

The Maternalists

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INTELLECTUAL HISTORY
OF THE MODERN AGE

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THE MATERNALISTS

Psychoanalysis, Motherhood, and
the British Welfare State

Shaul Bar-Haim

PENN

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In memory of my mother, Rachel Bar-Haim (1946–2013)

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INTRODUCTION

Some time ago, I stopped in front of a shelf of beer in a local English supermarket. The shelf was packed with all different types, flavors, and comical brands. While trying to sort out the differences between Dead Pony Club, Elvis Juice, and Disco Forklift Truck Mango Pale Ale, one specific bottle attracted my attention: Nanny State beer. When I picked up the bottle, my suspicions were confirmed: this was a nonalcoholic beer. This idiom—the *nanny state*—has been used in Britain for many decades, mainly by the political Right, as a synonym for a social-democratic state that treats its citizens as if they are children, caring for all their needs but also forbidding them any pleasure. Ever since 1965, when the conservative politician Iain Norman Macleod used this term in an anonymous column for the *Spectator*, the *nanny state* has appeared in the right-wing British imaginary as a parental entity that tyrannically insists that individuals should avoid their authentic desires.¹

The word *nanny* has different meanings. In its British context, the term is heavily loaded with class dimensions: for the working class, *nanny* can be simply another word for a grandmother; at the same time, it also refers to a woman who serves as a surrogate carer for the so-called posh family—what historian Lucy Delap described as an “upper-class institution [that] became more widely employed in twentieth-century middle-class households.”² Dismissing the idea that the state should have some caring responsibilities, very often similar to ~~the ones that~~ a mother or nanny—a Mary Poppins for the many—has been a major objective of conservative thinkers since the 1960s onward. As Auberon Waugh, a well-known author and conservative public intellectual (as well as a vocal voice against anti-smoking rules) wrote in 1991, “We live in a nanny state where Nanny, far from being the gentle, indulgent, feckless old thing of Labour dreams, is a ferocious virago of Tory nightmares.”³

Nanny state was, and in some political circles still is, such an effective catchphrase against any form of social, economic, or cultural intervention by the state, precisely because it captures—frequently from a politically

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conservative perspective—a reluctance to be told what to do, or to be “told off,” by parental voices, whether these are our real parents, parent surrogates (like nannies), or indeed politicians, civil servants, and state agents, who think that they know better than us and can determine what is right and what is wrong as if they were our parents. It is almost needless to say that *nanny state* is a highly gendered term. The “nanny”—in reality as well as in our political imagination—is a female and nonbiological parent figure, namely a surrogate mother rather than a father. But the success of this idiom perhaps lies elsewhere, that is, with the fact that it does capture some kind of historical truth, even if a very distorted one, namely that of the mid-twentieth-century social contract, popular mainly in western Europe, which was based on the idea that in exchange for allowing state intervention in people’s private lives, states could and should provide their citizens some *parental capacities*, especially where these cannot be given by the actual biological parents.

Historian Carolyn Steedman recently described breaking into tears when reading—more than five decades after it was first published—the 1963 Robbins Report, which back then called for a massive expansion of higher education in Britain by demanding that “enough places should be provided to allow the proportion of qualified school leavers entering universities to be increased as soon as practicable.”⁴ Steedman recognized in this report not only a national turning point but also a personal one. The significant changes in the British academy that followed the Robbins Report gave her, despite her personal and social background, the opportunity to become the leading scholar, author, and intellectual that she now is—something that she could not have achieved otherwise, having grown up in a working-class family with a single mother.

In an article from 2017, Steedman describes the strong affection for the state that she felt back in the 1960s, and again fifty years later, after reading this report that changed her life:

I love the state because it has loved me. My tears were tears of acknowledgment. I think of this paragraph [Steedman refers to a quotation from the Robbins Report where the required reform in higher education is being discussed in terms of a “social justice” that should be made to the World War II generation and their children] as a rather beautiful expression of the social-democratic contract drawn up after 1940. In its emotional and psychological aspects the contract was given clearest expression in John Bowlby’s *Childcare*

and the Growth of Love (1953) and his thesis that love grows by caring, by loving. I love the state because it has loved me.⁵

Indeed, one manifest objective of the post-1945 British welfare state was to make sure that a child's basic needs would be provided, if not by her own mother, then by society, namely the state in its capacity as a maternal surrogate.

Dismissing the welfare state by portraying it as a “nanny” is a refusal to imagine the state as a maternal entity that has some caring responsibilities toward its own children-citizens. However, the notion that a truly social-democratic government needs to play a *maternal* role in its citizens' lives was indeed very popular in the mid-twentieth century and has taken different forms in Britain ever since the 1930s. There is no one way to answer what maternal roles are—indeed, historians have shown that they are widely different in different times and places. However, when it comes to mid-twentieth-century Britain, it was psychoanalysis that provided one of the most powerful discourses for imagining what a maternal role could and should be in the private and public spheres. It is this meeting point of the British welfare state, psychoanalysis, and the “maternal” that this book aims to explore.

After the First World War, many British doctors, social thinkers, educationalists, and policy makers showed increasing interest in the new focus that psychoanalysis was giving to the maternal role at the time. This was part of a dramatic shift within psychoanalytic theory and practice toward a study of femininity, women's sexuality, and the role of motherhood in the development of the child. Those influenced by this shift used new notions of the maternal to criticize modern European culture, its patriarchal domestic structure, and its colonial politics. The crisis of modernity was, for some of them, the result of a damaging form of motherhood and a lack of “maternal values” in patriarchal Western society. This strand of thought was taken up, and pioneered, by figures who were well placed to disseminate their ideas far beyond psychoanalytic circles, into the pillars of British culture, education, medical care, and social policy. The first part of this book will focus on four of these figures: the educationalist Susan Isaacs, the anthropologists Bronisław Malinowski and Geza Róheim, and the Tavistock psychiatrist Ian Suttie. In addition to exploring the political dimensions of their critique, I argue that these thinkers used the newly developed psychoanalytical-maternal vocabulary—drawn mainly but not exclusively from the Hungarian psychoanalyst Sandor Ferenczi—to promote what they imagined to be the “real” essence of the “maternal.”

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By the 1930s and 1940s, whilst European fascism gained ground, the maternal became a cultural empty signifier onto which public thinkers could project all sorts of social anxieties, as well as many types of radical, and even utopian, political suggestions. Already during World War II, and even more so in the postwar era, figures such as Henry Dicks, John Bowlby, Donald W. Winnicott, and Michael Balint (to mention a few) took measures to “maternalize” the public sphere. The second part of the book will show how these and other figures from the “psy” professions responded to the horrors of the Second World War by drawing on the interwar maternalistic way of thinking, going as far as to demand the “maternalization” of the British public sphere. Winnicott and Balint understood the role of the new welfare state as a supplier of certain maternal capacities, especially where people were deprived of real maternal care. This way of thinking provides us with hitherto unexplored insights into the role of domesticity in portraying major utopian visions of the state as a parental entity, later to be mocked by mainly conservative thinkers as the “nanny state.” Thus, in presenting the affinities between welfarism, maternalism, and psychoanalysis, I am also suggesting a new historiographical reading of the British welfare state as a political project. Rather than presenting the welfare state as a “progressive” model of social democracy, or as, on the contrary, a pretext for restoring the traditional position of women in society, this book suggests a turn to the psychosocial dimensions of the welfarist project, in order to reveal the collective imaginaries at the core of the idea that the state should serve as a parental entity for the individual.

The Maternalists, then, is less a history of real mothers and more a history of the public imagination of motherhood. The two are interrelated, but these affinities are not trivial. In some cases, perceptions of motherhood can tell us a great deal about the society in question, but not much about the lives of real mothers; in other cases, the subjective history of real mothers is a complex of what Raymond Williams called a “structure of feeling,” consisting of public expectations that mothers were required to meet and their feelings about their actual reality, which was often very different.⁶

Maternalism: Definition(s)

Maternalism is a “slippery” concept, argues historian and sociologist Jane Lewis.⁷ Indeed, historians have used this concept to mean so many different things that one may think that it might be better to abandon it altogether.

“Maternalism” can sound to our ears today as pro-women and a progressive concept. However, motherhood has always served as a site onto which public anxieties and fantasies could be projected, and these have very often not been “progressive” or “feminist” by any means. Thus, historically, in many cases “maternalist” ideologies have been based on perceptions of motherhood and have not reflected real mothers’ lives.

Some historians, for example, use the term *maternalism* to describe all sorts of interwar nationalistic pronatalist policies and propaganda, in European countries as different as Italy, Russia, Germany, and France.⁸ The rise of nationalistic and authoritarian politics in the interwar period was accompanied by a new cult of the family and of motherhood throughout Europe. European interwar politics—on the left and the right—tended to manifest a determination to preserve traditional gender roles, often by promoting motherhood as the major form of patriotism. In this context, maternalism can be regarded as a way of objectifying mothers in the service of the “nation,” “the state,” or another body politic. But a more complicated picture than this has been suggested by some historians. The forms of maternalism popular in Mussolini’s Italy, for example, might simply appear to be elements of fascist patriarchal propaganda. However, as Elisabetta Vezzosi has shown, Italian women actually used fascist pronatalist policies “to obtain social rights as working and non-working mothers, to develop a new sense of entitlement to assistance and to create new female-dominated professions in the field of social assistance.”⁹ Similar historiographical debates can be found among historians of the Third Reich about women’s agency. Atina Grossmann suggested in her review of feminist historiography of Germany in the 1980s, that “while the (male) historians’ debate [Historikerstreit] about the nature and specificity of German National Socialism seems to have calmed down, German women scholars continue to struggle with the still restless issue of how to come to terms with their mothers’ and grandmothers’ place in the Nazi past.”¹⁰

The meaning of maternalism in British historiography changes according to the period and the historiographical school. Clare Midgley defined the nineteenth-century feminist abolitionist movement in Britain as “antislavery maternalism.” Those antislavery “maternalists” absorbed the “image of Britain as benevolent mother country to her colonies” and thought of their activism as the “extension of the mother-child relationship to the relation between white ‘free’ women and black enslaved women.”¹¹ Antislavery maternalists had many links with white and black women across the Atlantic, although the ideal of motherhood among African American women was very

different. As Molly Ladd-Taylor notes, “The legacy of slavery and the realities of mothering in a racist society made it impossible for African Americans to idealize motherhood in the same way as the whites.”¹² These differences were one of the reasons for African American women to differ in their political goals from white English and American middle-class women: the former were more likely to value women’s economic independence, as well as to emphasize policies based on social justice rather than on individual assistance to people in need. Other scholars have focused on studying maternalistic ideals (again, these ideals are never self-explanatory) as the ground for the emergence of modern protest movements. Jill Liddington, for example, suggested that maternalist feminism “was a powerful and emotive language that could be appropriated to underpin less popular anti-war arguments.”¹³ Even if most women during and after the First World War preferred to perform a “patriotic motherhood” rather than a “progressive” one, maternalism served as an alternative universalistic language for the peace movements during and after the war.¹⁴ Historians have described different forms of intervention by British women in colonial politics and social life (very often in the form of philanthropic projects related to education) as “maternal imperialism.” Maternal imperialism was part and parcel of a racial worldview of British colonialism more generally.¹⁵ Many women perceived themselves as “mothers of the race” and “race creators,” and therefore had a significant “racial duty.”¹⁶ Maternalist ideology also played a central role in the systematic removal of indigenous children from their parents in North America and Australia since the late nineteenth century and throughout large parts of the twentieth century.¹⁷ Not unrelated to colonial and racial worldviews, maternalism was also identified with eugenics—that is, the belief that ~~the~~ mothers were what one contemporary defined as “nature’s supreme instrument of the Future,” and therefore, from a eugenic point of view, the real site for change.¹⁸

Late nineteenth-century maternalism took a different form. Between 1880 and 1920, maternalism centered for the most part on voluntary associations of women who helped enormously to promote progressive policies for mothers and children of the working classes. In the interwar period, part of the era that this book covers, maternalism in Britain was mainly identified with the failed feminist campaign for motherhood to be viewed as an occupation absolutely equal to the work of the male “breadwinner,” and for mothers to be entitled to state allowances (“endowment of motherhood”).¹⁹ We can see, then, even by looking only at the British case, that historians mean very different things when using the word *maternalism*.

Ann Taylor Allen defines maternalism as “a feminism that takes woman’s experience as mother and nurturer as the basis for interpretations of women’s history, for distinctively female approaches to ethical and social questions.”²⁰ However, even if we consider maternalism as a form of political agency—and this is certainly not the way this concept has been used by all historians—Allen’s definition is problematic, because not all “maternalists” have necessarily considered themselves feminists, or even identified with any of its principles.²¹ Historians Seth Koven and Sonya Michel define maternalism as the “ideologies and discourses that exalted women’s capacities to mother and applied to society as a whole the values they attached to that role: care, nurturance, and morality.”²² But even under this wider definition, it is not easy to differentiate between a simple motivation to improve mothers’ and children’s lives—what one might call “maternal politics”—and the more general and slippery term, *maternalism*.²³

In this book, I follow Rebecca Jo Plant and Marian van der Klein, who have argued recently that the term *maternalism* is “purely an analytical tool . . . [which] was not employed by historical actors themselves.” According to their approach, “the primary standard for assessing its utility must be its success in illuminating certain historical phenomena rather than its accuracy in categorizing individuals who laid claim to the term themselves.”²⁴ Thus, I will examine several case studies of *maternalistic* thinking from the interwar period, when psychoanalytic notions about motherhood were often used in utopian and dystopian discourses to describe a crisis of modernity as a crisis of motherhood, and from the postwar period, when certain maternalistic tendencies issued in real attempts by psychoanalysts and policy makers to maternalize the public sphere. These meeting points between maternalism, welfarism, and psychoanalysis will enable historians, sociologists, and gender scholars to reassess some of the ideological elements behind perceptions of domesticity in the golden age of twentieth-century welfarism.

I argue that throughout the interwar and postwar years, the “maternal” remains an imaginary and imagined—in some cases, a “fantasized”—set of emotions and qualities, such as love, tenderness, care, and maturity—that people thought of as missing from their private and public lives. The history of emotions has become one of the most celebrated genres of historical scholarship over the last decade.²⁵ However, the definitions of what emotions are, the “right” method to study them, and the mandate of the historians in this field are unclear. The medievalist Lyndal Roper pointed out a few years ago one major problem: historians too often “tend to treat emotions as

phenomena which simply exist, and which don't need explaining or linking back to deeper psychic conflicts and constellations."²⁶ For the "maternalists" in this book, only limited knowledge was possible of what it might be to experience a set of "maternal" emotions. Many of the figures in this study expressed a longing to experience such maternal emotions, rather than assuming that they had experienced them already, and any assumption that such a set of emotions simply exists should therefore be ruled out from the start. Thus, I argue, the way in which the historical actors in this book thought of the maternal is *utopian* par excellence, not only in the meaning of the word *utopia*—"an imagined or hypothetical place, system, or state of existence in which everything is perfect"²⁷—but also in its Greek etymology: ου (no) τόπος (place), a place that does not exist. It does not mean, however, that this maternalist set of emotions had no real impact on the world. Maternalists such as Róheim, Suttie, and Winnicott did wish to think of the emotional aspects of the maternal as a force for political change. But rather than assuming that these emotions are transparent, or ever existed, except in the form of people's anxieties and fantasies about them, this book aims to trace the "epistemologies" of such emotions, and thus to explore "the normative valence . . . in their sociopolitical context."²⁸

Michael Roper argues that for many reasons—one of them being a reluctance of historians to embrace psychoanalysis—cultural history tends to reconstruct "subjectivity" by investigating more accessible "cultural representations," rather than making a real effort to understand lived experience by acknowledging the existence of people's "inner worlds." Thus, histories of subjectivity too often "endorse a profoundly lifeless notion of human existence, in which we deny to history the rich depth of emotional experience that surely animates us in our own lives."²⁹ I share Roper's concerns over the tendency of some historians to remain in their comfort zone of "cultural representation" rather than taking the risk of retrieving and presenting people's inner emotions. However, some of the collective emotions presented in *The Maternalists* are neither a sociopolitical construct (that can be deconstructed by analyzing cultural representations) nor a "lived experience" (that can potentially be understood by applying psychoanalysis as an analytical tool, for example), but a longing for emotions that people believe no longer exist, or have not yet come into existence.

Williams's "structure of feeling" can be a useful concept in the attempt to capture this longing for emotions that people do not necessarily know from their own experience. In *Marxism and Literature*, Williams pointed

out that a structure of feeling is not only about the emergence of a new form of psycho-political “living experience” but also about the “pre-emergence, active and pressing but not yet fully articulated” historical moment.³⁰ It is this transition of maternalist discourse from a-not-yet-fully-articulated structure of feeling into a major element in postwar British culture and welfarist ideology that this book aims to document.

“What My Mother Lacked, I Was Given”

In her autobiographical memoir, *Landscape for a Good Woman: A Story of Two Lives*, Carolyn Steedman describes how new welfarist measures taken during her childhood in the 1950s led her to believe that the state was taking a parental role in her own life, specifically in domains where these roles were missing. Like real parents, the state became, for her, a site onto which she could project a wide range of feelings, including hate and hostility as well as grace and gratitude. Although she occasionally describes the state’s intervention in her life as traumatic, she still reminds herself and the readers that “being a child when the state was practically engaged in making children healthy and literate was a support against my own circumstances.”³¹

Steedman’s preoccupation with motherhood is typical of the welfare culture prevalent in Britain in the period following the Second World War. As the literary scholar Bruce Robbins points out, “at the contradictory heart of the book, ambivalence about Steedman’s mother shades into ambivalence about the state and about the state’s actions as, in effect, a parental surrogate.”³² Steedman’s parents separated after her sister was born, and in fact, Steedman suggests that the two events were linked: her mother got pregnant in order to persuade her father to stay with them—a plan that failed: “She’d tried with having me, and it hadn’t worked. Now, a second and final attempt.”³³ But as Robbins notes, Steedman also perceives the separation as a trade in which she lost a father but gained a sister. Thus, “in gaining a sister, she enters however unwillingly into a more democratic condition, a condition in which she can no longer be a unique object of affection but is obliged to share the available resources with someone of equal status.”³⁴ Steedman’s personal story, then, is also an allegory for a more general transition from the domestic conditions of working-class patriarchy into a maternalistic social democracy, where maternal care—provided either by real mothers or by the state—is the dominant force in society. Indeed, Steedman, as a child,

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perceived the state as attending to some of her primal needs. She writes, “*What my mother lacked, I was given*; and though vast inequalities remained between me and others of my generation, the sense that a benevolent state bestowed on me, that of my own existence and the worth of that existence—attenuated, but still there—demonstrates in some degree what a fully material culture might offer in terms of physical comfort and the structures of care and affection that it symbolizes, to all its children.”³⁵

~~This study~~ aims to show that it is no coincidence that Steedman felt that the state gave her what her mother did not. Her remarks not only suggest new forms of provision but assume a maternal discourse, that, I argue, merits closer scrutiny than it has hitherto received. The claim that the welfare state was, in crucial respects, a mother-centered project, is not uncommon among scholars. However, ~~The Maternalists~~ seeks to develop a different argument about this putatively maternal project, namely that welfarist policy became linked to maternalist ideas through the use of psychoanalytic notions. In other words, under the influence of the British psychoanalytical movement, *welfarizing* the state was perceived by some as *maternalizing* the state.

After the First World War, British society became particularly preoccupied with mothers’ civil rights and obligations, and attempted to define for mothers the boundaries between the public sphere and their domestic one. Nevertheless, “mother-centeredness” was not only an effort to shape perceptions of motherhood according to traditional domestic values. It was also, I maintain, an attempt to maternalize society itself. This vision of a more maternal public sphere was promoted mainly by providers of social welfare, namely, doctors, social scientists, educators, and policy makers, as well as psychiatrists and psychoanalysts. From the late 1920s, more and more women and men perceived the crisis of modernity as a crisis of motherhood. They believed that many of the political, economical, and cultural catastrophes of the first half of the twentieth century were the inevitable tragic results of a lack of maternal values in the public sphere. Maternalizing society, therefore, was perceived as a possible cure for many pathologies of modernity, from drug addiction to totalitarian ideologies. Thus, as this study also demonstrates, a new maternal perspective had far-reaching consequences for both the private and public domains, and proved particularly influential in the borderline between them.

At the same time, however, the meaning of the “maternal” remained elusive—a personal and collective imaginary site onto which commentators could project the most diverse political fantasies, beliefs, or anxieties. Given

the many competing possibilities for the maternal, advocates of mother-centered policies sought to argue their particular cases. Many chose to adopt a new language that would enable them to translate their own understanding of motherhood into a significant political discourse. This new language of maternalism was psychoanalysis, and it was adopted in the interwar period and after the Second World War, precisely at the meeting point between maternalism and the building of the welfare state.

Rodney Lowe suggested defining “the welfare state as it existed in the 1940s . . . as a range of social and economic services through which the government became positively committed to the provision of welfare to all its citizens.”³⁶ We should, however, differentiate between Lowe’s minimalistic definition of the “welfare state” and “welfarism.” By welfarism I mean what sociologists Nikolas Rose and Peter Miller call “a ‘responsibilizing’ mode of government”³⁷—that is, a social contract that aims “to encourage national growth and wellbeing through the promotion of social responsibility and the mutuality of social risk.”³⁸ Since the end of the nineteenth century, the notion of “state insurance” (health insurance, pensions, and the like) embodied the principles of the new welfarist social contract: “Within the political rationality of welfarism, insurance constituted individuals as citizens bound into a system of solidarity and mutual inter-dependency.”³⁹

Welfarism evolved in the late nineteenth century in part as a political response driven by the middle and upper classes’ anxieties about what they perceived as the threatening scale of urban poverty. This problem was not necessarily articulated in social and economic terms, but rather as the process of “demoralization” among the casual poor.⁴⁰ Welfarist policy—that is, “proposals for old-age pensions, free education, free school meals, subsidized housing, and national insurance”⁴¹—became a dominant force in debates on social policies in Britain for many decades before the establishing of the post-Second World War welfare state.⁴² This was also when what some people called “maternal politics” (which is not necessarily “maternalism”) gained prominence among activists, politicians, and policy makers.⁴³

The Politics of Motherhood, 1880–1939

Comparing the history of the welfare state in France, Germany, Britain, and the United States, Koven and Michel conclude that although there were significant differences between the four countries, it can be said that in all of

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them, voluntary maternal associations were responsible for some of the main progressive policies for working and nonworking mothers, such as maternity leave, subsidized nurseries, and new work opportunities for mothers.⁴⁴ Maternalistic politics are also partially responsible for improving other social services, such as health care for children, and for creating new schemes to reduce infant mortality rates and consulting services for mothers, advising them on breastfeeding, hygiene, and other relevant topics. Programs of maternal childcare, which were first initiated and operated by voluntary associations of women, became models for state programs and official public policy. What started as private initiatives helping women in local communities were subsequently taken over by the state, leading to tremendous changes in the civil status of mothers. Many of these activists perceived motherhood as “empowering, not as a condition of dependence and weakness. They saw the home—domestic and maternal duties—as the locus of their power within the community.”⁴⁵

A main tendency in feminist historiography is to explore the ways in which feminist groups promoted the civil status of women and mothers by confronting the state and its regulations and institutions.⁴⁶ But Koven and Michel have shown the important achievements which were gained not through confrontation, but through collaboration. Maternalism always “extolled the private virtues of domesticity while simultaneously legitimating women’s public relationships to politics and the state, to community, workplace, and marketplace.”⁴⁷ The extent, however, to which “voluntarism” was influential, particularly in Britain, is still under debate. Jane Lewis, for example, argues that the British state circa 1880–1920 was more centralistic than assumed by Koven and Michel, and therefore voluntarism had no major effect on the building of the welfare state.⁴⁸ Indeed, what was seen by some as “maternalist politics” was considered by others as “state intervention.”

What social historians of Britain describe as “state intervention” in family life, especially among the working classes, can be traced back to the 1870 Elementary Education Act and the first Married Women’s Property Act. The latter act allowed women to own their earnings, but ideally only in cases where there was no male breadwinner around. Otherwise, working-class women were expected to stay at home, and even when they had to work to support their families, it had to be only a secondary priority. Allowing the exception (i.e., the mother being the family breadwinner in cases when

there are no better options) only helped to designate the then-new domestic normative demand of adopting a middle-class model of domesticity, in which the father is the breadwinner, children are at school, and the mother at home. State intervention was indeed about disseminating a very specific model of gender roles in an “ideal” family, but it was also about regulating many other aspects of everyday lives among the working classes: making sure that working-class children were sent to school (even when that meant an increase in poverty for the family, due to a real damage to family earnings); sending health visitors to inspect family and mainly children’s hygiene and physical conditions (even when these visits were very unwelcome to families and mothers); and providing school meals to children (even when mothers perceived it as an act that undermined the maternal and paternal role, namely the assumption that parents cannot provide a good enough home even when it comes to basic needs).⁴⁹ This nineteenth-century legacy of an “interventionist state” flourished even more in the interwar period. As Mark Mazower put it, “with the interventionist public sector came the rise of the professional social worker, the housing manager, the school health visitor, and the educational psychologist.”⁵⁰ A new social contract emerged: “the state was meddling in the most intimate matters of the private life, offering—it is true—a range of new benefits, but demanding in return adherence to an increasingly explicit model of sexual behaviour.”⁵¹

The maternal cause gained ground throughout the war, and moreover after the war, as the importance of mothers in maintaining modern civil society was acknowledged in increasingly wider circles. Yet it was precisely because, as historian Geoff Eley argues, maternalist politics “was the only game in town” for “reestablishing . . . women’s place in the home,” that policy makers of all sorts were determined not to leave it to feminists.⁵² The equation of motherhood and citizenship—promoted in Britain first by feminists such as Eleanor Rathbone—was now used by interwar male policy makers merely as rhetoric for restoring mothers to the household. As historian Sally Alexander points out, the socialist and labour movements were organized around the notion that the “individual subject was masculine and founded on the notion of independence through, and property in, labour.” Women who were not “wives and mothers” were considered “a problem associated with either their ‘sex’ or, worse, the threat of ‘cheap labour.’”⁵³

Another key issue that affected mothers was low birth rates. This topic became a main concern for interwar social scientists, physicians, and policy makers, who fueled collective fears about the ability of society to regenerate itself. In 1876 there were 36.3 births per 1,000 people of the population in Britain; in 1931 this number decreased to 15.8.⁵⁴ The main concern was about working-class mothers: between 1901 and 1931, the rate of working-class women who gave birth was cut in half.⁵⁵ However, a key reason for the low birth rate was a deliberate effort by women to regulate their fertility, either by abstinence, contraception, or abortion.⁵⁶ Alexander argues that interwar birth rates can serve as an indication of an intergenerational crisis between mothers and their daughters over the latter's refusal to accept their mothers as a feminine model. Many mothers lost their authority as providers of knowledge on issues of domesticity and sexuality, especially when in many places these issues were left unspoken. This was the daughters' "resistance to their mothers' lives, a recognition that if mothers had the knowledge that they the daughters wanted, it was not wanted in the way their mothers seemed to hold it."⁵⁷

Interwar feminism was oriented more on the working class than it had been before the First World War, with campaigns for equal pay, education for women, and improvement of life conditions for working-class women. But it was also preoccupied with questions about sexual difference and birth control. These tendencies often contradicted each other: some "feminists wanted to educate women in the workings of their bodies in order to protect them from venereal disease, from man's lust, from too many children. Others wanted to awaken women to the pleasure of sexual desire and love."⁵⁸

Maternalism and (Non-)Feminism

Interwar psychological and psychoanalytical discourses were imbued with strong anxieties about new forms of domestic life and new models of femininity. By the end of the 1920s, Carl Jung's writings on women and femininity, and especially his essay "Woman in Europe" (1927), gained some popularity in Britain.⁵⁹ In this controversial text, Jung argued that "there is no 'modern European woman' properly speaking,"⁶⁰ as "if she is married, she usually has to depend economically on her husband; if she is unmarried

and earning a living, she is working in some profession designed by a man.”⁶¹ As historian Luisa Passerini notes, “For Jung and some of his followers—such as Mary Esther Harding—women were at the core of the social and spiritual crisis in Europe, particularly those emancipated women at the forefront of the process of modernity who were undergoing a mental masculinisation.”⁶²

Other theorists who criticized modernity for degrading the maternal role did not do it necessarily from a feminist perspective, but as leverage for promoting their anti-modernist and very often anti-colonial perspectives. Interwar maternalist thinkers such as Robert Briffault, Bronisław Malinowski, and Ian Suttie (see Chapters 3 and 4) were not female feminists, but male scholars and public intellectuals who believed that many of the failures of modern society were due to its patriarchal structure. At the same time, they used idealized—and sometimes imaginary or indeed fantasized—perceptions of non-Western forms of motherhood both to criticize their own countries’ imperial policy and to blame Western motherhood for the interwar totalitarian crisis (i.e., the emergence of European fascism). These figures had little to contribute to real mothers in their own society, apart from preaching to them that they are not “good enough mothers” in comparison to their non-Western equivalents. By doing so, they no doubt joined a long tradition of “~~blaming mothers~~” for all sorts of political, social, and moral crises.⁶³ As Jacqueline Rose has pointed out recently, it is “because mothers are seen as our point of entry into the world, there is nothing easier than to make social deterioration look like something that it is the sacred duty of mothers to prevent—a type of socially upgraded version of the tendency in modern families to blame mothers for everything.”⁶⁴

In some respects, the maternalistic way of thinking grew even stronger after the Second World War, although developed by different people and for different goals. The state was now more sensitive to the material, social, and cultural interests of mothers—indeed, to some extent it aimed to become more “maternalistic.” Maternalism was no longer only the ideology of “feminists” or “radicals,” nor was it necessarily presented as a set of idealized images of “primitive” societies. It was now part of official discourses of the state itself. The ideological aspects of maternalism were now much more emphasized, since it was seen not only as a set of strategies for improving the living conditions of mothers, such as providing all of them and

their children with full health insurance by the National Health Service (NHS), but also as a set of values such as security, stability, and maturity. Many considered these values to be essentially “maternal,” and sought to promote them in various aspects of social life.⁶⁵ Psychoanalysis was to play a key role in this process; it provided the state with the vocabulary, theory, and set of practices which would enable the state to “maternalize” itself.

It should be emphasized that arguing that maternalism became important in the postwar years implies neither that the lives of mothers really improved during that period, nor the contrary. What is suggested here is that the understanding of the relationship between mothers and the state was redefined in a way that did not affect only the self-understanding of British mothers, but also the ways in which the state itself was conceived after the Second World War. The question was no longer how motherhood could be integrated into the postwar effort, but how to make the body politic of men and women in Britain after the war more “maternal,” as part of a new collectivist welfarist effort. The British psychoanalytic movement contributed much to the articulation of this question and provided a specific idiom for framing possible answers.

Psychoanalytic arguments were used to justify the restoration of traditional ideas of maternity after the Second World War, namely bringing mothers back home to their children. The best-known example here is the work of the psychoanalyst John Bowlby and the controversy over its “essentialist” assumptions about women. Bowlby argued that a separation of young children from their mother can cause great psychological and social damage. He therefore strongly advised that children be accompanied by their mothers at all times until the age of three.⁶⁶ Moreover, he made extensive use of arguments drawn from the then-new discipline of ethology, claiming that an ongoing attachment between mothers and their children is a “natural” form of motherhood.⁶⁷

In the 1970s, feminist critics, such as Juliet Mitchell, claimed that Bowlby biologized the maternal role and locked women into a traditional sphere of domesticity.⁶⁸ But not all feminists agreed that “Bowlbyism” had an exclusively negative impact on women, and some even argued that it had empowering dimensions.⁶⁹ The new maternal discourse, which Bowlby did so much to promote, had the potential for turning the relationship with mothers into a paradigm for more benign social relations in both the private and the public spheres. Indeed, as this book shows, thinking of maternal relationships as a less authoritarian or even a nonauthoritarian political model was

precisely what a new wave of postwar British psychoanalysts such as Michael Balint and Donald Winnicott tried to do.

The “Brief Life of Social Democracy in Britain” and Its Historiography

The late historian Tony Judt has offered the following reflection upon the British welfare state:

It is all too easy, looking back today upon the miscalculations of the first post-war reformers, to minimize and even dismiss their achievement. Within a few years many of the universal provisions of the NHS proved unsustainably expensive; the quality of the services provided has not been maintained across the years; and over time it has become clear that certain of the fundamental actuarial assumptions—including the optimistic prediction of permanent full employment—were short-sighted or worse. But anyone who grew up (like the present writer) in post-war Britain has good reason to be grateful for the Welfare State.⁷⁰

For other contemporary historians, however, the welfare state was mainly a disappointing project, with not much to be grateful about. It is not only that the “brief life of social democracy in Britain,”⁷¹ to quote historian James Vernon, did not manage to provide a real ~~human~~ yet-radical socialist alternative to Cold War communism, but also, as various leftist critics of the postwar Labour government have claimed, under the façade of a social-democratic program, post-1945 British governments promoted liberal consumerist policies rather than the expected progressive ones.⁷² In the 1970s and 1980s, historical discussions of the welfare state were focused largely around fierce arguments for and against the emergence of new neoliberal political forces (represented in Britain by Margaret Thatcher) and their attack on the postwar welfarist social policy. The debate over the welfare state was also a debate between the two big parties in Britain, and the consensus among historians that the parties represent opposite ideologies remained firm. But for historians in the last two decades, Left and Right no longer seem as far apart.⁷³ The neoliberal age did not begin in 1979, when Thatcher came to power, several of them argue retrospectively, but much earlier, when the postwar liberal economy emerged.⁷⁴

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Yet what is the evidence for the claim that the welfarist moment—if it was only a moment—was essentially problematic? A key premise of this argument is that the core program for the welfare state was devised under a bipartisan political “consensus” between the Labour and Conservative parties—a consensus that was practically achieved between 1944 and 1947.⁷⁵ Whether this was a rare moment of real ideological consensus (what Lowe calls a “historically unusual degree of agreement”⁷⁶) or only a reflection of common political interests (which should perhaps be regarded as a “compromise” rather than a “consensus”) is less important for our purposes. What is more important is that assuming such a “consensus” is one starting point for historians to show that in political terms, the welfare state was never a truly “radical” project and should not be considered a model for a successful twentieth-century social democracy.⁷⁷

A focus on the history of 1940s and 1950s domestic life has, in the last few decades, become paradigmatic in its highlighting of the nonprogressive features of the postwar welfare state. In her highly influential book, *Family, Dependence, and the Origins of the Welfare State: Britain and France, 1914–1945*, Susan Pedersen makes a strong case for characterizing “the evolution of British social policy as the articulation of a male breadwinner logics of welfare.”⁷⁸ According to this gendered line of thinking, women and children were not entitled to have any benefits (e.g., pensions, insurances, and the like) of the state in their own right, but only as dependent on the male “breadwinner.” Indeed, for some feminist critics, it is precisely the interwar and postwar welfarist politics that demonstrates why twentieth-century ~~Eu-~~
~~ropean~~ “welfarism” was always about building a “patriarchal welfare state,” to use Carole Pateman’s words:

As participants in the market, men could be seen as making a public contribution, and were in a position to be levied by the state to make a contribution more directly, that *entitled* them to the benefits of the welfare state. But how could women, dependents of men, whose legitimate “work” is held to be located in the private sphere, be citizens of the welfare state? What could, or did, women contribute? The paradoxical answer is that women contributed—welfare. The development of the welfare state has presupposed that certain aspects of welfare could and should continue to be provided by women (wives) in the home, and not primarily through public provision.⁷⁹

This “male breadwinner logics of welfare” remained the dominant one also in the post-1945 years. Denise Riley has argued that what was perceived by many as a progressive program providing welfare services for the whole society was actually only one manifestation of a wider social and cultural discourse that promoted nonfeminist domestic ideologies.⁸⁰ As will be discussed in Chapter 5, after the Second World War women were expected to stay at home with their children rather than do anything else. In fact, historian Sonya Rose has shown that this was expected from mothers even during the war, when many men were still at the front, and women had an important task in maintaining the war economy.⁸¹

However, *The Maternalists* will show that the new welfare state blurred the line between traditional categories of “private” and “public.” Even when there was a demand to keep mothers themselves out of the job market, in order to stay at home with their children, the state applied interventionist practices that, in some cases, undermined the relevance of these categories. Thus, mothers became the main negotiators between the household and the state agents—the social worker, the general practitioner (GP), the psychotherapist, the teacher. These professions were not new, of course, but under the welfare state they adopted a much more interventionist role in family life. Mothers were expected to act according to strict gender norms, based on the traditional binary of the private and the public domains. However, these two allegedly different spheres no longer functioned according to these strictly traditional lines, and thus destabilized perceptions of gender much more widely.

We have seen that some of the critique of the welfare state points to a substantial gap between welfarist rhetoric and the welfare state’s “real” aims. It argues, for example, that the forces that promoted a liberal consumerist society, one which included the guarantee of only some elements of social welfare, were stronger than any other; namely, that the more “radical,” left-wing political forces were left behind. However, a political order’s unwillingness to deliver on its promises, or its double standards, should be neither historians’ only criterion for assessing the ideological components of societies, nor necessarily their main focus. Thus, some feminist historiography suggests that it would be useful to draw conclusions about the domestic ideology of the welfare state by looking at welfare’s “real” subjective products—that is, the personal experiences of people who lived at the heyday of this project. Accordingly, oral historians within the feminist tradition have contributed a great deal to our understanding of twentieth-century motherhood as a field of study that needs to be measured by subjective criteria.⁸²

The Maternalists takes a different route, though in many ways complementary one, to that taken by oral historians. Rather than asking what it was like to be a mother under a state driven by a welfarist ideology, this book examines public perceptions of motherhood and the nature of “maternal discourse” itself. Here I follow literary scholar Elissa Marder, who suggested that we should not “confuse unconscious representations of feminine figures with actual women.” As Marder suggests—and as this study demonstrates—“there may indeed be a relationship between unconscious representations of feminine figures and the place assigned to women in social and political life, but that relationship is neither transparent nor mimetic.”⁸³ Evidently, such collective imagination of the “maternal” and its “real” nature was often unrepresentative of mothers’ actual needs and desires, and instead represented collective fantasies—very often male fantasies—about what motherhood should be. But such public perceptions still have important political and personal implications, and understanding this “structure of feeling” is therefore necessary if we are to have a better picture of the history of motherhood and the welfare state. As Williams suggested, “the peculiar location of a structure of feeling is the endless comparison that must occur in the process of consciousness between the articulated and the lived.”⁸⁴ In that sense, rather than “motherhood,” or indeed the lived experience of real mothers, the maternal is a structure of feeling, which takes different forms in different historical times and places.

