

Spaces of Refuge: The Clinical Practice of Félix Guattari and Institutional Psychotherapy

Rachel Wilson and Anthony Faramelli

Biographies:

Anthony Faramelli is a psychosocial researcher and practitioner and a lecturer in Visual Cultures at Goldsmiths, University of London. Anthony's research is situated at the intersection of psychosocial theory, recent French philosophy and postcolonial theory, with a focus on Institutional Psychotherapy and the work of Félix Guattari and Frantz Fanon. Anthony is also a member of the Executive Board of the Association for Psychosocial Studies and a member of the Network for Institutional Analysis.

He is the author of *Resistance, Revolution and Fascism: Zapatismo and Assemblage Politics* (2018, Bloomsbury Philosophy) and an editor, with Rob White and David Hancock, of *Spaces of Crisis and Critique: Heterotopias Beyond Foucault*. Anthony's writing has appeared in the journals *Chimères*, *The London Journal of Critical Thought*, *Film Theory*, *International Journal of Art and Design Education*, *PortArte*, and *Deleuze and Guattari Studies*.

Rachel Wilson is a Recovery Coordinator in an accommodation service for people with high support mental health needs operated by the charity SHP. As a researcher, Rachel's work is situated at the intersection of radical forms of psychotherapy, aesthetics, filmmaking and the histories of institutional analysis. She is currently conducting her doctoral studies in the Department of Visual Cultures, Goldsmiths, University of London. Rachel is also a member of the Network for Institutional Analysis.

Abstract

Guattari's prescient final text *Chaosmosis*, argues that the conditions of Capital responsible for the current social-psychic-ecological crisis of migration demand modes of analysis capable of grasping their complexity, ones grounded in the ethico-aesthetic. It is a text that draws directly from the therapeutic practice that he, Tosquelles, Oury, and others in the Institutional Psychotherapy (IP) movement developed in their clinics. This work entailed the inclusion of aesthetic practices that work to deterritorialise the institution, shifting from carceral sites and creating therapeutic spaces of care and refuge.

This paper will explore the centrality of an ethico-aesthetic approach to the understanding of therapeutic space within the sites and clinical practice of Institutional Psychotherapy. Looking especially at daily life and the inclusion of aesthetic practice, it will explore the particular notion of asylum that emerged in these sites that so informed the clinical and critical work of Guattari and Deleuze, and draw connections to the current global crisis of migration in the necessity of such sites to the forced segregation between those deemed mad and sane.

Key Words

Ethico-Aesthetic, Guattari, Institutional Psychotherapy, Asylum, Refuge, *Chaosmosis*

Introduction

“How can a mode of thought, a capacity to apprehend, be modified when the surrounding world itself in the throes of change?” (Guattari 1995: 12)

Guattari’s final text *Chaosmosis*, from which the above quote was taken, draws directly from the therapeutic practice that he, François Tosquelles, Frantz Fanon, Jean Oury, and others in the Institutional Psychotherapy (IP) movement developed in their clinics to analyse and care for complex and traumatic psychosocial crises. Psychosocial insofar as crises manifest at largescale planetary level – such as the inter-related crises of ecological collapse, political instability resulting from the dissolution of the Soviet Union, and the Tiananmen Square protests – but impact individual psyches, creating unconscious disturbances. As such, analysis and treatment must focus on both the largescale social level as well as the micro level of the unconscious. Central to this practice was the inclusion of aesthetic practices that work towards deterritorialising the institution, shifting from carceral sites and creating therapeutic spaces of care and refuge. For Guattari, ‘survival on this planet is not only threatened by environmental damage but by a degeneration in the fabric of social solidarity and in the modes of psychical life which must literally be reinvented’ (Ibid.: 20). These crises also opened the social field up to a, ‘different deployment of aesthetic components’, new creative life practices that would shift traditional forms of knowledge production (science, technology, economics, etc.) towards aesthetic paradigms (Ibid.: 132).

Reading *Chaosmosis* thirty years after it was first published, one cannot help but think how prescient Guattari’s analysis of the crises is and how important his call for a new ethico-

aesthetic paradigm. The past three decades since its publication have been marked by an acceleration of environmental degradation and the proliferation of wars of Capital, both of which have contributed to mass forced human migration of individuals seeking refuge. Individuals who have been forced from home are subjected to a psycho-social state which the group analysts Chris Scanlon and John Adlam conceptualise being “unhoused”, a state where the mind is untethered from the institutions of care that provide containment (in Wilfred Bion’s sense of the term¹) for the psychic life of an individual (cf. Adlam and Scanlan 2022). The unhoused individual is also “dis-membered,” cut off from the social and left migratory (Adlam and Scanlon 2006: 10). The unhoused mind is fundamentally a psychosocial problem; while it may originate from forces political and social in nature, it is felt at the level of the individual’s dis-membered and alienated psyche. The scale of individuals becoming unhoused is vast and growing by the day. This means that a psychosocial practice that is able to think at both the planetary level as well as the level of the individual unconscious, such as the practices of Institutional Psychotherapy as outlined by Guattari in *Chaosmosis*, is required to address this problem.

