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Refusal, social exclusion and the cycle of rejection: A *cynical* analysis?

Abstract

Despite the *best*, and at times the *worst*, efforts of systems of care 'to include', there remains a group of people whose *refusal* to be included remains a problem both for themselves and for society as a whole. Our discussion re-locates the problems arising from the anti-social stance at the heart of this *refusal* from the internal world of the refuser to phenomena associated with what we have called psychosocial *dis-memberment* and the '*un-housed mind*'. We explore the complex reciprocal relationship between the *housed* and the *un-housed*, between society's members and those whom society *dis-members* and we consider some possible implications for individual workers, staff teams and organizations who are tasked with attempting *to house*, *re-member* or otherwise *to accommodate* such people. We conclude with a challenge to practitioners, academics and policy makers to reframe the philosophical basis of their approach towards these complex psychosocial problems.

Key words: dangerousness, Diogenes, disorder, groupishness, homelessness

Introduction

> For the poor always ye have with you . . . (John 12: 8)

This article is based on our direct experience of working as practitioners, supervisors, educators, managers and consultants in a wide range of statutory mental health, social care, housing and criminal justice agencies. In their work with the homeless, the dangerous and the disordered, these agencies are faced with the task of engagement on a daily basis with people whose essentially anti-social stance is, or is construed

to be, one of a refusal to join in. The premise of this article is that, despite considerable attention over recent years being addressed to the problems of the *socially excluded*, there remains a group of people who steadfastly refuse to be included (Department of Health, 1999, 2003; Cabinet Office, 2006; Scottish Executive, 2000, 2001; Home Office and Department of Health, 1999; Department for Communities and Local Government, 1999, 2003, 2008). It is our contention that even if the best efforts of our most experienced workers were channelled into addressing these problems, which, in our experience, is rarely actually the case, there would always remain a group of people who will refuse to play the game and resist all efforts to bring them 'in from the cold'. Whether they be dangerous or perverse people whose violence or intrusiveness presents a risk to others, homeless people with complex needs who refuse to be *settled*, people with severe eating disorders who refuse to eat (or to stop eating), people with drug and alcohol problems who refuse to stop damaging themselves through dangerous addictions, recidivist offenders who refuse to be *corrected*, disaffected young people who refuse to be educated, or those *troublesome* individuals who do not believe that they have a problem, there will always be people who will continue to refuse.

We further contend that all mental health and social policy directives that optimistically, or cynically, envisage a future when all such people will be 'socially included' also involve an essentially stubborn and dangerous societal *refusal* to face up to the reality of these problems; a denial of their essential complexity, chronicity, and the part that society plays in perpetuating the very problems they seek to alleviate (Young, 1999; Jones, 2008). This systemic refusal is dangerous because, no matter how 'politically correct' the policy, or how sophisticated the needs assessment tools, such belief systems are setting up socially excluded people, and the workers charged with trying to reach out to them, to fail. This experience of failure exacerbates a sense of exclusion in the excluded and increases, sometimes to breaking point, a pervasive sense of disaffection and demoralization in the workers (Cooper and Lousada, 2005). The real problem, therefore, becomes a question of how to relate to the refusal that is at the heart of these difficulties, how to relate to offensiveness without becoming offended, and it is our view that this constitutes one of the major challenges facing all modern mental health, social care, education and criminal justice agencies. It is this problem of how to stand face to face with refusal that we would like to address here.

The Diogenes paradigm

In earlier articles we explored links between homelessness considered as states of mind as well as of body, and concepts such as dangerousness and personality disorder (Adlam and Scanlon, 2005; Scanlon and Adlam, 2008a). We offered, as a paradigm for the societal as well as clinical difficulties inherent in reaching out to the difficult-to-reach individual, the story of Diogenes of Sinope (Navia, 2005) who came into conflict with a shameful society which sought to shame him and who, in seeking to maintain a relationship with the shamefulness and hypocrisy of this society, chose to 'hole himself up' in a barrel in the main square in ancient Athens; and in particular of his subsequent encounter with Alexander the Great.