Like other modern ideologies, postwar welfarism had a specific ~~civil discourse~~ and it aimed to have British citizens speak it fluently. Historians such as Sally Alexander, Angela Davis, and Katharina Rowold have explored the gap between the ideological language of the state and the ways in which people actually used welfarist terms in their personal lives. But to recognize such a gap is not to deny that such ideological vocabulary played an important role. Indeed, we have good evidence that it did. For Steedman, as for Tony Judt and millions of other Britons, the welfare state was neither a successful political project nor a failure: it was a largely unspoken context within which their childhoods occurred. The British welfare state was—for them—simply the world they knew and grew up in. Steedman gave voice to a new generation of historians who wished to analyze nostalgic dimensions of our perceptions of the post-1945 period and provide a more nuanced cultural history of this period.⁸⁵ It may be more difficult today to look back and press the politics of this period into a simple division of “Right” and “Left.” But ideological lines did exist all the same, and they should be portrayed

according to new criteria, if the old ones are no longer suitable. Thus, I suggest we can think of psychoanalysis not only as a psychological theory and practice, but also as a mediator between the “subjective” and the “ideological” in order to reformulate the description of mid-century political thought in Britain.

The Early History of the British Psychoanalytical Movement

From its early days, the British psychoanalytical movement took a different route from other psychoanalytical movements in Europe and the United States. Firstly, in Britain, psychoanalytic ideas appeared later than in some other parts of Europe. *The Interpretation of Dreams* was translated into English as late as 1913, thirteen years after it was published in German.⁸⁶ This was a year after Ernest Jones published his *Papers on Psycho-Analysis*, considered the first book on psychoanalysis in English.⁸⁷ Thus, psychoanalysis only gained traction in Britain about a decade after it had emerged in Austria, Germany, Switzerland, and Hungary.⁸⁸

Secondly, although the first psychoanalysts in Britain were doctors, much of the interest in psychoanalytic ideas came from lay people—literary scholars, educators, clergymen, natural scientists, and philosophers. Whether amateurs or experts, they adopted only selected Freudian ideas, often the ones which were congruent with their personal morality. It was mainly the role of sexuality that was rejected by some of Sigmund Freud’s lay reviewers in the popular press until the mid-1920s.⁸⁹

Psychoanalysis was also promoted in Britain by individual spiritualists, mystics, and occultists. While some of them belonged to elite and liberal groups that were preoccupied with what one might call, by way of shorthand, the *fin de siècle* mystical revival, others were much more related to old Christian traditions of spiritualism; and while the former were the first supporters of Freud in Britain (mainly the Society for Psychological Research, or SPR, in Cambridge, which Freud himself joined in 1911 as a corresponding member), the latter became part of a wider opposition to the Freudian ideas, even if by doing so they still contributed to the popularization of Freud in Britain.⁹⁰ Rather than rejecting Freudianism entirely, many of them preferred to study the work of Carl Jung, whom they perceived as much more appropriate to their occultist perspective, as well as more optimistic regarding the real character of the unconscious.⁹¹ His ideas were also more widely

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accepted because they could be more easily interpreted as not necessarily related to sexuality.⁹²

By the beginning of the First World War, interest in psychoanalysis gradually shifted to more literary, scientific, and modernist-secular circles. It was mainly figures from Cambridge University and the Bloomsbury group who were dominant in the proliferation of Freudian thought among the cultural elite in the interwar period.⁹³ Unlike former British readers of Freud, they did not consider his sexual theories inappropriate, and some of them even went to Vienna to be analyzed directly by him. Among them were Alix and James Strachey (the main translators of Freud's work into English), John Rickman, and Joan Riviere, but also figures such as the famous botanist A. G. Tansley, the scientist J. D. Bernal, and the philosopher and mathematician Frank Ramsey.⁹⁴

Finally, a difference between the history of psychoanalysis in Britain and in continental Europe is apparent in relation to the "Jewish question." In short, this question was much less prominent in psychoanalytical discussions in Britain. This is neither to say that Jews were not part of the history of psychoanalysis in Britain, nor to deny the presence of some anti-Jewish commentary within this specific national history. Indeed, some of the first prominent leaders of the British movement, such as David Eder and Barbara Low, were Jewish, not to mention some later influential émigrés such as Melanie Klein and Anna Freud. But others, like James Strachey, Susan Isaacs, James and Edward Glover, Joan Riviere, and Ernest Jones, came from Christian middle-class families in England, Scotland, and Wales. In contrast to Vienna, Berlin, and Budapest, in London Jews were not the dominant group within psychoanalytic circles.

It is true that Freud's Jewishness did not increase his popularity among English readers, who held it against him implicitly and sometimes explicitly. This was mainly true during the First World War, when it was not always clear whether negative responses to psychoanalysis were motivated by anti-Semitic views, or whether it was the denunciation of everything that was perceived as German that led many to reject Freudian ideas.⁹⁵ In many cases, anti-Germanism and anti-Semitism were perceived as one and the same, and this was the reason for what one historian describes as a "xenophobic atmosphere from which Jews suffered disproportionately."⁹⁶ Moreover, a few major figures in British psychoanalysis, such as James and Alix Strachey and Ernest Jones, were, over the years, accused of anti-Semitism.⁹⁷

Nevertheless, it seems that the question of whether psychoanalysis was a “Jewish science” was never part of the mainstream psychoanalytic discourse in Britain, as it was on the Continent.⁹⁸ As Graham Richards has shown, psychoanalysis in the interwar period must be understood in the context of the emergence of what was called the *new psychology*, a term that was used in Britain “as an umbrella term for the whole range of psychological work” which had emerged in the 1920s.⁹⁹ Richards sees the work of William McDougall, W. H. R. Rivers, Wilfred Trotter, Émile Coué, Pierre Janet, Freud, and Jung as being particularly important in the development of the new psychology. The emergence of this new, more eclectic psychological movement was seen as an opportunity by the church, which had been suffering from a decline in its power since the late nineteenth century.¹⁰⁰ Some Christian psychologists wanted to emphasize the therapeutic aspects of religion, thereby showing what they considered the pragmatic and nondogmatic essence of Christianity. Thus, many Christians considered psychoanalysis another legitimate tool, even if a slightly more radical one, in creating a new type of psychologically oriented Christianity. Indeed, many of the practicing psychologists who were influenced by psychoanalysis in Britain in that period were devoted Christians who wished to show that psychology and religion are not contradictory and in fact have much in common.

The reasons, then, for the acceptance of some psychoanalytic notions and for the rejection of others were mainly determined by local motivations. The first adherents of psychoanalysis in Britain—spiritualistic movements before the First World War, prominent scientists from Cambridge in the interwar period, bohemians from the Bloomsbury group during the 1920s, professional psychoanalysts, and other “new psychologists”—all promoted a psychoanalytic theory and practice for intellectual and cultural reasons unrelated to the history of continental psychoanalysis.

This is not to say, however, that European psychoanalysis did not play any role in the making of the British psychoanalytic movement. To the contrary, there are many other aspects in which what was known as the ~~post-World War II~~ “British school of psychoanalysis”¹⁰¹ was deeply rooted in other traditions of thought, taken from continental psychoanalysis, and especially from the Budapest school. More than any other individual in the history of psychoanalysis in Britain, the Hungarian psychoanalyst Sandor Ferenczi (1873–1933) and his former analysand Melanie Klein (1882–1960) provided the British school with its maternal orientation, which characterized it for most of the twentieth century. The reception of Kleinian work in

Britain is well documented.¹⁰² However, the centrality of Ferenczi in the intellectual and cultural history of British psychoanalysis has only recently been researched.¹⁰³

Ferenczi and the Maternal Shift in Psychoanalysis

The years 1923–24, as several psychoanalytic scholars have suggested, were particularly significant in the history of psychoanalytic theory. Peter Rudnytsky posits that four books—all published in these two years—constituted a “collective counterweight” to Freud’s book *The Ego and the Id*. These texts are: Otto Rank’s *The Trauma of Birth*, Georg Groddeck’s *Book of the It*, Ferenczi and Rank’s *The Development of Psycho-Analysis*, and Ferenczi’s *Thalassa: A Theory of Genitality*.¹⁰⁴ This group of five works would together give rise to the two major psychoanalytic schools of the following decades—Freudian “ego psychology” and what Rudnytsky called the “relational tradition.”¹⁰⁵ It was particularly Rank’s theory regarding the trauma of birth as the most fundamental event in one’s psyche that initiated what Antal Bokay calls the “1924 Rank debates,”¹⁰⁶ which proved to be a watershed in the history of psychoanalysis. Freud not only strongly dismissed Rank’s theory for what he perceived as its undermining of the Oedipus complex, but also stripped Rank of all his official titles (directorship of the Internationaler Psychoanalytischer Verlag and editorship of the *Internationale Zeitschrift für Psychoanalyse*).

The debate between Rank and Freud was not entirely different from the one Freud would have with Ferenczi ten years later. Freud’s main disagreements with Rank in 1924 and with Ferenczi in the early 1930s were both over the real meaning of *fantasy*. While Ferenczi and Rank argued that many psychosomatic phenomena such as hysteria and regression are enactments of real pieces of experience from one’s past, Freud insisted that these perceptions are simply the same mistakes that he himself had made in the late 1890s, when he developed his “seduction theory” only to abandon it for good in 1897. Rank and Ferenczi insisted to the contrary that symptoms are not only a manifestation of “fantasized” life but also realizations of desired, as well as traumatic, events from the past.¹⁰⁷

But the most important consequence of the 1924 debates was that instead of the Freudian focus on the paternal role in the development of the psyche, the mother was now positioned as the origin of all mental capacities.

The understanding that the initial maternal bond with the child is as crucial as the later paternal one was not gained by Ferenczi and Rank alone. A few psychoanalysts after the First World War, such as Karl Abraham, Karen Horney, and Helen Deutsch, described the Freudian understanding of the mother as insufficient and tried to suggest alternative accounts of what happens in the pre-Oedipal phases.¹⁰⁸ Freud himself was not unaware of these trends. In a series of publications between 1925 and 1933, he significantly revised his earlier ideas on sexuality in general, and on femininity in particular.¹⁰⁹ The major change in Freud's theory was his new observation that girls, like boys, are initially attached to their mothers, and only in a later phase, after acknowledging their lack of a penis, shift their libidinal attachment toward the father. The implication was that boys and girls experience a completely different Oedipus complex: boys are attached to the opposite sex from the beginning and normally are not socially required to change their object of desire, whereas girls need to do so.

Freud was indeed a leading figure in interwar debates over the nature of female sexuality, but even he was not satisfied with his own explanations of the "riddle of femininity."¹¹⁰ It was left to his successors throughout the twentieth century to provide revised theories on female sexuality and femininity. Among Central European psychoanalysts, it was Ferenczi who insisted that psychoanalysis needed a totally new maternal agenda. He was also the one who suggested some clinical directions for this mission. Ferenczi's regressive approach—his insistence that the traumatic past must be reenacted in order to be worked through—enabled him to argue that he had new epistemological access into patients' earliest pre-Oedipal phases, and to locate the source of many traumatic situations in the initial bond between the mother and her child. This understanding was taken most seriously by the British school of psychoanalysis in the decades following Ferenczi's death.

Ferenczi himself expressed his deep affinity with his English readers: Anglo-Saxon readers, he wrote in 1926, "with their broad-mindedness . . . often strive to view such opinions as mine quite without prejudice, whereas elsewhere these are turned down *a limine* on account of their novelty or their boldness."¹¹¹ The fundamental influence of Ferenczi on British psychoanalysis is well demonstrated in the recently published correspondence between him and Ernest Jones.¹¹² By the mid-1920s, Ferenczi had become the most popular analyst for English people who wanted to be trained on the Continent. Jones referred many of them to Freud, but Freud himself, who was

already unhealthy, referred some of them to Ferenczi. In fact, by the late 1920s, many senior British psychoanalysts were trained by Ferenczi, including Jones, Klein, Rickman, David Eder, Estelle Cole, and Samuel William Inman.

Ferenczi was known after the First World War in the international psychoanalytic community as the most creative and pioneering of all Freud's followers, especially in Britain.¹¹³ However, in the last five years of his life he had a major dispute with Freud, and after his death all interest in his clinical work and theoretical ideas subsided for many decades. Moreover, many believed (after reading Jones's accusations in his biography of Freud) that Ferenczi had lost his mind toward the end of his life.¹¹⁴ Since the 1980s, however, the psychoanalytic community has rediscovered Ferenczi's writings.¹¹⁵ Feminists especially have valued him because of his innovative approach to the treatment of sexual abuse and have reevaluated his objections to Freud's approach to this subject.¹¹⁶ Trauma scholars have also shown a new interest in him.¹¹⁷ Most importantly for our purposes, in the last decades a case has been made for his special place as a pioneer in studying the maternal role in psychoanalytic theory.

Ferenczi was arguably the first to claim that the analyst could not be the objective scientist that Freud wished him to be, and that his or her own subjectivity influences the treatment process. The Freudian approach, argued Ferenczi, ignored this mutual dimension. Consequently, in Ferenczi's view, Freudian analysis, in both the diagnostic and prognostic phases, was the product of subjective impressions and a reality constructed by the psychoanalyst on the basis of status and gender. Sexual trauma served as a particularly pertinent example of the alleged psychoanalytic blindness of Freudian analysts, some of whom refused to acknowledge the real extent of actual abuse.¹¹⁸ Ferenczi's determination to confirm stories of sexual abuse in the family among middle-class women, which at the time were perceived as Oedipal fantasies and treated accordingly, was part of his broader intention to revise the power relations between analysts and their patients. Between 1919 and 1932, Ferenczi conducted his most important experiments, with the help of local patients and students from all over Europe and the United States. These led him to various clinical innovations, including a revision of the use of hypnosis in psychoanalytic treatment, the development of his "active technique" for handling uncooperative patients, an attempt to conduct mutual treatment between analysts and patients, and to develop pioneering approaches in the field of domestic sexual abuse.¹¹⁹

Ferenczi, like many of his colleagues in the Budapest school, thought that the real challenge of psychoanalysis was to create a new kind of psychosomatic medicine that would better understand the interface between the mind and the body. Members of the Budapest school believed that some European psychoanalysts gave priority to theoretical issues over the analytic experience itself, focusing too much on interpretation, thus causing an unnecessary intellectualization of the treatment.¹²⁰ Ferenczi's resistance to the intellectualization of the analytic process was particularly relevant to his innovative approach to trauma. In treating patients who had previously suffered traumatic events, he maintained, it is neither enough to remember what happened, nor to know the event's effects on the present: there must be a regressive emotional reenactment of the trauma, which will include the patient's body as well as his or her mind. Ferenczi's regressive approach was one of the main points of disagreement between him and Freud. The latter was particularly worried that by encouraging patients to reenact their original traumatic events in the consulting room, the analyst might fall into what Freud thought of as the trap of hypnosis and become a hypnotist rather than a psychoanalyst.¹²¹

Ferenczi, however, was not only less cautious about inducing a state of regression in the patient, but believed that regression was the core of the treatment. He was fully aware of the paradoxical essence of regression, namely that it is both the illness and its cure: severe mental conditions create severe regressive states, which can be treated only through regression itself. Only regression, he thought, could enable the patient to enact the initial traumatic events, and so emancipate him or her from the ongoing effects of the traumatic reality: "[analysis] must make possible for the patient, morally and physically, the *utmost regression*, without shame!"¹²² Ferenczi's approach to regression, as to other clinical issues, had a substantial influence on the history of British psychoanalysis and its ongoing preoccupation with the maternal.

Ferenczi himself is not a central figure in this study, but the Ferenczian tradition certainly is. In terms of theory, the British school of psychoanalysis emerged from the integration of local traditions of psychological thinking with specific notions adopted from continental psychoanalysis, in which the interwar Budapest school played a central role. This "knowledge in transit," to use historian of science James Secord's useful notion, was not only a transition of floating ideas from one country to another, but also a product of the ways in which people from one historical setting contributed to the

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circulation of knowledge in another.¹²³ In this sense, my aim will not be to show any indirect “influence” of Ferenczi himself on British politics and culture—an influence which would be difficult to demonstrate—but rather to suggest the presence of some sort of Ferenczianism in shaping attitudes to domestic life in interwar and postwar Britain. A large part of this book is concerned with a period in which Ferenczi was no longer alive. Moreover, as we have seen, mainstream circles in all of the main psychoanalytic centers rejected his heritage by the 1930s. This study, however, will show that a very specific Ferenczian language survived, albeit unacknowledged, even “undercover,” at the heart of the very psychoanalytic discourses that tried to repress it. Indeed, many in the British psychoanalytic movement before and after the Second World War spoke “Ferenczian” very fluently.

Outlines and Arguments

Through a close examination of the debate between Anna Freud and Klein, Chapter 1 locates the emergence of child psychoanalysis in the 1920s as a major historical point in the twentieth-century history of childhood. The main issues at stake, I will argue, were not only the aims of child psychoanalysis as a profession, but also the correct perspective for understanding childhood itself. Central European psychoanalysis had roots in a nineteenth-century evolutionary tradition, which perceived childhood as a set of phases in a normative life cycle—that is, as part of the developmental process of becoming an adult. It is true that Freud and Ferenczi—and subsequently Anna Freud—challenged the idea that, in mental terms, people’s life cycles are linear. Dreams, mental regressions, hysteria, the unconscious as a whole—all proved, for them, the opposite. But they never abandoned the developmental perspective and always perceived the psyche as a *diachronic* entity.

Assuming childhood as a phase in a normative life cycle means also accepting an inevitable gap of authority and power relations between children and adults. Thus, Anna Freud was a loyal representative of Central European psychoanalysis when she argued that, for the child patient, the psychoanalyst is first and foremost an adult and is inevitably perceived by the child as an educational agent. In other words, any adult is a “superegoistic” figure for the child, whether the adult likes it or not; the child’s mind is a site of authoritarian “intervention” by adults, either the parents or any other educational agent of society.

Klein challenged the developmental tradition by arguing that some major mental “positions” of the infant are not essentially different from mental “positions” of the adult. No doubt, people develop and grow up, but at the same time, she argued, the psyche is not a developmental entity. There are no mental progressions and regressions: everything is already there from early life. Understanding one’s mind means understanding it *synchronically* rather than *diachronically*. Moreover, because some psychical elements are not developmental, the child’s mind and the adult’s mind are similar in many respects, and therefore child psychoanalysis and adult psychoanalysis are not as different as it might be thought. A further implication of this theory for Klein was that child psychoanalysis is by no means part of an educational process. The role of the psychoanalyst, Klein thought, is to *treat* his or her child patient—as he or she would if the patient were an adult—and not to induce pedagogical norms in the consulting room.

There was, however, one point on which Ferenczi, Anna Freud, and Klein agreed, namely that the child encounters morality much earlier than the Oedipal phase, which Freud had imagined reaching its apogee for the child between the ages of three and five years. Anna Freud and Klein adopted Ferenczi’s idea of a “sphincter-morality,” a forerunner of the superego, which takes hold in the child’s mind in the pre-Oedipal phases, when the dominant figure for the child is the mother. Thus, we can see that after the First World War, the focus in psychoanalytic discourse shifted. In short, the mother was placed clearly as the major figure in the psychic development of the child. This was apparent in most psychoanalytic schools: all agreed that the most formative stages occur during early life, when the bond of the infant to his or her mother is closest.

At the center of the second chapter stands the educationalist and psychoanalyst Susan Isaacs (1885–1948). She is mainly known among educationalists as the charismatic manager of the 1920s Malting House School—one of the notable experiments in the history of progressive education—as well as one of the leaders of the London Institute of Education. In the late 1920s she also became a popular “agony aunt” in childcare journals. At the same time, in her role as psychoanalyst, she was a prominent theoretician and one of Klein’s closest colleagues.¹²⁴ This chapter, however, will mainly focus on a relatively neglected aspect of her work: the anti-colonial perspective of her critique of developmental psychology, and specifically of Jean Piaget. She thought that Piaget was part of a much wider way of thinking, which drew heavily on late nineteenth-century colonial anthropology and its fundamental

assumption that children and “savages” are similar in their “primitive” thinking. By reading Isaacs’s critique—and by placing it in the context of wider anti-colonial attitudes, evident in the thought of various intellectuals based in interwar Bloomsbury—this chapter explores the political dimension of her anti-developmental argument.

Isaacs will be only one of several figures to be discussed here for their anti-colonial views. The next two chapters show other attempts, from within the psychoanalytic community, to denounce the usage in the human sciences of the category of the “primitive” to indicate an inferior evolutionary state. Despite the differences between these thinkers—such as Geza Róheim and Ian Suttie—they shared some common ground. Most important for our purpose is their use of the new psychoanalytic literature on the maternal role—namely, the works of Ferenczi and Klein—to show an explicit link between the patriarchal structure of Western societies and their imperialistic policies.

However, critics of the primitive as a category did not necessarily object to the concept altogether but sometimes tried to change its normative usage: rather than thinking of “primitive” societies as inferior, some researchers attempted to idealize them. The third chapter concentrates on the ways in which interwar psychoanalysts applied the category of the primitive to motherhood (i.e., “primitive motherhood”) in order to criticize the Western world and its own models of mothering. At the center of the chapter is the debate between the Polish-born London School of Economics (LSE) anthropologist Bronisław Malinowski and the psychoanalytic community, represented mainly by Jones and Róheim. Without dismissing psychoanalysis as a whole, Malinowski’s main claim was that his research on matrilineal “primitive” societies shows that in them, the Oedipus complex is not a relevant category. Thus, he opposed the Freudian stance that psychoanalytic findings are universally valid. To refute Malinowski’s highly popular argument, Róheim conducted his own field research among central Australian matrilineal societies in the late 1920s. Yet beneath the surface of the controversies between the two, one may find a strong agreement: both were convinced that pre-Oedipal relationships between mothers and their children are the fundamental factor in the development of the child’s morality—that is, the child’s superego. “Primitive” motherhood is benevolent and generous—in contrast to Western motherhood, which has some essentially sadistic elements—and therefore, they thought, totalitarian societies cannot be found among primitives. This 1930s anthropological stance on motherhood

joined other popular perceptions that considered motherhood as the key to the long-term solution of social, cultural, and political problems. At the same time, however, mothers were perceived as responsible for creating these problems in the first place, and thus, this discourse had strong non-feminist, even misogynistic, dimensions.

Chapter 4 will focus on the interwar Tavistock psychiatrist Ian Suttie, who was known in the psychoanalytical community as one of Freud's harshest critics. In his writings, Suttie used a wide range of historical, ethnological, and folkloristic literature, mainly from premodern, allegedly matriarchal cultures, to show that what Freud portrayed as essentially and naturally Oedipal is in fact a specific historical manifestation of patriarchy, which characterized the modern period. Our patriarchal society, he and his wife, Jane Suttie, wrote, is characterized by an "Oedipus culture . . . [that] manifests itself in anti-feminism, anti-sexuality, a neurotic dread of mother-incest and of mother-worship, and therefore in propitiatory father-worship."¹²⁵ All that, he believed, is a result of the dismissal of the primal bond of the mother with her baby in favor of a culture that glorifies a "jealous father." In his idealization of a premodern matriarchal past, Suttie sought ways to restore the primal bond with the mother, which according to him, patriarchal modernity had lost. Thus, Suttie joined other 1930s social thinkers who attempted to rehabilitate collective memories of allegedly imaginary matriarchal times in history—here, again, in light of rising totalitarian regimes in Europe.

Suttie was also a main representative of what one may define as the "regressive tradition" in the "psy" disciplines. This strand of thought was particularly strong in the history of psychoanalysis, in which regression was always a core concept. For Ferenczi and his followers—Suttie indeed one of them—*regression* had a very specific meaning: it came to express one's mental tendency to reach backward to the very initial bond with the mother. According to this line of thought, since the desire to restore this very early relationship is impossible to fulfill, people compensate with a wide range of regressive behavior (dreams, hallucinations, déjà vu, hysteria, and so on). Suttie thought that in matriarchal societies, many of these regressive phenomena used to be considered legitimate and natural. However, in modern patriarchal orders, as the primal bond with the mother is culturally dismissed, regressive tendencies are seen by society as belonging solely to a clinical discourse, and indeed eventually become clinical matters. Suttie's attempt to redefine regression as a legitimate and necessary phenomenon—for the individual and society as a whole—made him a precursor of postwar

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psychoanalytic thinkers such as Donald Winnicott and Michael Balint: the notion of regression was central to their demand to allow an increased maternal presence in the public sphere.¹²⁶

The last two chapters are devoted, respectively, to Winnicott and Balint. Both felt strongly that there was an urgent need to maternalize the British public sphere in order to avoid another totalitarian crisis like the one experienced in the 1930s and 1940s in Europe. They believed that maternalizing society meant making more room for regressive behavior in the private and public domains—an allowance that is crucial for developing a more mature personality. The “mature” mind of citizens was perceived as the key to creating a real democratic society. At the same time, both perceived the state as having an interventionist role, similar to the one parents must have.

Reading Winnicott’s case studies, and case studies under his supervision, demonstrates how engaged he was in this project of creating a new social-democratic society, which according to him would inevitably be a more maternal one. These cases reveal, however, another effect of the postwar maternal discourse: in many of them, perhaps for the first time in the history of psychoanalysis, the father figure is absent from the clinical picture. In some cases discussed in this chapter, fathers are neither a key figure in their child’s development nor the cause of a damaging patriarchal maldevelopment (as has been suggested by 1930s anthropologists, for example)—they are simply not taken into account.

The final chapter focuses on the post-1945 work of Michael Balint, Ferenczi’s most remarkable pupil and successor, who escaped from Budapest to London in 1939 and became an eminent figure in postwar British psychoanalysis. Balint was an enthusiastic follower of Ferenczi’s regressive approaches: he believed that regressive behavior is the core of the treatment and should be encouraged by the therapist, especially with severely traumatized patients. Balint did not confine his thinking about regression to the private clinic but thought that this concept could be widely used in other social domains such as family therapy, in the study of delinquency, and above all in general practice.

In the early 1950s, he established, together with his third wife, Enid, the first Balint group. Drawing on their psychoanalytic knowledge and vision, they sought to create a peer group where GPs would be able to discuss psychosocial dimensions of their work with patients. The Balints provided doctors with a new language to think about the ways in which an unconscious role playing between them and their patients takes place—especially when patients with no access to other psychotherapeutic forms of treatment seek help. Here

in the GP's consulting room, too, maternal relationships served as a paradigm for benign and less authoritarian relationships at large. According to the Balintian approach, this maternal relationship should serve as a model for treatment. Indeed, I maintain that Balint's main argument was that the doctors—most of whom were men—should learn about and then seek to assimilate and deploy maternal capacities in their work. Thus, the Balint movement followed the line of the new welfarist ideology in post-1945 Britain of the state as a provider of maternal capacities, especially to people who had been deprived of good parenting in the first place and developed certain kinds of regressive needs.

Drawing on new archival sources, this chapter will also try to answer the question of why GPs, who for many decades had not necessarily shown any marked interest in psychological approaches, were so attracted by ideas that were heavily psychoanalytically based. I will suggest that by drawing the GPs closer to a flourishing psychosocial way of thinking, Balint offered them both a platform for improving their professional status in the new age of the NHS, as well as a new ethics, which they felt their profession lacked after the Second World War. Thus, as in other cases presented in this book, the story of the Balint movement is also the story of Britons before and after the Second World War who became highly interested in what psychoanalysis had to offer, not only because of the discipline's psychological innovations, but also for its hidden promise of providing a new set of private and public values, namely, what they portrayed as a maternal ethics.

CHAPTER 1

The “Sphincter-Morality” and Beyond: The Concept of Childhood in Interwar Psychoanalysis

For many years there has been a rather special interest taken in the problems of childhood in London, perhaps more than elsewhere.

—Ernest Jones to Sigmund Freud, 30 September 1927

Childhood as it has been culturally described is always about that which is temporary and impermanent, always describes a loss in adult life, a state that is recognized too late. Children are quite precisely a physiological chronology, a *history*, as they make their way through the stages of growth.

—Carolyn Steedman, 1992

Sigmund Freud was the first to provide psychoanalytic treatment to a child, by giving the father of “little Hans” instructions on how to analyze him. This analysis gave Freud an opportunity to examine a clinical situation in which “the authority of a father and of a physician were united in a single person.”¹ Freud, however, was ambivalent about the possibility of integrating child psychoanalysis and education into a single discipline and thought this vision problematic. In one of his later writings, for instance, he said that “the analysis of teachers and educators seems to be a more efficacious prophylactic measure than the analysis of children themselves.”² He also disagreed with the view, advocated by Klein, that it is possible to analyze children as if they were adults, without bearing in mind any sort of educational aims. Thus, for example, in February 1928 he wrote to Ernest Jones: “Your

requirement ‘that the analysis of children be a real one, quite independent of any educative measures,’ seems to me just as unfounded in theory as inappropriate in reality.”³

Freud’s uncertainty regarding the role of education in child psychoanalysis represents a much wider confusion about this question, especially in the interwar period, when child psychoanalysis was still a new discipline. In fact, by the late 1920s, the debate about the usage of child psychoanalysis as an educational tool divided European psychoanalysis into two main camps: one led by Klein and the other by Freud’s younger daughter, Anna.⁴ However, assessing the similarities and differences between the two women is not the goal of this chapter. Rather than adding new information to this well documented dispute, I would like to locate it in a wider intellectual context and to argue that in addition to their different approaches to child psychoanalysis, they also suggested two different ways of thinking about childhood as such in the period after the First World War.⁵

In this debate, Anna Freud represented not only her father, but the entire central European psychoanalytic tradition, which held a developmental perception of childhood. Although central European psychoanalytic theory was revolutionary in many respects, it offered, like many other modern psychologies, a developmental description of the mental process all humans undergo from infancy to adulthood. By contrast, Klein and her followers in Britain argued that there may be important differences between children and adults in terms of life experience, but their psyche functions fundamentally according to the same rules and in the same way. By describing people’s mental lives as a set of “positions” (more on this in due course) rather than a series of chronological “phases,” Klein challenged not only some basic principles in Freudian psychoanalysis, but also the popular perception of childhood as a series of psychological and physiological phases in the process of becoming a mature adult. In doing so, Klein suggested a new approach to the understanding of “growth”—one of the principle subjects of study of the natural sciences in the nineteenth century.

In this chapter I will concentrate on Ferenczi as the other representative—with Anna Freud—of continental psychoanalysis in the debate with Klein in the 1920s.⁶ Although Ferenczi does not entirely differ from Freud in his understanding of childhood as a chronological-developmental process, Freud’s interest in child psychoanalysis was limited mainly to his daughter’s work and did not address the wider implications of this new subdiscipline. For Ferenczi, by contrast, child psychoanalysis was a major subject of interest,

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although he himself treated only adults. This field emerged at the same time that Ferenczi published his formative works on regression, and his regressive methods developed also as part of his efforts to understand the repercussions of this new subdiscipline on the older discipline, that of treating adult patients. Ferenczi saw psychoanalytic treatment as an inherently regressive procedure, because he believed that it could enable the patient to reenact “traumatic pasts,” thereby helping him or her to mitigate their damaging effect in the present. For regression to happen, however, one needs a past to go back to one’s childhood. Ferenczi’s perception of regression, then, did not go beyond the understanding of childhood as a chronological-developmental process, and he—like most central European psychoanalysts—worked within this psychological tradition.

Klein significantly challenged the Freudian understanding of childhood by proposing—although without using these terms—to concentrate on the *synchronic* and timeless elements in the structures of children’s and adults’ minds, rather than on the *diachronic* perspective that dominated the developmental way of thinking.⁷ This distinction between synchronic and diachronic structures—so central in twentieth-century structuralism and post-structuralism—might be useful for understanding the debate between Klein and continental psychoanalysis as an argument about different perceptions of temporality. This binary opposition can be traced back to the linguistic theory of Ferdinand de Saussure (1857–1913). In Saussurean terms, to know the synchronic aspects of a linguistic system is to know it “in a particular state, without reference to time,” while the study of the diachronic aspects of a linguistic system is the “study of its evolution in time.”⁸ As Jonathan Culler argues, although synchronic and diachronic explanations are different aspects of the same phenomenon, they are also “facts of a different order, with different conditions of existence.”⁹ This claim is also true for Klein, who never denied the existence of developmental psychology but preferred to concentrate on studying the structural elements common to people at all ages and phases.¹⁰

In theoretical terms, the general attempt to define the then newly introduced notion of the superego stands at the center of the interwar debate between continental psychoanalysts, and Klein and her new English followers. However, in contrast to the predominant view among psychoanalytic scholars, I claim that the argument was not necessarily over the exact stage at which this entity is constituted in the child’s mind (Freudians believed that it does not occur before the Oedipus complex, whereas Kleinians believed

that it is formed in the early relationship with the mother), but on the meaning of the gap it creates between adulthood and childhood. Both Anna Freud and Klein accepted Ferenczi’s suggestion that there is a pre-Oedipal stage, the *sphincter-morality*, which serves as a forerunner to the superego, and hence agreed that superegoistic elements exist in the child’s psyche before the Oedipus complex. But while Ferenczi and Anna Freud thought of this stage as a step toward more advanced phases in the child’s development, Klein thought of it as *synchronic* mental state that, to some extent, stays with us.

As Anna Freud and Ferenczi worked within the developmental tradition, they both saw an inevitable chronological gap between adults and children—a gap that violently shapes the power relations between them. The clinical implication was that some sort of psychological intervention in the treatment room was unavoidable. For Ferenczi, who treated adult patients, this intervention took the form of regressive treatments, which he thought could help some patients undergo a process of reeducation in order to constitute a less severe superego than the one that was designed in their early childhood. By contrast, Anna Freud, who treated mainly children, sought ways to make psychoanalysis a major tool in the educational process itself. At the same time, both Ferenczi and Anna Freud assumed that psychoanalysis is a radical practice precisely because it enables some sort of access to the past, and some sort of a retrospective intervention on the transition from one chronological stage to another. However, interwar continental psychoanalysis never challenged the perception that childhood and adulthood are stable categories of temporality, even if not as stable as perceived by many nineteenth-century developmentalist thinkers. It was the stability of these categories that Klein attempted to question in her theoretical and practical approach.

A Brief History of Modern Childhood

In his book *Childhood and Society*, Nick Lee argues that the modern distinction between adults and children is based on the perception that adults are “human beings,” while children are only “human becomings.”¹¹ According to this view, adults are entities who completed their developmental process, which brings with it mental stability, rational thinking and independent will, and they can therefore be considered “human beings.” “Human becomings”—in other words, children—are incomplete entities, and therefore unstable,

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irrational, and—most importantly—dependent on adults in a submissive relation of knowledge and power. As Lee puts it, “Children’s journey has been understood not just as a journey towards adulthood, but also, and more fundamentally, as a journey toward being *fully human*.”¹² In the same line of thought, sociologist Allison James points out that “a key driver of [the] wedge between children and adults has been the discipline of developmental psychology and its assertion of a common developmental and *age-based* path for *all* children.”¹³ James maintains that “for children, as well as adults, a developmentally-based, chronological schema works to mythologize childhood change by providing a charter for action and a cultural framework to think with and through. This is mapped out as the accrual of a series of age-based stages, each of which will move the child inexorably, step by step, towards the greater freedoms, responsibilities and self-determination of adulthood.”¹⁴

For many historians, however, the chronological perception of childhood is far from obvious. Most historians of childhood are still influenced by—although, of course, not uncritical of—Philippe Ariès’s book *Centuries of Childhood* (1960), which questions the validity of using childhood as a historical category before the modern era.¹⁵ Ariès argues that Western medieval society was not arranged according to our modern hierarchy of age and generation, and that there was no distinct social category for childhood, as we have today. Ariès asks: “In the tenth century, artists were unable to depict a child except as a man on a smaller scale. How did we come from that ignorance of childhood to the centring of the family around the child in the nineteenth century?”¹⁶ Indeed, many scholars would agree that the nineteenth century should be considered as a period of a dramatic shift in the lives of all children in the Western world, as well as in the perception of childhood as such. A major reduction in the child-mortality rate in the second half of the nineteenth century, the abolition of child labor, and the establishment of a state-funded schooling system in most places in Europe and North America all created an entirely new understanding of what a child is. Moreover, the notion that every child is entitled to a decent “childhood,” and that this period should be a “happy” one, took hold in more and more circles throughout this period.¹⁷ In order to achieve, however, these “happy childhoods,” children could not be thought of as “small adults” anymore but had to be redefined as completely different from adults. The consequence of this new demand for a “happy childhood” was what one scholar described as “a cultural process of ‘sacralisation’ of children’s lives.”¹⁸

The prohibition of most forms of child labor and the making of the state educational system were part of the same process. In fact, one form of a child’s life, schooling, replaced another form of child’s life: work. In Britain, however, this change affected mainly working-class children. The 1870 Education Act brought about a new social situation for many children who were no longer “wage-earners” but “school-pupils.” It was this new schooling system that created for the working-class child the right conditions “to constitute *proper* childhood, namely ignorance, innocence and dependence,” as historian Harry Hendrick observed.¹⁹ These romantic notions of childhood were something to which all children, from all classes, were now entitled.

