

Normality in the Light of Madness: Applications of Accompanied Auto-Analysis (Self-Rehabilitation) in Novel Scenarios

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ABSTRACT

The paper describes the concept of psychological death, destruction and decomposition, the technique of Accompanied Auto-analysis and the application of both concepts in novel scenarios. It shows the relationship between lifestyle and psychological life (being) and psychological death, destruction and decomposition (not being). These concepts have been developed based on the more than 42-year experience accompanying people diagnosed with severe psychosis, mainly schizophrenia.

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Introduction: The Theoretical Toolkit and the Case Study

Having worked for more than 42 years with people diagnosed with so-called

Schizophrenia, I identified and understood in a better way two key concepts that are

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crucial for us to also understand some of the main vicissitudes of the human mind. I am referring to the very close relation that exists between each person's lifestyle in its widest and narrowest sense, and the idea that the mind, what we commonly call the psyche, can be partially or totally destroyed, something I have called psychological death, destruction and decomposition. It also became clear to me that under certain special circumstances, the mind, the psyche, can somehow recover or even resuscitate, sort to say.

This idea, this hypothesis if you prefer, was somehow floating in my mind since I was a child and a teenager. During this past month, I was able to put together those experiences, that I like to call my pragmatic and theoretical tool kit. From a theoretical perspective I had learned to understand the vicissitudes of the human mind with the help of Sigmund Freud and the vicissitudes of human society with the help of Karl Marx. Somehow it was a Freudo-Marxist experience, probably in the sense of the Frankfurt School. I would like to say, the experience we later developed was a Socialist Utopia on the light of madness, as I will describe in the following paragraphs. The following step which came spontaneously was to apply what we were beginning to understand to diverse clinical situations and different social conflicts, including but not limited to the peace process in Colombia and South America.

With all of the above in the back of my mind, in 1982, I began to accompany homeless people diagnosed with schizophrenia. Trained as a medical doctor, as a psychiatrist and as a psychoanalyst, I felt that a great revolution had to happen within the psychiatric world and that is how I was part of the big anti-psychiatric movement of the sixties and seventies. That practical experience led me to consolidate the theory of psychosis understood as a process of psychological death, destruction and decomposition and the technique of accompanied auto-analysis or accompanied self-rehabilitation. This approach was initially used to accompany and try to understand homeless people diagnosed with severe psychosis, in a safe haven which we called Fungrata ("La granja").¹ Later we created a Therapeutic town in Sopó, Colombia, different from the one that has existed for centuries in Geel Belgium. Some people called our safe haven a therapeutic Community. We have no objection to that. The fact is that for more than 25 years, a community developed where homeless people diagnosed with schizophrenia, lived and worked. That was the "socialist utopia on the light of madness".

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The Theory of Psychosis Understood as Psychological Destruction and Decomposition

Can the mind as such be destroyed and decompose? Can it recover and somehow resuscitate? My answer is yes in spite of the inevitable controversy that this statement generates. The living mind is in my opinion correctly described in terms of the conscious and the unconscious by Sigmund Freud (Freud, 1915). To understand psychosis, I had to introduce the concepts of Psychological Destruction and Decomposition, and Psychological Life and Real Being (Fergusson, 2015a & 2015b). In my view, the psychoanalytic theory of the mind dedicates itself to describe what I call Psychological Life: Repressed psychological material is completely alive, unconscious material does not decompose, what has been subject to the mechanism of splitting remains alive, and so on. Observation has led me to state, that psychologically speaking, psychosis is equivalent to Psychological Destruction and Decomposition. This means in a certain way, that psychosis, as such, is nothing. Most of what we call psychosis, are really signs of psychological remains and detritus. Psychosis occurs when the Real Being (Psychological Life) of the psychological human being cannot and does not prevail. I have come to accept that psychosis and psychotic symptoms have no special meaning, that they are not defensive, and that they are just what is left of what once was the Real Being of Psychological life. The question is, which is the Psychological Life that is being destroyed, or is already decomposing.

