

Soul Murder: Interpretation of the Schreber case in terms of the hermeneutic constructivist theory

Caterina Tanini

School of Specialization in Constructivist Psychotherapy, CESIPc, Florence, Italy

In 1903 Daniel P. Schreber, who had been diagnosed as psychotic, published his *Memoirs* where he described his experience of “nervous illness”. With this contribution, I meant to offer an interpretation of the case in terms of the hermeneutic constructivist theory, assuming that Schreber has experienced, after consistent invalidations in his relationship with others, a pervasive lack of recognition of his very existence and personal value.

Keywords: Schreber, hermeneutic constructivism, personal construct theory, uncompleted recognition.

Memoirs of a nervous illness

In 1903 Daniel Paul Schreber, who had been a respected German jurist before his hospitalization following a diagnosis of *dementia praecox*, published his *Memoirs* in which he described his experience of “nervous illness”. There he tells, in fact, he has been “ill” twice, both in consequence of mental overstrain derived from work: the first in 1884, at the age of forty-two, the second in 1893 and still in progress at the time of the drafting of his work. The first episode, during which he had been tormented by hypochondriacal ideas, was resolved completely in about a year, but in June 1893 Schreber was informed of his impending appointment as President of the Court of Appeal in Dresden. At the same time he began to make peculiar dreams, first related to a relapse of his former “nervous illness” and then, half asleep, he had the feeling that it really should be very pleasant to be a woman succumbing to intercourse. This idea was so foreign to his whole nature that he would have rejected it with great indignation if fully awake. Then Schreber took up the new job position that entailed an enormous burden of work and the need to achieve respect among his colleagues. In a few weeks, he began to sleep badly until one night, in anguish, he tried to commit “a kind of suicide”, which led to his internment in the institution where Professor Flechsig, his former psychiatrist, was working. After a few months, there was a further decline in his state, which coincided with the interruption of his wife's visits: one night he had an unusual number of pollutions, about half a dozen, and from then on appeared the first signs of communication

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with supernatural powers, particularly that of nerve-contact that Professor Flechsig would have established with him. Schreber began in fact to hear inner voices, probably belonging to dead souls, who incessantly spoke to him in a “basic language”, common to God himself, which used a term to signify its opposite. These souls communicated with him through the “nerve-language” in which his nerves were set in motion from the outside in a “compulsive thinking”. Schreber felt in fact constantly forced to think about something and subject to the “falsification” of thoughts and moods from the outside. He came to believe that the whole mankind had perished and those around him were not living people but human pictures produced by miracles. Schreber also developed beliefs about the “Order of the World”, according to which human soul would be contained in the nerves of the body, and God himself would consist only of infinite and eternal nerves. Regular contacts between God and human souls normally occur only after their death. He draws out the nerves from the corpses to subject them to selection and purification (“tested souls”) so that they can become part of God himself, a process that corresponds to the “state of Blessedness” in the afterlife (similar to sexual “voluptuousness”). God does not understand the living human being because, according to the Order of the World, he leaves his creation and does not interfere directly in the fate of peoples. The nerves of living humans, in fact, “particularly when in a state of high-grade excitation, have such power of attraction for the nerves of God that He would not be able to free Himself from them again, and would thus endanger His own existence” (2000, p. 24). Because of his ever-increasing nervousness Schreber had therefore become dangerous even to God. In these circumstances, the tendency of the “Order of the World” was to emasculate the “relatively most moral man” by transforming him into a woman in order to give birth to children and maintain the species. An increasing number of deceased souls wanted however to abuse the attractive power of Schreber’s nerves on the divine rays to snatch them and become antagonistic to God himself. The “miraculous structure of the Order of the World” suffered therefore a breaking, intimately connected to his personal fate: someone tried to commit on him (or, otherwise, he committed) a “soul murder” consisting in emasculating him for purposes contrary to the “Order of the World” (that is not to recreate mankind but to inflict him a snub and for the sexual satisfaction of a human being). This plot consisted, in fact, in handing over his body (transformed into a female one) to somebody (maybe Professor Flechsig) for sexual abuse and then forsaking it. At first Schreber saw his real enemy only in Professor Flechsig, then he began to think that God himself must have known of the plan, if indeed he was not the real instigator of the “cursed-play-with-human-beings”. Indeed, from the first beginnings of his contact with God Schreber felt that his body was continuously object of divine miracles (shape and size changes, compression, removal of organs, poisoning, paralysis, pain) as if his own existence was uncomfortable for God whatever his position or occupation was. In 1895, however, an “essential change in celestial conditions” occurred: because he felt the Order of the World imperiously demanded his emasculation, Schreber decided to surrender to his transformation into a woman. At the time, his power of attraction had already caused the dissolution of God’s nerves in his body, but the attraction lost all of its terror for these nerves, if and to the extent they met a feeling of soul- voluptuousness in his body in which they also participated. Therefore, it became necessary for the divine rays to receive continuously from him the impression of a woman abandoned to voluptuous sensations: God demanded constant enjoyment which was his duty to provide Him. At such conditions, God was friendly, otherwise he moved away and was hostile to him. In the relationship between Schreber and God voluptuousness had become “God-fearing”, that is it was “the likeliest satisfactory solution for the clash of interests arising out of circumstances contrary to the Order of the World” (2000, p. 252). Schreber concluded his *Memoirs* with the impression that in his future life some great and magnificent satisfaction was in store for him, in a sort of “equalizing