Furthermore, schools also gave working-class children a few more years of childhood and allowed the transition from childhood to adulthood to become a process rather than a fracture. However, as Claudia Castañeda points out, “normal development, ultimately, could only be ascertained once the process had been completed successfully: in the normal adult.”²⁰ Becoming an adult was not only an aim in itself, but a way of confirming one’s physical and mental normality. Thinking of childhood as a duration could also enable the state to consider this stage of life—when mind and body are much more susceptible to changes—as an internship for good citizenship. The education of the child became much more than schooling: it was now perceived as the entire social process through which the state creates a better member of society. The literary scholar Jo-Ann Wallace suggests thinking of the child as “the shadow cast by the Enlightenment figure of ‘the citizen.’ In the republican state, the child comes before the citizen as the citizen-in-formation, the citizen-in-training, not always subject to the law . . . and never able to represent him/her self.”²¹

Many postcolonial scholars have revealed, in the last few decades, the ways in which modern perceptions of childhood and the eighteenth-century-born colonial notion of the “savage” were closely related.²² According to Ann Stoler, for example, in the colonial order, “racialized Others invariably have been compared and equated with children, a representation that conveniently provided a moral justification for imperial policies of tutelage, discipline and specific paternalistic and maternalistic strategies of custodial control.”²³ Ashis Nandy argues that modernity has been dominated by an “ideology of adulthood,” in which “childhood has become a major dystopia.” Thus, “the fear of being childish dogs the steps of every psychologically

insecure adult and every culture which uses the metaphor of childhood to define mental illness, primitivism, abnormality, underdevelopment, lack of creativity, and traditionalism.”²⁴ Childhood, Richard Appignanesi ~~claims~~ is “exportable well beyond the confines of the family, as it may be attributed to entire races presumed not to have reached a civilized status.”²⁵

The “ideology of adulthood” also played a central role in the new discourse of citizenship that became so important in Europe throughout the nineteenth century. In Britain, perhaps more than in any other European state, citizenship had also some important imperial dimensions. Being a British citizen was also being part of a global empire, and therefore the knowledge of raising children and the art of “mothercraft” were also an imperial issue. As ~~the~~ historian Anna Davin points out, “healthier babies were required not only for the maintenance of empire but also for production under the changing conditions made necessary by imperialist competition.”²⁶ Thus, for example, after the 1899 Boer War, when many working-class men who wanted to be recruited were found physically unfit, Major General Sir Frederick Maurice came to the conclusion that the emperor of Germany was right when he said that “for the raising of a virile race, either of soldiers or of citizens, it is essential that the attention of the mothers of a land should be mainly devoted to the three Ks—Kinder, Kuche, Kirche [children, kitchen, and church].”²⁷ However, “raising a virile race” for the preservation of the empire was not a project for mothers alone, but a much wider scientific mission. According to the new perception of motherhood and its importance for the state and the empire, mothers needed to be surrounded by doctors, social workers, psychologists, educationalists, and many other social scientists, many of whom were guided by fin de siècle eugenic ideologies.

The Notion of “Growth” and Psychoanalysis

The notion of “growth” played a central role in this new discourse that combined childhood, the family, and citizenship. Thus, for example, Margaret McMillan (1860–1931), the great reformist of working-class children, based her educational views on the fact that these children were physiologically deprived in comparison with other children. It was precisely the physiology of growing which interested McMillan, since she believed it was the most crucial aspect in the development of children. According to her socialistic

views, the physiological conditions of working-class children were not an unchangeable fact, but a political issue. She believed that better material conditions could improve all other aspects of these children’s lives.²⁸ Children’s growth, however, was for McMillan much more than a biological or psychological issue of the individual; it was a symbol of the potential for a better society. Indeed, by the end of the nineteenth century, the child had been not only culturally “sacralized,” but childhood itself became a political symbol of the promise of a better future. There was nothing new in this romanticist image of the child as a symbol of innocence, or in the image of the child as the “reclaimer of corrupt adulthood,”²⁹ but McMillan was one of the first in Britain to extend these cultural images to the children of the lower classes in order to use it as a platform for her socialist politics.

McMillan’s work, however, is only one example of a new way of thinking of adulthood and childhood in “developmental” and “chronological” terms. The emergence of this new chronological-developmental vocabulary was closely related to the increasing interest in “growth,” which became, since the mid-nineteenth century, a main subject of study for the natural and social sciences. Indeed, nineteenth-century European sciences were preoccupied with the physiological and psychological explanations of the phenomenon of children’s growth.³⁰ This cultural curiosity about children’s growth can be seen in the increasing interest, in the second half of the nineteenth century, in pediatric medicine, child psychiatry, and “cell theory.” Key evidence for the emergence of these new sciences is Freud’s work, in which all these fields of study can be found in one way or another.³¹

One of the innovative aspects of Freud’s work was his rejection of chronology as a necessarily progressive force in mental life. He was a radical thinker precisely because he suggested that apart from “external” chronological time—that is, age—there is another “internal” form of time operating in our mind: subversive, illogical, *unconscious*. This second form of time refers to all mental phenomena that do not fit any temporal coherency—that is, dreams, fantasies, and hallucinations. Freud thought that our struggle to narrate our childhood is a paradigmatic failure of the external “social time” to take hold on our mind. The notion of *Nachträglichkeit* (“deferred action” in English; *après-coup* in French) is a key example in the Freudian corpus of the way in which childhood events acquire their full meaning only retrospectively, as a memory construction.³²

Indeed, Freud’s work influenced later twentieth-century attempts to reconsider the perception of childhood as a chronological process that is

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necessarily progressive (the process of becoming a “fully human being,” i.e., an adult). Yet Freud never completely abandoned the chronological framework. In Freud’s understanding of the unconscious, there is an important distinction between past and present, even when it is sometimes hard to draw a clear line between the two. For Freud, our childhood produces continuous forms of subjectivity throughout our life, but this childhood is always located in the past, and we are always located in the present. It is this distinction between past and present—so crucial to Freudian thought—that Klein has challenged.

Sandor Ferenczi and Anna Freud: The Adult Patient, the Child Patient, and the Regressed Patient

The development of child psychoanalysis as a new discipline in the interwar years should be understood in the context of the emergence of a new child-centered policy and culture more generally after the First World War.³³ In the “psy” sciences, this new preoccupation with childhood was partly related to another major interwar social problem, namely finding political and psychosocial resolutions to the mass traumatized, shell-shocked soldiers. Many psychiatrists and psychoanalysts observed these patients as suffering from a regression to earlier states of childhood, and thus both regression and childhood became central to the discourse of the “psy” disciplines in the interwar years. As historian Michael Roper argues, “the shocks of trench warfare had exposed the anxious child in the soldier, and in so doing, exposed the child in the adult.”³⁴

However, the emergence of child psychoanalysis after the First World War was paradigmatic shift not only in Britain, and not only for the new professional child psychoanalysts like Anna Freud or Klein, but also for the older generation of continental psychoanalysts, like Ferenczi, who treated mainly adults. When Anna Freud told Ferenczi, “You really treat your patients as I treat the children whom I analyse,” he had to concede that she was right.³⁵ Ferenczi was particularly interested in learning more about the new “child patient” but nevertheless believed that he already knew something about it through his own experience with “regressed” adult patients. “Regression” became, in the 1920s, a major concept in Ferenczian thought as well as a subject of debate in the psychoanalytical world as a whole. Ferenczi’s late 1920s pioneering initiative to develop the concept of regression as a method

of treatment took some of its inspiration from the new discipline of child psychoanalysis.

Ferenczi was aware of the fact that, for analysts like him who treated mainly adults, child psychoanalytic techniques were relevant not only to understanding children but also in as much as they could be used to understand adult patients who had entered into regressive states from their early past. On the one hand he “[had] very little to do with children analytically,”³⁶ but on the other hand he claimed that regressive treatments of adults could be very similar to the treatment of children. In 1931 he argued that “certain facts of analytic experience [have] grouped themselves in my mind round ideas which urge me to temper materially the antithesis, hitherto so sharp, between the analysis of children and that of adults.”³⁷ A year later he wrote: “We talk a good deal in analysis of regressions into the infantile, but we do not really believe to what great extent we are right. . . . The patient gone off into his trance is *a child indeed* who no longer reacts to intellectual explanations, only perhaps to maternal friendliness.”³⁸ Indeed, regression and “maternal friendliness”—or lack of maternal friendliness—were perceived in wide circles of the psychoanalytic community as part of the same phenomena. Reading Ferenczi’s later writings might give the impression that he had in mind three kinds of patients: the child patient, the conventional adult patient, and the regressed adult patient. Since he had little clinical experience with child patients, he tried to learn as much as he could from his clinical experience with regressed adult patients, in order to find some links between his work and that of his new contemporaries—the child psychoanalysts. Therefore, his discussion with Anna Freud was not only an attempt to find some similarities between her child patients and his regressed adult patients, but was also part of his effort to legitimize his approach to regression as an active therapy with positive results. The reenactment of childish behavior and Ferenczi’s encouragement of this regressive state as a method of treatment explain his strong affinity with Anna Freud: they both assumed that the childish mind is always a target for intervention by an authoritarian adult figure. For Anna Freud, however, “intervention” meant not only a psychoanalytic method but also taking part in the educational process of the child. She did not treat children as if they were completely independent from their carers, and she always thought of the ways in which her treatment could be integrated with all the other educational objectives for each patient. For her, child psychoanalysis was only one dimension of the educational process of the child: “The child analyst—in according with the fact that his

patient is a child—should in addition to the analytic aspect also have a second outlook: the educational [*die pädagogische*]. I do not see why we should be frightened of this word, or regard such a combination of two attitudes as a disparagement of analysis.”³⁹

In order to understand why Anna Freud believed that it is virtually impossible to treat children as if they are adults, we have to look first at the way she understood her father’s concept of the superego: “the continuation of the voice of the parents which is now operative from within instead of, as formerly, from without.”⁴⁰ According to this view, “the child accords to this internalized authority a special place of honour in his own ego, regards it as an ideal, and is prepared to submit to it, often more slavishly than in his younger days he had submitted to his actual parents.”⁴¹ Thus, for Anna Freud, the parental role is only a paradigm for any other authoritarian relationship, and the superego is the representative of authority as such. Therefore, every sort of authoritarian figure that takes part in the child’s life will take part in building his or her superego. The psychoanalyst, according to Anna Freud, will not be able to avoid exerting any authoritarian influence on the child patient. According to her view, the main difference between children and adults is that in adult psychoanalysis “we are dealing with a situation in which the super-ego has achieved full independence and is no longer subject to external influences,”⁴² while in the childish mind, the superego “operates all too clearly for the sake of those from whom it received its commands, the parents and persons in charge of the child.”⁴³

The problem of authority will surely come up with adult patients as well, but with them it would be possible to use what Freud defines as “transferences” (plural in the original)—namely, “new editions or facsimiles of the impulses and phantasies which are aroused and made conscious during the progress of the analysis.” They have, he adds, “this peculiarity, which is characteristic for their species, that they replace some earlier person by the person of the physician.”⁴⁴ This unconscious “role-playing” is the core of the treatment of adults, but according to Anna Freud, when it comes to children, real role-playing is impossible. In the case of child psychoanalysis, the relationship between the analyst and the patient is not a “replacement” for other relationships: the analyst is, for the child, an authority in his or her own right, and so real transference will never take place. The child considers the psychoanalyst to be part of “the voice of the parents,” and therefore he or she cannot fully understand the analytic relationship as a sort of role-play, but only as an authoritarian relationship like any other relationships with adults.

In other words, the psychoanalyst of children is an educational agent, whether he or she likes it or not.

Education and the Problem of “Sphincter-Morality”

Ferenczi was perhaps the first to address the problem of education from a psychoanalytical perspective: education is at the core of the socializing process in every community, while psychoanalysis reveals the strong antisocial tendencies in each individual, he argued. As early as 1908, he claimed that these antisocial forces cannot just be removed by the educational process: these forces “remain stored in the unconscious, and organize themselves into a dangerous complex of instincts, anti-social and dangerous to the self.”⁴⁵ Psychoanalysis shows that “present-day education has set out to achieve that man should cheat himself in disowning thoughts and feelings stirring within him.”⁴⁶ Psychoanalysis, Ferenczi thought, is the opposite of education, in that it is committed “to liberation from prejudices hindering self-knowledge, to discernment of the hitherto unconscious motives and to control over the now conscious impulses.”⁴⁷

According to Ferenczi, education is the way in which society attempts to govern people’s minds, thereby turning them into prisoners of social control. But if education is deeply rooted in authoritarianism and social hypocrisy, psychoanalysis has the potential to be a form of liberation from any sort of “mind control.” In an early letter to Freud from 1910, Ferenczi said: “Once society has gone beyond the infantile, then hitherto completely unimagined possibilities for social and political life are opened up. Just think what it would mean if one *could tell everyone the truth*, one’s father, teacher, neighbour, and even the king. All fabricated, imposed authority would go to the devil—what is *rightful* would remain natural. The eradication of lies from private and public life would necessarily *have* to bring about better conditions.”⁴⁸ Fifteen years later, Ferenczi argued that psychoanalysis is an antiauthoritarian procedure, but in order to be successful it needs to be also a de-educational process: “Medical orders and prohibitions repeat to some extent the authoritative commands of the significant personages of childhood, with of course one important difference: in childhood everything tends in the direction of weaning from pleasure-gain; in analysis we substitute for the original training, which has been over-successful, a re-education which affords suitable latitude to erotic play.”⁴⁹

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Ferenczi did not deny that education plays a significant role, not only in child psychoanalysis but also in adult psychoanalysis. But in the latter, he believed, the psychoanalyst must perform an emancipatory role. Indeed, he thought that part of the role of the adult psychoanalyst is to help his or her patients who still suffer from the consequences of their education as children—a process “which has been over-successful.” In order to help these patients, the psychoanalyst needs to intervene in some initial phases of development and substitute the authoritarian education of childhood with a liberating education at present. Ferenczi described this as a sort of “undoing” of an initial indoctrination: “When some hysterical symptoms strike us as being ‘exaggerations’ . . . we must remember that the childish organism has other sources of excitation in auto-erotic or organoerotic play which are not available in the adult. ‘Education’ consists not merely in learning to acquire capacities, but to no small degree in unlearning ‘supernormal’ capacities. Forgotten (or repressed) capacities can, however, return in the form of neurotic symptoms.”⁵⁰ Hysteria, according to Ferenczi, is not only an illness, but a form of resistance of the body against the very initial educational process. In this description, education is not only a process of gaining new social knowledge, but also a process of discarding some natural knowledge—one may even say, discarding some instinctual knowledge.⁵¹ For Ferenczi, the psychoanalyst is a soldier in the patient’s army of resistance against society and its repressing capacities—first and foremost what is known as “education” and its many agents.

Anna Freud thought of education very differently but nevertheless agreed with some of Ferenczi’s premises. ~~Many years after the debate with Klein,~~ in a discussion with the psychoanalyst Joseph Sandler, she said: “Ferenczi added something very interesting which always impressed me. He said that all morality begins as hypocrisy, which is certainly true. He illustrated it in the anal sphere with the child’s first liking the smell of its own excrement, and being quite uninterested in the smell of a flower. But then the child learns to imitate and later to identify with the adults who show him a rose and say ‘how nice’, and who say that the smell of excrement is ‘nasty’. And the child imitates hypocritically, but gradually acquires that attitude.”⁵² Anna Freud refers here to Ferenczi’s claim that “neurotic bowel and bladder symptoms are, in part at least, merely repetitions of the old adaptation-struggle between the instinct to evacuate and the earliest social demands.”⁵³ Moreover, Ferenczi claimed, apropos of this very early struggle between the

instinct and the social demand, that there is a “forerunner” to the superego, which he called the infant’s “sphincter-morality” (*Sphinktermoral*):

The anal and urethral identification with the parents, already referred to, appears to build up in the child’s mind a sort of physiological forerunner of the ego-ideal or super-ego. Not only in the sense that the child constantly compares his achievements in these directions with the capacities of his parents, but in that a severe sphincter-morality is set up which can only be contravened at the cost of bitter self-reproaches and punishment by conscience. It is by no means improbable that this, as yet semi-physiological, morality forms the essential groundwork of later purely mental morality.⁵⁴

Anna Freud was impressed by this notion of sphincter-morality, but she nevertheless thought of it as “a lower form of morality.”⁵⁵ Like Ferenczi, she thought that “all morality begins as hypocrisy,” but she believed that a certain amount of hypocrisy is still necessary for maintaining a moral society. Ferenczi, on the contrary, did not believe that any morality founded on hypocrisy could amount to a positive force, or even to a “lesser evil.” For Anna Freud, psychoanalysis could be a “civilizing” tool that can help people adapt to some necessary normative demands; for Ferenczi, psychoanalysis had the potential to be a revolutionary tool that challenges normative demands altogether—a way of “undoing” the damaging consequences of the early sphincter-morality.

Klein also adopted this idea of an initial “semi-physiological morality,” and she also referred a few times in her work to Ferenczi’s “sphincter-morality.”⁵⁶ She writes: “The analysis of adults, as well as of children, has familiarized us with the fact that the pregenital instinctual impulses carry with them a sense of guilt. . . . Ferenczi assumes that, connected with the urethral and anal impulses, there is a ‘kind of physiological forerunner of the super-ego’, which he terms ‘sphincter-morality’. . . . My findings lead rather further. They show that the sense of guilt associated with pregenital fixation is already the direct effect of the Oedipus conflict.”⁵⁷ Thus, we can see that the sphincter-morality served as a theoretical meeting point for Ferenczi, Anna Freud, and Klein. They all agreed that there is such a “forerunner” to the superego and located its emergence in the pre-Oedipal stage—that is, the phase when the child is most attached to his or her

mother. Indeed, this is further evidence of the 1920s shift of interest in the psychoanalytical discourse—already discussed in the introduction—from the paternal relationships to the maternal ones.

However, while for Ferenczi and Anna Freud the sphincter-morality was one phase in the early developmental process of the child, for Klein this “forerunner” has some meanings which are important to all ages and to all phases of life. The point for her was not so much how the child can pass from this stage on to a more mature one, but what traces this initial stage leaves on us throughout our life. In fact, one may argue that while for Ferenczi and Anna Freud the sphincter-morality was indeed *only* a forerunner to the superego, for Klein it was the superego itself.

Klein and the Noneducational Child Psychoanalyst

Between 1924 and 1925, Alix Strachey spent a year in Berlin, where she became a good friend of Klein’s. She was also the one who made the connection between Klein and Jones. In 1925 Alix wrote from Berlin to her husband, James Strachey, that the writings of the Viennese child analyst Hermine Hug-Hellmuth are “a mass of sentimentality covering the old intention of dominating at least one human being—one’s own child. . . . Thank God Melanie is absolutely firm on this subject. She absolutely insists on keeping parental & educative influence apart from analysis & in reducing the former to its minimum.”⁵⁸

A year after he invited Klein to move from Berlin to London in 1926, Jones organized a two-day symposium on child psychoanalysis. None of the speakers in this event supported Anna Freud’s views, which led Sigmund Freud to accuse Jones of arranging the symposium with the explicit intention of attacking his daughter’s work.⁵⁹ This gathering was organized just after the publication of Anna Freud’s first book, *Introduction to the Technique of Child Analysis (Einführung in die Technik der Kinderanalyse)*,⁶⁰ and Jones did not deny his negative opinion of this work. He insisted, however, that the British Society’s “general attitude about deep child analysis was formed without the slightest personal reference to either yourself or to Anna.”⁶¹ Whether this was true or not, after that symposium, the division in the psychoanalytical world between Kleinians and Anna Freudians on the subject of child psychoanalysis became much more evident.

As already discussed earlier, the argument was very much about how to integrate Freud’s new concept of the superego into a therapeutic practice for children. The main question was whether in child psychoanalysis the therapist must actively take the role of a “superegoistic” authority—in other words, the parent—and become an explicit educational agent, or whether analysis with children should be similar to analysis with adults, in which case one of the clinical missions of the psychoanalyst is to keep him- or herself from being the child’s educator. During the 1920s, Vienna and London became the two main centers for the psychoanalysis of the child, with two opposing answers to this question. Anna Freud believed that for the child psychoanalyst, taking the role of the educator is inevitable; Klein thought that this is the one thing that the child psychoanalyst must avoid at any cost.

At the beginning of her professional career, Klein’s approach to education was not so different from that of Anna Freud. She, too, believed at first that “psycho-analysis would have to serve education as an assistant—as a completion—leaving untouched the foundations hitherto accepted as correct.”⁶² Her own experience of combining the role of the psychoanalyst with the role of the mother came with her first five-year-old patient, “Erich”—who was, in fact, her own son.⁶³ Klein described how the psychoanalyst (i.e., Klein) insisted on answering Erich’s questions about procreation, religion, and the existence of God in a rational way. These questions represented for Klein the child’s curiosity about sexual matters. However, as she noted later on, these answers did not satisfy Erich. After a while, when his mother’s answers did not match his phantasies and imaginary theories, he stopped asking her questions altogether and became “taciturn, [with a] distaste for play,”⁶⁴ and generally bored with his mother, who used to be his main companion. Klein thought that by answering Erich’s questions she was able to join him in his resistance to authoritarian repression, which she thought came from the parental role as such. But what she found out was that this authoritarian repression did not come from the external world but from Erich’s inner unconscious, phantasies, and anxieties, and therefore her “scientific” answers could not satisfy his curiosity.⁶⁵

Klein now realized that children are not motivated by a wish to achieve scientific knowledge *per se*, but by unresolved questions of their inner world. In this respect, the answers were marginal to the questions. Klein’s later writings were much clearer about the inevitable authoritarian relationships

between children and their parents as the source for this quest for knowledge. These relationships, she now believed, are grounded in the traumatic situation of the infant when he or she finds him- or herself at the center of a world full of things from which the infant is isolated: “surrounded with objects of anxiety.” “In this respect,” Klein goes on, “excrement, organs, objects, things animate and inanimate are to begin with equivalent to one another.”⁶⁶ Klein realized that anxieties are not only a consequence of the inability to differentiate between things but are mainly caused by the infant’s lack of any language with which to explore these things or to ask questions about them.⁶⁷ This is why the adult is perceived by the infant as an authority: the adult is the one who knows the answers to the infant’s questions, and is therefore the only one who can help the infant with his or her lust for knowledge. This inequality between the adult and the infant with regard to knowledge is at the core of what Klein defined as the *epistemophilic* impulse—the drive for knowledge—of the child.⁶⁸ This impulse leads infants to compensate for their inability to symbolize material things by possessing them in their hands, mouths, and so on. For an infant, to know what a thing is would be to occupy it physically. The infant “not only eats, but thinks with his mouth,” Susan Isaacs will write a few years later.⁶⁹ This basic trauma of asymmetry between the child and the adult world persists even when the child acquires language, and it expresses itself later on as aggression, envy, and rebellious tendencies. In fact, this asymmetry is the formative experience in constituting an authoritarian relationship between parents and their children.

Klein, then, started to consider the “authoritarian gap” between children and the adult world as an unavoidable element in the education of children. In this respect she was not naïve regarding the differences between children and adults, and did not completely abandon developmental theory. On the other hand, she thought that this authoritarian gap between the helpless infant and his or her carer is *not* only a matter of age, and that it is a fundamental experience in one’s life even when one grows up. According to her later writings, Klein and her followers thought of the infant as always already in a state of “unconscious phantasy” and much of his or her effort is to come to terms with reality as such.⁷⁰ That is to say, from a very early stage the child is preoccupied with the question of what exists in the world apart from his or her “unconscious phantasy,” and all of his or her curiosity is channeled to clarifying this question. As Lyndsey Stonebridge argues, for Klein, “the absence of knowledge, the *gap* between drive and object, thus characterizes the

infant’s quest for reality.”⁷¹ This quest for reality precedes any sort of interest in matters of sexuality.⁷² For Klein, the quest for reality—the epistemological attempt to know what exists in the world beyond one’s “unconscious phantasy”—is an existential condition and not a developmental stage.

The Nonchronological Perception of Childhood

By now we can see that, in the debate between Klein and continental psychoanalysis, represented by Anna Freud and Ferenczi, the two sides had different perceptions of the importance of chronological phases in the psychology of children. Literary scholars Lyndsey Stonebridge and John Phillips claim that while for Sigmund Freud “a symptom is always the return of a past that was created by repression,” Klein “is concerned only with the child’s atemporal confrontation with the external world.”⁷³ In other words, while for Freud it is one’s past that stands at the center of any research of the psyche, for Klein it is always the present that matters. Juliet Mitchell argues that Klein’s contribution was “to chart an area where present and past are one and time is spatial, not historical.”⁷⁴ According to Stonebridge, “for Klein, the individual does not so much develop in a straight line from ‘A’ to ‘B’ . . . but is constantly defined and redefined by the vicissitudes of anxiety.”⁷⁵ Rather than a developmental theory of growth, Klein suggested a new way of thinking of one’s mental life by describing it as a series of “positions.”

R. D. Hinshelwood defines the Kleinian concept of “position” as “a constellation of anxieties, defences, object-relations and impulses.”⁷⁶ One’s position is neither a matter of age, nor something which is related to his or her developmental stage, but an assemblage of inner mental forces in a given moment—inner forces which are active in one way or another throughout one’s life.⁷⁷ It has been also suggested that by using the term *position*, Klein “wanted to get away from the idea of stages or phases of development, which she had shown were not clear-cut but overlapping and fluctuating.”⁷⁸ Thus, for example, psychotic states in an adult’s life can have the same characteristics of earlier mental constellations from early childhood or even infancy. This, however, is not a regression to one’s earlier developmental stages: in the Kleinian world there is an unconscious dimension, in which one does not progress anywhere in one’s childhood, and therefore does not regress anywhere as an adult.

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The centrality of “positions” in Kleinian theory expresses a commitment to the study of synchronic structures in children’s mind rather than a wish to explore the diachronic elements, that is, children’s growth. As the psychoanalyst Thomas Ogden points out, “The debate over Klein’s developmental timetable loses much of its significance when her ‘positions’ are viewed not as developmental phases, but as synchronic dimensions of experience.”⁷⁹ Although Klein was particularly interested in children, she believed that, to some extent, it does not really matter whether the subject is a child or an adult: in order to understand one’s mental position, we need to understand one’s psyche synchronically and not diachronically, namely, the particularity of his or her structure of mind rather than the changes he or she undergoes over time. However, if some positions do not change with age, it becomes clear why, for Klein, “regression” has no meaning as a temporal concept.⁸⁰ By minimizing the role of regression in psychoanalytic treatment, Klein radically separated herself from both the Freudian and the Ferenczian tradition.

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Ferenczi thought that psychoanalytic treatment has the power to intervene in a patient’s traumatic past and thus to help the patient become an active agent in his or her own history: “In spite of the fact that treatment consists of a long-drawn-out series of abstinences and privations, injunctions and prohibitions, nevertheless, it offers the patient through the transference-situation a new edition of his happy childhood. Indeed it does more: the new edition is more attractive than the old one. Analysis enters into the emotional and mental life of the patient in a more delicate, friendly and above all in a more understanding way than was ever possible during the original up-bringing.”⁸¹ Regressive treatment, according to Ferenczi, can provide access to “the emotional and mental life of the patient.” The analytic treatment, he thought, is a performative procedure, and the therapist is one of the two actors in the show. Yet one of the preconditions of this regressive role-playing is the possibility of distinguishing, at least to some extent, between the patient’s past and present, between childhood and adulthood. Ferenczi never abandoned these distinctions, precisely because they enabled him to show how one’s past becomes the material for one’s narrative (or one’s own history), and thus how mental progression and regression become possible.

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Klein’s divergence from the Freudian-Ferenczian world led to very different definitions of adulthood and childhood. For Klein, the infantile world exists continuously in one’s psyche not as something that belongs to the past, but as a permanent unconscious phantasy. Indeed, it was Klein’s refusal to acknowledge some essential differences between children and adults in terms of the structure and functions of their mind that led her to treat children as if they were adults. In 1927 she wrote: “A children’s analyst must have the same Ucs [unconscious] attitude as we require in the analyst of adults, if he is to be successful.”⁸² A good treatment could improve a child’s capacity to be educated, but for Klein, educator and child psychoanalyst were entirely different occupations.

British psychoanalysis adopted two main elements of the Ferenczian and Kleinian understanding of childhood. In clinical terms, the Kleinian attempt to think of children’s psyches *synchronically* rather than *diachronically* had a great impact on a new generation of British psychoanalysts, such as Donald Winnicott and Wilfred Bion. Many of them adopted Klein’s ~~“child-centered”~~ approach, but at the same time they argued that by focusing only on the inner dimensions of the infant, Klein ~~ignores~~ the influence of the external environment on the development of the child’s psyche. This led them to turn to the Ferenczian idea of “regression,” which blurred the lines between childhood and adulthood, but did not conflate them altogether. As we will see in later chapters, regression became a key notion in inter- and postwar new psycho-political vocabularies of the “maternal.”

CHAPTER 2

How Children Think: Susan Isaacs on “Primitive” Thinking

In his now classic book *Time and the Other*, the anthropologist Johannes Fabian writes: “A discourse employing terms such as primitive . . . does not think, or observe, or critically study, the ‘primitive’; it thinks, observes, studies *in terms* of the primitive.” According to Fabian, the primitive is “a category, not an object, of Western thought.”¹ Deconstructing this category was one of the major tasks of late twentieth-century postcolonial scholars such as Fabian, Edward Said, and—earlier on—Frantz Fanon.² They were highly critical of psychoanalysis and mainly of Freud, who indeed used the category “primitive” extensively.³ However, as we will see in the following chapters, there were figures in the history of early psychoanalysis—particularly in the interwar period—who were no less critical of this label. Especially problematic for some of them was the assumption of nineteenth-century human sciences that children and “primitives” are in many respects mirror images of each other. This false perception of childhood, the critics maintained, hinders a better understanding of domestic life in non-Western and Western societies. One of these anti-colonial critics, I argue in this chapter, was Susan Isaacs, who is well known as a notable educationalist and psychoanalyst, but less so for her intervention in linking psychology, education, and politics.⁴

Isaacs was born in Bolton, England, in 1885, the seventh of eight children. Her mother died when she was six, and she had a difficult relationship with her father, a journalist and a strict Methodist. From an early age she was a nonconformist and developed—in defiance of her background—her own atheist and socialist views. In 1908 she began studying for a certificate in the teaching of young children in Manchester, and a year later, at the suggestion

of her teachers, she undertook a full honors degree course in philosophy. She earned the degree from Manchester University in 1912. Isaacs was a lecturer in psychology at Darlington Training College and in logic at Manchester University, before moving to London following her marriage to Charles Henry Brierley. In London, she became a tutor at the Workers' Educational Association, and in 1916 she became a tutor in psychology at the University of London. In 1922 she divorced Brierley and married Nathan Isaacs. Nathan was a metal merchant with a great interest in philosophy and education, and he supported her greatly in her educational and academic work. In 1921 she became an associate member of the then-new British Psychoanalytic Society, and in 1923 she became a full member. In 1924 she was appointed to be the first manager of the Cambridge Malting House School, founded by the speculator and educator Geoffrey Pyke (1894–1948).

The Malting House was an experimental boarding school which tried to avoid any sort of authoritarian method in the education of very young children. Pyke was traumatized by his own experience with English educational institutions and was looking for a “child-centered” kindergarten for his three-year-old son, David. When he realized that there was no such progressive kindergarten, he decided to establish one. As he was considerably influenced by psychoanalytic theory (and had also undergone personal analysis with James Glover), he saw the educator and psychoanalyst Susan Isaacs as the natural choice for running the Malting House.⁵

In the Malting House, Isaacs and her team saw “interventionist” authority as the main danger to children’s creativity and curiosity, and acted—to some extent—more as observers than educationalists; their role was thus closer to that of a noninterventionist psychoanalyst than to a parental figure. However, this psychoanalytical-progressive moment was a short one. Isaacs was the first to admit that the liberal circles that sent their children to her school had some misperceptions of the “real” nature of the child, his or her dependency on adults, and, thus, of the limited potential of so-called free education: “The educational problem is no more one of a utopian non-interference with the child, a belief that if we leave the child alone all will be for the best in this best of possible worlds, than it is one of pulling and pushing an inanimate puppet into our traditional standards. . . . What is needed is, thus, an educational realism that sets aside equally the misleading, however alluring, image of freedom and the cramping bonds of uncritical tradition.”⁶

Isaacs, however, was not only critical of what she described as “sentimental liberalism,”⁷ but also made some important interventions into the

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field of developmental psychology. After leaving the Malting House, she published a series of highly influential publications, in which she was particularly critical of the influential Swiss psychologist Jean Piaget (1896–1980).⁸ She fiercely rejected his “developmental” approach and what she considered to be false perceptions of childhood and adulthood. These perceptions, she believed were imbued with colonial vocabulary, which thought of the “primitive” as a “child,” but also of the “child” as “primitive.” Indeed, it was a popular view among psychologists and anthropologists, but also among psychoanalysts—including, first and foremost, Freud himself.⁹ The psychoanalytic view was, however, more nuanced than some other developmental theories, because of its claim that certain primitive elements of the human mind are essentially part of the human experience at any age and do not disappear when one moves from one developmental stage to another.

In this chapter I argue that Isaacs’s critique was not limited to developmental psychologists such as Piaget. Isaacs criticized an entire way of developmental thinking, from late nineteenth-century developmental anthropology (especially, the French anthropologist Lucien Lévy-Bruhl) to early twentieth-century Freudian psychoanalysis. The psychoanalytical key text on “developmentalism” for Isaacs and her generation of psychoanalysts was Sandor Ferenczi’s “Stages in the Development of the Sense of Reality” (“Entwicklungsstufen des Wirklichkeitssinnes”).¹⁰ The chapter will show that some elements of her work on the nature of childhood were also a response to this fundamental text of early twentieth-century psychology. A close reading of “Stages in the Development of the Sense of Reality” along with Isaacs’s interpretation can show how profound her critique of the developmental way of thinking was, and also how politicized in its anti-colonial approach. The final part of this chapter will situate Isaacs within wider networks of anti-colonialism, progressive education, and psychoanalysis based in London, especially in Bloomsbury.

The Educational Psychology Movement in Britain Between the Wars

Progressive education became especially popular in Britain mainly after the First World War.¹¹ However, some so-called progressive methods had been widely practiced in British schools since the second half of the nineteenth century. Friedrich Fröbel, the founder of the kindergarten movement in

Europe and one of the leading figures in nineteenth-century education, was particularly popular in some nineteenth-century educational circles in Britain. The Fröbelian methods were mainly known in Bradford, Birmingham, and Manchester, where Susan Isaacs trained as a teacher of young children, and where she was indeed very impressed by the Fröbelian way of thinking.¹²

From the early 1920s, Isaacs was part of a wider group of educationalists, psychologists, and psychoanalysts who attempted to promote a child-centered education, guided by the principles of the new discipline of educational psychology.¹³ Among this group were Cyril Burt (1883–1971), William McDougall (1871–1938), and Thomas Percy Nunn (1870–1944), to mention just a few. They thought that integration between education and psychology was a necessary step toward a liberal reform in Britain's education system.¹⁴ Their focus was on education, but as Harry Hendrick has pointed out, they believed that psychology was a necessary discipline if they wished to “[bring] to education a ‘scientific’ vocabulary.”¹⁵ By discussing central themes of child-centered education in popular newspapers, women's magazines, and guide books, as well as in some new training programs for teachers and educators, these experts explicitly aimed to bring their new approaches to the wider public. Although their direct influence on parents and teachers was limited to some very specific middle-class circles, their importance was in bringing alternative approaches to the educational domain, which they thought had been hitherto dominated by severely authoritarian methods.¹⁶

Thus, for example, they attempted to bring new psychologically based arguments against corporal punishment, which was very popular as an educational tool in both the private and the public spheres.¹⁷ It is hard to estimate the success of this campaign, but the emergence of new psychological justifications against beating children as a way of punishing them can tell us something about the new ways in which childhood was perceived in some middle-class circles during the interwar period. In the name of new educational values, these educationalists tried to encourage children to be independent, nonconformist, and self-governing. According to this way of thinking, corporal punishment was a humiliating act that discouraged the child from thinking of himself or herself as an independent person, with an independent free will.¹⁸

Hence, for Isaacs, obedience was not an educational value in its own right. On the contrary, obedience stood in contradiction to some new notions that were now much more important for interwar educational psychologists, especially the new injunction to be an “independent moral being.”

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Corporal punishment can make a child obedient only because the child is afraid of being beaten, but it cannot contribute anything to his or her free thinking and moral development. This subject emerged very clearly in Isaacs's advice to parents, which she published between 1929 and 1936 under the penname Ursula Wise. To one of the mothers who claimed that smacking her child "hurts me more than him,"¹⁹ Isaacs replied: "I wish I could understand how it is possible for anyone seriously to claim that smacking a child hurts her more than it hurts the child. I confess that I feel that to be complete humbug. I have such vivid memories of being smacked when I was child myself, and when I compare those feelings with my own as a grown woman when I have smacked children, it seems to me the sheerest nonsense to suggest that it hurts me now more to smack a child than it hurt me to be smacked when I was a child."²⁰ Not only did Isaacs reject corporal punishment as an educational tool, she also rejected the mother's attempt to speak for her child and to claim that she knows better than him or her how it feels to be smacked.²¹ Isaacs believed that there was no way of knowing the child other than to listen to what he or she has to say for themselves. Indeed, the child's voice became one of the core values of liberal-progressive education, and Isaacs became a prominent representative of the demand to listen to this voice. The child's voice was one of the main things that she saw as missing in Piaget's developmental theory.

