

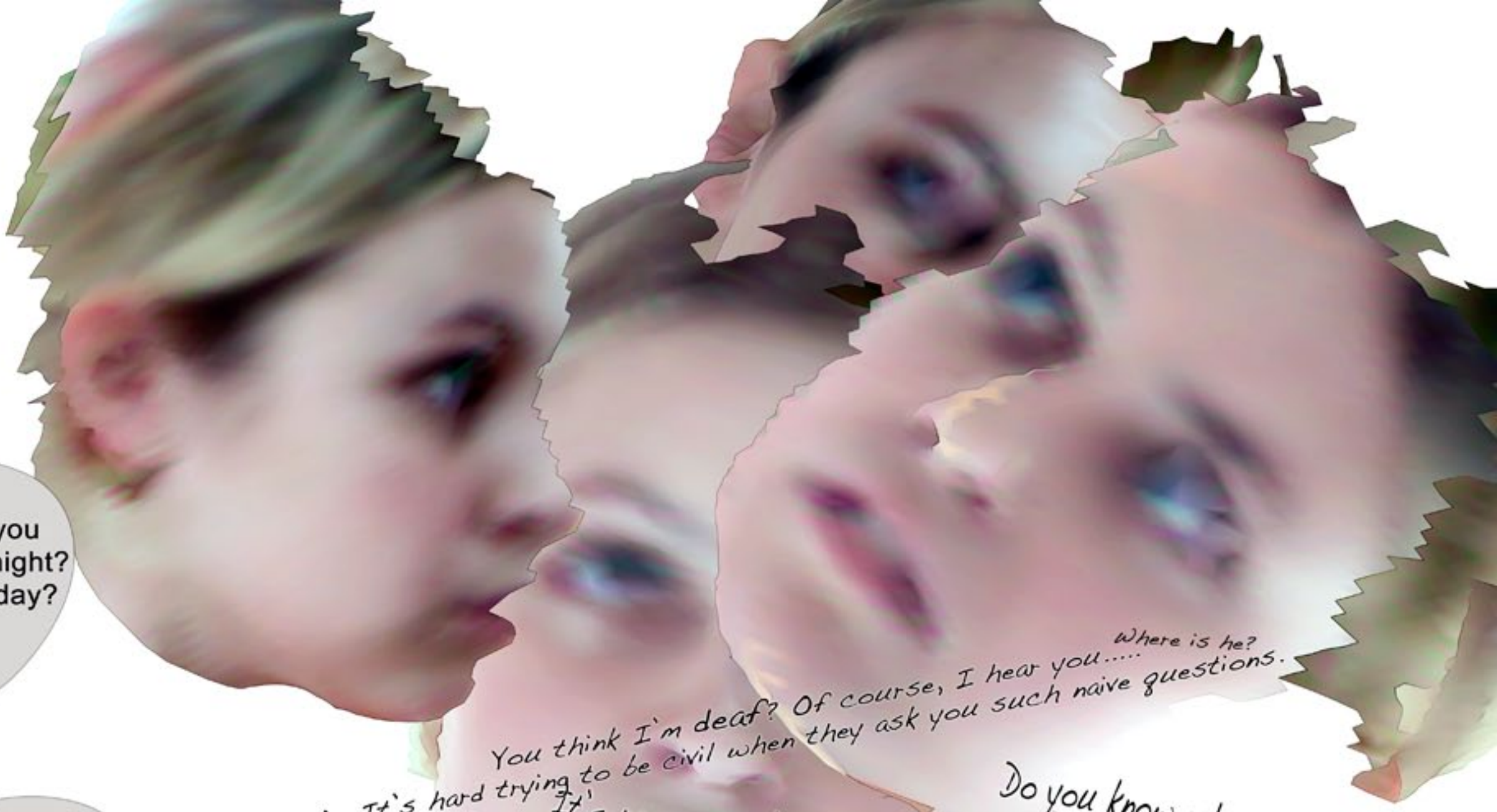
## ***stone of madness***

*stone of madness* combines our ongoing concerns with the frailty and vulnerability of the human body with some personal history. Lilla's father, an immigrant to the United States from Sicily, was a physician specializing in psychiatry. Upon arriving in the US, he worked with the criminally insane in state hospitals and, as a result, Lilla spent her childhood living on the asylum's grounds mixing fairly freely with the inmates and exposed to quite varied versions of reality. Issues of perception, both psychological and visual, have also been recurrent in our collaborative work and based on this personal history and our focus on human vulnerability we would like to develop a video installation concerning mental illness and perception. The many faceted nature of mental dysfunction provides an ideal basis upon which to build a multi-channel video and in our proposed project we will incorporate actors, still photography, and animation. We plan to explore some of the conflicts associated with mental illness as well as the stigma and perception of it by its sufferers and the mental institution itself. The completed composition would investigate both sides of the thin line separating the mentally healthy from the unhealthy and would ultimately celebrate the complexity and the beauty of the human mind.

