EDITORIAL

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Guest Editor

"If I could turn you on, if I could drive you out of your wretched mind, if I could tell you,
I'd let you know."

These wrenching words are etched indelibly in the minds of many members of my
generation who struggled to address with the twin evils of alienation and reification in
the mental health professions. In this faintly despairing, sometimes bitterly
confrontational manner, Laing voiced the sense of outrage and futility that gripped
him as he tried to convey the extremity of our collective predicament to readers of The
Politics of Experience. Thanks to the various modes and instrumentalities of
socialization -- family, school, Church, and so on, said Laing -- those whom society
does not actually drive mad are usually robbed of their most profoundly human
possibilities, and opt for a kind of pseudo-sanity that passes for the real thing. As a
result, he suggested, most of us are radically estranged from ourselves, from the most
intimate interstices of own experience, and yet profoundly oblivious to -- if not
comfortable with -- that fact. And none of us, not even seasoned psychotherapists, he
said, are free from some degree of complacency, collusion or complicity with "the
system."

These are fighting words, and whatever their intention, they had a profoundly
polarizing effect on Laing's audience, which in his hey-day included philosophers,
poets, playwrites, political activists and spiritual seekers, as well psychotherapists of
various persuasions. The sheer breadth and diversity of his audience, coupled with
Laing's personal frailties and failings, mercilessly circulated and/or exaggerated in the
media and popular press, contributed to a rapid decline in his formidable reputation,
which began in 1976 and continues, alas, to this day. As a result, many features of his
work that have lasting value and relevance to current trends and debates are largely
lost sight of in the discourse of the mental health professions.

This issue of Janus Head is dedicated to reversing that trend to some small extent, if
possible. Without denying Laing's personal foibles, we are trying to salvage the
treasures that lie strewn amidst the wreckage of his life. To that end, we have solicited
contributions from various quarters. Our "team" includes many old friends and
acquaintances of his who are featured, (with an introductory piece from me), in the
first section, which revisits different features of Laing's work, and the moving, and
sometimes deeply disturbing, effect of his enigmatic personality experienced, as it
were, at first hand. The second section is devoted to (mostly younger) authors who did
not know Laing personally, and is more issue-oriented, tackling the social, political
and therapeutic dimensions of his work, and their relevance to contemporary developments and debates in philosophy and psychotherapy, and the areas where these disciplines converge.

Section one, entitled *Life and Work*, opens with an essay by Daniel Burston, the only participant here who did not know Laing personally. Nevertheless, "R. D. Laing and the Politics of Diagnosis" attempts to situate Laing in the history of the mental health professions, and provides some much needed context for the various contributions that follow, most of which evoke portraits of Laing in specific moods, or at specific times in his career. I also ponder some of the deeper reasons for Laing's current neglect, a theme I return to in my closing reflections in the "Epilogue."

The second piece, entitled "Remembering Ronnie," contains some pointed personal reflections by Leon Redler, Steven Gans and Bob Mullan on a variety of themes, including Laing's contributions and gifts to posterity, the deleterious effects of excessive media attention and denigration on Laing personally, his understanding of wisdom, tradition and the need for "going to the source," the Philadelphia Association, past and present, and finally, Laing, Levinas, and the Prophetic sensibility.

The next piece, "Trick or Treat," by Joseph Berke, is a brief but illuminating memoir that addresses the mercurial, Tricksterish side of Laing's personality, with its ambiguous capacity for both helping and injuring others. While it addresses this feature as a pervasive feature of Laing's personality and treatment style, it focuses on events and experiences that occurred in the Kingsley Hall period, in 1965, when Laing was poised on the brink of international stardom.

During the Kingsley Hall period, Laing was experimenting -- legally -- with the use of LSD 25 as a adjunct to psychotherapy. Andrew Feldmar's paper, entitled "Entheogens and Psychotherapy," addresses this dimension of Laing's work in a sustained and focused manner. It begins with an account of his first LSD experience in 1967 with his academic supervisor in Canada, Zenon Pylyshyn, who participated with Abram Hoffer and Duncan Blewett in the first experiments with LSD-25 in Saskatchewan, and is followed by an account of several "trips" supervised by Laing in 1974-1975 when he was at the zenith of his career.

"Laing in Austria," by Theodor Itten, recalls Laing's visits to Switzerland and his subsequent sojourn in Austria, spanning 1986 to 1989. Long past the height of his fame, Laing was now in frail health, and trying to effect a "comeback" in Europe and the United States. In addition to giving us a candid account of his mood and state of mind at the time, this piece gives us an intriguing glimpse into two unpublished manuscripts, entitled "Schizophrenia: Sickness or Strategy"? (1967), and "The Lies of

Finally, "On The Legacy of Ronald Laing," by Professor F. A. Jenner, is a sober but sympathetic appraisal of Laing's contributions from the standpoint of a senior research psychiatrist well known in the U.K. Jenner addresses the philosophical roots and ramifications of Laing's ideas, including his affinities with Kierkegaard, Heidegger, Buber, Sartre and somewhat later, Gregory Bateson. He calls attention to Laing's courage, originality and his unwavering courtesy toward his psychiatric colleagues, but underscores the fact that, for all its undoubted originality, Laing's work was also part of the prevailing Zeitgeist and lacked the necessary attention to social policy issues that would help bridge the gap between the micro-social and macro-social processes and levels of discourse pertaining to the roots of mental disorder.