The real being and psychological life are therefore the opposites of psychosis. From a different perspective, I am close to some of Fairbairn's observations about the way in which the very existence of the ego becomes compromised in schizoid states (see Fairbairn, 1941). The difference between Fairbairn's approach and mine lies in the fact that he finds the essence of psychosis in psychological splitting, and I find that essence in Psychological Destruction and Decomposition. In my view, psychological repression and splitting are both part of Psychological Life and are less harmful than the mechanism of Psychological Destruction and Decomposition. On the other hand, I accept the possibility of a predisposition to so-called psychosis, in the sense of a group of very particular susceptibilities both in quantity and quality, that can generate psychological wounds and lead to Psychological Destruction and Decomposition. Are

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such susceptibilities inherited and because of that, certain events become traumatic and cause Psychological Destruction and Decomposition? Do certain traumas generate such susceptibilities? Does a combination of inherited factors and traumas explain these susceptibilities? We do not know. What we do observe is that a very particular traumatic factor is essential to understand psychosis.

In people with psychotic states, we find Psychologically Destroyed and Decomposed areas together with Psychological Living areas. Psychological Destruction is sometimes reversible. Psychological Decomposition is by definition irreversible. As therapists, we are obliged to accept the possibility of resurrection or at least of false decomposition. In practice, we cannot lose hope and, in fact, all sorts of surprises can be found. Sometimes psychological material is, so to say, buried alive. This is shown, with different terminology, in Courtney Harding's paper regarding the seven myths about schizophrenia (Harding & Zahniser, 1994). For the person with psychosis what is at stake is a struggle between psychological LIFE and psychological DEATH. When I say that the person has "to become an expert on his own mind" and "design his life in a creative and ingenious way", I mean a way in which such a person can obtain Psychological Life and Real Being as opposed to the alternative of total or partial Psychological Destruction and Decomposition. That is why designing each one's lifestyle, is so important in Accompanied Auto-analysis. If the person keeps trying, failure after failure, at least in theory there is always a lifestyle that can potentially recover those areas that were damaged and destroyed, as long as they have not been subject to decomposition.

Certain apparently insignificant internal and external circumstances can make the difference between the possibility of enjoying Psychological Life (Real Being) or suffering Psychological Destruction and Decomposition (psychosis). Internal circumstances may change, and what today creates Psychological Life may tomorrow generate Psychological Destruction and Decomposition. Sometimes there is a Decisive Moment, an instant, probably similar to the moment of vision described by of Martin Heidegger (Inwood, 2019), during which people take the road either towards Real Being and Psychological Life, or towards Psychological Destruction and Decomposition.

What I am saying is simply that psychological material, inasmuch as it is part of the material living world, can be destroyed. Failure to accept this would mean that psychological material is made of a different substance. We would be close to accepting a different, non-material, form of existence. Besides my work with people with psychotic states, I have had another source from which I have drawn my conclusions about psychosis, Psychological Destruction and Decomposition, Psychological Life, Real Being and Accompanied Auto-analysis in general. I am referring to my experience with writers, trying to discover the secrets of creativity. There is a popular myth about psychosis in the sense that it can be productive. I have observed on the contrary that it is totally unproductive. People who suffer from severe mental illness and have been creative have managed to create in spite of their psychotic functioning and not because of it. The path to psychosis and creativity is similar up to a certain point, but completely different in the long run. In fact, they become opposites inasmuch as creativity is Psychological Life and Real Being and Psychosis is Psychological Death, Destruction Decomposition.