“Basically  
there are two ways to manage an institu-  
tion, each equally extreme, one encourages absolute free-  
dom, the other, the old fashioned, well-tried method of control and  
punishment. But there is also a third one that combines and exasperates the  
very worst aspects of the other two, and that is the madhouse we live in today.”

Lunacy, 2005, Jan Svankmajer





doctor...Do you know where you are?

patient...where is he, it's like he's crouching behind me? Why am I afraid to look at him?

doctor...Did you sleep well last night? How are you today?

patient...Very well, thank you. Who is he and why all these questions? It's as if he were testing me.

doctor...Do you hear voices?

patient...You think I'm deaf? Of course, I hear you...it's hard trying to be civil when they ask you such naive questions. But who's that and what happened to him? You suspect him of anything...he's clever, but he can't fool me with his magic, it's an old trick changing into a girl

*You think I'm deaf? Of course, I hear you.....  
It's hard trying to be civil when they ask you such naive questions.  
Where is he?*

*Do you know where you are?*

# do you hear voices?

*Why am I afraid to look at him?  
It's like he's crouching behind me.  
Who is he and why all those questions?  
But who's that, and what happened to him? You suspect him of anything...  
he's clever.....*

*It's as if he were testing me  
Did you sleep well last night? How are you today?  
Do you hear voices?  
He can't fool me with his magic, it's an old trick changing into a girl.*