How Children Think: Piaget, Isaacs, and Lévy-Bruhl

Piaget became famous in the 1920s for his then-new research on the structure of the child's ~~way of thinking~~. He interviewed hundreds of children between the ages of four and twelve at the Jean-Jacques Rousseau Institute of Geneva, where he had been based since 1921. In these interviews he asked the children various theoretical questions and used the data to develop a theory about the different stages in the development of the child's mind: "We are going to ask children how clouds, stars, rivers and wind move forward, what waves and drafts are, why clouds stay in the sky and boats on the water, while stones fall to the ground or sink to the bottom of water. By classifying the responses, we will establish the existence of four main stages in the child's understanding of causality."²² Piaget insisted that each developmental stage has its own age. According to him, children progress in their ability to think simply by growing up, which enables them to move from

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one stage to another.²³ Isaacs thought that the transition in Piaget's theory from one developmental stage to another was more a series of "pseudo-biological metamorphoses" than a scientific explanation of children's growth.²⁴ Moreover, she was very critical of his methodology, arguing that in his interviews with children he asked questions that were not relevant to their real lives, and that, by doing so, he could learn only how the children approached his questions but failed to get any sense of the way their minds really functioned.²⁵ Therefore, she thought that Piaget's phases of development were too theoretical and had little to do with the child's real experiences in his or her everyday life, which for her was the most important factor.²⁶

In a review of Piaget's book *The Child's Conception of the World*, which Isaacs published in *Mind*, she criticized him on two levels.²⁷ First, she disagreed with his methodology, arguing that rather than testifying on what "under these conditions, the average child will, with such and such a degree of probability, do," Piaget was "aiming at something far more universal and characteristic in the psychology of the child."²⁸ His goal, she said, was "to show the way the mind of the child works, not just under these specified and measurable and standardised conditions, but under all and ordinary conditions. He was concerned not with a measurable piece of concrete behaviour, but with a general psychological law of development and pervasive modes of thought."²⁹ According to Isaacs, because Piaget attempted to find universal laws for the child's mind, he made some generalizations, which were not supported by his scientific experiments. Isaacs demonstrated how Piaget defined children's stages of development using the answers they gave him, without any reflection on the questions he asked them and how these questions determined the answers he received: "But how can the child know the true relation of the movements of the sun and the earth and his own body until he has been taught them? And how can he know the right answer to 'where do dreams come from?' or 'how did the moon begin?' before he has been actually initiated into our particular intellectual conventions about the intention of such questions? One cannot give the right answer to the wrong question."³⁰ Children's performance in these tests, she claimed, was not always due to their less-developed mind but due to their lack of life experience.³¹ Therefore, she thought that Piaget's methodology was simply misleading because of its "tendency to solidify the stages and hypostatise mental modes [which] may arise in part from the method itself."³² According to Isaacs, Piaget was not investigating children's real experience but was preoccupied

with his own interests as an adult researcher, and consequently his research can tell us more about him than about the child's mind.

But Isaacs also raised some difficult questions about Piaget's anthropological and political premises:

In the first place, it is that children of all ages, like civilised adults and like savages (as the modern field-anthropologists show), function mentally on many different levels according to the moment and the situation, at one time logical and objective, understanding causality practically and verbally, at another egocentric and syncretistic, pre-causal and magical. When actually handling the physical world in a concrete field in which experience can count, all three of us, child and savage and civilised man, can be full of common sense and a matter-of-fact causality, according to the measure of our organised experience. When face to face with unknown issues, or when taken off our intellectual guard by strong desire or passion, by religious tradition or social prejudice, even the most civilised adults are liable to fall into every one of the errors of subjectivity—as, for example, the history of medicine or present-day political and economic controversies clearly show.³³

Thus, we can see how, according to Isaacs, Piaget's universalistic tendencies reflect his wider tendency to conflate scientific findings with misleading assumptions about the "primitive" as "childish." In other words, Isaacs disagreed with the attempt to base colonialist perceptions on what she saw as pseudoscientific research. Using theories like those of Piaget, she thought, one could mistakenly develop ideas about the superiority of the adult over the child, or the "civilized man" over the "savage"; or one could use a concept such as intelligence as a political weapon rather than a scientific tool.

In *Intellectual Growth in Young Children*, Isaacs expanded her critique of Piaget and attacked his notion of "maturation." Isaacs thought that maturation should be "looked upon as a limited concept . . . and strictly confined to those aspects of growth *which cannot be shown to be a function of experience*."³⁴ According to her, the usage of maturation as a universalistic notion that does not consider any historical, social, and cultural aspects was directly responsible for the creation of some damaging and misleading social constructions: "canal-boat and gipsy children and illiterates do not

reach ‘abstract’ thought nor find facility on the verbal level; although a reliable series of performance tests may be able to show that some of them have sufficient [general intelligence] to make it certain that they would do so if they had the chance.”³⁵

Piaget indeed thought of the child in terms very similar to his notion of the savage and therefore characterized children’s way of thinking as animistic, magical, and “autistic.” This term he borrowed from Eugen Bleuler, whom he knew very well from a semester he had spent in 1918–19 at the Burghölzli Mental Hospital in Zurich.³⁶ According to Piaget, the autistic mode of thinking was common to what he perceived as primitive thought, which also characterized the child. The main intellectual source, however, for the way in which Piaget conceptualized the child’s way of thinking was the French anthropologist Lucien Lévy-Bruhl, who was one of the major contributors to the early twentieth-century discourse on “primitive thinking.”³⁷ Lévy-Bruhl’s impact on Piaget was not lost on Susan Isaacs, who mentioned it when explaining the meaning of the “ego-centric” stage in Piaget’s developmental theory: “The young child, in the ego-centric stage, is a ‘realist’, for he does not distinguish between the sign and the thing signified, between the internal and the external, the psychical and the physical. His realism is still further extended by ‘participations’ (Piaget here uses Lévy-Bruhl’s term), and spontaneous ideas of a magical nature.”³⁸ It is this “magical nature” of the child that was so similar to Lévy-Bruhl’s understanding of the primitive mode of thinking. Both men shared the view that the child, like the primitive, “appears to himself as he appears to others and they to him, without distinguishing himself from the beings and objects of the world around.”³⁹ This state is what Lévy-Bruhl called “participation.” Isaacs, then, rightly explained that Piaget borrowed this term from Lévy-Bruhl. She defined “participation” as a state in which one’s “reality is for him impregnated with self, and all the universe is felt to be in communion with and obedient to the self.”⁴⁰ This mental state is common to the “primitive” and the “child,” but it can also be seen as the main difference between the “child” and the “adult,” and the “primitive” and the “civilized.” According to Lévy-Bruhl and Piaget, the difference between the child/primitive and the adult/civilized is not a difference of *degree* but a difference in *essence*. As religion scholar Robert A. Segal points out, “[Rather] than thinking like moderns, just less rigorously, ‘primitives’ harbour a mentality of their own. ‘Primitive’ thinking is both ‘mystical’ and ‘prelogical’. By ‘mystical’, Lévy-Bruhl means that ‘primitive’ peoples experience the world as identical with

themselves rather than, like moderns, as distinct from themselves.”⁴¹ While other late-nineteenth-century anthropologists such as E. B. Tylor and James Frazer believed that the primitive way of thinking is similar to the Western one in quality but inferior in quantity, Lévy-Bruhl thought of the primitive way of thinking as inherently different. For him, it was a separate category that cannot be compatible with the civilized mode of thinking.

One may find a similar difference between Isaacs and Piaget in their debate on what Isaacs called the “general structure of the child’s thought.”⁴² While Isaacs thought that the ways in which children and adults think are similar, though children have less experience because of their age, Piaget thought that children and adults are categorically different. Accordingly, Isaacs’s and Piaget’s understandings of the notion of progress are very different: for Piaget, mental progress is one’s movement from one developmental stage to another; for Isaacs, progress means having more and more life experience, which means gaining more knowledge and so becoming mature.

Hence, Isaacs’s main critique of Piaget was about his understanding of the life cycle: “One has the sense that development is for [Piaget] far less a continuous and cumulative penetration of mental functioning by experience than a succession of pseudo-biological metamorphoses, definite in mode and age of occurrence.”⁴³ Isaacs, then, objected not only to the way Piaget defined the different stages of childhood, but also to his inclination to draw a strict line between adulthood and childhood as such. Interestingly, it is in this part of her critique that the psychoanalytic unconscious starts to play a central role. For her, the unconscious is the main evidence against any attempt to draw a strict line between adulthood and childhood. Her reply to the Lévy-Bruhlian–Piagetian understanding of childhood was that “the child’s mind moves in these ways of magic and ‘participation,’ of syncretism and precausality, in its deeper layers—as do our own, in dream, in reverie and free association.”⁴⁴ True to her nondevelopmental understanding of the child, she used the unconscious (dreams, reverie, and free association) to demonstrate the existence of early developmental stages in later mental stages in adult life. For Isaacs, this is the real evidence that the *synchronic* aspects in one’s life cycle are no less dominant than the *diachronic* ones, which were so emphasized by Piaget.

One must remember, however, that like Isaacs, Piaget was also deeply engaged with psychoanalysis in the 1920s, and at least for a while he was probably considered by colleagues to be a psychoanalyst. He was analyzed

by Sabina Spielrein when she lived in Geneva between 1921 and 1923, and they had a very fruitful intellectual exchange throughout the 1920s.⁴⁵ Piaget was also a member of the Geneva Psychoanalytic Association and the International Psychoanalytical Association (IPA), and even had a few analysands for some periods (though he did not have very successful treatments with them). In addition, he attended psychoanalytical conferences, where he presented papers and also published a few of them. Later, he became more critical of psychoanalysis, arguing that it could not be considered scientific, but he never dismissed it completely and thought that its clinical aspects were valuable. One may argue that in the 1920s, Isaacs was not much more identified with psychoanalysis than Piaget, and parts of their debate can be seen as an argument on the right interpretation of the psychoanalytical cause. Thus, one may say that Isaacs's critique of Piaget is at the same time a critique of the perception of childhood in continental psychoanalysis—namely, Freudian and Ferenczian psychoanalysis.

Developmental Psychoanalysis and Ferenczi's Omnipotence of Thought

In his book *The Language and Thought of the Child*, Piaget writes: “Janet, Freud, Ferenczi, Jones, Spielrein, etc., have brought forward various theories on the language of savages, imbeciles, and young children, all of which are of the utmost significance for an investigation such as we propose to make of the child mind from the age of six.”⁴⁶ This sentence reveals Piaget's secondary sources for his assumption that “savages, imbeciles, and young children” have some essential psychological similarities. It should not come as a surprise that four of the five names mentioned were psychoanalysts. The premise of strong affinities between the “child” and the “savage” was very common within psychoanalytic discourse, and particularly among Ernest Jones, Sigmund Freud, and Sandor Ferenczi.

Jones, in an article mentioned by Piaget, argued that “[there] are good grounds for believing that speech originally was a far more concrete activity than it now is, and it has indeed been maintained that all speech represents pretermitted action. Plain indications of this are to be observed among less cultivated human beings, especially children and savages.”⁴⁷

Freud argued in 1917 that “all the things that are told to us to-day in analysis as phantasy . . . were once real occurrences in the primaeval times

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of the human family, and that children in their phantasies are simply filling in the gaps in individual truth with prehistoric truth.⁴⁸ According to Freud, the “neurotic” reveals not only “traces” of his or her own childhood but also some “primitive” stages in the development of human kind as such. As one scholar pointed out, “by depicting each neurotic as carrying the layers of his culture’s past within him, like an archaeological site, Freud has declared that *psychology is at the same time anthropology*.”⁴⁹

Ferenczi, along the same lines, opened his article “Stages in the Development of the Sense of Reality” (1913) by saying that “[the] development of the mental forms of activity in the individual . . . arises out of the ‘primary’ psychical stage, such as is displayed in the mental activities of primitive beings (animals, savages, children), and in primitive mental states (dreams, neurosis, phantasy), the secondary stage of the normal man in waking thought.”⁵⁰ In this classic paper, Ferenczi provides us with a theory on the process that an infant—and, later on, a child—needs to undergo in order to gain a “sense of reality.” Ferenczi defines this process as “the acme and decline of the feeling of omnipotence.”⁵¹ Omnipotence, he defines as “the feeling that one has all that one wants, and that one has nothing left to wish for”; hence, the period of being an embryo in the womb is the paradigm for what he calls *unconditional omnipotence*.⁵² According to Ferenczi, then, “the childhood megalomania of their own omnipotence is thus at least no empty delusion; . . . [children] are only demanding the return of a state that once existed, those ‘good old days’ in which they were all-powerful.”⁵³

After the period of unconditional omnipotence comes Ferenczi’s next stage: the *period of magical-hallucinatory omnipotence*.⁵⁴ No longer in the womb, the infant still does not accept any less than unconditional omnipotence. Surprisingly, however, in most cases of normal maternal care “this hallucination is in fact realised”:

From the subjective standpoint of the child the previously unconditional “omnipotence” has changed merely in so far, that he needs only to seize the wish-aims in a hallucinatory way (to imagine them) and to alter nothing else in the outer world, in order (after satisfying this single condition) really to attain the wish-fulfilment. Since the child certainly has no knowledge of the real concatenation of cause and effect, or of the nurse’s existence and activity, he must feel himself in the possession of a magical capacity that can actually realise all his wishes by simply imagining the satisfaction of them.⁵⁵

But after a while the child has more needs and, therefore, must develop some better signals to satisfy his or her growing demands: body gestures, voices, stretching out hands for objects, and so on. This brings us to the next stage, the *period of omnipotence by the help of magic gestures*. Ferenczi explains that as long as it “keeps to the condition of the expression of wishes by means of corresponding gesture—the child can still appear to itself as omnipotent.”⁵⁶ This feeling of omnipotence only changes when the infant realizes that more and more of his wishes are not fulfilled, and “gradually there appears a painful discordance in his experiences.”⁵⁷ The infant is now forced to make an initial differentiation between the internal and external world, “between the subjective psychical contents (feelings) and the objectified ones (sensations).”⁵⁸ This is when the child enters the *animistic period*—a stage “in which every object appears to him to be endowed with life, and in which he seeks to find again in every object his own organs and their activities.”⁵⁹

These are the right conditions for the emergence of the capacity for *symbolic* representation, which is the next stage in Ferenczi’s account. This stage can enable the child “not only to signalise such wishes as immediately concern his body, but also to express wishes that relate to the changing of the outer world, now recognised as such.”⁶⁰ One of the ways in which the child can use his body to make a change in the outer world is by speech. This capacity, when it emerges, enables “speech symbolism [to get] substituted for gesture symbolism.”⁶¹ A conscious thought by means of speech, claimed Ferenczi, would be the “highest accomplishment of the psychical apparatus.”⁶²

But this stage still allows the child to preserve his feelings of omnipotence. The “attentive *entourage* concerned with the child’s welfare,” ready at any time to fulfill his or her wishes as soon as possible, preserves his self-understanding as being in “possession of magic capacities.” Ferenczi defines this as the *period of magic thoughts and magic words*.⁶³ Ultimately, only upon “the complete psychical detachment of the parents” does “the feeling of omnipotence [give] way to the full appreciation of the force of circumstances.”⁶⁴

We can see that the “sense of reality” serves for Ferenczi as a boundary between childhood and adulthood in a way that calls to mind Lévy-Bruhl and Piaget. There is, however, one main difference between them. Ferenczi limited his developmental theory to “ego-instincts”—to instincts “which serve the function of self-preservation.”⁶⁵ In other words, Ferenczi limited his account to the “reality principle.” For him, stages of development function entirely differently when it comes to sexuality. The register of sexuality,

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said Ferenczi, “remains throughout life more subjected to the pleasure-principle.”⁶⁶ It seems as if Ferenczi is almost suggesting that one of the roles of sexuality is to preserve some sort of omnipotence throughout one’s life. Therefore, for Ferenczi, sexuality serves as a bridge to one’s “primitive” stages of development.

This is the right context for understanding the first paragraph of this article, mentioned above, where Ferenczi explains that the sense of reality “arises out of the ‘primary’ psychical stage, such as is displayed in the mental activities of primitive beings (animals, savages, children), and in primitive mental states (dreams, neurosis, phantasy).”⁶⁷ On the one hand, Ferenczi puts animals, savages, and children in the same category as primitive beings. Indeed, it seems from this text that he clearly believed in the need to differentiate between primitive beings and “normal man” according to their mental developmental “stage” [*Stufe*]. But on the other hand, Ferenczi was less interested in these primitive beings than in “primitive mental states.” Ferenczi thought that these states are traces of primitive times, and perhaps can be recognized more easily in primitive beings. However, these mental states do exist in each one of us—in dreams, phantasies, and all other unconscious activities of the “normal man.” Thus, Ferenczi’s picture of childhood and adulthood was much more nuanced than that of many contemporary developmental psychologists and anthropologists, because although he did not abandon the developmental language, he added to this psychological-colonial discourse some synchronic aspects that were missing from the writings of people like Lévy-Bruhl and Piaget. For Ferenczi, one’s life in all ages is a complex of diachronic and synchronic elements, which cannot be separated.

Isaacs and the Confusion of Tongues Between Adults and the Child

In *Intellectual Growth in Young Children*, Isaacs argued that at the Malting House, the team attempted “to avoid the clouding of the child’s understanding of real processes by a confusion of casual and moral categories.” She also added that “this very common type of muddle is often accredited to native tendencies in the child’s mind.”⁶⁸ Here again she takes an example from Piaget, who told a child that he must always put *d* in the word *grand*. The child’s reply was: “Why, what would happen if you didn’t?” According to

Isaacs, the child's way of thinking was logical, since he probably knew that the word *must* usually has a "moral and imperative sense." Her conclusion was that "if we, in talking to children, persistently use words in several different meanings, it is hardly sound psychology to attribute the whole of the resulting confusion to children's native modes of thought." Isaacs's aim, then, was to explain these "language confusions in both children and adults."⁶⁹

One explanation could be that these confusions "take their ultimate rise in primitive types of causal thinking, such as Piaget's second stage of causality."⁷⁰ Here Isaacs refers to the stage—between the ages of three and eight—when, according to Piaget, the child's thought can be characterized by a "mix of artificialism and animism."⁷¹ He writes:

In fact, the sooner the child learns to distinguish his self from that of others, the less he will attribute to the efficacy of his own gestures. By learning to imitate others, and then, thanks to language, by learning to obey his parents, the child has an essential experience which will impact upon his representation of the world. He will conceive of the universe as a vast society of living beings subject to a set of duties and constraints, and causality will then be construed as coercion, half-physical and half-moral, analogous to the control that adults exert over their children.⁷²

One may argue, then, that children and adults sometimes use the word *must* in a physical sense, and sometimes in a moral sense. Isaacs had already said in 1927 that these language confusions "go back ultimately to what Ferenczi has called 'omnipotence of thought.'"⁷³ In *Intellectual Growth in Young Children*, she claimed again that the omnipotence of thought is an alternative explanation (in addition to Piaget's second stage) to the confusion between the causal and moral categories in children's and adults' language. Omnipotence of thought, she explained, is the developmental stage "in which external events are felt to be under the control of wishes and phantasies."⁷⁴

Ferenczi's period of magic thoughts and magic words is not radically different from Piaget's second stage of causality. However, Ferenczi's understanding of "stage" is different from that of Piaget's. For Piaget, any regression from one stage to another is pathological; for Ferenczi, certain kinds of regression are part of our everyday lives and happen all the time (dreams, phantasies, and so on). The way we use the word *must*, for example, can be

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explained as a sort of regressive trace of the omnipotence of thought in our childhood, when the physical and the moral were one and the same.

Isaacs, however, was not that interested in the sources of these confusions of language. The important thing for her was that children cannot make the distinction between “physical language” and “moral language,” and this is first and foremost because the grown-ups do *not* distinguish between the two. This is why, at the Malting House, the team tried to use only a conditional form of speaking and not an imperative one: “When A happens, B follows. If you do X, Y will result. ‘Must’ then falls into its place as representing a condition.”⁷⁵

The conditional form could also be used for some “necessary social sanction: ‘if you hit John with the spade, I shall take it away.’ We never used general categories such as ‘naughty’, ‘good’ or ‘horrid’.”⁷⁶ Isaacs tried to create the right conditions for the children to experience the world as something new, which can be described by them in their own language—the child language. Adult language, Isaacs believed, is imbued with confusions of moral issues with scientific facts. This confusion is the source of misleading ideas about an allegedly “primitive thinking” that were so dominant in developmental psychology and anthropology, but also in psychoanalysis. In contrast to this view, Isaacs’s idea was “to help the children to realise and adjust to other people’s wishes as every-day facts rather than as mysterious absolutes.”⁷⁷

The Bloomsbury Progressive Networks

The historian Nicholas Owen argues that in the interwar years, London served as “a ‘junction-box’ in which visiting nationalists could share ideas with each other and with British radicals.”⁷⁸ Bloomsbury was a major component in this “junction box.” For example, in her study of non-British anti-colonial writers, Anna Snaith suggests that Bloomsbury was a site for “networks of anti-colonialism” in interwar London.⁷⁹ As well as acting as an incubator for this anticolonial thinking, Bloomsbury also served as a base for networks of progressive education. Already in 1851, the Prussian authorities forced the ~~Fröbelian~~ ^{Fröbelian} activist Bertha Ronge to move with her husband to London, where they established the first kindergarten in Britain at Tavistock Place. In 1902, the Institute of Education, where Isaacs was the head of the Department of Child Development, was established, having its first buildings in

this district of London. In 1919, the headquarters of the Montessori Society moved to Bloomsbury as well, and the headquarters of another major network of interwar progressive educationalists, the New Education Fellowship (NEF), was also located at Tavistock Square. As Peter Cunningham points out, since then “Bloomsbury in London was to remain a focal point for many of the progressive intellectual networks.”⁸⁰

These Bloomsbury networks of anti-colonialism and progressive education were not unrelated. The New Education Fellowship (NEF), for example, was established as an international organization, with clear intentions of disseminating the principles of progressive education all over the world. From an imperial perspective, the implication was that educators (especially from the “white colonies,” i.e., Canada, Australia, New Zealand, and South Africa) had ongoing contact with progressive educationalists in London, in order to receive help with assimilating progressive methods in the education systems of their own countries.⁸¹

These efforts to “export” progressive education to non-European countries raised many questions about whether some principles of European education should be universal, and if so, about how these methods could be adapted by colonized people. Such questions, however, were related to much wider discussions about colonialism, and by the mid-1930s, the NEF contained some radical networks of anti-colonial thinking.⁸² Thus, for example, the NEF conference in South Africa in 1934 reflected the move away from the “individualistic, psychological, and Progressive ‘New Education’ foci of the NEF conferences of the 1920s”⁸³ into the creation of a different educational agenda, which was now focused on the new political forms of totalitarianism in Europe—but also on the highly repressive dimension of imperial rule. The NEF conference of South Africa was an important gathering for discussing and criticizing colonialism. The participation of some prominent social thinkers, particularly from London, made it even more so. Some of the participants were leading educationalists, such as the head of the overseas students at the Institute of Education in London, Fred Clarke, who raised some important questions about the place of education in the relationship between colonizers and colonized. But there were also some prominent anthropologists, such as Isaac Schapera of the University of Cape Town, and Bronisław Malinowski of the LSE. By the mid-1930s, Malinowski (who will be discussed at length in the next chapter) was already famous for his “relativistic” views and his critique of interventionist policies by European colonialism. His lectures at this conference made this line of thought even clearer.

Susan Isaacs, I argue, should be located within these Bloomsbury networks of anti-colonialism and progressive education. She had close links with the NEF, especially during the 1930s, when it became heavily engaged in anti-imperial politics. In 1937, for example, Isaacs was part of a group of international senior educationalists on an NEF-funded tour of lectures in Australia and New Zealand.⁸⁴ Furthermore, since the early 1920s—apart from the three years spent in Cambridge—her life and work was in Bloomsbury, among avant-garde academics, artists, activists, and other educationists. As historian Jane Martin points out, “the Isaacs’s home in Bloomsbury became a respected space, where students, progressive educationists and teachers met to hone and disseminate ideas.”⁸⁵ The location of their house can tell us something not only about Isaacs’s engagement with progressive educationalists, but also about her increasing interest in colonialism and its wider implications. For example, as a Kleinian psychoanalyst, she probably knew well some members of the Bloomsbury group, and it can be assumed that she was not unaware of the anti-imperial atmosphere in the Bloomsbury milieu. It was particularly Freud’s publisher and ex-colonial civil servant in Ceylon, Leonard Woolf, who was known for his anti-imperial activities and writings. As Snaith argues, at their Hogarth Press, Leonard and Virginia Woolf helped not only to disseminate anti-imperial ideas but also to demonstrate that “the conjunction of avant-garde aesthetics and anti-imperial polemic is not contradictory.”⁸⁶ Anti-colonial Bloomsbury was where Susan Isaacs wrote her highly influential educational writings as well as her fierce critique of developmental psychology. This critique, as we saw in this chapter, was also a critique of the colonial worldview.

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In his study of psychology in the British Empire, Erik Linstrum has recently argued that “the data on subjectivity which psychologists set out to collect tended to refute primitivist stereotypes—the absence of an inner life, the lack of individuality, and the essentialism of racial, tribal or caste identity.”⁸⁷ Therefore, since the late nineteenth century, psychology was particularly important in some long-term decolonizing processes: “Whether by revealing variations in intellect through intelligence testing, variations in personality through projection testing, or inner depths of desire and conflict through psychoanalysis, psychology challenged assumptions about the absence of individuality beyond the West.”⁸⁸

Although she was never engaged directly in imperial psychology, I argue that Susan Isaacs could and should serve as a major example of the ways in which British interwar psychology challenged the colonial project as a whole. Evidence of this can be found in her published attacks on developmental psychology and its colonial premises as well as in notes for a series of lectures on psychoanalysis and anthropology that she gave at the Institute of Psychoanalysis in the mid-1930s (the exact dates are unknown). In her remarks to the first introductory lecture she writes: “So much revealed as *unconscious* wishes and modes of thinking among individual Europeans reminds irresistibly of myths, magic, taboo and ritual of simpler peoples. . . . So, anthropologist coming to, e.g. obsessional ritual or phobias, would see much that would seem familiar.”⁸⁹

One may say that the universalistic approach of social sciences such as psychology and education helped not only in colonizing non-European lands and societies, but also in occupying non-Europeans’ minds and self-definitions. But even if that is true, at the same time, looking for similarities between colonized and Western people, as did many anthropologists and psychologists such as Isaacs, helped humanize the “primitive” in the eyes of Westerners. True, the new psychoanalytical language allowed for the reducing of local beliefs and sometimes very ancient traditions simply to “unconscious wishes,” as the quotation from Isaacs above shows. On the other hand, this reduction created a demand for different epistemological tools from the ones offered by the older colonial perspective. In the encounter with the colonialized “other,” one now had to look for the “familiar” rather than the “different”; moreover, one had to look for it in one’s inner self rather than in the other’s inner self. To some extent, the gap between the European and its radical other now became much more bridgeable.

CHAPTER 3

Malinowski, Róheim, and the Maternal Shift in British Psychoanalysis and Anthropology

Historical speculation about the existence of a matriarchal society was well known to Freud.¹ In 1919, for example, Lou Andreas-Salomé commented on his paper “The Taboo of Virginity” that “taboo may have been intensified by the fact that at one time (in a matriarchal society) the woman may have been the dominant partner.”² In his reply, Freud writes:

I have long had unexpressed ideas on the question of matriarchy. Where is one to place it? I think, on the basis of the totem-taboo hypothesis, in the period after the fall of the primal father, the period in which the male had not yet brought himself to the point of founding a secondary family, in which therefore the dominant role now fell as a matter of course upon the shoulders of the woman, who had lost her master. Unfortunately, I find it impossible to ascribe a date to the whole early history of the family, although I know that this is essential, if one is to give it its full significance in relation to the other phases of the development of the family.³

In “The Taboo of Virginity,” Freud claims that women’s penis envy reveals their “hostile bitterness against the man, which never completely disappears in the relations between the sexes, and which is clearly indicated in the strivings and in the literary productions of ‘emancipated’ women.”⁴ Freud refers the readers to Ferenczi’s “palaeo-biological speculation” about “the period in time when the sexes became differentiated”⁵ and argues, without mentioning a specific text, that Ferenczi claimed that, “copulation took place between two similar individuals, one of which, however, developed into the

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stronger and forced the weaker one to submit to sexual union.” According to Freud, Ferenczi believed that “the feelings of bitterness arising from this subjection still persist in the present-day disposition of women.”⁶ It is not clear whether Freud refers in this quotation to any sort of matriarchal stage in prehistory, but he is certainly discussing a stage which, as he claims, took place before the patriarchal stage—a stage in which men were not yet the “stronger” sex. Freud’s uncertainty on this matter, however, can explain why he does not completely dismiss the “matriarchal” hypothesis—but attributes it to another scholar, Ferenczi.

Freud’s approach to the matriarchal stage reminds us of his more general uncertainty about female sexuality—notably describing it as a “dark continent,”⁷ yet unknown to the masculine world, nor to Freud himself: “Woman is different from man, for ever incomprehensible and mysterious, strange and therefore apparently hostile.”⁸ Under these circumstances, it is little wonder that bringing female sexuality and femininity into psychoanalytical theory remained a major task for Freud’s successors.

In his study of “matriarchal thinking” in Europe between 1860 and 1945, Peter Davies has suggested that “Freud’s ambivalence about the idea of an active pre-Oedipal influence of the mother on the male child leaves space for the rewriting of the Oedipal narrative on matriarchal lines.”⁹ Davies presents Andreas-Salomé, Carl Jung, and Otto Gross—all early twentieth-century psychoanalysts and thinkers from central Europe—as paradigmatic representatives of a certain theoretical effort being made at the time, to suggest possible affinities between the pre-Oedipal stage of the individual’s life, and the pre-Oedipal epoch of humanity, which allegedly existed in a state of prehistoric matriarchy. This way of thinking also flourished in interwar Britain. Indeed, during the 1920s and 30s, London became a major center for thinkers such as the classicist Jane Harrison and the novelist and critic Virginia Woolf, who were deeply influenced by psychoanalytical theory and yet tried to “rewrite” it along matriarchal lines.¹⁰

This chapter will focus on two of these scholars, the anthropologists Bronisław Malinowski and Geza Róheim. The latter did not live in Britain but was an influential figure in the British anthropological and psychoanalytical scene.¹¹ Both serve as paradigmatic examples of interwar psychoanalytical-anthropological scholars who attempted to idealize “primitive” forms of motherhood as part of their wider critique of mothers in modern societies. Modern motherhood is partly responsible, they argued, for the rise of authoritarian modes thinking and fascist political orders in interwar Europe.

Malinowski is known in the histories of both anthropology and psychoanalysis as one of Freud's harshest critics, after he famously rejected the Oedipus complex as a universal paradigm in the study of "primitive" cultures. But a close reading of his 1920s writings will show that Malinowski was not completely dismissive of psychoanalysis, and in fact adopted many of its methodological tools and theoretical concepts. His critique of Freud ~~arguably reveals a resistance to~~ European notions of the "civilized," which he thought as deeply imbued with Western patriarchal structure. Malinowski aimed to show that European societies are vulnerable to specific psychosomatic diseases, which do not necessarily exist in other parts of the world. Some of these diseases are caused by the patriarchal structure of the West and do not exist in matrilineal societies, he believed. The fact that these latter societies were ruled by women was, for Malinowski, the main reason why they did not suffer from some of the maladies of modern civilizations. However, his attempt to abandon the colonial dichotomy between the civilized and the savage and to develop a more relativistic anthropology was not fully successful. In many cases, this old dichotomy was only replaced by a new one, this time between "matrilineal" and "patriarchal" societies.¹²

When the Hungarian anthropologist and psychoanalyst Geza Róheim planned his expedition to Australia at the end of the 1920s, one of his main aims was to refute Malinowski's objection to the Oedipus complex as a universal category. But Róheim himself already belonged to a different generation of psychoanalysts, and Freud's writings were no longer his main source of influence. Drawing both on nineteenth-century British anthropology and on the works of Ferenczi and Klein on the relationships between mothers and children in early infancy, he found himself sharing many of Malinowski's assumptions on the allegedly maternal role in so-called primitive societies. Indeed, Róheim attempted to portray Australian aboriginal "primitivism" as the opposite to what he perceived—as did Malinowski—as the pathological civilization of the West. The crucial distinction for Róheim was between primitive "indulging mothering" and civilized "sadistic mothering." For him, motherhood was the key to understanding modern violence, sadism, and war. In this respect he was another representative of the ~~1920s~~ maternal shift in psychoanalytic discourse—that is, he was part of a much wider group of scholars, psychoanalysts, and anthropologists who aimed to locate the maternal pre-Oedipal period as the most crucial phase in the psycho-political shaping of the child's mind.

It should be noted at this point that Róheim's research can probably tell us very little about the difficult history of aboriginal children in the interwar period, and especially not about the dark history of what was known later as the "stolen generation"—namely, the systematic removal of aboriginal children from their families by the white Australian authorities. These children were forcibly taken from their parents on the basis that their indigenous mothers and fathers could not provide them with a decent education to become "civilized." One of the major sources of legitimation for these policies came from white maternalist movements, which aimed to "protect" children from their allegedly incompetent mothers. Starting in 1911, every state in Australia except Tasmania allowed the removal of children to homes and missions, some of them religious (like the one Róheim stayed at for four months) and others operated by the state.

Róheim was arguably blind to all that. Indeed, historian Warwick Anderson argues that psychoanalysis served as an epistemological tool for ignorance and thus made it possible for Westerners like Róheim *not* to see what was just in front of their eyes:

Róheim's psychoanalytic anthropology displaced the contemporary trauma that the Arrernte suffered onto the development of infantile sexuality. For the analyst, "object-loss" meant frustration of Oedipal desire. Yet, the Arrernte were more concerned with the loss of other objects, whether land, livelihood, or family members. Even as Cecil Cook planned the removal of mixed-race Aboriginal children from their families, Róheim was insisting their separation anxieties were internal manifestations of the universal family drama, thereby exonerating the settler state. In overtly sexualizing Aboriginal infants and adolescents, he ignored their sexual molestation by white men and others. Striving to make a general argument against the psychic cost of "civilization," Róheim had turned a blind eye to the real damage it wrought in central Australia.¹³

My goal in this chapter is not defend Róheim against such accusations. Indeed, to some extent Anderson's claims only strengthen my own argument that interwar European anthropologists idealized forms of "primitive" life as a protest against the homemade catastrophes of their own civilized, modern societies. But Anderson overlooked other places where Róheim was also very critical of the Hermannsburg mission in which he stayed, accusing

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their pedagogical methods of diluting what he perceived as the children's natural "innocence" with Western forms of punishment and torture. Moreover, idealizing the primitive mother was partly achieved by showing the positive outcome of preserving primitive forms of mothering, where mothers and children stay closely together. It is hard to tell if idealizing and romanticizing an imagined "pure" and "primitive" motherhood was Róheim's way of protesting against the cruel methods of the Australian state, but one may at least think that he did not totally turn a blind eye to what he witnessed.

Bachofen and the Shift to Mother-Right Theory in Anthropology

The publication of Johann Jakob Bachofen's book *Das Mutterrecht* (*Mother Right*) in 1861 was a major event in the history of nineteenth-century anthropology.¹⁴ This book became the main signifier of a radical shift in the approach to questions about the origins of primitive societies—a subject that had preoccupied the European imagination since the beginning of the colonial age. Bachofen mainly challenged some mid-nineteenth-century common views such as those of the Cambridge classicist Sir Henry Maine, who argued that all societies have a patriarchal basis. According to Maine, in all past societies, the father served as the head of the family. Thus, the family itself was perceived as an eternal entity and not as a historical institution. Ironically, Maine's main book, *Ancient Law*, was published in the same year as *Das Mutterrecht*. But while the former signifies the end of an era—the era of the "patriarchal theory,"¹⁵ the latter opened a new epoch of debates on what was considered by late nineteenth-century anthropology as mother-right societies.¹⁵

In *Das Mutterrecht*, Bachofen provided the readers with a scheme of five stages in the evolutionary process of the human kind:¹⁶ hetaerism, Demetrian matriarchy, Dionysian matriarchy, Amazonism, and the Apollonian age. The Demetrian stage, he suggested, was a matriarchal one. Among many other achievements of human society at that stage, he argued, the most important was that "woman was first to feel the need for regulated conditions and a purer ethic."¹⁷ This phase was characterized by matrilineal transmission of status, property, and political power. In terms of technology, Demetrian matriarchy can be defined by great progress in agriculture,

which Bachofen thought of as the natural gift of women to humanity. His explanation was that in contrast to men's inclination to spirituality, women have a natural affinity to material existence, hence the great advancement in agriculture. According to Bachofen, "no era has attached so much importance to outward form, to the sanctity of the body, and so little to the inner spiritual factor."¹⁸

For men, this sort of matriarchy was a time of initiation, when, as a collective, they were being educated by women in order to rule the world once they became mature. However, once men grew up, a new phase started, the Dionysian, in which men turned from women's children into women's lovers, but also women's rulers. As Cynthia Eller points out, now the "assertion of the primacy of 'male-phallic nature' (*männlichphallischen Natur*) and the domination of women by men within monogamous marriages" became central.¹⁹ Consequently, Bachofen argued, women started to despise men, and this created the conditions for a second stage of matriarchy, namely, Amazonism. But Bachofen dismissed this rebellion as "matriarchy out of hand, women gone wild"²⁰ and celebrates the Amazonian defeat, which signaled the last phase, the Apollonian age.²¹ At this stage, "spiritual life rises over corporeal existence, and the relations with the lower spheres of existence is restricted to the physical aspect. Maternity pertains to the physical side of man, the only thing he shares with the animals: the paternal-spiritual principle belongs to him alone."²² Bachofen truly believed that the emergence of patriarchal society provides strong evidence for the progress of humanity.

Bachofen's views were never fully accepted by mainstream nineteenth-century social sciences. Though anthropologists of the late nineteenth century such as John McLennan, Lewis Henry Morgan, and John Lubbock adopted Bachofen's idea of a "period of promiscuity" at the early stages of the evolutionary process of humanity, they could not accept a description of a mother-right period in which societies were dominated by women.²³ What Bachofen called "mother-right" societies, they thought, were no more than societies that had a matrilineal family structure—that is, family based on kinship of the maternal line. However, late-nineteenth-century anthropologists argued, there is no evidence for the claim that societies ruled by women had really existed. Sir James George Frazer summarized the view of many anthropologists when he said that "the ancient and widespread custom of tracing descent and inheriting property through the mother alone does not by any means imply that the government of the tribes which observe the custom

is in the hands of women; in short, it should always be borne in mind that mother-kin does not mean mother-rule.”²⁴

Psychoanalysis and Maternal Culture in the Fin de Siècle

The fin de siècle was indeed the historical moment when, under the influence of nineteenth-century figures such as Friedrich Nietzsche and Heinrich Schliemann, modernist high culture became preoccupied with collective fantasies about an allegedly prehistorical matriarchal past. This nostalgia for the maternal is well demonstrated in the story of the discovery and excavation of the ancient city of Knossos on the Island of Crete. Ancient Crete was perceived already by Bachofen and his contemporaries as a territory where one could find “traces of the matriarchal system” from the Minoan civilization.²⁵ Unearthing the archaeological site of Knossos, a remnant of Minoan Crete of the Bronze Age, all the more inspired this nostalgic sentiment toward the allegedly matriarchal culture of ancient Crete. The English archaeologist, Arthur Evans, who was the major figure behind this excavation at the beginning of the twentieth century (although it was discovered already in 1878 by the Cretan amateur archaeologist Minos Kalokairinos) was highly attracted in the first place by the reputation of Minoan Crete as dominated by feminine culture, and famous for being a place where the highest spiritual entity was the “Great Goddess,” which Evans described as “Goddess of Maternity.”²⁶

According to Evans, the archaeological site of Knossos was the labyrinth from the mythical story about Ariadne, the ancient princess and daughter of Minos, the king of Crete, who fell in love with the Athenian hero Theseus. According to the myth, Theseus went to Crete to kill Minotaurus, a mythical monster that guarded the labyrinth that Daedalus (father of Ikarus) had constructed, and Ariadne helped Theseus to find his way in and out of the labyrinth by using a skein. By presenting the site as the literal place of the mythological labyrinth, Evans mixed history with folklore, arguing that *Ariadne* in Greek means “most holy.”²⁷ Thus, he concluded that rather than being simply a Cretan princess, Ariadne was herself the Great Cretan Mother.