The shame that society wished to imbue Diogenes with came as a result of him being found to have been debasing the currency of Sinope, the discovery of which forced him to flee into exile *persona non grata*. No longer able to live within his own culture, he moved to Athens where he took up residence in his barrel in the 'Agora', or forum, which was not only a centre for commerce but also a place that allowed for philosophical discourse and a promise of a meeting of minds: that public/private space where 'public solutions are sought, negotiated and agreed for private troubles' (Bauman, 2000: 39). The view from Diogenes' barrel was that neither was he a part of society, nor was he completely apart from it and so was philosophically and socially in his proper place; that is, the only place available to him. From his barrel he maintained a questioning and challenging stance towards the society that surrounded him and his protest took the form of a kind of running commentary, through both words and deeds, on the relationships between people and how they were played out in the world. He came to be known as a Cynic, and his Cynicism was to refuse accommodation from societal systems that he regarded as fundamentally untruthful and hypocritical: to 'debase' the socio-political 'currency'. His Cynicism was expressed in various ways. For example, when seen carrying around a torch in broad daylight, he explained he was in search of 'one honest man'. He was known as 'Diogenes the Dog': an animal which was strongly associated with shamelessness in ancient Greek culture; and he would also reflect back to the wider society something of their shaming hypocrisy by living the best way he could: by making the best of his un-housed and dis-membered state. On one occasion, when found masturbating in his barrel, he is

supposed to have said that he 'wished it were as easy to relieve hunger by rubbing an empty stomach'. On another occasion, asked why he was apparently begging from a statue, he replied that he was 'practising disappointment': perhaps a very useful skill for the complex and chronically un-housed population that is the focus of this article.

Diogenes seemed to understand that, if people were offended by him, this was not his problem: but that, if he was offended by what he saw in the world around him, this then *was* his problem and his task was to relate to this offensiveness and to manage himself in this relationship as best he could. In this way Diogenes took up the only position in relation to the world that was open to him; a position that was both criminal and *liminal*. His was a threshold, borderline existence that was neither in nor out. His Cynical position was necessarily anti-social, and was one that was experienced as inherently dangerous and threatening to the status quo. Although in some ways he lived in more tolerant times, for it is not reported that he became subject to any anti-social behaviour order (ASBO) or ancient-world equivalent, nor that the Metropolis felt so concerned about local house prices as to have arranged for him to be forcibly evicted and his barrel fumigated or destroyed.

This powerful combination of social challenging and Cynical enquiry comes into focus in Diogenes' encounter with Alexander the Great – the most powerful man in the world. Alexander is supposed to have sought out Diogenes in his barrel (some authorities have this encounter taking place in Corinth (Navia, 2005; Lane Fox, 2004)) when Diogenes (dangerously) refused an *invitation* to join Alexander at a public function. Alexander found himself so impressed, both by Diogenes' insights but also by the parlous state of his living conditions, that he asked if there was anything he could do for Diogenes. The latter replied from his barrel, in terms familiar to any clinician seeking to offer 'help' to the difficult-to-reach patient: '*Yes there is – you can step aside because you are blocking my light*'. This powerful political and philosophical statement was rooted in refusal. Firstly, a refusal to be shamed and humiliated by the physical state that he had, in part at least, chosen for himself and secondly, a refusal to accept the laws of his society and in so doing to provoke reflection on the limitations of those laws. This utterance was also, of course, a profound and powerful philosophical, and spiritual, challenge to worldly authority as represented by the 'greatness' of Alexander.

This encounter, then, offers a paradigm for the problem of *refusal* that is both clinical and societal. Our latter-day Diogenes stands for the

socially excluded: the homeless, the truants, the anorexics, the addicted, the anti-social, the borderline and all others who in their 'un-housed' states of mind, literally and metaphorically, cannot be accommodated either in the formal structures of the social world or in the minds of its members; but who, unlike the historical Diogenes, cannot metabolize their experience and so cannot more articulately express their protest. Standing in relation to these latter-day Diogenes, Alexander comes to represent both the might and the impotence of the system of care and those charged with working within it. The question then is what becomes of us as practitioners, or for that matter as citizens, when our authority is disregarded. If we stand in Alexander's shoes, do we follow one impulse, to force Diogenes to emerge from his barrel and deal with the dangerous and endangered 'real world' – and to deal with it on our terms, not his? Alternatively, do we wash our hands of him; pass by on the other side and try to take no cognizance of him, beyond being mindful of our own personal safety, and leave him to freeze to death in a doorway?