# Do you hear voices?

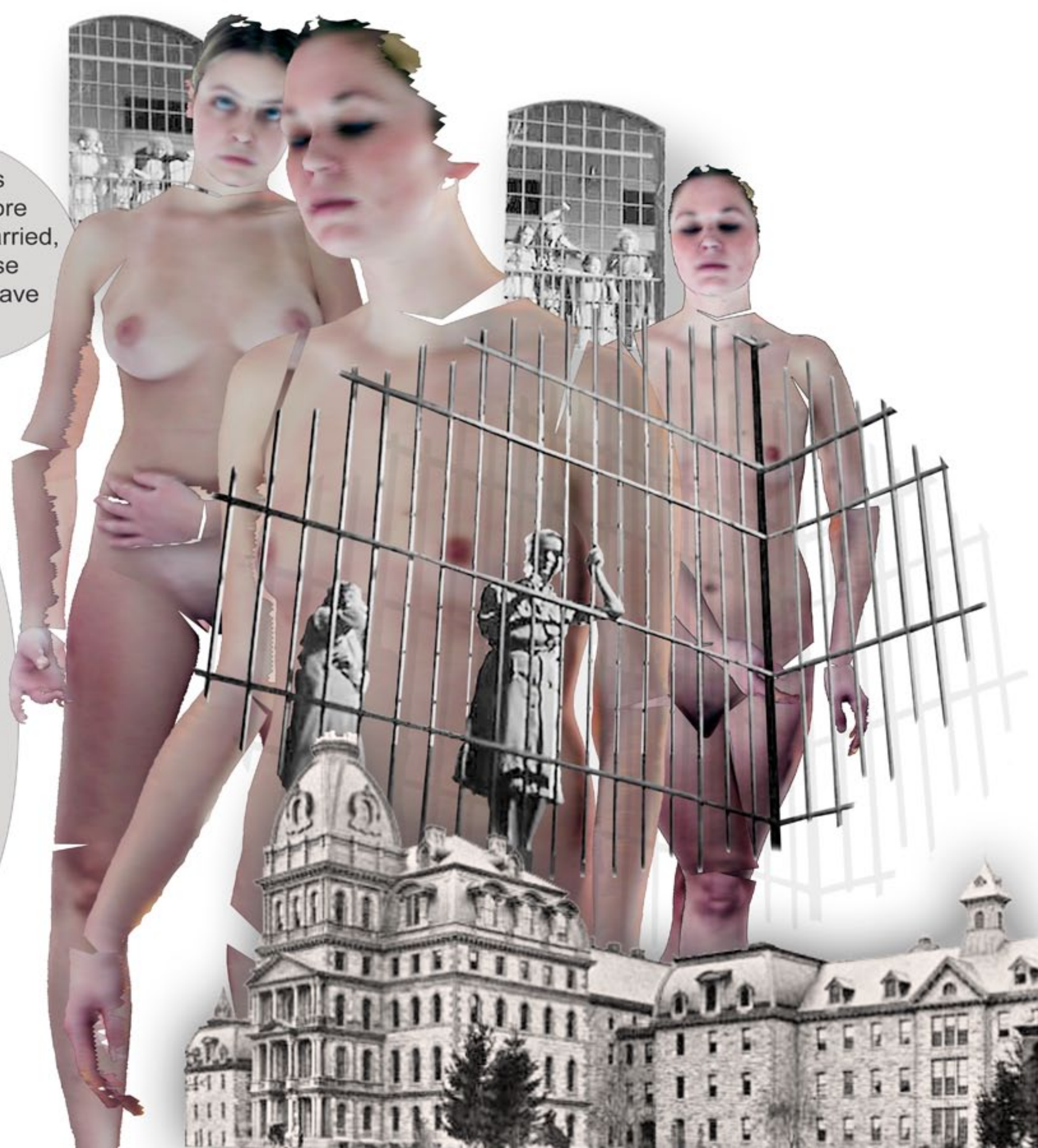


patient...

"When I was young I was close to my mother and more distant from my father. I'm married, my husband and I are close and don't argue much. We have few, but close friends."

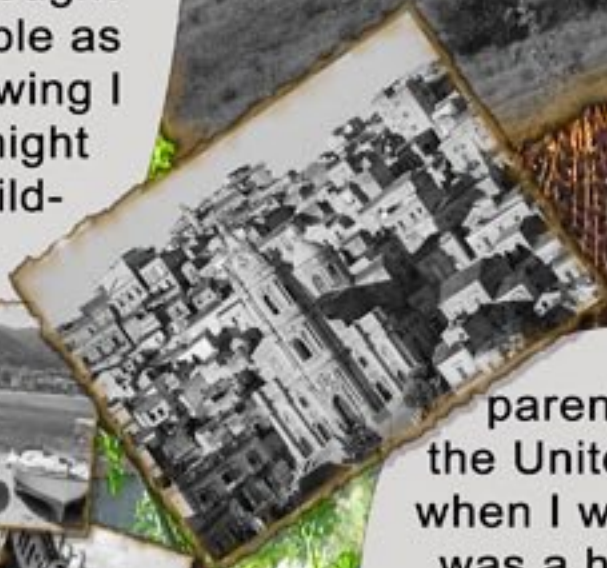
doctor....

Patient manifests a long history of considerable ambivalence in close relationships, which began in early childhood. A warm relationship with her father cools during her adolescence. A distant relationship with her mother is described as very intense. Her attempt to control emotions with her husband is punctuated by angry outbursts. And while she says that she has several good friends, one senses considerable ambivalence embedded in those relationships.....diagnosis... schizophrenia.





For as long as I can remember I've had trouble telling where people fit on the scale of normal, something that people with more black and white perceptions probably take for granted. I also always thought doctors weren't as infallible as most other people did, owing I guess, to what some might consider a unique childhood.



My parents immigrated to the United States from Sicily when I was a child. My mother was a housewife who always wanted to be a painter and my father was a physician specializing in psychiatry. After arriving in the U.S. he began working in state hospitals with the criminally insane and, as I grew up, we lived on the grounds of various asylums, mingling with the patients and experiencing all kinds of different realities.

My father's first job, and my first home, had been at Hudson River State Hospital in Poughkeepsie, NY. I don't know the reason why but we moved from there to Pilgrim Psychiatric Center in Brentwood, NY. My father didn't like the east coast weather though and was always looking for the Sicilian warmth he'd left behind. He must have decided that better weather, as well as adventure, lay out west so we migrated to Central State Hospital in Norman, Oklahoma temporarily before finally settling at Arizona State Hospital in Phoenix. The warm sun of Arizona felt like Sicily to my father, if not hotter, and instead of big cities, we had vast amounts of dry and spacious desert. Phoenix was just developing then and was still a relatively small town.





I loved living there; my friends were not only other doctor's children, but also the patients themselves and I learned so much from them. Masturbation was quite possibly first on the list. The female patients used their hands, which was plenty instructional enough, but the male patients were an entire new education.

There was a long chain link fence that separated the doctor's families from the patients and many of the men would use the holes in the fence as orifices for their pleasure.

Pretty early on, I put two and two together and couldn't wait to try this at home.



