

SCHIZOPHRENIA

Science, Psychoanalysis,
and Culture

Kevin Volkan and Vamik Volkan



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About the authors

Kevin Volkan EdD, PhD, MPH is a founding faculty member and professor of psychology at California State University Channel Islands, where he researches and teaches courses on psychopathology and atypical behaviors, personality theory, as well as Nazi Germany and Eastern philosophy. Dr. Volkan also currently serves on the Graduate Medical Education faculty for the Community Memorial Hospital System in Ventura, CA, where he teaches and conducts research with medical residents, and as an adjunct faculty member for California Lutheran University's clinical psychology doctorate program.

He holds doctorates in clinical and quantitative psychology, is a graduate of the Harvard School of Public Health, and a former Harvard Medical School faculty member and administrator. Dr. Volkan is considered to be an expert on extreme psychopathologies and has testified before the United States Senate on pathological and dangerous fetishes. He has made numerous appearances on television, radio, and podcasts as a psychological expert.

Dr. Volkan's clinical training and experience is in psychoanalytic psychotherapy, though he also has experience using a wide variety of other modalities in clinical practice. He has practiced clinical psychology as a staff psychologist in a state hospital and in private practice.

Dr. Volkan's clients included a diverse population of people representing a wide variety of socioeconomic strata and psychological distress. He has worked with people suffering from drug addiction, neuroses, and personality disorders as well individuals suffering from autism, organic brain injury, and schizophrenia. Dr. Volkan was awarded the *Sustained Superior Accomplishment Award* from the State of California for his clinical work. His current practice is centered upon psychodynamic embodied dreamwork.

Dr. Volkan is the author of *Dancing Among the Maenads: The Psychology of Compulsive Drug Use*, which is one of the few psychoanalytic works examining drug addiction. He has also published a number of papers on psychopathology as well as on psychoanalysis and culture. His current publications include works on delusional misidentification syndromes, hoarding, narcissism, and demonic possession.

Vamik Volkan, MD, DLFAPA is an emeritus professor of psychiatry at the University of Virginia, an emeritus training and supervising analyst at the Washington-Baltimore Psychoanalytic Institute and an emeritus senior Erik Erikson Scholar at the Erikson Institute of the Austen Riggs Center, Stockbridge, Massachusetts. He is the founder and past president of the International Dialogue Initiative and a former president of the Turkish-American Neuropsychiatric Society, the International Society of Political Psychology, the Virginia Psychoanalytic Society, and the American College of Psychoanalysts.

For eighteen of his thirty-nine years at the University of Virginia, Dr. Volkan was the medical director of the university's Blue Ridge Hospital. In 1987, he established the Center for the Study of Mind and Human Interaction (CSMHI). CSMHI applied a growing theoretical and field-proven base of knowledge to issues such as ethnic tension, racism, large-group identity, terrorism, societal trauma, immigration, mourning, transgenerational transmissions, leader-follower relationships, and other aspects of national and international conflict.

Dr. Volkan was an inaugural Yitzhak Rabin Fellow at the Rabin Center, Tel Aviv, Israel; a visiting professor of law, Harvard University, Boston, Massachusetts; a visiting professor of political science at the University of Vienna, Vienna, Austria and at Bahçeşehir University, Istanbul, Turkey. He worked as a visiting professor of psychiatry at

three universities in Turkey. In 2006, he was Fulbright/Sigmund Freud-Privatstiftung Visiting Scholar of Psychoanalysis in Vienna, Austria. In 2015, he became a visiting professor at El Bosque University, Bogota, Colombia.

Dr. Volkan holds honorary doctorate degrees from Kuopio University (now called the University of Eastern Finland), Finland; from Ankara University, Turkey; and the Eastern European Psychoanalytic Institute, Russia. He was a member of the Working Group on Terror and Terrorism, International Psychoanalytic Association. He was a temporary consultant to the World Health Organization (WHO) in Albania and Macedonia.

