## **Book Review**

ALL MY CHILDREN - Jacqui Lee Schiff 1970. Pyramid Books NY.

The Cathexis Reader: Transactional Analysis Treatment of Psychosis. Jacqui Lee Schiff 1975. Harper & Row.

In 1965 Morris and Jacqui Schiff took a schizophrenic youngster into their home with the object of treating him by re-parenting - the obliteration of the malignant influences of the family of origin, along with a recapitulation of the person's childhood and upbringing in a new family and with new 'parents'. The success of this audacious venture soon led to the adoption of further 'children' and then to the establishment of a research and training organisation, the Cathexis Institute. These two books describe what the Schiffs do, along with the theoretical framework they have developed in the course of their work. There have been other accounts of the successful treatment of psychosis; but few convey the authoritative message that runs powerfully through these books. In the hands of therapists with the Schiff's combination of personal commitment and theoretical clarity of thinking, schizophrenia is now a solvable problem. This claim will come as a shock to most people immersed in the world of British psychiatry, where psychotherapy is commonly regarded as a marginal activity suitable only for the mildly-disturbed. The Schiff work, however, has implications which range far beyond the treatment of the severely-incapacitated psychiatric patent. Much of the theoretical material is of wide applicability: moreover the Schiff's treatment philosophy raises profound questions about the therapy relationship in which sufferer and healer meet in order that one of them undergo change.

'All My Children' reads like a novel - presumably due to the influence of the co-author, Beth Day. It is a moving and personal account of the Schiff's early experiences with the re-parenting of disturbed patients and the development of their treatment ideas. In roughly chronological sequence we are taken through their first encounters with Dennis, diagnosed as a paranoid schizophrenic and soon to become their first 'child'; his regression to childhood: the adoption of further disturbed youngsters until the 'family' numbered around fifteen: and in great detail, the daily drama of coping with, containing and confronting their fears, delusions and violence. We share Jacqui's anxieties as they wonder in the early days how much they should support their patients' regression, or they are forced to challenge those to their 'children' who are no longer working to get well. There are frequent suicide attempts, horrific encounters with the natural parents of their patients, heart-rending moments when they are compelled to give up on those who fail to respond. But by the end of the book, a short four years after their tentative beginnings, most of the stories have happy endings. Seventeen successfully re-parented people have left to work, study, marry and have children; a second house has started taking in patients for re-parenting: outside interest in their work has led to the establishment of a trainee programme. The pioneering days are over.

In contrast to this highly readable account of the Schiffs' ideas in action, the Cathexis Reader is a densely-written and often difficult theoretical work. Written five years after 'All My Children', it contains much new material derived from the work with psychotics but of general relevance to TA theory. There are chapters elaborating the concepts of 'passivity' and 'discounting'; child development is reviewed in terms of the various forms and stages of the symbiotic relationship between the child and his parents: the chapter on pathology gives the current understanding on hebephrenia, paranoia, hysteria, etc in terms of ego-stage structure and typical treatment issues. There is also a full discussion on the mechanism of regression and the therapeutic environment in which a regression may be supported. I found the book stimulating but tantalisingly sketchy in its coverage of the material. The ideas are highly condensed, and little impression is conveyed as to how they are actually used in therapy.

The foundation of the Schiffs' treatment philosophy is their commitment to providing their patients with real parenting relationships in a family-like setting. This means thay are prepared to do for their patients everything that parents do for their children. Patients are expected to give up their ties with their previous families and invest in forming new primary relationships with the therapists. They are told they will be taken care of and coped with by their new parents. In the protected setting of the new 'family' and with this unconditional commitment by the therapists/parents to meet all the needs of the patient/child, psychotic regression is encouraged. In order to work towards a healthy resolution of his early childhood disturbances, the psychotic can opt to escape to a comfortable time on the developmental experience - often prior to one year of age. The Schiffs regard this as a decision taken by the person, but once under way it is irreversible. Within a week or less, the person finds himself 'locked' into the experiences and behaviour of a very young child and unable to mobilize a Natural Child ego-state older than the regressed age. The regression may be accompanied by physiological changes, e.g. menstruation stops, infantile reflexes reappear. The person feels and behaves like an over-grown baby.

In a conventional psychiatric setting, such regressive behaviour is strongly discouraged: the needs of the 'child' are discounted or ignored, forcing the person to engage in increasingly desperate attempts to extort some response from the hostile environment - hence the 'crazy behaviour' so familiar to those who work in mental hospitals. But a supported regression is quite different. If others acknowledge these infantile needs, and respond appropriately, all should go well. 'The person will then proceed through the developmental sequence of maturation at an average rate of one developmental year per three to six weeks.' (In their early work with Dennis, the Schiffs discouraged total regression, insisting that he maintain Adult functioning in many areas. They later learned that this had been a tactical mistake: by allowing a full regression to babyhood, many therapeutic peoblems were eliminated.)

Psychotic regression allows for decommissioning of the original Parent structure: the Schiffs commit themselves to providing a new Parent structure for their children, and this requires that they discipline their charges as well as nurturing them. 'We feel that punishment is necessary and should be purposeful, directed at correcting a specific

behaviour. . . . We have used spanking continuously throughout our experience with rearing (both our natural children and psychotics). . . . Spanking is effective because whilst the child is experiencing pain he is unable to discount what is being said to him.' The Schiffs are also insistent that the therapists must have well-established values of their own and confidence in their right to communicate these values in the form of expectations of their charges. I find this clear commitment to moral guidance very refreshing. All psychotherapists are familiar with the oppressive, restrictive 'tyranny of the shoulds' that develops from abuse of parental power; and what could be more liberating for the over-civilised neurotic than the radical permissiveness of the psychoanalytic hour? However so pervasive is our distruct of power-relationships that in both psychological and political discourse words like indoctrination and authoritarianism have become synonymous with evil. The Schiffs remind us that this need not be so: growth takes place through the tension between liberation and guidance. There are lessons here for all therapists, and not just those who work with structure-hungry schizophrenics.

I have made little reference so far to the Schiffs' theoretical understanding of pyschosis: yet it is clear that all their potent interventions with their patients are informed by a profound grasp of the complexity of the system of interlocking messages, injunctions, misdefinitions and misinformation which constitute psychotic disturbance. The Schiff work is therefore both a story of personal heroism and an intellectual adventure in expanding our understanding of schizophrenia. Most people working in psychiatry and psychotherapy today, myself included, will probably never undertake therapeutic endeavours such as the Schiffs'; nevertheless, read these books to learn what *can* be done, *how* it is done, and maybe what *we* need to do collectively if psychiatry is to start to address the real needs of the disturbed.

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