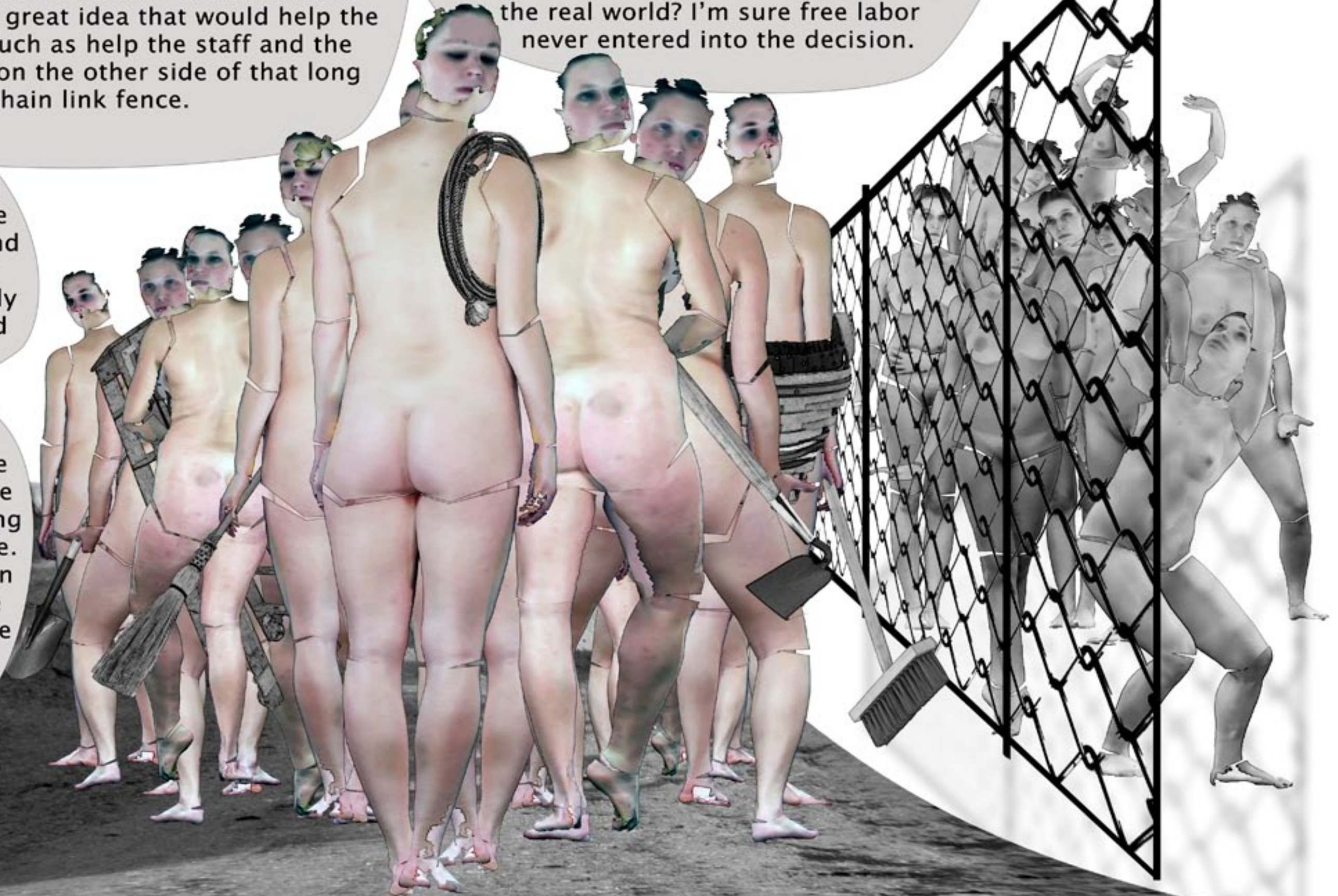


That fence also became symbolic to me in terms of separation. The doctors had at some point noticed that since there wasn't much to do on the wards, the patients became bored and they'd pace the corridors. Even for those with ground privileges who were able to take walks and visit with their family and friends, boredom was inevitable. So the administration came up with a great idea that would help the patients as much as help the staff and the doctors living on the other side of that long chain link fence.

The other children living at the hospital and I became very close to these patients and they became our friends, just slightly more incarcerated than we were.

It was them we talked to when we needed advice because they were always there, taking time to explain life. They filled us in on the world outside the hospital, where another reality existed.

