

Ontological Risks and Communication Anxieties — on What and Whom Others will ‘Allow’ Us to Be

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“For the word (and, consequently, for the human being) there is nothing more terrible than a *lack of response*” (Bakhtin, *Speech Genres*, 1986, p.127).

“Can I talk with you Cherrie (Nurse Manager of a Secure Unit)?// “Yes, but Dr Ashong is your psychiatrist, why don’t you talk with her?”// “I can’t find my words when I’m with Dr. Ashong.”

“It pains when people avoid us [autistic people] and the schools refuse to take us. I faced it and felt that every day there may be others like me who are facing the social rejection like me. I must make the point clear that *it is not lack of social understanding which causes the weird behaviour*, but it is lack of getting to use oneself in the socially acceptable way, which causes the weird or the undesirable behaviour” (Tito Mukhopadhyay, *Beyond the Silence*, 2005, p.57).

“I can’t believe that anyone born as a human being really wants to be left all on their own. What we’re anxious about is that we’re causing trouble for the rest of you, or even getting on your nerves. This is why it’s hard for us [autistic people] to stay around other people” (Naoki Higashida, *The Reason I Jump*, 2013, p.47).

“The nature of the world in which I live, and in which I wish you lived – all of you... and all the time... but even I don’t live in it all the time – there are times when I catch myself believing that there is such a thing as ‘something’ which is separate from something else (Gregory Bateson, in *An Ecology of Mind, a Daughter’s Portrait of Gregory Bateson*, 2012).

In what follows, I want to explore a *holistic*, rather than an *atomistic* approach to mental disturbances, an approach that places such disturbances out in the world of everyday life, rather than as a dysfunction solely within an individual. Thus, for the moment here, I want just to move around inside the world of human possibilities, and to explore a number of different examples of communication difficulties in which people experience, i.e., *sense*, a certain anxiety — to do with anticipating a damage to themselves caused by other people’s responses to them — that leads them, literally, to shy away from *making the effort to communicate*. For communicating with others is not *done* easily; it requires *labour* on our part to ‘shape’ our expressions to fit both our own *needs*, and *the requirements* of our circumstances. Indeed, opening our mouths to speak in public is not easy for any of us. How will we be judged; how will we be made to feel by how others

respond (or not) to us? Our very being-in-the-world is at stake. Thus, what I want to explore in this talk, are the invisible and silent forces at work in those circumstances in which we all are often reduced to silence, as well as those in which, almost magically, we feel able to be, fully, who we are to ourselves — the seemingly *extra-verbal* circumstances which do not simply affect of talk *from the outside*, but which can exert a direct influence within it.

***The Invisible and Silent ‘Assumptions’ we Express in our Verbal Utterances:
How we ‘Other’ Others in our Talk with Them***

I want to begin with a psychotherapeutic incident that has intrigued me ever since I first read of it, an incident in which the opposite happens, something positive, an incident in which a 30 year old, revolving-door treatment failure — who had been hospitalized on several occasions for what had been diagnosed as paranoid schizophrenia — is talked to by Harry Goolishian (Anderson & Goolishian, 1992) who begins by asking Bill: “What, if anything, could your previous therapists have done differently that would have been more useful to you?” And Bill replies: “*That is an interesting and complicated question. If a person like you had found a way to talk with me when I was first going crazy ... at all the times of my delusion that I was a grand military figure ... I knew that this [delusion] was a way that I was trying to tell myself that I could overcome my panic and fear.... Rather than talk with me about this, my doctors would always ask me what I call conditional questions...*” (p.25).

What intrigues me about it, is that Bill clearly *senses*, immediately, that he is *in* a very different relationship *with* Harry Goolishian, than with his other therapists. And it is this — our immediate *sensing* of the qualitative ‘shape’ of *how* the others around us are *responding* to us, *spontaneously*, and the influence of that on how safe and secure we feel in being who we are to them, and how the ‘shape’ of *that feeling* arouses anticipations within us as to what next might come from them — anticipations as to how they will treat us as being *this* or *that* kind of person in the world — that is my concern here today.

