

# Hungry for Love: Psychotherapy with a Schizophrenic Patient

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Vanisha was diagnosed with schizophrenia when she was twenty-six. She is now forty-eight, and lives in local authority supported housing with nine other residents who have mental health problems. She has been on medication for many years and if her carers report any problems her psychiatrist just increases the dosage. She sees her psychiatrist once every six months for about twenty minutes. She has been plagued by a male persecutory voice that has been with her since her late teens. Her carers wanted her to have therapy, and two years ago her psychiatrist referred her to a psychologist. She attended one session, where she was bombarded with questions, and she walked out of it halfway through. She refused to see the psychologist again and said she no longer wanted therapy. Eventually, her carers persuaded her to give it another try if they found her a different kind of therapy. They were refused by a number of other organizations as Vanisha was deemed to be “unable to be worked with” due to her schizophrenia. They found The Bowlby Centre, and that is how I came to see her in May 2009.

My first contact was with her main carer and we tried to organize a time for Vanisha to come to see me. However, it was felt that the journey was too complicated for her, and reluctantly her carer said she thought she would not be able to make it. As I had seen the referral and felt that this woman deserved the chance of therapy, I suggested that I could travel to her if they could make a room available. They were delighted with this and we were able to see each other at a nearby Day Centre, so I meet Vanisha where she lives and together we walk to the Centre, which is just round the corner from her home.

I knew that I had to go very gently with Vanisha and at our first meeting I was slightly worried that this might all be a big mistake. Vanisha has the look of someone who is mentally ill and possibly mentally handicapped. This is because of the side-effects of her medication, which have made her put on weight and lose control of her mouth movements, so her mouth hangs open all

the time. However, when we sat down in our room and started talking, I soon realized that Vanisha is far from slow-witted.

I suggested that we might like to write her life story together, and asked her to tell me about her childhood. She seemed happy to do so. She was born and brought up in Zambia, where she lived with her parents and three younger sisters in a large house with a beautiful garden and they had servants to look after them. She told me of picnics to the Victoria Falls, and how she played with her sisters among the tropical flowers, and how she would see all the animals that lived there. Vanisha is Indian and a Hindu. She described religious festivals and parties and said she was very happy as a child, going to school and always having her sisters to play with. She felt particularly close to her father, who played games with them and took them swimming.

Vanisha told me that one of her favourite subjects at school was Art. So, at the suggestion of my supervisor, I took drawing materials with me to our second session and continue to do this every week. During each session Vanisha does one or two drawings and seems very pleased with her efforts. She usually draws flowers, which have become larger and more colourful as time goes by, but she also draws cats and teddy bears, and once drew the house where she grew up. She selects her colours with great care and always puts them back neatly before taking another.

At first, Vanisha did not admit to having any negative feelings about anyone or anything. She liked all the people where she lives, her room was lovely, her life was fine. Her carers had told me that Vanisha never expressed any negative emotions but often behaved 'inappropriately', in that she tried to kiss or cuddle them, or one of the other residents, and they had to watch her carefully, particularly as she was very fond of one of the male carers who had to be 'protected' from her advances. She would also sometimes appear in the evenings in a very short nightdress and they would have to tell her to cover herself up more. I could see that this behaviour was inappropriate but I also felt a certain sympathy for her desire for human contact. She had been denied the solace of touch for so much of her life.

Gradually, Vanisha told me more about her life and, as she carefully drew back the veils that shrouded her past, I saw how she had become such a lonely and abandoned woman. When she was thirteen, her parents decided to send her and her eleven-year-old sister to England to live with an aunt and uncle. They were given a month to prepare for the trip and she felt excited about it and liked buying the new clothes they would need, particularly the winter coats and shoes they had never needed before.

