

Book Review

Strangers to ourselves by Rachel Aviv.

In March this year I did a personal development course which taught a definition of empathy that was new to me: 'being with another person's emotion without seeking to change it, and without losing yourself in the story behind it'.

'Strangers to Ourselves' is a major work of 'being with'. Though the second part of my definition, 'without getting lost in their story', is perhaps not an element that Rachel Aviv would subscribe to. In her prologue involving her own six year old self being diagnosed with Anorexia, she relates a recurrent experience of perceiving the boundaries between herself and other people as indistinct:

'On one side was Sloan, the tallest kid in the first grade. He had a perennially runny nose, the snot greenish. On the other side was Brent, who was chubby and breathed so heavily I sometimes checked to see if he'd fallen asleep. Their physical attributes seemed contagious. To protect myself, I tried to sit at the centremost point of my chair, as far away as possible from both boys. If I moved toward Sloan. I felt I'd grown too tall. If I inched toward Brent. I'd become fat'.

This feels auspicious for Rachel's approach to her subjects. She picks out a quote from William James who claimed that 'the ideal of ever science is that of a closed and completed system of truth'. She goes on to say that 'the book is about people whose struggles with mental illness exist outside of this "closed and completed system of truth."' Their lives unfold in different eras and cultures, but they also share a setting: the psychic hinterlands, the outer edges of human experience, where language tends to fail. I have chosen subjects who have tried to overcome a feeling of incommunicability through writing'.

Rachel senses clearly that language is always a removal from the immediacy of experience. The word 'blue' is not the same thing as the colour itself; there is always a gap between a concept and the essence of what it refers to. This gap tends to be disconcerting; all explanations of my suffering must largely fail to hit the spot. This might explain why many people with psychiatric diagnoses mould themselves and their expressions of suffering to fit their diagnosis.

So what an intrusion to impose a way of organising a person's experience. And what a sense of betrayal when that same way of organising fails to produce a recovery. One of the most fascinating case vignettes is Ray, a former nephrologist caught between two conflicting philosophies of Major Depressive Disorder. At the beginning of his illness Ray is admitted to Chestnut Lodge, at the time one of the most elite hospitals in the country. This was an institution whose mission statement was to cure mental illness by inculcating its patients with self-knowledge. To its practitioners, the idea of an antidepressant curing mental illness without the patient achieving insight into what had caused their problems was unfathomable.

Ray famously took the Lodge to court for failing to prescribe newly available antidepressants. But one suspects that the Lodge's

treatment was incomplete on its own terms. Rachel points out that 'although the Lodge's philosophy was that every patient deserved understanding, Ray's medical records suggest that his doctors did not like him'.

I wish Rachel had made more of how the Lodge's psychodynamic approach actually had very little to do with genuine self-knowledge. Instead she skips on: after the antipsychotic Thorazine was developed, 'many psychiatrists were confronting the possibility that people didn't have to understand their childhood conflicts to get well'. But this is true in any case, since the original cause of a problem is often totally different from the cause of its persistence.

Rachel's vaunted empathy is at its strongest in the story of Naomi, a young black woman from Chicago with four children whose story of mental deterioration is interwoven with her country's history of racism. What is striking here is the richness in the portrait of her upbringing. The Robert Taylor homes she grew up in, built in 1962, were at the time one of the largest public housing complexes in the world.

A resident once told the New York Times, 'I decided that to survive here, you had to be crazy, chemically saturated, Christian, or some kind of character'.

Episodes follow of foster homes and parental abuse. Naomi moves further into 'psychic hinterlands'. She becomes pregnant, then wonders if her twins had been planted into her womb by some sinister external force. Early on the most tragic day of her life she bumps into another woman on the sidewalk, and, when told to watch where she's going, infers that 'all the love had been taken out of the world'.

Easy to quote in an assessment proforma as evidence of disordered thinking. But it isn't just our brains and minds that keep us sane, it's our institutions too: the way they shape our habits and suggest our thoughts. What else is a person so alienated by society to believe?

'Strangers to Ourselves' is certainly an achievement in empathy, although there are moments of getting lost in the story. Rachel sometimes slips into an advocacy role for her subjects.

She is prone to assisting in her subjects defences, which though understandable is just arguably a reverse way of having their identity defined by their psychiatric histories. It's also a cheap form of affinity. For Ray, or anyone else wanting self-knowledge, why not seek to move beyond identity altogether, into the gap between language and raw experience, as in Tennyson's injunction to 'follow knowledge like a sinking star/Beyond the utmost bound of human thought?'

That would have been thrilling to read about. But simply being with Rachel, Ray, Naomi, Bapu, Laura and Hava was still a deep pleasure, with their flavours of lucidity and open-heartedness elusive to those of us too good at moulding ourselves to the stories of reason and put-togetherness which society tells us are ours.

Competing interests. None.

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