# Is the Fundamental Problem of all Human Beings the Schizoid State?

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To begin, I want to state clearly the thesis of my paper. On the one hand, there is strong evidence for the existence of a 'problematic' individualised schizoid state as is made known in much of the psychoanalytic literature and in clinical psychiatric writings. The common aetiology is environmental failure and results in a distinct individual pathology which may respond to various forms of treatment. However, my interest here is to explore an additional perspective: that the schizoid state is a corollary of the human condition and that the 'problem' arises not from this fact but from the secondary intra-psychic and socio-cultural responses to it. This response being essentially an amalgam of denial, the creation of an illusion of a unified self, the establishment of cultural values which attempt to eliminate schizoid phenomena from healthy functioning and the employment of projective mechanisms to instil the schizoid into a minority of 'sufferers'.

The schizoid 'state' suggests to me something more pervasive and enduring than a purely clinical portrait of the term. My formulation will be that the human being's experience of self-consciousness is inherently traumatic and that the inevitable consequence of this is a self-regulating manoeuvre on the part of the psyche that is schismatic in nature. I will also be attempting to elucidate the mechanisms whereby this schizoid state has, in the social collective, been split from awareness and disowned through projective processes.

'The term schizoid refers to an individual the totality of whose existence is split in two main ways: in the first place, there is a rent in his relation with his world and, in the second, there is a disruption of his relation with himself.' (Laing, 1960),

This statement seems to me to be as accurate and succinct as any description of the schizoid state I have come across. Although in later writings he posits the schizoid state as the only authentic response to an alienated culture (Laing, 1964) there remains a flavour of the pathological in his descriptions. Whilst Laing goes further than most in seeing the Schizoid as ubiquitous to humankind he nevertheless, like Freud and Klein (see later), retains a vision of a potentially unified self. On the contrary, I will demonstrate herein that Laing's description can reasonably be seen as depicting not some unfortunate, pathologised, individual but rather some essence of what it is to be a socialised human being. I will present evidence of a fundamental requirement for schismatic processes in the psyche emanating from an emergent socially embedded, meaning-seeking, self-aware, self-important being. In this paper I want to avoid a simple restating of schizoid phenomenon as a pathologised, individual struggle and thereby

steer clear of becoming mired in the semantics of psychopathology. The pathologising and necessity for the treatment of the schizoid has been fully elaborated elsewhere (ICD 10, 1992, Dowson and Grounds, 1995, Guntrip, 1992) and it is not my purpose to re-state this here.  Rather I want to try and place the phenomena in the context of what it is to be human, endowed with a self-aware consciousness and immersed in a culture of contemporary, westernised, capitalist industrial society. What interests me in the present paper is not so much the dissection and taxonomy of the schizoid state but its position and function in the totality of the human condition.

My initial researches into the schizoid state revealed one glaring conclusion: that being schizoid is a very bad thing to be. For example, an internet search for the term produced 65000 results and some 95% made reference to pathology, aetiology and treatment. The schizoid personality disorder is ubiquitous in this arena. However, it may be argued that the development of the term 'personality disorder' in relation to the schizoid was based more on moral and legal considerations rather than strictly clinical ones (Berrios, 1993). For example, Prichard (1835) defined 'moral insanity' and Maudsley (1868) categorised the same as someone with 'no capacity for true moral feeling'. These are hardly rigorously scientific medical diagnoses and the legacy of this foundation can be found in present-day psychiatric taxonomies (ICD 10, 1992)

From such a clinical perspective we seem to be dealing with what are decidedly 'odd' individuals. Individuals, who do not appear to 'fit', do not seem to have the requisite humanity to join in easily with the usual ebb and flow of human relationships. Research findings present a mixed picture of the difficulties encountered by schizoid individuals. Such persons are frequently perplexing and uncomfortable for those in relation to them and the schizoid character style has been described as the least socially successful (Johnson, 1994).  On the other hand, there is evidence to demonstrate a correlation between schizoid personalities and creativity and giftedness (Storr, 1993, Sass, 2001, Wolff, 1995), and the efficacy of the schizoid analyst (Buechler, 2002). Whilst it is clear that schizoid traits are a positive advantage in certain occupations (Wolff, 1995), this does not redeem the social loss experienced by such individuals. However, it has been shown that individuals diagnosed as schizoid when children show little or no appreciable diminution in life satisfaction or achievement as adults (Wolff, 1995). Wolff proposes the explanation that once schizoid children are released from the relative tyranny of school; the enforced socialisation within fairly unforgiving norms, those same children may thrive. In the same work, Wolff also fails to demonstrate any appreciable link between diagnosed schizoid children and later serious psychiatric disorder or anti-social conduct. I do not wish here to move towards romanticising the schizoid position as it manifests as a clinical syndrome – the loneliness and social confusion involved can be truly horrifying - my intention here is to move towards highlighting the possibility that some, if not much, of the distress experienced by such individuals is part of a social construct rather than inherent in the way of being. The way in which we, as a culture, respond to the schizoid state may bring us closer to an understanding of the 'fundamental problem' rather then the fact of the schism itself.