Structural violence and the traumatizing organization

We begin this section at a more macro level in which we examine the *ordinary* violence of societal projections into the homeless, the dangerous, the dispossessed and others 'on the outside' as explored by Gilligan (1996) who, using an epidemiological analogy in a study of violence in the US prison systems, describes *violence* as like a disease within which he makes a distinction between *structural* and behavioural violence. The latter, the interpersonal violence, the dis-ease of the individual, he sees as always taking place in the context of the former, i.e. within the formal structures, strictures and expectations of an infected and sick society from which the *deviant* or the *dispossessed* are excluded. Zizek pursues a very similar line in slightly different language, distinguishing 'subjective' violence, perpetrated by an identifiable individual, and objective 'systemic' violence, which he defines as 'the often catastrophic consequences of the smooth functioning of our economic and political systems' (2008: 1). For Zizek, systemic violence is the invisible background out of which an act of subjective violence emerges: his point being that if we were more mindful of the systemic violence, if it were more visible, we would then perhaps be less startled when the

subjective violence manifests itself. Subjective violence does not come out of 'thin air' – it only appears to.

Gilligan argues that societally we have a need for there to be victims of violence, power differentials and relative deprivation in order that 'we' can have a more secure sense of our own well-being in relation to 'them', the dis-eased. This ordinary violence, rooted in the humiliation inherent in the *relative* poverty of the dispossessed, is then perpetrated in the large groups and communities that we have co-constructed. We can only really then understand the reason for much behavioural and social violence by thinking how humiliating it is for people to live in *relative* poverty compared to their near neighbours. The envy and the shame born of such profound, yet relative, social disadvantage can be psychologically and emotionally crippling and the emergent violence is born of the experience of having been, and continuing to be, psycho-socially violated. Gilligan maintains that it is impossible to understand individual acts of violence without understanding this relationship between the haves and the have-nots, or to understand violence and dangerousness except in terms of those who have previously experienced themselves as endangered and violated within a shameful, disrespectful and offensive society.

> I have yet to see a serious act of violence that was not provoked by the experience of feeling shamed and humiliated, disrespected and ridiculed, and that did not represent the attempt to prevent or undo this 'loss of face' no matter how severe the punishment . . . (Gilligan, 1996: 110)

Declerk (2006a) in his work with the homeless of Paris makes a similar point when he states that the plight of the homeless is compounded by the insidious sadism of a society that needs to punish those who live on the fringes and so ensures that health and welfare provision will always remain structurally inadequate. More directly he suggests that this is so because we hate them, and we hate them because they refuse and in their refusal are experienced as mocking everything that the mainstream of society holds dear: hope, self-betterment, personal relationships, procreation, bringing up children, and even simply getting up in the morning. They are dirty, smelly, incontinent, and unsociable, and as such are an insult to our aspirations and our narcissism (Declerk, 2006a: 163).

Jordan (1996) addresses the problem of social exclusion from a socio-economic perspective but reaches broadly similar conclusions. His starting point is to observe that though individuals are at their most

vulnerable when they have fewest personal capacities and social resources they are, nonetheless, able to manage themselves and participate usefully in a society that is prepared to invest in a desire to offer them effective protection and meaningful opportunities to participate. Jordan considers the deterioration of living standards of the poorest members of society to be inextricably linked to the unwillingness of anti-democratic, exclusive groups, comprising the included members of society, to collaborate with other groups to share wealth. The consequences of relative psychosocial deprivation and social exclusion have been observed by Felitti et al. (1998), who as part of their ongoing epidemiological studies in the US have clearly shown that a whole range of *adverse childhood experiences* have serious and far-reaching consequences for subsequent levels of adult general health – including a significant reduction in life expectancy. Charlesworth et al. (2004), in their epidemiological review of poverty related health problems, social exclusion and aggrieved states of minds in the UK, similarly conclude that societies with larger income differentials are likely to have a larger burden of relative deprivation, a more hierarchical social structure and so place a greater burden on those that they describe as *living inferiority*.