All that has been said implies that we must, so to say, recover the scientific status of the idea of the Mind. While trying to do this, we have to face the fact that we are working with the most subjective area we can think about in the material world. That is why the well-known old question once again has to be answered: How can we reach objective conclusions while working with extremely subjective phenomena? The matter gets even more complicated if one realizes the fact that the mind is "out of fashion". Nowadays, brain reductionism prevails. We must on the other hand accept that the material world has different levels of integration and that each one of them has its own laws and different methods which have to be used to observe each of those levels. It is within this paradigm that the mind, as such, has to be recovered in a scientific way. Qualitative leaps occur between the biochemical, the psychological and the social levels of organization of the material world. We must find the pertinent questions to understand the area of reality in which we are interested. In our case the mind. Sometimes unknowingly we are the ones who tend to perpetuate the idea that the qualitative method deserves less trust and that it is scientifically speaking "second class". As it always happens, the real enemy is inside ourselves. Modern methodological developments allow a much more rigorous approach to the qualitative method.

Qualitative research was somewhat discredited not because it is intrinsically bad, but

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because those who have used it in the past were either unwilling or unable to use it in a more rigorous way. As I have explained elsewhere, I believe that the Abductive method described by Charles Pierce can be of great help in this task.

In my opinion, it goes without saying that if the mind is dead, psychology in general is dead. It's interesting to see that many people deny the existence of the mind as a real level of organization of the material world, but few deny the existence of "the social" as one of those levels. Conceptually, I see no real difference between the two. Post-modernism and the deconstruction of theories go parallel to what is happening with the concept of the mind. The crises of paradigms have to be taken into account if we wish to understand what is happening with the concept of the mind. If we manage to demonstrate that the psychological level of integration of the material world does exist, it will again be impossible to limit ourselves to conceptualize the brain forgetting about the mind. This is what we mean by the Scientific Recovery of the Mind.

Phases and Technique of Accompanied Auto-Analysis

Let me now review the Technique of Accompanied Auto-analysis. Bearing the eleven Basic Rehabilitation principles in mind (described elsewhere) together with the theoretical considerations about psychosis understood as Psychological Destruction and Decomposition we gradually arrived, through trial and error, at what we call Accompanied Auto analysis. This term is sometimes mentioned also as Accompanied Self rehabilitation, although with time we avoided the word rehabilitation which is often linked to distrust and stigma.

Accompanied Auto-analysis is a technique that has been the product of our work both with institutional and Private patients. It is a new combination of old and well-known technical procedures and theoretical considerations. Recognition of the relative failure of other techniques were essential to arrive at Accompanied Auto-analysis. It is as if we said to the patients: "We are not able to help you, you have to do it yourself. I shall share with you the scientific knowledge we have, but you must take control". We

recognized that we had failed so we handed over the responsibility of their treatment, together with the power of knowledge that until then had been kept for ourselves. In this sense, in our view, there is no way back. Therapists should never again have the monopoly of scientific knowledge. We have observed that one of the main reasons why many therapists who pass as experts in schizophrenia have seen very few patients, as it was pointed out by Michael Robbins (1997), is due to the fact that we did not have a technique that was comfortable enough for the therapist.² Accompanied Auto-analysis tries to identify realistic procedures through which therapists are able to work with schizophrenics, enjoying therapy, and thus being able to persist through large periods of time. In this sense, Accompanied Auto-analysis is both patient and therapist centered. We used this technique initially with schizophrenics and later with different kinds of people. It is no longer possible for us to distinguish if the technique of Accompanied Auto-analysis was first, or if the theory of Psychological Destruction and Decomposition was the beginning. They depend on each other. The essence of the Theory of Accompanied Auto-analysis technique lies in the fact that the Accompanied Person obtains scientific knowledge about the everyday functioning of one's mind. The patient is given the responsibility for his own therapy together with the power of scientific knowledge.³ By scientific knowledge we are not only referring to the sort of information you would find in a Journal. The fact that the patient is familiar with the details of as many psychotherapeutic techniques as possible, is most useful, even though most of them are obviously not applicable by themselves. The latter is especially useful to encourage creativity while redesigning one's lifestyle. The patient also must take an active role in the evaluation of his own process. Through this, the Accompanied Person arrives to a self-made self-knowledge. We have identified the healing and humanizing power of scientific knowledge inasmuch as it generates change and psychological growth.