Through an analysis of Guattari’s clinical practice alongside his concept of the “ethico-aesthetic”, this article will seek to apply Guattari’s insights to our contemporary psycho-social crisis of asylum. To do this, we will proceed by first briefly outlining the contemporary issues contributing to forced migration and being unhoused, in both the social and psychic sense of the term, in order to establish the scale of the problem. This section will draw heavily from the thought of Adlam and Scanlon, specifically their concept of the unhoused

¹ This concept will be flushed out later in the article, but, as summary, containment refers to the process in which the analyst is able to house and process the analysand’s destructive feelings and feed them back to the analysand in a way that allows them to learn from those feelings.

mind. By reading Guattari through two contemporary practitioners, we hope to demonstrate the continued relevance of Guattari's thought and how it enhances current psychosocial theory and practice. We will then turn to Guattari's clinical work in La Borde, specifically the creative filmic practices done in collaboration with residents, to offer a grounded example of the ethico-aesthetic and how creative practices create a nomadic caring institution, a migratory institution able to provide containment for those moving with and within it.

Seeking Asylum

Before examining issues of asylum vis-à-vis Guattari's practice and thought, it is worth taking some time to flush out the related psychosocial and political implications of asylum, what's at stake for those who are unhoused and the scale of problem. "Asylum" is a term that is often used, but the complexities of the word are seldom fully understood. Asylum shares a linguistic root with refuge (asylon in Greek) via the notion of sanctuary, and yet, paradoxically, as an historic mechanism of mental health care it has been responsible for traumatic processes of forced displacement, exclusion and confinement. Politically and sociologically, asylum tends to be (mis)understood as being settled. A salient example of this understanding is seen in the language used by UK government who define asylum as being given "leave to remain" in the country without fear of deportation for five years, at which point the person can apply to permanently *settle* in the UK (<https://www.gov.uk/claim-asylum/decision>). What these two uses of the word asylum have in common is a static sense of stillness, either from being politically and socially settled (a term which conveys a

sense of mental and emotional tranquillity as well as physical inertia) or by being trapped within the enclosed and carceral space of a psychiatric ward.

However, in truth asylum has little relation to stillness. Rather, the term relates to movement. Indeed, asylum seekers moving across borders defines the world's current political and psychosocial reality. As an illustration of the current global scale of asylum-seeking migration, the twenty-first century has witnessed the Syrian refugee crisis (6.5 million registered refugees and asylum seekers), the Yemenis refugee crisis (4 million registered refugees and asylum seekers) and the Rohingya refugee crisis (890,000 registered refugees) (UNHCR 2022). By mid-2021 there were approximately 84 million forcibly displaced people worldwide; 48 million internally displaced people, 26.6 million refugees and 4.4 million asylum-seekers (UNHCR Refugee Population Statistics Database 2021a),

The figures indicated above are currently increasing due to the on-going Russian invasion of Ukraine. At the time of this writing (25 March 2022) 3,772,599 refugees have fled Russia's war in Ukraine (UNHCR 2022). This has resulted in the largest refugee crisis in Europe since the Second World War. In addition to forced migration from Ukraine, the current intensification of political repression within Russia has triggered a mass exodus of Russians who are critical of Putin's regime to seek asylum in countries such as Georgia and Turkey. According to some estimates, more than a quarter of a million people have already fled Russia, with more leaving every day (Gessen 2022). This is effectively creating a generation in exile.

The vast majority of asylum seekers are forced to leave their home countries due to the related effects of climate change and armed conflict (UNHCR 2021b). This indicates the persistence of multiple and complex traumas that accompany individuals who have been dis-membered and unhoused from their home countries and cultures. In other words, the problem is not only political, but psychosocial in nature and requires an approach that merges the political reality to the unconscious reality. This means that the approach has to be one that can be scaled up to understand the dynamic politics of asylum as well as scaled down to work through the variable speeds and slowness of unconscious processes.

The state takes as axiomatic the legitimacy of dividing people between citizen and non-citizen, between mad and sane (Adlam and Scanlon 2022: 5). As such, both the migrant and the psychiatric patient are both best understood as existing at the nexus of a certain form of violence and exclusion produced by the contradictory tension of the (forced) need for movement and the static pressure of biopolitical security regimes (cf. John-Richards 2014; Nail 2022). This involves insecurity of some kind, such as such as the loss of political rights and legal status, for an undefined duration of time (Nail 2015: 2). As Thomas Nail argues,

Movement is always distributed in different concrete social formations or types of circulation. It is not just a metaphor. [...] Thus, if we want to understand the figure of the migrant [and we would add here the those seeking asylum more generally due to being in some way unhoused], whose defining social feature is its movement, we must also understand society itself according to movement (Ibid.: 4).

