

Title: **Psychoanalytic Diagnosis in Architecture and Urban Design**

Author: Dr. Timothy D. Martin

Architecture and the Unconscious, Ashgate Press, 2016

Abstract:

Psychoanalysis provides a way to think about people outside the normal boxes of race, gender, religion, and social class. This paper introduces the psychoanalytic clinics, showing how each may help in the understanding of individuals and groups. Using examples from Tschumi and Smithsonit shows that this method can be applied where social issues and even sustainability issues prevail and that it can produce substantial results for architects who want an architecture that is capable of mediating social conflicts and environmental impacts.



Fig #1: The Bingham Copper Mine, Utah

The main purpose of this paper is to address the field of architecture in a way that makes it more comfortable with psychoanalysis and its methods of diagnosis. Let me start off by saying that putting architecture together with psychoanalysis is different from putting it together with philosophy. On one hand, psychoanalysis isn't philosophy because it is a science. It was founded largely by neurologists and always keeps a close alliance to the field of medicine. And yet, because of this link to medicine, clinical psychoanalysis also carries a Hippocratic ethic that is not mandatory to philosophy. Psychoanalysis as a practice involves observation, diagnosis and treatment, and it is diagnosis that stands today as one of the more urgent and important interdisciplinary methodological hurdles between architecture and psychoanalysis. The benefits of jumping this hurdle are substantial and so my objective is to introduce the method by setting out some definitions and examples, and along the way, to remind ourselves of how psychoanalytic diagnosis is already being used in the field of architecture.

Let me start my comments on diagnosis with a reminder of the many remarkable essays on architecture and art by psychoanalysts including Freud, Jung, Spielrein, Klein, Stokes, Lacan, Ehrenzweig, Winnicott, Bion, Laplanche, Kristeva, and others.¹ These essays have been really important in raising an awareness of an unconscious in art and architecture. But, we should bear in mind that much of the core psychoanalytic literature on the arts, for example Freud's essay on Leonardo Da Vinci, was produced after many steps that are not mentioned in the essay. Before writing, Freud had diagnosed Da Vinci as a neurotic. This was a natural step for Freud, who was both a theorist and a practitioner, because psychoanalytic treatment *requires* diagnosis. Diagnosis, in any field that is medical in some way, is entirely normal and usually precedes treatment. It is sometimes the case, however, that diagnosis is made after experimenting with treatments, where success in the later leads to the former. In psychoanalysis, diagnosis can seem quite complex and, if you were trained as an historian of architecture or art, or in a school of architecture, you were probably not taught to diagnose in this way. One exception to this may be the phenomenology of architecture, with its many studies of the ways that architecture creates shared experience and communal rites out of direct corporeal and mental phenomena.² Phenomenological enquiry deals with how things appear and how they affect our experience of the world, it grounds itself in observation, and it diagnoses based on types of *dasein*, the particular way of 'being-in-the-world' of an individual or a society.³ Psychoanalytic diagnosis, with its hypotheses about the unconscious, arrived at a very different set of categories.

The Three Psychoanalytic Clinics: Psychosis, Neurosis and Perversion.

¹A general introduction to this topic can be found in Janet Sayers, *Freud's Art: Psychoanalysis Retold* Routledge, 2007.

² Examples include Dalibor Vesely, Christian Frost, Nick Temple, and Jon Hendrix.

³ Ludwig Binswanger (1881-1966) is often considered the initiator of *dasein* analytical psychiatry.

