

A Better Life Immediately, Freedom, Circulation of Money in the Hands of the People, Beauty

by Carmen Roll
and Margherita Bono

“No one knows what madness is”

Franco Basaglia (1968)

Klaus Hartung writes in a story in *DIE ZEIT* of March 12, 2004, entitled “EIN IRRES GLUECK,” about an action of de-institutionalization, conceived and carried out by workers, leaders in the reform movement in Trieste, in the mental asylum in Valona, Albania:

“...in Valona too, the principles put to the test in Trieste have been applied: a better life immediately, freedom can never come soon enough; money must be spent directly for patients and not invested in the establishment of labor-intensive therapeutic structures. And not least, the following principle: more esthetics and less ethics. The new must also be more beautiful...” (see www.exclusion.net; www.zeit.de).

And what if all the lure of “Trieste,” the actions, the work, which led to the closing of the mental asylum, to Law 180 related to psychiatric reform in Italy, could be found in these 4 things, in these 4 “principles”?

A better life immediately, freedom, circulation of money in the hands of the people, beauty?

And all that, not as things that should be earned through the demonstration of wanting to be less crazy, of behaving well, of being aware of one’s own “illness,” but as a right, “regardless,” a priori. So that all reform activity of the psychiatric system in Trieste is none other than a tenacious attempt to extend the right of a daily, decent quality of life (the possibility of taking care of oneself, of being able to choose where and how and with whom to live, acting as one’s own representative) to all citizens, including those in mental distress?

Thousands of people, for 40 years, have come and continue to come to Trieste to take advantage of its services. The tide has not stemmed, even today. The nations of the world change: today people (workers, public administrators and political figures) come from Japan, Palestine, Uzbekistan, Turkey, Russia, etc., and Argentina has just passed a national law that duplicates Italy's Law 180; as I write, workers from Trieste are in China.

"Trieste," the action of closing the mental asylum, which began in 1970, is based entirely on 2 **certainties**. The first is that no one knows what madness is; the second certainty is that we are well aware what madness, mental illness entails for the sufferer (for those not sufficiently wealthy to be able to live independent from society's judgment, from its laws and approval, from its institutions):

seeing their lives diminished and their freedom taken away (crazy people are dangerous, incapable of understanding and reasoning and deciding about their own lives), losing money, growing ugly... losing everything.

Everything that has happened in Trieste since the early '70s refers to these 2 certainties; let's put in parentheses the question "what is madness?" and concern ourselves with the person. Let's stop building castles of stone around "madness" – mental asylums – and ideological castles of every type.

The doors have opened to EVERYONE, MEN AND WOMEN, those who wanted to help open the doors of the mental asylum and give back CIVIL AND MATERIAL RIGHTS to the women and men committed there;

the right to freedom, for the exercise of which many need help, after having been deprived, even for decades; the right to clothing, shoes, a toothbrush, to seeing and meeting people of the other sex, to go into the city, to go to a restaurant, to see the sea, to have money, to work, the right to dance, to draw, to hear and make music, to create and go to the theater... the right to NORMALITY.

The doors of the mental asylum have been thrown open for whoever wants to make a contribution for doing and introducing NORMAL things. It used to be enough to be “normal,” to forget rather than practice the specialisms of the “psy” professions. Psychologists and therapists of every type did not know what to do. The requirement to work within the process of moving beyond mental asylums was a willingness to get involved in the construction of “normal” lives for the inmates. Accompanying people wherever they were, inside the mental asylum, where the doors of the wards were opened, but most of all OUTSIDE. OUTSIDE, where the mad were feared as dangerous, uncontrollable, ugly, dirty, incomprehensible. Accompanying people in normal life situations in order to KNOW THEM, to pierce the mask of mental inmates and to rediscover the person. To set in action a collective process where everyone has a place, everyone has value, everyone is responsible, and the inmate becomes the first ally of a grand effort to emancipate the entire institution.

Have we won this battle? No.

Half the world today still does not distinguish between the concept of “de-hospitalization” and “de-institutionalization.” During 2011, in the Lombardy Region, which claims to be the Italian region with the best health system, people with mental illness were kept in constraints for 50,000 (FIFTY THOUSAND!!!) hours. Think about it: they count the HOURS of constraint, they have an official statistic. There are no mental asylums in Lombardy. But the mental asylum does not need beds in order to exist, it does not need hospital walls in order to exist. Clearly, there are mental asylums behind walls, but tearing down the walls does not guarantee freedom, rights, quality of life... If one wants proof that de-hospitalization is nothing but shifting people from one physical place to another, that there are practices of deprivation of rights, of stigmatization, of the creation of the insane person as a “dangerous monster,” they can very easily move beyond the walls of the mental asylum and vastly expand regional services, given the obscene statistics in Lombardy.

In any case this is nothing new, everywhere in the world we have witnessed, often under the banner of “reform,” the displacement and deportation of people from institutions that have been completely shut down (and strongly and fortunately highly stigmatized for at least 50 years), to institutions spread throughout the region: streets, railroad stations and freight cars, nighttime shelters, concentration camps for the elderly. But these practices are never the center of attention and they are rarely stigmatized. Very elegantly, the phenomenon has also been called “trans-institutionalism.” One only has to decide, for example, that the long-term elderly patients in a mental asylum are “chronic welfare” cases in order to move them to an old people’s home, and we have made them disappear as if miraculously from the list of “psychiatric patients.” They cost much less and we can say that we have closed a mental asylum, or in any case reduced the number of “beds.” We know that throughout the wealthy, northern European world the idea has somewhat taken root that a mental asylum is a mental asylum when it is of a certain size; when it has a small number of beds (let’s say no more than 200), then it is a remedial institution, “a clinic”...