Our attention is thus drawn not simply to the *un-housed*, the dangerous or the disordered mind in itself but to the relationship between these dis-membered individuals and other *normal* members of a society who consider the differentials *between* the rich and the poor, the haves and the have-nots, the housed and the un-housed, to be normative and acceptable. The social world so constructed is one of institutionalized and reciprocal humiliation and disrespect between the haves and the have-nots: each fearing the other and in their different ways inflicting violence one upon the other through violent action or impoverishing omission. As Zizek (2001: 59) notes, this violently excluding relationship problem is *perverse* in the precise Freudian sense of the term, in that *society* itself is responsible for the calamity against which it then offers itself as a remedy.

Disturbances of 'groupishness'

> The individual cannot help being a member of a group even if his membership of it consists in behaving in such a way as to give reality to the idea that he does not belong to a group at all. (Bion, 1961: 131)

The problem of the relationship between structural and cultural factors and the manifestation of individuals' distress is also at the heart of psychiatric classification systems – although this does not prevent modern alienists from making the individual responsible for this social *dis-ease*. For example, the *Diagnostic and Statistical Manual of Mental Disorders IV* (American Psychiatric Association, 1994: 685) defines personality disorder as 'an enduring pattern of inner experience and behaviour *that deviates markedly from the expectations of the individual's culture*' (our italic), thus making clear that such disorders *cannot* be understood except in relation to the group at the edge of which the individual finds himself.

Of course on the other side of this debased coin many in these overlapping categories of outsiders, labelled 'untreatable', 'unreachable' or 'unteachable' would also regard themselves as such; and so come to occupy the border-country of any organization which tries to help them. They would not readily see themselves as 'clients' or 'service users', still less 'patients' or 'consumers'. Giving up the terrible and painful grievance that is an expression of their refusal is the last thing that they are able to contemplate, because to do so would be to face the *unbearable* grief that underlies it. Steiner coined the term 'psychic retreat' to refer to ways in which we can all, at times of extremes of painful contact with the external world, withdraw into states of mind that are '. . . often experienced spatially as if they were places in which the patient could hide' (1993: xi). Armstrong (2005) developed this using an organizational analogy in his exploration of the ways in which aggrieved persons, at times of difficulty, withdraw and refuse to take up their proper role and appropriate authority in organizations and in the social world. In our use of the paradigm of Diogenes' *barrel* we suggest that there are many and varied psychosocial equivalences that are exactly such *places* for people whose experience is one of actual humiliation and social exclusion. These *places* and *appointments* are made because such people do not yet have the capacity to communicate their disappointment more articulately and, because *we* for our part do not yet have the capacity to understand their offensiveness and refusal as both a cryptic and a straightforward publication of distress, disturbance, disaffection and psychosocial dis-memberment.

So from their barrels they refuse to comply with related expectations about how they should present their complaints, and in so doing thwart others' attempts to assume the role of carer (Parsons, 1951; Norton, 1996; Hinshelwood, 1999; Adshead, 2001). Such people are

caught between Scylla and Charybdis, and, like Groucho Marx, would not be a member of any club that would offer them membership. Of course, like for Groucho Marx, it is perhaps also the case that the *club* that they are invited to join is one which has already ruled against them on the basis of their intrinsic unacceptability and so represents an implicit, if not an explicit, threat to their identity and continuing existence. In Groucho Marx's case it has been suggested that his comment, although very funny, was also a deadly serious *avoidance* of a question about why he had resigned his membership of a club that he came to believe had had a tacit constitution prohibiting the admission of Jews.