I would like, therefore, to briefly introduce the diagnostic clinics using examples related to the fields of architecture and urban design. This could be a daunting task in itself. Any perusal of the DSM (the diagnostic and statistical manual for mental disorders) will show a dizzying variety of diagnostic categories and mental pathologies. I will only justify this in a footnote, but I want to simplify this down to three psychoanalytic clinics.⁴ They are, Psychosis, Neurosis and Perversion. Among the psychoses are schizophrenia, paranoia and severe bipolar manic depression. Among the neuroses are hysteria, obsessionality, narcissism and phobia. Among the perversions are counted fetishism, sadism, masochism and exhibitionism. This list is not comprehensive, and not every school of psychoanalysis or psychiatry will agree with it. They accord most closely with Freud and Lacan and are adequate to most tasks. What I would like to do first in this paper, then, is describe something of the three clinics of psychosis, neurosis and perversion. I will use examples taken from case studies presented by practicing analysts that include architecture in some way and to ask, in each example, how architecture and the unconscious might be related. Because this review raises many questions about how to use diagnosis in architecture, I will conclude with a final example that draws some of these issues together.

Psychosis

Let me start, in no particular order, with the clinic of psychosis. This is quite a severe clinic. Freud, for example, largely stayed away from it (and the asylum). He ran a clinic of neurosis and was at his best as a theorist of neurosis. The better known psychodynamic theorists of psychosis are Lacan, Jung and Deleuze & Guattari. Jung was particularly apt with the visual side of psychosis whereas Lacan was particularly apt with the semiotic side. There are two main symptoms of psychosis. The first is hallucination, which may be visual or auditory. The second symptom is speech disorder. Florid psychotics (i.e. Judge Schreber) develop elaborate worlds, complex and lasting hallucinations that are logical but not rational.⁵ The severe nature of the psychoses has long suggested an organic pathology and there are a wide range of drugs in use today. After this slender introduction, I won't say anything more to define psychosis. Obviously, to understand the clinic of psychosis would require further work.

One example chosen specifically from the field of architecture is the case of 'Anna' a French woman in her early 30's, daughter of a village butcher, who married a man from a city. Despite some reservations she decided to live in his home town, taking her away from a close knit community. She made friends and settled into domestic life rather slowly. She liked to go food

⁴ The DSM includes developmental disorders such as autism, drug induced pathologies, eating and sleeping disorders.

⁵ Daniel Paul Schreber, *Memoirs of My Nervous Illness*, first German edition, 1903. See also Freud's 1911 paper on Schreber, "Psycho-analytic Notes on an Autobiographical Account of a Case of Paranoia", *Standard Edition*, 12:9-79. Jacques Lacan, *The Psychoses*, Seminar III, 1955-56, Routledge, London, 1993. Deleuze and Guattari, *The Anti-Oedipus: Capitalism and Schizophrenia*, Athlone Press, London, 1972.

shopping and, as is the norm in France, would regularly make an extensive walk around the neighborhood to complete her task. It was only the butcher's shop, interestingly, that troubled her. It lay down a hill and the walk required that she pass by an unkempt four storey building on her descent and ascent. From the uppermost storey of this building a rather perverted angry old man would shout insults at her. He said things like 'pig!', 'dirty sow!', and, 'I'll cut you up!'. It was often just one or two words and, whenever she looked up at the windows of the upper story, her assailant had already hidden. After several such episodes she became less upset and soon learned to ignore the unfortunate creep who taunted her.

Needless to say, after several years Anna began to develop some problems of a psychological nature which drew her into an analysis. These problems were not particularly severe and often seemed to stem from her isolation and loss of her childhood social network. She remained close to her husband and it was only in the course of casual conversation that she mentioned the creep that she encountered during her meat shopping. It turned out, after double checking, that the building in question was empty, and had been for almost a decade. It was entirely uninhabited (no vagrants in the loft). She was having auditory hallucinations, and this revelation obviously affected her diagnosis; she was of the clinic of psychosis.