They decided to bring a number of the patients over to our side of the fence to work in our gardens and in the fields where the produce was grown, take care of the livestock that fed the hospital, clean our homes, do our laundry and take care of the children. Of course, these people weren't real insane, maybe just a little, and what could be better than to have them work to help them feel productive and a part of the real world? I'm sure free labor never entered into the decision.







Among other things, they taught us about love, and how to make babies. Barbara was a patient who came into our family's home when I was around 8 years old. She was there to take care of my little sister and she was very sweet and we loved her. She had the mind of a child but could do simple chores and she watched my sister and played with her continually.

Barbara loved sex. She couldn't get enough of it and she was always pregnant. There was talk of a sterilization program within the hospital, and thank God it didn't happen, since not all women were like Barbara. Some of the women seemed to be just visiting and were allowed to go home when their husbands said they could. Then there were others who were confused and needed someone to talk to.

But Barbara was different. Her mind had stopped at a certain age and that was all....





Barbara

loved Pool, our gardener. Whenever they could, they would take each other's hand, slide into some bushes and Barbara would become pregnant again. Her pregnancy didn't seem to interfere much with the work she did for us, however quite a few of the details may have gone over my head. One day though, when my sister was around 5 years old, Barbara approached my mother with tears in her eyes and said, "I can't be here anymore to watch over your child."

"Why", my mother asked and she said, "Your child is now older than me."

We were all very sorry to see our Barbara go, but no one was as heart broken as Pool.





You might think it would have been Barbara, Pool, and the other patients who taught the curious doctor's children about sex. Well, they sure helped, but I personally learned a lot from another source, my father.

He, every bit as much as Barbara, was addicted to sex. He would tell me it was a sickness but he had to have it. And so he did, with the staff, doctors, nurses and then, the unthinkable, patients.

Unlike Barbara and Pool, however, where sex was part of being in love, my father made it feel dirty. He was the only one who could have sex while the rest of us were considered sluts if we even thought about it.

When I was young, little boys were off limits because, in my father's opinion, being too close could sexually stimulate them. Everything was dirty to my father except for his sickness, and that had to be satisfied. Because of this, of course, sex became a curiosity to me and, like Barbara and Pool, I found the bushes. I'm sure our family was normal, no?







My father was also a man who loved science and thought the best way to understand the world was to experience it. There wasn't anything I couldn't ask him that he wouldn't explain in great depth. One day when I was 10 years old, he took me to his ward, Ward D, the one that housed the criminally insane. It was his early version of "Take Your Daughter To Work Day". My father was in charge of giving electric shock treatment to the patients on his ward.

He was in charge because he was the most mechanically inclined of the group of doctors and never burnt the patient's temples by shocking them too long. My father always felt that this treatment wasn't all that effective, although one benefit was that patients forgot their problems for a while. Then their memory would return and they would get another treatment. The day he brought me to visit his ward, he thought it would be a good day to show me what his job was like. He brought me to meet the staff, all of whom were very nice, and many patients I'd never met before since they were never allowed out of Ward D.

He also thought it would be a good experience for me to observe someone receiving electric shock treatment. Did I mention I was 10? The staff was reluctant, but he insisted. I was afraid, but I really didn't know why. My dad took me into a room with a bed. I thought I was going to get on the bed, but he told me to stand and watch. The staff brought in a girl who was around 16 years old. She was also scared and began to cry.

She begged everyone to leave her alone. I wanted to help her, but I couldn't. There were too many people already holding her down. I was crying with her. Then they put wires on her temples and my father went to a box where the wires came from and turned a knob. Oh how that poor girl screamed, or was it me? Her screaming didn't last long and I thought it was over. She could finally rest on that bed. Then she began to shake all over. I shook as well. I shook all day and never forgot my visit to Ward D.



Most of the doctors had families and, like me, the children were allowed to run free within the area of the hospital grounds called Doctor's Row. The entire institution was fenced in, enclosing us from the outside world. Within this enclosure was another, smaller fenced in area for the more dangerous patients, a cage within a cage.

Us children, separated as we were from the rest of the world, became very close to one another and my best girlfriend was Karen, a bit of a tomboy. Karen and I were also "blood sisters". One day she took a pocket knife she always carried and asked me to hold out my hand so she could slice my finger, followed by her doing the same thing to her own finger. I was a bit afraid and taken aback. She wanted me to cut her, which would have been easier than her doing it herself, but I couldn't do it. She assured me it wouldn't hurt and to make it extra sharp, she sharpened it on a rock. After this ordeal, we put our fingers together so our blood would co-mingle. We knew at that moment we would love each other forever.