In our own work with a wide range of services seeking to manage or to treat 'anti-social' persons our observations have been that, as a result of complex splitting processes that parallel and reflect the societal attitude highlighted above, teams working with these problems find themselves torn between opposing and oscillating impulses (Gabbard and Wilkinson, 1994; Hopper, 2003; Scanlon and Adlam, 2006, 2008b). From a more sociological perspective, both Young (1999) and Bauman (2000) examine parallel social dynamics, using Lévi-Strauss' metaphorical attempts to categorize 'otherness' into two fundamental types of response: the 'anthropoemic', meaning the 'vomiting out' of difference, washing our hands of the excluded; and the 'anthropophagic', the abolition of difference through ingesting, devouring and coercively assimilating. In our use of this metaphor we would like to suggest that one response to the dis-membered is to force or coerce them out of their places of refuge and into a *proper accommodation* but that this response *oscillates* with an opposite desire to wash one's hands of them and leave them out in the cold. In the former case, in which there is often a perceived threat to society (us) from 'them', the anthropophagic response includes an over-use of statutory powers, such as mental health legislation, 'preventative detention' and criminal justice disposal – whilst the latter, more anthropoemic response, is often associated with an under-use of such powers, such that men and women who are little or no threat to 'us' are left uncared for and the real and present danger that they present to themselves goes seemingly unnoticed. They are left out in the cold until the violence that is at the heart of their attacks upon themselves is eventually turned outwards, or until they are forced out of their barrels and into what they may experience as a more or less empty conformity – or until they die.

Intentionality and treatability

> . . . the sufferer who frustrates a keen therapist [*sic*] by failing to improve is *always* [our italic] in danger of meeting primitive human behaviour disguised as treatment. (Main, 1957)

One powerful manifestation of the structural violence that is at the centre of these difficult relationships is the problematic phenomenological question of *intentionality*. A powerful *rational*, but ahistorical, voice within the wider social system complains that the individuals who refuse to be included are 'anti-social' and this comes to mean that they, like Diogenes, are believed to be holding *themselves* outside of the *normal* rules of society – and are doing so *intentionally*. The underpinning attitude is that if they were better able to apply their own conscious, cognitive functions to the problems that they face then they could include themselves. The fact that they do not do this must therefore mean that they are *choosing* to be outside and therefore we need not think about their needs and instead need only address ourselves to their perceived nuisance and offensiveness.

There are many examples from our experiences of this theory in action. In the United Kingdom, persons found to have made themselves 'intentionally homeless' are denied housing. Similarly, a troubled and troublesome tenant in a supported housing project is deemed to have *deliberately* broken the rules and so is 'asked to leave'. In the education system perhaps the greatest challenge is how to deliver normative education to those who stand outside such norms and maintain there is nothing of value to be learned (Cooper, 2001; Maher, 2003). Anti-social behaviour orders (ASBOs) are increasingly being used to *criminalize* those individuals (often the very same young men who 'refused' education) whose vulnerability and sense of social exclusion results in them feeling that they have nothing to gain by 'joining in' (Scourfield and Drakeford, 2002; Declerk, 2006b). At a more macro-political level the same dynamic is also currently being played out with asylum seekers and economic migrants across the world that face ever more complex and arduous scrutiny to determine whether or not, for whatever reasons, they have deliberately rendered themselves stateless. In the politics of the body, too, a similar scrutiny is intensifying from parts of a health care system which seeks to deny physical health care to the obese, to smokers and others who are 'unfit' because their very real illnesses are

seen as resulting from a lack of will power, greed or laziness, rather than unhappiness, social exclusion, psychological dependency or some other psychosocial *dis-ease*.

Also in the UK a recent government expert advisory committee found, yet again, that so-called *personality disordered* people are often denied services because the self-harm, and/or violence, and/or self-neglect with which they present is held to be *intentional* – with the implication that they could and, therefore should, stop being *offensive* (Department of Health, 2003). The consequence for these people of society's widespread difficulty with accepting unconscious motivation is that, out of a sense of violent desperation, those thus excluded may then go on actually to offend against others, or to harm themselves. There is also ample documented evidence that when they do receive 'health care' interventions these can often appear more like 'revenge' or 'retaliation' or, at the very least, prejudice and discrimination meted out by practitioners who have become, at best unwitting arbiters of 'social worth', and at worst agents of social control acting out society's unconscious hatred of 'them' (Roth, 1972; Stockwell, 1974; Jeffrey, 1979; Kelly and May, 1982; Lewis and Appleby, 1988; Department of Health, 1999; Norton and Dolan, 1995; Johnson and Webb, 1995; Declerk, 2006a, 2006b; inter alia).