Our basic hypothesis is that there is a way whereby any person or any so-called schizophrenic can organize his life and create a life system that will diminish the patient's risk of becoming psychotic. If the patient persists in that idea, he can try again and again until he finally finds the way. For those who need a daily 24-hour therapy the only way to obtain it is precisely through a change in their life system.

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Accompanied Auto-analysis can be divided into three main phases: Preparatory, Intensive and Permanent. During the Preparatory Phase the Accompanied Person has to become an expert on his own mind. The main characteristics of this Phase are the following:

1. The Accompanied Person has to learn about psychosis, schizophrenia, general psychopathology, psychology and psychoanalysis, and reach a high level of knowledge of these issues. This knowledge has to include clinical experience.
2. We took seriously the popular joke according to which "shrinks are usually crazy people". That is in fact often true, and we have the hypothesis that having the knowledge a shrink has improves the prognosis of his own mental illness if he happens to have one. So, we decided to give that knowledge to our patients.
3. The Accompanied Person has to study in detail his psychological history. He has to learn how a good Clinical and Personal History is elaborated so that he can prepare his own.
4. During this and all other phases, Accompanied Auto-analysis may or may not replace traditional psychotherapy, but all other aspects of the comprehensive treatment of schizophrenics must be preserved. Strange as it may seem, different psychotherapies or even psychoanalysis may be carried out simultaneously with Accompanied Auto analysis. Accompanied Auto analysis must be used instead of nothing. It is compatible with anything that tries to avoid Psychological Destruction and Decomposition and promote Real Being and Psychological Life.
5. The Accompanied Person has to become well aware of all the details about the technique and theoretical foundations of Accompanied Auto analysis. He completes this phase when he has obtained reasonable scientific knowledge about the mind, his mind and his so-called mental illness.

During the Intensive Phase the accompanied Person has to redesign his lifestyle. While doing so he has to bear in mind that it is better to be a genuine neurotic or psychotic than a pseudo-healthy person. The main characteristics of this phase are the following:

1. The Accompanied Person can initiate this phase when both he and the Accompanying Therapist decide. The basic goal is to design a new flexible form of life that takes into account all that has been learned in phase one.
2. The Accompanied Person agrees to dedicate himself to the Intensive Phase of Accompanied Auto analysis, assuming it a priority in his daily life.
3. The Accompanying Therapist and the Accompanied Person must meet at least twice a week. The duration of each meeting should be determined by the latter as far as possible. The Accompanying Therapist must organize his time to be able to satisfy such needs as far as possible. Besides planned meetings, the Accompanying Therapist must be available by phone or by any other system. Video communication through the Internet is especially useful. The Accompanying Therapist should listen and reach some occasional insights together with the Accompanied Person. The essential work is mostly done by the Accompanied Person himself.
4. At the end of the Intensive Phase the Accompanied Person has to design a new, realistic and flexible system of life.

The main characteristics of the Permanent Phase are the following:

1. What has been practiced and learned throughout the Preparatory and Intensive Phases has to be maintained and improved.

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2. The Accompanied Person and the Accompanying Therapist must organize a meeting at least once every three months, and besides that, if possible, they should meet whenever the Accompanied Person wishes.
3. At least once a year, for at least 15 days, the Intensive Phase must be repeated just as it was previously described.
4. A flexible lifestyle must be maintained, as well as flexibility in any emotional or working activity in which the person is involved.

