparent, an application that flows through the family and political context.

### Meta-Meta-Context: Politics and Epistemology

Although Patemen makes no reference to the CM, we can develop his idea that epistemology plays a role within the family-nexus and suggest that the parents, much like the psychiatrist, occupy a position of epistemological authority. Building on the similarities that exist within the dynamic of both relationships, even though conducted in different locations, the assumption of the parent's epistemological authority residing in the adult-child power relationship becomes unsettled and simultaneously infused with epistemological value-authority.

Within the psychiatric encounter (CM) we are provided with far greater detail of the construct, the qualities, that underpin this epistemological authority, and the impact this has on the representational act. The biggest consequence of the psychiatric representational act is that a binaried epistemological value system is imposed on the interpersonal dynamics, juxtaposing the perceived authority of subjectivity and objectivity truth claims. Applying the specific epistemological value authority of objectivity into their encounter, this 'scientifically' structured appraisal converts the sufferer's subjective experience into an objective framework. Crucially, it is this value authority conversion that enacts existential degradation upon the sufferer – amplifying the suffering they were already experiencing (prior to the psychiatric encounter) by reducing and dehumanising their experience; a process that insists upon a perception of 'man as a machine or man as an organismic system of it-processes' (Laing, 1960, p. 23). This epistemological consideration within the interpersonal dynamics of the CM, dismisses subjective value. Subjective value being the only epistemological reference capable of capturing the essence of inner experience, thus any truth claim associated with the inner world is therefore deemed worthless and invalidated.

Patemen's article draws our attention toward a pre-existing component within Laing and with that, opens consideration of the wider operation of epistemological authority within the experience of psychic suffering. Uncovering a meta-context within the family highlights that the parent, like the psychiatrist, holds epistemological authority over the sufferer. As we discuss its presence throughout the entire experience of psychic suffering a new landscape is revealed for exploration of Laing's thought.

With varying degrees of opacity, the inner/outer splitting that defined Laing's ontological insecurity is also described with epistemological characteristics. Using interchangeable terminology throughout his body of work to differentiate between the inner/outer binary, Laing substitutes the terms subject/subjectivity as being relatable to the inner world, and objective/objectivity with the outer world. This move blurs the boundary with the epistemological tradition, overlapping with positivist theory which presents the external world, the world beyond the self, as a singular objective reality, where absolute and finite knowledge can be found (Hudson and Ozanne, 1988). These subtle variants, even though used in a context that do not disrupt or supersede the simplicity of the inner/outer world differentiation, implicate an epistemological quality to Laing's account of the personal experience of psychic suffering.

[E]xperience is not 'subjective' rather than 'objective,' not 'inner' rather than 'outer'.  
(Laing, 1967, p. 17)

Being-in-the-world by this definition, consistent throughout Laing's theory, is constituted not only by an interaction of the inner and outer domain, a characteristic that dominated Laing's theory of self but also has subjective and objective qualities. Ontological insecurity and psychic suffering can therefore be understood as a rupture along an epistemological fault-line, equally as much as a worldly divide; the totality no longer experiencing a balance of both qualities. In refocussing Laing's theory through an epistemological lens, the continuity of this epistemological fault-line becomes ever more apparent. This is both highly suggestive of its significance and also of Laing's pre-existing attunement to this matter.

Appreciating the structural value of an epistemological fault-line is a central theme of this thesis and the specificity of its theory has remained submerged and largely unacknowledged in secondary evaluations of Laing's work, any recognition being embedded in the clinical context. This epistemological fault-line resides far beyond the isolated act of diagnosis performed by the psychiatrist on the individual. Schulman and Gans in their chapters in *The Legacy of R.D. Laing* (Guy Thompson, 2015), are good examples of theorists continuing to emphasise Laing's criticism of the violence incurred when 'objective science' is imposed upon the self, but even though their discussion gestures towards a political and more universal context, their assertions remain too easily contained within a context of psychiatric appraisal. What is missed is that Laing's writing increasingly includes an epistemological binary within a context that encapsulates the experience of everyday existence, interwoven within the politics of interpersonal dynamics, and justified as affecting our 'sense of' collective ontological security.

In contrast to the reputable 'objective' or 'scientific,' we have the disreputable 'subjective,' 'intuitive' or worst of all 'mystical'. (Laing, 1960, p. 25)

So many people feel they have to translate 'subjective' events into 'objective' terms in order to be scientific. To be genuinely scientific means having valid knowledge of a chosen domain of reality. (Laing, 1967, p. 102)

With a strategic intent I have extracted two quotes that punctuate periods from the family and political context, respectively, in a deliberate attempt to illuminate and justify the continuity of the subjective/objective presence, the epistemological fault-line, in the totality of Laing's theory regardless of model context. Each quote is equally as insightful when applied to either domain.

Falling outside the parameter of the first phase of publishing but of great assistance to this research, the significance of this binary is further emphasised as we briefly acknowledge its contribution to Laing's theory post 1970.<sup>147</sup>

To split what is the case into the duality of subjective and objective is to *make* a distinction, very useful, even essential for many purposes. But, believed, the world is a broken egg. (Laing, 1982, p. 12)

This binary gains more descriptive clarity in *The Politics of Experience*, as its context is developed by introducing the epistemological term 'positivism', placed in opposition to subjectivity and on the same side of the fence as objective value authority within the bracket of scientism.

We must then repudiate a positivism that achieves its 'reliability' by a successful masking of what is and what is not, by a serialization of the world of the observer by turning the truly given into *capta* which are *taken as given*, by the denuding of the world of being and relegating the ghost of being to a shadow land of subjective 'values'. (Laing, 1967, p. 52)

There are countless excerpts throughout Laing's body of work that outline the damage committed to the person by applying a theory of knowledge, an epistemology, that insists

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<sup>147</sup> The intrauterine model of psychic suffering, post 1976, is not the focus of this study. Its inclusion at this stage is to emphasise the structural importance that criticism of scientism holds in Laing's thinking.

that an absolute, positivist, objectivist value must be attained for it to qualify as scientific. However, as each of these quotes highlight, this feature is not reserved for the psychiatric encounter, but with the use of increasingly generalised terms, *so many people ... we ... the world of the observer*, it applies to all of us.