The unearthing of Knossos attracted great interest by a series of influential scholars, public intellectuals, and artists such as the classicist Jane Ellen Harrison, the dancer Isadora Duncan, the painters Giorgio de Chirico and Pablo Picasso, and the author Arthur Miller, as well as the poet, and one of

Freud's most famous analysands, Hilda Doolittle, better known as "H. D." Freud himself was fascinated by the excavation and its cultural implication ever since he heard about it in 1901. However, it was only in the mid-1930s, around the time of analyzing H. D., that he integrated some of the mythological ideas into his new curiosity about "female sexuality," as well as into his last great speculative "historical novel" (as he described it), *Mosses and Monotheism*.²⁸ As we know, for Freud, archaeology was a lifelong interest, let alone because of what he perceived as the analogy between the psychoanalytic practice and the archaeological one—both excavating past materials, layer by layer. Indeed, it was in 1931, precisely when Freud became more committed to better theorizing female sexuality, that he mentioned the discovery of Minoan-Mycenean civilization: "Our insight into this early, pre-Oedipus, phase in girls comes to us as a surprise, like the discovery, in another field, of the Minoan-Mycenean civilization behind the civilization of Greece."²⁹ Given his new interest in the "pre-Oedipal phases," the analysis of H. D. came just on time.³⁰ As Cathy Gere puts it, Freud thought that "the ancient Cretans lived through and also somehow 'laid down' the pre-Oedipal stage of the whole European race."³¹

Although Bachofen himself never became an authority in any of the relevant fields of his research, he was still identified more than anyone else with the matriarchal theory, and his ideas were appropriated by various political philosophies.³² The notion of a matriarchal society was not only popular among fin de siècle radical feminists across Europe and the Anglo-American world, but also became an important element in a whole discourse of "femininity" as a counterpower to what was perceived by many as the destructive force of modernity. Many critics of the modern industrial era argued that the transition from a traditional society to a modern one also involved a transition from feminine culture to a masculine and oppressive one. In her study of modernity and gender, Rita Felski writes: "From the paintings of Gustav Klimt to the writings of Lou Andreas-Salomé, the figure of woman emerged as an erotic-mythic creature, an enigmatic incarnation of elemental and libidinal forces that exceeded the bounds of reason and social order. In the modern yearning for a preindustrial world, she embodied everything that modernity was not, the living antithesis of the ironic self-estrangement of urban man."³³

The resistance to modernity took the form of nostalgia for the maternal as a representative of a lost "home."³⁴ The distinction now was not between *modernity* as a masculine form of life, and *tradition* as a feminine one, but

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between masculinity itself as *modern* and femininity as a *timeless* “archaic” form of life, which, like nature itself, stands out of human history. Freud belonged to the same generation as Gustav Klimt and Andreas-Salomé, but it remains an open question whether to identify him with the *fin de siècle* preoccupation with the feminine. In fact, as many feminists, from Karen Horney in the 1930s to Juliet Mitchell in the 1970s, have argued, the Freudian Oedipus complex is one of the main symptoms of modern patriarchal culture that had already been so heavily criticized by this *fin de siècle* European avant-garde. The nostalgia of these circles, at the turn of the nineteenth century, for maternal culture was precisely a desire for an imaginary past society which was not dominated by the Oedipal structure. As Felski points out, from a psychoanalytical perspective, this form of nostalgia was “explained in terms of a longing for the psychic plenitude of a pre-oedipal condition”—the stage when the dominant relationship in one’s life was with his or her mother.³⁵ Freud had much less to say about this pre-Oedipal condition than about the Oedipus complex. It should not be a surprise, then, that one of Freud’s famous critics was Malinowski, an anthropologist who carried out all his early major fieldwork in a sort of “dark continent”: in “primitive” matrilineal societies on islands off the east coast of New Guinea.

Malinowski and the Trobriand Father

Bronisław Kasper Malinowski was born in 1884 in Kraków, Galicia. His father, a notable professor of Slavic philology, died when Bronisław was only fourteen.³⁶ ~~In 1908 he completed his doctorate in philosophy and physics and, a year later, went to study physical chemistry in Leipzig,~~ where he also attended the anthropology and economic history courses of Wilhelm Wundt and Karl Bücher. In 1910 he moved to London and started taking courses in ethnology at the London School of Economics (LSE) where he was supervised by Edward Westermarck and C. G. Seligman. In 1913 he officially became an LSE research student.³⁷ In 1914 Seligman helped him join an anthropological group bound for Australia, and from there he went on to undertake his first fieldwork in south Papua, among the local Melanesians. Between 1915 and 1918 he spent two periods of ten months at the Trobriand Islands, east of New Guinea.³⁸ These years provided Malinowski with the ethnological data for his best-known interwar publications. In 1919 he married Elsie Rosaline, the daughter of the Australian anthropologist W. Baldwin

Spencer. Rosaline and Malinowski had three daughters. In 1920 they returned to Europe, and in 1923 he became a lecturer at the LSE. By the mid-1920s he was already acknowledged as one of the leading anthropologists of the time.

W. H. R. Rivers was a major influence on Malinowski's engagement with psychoanalysis. Rivers changed his career from medicine to anthropology but still retained his interest in psychiatry and psychology. In 1898 he joined the notable Cambridge expedition to the Torres Strait, which is considered one of the first instances of anthropological field research as we know it today.³⁹ For Rivers, however, it was not only an anthropological research: it had initially been conceived as "a project in comparative psychology," as John Forrester pointed out.⁴⁰ Although Rivers had known Freud's work for long time, it was only during the First World War, while treating shell-shocked soldiers at Maghull Hospital, that he engaged more deeply with Freud's writings, which he now found invaluable, especially his *Interpretation of Dreams*. Under this influence, Rivers published in 1918 an article, "Dreams and Primitive Culture,"⁴¹ which Malinowski received from his mentor, Seligman.

Seligman was a loyal follower of Freud and Jung. Although not a psychoanalyst, he was still well acclaimed by some of the main figures in British psychoanalysis. His paper "Anthropology and Psychology" (1924) had had an impact on psychoanalytic circles even beyond Britain,⁴² and in 1929 he was invited by Ernest Jones as a special guest to the Oxford International Psychoanalytic Association Conference.⁴³ He was also one of the first anthropologists to use psychoanalysis in his work. As Erik Linstrum has shown recently, he created a global network (mainly of other anthropologists) who helped him to collect natives' dreams from all over the British Empire. By using psychoanalysis for analyzing dreams, he aimed—only partly successfully—to show that dreaming and dream interpretation are essentially universal, and thus to prove a fundamental "sameness" between different minds in different places all over the globe. Interestingly, Seligman was far from being anti-colonial but thought that thinking of natives as "simple minded" is not only scientifically wrong, but counterproductive for the art of ruling.⁴⁴

Initially, Malinowski was not impressed by the idea of using psychoanalysis in anthropological work.⁴⁵ However, by the early 1920s he became interested in the question "How does society impress its norms on the individual?"⁴⁶ and now wanted to know what psychoanalysis had to contribute to this

discussion. Despite his image as one of the eminent critics of Freudian psychoanalysis, Malinowski was in fact deeply influenced by Freud, as he mentioned a few times throughout the interwar period.⁴⁷ In 1938, for example, he took part in a futile effort to nominate Freud for a Nobel Peace Prize.⁴⁸ When Freud and his family escaped from Vienna to London, Malinowski was one of the first to contact Anna Freud, presenting himself as a “devoted admirer of your Father and his Work,” and offering to help in any way.⁴⁹

Nevertheless, he did question one of Freud’s dearest claims: the universality of the Oedipus complex. Malinowski’s claim was that the Oedipus complex is a perfectly good description of the family structure in Western patriarchal societies but can be a problematic concept when applied to non-Western “matrilineal societies.” His paradigmatic case study was taken from his fieldwork in the matrilineal society of the Trobrianders, in the coral archipelagos of eastern New Guinea. Malinowski thought that because children in this society belonged to the mother and her brother, who in fact functioned as their father, rather than an Oedipus complex, children have to deal with an “avuncular complex.” “The mother and her brother possess in it all the legal *potestas*,”⁵⁰ and therefore the father is a relatively marginal figure in his children’s life: “The mother’s brother is the ‘ferocious matriarch,’ the father is the affectionate friend and helper of his children.”⁵¹

In other words, the biological father in eastern New Guinea has a role that is very different from what we know about the Western father. The biological father is not an authoritarian patriarchal figure but a “friend.” Hence, claimed Malinowski, “none of the domestic conditions required for the sociological fulfilment of the Oedipus complex, with its repressions, exist in the Melanesian family of Eastern New Guinea.”⁵² Moreover, he thought that the difference in family structure between the Western patriarchal world and the primitive matriarchal one explains why, in that part of the world, the incest taboo is linked more closely to the relations between sisters and brothers: the paternal role is performed by the maternal uncle, who lives with his sister (the children’s biological mother) as if they were partners, and therefore the forbidden desire is for the sister rather than for the mother. Indeed, this is why we can find stories about the maternal uncle as a “villainous, dangerous, and oppressive foe,”⁵³ rather than about the Western “castrated father,” for example.

In “The Psychology of Sex and the Foundations of Kinship in Primitive Societies,” Malinowski went even further to argue that “the idea that it is

solely and exclusively the mother who builds up the child's body, while the man does not in any way contribute to its production, is the most important factor of the social organization of the Trobrianders." The natives believed that "the child is of the same substance as its mother, and that between the father and the child there is no bond of union whatever." The Trobrianders "are quite ignorant of the man's share in the begetting of children," and therefore the father "has a purely social definition: he is the man married to the mother, who lives in the same house with her and forms part of the household."⁵⁴

The Trobrianders' "ignorance" of reproduction matters, and especially of the "begetting of children," is crucial to Malinowski's argument. Reading only the second section of this essay, entitled "The Male and Female Organism and the Sexual Impulse in Native Belief,"⁵⁵ one may think that the difference between the Trobrianders and Western people is merely the former's lack of physiological and anatomical knowledge.⁵⁶ In short, Malinowski argued that the Trobrianders do not see any connection between sex and pregnancy.⁵⁷ For example, the locals told Malinowski about some women, who "are so ugly and repulsive that no one believes that they had intercourse,"⁵⁸ but nevertheless they still have children. Albinos, too, "male and female are considered unfit for sexual intercourse,"⁵⁹ but albino unmarried mothers do exist. As Malinowski pointed out in his discussion of children of unmarried women, to "inquire who is the physiological father of such a baby, you simply talk nonsense to a native."⁶⁰

In the second half of the twentieth century, however, doubt was cast on crucial elements of Malinowski's argument about the paternal role in Trobriand. As we know today, Malinowski misunderstood important aspects of the local belief about the male role in the process of procreation. It is true that the Trobrianders believed that pregnancy cannot be caused by sperm but by spirits. However, according to their belief, sexual relations have a different role in the creation of a child. When the woman knows she is pregnant, the couple start to increase the frequency of their sexual relations, as this allows the father to shape the fetus's form and make it look more like him. In fact, it is extremely important for the Trobrianders that the child look like the father and not like the mother. As the anthropologist Maurice Godelier notes, Malinowski was right when he said that "in the Trobriand Islands, sexual relations and sperm have nothing to do with *conceiving* a child, but he was wrong to claim that for Trobrianders sexual relations had nothing to do with *making* a child."⁶¹ According to their tradition, making a

child is a project involving the mother and the father, where each has specific tasks, according to their specific abilities.⁶²

But why did Malinowski marginalize the paternal role when it is so central to the Trobriand society? One reason might be that he did not have the information that modern anthropologists have gained since he carried out his research. Another possibility is that he had some of the data but did not understand it correctly. Still another possibility, however, is that Malinowski did have some knowledge about the importance of fatherhood in Trobriand society but decided to ignore it or to use it very selectively. After all, marginalizing the paternal role fitted in with his other lines of research, namely showing that it is not only that Trobriand society is matrilineal in the formal sense, but also that motherhood is the main axis of this society, thereby denying the universality of the Oedipus complex.

Malinowski and Jones on the Universality of the Oedipal Structure

In 1925, Ernst Jones published his reply to Malinowski's critique.⁶³ As noted, Malinowski claimed that Western people are locked in what he defined as a "social dogma" of Western thinking, in which "every family must have a father; a woman must marry before she may have children; there must be a male to every household."⁶⁴ It is precisely these patriarchal domestic conditions, he said, that enabled the existence of the Oedipal structure. Jones, however, claimed that Freud "regards the relationship between father, mother and son as the prototype from which other more complicated relationships are derived."⁶⁵ That is to say that Freud, too, did not think that the Oedipus complex is identical in every society and in every culture. Indeed, according to Jones, Malinowski's data can be read as a good example of the secret ways in which Oedipal structures can take different forms in different historical circumstances. Malinowski failed to recognize, Jones argued, that what he thought of as the avuncular complex was actually a different type of the Western Oedipus complex. The forbidden desire for the sister is only a substitute for the initial forbidden desire for the mother, while the uncle takes the role of the father. Indeed, from a psychoanalytic perspective, the Oedipus complex is always about different ways of substituting the desire for the mother with a desire to someone (or something) else. For Malinowski, "the Oedipus complex would be a late product; for the psycho-analyst it was the *fons et origo*."⁶⁶

Malinowski replied to Jones two years later, in his notable book, *Sex and Repression in Savage Society*. If psychoanalysis wishes to be part of the social sciences, he argued, it should not “assume the universal existence of the Oedipus complex, but [study] every type of civilization, to establish the special complex which pertains to it.”⁶⁷ According to Malinowski, “in Dr. Jones’s essay, as in most psychoanalytic interpretations of folk-lore, custom and institutions, the universal occurrence of the Oedipus complex is being assumed, as if it existed independently of the type of culture, of the social organization and of the concomitant ideas.”⁶⁸ In contrast to this view, Malinowski claimed that “the nuclear family complex is a functional formation dependent upon the structure and upon the culture of a society.”⁶⁹ Indeed, it was Malinowski’s “relativistic” view that became the main point of dispute between the two.

However, one may ask whether Malinowski’s view in this debate was really relativistic, as many scholars of both disciplines—psychoanalysis and anthropology—thought.⁷⁰ It is true that he was aiming to refute the universality of the Oedipus complex in his research by giving a counterexample from a non-Western matrilineal society. It is also true that, theoretically, he supported a relativistic point of view in anthropological practice and encouraged others to do the same.⁷¹ But rather than suggesting a variety of different domestic structures in different societies, Malinowski’s analysis reveals a basic dichotomy between matrilineal and patriarchal societies, where each type is a mirror image of the other. Malinowski himself used the word *mirror* in the title of the second part of *Sex and Repression*, “The Mirror of Tradition,” in which he made a wider comparison between matrilineal and patriarchal societies.⁷² He proposed to “investigate whether the matrilineal complex, so entirely different in its genesis and its character from the Oedipus complex, exercises also a different influence on tradition and social organization; and to show that in the social life, as well as in the folk-lore, of these natives their specific repressions manifest themselves unmistakably.”⁷³

Interestingly, however, it is the psychoanalytical approach and language that Malinowski chose to use in his research on the matrilineal complex: “The examination of myth, fairy tales and legend, as well as of magic, will show that the repressed hatred of the maternal uncle, ordinarily masked by conventional reverence and solidarity, breaks through in those narratives constructed on the model of the day-dream and dictated by repressed longings.”⁷⁴ For Malinowski, the way to understand these people’s psyche is

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through their myths, fairy tales, legends, and magic—as all these are only masks for their “repressed longings.” That is to say that the content of their “repressed longings” is different from that of Western people (though mainly in a very specific way: repressed hatred of the maternal uncle rather than the father), but the structure of their mind is very similar. Like Westerners, they also have longings that need to be repressed, unconscious mental capacities to achieve this repression, and repression that will eventually “return” through fairy tales, dreams, daydreams, and the like.

This similarity in mental capacities allowed Malinowski to compare Europeans and Trobrianders. Malinowski started to present a set of dichotomies between the healthy “savage” and his or her contrast—the “neurotic” civilized man. He used the word *savage*, but his main distinction was not between “savage” society and “Western” or “civilized” society, but between matrilineal and patriarchal cultures. Thus, he noted that thirty miles off the Trobriand Islands, one can find the Amphlett Islands, which are “essentially similar in race, custom and language” but differ in “social organization” and especially in their “strict sexual morals.”⁷⁵ Although the Amphlett society is matrilineal, they still “have a much more developed patriarchal authority, and this, combined with sexual repressiveness, establishes a picture of childhood more similar to our own.”⁷⁶ We can see that Malinowski held a relativistic view in the sense that he was ready to distinguish between each society’s “social organization,” but in fact, his main tool for analyzing this social organization was to define whether it was a patriarchal or a matrilineal one. For example, he wrote:

We have seen in the comparative account of the child’s development among ourselves and in the Trobriands that the matrilineal complex is formed later in the life of a child, that it is formed outside the intimacy of the family circle, that it entails fewer shocks, if any, that it is due mainly to the play of rivalry, while its erotic thwartings do not go to the roots of infantile sexuality. Since this is so, the Freudian theory of neurosis would lead us to expect a much smaller prevalence of those neuroses (*Übertragungsneurosen*) due to the traumas of childhood.⁷⁷

Furthermore, he testified: “In the Trobriands, though I knew scores of natives intimately and had a nodding acquaintance with many more, I could not name a single man or woman who was hysterical or even

neurasthenic. Nervous tics, compulsory actions or obsessive ideas were not to be found.”⁷⁸

Malinowski, then, compares the Trobrianders with their more patriarchal neighbors, the people of the Amphlett Islands—where paternal authority is stronger, and where one can find many of these neurotic phenomena. In fact, Malinowski’s impression is that this is a “community of neurasthenics.”⁷⁹ In the Mailu of the south coast of New Guinea, “the conditions are even more repressive than in the Amphlett Islands,” as there they “have a pronounced paternal authority in the family, and a fairly strict code of repressive sexual morals.”⁸⁰ Accordingly, one can find neurasthenics more easily there than on the Trobriand Islands. Later Malinowski discusses the absence of dreams among the Trobrianders: “They apparently dream little, have little interest in their dreams, seldom relate them spontaneously, do not regard the ordinary dream as having any prophetic or other importance, and have no code of symbolic explanation whatever.”⁸¹ This “rarity of free dreams,” he argues, shows the “correctness in broad outline of the Freudian theory. For this theory affirms that the main cause of dreams is unsatisfied sexual appetite, and especially such sexual or quasi-sexual impulses as are repressed violently in infancy.”⁸²

These are the findings that allowed Malinowski to maintain that the Oedipus complex can occur only among societies where paternal authority is stronger. By the same token, Malinowski read the Trobrianders’ matrilineal myths as a direct reflection of their matrilineal culture: “There is not a single myth of origins in which a husband or a father plays any part, or even makes his appearance. That the matrilineal nature of the mythological drama is closely associated with the matrilineal repressions within the family should need no further argument to convince a psycho-analyst.”⁸³

He was aware that similar myths can also be found in patriarchal societies, where they could be interpreted according to Oedipal lines. However, he explained, he had nothing against a psychoanalytical interpretation, only against the way it was applied: “It is just the difference in the actors, in the cast of the play, which distinguishes the matriarchal from the patriarchal myth. It is the sociological point of view of the tragedy which differs. The foundations of the psycho-analytic explanations of myth we have in no way shaken. We have merely corrected the sociology of this interpretation.”⁸⁴

The main criterion in Malinowski’s sociology is the distinction between matrilineal and patriarchal societies. This criterion does not contradict any element of the Freudian theory except for one: the universality of the

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Oedipus complex; hence the effort to refute this element. But here we can also see why Malinowski's relativistic approach is limited. By comparing the Trobrianders to their own neighbors, and not only to Western societies, Malinowski tried to overcome the older dichotomy in nineteenth-century anthropology between the "savage" and the "civilized." But he did so only by replacing this colonial dichotomy with a new gendered dichotomy between the matrilineal and the patriarchal.⁸⁵

Róheim and the Saving of the Oedipus Complex

In 1928, the Hungarian psychoanalyst and anthropologist Geza Róheim and his wife, Ilona, started a three-year anthropological expedition that would take them to Aden and Djibouti, Central Australia, Papua New Guinea, and Arizona. ~~This research was funded by Princess Marie Bonaparte a psychoanalyst and supporter of the psychoanalytical movement in those years who thought that it would be a great contribution to the psychoanalytic world if a professional anthropologist from within the psychoanalytical movement would test some of Freud's anthropological assumptions.~~⁸⁶ The most important issue was to provide better evidence for the universality of the Oedipus complex, following Malinowski's challenge.⁸⁷ This was also the reason for Róheim's decision to spend nine months on Normanby Island, Papua, which was a matrilineal region. As he noted, "It is gradually coming to be a commonplace in anthropology to say: 'Oh yes, those analysts with their Oedipus complex. But the situation is quite different in a matrilineal, "fatherless" society!'"⁸⁸

Born to a well-off family, Róheim studied in Budapest, Leipzig, and Berlin, where he got his doctoral degree in geography. In Berlin he was first exposed to Freud's writings, and decided to develop a new field of "psychoanalytical anthropology." In 1915–16 he underwent analysis with Ferenczi; he was later qualified as a psychoanalyst by the Budapest Institute of Psychoanalysis, and within a few years became one of the main representatives of the Budapest school.⁸⁹ Róheim was a follower of nineteenth-century British anthropology at a time when this school was under attack by a new generation of anthropologists such as Alfred Radcliffe-Brown and Malinowski. Róheim was never part of this "new wave," and in fact was very critical of it. His critique of 1920s British anthropology stood in contrast to his strong affinities with interwar British psychoanalysis, including a close friendship

with some of its leaders, such as Ernest Jones and especially John Rickman.⁹⁰ In addition, his methodology was heavily influenced by the work of Klein, whom he knew also from her years in Budapest.⁹¹

The 1928 expedition was the most crucial point in Róheim's career. Apart from the fact that by taking this trip he stopped being an "armchair anthropologist" and became one of the leading fieldworkers of his time, this trip also revised some of his initial orthodox Freudian views. The findings of his fieldwork only partly fitted his scientific expectations, and in order to make sense of them within a psychoanalytical framework, he now needed to use other psychoanalytic theories as well, especially the works of Klein. This expedition also caused him to revise some of his old perceptions about the "savage" and the "civilized." Though Róheim did not yet completely abandon this dichotomy prevalent in Victorian anthropology, he very much changed the moral classifications that he attributed to each of these categories. Finally, in his post-fieldwork writings one may find surprising affinities between him and Malinowski. Both men attempted to bring some maternalistic emphases to the forefront of their work, and by doing so to give voice to what they perceived as the silenced maternal morality of the "primitive." Róheim's preoccupation with the maternal role in primitive societies was part of his wider attempt to think anew the impact of Western motherhood in the context of the rise of totalitarian political orders in interwar Europe.

"Tell Them (the Whites) That We Are Not Like Wild Kangaroos": Psychoanalysis in Central Australia

Starting in the second half of the nineteenth century, Australia had become the main laboratory of Victorian and Edwardian anthropology. The widespread belief among ethnologists, anthropologists, and other scholars was that if one wishes to search for the origins of humankind, one should go and study the Aborigines in Australia.⁹² Hence, many of the main debates of mother-right, kinship, and totemism at the turn of the nineteenth century concentrated on analyzing the ethnological data from Australia. Freud, for example, declared in the beginning of *Totem and Taboo* that his aim was to compare the psychology of primitive people and the psychology of neurotics, and for this purpose he proposed to study "tribes which have been described by anthropologists as the most backward and miserable of savages, the aborigines of Australia."⁹³

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But Freud was only an amateur, an armchair anthropologist, and therefore Róheim's aim was to bring the project of *Totem and Taboo* to its successful conclusion—namely, to collect evidence for Freud's theory on the “primal horde,” the murder of the father, and for the premise that all human beings—civilized and savages—have an Oedipus complex. However, Róheim, who hitherto followed Victorian anthropology, had to revise many of the assumptions he had before his journey:

My first impression during my field work was that savages are not nearly so savage as the anthropologists; or in other words, that they are not nearly so mysterious as one would think from reading Tylor, Frazer, Levy-Brühl, or even Róheim. Because we read so much about animism and magic, totemism and demons, we come to identify primitive people with these things unintentionally and to imagine them as always plagued by demons, or running into taboos, and passing their lives in a chronic state of terror. Similarly, if we only knew Europe from the Catechism, the Talmud, and the books of Folklore, we might easily imagine that the main occupations of the inhabitants of this continent were confessing, fasting, and telling fairy tales and legends.⁹⁴

Róheim, then, cast doubt upon the common European assumption that the “savage” is necessarily irrational. Indeed, he was well aware of the ways in which colonial power relations impact the perception of who is rational and who is not. He writes: “That one cannot transform a cannibal into a London shopkeeper in one generation is quite clear. But if Europe were to be colonized by a people who behaved to us as we do to the Pitchentara, I believe they will find their task more difficult.”⁹⁵

Róheim now felt that part of his anthropological task was to bring the authentic voice of the colonized, so-called primitive people to their colonizers—the so-called civilized ones. Róheim's informants, too, thought that this was his duty. On one occasion, for example, one of them said to him: “You have seen our land, our houses, our customs, but we do not know your country. When you go home, tell them (the whites) that we are not like wild kangaroos, eaters of rotten wood, but have our customs and habits also.”⁹⁶ Róheim's work now became much more meaningful: his mission was not only to analyze the “savage,” but also to bring his or her real voice to European people. Róheim differed from Victorian anthropologists and

from Freud himself, as he did not think of the “civilized” as superior to the “savage.” In fact, it was precisely because he thought of aboriginal people as human in every sense of the word that he also believed that they are as suitable as any other human being for analysis by psychoanalytical tools. He assumed that, like Europeans, they have an unconscious; that, like Europeans, they have an Oedipus complex; and that, as in the work with European patients, his interaction with them contains transference and countertransference.⁹⁷ As the historian Joy Damousi has recently pointed out, “in arguing that the self was universal, Róheim was positioning the unconscious of the indigenous self as a subject worthy of analysis and interrogation and not an inquiry to be dismissed as simple-minded or childlike.”⁹⁸

On Aggression and Sadism in “Primitive” and “Civilized” Societies

In his discussion of the civilized and the savage, Róheim distinguishes between *sadism*, which is “taking pleasure in a systematized ‘exhibition of power,’” and *aggression*, which is “a simple outburst of rage.”⁹⁹ According to Róheim, the native could be aggressive, “but he has not got a sadistic character.”¹⁰⁰ Sadism can be found only in European civilizations and not in the primitive cultures Róheim visited in Australia:

Although sadistic and masochistic tendencies form a part of primitive life, sadistic or masochistic perversions are completely absent; that is, we do not find that coitus or sexual pleasure is connected with punishment and suffering, or, more exactly, with imaginary punishment and imaginary suffering. The importance of the fact that these perversions are characteristic of civilization but absent in savagery will be evident if we consider their origin and meaning. Besides the fundamental fusion of genital and aggressive strivings their real significance is to be sought for in the severity of the super-ego which refuses to tolerate the sexual act except with the punishments endured in infancy.¹⁰¹

But why do sadistic and masochistic tendencies not exist in the primitive mind? Or, as Róheim put this question, “What is the structure of the super-ego in a really primitive community?”¹⁰² The answers to those questions

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are firstly a matter of the way one defines the superego and the place it takes in the developmental process of children. For Freud, the superego cannot be fully constituted without an Oedipus complex followed by a latency period which brings the conditions for a fully developed morality. According to Klein, the superego is to some extent part of the human condition. The relational nature of infants and their carers means that the superego exists from the beginning. For Klein, Róheim explains, “the child lives in an unreal world full of imaginary dangerous beings, and the origin of this phantasy system must be sought for, not only in actual experience in the ontogenetic development of the child, but essentially in the congenital aggressivity of the infant.”¹⁰³

For Róheim, the Kleinian understanding of the child and his or her feelings toward the mother “corresponds exactly to the phantasy system of Australian demonology,”¹⁰⁴ and indeed Róheim provides many examples for the usefulness of the Kleinian approach in interpreting the Australian “savage.” For instance, referring to “the culture-heroes of the *tjurunga* religion,” namely “the phallic wild-cat ancestors, frequently mentioned in myth as the associates of the demons,” Róheim writes: “If we use the terminology of Melanie Klein we might say that the devils represent the destructive penis (something that penetrates into the body, eats the body from the inside), the *tjurunga* the good penis (or the nourishing mammæ), by the aid of which it is possible to multiply food-giving animals.”¹⁰⁵

From a historical perspective, this Kleinian interpretation of an anthropologist such as Róheim should not be underestimated. One may argue, for instance, that the Kleinian terminology helped Róheim reframe the debate with Malinowski. As long as the superego was seen as a product of the Freudian Oedipus complex, Malinowski could argue that psychoanalysis has little to say about cultures in which the Oedipus complex does not exist, namely, matrilineal and matriarchal societies. As discussed before, Malinowski thought that while mothers had a biological role, fatherhood was perceived in some matrilineal cultures as a social function only. Therefore, he argued, the paternal roles in these societies did not allow the emergence of an Oedipus complex as we know it. But if the superego emerges much earlier, as a product of the relations between the mother and her infant, as Klein believed, then one might argue that just as some crucial elements of maternity are inherently cross-cultural and universal, so are some elements of the superego itself. For example, one could say that as breastfeeding is a universal element of mothering, so are its psychosocial

implications for the development of the child, as Klein suggested. This was one way of confirming the psychoanalytic claim for the universality of its theories. Malinowski, who was not a psychoanalyst, tried to abandon any claim for universalism in order to promote a relativistic approach to any psychosocial study. But Róheim's approach to mothering paved the way for psychoanalysts to deny relativism in the name of a universalistic structure of motherhood. Even if fathers in matrilineal societies have only social functions, as Malinowski suggested, motherhood always involves a biological dimension and is therefore necessarily universal, at least to some extent. However, both Malinowski and Róheim agreed that in searching for the cultural differences between "superegos" in different societies, one needs to look at the maternal role in those societies—whether these societies are matrilineal or patriarchal, and whether they are "civilized" or "primitive." We can recognize, then, another evidence of the shift of focus to the maternal, not only in interwar psychoanalysis but also in interwar anthropology and the social sciences.

To sum up Róheim's argument so far, he claimed that: (1) "civilized" people can be sadistic, while "primitive" people can only be aggressive; (2) the reason for this is that "civilized" and "primitive" people have completely different superegos; (3) the structure of the superego is rooted in early infancy, as Klein thought, and not in a post-Oedipal state as Freud believed.

Motherhood in Primitive Society

Róheim described the central-Australian mother as follows: "The Central Australian woman is a very good mother. She gives and never grudges. . . . No woman who has milk or even merely a breast to play with will refuse a child, and thus not only is frustration unknown but the child starts life in a happy state of communal motherhood. He can always get the nipple when he wants it and he is never weaned until he weans himself."¹⁰⁶

According to Róheim, mothers are responsible for the fact that if you "look at the zest with which the children eat each other's lice or dig for witchetties, the love of the chase, the pleasure the young men take in tracking big game, and you cannot doubt that you see a happy people."¹⁰⁷ But for Róheim, this happiness was far from being delusional, irrational, or unrealistic. The fact that Australian children do not suffer any maternal deprivation,

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claimed Róheim, means that they are much more capable of dealing with difficulties in life. In practical terms, it means that although “Mother Nature is a fickle dame indeed in the desert . . . yet nobody has ever heard that an Australian native feels anxious about to-morrow’s meal. Facts might well justify such an attitude, but there is no basis for it in the libido development. With such yielding mothers, we are all heroes.”¹⁰⁸

In psychoanalytical terms, it means that the “primitive man has a more superficial type of super-ego.”¹⁰⁹ This, however, is not only because of central-Australian motherhood, but also because the latency period “is absent or only faintly indicated among the most primitive races of mankind.”¹¹⁰ According to Freud, the latency period is when, after the dissolution of the Oedipus complex, the child’s sexualization process is suspended until the beginning of puberty. The child’s earlier sexual feelings are repressed, as well as the Oedipal struggle with the parent, which is now transformed into identification with them. It is also the phase in the child’s life in which sexuality in general creates feelings of shame and disgust.¹¹¹ But as Róheim points out, for the child, the latency period is also a play period. Infantile sexuality is being sublimated into “a series of substitutes.”¹¹²

For the central Australians, however, the sublimation process is very limited, and all games contain a nonsublimated sexual content. For example, Róheim describes how native children play father-mother games, which in many respects are similar to the way in which European children play the same kind of games. However, when it comes to sexual matters, in the native-Australian games, there is a very literal representation of the intercourse between “fathers” and “mothers.” For example, in what they called the *tukurpa* game, “the girls will take two leaves, one representing a girl, the other a man. First the two ‘leaves’ ‘sit down’ opposite to each other. Then the girl takes some saliva and, calling it semen, sticks it on both leaves. Now she rubs the two leaves together; they are *muranyi* (cohabiting).”¹¹³ The line between a sublimated “play-world” and a nonsublimated “real world” barely exists for central-Australian children, argues Róheim. While the “civilized” child is preoccupied with sublimating sexuality, the native is preoccupied with performing it: “When the Pitchentara and Yumu children were beginning to make themselves familiar with the new toys [European toys], Wili-kutu, Jankitji and the others began by putting the serpent and the paper trumpet to their penis as a sort of elongation and then they would run to the little girls or to each other and use this toy penis in exactly the same manner as they would have used the real one.”¹¹⁴ For native children,

“playing” is not necessarily considered a sublimation of something else but a “real” thing in its own right. Hence, one may argue that for natives, the difference between “life” and “play” simply does not exist.

Primitive Society and the Prolongation of Childhood

Central-Australian children do not have a latency period, but they do have to give up their infantile sexuality and grow up. When the time is right, the central-Australian child will go through an initiation process, which includes introcision and defloration for girls, and circumcision and subincision for boys. The purpose of the initiation is not only to make the child part of society but also to prompt him or her to respect the law—particularly the taboo of incest. The superego, explains Róheim, is constituted without a latency period and takes place all at once, in a series of initiation rituals that redefine the sexual taboos in a similar way to what we know from civilized societies. According to Róheim, however, this maturation process can fit into the Freudian structure, as it includes not only the abandonment of the infantile intimacy with the mother but also the creation of an Oedipal rivalry between the son and his father.¹¹⁵

But if the primitive child does eventually go through the Oedipal process, what is the real impact of not having a latency period? According to Róheim, the longer the childhood, the more civilized the society. In other words, the prolongation of infancy means cultural progress.¹¹⁶ Yet Róheim’s understanding of progress was different from the more common nineteenth-century liberal view of this notion. According to the liberal understanding of history, “progress” makes people more “independent.” But for Róheim, it was just the opposite: “The reward of human labour depends largely upon others,” and therefore “the higher the culture the greater the dependence.”¹¹⁷ Progressed—or civilized—societies can reward their members much more, but their members become much more dependent.

More important, however, was Róheim’s disagreement with the liberal perception that the civilization process is necessarily also a moralization process. In fact, he believed that the civilizing process itself—of which the latency period is perhaps the epitome—is when the Western child acquires his or her capacity for sadism. It is not only “indulging” or “sadistic” mothering that is at stake but also the “sadistic pedagogy” of the “civilized,” which starts during the baby’s early relationship with his or her “civilized”

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mother and is sustained throughout his or her development.¹¹⁸ In fact, one of Róheim's conclusions was that sadistic pedagogy and deprived motherhood are the two main elements in the political and cultural crisis of modern Europe in general and of the interwar Europe in particular.

For example, here are Róheim's impressions from the Hermannsburg mission,¹¹⁹ which served as a school for the native children:

The mission children go to school and although they are still in many respects real children of the desert they have undoubtedly been modified in certain respects. Out in the bush they run, wrestle, roll about and perform coitus, but I have never seen anything like the sadistic and masochistic games in which Depitarinja [one of Róheim's children informants] indulges. He has frequently been punished for the perfectly natural manifestations of his libido and these functions have thus become associated with the idea of torture and of being tortured. For the native may have an aggressive but he has not got a sadistic character. He will roar at a child or hurl a boomerang at him in a sudden fit of anger, but he will never deliberately punish him. Thus the child in the bush will never introject a sadistic super-ego and never enjoy the game of punishing or of being punished.¹²⁰

For Róheim, contact with a European mission was enough to bring sadism to primitive society, which hitherto knew only aggression. As noted, the central-Australian society was perceived as a sociological lab, where the anthropologist could assess the impact of civilization on allegedly "pure" natives. Therefore, for Róheim, the mission was the place not only to meet the "primitive" in its purest sense, but mainly to witness the effects of European influence on the people under observation. From his point of view, it was the place to assess "what went wrong" back in the "civilized" world from which he came.

The Maternal Roots of Sadism in Civilized Society

The "origins of war" was one of the main subjects of public debate in the late-Victorian and Edwardian periods, and it occupied a central place in the works of many post-Darwinian scientists, artists, and other British and European

intellectuals.¹²¹ Similar questions on this topic were still vital after the First World War, but the answers were no longer given primarily by evolutionary thinkers. Under the increasing influence of Marxism and psychoanalysis, many were now looking for answers to the question “Why war?” (the question that Albert Einstein famously asked Freud in their correspondence of 1932)¹²² in places other than biology—namely, in economics and psychology.