justice". Upon the form it would have taken, he could only make some assumptions: he could have been emasculated and generate an offspring by divine fertilization or a great fame could have been attached to his name surpassing that of hundreds of other people much better mentally endowed. Through this work Schreber achieved the suspension of his tutelage and the discharge from the asylum where he had been confined for ten years against his will, but he also aroused great interest among the contemporary and later psychiatrists and psychologists.

Different interpretations of the case

Over the years, *Memoires* have been considered from different points of view, first of all from a psychiatric perspective: shortly after the publication the work was reviewed by two specialist journals. Furthermore, Bleuler in 1911 included it among the clinical observations that led him to replace the concept of *dementia praecox* with that of *schizophrenia* in the psychiatric categorization, classifying the Schreber case in the paranoid subtype. According to this perspective, the author's ideas are delusions, whose erroneous and meaningless content differs from the objective reality and is merely an expression of a mental pathology. Psychiatrists of the time, as they would today, explained and dealt with their experiences of strangeness of the patient with a vocabulary, theory and a set of practices based on the pattern of a disease that afflicted him.

In contrast with this conception, however, the first psychoanalysts tried to provide an interpretation of *Memoires* according to their new theory. In 1907 the work was quoted by Jung, who then made it acquainted to Freud. In 1911 the latter wrote an essay about it through which he outlined his theorization of paranoia, whose symptoms would invariably serve to defend the person from unconscious fantasies of homosexual desire (regarding Schreber oriented towards his father and brother during his childhood and then projected onto his doctor). In the following decades, the work has been mainly read in a psychoanalytic perspective, which included Spielrein, Lacan and Klein, through interpretations more or less similar to the Freudian theory. In my opinion, both the psychiatric and the Freudian paradigm, even with their peculiarities, share a vision of people as victims of internal forces that move them and, basing upon realistic and objectivist assumptions, involve the entering of the person into diagnostic categories set by an external observer.

It was only in 1960 that Elias Canetti, in his essay *Crowds and Power*, where he collected concepts from various disciplines (anthropology, sociology, mythology, ethology, history of religions), provided a different reading of the work, according to which paranoia is an "illness of power". The whole Schreber's system is seen in fact as a representation of a struggle for power where God himself represents the antagonist. The "sentiment of the position" of the paranoid, as the one of the powerful, is that of a cosmic importance, usually threatened by a conspiracy or a catastrophe.