Laing's warning concerns more than the presence of an epistemological division and awareness of objective value authority being valorised over the discarded position occupied by subjective values. Scientifically, this is a well-versed criticism resulting from the structural impact of the *Age of Enlightenment* (Williams, 2016). As detailed within the CM, there is a severe and dangerous consequence of interpreting the 'subjective' experience of the self within an 'objective' epistemological value authority framework. Self-understanding through this incorrect means is a major cause of existential degradation and intricately implicated in the experience of psychic suffering. Only now, the suggestion is that a potential existential degradation is encountered on a societal, 'we', level and it is not reserved to psychiatry alone.

We all seem to desire to find a common meaning to existence, to find with others a shared sense to the world, to maintain fundamentally similar structures of experience. (Laing, 1966, p. 157)

Western culture has become increasingly structured by a perception of logical empirical positivism as the only means of value authority; this is the substance of politics (with a small 'p') that Laing was pointing toward, and through psychiatry this framework has permeated the interpersonal dynamic that mediates all matters of self-understanding, and thus ego/other dynamics. The perception is encouraged that a finite and absolute answer, objective value authority, is achievable for all knowledge and this is coming to dominate 'our shared sense to the world' and uniting us within a 'common meaning to existence'. Laing is weaving his rejection of scientism within the cultural fabric of everyday existence.

Other theorists were also making similar warnings. Western Marxists exemplified by Herbert Marcuse – a fellow speaker at the Dialectics of Liberation Conference – were updating Marx's notion of 'alienation' within more psychoanalytic discourse for application within 1960s culture. Marcuse (1964, p. 110) stated that subjectivity forms in accordance to the 'facts of existence'; the self conforming to the dominant societal substance. Reviewing the second edition of Marcuse's seminal text, *One-Dimensional Man*, Kellner summarised that the alienating experience of conformity in 1960s capitalist culture was incurring dire consequences to the self:

The cognitive costs include the loss of an ability to perceive another dimension of possibilities that transcend the one-dimensional thought and society. (Kellner cited in Marcuse, 1964, p. xxviii)

Marcuse may not be speaking about empirically defined epistemology and Laing was not speaking about politico-economic ideology per-se, but science and ideology work hand-in-hand, generating momentum behind each other's reification process and value authority claims within culture. In speaking about culture, even though approached primarily through psychiatric discourse, Laing implicates capitalist ideology and gingerly acknowledges this within his theory (most notably in *The Politics of Experience*). Laing and Marcuse were noting that culture was becoming ever more singular and one-dimensional in its view of what constitutes knowledge and the possibilities that exist within or beyond it, be that capitalism as the societal political order or psychiatric discourse as the means for understanding the self. For Laing this consequence was not simply a loss of potential as Marcuse stated and neither could it be attributed solely to the responsibility of capitalism. The consequence was manifesting in the experience of ontological insecurity.

If there is such a thing as one-dimensional society within a Laingian context, it is the outer world being divorced from inner world, objective value authority isolated from subjective value. Crucially, the objective and outer is valorised and anything falling outside it – specifically, the inherently subjective epistemology of the inner world – is dismissed and discarded. Existing within this singular dimension of thought is an 'enhanced and compulsive' relationship to only one epistemological aspect of awareness: value authority residing in the outer, objective realm. This is consequently the only reliable location for knowledge acquisition and qualification. Without access to the inner world, a route denied by ignoring and devaluing the only language capable of capturing its essence – subjective value authority – we are epistemologically alienated from a vital and necessary source of self-understanding. One-dimensional society is an epistemologically-induced schizoid society. As this is the prevailing state of normality, this is the 1960s state of unconscious madness (Laing, 1967).

### Epistemological Fault-line and Ontological Insecurity

The impact of this epistemological fault-line and its ability to transcend the boundaries of the political and the family within Laing's theory becomes apparent as we consider its ontological effect by reintroducing the framework of self-consciousness.

Our social phantasy construct is shaped significantly through our immersion within the 'conventional practices of everyday life' (Collier, 1977, p. 17), a conformity to the 'facts of existence' (Kellner cited in Marcuse, 1964, p. xxviii). This immersion and conformity is therefore structured by a divided epistemological culture which substantiates the discourses and language that unites us within a 'shared sense to the [western, capitalist] world' (Laing, 1966, p. 157). At its most simple, we exist within a world that isolates the domains of epistemological value authority, subjective from objective. Furthermore, it discredits the former and valorises the latter. With focus now directed to the self, by dismissing the subjective value, we lose the epistemological reference capable of capturing our inner experience. This has significant implications with regard to the balance of self-consciousness and therefore to our capacity for existing with a 'sense of' ontological security.

Laing's warning is that we, the population of the capitalist, western world, are being increasingly exposed to a political dynamic that denies the capacity for self-reflection. This is a political ideology that structurally devalues the subjective qualities required to engage with and trust [1] *an awareness of oneself by oneself*. Resultingly, self-consciousness invests excessively in the perceived authority acquired through [2] *an awareness of oneself through the representational act of the another's gaze*. This subsequent action for a redirection toward the perceived authority located within the outer world and the other, echoes the principles within the irrational interpersonal dynamics of Laing's family studies and CM.

Whereas originally this impact was witnessed within the context of the family-nexus and as an experience within ontological insecurity, Laing increasingly highlights how irrational interpersonal dynamics are unfolding within our political experience and thus can be considered a cause of ontological insecurity and psychic suffering. Collectively, we are being encouraged to believe that epistemological authority in the outer exceeds that of the inner and this is displacing confidence in our own experiential authority. Madness is no longer reserved to the specificities of certain families. Laing (1967, p. 116) evolves his theory to speak more generally to the 'interpersonal world and the realm of human collectivities'. What constitutes sanity and normality is the ability to adapt and conform to this 'common meaning to existence'. We live, and are united, within a [western] world that is increasingly attributing all truth claim validity to the outer world and its associated epistemological value authority. In seeking knowledge of oneself, only the outer offers any 'guarantee' of truth. Hence, self-consciousness, on a collective scale, and politically induced, is increasingly being disharmonised: [1] *awareness of oneself by oneself* is being suffocated, in response to the dominance of [2] *awareness of oneself as an object of another's observation*. This being

directly relatable to the increasing dismissal of subjective value authority and valorisation of objective value authority in the epistemological structuring of western culture.