The violent response

The excluded people whose plight we are concerned to highlight are those whose *shame* is that they have become psychosocially *dis-membered* and *un-housed* as a result of the complex reciprocal relationship played out between 'us' and 'them' within the psychosocial organizations that are 'our' families, communities and societies. As a result of the emergent unbearable states of mind, 'they' then become actually homeless, really dangerous and truly disorderly. It is not surprising then that 'they' so often present as being both literally and metaphorically 'scared out of their skins', 'at their wits' end', 'out of their minds' and 'beside themselves' with the *heaviness* of unbearable being. Set in this context it is not too difficult to understand why, in these violated, violent and un-housed states of mind, some, in their desire to be inside, find themselves seeking literally to 'un-house' others through burglary, robbery or arson and to dis-member others through violent assault, rape and murder.

In seeking to get inside in this way a paradox also obtains: because in forcing their way in so violently, they will usually find that there is no longer an 'inside' that can hold them; the urge to get inside becomes then even more urgent and the cycle is perpetuated. Indeed, many writers have pointed towards these patterns of relating, and the societal response to them, as being a major factor in much recidivistic offending as well as fuelling a whole range of addictive and perverse self-harming and suicidal action when such persons become the prey of their own violent and sadistic internal saboteurs. However, in another sense this cycle of violence and perversity can be understood as an expression of longing for a safe space that could survive the attack and contain their rage and the corresponding hope that these violent impulses can be held and contained and/or otherwise controlled (Cordess and Cox, 1996; Morgan and Ruszczynski, 2007).

Rather than being seen as traumatized through shaming experiences of poverty, deprivation, neglect, and abuse, their *anti-social* stance is construed to be delinquent, deviant or offensive (Gilligan, 1996; Zizek, 2001, 2008; Declerk, 2006a, 2006b). In the face of this presentation the impulsive societal and institutional response, which operates both defensively and offensively, oscillates between opposing and irreconcilable impulses to 'lock 'em in', 'lock 'em out', 'throw 'em out' or 'lock 'em up'. One example of a social response to one manifestation of this psychic threat, highlighted by Cooper and Lousada (2005), is a recent decision taken by the UK Home Office to spend £25 million on a new perimeter wall for a Special High Security Mental Hospital, despite the fact that no-one had ever escaped through the extensive and elaborate security system that already existed. Another example, of an even more sinister attempt to permanently remove the unwanted was described by Evans (2003) in her study of anti-paedophile vigilante action in an English town, which in microcosm carried all the hallmarks of mobilization of particular persecutory and annihilatory anxieties that, on the global scale, has given rise to the sort of 'anthropoemic' ethnic cleansing that has been described by Zizek (2001) and Volkan (2002, 2004). Alternatively, in a curious reversal, we would observe the increasing tendency of those of us with 'homes', literally and metaphorically, to lock *ourselves* into so-called gated communities, with ever more heavily guarded perimeters, in the ultimately futile pursuit of a much wished-for peaceful unconsciousness; as we sleep safely in the *alarmed* houses that we 'hole up' in, on the other side of the ever-higher walls that we construct to protect 'us' from 'them'.

Given the power and pervasiveness of these psychosocial dynamics it should not be surprising that societal institutions and systems of care, far too often, thoughtlessly mirror wider social prejudices in establishing ever more elaborate ways of excluding such people from our services and from our minds, rather than, like Diogenes, hold up the mirror to reflect these prejudices back to wider society. Societal institutions struggle to understand the needs of 'outsiders' *and* their own need for there to be such outsiders, because concepts like 'cultural integration', 'successful resettlement', 'safe and secure disposal', 'treatment and rehabilitation', 'proper accommodation' and other ideas about what constitutes a positive outcome are predicated upon the *workers'* experiences, of what 'housed' and 'secure' states of mind might be, rather than any more meaningful inquiry into what the would-be–won't-be client might actually understand by *feeling safe*. The problem for the worker is that such un-housedness, insecurity and nihilism cannot be split off and got rid of precisely because there are parts of *all* our minds that remain insecure, un-housed and intensely fearful (Foster and Roberts, 1998).

On forgetting and psychosocial re-membering . . .?