In 1973 Schatzman published *Soul Murder: Persecution in the Family* based on the observation that some people diagnosed as schizophrenic seemed to describe through their "illness", by symbols, their social context. He concluded that much of what is considered as madness can be seen as an adaptation to some learning situations, though maladapted in the outside world, and that living in certain families requires the use of devious or even bizarre strategies. In fact, Schatzman focused on Schreber's family relations. Daniel Paul was the son of the renowned orthopedist and pedagogue Daniel Gottlob Moritz Schreber, whose educational theories were later described as *Black Pedagogy* (Miller, 1983). It is known that Daniel Paul had an elder brother who committed suicide shooting himself at the age of thirty-

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eight after having suffered from “progressive psychosis” and “melancholy”. He had also three sisters, at least one of which diagnosed as “hysterical”. Schreber’s father thought that his time was morally lax and decadent because of the weakness in the children’s education and he planned to establish a “better society and race”. The pedagogical system he conceived was based on rigid moral and religious precepts and aimed at the complete destruction of the child’s will and at the suppression of any disobedience until the complete submission, even through the use of corporal punishments. This would have made it possible to become the “master” of the child forever with a word, a simple gesture of threat in a “magnificent relationship where the child is almost always dominated by a parent’s glance”. Moritz Schreber also believed that the child’s moral character was exposed to serious dangers arising from his own body, in particular relating to sexual impulses, so he had conceived a series of practices, exercises and tools to control and correct each gesture or position. These latter were made up of straps and metal supports to which the baby was tied at any time of the day and during sleep to force her or him into “correct” positions or to prevent bad postures or habits. However, it was not enough to control the actions of the child: a parent had to dominate also his/her feelings and motivations. In fact, children should not obey for a reward or for fear to be punished, or secretly desiring to disobey, nor even hold rancor to the one who punished them, but should do so because they know it is right. So, the child has to do exactly what the parents want but must also believe with conviction that it is what he/she wants, defining the situation of being controlled as self-control. In fact, Moritz Schreber used to say to his child that he could act differently but a good child does not want to act differently. In this regard, Schatzman redefines what many consider as an absence of personal boundaries or an inability of individuals defined as “schizophrenics” in distinguishing the “Self” from the “No-Self” in the terms of their family’s teaching that they must not or cannot live with a “Self”. In fact, Doctor Schreber used to suggest parents to make the children unaware of their own experiences he considered bad in order to generate, instead, the feelings he believed they ought to prove. Schatzman observes that if an individual considers some events occurring in her/his mind (thoughts, feelings, perceptions, memories) “bad, crazy, obscene, impure, dirty or dangerous” but wants to consider herself/himself “good, healthy, decent, pure, clean and safe”, she/he cannot do anything but exclude these events from the field of her/his consciousness. He noticed that in families of patients diagnosed as schizophrenic it is recurrent that a person (often a parent) orders another (often a child) to forget about thoughts, feelings or actions in order to protect himself/herself from an experience that he/she is afraid the latter may remember him/her. Such fear of certain possibilities of one’s mind that pushes to try to destroy them in others was defined by Laing (1965) *transpersonal defense*. Schreber’s father claimed that parents should join the children in the “battle” against themselves to suppress experiences and behaviours that he considered dangerous. But, Schatzman observes, in a battle that puts a person against himself/herself, he/she cannot win without losing: some experiences lived by Schreber during his “illness” can be considered as a clever attempt to deal with this contradiction. In fact, he lived in that period painful and humiliating body experiences, that he believed miracles, which impressively resembled to the practices and machines he had been subjected during his childhood or embodied linguistic and metaphorical expressions used by his father. Schreber also felt that his thoughts and his whole person were under constant external surveillance, but he never related it with his father. Schatzman hypothesizes that what is clinically defined as paranoia is often the partial consciousness of being or having been persecuted, but that some people cannot identify their persecutors because the latter did not permit it, persuading them to consider the persecution as love, especially if even the persecutors themselves consider it so. Therefore, who suffers a persecution hides him/herself to consider in these terms the persecution and he/she hides even to be hiding something. I

dedicated a larger space to this interpretation than to the previous ones, since it seems to me that some assumptions from which it moves can be shareable from a constructivist viewpoint. In fact, Schatzman attaches a fundamental importance to the social context of an individual in the formation of his/her identity and considers the person as actively engaged in relating with the others on the basis of personal meanings that the author is interested in understanding.

