PARANOIA AND PRONOIA: THE VISIONARY AND THE BANAL*

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I examine *pronoia*, Fred Goldner's term for the delusion that others think well of one, in the light of current psychiatric nosology and psychodynamic theory. Pronoia is a form of denial that protects the fragile person's self-esteem from criticism and rejection. It can arise from persistently grandiose thinking in a narcissistic personality. Pronoid behavior can also occur in social structures where individuals are valued not for their interior feeling-life but only for their strategic roles in the larger organization. In contrast to the benevolent misperceptions of pronoia, the paranoid sees hostile forces in the world and weaves them into a satisfying conspiracy. Both pronoia and paranoia create an exaggerated sense of coherence from the chaos and confusion of the social world. Social organizations which accept individual failure and vulnerability can tolerate less of the false coherence of pronoia and paranoia, and so foster the growth of more accurate perception and more intimate interpersonal styles.

For mightn't I be crazy and not doubting what I absolutely ought to doubt?

Ludwig Wittgenstein (1969)

We live in scary times. Our lives seem directed, not by inner reflection or humane value, but by the threats of nations, the forces of economics, and the demands of new technologies. The complexity and confusion of the social world forces on us a kind of extraversion in which the cause and control of our lives seem to lie wholly outside ourselves, with the powerful Other. This is a setting ripe for paranoia. We find sense in chaos by attributing the events of our lives to a hidden agency. With this creative act, reality begins to cohere. Against this bleak vision, there is another strategy for world-making: to affirm philosophical idealism and, thus, subjugate reality to the reach of mind. All obstacles are then dissolved by the aqua regia of imagination. At its most banal, this idealism becomes the "power of positive thinking." In the face of daily evidence of our failing power as individuals, we cling to fantasies of omnipotence through the psychology of success. "Thinking will make it so," provided we accept as real the solipsistic world of our perceptions.

In an article in *Social Problems*, Fred Goldner (1982) describes one version of this solipsistic world view in the phenomenon of *pronoia*.

Pronoia is the delusion that others think well of one. Actions and the products of one's efforts are thought to be well received and praised by others who, when they talk behind one's back, must be saying good things, not bad. Mere acquaintances are seen as close friends. Politeness and the exchange of pleasantries are interpreted as expressions of deep attachment and the promise of future support (1982:82).

Goldner believes this style of misperception is especially common in large hierarchical organizations such as business and academia, where individuals have incomplete and ambiguous information about their supervisors' evaluations of their work. Faced with this uncertainty, some people are apparently prone to systematic positive bias in their beliefs about how others perceive them. Goldner emphasizes that pronoia refers to this distorted view of how others see one, not necessarily to a positive view of oneself. In practice, however, it is hard to see how these two perceptions could be greatly discrepant.

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In a comment on Goldner, Hawkins (1983) expresses concern that Goldner has medicalized a "problem-in-living." While Hawkins seems to miss the jocular tone of Goldner's piece, he raises interesting questions about the psychological significance of Goldner's observations. Since Goldner's paper focused on those social processes likely to promote pronoia, whether pronoia should be viewed as individual or social pathology (or, indeed, as pathology at all) has not been resolved. Yet, this distinction is important. If pronoia is simply the mental aberration of a few, we can add it to our catalogues of psychic pathology and search for a healing balm. Alternatively, if pronoia is a widespread adaptation to the perversity of large organizations, we might strive for social reform.

Clearly, not all individuals display pronoia—this is what makes Goldner's vignettes seem so odd and even laughable. From my own observations and discussions with others in business, health care, and academia, I believe Goldner is describing a real phenomenon. However, as with other behaviors it is difficult to say how much pronoia is situational and how much it reflects a consistent personal style. Any accurate portrait of pronoia, then, must deal with the interaction of individual and social processes.

In this paper I consider pronoia both as individual psychopathology and social problem. I explore the nature of pronoia as an idiosyncratic cognitive style by comparing it with paranoia and denial. In its mildest form, pronoia resembles healthy optimism but, when motivated by an intense vulnerability to rejection, it becomes delusional. Individuals with fragile self-esteem distort both their own self-image and their perception of the attitudes of others. The lack of a supportive work environment which allows room for mistakes and failure is a constant threat to the vulnerable person.