What was *there* in Harry’s *way of talking* with Bill — not in *what* he said, but in *how* he said it — that allowed Bill to make such an instant comparison between Harry and his other therapists, and furthermore, to go on to say: “If a person like you had found a way to talk with me when I was first going crazy ... then WE *could have handled that crazy general... I knew that this [delusion] was a way that I was trying to tell myself that I could overcome my panic and fear*”? What was ‘there’ in Harry’s way of being with Bill that made it possible for Bill to express this?

Before continuing any further with the Harry and Bill story, however, I want to say a few things about our *bodily being* in the world, and the role of our *feelings of orientation* — our feelings or sensings of ‘where’ in the world we ‘are’, feelings of ‘whom’ (or ‘what’) we are with, and of ‘the kind of person’ they *need* us to be if we are to communicate with them in a ‘way’ *that allows us both* to be ‘who’ we take ourselves to be (a requirement that can, of course, so easily become one-sided). All these feelings work in and on us as *required* of us by the situation we are in, we

feel obliged to shape our actions in their terms. Goffman (1967) calls these requirements “involvement obligations” (p.114) — for it is these ‘where’, ‘whom’, and ‘how’ obligations that we must *try to meet* in the step-by-step unfolding of our utterances in their performance. We cannot just simply put our thoughts into words as we please in our talk, we must ‘fit’ them appropriately into a context of other people’s expectations.

As Bakhtin (1986) puts it: “An essential (constitutive) [aspect] of the utterance is its quality of being directed to someone, its *addressivity*.... the utterance has both an author... and an addressee... Both the composition and, particularly, the style of the utterance depend on... how the speaker (or writer) *senses and imagines* his addressees, and the force of their effect on the utterance” (p.95). Sensing and imagining what it is like to be a child, we shape our speech in one way (and talk slowly, clearly, and with emphasis while addressing them), while talking to a speech recognition robot on the telephone, we shape it... well, perhaps in a similar manner.... but if we talk to an adult friend ‘like that’, they would of course feel insulted.

Further, a crucial aspect of the *way* a person is addressed is displayed, obviously, in a speaker’s intonational *style*; and as Voloshinov (1987) points out, intonation is expressive of a particular *social evaluation*, an evaluation that is realized — not at all in the actual *content* of an utterance — but in what I called above its *design*, the ‘where’, ‘whom’ and ‘how’ *involvement obligations* that we sense ourselves as needing to address in our responses to those around us. We meet a friend, and do *friendship talk* with them; a carpenter who must fix our door-frame, and we do door-frame talk with them; the psychiatrist, in a consulting room, meeting a patient, who is there to be ‘treated’, will feel a need do psychiatric-talk with them — the extra-verbal ‘situation’ will determine “the *very selection of the verbal material and the form of the verbal whole*. It [will] find its purest expression in *intonation*. Intonation establishes a firm link between verbal discourse and the extra-verbal context — genuine, living intonation moves verbal discourse beyond the border of the verbal, so to speak... It especially sensitive to all the vibrations in the social atmosphere surrounding the speaker” (p.102). And recipients of our talk will be sensitive to those invisible *vibrations*, even if they are not referred to ‘out loud’ in our talk.

In other words, the extra-verbal situation does not operate on the utterance from outside (as if it were mechanical force); it “*enters into the utterance as an essential constitutive part of the structure of its import*. Consequently, a behavioural utterance as a meaningful whole is comprised of two parts: (1) the part realized or actualized in words and (2) the assumed part” (p.100). And those whose of us whose being-in-the-world is to a degree insecure, can *sense* these “assumptions,” to do with various social evaluations, at work in the intonations of speakers, even when they are not explicitly voiced.