My attempt of reinterpretation of the case in terms of the hermeneutic constructivist theory

Assumptions

I came to know about the Schreber case many years ago through Freud's essay of which some statements, that I still find convincing today in the light of personal construct theory, impressed me. Freud, in fact, thought that symptoms of "paranoids" had a profound sense and that in their delusion there was more truth than some people were willing to believe. According with him, in fact, the paranoid builds the world up again by the work of his delusions not more splendid but at least so that he can once more live in it. Therefore, the delusional formation, which we take to be the pathological product, is actually an attempt at recovery, a process of reconstruction. After a long time the case came again to my mind in relation to the most recent elaborations of the hermeneutic constructivist approach regarding the forms of recognition (Chiari, 2017b). I wondered what professional hypotheses I could do about Schreber, what I would see by looking at him through the "eyeglasses" of personal construct theory (Kelly, 1955) in his hermeneutic elaboration provided by Chiari and Nuzzo (1996, 2010). In this attempt, I moved from the epistemological assumption of the *constructive alternativism* (Kelly, 1955) according to which we assume that all of our present interpretations of the universe are subject to revision or replacement, and that there are always some alternative constructions available to choose among in dealing with the world. Therefore, I did not imagine achieving a perspective more adherent to reality than those given in the past or to add elements to them, but to provide an alternative interpretation, an attribution of meaning among the many possible ones. Consistently with these assumptions my interpretation can only be hypothetical, especially because I came to know about Schreber only through his *Memoirs* and I did not have therefore the chance to implement Kelly's simple suggestion: "If you don't know what's wrong with a client, ask him; he may tell you!" (1955, p. 201). Reflecting on Schreber's work, I adopted a *credulous approach* based on respect rather than on suspect, which assumes that a person's narrative is intrinsically true, that is, the most significant way to convey his/her experience. In doing this it is not necessary to adhere to the other's view or to approve it, but rather to adopt an attitude of *acceptance*, described by Kelly as the willingness to see the world through the other person's eyes, though it may appear profoundly different from how we see it through ours.

A disruption in the Order of the World: The disorder

In this perspective, the disorder is not seen as a disease, an external entity that "alters" the person, but as a part of the organizing process of his/her personal experience. In fact, Kelly considers every person constantly engaged, as a scientist, in making predictions and hypotheses about events and to give them a meaning. In this perspective, behavior is an experiment that allows us to verify the predictive capacity of our anticipations and to modify

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them when they are invalidated by the events. However, under particular circumstances people can be reluctant in subjecting to verification their constructs. They could be afraid that the result puts them in an ambiguous situation in which they will no longer be able to predict or control the events: it may be that they do not want to be devoid of their constructs in the fear of having to submit them to a premature verification. Under these circumstances takes place the disorder, conceptualized by Kelly (1955) as “any personal construction which is used repeatedly in spite of consistent invalidation” (p. 831). This leads to a halt in experiencing that Winter (2003) attributed to the tendency of the person to repeatedly employ the same strategy in order to avoid an invalidation. Walker (2002) introduced instead the notion of *nonvalidation*, effectively expressed through a quote from Efran (2000): “If you can’t win, then avoid losing. If you can’t be right, avoid being wrong.” The disorder would therefore be the choice of not subjecting to verification one’s anticipations, both in the sense of validation or invalidation, a state of “suspension” in which the person could remain in different ways. Furthermore, people subordinate any change to the conservation of their identity: when they anticipate the possibility of losing their self-organization as a result of the assimilation of new experiences, they choose to cease changing by suspending their experience (Chiari & Nuzzo, 2010). In a constructive perspective, therefore, the disorder and the related symptoms are considered the current best possible expression of the person's attempt to maintain an adaptation with the environment and an organization of meaning. On the base of these assumptions, I wondered about which constructions Schreber had chosen to suspend his experience, which anticipations he preferred not to verify and how he maintained this elaborative choice. We know that, before “getting ill”, Schreber became President of the Court of Appeal in Dresden, a position he reached after a brilliant career as a jurist. He tells he always had been a person of “calm nature without passion, clear-thinking and sober, whose individual gift lay much more in the direction of cool intellectual criticism than in creative activity of an unbounded imagination” (2000, p. 69). He was as well devoted with all his soul to the profession, in which he was moved by ambition and desire of consideration by his colleagues. He also states: “Few people had been brought up according to such strict moral principles as I, and have throughout life practiced such moderation, especially in matters of sex, as I venture to claim for myself” (2000, p. 249), describing himself in various passages like a morally stainless man. Furthermore, for Schreber seem to be very important the dimensions of respectability, honesty, and personal dignity, which, at a superordinate level, could link the theme of professional scrupulosity to that of “morality” and blamelessness in interpersonal and sexual relationships. These aspects, in the perspective I refer to, represent the Schreber's *core role*, that is, the recurring elements of his way of getting in touch with others and with the world. In particular, I hypothesize that they outline a *dependency role*, that is, his relationships have been particularly focused on seeking confirmations to these aspects rather than playing a role with others on the basis of an understanding of their perspective. According to this hypothesis, I assume that Schreber made extensive use of a *constriction of parts of self*, so as to exclude from his own awareness or from the relationship with others all the aspects of himself which he felt incompatible with the possibility to carry out his role. Only few readings of the work have provided hypotheses about the circumstances of the onset of the symptoms. Schreber, on the contrary, had a precise supposition about the causes that had led him to illness: “I have twice had a nervous illness, each time in consequence of mental overstrain; the first [...] was occasioned by my candidature for parliament, the second by the extraordinary burden of work on taking up office as President of the Senate of a Court of Appeal in Dresden, to which I had been newly appointed” (2000, p. 44). About the first episode, we know that he lost the election he was candidate for (Niederland, 1963) and shortly thereafter he had to be hospitalized for six months in a clinic because of the “hypochondrial ideas” that tormented