Further analysis revealed that Anna had lived over her father's butcher shop. From her bedroom she could hear her father working below. Her father was a rather vulgar and coarse man who would shout, audibly through the floorboards, expletives such as 'sow' and 'pig'. . After she married and moved away, Anna felt increasingly cut up, dismembered and fragmented, and what Anna heard from the upper window was what we could call her father's voice; she receives her own message as if it came from reality. For Anna, these words effectively came from herself but appeared in her father's name This is why Lacan says of the psychotic that 'the-name-of-the-father' is foreclosed and, consequently, speaks from a hole in reality.⁶

How, in this case study, does architecture relate to the unconscious? We could say in answer that the architecture houses the unconscious. In psychosis you might say that the top of the head is open; the unconscious really speaks, out loud. The problem isn't how to find the unconscious. In psychosis it's not hidden; it's right there, providing you know where to look or listen. In this case study, architectural space becomes the space where a voice from the real resides. It speaks or displays itself as if it lived there. It got there by means of an extreme repression (foreclosure) and an equally extreme form of projection that is quite different from neurotic projection. Architecture, however, seems to have no particular privilege as a residence. There are plenty of examples of hallucinations that do not include architecture. It could be cars, trees or people. The thing to focus on is how architecture is accredited with a power of authority that speaks during hallucinations.

⁶ Lacan, "On a Question Preliminary to any Possible Treatment of psychosis", *Ecrits: A Selection*, Tavistock, London, 1977, pp. 179-225.

This is but one example of psychosis and one that is adequate, I hope, to the purpose of making clinical material a comfortable talking point within the architectural and urban design disciplines. It is important to be precise in the use of language. So many architects use the word 'paranoid' when they really mean 'suspicious'. Anna was paranoid but she did not constantly ponder other people's ulterior motives. And, just to say one thing about treatment, an architect could offer her greater opportunities to identify with certain people around her.

Neurosis

Let me go on next to the clinic of neurosis, which is also the largest clinic. Freud was its founder and it has seen many different schools develop in the last hundred years. This clinic treats hysteria, obsessionality, narcissism and phobias. The symptoms of neurosis are extremely varied. In general, neurotics have a buried unconscious thought that is rankling to come out. The more notorious defence mechanisms of neurosis include regression, rationalization, denial, rejection and reaction formation. Diagnosis can examine dreams, free associations, and 'accidental' behaviour or irrational thoughts. Therapy often searches for a fundamental fantasy and seeks its traversal. The analyst does not know the unconscious fundamental fantasy any better than the analysand, but the accuracy of interpretations can often be judged by the beneficial reaction.

As an example I would like to cite the case of 'Peter' an architect who met his wife at university. She was studying a related design field and their student design collaborations became a part of their intimacy, a way they learned about each other. After six years of marriage and a successful design partnership it all went sour. The arguments particularly stemmed from attempts to design their own house, something they both had wanted to do for many years. Peter was bringing an increasingly anxious and dogmatic approach to the design of the house, and to the design practice in general. He demonstrated a bitterness that was unusual. As a consequence of this wrangling, their professional design collaborations suffered and, partly for commercial reasons, they consulted a marriage therapist and then Peter consulted an analyst. He could see that he was initiating the conflict but didn't really understand why he felt so anxious.

You can imagine the tedium of the initial analytic sessions in which Peter talked endlessly of his concerns over which doorknob and which window casing to use. For many sessions all he did was rehearse his arguments over floorplan, location, size of the garden, how the kitchen and living room should relate to each other, etc. He brought the marital arguments to the analyst seeking affirmation of his views. His over-rationalisations, his 'love it or hate it' attitude, his insistence that it be 'just so' soon led to a diagnosis of obsessional neurosis. After this diagnosis, analysis helped him understand that his design dogmatism (the pleasure of making and following the rules) was a replacement pleasure. It was a metaphoric or replacement pleasure that stood in for the pleasure of something else, which turned out to be having children. As Peter later put it, "Now I know that every time I feel like detailing the design our

house, I want to have another child.” This realisation alone restored a great deal in the marriage and the business. The message had, for a while at least, been decoded or excavated, enough that they built their house and had their children.

Although this is a very simple case study it is sufficient, I hope, to get the architectural fields to think about the ways they regularly get implicated in unconscious desires. In this case study, floor plans, elevations and models were, for Peter, a screen that blocked an unconscious thought. The architectural design process acted to hide the unconscious wish or thought; it was part of a repression and projection involving a swap or metaphor for desire. Although architecture is a visual art, architects need to be aware of the way many people are blind to their fundamental fantasy. This blindness can come in many places in the design process. This blindness can be big enough to hide an elephant in the room.