Section Two, entitled Theory and Therapy, begins with a wonderful paper by Gavin Miller, "Cognition and Community: The Scottish Philosophical Context of the Divided Self," that elucidates the Scottish philosophical context in which Laing's work evolved and from whence it derived some of its most salient features, including his anti-Cartesianism, his emphasis on the primacy of social relations, and his sympathy for the marginalized and oppressed. Outside of Scotland itself, David Hume, J. B. Ballie and John MacMurray are seldom cited as formative influences on Laing, nor is Laing remembered as a follower of their tradition. This essay makes good this glaring omission, and re-roots the prodigal son in his native soil.

During the 1960s, Laing's critique of mainstream psychiatry was conjoined with a vigorous condemnation of the wider social system it was supposedly designed to serve. Laing's scathing remarks about US imperialism, the arms race, the alienating role of families, schools and organized religion, etc., endeared him to the Left who later dropped him when Laing became more mystically minded, and withdrew from his radical positions and commitments after 1970.

However, while Laing withdrew from the Left-wing politics, and indeed, politics generally, he never recanted or repudiated any of his earlier work. He simply moved on, leaving the links between the micro-political and macro-political dimensions of his work open to doubt and interpretation. In R. D. Laing: The Philosophy and Politics of Psychotherapy, published in 1977, Andrew Collier drew attention to these lacunae, and in a sympathetic fashion, attempted to clarify the various "mediations" between the "micro" and "macro" political levels of analysis in the spirit of Herbert Marcuse, and thereby purge, contain, or mitigate the mystical and religious elements of Laing's work that had appeared belatedly, and accommodate what remained to the popular Left-wing project of reconciling Marx and Freud. In Anti-Oedipus: Capitalism and Schizophrenia, published in 1983, Deleuze and Guattari, adopted a
more hostile and dismissive posture, charging Laing with glaring hypocrisy, and with
complicity in the prevailing ideology and the very "system" that he denounced.

Laing felt that Collier's and Deleuze and Guattari's critiques, and others like them,
were based on a fundamental misreading of his work and an attempt to fit it into a
framework, or to hitch it to an agenda that was deeply foreign to it. In this same spirit,
Scott Bortle's paper, "R. D. Laing as Negative Thinker," argues that Left-wing
appropriations and condemnations of Laing frequently miss the point. Laing was not a
system builder, like Marx or Freud, and therefore the kinds of contradictions that
continue to vex their intellectual progeny did not trouble him much. Being an anti-
systematic thinker, Laing was more interested in posing questions than giving
answers, enabling us to experience and embrace the paradoxical and contingent facets
of existence, in a non-totalizing or negative dialectic (á la Theodor Adorno, perhaps).
His approach to phenomenology tends to stress method and a way of seeing things,
rather than a finished product or system. It seeks enlightenment and emancipation, but
not according to the dictates of any specific political agenda or perspective.

By contrast with Bortle's piece, which stresses the uses and indeed the necessity of
paradox, discontinuity and openness as ways of encountering (inner and outer) reality,
Brent Potter's paper "Comprehending Madness: The Contextualization of
Psychopathology in the Work of R. D. Laing," stresses the existence of strong threads
of continuity that link the disparate phases and emphases of Laing's somewhat
disjointed oeuvre. These internal linkages do not mesh with some overarching socio-
historical vision (á la Freud and Marx, for example), but they do lend his work a
degree of internal coherence, such as Laing himself hinted at in his letter to Theodor
Itten of August 1, 1989 (c.f. Itten, this issue, p. xx).

In a somewhat similar vein, we come to Miles Groth's piece, which is entitled "Laing's
Presence." Extrapolating from a brief but intense encounter with Laing in the 1980's,
Groth culls some telling passages about the practice of psychotherapy from Laing's
work, and in a somewhat conjectural but very thoughtful and persuasive way, ponders
the character, scope and contemporary relevance of Laing's impossible-to-replicate
psychotherapeutic style.

Next, Victor Barbetti's paper, entitled "Classification and the Treatment of the
Patient" re-examines the role played by mystification and reification in standard
diagnostic protocols at both the micro and macro political levels. Most mental health
professionals believe that diagnosis entails the accurate identification of a disease
entity or discrete form of psychopathology situated in the body, brain or unconscious
of the patient/client. Though he never questioned the grim reality of acute mental
disturbance, R. D. Laing argued that the process of labeling it in accordance with
prevailing criteria entails more mystification than accurate assessment, and that the
remedial interventions mandated by a specific diagnosis do not merely affect the individual concerned, but serve complex social functions by equilibrating extant social-systems at both the micro-political and macro-social level. At the same time, they often do violence to the person so labeled, by rendering their experience and the existential roots of the suffering opaque to themselves and others. Far from being a necessary prelude to treatment, it is often anti-therapeutic. Moreover, Barbetti notes, the social construction of the DSM is itself a thoroughly political-economic undertaking, which deliberately minimizes or obscures fundamental and as yet unresolved questions regarding the validity and reliability of these clinical constructs.

In a similar vein, Daniel Burston concludes with further reflections on the politics of diagnosis, reminding us that Laing's views on the limitations and pitfalls of Kraepelinian psychiatry, and the equivocal nature of sanity and madness in our time, are as relevant now as they were forty years ago.

Daniel Burston, the guest editor, and the regular editors of *Janus Head*, thank you for your interest, and welcome any of your thoughts or impressions that you care to share with about this issue by regular or e-mail.

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