El grupo paranoide

Chapter 2

Social dimension of paranoid behavior

PEDRO CUBERO BROS

THE SOCIAL DIMENSION OF PARANOID BEHAVIOR

Psychiatric disorders, by affecting individuals of a gregarious species, necessarily have repercussions on the patients' immediate environment, repercussions that are almost always significant. Furthermore, the various disturbances do not affect in the same way: agoraphobic, hysterical, schizophrenic, or psychopathic patients, to give some examples, make demands and create situations that are quite different from one another.

Traditionally, paranoid-paranoiac disorders have been associated with a marked propensity to enter into *conflict* with one's surroundings, as well as with *social isolation*. Paranoid individuals are seen as resentful, punctilious, touchy, vindictive, incapable of empathy, rather aggressive, surly, introverted, solitary… in short, the antithesis of sociability.

Persecuted-persecutors.

> "[...] they cannot bear life in a family or in common, they have no moral sense, they get themselves expelled from boarding houses and schools; later, they continually change profession; they lead an adventurous and agitated existence, successively soldier, priest, sailor, they marry and separate from their wives; they swing from libertinism to the most exemplary life, only to relapse into the most extravagant disorders; they have quarrels, lawsuits, duels…" (12).

But contrary to the general opinion, which tends to see in the paranoid individual nothing more than an unsociable and conflict-prone subject in their relations with others, a series of scattered and disconnected observations emerge that point to precisely the opposite: to a special form of paranoid sociability, distinct from the normal kind, and perhaps even to a *paranoid hypersociability*.

The content of certain delusions reveals that, at least in the realm of desires, the paranoid individual vehemently aspires to a harmonious relationship with the other. Patients with erotomania delusions love and know themselves to be loved by the one whom destiny has determined will be united with them, and they imagine a future of complete happiness alongside their "object" (this is the term used by Clérambault). Their ideal is not absolute isolation but coexistence in a perfect marriage. And they do not limit themselves to fantasizing about a happy life as a couple, but instead follow and cornertheir victims, demanding sincerity and courage from them.

The harassment of the beloved generates significant tensions that can even lead to judicial intervention, and in the final stage, that of spite, there is the possibility that the patient may resort to vengeful violence.

Despite this conflictive ending, in erotomanic delusion there arises a longing and an eager search for the Object. What gives meaning to the patient's existence is the certainty that she will end up sharing her

life with him. Therefore, not everything is resentment, introversion, and isolation. Even if it is with only one person, and even if it is after having attributed to him feelings he does not feel, the patient loves, feels loved, and persistently seeks her beloved.

In mystical delusions, exactly the same process occurs as in erotomania, with the small difference that the Object, now, does not turn against the delusional patient but, on the contrary, confirms what he believes.

Mystical delusion

> "Margarita Alacoque (1645-1690), a nun of the *Visitation of Paray-le-Monial*, known in religious life as Sister María, wrote with her own blood the synallagmatic contract that bound her, as she claimed, to the Lord, whom she had say: 'I appoint you heir to my heart and all my treasures for time and eternity; I promise you that my help shall not fail you except when my power fails me; you shall be forever the well-beloved disciple; the plaything that pleases me and the holocaust of my love'" (7).

As for the reformers, they dedicate all their efforts to building a society in which conflicts disappear and coexistence is fully harmonious… Once again, the longing for happiness *with* one's neighbor…

But in all three cases mentioned, the tendency toward the other seems to be limited to the realm of fantasy, while real, everyday contact with others can and usually does remain quite deteriorated and fraught with conflict, in keeping with the traditional conception of the IP as a person of little sociability. It is for this reason that the findings of an epidemiological study conducted among Laotian refugees of the *Hmong* tribe in the United States prove all the more unexpected. Various aspects of their social functioning were studied, and they were also administered the self-report SCL-90 test, which produces a paranoid scale and several paranoid subscales.