He has received the Nevitt Sanford Award, Elise M. Hayman Award, L. L. Bryce Boyer Award, Margaret Mahler Literature Prize, Hans H. Strupp Award, and American College of Psychoanalysts' Distinguished Officer Award for 2014. He also received the Sigmund Freud Award given by the city of Vienna, Austria in collaboration with the World Council of Psychotherapy and the Mary S. Sigourney Award for 2015. The Sigourney Award was given to him for his role as a "seminal contributor to the application of psychoanalytic thinking to conflicts between countries and cultures," and because "his clinical thinking about the use of object relations theory in primitive mental states has advanced our understanding of severe personality disorders."

About this book

This book on schizophrenia is born out of the first-hand knowledge of the authors, one of whom has a broad range of experience of working with people suffering from schizophrenia in institutional settings and across cultures using psychodynamic as well as behavioral and psychopharmacological modalities and the other in treating individuals with schizophrenia as a psychoanalyst.

Regardless of the variety of their experience, both authors ground their understanding of schizophrenia from a psychoanalytic view. Unlike other psychological understandings of schizophrenia, the psychoanalytic view is grounded in metapsychology. This is where the subjective view of the analyst or psychotherapist meets the objective scientific understanding of the researcher. Views of the emergent properties of the mind are intertwined with knowledge of neurobiology, evolution, and the structure of the brain. Unlike some Freudians, like George Klein (1976), who saw metapsychology and clinical theory as incompatible, or others who view it as something that is divorced from empirical reality and biology, we take the view postulated by Patricia Kitcher when she says, "... my thesis is that Freud's enduring commitment to metapsychology does not reflect any attachment to particular doctrines, but rather a vision of how various sciences can combine their results to tell

us everything we want to know about human mental life” (Kitcher & Wilkes, 1988, p. 102).

This book is our attempt to accomplish this combination in a study of schizophrenia. We acknowledge that the task is difficult. Mainstream research reveals that the causes, prevalence, and treatment of schizophrenia have greatly diverged from psychoanalytic thinking over the last seventy years to the point where there is little common ground. However, the emergence of the field of neuropsychanalysis gives some hope that psychoanalytic metapsychology and clinical theory may once again provide valuable insight to the mainstream understanding of schizophrenia. We also take hope from the fact that there has always been a small number of clinicians and researchers who have sought to apply psychoanalytic theory and practice to help those suffering from schizophrenia. The sad irony is that this group has been declining just as psychoanalysis has evolved to better understand schizophrenia and provide new possibilities for treating this disorder. Using psychotherapy to treat schizophrenia has become somewhat of a “lost art,” at least in the United States. As we shall discuss, the use of psychoanalysis or psychoanalytic psychotherapy is not appropriate for all individuals suffering from schizophrenia.

Part of the problem is that psychoanalytic treatment may not be appropriate for many suffering from schizophrenia, and even for those who may benefit, it may be out of reach due to financial or logistic issues. The challenge for the future, then, is how to meld mainstream understandings of schizophrenia with psychoanalytic insights in order to both inform and improve non-psychoanalytic treatments and/or to produce effective psychoanalytic-based treatments that are more widely applicable to those who suffer the debilitating effects of schizophrenia. Another potential impediment to treating schizophrenia is a lack of recognition about its cultural variants. Psychoanalytic theory can indicate much about what aspects of schizophrenia are common across cultures and where they present unique characteristics. More importantly, psychoanalysis can give an indication of how cultural variations of schizophrenia come about. For future improvement in understanding and treating schizophrenia it will be vitally important to understand the cultural underpinnings and expressions of schizophrenic illness.

While this book will not definitively answer the questions posed by the melding together of mainstream, psychoanalytic, and cultural viewpoints related to schizophrenia, it may provide some guide toward future solutions. For clinicians who currently treat people suffering from schizophrenia, it is our hope that this book will deepen insight into the disorder as well as promote the greater use of psychotherapy and integrated treatments, while increasing sensitivity to cultural variations in schizophrenic disease. Accordingly, this book is divided into four parts.

The first part gives a brief overview and outline of the mainstream understanding of schizophrenia. This includes its epidemiology, possible contributing causes, and treatments. This part also includes discussion of some theories and treatments such as specific focal sepsis that have come and gone, as well as thoughts of alternative treatments and ideas around prevention. With regard to treatment this section also mentions predominating treatment modalities such as psychopharmacology, brief and supportive non-analytic psychotherapy, and emerging surgical and neuromodulation treatments.