I argue that pronoia is closely related to denial. It is likely to be found in settings where interpersonal relationships have become so routinized and superficial that their only important aspect is the strategic presentation of self. Pronoia arises in social systems where only the role performance aspects of self and other are valued. It is based on a deliberate truncation of thinking and feeling about relationships. The rigid positive bias of pronoia aims at increasing self-efficacy, but its one-sidedness leads to a shallow and maladapted existence. People who abandon a pronoid style, or rather see through it, may become paranoid or depressed. Both paranoia and depression lie a step beyond pronoia. In their acknowledgement of the dark side of life, they can lead us to a wider vision of reality.

PRONOIA AS DISEASE

Is pronoia a disease? This question admits no facile answer. No one definition of disease suffices in medicine; different diseases are associated more by family resemblance than by their similarity to a single prototype. Indeed, the word *disease* often seems to be arbitrarily attached to human problems as a means of bringing them under the hegemony of institutionalized medicine.

Hawkins identifies three ways he feels Goldner transforms the interpersonal behaviors of pronoia into a new disease entity: (1) the use of *pronoid* as a noun, as in "Pronoids cannot separate the personal from the impersonal" (Goldner, 1982:88); (2) the use of the metaphor of suffering; and (3) the explicit comparison of pronoia with paranoia. I examine each of these in turn.

1) In his descriptions of pronoia, Goldner moves from "the phenomenon of pronoia"—a species of interpersonal behavior—to "the pronoid person" to simply "the pronoid." This shift from behavioral observation through adjective to noun leads Hawkins to decry the medicalization of a problem-in-living. We can quickly dismiss this concern about labelling per se. As

Hawkins notes, at no point does Goldner call pronoia a disease. In common parlance, someone who exhibits bullying behavior is a bully. Someone who gets drunk often is a drunkard. The nouns themselves carry no weight of medicalization. There is nothing in the descriptive label pronoid that necessitates its being viewed as a disease rather than a pattern of behavior. Hawkins confuses personality typology with medicalization. Goldner has coined the word pronoia to resemble paranoia. However, he uses paranoid largely in the lay sense of "having a suspicious cast of mind," a style of thought rather than a disease. The stigma of paranoia then derives less from our identification of it as sickness, than from the fact that paranoid behavior (like slovenly or aggressive behavior) is objectionable to others.

2) Hawkins' second concern is the use of the word *suffer* in reference to pronoia. Yet, we speak of suffering from the consequences of a lifestyle or ethical choice as easily as suffering from an illness. If people suffer from pronoia, in any event, it is clear they suffer not from attitudes, which endow them with sunny expectations, but rather from the untoward consequences of having a limited map of social reality. The pronoid suffers in the same way as the illiterate, being unable to read certain vital documents in the gestures of others. This metaphoric use of suffering hardly compels us to view pronoia as disease.

3) The main force of Hawkins' critique, then, rests on Goldner's explicit analogy between pronoia and paranoia. Here both authors confound various meanings of the term *paranoid*. In psychiatry, *paranoid* is used in at least three different ways (Kendler, 1980): (1) to denote suspiciousness; (2) to denote a specific type of fixed belief, namely persecutory delusions; and (3) to describe a psychiatric syndrome. In the last category, it is important to distinguish between (a) paranoid disorder (or simple delusional disorder) characterized by non-bizarre delusions of any type, in the absence of other signs of psychosis; (b) paranoid symptoms occurring in the context of schizophrenia, affective disorder, and organic brain syndrome (especially senile dementia and amphetamine intoxication); and (c) paranoid personality disorder, in which a suspicious, mistrustful style, without actual delusions, constitutes a lifelong habitual pattern (American Psychiatric Association, 1980; DSM-III).

Paranoia, as illness, bespeaks severe impairment. Indeed, all the diagnoses of DSM-III, based as they are on clinical populations, presuppose sufficient personal suffering or social reaction to bring the individual to the psychiatrist's doorstep. While the diagnostic criteria could be applied to the ordinary person, we really would not know how to interpret this without some larger measure of social adaptation. This concept is nearly explicit in the DSM-III personality disorders, where role impairment is made a diagnostic criterion. If one is able to function well in work, love, and play, one ought not to be diagnosed as having a personality disorder, no matter how eccentric one's style. However, we may still borrow the categories of DSM-III to speak, by analogy, of traits or features reminiscent of a specific personality disorder. These might represent socio-psychological processes that, were they to intensify (that is, occupy a greater portion of a person's consciousness and action), would interfere with basic role performance in predictable ways.