I had some scepticism myself about this kind of blindness until I saw a demonstration of hypnotism that was of such an architectural character that it is worth mentioning here. This hypnotism of a young man took place in a lounge area. The young man was given the suggestion that there was no furniture in the room and that he should go to the bar and get a drink. He did so with complete success. He didn't bump into any of the couches or tables. When he returned he was asked why he had taken several abrupt turns in a room that had no obstructions in it. He answered, in full belief, that he had merely turned to look at a painting, and turned again because he thought he saw someone he knew and then realised differently. He was able to completely rationalise his every move while remaining convinced that the room was empty of furniture.

Statistically speaking neurosis is the biggest of the three clinics, but be careful. Not everyone who wants it 'just so' is an obsessional. What a neurotic asks for, his demand, is a compensation or metaphor for what they do not know they want. In the clinic of neurosis, psychoanalytic method allows the architectural field to ask questions such as, 'what is the unconscious wish behind the architecture?' It is an interesting and valuable question and one that is refreshingly different from speculations about conscious intentions or ulterior motives. It complicates our understanding of architecture as a sublimation of unconscious thought and wishes.

An awareness of neurosis is quite evident in the conversations of architects. They often understand how architecture features as a screen for a wish that cannot be articulated, or which keeps appearing as if from someplace or someone else. Peter, for example, initially thought he wife was the neurotic. Sometimes it isn't necessary to see through the screen, it's enough to see that there is one and to ask what kind and what problems arise when it is too neurotic. I mention this because some architects, after what seems to be a diagnosis, design a kind of individual architectural treatment --a place that allows the fundamental fantasy to be present, if sublimated into something more 'acceptable'. These individual cases are very interesting although, as we shall see below, diagnosis can also be used by architects and urban designers when they are asked to mediate in a larger social sphere.

Perversion

The third and final clinic is perversion, which includes fetishism, sadism and masochism, exhibitionism and voyeurism, paedophilia and necrophilia. Many psychodynamic theorists have studied perversion, including Freud, who argued that childhood sexuality was polymorphously perverse; children had little sense of a pre-given natural order or understanding of the heterosexual biological purpose of sex.⁷ One of the more common psychoanalytic diagnoses one hears when talking to architects is the term 'fetish'. It is often used correctly, yet without understanding the full implications of what they have diagnosed. For Freud the sexual fetish was a form of denial that conveniently alleviated sexual anxiety.⁸

Fetishism is an interesting topic in all the arts, but I would like to focus on sadism partly because it is such a fundamental question when considering the socio-political role of architecture. The problem is, this is a somewhat veiled clinic for a number of reasons. Sadists rarely ask for help because they do not generally see themselves as ill. They feel fine and often come into the clinic only on judicial order, because the acts of the pervert often break social norms. Sadism takes its name from the novels of the Marquis de Sade, which vividly describe bondage, debaucheries and orgies.⁹ But, be careful, many would agree that de Sade was a masochist and that his novels were his fantasies of the life of a sadist. To Lacan, sadism was less a matter of non-normative acts and more a matter of a structure. Lacan was particularly struck by the way the sadists relates to 'the big Other'. A common example is the cruel teacher who makes the lives of his students miserable but does it 'for the greater good' or in the name of 'Discipline' or 'Order'. The pervert assumes the position of an object-instrument of the will-to-enjoy of the big Other, and this is why sadists have no guilt over treating other people in the same way.¹⁰ Paedophile scandals involving public media and religious figures often demonstrate one of the characteristics of perversion. Perverts have no difficulty committing dark deeds in the night and espousing high morals in the day. The sadist serves the Other's enjoyment yet refuses to see this Other in real people (usually neurotics). One of the sadist's favorite games is to figure out what people want (even if they do not know it themselves) and then taunt them by not giving it to them. "In contrast to the neurotic, the pervert knows what he desires. He thereby disregards the other's desire, not by forcing the other to do something she does not want to do, but on the contrary, by calling forward the other's desire he can thereafter refuse to satisfy the demand."¹¹ Nevertheless, there are plenty of perverts who never end up in court, and quite a few non-perverts who do. This will be an important point to bear in mind when we consider the case study.