> "Four indices of social interaction (proximity to other Hmong households, visits to other Hmong homes, telephone calls to other Hmong and having an American friend) showed association with 5 of the paranoidism scales out of the 16 possible associations [...] These findings indicate that paranoid symptoms are associated with an intensification of contacts within the Hmong community and with isolation from the rest of American society" (15).

To our surprise, the finding of Westermeyer consists in the fact that the most paranoid individuals (according to the SCL scale) visit and telephone their compatriots more than the less paranoid ones. On the other hand, it does not surprise us as much that they relate less with American citizens. What these results suggest is that in certain circumstances, or with certain people (those similar to themselves), paranoidism can entail... an increase in sociability!

Convergence does not always follow ethnic lines; it can also occur with those who share the same field of interests.

Persecuted-persecutors, querulants.

> "This litigation through legal proceedings and challenges often pushes these individuals to become rectifiers of wrongs, to put themselves forward as defenders of ignored rights, and if they have no personal interests to contest, they encourage other people to make claims of that kind, and they constitute themselves as protectors and unofficial advocates of other unfortunate persecuted individuals; such as that querulant patient who is the subject of a report by Buchner (*Journal de Friedreich, 1870, p.263*) who, together with other individuals who shared his ideas, founded a 'Society of Victims for the Protection of Those Who Have Suffered the Injustices of the Courts" (12).

Along these same lines of observation, it is curious that the DSM-IV tells us that paranoid individuals tend to adhere to certain groups, an affiliative tendency that is not recognized, in any way, in any other mental disorder.

Paranoid personality.

> "[...] They may be seen as 'fanatics' and form part of strongly cohesive 'cult' groups, together with others who share their paranoid belief system" (3).

Other authors have made similar observations.

The paranoid relationship. Tizón.

> "It is the external translation of a thought dominated by the basic unconscious fantasies of distrust and hatred, which can lead the patient captured by such a structure to enroll in cults or extremist groups..." (14).

Note the two interesting characteristics that the DSM attributes to groups: 1) *strongly cohesive*, which seems to contradict the commonplace of paranoid unsociability, and 2) they share *paranoid beliefs*, which leads us to wonder what the authors of the text were referring to, whether to beliefs of a persecutory nature or rather to the — somewhat more varied — repertoire of topics characteristic of delusional disorder. It should be clarified that the American word *cults*, translated as "grupos de culto," is the one used in the United States to refer to the type of groups that in Europe are identified as *cults*.

The affiliative tendency may also affect those individuals who, without carrying any pathology or personality disorder, "become" paranoid in response to real threatening situations. In a well-known experiment, two groups of students were made to wait in a room, successively; the first under the belief that they were going to be subjected to a harmless test, while the second were told it would be painful.

They did not wait in the same way. The second group talked more and tended to draw closer to one another, forming a compact group instead of spreading out around the room. The fact that, faced with a plausible threat, the students appear to *cohere* and become more sociable… Does this bear any relation to this series of observations?

Against the characterization of paranoid individuals as conflictive and isolated people, other observations arise that point precisely in the opposite direction.

Perhaps, in some cases, paranoidism might imply certain *leadership qualities*. In fact, the presence of paranoid pathology among some leaders has already been highlighted by the DSM itself.

Paranoid personality.

> "[...] It seems reasonable that individuals with this disorder are widely represented among leaders of mystical or esoteric religions and in pseudoscientific and quasi-political groups" (1).

Paranoid personality.

> "[...] individuals with this disorder may be overrepresented among the leaders of religious groups and other more or less marginal associations" (2).

This capacity for leadership would not be limited to subjects with a personality disorder but could also distinguish some delusional patients, individuals who, despite their madness, are capable of organizing and leading highly cohesive groups of followers.

Paranoia. Kraepelin.

