



Teatro Patologico

ROME - ITALY

ALL MAD FREE



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From the Basaglia Law to the Teatro Patologico

The D'Ambrosi method: a response to the closure of asylums for the mentally ill.

On **May 13th 1978**, only twenty days after the discussions in Parliament, the Italian President of the time, Giovanni Leone, signed the Law 180, also known as Basaglia Law. It took seventy-five years for Italy to finally pass the new legislation on supporting those in poor mental health. Lately, the legislation had the final rush: certainly when Bruno Orsini (a psychiatrist in the Christian Democratic Party) deposited his draft law in December 1977, he couldn't imagine that it would be approved only six months later. While even the most optimistic ones doubted it would pass so quickly, two facts helped make it happen: firstly, the Radical Party was threatening to repeal Law 36 from 1904 with a referendum (which nobody wanted, not even those that were fighting that law); secondly and mostly important, Italy was metaphorically suffering from its own 9/11 thirty years before the collapse of the Twin Towers. In Rome, on March 16th 1978, in Mario Fani street, the Red Brigades kidnapped Aldo Moro, president of the Christian Democrats, massacring his five bodyguards. The entire country fell into a sort of limbo that lasted 55 dramatic days, with the most horrifying of endings. On May 9th, in the trunk of a Renault 4 parked in Caetani street (close to the headquarters both of the Christian Democrats and of the Communist party), Aldo Moro's lifeless body was found. During those terrible days, when every Italian felt like they were walking on thin ice, parliamentary duties could hardly continue as usual. In that climate of deep anxiety, the future Basaglia Law was examined, discussed, modified and approved by two commissions and then voted into existence, firstly by the Chamber and then by the Senate, with a procedure without debate. This was unusual, but in that dramatic year – a year that also saw three different popes take the helm of the Catholic Church – the politicians were willing to do nearly anything to avoid the specter of a popular referendum.

The Law 180 had only 11 articles, but the final effect was overwhelming: all of Italy's asylums were about the close. The norm extended the constitutional right of voluntariness of choosing to refuse or accept the medical treatment. This law – that was heavily criticized – dealt with a thorny issue and made a big and positive step forward, but it also left many questions unanswered and created new different problems. Basaglia, who had proposed the law, was a Venetian psychiatrist. He dedicated nearly his entire life to the mentally ill persons and to the closure of asylums.

As Alda Merini wrote in her book "L'altra verità" (The Other Truth): "The Italian insane asylums, north and south, are a Dante's Inferno, where desperation reigns among deafening screams and fetid smells; they are cages for human leftovers." She herself spent ten long years in one of those awful structures.

In the overwhelming majority of the cases, within the Italian psychiatric hospitals treatments were limited to the electro-shock, insulin injections and anti-psychotic drugs. The patients, who could never leave, were often subjected to such treatments for several hours. It was easy to be sent to an asylum, but it was extremely difficult to leave.

Another patient, who's name was Adalgisa Conti, wrote about her experience and tells us that women were deprived of any privacy. The "mad" person had no right to modesty and yet modesty was presented as a standard by which to measure sanity. Franco Basaglia took on the challenge of that sinister institution and sought to give dignity back to the human beings. He made every effort to give a "human" dimension to a place of terror, through a series of small but fundamental steps forward. The concept of "open institution" broke the devastating isolation to which so many patients were subjected. He held that spaces within the asylums needed to be open, walls knocked down. Those within deserved to see the sky, to feel the warmth of the sun, a breeze on their skin, a hug, a kind word. Many patients were denied of all these basic feelings and that was only the beginning of the torture.

The crucial points of Law 180/78. In just few months, the Basaglia Law was embedded into the National Health Plan. Key points included:

- Eliminate the concept of "danger to oneself and others": psychiatric treatment had to be based on the person's right to care and health
- Respect for human rights (for example, the right to vote)
- Closure of all OPs on national territory
- Construction of alternative structures
- Psychiatric services as the mainstay of care
- Establishment of Psychiatric Services (SPDC) in hospitals
- Voluntary treatment: prevention, cure and rehabilitation
- Urgent therapeutic intervention if a patient refuses care or should there be no outside alternative: Obligatory Treatment (Trattamento sanitario obbligatorio, TSO)

Introduction of the concept of "functional correlation" between SPDC and other institutions, along the lines of the principle of ongoing therapy.