The second part drills down to focus on general psychoanalytic ideas about schizophrenia, culminating with a focus on problems with early object relations. As shall be noted in this part, this psychoanalytic approach to schizophrenia is not in conflict with mainstream conceptualizations of schizophrenia. Unlike past psychoanalytic conceptions of schizophrenia, we fully acknowledge that the object relations pathology found in individuals suffering from schizophrenia described here may be induced and/or influenced by biological, structural, and environmental causes, as well as by psychological factors.

In *the third part* we look at psychoanalytic treatment and speculate that some schizophrenia, especially unmedicated cases where there are strong psychogenic influences, can be successfully treated by psychoanalysis or psychoanalytic psychotherapy. For cases not amenable to this type of intensive psychotherapy, we speculate that a psychoanalytic understanding of schizophrenia and possibly some types of psychoanalytic therapy could be helpful as a form of adjunct treatment.

In *the fourth part* we take a broad look at schizophrenia and how views of the disorder and the disorder itself are affected by culture. We shall review research on how symptoms of schizophrenia can

vary across cultures and how schizophrenia is related to immigration. We will examine how cultural variations can lead to different types of object relations.

It is our hope that the combination of the ideas presented in the four parts of this book will generate insight and understanding of schizophrenic disorders that represent “out of the box” thinking. Hopefully, this will yield new approaches to treating and possibly preventing schizophrenia.

Before beginning, a few notes on terminology and organization are in order. This book is the result of a collaboration between individuals who view schizophrenia from different but overlapping professional viewpoints. This is seen by us as a strength, but we realize that it may cause some confusion in regard to terminology. Although the authors are related (son and father) and have career similarities (both are professors), we carry the viewpoints of the fields we have trained in—psychology and psychiatry, as well as psychoanalytic therapy versus psychoanalysis respectively. These fields overlap to some degree but also have unique viewpoints.

Kevin Volkan is a psychologist, trained in psychoanalytic psychotherapy, but who has practiced using many modalities besides psychoanalysis. He has worked with severe psychopathology but also with people seeking a better understanding of themselves. He has expertise and experience in academic psychology and medicine, using clinical case studies as well as formal statistical hypothesis testing to conduct research in these areas. On the other hand, Vamik Volkan is a psychiatrist and psychoanalyst who has spent his career interacting with patients within the strict milieu of traditional psychoanalytic practice. He has conducted much of his research work using case studies. In writing this book, we have tried to combine and triangulate these different approaches in order to present a richer understanding of schizophrenia.

Nevertheless, some questions related to our different approaches may confuse the reader. For instance, when we refer to psychoanalysis does this include not only traditional psychoanalytic treatment but also psychoanalytic psychotherapy, or even psychotherapy informed by psychoanalysis? The problem is that there is not uniform agreement on the relationship between traditional psychoanalytic treatment and

psychoanalytic psychotherapy. For some, psychoanalytic psychotherapy is just psychoanalysis that occurs for fewer sessions in a given week. For others, psychoanalytic psychotherapy forgoes traditional aspects such as the use of the couch and may possibly be more supportive in nature. Add to this that there are varying opinions about how psychoanalysis proper should be conducted, with there being many differences across schools and training centers.

For this work our thought is to minimize the differences between psychiatry and psychology, between psychoanalysis proper and psychoanalytic psychotherapy. We agree on the importance of transference in therapy and both see object relations dynamics at the core of schizophrenic illness. While psychoanalytic psychotherapy may not be as intensive as psychoanalysis proper, it may hold more promise for treating greater numbers of people suffering from schizophrenia, who may not have the financial or emotional resources to engage in traditional psychoanalysis. Although many of the treatment insights put forward here are derived from intensive traditional psychoanalysis, it is hoped that many of these insights can be adapted to psychoanalytic psychotherapy. Likewise, psychoanalytic psychotherapists need to make sure they do not modify psychoanalytic technique to the point where it is no longer effective.

It is realistic to expect that any sort of psychoanalytic therapy will need to be adapted to work with patients suffering schizophrenia who are medicated, or who may undergo some other type of treatment such as neuromodulation or even psychosurgery. It is too early to say what these adaptations will look like or how they will be implemented. It is hoped that this book will provide some impetus for developing such integrated treatments.