This damning verdict of the trajectory of culture builds to a crescendo within *The Politics of Experience* and within this context, one could be forgiven for missing a nugget of information that offers major insight into the premise underpinning this entire argument. Fleeting and with the barest detail, Laing (1967, p. 117) states '[r]emember Kierkegaard's objective madness'. The source of 'objective madness' is most vivid in Kierkegaard's mid-19<sup>th</sup> century text, written under the pseudonym, Johannes Climacus<sup>148</sup>, *Concluding Unscientific Postscript*. This book is lauded by Laing as 'one of the peak experiences of my life' (Laing, cited in Mullan, 1995, p. 94), even though it is unreferenced anywhere in his first phase of publishing.

My thesis was that subjectivity, inwardness is truth. (Climacus, 1846, p. 251)

[A]n eternal happiness, exists only for the subjective; or rather, comes to be only for the person who becomes subjective. (Climacus, 1846, p. 137)

The following interpretation selects aspects of Climacus' work, highlighting where Kierkegaard's thinking that can be related to Laing. It will not discuss a movement toward the absurd (a movement of faith toward God) that resides and is achieved through inwardness, but it will emphasise the components that unsettle the perceived rationale in our scientific confidence that keeps us from engaging with inwardness – a criticism that is often centred in opposition to Hegel's *Science of Logic*. Although this is a drastically reductive reflection of Kierkegaard's extensive theory, it is unavoidable to ensure that the aspects directly relatable to Laing's theory are addressed (I am certain that the influence he had on Laing's person far exceeded this summary of his theory. In a conversation with Anthony Lund (1990, p. 103), Kierkegaard was the only thinker Laing acknowledged to be his superior; 'I don't think I'm in the same league [as Kierkegaard]'. This comment is made all the most noteworthy because of the other names that provided the backdrop to this statement: Nietzsche, Kafka, Rilke, Holderlein, Freud).

Earlier I stated that Laing's theory illuminates the inhibitors that prevent our accepting and embracing inner experience and related this to psychic suffering. Through the voice of

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<sup>148</sup> Respecting Kierkegaard's instruction outlined in *Fear and Trembling* (2006), each quote will be attributed to the authorship of the pseudonym.

Climacus, Kierkegaard makes this exact argument but outlines the necessity and process of engaging with *inwardness* and *subjectivity*<sup>149</sup> as two sides of the same coin. Even so, beyond Climacus' primary emphasis, his theory provides an insight into the opposing face and factors that fit perfectly with Laing's theory.

If man occupies himself throughout his whole life solely with logic, that does not make him into logic. (Climacus, 1846, p. 79)

...in all this knowledge, one has forgotten what it is to **exist** and what **inwardness** means. (Climacus, 1846, p. 203)

Absence of inwardness is also a madness. Objective truth as such is by no means enough to determine that whoever utters it is sane; on the contrary, it can even betray the fact that he is mad although what he says be entirely true and in particular objectively true. (Climacus, 1846, p. 163)

This selection of quotes contain all the structural components necessary to build the primary framework of Laing detailed throughout this thesis: we may study the logic of science, apply it within medicine, and structure psychiatry under its instruction – but that does not give the experience of self an objective epistemological character.

Drawing together a conclusion for the entirety of *Concluding Unscientific Postscript*, one that addresses each of these quotes and furthermore, complements this epistemological fault-line within Laing, Maybee (1996) offers the summary;

[Climacus] suggests that one natural way of internalizing the traditional, objective, universalist account of rationality will make you sick. (Maybee, 1996, p. 387)

Crucially, as Laing saw it during the infancy of his first phase of publishing, these conditions were insufficient to unsettle our 'comfort, refuge and stability' in worldliness – hence the statistical norm continued to exist with a 'sense of' ontological security. It was only those certain *irrational* families that heightened these conditions, disrupting the balance of

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<sup>149</sup> Laing focussed on the negative, solely on the mechanisms of inhibition. In contrast, Climacus focussed mainly toward the positive, the striving to engage with inwardness. As was discussed in the previous chapter, and is more relevant than ever before, hope is present in Laing's theory — often in its absence — and if I were to suggest a further speculative comment, it would be that Kierkegaard's optimism, throughout all his publications, is the unspoken energy that gives shape to Laing's theory of hope, an unspoken quality that makes even his dire observations bearable.

awareness within self-consciousness further, that tipped the individual into experiencing ontological insecurity. This dynamic reflects the structure of ontological in/security within the family context.

However, Laing's evolution to the political can be viewed in either of two ways, both complementing the other, and not necessarily distinct. Either, as Laing focussed more toward the 'human collectivities' and considered the impact of political interpersonal dynamics in greater detail, he acknowledged that the cost to self-consciousness had been under-appreciated, therefore his later work can be read as trying to resolve this by evolving his theory. Or the detrimental impact of the interpersonal dynamics on a political scale had intensified; psychiatry gaining more authority over the self, 'psychiatric words' gaining more influence within culture, scientism increasingly defining western existence etc. (a premise outlined in this thesis), therefore his theory now reflected this newly changed (intensified) dynamic. Regardless of whether it is one or the other, or both, Laing still states within *The Politics of Experience* that collectively, society is 'asleep' to this political damage being done to our 'sense of' ontological security, therefore at this stage, bad faith is still sufficient to keep us invested in the 'conventional practices of everyday', providing the 'comfort, refuge and stability' we seek in negating our potential existential freedom and the anguish this realisation causes. Therefore, in the political context, only the minority experiences ontological insecurity, but in actuality, we are all ontologically insecure, even if unconscious to this reality. It is the difference between 'experienced' and 'actual' ontological in/security that enables Laing's account of the dynamics of this matter to find a more stable home within both models. Through the framework of self-consciousness, we give further proposals to remedy this conflict.