Pronoia resembles paranoid disorder in that certain beliefs are held despite evidence to the contrary. While at times these beliefs might be delusional, in general they need not be held with intense conviction because, as Goldner illustrates, they are rarely challenged. Rather than forming delusions, pronoids need only exercise selective attention, ignoring what is painful and avoiding confrontation. This cognitive style seems unlikely to be narrowly expressed, and we should not be surprised to find, in pronoia, a whole way of life.

^{1.} Pronoia was originally a classical Greek word denoting foreknowledge or intuition. Thus, in the Hippocratic writings we find: "It is most excellent for a physician to cultivate pronoia. Since he foreknows and fore-tells the past, present and future. . .men would have confidence to entrust themselves to his care" (Hammond and Scullard, 1970:662). Goldner seems to have coined the word anew with quite a different sense in mind.

Pronoia, then, if it corresponds to any medical problem at all, best fits the category of personality disorders. Often people with personality disorders do not feel they are ill. Only the irritation or concern of others, or persistent failure in work or relationships, brings them to psychiatric attention. All the while, they continue to attribute their difficulties to some external force or fiat. If we imagine the extreme, where people were consistently pronoid, misperceiving the attitudes of others to such an extent that they lost their jobs repeatedly, wrecked their marriages, and were unable to form friendships, we should find it meaningful to speak of a pronoid personality disorder. Then we might inquire psychiatrically into the cause and cure of pronoia. Actually, most of the situations Goldner describes are far more benign and far less systematically distorted. Pronoia would thus be best described not as a disease but as a variant interpersonal style.

Pronoia, and its distant cousin paranoia, are important phenomena for sociologists and psychiatrists alike, precisely because they reside in distortions of both individual perception and social exchange. Straddling the fence between inner and outer worlds, they admit complementary descriptions in social or psychological terms.

DENIAL AND DELUSION

Paranoid disorder differs from paranoid personality in that the former involves not a pervasive suspicious bias in thinking but rather the formation of frank delusions. In asking which disorder pronoia most resembles, then, we are led to consider the nature of pronoid thinking in more detail. In short, is pronoia based on delusion or denial?

Delusions are false beliefs; but such a naive definition raises epistemological problems. We can refine the definition, to take into account the social construction of reality, by stipulating that delusions are beliefs which are demonstrably false according to the individual's cultural background and current context. In addition, delusions differ from mistaken notions in that they are held with unusually intense conviction. Thus, delusions are characterized by incorrigibility (they are not shaken by argument or counterevidence); ego-involvement (they are of great personal significance); and the tendency to preoccupy thought (Reed, 1974). In practice, these properties are found to varying degrees. Most delusions are somewhat influenced by counterevidence, though such information may be assimilated with little substantive change in the trend of thought.

Are a pronoid's beliefs delusions? By definition they are false, but only from an omniscient stance that has access to information not available to the pronoid. Since others are guarded with their negative evaluations, pronoids may receive little news of their failure. In the absence of confrontation it may not be fair to view the pronoid's beliefs as incorrigible. It seems more accurate to see the pronoid as avoiding those interpersonal cues that hint at failure or rejection. On this view, pronoids do not so much construct false beliefs out of the minutiae of social intercourse, as they hide from the often muted evidence of their inadequacy.

The inability to recognize negative evaluations of oneself by others is a form of denial. It allows one to maintain a sense of well-being in the face of social rejection (Goffman, 1963). The extent of denial depends on both the individual's vulnerability to criticism and the hostility of the environment. Denial is a kind of perceptual blind spot, a way of actively excluding from consciousness information damaging to the self.

In its mildest forms, denial resembles healthy optimism or "beneffectance" (Greenwald, 1980). Such a positive bias seems a part of a normal self-image and promotes self-efficacy. For example, Lewinsohn *et al.* (1980) found that depressed individuals rated themselves as less socially competent than non-depressed subjects. However, the depressed subjects' self-perceptions were actually more realistic than those of the non-depressed control subjects. That is, non-depressed people seem to perceive themselves more positively than others see them. As Lewinsohn *et al.* (1980:210) note:

Non-depressed people may thus be characterized with a halo or glow that involves an illusory self-enhancement in which one sees oneself more positively than others see one. . . To feel good about ourselves we may have to judge ourselves more kindly than we are judged.