How is it that we can *sense* these ‘assumptions’, even when they are not explicitly voiced? Here, I think, we can usefully turn to William James (1890) and what he has to say in his famous *Stream of Thought* chapter in his ‘Principles’: There he points out that “large tracts of human speech are nothing but *signs of direction* in thought, of which direction we nevertheless have an

acutely discriminative sense, though no definite sensorial image plays any part in it whatsoever...they [these signs of direction] are among the *objects* of the stream, which is thus aware of them from within, and must be described as in very large measure constituted of *feelings of tendency*, often so vague that we are unable to name them at all” (pp.252, 254). In other words, how we intone our speech — how we pace it, the pauses and emphases, the choice of words (the ‘vocabularies’ we draw from) — all these features arouse in our listeners, and in ourselves, anticipations as to what next *could* come; our talk we often say has a ‘grammar’ to it. They reside in us, not as images, not as any ‘thing’ easily nameable, but only as vague feelings, as feeling of ‘???what??? To make sense of them, to be able to respond to them, we need to sense *what they are like* — by formulating them metaphorically, we can, so to speak, begin to bring their indeterminate nature ‘into focus’, so to speak, thus to can gain a practical sense of “how to go on” (no.151) in the situation in relation to them.

The Primacy of our Orienting Ourselves in Engaged Social Activities

I began as I did, with the Harry-Bill episode and with talk of our *ways of orienting or relating ourselves to the others and othernesses in our surroundings*, because it is very easy to think that our capacity to withdraw from the world, and to assume that we must begin our inquiries by *thinking about* our difficulties in life, by *reflecting* upon them. As a consequence, we take as one of our foremost achievements, the ability to form theories and to begin to investigate aspects of our surroundings in their terms: Descartes’ *Cogito ergo sum* — I think, therefore I am — has set the scene for our thought about ourselves for some very long time now. Adopting this aim means that we begin with *our* theories or principles, and must continually be seeking to gain information from them as to which one of *our* ways of thinking is the same as *theirs*.

However, influenced a number of years ago by, among many others, Hubert Dreyfus’s (1967) paper (*Why computers must have bodies in order to be intelligent*) — who in his turn was influenced by Heidegger (1962), Merleau-Ponty (1962), and someone called Samuel Todes (2001) — I began to think instead (Shotter, 1980), that our greatest ability was to allow ourselves to become involved or engaged with the others and othernesses around us, in many different living relations of a distinctive kind, relations of our own fashioning selected from possibilities available to us in our surroundings. As John Macmurray (1961) put it with regard to human infants: “The baby must be fitted by nature at birth to the conditions into which he is born... He is, in fact, ‘adapted’, to speak paradoxically, to being unadapted, ‘adapted’ to a complete dependence upon an adult human being. He is made to be cared for. He is born into a love relation that is inherently personal” (p.48) — where the essence of a love relationship is the lover seeing in the loved one hints of possibilities and responding to them in ways that open them to further development.

In this, speech and language is a secondary development, emerging from our more primary, bodily expressive, gestural forms of communication; it is, of course, a crucial development. For although many animals are social, none have their *form of life*, and consequently their *worlds*,

determined for them by their becoming members of a linguistic community.

As Gadamer (2000) makes clear, “language is not just one of man’s possessions in the world; rather, on it depends the fact that man has a *world* at all. For man the world exists as a world in a way that no other being in the world experiences... languages are views of the world... To have a world means to have an orientation towards it... The concept of *world* is thus opposed to the concept of *environment*, which all living beings in the world possess... man, unlike all other living creatures, has a ‘world’, for other creatures do not in the same sense have a relationship to the world, but are, as it were, embedded in their environment” (pp.443-444) — where by ‘orientation’ I mean, a way of relating to one’s surroundings that is spontaneously expressed, not only in a way of thinking and feeling, and of acting and behaving, but which also ‘shows up’ the person as being a person of a certain kind, as belonging at any one moment to a gathering of others, facing the task of meeting the membership requirements of that social group.

