Guest Editorial



Freedom is (still today) therapeutic: centenary and continuing relevance of Franco Basaglia

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Summary

Franco Basaglia (1924–1980) has a particular relevance to psychiatry today as he combined social critique with psychiatric reform. In the new 'metacommunity' era in psychiatry, his radical and critical thinking provides important tools, as does his enduring message that 'freedom is (still today) therapeutic'.

Keywords

Mental health services; rehabilitation and social psychiatry; history of psychiatry; philosophy; human rights.

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Franco Basaglia (1924–1980) is known for his advocacy for deinstitutionalisation and for his antipathy for psychiatric institutions and militant advocacy for their actual closure, but his thinking remains largely unknown in the anglophone world. His ideas reached their fullest expression at the mental institutions at Gorizia and Trieste in the 1960s and 1970s and in the ensuing diverse campaigns for 'social justice'. He died prematurely in 1980, yet his thinking influenced the subsequent development of mental health services in Italy.¹ Basaglia has a particular relevance to psychiatry today, despite decades of research and reform since his era, because he combined social critique with psychiatric reform. His socially radical and critical thinking provides practical hints and inspiration, from the slogan of Trieste, 'Freedom is therapy', to the idea that 'Freedom is (still today) therapeutic'.²

The Royal College of Psychiatrists' History of Psychiatry Special Interest Group (HoPSIG) held a webinar on 20 March 2024 to mark the centenary of Basaglia's birth on 11 March 1924. He was one of the most internationally influential figures in the history of psychiatry during the second half of the 20th century, and since. We contributed to the conference and consider that Basaglia's ideas and work remain of immediate contemporary relevance and deserve wider recognition.

For both supporters and detractors, Basaglia and 'Basaglianism' constituted a point of reference in the process of profound social renewal in Italy after the Second World War. He was a key animating force on the path of radical reform of the psychiatric system, encouraging the wider set of civil campaigns fought in the name of freedom, inclusion and human dignity at that time. His ideas inspired an anti-institutional movement that directly or indirectly contributed to the Italian reforms of schools, the social integration of disabled people, drug addiction policies and other improvements since the 1970s. His international legacy is among the most significant in the history of psychiatry of the 20th century.^{1,3}

Life

Basaglia was born to and raised in a wealthy family in Venice. He became involved in resistance to Nazi oppression and was present during the violent prison uprising in April 1945 that catalysed the ending of the Nazi occupation of Venice. His brief period of imprisonment had a lasting influence that emerged in his later comparisons of the functions of asylums and prisons. After completing his medical studies he committed to psychiatry, becoming an assistant at the University Clinic of Padua. His professional journey had four phases: (a) qualification as a psychiatrist with in-depth studies and scientific contributions ranging from neurology to phenomenology (1953–1961); (b) directorship of the Gorizia Psychiatric Hospital, launching its reorientation towards a 'therapeutic community' approach (1961–1968); (c) the Trieste period (1968–1978) during which he concluded that the psychiatric hospital is unreformable and resolved to proceed with its 'destruction'; and (d) the extension of the fight against mental hospitals to a prototype of active criticism of the broad range of social structures of injustice (1978–1980). This last is an anticipation of today's calls for intersectionality. He died prematurely aged 56 on 28 August 1980 owing to a brain tumour.

The Italian achievement

Approaching the life and work of Basaglia requires a certain critical commitment, given the complexity of his ideas, the socially radical nature of his thought, the inevitable contradictions and the richness of his messages, at times luminously evident while at others cryptic and allusive, but always capable of arousing doubt and indicating possibilities.

Basaglia never attempted to smooth out the rough edges of his personality, nor soften his positions. These last were often provocative and unsettling, so that some have spoken of a 'surrealist' Basaglia, a fascinating product and interpreter of his time, totally absorbed in the advancement of his anti-institutional and political project. He was emboldened in this by Franca Ongaro (1928-2005), his wife and indispensable collaborator, and by 'l'équipe', a group of loyal collaborators. He drew strength from living in contradictions, from his awareness that these were the real things to work on and from combining practical action with sophisticated research in the fields of philosophical, political and social theory. Within a robust democratic orientation, he strongly believed that a small 'hegemonic minority' could change the state of things. Indeed, this was effectively achieved with the closure of the mental hospital in Trieste and the approval of law 180, the foundation for the era of psychiatric reform in Italy.⁴ All psychiatric hospitals in Italy have since closed and no new ones have been opened.

The Italian aftermath

Basaglia's imprint is still evident today in Trieste, where according to his successor, Franco Rotelli (1942–2023), his followers have nourished a model of 'permanent revolution' over time that has sustained a 'reinvented institution'. Trieste remains a collaborative centre of the World Health Organization (WHO), a place where health workers, social workers and volunteers continue to be trained on deinstitutionalisation, inclusion and recovery.