Franco Basaglia demonstrated that the mentally ill could be helped in a different way. The gates of the asylums were opened and the patients were allowed to wander, to eat outside, to work. Attention began to be paid to living conditions in the structures and opportunities were created for patients to meet and mingle. Italy became a country at the forefront within the European landscape, though resources were lacking. The Basaglia Law was the first in the world to demand that asylums had to be closed and Italy remains the only country in the world to have carried through on such a radical process of de-institutionalization. The Italian model informs others. Within the Council of Europe and the European Commission, there are calls for others to follow Italy's example. There are those that have recognized Italy's system as being the most economically sustainable and the most respectful of human rights (UK, Spain, Portugal, Greece), but others – especially in Eastern Europe – have yet to begin this process of de-institutionalization.

In Italy, forty years after the approval of Law 180, the situation remains strikingly in the north compared to the south. Our National Health Service needs more resources and staff to lower the widespread inequalities in the sector and to battle, in particular, mental health issues, which represent a growing phenomenon. The Basaglia revolution found fertile ground in Trieste, for example, but elsewhere there are still mental asylums that hide behind the name of "assisted living" places. A lack of resources and trained staff has led to the failure of the Basaglia Law in various Italian cities.

The Italian Psychiatric Department estimates that 800 thousand people are treated every year, with 370 thousand of those patients being new. These numbers are growing: the World Health Organization estimates that in 10 years mental illness will be the most common of all diseases, surpassing cardiovascular illnesses. And this does not even take into account the problem of the stigma suffered by people with mental health issues. There may no longer be barbed wire between the "mad houses" and the rest of society, but boundaries remain: it's sure that it takes more than a law to overcome fear and to learn to live peacefully and naturally together. The main problem with the passing of the Basaglia Law was a failure to draft a valid project for the care of the mentally ill outside those asylums. Untold damage was caused here. In the region of Piedmont, Angelo Pezzana (belonging to the Radical Party) had gathered signatures in an attempt to close asylums well before the passage of the Basaglia Law, so he naturally welcomed that law. However, without a plan for taking care of the newly released mentally ill, he realized that the problem for society would remain greater than ever. "I was a regional council member and I ended up dealing with law 180 and nothing else.", as he puts it. "At least 10 different families came to me in despair: with the closure of asylums, the patients were released and returned in their homes. These patients could even be violent. And of course the

families didn't know either what to do or where to seek help. Closing those asylums was the right thing to do, and our intentions were undoubtedly good. Nonetheless, it was all about the ideology and it was given too little attention was paid. In this way, immense damage was done. Ready, steady, closed! Everyone was freed – and those who had a family to return to were the lucky ones, because others of course ended up homeless; many were hit by trains or jumped off bridges, or died from exposure in the winter. It was a silent massacre. I pleaded with the Region's psychiatrists: please, do something! Like creating new structures! And, in the end, with the help of the Christian Democrats and the Socialist Party, we Radicals managed to create structures to assist the mentally ill, sorts of retirement homes with health assistance, in Piedmont."

The asylums were shut in Italy without any alternative therapy plan or substitute structures. As one psychiatrist put it, it was practically a blitz. The patients who then disappeared were nicknamed "desaparecidos", taking a page from the Argentine book, with General Videla's cruel dictatorship. "In 1985 we started counting the desaparecidos," said Prof. Crosignani. "Around Turin, for example, there were a few hundred. Even Basaglia's epigones applied the law in a "talebán" way. Closure was used as an ideological tool, to the detriment of the patients."

Today psychiatric services exist, but they are not flexible enough. Crosignano has explained: "To fix the situation it took 10 years, until the 90s, with support from all sorts of charity associations. Today, there are mental health units and there are day hospitals to visit when in need. Still, there is too much bureaucracy. For example, if a patient has a heart problem and you give him an appointment for a check up, he will come. A disturbed person may well not want to return or may not be able to. Families may try, but does it make sense for a doctor to sit in their office and wait for a mental patient? The reality of the sickness would require other methods. It is a sad situation."

Franco Basaglia has been quoted as saying "Mental illness does not exist." The psychiatrist Giovanni Jervis – a colleague who later contested Basaglia's views – claims that Basaglia never said or thought such a thing (Basaglia died in 1980). In his book, Jervis explains the "antipsychiatric" movement of those years. The trend was to look more to the social problems underlying mental issues, and not to treat the mentally ill as patients.

The Basaglia Law was necessary, but it is really still being worked on today. Leo Nahon, the principal of the psychiatry ward of a Milan hospital and former assistant to Basaglia, explains: "In psychiatric wards, the excessive use of force is still common, and the mentally ill are often segregated and closed in." Nahon remains in favor of the Law 180. Previously, Italian law (from 1904) demanded that anyone considered a danger to himself or to others or a source of public scandal had to be put away. The primary aim was to remove such figures from society, not to help them recover. Law 180 was a compromise between Basaglia's team and the academic establishment.