Thus besides our being daughters and sons of our mothers and fathers, as well as nieces and nephews of our grandparents, some of us feel *called* (a vocation) to become mathematicians, others airplane engineers — I nearly did both — others to become musicians or doctors, some chefs, plumbers, carpenters, seamstresses, and so on, while others of us can become intrigued as to *what is it to be human being*, and try to make *that* into a lifetime’s study. In each case, we begin by finding ourselves *answering to calls* that seem to come to us from our surroundings, and as we do, we begin to ‘enter into’ distinctive ‘worlds’, each with their own requirements, with their privileges and obligations.

To return now to the Harry and Bill incident, we can now consider what is was that made Bill’s relation to Harry different from the relations he had so far experienced with his other psychiatrists. When Harry asked Bill: “What are conditional questions?” Bill replied:

“You [the professionals] are always checking me out ... checking me out, to see if I knew what you knew *rather than find a way to talk with me*. You would ask, ‘Is this an ashtray?’ to see if I knew or not. It was as if you knew and wanted to see if I could ... that only made me more ‘frightened, more panicked. *If you could have talked with the ‘me’ that knew how frightened I was. If you had been able to understand how crazy I had to be so that I could be strong enough to deal with this life threatening fear*“ (p.25, my emphases).

And it was after that — after he had talked of the need to find “*a way to talk with me... a way that knew how frighten I was*” — that Bill went on to say that, if such a way had been found, “*then we could have handled that crazy general.*”

So what was Bill was picking up on here? Clearly he had noticed a crucial *difference* — a difference that made a difference (Bateson, 1979) that clearly mattered to him — between how Harry Goolishian related or oriented towards him and how he had experienced his other

psychiatrists.

Anderson & Goolisian (1992) talk of the initial orientation to their clients as the adoption of a ‘not-knowing’ position, which “... entails a general attitude or stance in which the therapist’s actions communicate an abundant, genuine curiosity” (p.29) — a ‘you-tell-me-what-things-mean-to-you’ attitude quite different from an attitude in which *I* am continually seeking *information* from *you* relevant to the confirmation of *my* theories. “Therapeutic questions are drawn,” they say, “from the future by the as-yet unrealized possibility of a community of knowledge [the possibility of creating a shared sense in a shared situation] ... Conversation in therapy is the unfolding of these ‘yet-unsaid’ possibilities, these yet-unsaid’ narratives” (p.34).

But how is it possible for Anderson & Goolisian to think that there is a ‘not-yet-said’ that can be brought to light? Because our experiences do not come to us with ‘name-tags’ around their neck as to ‘what’ they are. They always occur within the larger, multi-dimensional situation we are actually ‘in’ at any one moment — a situation with its own cultural norms and cultural history, as well as the histories of all the others around us inhabiting it — as well as being *sensed* by us *in relation to* the nebulous amalgam of our own past histories. Further, *what* actually *is* our experience at any one moment in time is utterly indeterminate. As William James (1912) put it long ago: “Our fields of experience have no more definite boundaries than have our fields of view. Both are fringed forever by a *more* that continuously develops, and that continuously supersedes them as life proceeds. The relations, generally speaking, are as real here as the terms are...” (p.71).

This means that although our experiences are all *qualitatively* distinct, they are always still open to being ‘worded’ in countless different ways — with each ‘wording’ opening up not only different possible ways of acting in the future, but also of bringing to light *relations* and *connections* with other experiences not previously recognized. Prior to such linguistic formulations, we do not know how to act in relation to our experiences, for they remain indeterminate, and pre-conceptual.

Symptoms as Compensations — Examples in Opening up the ‘not-yet-said’ to Intelligible Expression

Currently, our psychiatric diagnoses are derived from observations of a patient’s symptoms — as if the ‘symptoms’ we observe are direct indicators of a ‘something wrong’ with our inner workings. But are they? Kurt Goldstein (1933/1995), a neurologist and psychiatrist studying brain damage from gun-shot wounds during World War I — aware that what we might call *identity preserving* activities are always at work within living organisms when disturbed — voiced his worries about this method:

“We have become so accustomed to regard symptoms as direct expressions of the damage in a part of the nervous system,” he said, “that we tend to assume that,

corresponding to some given damage, definite symptoms must inevitably appear. We do so because we forget that normal as well as abnormal reactions ('symptoms') are only expressions of the organism's attempt to deal with certain demands of the environment. Consideration of this makes it evident that symptoms are by no means certain to become self-apparent. Symptoms are answers, given by the modified organism to definite demands: they are attempted solutions to problems derived on the one hand from the demands of the natural environment and on the other from the special tasks imposed on the organism in the course of the examination" (p.35).