> "When the delusion of grandiosity takes on a religious tone, the patient presents himself in public as an apostle, attempts to found a community, to introduce a new original liturgy, preaches orally and in his writings, or interrupts the priest during Mass" (10).
> "A little more than half a century ago, something happened in England that seems taken from the most obscurantist of times, and which in a striking way illustrates the influence that a religious lunatic can have over stupid and ignorant people. In the autumn of 1832, a handsome man appeared in Canterbury, dark-complexioned, with bright eyes and an elegant beard. He dressed in a fantastic manner, claimed to have come from the Holy Land, and gave the appearance of great wealth. Some six weeks later he delivered an election speech to the *Freeman* of Canterbury, somewhat in the style of Jack Cade. He signed himself as Sir William Courtenay, Knight of Malta. He claimed to be the only son of the last Lord Gurtenay of Powderham Castle, in the county of Devon, and laid claim to the lands of the ancient family. Despite the extravagance of his electoral speech and his harangues, he managed to

> secure the votes of three hundred and seventy-five electors, while each of the other two candidates obtained eight hundred. Being unable to pay his electoral expenses, Sir William was imprisoned for his debts. After his release, he appeared as a witness to spare some men accused of smuggling from punishment. He was tried at Maidstone for perjury, and sentenced to three months' imprisonment and seven years' transportation. He was soon transferred from prison to the county asylum at Barming Heath, as a criminal lunatic, where he remained for four years. Discharged at the request of his father and his wife, in early 1838 he began to harangue the peasants of Kent, denouncing the rich and inciting the farm labourers to claim their share of the land and its produce. The people, very ignorant and dreadfully poor, were fascinated by the strange influence, bold demands, and glittering promises of the relapsed lunatic. He declared that the millennium had arrived and that he performed miracles. He gathered an army of rustics armed with cudgels, and threatened that if any deserted him he would rain fire and brimstone down upon them from the heavens. He led his followers to believe they were invulnerable to bullet and sword. Two constables were sent to arrest him, whereupon Courtenay shot and wounded one of them and stabbed him with a dagger. Two companies of soldiers were then dispatched, who confronted him at Bassendean Wood; with a pistol shot he killed the lieutenant, but was himself killed immediately afterwards, along with six of his followers, by the soldiers' fire. Nine others were wounded, two of them mortally. The peasants charged bravely with their cudgels against the soldiers' bayonets, knocking down an officer and wounding some of the men. It turned out that the so-called Sir William Courtenay was in reality John Nichols Thom, the son of the keeper of a tavern in Cornwall. His mother is said to have been deranged. Ten of the unfortunate simpletons were tried and condemned to death, but the sentences were commuted to hard labour. A woman washed his face in the hope that he might revive, and they placed a board on the tree under which he fell. 'Our rightful and true monarch, the King of the Jews'" (9).

Other clinicians were also surprised by similar cases, which were reflected in vignettes scattered throughout the literature and which allowed a glimpse of a certain relationship between paranoia and the founding and leadership of cults.

> "The passage from the Bible is just as much the cause of the paranoiac having founded a cult upon it, as…" (11).

An idea that would subsequently be incorporated into the DSM-III-R.

Delusional disorder. Grandiose type.

> "Grandiose delusions may be religious in content and cause the individual to become the leader of some cult or sect" (2).

In all likelihood, the authors of the DSM-III-R, in making this assertion, also took into account more recent cases such as that of Charles Manson or Reverend Jim Jones, leader of the People's Temple, a group that carried out the largest known collective suicide in the history of humanity (up to that point, as it would be surpassed in the 1990s in Uganda by another cult group).

In reality, paranoiacs would not only have founded some of the groups we identify as cults, but would also have created and led some of the thousands of *messianic movements* that have come to light throughout the centuries.

Messianic movements. The Christ of Bourges (6th century).

> "At first he is just another inhabitant of Bourges. One day he goes into the forest and suddenly finds himself surrounded by an enormous swarm of flies. Our Berruyer then falls victim to madness. After two years he regains his reason (?) and makes his way to Arles. Once in the Midi, he sheds his clothes, dresses himself in animal skins, and begins to lead an ascetic and somewhat prehistoric life, composed of silence and prayers.
> Convinced that he possesses supernatural powers, he soon sets out on the road again. Destination: the region of the Cevennes. On this occasion he presents himself directly as the messiah. Meanwhile, our hermit has found a companion in the person of a certain… Mary. Does he possess genuine gifts? Or is he simply a skilled conjurer? The new Christ is lavish with miracles. Very soon a fantastic rumor begins to spread through the Cevennes and the Gévaudan: Jesus has returned and heals all those he touches. But that is not all; Christ also predicts the future and offers genuine sessions of clairvoyance.
> His popularity among the peasants is enormous and allows him to form a band of several hundred people.
> Yet the most astonishing thing is that the new Lord also seduces priests. Several clergymen deliberately enlist in his ranks" (5).