him. Regarding the second, Schreber says, instead, he began to feel badly from the moment he was informed of his upcoming appointment. A few months later, when he actually took up the office, he found a heavy burden of work. Besides, he was “driven maybe by personal ambition, but certainly also in the interest of the office, to achieve first of all the necessary respect among” his “colleagues and others concerned with the Court [...] by unquestionable efficiency. The task was all the heavier and demanded all the more tact” in his “personal dealings with the members of the panel of [...] Judges over which” he “had to preside, as almost all of them were much senior” to him “and anyway they were much more intimately acquainted with the procedure of the Court”, to which he was a “newcomer. It thus happened that after a few weeks” he had already “overtaxed” himself mentally (2000, p. 47). Consistently with the notion of *disorder as nonvalidational choice*, I therefore suggest that both with the electoral failure and with the appointment as President of the Court of Appeal Schreber had been exposed to the risk of clearly verifying his adequacy, especially in terms of capacity and competence. This may have led to a *threat of guilt*, that is, the anticipation of not recognizing himself anymore in the terms previously outlined, and even completely lose the role played till then in the relationships with the others. In order to avoid this possibility, Schreber ceased to make experience, subtracting from verification the aspects invalidated in the relationships. At first, he seems to have mainly resorted to *constriction*, leaving the job and consenting to the hospitalization in the clinic where he had been treated in the past. Then he came even to meditate on suicide, described by Kelly as an extreme form of *constriction*, an act meant to validate his own life, the ultimate defence to preserve his identity, even at the cost of survival. At one point, however, Schreber describes a sudden change in his perception of events, concurrent with the cessation of his wife's visits, the only important person with whom he still had contact. He was convinced that the whole mankind was over, that he remained the only living man, and that the patients and the staff of the clinic were not real people but pictures, illusory projections; I connect this feeling to his experience of loss of his role in the relationships with others. At the same time “appeared the first signs of communication with supernatural powers” and Schreber began to develop an articulated system of beliefs about his relationship with God and the Order of the World. I assume that, in the terms of the personal construct theory, Schreber has faced a progressive *loosening* of his constructions, making them vague and therefore less falsifiable, thus reducing the vulnerability to invalidation. The experiences narrated in *Memoirs* also seem to indicate an extension of the *range of convenience* of some of the author's constructs (for example, he stated that the sun was a whore or that birds talked to him) and, therefore, the onset of new and seemingly bizarre connections between previously unrelated constructions. I also hypothesize that the unusual dreams associated with the onset of his symptoms were indicative of a *loosening* that had allowed the entrance of elements (especially sexual) which were excluded, suspended, by a tighter construction. Schreber's experiences seem to deal with the most meaningful themes of his own life: the symptomatic behavior, as Tschudi (1977) observes, “is behaviour which obliquely gets at the issues which are important for the person” (p. 321). It seems, in fact, that the convictions he had come to allowed him to recover an idea of himself as morally elected, a victim of the others' sins, called to give up an ordinary life to fulfil the divine will to preserve the order of the world. In this narration, it was also possible to include and reconcile elements previously excluded: voluptuousness had become “God-fearing”, “the likeliest satisfactory solution for the clash of interests arising out of circumstances contrary to the Order of the World” (2000, p. 252).