One feature of such illusory self-enhancement can be the misperception that others think well of one. Pronoia, then, seems to include phenomena ranging from bland optimism to vigorous denial. There may be some pronoids who are frankly delusional but they are surely a minority. In the following two sections I examine intrapsychic and social hypotheses for the development of severely pronoid behavior.

PRONOIA AND NARCISSISM

If mild pronoia corresponds to denial and has obvious adaptive value, how are we to account for the more severe form that borders on the delusional? It is helpful in this regard to consider the contemporary psychodynamic theory of narcissistic disorders. This theory tries to explain exhibitionistic, manipulative, paranoid, and dependent personality styles as variants with a common origin in the shoring up of fragile self-esteem (Bursten, 1973). To this we might add pronoia as yet another personality style based on grandiose thinking which compensates for deficient self-esteem.

Individuals with narcissistic conflicts are prone to the sudden collapse of their self-esteem. This vulnerability is believed to originate in insufficient parental empathy, praise, and appreciation in early childhood (Kohut and Wolf, 1978). Affection and recognition are made contingent on performance to an inordinate degree, and so failure, even the experience of ordinary limitations, takes on exaggerated importance (Miller, 1981). People who have been denied empathic "mirroring" and healthy idealization in childhood have difficulty in regulating their self-esteem. Thus, the narcissist compensates for fragile self-esteem with grandiose thinking, omnipotent fantasies, and a tendency to recognize other individuals not as separate beings, but rather as auxiliary sources of praise and encouragement to be incorporated into the self. When narcissists encounter threats to their grandiosity through failure, they either try to deny it or suffer a dramatic deflation of self-esteem. Similarly, if others in social intercourse refuse to act as flattering mirrors, the narcissist will perceive them as uncaring or rejecting and will actively avoid them. Of course, to the extent that grandiose thinking can transform perception, the narcissist will see others as duely appreciative and so maintain self-esteem. This distortion of perception by grandiosity, then, is the proposed mechanism for pronoia.

A number of writers have seen paranoid symptoms as based on narcissistic conflict (Bonime, 1979; Bursten, 1973; Meissner, 1979). Persecutory feelings and hostility are secondary to a persistent state of vulnerability in which the seemingly benign actions of others are experienced as insulting or injurious because they fail to restore protective grandiosity. Mild criticism or confrontation may be felt as catastrophic. When their inflated posture is punctured, paranoids experience profound shame at their weakness and loss of control, and may respond with rage or terror. In the face of an often indifferent world, paranoids deny their insignificance and work to maintain their grandiosity by picturing themselves at the center of a vast conspiracy.

The following case from my clinical practice illustrates this relationship between narcissism and paranoia. Mr. A. had a difficult childhood, wandering across America with a vagabond psychotic mother. As a result of the mother's disorder, she was rarely able to satisfy her son's needs for empathic mirroring, warmth, and a parental figure to idealize. Mr. A. grew up to be a consistently suspicious, mistrustful, angry man who survived through his creative work and a somewhat strained sense of humor. He was torn between feelings that others were in awe of his great talent and that they disparaged and demeaned him, finding him worthless. He fantasized constantly about the day when he would win worldwide recognition and mistook mild praise, or even unrelated events, for signs that such success was imminent. He insisted he was the illegitimate

nephew of a famous artist and was being denied his birthright. He followed the activities of this figure closely and interpreted them as showing acknowledgement of his paternity and talent. When related to empathically, Mr. A. shifted from expressing anger and grandiosity to feelings of sadness, depression, and loss.

From the grandiose perspective, it matters little whether the world is malevolent or friendly, only that one is at, or near, the center. Pronoids differ from paranoids mainly in being less wounded and, so, less angry. They are thus able to imagine a benevolent conspiracy; so much the better for their self-esteem.

Narcissistic grandiosity results in a divorce of results from action. Thus, there is the almost magical expectation that wishes will be translated into reality without effort. This fantasy of omnipotence without exertion causes some individuals to deny their own role in bringing certain events to pass. They prefer to attribute positive outcomes to the admiration of others rather than their own activity, since this speaks more directly to their need to feel special.