As a final consideration, we have spoken about existing within the representational act of the other always in the presence of an other: the political other, the family other, the psychiatrist other. Do we need to consider that such is the level of saturation of this epistemological fault-line within our existence that we no longer need to be solely concerned with the I-Thou relatedness to others and thus one's social context, but focus more specifically on the qualities underpinning the I-I relatedness, relatedness to oneself? Are we ourselves denying our own subjective experience, and re-ingesting the scientific framework to understand our experience? Essentially, [1] *an awareness of oneself by oneself*, by its very nature, requires acceptance of a subjective value-laden epistemology, therefore an acceptance that a finite, absolute and definitive knowledge of the self is beyond our epistemological grasp. But [1], the inwardness that should be governed by subjectivity, is not only being devalued, arguably it is being replaced with the epistemological basis of [2]. This is an incompatible system of

understanding existence – therefore, we are responsible for applying an epistemological framing that causes our own existential degradation. The self is always constituted in relation to the other – the other is scientifically defining the self. Kierkegaard stated that this scientific logic was enough to make us *sick*, Laing stated that the fault-line is increasingly dominating our politically informed cultural existence, but we are unaware of the experienced ontological consequence – we are not experiencing the psychic suffering. Well, 60 years have passed, the trajectory of culture has continued along this path – and rates of ‘mental illness’ diagnosis are higher than ever. Are we now reaching a point that the epistemological fault-line is being experienced by society as a whole?

There is a poignancy and timeliness to Laing’s chosen focus. The trajectory of modern psychiatry had long prior to the 1960s turned away from any prospect of ontological understanding of the self and toward a scientific, ‘evidence based’ model. Laing’s publishing came about as the ICD-6 (1949) and DSM-I (1952) manuals were anchoring themselves within modern psychiatry and culture more widely. Whilst there was no way of knowing the influence these manuals were to have in western society (and beyond), with hindsight, it would appear Laing was all too aware of the potential influence (damage) they were to wield (wreak). Psychiatry shapes ‘the very experience of living’ for us all (Rose, 2019, p. 3). Laing’s theory, focussing on the mechanisms of inhibition, came about at a seismic moment of cultural and psychiatric change. Laing was responding to a cultural shift, whereby the self became an object within the representational act of objectivist science and with it the light of the inner world was being snuffed out. The current tag line to addressing the ‘mental health’ ‘epidemic’ we are experiencing, is the necessity to talk. My argument earlier was we need to think about *how* we are talking about ‘mental health’. We could more accurately say, we need to think about *how* we are talking, even thinking, about the self – lest we be investing more and more energy into the very source of our existential degradation.

## Concluding Remarks

Hell is other people. (Sartre, 1945, p. 52)<sup>150</sup>

Often misunderstood, this quote, taken from *Huis Clos* (*No Exit* – English translation), provides an interesting means of illustrating the insights generated from this application of Laingian theory within a contemporary, neoliberal landscape.

A simplistic synopsis of *Huis Clos* might be that three characters are locked in a room, where – amongst several plot twists – it becomes apparent that the room is not furnished with a mirror or any means to see one's own reflection. Without this capability, the characters soon realise that the only means of perceiving themselves, to achieve any form of self-reflection, is through the torturous gaze of other people; hell is (seeing oneself through the eyes, the representational act, of) other people.

The play resonates with Laing's ideas across his three major registers.

The clinical: this is perhaps the easiest and most direct application in comparison with the situation that unfolds within *Huis Clos*. As defined within the Conspiratorial Model, psychiatry holds the power to enforce a diagnosis, and therefore definition, upon those that are suffering. When the sufferer enters the psychiatric encounter, their experience of self becomes framed within the dominance and authority of the psychiatric gaze.

The family: Laing illustrated how in certain nexuses of misaligned interpersonal dynamics an individual can lose the capacity to appraise their own worldly experience. The result of this process is that the individual becomes overly (completely) reliant on the gaze of another to qualify their experience. This is typified by the child / parent dynamic within the family-nexus.

The political: western culture is increasingly prioritizing a belief that the most authoritative and therefore accurate means of self-understanding is gained through the discourse of scientific principles (with psychiatry playing a significant role for instilling this belief). Science is the representational act that defines how we see ourselves (and others).

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<sup>150</sup> Hell is *just* other people. (Sartre, 1945, p. 52 - Italics added)

Bowles' 1972 adaption of this play includes the word 'just'. This is not reflected in other adaptations/translations.

Each of Laing's contexts revealed a social intelligibility underpinning the experience of ontological insecurity. And, mimicking the hell of Sartre's fictionalised situation, the lack of something akin to 'self-reflection' and the subsequent reliance on seeing oneself through the representational act of another, is an instrumental component in this process.

The resonance of *Huis Clos* with Laing's theory gains even more relevance when we emphasize the experience of 'hell' with reference to Sartre's seminal theoretical piece, *Being and Nothingness*, and interweave Laing's theory of self-consciousness.

I am put in the position of passing judgment on myself as on an object, for it is as an object that I appear to the Other. (Sartre, 1957, p. 246)

The mirror within the play is symbolic of an important, necessary quality that must exist within all experience, a space for self-reflection. This function within experience undertakes a vital role in helping to understand oneself, a function that overlaps completely within a framework of self-consciousness. Self-reflection is [1] *an awareness of oneself by oneself*. In Sartre's play this condition has been inhibited through the manipulation of the environment, the characters have been physically prevented from any and all means of seeing *oneself by oneself*. Resultingly, the only available means for understanding oneself is living solely within the representational act of another and thus dominated by [2] *an awareness of oneself as an object of somebody else's observation*.

This result is equally true for each of Laing's contexts. Through misaligned interpersonal dynamics, the sufferer's experience has become dominated by [2] *an awareness of themselves as an object of someone else's observation*. And this experience has devalued and displaced their capacity for self-reflection, [1] *an awareness of oneself by oneself*. Let us not forget the necessity of this awareness. To have [2] *awareness of oneself as an object of somebody else's observation* is a requirement for a sense of ontological security to be achieved. It provides a way of anchoring ourselves within worldliness, as demonstrated by the conversation with Kafka's Suppliant, and the structural recognition for its inclusion within a framework of self-consciousness. However, as represented in *Huis Clos* and each of Laing's contexts, our existence is becoming increasingly consumed within the representational act of other people, and this ensures we *pass judgment on ourselves as on an object*. In becoming nothing more than 'objects' we lose the capacity to relate to others (and ourselves) as persons, we exist with ontological discontinuity. This is the kernel of Laing's theory as developed within this thesis – we are relinquishing knowledge of persons

(including knowledge of ourselves) to the perceived authority of a scientific gaze within western culture and this is the source of our collective ontological insecurity.

Framing this experience differently, Laing offers us further perspectives to consider the collective experience of ontological insecurity within western culture.