In his writings, Das Unheimlich, (Freud, 1919) Freud states that the uncanny is in the nature of experience of the (apparently) unknown which may be frightening, and that such fear originates from a re-animation of that which we have previously repressed. If the schizoid state is indeed an integral part of the human condition and the schizoid style is generally socially unsuccessful and confounding to reason then, according to Freud's formulation, there exists adequate reason why the manifestation of the schizoid state in overt human behaviour would be a source of fear.

Further, as Klein teaches us an understanding of projective mechanisms, particularly the splitting and throwing out of the 'bad', it is not difficult to demonstrate how through the initiation of social prejudices the 'schizoid' person is relegated to a state of social isolation and enmity. The hostility in this instance is most commonly expressed through the medium of ridicule but more sinister forces are sometimes summoned against the 'odd' and the 'strange' in our communities at times of increased social crisis and unrest. (Pyatt, 2003)

It is not difficult to perceive the legacy of moral and culturally motivated psychiatry in current descriptions of schizoid personality disorder. Clinical description assumes a rightness, a healthiness, in ways of being which favour extroversion over introversion, social adaptability over inner-directedness, dependence over independence, attachment over detachment, absolutism and certainty over paradox and pragmatism, consensus consciousness over radical thought, reality orientation over creative fantasy and desire for sociability over preference for solitude. Such descriptions presuppose the superiority of a way of being which has attempted to eliminate schizoid phenomena from ordinary human functioning. I have proposed that this state of affairs can only be maintained by further splits and projections. It is possible that those individuals who display the more obvious schizoid traits are required by the rest of us to bear the whole of the phenomena. In a post-industrialist, capitalist culture, the schizoid is probably the least successful characterological strategy and therefore the impetus to disown and project schizoid traits is further supported by cultural imperatives.

**The Schism and the Development of Psychoanalytic Thought**

By briefly reviewing and evaluating the work of Freud, Klein, Fairbairn and Lacan I intend to demonstrate a development of thought from schizoid as response to environmental failure and intra-psychic conflict through to schizoid as inevitable concomitant of self-consciousness. Common ground amongst the foursome is however to be found in an appreciation that a primary, perhaps *the* fundamental, adaptive mechanism is to be found in the phenomena of splitting, the schismatic mechanism underlying the schizoid state. Indeed, Ferenzi states this principle even more baldly in suggesting that every living organism seems to react to unpleasant stimuli by fragmentation. (Ferenzi, 1930)

Freud's conception of the developing ego was as out of the Id and coalescing through processes of introjection of, and identification with, lost objects. (Freud, 1923) This concept has been maintained and developed by others, notably Erikson (1959) who formulated ego development as a synthesis of self-images, together with affirmation, or otherwise, of such synthesis by external reality. Kernberg (1976) writes: 'an authentic self can come about only when diverse self-images have been organised into an integrated self-concept…' In Freudian terms, the schizoid state, which corresponds to a schism in the integrity of the ego, comes about when there 'is a conflict between the demand by the instinct and the prohibition by reality' (Freud, 1940, 275). In contradistinction to the usual synthetic function of the ego, the ego has the ability to split psychic reality and thereby produce an 'artful' (Freud, 1940, 277) solution to what Laing would later call the double-bind situation (Laing, 1964). Freud goes on:

> 'He replies to the conflict with two contrary reactions, both of which are valid and effective. On the one hand, with the help of certain mechanisms he rejects reality and refuses to accept any prohibitions; on the other hand, in the same breath he recognises the danger of reality takes over the fear of that danger as a psychological symptom and tries subsequently to divest himself of the fear. It must be confessed that this is a very ingenious solution of the difficulty. Both of the parties to the dispute obtain their share: the instinct is allowed to retain its satisfaction and proper respect is shown to reality. But everything has to be paid for in one way or another, and this success is achieved at the price of a rift in the ego, which never heals but increases as time goes on.' (Freud, 1940, 275)

In contrast, Melanie Klein rejected Freud's view of primary narcissism and the phase of undifferentiation at birth and instead proposed a primitive ego structure, which would be engaged in elementary relationships from the outset. For Klein, the primary task of the undeveloped ego is the mastery of anxiety – anxiety arising from the operation of the death instinct, separation anxiety and anxiety resulting from organic frustration. The nascent ego is compelled to develop a fundamental defensive apparatus, largely through splitting and the initiation of introjective and projective mechanisms.