⁷ Sigmund Freud "Three Essays on Sexuality", *Standard Edition*, vol XVIII, pp. 165-166.

⁸ Sigmund Freud, "Fetishism", *Standard Edition*, vol XXI: pp. 152-157.

⁹ Notable novels by the Marquis de Sade include *Justine, or The Misfortunes of the Virtue*, 1791 and *The 120 Days of Sodom, or the School of Libertinism*, 1785.

¹⁰ Stephanie S. Swales, *Perversion: A Lacanian Psychoanalytic Approach to the Subject*, Routledge, 2012.

¹¹ Kirsten Hyldgaard, "The Conformity of Perversion", *The Symptom*, Issue 5, Winter 2004.

For a case study I want to take Bernard Tschumi's Parc de la Villette, 1984, for the way this project used a clinical diagnosis of sadism. Located in northern Paris, La Villette was originally used for the slaughtering of animals. In the 1960s and 70s the local area was treated to a Modernist functionalist redevelopment of low-income housing that left the slaughterhouses bordered with béton brut apartment blocks and an elevated highway. The relocation of the slaughterhouses in the 1980s offered an opportunity to create a public park for the surrounding housing and residents.

In *The Pleasure of Architecture*, 1977, Tschumi prompted architects to think of Modernist architecture as something fundamentally Apollonian, bound by reason, order and function. What Tschumi was getting at was that Modernist public housing can seem high-minded yet allow the instrumentalisation of individuals, a kind of Apollonian despotism. Following Nietzsche, Tschumi proposed that, without the infractions of a second god Dionysus, Apollo would create functional rational structures that controlled and devoured everything, including the erotic pleasures of excess.¹² For Tschumi the danger was that Modernist architecture could be sadistic by over regulating life; its paternalistic, administration was quite faulty, cruel even, toward real people when it failed to give credence to the discourse of Dionysus.

Tschumi teases other architects, asking them whether they just accept the law, question it like the neurotic, or whether they accept the law and still do otherwise, like the pervert. This becomes more than a tease because when Tschumi starts work on La Villette, he suggests there is a lurking sadism in the public housing system. He does not lay this at Le Corbusier's feet but at the feet of French welfare state architecture. The system seemed to be quietly punishing the poor --and enjoying it. To some degree Tschumi's battle between two kinds of gods was a metaphor for two kinds of political administration, left and right wing. But, it went deeper than this. For Tschumi the rules of Apollo, (a.k.a. Modernist Functionalist Rationalist architecture) were sadistic, and needed to be tied up and spanked in return, and yet left in place: no demolition, only remediation. In some respects Tschumi seems to fight fire with fire, to fight sadism with sadism yet, this may not be the case.

What Tschumi is getting at is that the architect loves the rules but, unlike the sadist, he takes them with a pinch of salt. He does not want to destroy the rules but neither does he get off on them in an erotic way. He acts in the name of changing the rules, making them more responsive, inclusive and nuanced. "By stressing its transgressive nature, Tschumi insists that the pleasure of architecture does not result from the absence of rules but from their infraction. Rules, which are represented in forms and structures, are not simply destroyed but are preserved as faulty."¹³ Tschumi put it like this: "...the game of architecture is an intricate play with rules that one can accept or reject. [...] These rules, like so many knots that cannot be

¹² Bernard Tschumi, "The Pleasure of Architecture", *Architecture and Disjunction*, The MIT Press, 1996, pg 83.

¹³ Mark C. Taylor, *Disfiguring: Art, Architecture, Religion*, Chicago : University of Chicago Press, 1992. p 247.

untied, are generally a paralyzing constraint. When manipulated, however, they have the erotic significance of bondage.”¹⁴ What Tschumi found was a way of hijacking the sadist’s fantasy to make binding rules that work for the general pleasure of residents, and for those who do not yet know what they want.