In other words, as Bill explained, "*I knew that this [delusion, that I was a grand military figure] was a way that I was trying to tell myself that I could overcome my panic and fear.*" He was trying to gain control over the otherwise uncontrollable 'feelings of tendency' (James) at work within him, by acting in relation to them, seemingly, like a general trying to control his armies by *issuing orders to them*. What distinguished Harry from Bill's previous therapists was that, rather than wanting to try to cure Bill of these somewhat bizarre *thoughts*, he wanted to help Bill explore more extensively the *landscape* (if we can call it that) of his *feelings* to discover other possible ways in which they might be linguistically formulated — thus to open up other possible ways in which he might *orient* himself in relation to the others and othernesses in his surroundings.

This shift in a therapist's "form-determining" (Voloshinov, 1987) stance or attitude — from 'testing' to being 'exploratory' — is no small factor in influencing how clients/patients *feel* in relation to those around them, whether they feel that they will be responded to as persons of worth, or experience themselves as being seen as 'deficient' or as 'bad' in some way.

Anne Hedvig Vedeler (2004) worked, experimentally, with a client calling herself Meercat¹. She had been referred to therapy because she was very unhappy with her life and her relationship with her family: "*... it's a weight, it's virtually like being paralysed with so many things, but until I get it off, out, I feel so misunderstood. I can't seem to focus on just one thing, when there are so many....Bill has downgraded me, it's totally untrue, really.*"

Vedeler's experiment was to spend the time in therapy sessions with Meercat, mostly just listening and saying very little — Vedeler had, in fact, already recognized that "I time and again frustrate others by not listening long or well enough." So Meercat had agreed that, as a therapist, Vedeler would simply listen *attentively* to her in a *facially expressive* fashion, and otherwise not say very much at all: "I concentrated on her facial expression, body movement and breathing, as well as her words," says Vedeler.

In describing the 'results' of the 'therapy', Meercat said how important it was to her "*to talk back and forth*" and "*what relief it was to be allowed to say what I wanted to say.*" She stressed also the importance of being heard, saying, "*I don't feel that I'm being heard outside by anybody*

else. I feel that I'm more of a nuisance and that I'm not worth listening to." And in saying this, of course — in saying she felt 'allowed' — she was linking the feeling of being listened to, to a sense of being a person of value, of being someone *not* always needing to meet *other people's* requirements, but as being *free to tend to her own needs*. She talked of being able to go "*little by little*", and of being "*allowed to handle little things at a time, myself,*" and of being allowed to "*waffle on' and 'carry on' without making sense, repeat in the flow of the conversation, go over the same again, go back and forwards,*" also, she notices that "*there is always something extra that comes along unexpected*" — thus, so to speak, to have the time to find her way around inside herself, and to begin to organize her jumbled 'inner world' so as to know how to 'go on' from 'where', at any one moment, she experiences herself as being. In other words, she became changed in her whole way of being in the world. Being 'allowed' to act as she felt she needed to act, at least for a while, seemed to be very important to her.

As Goldstein (1995/1933) goes on to say: "Every unbiased and exhaustive examination of a case repeatedly teaches us that alteration of a given performance even if at first sight it appears to be very prominent, is not necessarily of primary significance for understanding the underlying functional disturbance. On the other hand, a trifle that barely attracts notice may be of the utmost importance... [For instance], the difficulty in finding words, formerly regarded as the main symptom [of aphasia], retreated into the background. The theory of the reduced evocability of speech images became obsolete... since the patients are quite capable of using the words under specific circumstances... The inability to find and use words voluntarily is not due to the primary defect of the speech mechanism but to *a change in their total personality which bars them from the situation in which meaning is required*" (pp.37-38, my emphasis).