We seem to live in two worlds, and many people are only aware of the 'outer' rump.  
(Laing, 1967, p. 107)

We are aware of the outer rump of existence, just as each of us is [2] *aware of oneself as an object of somebody else's observation*. This is a world in which individual persons connect through I-It relatedness; empirical, objective interaction, a meeting of objects only – two billiard balls colliding. We could frame this slightly differently again, recognising that ontological insecurity is affecting us all because we are divorced from the inner world, just as we are divorced from [1] *awareness of oneself by oneself*. The importance of the inner world for our ontological security is increasingly coming into focus with self-reflection, [1] *awareness of oneself by oneself*, seemingly providing the pathway to reaching and establishing a relatedness with this missing component of existence.

But, what is *an awareness of oneself by oneself*? What are we looking at/for in self-reflection? The suggestion in the previous chapter was that this I-I relationship needs to be addressed carefully. We cannot draw [1] *an awareness of oneself by oneself* with naivety and believe this to be an ontologically enriching source of guidance – especially in its current form. The self is always constituted by the ego/other experience, and the pervasiveness with which scientific discourse has permeated through the other into the self, is contaminating relatedness with ourselves. The return of Laing's theory to the fold of philosophy is paramount for considering the intricacy of the ego/other bond, and reinvigorating consideration for the inner and outer world within our psychosocial perspective approach to all matters of the self.

We cannot attempt to reengage with [1] *an awareness of oneself by oneself*, whilst we continue to hold objective scientific discourse as the perceived greater authority of self. This framing will not access the knowledge relating to experiences within the inner world, a necessary component within the balance of self-consciousness and for the attainment of a sense of ontological security.

Throughout this thesis, it has been argued that a current state of collective ontological insecurity defines neoliberal, western culture, and this is a consequence of the domination of [2] *an awareness of oneself as an object of somebody else's observation*. This is a primary product of the psychiatric system. The stronghold that psychiatric words have on all matters of self-understanding are shaping 'the very experience of living' for us all (Rose, 2019, p. 3). As such, existence could be seen to have become mediated through a scientific lens, and the consequence is that people are determined as objects, held accountable to empirical objectivist scientific standards that impose a finite and absolute capacity for the self.

This has created a *knot* within our phantasy construct, not only is an existential degradation enacted upon us causing the development of ontological insecurity, but I suggest the window into our inner world has become tainted, contaminating our entire experience of existence, further impacting the I-I relatedness with oneself, and the I-Thou relatedness to others.

Essentially, we are presented with the imperative to simultaneously navigate, undo and untangle ourselves from this scientific *knot* which claims an absolute monopoly on all matters of self-understanding, and create a space to breathe life back into the voice of the inner world, so that [1] *an awareness of oneself by oneself* can once again be heard. This will arrest our continuing existential degradation and lead to further opportunities to achieve a sense of ontological security.

Laing's theory, reworked through a concept analysis in Chapter 5, *A Laingian Methodology*, Chapter 6, *Self-Formation*, and the entirety of Part 3, *Ontological Insecurity*, has given us the framework to identify and understand the source of our collective ontological insecurity.

Laing's original application of an existential-phenomenological methodology analysed the experience of diagnosed 'schizophrenics' and sought to find intelligibility within the previously considered incoherence of schizophrenic experience. Deciphering language termed schizophrenese babble, Laing identified the process within a person's life that explained their erratic behaviours and symptoms. Gaining social intelligibility (as opposed to the accepted presumption of a biological/organismic default) negated the medicalised qualification of 'illness' or 'disorder' – and therefore undermined the treatment processes which relied on such a qualification as well.

Applying his thinking to the political arena, Laing stated that social intelligibility was once again revealed for our collective ontological insecurity. But, lacking the obvious theoretical rigour of his previous focus within the clinical and the family, this assertion faced criticism for

being little more than unsubstantiated and speculative proclamations. This thesis has meticulously developed Laing's political application, highlighting concepts overlooked and emphasising connections within the other contexts. This has shown that the theory has structural integrity and enables further experiences within our cultural existence to be deciphered – and 'the position of passing judgment on myself as on an object' (Sartre, 1957, p. 246), is seen as a prime factor that affects our capacity for an [1] *awareness of oneself by oneself*, thus clouding our ability to self-reflect.

Only by departing from our current means of defining the self, represented and influenced so heavily by psychiatry, can we hope to gain a sense of ontological security. Reverberations of this project are already underway within the service user movement, the recognition that a new psychiatric episteme is needed, a structure of psychiatric knowledge that resonates from within, valuing the insight of those that are experts by virtue of their experience. We could even frame this action from within the service user movement as a realisation, a need, to hear and value the voices that speak with [1] *awareness of oneself by oneself*, as opposed to being silenced by psychiatry's beating of the drum. 'Psychiatric words' enforcing a dominance of [2] *an awareness of oneself as an object of somebody else's observation*, a reductive definition of self, imposed on those in society most maligned under psychiatry's observation. The framework of Laingian theory developed in this thesis would provide support in this existing pursuit of a new psychiatric episteme, a means to offer perspectives into the damage inflicted by psychiatry and assist in dismantling its discourse – both in direct application to 'mental illness' and its subtle cultural influence beyond.

This analysis of Laing has not shown how and where to re-engage with the inner world (*if the inner world was ever engaged with previously*), but it has shown us clearly how and where it will not be achieved – through the eyes of an other, still less the scientific eyes of contemporary, western, neoliberal culture.

Existential thinking offers no security, no home for the homeless. (Laing, 1967, p. 47)

Laing's theory has revealed that the scientific home which has provided existential refuge within contemporary culture, is sustained by bad faith. A bad faith that has allowed scientific psychiatric language and our sense of ourselves to collapse into the same thing – suffocating self-reflection from experience. Bad faith allowing us to continue an existence even though it contributes to an ontological insecurity. With the help of Laing, the two have been prised apart, allowing us to see the construction as an object not as part of ourselves,

but as experienced by ourselves. As such, a gap or space is revealed between the discourse and our sense of the need for the [1] *awareness of oneself by oneself*.

Laing's theory has placed *doubt* in the realm of the outer rump of existence, and the objective and scientific qualities that structure our outer world. In contrast, what Laing highlighted as too easily dismissed, the "subjective," 'intuitive' or worst of all, 'mystical'" (Laing, 1960, p. 25) logically occupy the equivalent binary for the qualities of the inner world.