We are all familiar with individuals who, following a striking performance, say, "Oh, it just happened." Similar to this are people who receive compliments as a result of "fishing," but feel the compliments as spontaneous confirmation of their special qualities. A woman patient, convinced of her irresistibility to men, once attempted to document this for me with an account of being followed by a handsome gentleman for several blocks along Park Avenue and down a couple of side streets, culminating in his overtaking her at a stop light, remarking on her attractiveness, and inviting her to join him in a cocktail. In response to my asking her how she knew he was following, she illustrated how she had covertly and repeatedly looked back. The covert gesture was an unmistakable come-on. She was totally unaware of her seductive behavior and attributed the man's response entirely to her irresistible attractiveness (Bonime, 1979:514).

This misperception closely resembles pronoia. The social context, which one has actively worked to set up, is misinterpreted as simply a reflection of the attitudes of the other. Narcissists misread the attitudes of others because they deny the effects of their own actions.

A central feature of paranoia, and pronoia as well, is the inability to put onself in another's shoes. This failure of accurate empathy results from the narcissistic preoccupation with others as objects to bolster one's self-esteem. This leaves no room for awareness of the other's subjectivity.

The grandiose paranoid's sense of uniqueness, of special immunities. . .can be seen in his lack of awareness that people have an independent existence and respond to him within the framework of their individual personalities. . . . The grandiose person expects, insists upon, their all responding to him with admiration. . . . Confronted with a derogating individual, and recognizing him as such, he is still surprised at being derogated. In fact, he feels outraged because he is not treated in a special fashion (Bonime, 1979:519).

Pronoids differ from paranoids here chiefly in that the former's anger is milder or better controlled. Nevertheless, we would expect to find a similar sense of outrage when the pronoid's positive expectations are not fulfilled.

In paranoia, the empathic deficit can result in a largely unaware exploitative or manipulative use of others (Bonime, 1979:516). In pronoia, this results instead in a sort of superficial awareness of oneself and others as "players in a game." This fits well with a view of human interaction as a game of strategy (Goffman, 1969). It is, after all, the capacity to respond empathically to another's joy and suffering that rescues us from becoming too skillful at "winning the game." Empathy compels us to drop a stance of strategic game-playing for a more spontaneous and intimate relationship. I suspect pronoids are generally pleased with their score in the game (until they lose) because they have a deficient capacity to discover, through empathy with a supervisor for example, just how poorly they actually are doing.

INTERACTION AND INTROSPECTION

Pronoid optimism becomes denial, and denial passes into delusion, with an increasingly rigid way of life. We have attributed this rigidity to the intrapsychic need to ignore certain painful facts

of life, such as our weakness and vulnerability. But we can also view pronoia from the outside, as an interpersonal process.

We measure another person's rigidity through interaction with them. Their obstinacy may provoke us to challenge their world view more intensely, to which they respond with yet greater conviction. A direct effort to change another's strongly held belief can lead to deeper entrenchment and thus to an interpersonal cycle of escalating confrontation (Kirmayer, 1983). If we do not insist on opposing a belief but instead join with it, we can have far more rapport and influence with another. For example, Jackson (1963) describes a method for working with highly paranoid clients in which the psychotherapist accepts their concerns and participates actively with them. This might entail helping to search the consulting office for bugging devices. Paranoids may be disarmed by this willingness to join with them and so expose a more vulnerable and tractable side of their self. The problems of the rigid personality, then, are influenced at such a basic level by interaction that we must view them as irreducibly social.

In paranoia, individuals are preoccupied with issues of control and influence. Others threaten their sense of autonomy (Shapiro, 1982). Hence, they scan the environment with every expectation of finding evidence that others are trying to control them. In this state of hypervigilance, the capacity to make meaningful connections between even unrelated events is heightened (Shapiro, 1965). Paranoids weave the actions of others into a tight self-confirming web of pointed malevolence, finding justification for their fear and hostility in the oblique remarks of others. While they feel a momentary triumph at this confirmation, this same perception exacerbates the feelings of loss of control that gave rise to fear in the first place (Melges, 1975). Paranoids are caught in an escalating cycle of paranoia in which the very ability to find clues feeds their terror. As their suspicions increase, paranoids become more hostile. They frighten and alienate others, who in turn react with anxious circumspection, avoiding clarification of misapprehensions. As others warily retreat, the social field around the paranoid begins to confirm their fears (Lemert, 1962). Thus, many of the paranoid's fears have a basis in reality.