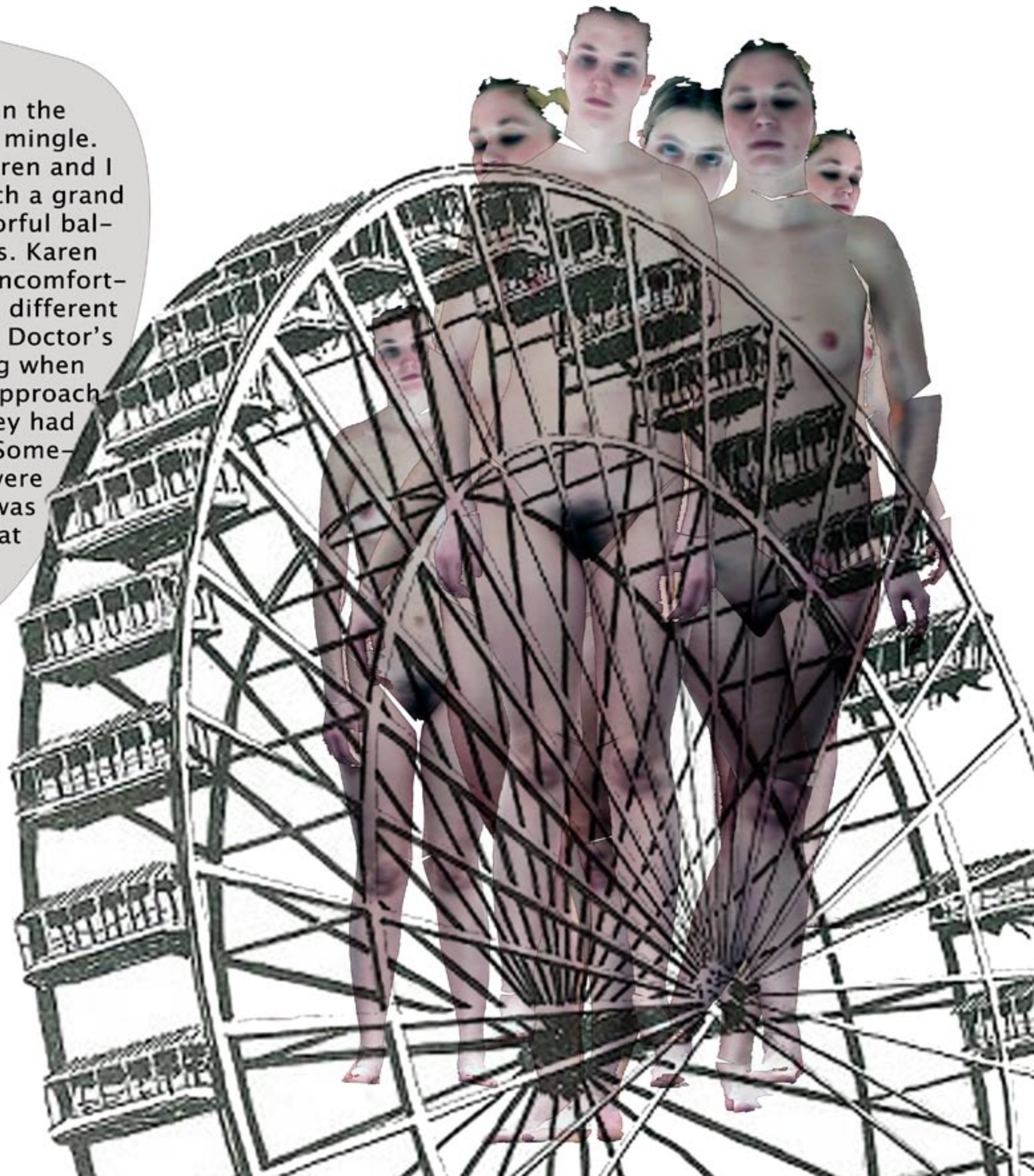
Karen and I were very close but Karen saw our lives on the grounds a bit different than I did. Unlike me, Karen wasn't a touchy feely sort of girl. Her parents were strict and she was more reserved. Her father was a psychiatrist as well and her mom worked at the hospital as the Chief Dietician. Basically we were inseparable, so most of what I saw and learned as a child, the masturbation, sex, defecation and other daily occurrences, Karen experienced as well. It would be fair to say, though, that we were generally more curious than appalled.





