

# Intergenerational iatrogenesis: A story of diagnosis, medication, therapy and familial harm

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**KEY WORDS:** harm in therapy, iatrogenesis, mental health services, psychiatric diagnosis

In around 1965 when my mother, Anne, was twelve, she was told she was schizophrenic. A smart, quick-witted child with a talent for comedic poetry and a love of Oscar Wilde, she was not suited to the strict, Catholic grammar school upbringing thrust upon her. There are significant blanks for me as I describe her early life to you: I suspect untold and unknowable trauma, which will always sit uncomfortably with me because I had neither the intuition nor the experience to recognise it in her lifetime. I believed what I was told. I believed the same as she believed—the same as most people believed—that she was just ill. She was ill, and she was a problem.

As I knew her later in life, and experienced her so completely through a lens of “mental illness,” I find myself now wishing to reconnect with those parts of her that I feel were stolen (or, at the very least, deeply suppressed) by psychiatric intervention and societal shame. When I read her poetry today, a few things stand out to me. When she was fifteen, her poems often read in a cheery iambic lilt alongside a paradoxically complementary dark humour; a dynamic which I both recognise in myself and deeply admire in her:

...  
The man looking at you  
With an anxious gaze  
Was a journalist seeking  
A famous last phrase.  
And the man with the camera  
Hoped to see blood.  
His new Kodak film made red look so good!  
...  
(aged 15)

By the time she was seventeen, her writing had become flooded with the anguish she was experiencing, and her pain and isolation are palpable in her words. This poem was written when she was aged seventeen, and is one of the last poems she ever wrote.

## The Rat

Nothing could ever kill the rat  
I think I know the truth of that,  
The pain of which I've often wrote,  
Of bleeding, bleeding from the throat.  
Speed won't overtake the pain  
Acid won't kill the rat.

I prayed to phony angels  
To protect me from society,  
But they raped my virgin mind  
And they sailed away on plastic clouds  
And left the rat behind.

It cuts me and it stifles me,  
Digs its teeth in much too far  
And relieves me of my verbal phlegm  
But always leaves a scar.

(aged 17)

Around the time this poem was written, she was prescribed psychiatric medication for the first time. Already convinced by those around her of her uselessness, the years that followed were punctuated by inevitably questionable choices, unhelpful relationships, abusive relationships, alcoholism and, ultimately, periods of psychiatric incarceration. The woman I knew bore little resemblance to the intelligent, insightful and talented young woman eternalised in her poetry.

I have no doubt that the manner in which her doctors managed her distress caused harm to my mother. I think it changed and shaped her life. Her means of coping were treated as symptoms of illness. The message inherent in the attitudes of doctors and others around her was clear—she was not acceptable. She needed to be changed. She carried this message around with her for her whole life: “Mea culpa, mea culpa, mea maxima culpa” [It is my fault, it is my fault, it is most grievously my fault] she would declare, whenever she found herself unable to cope.

Of course, the chain reaction of this mindset was that I, as her daughter, would also take on responsibility for things that could not possibly be within my control. For me, a very significant example of this happened when I was around ten years old. Social services came to visit the chaotic and unsuitable environment in which I was staying with my mother. Having a sense of responsibility for my mother's welfare I felt I must, at all costs, remain in that flat. After all, I was sensible, sober, and “keeping an eye on her.” So, when social services arrived, I presented as an intelligent, articulate girl—and I was able to spin a convincing lie or two about my experiences, sending the jolly nice young social worker on his merry way.

My mother's psychiatric diagnoses changed over the years. This was confusing and distressing for her, and I think for me too. No longer schizophrenic, in the 1990s she was relabelled bipolar and psychotic. In an undated essay titled “De Profundis (Sorry Oscar)” she wrote:

“What is it?” I ask. Clinical Depression? Manic Depression? Paranoid Schizophrenia? Psychosis? I really would like to know, as would a physically disabled person. But unless you're sure, don't say a word, because the stigma of schizophrenia which I've lived with for most of my life (35 years to date) is harder than it would be if I was a leper. Good on you psychiatrists! Spot on diagnosis in the first

place, lots of back-slapping all round. So now it's anti-psychotics and anti-depressants? Legalised happy pills, what a load of bollocks.

I often wonder what might have happened if my mother had been offered talking therapy at any point in her life. I do recall suggesting it to her once, by which time she must have been in her fifties, and she was very averse to the idea. She was probably right. By this time her wellbeing teetered precariously sometimes, and at other times felt more grounded than it ever had. Unearthing the roots of her traumatic experiences at this point in her life could have caused more harm than good. I think the time to offer her talking therapy was probably forty years earlier.

My experiences and memories of the professionals and institutions she came into contact with were almost entirely dehumanising. In fact, as a child especially, I felt dehumanised along with her. I felt as though I were an inconvenient symptom of my mother's existence. I noticed this particularly when I visited her in the Roundhay wing of St. James' Hospital in Leeds, and later at High Royds, an imposing Victorian asylum which—for reasons that still elude me—I would travel to by myself every Saturday on the train from the age of twelve.