Checkmate: The interpersonal dimension in “psychosis”

I wondered at this point why Schreber's most viable elaborative choice was to cope with a *threat of guilt* through *loosening*. In this regard, Bannister (1963, 1965) found that people tend to tighten the relationship between constructs when they experience a validation and to loosen it when they experience an invalidation. This led Bannister to formulate, as the basis of the schizophrenic thought disorder, the *serial invalidation* hypothesis, which may occur when a person finds that his/her expectations, mainly related to the interpersonal construction process, are constantly wrong. The person can cope in different ways with this experience, but if he/she continues to “fail” despite the variation of his/her strategies, it may be necessary to loosen the links between the constructs so that his/her system no longer gives rise to clearly verifiable anticipations, placing the person in a situation where he/she can no longer be wrong (nor, on the other hand, be right). It can therefore be assumed that “schizophrenics”, in order to cope with the experience of having mistaken too often, loosen beyond the point where some relationships among the constructs that allow a new tightening of the system remain.

The Schreber case, in particular, made me think about what often observed in people diagnosed as obsessive, in whom the only part of the system with a tight structure is that related with obsessive thoughts, as if they lived in the only understandable world while outside everything is vagueness and confusion. If something undermines this residual area of construction, only chaos and disintegration of the whole system remain (Fransella, 1974). We know, in fact, that Schreber had been tormented by hypochondriac ideas about his slimming with which he, if allowed, would have tried to cope by the constant controlling of his weight. Furthermore, he describes himself as precise, meticulous, rigorous, “coldly intellectual” and “morally stainless”. Kelly (1955) attributed the limitation of one's ability to adjust to the vicissitudes of life to the *impermeability* of his/her superordinate constructs. I assume, in fact, that the “divine miracles” to which Schreber felt he was subjected, in the absence of permeable superordinate constructions suitable for giving meaning to his experience, represented the use of comprehensive, preverbal and extremely loose constructions.

Bateson, Jackson, Haley and Weakland (1956) formulated the *double bind hypothesis*, which highlights some interpersonal events that may contribute to a serial invalidation in the terms described by Bannister. A double bind occurs in the context of a particularly significant interpersonal relationship when communication presents an inconsistency between the explicit speech and the metacommunicative level. Furthermore, the recipient of the message has no way of deciding what of the two qualifies the other (that is, what to consider valid), he/she isn't allowed to metacommunicate or “leave the field”.

Laing too, who had been widely interested in psychosis, in *The Divided Self* (1960) and in his later writings (1961, 1965; Laing & Esterson, 1964) highlighted the interpersonal dimension of the disorder, comparing the experience of the individual with a firm core of *primary ontological security* (which may experience his/her own being as real, alive, whole; as differentiated from the rest of the world so clearly that his/her identity and autonomy are never in question; as a continuum in time and space) to those of whom “cannot take the realness, aliveness, autonomy, and identity of himself and others for granted” and has to become absorbed “in efforts [...] to prevent himself losing his self” (1960, pp. 42-43). In fact, according to Laing, the feeling of “being-in-the-world”, that is to exist for others who in turn exist for us, is fundamental to our identity, otherwise we suffer from *primary ontological insecurity*, a condition often expressed by the patients themselves in terms of being dead for the others. In 1961 Laing introduced the distinction between *confirmation* and *disconfirmation* by the others regarding our identity and existence: “the characteristic family pattern that has emerged from the study of families of schizophrenics does not so much involve a child who is subject to