Some of the debates on the origins of war concentrated on economics, particularly on the Marxist argument that modern wars are the inevitable consequence of industrial capitalism and the violent competition between great imperial powers. The assumption that war and moneymaking are closely related became popular in the interwar British public sphere, especially—but not only—among leftist circles.¹²³ The capitalist system was seen now as responsible not only for the catastrophe of the First World War but also for all the masses “who will take part in the Second World War,” as Ellen Cicely Wilkinson and Edward Conze claimed in 1934 in their pamphlet *Why War? A Handbook for Those Who Will Take Part in the Second World War*.¹²⁴

However, psychological and sociological perspectives on the origins of war were no less common than economic ones. By the 1930s, strict Darwinian explanations of aggression and violence lost ground to new psychosocial approaches to these questions.¹²⁵ The comparison between animal and human behavior was now focused on research of the social behavior of apes. Amongst the new researchers of the late 1930s were also the psychoanalyst John Bowlby and the economist Evan Durbin. In 1939, the two published their research in the book *Personal Aggressiveness and War*, which was jointly based on Susan Isaacs’s observations of the behavior of children, and the primatologist Solly Zuckerman’s research on the behavior of apes.¹²⁶ Indeed, Zuckerman’s work was popular among several 1930s psychoanalysts, including Isaacs and Róheim.¹²⁷

Psychoanalysis was an influential discourse in arguments about the origins of war. The psychological origins of destruction and violence were one of Freud’s main interests.¹²⁸ In “Beyond the Pleasure Principle,” he argued that apart from the life instinct, people also have a death instinct, and consequently, life is an ongoing struggle between the two.¹²⁹ There was no issue on which Klein followed Freud more closely than the notion of the “death drive.” As Meira Likierman notes, for Klein “survival meant that the baby was born knowing about death and sensing his internal destructive instincts, and this first knowledge took the form of a primordial terror of annihilation.”¹³⁰

Klein, however, was not alone in her research on the psychological roots of destruction in early infancy. Leading British psychoanalysts tried to explain the origins of war from a psychoanalytical perspective; among them were John Rickman, Roger Money-Kyrle, and Edward Glover. It was particularly the latter who became a popular speaker on war and other related topics from a psychoanalytical perspective.¹³¹ An explanation of the reasons for the Great War, as well as the prevention of such wars in the future, were now perceived as depending on the understanding of the dramatic early stages of the relationship between mothers and their children.

A particularly interesting example of the Kleinian influence on the discourse of violence can be found in the work of the artists Grace Pailthorpe and Reuben Mednikoff. Pailthorpe was a surgeon and a psychoanalyst, while Mednikoff was a poet and a painter, and together they conducted a unique psycho-artistic experiment that they described as “psychorealism.”¹³² Influenced by Klein’s play therapy with children, they tried to mix up psychoanalytic practice and surrealistic technique in a very literary way—namely, they worked for many decades together, painting and interpreting their paintings in psychoanalytic settings and by psychoanalytic theory. Their paintings, writings, and commentaries suggest that in the 1930s they were preoccupied with two main issues: fascism and motherhood. In Kleinian fashion, many of the themes in their paintings were about their own childhood and their attempts to understand their own “trauma of birth.” By and through their art, they sought to retrieve what “really” happened in a very early age. But motherhood was also deeply connected to what they called the “virus of hate”—that is, the “virus” of fascism that was so pervasive in the 1930s. Indeed, in the interwar period, motherhood and collective mass violence were well connected in the public imagination. Thus, for instance, Pailthorpe suggested that “physical and verbal attacks upon the helpless jews [*sic*] were a projection of their own unconscious animosity towards the baby who, in infancy, it was imagined, possessed all the good things in life (the breast equivalents). . . . Hitler and Mussolini . . . would never have become insanely dictatorial had they had, as children, ample opportunity to vent their infantile rages and to lessen the emotional tension imposed by fears and frustrations.”¹³³

Thus, interwar debates over the origins of war provide the context for Róheim’s critique of “civilized” societies and his idealization of motherhood in primitive societies. Addressing his work precisely to the main social

problems of modern urban society, he argued that primitives “lack the inclination to make pain permanent, to exalt suffering into a national institution. The same is true of criminality.”¹³⁴ In *The Riddle of the Sphinx*, he said that “tyranny, intolerance, and hate in religions or in classes and extreme nationalism, in short, the whole sado-masochistic organization of society . . . is really typical of civilization.”¹³⁵ He did not argue that the civilized man or woman is not more progressed than the savage, but that progress itself should be reconsidered:

Civilized man has not adapted himself to nature, he has adapted nature to his own needs. The animal is mainly autoplasmic, civilized man mainly alloplasmic, while the savage ranges somewhere between the two. But I think we have paid a great price for our triumph. We had to modify ourselves in order to modify nature, for our achievements in civilization since the totemistic period are mainly based on anal character formation. Agriculture, trade, cattle-breeding, forethought for the morrow and cleanliness are all due to a new era in the character development of mankind.¹³⁶

It is this modification of human nature that created the psychological conditions for modern sadism. As we recall, Róheim distinguished between aggression and sadism, arguing that the “savage” is capable of the former but not of the latter. Since he or she did not go through the process of weaning, the savage belongs to what Róheim defined as an “oral optimist, that is, the person who believes that there will always be somebody to give him what he wants.”¹³⁷ This does not mean that in primitive society there are no rules or taboos, but that these are very different. For example, “[breaking] the food taboos is punished by the magic of the old men, not by an automatically functioning evil magic inherent in the food. If the food were simply grabbed by the stronger men and kept for themselves we should be nearer to the dominance system of the anthropoid apes, or if the breakers of the law were troubled by their conscience this would be civilized society.”¹³⁸

In contrast to the system of “anthropoid apes” or to civilized society, the superego of so-called primitive people “does not keep a permanent and rigid watch on human behaviour in such a manner as to endanger ego-strivings, to make life more difficult. . . . In Central Australia anal and urethral impulses are nearly completely free, not frustrated nor sublimated into the service of the ego or super-ego. There is no ‘sphincter-morality.’”¹³⁹

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As we already know from Chapter 1, Ferenczi thought of the sphincter-morality as a “physiological forerunner of the ego-ideal or super-ego.”¹⁴⁰ This concept was particularly important to Klein, as she was trying to argue that the superego emerges much earlier than the Oedipal confrontation with the father.¹⁴¹ Other followers of Klein described this state in different terms but with the same purpose: linking the superego—which by definition has a punishing factor—with maternity. The Kleinian analyst M. N. Searl, for example, described introjections of the mother in the child’s unconscious as based on the “principle of talion punishment—an eye for an eye, and a tooth for a tooth.”¹⁴²

Ferenczi, Klein, and Róheim can tell us a great deal about the preoccupation of interwar psychoanalysis with the notion that a hostile superego is constituted during one’s very early childhood, when the formative relationship is with mothers and not with fathers. Thus, we can see that by the late 1920s Freud was no longer the sole or dominant influence within the psychoanalytical movement.¹⁴³ The decline in Freud’s authority can partly explain why some earlier, more Freudian representations of fathers as domineering figures were now replaced by other representations of domineering mothers. However, one cannot ignore the fact that some of these images are imbued with a misogynistic discourse, which perceived mothers as dangerous and hostile. Indeed, idealizing primitive motherhood was another form of “blaming” mothers in civilized societies, who were now perceived by some as a symbol of all illnesses of modernity in general and of the interwar fascist crisis in particular. This traditional and gendered perception of the maternal role did not come solely from the right (e.g., the so-called fascist “cult of the mother”) but also from liberal circles such as the psychoanalytic and anthropological milieus in interwar London.

One of Róheim’s first claims was that we should look for the differences between cultures “not in our instinctual life, but in our ideals; not in the id, but in the analysis of the super-ego.”¹⁴⁴ Therefore, if the superego was now perceived as a maternal issue, as was discussed in first chapter, then any new psycho-political analysis had to devote attention to the role of motherhood. Indeed, the perception of the superego as a maternal entity should specifically be put in the context of the 1930s crisis, which Róheim himself described as “days of darkness when the old ideal of individual liberty and happiness has nearly disappeared.”¹⁴⁵ This can also explain why some of these theorists, including Malinowski and Róheim, mystified and idealized mothers in primitive societies to contrast them with so-called civilized mothers.

Thus, they could define the interwar European crisis as a problem of civilized motherhood, which they perceived as imbued with unconscious sadistic feelings of punishment and revenge. By connecting motherhood, sadism, and cultural character, Róheim politicized the “primitive mother,” which was now suggested as a symbol of, if not an actual antidote to, toxic domesticity in the patriarchal societies in Europe. But this maternalist discourse did not have much to say about the political power that mothers and women have—or have not—in so-called matriarchal societies. In her intervention about the “danger” of “dominant mothers” in 1930s America, Margaret Mead suggested:

A woman with a dominating personality might function as a perfectly adequate mother in a matriarchal society, she may be so handicapped and confined in a patriarchal society as to cease to be an effective cultural surrogate. The fact of female dominance in the fields of consumption, leisure time activities, and the home in America has often mistakenly been described as a matriarchy. This is essentially false. A matriarchy is a society in which certain important institutional behavior in regard to descent and property is legally demanded of and guaranteed to women, so that all sanctions of that society lie behind such behavior to control it and integrate it.¹⁴⁶

For Mead, matriarchal societies are not only a maternalist utopia, in which the relationship between mothers and children are more emotionally fulfilling, but also societies in which women and mothers had a real political power. The question of whether or not male maternalist thinkers such as Róheim or Ian Suttie—the focus of the next chapter—were willing to provide such political power to women in their political vision for an ideal society remained open.

CHAPTER 4

Imagining the “Maternal” Past: ~~Ian Suttie’s Critique~~ of Oedipal Culture

In Pagan Teutondom there was little of the ambivalent antagonism to the father, of the horror of sex, and of the contempt for women (really jealousy and guilty avoidance) that characterizes Christo-Judaic culture and the psychoanalytic teaching; and I venture to question whether, in mental conflict and social discords, we have not paid too heavily for *our freedom from Pagan superstition*.

—Ian D. Suttie, 1932

The scientific and cultural usage of the concept of regression in psychoanalytical discourses throughout the twentieth century was closely associated with the concepts of motherhood and the maternal. Freud and Ferenczi thought that there is a strong affinity between regressive mental states and an archaic desire to restore one’s most intimate relationship with one’s mother, namely the period of being an embryo in the womb.¹ Later psychoanalytical thinkers, particularly in Britain, were less preoccupied with the biological condition of “being in the womb” (although they did not completely dismiss this aspect). They saw the “maternal relationship” as much more than its biological dimensions: they viewed it as the initial psychological and ethical paradigm for any social relationship in our world. This was common knowledge in the early days of humanity and even in some premodern matriarchal societies, argued some scholars. However, this knowledge was abandoned and forgotten in the civilizing process, especially in the modern period. It was these forms of maternal knowledge and values that some in the regressive tradition wished to restore.

First, this chapter provides a short history of the regressive tradition in late nineteenth- and early twentieth-century human sciences—on the Continent and in Britain. Then, it will focus on one of the major representatives of this tradition in interwar Britain: the Tavistock psychiatrist Ian D. Suttie (1889–1935). Suttie argued that regression is considered a pathological phenomenon only because of the ways in which notions such as childhood and adulthood were socially constructed in Western modern societies, and that it is considered pathological only according to the norms of our patriarchal social order. Modern societies, claimed Suttie, are dominated by what he described very negatively as an “Oedipus culture,” which condemns the first attachment of the child to his or her mother. The Oedipal culture forces the child, at a very early stage, to give up this bond in favour of identification with a “jealous father.” Any regressive phenomenon in adulthood is perceived as an attempt to recover this primal bond with the mother, and therefore as a threat to the paternal order. Hence, Suttie deeply criticized Freudianism as a representative of patriarchal culture; he also criticized it for what he considered to be its pseudobiological premises—premises which, he thought, serve well to present the patriarchal structure of modern society as an inevitable “natural” order.²

The Biological Origins of Psychoanalytical Theories of “Regression”

In order to understand the wider meanings of regression in the early history of psychoanalysis, we must first situate the Freudian theory within the phylogenetic tradition, which is associated with the nineteenth-century theory of recapitulation. This theory (known also as the biogenetic law) was largely promoted by the German Darwinist biologist Ernest Haeckel (1834–1919), who famously argued that ontogeny recapitulates phylogeny. Haeckel, who coined these terms, explains that “phylogeny is the developmental history [*Entwicklungsgeschichte*] of the abstract, genealogical individual; ontogeny, on the other hand, is the developmental history of the concrete, morphological individual.”³ The historian Stephen Jay Gould explains Haeckel’s theory as the view that “an organism, during the course of its embryonic growth, passes through a series of stages representing adult ancestors in their proper historical order.”⁴ In other words, traits of the evolutionary process of humans as distinct from other biological species can be found in each one of us.

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Haeckel thought of the correspondence between ontogeny and phylogeny mainly in physiological terms, but his Freudian adherents took it even further and proposed a parallelism between ontogeny and phylogeny on the mental and psychological level as well.⁵ Thus regression became a key psychoanalytical concept that could connect the psychopathology of the individual, the history of cultures, and evolutionary biology. As Celia Brickman notes, “regression was the mechanism that returned neurotics to an earlier stage of human development as well as to an earlier stage of human evolution, where, like savages, they became narcissistic, prey to omnipotence of thoughts and to the animistic belief that ‘they can alter the external world by mere thinking’ and by obsessive, ritual acts.”⁶

In some of Freud’s writings on theories of phylogeny, he relied heavily on Haeckel’s two major intellectual sources, Jean-Baptiste Lamarck (1744–1829) and Charles Darwin (1809–82).⁷ Their two models of evolution are competitive, although they share some important elements.⁸ A comparison of Lamarck’s and Darwin’s roles in Freudian thought lies beyond the scope of this research, but it is worth noting that both considered the human being to be part of nature—not a separate “divine creation,” outside of the evolutionary chain.⁹ Both were also committed to the notion of adaptation in the history of the species, although each understood this concept differently. Lamarck maintained that the history of nature is necessarily a history of progress. On the one hand, he claimed the inheritance of acquired characteristics passed from one generation to the next; on the other hand, he believed in the adaptation and adjustment of any organism to its specific environment. Some environments cannot provide the right circumstances for every inherited characteristic to manifest itself in a given generation, but all the acquired characteristics will be “held in storage,” waiting for the right time or environment to manifest itself.¹⁰

Lamarck was committed to the belief in the harmony of nature, and therefore he did not think of “adaptation” in terms of a struggle between competing organisms, but rather as a precondition for the possibility of all organisms living together in peace. Darwin, however, thought of the history of species as the story of the extinction of many species, and adaptation was for him a process in a wider struggle, which enables some life forms to survive through change. Both of them considered the “origins of the species” to be a vitally important question, but for Lamarck any phylogenetic trait from the past was evidence for the preservation of acquired characteristics, while for Darwin it was evidence for the extinction of a full range of biological variations.

Freud mentioned Darwin frequently, while Lamarck only in his correspondence with others, and mainly in his correspondence with Ferenczi between 1916 and 1918. However, by the time of the publication of Freud’s manuscript “Overview of the Transference Neurosis”—which was written in 1915 but discovered only in 1983 by the German psychoanalyst Ilse Grubrich-Simitis—we have good reasons to believe in the major influence of Lamarck on Freud.¹¹ This newly discovered paper explores the strong Lamarckian tendencies in Freud’s thought, as well as some strong Ferenczian influences. Indeed, we can also read this text as part of the extensive correspondence with Ferenczi over the development of Lamarckian psychoanalysis by the end of the First World War. As Freud wrote to Ferenczi on 22 December 1916: “Our project, ‘Lamarck and Ψ A,’ suddenly came to mind as hopeful and rich in content. I am predicting all kinds of things there and am actually already convinced about it.”¹² Almost a year later, in a letter to Karl Abraham of 11 November 1917, Freud writes: “Have I really not told you about the Lamarck idea? It arose between Ferenczi and me, but neither of us has the time or spirit to tackle it at present. The idea is to put Lamarck entirely on our ground and to show that his ‘need,’ which creates and transforms organs, is nothing but the power of ~~Ucs.~~ [unconscious] ideas over one’s own body, of which we see remnants in hysteria, in short the ‘omnipotence of thoughts.’”¹³ Freud, however, did not find “the time or spirit to tackle” the subject again after 1918 and abandoned this ambitious project. It was Ferenczi alone who had to pursue this speculative line of thought of putting “Lamarck entirely on our ground.”

But while Freud was preoccupied with Lamarckism only for a relatively short period, he never stopped trying to link psychoanalysis with the nineteenth-century theory of recapitulation—which itself was very much a Lamarckian theory. The risk, however, in this route was that if the history of individuals and societies was determined only by biological factors, there was no point in suggesting any kind of theoretical or practical psychology, including psychoanalysis. Freud certainly did not want to end up with a deterministic theory of the mind. In the 1914 preface to the third edition of “Three Essays on the Theory of Sexuality,” he wrote: “Ontogenesis may be regarded as a recapitulation of phylogenesis, in so far as the latter has not been modified by more recent experience. The phylogenetic disposition can be seen at work behind the ontogenetic process. But disposition is ultimately the precipitate of earlier experience of the species to which the more recent experience of the individual, as the sum of the accidental factors, is

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super-added.”¹⁴ But how can we differentiate between the “precipitate of earlier experience of the species” and one’s “recent experience”? What is the right way of analyzing the individual in contrast to his or her group? Is it useful at all to use social theory for that purpose, or would it be better to concentrate on investigating people’s heredity? And what is psychoanalysis really: psychology, anthropology, or biology?

Some answers might be found in *Totem and Taboo*, one of Freud’s seminal texts on phylogenesis and the origins of human society. In the tradition of Enlightenment philosophers like Hobbes and Rousseau, *Totem and Taboo* presents a social contract theory for explaining the emergence of civil society from a mythical “state of nature.” According to Freud’s story, such a social contract was the outcome of unconscious guilt among brothers in a clan after killing their domineering “primal” father, who kept all the women to himself and excluded all competing males from the “horde”: “The earliest moral precepts and restrictions in primitive society have been explained by us as reactions to a deed which gave those who performed it the concept of ‘crime.’ They felt remorse for the deed and decided that it should never be repeated and that its performance should bring no advantage. This creative sense of guilt still persists among us. We find it operating in an asocial manner in neurotics, and producing new moral precepts and persistent restrictions, as an atonement for crimes that have been committed and as a precaution against the committing of new ones.”¹⁵ Thus, *Totem and Taboo* is an allegory for the formation of an intergenerational social contract, one based on guilt, which acts as the force behind respect for the law.

However, although Freud introduced the idea that we inherited a “creative sense of guilt” from the brothers in the clan, he did not explain the mechanism by which this guilt passes from one generation to another. How did this guilt stay with us? Did we inherit it through our culture, or do we have it in our blood? *Totem and Taboo* suggests that both are possible. We could speak, for example, about the feeling of guilt as something which “persisted from generation to generation, perhaps merely as a result of tradition transmitted through parental and social authority.”¹⁶ At the same time, Freud leaves some room for the possibility that a transgenerational “heritage of emotion” exists.¹⁷ Here again Freud lets his followers decide whether heritage of emotion is a biological concept or a consequence of historical and social circumstances and experiences.¹⁸ By 1939, in *Moses and Monotheism*, Freud was much more convinced of the biological element of phylogenetic transmission: “We find that in a number of important relations our

children react, not in a manner corresponding to their own experience, but instinctively, like the animals, in a manner that is only explicable as phylogenetic acquisition.”¹⁹ But one may argue that Freud’s corpus should not necessarily be read chronologically, as if the last chapter—*Moses and Monotheism*—contains all the unanswered theoretical questions that Freud evoked throughout his life. Avoiding reading Freud in this way may cause some trouble in determining whether Freud was Haeckelian-Lamarckian and to what extent, but it could also do justice to the complexity of the Freudian corpus.

Freud was not, of course, the only nineteenth-century social theorist who was influenced by the theory of recapitulation. Among those who adopted its principles were the biologist and political theorist Herbert Spencer (1820–1903) and his follower, the neurologist John Hughlings Jackson (1835–1911).²⁰ It is the latter who particularly emphasized that any notion of evolution must contain the possibility of the reverse process, that is, a process of “dissolution.” This concept was crucial for his neurological theory of mental illness, since he described insanity as dissolution of the progressive regions of the mind toward an evolutionarily more primitive stage of the mind. It is no wonder that his influence on Freud was crucial, and that he is considered by contemporary psychoanalytic literature as the precursor of the notion of regression.²¹

Ferenczi was perhaps “boldest” ~~to use Freud’s words~~²²—in these recapitulationist attempts. He considered himself to be “an adherent of Haeckel’s recapitulation theory, according to which the developmental history of the individual is an abbreviated repetition of the developmental history of the species.”²³ He was willing to take the Lamarckian-Haeckelian view very seriously, even at the price of giving up his psychology for a new “metabiology,” which would apply recapitulation not only to physical but also to psychic life.²⁴ At least in some of his writings, Ferenczi was aware of the consequences of his approach, mainly the possibility of reducing all of the Freudian metapsychological achievements to biological heredity. “I got lost in *biological* problems and can’t find my way back to psychology!” he wrote to Freud on 2 February 1915.²⁵ In another letter (29 April 1916), Freud recognized Ferenczi’s biological tendencies by saying: “I maintain that [biology] is your real field, in which you will be without peer.”²⁶

In his book *Thalassa: A Theory of Genitality* (*Versucheiner Genitaltheorie*), published in 1924, Ferenczi suggested a new theory of parallelism between ontogeny, phylogeny, and *palingenesis* (history of the entire species), and

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thought that with this approach he could show that the theory of recapitulation and psychoanalysis were complementary.²⁷ For Ferenczi, regression was the common theme for the history of the species and for psychoanalysis, because in both cases we are dealing with common physical and emotional regressive traits. As noted, regression was conceived by Ferenczi as an actual phenomenon. *Déjà vu*, for instance, occurs when our body recapitulates some traits of this historical phase, and that trait can be revealed in a later stage as *déjà vu*. In a case published in 1912, Ferenczi suggested to one of his patients that her sensitivity to her fiancé's bad smell was a reaction to his confession that he had been with other women before her. When Ferenczi gave his interpretation, she reacted by saying that she felt that moment, in the treatment room, as if "it [had] all happened to [her] before!"²⁸ Ferenczi explained to her that she was having a *déjà vu*, and her reply was: "We used to say [in our childhood] that the reason why things sometimes struck us as so familiar was because we had met them before, when we were still frogs!" Ferenczi then "drew her attention to the fact that, when she was still a 'frog' (an embryo), she had really been in most intimate contact with another woman's body (her mother's), and moreover in close proximity with organs and excreta the smell of which (as I already knew) were extremely repulsive to her."²⁹

In *Thalassa*, Ferenczi provided his most radical ideas on the regressive. He suggested that the whole earth used to be one big ocean, where the only form of life was an idealized "aquatic mode of existence."³⁰ But the recession of the oceans created a huge catastrophe for all living things and forced them to begin the evolutionary process of the species: "For, we reflected, what if the entire intrauterine existence of the higher mammals were only a replica of the type of existence which characterized that aboriginal piscine period, and birth itself nothing but a recapitulation on the part of the individual of the great catastrophe which at the time of the recession of the ocean forced so many animals, and certainly our own animal ancestors, to adapt themselves to a land existence, above all to renounce gill-breathing and provide themselves with organs for the respiration of air?"³¹

However, according to Ferenczi, it was not only the respiratory system that had to be provided: we can read the development of the entire human body as a response to this catastrophe. For instance, Ferenczi did not have any doubt that fish are *not* a symbol for the penis, as is traditional in many cultures, but the other way around: the penis was created by the evolutionary process to enact the life of a fish swimming in the water, in order to satisfy a

human desire to regress into the timeless heavenly “thalassic” times. In fact, the act of coitus itself, Ferenczi suggested, is not only a means of procreation, but the reliving of the aquatic mode of existence: “the expression of the striving to reproduce the intrauterine and thalassal situation seemingly long since transcended.”³²

Ferenczi evaluated this “bio-analytic” approach even further in his essay, “Psycho-Analysis of Sexual Habits” (1925).³³ Thus, for example, he claimed that

[it] is not impossible that up till now we have greatly underestimated the biological and physiological significance of the sphincters. Their anatomical form and mode of function seem to be specially adapted to the stimulation, accumulation and discharge of tensions. . . . It is easy to demonstrate the displacement of innervation from one sphincter to another or to several others. For example, a state of anxiety is usually heralded by marked constriction of the anal orifice, accompanied as a rule by a tendency to empty the bladder. . . . These sphincter observations suggest that the explanation of many neurotic symptoms lies in their relation to castration anxiety, birth anxiety (Rank), and to the, as yet, incompletely understood anxiety of parturition.³⁴

Here, again, we can see the way in which the evolution of the human body served Ferenczi as evidence of the existence of a more archaic mental reality, which demanded to be embodied in the body, and which consequently influenced tremendously its physical evolution.³⁵ It is not only that anxiety, for example, could be “written on the body” as “a constriction of the anal orifice,” but that this part of the body was designed in a way which would enable people’s anxieties to be expressed.

Another example of Ferenczi’s bio-analytic approach is his theory about the mechanism of “hysteria.” He writes in 1921 that, in hysteria, “the pathogenic psychic material of the hysteric can use the associated physical memory material as a means of expression.”³⁶ The body preserves memories in a way which Ferenczi described—using hysteria as a paradigmatic example—as “the mechanism of the ‘leap from the mental to the physical.’”³⁷ For Ferenczi, as we have already seen in *Thalassa*, some sort of “physical memory” must be exist in order to show that “ontogeny recapitulates phylogeny” on all levels—physical and psychical. However, it should be noted that although “physical

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memory” might sound like a perception that integrates body and mind, for Ferenczi, the “psychical” (memories) comes before the “physical” (body), and transforms it according to its own needs.³⁸

The Freud–Ferenczi correspondence, as well as Freud’s “Overview of the Transference Neurosis,” shows that all these highly hypothetical theories were not alien to Freud. One may say that Ferenczi “radicalized” Freudian tendencies and expressed some perceptions which Freud himself could not express. However, this “wild” fusion of psychoanalysis and biological evolutionism made psychoanalysis even more vulnerable to criticism by scientific circles. As philosopher of science Patricia Kitcher has pointed out:

[If] Lamarck was right and recapitulation true, then it was reasonable to construe childhood and neurotic behaviour (which allegedly involved a regression to childhood forms) in terms of the practices and experiences of primitive humans; it was reasonable to hypothesize a primitive portion of the mind in which this material was stored. . . . The problem is that support could not run in the other direction. Psychoanalytic psychiatry and evolutionary anthropology, recapitulationism, and Lamarckianism, were not mutually supporting. . . . Psychiatry could provide no serious evidence for such specific biological hypotheses.³⁹

However, one of the major achievements of the psychoanalytical movement in Britain after the First World War was that it flourished despite the difficulties it faced in gaining ground in scientific circles, ~~which had been Freud’s intention~~. The notion of regression is a good example of a concept whose influence was achieved through its adoption as a psychosocial explanatory tool by much wider circles than the biological and medical communities.

The History of “Regression” in British Psychoanalysis

Many early twentieth-century British psychiatrists and psychologists also gave priority to biology in discussing regression. Some interwar British social scientists, for example, tended to describe the human condition as a continuing struggle between primitive animal instincts and the “human will.”⁴⁰ W. H. R Rivers, for instance, defined regression as a state “in which an instinctive process characteristic of infancy persists in its capacity for activity

in later years.”⁴¹ Moreover, he perceived regression as a collapse of the “controlling forces” of the mind and the returning of humans to a much more primitive stage in biological evolution.⁴²

The view of regression among psychoanalysts was not so different from the mainstream psychiatric approach: they all tended to believe in some primal biological instincts as the source of regressive phenomena.⁴³ But the question was not necessarily what is the best way to define *regression*, but in what cases it can be used and in what context. The popular British psychologist William McDougall, for instance, used this term “in a purely descriptive sense, without meaning to imply any theory of the process or condition.”⁴⁴ What is more, he argued that his interest in publishing cases of severe regression of shell-shocked soldiers was precisely because “[among] all the wealth of cases presenting an immense variety of combinations of symptoms and conditions, these cases, in which the dominant feature is regression to early childhood, seem to have been comparatively rare, and the nature of the condition and of the processes involved in its onset remain to my mind obscure and deserving of further discussion.”⁴⁵ McDougall addressed this statement directly to those psychoanalytical circles that used *regression* in a much more metaphorical sense and for much wider purposes.⁴⁶ Indeed, this word had become part of the psychoanalytic jargon in clinical descriptions of patients,⁴⁷ but in that period people were also using it as part of their attempts to deploy psychoanalytic theory in other fields of the social sciences and the arts. This was the case, for example, in the study of delinquency, which became very dominant in interwar Britain. Criminality was no longer only a moral sin but also a sign of psychological regression.⁴⁸ Regression in its psychoanalytic sense was perceived as a culturally induced condition responsible for a great deal of abnormal, pathological, and antisocial behavior. Recognizing people’s regressive states became central to the interwar understanding of, and the development of solutions to, all sorts of medical-social problems, specifically to all kinds of antisocial behavior, “from bed-wetting to train-wrecking,” to use Donald Winnicott’s phrase.⁴⁹

It is only after the Second World War that we can recognize a shift in the usage of the term *regression* in the psychoanalytic discourse in Britain, from a metaphorical register to that of the real. Regressive phenomena were now treated much more seriously and were considered legitimate subjects of scientific investigation. The word *regression* was used less to describe unacceptable behavior and much more to designate a real mental state, now perceived as an unavoidable state in some circumstances, and one which

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can appear in each of us at some stage in our lives. Ian Suttie was in many respects a precursor of these trends within post-Second World War psychoanalysis.

Ian Suttie: A Neglected Figure in the History of Psychoanalysis?

Suttie was born in Glasgow, the third of four children. Like their father, a general practitioner, all the children became doctors. Ian received his medical degree from Glasgow University in 1914.⁵⁰ After the outbreak of the First World War, he joined the Royal Army Medical Corps and served in France and Mesopotamia as a psychiatrist. After the war, he returned to work at the Glasgow Royal Asylum, where he met his wife (also a psychiatrist), Jane Robertson Suttie.⁵¹ In 1924 he was appointed superintendent of the Criminal Lunatic Department at Perth. In 1928 the couple moved to London, where Ian joined the staff of the newly established Tavistock Clinic (Jane started working there in 1931). From 1930, the couple lived in Bloomsbury, where they also had a private practice. But in October 1935, a few days before his only book, *The Origins of Love and Hate*, was published, Ian died when he was only forty-six.⁵² According to psychiatrist Henry Dicks, who worked with Suttie at the Tavistock, Ian was a lively and charismatic figure: “[He was] a lively spirit who soon organized private discussion meetings in which Tavistock staff were engaged in most amicable but also quite rigorous doctrinal discussions with their psychoanalytic ‘opponents.’ His premature death was much mourned by us.”⁵³

We have good reasons to think that Suttie was a good reader of Ferenczi, and that the latter was influential in the development of Suttie’s clinical ~~perceptions~~. First, Suttie’s wife and coauthor, Jane, translated the second volume of Ferenczi’s writings into English;⁵⁴ as they were working closely, they probably discussed some of Ferenczi’s ideas. Suttie also referred to Ferenczi in his writings a few times, though not as frequently as one might expect. Finally, Suttie shared some of Ferenczi’s ideas and approaches in his clinical technique. He appreciated what he considered as the main Ferenczian contribution—the notion that “it is the physician’s love that heals the patient.”⁵⁵ Yet, as we shall see, some of Ferenczi’s biologicistic approaches to psychoanalysis were not so different from Freud’s, and Suttie’s fierce critique of biologicistic thinking could therefore be directed equally at Ferenczi.

Suttie was never part of the mainstream psychoanalytical circles in the interwar period. This reflected his particular situation: not only the fact that he was not a psychoanalyst by profession, but also that he was a harsh critic of Freud.⁵⁶ Some contemporary scholars argued that Suttie was deliberately neglected by psychoanalytic scholars after his premature death because of his nonconformist views. Psychoanalyst and philosopher Elisabeth Young-Buehl claimed that Suttie “fell out of the unfolding history of psychoanalysis for sixty years, only to return (like Ferenczi) in the medium of his ideas.”⁵⁷ Historian Daniel Burston maintains that “Suttie’s work never got the attention it deserved, nor is he cited much in contemporary analytic literature.”⁵⁸ Suttie himself wrote in his introduction to *The Origins of Love and Hate* that “English psychologists who remain unattached to any ‘school,’ suffer a great disadvantage in lack of co-operation or even of common understanding. Further (largely in consequence of this), they suffer in prestige and publicity and are stigmatized by psycho-analysts as half-hearted, eclectic and individualistic plagiarists of the Freudian discoveries.”⁵⁹

Nevertheless, one may argue that Suttie was not as overlooked a figure as some scholars think.⁶⁰ For example, J. A. C. Brown, who wrote one of the first books on the history of post-Freudian psychoanalysis, described Suttie as the “first, and almost the only, English psychologist to realize the significance of cultural factors.”⁶¹ The Tavistock consulting psychiatrist, Harry Edelston, stated in 1960 that he had been trained at the “old (pre-war) Tavistock Clinic, [and practiced] an eclectic brand of analytic psycho-therapy. One should almost call it the ‘English school,’” he added, “based as it is on the teaching of Hadfield and Suttie, etc.”⁶² The feminist scholar Germaine Greer stated as early as 1970 that “the best approach to Freud’s assumptions about women is probably the one adopted by Dr. Ian Suttie.”⁶³ Moreover, we even have some indications that Suttie was read and made some impact beyond Europe and the United States, in the works of the mid-twentieth-century Egyptian psychologist Yusuf Murad, who aimed to integrate psychoanalysis with some concepts from Islamic traditions.⁶⁴

More recently, the legal scholar David Richards and the feminist psychologist Carol Gilligan claimed that “Suttie’s pathbreaking work, in the spirit of Ferenczi’s anti-patriarchal questions, cogently criticized some of the main substantive claims defended in *The Interpretation of Dreams* and Freud’s later work.”⁶⁵ Other scholars consider Suttie to be one of the pioneers of the British school of object-relations.⁶⁶ Like many other object-relationists, such as Ronald Fairbairn, John Bowlby, and Winnicott, Suttie also suggested the

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mother-infant bond not only as an alternative model for better psychoanalysis than the Freudian one, but also as an ethical starting point for creating a better society—a society which will not suffer from what Suttie described as “the taboo on tenderness.”⁶⁷ It was particularly John Bowlby who used Suttie’s work in developing his own attachment theory.⁶⁸ Bowlby also acknowledged Suttie for his contributions to his own work more than once.⁶⁹ In 1988 he wrote the preface to the reprinted edition of *The Origins of Love and Hate*, where he defined the book as a “milestone” in the British tradition of object-relations.⁷⁰

Suttie’s Critique of Freudian (False) Biology

Suttie was an enthusiastic reader of Freud for a few years, but as he admitted, his “blind devotion” to Freud ended after he read the latter’s “Beyond the Pleasure Principle.”⁷¹ It is the biological determinism which he recognized in this work that made him break with Freudianism. In 1924 he published a harsh critique of this work that separated him from the main circles of psychoanalysis in Britain until the end of his life.⁷² In the same year, he published another paper, “Critique of the Theory of Mental Recapitulation,”⁷³ which was addressed directly to the eponymous Freudian theory.⁷⁴ Reading these two articles together might shed some light on the approach to biology taken by Freud and Ferenczi, in contrast to that of Suttie. These texts can also tell us how, according to Suttie, Freud’s and Ferenczi’s “biologism” serves the patriarchal structure of society so well.

“Beyond the Pleasure Principle” is one of the ground breaking works in Freud’s corpus, mainly, of course, because it provides a famous hypothesis about the “death instinct,” which exists—so Freud argued—in each of us alongside the life instinct (the libido).⁷⁵ It is worth noting that this notion emerged only two years after the end of the First World War, which was tremendously traumatic for Freud and made him reconsider his earlier conceptualization of the history of humankind as a process of social progress.⁷⁶ The sexual instinct, which was dominant in Freud’s early writings, was now called into question. Freud needed something else to explain the mass killing and destruction in Europe between 1914 and 1918. In “Beyond the Pleasure Principle,” he changed his focus from the sexual instinct *per se* into a general life instinct, which is the opposite of his new death instinct. “These speculations,” claimed Freud, “seek to solve the riddle of life

by supposing that these two instincts were struggling with each other from the very first.”⁷⁷

This new death instinct, however, was grounded in some very hypothetical assumptions. First, it presumed that “all the organic instincts are conservative, are acquired historically and tend towards the restoration of an earlier state of things.” Consequently, claimed Freud, “the phenomena of organic development must be attributed to external disturbing and diverting influences. The elementary living entity would from its very beginning have had no wish to change. . . . Every modification which is thus imposed upon the course of the organism’s life is accepted by the conservative organic instincts and stored up for further repetition.”⁷⁸ Freud’s early “sex instinct,” which was now transformed into the life instinct, was the real agent of progression, but not necessarily the real agent of self-preservation. The life instinct and the self-preservation instinct were now at odds: “If we are to take it as a truth that knows no exception that everything living dies for internal reasons—becomes inorganic once again—then we shall be compelled to say that ‘the aim of all life is death’ and, looking backwards, that ‘inanimate things existed before living ones.’”⁷⁹ Freud suggested a very strange reversal to our common sense regarding life and death: the life instinct is the one that is responsible for progress in our life, but progress means death, because every living organism is always on its way from life to death. Thus, the death instinct is the instinct that is responsible for our preservation, because it tends to do everything in order *not* to let time pass by. Hence, the life instinct is the more destructive instinct, because it is unrestrained, whereas the death instinct is the instinct one should count on if one would like to stay alive: “This view of instincts strikes us as strange because we have become used to see in them a factor impelling towards change and development, whereas we are now asked to recognize in them the precise contrary—an expression of the *conservative* nature of living substance.”⁸⁰

One of the main questions in this new model is: what is the meaning of the “pleasure principle”? If the real agent of life (at least in terms of preservation) is the death drive, then perhaps it also contains the inner drive for pleasure. Freud tried to clarify the confusion in his essay, “The Economic Problem of Masochism” (1924).⁸¹ He evaluated the *Nirvana principle*, a term he borrowed from Barbara Low⁸² and mentioned briefly in “Beyond the Pleasure Principle.”⁸³ This term attributes to “the mental apparatus the purpose of reducing to nothing, or at least of keeping as low as possible, the sums of excitation which flow in upon it.”⁸⁴ But Freud admitted that this

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apparatus “unhesitatingly identified the pleasure-unpleasure principle with this Nirvana principle,”⁸⁵ and that one might mistakenly understand that “the Nirvana principle (and the pleasure principle which is supposedly identical with it) would be entirely in the service of the death instincts.”⁸⁶ Therefore, in “The Economic Problem of Masochism,” Freud suggested that the “Nirvana principle, belonging as it does to the death instinct, has undergone a modification in living organisms through which it has become the pleasure principle,”⁸⁷ and therefore the two principles should be separated. In other words, Freud now makes it clear that the only two fundamental instincts are the instincts of life and death (the ones which “share in the regulation of the processes of life”⁸⁸). Yet according to Suttie, the notion of a death instinct goes against every sort of evolutionism. Evolution for him was first of all “adaptation.” The ability to adapt is the main engine for the creation of progress, but according to Freud, the real end of progress is destruction, so adaptation can have no real meaning: “Everywhere life is adapting, specializing; indeed, its chief failures are due to overspecialized adaptation. Even the regressions of parasitism, when viewed in correct perspective, are seen to be concentrations of effort upon the vital ends of existence. . . . No biologist would interpret such an involution as evidence of a tendency to return to a previous evolutionary phase, to a more elementary organization.”⁸⁹ Nature, claimed Suttie, is always right; it is only human beings who cannot see the entire picture of the history of evolution. Even regression is part of a wider tendency of the species to develop even further; therefore, it is hard to speak about regression as a biological concept.