> . . . The best lack all conviction, while the worst
> Are full of passionate intensity. . . .(W. B. Yeats, *The Second Coming*)

Individual workers, teams and organizations working with these dynamics inevitably find themselves caught up in related states of un-housedness or *incohesion* (Hopper, 2003). Some come to experience themselves as atomized, monadic, increasingly distanced and alienated within themselves and from their colleagues and from their clients – what Hopper (2003) describes as *aggregated* states of mind. Others come to experience themselves as in something like what Rosenfeld (1971) described as a gang-like, or what Hopper (2003) describes as massified states of mind, within which there is quasi-morale and a false sense that their work task is to direct their shared hostility against an external enemy. Each of these positions involves a mirroring of different aspects both of the divided experience of the clients' fractured and fragmented experience of themselves and of the split nature of the organization within which the worker and would-be client encounter each other. The more the 'difficult' would-be–won't-be client refuses the invitation to

take them, or to put them, 'inside' (which, of course is also a euphemism for being in prison), the greater the pressure on the individual isolated worker or team. A sort of dance is set up, in which the lead is constantly moving back and forth across a boundary characterized by the oscillating 'desire' of the worker(s) and client(s) respectively. The possibility of a more empathic understanding is very easily replaced by the workers' constant *unconscious* attempts to defend themselves and/or each other against the anxiety that emerges in the face of this refusal. As the irresistible force meets the immovable object, the *organization* that was established to house and re-member traumatized and dis-membered people with un-housed minds becomes itself a traumatized organization employing the *services* of dis-membered staff in correspondingly un-housed states of mind. This traumatized organization is itself a mirror image of its relationship to the dangerous and endangered social world, within which it becomes increasingly poorly accommodated and from which it becomes increasingly dis-membered (Hopper, 2003).

In this dangerous and endangered state, the kinds of group activities – staff meetings, supervision, training etc. – that would usually provide staff members with a sense of cohesion and personal identity become a source of tension and those roles such as management, supervision or consultancy whose functions are associated with these tasks are attacked or avoided. In this state, any sharing of workers' *experiential* understanding of the pain of 'the would-be–won't-be client' is denied – as both clients and staff teams adopt an *unconscious* but secretly shared 'basic assumption' state of mind (Bion, 1961; Hopper, 2003) that could be defined as the pursuit of a state in which all *knowledge* of all *distress* and *dis-ease* is to be *dis-membered* from the body of experience. In our experience the un-coupled hostility then either is channelled into a spuriously gratifying fight with 'the establishment', or, more worryingly still, is inflicted upon vulnerable people in ways outlined above. Either way, instead of re-membering [sic] the trauma and pain inherent in the refusal and its own disturbed relationship to it, the organization-as-a-whole finds itself only able to accommodate a problematic *identification* with or *detachment* from the plight of the socially excluded.

Some workers or teams, identified with *passionate intensity*, come to see themselves as 'lean and mean' and become cast in the role of the hero, doing a dirty job under difficult circumstances in order to clean up somebody else's mess. On the other hand, detached others feeling caught between the behavioural violence of clients and the *structural* violence of a wider establishment which doesn't care for them, end

up *lacking conviction* (Adlam and Scanlon, 2005; Scanlon and Adlam, 2008a). Zizek (2008: 74) also borrows from Yeats to examine the political debate across a split between what he refers to as the 'anaemic liberals' who are lacking conviction and 'impassioned fundamentalists'. In our view, neither position is better or worse than the other; rather both are manifestations of the deeply divisive and profoundly painful splitting processes that lie at the heart of our troubled societies and institutions. One operational example of this dynamic that we have frequently encountered lies in the confusion between what are seen as 'rights' and 'responsibilities' of the workers and the clients respectively. On the one hand, there is an insistence that clients have a right to be seen regardless of how they behave, thus violating the rights of staff by threats and intimidation. On the other hand there are confused and confusing *zero tolerance* policies that expect the homeless, the dangerous and the disordered to respect the rights of the staff by behaving *responsibility* in order to be able to access help. Whilst usually played out between different agencies, often both these positions coexist within the same organizations, setting staff against each other, with the result that the split off and forgotten trauma of the clients is re-created and painfully re-played between different factions within the staff team(s).