This thesis has involved consciously avoiding any and all influences of mysticism, spirituality, and religion present within Laing's career. Whilst this was a necessary task to ensure focus was not lost, it must also be acknowledged as occurring at a cost. Although subtle, to my mind, these components occupy a constant presence within Laing's theory, and I suggest are responsible for the optimism and hope that run through his work.

Several theorists pursue this line of enquiry (see Lunt, 1990; Heaton, 2015; Pickering, 2015), but I stand by the rationale underpinning the parameters of this research; too little is present within Laing's written work to sustain a spiritual justification for a Laingian framework. Many of those that focus on this area have a connection to his person, this adding a further complication to this alternate direction of theory.

Nonetheless, as we look to re-engage with an [1] *awareness of oneself by oneself*, reattuning to the inner world is vital if we want to ensure a less contaminated process of self-reflection.

Laing has given us a rationale to justify and embrace *doubt* within our western, neoliberal approach to experiencing the self. This in itself is huge. It argues against the most prominent authority system ('psychiatry' and logical empiricism, more generally) currently applied to the self. Where we go from here, I must leave open. This part of my research ends inevitably with a fresh new set of questions, new terrain. Once the [1] *awareness of oneself by oneself* becomes an intelligible possibility what we do with it remains as an exciting open question and one which I hope to address in my new research.

Laing recalls the first time he read *Concluding Unscientific Postscript* as 'one of the peak experiences of my life. I read it through without sleeping' (Mullan, 1995, p. 94). I propose that Kierkegaard's influence runs beneath all of Laing's work. In my next encounter with Laing for contemporary times I plan to follow this line of thought to explore if it would provide a very different reading of Laing's theory. But, in closing, I will make a final statement: in the

process of completing this research a *doubt* has entered my own existence and this has revealed a crack in the conceptions by which I defined my place within the world, how I understood myself, and how I understood others. In reaching out to Sartre, Heidegger, even Buber as a side project, no solace was found. Yet, in Kierkegaard, something *feels* right. It weaves within my reading and understanding of Laing, and it provides an existential wisdom in certain moments of angst. I cannot say that in learning to *doubt* I have gained faith, but I have found a friend in Kierkegaard. And as with all good friends, he gives me strength in times of existential need.

The reading of Laing produced throughout this thesis leaves us with this potentially generative gap or fracture between the empirical referent of the self experiencing itself as object and the self that is aware of itself by itself. From this position, I now ask myself whether Kierkegaard can help us navigate and explore this gap, allowing for the possibility of a metaphysics that gives us a different reference that may provide access to different encounters that speaks to our existential passions in new as yet unknown ways?

## Coda: Laing and the COVID-19 Fallout

The coronavirus crisis poses the greatest threat to mental health since the second world war. (Sample, 2020)

On the 11<sup>th</sup> March 2020 a specific variant of Coronavirus, COVID-19, was classified a worldwide pandemic (Bueno-Notivol et al., 2021), affecting the entirety of life as we know it. Due to escalating mortality rates and an unmanageable demand placed upon hospital ICU beds, the UK government responded to this pandemic by implementing a series of lockdowns of varying intensity, locally and nationally, in an attempt to reduce transmission rates and bring the virus under control. As a by-product of these government-enforced lockdowns, work and employment for many was compromised and socialising severely restricted – often limited to members of one’s own household.<sup>151</sup> As I type this chapter in the early weeks of 2021, restrictions are once again ramping up in response to a second wave of COVID-19 and corresponding fatalities and increasing hospital admissions. Whilst government lockdowns have been actioned to address the respiratory virus, an indirect impact on mental health is causing significant concern, and as further lockdown restrictions have been announced, the concern about impending ‘mental health’ consequences gets louder and louder.<sup>152</sup>

Mitigating the hazardous effects of COVID-19 on mental health is an international public health priority. (Xiong et al., 2020, p. 55)

The ‘mental health’ consequences of COVID-19 are not expected to peak until after the pandemic has subsided and ‘normal’ life resumed, but already we are seeing a surge in ‘mental health’ diagnosis: diagnosed depression up by 25% (Bueno-Notivol et al., 2021), anxiety and stress also reporting significantly higher (Salari et al., 2020). Compounding the earlier statement in Chapter 2, *Why Now*, that ‘mental illness’ was the ‘epidemic’ within western society, the concern is that this unforeseen pandemic has amplified this situation.

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<sup>151</sup> or where a single occupancy adult, forming a ‘support bubble’ with one other household.

<sup>152</sup> The BBC ran an online article which summarises this connection: ‘COVID-19: UK lockdown, school closures and mental health tips’ (<https://www.bbc.co.uk/news/uk-55534081> accessed 05/01/2021).

Thinking about how we intend to cope with this greater demand and the necessity to provide real help for those who are suffering, as recognised by Xiong et al., requires a concerted approach.

The COVID-19 pandemic reveals existing weaknesses in the mental health system, but also presents opportunities for reform. (Magoon et al., 2020)

In addition to appreciating the severity of the response, an increasing number of researchers are also seeing the COVID-19 situation as an opportunity to improve the help given to those in need. Although recognising this potential, Magoon et al.'s strategy remains embedded in the existing psychiatric paradigm; rather than questioning any notion of *efficacy* for the current system, they look to improve the *efficiency* of the existing paradigm.

I suggest that we must be bolder with the opportunity this situation provides.

Vahia et al. (2020, p. 695) propose a 'need for new knowledge to bridge science and service' in reference to the imminent 'mental health' fallout. Providing indirect support for the value of the research conducted in this thesis, Vahia et al. state that we must look to new means of understanding what constitutes 'mental illness' and use this platform to inform how we respond with treatment. Research such as this provides an inroad to consider alternative models beyond the current status quo and although the invitation is general, Laing's compatibility is evident from the outset. The relationship between COVID-19 and 'mental health' presents an opportunity to reconsider an application of Laing's concept of ontological insecurity, reframing the psychic suffering experienced surrounding this pandemic as a logical, but painful, response to an event situated in our worldly existence.

### *A Laingian Application*

The World Health Organisation (WHO) is arguably the leading global research authority for all matters of health, and the importance of their statement addressing the mental health concerns arising from the COVID-19 pandemic is not to be underestimated.