We have observed that Indirect Treatment is essential for the Accompanied Person. It means working on some psychological mechanisms that are apparently far away from psychosis but because of their relation to Psychological Destruction and Decomposition and/or to Psychological Life and Real Being, they must be taken into account. Each Accompanied Person has to identify the basic issues of special concern in his own Indirect Treatment. One of the issues that we have identified more frequently as essential to avoid Psychological Death and Decomposition has to do with resentments. By resentment we mean a process through which a person, in a more or less conscious or unconscious way, renounces his original and real wishes because he feels very often wrongly, that he would not be able to gratify them due to his deficiencies and weaknesses and, instead, develops false wishes. The Accompanied Person has to recognize the falseness that is induced after someone goes through the above-mentioned process. To avoid psychological destruction and decomposition the person has to recover his most cherished wishes and goals.

The other aspect that we have identified as crucial in the Indirect Treatment has to do with Provoking Acts. We call a Provoking Act the one that makes you do what you do not like to do. The Accompanied person has to become a real expert in detecting situations that are provoking for him. Our evidence shows that this is a basic prognostic factor. Provoking Acts are the main cause of Psychological Destruction and Decomposition in the provoked person, and the basic source of social discrimination and guilt feelings. The latter are especially harmful inasmuch as they facilitate Psychological Destruction and Decomposition. The only way to recover Psychological Life and Real Being after being provoked is to use what we call "auto forgiveness".

Much attention has to be given to the Accompanying Therapist. The ideal personality of the Accompanying Therapist is the one we described for therapists in general. Someone whose Real Being and Psychological Life are more developed is going to find his work much easier. It is most important that he allows the patient to be really creative and

ingenious, and this is difficult to achieve if he has not been able to do that to a reasonable extent in his own life. The real person of the therapist is essential, because in Accompanied Auto analysis you cannot be artificial in any way. What is most important is that the Accompanying Therapist is willing to auto-analyze himself each time he works in Accompanied Auto analysis. It is desirable that he undergoes Accompanied Auto analysis himself. He must be a person who is not too moralistic, and it is desirable that he really ignores what others should do with their lives. Morality in its infantile and primitive form can correspond to Psychologically Destroyed and Decomposed areas in so-called normal people.

The Accompanying Therapist must be able to create an atmosphere that will help both him and the Accompanied Person, to really enjoy the whole process of Accompanied Auto analysis, no matter how hard it can be. He must have a high degree of confidence about his technique and he should know how to recognize and use his sense of humor which is one of the most efficient therapeutic tools we know. The Accompanying Therapist can, in principle, be any mental health professional. The Accompanying Therapist must be able to choose the Accompanied Person and vice versa.

Finally, we shall offer a brief description of the type of Results that we are obtaining through Accompanied Auto-Analysis:

1. **Effects on the Crisis:** The fear of a crisis both in the Accompanied Person and in the Accompanying Therapist is greatly diminished. Any mental health professional knows that the word crisis has been more or less synonymous with failure, both for the patient and for the mental health professional. This changes dramatically with Accompanied Auto analysis. When they do occur, crises tend to be much less invalidating, shorter and definitely much more creative. The handling of crises changes enormously, and the Accompanied Person has the feeling that he knows what he has to do. Welcoming a crisis has a most striking effect when it is seen as an opportunity.
2. **Effects on the attitude towards mental illness:** What other authors call the Subjective experience of schizophrenics changes dramatically with Accompanied Auto-analysis (Strauss, 1989; Jenkins, 1997). The Accompanied Person's and the Accompanying Therapist's ambivalence towards mental illness is positively modified. Weaknesses, wounds, psychological pain and symptoms, are seen as part of each one's unique psychological process, and the Accompanied Person learns how to handle them in an ingenious and creative manner.
3. **The Liberating effects of Accompanied Auto analysis:** Real liberty is the consciousness of necessity. To be free is to know one's own capabilities and limitations and to accept the inexorable social psychological and biological laws, so being able to cope with all that. To be free is not to do what you wish. It is more to know why you wish what you wish. Accompanied Auto analysis works with this idea permanently. Accompanied Auto analysis is also liberating in the sense that Psychological Destruction and Decomposition is the worst

form of psychological mutilation that we know, even worse than repression and splitting. Accompanied Auto analysis also helps diminish the inevitable human alienation that our society produces.