Even when the security apparatus involves limiting physical movement through incarceration, be it in a refugee camp or a psychiatric hospital, the subject is nevertheless in

motion via the circulation of their rights and legal status (Ibid.), not to mention their inner world which is shifting between relative moments of inactivity and moments of extreme movement (Guattari 2011: 15). Movement is often conferred a privileged status within Guattari and Deleuze scholarship via the conceptual persona of the nomad and “nomadology”. In “Treatise on Nomadology – The War Machine” from *A Thousand Plateaus* the nomad is understood to be heterogenic to the State. It is ‘distributed by turbulence across a smooth space, in producing movement that holds space and simultaneously affects all of its points, instead of being held in space in a local movement from one specified point to another’ (Deleuze and Guattari 2002: 363). In this way the nomad is able to avoid capture by the State, to avoid being subsumed by the state systems, enabling the nomad to be able to corrupt other institutional arrangements within the State system (Ibid.: 366). However, to be unhoused is markedly different from nomadism. It is to be in a state of unbound movement, what Guattari and Deleuze would refer to as a destructive line of flight. In fact, Guattari and Deleuze explicitly state that the nomad and the migrant are not the same (Deleuze and Guattari 2002: 380). While the migrant may be physically in motion in an extensive space, what defines the nomad is intensive movement, their inner psychic life (Ibid.: 381). In other words, the nomad is in motion even when staying still.

The principle effect of the unhoused mind is that, paradoxically, the mind is unable to move. Adlam and Scanlon come from a background anchored in working in homeless services and therapeutic communities in London. Drawing from these experiences, they note that when individuals are physically homeless and, as such, mobile and subject to the violence of the street, they nevertheless are in a contradictory mental state where they avoid being

housed, but also want to be housed in the mind of others (2006: 11). They go on to write that,

Caught between these two poles of longing and fear, their life becomes an endless and painful oscillation between the intimacies and fear of the inside (claustrophobic anxiety) and the distances of outside (agoraphobic anxiety) [...]. Such individuals live **liminal** lives; the doorstep, the threshold, the borderline becomes in a sense their only true home and 'unhousedness' has become their state of mind (Ibid. emphasis in original).

To be unhoused in the mind is to be mentally static, trapped in the push-pull tension precisely because of the violent way in which they are forced to be physically mobile. The psychosocial questions then become, "What forms of institutions can create a sense of security without relying on the walls and borders of national statehood?" and "What institution can be created that would house the individual's mind while also creating the possibilities for new forms of mobility, for nomadic subjectivity and thought?" Subjectivity is always formed in relation to institutional arrangements, the subject's line of flight is in relation to an institutional line of flight (cf. Faramelli and Graham 2020). Guattari notes that an institution has multiple heterogenic components, which work in tandem in the production of subjectivity (1995: 7). The institution in this sense is able to "contain" the subject. Wilfred Bion developed the notion of "container-contained" to describe his schema for psychoanalytic practice. The analyst's job is to provide the analysand with a containing environment where the analysand is able to express negative emotions. The function of the container (i.e., the function of the analyst) is to absorb these negative feelings, process them and feed them back to the analysand in a way that is nourishing (Stiers 1995: 132). It

is the process of constructing a safe space within which the analysand is able to express painful and hurtful feelings and have those feelings fed back to them in a way that is not violent, so that they may have a better understanding of where the disturbance is located and how to best turn trauma into something that gives them a greater and more solidified sense of self.

Borrowing (and stretching) Bion's model of container-contained and applying it to Institutional Psychotherapy enables a reading of the institution as container. That is to say that its function is to contain the individual's emotional relationships, to process them and give the emotions back to the individuals in a way that is both manageable and constitutive of sociality (cf. Bion 1962). When this process breaks down and the subject is not contained, they plunge into a psychotic state, an internal state of disorder that mirrors the external reality of insecurity and precarity (Stiers 1995: 132). An institution can either enclose an individual or else open them up to different modalities of subjectivity. This is a process of transformation and creation, producing subjectivity (Billow 2000: 247). The subjectivity produced is therefore indexed to the institution that houses the subject. Guattari beautifully explains this process when reflecting on the role La Borde's kitchen plays in the formation of subjectivity:

Consider, for example, the institutional sub-ensemble that constitutes the kitchen at La Borde Clinic. It combines highly heterogeneous social, subjective and functional dimensions. This Territory can close in on itself, become the site of stereotyped attitudes and behaviour, where everyone mechanically carries out their little refrain. But it can also come to life, trigger an existential agglomeration, a drive machine [...]. The kitchen then becomes a little opera scene: in it people

talk, dance and play with all kinds of instruments, with water and fire, dough and dustbins, relations of prestige and submission. As a place for the preparation of food, it is the centre of exchange of material and indicative Fluxes and presentations of every kind. But this metabolism of Flux will only have transferential significance on the condition that the whole apparatus functions effectively as a structure which welcomes the preverbal components of the psychotic patients. This resource of ambiance, of contextual subjectivity, is itself indexed to the degree of openness (coefficient of transversality) of this institutional sub-ensemble to the rest of the institution. The semiotisation of a fantasm [...] therefore depends on external operators. The proper functioning of the kitchen from this point of view is inseparable from its articulation with the other partial nuclei of subjectivation in the institution (the menu committee, the daily activities information sheet, the pastry workshop, greenhouse, garden, the bar, sports activities, the meeting between the cooks and a doctor with respect to the patients they are working with...) The psychotic who approaches an institutional sub-ensemble, like the kitchen, therefore traverses a well-worked zone of enunciation which can sometimes be closed in on itself and subjected to roles and functions, or find itself in direct contact with Universes of alterity which help the psychotic out of his existential entrapment. It is less by way of voluntary decision than by induction of an unconscious collective assemblage that the psychotic is led to take the initiative, to accept responsibility (1995: 69-70).

As Guattari reminds us, there is no separation of the psyche from the social and the ecological (cf. Guattari 2000). As such, the unhoused mind is a symptom of the unhoused

society. Or, rather, a symptom of a society with a fantasy of being normatively housed. Since Freud, psychoanalysis has long held that the normative mental state is neurotic. However, it was Lacan who abandoned the notion that neurosis is related to a set of symptoms, instead insisting that it is a social structure that cannot be altered (Evans year: 126). In other words, the, 'normal structure, in the sense of that which is found in the statistical majority of the population, is neurosis, and "mental health" is an illusory ideal of wholeness which can never be attained because the subject is essentially split' (Ibid.) Society, therefore, is fundamentally tethered to the Oedipus Complex since Oedipus is the prime mechanism for incorporating neuroticism in the unconscious mind (Ibid.: 132), creating a social structure reliant on defensive against lack and castration (dismemberment) (Ibid.: 124). At the level of the social, defence manifests as fear and aggressivity towards the unhoused and dis-membered because, 'they threaten our idea of what it is to feel that we are in a "housed" stated of mind and members of normal social groupings' (Adlam and Scanlon 2006: 10). That is to say that the unhoused seeking refuge reflect the psychotic global reality that normative society masks with neurotic fantasies of stability such as climate denial, false distinctions between sanity and insanity and the belief that the Global North is immune from conflict.

Neurotic defence of the kind outlined above are arguably what drove Guattari and Deleuze to make the provocative declaration that a, 'schizophrenic out for a walk is a better model than a neurotic lying on the analyst's couch. A breath of fresh air, a relationship with the outside world' (Deleuze and Guattari 2004: 2). Far from simply and uncritically celebrating schizophrenia and minimising the disturbance and violence often associated with it, they are instead thinking through a psychosocial position that moves away from Oedipus to

better facilitate a relationship with the world. Part and parcel of that project is the role Institutional Psychotherapy played in the creation of a type of housing that can facilitate this relationship.

Institutional Psychotherapy and the Ethico-Aesthetic

As Brent Adkins reminds us, Oedipus is not the, 'seal of psychological health and well-being' (2017: 28). Indeed, throughout Guattari's work, both his solo authored texts as well as the books he co-authored with Deleuze, there is a driving psychosocial politics that challenges the fixity of Oedipus and notion that neurosis is unalterable. Guattari's notion of the machinic unconscious rests of the foundation that, 'the unconscious works inside individuals in their manner of perceiving the world and living their body, territory, and sex, as well as inside the couple, the family, school, neighbourhood, factories, stadiums, and universities' (Guattari 2011: 10). In other words, the unconscious is something that is collectively produced and, as such, is reliant of external social and institutional arrangement. This also means that the unconscious has the potential to be rearranged in a way that liberates desire, escaping the trap of Oedipus and the defences against lack and dismemberment.

When examining the pressures of violent global change, Guattari noted that the scale of the problem required, 'changes in production, ways of living and axes of value' (1995: 134).

