

THE LADY IN THE FIRE

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Dr. Bowen was considered an expert in schizophrenia. The Menninger Clinic was one of the few inpatient facilities that believed in psychotherapy in the treatment of schizophrenia. Chestnut Lodge in Maryland was another similar facility. Of course, schizophrenia was the focus of his NIMH inpatient project.* Many of his theoretical conceptualizations on schizophrenia are contained in his formal writings, e.g., *Family Theory in Clinical Practice*. These are a few letters in the archives relating to this subject. The letters do not offer answers to what “causes” schizophrenia, a subject many people want him to clarify. Did he consider it “a disease?” Did ten generations “cause it?” What did he mean when he said, “There is some schizophrenia in us all?” What did he mean when he said that we all struggle with similar issues? People “see” in his statements “causes,” when he is describing emotional processes; what drives them, what escalates them, what calms them down, or how they move around in a family system.

Another area of confusion for the therapist in dealing with schizophrenia processes is the assumption and beliefs about responsibility for the patient, family, and therapist. Dr. Bowen’s letter of November 1985 is a response to a presently hospitalized patient seeking his advice about a possible therapist in the Washington area. He had been clinically involved with the family 25 years earlier.

*Prior to the refocus on the family with a schizophrenic member.

4903 DeRussey Pkwy
Chevy Chase, MD 20815

Dear

This will acknowledge your letter. There is no way I can work with you personally. My practice is limited and I could not do it even IF you were not limited to Medicare or Medicaid. I do not have time even for the lesser administrative work that goes with viable insurance. The past years my contacts in Montgomery County are too limited to have knowledge of resources there.

I will reduce this page to single space to allow more room. Experience with you and your family was some 25-30 yrs ago. You are an unusual edition of the human struggle, with too little ability to use your intellect, and too much urge to fill the gap with a crazy psychotic balloon, manufactured by your imagination, which gets bigger and bigger, and eventually drives the other beyond endurance. The immediacy of your urge to "do it my way and do it now" eventually drives the other to "put you away" where you end up with a horde of others who have used the balloon mechanism. Most people contain their own personal "balloons" enough to live in the world as defined by others. Maybe you will finally develop more ability to relate to what is, rather than the deadend pursuit of trying to fashion the world according to your impulses.

You are a kind of a museum piece in the world of miscalculation. IF you can manage to restrain your balloon enough; and relate to "what is" enough to satisfy your doctors, you might become an outpatient under your own recognizance. IF you can make it to a viable outpatient status, there might be a slim chance I can find a research oriented person to lend a hand with your underlying life problem. That kind of "research on psychotherapy" is quite different from conventional short term drug oriented research. Very few clinicians are interested. It requires a long term psychotherapy effort, with patients who can be out patients and who are somehow funded, and a clinician who can guide the patients own effort.

You are a person who has always put a lot of effort into your own adjustment. I think a lot of your effort has been misplaced and too much strong minded, but that same energy might someday become your ally, IF you can somehow find a therapist who can make the energy work for you, instead of against you. You have a built-in genius to battle the establishment, whether the establishment is family, social protocol, psychiatry, hospitals, or whatever. The more you battle the

establishment, the deeper you get into the soup. IF you can battle FOR YOU instead of AGAINST SOMETHING, maybe there is a way out.

You are a gifted person with prodigious energy to put into something you believe in. You might spend the rest of your life in and out of hospitals. Thousands do it. The long and short of my posture is to say there might be a way out for you, IF you can cooperate with the hospital enough to get yourself out, IF the contents of this letter can remain private for you alone, and IF it is possible to find a calm therapist who can lend a hand with the hundreds of life decisions that recur and recur again and again. The whole thing is IF-EY at best. Such resourceful therapists are few and far between. Most are not funded by institutions. When they gain that level of expertise, they are not content to spend their lives on minimal fund patients. There might be one somewhere in my Georgetown University Family Center organization who might be willing to start with Medicare payments until you can supplement fees from your own employment when that becomes possible. There might be some capable person who would be willing to try IF I would lend a hand as a supervisor and consultant. I will see. IF your behavior becomes noxious to others, it might be necessary for you to return to the hospital for a time, until you could get yourself out again. I do not know whether it might be possible to find some Georgetown University person who wants to undertake such a project.

The whole course is paved with IF's. From your standpoint it would require that you get yourself out of the hospital without using my name. You can cooperate with the requirements of the hospital and their outpatient services without using my name as a possible resource. I am too much out of contact with Montgomery County to even guess who is available. After you are out, the Georgetown University Family Center is a possible resource. In the meanwhile, I will have at least a month to see IF, perhaps, maybe, there might be a resource at the Family Center. This will all come after you are out and functioning on your own. It will all depend on finding a resource. I might not be able to do it. Those are possible resources for the future, and not for the "here and now" problems.

You have been struggling with this confounded thing for years. The people in the Md State system are all devoted people who do things the way that is right for them. IF they called me about you, it would be necessary that I leave you in their care until you are a free agent, and able to act on your own. IF the Md system does not work, you can make private contact with me at some later date.

I am sure you can do it, IF it is possible for you to respect all the IF's.

Sincerely,

Murray Bowen, M.D.