In 1978 there were an estimation about 100 thousand patients inside the asylums. The new norms forced psychiatrists to reconsider, to reflect on what was best for the mentally ill. And it was students and intellectuals who first challenged the status quo and began the effort to improve conditions.

The closure of the asylums was just the first step in the field of mental distress. It represented an effort to encourage societies to stop fearing diversity, especially in a form that is only bound to increase. Defending the "different", the mad, the mentally unstable, the weakest members of society, were feelings common in the 1970s, and those feelings facilitated the closure of the inhumane asylums. However, today, an appreciation of strength and power seems to be more in vogue than any sense of solidarity. Perhaps this is the reason behind a discernible spread of madness, an increase in the numbers of desperate people? Hearts have hardened and faith has been lost in the therapeutic gifts of communication and social relations. In this sense, the 180 reform has proved to be limited, indeed, because it foresaw the social integration of the mentally ill in a society that had zero tools for making that happen. As Basaglia said: "The reform was meant to define different pathologies in accordance with the needs of public order and economic development. The alternative psychiatric proposal was to help the patient improve their contacts with the real world, even when unable to behave accordingly to the accepted norms of efficiency and productivity."

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A new ethic: Dario D'Ambrosi and his theater therapy

A refusal to succumb to purely economic and political reasoning, which led to a radical revolution on the level of therapy and psychiatric care, pushed D'Ambrosi to seek and to promote an alternative line of development. His aim was to surpass objectionable medical methods so as to improve conditions, to fight the rejection of families, to beat the violent indifference of society towards people who didn't fit in. This was the starting point for D'Ambrosi's therapeutic novelty: the Teatro Patologico, or Pathological Theater. Over thirty years, the project has grown and developed, revealing a new path towards aiding the mentally ill. The evolution of this new response to the needs of the patient has helped creating an environment in which they can more freely express his difficulties.

On August 29th 2005, Umberto Galimberti wrote in the Italian daily La Repubblica, that even the Basaglia Law had left unresolved the question of the "crazy" person's right to express himself, which transcends the consideration of what is "normal" and welcomes and encourages the expression of which is "different". Psychosurgery, neurology and neurosurgery are not the only answers, because the mentally ill do not necessarily want to change – they may rather want to see a change in those around them, on an intellectual and perceptive level. Theater-therapy helps in

this by creating a bridge between the mentally ill and the audience. Reason and lack of reason are both ways of being. Insanity is a different way to see reality, a unique way to explore the interior as well as the external world.

In D'Ambrosi's theater therapy, one significant bit of data is clear. Opening up to a form of expression derived from the natural desire for physical contact seems to give participants a newfound wish to relate to their surroundings. The mentally ill discover new, numerous mechanisms to communicate with others and with the world; there ways are accepted and even emulated by the others. In the end, physical disabilities are reinterpreted as means towards a new capacity of expression.

Everything becomes a game: language is not necessary for comprehension, it is just one way of communication. By working with the body, with the movement, with exercises that have the aim of expressing individuality through a process of research and the generation of emotions, everything comes together in the participant's surroundings. The perception that society has of the patient becomes clear. D'Ambrosi's theater therapy provokes and disintegrates the idea of a common identity. The strength of the emotions serves to destroy obstacles in the name of a social and – especially – human reintegration.

The rules fall away as the patient brings to life what has been hidden away. Aware of the years of repressive and humiliating experiences, this therapy does not seek (like more common therapies) to compress and contain those violent emotions felt by the patient. Parents and relatives often fail to recognize the patient's right to grow, to become an adult, to enjoy some autonomy. Such family represents an ornament that should be eliminated. Often the causes behind the patient's difficulties lie within the parents, who have limited their child's contact with the outside world or made them depending greatly on pharmaceutical treatments (often involuntarily). D'Ambrosi's therapeutic work exercises the inability to react to the unexpected – a situation the mentally ill often find themselves in. Disability education involves not only the patient themselves, but also above all the universe around which their daily life revolves. In this sense, the liberating effect of this therapy – both for the patient and for his family – is a firm and essential factor.

The need to quell uncontrolled behavior deprives the patient of their natural right to act out – even violently – which naturally belongs to the human nature. Such behavior is part of the broad expressive categories of dramaturgical representation, but also of any social dimension, so the expressive freedom experienced thanks to theater therapy allows patients to live their identities in relation to their own emotions. Their bodies are freed, they are allowed to breathe; their existence and identity are recognized as fundamental. The mentally ill person regains confidence with the awareness of their gestures and discovers the pleasure of control without losing that extraordinary ability to be in touch with their most primitive needs.



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