Suttie also rejected the Lamarckian mechanism which was suggested by Freud: “Freud throughout assumes without comment or apology that acquired characters are inherited.”⁹⁰ As we remember, the death instinct assumes a tendency of any organism to regress to its initial state as “inorganic,” that is, to when it was nonexistent. The only way to think of the tendency of any organism to go backward into the inorganic, argued Suttie, is as a “directive force of life as a memory.”⁹¹ In other words, an organism needs to have a memory-trace of its days as inorganic in order to try to move back to this stage. Since Suttie believed that Freudian regression must be operated by Lamarckian mechanism that he described as a “directive force of life as a memory,” and since Freud attributed his own belief about the “power of unconscious ideas over one’s own body” to Lamarck, we have good reasons to believe that both Freud and Suttie referred to the same thing:⁹² that every organism has some memory-traces from its time as inorganic, and

that these memory-traces are the source of the tendency of each organism to regress.⁹³

But according to Suttie, the main question is, “[How] can living matter remember its own condition *before it became living matter?*”⁹⁴ He goes on to answer his own question:

The atoms of my body need not have been part of any ancestral body, and consequently can have no yearning to reconstitute such a primitive form, or, indeed, any memory of such. They have not necessarily taken part in evolution; they have been organized by assimilation during my own life-time, and, in the ordinary course of nature, by katabolism would be returned to the inorganic state without necessitating the dissolution of my body as a whole. We find, therefore, that the matter of organisms cannot retain the memory and cannot possess the desires with which Freud appears to credit it.⁹⁵

Here Suttie’s critique of the use of recapitulation theory in psychoanalysis comes to the fore.⁹⁶ As we remember, memory-traces as bodily phenomena were perceived by Ferenczi and Freud as existing in the individual. However, Ferenczi went even further and claimed that Haeckel’s notion that ontogeny recapitulates phylogeny is true not only on a physiological level but also on a psychological one. That is to say, we were born not only with some physical traits from the evolution of the human race but also with some psychological ones. According to this perception, the “power of the unconscious ideas” is a transgenerational power, and therefore the process of searching one’s past can be illuminating not only for our understanding of the individual but also for the history of humanity as a whole.

But to make a claim for recapitulation on the psychological level is to mix biology and psychology in a way that makes all the achievements of psychoanalysis meaningless. If the “chain of causation stretching back from the child to his ancestry is the fertilized ovum,”⁹⁷ and everything is therefore predetermined, what is the point of researching nurture and education? If this is the case, then psychoanalysis itself seems not to be very useful. Suttie maintained that “there is no logical contradiction involved in asserting recapitulation and psychic determinism; they are merely mutually exclusive, mutually limiting. Each may hold in its own sphere, but not both together.”⁹⁸

According to Suttie, Freud was not the first to reduce psychology to biology. In fact, it was the “Victorian Arm-chair Theorists”⁹⁹ who were

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responsible for the view that an investigation of the infant mind has to be made on the same terms as the animal mind—both determined by the need for survival and self-preservation. These nineteenth-century psychologists also argued that children and primitive adults were “but a stage removed from our pre-human ancestors who in turn were regarded as very similar to the higher animals.”¹⁰⁰ Consequently, they regarded infants as a “bundle of instincts some of which, like sex, remained latent till adult life (!), while others had to be disciplined and held in control by education and civilization.”¹⁰¹ But this picture was far from scientific, Suttie claimed, first of all because there is no evidence whatsoever that infants are this “bundle of instincts” that nineteenth-century scientists imagined. The one thing Suttie was sure about was that every infant is born “with a mind and instincts *adapted to infancy*; or, in other words, so disposed as to profit by parental nurture.”¹⁰² In Suttie’s view, nurture is the only natural thing that we can imagine as infants—a natural pre-capacity to be nurtured.¹⁰³ Our natural will to be nurtured by our mothers is also the real self-preservative force in our life. Any attempt to describe the relations between parents and their children as a natural rivalry—as Freud did—is misleading.

Suttie and Interwar “Matriarchal” Thinking

Several interwar thinkers were particularly interested in the idea that non-Western matriarchal societies—if they ever existed—were not as violent as patriarchal European ones. Two of them, as we already know from the previous chapter, were Malinowski and Róheim. Another was the physician and author Robert Briffault.¹⁰⁴ In 1927 Briffault published his magnum opus, *The Mothers*, in which he advanced the theory that some early human societies were matriarchal, and moreover that these matriarchies should serve as a social, cultural, and political model: “The patriarchal ‘family’ of academic social science is but a euphemism for the individualistic male with his subordinate dependents. Human society could not have arisen out of conflicting individualistic interests. . . . The maternal instinct is the only true altruism. . . . The leaders of men, who founded kingdoms or expended the primitive matriarchal into an extensive society, inherited from the primitive mother and priestess her sacred magical character.”¹⁰⁵ The “maternal,” then, is for Briffault the source of the “social” as such. In 1933 he writes: “The original source of aggregation, both human and animal, is the association of

offspring under maternal care. The maternal family formed by mother and brood is the biological foundation of any social group.”¹⁰⁶ However, for Briffault, the social dimension of the maternal role cannot be assessed solely in biological terms: “It may at once be definitely stated that whatever is instinctive in human maternal behaviour, its relation to natural kinship is not. The passionate sentiments of the human mother for her offspring, her own son, owe that association with true kinship wholly to conceptual factors, and not to any instinctive reaction.”¹⁰⁷

Suttie was certainly part of this maternalist tradition, together with figures such as Malinowski, Roheim, and Briffault.¹⁰⁸ His book *The Origins of Love and Hate*, together with a few earlier articles, contains a radical critique of the Freudian concept of the father as the origin of sociability in human beings.¹⁰⁹ It is the mother and not the father, argued Suttie, who is responsible for our basic mental orientations toward other people. In her relations with the infant, the mother creates the paradigm for sociability in the infant’s mind. The relationship with the mother precedes any other kind of relationship, and according to Suttie, it is the only relationship that is originally “natural” and not socially constructed. For example, there is nothing essentially “natural” in some sociocultural premises about the superiority of man over women, or the father over the mother, in modern patriarchal society. On the contrary, the only thing that is essentially “natural” in a newborn infant is his or her “simple attachment-to-mother who is the sole source of food and protection.”¹¹⁰ The father, according to Suttie, plays a role only after this basic bond between the mother and her infant has already been created.¹¹¹

Suttie’s main premise was that the father is excluded from the initial natural intimacy between the mother and her child, and therefore develops a strong jealousy of their relationship. This new way of looking at the father enabled Suttie to turn the entire Oedipal structure on its head:

[In the Oedipus complex] the child’s incestuous desire then would serve as an excuse for the father’s interference, disguising his own regressive jealousy. We are not for a moment implying that the conditions described by Freud do not in fact exist, or that they are merely a projection of the mental constitution of a few people. The very existence of this parental jealousy is bound to express itself in cultural conditions and to evoke childish resentment and responsive jealousy. . . . We hold, however, that this conflict is not the necessary

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and universal state of affairs that Freud imagines it to be; that the initial jealousy does not come from the child and is not of a genital nature, but rather springs from the associative impulse.¹¹²

This jealousy which Suttie described leads to a “patriarchal culture,” or “Oedipus culture,” which “manifests itself in anti-feminism, anti-sexuality, a neurotic dread of mother incest and of mother-worship, and therefore in a propitiatory father worship and the attribution to a paternal god of all creative and moral powers.”¹¹³

However, even if Suttie was a strong protagonist of the maternal, it does not necessarily mean that he was a feminist in the modern sense. Suttie idealized some matriarchal premodern societies, because “if matriarchal cult, myth, theology, initiation ritual and sacrifice deal with and give expression predominantly to *regressive* longings and jealousies, the patriarchal equivalents deal mainly with precocity and repression.”¹¹⁴ But when Suttie comes to explain what matriarchy actually is, he describes it as “a society where the woman is the effective head of the household.”¹¹⁵ According to Suttie, the mother is the ruler of the children, and she must get full recognition for that. Once she is fully empowered and restored to her old position as the “effective head of the household”—as was the case in some old matriarchal societies—children will grow up in a much more positive, social, and loving environment, without the damaging influence of an envious father. These children will be much more capable, claimed Suttie, of living together with other people, and the social consequences will be tremendous. That might sound like a feminist utopia, but Suttie neither liberated the mother from her “natural” duties nor asked if she was willing to undertake her duties as a mother, nor gave her any role in external politics—the politics which take place outside the household. Suttie perpetuates the same old biological essentialism; as historian Gal Gerson points out, “[he] keeps the sphere division while reversing its normative charges: domestic is the important theatre; all the rest is subsidiary.”¹¹⁶

In keeping the “sphere division,” Suttie did not differ much from the way nineteenth-century Evangelicals in Britain perceived “the mother” as the moral power within domestic life—a perception that was dominant from the end of the eighteenth century and throughout the entire Victorian period.¹¹⁷ As historian John Tosh points out, “once home was recognized as the prime site of ‘the religion of the heart,’ the religious standing of the wife was bound to rise.”¹¹⁸ Furthermore, one may argue that there was nothing

new in Suttie’s suggestion to think of the family as an antidote to the alienating dimensions of the industrial age—domesticity was indeed perceived by many religious circles in the nineteenth century as such. Nevertheless, as Tosh points out, in the long run “Evangelicalism ennobled work as a struggle carried on in an ungodly world, while at the same time showing how domestic life could comfort and elevate the worker.”¹¹⁹ The domestic sphere and the alienating industrial workplace were not necessarily contradictory, but rather complementary.

However, Suttie was not part of this Evangelical way of thinking for a few reasons. In intellectual terms, he probably belonged more to a tradition of late-nineteenth-century Scottish scholars, such as the anthropologist and biblical scholar William Robertson Smith (1846–94), who although had much in common with Evangelicalism, nonetheless criticized some of its major aspects.¹²⁰ Moreover, it is not clear what Suttie’s approach to religion was. He rejected secularism and thought of certain religious elements as crucial in any form of social life, and believed that religions have some very important social functions. He would probably have been empathetic to Robertson Smith’s saying that religion does not exist “for the saving of souls but for the preservation and welfare of society.”¹²¹ Yet Suttie was not entirely committed to any specific religion. In fact, he appreciated pagan cultures precisely because of their being “irreligious (or, better, a-religious).”¹²² Thus, his emphasis on the importance of the maternal role was not motivated by a commitment to a nineteenth-century Evangelical ethos of domesticity but by his belief that maternal values can serve as an antidote against damaging effects of modernity.¹²³

Suttie suggested maternity as a possible way of getting back to the communal harmony which, he believed, characterized the premodern period. Rather than challenging modernity with twentieth-century feminism, Suttie took his inspiration from premodern European societies, but also from some early Christian traditions, which were dominant among Scottish intellectuals at the beginning of the twentieth century. In his article “Religion: Racial Character and Mental and Social Health” (1932), Suttie made the distinction between pre-Christian Teutonic cultures, which were based on love, and Western patriarchal cultures, which were based on guilt. In this context he gave a special place to Judaism, the source of the religions of the father—that is, the religions of guilt. Christianity, according to Suttie, is also essentially patriarchal, but at least in its early days, it emphasized and encouraged love and brotherhood among its believers as its main values.

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It is precisely these values that were absent in the Judeo-Protestant tradition, argued Suttie. Protestantism, he wrote, “was an attack upon the mother cult.”¹²⁴

In an almost anti-Semitic tone, he writes:

[The] new teachings did achieve a lightening of the sense of guilty apprehension that characterizes Judaism. The first expressions of the new-found freedom from the bondage of the law were the abolition of compulsory circumcision by St Paul and the vision of St Peter of being commanded to eat hitherto forbidden food. Even within the church these “liberties” met with strong opposition, while they effectively split it off once and for all from the Mosaic religion and led to the Jewish persecutions (St Stephen, App. VIII). Unlike the latter, the Roman persecutions were not based upon religious intolerance but upon national and economic motives.¹²⁵

For Suttie, Judaism was not only the source of all monotheistic religions but also the least tolerant of them to other beliefs. The “Jewish persecutions” of other religions were due to theological reasons, not to political or economic matters. The Jewish God was primarily a “jealous God,” and as such he is the precursor of the patriarchal father in modern families. Therefore, Oedipal thinking is part of this theological tradition. However, Suttie was neither interested in Jews as a collective nor as a race, but only as a religion. Moreover, he thought that later versions of Christianity, namely Lutheranism and Calvinism, are no better than Judaism in their patriarchal tendencies. For him, Protestantism is “affectively [*sic*] akin to [Judaism].”¹²⁶

As the literary scholar Gavin Miller has shown, Suttie was part of wider group of Scottish scholars at the end of the nineteenth century and the first half of the twentieth century who attempted to criticize modern life from a traditional Christian point of view. According to them, the main Christian notion that was neglected by modernity and should be restored to its central place in community life is the notion of communion.¹²⁷ William Robertson Smith was the first among this group to emphasize the act of sharing food as the first social arrangement between every group of people who live together. The initial model for sharing food is the first bond between the mother and her infant, and this relationship, claimed Robertson Smith, is also the one that makes the “social” possible.¹²⁸ This initial situation, where the mother shares her body to feed her child, is the paradigm for all other

social relations. From this point of view, sharing food is the common feature of all cultures and societies. All essential rituals relate to this mode of communality; Christianity is no different in this regard from other forms of belief. As Miller points out, for Robertson Smith, “the practice of communion was the central religious and social phenomenon.”¹²⁹

The idea of the communion as a paradigm for the “social” became even stronger after Robertson Smith’s death in 1894. For example, the philosophers Andrew Seth Pringle-Pattison (1856–1931), J. B. Baillie (1872–1940), and John Macmurray (1891–1976) embraced the notion of communion as a potential weapon against modernity and its damaging individualism. The Scottish psychiatrists who were probably most influenced by these trends were the psychoanalyst W. R. D. Fairbairn (1889–1964), Hugh Crichton-Miller (1877–1959), who was the founder of the Tavistock Clinic, and Suttie himself, who joined the Tavistock in 1928. They all tried, to some extent, to translate this core of ideas of Robertson Smith and his Scottish followers into a new psychoanalytic thought in which attachment, sociability, and love would replace jealousy, narcissism, and hate. Scottish psychoanalysis promoted the notion that “the therapist, through a relationship that is primarily affective (loving, forgiving), restores to the patient his or her capacity for spontaneous and whole-hearted interpersonal life (communion).”¹³⁰

Possessiveness and the Maternal

In the early 1930s, Suttie’s writings became much more political. He now created explicit links between his theoretical ideas on motherhood and the political crisis in Europe. An example can be found in a symposium titled “Property and Possessiveness” that took place at a joint meeting of the Medical Section of the British Psychological Society and the Institute of Sociology in December 1934.¹³¹ One of the subheadings of Suttie’s paper at this symposium was “Individualist and Communist Have Identical Psychological Aims but Opposite Economic Methods.” In this section, Suttie explains that both type of persons—individualist and collectivist—are looking for security. For the former it is property that provides security, while the latter “yearns for security against the neglect and rivalry of others; he seeks his share of the nurtural mother, hating the favoured child (Abel) and defending himself from the Cain jealousy by renunciation of special favours.”¹³² Suttie goes on to explain the source of possessiveness as a “separation anxiety

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arising from love privation in early childhood”¹³³ and to claim that “our economic system is not the logical expression of utilitarian motives, and . . . our economic behaviour has neither the uniformity of instinct nor the practical and rational character one would expect to proceed from motives of self-interest, foresight, and reality-thinking generally.”¹³⁴ In other words, neither organic needs nor a rational way of thinking can explain people’s possessiveness. Or to put it in Freudian terms, it is neither the pleasure principle nor the reality principle, neither the id nor the ego, which is responsible for our inclination to possess.

Possessiveness and the need for property are a direct consequence of the “forced renunciation of the primal baby-mother intimacy,” which creates “dissatisfaction with, and distrust of, the social environment which comes gradually and more or less adequately to fill the place in affective life originally occupied by the mother.”¹³⁵ This primal loss of the intimacy with the mother creates an anxiety about loneliness and alienation as well as an existential fear that the basic social needs of the individual will be ignored. This feeling of helplessness could be the source of destructive behavior, but not the other way around. No one has a “death instinct,” or any other primal instincts of aggression—aggressive behavior will come only after the loss of the “mother rapport.”¹³⁶ That is to say, love exists before any hate, jealousy, or envy appears.

For Suttie, the “social need” always comes first. It is only after a privation of this social need that one starts developing antisocial behavior. What we described in a rational way as an “economic system” is the sum of people’s separation anxieties and dread of loving social relations:

If our industrial ingenuity could produce sufficient for every man’s wishes—and if the desire to possess could allow us to distribute it, still, unless there were a concomitant change in our mode of rearing young children, the social anxiety and competitiveness generated at this period of life *must* seek an outlet in possessiveness or in some other form of social competition. Until such a change in rearing customs is brought about, the economic motive will continue to aim not “to be well off,” but “to be better off than other people.” I repeat that we do not wish merely “to have what we need”; but rather “*to have what other people need.*”¹³⁷

For Suttie, communism and capitalism are two sides of the same coin, because both are “economic systems” and therefore can only serve us as unsatisfying

substitutes for a psychological lack, which has nothing to do with “pure” economy. Only our community can detach us from our economic mode of thinking and bring us back to the real meaning of communion—namely, the sharing of food between community members not only as an economic mode of survival but also as an expression of a common will for tenderness.

Freudianism and Progress

In the final part of this chapter I will argue that the notion of progress was the main target of Suttie’s critique. If this is true, Suttie’s work was a reply not only to Freud but also to Max Weber. In his famous lecture from 1917, “Science as a Vocation” (“Wissenschaft als Beruf”), Weber defined the modern age as characterized by “rationalization and intellectualization and, above all, by the ‘disenchantment of the world.’ Precisely the ultimate and most sublime values have retreated from public life either into the transcendental realm of mystic life or into the brotherliness of direct and personal human relations.”¹³⁸

In contrast to Weber, Suttie claimed that the process of “rationalization and intellectualization” happened only in the minds of modern people, who imagined themselves as progressive. Science has given moderns the illusion that they have “overcome” the religious phase of history. But according to Suttie, “progress” is only another manifestation of old patriarchy and its “taboo on tenderness,” which creates aggression, hostility, and violence among individuals and societies. Modern “progressive” values derive from the same old values of the “jealous father,” who was represented for thousands of years by the monotheistic God and is now represented by modern science: “Persecutions and inquisitions, religious wars and crusades, take origin from this violent guilt-anxiety with its need (1) to propitiate God by the conquest of ‘the infidel,’ (2) to maintain precarious repressions, (3) its underlying separation privation-rage against the mother (hence anti-feminism), and (4) its jealousy of the free, ‘self-indulgent’ pagan who psychologically represents the younger baby.”¹³⁹ In other words, “the Augustinian”—since for Suttie, Augustine was to blame for the radical change in the perception of God in early Christianity from a tender God into a jealous one—“felt that to save his own soul he had to ‘conquer’ others ‘for God.’”¹⁴⁰

No less than their Judeo-Protestant predecessors, modern people resisted any kind of polytheism as morally wrong. As contemporary Egyptologist Jan

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Assmann noted in his highly influential book *Moses the Egyptian*, “Monotheistic religions structure the relationship between the old and the new in terms not of evolution but of revolution, and reject all older and other religion as ‘paganism’ or ‘idolatry.’ Monotheism always appears as a counter-religion. There is no natural or evolutionary way leading from the error of idolatry to the truth of monotheism.”¹⁴¹

Secular modernity was not so different in its attempts to “conquer” the minds of others instead of conquering their gods, and the way in which moderns used science to claim epistemological authority is not so different from the way premodern people used to distinguish between the “false” gods of their enemies and their own “true” ones. In both cases there is no room for more than one mode of life or more than one mode of belief. According to Suttie, Freud substituted one form of the “jealous father” with another: instead of idealizing and identifying with a monotheistic God, the secular idealizes and identifies with his own father.

Furthermore, according to this argument, modern people perceived the modern age as a rupture between a traditional past, which was dominated by superstitious religions, and the present, which is directed by science. Suttie did not write explicitly about “secularism,” but he found much more continuity than discontinuity in comparing the modern age with the premodern age about the place of religion in one’s life. In other words, he claimed that basic needs of individuals and communities have not changed in the modern age, and that the process of “rationalization and intellectualization of the world” is not a good enough substitute for people’s religious needs.

Suttie was not the first to argue against the illusions of rationality and the overdominance of reason in the modern age. One can say that Freud and Weber themselves made a great effort to explore the limits of modern rationality. However, as historian Alex Owen points out, Weber and Freud “held fast both methodologically and conceptually to a belief in the ultimate authority of reason.”¹⁴² Owen claims this in her ~~research on~~ late Victorian spiritualism and fin de siècle occultism, which was perhaps the most influential “counter-rationality” movement in Britain—or at least one of the main voices for different definitions of “rationality” itself: “In the name of the unravelling of the mystery of ‘being,’ the occult generated a language of selfhood that implicitly countered the modern association of spirituality with irrationality while pursuing a spiritualized formulation of a modern secularized understanding of the complexity of human consciousness and the significance of the irrational domain.”¹⁴³

Suttie, however, had a slightly different approach to the “occult.” Like fin de siècle British spiritualists and occultists, he was also fascinated by myths, folklore, and local traditions of premodern and non-European cultures. But while these other British occultists fully and literally believed in the traditional folklore (Egyptian, Pagan, Indian, and many others) which they tried to revive, Suttie never fully abandoned his more anthropological perspective, which led him to consider certain traditions as fiction rather than fact.¹⁴⁴ This was not, however, to dismiss them; to the contrary. Suttie understood the huge social and cultural importance of myths, and not only appreciated, therefore, the myths of remote cultures, but also recognized the basic need of European societies to have “irrational” myths of their own, even under the new conditions of secular modernity.

Suttie opened the ninth chapter of *The Origins of Love and Hate* by comparing religion with mental illness. Both phenomena, he claimed, are caused by the maldevelopment of individuals, probably in their infancy stages. But the big difference for him was that religion is “mainly concerned in its higher forms to better our affective relationships with each other (i.e., is ethical). Unlike mental illness proper, it is a social not an individual and selfish attempt, and hence differs also in that it expresses itself in social institutions rather than in misery, alienation and dementia.”¹⁴⁵ Suttie gave this chapter the title “Religion, Is It a Disease or a Cure?” and it seems that already in the first paragraph he gives us the answer: it is a disease and its cure at the same time.¹⁴⁶

According to Suttie, religion is first of all a social practice which has no modern substitute. Therefore, even if one thinks of religion as a social symptom of a fundamental illness, one will not find any cure for it other than religion itself. Suttie neither asks whether God exists nor which religion is the true one, but rather what life without any religion looks like. What is the mechanism in secular modernity, if there is any, to prevent “misery, alienation and dementia”? In that sense, Suttie opposed Freudianism as a modern-secular project. Freud supplied Suttie with a great deal of his vocabulary for social analysis, but unlike religion, Freudianism as a phenomenon was for Suttie a symptom of a disease, not part of its cure.

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Suttie’s writings are full of mythologies, descriptions of cults and ethnological accounts from many cultures. The matriarchal premodern in his writings seems to be more imaginative and idealized than historical and real. It

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is also hard to say which premodern society Suttie is longing for. The reader can get the impression that it does not really matter to Suttie if it is Asiatic, Indian, African, or Hellenic culture, as long as it is not Judeo-Protestant, patriarchal, and modern. Still, his deepest appreciation is reserved for paganism. The term *pagan* had several meanings throughout the nineteenth century. Some used it as a general term for the religions of “savage people” in a colonialist sense. Others thought of paganism, with greater respect, as one of the evolutionary stages in European history—the stage that preceded Christianity and eventually led to it. Still others were interested in paganism as part of their hostility to Christianity. As historian Ronald Hutton describes it, these people thought of pagan Greece and Rome as “inherently superior, at once more in touch with the natural world and with human nature; joyous, liberationist and life-affirming.”¹⁴⁷ One may find many of these sentiments in Suttie’s work. For example, when he describes the pagan, he writes: “Psychologically, one might describe ‘the pagan’ as taking parental love for granted. He is willing, therefore, on the one hand, to surrender the privileges of infancy for the responsibilities of adulthood, while unafraid, on the other, to take and enjoy the pleasure and privileges of the latter state. He has steered his development between the Charybdis of infantile regression and the Scylla of Oedipus-precocity, and so he is left without distrust in himself or unconscious fear of incurring parental wrath and separation.”¹⁴⁸

Particularly interesting for our purposes is Suttie’s approach to “infantile regression.” Suttie, like other thinkers in the Ferenczian tradition, had a divided approach to regression: regression is the problem as well as the solution. Regression was perceived as a personal and social symptom of maternal deprivation, which could have a pathological form, but which also reveals the source of the problem—the early relationships with the mother: “A large section of the population has never outgrown childish dependency, but has merely covered this up. Under stresses like illness, misfortune, anxiety, outwork, neglect, etc., a partial regression occurs to the childish craving-for-protection and for the assurance of being personally cared for and *wanted*.”¹⁴⁹

The treatment of regressive phenomena consists simply of allowing them. For Suttie, the model for dealing with pathological regression ~~was the methods used by~~ the nineteenth-century American neurologist Silas Weir Mitchell (1829–1914), who became famous for treating hysteria by “[surrounding] the patient *with the environment appropriate to the infant*. Food was good and abundant; silence and darkness encouraged unbroken rest;

attendance was unremitting; but conversation was discouraged except during the daily visit of the physician. . . . [The] Weir-Mitchell treatment represents a gigantic *indulgence* (and thus a reassurance) offered to the *unconscious baby-self* of the patient.”¹⁵⁰ According to Suttie—and following the tradition of Weir Mitchell—maternal deprivation is the cause of many of the modern social pathologies, and the solution must therefore also take the form of regression to the initial maternal bond.

However, Suttie’s fascination with regression cannot be explained solely by his interest in its clinical application, nor was it only a nostalgic reading of an imaginary premodern past: this past represented for him a history to be told for its relevance in the present. He believed that the maternal approach was the reason for the lack of envy and aggression in pagan culture. This can also explain why pagans “never persecuted Christianity except when its sentiments were exploited for imperialistic or other non-religious purposes as under Domitian in Rome or Hitler in Berlin.”¹⁵¹ Indeed, for Suttie, the attempt to link Nazism with paganism is a total misunderstanding of the latter: “Curiously enough if Hitler could restore the ancient Teutonic character to the highly feudalized German mind, he would destroy the urge to persecute non-conformity of all kinds.”¹⁵² Paganism is revealed here not only as a maternal utopia but also as a political fantasy about the optimal way of solving the interwar totalitarian crisis in Europe. This is perhaps the epitome of interwar maternalism—an anthropological utopia and political program based on the new psychoanalytical vocabulary, which was now focused on motherhood. Suttie is a key example of the maternalistic thinkers who believed that healthy families and healthy societies are those that have not abandoned the importance of the maternal role. However, as we will see in the coming chapters, this notion of motherhood as a primary paradigm for any kind of healthy social relationship achieved its full impact in British society only after the Second World War. This was the historical moment where citizens were encouraged to think—for better or worse—of the new welfare state as a maternal entity.

CHAPTER 5

What About Father? Civic-Republican Maternalism and the Welfare State

A lot of women want their men to be able to be maternal to themselves. Who is not a little deprived in regard to mothering?

—Donald W. Winnicott, 1964

The study of the place of regression in analytic work is one of the tasks Freud left us to carry out, and I think it is a subject for which this Society is ready.

—Donald W. Winnicott, 1955

Between 1942 and 1944, the Tavistock psychiatrist Lieutenant Colonel H. V. Dicks served as an adviser on German morale in British Military Intelligence, where he interviewed a large group of German prisoners of war (POWs), of whom 138 served as a sample group for his research.¹ Dicks's aim was to investigate the affinities between their individual psychology and the national German character. This research was published only in 1950, but Dicks presented parts of it to his colleagues in Military Intelligence during the war.² One of his first readers was Dr. J. Cohen from the Offices of the War Cabinet, who had some doubts about Dicks's suggestion that "one of the foremost factors of 'de-Nazifying' the Germans is to alter the status of German Women."³ Dicks, however, insisted in his reply to Cohen that the position of women, and especially of mothers, would be a crucial issue in the postwar era:

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I think it is primary change to be striven for, in the sense that the position and status of mothers is primary to the world picture and object relations and identifications of children. . . . The first policy steps must be in altering institutional structure, but with the mother-woman status as a primary basic goal in view. . . . No, I stick to my belief, on such clinical grounds as I have, that de-bunking Father and raising Mother at least to equality with him in the internal world of German children is priority No. 1. . . . So long as femaleness, tenderness, mercy, are regarded as subordinate, weak, contemptible, fit to be kicked around, there can be no major institutional change in the social field.⁴

These maternalistic views were not new among Tavistock therapists and researchers, as we already saw in the case of Suttie. Dicks himself was an enthusiastic reader of Suttie, as we can learn from his writings and research throughout the 1940s. For example, Suttie's notion about the Western "taboo on tenderness" was a main element in Dicks's research throughout the 1940s.⁵ In interviews with German prisoners, Dicks explicitly ask questions—while referring to Suttie on this topic about "the degree to which the subject felt free or forbidden to have a tender mother-baby relationship."⁶

On 8 January 1940, Dicks read a paper titled "Anal Sadistic Basis of Culture" at the Tavistock Clinic, in which he suggested a slightly similar critique of modernity to the one suggested by Suttie a few years earlier. Like Suttie before him, Dicks argued that Western aggression is closely related to "frustration of tenderness and [of a] sensually satisfying rapport with the mother."⁷ According to Dicks, the taboo on tenderness is the reason for many sexual, social and cultural problems of the modern era, such as, for example, women's frigidity. But it is not only the "debasement of the role of the women dating in [Dicks's] opinion back to the days of St. Paul" that cause frigidity, but also "a consequent regression of the mothers to the anal level, regarding their children as their possessions and indeed often as their body contents from which they are not to be parted but whom at the same time they must devalue."⁸ Dicks argued that the cultural rejection of everything that was considered "feminine" is the reason for the "conscious exaltation of sorrow, self-abnegation, 'responsibility' and the cult of the hard, furrowed face as the ideal. . . . This attitude in marriage, in education simply drives love out of the window, and is nevertheless accounted as virtue and righteousness."⁹

Dicks did, however, find some “hopeful signs” for the future of Western civilization in the emergence, “at least in the freer countries,” of a “generation reared since the coming of new psychological concepts in education which had found in the democracies their best soil.”¹⁰ The task of psychotherapists, he maintained, is “interpreting and teaching as many of our fellow citizens as possible the psychological significance of the events which are now taking place.” By doing so, Dicks maintained, psychotherapy “may well help to create a body of opinion which will be prepared to surrender the exclusiveness of national sovereignty, economic possessiveness, and the glorification of thinly veiled sadistic activities in the name of patriotism and national expansion.”¹¹

Many of the maternalistic arguments presented so far in this book were made in an almost theoretical fashion by psychoanalysts, psychiatrists, or academics, sometimes in their role as public intellectuals. Dicks’s almost pacifist vision of a less masculine and therefore less violent society is so interesting precisely because it was provided in 1940 by someone who would soon become a senior psychiatrist in the British army, and an eminent figure in the Tavistock Clinic in the postwar years. But it is only one example of a wider belief that European civilization suffered from a lack of maternal values in its public sphere—an opinion which was held now not only by some arguably nostalgic anthropologists but also by influential psychoanalysts in their seat as opinion leaders.

The final two chapters of this book explore how figures such as Dicks, Bowlby, Winnicott, and Balint served as what historian Camille Robcis calls “bridge figures.” Robcis coins this term in her book *The Law of Kinship*, a study of the impact of French anthropology and psychoanalysis on the country’s family policy and law. She uses it to refer to the “anthropologists and psychoanalysts who borrowed the conceptual frameworks of Lévi-Strauss and Lacan and ‘translated’ them for popular culture and for the political world.”¹² In the British context, the similar positioning of popular psychoanalysts as “bridge figures” made their otherwise romantic ideas about the maternal into a highly influential resource for political debates and policy making.

One of the main—and still debated—questions to be addressed in the present chapter is whether some of the postwar maternalistic views were only a pretext for promoting a traditional domestic ideology based on strict gendered division between the private and the public spheres.¹³ Historians have tried to reconcile two main trends in public approaches to motherhood

in the postwar era. On the one hand, mothers were perceived as a key factor in the postwar collectivist effort of building the British welfare state—a program which had already been promised to the public during the war, and even earlier.¹⁴ Therefore, as historian Ann Taylor Allen argues, in the immediate period after the war, “the ideology of patriotic motherhood seemed to have reached its apogee.”¹⁵ On the other hand, the collectivist effort of the wartime era, in which mothers were expected—in addition to their motherhood—to play their part in civil society by other public works, could not be sustained. Thus new ways of expressing patriotic motherhood had to be found. During the war, despite the pressure on many women to enter the work force and help with other national duties, motherhood was still perceived as the most important way for women to express a *civic virtue*.¹⁶ After the war, many mothers had to confine themselves again to the domestic sphere, and full-time motherhood alone was again considered the best way for women to show their civic virtue. Thus, as historian Michal Shapira has recently argued, the postwar era was characterized by a transition from “collective citizenship” to a “domestic” one. However, the domestic dimension was still closely related to the collective, as “instead of being a haven from the political world, the home here was the very place where democracy was being produced.”¹⁷

Shapira presents the work of Winnicott during and after the war, and particularly his British Broadcasting Corporation (BBC) broadcasts to mothers, as a major case study for the creation of this new “domestic citizenship.” It was on the radio, she argues, that Winnicott not only popularized psychoanalysis and showed its relevance to ordinary mothers, but also helped to redefine the maternal role as a major element of healthy citizenship. He did not do this alone, but in collaboration with BBC staff—especially with his charismatic female producers, who helped combine his ideas on motherhood with what they thought the audience of mothers actually wanted to hear.¹⁸ Thus, the Winnicottian image of motherhood—highly influential in many aspects of private and public life of postwar civil society—was a meeting point of Winnicott’s charismatic performance on the radio, the impact of the medium itself, his psychoanalytic ideas, and some collective images of what a “good mother” should be. In his broadcasts, Winnicott mainly emphasized his belief that mothers have knowledge on mothering that no expert, including himself, will ever have.¹⁹ Therefore, he thought, this was not only their “natural” profession, but also their civic duty—a duty that no one but mothers could perform.

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But radio broadcasting was perhaps the only place where Winnicott needed the help of mediators (such as producers) to communicate with mothers.²⁰ Most of his knowledge about motherhood came from his work, starting in 1923, as a pediatrician, in clinics for mothers and children in Hackney and Paddington Green, where he had worked for forty years. Sally Alexander studied the implications of this overlooked part of Winnicott's life: "[In Paddington Green] Winnicott encountered the clamor of need from the queues of mothers and children along the hospital corridor whose promiscuous range of symptoms, when described in their own words in their own time, exposed the visceral links between imagination and desire in relationship with others."²¹ From that perspective, she argues, it is not only the anti-feminist aspect of Winnicott's thought that needs to be remembered, but also his effort to understand mothers' "needs and rights as individuals."²² His ideas "can be read as part of a structure of feeling, Virginia Woolf's 'thinking in common'—tolerant and democratic—that enabled the establishment of the welfare state, with all its limitations."²³

Shapira and Alexander not only emphasize two different parts of Winnicott's rich life but also provide us with two different accounts of Winnicott as a public figure. Shapira focuses on him as an "expert"—a producer as well as a product—of a new form of citizenship, one in which mothers had a central role as the creators of the domestic sphere. For Alexander, Winnicott is first of all a pediatrician who meets many mothers every day and has an ongoing interest in the mother's subjectivity, wishes, and desires. Winnicott the broadcaster restricts women to their home according to how he imagined they should act as mothers, while Winnicott the pediatrician listens to what they want and what they have to say. Winnicott the expert tells them what is "natural" and what is not; Winnicott the doctor learns from them who they really are. One represents old patriarchal values of the state; the other represents a new set of democratic ideas, which he thinks should be adopted now by the new welfare culture.

