

Double Binds, Systems, Institutions and... Farewells

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Abstract

This article introduces newer applications of the double bind in broader contexts, such as institutions. This is an approach put forward by a group of mainly French-speaking writers and was linked to the movement of constructivism in systemic family therapy. Referring to the debate that took place in the early days of the emergence of the double bind theory, and through the presentation of clinical cases, questions are raised as to whether “transplanting” the concept ultimately justifies it in its essence. These double bind applications create, as a metaphor, opportunities for interpreting and intervening in institutional problems through a systemic perspective, as well as the prospect of an institutional transformation. However, they also create new fields of reflection, choice, and final decision making for those working in institutions.

Key words: Double Bind, Systems, Institutions, Separation, Options

“... The long day wanes: the slow moon climbs: the deep

Moans round with many voices. Come, my friends,

Not too late to seek a newer world..."

Alfred Tennyson, "Ulysses"

The existence of a double bind, which is inherent in the person's position towards society, and at the same time constitutes an existential question, was presented by Watts (1961):

There is a major contradiction in the rules of social gaming. The members of this game should play it *as if* they were independent agents, but they should not know that they are just playing "*as if*"! The rules explicitly state that the individual is self-defined, but implicitly that this is only on the basis of the rules. Furthermore, while the individual is defined as an independent agent, he should not be so independent as to not abide by the rules that define him. Thus, he is defined as an agent in order to be responsible for his "actions" towards the group. The rules of the game grant independence and take it back at the same time, without revealing the contradiction.

However, the double bind affair can also be explored in the context of the therapeutic relationship, viewed as a social one.

Watzlawick (1963) cites the views of authors who warn of the risk of a double bind, inadvertently imposed by the therapist on his psychotic patients, infiltrating the therapeutic relationship. Savage, in particular, points out that: The immeasurable investment of time and energy, along with poor results, often reinforces the analyst's tendency to gain narcissistic pleasure at the expense of the patient, for the additional reason that his patients are desperately dependent on him. The analyst may unconsciously need the patient to remain ill and, while consciously urging him to grow and develop, unconsciously, he does not receive growing and developing well at all. These contradictory conscious and unconscious messages to the patient, both to grow and to remain a child, place him in a "double bind" pathogenic state, as described by Bateson et al.

The issue could be expressed in the "double bind" language, if we accept that the basic implicit instruction of the schizophrenogenic parent is:

"Remain in a symbiotic relationship with me", while simultaneously the explicit instruction "Go away", is the parental rejection part that permeates their overall communication.

A fertile field for the questions raised by the double bind theory is the systemic approach of psychiatric institutions, understanding of their everyday life, and the position of the systemic intervener within them.

Towards the end of the 1980s, there was an attempt to systemically understand institutions' problems, mainly by French-speaking writers, which is interesting, because not only does it help understand events that are otherwise unrelated, fragmentary and "crazy", concerning everyday matters of the institution, but it also demonstrates that there is an "interventions' epistemology" within the institution.

To this end, concepts from the systemic evolutionary model were used, precisely in the heyday of constructivism: Self-referential paradox, resonances, "formal program" and "implicit rules", fluctuations, ramifications, time and history, crisis and change.

This effort to understand the institution "as a system" has also led to the study of communication within psychiatric institutions and has brought to light a new aspect of the concept of double bind, as a metaphor. It is a 'double bind' between different levels of rules, operating simultaneously and contradictively within the institution.

Michel Monroy (1989), states that the basic contradiction lies in the relationship between the institution's definition and its purposes (an identity dissociation). The institution's definitions are saturated by the "teleological" approach and perpetually produce constants, rules and laws that are supposed to be respected by all. This, however, is impossible due to their incompatibility. The definition of the institution's identity (which is mainly consolidated through its history, structures and stated goals), has an inherent contradiction, a double message: To preserve internal cohesion, on the one hand, and to adapt to external requirements or pressures (socio-ecological) on the other - that is, to remain an institution and to be abolished at the same time. Therefore, the identity of the institution is constantly built on dipoles: internal and external, formal and informal, clear and confusing, written and spoken, explicit and implied, speakable and unspoken

J.-C. Benoit (1988) pointed out the paradoxical irrationality of the role of institutions in the way they formulate relationships. The characteristic of the relationships they reproduce is ambiguity and diffusion, a way of responding - without answering - to family and social rejection. They could be likened to the schizophrenic's family, where there is either excessive stability with no change or catastrophic chaos.