Tschumi’s plans called for a series of follies on a grid. Each folly was a composition of basic constructivist components assembled into a basic architectural form. These follies were empty and incomplete as buildings, the product of a deconstruction of Modernist building components that Tschumi developed with Jacques Derrida.



Fig #2: Bernard Tschumi, Parc de la Villette, Paris, 1982-1998.

Tschumi saw a sadistic eroticism in Apollonian Modernism and played it back, refused to be a victim, and looked for a way to take back the upper hand. Not in a violent way but in a pleasurable way. The lurking sadism can be deconstructed, dis-joined and reassembled.¹⁵ But how do you do that? The parks’ follies were architectural beginnings, partially completed structures that awaited the desires of the residents. It was for them to decide what to do with the follies, not the architect or the state. The deconstructed columns, beams, walls and floors of the follies have been likened to Rabelais’ Gargantua who roughs out a beneficent order into social

¹⁴ Tschumi, “The Pleasure of Architecture”, *Architecture and Disjunction*, p.84.

¹⁵ Bernard Tschumi, “The Pleasure of Architecture”, *Architecture and Disjunction*, The MIT Press, 1996, pg. 83.

chaos.¹⁶ For Tschumi you do it with metaphors that are incomplete, that await local public participation in the project of its completion. Among the preprogrammed follies are a burger shop, a children's theatre workshop, space for temporary exhibitions and dance, and an outdoor cinema. But many of the folly conversions were made at the subsequent request of the local community including an adult theatre workshop, and a medical clinic where the *sans papiers* may be seen without questions. Entirely unprogrammed is a small grove next to an empty folly, turned into a memorial site for local youths who have died from addiction, accident, crime and AIDS, their bodies cremated by the state. When a converted folly is no longer needed it is returned to its initial state as a folly, awaiting its next transgression into what is needed. According to Tschumi, La Villette is, "...that event, that place of shock, or that place of the invention of ourselves. The event is the place where the rethinking and reformulation of the different elements of architecture, many of which have resulted in or added to contemporary social inequities, may lead to their solution."¹⁷

Tschumi's Parc de la Villette established two dialectics, Nietzsche's Dionysus and Apollo with Freud's Eros and Thanatos, in a relation that was rich in metaphors and ultimately an erotic game of binding and unbinding and rebinding, a playing with the rules that belonged somewhere near the clinic of sadism. At times he seems to pit sadism with masochism. In the end, however, I find that Tschumi turns sadism into a fantasy, turns it into theatre, and thus renders it into a neurotic structure, one that can allow local residents to re-establish a trust in the social bond, admit their lack, and seek to fill it.

In this case study, how did diagnosis feature in the architecture? Firstly, Tschumi diagnosed the architecture around the park and then used the park to treat the architecture. He found that the architecture around the park was unable to raise the question of what the other desires. It was built in the name of 'the Poor' without asking the poor what they wanted. 'The Poor' was just a puppet for an administration that was unable to put real people in the position of the Other. It is worth observing that Deconstruction was used therapeutically. By deconstructing the syntax of modernist social housing, Tschumi opened up its possibilities. The unfinished follies were challenges to the veiled sadism behind paternalist social housing. The follies created a park for the neurotic, allowing local residents to decide how some of the follies would be developed according to their developing perceptions of their needs.

In this architectural case study from the clinic of perversion, where is the unconscious? Tschumi and Derrida had quite different beliefs in the unconscious. Tschumi was certain that the French public housing system served an unconscious sadism. Tschumi's certainty allows us to say something about how to spot the sadistic unconscious in architecture. When you find yourself uncertain that you have been threatened, unsure whether you remember a conversation or a place correctly as to its sadistic undertone, this was when Freud was most certain that he was in

¹⁶ Danièle Voldman, "Le Parc De La Villette entre Thélème et Disneyland", *Vingtième Siècle. Revue d'histoire*, 1985, Volume 8, Issue 8, pp. 19-30.