For Klein this fundamental ego is either spilt in its conception by the opposing forces of the life and death instincts or becomes split almost immediately as a result of the child's view of frustration and pain as persecutory and the consequent development of part-objects as a basic building block of the self. 'I believe that the ego is incapable of splitting the object – internal and external – without a corresponding splitting taking place within the ego.' (Klein, 1946)

This splitting of the ego is necessary to support and maintain the denial of psychic reality that was required to keep the 'bad' object out of existence. The development of feelings of omnipotence further support this process in that:

'Omnipotent denial of the bad object and of the painful situation is in the unconscious equal to annihilation by the destructive impulse. It is, however, not only a situation and an object that are denied and annihilated – it is an object relation which suffers this fate; and therefore a part of the ego, from which the feelings towards the object emanate, is denied and annihilated as well.' (Klein, 1986, 182)

This passage is remarkably similar to that of Freud, previously quoted herein, in that the price of psychic and social survival is a sacrifice of the unity of the ego. Also similar is that Klein shared Freud's view of the healthy ego as being coalescence and an amalgam of identifications with introjected, whole, redeemed good objects. Klein's portrayal of the split is here somewhat earlier, and more inevitable, than Freud's.

W.R.D. Fairbairn in his commentaries on Klein shared her rejection of the Freudian primary narcissism and affirmed the existence of a nascent, object-relating ego. However, in contrast to Klein, Fairbairn maintained that 'the pristine personality of the child consists of a unitary dynamic ego' (Fairbairn, 1954, 107) which splits as a consequence solely of environmental frustration. For Fairbairn, this splitting is the basis upon which all further pathology of the self is built – the individual finds refuge from the catastrophe of the primary split in other, secondary neurotic techniques.

Thus far, the schizoid state is conceived as a reaction to environmental failure and there remains a notion of a pre-existent healthy, unified self. However, according to both Freud and Klein, the healthy ego, the authentic self, is representational in that it is composed of introjected images. It also is a very plastic entity being capable of distortion, schism and denial, even of itself. The question now arises as to how can an authentic, 'real' self be any such thing being as it is formed of capricious imprecise images, memories, fantasies, myth and legend about ourselves?

According to Lacan, the internalisation process which, in psychoanalytic tradition, is the formative process of the development of the 'authentic' self is entirely false (Lacan, 1956). The very existence of the all-too-necessary ego is evidence of a schism which has drawn the subject away from identification with the real and into a state of alienation and illusion. Thus, a mistaken belief that the symbolic he has created, the ideology of the self, *is* the real self. This specular ego develops during his 'mirror stage' (6 – 18 months) and is born of the infant's impossible desire for organic self-mastery and of the consequent miss-identification of itself with its apparently unified image in the (real or metaphorical) mirror. The development of language further reinforces the infant's attachment to the symbolic as a substitute for the real. The infant becomes bound to its image by linguistic representations, by words and names. For example, the image of me as 'John' places me not with my actual self but into a system of an order of linguistic signs wherein 'I' am no longer defined by my direct lived

experience but by the linguistic order itself. In essence, Lacan separates signifier from the signified and gives the signifier a separate life of value and meaning, not directly concerned with the signified. Signifier and signified are two distinct orders separated by a line impenetrable to signification. 'It is the chain of the signifier that the meaning insists without any of its elements making up the signification.' (Lacan, 1957)

The inevitability of this split into the 'idolatry' of the symbolic is essential for the reason already mentioned i.e. to provide an illusion of self mastery but also because it is an absolute requirement of admittance to the value-systems of other human beings. The schizoid requires that the other become schizoid that they might join the human race. According to Lacan, the ego is a dead image and in our schizoid narcissism we worship it and the living subject is relegated to the unconscious. In this way, the real, living subject may never be known. Just as 'the word is the murder of the thing' (De Saussure, 1966), the subject alienates himself by naming himself and by being named by others.