Let me repeat that last sentence: "The inability to find and use words voluntarily is not due to the primary defect of the speech mechanism but to *a change in their total personality which bars them from the situation in which meaning is required.*"

Others have voiced a similar thought. Wittgenstein (1980), for instance, remarks: "Madness need not be regarded as an illness. Why shouldn't it be seen as a sudden — more or *less* sudden — change of character?" (p.54); and elsewhere: "The world of the happy man is a different one from the world of the unhappy man" (Wittgenstein, 1922, no.6.43). While Goffman (1967) points out that if we are unable to become spontaneously involved in with the others around us, we will be unable to gain a *firm sense of reality* in our meetings with them — "the minute social system that is brought into being with each encounter will be disorganized, and the participants will feel unruly, unreal, and anomic," he suggests (p.135).

What Goldstein (1995/1933) emphasizes here, then, is the need for a *comprehensive exploration* of the nature of a patient's/client's disturbance: "On the basis of our first examinations, which were not sufficiently exhaustive, we had formed a hypothesis that was not quite adequate. Further examinations drove us to the formulation of a new hypothesis that *did justice* to both old and new facts. The further we advanced with the examinations, the more clearly delineated did

the functional disturbance in this case become” (p.41, my emphasis). Listening to a patient in such a way that *does justice* to *all* the details of their way of being in the world, would seem to be a crucial aspect of what it is for them to *feel* listened to; and this is what Meercat seemed to feel: “*she is able to express her doubts, speaking it out, question herself, look for approval, sort little by little, but in the end, decides for herself*”.

Like Meecat, Debra Lampshire (2009), a voice-hearing service user, also talks of needing sufficient time to tell her *complete* story in psychiatric interviews. She is unusual in having, to an extent, ‘cured’ herself of her ‘nasty voices’. “One of my earliest recollections,” she says, “is an overwhelming feeling of not quite ‘fitting in’; at school, within my family and within my environment. A sense of being on the outside looking in, of watching my life being lived as an observer, rather than a participant. Over time I was to have numerous experiences which would reinforce this sense of ‘detachment’ from others, and the more I experienced it the more I craved to experience the feeling of connection to others..” (p.178).

In other words, also like Meercat, except more so, Lampshire experienced herself as *anxious* at having to live as *others* required her to live. “If one wants to live the life *they choose* one has to be exposed to stress and learn how to deal with it. Essentially this is the art of growing up and dealing with an adult world in an adult way; I hadn’t mastered this. I lived my life fuelled by childish notions and ill-conceived beliefs” (p.182). And in her own reflections on her bizarre behaviour, she now suggest that they have led her to the following premises:

- § “I was just simply being who I was, I didn’t know how to be different.
- § Others determined that I was without reason, I never ever felt that.
- § I was living on instinct so deep and so profound it never occurred to me to question it” (p.183).

And she continues by suggesting that the search “for the cure is the greatest deception of all, for the search is an internal one. One of reconnecting to the self, discovering that you are entitled *to be*, and if you don’t like that self, then it is your choice to change things” (p.184).

“... my wish is to share my thoughts and not to be analysed nor pathologized, but to be listened to. If you can listen to my complete tale and allow me to tell it without casting your own interpretation upon it, every clue and every nuance is there. Discerning the meaning behind my circumstances is a gift consciously and generously shared, and by having someone in your corner to share the burden, together we may free ourselves of the shackles” (p.184).

We can find another example in Tanya Luhrmann’s (2012) work. She talks of Susan, a big, imposing black woman who defends herself aggressively on the street, and who clearly meets the criteria for a diagnosis of schizophrenia — she thought that people listened to her through the heating pipes in her apartment, and heard them muttering mean remarks. But at the time

Luhrmann met her, Susan was a success story; she had her own apartment, and was a student at the local community college. She had, however, resisted all attempts to diagnose her — even though that would have given her a right to housing — as the idea of ‘being crazy’ meant to her, that she was too weak to handle life and that she had a broken brain that could never be mended. Susan had been the beneficiary of a new kind of intervention that simply gave people housing without them having to submit to a diagnosis. So although Susan knew that she had subsidized housing, she thought she had got it because she entered a program to help her get off crack.