¹⁷ Bernard Tschumi, "Six Concepts", *Architecture and Disjunction*, pg 258.

front of the unconscious of the pervert. The pervert's objective is to use threats to get people to wonder what they are, as objects, to be enjoyed by the big Other.

Tschumi's own unconscious was highly attuned to the unconscious strategies of the sadist, Tschumi's success lay in playing the role of the Other to the pervert because the pervert assumes the position of an object-instrument of the will-to-enjoy of the big Other. Yet, in Tschumi's hands the park produces a very different Other from what the pervert conjured. The Other in the park is not absolute; the Other is incomplete and requires and invites local participation of the neurotic in its completion.

Under the unconscious of the pervert, social bonds become suspect and untrustworthy. Under the unconscious of the paranoiac, there are hidden agendas at work no matter what anyone does or says. Under the unconscious of the park the social bond is incomplete. The follies are therapeutic to the neurotic precisely because they invite the traversal of a fantasy by presenting an incomplete desire. In one sense they mock the illusion that wishes can be fulfilled, or that one could 'breach want with a span'. And yet the joke is that the follies offer exactly that: a chance to breach want with a span and rise to the challenge of completing desire.

A study of the clinic of perversion helps show how architecture, if it is not careful, can get caught up in satisfying some rather disturbing social dynamics. This can happen in the administrative relationship between architects and their clients, and the people for whom they both build. The master-slave relation can be suspected in any of these relations; there are examples of clients who are slaves to fashion, and there are examples of clients who treat architects like slaves. In the case of the Parc de la Villette, the architect tried to provide a treatment in the belief that a sadistic system can be thwarted, deconstructed, and the foundations laid for a more neurotic structure. We are at a point here where we can see how psychoanalysis has offered the field of architecture a kind of ethics, in that Tschumi's park sought to tame the sadist for the benefit of the neurotic.

Issues of Diagnosis

Having briefly covered the three clinics of psychosis, neurosis and perversion, it might help to mention a few final issues about diagnosis. One such issue is that you only get one clinic. In the diagnosis, if one clinic doesn't work, try another; don't get tempted by 'borderline' diagnoses. Another issue in diagnosis is that 'the symptom should not be confused with the structure.' A textbook example would be homosexuality, which can be an element in a neurotic, a perverse, or a psychotic structure. Another important thing is that diagnosis is made partly by the unconscious. Experience and study also feature in diagnosis, but in psychoanalysis 'it is the unconscious that interprets'. This is why knowing your own clinic helps so much. I think we need to keep a sense of humour about the benefits of knowing your own clinic and the good it will do. Woody Allan, for example, spent years in analysis dealing with his Oedipus complex. But it didn't stop him from marrying his adopted daughter. One final issue is also worth mentioning.

There is a difference between being *in* a clinic and being *of* a clinic. Some are in a clinic; there is a problem, and so they attend. Everyone is of a clinic, which is to say that if problems arose, that is the clinic they would be in. Clinical diagnosis isn't always directed toward a pathology, it can simply be a way of understanding the structure of a person or a situation or a place.

Individual and Group Diagnosis: The Case of Robert Smithson

Having given a brief introduction to clinical diagnosis, it is worth pointing out that the first two case studies dealt with the diagnosis and treatment of individuals. Parc de la Villette was an example of an upscaling from an individual to a group. Tschumi's park intervened on an urban scale and so he diagnosed on a social scale. Because this scale of diagnosis is perhaps the most difficult and the most important, I would like to finish with one further example of a social scale diagnosis, taken from recent history. This is the case of the earthworks and land reclamation parks of Robert Smithson (1938-73), the American sculptor, writer and architectural consultant. Because he may be less familiar than Tschumi, it could be helpful to give him a brief introduction.