They arrived in England on a cold and snowy winter's day. They had never seen snow before and were awestruck by the sight of everything sparkling in the winter sun. They had also never felt such cold before or experienced such damp, grey weather that followed the snow. Vanisha said her aunt and uncle

were kind to them and she loved her two baby cousins, but she now had many responsibilities heaped on to her. She felt responsible for her younger sister, who was homesick, so she did not allow herself to show how much she was missing home, her parents, and their two younger sisters. She was also expected to help in the house and had to take on numerous household chores as well as start a new school and cope with the homework and the newness of everything. She wrote to her parents once a month and they wrote back once a month. She buckled down to it and settled into her new routine. However, she was soon joined by a male voice that questioned her every move, constantly asking her what she was doing next and when she was going to clean the shoes, make her bed, tidy her room, wash up the breakfast dishes, and so on. She tried telling him to go away, but he stuck by her day and night, making her life a misery. She told her aunt and uncle about him and was told to ignore him.

Two years later, her parents came to England and the two girls went back to live at home. Vanisha liked school, although she said she was not that academic. However, she passed her exams and went on to a secretarial college, and started work as a legal secretary, a job found for her by a member of the family. It was a local job with an Indian firm. She found the work hard and exacting, but coped with it. She enjoyed a social life, but only within the family. She went out with her sisters or parents and there were many family parties and outings. She never had a boyfriend but would sometimes talk about boys with her school friends and her sisters. There was one boy that she liked very much, but she admired him from a distance. Her parents knew about the existence of her voice but also told her to try to ignore it.

She continued to live at home, and she learnt to drive and would take her mother shopping. When she was twenty-four, her parents arranged a marriage for her. She was happy to comply and liked the young man. They had a large Hindu wedding and then a three-week honeymoon. They came home to live with his parents and younger brother, and she was expected to help out in the family's newsagent's shop as well as do most of the shopping and housework. Her mother-in-law did the cooking. She said her marriage was happy, but after a year her husband said he wanted to divorce her because he was really in love with another woman, had been all along, and now he wanted to marry her instead. Vanisha could do nothing about it. For a month before the divorce everyone stopped talking to her. She was living in their house and eating with them, but being completely ignored as though she had already left. I asked her how she felt at this time and she said, 'I felt angry. I had done nothing wrong and I still loved my husband.' I asked how she coped with being ignored and she said she used to cry in her room.

Her husband divorced her, taking back all the jewellery he had given her, and she was sent back to her parents. Shortly after she returned home, her

parents sent her to India to stay with a cousin. Her cousin was a few years older than her and had recently married. They both worked, and Vanisha was like an unpaid housekeeper in their home. She did all the cleaning, cooking, laundry, and shopping. I asked her how she felt at this time and she said, 'Lonely.' She worked during the morning and slept most of the afternoon. The voice accompanied her all the time. Her cousin's wife was a nurse and she arranged for Vanisha to see a doctor about the voice. The doctor told her to ignore it. After two years, Vanisha asked if she could return home to her parents and eventually was allowed to do so. She took a job working in a local supermarket. Shortly after that, her father died suddenly from a heart attack and Vanisha was devastated by grief. She could not stop crying and became deeply depressed. She was hospitalized for six months and it was during this time that she was diagnosed schizophrenic. When she was discharged from hospital she stayed with her mother for a while, but her mother said she could not look after her. Vanisha became absorbed into the mental health system and lived in various places until she was sent to the home where she now lives. She has been there for eleven years.

When she told me about all the times she had been told to ignore the voice I felt quite disturbed. Instead of this helping her, it had allowed the voice to take control of her and to dominate every aspect of her life. How could I ignore such a real part of her life? I tried to imagine what it must be like to live with a constant, domineering questioner in my head the whole time. I decided it would be intolerable. So, I tackled the impact of the voice in every session. I was trying to give Vanisha some control back so that she could have more of a say in how she lived her life. We discussed how this voice was actually a creation of her own making and how she might have felt the need to bring him into her life as a regulatory helper while she was adjusting to her new life in England. He had now taken over though, when she no longer really needed him. She told me that he was an actual man, her mother's neighbour, and he walked with a limp. His name was Longoria. Sometimes he would call out to her when she walked to school, but she used to ignore him. I asked him what she thought he wanted from her and she said, 'Attention.'