Similar processes can be seen in pronoia. Goldner suggests that organizational complexity and dependence on evaluations by superiors which are based on obscure criteria place subordinates in a state of anxious uncertainty. Subordinates then closely scrutinize their superiors for clues to their opinion. These scraps of information are overvalued and misinterpreted by the pronoid, who consistently misreads the gestures of others, finding them laudatory or appreciative.

While pronoia, like paranoia, involves grandiosity, the underlying affect is not hostility and fear but only mild anxiety. The pronoid's anxiety is often disguised by a mask of self-assurance. Whether others see the mask or the anxiety behind it, they may be reluctant to confront the pronoid with the bad news of failure or incompetence. So the pronoid, like the paranoid, is treated with circumspection, less because others are frightened, than because they do not want to play the "heavy" with a "nice guy." This avoidance of confrontation once again leaves the situation ambiguous and open to misinterpretation. Of course, it is hard to see oneself clearly when the mirror that is held up is falsely flattering.

Politeness fuels pronoia whenever an evaluator assumes that the person he is evaluating can distinguish between the trivial and the important, when in fact the person cannot make that distinction and believes everything said is significant. . . . This inability to distinguish between the trivial and the important is particularly apparent whenever friendship is a factor. Pronoids cannot separate the personal from the impersonal (Goldner, 1982:88).

Civility and politeness allow pronoids to continue to fool themselves. But why are they unable to discriminate between the trivial and the important? Goldner suggests that estimating what others think of us is based on a kind of introspection. Pronoia, then, is a distortion of one's ability to introspect as much as a misperception of the external world. How are these two related?

The external focus on others as evaluators of oneself results in a lack of self-awareness. As I noted above, the grandiose cognitive style ignores one's own efforts to elicit positive responses from others. Instead, pronoids interpret social pleasantries from others which they themselves have initiated as spontaneous and deeply felt. This lack of introspective self-awareness, brought on by both grandiosity and external focus, makes it difficult for pronoids to factor out their own contribution to social interaction and accurately gauge the responses of others.

Philip K. Dick's novel A Scanner Darkly (1977) provides a striking metaphor for the pronoid distortion of self-awareness. In a California of the near future, Bob Arctor is an undercover narcotics agent sent to spy on dealers of the powerfully addictive drug, "substance D." Arctor's supervisor does not know his undercover identity and inadvertently assigns him to spy on himself. Unfortunately, Arctor, in his street identity "Fred," is addicted to substance D. This drug slowly destroys the corpus callosum, the bridge between the two cerebral hemispheres, resulting in two independently functioning minds within one body. As Arctor places his alter ego Fred under surveillance, the drug does its damage. Arctor, identified with the logical-analytic left hemisphere, is then spying on Fred who resides in the more emotional-synthetic right brain.

This bizarre situation resembles the predicament of those who work in large organizations: they try to objectively monitor their own behavior in a detached manner, while the social environment encourages an ever greater dissociation between rational faculties and intuitive feelings. The failure of introspection in pronoia, and the resultant difficulty in assessing the responses of others, rests on this divorce of reason from feeling. The self is then identified exclusively with the rational side. Our feelings allow us to distinguish the trivial from the important, the friendly from the hostile. Unable to recognize their own feelings, pronoids cannot figure out how others are treating them. They resolve this uncertainty with benevolent misperceptions. Divorced from their own feelings, pronoids mistake themselves for those whom others take them to be. Their motives become entangled with the motives others attribute to them. To feel good about themselves they must assume others think well of them. The way out of this morass is through the capacity to experience one's own feelings and so discover one's deepest and guiding values. But this self-awareness is not easily won. Given the propensity of large organizations to function without regard for the individual, it is not surprising to find alienation and despair common in the workplace. To the extent that one lives in a world that does not really care what one thinks or feels, the sense of self is diminished while the importance of the other is magnified. So pronoia becomes an adaptive response to a basic imbalance: the supervenience of being-for-the-organization to being-for-oneself.