Every year the hospital put on a small carnival for the patients, even the ones with whom we didn't normally mingle. Of course, we were all invited and Karen and I looked so forward to being part of such a grand event. There were darts to throw, colorful balloons, fish tanks and plenty of games. Karen loved the carnival, but she always felt uncomfortable around the patients who were a bit different from our patient friends who worked on Doctor's Row. They laughed too loud. They sang when they wanted to. Sometimes they would approach you too fast, touch you, or pet you. They had absolutely no sense of personal space. Sometimes they would urinate where they were standing. Karen and I both knew that was wrong and if we did something like that we'd get in trouble. But I think what really bothered Karen was their blank faces.

Years later we came to understand they were overmedicated, but we thought at the time that it must be very hard for them to enjoy the carnival, since they weren't even aware it was taking place. One thing we saw at the carnival that impressed us, though, was that we noticed the nurses would take 5 or 6 patients and have them all link arms while they walked. Karen and I mistook it as a sign of affection and from then on, always walked arm in arm too.



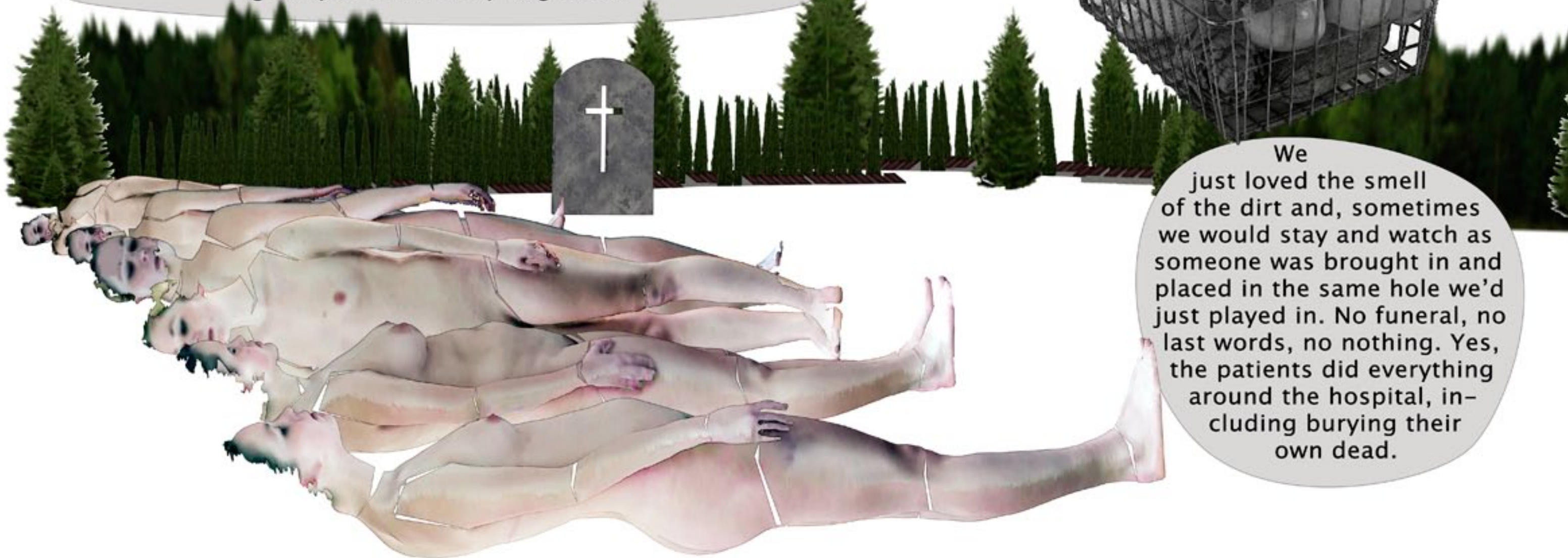


After

school we would always visit Karen's mom at her work. One of her jobs was to oversee the preparation of food for the hospital. Here again, the institution found it useful to give the patients the job of cooking, cleaning and serving the others and Karen and I always had a hard time distinguishing the staff from the patients in the kitchen.

