

**Susanne Schmidt-Knaebel: *Schizophrene Sprache in Monolog und Dialog*. Hamburg: Buske, 1983. 380 pp.**

Schmidt-Knaebel's book is an attempt to illustrate, from a psycholinguistic point of view, theoretical and practical possibilities in schizophrenia research and in therapy of psychotic patients. It is based on tape-recordings with one patient treated by the author. Recordings were made (a) in therapy sessions, (b) during a joint holiday, and (c) during a period of several weeks when doctor and patient lived together. Thus, they represent a kind of action research rather than pure observation or participant observation.

The author describes very thoroughly how she slowly developed her own communicative style with the patient, how she herself had to adapt, and how communication patterns changed as the therapy proceeded. I find the description of her methodology and of her life with the patient quite fascinating. Once more, it is shown that an intense and good communicative environment is of greater help in therapy with schizophrenics than a lot of medication. The doctors had given up on the patient and intended to place her in a mental hospital. But after one year of therapy with the author, the patient was able to live at home and to take on a part-time job.

In the first chapter, Schmidt-Knaebel summarizes the most recent research in the field. Unfortunately, text-linguistic approaches and conversational analysis (discourse analysis) are not considered. We believe that the phenomena Schmidt-Knaebel is specifically interested in – yes/no and active/passive as well as schizophrenic symbolism (metaphors) – could be better analyzed in a text-linguistic framework (cf. Leodolter 1975; Küfferle i.p.). The importance of the text level was clearly recognized by Freud some 60 years ago, when he compared schizophrenic language behavior to dream texts. Another omission is a qualitative interpretation (beyond purely linguistic analysis) of symbolism (metaphors) in a psychoanalytic or psychotherapeutic framework, or for example in the framework provided by Lang, Watzlawik, or Wyne (see Leodolter 1975).

Many examples show that affirmation and negation are used differently in schizophrenic language behavior; they indicate resistance on the part of the patient. This is in accordance with the fact that the patient tends to give as little information as possible; 'It is not black' is less informative than 'it is white' (see pp. 14ss). Schizophrenics frequently use passive constructions; psychoanalytic interpretations conclude that psychotic patients view themselves as dependent, as being objects. Somebody is thinking, acting, etc., for them; the patient is followed by somebody.

Schizophrenic language is full of metaphors (mainly based on animals and plants). Frequent nominalizations and neologisms are additional features that distinguish it from 'normal' speech. Features of this kind may be interpreted on a par with passive language; they indicate the special kind of 'private' language, of

'private' meanings and connotations which characterize neurotic and psychotic texts (see, for example, Wodak 1981).

The second major part of the book is devoted to therapy. Schmidt-Knaebel developed her own approach as therapy proceeded. She understood the patient better and better and deliberately included certain strategies in her dialogue to provoke the patient and change her behavior. Meta-communication proved to be especially important. The examples given in this context are particularly informative. I don't know of any other monograph that contains so much authentic and well transcribed material. It is convincingly shown that many schizophrenic patterns are reactions to the nonschizophrenic partner, whether conscious or spontaneous.

In a summary, Schmidt-Knaebel gives a number of rules for therapy with schizophrenic patients (p. 340ss). Since therapists tend to act very intuitively, rules of this sort are extremely important. The explicit insight gained into their own and the patients' linguistic behavior allows for new and more powerful therapeutic strategies. The book should be recommended both to therapists and to linguists. It is also well written, and the examples are well chosen. What impresses me most is the author's involvement with the patient. Her book is not only a fine and scholarly piece of work; it is an eloquent statement of the author's patience with, love for, and deep interest in her patient.

University of Vienna

RUTH WODAK

## References

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