When conceptualising how this could be done, he turned to Institutional Psychotherapy and the work carried out at La Borde Clinic where,

[E]verything there is set up so that psychotic patients live in a climate of activity and assume responsibility, not only with the goal of developing an ambiance of

communication, but also in order to create local centres for collective subjectivation. Thus [sic] it's not simply a matter of remodelling a patient's subjectivity – as it existed before a psychotic crisis – but of production *sui generis* (Ibid.: 6 emphasis in original)

Institutional Psychotherapy analyses the complicated interaction between modes of alienation within the hospital (Guattari 2015: 27) in order to reshape the institution as if it were modelling clay, an analogy that Guattari was particularly fond of using. The 'hospital,' however, is understood as both the site where forms of psychotherapy are carried out as well as a synonym for society as a whole. The formula can be reduced to this: the hospital is a microcosm of society and the hospital is ill. Before we can treat our patients, we must first treat the hospital (Oury 2006), meaning that the project is political as well as therapeutic.

Institutional Psychotherapy has a very poignant relationship to the political and psychotherapeutic issues contained within asylum given that the movement was in many ways founded in a in a refugee camp with the experiences of François Tosquelles. After Barcelona fell to the fascists in 1939 Tosquelles found himself in a refugee camp in France (Robcis 2016: 217; Robcis 2021: 28-31). The brutal and inhumane conditions of the camp exacerbated the 'war neurosis' that many of the Spanish were suffering, prompting Tosquelles to set up a psychiatric service in the camp (Ibid.; Ibid.: 30-31). The experience of working in the harsh conditions of the refugee camp fundamentally shaped Tosquelles' approach to his psychotherapeutic practice. These experiences led Tosquelles to develop a psychotherapeutic practice that treats the social environment, rather than the individual.

The practice, which he termed social-therapy, is Freudian-Marxist insofar as its analytic focus is on double alienation; mental (Freudian psychoanalysis) and social (Marxism). However, there is no fidelity to either Freud or Marx. This approach, which became the basis for the work undertaken by those involved in Institutional Psychotherapy, is perhaps best elaborated on in Tosquelles' seminal work, *Le vécu de la fin du monde dans la folie: Le témoignage de Gérard de Nerval (Living at the end of the world with madness: Gerard de Nerval's testimony)*. In this book, Tosquelles describes the experience of psychosis as living through the end of the world (2012). The job of the therapist and the therapeutic community is to support the individual as they go about the task of creating a new world, which mirrors the refugee experience of re-settlement.

In his preface to Tosquelles' *Le vécu de la fin du monde dans la folie*, Oury outlines four key approaches Tosquelles has developed to support patients experiencing psychosis, patients living through the end of the world (2012: 27). The first two relate to the patients' lived experience and structures of support that accept their experience as real and significant. The emphasis on the patients' lived experience indicates a radical reformulation of the traditional doctor-patient relationship, where the normal asymmetries of power are distorted and blurred and the doctors no longer have the ethical right to speak for the patients. The second two approaches Tosquelles outlines deal with the starting premise of therapeutic interventions; aesthetic practices that put phenomenological concepts, specifically the ambiance of a space, to work.

Oury writes that the aesthetic existence is always primary as it appears as one of the 'one of the forms of life which takes its meaning in relation to the lived experience of the

catastrophe' (Oury in Tosquelles 2012: 27 our translation). The psychotic is on a destructive deterritorialization, they are in a literal sense living through an apocalypse where everything is torn asunder. Institutional Psychotherapy's approach to treatment is to create a space of refuge that can contain the patients without becoming static and carceral. It is a space that, quoting Jean Oury, 'puts an architectonic of relations into place, of different roles, different functions and different people. It's a question of being able to locate the site within which something happens and what happens' (Oury 2003: 40 our translation). This entails an emphasis on the daily life of the hospital that recognises the importance of the hospital's ambiance in the psychotherapeutic process (Ibid.: 157, our translation). Drawing from Merleau-Ponty, Oury defines ambiance as the experience of environments in everyday life (Ibid.), creating the 'universal power' that connects bodies and things (Merleau-Ponty 2012: 254). All knowledge is established and dependent on our perception of the space we inhabit (Ibid.: 225), meaning that the environment facilitates bodily actions and social interactions, creating habits through stable perceptual associations that anticipate responses from the world (Ibid.: 256, 261).

Given its emphasis on the clinic's ambiance, the preminent role that space plays in psychotherapy, we can argue that Institutional Psychotherapy is, fundamentally, a theoretically informed practice of space and spatial relations which can be transformed in order to create the possibilities for therapeutic encounters (Oury 2003: 158-159; cf. Faramelli 2017 and 2021). This is not, however, to argue that the clinical spaces were ever static. Indeed, Institutional Psychotherapy was as much about the movement through space as it was about the space of the clinic. As Pierre Delion noted,

The heterogeneity of spaces, groups, therapeutic activities, and interstitial times ... is of great importance in the multiplication of possibilities of the palette. But if the patient cannot move freely so as to be able to take part in all of these 'transfers' – even partial, fragile, multiple – that heterogeneity is useless. And this is not only physical movement – rather a freedom of movement as encompassing the 'psychic'. This is why it is essential to put in place a system in which patients can easily choose their own path (quoted in Caló and Pereira 2017: 91).