As an observer of public space, Smithson was highly dialectical. He loved the incidental negative architecture of the quarries in his native New Jersey that had produced the stone for the buildings of New York City. For a generation that was consciously focused on progress, his *Partially Buried Woodshed*, 1970, [Fig 3] celebrated the dialectical opposite: a repressed pleasure in entropy and erosion. In his seminal earthwork *Spiral Jetty*, 1971, he constructed a walk that was mirrored by the waters of a lake, a place that produced a psychoanalytic self-encounter, a mobius-strip of a journey that proceeded outward and ended inward.



Fig #3: Robert Smithson, *Partially Buried Woodshed*, Kent State University, Ohio, 1970.

When it comes to understanding a work of art or architecture, Robert Smithson said something in 1973 that still resonates today. “I think all perception is tainted with a kind of psychoanalytic reading. In other words, somebody who’s having Oedipal problems, it’s going to come out in the perception, or it’s going to come out in the making, the kind of work they choose to do.”¹⁸ In his writings and earthworks he developed a method he called a “psychoanalysis of landscape perceptions” in which he made clinical diagnosis of individuals and groups based on their perception of the landscape.¹⁹ Smithson was a keen observer of the way unconscious thoughts were projected onto the external world, the way people made the landscape a portrait of their own unknown self. He noted, for example how much of the ecology movement held rather sentimental views of nature as pastoral and idyllic. They projected feelings about their mothers onto the environment, and unconsciously played out their Oedipus complex by attacking industrialists as if they were evil paternal rapists. Likewise, Smithson found among industrialists and miners a marked sadism. They extracted wealth from the land but had no feel for or connection to it. They threatened society with pollution and environmental degradation and yet the rule of profit blinded them to their role as agents of nature. The ecologists and the miners

¹⁸ Lucy R, Lippard, “ Lucy R, Lippard Talks about Eva Hesse with Nancy Holt and Robert Smithson”, *Artforum*. February 2008. Recorded on June 5, 1973,

¹⁹ *ibid*

were increasingly at odds with each other in a social conflict, and yet they both needed an artist-analyst to shake them out of their fantasy (ecologists) or their denial (miners).

Perhaps the best example of Smithson's "psychoanalysis of landscape perceptions" was his proposal for the reclamation of the Bingham Copper Mine in Utah, the largest man made hole in the world. [See fig #1] No reclamation could restore the site to its original conditions without demolishing an entire mountain; Bingham demonstrated just how irreversible man's impact on nature could be.

Smithson's Bingham proposal offered two paths down into the pit, one for each camp. The walk designed for the sadists offered a greater experience of their impact on the land and promoted a sense of responsibility for their actions. The path for the neurotics offered a chance to experience the inherent violence and drama of natural change and to clear their mind of their idealised view of nature. The design of each path was based on a diagnosis and provided a treatment of the person's perceptions of the landscape. Each camp went on their walk and, having undergone treatment, met at the bottom, where they might negotiate with each other in a more successful manner.

Like Tschumi's Parc de la Villette, Smithson's Bingham project asked questions about how the landscape had become a site of unconscious projection, how feelings that originated in childhood got transferred onto the world, and how large scale design projects could mediate in the conflicts between different clinics. Once they figured out the clinical picture of ucs landscape perceptions they were then able to set out new forms that would change it, or move it on to a more mature state. The onus lay on the architect to find the solution to a conflict by offering each camp a set of experiences that made them less pathological.

This paper, by introducing methods of psychoanalytic diagnosis in a formal and structured way, pushes at interdisciplinary boundaries. Given the range of examples cited in this paper it is clear that diagnosis has many applications and a considerable history in architecture. It can be applied in the office at an individual scale, it can be used to maintain and promote creativity, and it can be applied in understanding larger social dynamics. It provides a way to think about people outside the normal boxes of race, gender, religion, and social class. It is not a method limited to the design of mental health facilities, although it is clearly useful here too. The examples of Tschumi and Smithson show that this method can be applied where social issues and even sustainability issues prevail and that it can produce substantial results for architects who want an architecture that is capable of mediating social conflicts and environmental impacts.