Much the same can be said of the founders of *crisis cults* that emerge among primitive peoples.

The preaching of the leaders of these *highly cohesive* groups (cults, messianic movements, and crisis cults) usually includes content that we identify as paranoid in the narrow sense of the word, that is to say, persecutory. But ideas of harm tend in turn to become intermingled with those pointing toward a utopian ideal of solidarity and conflict-free coexistence.

Crisis cults. The Melanesian cargo (20th century).

> "The flag would stop all hatreds and all wars, and would revolutionize the economy with an abundance of cargo for everyone. It contains three stars representing the Father, the Son and the Holy Spirit, a figure at the base (the Virgin Mary) and a tree with ten branches (the Ten Commandments). He suspects he is being subjected to witchcraft by an unknown person, and that is what is delaying the achievement of his objectives" (6).

Is this scheme so different from that of the erotomanic patients convinced that certain people are conspiring to prevent the union of two people who love each other and want to be happy… *together*?

The *cults* and the *fringe associations* mentioned in the DSMs refer us to a minority and peripheral profile: that of groups where individuals with similar tendencies converge. But could it be possible that these same delusional subjects might be capable of leading large masses of people? If Nazism had not won the elections in Germany and the NSDAP had not surpassed —inexplicably— its initial stage as an extravagant fringe group, the study of the biography and writings of Hitler, an obscure, solitary and maladjusted former corporal, a minor painter and frustrated architect, would lead us without any doubt to a diagnosis of *persecutory-messianic delusion* or, making an effort to be charitable, of a most severe personality disorder. But not only did he obtain the electoral support of millions of Germans, but during his leadership at the helm of the Third Reich he enjoyed a *fanatical* allegiance (let us recall that individuals with a paranoid personality disorder were also described as *fanatics*) from a large part of his people. An allegiance that no leader of a liberal-democratic society would ever have dreamed of for themselves. Could the same dynamics of the fringe groups alluded to in the DSMs have taken place in Nazi Germany, only on a larger scale? During that period, among many other peculiarities, Germany became a much more *strongly cohesive* country and one in which, certainly, abundant *paranoid beliefs* were widely shared…

Hitler has not been the only paranoid leader of some of those fanatical societies… Mao feared that the swimming pools in which he bathed would be poisoned, Stalin preventively liquidated those whom he attributed conspiracies and attempts to assassinate him…

One aspect of leadership, the ability to persuade others, seems to stand out in some paranoid individuals...

Delusion of reivindicación.

> "The delusion of reivindicación, a type of convincing madness, can indeed spread to the entire surroundings. A patient of Forel, a doctor, was elected as a member of parliament; a novel was written about his case; thousands of signatures supported the petitions in his favor" (13). [...] and could even affect the relationship with the clinician. Paranoid patients would be well equipped to lead the professional onto their own ground and give them a frankly biased view of the facts — their own — and it would therefore be advisable to interview other informants.

Paranoid personality.

> "Consequently, when the assessment is based on what the patient himself has said, it is easy for his suspicions to appear justified, or for the problems to be attributed to the inadequate actions of others" (4).

Folie à six. Case of the Austrian hairdresser.

> "Mrs. A presented herself as an attractive woman who appeared younger than her actual age. She wore a smart casual outfit and gave the impression of being a pleasant and charming person. She told her story in a compelling and convincing manner, capturing the listener's attention. Furthermore, she produced a clear countertransference: it is not possible that this woman is so ill" (8).