We see this play out in Guattari's reflections on La Borde when he thinks through the interrelated and complex approaches to aesthetics in psychotherapy. On the one hand, Guattari speaks of the ethico-aesthetic paradigm, which maintains that the aesthetic holds a uniquely privileged position for understanding the generative creative processes of subjectivity, with an ethical dimension inherent in the attention paid to the immediate and wider political contexts in which they are formed. An ethico-aesthetic practice is perhaps best understood as any creative life practice. This implicitly includes aesthetic practices like art and architecture, but also psychotherapy and other psychosocial work. These creative practices make aesthetic interventions into the ambiance of an institution, increasing the coefficient of transversality, the possibility of therapeutic encounters. Here the notion of aesthetics is not one tied to art-making *per se*, but to autopoietic and generative processes (Guattari 1995, 91).

As with Tosquelles' approach, the ethico-aesthetic paradigm eschews pre-determined structures. It instead puts in place conditions to engender the possibility of producing individual and collective agency on new ground (Ibid. 9), while helping to analyse how

problematic structures or dynamic potentials are reinforced in the everyday. Guattari provides a salient example of this when discussing a seemingly innocuous encounter with a patient who has been “stuck” for some time, going around in circles in their treatment. In Guattari’s example, when this person suggests that they would like to do something new, the slight modification in their daily routine presents the analyst with an opportunity to, ‘activate a complex refrain’ (1995: 18). Acting on this slight change in behaviour allows for the possibility that a new activity will not only modify the patient’s immediate behaviour, but also open up new fields of virtuality for them (Ibid.). This represents a radical reimagination of what analysis is. Within the ethico-aesthetic paradigm, analysis ‘is no longer the transference interpretation of symptoms as a function of a pre-existing, latent content, but the invention of new catalytic nuclei capable of bifurcating existence. A singularity, a rupture of sense, a cut, a fragmentation, the detachment of a semiotic content - in a dadaist or surrealist manner - can originate mutant nuclei of subjectivation’ (Ibid.).

Central to the ethico-aesthetic is a reformulation of Lacan’s partial object, *objet petit a*, as ‘partial enunciators’, connecting and catalysing parallel processes of subjectivation (Guattari 1995, 13-14). For Lacan *Objet petit a*, the partial object cut off when the subject learns language, embodies the lack of total jouissance alongside the impossible pursuit of its filling. It is not an object in itself, but marks whichever object desire displaces onto (Stavrakakis 1999: 49-50). In *Chaosmosis*, Guattari describes *objet petit a* as the object that ‘marks the automatisation of the components of unconscious subjectivity’ and proposes the *objet petit a* category be expanded to encompass the full range of subjective nuclei that contribute to the subjectification process (Guattari 1995: 12-13). These include those extra linguistic intensities and machinic enslavements that affect the signifying plane. In Guattari’s

reformulation, *objet petit a* includes partial objects of enunciation, speech act that can become formally creative (Ibid.: 14). This is because *objet petit a* is no longer seen as the ungraspable partial object of desire, but a partial object that returns to the subject through speech acts, including non-verbal forms of communication such as gestures. In this way, the content of a practice detaches itself from its original connotations and “‘takes possession’ of the author” to engender a certain mode of aesthetic enunciation’ becoming the co-creator of an aesthetic practice (Ibid.). There is an accumulation of these partial objects which haunt the subject, creating a polyphony of aesthetic acts (Ibid.: 15).

For Guattari, the refrain is a containing mechanism. In *A Thousand Plateaus*, Guattari with Deleuze define the refrain as a rhythmic pattern that creates territories, territorial assemblages (2002: 312). When presented with the chaos of the world, the refrain offers structure and comfort to the subject. In other words, it contains the subject. As Bifo Berardi rightly notes, the refrain is an, ‘obsessive ritual that is initiated in linguistic, sexual, social productive, existential behaviour to allow the individual – the conscious organism in continuous variation – to find identification points, that is, to territorialize oneself and to represent oneself in relation to the world that surrounds it’ (2008: 129). The rhythmic nature of the refrain allows the subject to understand durations of time, it temporalizes (Ibid.: 130; Guattari 1995: 16). Within the ethico-aesthetic paradigm, the partial objects assemble together to form a complex refrain where the different components retain their heterogeneity, but are nonetheless captured by a refrain which has installed itself as an attractor. The refrain couples the partial objects to the existential Territory of my self (Guattari 1995: 17). For the neurotic, the refrain develops into a “‘hardened” representation, whereas for the psychotic the partial objects move off on delirious lines (Ibid.). The paradox

of the complex refrain is that through the ethico-aesthetic, through creative practices, the complex refrain can open up onto a constellation of universes (Ibid.). This is because the partial objects are linguistic or semiotic fragments, the ethico-aesthetic can intervene to rearrange them into a liberating collective enunciation of desire.