Trieste is not the whole of Italy, however, and the entire Italian mental health system cannot be described as 'Basagliano' today. The Italian anti-institutional movement had a polycentric character embodying strong desires for freedom and for the renewal of psychiatric institutions after the prolonged period of their neglect and degradation that had begun in the 1920s under Mussolini's fascism. It was anything but a unitary movement, debating different options from simple modernisation of the mental hospital to French-style 'secteur' psychiatry and on to Basaglia's highly radical proposal for the total closure of all psychiatric hospitals. Basaglia's skilful engagement with the press and media and his high prestige in public opinion and with some key figures in the political world were strategic in making the radical option prevail, despite considerable dissent. In the end, political decision makers had no alternative but to adopt his ideas, although with modifications that left him only partially satisfied.

The 40 or so years of development of mental health services since his death have seen a varied picture emerge from region to region, and sometimes even within the same region. In the absence of strong national coordination, especially since the regionalisation of the National Health Service in Italy in 2000, the evolution of mental health services has followed the vicissitudes of individual regional health services and, in addition to the Basaglian idea of deinstitutionalisation, has drawn from varied elements including received psychiatric practice, British epidemiology and social psychiatry and biological psychiatry of mainly American origin. Today Italian mental health services are a culturally heterogeneous system, eclectic with respect to models and levels of service provision, empirical and experimental in nature, perhaps an expression of typically Basaglian traits.

International legacy

Basaglia's impact crossed national borders. In 1969 he spent 6 months in New York visiting centres in North and South American. Husband and wife Franco and Franca Ongaro travelled the world to make their revolution known and learn from others. They visited the UK several times and held conferences in Latin America, forming an intense bond with Brazil, a country in which the recent history of the development of psychiatric services has been greatly influenced by Basaglian deinstitutionalisation. The Pan American Health Organization (PAHO)/WHO 1990 Declaration of Caracas owes a considerable debt to Basaglia's concepts for its theoretical underpinning.

Despite varying opinions about Basaglia, especially that he was often considered to be an anti-psychiatrist and excessively ideological, his ideas have permeated the culture of the so-called 'Global Mental Health' movement. This has been thanks above all to the activities of Benedetto Saraceno, who took his first steps in Trieste, becoming one of Basaglia's closest collaborators during his last years. Saraceno went on to direct the Division of Mental Health and Pathological Addictions at the WHO in Geneva for over a decade (1999–2010), giving rise to an era of profound renewal that produced legislative reforms and development programmes in dozens of member countries. Penetration into the English-speaking world has been more limited.⁵ Only a few of Basaglia's 900-plus pages of writings have been translated into English to date. In the UK, the narrative nature of his works, his preference for political and social analyses over natural or social scientific methods, the lack of systematically collected data to support his claims and the damning reports of Kathleen Jones and Alison Poletti on their visits to Italian Services all contributed to the lack of appreciation for his work in Britain.^{6,7}

Relevance today

Franco Basaglia was a product of his times, of the post-war commitment to liberty and national community. Within such a framework, a remarkably broad political consensus emerged about the imperative of deinstitutionalisation and community care. Many psychiatrists in Italy and internationally grasped the nettle, engaged with policy and research and worked with national and regional authorities to advance reforms. However, although many have been socially reformist in this way, very few were also socially critical like Basaglia and it is this that makes him particularly relevant today.

Deinstitutionalisation and the implementation of community care have been necessary steps towards improving the lives of people with mental health conditions. Research data and policy innovation have not been the sole determinants of moves towards deinstitutionalisation and community care; in addition, mental health patient and carer movements have also made major contributions. Nevertheless, many citizens find themselves unable to access mental healthcare and are excluded from community and society and deprived of the freedom to grow and contribute through participation. This is especially so in societies where gross inequalities prevail in economic status and access to digital information and social media.

Despite significant advances in neuroscience, psychopharmacology and psychological treatments since the 1950s, there has been a failure to prevent the increasing prevalence of mental illness and distress evident in the UK and elsewhere. The practice of psychiatry has become more restrictive and fragmented and the life expectancy of those with severe mental illness remains reduced by 10–20 years compared to the general population.⁸

It may be exactly the radical and critical nature of Basaglia's thinking and practice that can provide the essential missing elements to empower our profession. It can shake unhelpful complacency and conformism, loosen bureaucratic and corporate shackles and help the specialty face its challenges more effectively.⁹ Basaglia reminds us that freedom is (still today) therapeutic.

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