In Germany they are privatizing psychiatric services for entire regions, delegating much of their management to the pharmaceutical industry.

They speak of rational administration and the management of psychiatric services, and we rave about “emancipation,” “freedom,” “ethics and esthetics.” There are those who know “what madness is” and they are organizing their responses. To us it seems that there is increasingly less understanding, and there are ever-growing numbers of people deprived of rights, at risk of ending up on the street, in stations and freight cars, and that it becomes increasingly obvious that the problem is not one for specialists or professionals but rather a question of what kind of society we want. Are concepts such as justice and social equity obsolete?

Having reached this point, I am gripped by a creative crisis, and not only because of the stress of having quit smoking just as I was writing this piece, compromising my ability to function mentally beyond the simplest level, but also because I have the impression that I am saying things that are utterly useless. What is the purpose of saying all these things

today? Are they even true? Or are a few protagonists, all 60 years old and over, accustomed to telling the story this way?

I no longer know how to move forward, and the only idea that comes to me is to speak with Margherita (*), who is 32 years old, who has not experienced this whole story, but who for some reason of her own, 4 years ago came to Trieste; we have worked together for a year, she decided that it could be her story, and she stayed.

“I arrived in Trieste looking for a change, something that was mine, extremely personal, but which at the same time was what Carmen describes in the story she tells in this brief article. Participating in a collective work to overcome exclusion and the creation of contexts that are welcoming and free for all. Feeling that there is also room for me in this undertaking, as there is for anyone else who wants to be involved. To be welcomed and to learn, this is precisely what is behind the welcome.

For me, as for so many, Trieste has been a dream. And immediately, when I arrived, from the first day, I never stopped wondering if, indeed, this were only a dream. Today we are not in the '70s and Basaglia's experience in Trieste is going through a difficult phase, where there are few people who are moving things forward, and they have much less power than they once did. Currently we are immersed in a social, economic, political crisis that makes even the possibility for most young people to find a job, to make a life plan, difficult... not to mention, then, the possibility of putting into practice, putting Basaglia's principles to work.

And yet the lure of Trieste, the history Carmen speaks of, can continue to be fulfilled, always in new forms. It is a dream, a legend, sometimes it comes undone, drifting in a self-celebratory direction, but it can be reality at any moment. I have set out to understand it a bit, and whether it is only a legend or if it is the everyday reality also depends on me, as it depends on all those who share it. In fact this is a dream that in practice becomes a struggle. And if I want to create this struggle, I must make it my own, bring it forward, along with others, every day.

It is a question of fighting exclusion, deprivation, misery, which are vastly widespread today, which impact many of those nearby, who are so tied to the general functioning of institutions and society, and increasingly so. Someone who isn't closed away in a "clinic" but lives without sufficient income, without a job, and if things are going well has a house on the dreary and isolated outskirts, who lives this way in cities, or rather outside the city, which is understood as a place of relationships, exchanges, "normality" – all these people have a lot in common with the inmates in institutions. They are not physically closed off, but it is as if they were. For these people, freedom is an illusion: they do not have the resources to be free. And if the answers to these people are only on a medical and therapeutic level, for in fact answers usually are principally of this type, then their institutionalization is complete. The political significance of their suffering is not recognized; they are denied the right to self-determination and to live with dignity in society. (And I? Am I truly free? And for what?).

The "lure of Trieste" is not only a dream if we take note of this reality, which is also our reality, and if we continue to fight to overcome it. It is not only a dream if it is first of all and always a struggle. Harsh, practical, daily. Today in Trieste we are inventing new responses to counter the exclusion and widespread and vast deprivation in rest homes and in the streets, on the outskirts, to counter the medicalization of misery and isolation. We are going to the outskirts and trying to build with people the possibility of a different life. We are working to transform the health service and social service institutions and to make them more humane. We are going into rest homes to bring the residents outside. We are going right downtown and overcoming barriers. A better life immediately, freedom, the circulation of money in the hands of the people, beauty. This is always the issue, not only for the insane in mental asylums, but also for everyone. It is very simple. But truly complex.

(*) Margherita Bono currently reports from the Habitat-Microarea project in Borgo Zindis in the municipality of Muggia (province of Trieste); she has a degree in sociology.

There is room for whoever wants to contribute to this process of reappropriating rights and building a better “normality”... As I write, I ask myself once again if it is true. Even if it is easy to have a dialogue between the most elderly and the youngest? Even if, in over forty years of experience, the Trieste “movement” has not always succeeded, and is not always succeeding, in maintaining its force and its access? Even if there is no work? Even if they take away our power and resources? Even if we are few in number in this undertaking? Working to overcome exclusion signifies doing it in a way so that there is room for all. It is never true that there is room for all, and at the same time, as long as there is someone who fights so that it might be true, then it is true.

We are not winning. And I wonder about this “we” that I use in my discourse: is there truly a “we”? Am I part of it? Who is part of it? We are not winning, but as long as we fight, as long as we continue to denounce exclusion and demonstrate every day in practice that together we can create the possibility of a better life, we are doing the most important thing. Justice and social fairness are real terms; we, the majority of people, have an enormous need for these. It is possible to fight to create, every day, always in new, never definitive forms, the utopia of Trieste.”