I suppose this is the meaning of the title of this piece—iatrogenesis (harm from that which is supposed to heal) does not stop with the person harmed. It trickles down through generations; it ripples, impacts and repeats. Her shame became my shame, and it has taken years of work to repair my relationship with myself—and, even though she is not here to share in it, my relationship with my mother.

What about my own relationship with mental health services? Well, as a young person aware of my mother's experiences, I flew very much under the psychological radar, self-destructing just the right amount to simultaneously appear functional. So, whilst being missing from home, profoundly vulnerable and at-risk, I still attended school a minimal amount and left with decent A-levels. Looking back, I feel both let down that my teachers and other adults around me did not pick up on my distress and offer some kind of support, and also enormously relieved that I did not come to the attention of mental health services at a time when I would have been unable to challenge diagnosis or medication.

I did not seek any kind of intervention for my emotional wellbeing until after my mother died, when I was 28. My first experience of therapy exposed much deeper wounds in me than the grief I thought I was there to manage. Unfortunately, the therapeutic relationship in which those wounds began to emerge was not a secure enough vessel to contain them. What I experienced at the time as my "too-muchness" (inherited "mea culpa") was, with hindsight, the result of a therapist working beyond his competence, and furthermore failing to recognise where my wounds and his overlapped.

Until this point, I had no idea that "relationship" could be so painful and traumatic. Of course, I had spent my whole life experiencing my relationship with my mother as painful and traumatic. However, for all of my living memory I was fortified against her actions—and so, while the woundings still occurred, I conditioned myself not to recognise or be conscious of them.

Very fortunately, I went on to work with a therapist who was able to hold the space for all of my experiencing. I learnt that ruptures are not fatal, that I am not too much, and that I have intrinsic value. All of this I learnt through relationship. Again, I wonder how things might have been different if my mother had received these messages.

Like my mother, I stopped writing poetry very abruptly at the age of seventeen. I think perhaps dissociating myself from the ways in which we were similar felt like a necessary step in forging a different future for myself. As I look back, I am rather saddened that I felt it necessary to distance myself from her so absolutely, and I imagine this prevented opportunities for connection while she was still alive. If I had been more conscious of my need to develop an individual future for myself, perhaps I could have done so less ruthlessly, and being able to value that which connected us might have had a healing quality for us both.

As it was, her death was a catalyst for my own self-exploration, growth, and return to writing. I am grateful that I have been able to find connection with her through this medium—although up until now, I have not gone so far as to address this link directly in my work. I suspect that the inferential link to my mother was as much as I was able to acknowledge for a long time.

In writing this piece, I have been able to bring to light some of the meanings that iatrogenic harm has held for me through my life. To be able to map my own journey this way is particularly useful for me following the completion of my Master of Psychotherapy degree, in which I researched therapists' experiences of working with clients who have been harmed in therapy. Going forward, I hope to be able to consider how we acknowledge and address iatrogenesis, our individual and collective relationships with harm within the counselling and psychotherapy profession, and what meaning this holds for our work with clients. I also want this piece to serve as a challenge to psychiatric labelling, and to highlight how diagnosis-focused treatment can be received as oppressive and harmful—not only to individuals but also intergenerationally.

My own therapy, which began in the months following my mother's death, allowed me to begin to explore how difficulties resulting from my experiences affected me through my adult life. Nowhere is my internal experiencing at this time more succinctly captured than in my own poetry.

Here is the poem I wrote at the very start of my therapeutic journey, the first poem I had written since I was seventeen. 'I am a Storm' illustrates the impact of carrying inherited iatrogenic harm silently for so long, whilst reconnecting me with writing—and, indirectly, with my mother.

## I Am a Storm

I am a blue-black raincloud,  
A shroud of ashen hue  
Unravelling like velvet  
And enveloping the view.

My mind is growing pressure,  
The accelerating breeze,  
The scattering of songbirds  
And the dancing of the trees.

My thoughts are fading shadows  
On a newly darkened beach  
The vaguest hint of sunshine  
Swiftly rolling out of reach.

My words are growling thunder  
Rising up to fearsome claps  
Electric sparks connect the clouds  
With every fired synapse.

My emotions are a downpour  
Lashing wildly to the floor.  
Suspended in oppressive clouds  
Till they can hold no more.

My body is the battered land  
Left reeling in its wake  
Rebuilding and restoring calm  
With every breath I take.

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**Erin Stevens** is a counsellor/psychotherapist, writer, campaigner and client, living and working in Ilkley, West Yorkshire. She is a member of the Psychotherapists and Counsellors for Social Responsibility steering group and is interested in increasing engagement amongst therapists in issues of politics and power—both in the profession and society. In 2019 she completed a research project examining therapists' experiences of working with clients who have experienced previous harmful therapy. Erin continues to write and develop training in order to encourage discussion about harm and iatrogenesis in counselling and psychotherapy.

**How to cite this article:** Stevens E. Intergenerational iatrogenesis: A story of diagnosis, medication, therapy and familial harm. *Psychother Politics Int.* 2020;18:e1527. <https://doi.org/10.1002/ppi.1527>