derives, would we come up with ways to experience



video into that scene is just like towing a car by horse because you understand horses and are afraid of cars. The fact is, video is the tool of an epistemology born long after the epistemologies from which most therapy derived. And, like all interfaces between past and present, it generates paradoxes. After all, who should be happier with a tool which stores the past and selectively interprets it in the present than an analyst? Which provides one with the opportunity to experience another's experience of oneself. To experience the others experience of ones experience of the other? Not to mention those sociologists who think G. H. Mead had something to say about learning selfhood by experiencing many others experience of oneself, as well as their experience of that? It does not suffice to say that we have in tape a "machine" which can visually display all those Knots, Laing magnificently portrays, in which he thinks because he doesn't know. It'll do that, sure. But the larger question is, if we got into the epistemology from which tape derives would we come up with ways to experience experience which would be therapeutic in NEW ways?

Even this question is of historical interest to those therapists who learn from the so called "communications school" of therapy. After all, Bateson wrote about double binds in 1956, long, long before anything

like portable video was around. So, another paradox: the theory of videotherapy was around long before portapaks were, yet most therapists have yet to "discover" it. We know a lot now about communication and metacommunication, and double binds (communications about communications which contradict the communications) but we're not too sure how to video them so they happen less, much less prevent them, or undo the harm they do.

There are still therapists, (probably the majority) who think that schizophrenia is a disease which individual persons have. Even Laing occasionally sounds like that's the way it is. Whereas, from a resolutely communicational viewpoint, (Haley, Speck, Auerswald, et. al.) there is no such thing as a schizophrenic: There is disordered communication, which requires a network of communicants to sustain it. So, if you wanna fix it (do therapy on it) you gotta fix the network, which means locate its channels of communication, find out where and when simultaneous contradictory messages occur, and communicate differently.

Some videofreaks have gotten that far. But then, caution to the winds, instead of figuring out what they want to do because they know why they want to do it, they sit down in their lofts and try out every last variation and configuration of hardware they can imagine. Out come the mirrors, the machines shooting the machines shooting the machines, shooting the monitor while another deck supplies it with images, producing thousands of one's right eye, etc., etc. I got nothing against playing like this, but it ill affords therapists who say they really want to "help" people to play around like this if they don't know how easy it is to blow somebody's mind with this hardware, especially if the mind is already half-blown, in their theoretical viewpoint.

Seems to me the point of departure for videotherapy is the postulate that information is man's ecology, that information is to man what water is to fish, that it is our element, we live