To understand how this works in practice we turn back to the work carried out at La Borde. Although, while the ethico-aesthetic paradigm draws heavily from day to day practices in the clinic; it is both informed by and yet not synonymous with the inclusion of creative aesthetic practices there. 'The important thing here is not only the confrontation with a new material of expression, but the constitution of complexes of subjectivation: multiple exchanges between individual-group-machine.' (Guattari 1995: 7). The inclusion of these partial 'materials' in daily life may include drama, drawing or music, but it was just as likely to include horse riding, mopping floors or baking. Guattari notes that residents often gravitate towards those experiences that are novel to them, relative to their socio-cultural life experience (Ibid.: 6-7). The paradigm itself apprehends these partial materials and their relation to complexes of subjectivation as an aesthetic process writ large: 'one creates new modalities of subjectivity in the same way that an artist creates new forms from the palette' (Ibid.: 7).

For Guattari aesthetic practice, especially performance, in a formal sense points to a constant renewal and engagement with the world that augments modes of analytic understanding (Ibid.:91). Various creative practitioners have been invited to work at La

Borde throughout its history for example Min Tanaka's 1986 Butoh Performance² or collaborative projects such as the 1960 film *The Monkey's Teeth*³ made by René Laloux and La Borde residents. In both films the creative acts allow the patients to have a different means of expression, enabling a non-verbal, but nevertheless, more robust expression of their medicalised experiences. *The Monkey's Teeth* is particularly illustrative of this process. This short animated film gives the patients a different expressive medium to convey their experiences of social exclusion (being unhoused) and bodily dis-memberment (Laloux 1960).

However, perhaps the most poignant documentation of the generative and complex relationality between the ethico-aesthetic paradigm as institutional approach and aesthetic practice is best captured in Nicolas Philibert's documentary film *La Moindre des Choses / Every Little Thing* (1997). This film tracks the preparations for and the presentation of the annual Summer play, Witold Gombrowicz's *Operetta*. The film witnesses the manifold ways in which aesthetic objects work as 'partial enunciators', connecting and catalysing parallel processes of subjectivation (Guattari 1995, 13-14). The film's position as witness to the aesthetic practice, its engagement with aesthetic praxis and its encounter with all other facets of the daily life at La Borde – as well as the necessary interrelation between these scenarios – deftly shows how this process is put to work.

Initial scenes fit easily with archetypal expectations of mad subjects and bodies. Lone individuals make medication-infused slow and halting loops around the grounds of the clinic. A young man – Hervé – hums and hoots to himself, eyes closed. These become

² There is an excellent film of the performance by François Pain, including residents' responses available on YouTube: <https://www.youtube.com/watch?v=VgErye7jXbl>

³ Available online: <https://www.youtube.com/watch?v=17iv3ov3fkY>

interspersed with scenes of work necessary to the running of the house. Tables are set for dinner, the reception phone is answered, psychiatric medication distributed, bedding folded. This activity is distributed collectively amongst all living and working there. Tasks that have been traditionally expected of certain groups: patients, staff, artists, are loosened and reattached, symbolically and practically dismantling pre-existing behaviours and relationalities (Philibert 1997). This generation of new dynamics opens spaces of possibility, contributing to the therapeutic ambiance of La Borde and shifting it from a static institution to a constant process of *instituting* (cf. Faramelli and Graham 2020).

The film depicts how workshops and lessons in preparation for the play draw isolated individuals into dyads and groups around shared aesthetic experience and collective meaningful endeavour. In one scene a group of residents and staff stand in an outward facing ring and, clapping, begin to fall into rhythm together. Residents are encouraged to challenge themselves, to memorise lines, to learn new instruments. Indeed, music as both aesthetic experience and creative endeavour is of central importance in the creation of potential partial enunciators. We see its potential at work mid-way through the film as a resident is invited to play the keys of an accordion. His hesitancy and giddy anticipation are amplified as the musician begins up a tune they had discussed earlier in the day (Philibert 1997). For many, the challenge of approaching new and daunting tasks such as learning and performing lyrics, keeping time, creates a space of determination and urgency at odds with the passive malaise proper to psychotic medication and institutional incarceration.

The process of filming itself sets in motion processes of reflection that disrupt that stereotypical conceptions of lived experiences of madness that lead to containment and

segregation. On several occasions residents return the gaze of the camera, holding themselves for extended moments that contains reflected awareness of self and self in relation to audience. The camera adds another lens of reality to the already performative workshops and stage rehearsals, unfastening as Guattari notes the realism so attached to therapeutic contexts and 'allow[ing] us to grasp the artificial and creative character of the production of subjectivity' (Guattari 1995, 8).