4. **Other effects of Accompanied Auto-analysis:** Productivity, the capacity to enjoy life and have emotional and sexual involvement and social acceptance, tends to increase parallel to the use of Accompanied Auto analysis. Research of this condition is facilitated due to the fact that with Accompanied Auto analysis Accompanied Persons tend to become eager to help science.

The biggest challenge of Accompanied Auto analysis-both for the Accompanying Therapist and the Accompanied Person is to have the intelligence and flexibility to adjust and make changes in the lifestyle whenever necessary. Anyone can imagine all the implications this can have with the external world, with other people, and so on. This explains why people who undergo Accompanied Auto analysis can look unusual, but the fact is that they have no choice. It is a choice between psychological life and psychological death. The person must learn how to handle different situations causing the least possible harm to others and to himself, and by doing this he finds another challenge for his intelligence and his creativity.

These different phases have led us to resume the following four basic pillars of Accompanied auto-analysis: (1) ignorance as a recognition of what we do not know; (2) taking leadership of one's own process; (3) becoming an expert in oneself; and (4) redesigning one's life system (Fergusson, 2015b).

Novel Applications of Accompanied Auto-Analysis

Accompanied auto-analysis was later successfully applied in different group interventions in the contexts of Colombia's peace processes. During the peace negotiations of the Colombian government and the National Liberation Army (ELN) guerrilla group, it was effectively used with diverse and non-clinical populations. Later, it was applied to different groups in the context of the Colombian Truth Commission (2019-2022). These experiences proved that accompanied auto-analysis was a methodology that allowed constructing dialogue between rivals and on very sensitive topics. Somehow, we were able to better understand psychological and social conflicts on the light of madness.

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One key question that has guided us in our work has been how a psychoanalyst can contribute to a peace process. The application of accompanied auto-analysis, and the theory of the mind I described at the beginning of the paper, has allowed us to reach a series of core hypothesis and conclusions. We need to identify and handle the state of emotional emergency we usually find in those situations. This is linked to our fear of peace and our fear of change. Our interventions require handling a series of deep psychological wounds and feelings of guilt. We have come to understand that the whole concept of psychological transformation requires being deconstructed.

The psychoanalytic posture allows a special way of working with the conflicted parts in a negotiation, with our rival and within one's own delegation, with which most of the intense emotional conflicts arise. Remaining faithful to the psychoanalytical posture is absolutely key. One element of this is the constant submission of one's thoughts and responses to internal scrutiny, trying to understand what is going on in one's own self and one's relationships. It also means seeing political life not as a mere power play, but as a more complex matter of relationships between individuals, groups and communities.

Being able to listen, to handle emotions and to use psychoanalytic training to work with damaged relationships has been crucial to introduce innovative ways of working in peace negotiations. It is evident that these processes are not linear, and this implies that crises are not a failure in the negotiation, but part of its normal course.

Conclusions

Having understood that the mind is something that can be destroyed and decomposed, allowed us to appreciate in a new way what psychological life is. As we conceive psychosis as Psychological Destruction and Decomposition of the mind, we were able to develop a technique to treat and accompany people to transform their lifestyle and achieve a recovery of their psychic life. Applied to non-clinical scenarios, Accompanied Auto-Analysis proved to have novel effects in the contexts of peace negotiations and in the understanding of the psychological effects of peace processes and other sensitive topics in society. New scenarios still await to be explored, that can benefit from the application of the technique of Accompanied Auto-Analysis, and the Theory of

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Psychological Damage and Decomposition when applied to the new challenges the world is facing nowadays.

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Footnotes

1 : "The farm", in Spanish.[↵](#)

2 : Personal communication, 1997.[↵](#)

3 : For our explanation we will take the case of a male person. The same process can be applied to females as well.[↵](#)