J. Haley (1971) has also referred to the strength of the institution at the level of relationships: "The usual characteristic of the Psychiatric Institution is a kind of faint and strange sadness, which, under the varnish of hope and good intentions, hides a deadly power struggle, colored by a constant ambivalence between patients and staff."

I should add here: Beneath the hope of the psychiatric reform vision and good intentions between colleagues, there is a profound and indelible grief that reflects the deadly power struggle among colleagues ... and it is, in the end, what kills their positive sides. But, along with the power struggle, there is an ongoing ambivalence among the institution staff.

The role that time and history play could also be added to this: Whether real or mythical, the institution pre-existed as a system, with its heavy administrative power being imposed on present relations.

Jacques Pluymaekers (1987), applying M. Elkaim's "formal program and deep beliefs" model to institutions, emphasized two levels of conflicting rules that form the core of the double bind.

In its official program, the institution has therapeutic purposes around which it forms a multitude of decisions, orders and decrees for the patients and staff.

On a second level, there are powerful hidden internal rules that run counter to the official program.

If one tries hard and honestly to implement the formal program, one will find himself in the absurd position of a perpetual cancellation by invisible rules, which are dedicated to maintaining the *as if* therapeutic (asylum-like) condition of the institution, and also continually highlight moral problems.

Through videotapes, Pluymaekers studied, the day-to-day activities of institutions (such as having lunch) to show how the double binds crystallized in patients', staff's and families' behaviour.

One example is the case of a little girl in a medical institution who "did not eat her food". Everyone at the institution, nurses and other children alike, believed that the little girl was not eating – her plate, however, always ended-up empty. The little girl was hastily swallowing bites when no one was looking and sat motionless in front of her plate when she was told "eat". At one point when Pluymaekers noticed, "But she does eat!" The little girl muttered, "Not too much."

In fact, says Pluymaekers, this "not too much" lies at the heart of the reciprocal double bind between the institution and the girl's mother: The mother wanted her daughter to be at an institution, a good one, but "not too much," so she herself can remain a good mother. On the other hand, the institution tried to be effective, but "not too much", so as not to risk competing with the mother and her taking the child back. Thus, it failed in its official mission, which was to provide very good services. In this case, everyone, both child and staff, were caught in a mutual double bind. When she eats, the girl responds to one level of the mother's double message, "Take care of my child as best you can." When not eating, she responds to the other level of the message addressed to the institution, which is "Don't do better than me". Everyone, staff, institution administration and the other children are caught in this double bind.

According to Pluymaekers, a systemic intervention in the institution should take into account both sides of the double bind at the same time. Thus, his intervention was to emphasize both these levels, which, until then, had only been experienced in succession, simultaneously. Instead of oscillating from one level to the other, he indicated that the two sides constitute a pair and need to be understood together. This has allowed the problem to be addressed not just as a whim of a little girl, but as an important metaphor that relates to a wider rule that governs everyone - the institution, the family, the child.

Pluymaekers believes that this approach is also appropriate for institutional transformation efforts: Taking into account the official program, but also working at the level of internal rules, change is possible by a macro- and micro-level understanding, and through an attitude of personal responsibility, which is the only possibility of an *ethical attitude*.

By adopting a self-referential attitude, the systemic intervener enters, says L. Onnis (1989), into a paradox: On the one hand he is confronted with a personal crisis, and on the other he discovers the dynamics of an institutional transformation. Recognizing this crisis will

ultimately allow him to resonate with a system, which, although rigid, can find itself in a state "far from of equilibrium". It will allow him to see fluctuations, local turbulence, branching, and to find that there is a special and recyclable acting-out of his personal history in relation to the institution.