Partial enunciators mentioned above are put to work not just in the name of individual, but also group subjectivation and the new constellations of support amongst them. Footage of the usually hesitant Hervé attempting to walk on stilts sees him falling and stepping in uncharacteristically determined quick succession, the weight of his body held up by a neighbour. His companion challenges him: 'why do you think you cannot do this?' (Philibert 1997). The potential at any turn to pick up, to step into, to test, to express are points around which an ambiance of both support and urgency forms. These processes cut across the power relations and expectations of institutionalised subjectivities to provide, over and above the building itself or psychiatric medication, the sense of being housed, of security, containment and holding, housing that is secure, but not enclosed.

Conclusion

After Tosquelles arrived in Saint-Alban-sur-Limagnole, the first stage of establishing the social therapy that would become Institutional Psychotherapy at the hospital, catalysed by the horror of French internment camps, had been the physical removal of its boundary walls by inmates and staff (Caló 2019, 119). In this act, we see the interconnected process at play

within Institutional Psychotherapy of building a site through shared, meaningful endeavour while dismantling forced institutional confines. These sites offered a genuine site of refuge from a sometimes hostile outside world. The sense of containment and safety within which individuals can rebuild themselves is continually produced alongside a sense of self-identity of the clinic itself, but that is not forcibly segregated. Just as St Alban had forged connections with its surrounding village to access food and supplies (Ibid.), *La Moindre des Choses* points to the way in which La Borde remains connected to other sites, organising excursions, conversing with families, regularly hosting and meeting with other hospitals, clinics and clubs.

Ultimately, the therapeutic practices Guattari outlines in *Chaosmosis* centre around the key issue of providing asylum to unhoused individuals through aesthetic interventions and the production of caring spaces within the clinic. In *Le vécu de la fin du monde dans la folie* Tosquelles conceptualises the experience of psychosis as living through the end of the world. The job of the therapist then is to support the individual as they go about the task of creating a new world. The idea of creating a world is familiar to readers of Guattari. In the “Becomings” chapter in *A Thousand Plateaus*, Guattari, with Deleuze, describes the process of creating a world (*faire un monde*) as a process that is in relation the institutional arrangement that the individual is within (Deleuze and Guattari 2002: 280). This is done through the creation of a complex refrain, composed of heterogenic partial objects, that institutes a form of containment. What we want to suggest is that when Guattari and Deleuze speak of creating a world, they are not being metaphorical, rather they are drawing

from Institutional Psychotherapy and the lived experience of La Borde's residents, the psychiatric patients as well as those living there seeking political refuge.⁴

For Guattari, it is aesthetic modes of production⁵ that offer a privileged lens for both understanding the production of subjectivities and generating them anew (Guattari 1995: 4). The approach at La Borde was to bring the patient into contact with an abundance of means of expression, to multiply the potential vectors of transversality, including creative practices, but also necessary practical tasks such as running the kitchen, that undertake a continuous re-creation both of the clinic and the individuals living there (ibid.: 71).

Testimony from residents cites La Borde as a space that was by no means utopic, but did provide a space of refuge and equity between those living and working there; an equity manifested through the joint work and projects undertaken. This is best articulated in *La Moindre des Choses* by a resident reflecting on life at La Borde after the staging of the annual Summer Play who noted that it was 'society, in general' that made him ill, but which had also contributed here to his restoration. For him, La Borde offered containment from the violence and chaos of the outside world where, 'we [are] here among ourselves' and via the creation of the film, 'you're among us too, now' (Philibert 1997).

As a way of concluding, we have tried to demonstrate how Institutional Psychotherapy is first and foremost a constellation of ethico-aesthetic practices that works to form the

⁴ La Borde also offered asylum to political refugees like Suely Rolnik as well as people looking to avoid being conscripted to fight in the Algerian War of Independence.

⁵ This, of course, is not to suggest that Guattari abandoned the social sciences. However, the aesthetic practice is foregrounded throughout the texts outlining Institutional Psychotherapy authored by Oury (c.f. *La psychothérapie institutionnelle de Saint-Alban à La Borde*), Tosquelles (c.f. *Le vécu de la fin du monde dans la folie*) and, of course, in Guattari's *Chaosmosis*.

conditions in which a world can be created through a collective enunciation. That is to say, it allows for the creation of worlds within a world. For those displaced this is an especially significant project as they were forced to flee the world they knew and find refuge elsewhere. Institutional Psychotherapy shows the ways in which it is vital that these spaces of refuge are not cut off from the outside world, but the fact of their necessity points to an inherent violence of rejection from that wider world. The practices developed at Saint-Alban and carried on at Blida Joinville and La Borde worked to deterritorialise the institution, transforming it from a space of confinement to a caring space, a space of freedom.

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