

# Dr. Osmond's Memos

## MANIPULATION

### The 12-Letter Word of Shame and Reproach

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My Oxford Dictionary of English Etymology (1966) gives this definition and derivation:

**Manipulation:** Method of handling chemical apparatus XVIII; manual management or examination XIX. -F. manipulation (-sp. manipulation), It. (Italian) manipolazione - mod L. manipulatio (n-) f. manipulare, f. manipulus handful (e.g. of medicinal ingredients).

The Rodale Synonym Finder has the following synonyms: Manipulate: v.

1. Handle, wield, work with the hands, operate, ply, work, adhibit, apply, employ, utilize, use, put into operation, set to work, put in action, set in motion, drive.

2. Maneuver, engineer, manage, command, control, preside, rule, influence, direct, govern, conduct, dispose, regulate, orientate, take the helm, be at the wheel, pilot, steer, guide, head, lead.

3. Pass the fingers over, finger, feel, touch, grabble, paw, thumb, twiddle, rub, massage, knead, stroke, fondle, caress, palpate, titillate, milk.

**Manipulation:** n.

1. appliance, adhibi-tion, utilization, employment, use, exercise.

2. Direction, guidance, government, management, administration agency, order, control, charge.

3. Fingering, feeling, touch, palpation, contact, graze, brush, titillation, massage, rubbing, kneading, caress, stroke.

So there we are, the expansion of an 18th century technical term which has, during the last 25 years or so, come down in the world. Oddly enough this has happened during the same time that another 12-letter word has moved from being a source of all mental and much physical illness to being merely trivial.<sup>2</sup>

Manipulation has become a thoroughly dirty word not only in everyday affairs, but, as so often happens, in psychiatry and its environs too. It used to be applied only to psychopaths and sociopaths, but it has spread with the years. I found it being used with much severity in regard to alcoholics, as if being manipulative was something highly reprehensible. In

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<sup>2</sup> The 12-letter word begins with m and was a source of

medical preoccupation from the latter half of the 18th century until the third decade of the 20th or so.

Saskatchewan our staff were very apprehensive as regards the manipulateness of alcoholics. As it happened at that time I was a personal friend of Bill W., the founder of Alcoholics Anonymous, so that in addition to getting to know this great man well I met many eminent and less eminent members of AA. I had of course known dozens of alcoholics, AA's and non-AA's, before this. I was much struck by the enormous social capacity and resilience of these remarkable people, many of whom had gone from rags to riches, back to rags and the gutter, but had climbed out, joined AA and re-established themselves. Among AAs those same qualities which among alcoholics who are drinking are called manipulateness became a vital tool for getting well, gaining their places in society, and helping others, the difference being that when drinking manipulateness served to prevent recovery, while in AA it speeded the process.

The manipulative alcoholic uses his/ her highly attuned social capacities to remain a member of the drinking society with results which are very often fatal. Since alcoholics drunk, sober, or members of AA are frequently highly skilled social performers, those who try to treat them are frequently out-manuevered, bamboozled, and deceived. Psychiatrists, psychologists, nurses, and social workers who have no difficulty in coping with the manipulations of depressed or schizophrenic patients are often worsted by alcoholics. This has led one of Eric Berne's disciples to suppose that alcoholism is some kind of game rather than a frequently fatal illness.

Physicians in medical and surgical matters are quite used to dealing with patients who are far more socially skilled than they are. This is inevitable, but unsurprising. In my view exactly the same obtains in psychiatry. Many ill people are or believe themselves to be smarter than their doctors. The wise and experienced doctor is not distressed by this, neither is the wise patient. Luckily genius is

not an essential attribute for attaining an enviably high level of medical craftsmanship. The patient who outsmarts his doctor and who disobeys his orders (advice) frequently becomes less inclined to do so when he recognizes who is the real loser. It is not the doctor's life which is at stake.