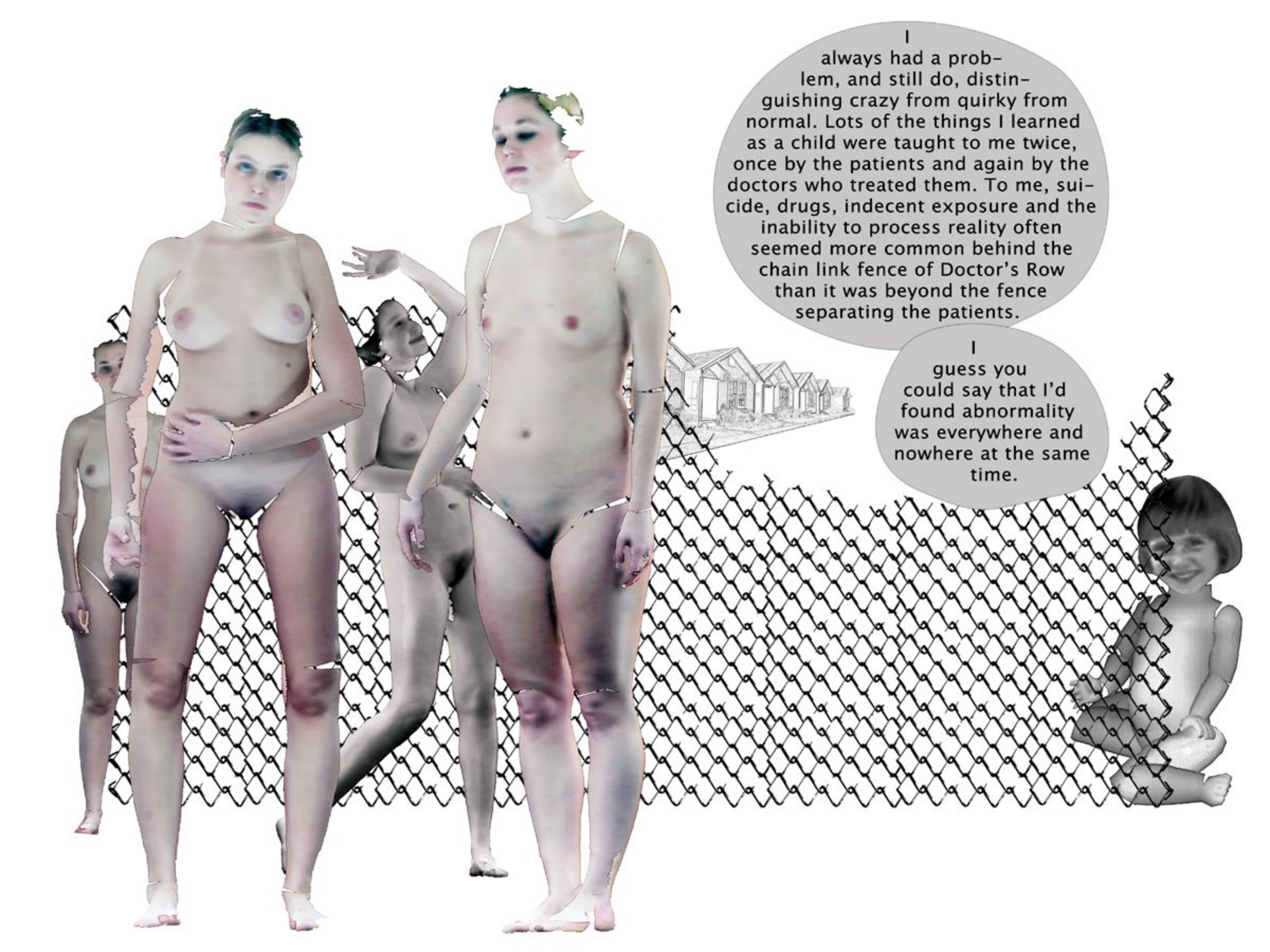
Then again, maybe

there was little to distinguish them. The doctor's families got their food from the hospital commissary, located in the same building where Karen's mom worked. Almost all the food there was generated within the state hospital grounds. Our vegetables and our dairy products came from our farms as well as the meat we ate. The patients staffed the whole hospital system. They did almost everything, including working in the hospital's graveyard, where unclaimed dead patients were buried. We spent a lot of time playing in the graveyard, in freshly dug holes.



We just loved the smell of the dirt and, sometimes we would stay and watch as someone was brought in and placed in the same hole we'd just played in. No funeral, no last words, no nothing. Yes, the patients did everything around the hospital, including burying their own dead.





I  
always had a prob-  
lem, and still do, distin-  
guishing crazy from quirky from  
normal. Lots of the things I learned  
as a child were taught to me twice,  
once by the patients and again by the  
doctors who treated them. To me, sui-  
cide, drugs, indecent exposure and the  
inability to process reality often  
seemed more common behind the  
chain link fence of Doctor's Row  
than it was beyond the fence  
separating the patients.

I  
guess you  
could say that I'd  
found abnormality  
was everywhere and  
nowhere at the same  
time.