At first, I suggested telling him that, as he already knew all the answers to the questions he kept asking her, he might as well go away. This helped a bit, and he would sometimes leave her alone for an hour or two. However, after we had been working together for four months, I read *Mad, Bad and Sad*, by Lisa Appignanesi (2008), a book chronicling the treatment of mentally ill women since 1800, and a chapter in this book gave me an idea. She described how one psychiatrist had used 'reverse psychology' to treat his patients. Reverse psychology is similar to the concept of paradoxical injunction described by Viktor Frankl (1959) in *Man's Search for Meaning*. I decided to adapt this and to try it with Vanisha.

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At our next session, I suggested she might like to try an experiment for one week, which was to tell Longoria that she wanted him to be with her all the time and to report back to her on everything he did every minute of the day. Vanisha looked at me in surprise and laughed, but then said she would try it. A week later, when we sat down together, Vanisha said seriously that she had something to tell me. I asked her what it was. 'He's gone,' she said. I was amazed and asked, 'Gone all the time?', and she said, 'Yes.' This experiment had succeeded beyond my wildest expectations. I suggested she try it for another week. The next week she reported that he was still 'gone'. Sometimes he comes back during the evenings, but she now knows how to make him go away again. Since then he has kept away.

In October, Vanisha was due to have her six-monthly appraisal with her psychiatrist and her carers invited me to attend this meeting. This was about four weeks after the disappearance of her voice. Two of her carers attended the meeting, along with her mother, an interpreter because her mother speaks no English, and one of her sisters. The psychiatrist was there with his assistant and a liaison person between the mental health unit and Vanisha's home, so there was quite a crowd of us. Her carers had warned me that the psychiatrist was unlikely to be sympathetic to this therapy but had not raised any actual objections as Vanisha had requested it, at the instigation of her carers. In fact he was quite charming, almost too charming, and initially asked Vanisha's carers how she had been. He seemed pleased when they reported a great improvement in that she seemed less anxious and much happier generally, took more care with her appearance, going to have her hair and nails done regularly now, and, although she still slept in most mornings until after ten, on the day she saw me she would be up bright and early, dressed and ready for our session.

He then asked Vanisha how she felt. She said that she felt much better. He was writing his notes and casually asked her how much the voice was troubling her. She said that he was no longer troubling her. He looked up in surprise and asked how that had happened. She said that I had given her a technique that made him go away. He seemed astonished, as for so many years he had been treating her without any such success. He looked at me and asked how I had achieved this, so I explained the method I had used. He turned to his assistant and suggested they might like to try this with other patients. He then questioned her mother and sister, who both told him that they had found Vanisha to be much improved. Vanisha had been refusing to take one of her medications for a few weeks as she said it was not helping in her life, and he agreed that she need no longer take this medication if she did not want to and it was not adversely affecting her. Before we left the meeting, he asked me for my details. After the meeting, her carers said they were surprised at how charming he had been and how willing to listen to me.

Since then we have continued our work together and Vanisha is telling me more about her life and also acknowledging her feelings, telling me how sad she felt after her father died and how isolated she felt in India. I believe this is the first time that anyone has ever really listened to Vanisha and the first time that she has been allowed to express her own innermost thoughts and desires. I think the voice represented some kind of an answer or fulfilled a need relating to rejection, yearning, and abandonment and, therefore, a search for attachment. I felt that she was wrapping our togetherness around her and it was sustaining her.

It is still very early days in the therapy and I suspect that there is a great deal more to uncover, but we have made a good start. My hopes are that Vanisha will be able to live a more independent life and to achieve a degree of happiness so far denied to her.

### References

- Appignanesi, L. (2008) *Mad, Bad and Sad*. London: Virago.  
Frankl, V. (1959) *Man's Search for Meaning*. New York: Pocket Books.