In my opinion, then, manipulateness as found in alcoholics and many other patients is far better seen as being a potential social asset being misused and misapplied. Rather than bemoaning its presence, we should rejoice that it is there, but seek to redirect it. We can hardly do this very convincingly if we become so indignant with the manipulator that we cannot recognize that he possesses a magnificent asset, which can and should be put to more appropriate use.

Most alcoholics have become accustomed to being berated and reproached for the great social skills they have to deploy to keep themselves drinking. They are surprised and may be very curious to find that the very capacities which have so far done them little but harm may still be great assets when used properly in their recovery. Many alcoholics are deeply ashamed of their failure, some are guilty too, and their sense of self worth is usually much reduced. It does no harm at all to show them that they have great potentialities, even though these are being used self destructively.

It is certainly true that some schizophrenics have a fair repertoire of social skills which they may be able to use to their advantage; in other words, to manipulate. In my experience most schizophrenics are socially rather inept, especially when ill, so that they seldom equal alcoholics, those past masters and past mistresses of manipulation; indeed one way of diagnosing schizophrenic alcoholics is by noticing how incompetent they often are socially. The existence of Bryce and dozens of other asylums-cum-hospitals for the insane (an early name for schizophrenia as anyone who reads John Conolly's great works written about 1840 knows) suggests that

these unfortunates are "the most helpless if not the most afflicted of the human race."

As I have noted in an earlier memo, the social damage inflicted by schizophrenia is only equalled by illnesses which are likely to be fatal. Schizophrenia is seldom physically fatal today (at least as compared with the appalling toll it took 30-40 years ago) although it still kills many people, especially via suicide where the rate is at least 20 times that of comparable normal populations. Schizophrenics, however, suffer quite extraordinary social damage, which appears in the present state of our knowledge to be out of proportion to the severity of their illness. This may simply be a function of our inadequate conception of their illness for disturbances at the higher levels of the brain-mind integration would be hard to detect with our present crude measures.

If, then, we consider schizophrenia to be among the most socially damaging of illnesses, what attitude should we take towards such manipulative skills as remain to these unfortunates? We must surely see them in perspective for since schizophrenics lack the capacity to combine socially with each other or with anyone else freely and spontaneously, their power of manipulation is of the most rudimentary kind. In the reformatories, prisons, and concentration camps of the world the gaolers and others spend much of their time trying to prevent what the staff of mental hospitals strive to foster: the formation of social groups.

The question arises as to why anybody should be much worried about manipulativeness of schizophrenics when it occurs. I suppose that this is partly a consequence of the misapplication of Bernian (Eric) games language. For while Berne himself did not apply his notions to serious illnesses, not all his followers have been so self denying. There is also an element of revulsion against the Skinnerian cosmos in which one is manipulated "for one's own good." Just as in the old days that other<sup>3</sup> 12-letter word was

considered to be the cause of most mental and physical illness, so today "manipulation" partly takes its maleficent place.

It might be more useful to recognize how inefficient most schizophrenics are as social manipulators. Far from discouraging their efforts which • are usually obvious and inept, we need to teach them effective and inconspicuous methods. Social relationships are enormously complex negotiations at which schizophrenics, because of illness, are exceptionally clumsy. It is this clumsy and incompetent "manipulation" which causes most of us so much discomfort with these afflicted people. In behavioral terms they do not reinforce us for normal social interaction. Perhaps if we attend to this strange and well-known capacity for schizophrenics to erode and weaken the maintenance and genesis of social relations, we shall be less concerned about their supposed manipulativeness. When this does exist, which is all too infrequent, in my opinion, we shall put it to better use.

What we have to avoid is not to let what has become almost a contemporary cultural cliché make us unaware of and unresponsive to our unhappy patients' grievous shortcomings. Schizophrenics are often difficult to understand, but this is not because they are unusually manipulative but because they are appallingly ill—"the most helpless if not the most afflicted of the human race."

**3 Masturbation: See E. H. Hares' magnificent paper, Masturbatory Madness. Journal Mental Science c. 1952.**

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