[1] Fear, worry, and stress are normal responses to perceived or real threats, and at times when we are faced with uncertainty or the unknown. So it is normal and understandable that people are experiencing fear in the context of the COVID-19 pandemic.

[2] Added to the fear of contracting the virus in a pandemic such as COVID-19 are the significant changes to our daily lives as our movements are restricted in support of efforts to contain and slow down the spread of the virus. Faced with new realities of working from home, temporary unemployment, home-schooling of children, and lack of physical contact with other family members, friends and colleagues, it is important that we look after our mental, as well as our physical, health.

(World Health Organisation, 2020)

The COVID-19 pandemic presents no requirement to decipher an encrypted dialogue, as per Laing's research with 'schizophrenics'. The suffering experienced is already defined within the context of events surrounding the lockdowns, therefore social intelligibility is a given. This is highlighted by the WHO, a breadth of primary research, and even recognised on social media. The main source of our painful experiences, our psychic suffering, lies in our environmental context, the difficult and challenging experiences caused by lockdowns. Yet, early indicators are suggesting that the psychic suffering experienced in response to COVID-19 is already being absorbed within a deficit model of mental illness diagnosis and treated as such (hence the increased rates of depression etc., noted above).

When we focus on the 'hazardous effects of COVID-19 on mental health' through a Laingian lens, the concept of ontological insecurity is persuasive. More specifically, if we analyse the WHO statement through this lens, Laing provides an alternate voice and theory to the existing 'mental health' framework, a voice that I suggest is both needed and valuable.

Referring to the individual paragraphs of the WHO statement, ontological insecurity embraces each of the dimensions / positions highlighted by the WHO and their interconnection. The crucial Laingian contribution is that their ordering is inverted; it is the effect of our empirical, worldly, experiences (paragraph [2]) that come first, and this is the source responsible for awakening the angst associated with the precarity of *Being* and nonbeing (paragraph [1]). I argue that this inversion is a more accurate reflection of the 'mental health' consequences experienced and anticipated with the COVID-19 pandemic.

Research concerning mental health and COVID-19<sup>153</sup> emphasises the implications and limitations which stem from the announcement of lockdowns (sociological – paragraph [2]), representing a change to our environmental conditions. This does not dismiss the implications resulting from the fear of illness and/or death (psychological – paragraph [1]) as

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<sup>153</sup> This is not including reports of mental illness associated with contracting the virus (see Taquet et al., 2020).

a contributory factor. Rather, empirical experiences within our environment – anxieties that fit within Laing's description as fourth possibility locations – are the primary mental health concern.

Fourth possibility anxieties were detailed as the cause of ontological insecurity; these are empirical experiences, which exist within everyday existence – experiences exemplified by the effects of lockdown. Laing is not attacking the base existential anxieties directly (*Being and nonbeing* – in a Sartrean / Heideggerian framework, or death, guilt and purposelessness – in Tillich's theory<sup>154</sup>), and neither is the majority of current research. The WHO, I suggest, are correct to acknowledge the involvement of fear which works within both an existential and Laingian framework, both including considerations for the base existential anxieties. However, I suggest they have put the cart before the horse. Because of COVID-19, the environment that provides refuge from our base anxieties has become unsettled and as such we have been exposed to the presence of the fear and angst we continually attempt to flee. Our existential refuge has been lost.

When analysing the implications of the COVID-19 pandemic, we must also consider the possibility that this event is acting upon an existing ontologically insecure position.

A prime symptom or characteristic of ontological insecurity in a person is that 'the ordinary circumstances of living threaten his low threshold of security' (Laing, 1960, p. 42). The 'ordinary circumstances of living' have already been challenging our 'threshold of security' hence the increasing incidence of 'mental illness' diagnosis prior to the onset of the COVID-19 pandemic. Thus, building from this ontologically insecure position, the necessity to adapt and manage 'significant changes to our daily lives' arising from the COVID-19 lockdowns is compromising our ability to look after our 'mental health' more and more.

Even if we approach the COVID-19 pandemic without an awareness of pre-existing ontological insecurity, this pandemic has all the ingredients to bring it about. This event is sufficient to compromise the conditions required for existential refuge and enough to inhibit our ability to immerse within worldliness and realise our being-in-the-world. Angst and fear are always rippling beneath our ontological surface, if not fully realised; the 'mental health' epidemic suggests we are already precariously close to tipping the balance.

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<sup>154</sup> It is building on Tillich's 3 base anxieties that Laing qualifies the empirical, worldly anxieties as situated in the fourth possibility.

Laing's theory challenges societal norms and encourages a reconceptualization of psychic suffering, an understanding that exists outside the perceived scientific authority over self that is claim of a psychiatric paradigm. Even though research is starting to highlight this need (Vahia et al., being representative of this changing mood), the position of psychiatric science is so well established that challenging its authority and choosing a different course of action is a monumental ask.

Laing's existential-phenomenological methodology and the theory of self-formation this outlines, provides a more emancipatory science of persons. From this epistemological basis, a refined focus is gained and the Laingian concept of ontological insecurity comes to the forefront. Approached from this vantage point, the 'mental health' issues stemming from COVID-19 are a socially intelligible, coherent, even common-sensical response to the psychic suffering being experienced. Treatment has never been the object of this research, but from the findings uncovered we now know where we need to begin.

Looking toward service and treatment, however, no map is provided in this thesis for where we need to go. Yet, through reanalysing Laing's theory, dead-ends and cul-de-sacs are illuminated that would have prevented us from reaching any helpful destination. The 'hazardous effects of COVID-19' are *not* mental illness, they should therefore not be treated as such. Laing's theory contains the potential to break the cycle, to prevent sufferers being subjected to a misaligned treatment process, and thus inaugurated as career patients within the psychiatric system.

But the real impact of Laing's application to this pandemic extends to culture itself. Through addressing the very source of collective ontological insecurity affecting western society, the scientific means with which we define the self that compromises relatedness to oneself and others comes into our awareness.

The actions by which we address the experience of COVID-19, will constitute a new psychiatric discourse and will filter through to society as a whole. This is an unrivalled opportunity to change how we think of persons and to destabilise the confidence we place in 'science' to understand all matters of self. This is the opportunity to discover ways to re-engage with a displaced [1] awareness of oneself by oneself beyond a reductive contamination of logical empiricism – psychiatric words – which have dominated and turned us into 'objects'.