As Luhrmann (2012) remarks: “Those who created programs like the one Susan is in believe that the social setting in which a patient lives and imagines herself have as much to do with her treatment as any medication... People are more likely to accept housing when offered it in these programs than in care-as-usual settings, and after they are housed their symptoms lessen — whether or not they are taking medications” (p.7).

My final examples come from Tito Mukhopadhyay (2000) and Naoki Higashida (2013), two severely autistic boys who, without having learned to speak, were taught to write by their mothers — Tito simply by his mother pointing the letters of the alphabet written on a piece of paper, and Naoki using a cardboard keyboard. Without going into too much detail, the point to make here is that both boys talk of not being incontrol of their own bodies: “He felt that his body was scattered,” says Tito, “and it was difficult to collect it together.... The helplessness of a scattered self was to taunt him for years together — even as I write this page” (p.20). While Naoki writes: “There are times when I can’t act, even though I really, badly want to. This is when my body is beyond my control. I don’t mean I’m ill or anything. It’s as if my whole body, except for my soul, feels as if it belongs to someone else and I have zero control over it” (p.68).

So again, the issue is to do with how others *respond to us* when we try to do things: “It pains,” says Tito, “when people avoid us [autistic people] and the schools refuse to take us. I faced it and felt that every day there may be others like me who are facing the social rejection like me. I must make the point clear that *it is not lack of social understanding which causes the weird behaviour, but it is lack of getting to use oneself in the socially acceptable way*, which causes the weird or the undesirable behaviour” (p.57, my emphasis) — a lack of ‘getting to use oneself’ in the socially acceptable way. How could Tito possibly learn such a skill if, from the start, everyone around him responded to him as weird, as not at all ‘like us’?

Naoki puts it this way: “On our own we simply — don't know how to get things done the same way you do them. But, like everyone else, we want to do the best we possibly can. When we sense you've given up on us, it makes us feel miserable. So please keep helping us, through to the end” (p.69).

Conclusion: what do the others around us want us to be?

Above, then, I have not wanted to make any arguments, either for or against any particular

approach to dealing with mental disturbances. I have just wanted to display and explore some phenomena which — if we take a more holistic approach and think of people's disturbances as arising out of their *relations* to the others and othernesses in their surroundings, rather than from wholly within themselves — it seems to me we need to attend to.

The fact is, when we open our mouths to speak, we must not only talk in accord with what the facts will permit, but also in accord with the requirements of the communication setting in place — which often, in the case of our everyday, non-family and non-friends communications, is the reproduction of a certain dominant social ordering. And it follows from this, that if our ways of talking are constrained in any way — if, for instance, only certain ways of talking are considered legitimate and not others — then our understanding and apparently our experience of ourselves, *will be constrained also* (see Shotter, 1989, p.141).

In other words, in our everyday activities, we cannot simply act 'out of' our own plans and desires, unrestricted by the social circumstances of our performances; we must act in some sense 'into' the opportunities offered or afforded us to act, or else our attempts to communicate will fail, or be sanctioned in some way. Thus, in being thus 'situated' our actions take on an ethical or moral quality; we cannot just relate ourselves to the others and othernesses around us as we ourselves please. Our relationship to those others is just as much *theirs* as *ours*, and in performing within it, we must proceed with the expectation that *they* will intervene in some way if *we* go 'wrong' — only with a highly developed skill at anticipating and pre-empting such interventions, can we proceed as we please (see Shotter, 1989, p.144). Amongst those who do not actually love us, we must act only as they will permit or allow us to act — unless... unless...???

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Endnotes

- ¹ She had previously been called this by the other members of a workshop as they thought she showed the same curiosity and alertness as the little animal.

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