outright neglect or even to obvious trauma, but a child whose authenticity has been subjected to subtle, but persistent, mutilation, often quite unwittingly” (p. 91), speaking in this regard of *mystification*: “no matter how [a person] feels or how he acts, no matter what meaning he gives his situation, his feelings are denuded of validity, his acts are stripped of their motives, intentions and consequences, the situation is robbed of its meaning for him, so that he is totally mystified and alienated” (pp. 135-136). Therefore “in his life situation the person has come to feel he is in an untenable position. He cannot make a move, or make no move, without being beset by contradictory and paradoxical pressures and demands, pushes and pulls, both internally, from himself, and externally, from those around him. He is, as it were, in a position of checkmate” (1967, p. 95). Laing believed, therefore, that some forms of disconfirmation, that he named *schizogenic*, were more destructive of self-development than others. Watzlawick, Beavin and Jackson (1967) resumed Laing’s hypothesis, distinguishing between *confirmation*, *rejection* and *disconfirmation*. In the first two cases a person accepts or rejects a definition provided by the interlocutor, while in case of disconfirmation he/she negates the reality, the legitimacy of the interlocutor as a source of self-definition, conveying the message “you do not exist”. This latter typology, when used as a reiterated pattern of communication, according to the authors’ researches, results associated with the onset of psychosis.

“Being-among” the others: The uncompleted recognition

More specifically, I reflected on Schreber case in the light of the latest elaborations of Chiari and Nuzzo’s (2010) hermeneutic constructivist approach. Chiari (2016a, 2016b, 2017a, 2017b), resuming the recent works of the philosophers Honneth (1992) and Ricoeur (2004), believes that people presenting a disorder described in terms of nonvalidational choice had experienced a lack of mutuality in their early intersubjective relationships, with prejudice to the completion of the process of recognition. In these cases, the person experiences a lack of confidence in the place he or she occupies in the social domain, that is in the recognition of his or her role, and he/she constantly engages in the search for visibility or consideration. The development of identity would be linked, therefore, to the mutuality of intersubjective recognition, that is, to the willingness to recognize each other as dependent from each other, but at the same time as fully individualized, in a continuum between recognition and misrecognition. The possibility of a mutual recognition would be located in the intersubjective balance between the two poles of fusion on one hand, and self-affirmation in solitude on the other, giving rise to the subjective experience of “being-with” others (being recognized as a person having an individuality of his or her own, and to respect as such), while an imbalance between the two poles would be the basis for paths of uncompleted recognition that can be further differentiated. In the absence of a solid sense of recognition, the person would look for consideration, construing his or her own experience as *being-among* the others, addressed to a particular construction of self that the person strives to receive from them.

Specifically, I hypothesize that Schreber had followed a *path of uncompleted recognition in the form of contempt*, where an imbalance between the two poles leans towards the self-affirmation in solitude and that represents the development of a *path of dependency channelized by guilt* (Chiari et al., 1994). In such cases, the relationship between parent and child is such that the latter construes his/her parent as a figure willing to meet his/her needs provided that he or she succeeds in complying with the parent’s expectancies. But the parent supposedly participates in the relationship showing *hostility* as a protection from *guilt*: so, he/she cannot approve the child because engaged in proving to be right and the others wrong. The child construes therefore invalidated his/her repeated attempts at playing a role with his/her parents based on the construction of their expectancies, thus experiencing recurrent