Persuasive gifts, the leadership of marginal groups and totalitarian societies, the founding of cults, the attraction to those groups that share the same type of beliefs… all these observations point to a peculiar sociability that overlaps and coexists with the tendency toward conflict and isolation.

The successive DSMs suggest that those marginal groups may be created, or led, or act as a pole of attraction for individuals with disorders on the paranoid spectrum. But the relationship may perhaps run deeper.

Some research, which we will expand upon later, reveals that cult groups, in and of themselves, can change those who join them, increasing paranoidism indices on psychological tests. A change that would be reversed upon leaving the group.

The fact that African Americans score higher on the Pa (paranoia) scale of the MMPI than the American national average could respond to that same dynamic: the subculture of the *ghetto* would contain paranoid elements that, inadvertently, would influence the members of the minority in a way similar to the influence that sectarian followers seem to undergo. Although, on the other hand, we could also apply the interpretive model of the students in the waiting room: in this case, the greater paranoidism of Black North Americans would be the consequence of the existence of hostility toward them on the part of a predominantly white society laden with prejudice against men of color.

The *paranoid rumors* that, whether or not connected to the media, spread like an oil slick through word of mouth, constitute a curious phenomenon that also compels us to reflect on paranoid sociability. No other psychopathological phenomenon becomes a rumor. Most of the time these are fleeting, anecdotal episodes, without any relevant impact on the behavior of individuals.

> "At the end of the nineteen sixties, a rumor spread through the city of Orléans accusing Jewish merchants of drugging, without the victims' knowledge, the young daughters of their

customers, in order to subsequently subject them to the processes typical of white slavery" (16).

REFERENCES

1. American Psychiatric Association. DSM-III Manual diagnóstico y estadístico de los trastornos mentales. Barcelona (España): Masson, S.A.; 1983.
2. American Psychiatric Association. DSM-III-R Manual diagnóstico y estadístico de los trastornos mentales. Barcelona (España): Masson, S.A.; 1988.
3. American Psychiatric Association. DSM-IV Manual diagnóstico y estadístico de los trastornos mentales. Barcelona (España): Masson, S.A.; 1995.
4. Beck AT, Freeman A. Terapia cognitiva de los trastornos de la personalidad. Barcelona (España): Ediciones Paidos; 1995.
5. Bourseiller C. Los falsos Mesías. Barcelona: Ediciones Martínez Roca SA; 1994.
6. Burton-Bradley BG. The Psychiatry of Cargo Cult. The Medical Journal of Australia 1973; 2:388-392.
7. Dide M. Les idéalistes passionnés. Alcan. París. 1914.
8. Dippel B, Kemper J, Berger M. Folie à six: a case report on induced psychotic disorder. Acta Psychiatr Scand 1991; 83: 137-141.
9. Ireland WW. Folie è deux – a mad family. En Ireland WW. The blot upon the brain, 1st ed. Edinburgh: Bell & Bradfute; 1885. pp 201-208.
10. Kraepelin, Emil. Psichiatry A Textbook for Students and Physicians. Canton (MA): Science History Publications; 1990
11. Kretschmer E. El delirio sensitivo de referencia. Madrid: Ed. Triacastela; 2000. Traducción de la cuarta edición (1966) de Der sensitive Beziehungswahn.
12. Pottier P. Étude sur les aliénés persécuteurs (thèse doctorale). Paris: Asselin et Houzeau, éditeurs; 1886.
13. Sérieux P, Capgras J. Les folies raisonnantes. Le délire d'interpretation. París: alcan; 1909. Citado en F. Colina F, Alvarez JM. El delirio en la clínica francesa. Madrid: Ed. Dorsa; 1994.
14. Tizón García JL. La relación paranoide: la vida desde el búnker. Intersubjetivo 2003; 5:163-192.
15. Westermeyer J. Paranoid symptoms and disorders among 100 Hmong refugees: a longitudinal study. Acta Psychiatr Scand 1989; 80:47-59.
16. Wieviorka, Michel. El espacio del racismo.Barcelona: Ediciones Paidós Ibérica SA; 1992.