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### Online Resources

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### *Media Resources*

*All Divided Selves*, 2012 [documentary]. Directed by Fowler, L. In Association with Verso Books.

*Did you used to be R.D. Laing*, 1989 [documentary]. Directed by Shandel, T. Third Mind Productions.

*Life Before Death*, 1976 [music]. Artist R.D. Laing. Label Charisma. Catalogue number CAS 1141.

*Mad to be Normal*, 2017 [film]. Directed by Mullan, R. Gizmo Films, Bad Penny Productions, GSP Productions.

## Appendix. 1

### *Publication History*

- 1955** Patient and Nurse: Effects of Environmental Changes in the Care of Chronic Schizophrenics. *The Lancet*, Vol.2(6905). (with J.L. Cameron)
- 1958** Collusive Function of Pairing in Analytic Groups. *Psychology and Psychotherapy*. Vol.31(2), pp. 117 – 123. (with A. Esterson)
- 1960** \**The Divided Self*. Tavistock Publications
- 1961** \**Self and Others*. London: Tavistock Publications
- 1962** Series and Nexus in the family. *New Left Review*. Vol.15. pp. 7 - 14
- 1963** *Minkowski and Schizophrenia*. Review of Existential Psychology and Psychiatry Vol.3 (3)
- 1963** Review of Schizophrenia as a Human Process by H. S. Sullivan. *International Journal of Psychoanalysis* Vol.44 (3)
- 1964** \**Sanity, Madness and the Family*. Penguin Books. (with A. Esterson)
- 1964** \**Reason and Violence: A Decade of Sartre's Philosophy*. Tavistock Publications. (with D.G. Cooper)
- 1964** One-Dimensional Man. *New Left Review*. Vol.26. pp. 78 – 80
- 1964** What is Schizophrenia. *New Left Review*. Vol.28. pp. 63 – 68
- 1964** M. Coate. *Beyond All Reason* (introduction by R.D Laing).
- 1964** Review of General Psychopathology by Karl Jaspers. *International Journal of Psychoanalysis*. Vol. 45 (4.)

- 1964** Transcendental Experience in Relation to Religion and Psychosis. *The Psychedelic Review*, Vol.1 (3)
- 1965** Results of Family-Oriented Therapy with Hospitalized Schizophrenics. *British Medical Journal* 2, December. (with A. Esterson, and D. Cooper)
- 1965** I. Boszormenyi-Nagy and J. Framo (editors) *Intensive Family Therapy* (contribution by R.D. Laing, *Mystification, Confusion and Conflict*)
- 1965** F. MacNab. *Estrangement and Relationship: Experience with Schizophrenics* (foreword by R.D. Laing)
- 1965** H. Graham. *Cure or Heal* (foreword by R.D. Laing)
- 1966** \**Interpersonal Perception: A Theory and a Method of Research*. Tavistock Publications (with H. Phillipson and A.R. Lee)
- 1966** Ritualisation and abnormal behaviour. *Philosophical Transaction of the Royal Society London*, Vol.251, Nr.772B
- 1967** \**The Politics of Experience and the Bird of Paradise*. Penguin
- 1967** Peter Lomas (editor). *The Predicament of the Family: A Psycho-Analytical Symposium*. (contribution by R.D. Laing)
- 1968** Metanoia: Some Experiences at Kingsley Hall. Recherches (Reprinted in H.W. Ruitenbeek, Ed. *Going Crazy: The Radical Therapy of R.D. Laing and Others*, (NY Bantam, 1972)
- 1968** David Cooper (editor). *The Dialectics of Liberation. Alternately titled To Free a Generation*. (Laing's essay 'The Obvious' was first published in this book)
- 1969** \**The Politics of the Family and Other Essays*. Tavistock Publications.
- 1970** \**Knots*. London: Penguin.

- 1972** James Keys. *Only Two Can Play This Game*. (foreword by R.D. Laing)
- 1976** \**The Facts of Life*. Penguin.
- 1976** \**Do You Love Me? An Entertainment in Conversation and Verse*. Pantheon Books.
- 1976** \**Sonnets*. Michael Joseph
- 1977** \**Conversations with Adam and Natasha*. Pantheon.
- 1977** A. Balaskas. *Body Life*. Sidgwick and Jackson Ltd. (foreword by R.D. Laing)
- 1979** De Batselier, Steven. *Passage 144*. Uitgeverij Soethoud, Antwerpen 1979 (foreword by R.D. Laing)
- 1979** A. and J. Balaskas. *New Life: The Book of Exercises for Childbirth* (foreword by R.D. Laing)
- 1980** Satish Kumar (editor). *The Schumacher Lectures* (contribution by R.D. Laing entitled, What is the Matter with Mind?).
- 1981** Christian Strich (editor). *Fellini's Faces. Has many photos of faces immortalized in the work of Federico Fellini* (foreword by R.D. Laing)
- 1982** \**The Voice of Experience: Experience, Science and Psychiatry*. Penguin.
- 1982** Vincenzo Caretti. *Le Radici dell' Esperienza*, Astrolabio (foreword by R.D. Laing)
- 1985** \**Wisdom, Madness and Folly: The Making of a Psychiatrist 1927-1957*. Macmillan.
- 1985** *What is Asylum? Towards A Whole Society*. The Richmond Fellowship Press
- 1986** *God and Psychiatry*. Times Literary Supplement. May 23
- 1987** R. Firestone. *The Fantasy Bond* (foreword by R.D. Laing)

**1987** J. Zeig. (editor). *The Evolution of Psychotherapy* (contribution by Laing, *The Use of Existential Phenomenology in Psychotherapy*)

**1988** R. Firestone. *Compassionate Child-Rearing* (foreword by R.D. Laing)

**1989** S. Grof, and C. Grof (editors). *Spiritual Emergency: When Personal Transformation Becomes a Crisis* (contribution by R.D. Laing, *Transcendental Experience in Relation to Religion and Psychosis*)

**1989** *Paroles D'Enfants*. Seuil. (Not published in English at this time)

**1994** J. DeMeo (editor). *On Wilhelm Reich and Orgonomy* (contribution by R.D. Laing entitled, *Why is Reich Never Mentioned?*)

(\*) Denotes major book titles

Any titles without a named author are published solely by R.D. Laing.

Publications containing duplications or republications have not been included.