Osmosis of the Institutions' boundaries with the environment should carry the information (the news of difference according to Bateson), thus reducing the "noise". Rhythms, cracks, alternations should be sought-out. Also, the space-time interaction should be re-established by passing from the state of the "sleeping hippopotamus" to that of the "ballet figures".

Is it, however, possible to make a systemic description of the institution from the "external" position, when this places the system on the opposite side and, thus, enhances homeostasis? On the other hand, how can one get inside the system, which is the reality he is observing, without being a part of it himself? Here, by introducing the concepts of personal choice and responsibility, the authors juxtapose the immobility that neutralizes divergence, to the self-referential position-personal judgment, which leads to a crossroads of choice between different paths. This way, the systemic intervener will create a "distance through proximity" and will avoid the "fatalism" that Bateson warned about (if we believe that a reality cannot change, we will behave in such a way that it will remain as we see it).

Transferring the double bind to the institution may provide ways of "releasing", if one seeks, as Bateson puts it, the ratio between order and chaos. If the mobility that occurs within the institution is set against its immobility. This mobility exists in the form of new recognitions of complexity, which in turn increase the complexity between understanding and decision-making and hence personal choice. Therefore, for a systemic approach to an institution it is necessary to understand the "combination of disorders" (Willke, 1993). This way, the dissociative understanding of the situation that dictates the creation or revival of protective but also polarizing alliances, can be replaced by an understanding of a polyhedral reality, where the various aspects of the institution's life are not mutually exclusive but are prerequisites of one another. Moreover, crises can be considered as transition points and major discontinuities through time and through the reform process.

What happens though when "disorder does not find a combination", when "polarized alliances" prevail throughout, when crises are experienced as disastrous, when any order is trampled by chaos? What happens when the social and political crisis intrudes in the institution and the double binds create schizophrenic hierarchical and colleague (but also therapeutic) relationships? What can a systemic worker do in a system where a deep uncontrollable crisis is embedded in its immobility?

It is not coincidental, but inevitable, that the time comes for the institution to 'demobilize' that particular employee! What can he do then? What will his attitude towards the 'system - institution - separation' situation be?

The institution's ambivalence becomes, more than ever, a part of himself: "I'm sorry I'm leaving because I'm going to lose them – they are going to lose me, or am I happy to 'get rid of' them?" The institution's double binds create for the retired employee a situation similar to that of his schizophrenic patient: A "double response" to double messages.

So what about mourning? "The institution remains what it used to be, but didn't I also contribute to the creation of a functional, fertile, mentally satisfactory 'subsystem' (Family Therapy Unit!)? Will I not cry? Will I not mourn leaving this?"

The strange thing here is that the power of the hyper-system exceeds that of its subsystem. So the mourning for a loss becomes small and humble, and coexists with the peace and satisfaction of a departure.

"On the train I wave my handkerchief. I tear up, but at the same time my soul is shouting, "Yippee!" At last, instead of being hospitalized, I'm leaving home!"

Maybe then, leaving becomes for the family therapist a new transition, a new discontinuity, decided by himself: Not his physical retirement, this was decided by the social system, but his emotional retirement! The farewell!

The direction of the institution's random evolution can, for the family therapist himself, be transformed into a given position:

"It is time to decide, with whom to go and who to leave!"

"... That which we are, we are;

One equal temper of heroic hearts,

Made weak time and fate, but strong in will

To strive, to seek, to find, and not to yield. "

Alfred Tennyson, "Ulysses"

P.S. With the appearance of the pandemic of the coronavirus, in the whole world and in our country, the sense of farewell undergoes deep modification. Firstly because we don't have any more the choice of relating. And then because we are driven to a forced loneliness which, fatally, leads us to a nostalgia for the life periods where the social belonging existed.

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