



editorial

Psychiatric Bulletin (2002), 26, 121–122

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Literature and psychiatry[†]

In *Lady Chatterley's Lover* Lawrence (1928) compared listening in on (overhearing) the private affairs of other people to the novel. He wrote

'Here lies the vast importance of the novel, properly handled. It can inform and lead into new places the flow of our sympathetic consciousness, and it can lead our sympathy away in recoil from things gone dead. Therefore the novel, properly handled, can reveal the secret places of life: for it is in the *passional* secret places of life, above all, that the tide of sensitive awareness needs to ebb and flow, cleansing and freshening.'

It is clear that Lawrence understood the link between the natural curiosity of eavesdropping on other people and the use of literature as a means of understanding the inner life of others as well as of ourselves. It is true also that Lawrence, more than most writers, particularly understood the role of the novel in exposing how people feel and behave, in exploring what motivates our most intimate acts and in using words to best describe the indefinable emotions that determine our goals and cloud our judgements. It is this role of literature in examining, clarifying and defining human emotions, behaviour and thoughts that is exemplified by the articles in this edition of the *Bulletin*.

David Hart spent a year as poet-in-residence at South Birmingham Mental Health Trust. The Arts Council, as part of the Year of the Artist, funded his post. His paper (pp.137–138, this issue) and his poetry remind us of the fundamental nature of language to our identity as human beings. Thus, the loss of the use of language in individuals with dementia counts as tragic and disturbing. Hart's gift is in giving voice to these voiceless people. In some of his poetry he imagines the world of the voiceless, entering into the spirit of their situation and using all the devices of poetry to convince us of the enduring humanity of these people.

Dementia has attracted literary interest in recent years. Ignatieff's autobiographical novel *Scar Tissue* (Ignatieff, 1993), John Bayley's account of Iris Murdoch's dementia (Bayley, 1998) and Linda Grant's *Remind Me Who I Am, Again* (Grant, 1998) are all wonderful introductions to the devastating impact of dementia on the self and on the feelings of relatives. However, David Hart's account is of a different kind. Where the others invite us into intimate territory, Hart, like us, is often observing in a dispassionate manner the life of those people whom it is easy to regard as other. However, he

succeeds in anchoring our interest and sympathy by the use of what is proper to poetry: the use of words to attune our sympathies to a given area of life. There is a lesson here for psychiatry.

Edward Said (1975) commented that 'novels represent as well as contain change; they add to reality and interpret it; they accept the burdens, as well as the pleasures, of such desires on the part of the author and the reader'.

These statements are also true of poetry, but poetry is more than this. Valery thought of poetry as 'the attempt to represent, or to restore, by means of articulated language those things, or that thing, which cries, tears, caresses, kisses, sighs, etc.' (Valery, 1950). Furthermore for Valery,

'whilst the interest in prose writing is, as it were, apart from the writings themselves and born of the consumption of the text, the interest in poems is an integral part of poems and can never be separated from them'.

In other words, poetry is as much about language (form) as it is about content. Jeremy Holmes' paper (pp.138–140, this issue) deals with the use of poetry in psychotherapy, and it is his exposition of how the use of language in poetry can illuminate or illustrate the manner of communicating within a therapeutic space that is most compelling. Here, poetry is being used as a tool that the clinician uses to enrich his therapeutic skills – that is, to render him more alive to the therapeutic potential of particular privileged moments.

Patrick McGrath is a novelist whose novels have captured the public imagination for the way in which he makes the inner world of disordered minds comprehensible. His account (pp.140–143, this issue) of his use of psychopathology in two of his novels brings home to us the similarities in the task of the fiction writer and the psychiatrist, both of whom have the task of trying to make sense of human behaviour. The psychiatrist, like the novelist, imposes structure on an abnormal phenomenon partly to render it innocuous but also to make it manageable and there is, of course, also the aesthetic delight in imposing narrative structure on chaos. There is little doubt that psychiatrists owe much to literature. The papers by Hart, Holmes and McGrath are a testament to this fact.

[†]See pp.137–138, pp.138–140 and pp.140–143, this issue.



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