> 'I am what I think', therefore I am: divide the 'I am' of existence from the 'I am' of meaning. This splitting must be taken as being principle, and as the first outline of primal repression, which, as we know, establishes the unconscious." (Lacan, 1966)

Fairbairn proposed that the schizoid state is inevitable and universal because parental failure is inevitable. Lacan goes further in stating that the schism will occur even if the parenting is perfect: that it is existential – to be human is to submit to the developmental necessity of internalisation and a schizoid alienation from reality.


**The Fundamental Problem and the Trauma of Consciousness**

By way of proposing an extension to the thought of Lacan, I want to speculate further on the traumatic nature of consciousness. For Lacan the 'real' is essentially unknowable. I think he was correct in relating the real, and the frustration with the real, to the organic inadequacy of the body. The organic is inadequate in another way: of itself and its sensuality, it provides no satisfactory source of meaningfulness to the self-aware consciousness. The organic self can be perceived but not 'known' in ways that convey meaning - in this way I cannot 'know' my liver or my skin. There exists an essential split here in perceiving through the sense organs, and knowing through the action of consciousness, which has the potential to confer meaningfulness.

'Man cannot stand a meaningless life' (Jung, 1959) so man is impelled to seek to create meaning where, in nature, he finds none.  In this sense the primary function of language is no longer communication but the establishment and maintenance of meaning and value. Hence, following Lacan, we discover the illusory nature of all meaning and value and its fundamentally schizoid quality. Further, Giovanna Borradori

(2004) in an interview with Jacques Derrida (2004) has him proposing that it is impossible to escape this split – meaning comes in the guise of the 'transcendental signified' and whilst it may be an illusion, it is a necessary illusion. His construction of the word 'difference', which is an amalgam of the words 'differ' and 'defer', shows language as the ground in which meaning is endlessly deferred yet constantly posited.

Self-consciousness begets self-importance and self-importance, in an uncertain and essentially meaningless universe, begets anxiety. The motive energy which propels humankind into language and the fundamental schizoid state can therefore be seen as the need to assuage this anxiety through the construction of meaning over and above the purely phenomenal sensations of existence.

This now begs the question: how can something which is an integral part of the human condition become the 'fundamental problem of all human beings'? From the perspective we have now reached it might be akin to proposing that the fundamental problem of all black people is that they are black. We might say that this is indeed true in a context where racial prejudice is stimulated by the presence of black skin. Furthermore, in the world of the black only the blackest have a problem. So it may be with schizoid phenomena. To accept that the schizoid state is existential in nature does not eliminate the fact that environmental and intra-psychic factors may well make the situation worse for particular individuals. I have already proposed that there is a cultural imperative to the denial and projection of schizoid elements. Only the most schizoid in a community will suffer the indignity of carrying the illusion of a pathology which is, in fact, shared by all.

I have argued that the schizoid state can indeed be viewed as fundamental to the human condition. There remains a consideration of what might be meant by the application of the term 'problem'. If I take on face value the proposition that the schizoid state is a problem I want to ask: where is the proof of harm and on whose authority is the harm defined? For Freud and Klein and Fairbairn the harm lies in the aetiological environmental and cultural failures, both inter and intra-psychically, which do not support the healthy development of a unified ego. According to Lacan, the harm emanates not from the schism itself but from the illusion of unity, and the consequent building of a supporting, collusive cultural edifice. The sin of man lies in his failure to recognise and accommodate the schism.

The OED defines 'problem' as 'a thing thrown or put forward; hence, a question propounded for solution, a set task, a problem'. Given the foregoing, I think it reasonable to discount the proposition that the schizoid state is, in this sense, a problem. It is more akin to a dilemma, which can be explored, experienced and lived with in a more or less agreeable way.

To be explicit in my conclusion : on the one hand, in submitting to the pre-eminence of certain cultural presuppositions there is compelling clinical evidence for the

existence of a schizoid pathology within which a select proportion of the human race 'suffers' and hence can be helped by therapeutic interventions. However, I think I have additionally shown that the schizoid state can reasonably be viewed as an inherent element of the human condition. The ensuing harm lies not in the fact of the phenomenon, but in the denial of the illusory nature of human mastery and meaningfulness and in the attempt to eliminate, largely through projective mechanisms, schizoid elements from socially supportable modes of human functioning.

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