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transitions of guilt, despite the resort to *constriction*, that is, the exclusion from the relational field of all the expressions of him/herself supposedly incompatible with the possibility of playing a role with the others. Besides, a regularity in the others' behaviour can be construed only loosely, and, complementarily, the children's construction of their personal role will show features of loosening. In the course of development, people come to see the preservation of a recognition (though uncompleted) as dependent on their meeting others' expectations, sacrificing the possibility of their self-affirmation in the relationships. Thus, a basic tension between self-expression and constriction of parts of self dominates their social lives and characterizes the disorder: they are threatened both by a recognition from others (which would imply exposing themselves to invalidation) and a rejection (which would imply definitive loneliness and the despair of being oneself). In parallel, they live a dilemma between the engagement in relationships requiring a self-abasement and the self-affirmation entailing solitude. The preferred relational choice they pursue goes, therefore, towards detached but reliable relationships and towards the allocation of all the *dependencies* on themselves. The core narrative of this path is about a construct of acceptableness vs undesiderableness. I formulated this hypothesis on the basis of the most nuclear issues for Schreber, in particular the theme of proficiency opposed to inadequacy, which characterizes one of the sub-forms of this path of uncompleted recognition. Actually, these issues were considered of crucial importance even by Schreber's father, who based upon them all his child's education, trying to uproot from him bad thoughts and feelings before the child would become aware of them, and inculcating those he hoped for. In this regard, I consider particularly significant that one of the "delusions" of his son was about the falsification of his thoughts and moods, which he felt that were induced to him from the outside. In his *Memoirs* Daniel Paul Schreber states that he has strictly followed these principles for his whole life, excluding from his relational context or from his own awareness all the aspects of himself that he retained incompatible with the possibility of playing a role with others. I assume that the extent of such constriction on the self has been extremely wide, pervasive, and that, except for this system of rules and precepts, much of the others' behaviour and of his own core role had been construed loosely by Schreber. I find particularly significant, in this regard, what Schreber says about God's language, in which every term can mean also its opposite.

He writes: "My body has continuously been the object of divine miracles. [...] Rays did not seem to appreciate at all that a human being who actually exists *must be somewhere*. Because of the irresistible attraction of my nerves I had become an embarrassing human being for the rays [for God], in whatever position or circumstance I might be or whatever occupation I undertook" (2000, p. 151). Although Schreber's perspective at that time was far from that shared by most of us, I find that this quote and the definition he gives of it in terms of "soul murder" exemplify very clearly the experience of a pervasive lack of recognition in the relationships with others of one's own existence and personal value.

The meeting with the other's outlook

In the light of the so far presented reflections on the conception of personal identity as intrinsically narrative and relational, I wondered what opportunities the meeting between Daniel Paul Schreber and an hermeneutic constructivist psychotherapist could have offered. I do not know if he would have been available to this attempt and if, after the loosening that he underwent, it would have been viable and meaningful for him. However, I tried to hypothesize how I would move. I imagined that, at the time of this meeting, the patient had already dealt with an experience of guilt, defined as the awareness of dislodgment of the self from one's core role structure (Kelly, 1955) that is, the invalidation of the constructs that allow the person to

maintain his/her identity and existence. This would have led him to the development of a disorder, that is to cease experiencing by subtracting from a verification the aspects of the self that were invalidated in the relationship. The goal I would set for a clinical work with Schreber would be, therefore, to encourage the resumption of an elaborative movement by reconstructing a narration of himself with the others. As I previously stated, I hypothesized that his relationships had been until then aimed at searching confirmation of his adequacy and value rather than at playing a role with the others on the basis of an understanding of their point of view. I would therefore seek to promote the development of role constructs through the construction and differentiation of other people, hoping for the emergence of different, orthogonal, constructive dimensions than those involved in the disorder in order to make their invalidation more unlikely. To support this movement of the patient I believe that would be fundamental a therapist's attitude consistent with the Kellian assumptions of *acceptance* and *credulous approach*, that is, of genuine curiosity for his perspective. On the basis of what Schreber himself tells, this might be a completely new relational experience for him, the first in which the other's outlook on him is curious instead of judging, interested in knowing him rather than in blaming or praising him. I imagine that this curiosity for his way of looking at the world could legitimize for the patient the existence of his own point of view and, at the same time, the plausibility of many different, equally legitimate, outlooks and their possible coexistence. Starting from the understanding of the patient's point of view, one could promote a reinterpretation, an alternative narrative of his experience, engaging with him in the formulation of hypotheses and in verifying their viability. This would be favored by the use of an hypothetical and propositional language, that is, from the invitation to the patient to consider the constant availability of new alternative constructions to interpret the world. I imagine that this could greatly amplify the chances that Schreber would feel in dealing with others, allowing him not to see them exclusively as judges of his own value, but as people engaged with him in a process of mutual knowledge and changing.

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The Author

Caterina Tanini is a psychologist and psychotherapist specialised at the CESIPc School of Florence with the hermeneutic constructivist approach. She works as a clinical private practitioner in Siena and Florence.

Email: tanini.caterina@gmail.com



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