In attempting to manage, supervise or consult to these problematic dynamic problems, we have invariably found ourselves facing corresponding and parallel dilemmas. Caught between Scylla and Charybdis, represented by respectively the *structural* violence of a system of care that *lacks conviction* and the *passionate intensity* of the staff team's identification with the *behavioural* violence of the would-be-won't–be clients, we then come under pressure to give up our own Cynical questioning and to accommodate the Cynical idea that 'the enemy', represented as either the client(s), or *the establishment*, or both, is 'without'. Whereas, if like Diogenes we can remain in our proper place, neither pulled in nor pushed out, we can then take up the challenge of fielding, metabolizing and reflecting back the hatred and anger that comes with that properly Cynical position. In other words when we are able to maintain a Cynical questioning of these taken-for-granted assumptions, there is the possibility for a more creative conversation or discourse.

However, in the absence of meaningful cohesion, these conversations cannot be had; the risk is that the grievance is then passed through the organization without being digested and is shovelled onwards and upwards into 'the system' (or downwards into retaliatory action against the aggrieved staff or the would-be–won't-be clients).

The aggrieved service which complains to, or about, the system of care is then itself seen as *troublesome*, becomes '*damned by association*', *excluded* and told in so many words to get back to its barrel. And so at every level the dance continues – professional 'goods and services' are apparently exchanged but the net result is a *zero sum game* in which there is no movement and our social system, and its members, at every level, become more impoverished, more ashamed and consequently more aggrieved. At this point no matter who has ended up in which barrel, all have finally achieved the unconscious basic assumption objective of *forgetting* the painfulness associated with the traumas of the most vulnerable amongst us (Hopper, 2003). Of course, it is also at this point that serious (re-)enactments occur which cause very real offence, affront or injury to organization, manager, worker, client or citizen depending on who, in the wider scheme of things, has found themselves to be in the wrong place at the wrong time.

Some concluding remarks

In this paper we have outlined some of the dynamic processes emerging from working with difficult clients in difficult circumstances. We have suggested that it is very often the case that those people who refuse to be included are also those who present the greatest danger – usually to themselves, but also to others. Our observations have been that this situation is a reflection of a wider set of socio-economic, psychosocial and emotional problems which, in turn, mirror the normative values of a dangerous and endangered world within which it is acceptable and desirable for the rich to get richer whilst the poor get poorer.

We have suggested that ideas of psychic 'un-housedness' and psychosocial 'dis-memberment' might be useful ways of conceptualizing the presenting difficulties of these clients, as well as the complementary experiences of staff members working in these very difficult settings. We also have suggested that the capacity of any organization to offer a cohesive approach to care under such pressure is consequent upon the capacity of individual workers to become *members* of the teams, organizations and wider communities within which they themselves can feel *housed*, or at least think about the ways in which they remain un-housed, and within which they can establish formal ways of metabolizing their experience. Only then can we really begin the task of re-membering the

traumatization at the heart of the types of human misery that we are seeking to describe and so think clearly about the proper *accommodation* of these problems, rather than submitting to the emotional and social desire to 'lock 'em in', 'lock 'em out', 'throw 'em out' or 'lock 'em up'.

Our plea is for greater tolerance, understanding and interest in the lives of those who, as a result of fearful refusal, have found themselves on the borderlines and liminal spaces of our deeply troubled society, and for a better informed debate between our systems of care and the wider social world about how to introduce the structural and cultural changes that will be necessary in order for us to relate meaningfully to some of the most vulnerable members of our community whether *we* – whoever and wherever we are – like it or not.

We do not underestimate the individual courage or the collective organization required to establish or maintain the type of *Cynical* enquiry that we are promoting here. Nor do we believe that such a position can be easily achieved by isolated practitioners or from anyone within any single academic discipline or community of practice. Rather we would like to promote a Diogenes paradigm from within which there may be the possibility of finding a way for us all to become members of a truly *Cynical* multidisciplinary, inter-professional and inter-agency psychosocial 'culture of inquiry' into the deeply traumatizing and excluding processes that have been the focus of this paper. Alexander the Great had sufficient authority and power that he could stand above and outside societal constraint and simply cut the Gordian knot (Lane Fox, 2004): it is given to us lesser mortals that we must endlessly strive to make sense of its complexities, but with little hope that we can ever entirely disentangle it. We hope that in offering our view from the practitioners' barrel, we may nonetheless have made some contribution to these conversations.

Acknowledgements

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