PARANOIA: ALIENATION AND EXALTATION

Pronoids cannot distinguish between the trivial and the important because they are isolated from their own feelings. Likewise, they cannot recognize negative evaluations by others because they shield themselves from their rejections. Together, these leave them unwilling to acknowledge painful realities. Another novel by Philip K. Dick illustrates this shrunken awareness. In Confessions of a Crap Artist (1975), we meet Jack Isidore of Seville, an ingenuous observer of the world who works as a tire retreader. He wants to present a chronicle of "true facts." However, ever since he was a child and read about ships lost in the Sargasso Sea, he has been unable to distinguish between the truth value of what he reads in pulp science fiction magazines like "Thrilling Wonder" and the events of everyday life. Jack is a sort of idiot savant, whose naiveté allows him to describe the warfare of his sister's marriage, the meaninglessness of his own job, and the desperate hopes of the flying saucer cult he joins, all without emotional reaction. His poorly developed feelings leave him unable to discriminate between the imaginary and the real.

In Jack Isidore we have the archetypal pronoid. He is lost in a Sargasso Sea of tangled relation-

ships because his grandiose fantasies and divorce from feeling do not allow him to generate his own hierarchy of values. Still, he is able to describe clearly the very events that ought to shock him into awareness. In the end, his growing empathic relationship with his brother-in-law does seem to bring him a spark of self-awareness. He chooses to spend the money left to him in his brother-in-law's will for a course of psychoanalytic treatment because "it seems pretty evident that my judgment is not of the best" (1975:171).

If the veil of illusion is penetrated, reality is seen to be more complex and chaotic than we can handle. This greater awareness costs pronoids their imaginary peace of mind.

The realization that our world is a solipsistic fantasy lifts the veils from our eyes. Pronoia is no longer possible. Rather, we experience chaos and confusion. This experience of uncertainty and randomness in life is intolerable, so we struggle immediately to organize it. Paranoia is one method of resolving the incoherence of experience. The paranoid gives random, impersonal events the mask of malevolence, and so transforms doubt into certainty.

[P]aranoia is nothing less than the onset, the leading edge, of the discovery that everything is connected, everything in the creation, a secondary illumination—not yet blindingly One, but at least connected, and perhaps a route In for those. . .who are held at the edge (Pynchon, 1973:703; emphasis in original).

The paranoid is a step ahead of the pronoid's complacent optimism. The paranoid can feel, and so is frightened by the complexity and threat of the social world. The cost of revelation is the anguished awareness of one's own insignificance in the larger scheme of things. This loss of grandiosity entails a loss of efficacy as well. The paranoid is paralyzed by vision.

While the pronoid lives within a miasma of positive expectations, the paranoid expects, and finds, organized malevolence and persecution on all sides. From the paranoid perspective, pronoia is part of the conspiracy. The alienation of the workplace as well as the awareness of failure are denied by the pronoid, all for the sake of "business as usual." Pronoids have reduced themselves to automatons, reflexively playing out an assigned social role.

Paranoids, in contrast, are visionaries, who see through the idealization of the banal to the dark interior of social life. Despite their fears, they exalt in the clarity of their vision. There is a sense of being-in-the-know that compensates for the terror of conspiracy. Paranoids reach exaltation by making a virtue out of alienation.

If the paranoid's eyes shine brighter than the pronoid's they both remain victims of misperceptions. Paranoids see more, but not always more clearly. What is the alternative? The failure of paranoid and pronoid constructions of reality leads to a collapse of grandiosity. This loss of grandiosity makes both pronoid and paranoid vulnerable to depression and despair. If they can bear this suffering, it can bring deeper awareness of both self and other. Needing neither the false hope of pronoia, nor the projected hostility of paranoia, they will contribute less to the alienation of others. Instead, in their vulnerability, they can draw others toward them, offering empathy and contact. In this way sadness, borne of seeing through to the true predicament of our lives, becomes an invitation to a new level of relatedness and intimacy.

We have seen pronoia and paranoia as views of social reality based on denial of the vulnerability and limitedness of the self. Social structures contribute to these distorted world views by treating the individual as a pawn in a larger game, whose value is purely strategic. Lacking a sense of the worth of inner feelings, people accept this characterization and come to see themselves in strategic terms as well.

The self may be largely a social construction in the first place, but it allows for a sense of interiority. This creation of room *inside*, where the person can develop a unique imaginal and feeling life, is a precious resource. If it is to continue to grow we must find ways of nurturing the experience of inwardness and introspection. This is most likely to occur in organizations where the individual's vulnerability and vision are equally respected.

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