Rather than finding a way to reconcile these two different portrayals of Winnicott's approach to mothers and motherhood, I would suggest an alternative way for understanding the "Winnicottian project." Thinking of Winnicott and many of his followers as *civic-republican maternalists* can be useful for understanding the ways in which some influential psychoanalysts in postwar Britain attempted to make the state itself more "maternal" (as they perceived the term). In the civic-republican tradition, civic virtue is the key to maintaining the republic's freedom. Civic republicans understood

civic virtue as “a range of capacities that each one of us as a citizen most needs to possess: the capacities that enable us willingly to serve the common good, thereby to uphold the freedom of our community, and in consequence to ensure its rise to greatness as well as our own individual liberty.”²⁴ According to Quentin Skinner, civic republicans took the metaphor of the “body politic” very literally and believed that “a body-politic, no less than a natural body, which entrusts itself to be defended by someone else is exposing itself gratuitously to the loss of its liberty and even its life.”²⁵ Therefore, citizens’ willingness to sacrifice their lives for the sake of the republic is not only their way of protecting their state but also their way of protecting their individual liberty. As historian Barbara Taylor points out, a key element of the republican tradition was “its hyper-virile imagery of citizenship”: since the Greco-Roman age, for republicans “virility and political potency were one, and womanhood another: no imagined unity was possible.”²⁶ However, the French Revolution brought significant changes in traditional perceptions of gender and citizenship. Many women believed that part of the new universalistic ideology of citizenship was that their gender no longer be denied participation in civil life. Thus, the role of women, and especially of mothers, became a main issue in political debates, both on the Continent and across the channel in Britain. Since the late eighteenth century, there has been an ongoing effort to portray mothering not as an external element to the body politic, but as very much an internal one. In this light, good mothering was perceived as part and parcel of the continuing struggle of the republic to maintain its freedom.

Even if not for a feminist cause, many psychoanalytical thinkers after the Second World War thought that it was not only that mothers should be “republican” (to use historian Linda Kerber’s phrase)²⁷ but that the republic itself should be more “maternal.”²⁸ Maternalism as a set of values and a way of life, many people thought, should have a greater presence in public arena. Thus, we can see the emergence of a “domestic citizenship” after the war, as suggested by Shapira—one in which motherhood was perceived as the desirable way for women to contribute to the public sphere. On the other hand, public life itself was considered by many an area that needed to be “maternalized.” Thinking of postwar motherhood in this way raises the question of whether Winnicott really tried to maintain a traditional division of gender roles or whether his views—as well as those of others in the psychoanalytical movement—should be seen as part of an ideological attempt to bring the “maternal” into the public sphere. If this was the case, I would argue that rather

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than maintaining traditional gender roles, the postwar psychoanalytical movement actually helped—perhaps unintentionally—to destabilize them in order to define new ones.

Domesticity in Postwar Britain

The establishment of the welfare state in Britain involved creating new definitions and norms for childhood in both the domestic and the public spheres. The sociologist Nikolas Rose argues that “a new way of construing the troubles of children began to take shape in the first decade of [the twentieth century], although it was to reach its culmination only after World War II. The family was to be reconstrued in terms of a set of relations, psychological relations between mothers and fathers, parents and children, brothers and sisters.”²⁹ According to Rose, “the group life of the family, its relational economy, the dependencies, frustrations, jealousies, attachments, rivalries, and frustrations that traversed it, became both the means of explanation of the troubles of childhood and the means of construing the ideal family.”³⁰

The British psychoanalytical movement had an important role in this new discourse of the family. The emergence of a new type of psychoanalysis, known today as the object-relations movement, was useful not only as a new kind of psychoanalytic therapy for individuals but also as a social lab for the shaping and reshaping of old and new categories of domesticity, and especially in putting new emphases on the psychological and cultural importance of the maternal role. Postwar maternalistic psychoanalysis served as a mediator between traditional values of domesticity and new forms of citizenship. The most notable example of this was what later came to be known as “Bowlbyism”—the use of John Bowlby’s psychoanalytical views in arguing for the importance of mothers staying at home with their children.³¹

But maternal values were not only limited to the private sphere. As several historians have shown recently, many public issues were now being examined through the lens of “what is best for the child,” and the state adopted some maternal attitudes toward its future citizens. School meals, for instance, which since the Education Act of 1944 had to be provided by all local authorities, were much more than a commitment of the government to prevent hunger among children. As James Vernon claims, it was part of a wider project for educating the child “in a new set of social responsibilities and

obligations: of eating the correct foods in the right way and becoming healthy and civil citizens.”³² Carolyn Steedman describes the important role of these school meals in her own early life in 1950s Britain: “I think I would be a very different person now if orange juice and milk and dinners at school hadn’t told me, in a covert way, that I had a right to exist, was worth something.”³³ The new welfare facilities were about making sure that the child’s basic needs were provided, if not by his or her own mother then by the state.

The child also became a site for new social anxieties and fears. Thus, for example, some expressions of homophobia in the postwar period were considered part of what historian Matt Houlbrook describes as “narratives of sexual danger . . . [that] coalesced and solidified upon the figure of the predatory masculine queer—the man who preyed on young men and boys alike, the man who might seduce the nation’s youth away from hegemonic masculinities, the man who threatened to destabilize the family.”³⁴ Likewise, some postwar interracial tensions took the form of a national effort to protect the child from the threat of the “stranger”—that is, the non-European.³⁵ Historian Chris Waters argues that once the welfare state could offer some economic benefits to the working class on the one hand, but had problems defining the essence of “Britishness” on the other hand, “race could play the role that class once had in debates about national cohesiveness.”³⁶ Interracial marriage was considered a danger to this imaginary “Britishness,” and it was mainly the children of these couples who seemed to embody the potential threat of what one correspondent of the *Sunday Times* defined in 1957 as “[adulteration] of the national character and culture.”³⁷ Parenthood—and particularly motherhood—was not only a private matter of the domestic sphere, but part of a much wider project of the state, in which a central element was to protect the child from potential offenders.

But this new domestic discourse was also a way of opening up the possibility of taking the relationship with the mother—what was believed to be a more benevolent and less authoritarian relationship—as a model for idealized social relations in all other public spheres. Bowlby and the economist Evan Durbin—who collaborated during the interwar period—argued already during the war that in order to create the right conditions for a socialist-oriented welfare state, education and child psychology should be ~~main~~ social and political issues, no less than ~~economics~~.³⁸ According to Bowlby and Durbin, there must be a better understanding of the importance of parental love in the development of good citizenship.³⁹ Moreover, Bowlby argued that models of good parental love must be deployed in the

British educational system.⁴⁰ More and more psychologists, educationalists, and policy makers maintained that British education needed to become less authoritarian—a system in which teachers would be able to provide parental love in any case where the child has been deprived of this basic need by his or her parents.

Psychoanalytic theory, however, had to adjust itself to the new understanding of the child. Before the war, dominant Kleinian circles portrayed the child as ruled by an inner struggle to control his or her love, hate, aggression, and envy toward his or her parents; now a new generation of psychoanalysts made an effort to purify children and to portray them as inherently good, as long as they were under appropriate maternal care. Only a damaging environment, argued Bowlby and Winnicott, is able to destroy this initial state of purity. Therefore, it was a benign “environment” which became the focus of postwar psychoanalytic theory and practice. The meaning of “environment,” however, for postwar psychoanalysts—as well as for many postwar policy makers—was first of all what Winnicott described as good-enough mothering. Winnicott’s “good enough mother” was the only way to ensure the development of psychologically healthy individuals and good citizens.

Winnicottian Motherhood and the State

“There is no such thing as a baby,” Winnicott famously said. “If you set out to describe a baby, you will find you are describing a *baby and someone*,” he explained.⁴¹ One may argue that this statement symbolizes a shift in the British psychoanalytical movement toward its postwar environmental-maternal orientation. For Winnicott, the child-mother bond was not only a private issue but a national interest. It is no coincidence that Winnicott also defined the main characteristic of democratic societies as *maturity*: “If democracy is maturity, and maturity is health, and health is desirable, then we wish to see whether anything can be done to foster it.”⁴² Since there is no mature society without mature individuals, he maintained, it is the task of the state to create the conditions for the maturity of its citizens. The state is obliged to prevent, as far as possible, antisocial behavior such as delinquency on the one hand and extreme political anti-individual inclinations, such as fascism, on the other hand.

In his article “Some Thoughts on the Meaning of the Word Democracy,” Winnicott provided some visions of the future of democratic societies,

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especially the possibility that strong relationships with mothers will serve as the basis for creating a healthy democratic state. Interestingly, in the same issue of *Human Relations* in which Winnicott published his piece, Dicks published his article on “Personality Traits and National Socialist Ideology”—a paper in which he presented his wartime research on German POWs and in which he described the catastrophe of the Nazi period as a consequence of the pathological structure of German domestic life. For Dicks, any research on the origins of Nazism should focus on the German culture as essentially over-paternal and anti-maternal. He writes: “The German mother, indulgent and over-protective especially to the favoured male baby in his early years, yet also connives at this ‘masculine’ build-up of her son. She provides no adequate counter-weight to the father, but by culturally imposed inconsistency increases her son’s guilt and confusion by furtive rewards behind the father’s back.”⁴³ This paternal culture in Germany created a severe “taboo on tenderness” in which “softness” was equated with “impotence, surrender and femininity,” while “hardness” was equated with “steely nerves, potency and manliness.”⁴⁴ Any “expressions of tenderness,” argued Dicks, can be “unconsciously equated with regression towards a favoured state of infancy in which sphincter-control was not yet demanded, nor an ascetic check placed on the enjoyment of the maternal body and caresses.”⁴⁵ All these explain why, according to Dicks, “the mother-seeking tendencies, whether of sadistic or of passive colouring, are banned from personal awareness and form the background of guilt which the ready acceptance of ‘manly’ father-submissive attitudes covers.”⁴⁶

For Winnicott—as for Dicks—democracies should operate in opposition to this kind of “German character.” Winnicott thought that the only way of increasing democratic tendencies in individuals is through their families. The family is the main mediator in modern societies between the collective and the individual, between the state and its citizens, and therefore “we can do nothing to increase the quantity of this innate democratic factor comparable in importance to what has already been done (or not done) by the parents and homes of these individuals when they were children and infants and adolescents.”⁴⁷ Thus, he was not only promoting the notion of good-enough mothering on the level of the individual, but he thought that the aim of society should be to provide the right tools for the creation of what he called the “ordinary good home.”⁴⁸ For this purpose, Winnicott suggested a reconsideration of the notion of regression, which was so dominant in Ferenczian theory and practice.

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For Winnicott, as for Ferenczi, regression is always a latent desire to get back to the earliest experiences of the intimate relationships of the baby with his or her mother. In 1955, in an article entitled “Metapsychological and Clinical Aspects of Regression Within the Psycho-Analytical Set-Up,” Winnicott suggested classifying regressive patients into three types:

In the first grouping we are dealing with patients who develop difficulties in the ordinary course of their home life, assuming a home life in the pre-latency period, and assuming satisfactory development at the earlier infantile stages. In the second category, the analysis of the depressive position, we are dealing with the mother-child relationship especially around the time that weaning becomes a meaningful term. The mother holds a situation in time. In the third category there comes primitive emotional development, that which needs the mother actually holding the infant.⁴⁹

He also emphasized that psychoanalytic treatment has the ability to reenact this primal situation with the mother: “The setting of analysis reproduces the early and earliest mothering techniques. It invites regression by reason of its reliability.”⁵⁰ Therefore, he invited therapists to encourage regressive behavior in the treatment room and argued that from a clinical point of view, the only way to treat regressive behavior is by using regression itself. He suggested that “while analysts are waiting to be in a position, through their increasing personal experience, to tackle a case in which regression must occur, there is much they can do to prepare themselves.”⁵¹ An important example can be found in the memoirs of the psychoanalyst Margaret Little, who had her analysis with Winnicott between 1949 and 1955. In a notable autobiographical essay, she describes a few regressive episodes during that time and the way in which Winnicott handled them. She testified that when she was hospitalized, “promptly secluded for the night, and all night long was paranoid, seeing the nurses who came as ‘devils,’” she could only cling to two “transitional objects”: “a handkerchief which D.W. had given [her], and a soft blue woolly scarf which [she] had liked and bought.”⁵² Winnicott, she claimed, was trying to be a substitute for a deprivation of maternal care in Little’s infancy, which was perhaps the cause of many of her severe difficulties in life: “In the morning I was moved to an open room in a locked ward, and the ward Sister came. Later, bathed and fed and cared for like an infant I was settled in the room where I stayed for the rest of the

time. In my sessions with D.W. there had been ‘token’ infant care; he always opened the door to me himself, each session wound up with coffee and biscuits, he saw to it that I was warm and comfortable, and provided tissues, etc.”⁵³ Winnicott perceived maternal deprivation in infancy as the reason for many types of mental collapse, and this was what he tried to provide to his patients—retrospectively, as it were—when they got into severely regressive states. However, for him, maternal deprivation was also the reason for such strong antidemocratic tendencies among so many individuals in Europe and elsewhere. According to Winnicott, ~~it should be emphasized,~~ it was the same ~~maternal deprivation.~~

Winnicott criticized his contemporary psychotherapists, who interfered with mother/infant relations, encouraging the mother not to breastfeed her baby, claiming “that the baby must be trained as soon as he born,” that “babies should not be handled by their mothers,” and “that babies should not be allowed to cry.”⁵⁴ He warned his readers that “if the mother’s tremendous contribution, through her being devoted, is spoiled or prevented, there is no hope that the individual will pass eventually into . . . the group that alone generates the innate democratic factor.”⁵⁵ The implication was that maturity will not be achieved by denying the infant’s needs and preparing him for maturity before he has the full capacity for it. Moreover, he claimed, if parents will not provide their infants the best conditions to express their infantile inclinations (what Suttie and Dicks described as “taboo tenderness”), these babies will grow up to be adults with severely regressive tendencies in their private life and in their public life as citizens. These would be the same adult patients who, like Little for instance, would need to be treated by regressive methods—that is, the therapist would have to create regressive conditions in the treatment room to compensate for the deprived motherhood. Regression among adults is a response to anti-regressive approaches in childhood and can be treated effectively only by allowing regressive tendencies to be enacted in the psychotherapeutic relationship.⁵⁶

Regression, however, is not only a private matter of the therapist and his or her patients but something that has a tremendous impact on public life. We can see how the social effort of the postwar period, of which psychoanalysis was indeed a part, was not only aimed at preventing the difficulties of regressive tendencies within one’s private life but also at preventing their effect on the individual as citizen. As we already know, there was nothing new about Winnicott’s claim that good mothering is crucial for good citizenship and is, therefore, a clear interest of the state. ~~But for Winnicott,~~

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~~good mothering is nurturing and indulging, and necessarily involves less authoritarian approaches to children than the existing ones.~~⁵⁷ If Spartan society ~~needed~~ Spartan motherhood, ~~then~~ democratic societies ~~needed~~ democratic ~~motherhoods~~. Regressive phenomena are not only a sign of a lack in this sort of maternal care in the private sphere but also of a lack in a maternal environment in the public one. Making these domains more maternal necessarily means allowing more space for regression to take place. For Winnicott—as well as for some ~~of his~~ other ~~contemporaries~~, most notably Michael Balint—regression was the symptom of private and public pathologies, but it was also the only cure for these psychosocial maladies.

Winnicott and the External Reality of the Child

On 3 June 1942, Winnicott presented to the British Psycho-Analytical Society his conclusions from observing fourteen case studies of children who came to him for consultations through the Child Department of the Institute of Psychoanalysis over a period of a year.⁵⁸ It is interesting to see not only that many of these children did not eventually get any psychoanalytical treatment, but also that it was Winnicott himself who thought that in these cases it would be better if the child is helped by other means. In some of the severe cases, Winnicott thought that unless he could find an experienced child psychoanalyst, it would be better not to send the child to psychoanalysis at all. In other cases, children could not come regularly to their analytic sessions as these were held too far from their homes. Still other children needed help immediately, and Winnicott did not think that they should be put on a waiting list.⁵⁹

In the case of Max (age nine), a refugee from Germany, the parents had a good understanding of what psychoanalysis was, and when they realized that the boy had emotional difficulties, they immediately wanted him to be analyzed. But according to Winnicott, this was not possible:

Certainly the boy needed it, but to have had him analysed I should first have had to find a hostel or school where he could live. The parents had failed to see in advance that it would not be possible to overcome this difficulty, and I fear they were very much disappointed. If at any time in the distant future we have quite a number of analysts doing child-analysis, a small home must be set up where children of

various ages may live a family life of sorts and get education, while being near the clinic for analysis. . . . I wish they could get it. It took me well over an hour to take his history and to get the mother to realize I had nothing to offer her.⁶⁰

We can see that for Winnicott, psychoanalytic treatment was only one option among others in helping a child. He thought of himself as one of various providers of social services. Indeed, he himself, as we already know, was not only a psychoanalyst but also a doctor, a popular lecturer, and a broadcaster. During the war he was also a consultant psychiatrist for the Government Evacuation Scheme in Oxfordshire and worked in its Hostel Scheme, where he helped in founding hostels for “difficult children.”⁶¹ These were formative years for Winnicott and made him even more attentive to children with difficult backgrounds than he had been earlier. Therefore, he thought that if certain environmental conditions were not fulfilled, psychoanalytic treatment might not be the best solution for a child in need.⁶² In the case of Keith (age three and a half), who lived in the suburbs, Winnicott could help much more by treating him. However, when the mother “found it difficult to come any more, [he] supported her in the idea of leaving off treatment, because the alternative would have been to say to her husband’s family that the child was needing more care than she could manage to give, which would have again undermined her confidence in herself.”⁶³ Maintaining the mother’s self-esteem was more important to Winnicott than anything that could be achieved by psychoanalytic treatment. In the case of Gertie (age seventeen), who had some symptoms of hypochondria, Winnicott said: “What she seemed to need immediately was for a doctor to say firmly to her, in front of her mother, that she would be wise to see no more doctors. I did this. A month later she came to me to let me know that she had taken a job and was making friends and was beginning to feel more confident. If I had put her on a waiting list for analysis, I should have been a bad doctor.”⁶⁴

There were also other more severe cases where psychoanalysis did not have the right tools to help the children. Of Cyril (age ten), for example, who was referred to Winnicott by a child guidance clinic, Winnicott writes: “He urgently needs help, and is conscious of this need. He could, however, only be analysed if there were a house where he could stay, and from which he could attend at the Clinic. I hope there will one day be such a house, because research on insane children can now be done as a result of the recent advances in psycho-analysis.”⁶⁵ According to Winnicott, the best psychoanalytic theory

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would not be useful without ~~a new consideration of environmental factors~~ and the will of all relevant state agencies to collaborate with each other.

The main problem, however, in offering children psychoanalytical treatments was a lack of child psychoanalysts. Thus, during the wartime and moreover after the war, the training of new child psychoanalysts became the main task of the British psychoanalytical movement. Following what later became known as the “Controversial Discussions” between Anna Freud and Melanie Klein and their followers, new programs for training child psychoanalysts—from all psychoanalytic “schools”—were established.⁶⁶ Indeed, training of candidates—though not necessarily of child psychoanalysts—was one of the key topics of the discussions. But while many of the participants from both camps, such as Susan Isaacs and Anna Freud, were very engaged with the war effort in various ways, in the discussions they were mainly preoccupied with theoretical issues.⁶⁷ Unlike many of his colleagues, who ignored the special circumstances in which these discussions took place, Winnicott did not forget the external reality of war. Margaret Little recalls that in the middle of her first scientific meeting, “someone I later came to know as D. W. stood up and said, ‘I should like to point out that there is an air raid going on,’ and sat down. No notice was taken, and the meeting went on as before!”⁶⁸

Not everyone ignored Winnicott’s call to pay more attention to the external realities of patients and to environmental factors. In 1943, at a meeting of the Educational and Medical Sections of the British Psychological Society on the training of child psychotherapists, senior psychoanalyst Sylvia Payne noted that “the Institute of Psycho-Analysis has not organized any direct investigation of the social side of the children under treatment.” Winnicott, she admitted, was the institute’s only source for materials on this issue.⁶⁹ She probably drew on his report when she said that “the present war has hastened the necessity for the organization and extension of the study and practice of psychological medicine in relation to the child, because evacuation and the mobilization of women have created urgent and obvious psychological problems for the child.”⁷⁰

The Marginalization of the Father in Postwar Psychoanalysis

The records of child patients who were referred by Winnicott to the London Clinic of Psychoanalysis can tell us a lot about the new psychosocial approach to child treatment and the preoccupation at the time with the “maternal

role.”⁷¹ In 17 March 1944, Winnicott opened a broadcast entitled “Where Does Dad Come In?” (to be published a year later in *New Era in Home and School*) with the following words: “In my job many mothers have discussed with me the question: What about father? I suppose it is clear to everyone that, in normal times, it depends on what mother does about it whether father does or does not get to know his baby.”⁷² While this text—written still during the war, when many fathers were literally absent—reveals Winnicott’s traditional views on the “right” gender roles within the family, it still grants mothers with huge power: it is up to mothers to decide when and how to bring fathers “into the scene.”

The overriding impression from records of child patients supervised by Winnicott between 1946 and 1955 is the absence of fathers. While most of these reports are about the relationships of mothers with their children, the father is usually discussed very rarely in each case, and usually with regard to a very specific issue. In some cases, the father was not mentioned at all. This absence of fathers should not be underestimated. Since its early days, the psychoanalytic world, and Freudian discourse in particular, was preoccupied with the father and with the paternal role (see for example Freud’s main study cases: “Dora,” “Little Hans,” “The Rat Men,” and “The Wolf Men”). But even after the First World War, when the mother became more important in psychoanalytic theories—and even among the leading figures of this “maternal shift,” Ferenczi and Klein—fathers had never been as marginal in the clinical account as they were in post-World War II British psychoanalysis. This absence of fatherhood in some postwar psychoanalytical circles—which the following archival records hint at—raises questions about the claim by some historians that strict gender roles were deliberately preserved by the state in the postwar years. The point to be made is not that mothers were not restricted to their traditional domestic roles—they certainly were.⁷³ But the boundary between the public domain and the private changed after the war. If, as Denise Riley argues, “the universally pronatalist climate of 1945–47 ensured that the effective target of postwar social philosophy was the mother,”⁷⁴ then in many respects the state itself became more “maternal” than it had previously been. The new welfare services had “interventionist” dimensions that redefined the role of the state. Social services were provided in domains such as the GP’s consulting room (see next chapter), which were now neither private nor completely public. Mothers now had to act as mediators between their own and their children’s private lives and the new welfare services which the state now offered. Consequently,

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the borders between what was known as the traditional “feminine” private sphere and the “masculine” public one became permeable. The absence of fathers from psychological accounts, I argue, could be a starting point to discuss whether—at least in cultural terms—the public domain was really as “masculine” and “paternal” as historians have argued.

One patient, an adolescent girl, had survived the Theresienstadt concentration camp and now lived in a hostel in London. Between 1951 and 1952 she was treated by Ms. I. Bennett, who described her as terribly depressed and full of guilt over her loss. Gradually, however, the processing of these feelings in the treatment room enabled her to reconstruct “the forgotten experiences of her traumatic past, both in Theresienstadt and before.”⁷⁵ Now she could preoccupy herself with “fantasies about finding her mother in a ‘fairy land’ Czechoslovakia which she plans to visit.” This was stimulated even further by the news that Bennett would have to go back to her “home-country”: “she then faced her sadness and grief very bravely in her hours, but besieged me with questions about my family and about my mother’s illness in particular.”⁷⁶ The girl’s father, who—like the mother and a brother—was probably also murdered by the Nazis, was not mentioned in these accounts.

The girl’s second therapist, Ms. M. Bavin, also ignored the girl’s father. While the father was mentioned only once, the therapist emphasized the fact that the girl was preoccupied with her abandonment by the mother and other mother figures (one of them was, of course, her previous therapist, Ms. Bennett). The girl was very curious about Bavin’s family and especially “whether my mother mother [*sic*] had been a good mother, whether I was a good mother to my patients . . . she treats me as if I should know all that she does, thinks and feels, just as her mother did when she was a baby without her saying anything, or I am the faithless mother who gave her attention to others and finally left her.”⁷⁷

Bavin thought that the girl’s indifference to the events marking the coronation of Queen Elizabeth, which took place the same year, was untypical (“in contrast to her companions”) and “hid her grave doubts about the reasons for her own Mother’s disappearance.”⁷⁸ This indifference to the celebration of a new maternal figure to the British state came at the same time that the girl started to develop new maternal relationships with a Czech woman who worked at her hostel. The latter taught the girl “the language and folk songs,” and the girl developed a phantasy that “one day the two of them would return to Czechoslovakia, and live together as Mother and

Daughter, ‘just the two of us, and she would look after me just as my real Mother did when I was little.’”⁷⁹ If, as Annette Kuhn points out, the 1953 coronation was “a grand ceremony of affirmation, of commitment to a larger identity: a sense of national belonging,”⁸⁰ it is easier to see why the girl refused to celebrate the coronation of a new maternal figure while mourning her own private mother.

The treatment was described as successful in many respects. One was that “with the withdrawal of libido from the disappointing mother figure, she began to turn to the boys and men.”⁸¹ Her interest in having a heterosexual relationship was presented by Bavin as a sign of normativity, but the mother has supplanted the father in the development of the girl’s sexuality, and the father’s absence is, again, overlooked.

In the next case, there is a father, and it even seems that he makes the important decisions in the house, as allegedly is the case in “traditional,” patriarchal families. However, I would argue that we can see significant changes in the paternal role in this case, and in some respects, the father is presented only as a shadow figure. The treatment of a boy (of nearly four) had to stop in April 1947, after six months. The father, who came back from the war front, objected to the boy continuing the treatment after he had started school, “though the school was willing to cooperate.”⁸² After consulting Winnicott, the therapist, B. H. Cooke, “agreed with the mother that we should discontinue the treatment.” In fact, it was mentioned that since the father had come back, many of the child’s original symptoms disappeared, and there was no need to insist on continuing the treatment. This case can be easily interpreted as an example of a paternal figure who enforces his norms after returning from the front. But this is not the way in which the father was portrayed by the therapist, who wrote the account. Firstly, the “negotiations” on the future of the treatment were all conducted by the mother and the therapist. Moreover, the decision to discontinue the treatment was not described as a result of surrender to paternal force. Cooke explains that “there had been a good deal of friction between the parents since the father’s return from the Services and his opposition to [the boy’s] treatment became an emotional issue between them so that the child’s loyalties became severely strained.”⁸³ The mother, then, yielded to her husband because she thought—together with Cooke and Winnicott—that it had become too “emotional” an issue, which was not good for the child. “Emotionality”—which was traditionally known as a “feminine” character and attributed to women—was perceived here by the mother and the therapists as

unhelpful, and therefore the mother decided to make a “rational” decision and not to insist on her view. Therefore, one may argue that the author of the report thinks that if someone was being irrational in this argument, it was probably the father. The father is portrayed as the emotional one, while the mother and the therapists were more focused on “what is best for the child.”

We can see in this and other cases how the mother needs to mediate the child’s contacts with “experts”—GPs, psychoanalysts, teachers, and others—and is therefore considered by them a “responsible” parental figure. But being the “responsible” one—and replacing the father in this role—means that the mother is also always solely responsible for any failures in the child’s care. For example, in a case which was treated by S. Mervis and supervised by Winnicott, a mother wanted to break off the analysis of her daughter but changed her mind and became more cooperative after an interview at the Family Discussion Bureau and another one at Paddington Green. In contrast with the last case, in this one “the father seems to have a more steady attitude towards getting help for the child.”⁸⁴ This is the last time that the father is mentioned in this account. For Mervis, as for others among her colleagues, the father is neither part of the child’s problem nor part of the solution. The blame, however, for the child’s situation rests with the mother alone: “[The child] must only get interested in that which she has projected on to the mother, this being more acutely an issue in the child’s case because the mother becomes preoccupied, this alternating with rather exceptionally good mothering patches. The mother’s dissociated life or repressed unconscious is therefore a foreign thing to the child and for this reason there has to be this careful sorting out of that which the child can use and that which would be poisonous.”⁸⁵ It is very likely that the mother suffered from a severe mental illness, and if so, her condition probably had a negative influence on the girl. However, the father’s absence from this account is no coincidence—it is part of a perception that a father’s psychological influence on his children is limited. This understanding of fatherhood is new because, as mentioned, it is one thing to argue—as psychoanalysts had done since the 1920s—that the maternal role is the crucial one in a child’s development, but it is another thing ~~altogether~~ to marginalize the paternal role as a whole.

In another case from 1951, the parents of a nine-and-a-half-year-old boy sought treatment for him because of a “recent aggressiveness toward the mother.”⁸⁶ During the war, the child was evacuated to Northampton, and

“six weeks elapsed until the parents visited and subsequent visits were at least two weeks apart.”⁸⁷ The parents, however, did not think that the evacuation was a traumatic cause of the child’s recent behavior and claimed his development had been normal so far. Interestingly, Dr. A. Bonnard, who carried out the first consultation, also did not think that this was the initial problem—there was something even before that, she thought: “Early admission to Nursery School [one year nine months], followed by mishandled separation, and a return to parents who show *very little capacity for comfortable affection*, and are themselves somewhat obsessive, have all helped to encourage the evolution of his present state.”⁸⁸

A problem arose when the child needed to miss the last hour of school each day in order to get to his analytic session in time, and the mother felt that the school (Gayhurst Primary School in Hackney) was not very cooperative. The child’s psychoanalyst, Dr. Dorn, asked Winnicott to send the headmistress a letter explaining the necessity of letting the child leave school early every day. Winnicott sent the letter, and the headmistress replied: “I do know the case of [the boy] from the mother’s view point. I have encouraged her to come along and to state her difficulties. The boy is an excellent child in school—he gives no trouble at all. . . . *I feel that the mother would not be too easy to live with.*”⁸⁹ In 1952, Dorn had to return to America. In his final report to Winnicott he wrote: “The last months of analysis confirmed the importance of [the boy’s] forcing the mother to be active towards him. He had been unable to work out a satisfactory solution to the oedipus [*sic*] complex, and was not able to use his father as a model. The prolonged separation due to evacuation [at] age 2–3 years was the nucleus for this situation.”⁹⁰ Only when Dorn had taken a more “pedagogical” role, he reported, was the boy able to develop a better paternal relationship with his father and consequently “his attitude to his mother was much more masculine and less possessive and demanding in its former sense.”⁹¹ So far it sounds like a “classic” Freudian treatment, in which Oedipal problems with the father find their resolution by “transference” onto a male psychoanalyst. However, a few months after the end of the treatment, new difficulties occurred, and the boy was taken for a further treatment by Dr. Bonnard, who, as mentioned, had conducted the first consultation with him two years earlier, at the East London Child Guidance Clinic.

Since Dorn’s leaving, the boy had become very tense and disgruntled; he failed to take a common entrance exam to school in January due to tonsillitis, which started the morning of the exam. Eventually, the child passed

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the next exam, but he still suffered from many of the initial symptoms: “The obsessional quality of behaviour diagnosed originally (by me) [and] which then became less apparent during treatment (successful) with Dr Dorn, is re-establishing itself.”⁹²

After the child entered grammar school, the mother “did her best to stop treatment being resumed; as she also declared it unnecessary when originally offered after she begged to help.”⁹³ In her final report from 1954, Bonnard summarized the case by saying that “in certain respects, the resumed treatment of this boy has proved disappointing. The outstanding reason is to be found in the maternal attitude to treatment, which from the outset, has been stifling.”⁹⁴ We can see how the mother was blamed consistently for the child’s mental health. All “welfarist” agents—evacuation workers, teachers, psychoanalysts—perceived the mother as responsible for the child’s problems. The father appears in the records only briefly, only when the child was treated by a male psychoanalyst, and only to show his incapacity as a parental figure.

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Denise Riley notes that “[in] Britain during the 1940s, women en bloc were subjected to a barrage of feminizing descriptions that denied or misread the practical requirements of women workers with children. Social policy, addressing ‘women’ as a foreign body, was indifferent to the fact that ‘women’ constituted no uniform category, and real consequences flowed from this.”⁹⁵ In this chapter, I have aimed to challenge only one element in Riley’s analysis, which is that women were addressed as a “foreign body” to civil society. Postwar British psychoanalysis—with its strong commitment to link “good-enough motherhood” with democratic tendencies, regressive behavior with maternal deprivation, and maternal care in the private sphere with maternal approaches in public ~~policy~~—gives us good reasons to think that in major sites in the postwar public sphere, women were not considered a “foreign body.” Moreover, reading some case studies of Winnicott and other psychoanalytic writers enables us to see not only that women were not “alien” to the British body politic, but also that some policy makers and social thinkers recognized the state itself as having a “feminine” role—in other words, a maternal role.

This “maternalization of the republic” should not be considered an empty rhetorical effort by the nation-state to portray itself as a mother to its

citizens, as we can find in the history of many modern national movements in Europe. Historian George Mosse argued in his now classic book *Nationalism and Sexuality* that “as a national symbol, woman was the guardian of the traditional order . . . she was to be the guardian, protector, and mother.”⁹⁶ Literary scholar Anne McClintock added that “women are construed as the ‘bearers of the nation,’ its boundary and symbolic limit, but lack a nationality of their own. . . . Excluded as national citizens, women are subsumed only symbolically into the national body politic.”⁹⁷ Indeed, until the mid-twentieth century, mothers, like all other women, did not have equal civil status to men, even though—or one may say because—the mother as a symbolic figure played such a major role in the building of the nation-state.

However, the building of the welfare state was a different project, and it did put real mothers as its main focus. Mothers benefitted substantially from this new “domestic citizenship,” as some historians have already shown. Angela Davis, for example, points out that the establishment of the NHS in 1948 “gave rise to a renewed interest in maternal, and to an even greater extent, child health. Women and children were perhaps the NHS’s greatest beneficiaries as they had gained least from the pre-war insurance schemes.”⁹⁸ In many respects, the job market also improved for women. Pat Thane claims that women were encouraged to participate in the labor market, even if young women were still expected to wait until their children grew up before they found a job.⁹⁹ Because few good opportunities were available to women in the job market (work was usually low-status and badly paid, particularly for working-class women), many mothers preferred to stay at home, especially when many of them could now afford it. New technologies such as washing machines and vacuum cleaners became more available, and consequently domestic work became much less difficult and left more free time for mothers. Working-class women were now less willing to commit themselves to full-time jobs, particularly in domestic service in other houses or as servants. On the one hand, Thane argues, we can see in mid-century Britain a gradual change in gender roles—beginning already before the war—which was partly caused by better conditions for women in the labor market. On the other hand, many women willingly stayed at home, if only because the job market was not yet attractive enough for them to take on the double burden of domestic work and a paid job.¹⁰⁰ This was also the atmosphere in which many of the psychoanalytical ideas on motherhood evolved.

In his *Secrets of the Soul*, Eli Zaretsky notes that in both main theoretical elements of postwar British psychoanalysis—“the recognition of dependence and the construction of an idealized view of the mother—psychoanalysis dovetailed with the emerging pattern of the Beveridge welfare state.”¹⁰¹ Thus, postwar motherhood should be seen as part of a new “social contract,” which as Zaretsky puts it, was “economically progressive but culturally conservative.”¹⁰² Therefore, the fact that the emergence of the welfare state—with all its limitations—was the precondition for “domestic citizenship,” with all its problematic aspects, should not be overlooked.

Imagining—perhaps even phantasmizing—the state as a “maternal” entity, neither necessarily improved women’s social and cultural conditions nor necessarily helped women improve their civil status. The question of whether the postwar era in Britain was a reactionary period for women is still under debate, but we can already say that it was not *only* reactionary.¹⁰³ For example, I argued in this chapter that we should reconsider the perception that the postwar era was reactionary in its effort to preserve strict traditional gender roles. By increasing the power of social services and their influential agents (psychotherapists, social workers, and, after the war, also GPs), the welfare state created new public domains which were partly guided by maternal psychoanalytical ideas and were neither “masculine” nor “paternal” in the traditional sense. Moreover, as we saw at the end of this chapter, we can identify in these years psychological discourses that marginalize the father to the extent that he is no longer considered as having a major psychological role in his child’s development. Furthermore—as we will also see in the next chapter—some occupations, such as general practice, which traditionally had strong “paternal” dimensions, now had to adopt new “maternal” approaches, which were taken directly from the new psychoanalytical-maternal way of thinking. It is true that, in this context, the “maternal” was—as it perhaps always has been—an empty signifier, one that could be loaded with personal and collective images, anxieties, and phantasies about what mothers “really” are. Nonetheless, the years after 1945 provided the right cultural and political conditions for turning these projections into an almost official public discourse. Indeed, some circles of the state now welcomed this effort of loading the “maternal” with new meaning, and sought to strengthen its association with new philosophy of “caring,” along the lines of postwar welfarist policies.

CHAPTER 6

“The Drug ‘Doctor’”: The Balint Movement and Psychosocial Medicine in Postwar Britain

At the beginning of the 1950s, Michael Balint, still a newcomer to London, was asked by Enid Eicholtz, a welfare worker, psychoanalytic trainee, and one of the founders of the new Family Discussion Bureau (later to become the Tavistock Institute of Marital Studies), to help her at the bureau.¹ There, Balint designed training for family counselors that showed them how analyzing the relationship between couples and their counselors can reveal crucial elements in the problematic relationship between the partners themselves. This new approach to training counselors (which Balint called research-cum-training), led Enid and Michael—themselves a couple now—to establish a new innovative peer group, this time for general practitioners (GPs).

Their initial idea was to create a group where GPs would be able to discuss their practical work and particularly its “psychological implications in general medical practice.”² The initial group included fourteen doctors (all GPs except one psychiatrist). They met once a week in London to discuss case studies, namely their patients’ stories, which were brought by each participant. Many cases, however, revealed to the doctors that their patients often served only as triggers for debate and that the real “case studies” were the doctors themselves, who found themselves investigating the long-term doctor-patient relationship from a very personal perspective.

In 1957 Balint published his seminal book *The Doctor, His Patient and the Illness*, in which he discussed the story of his work with these doctors and provided a model for the emergence of Balint groups around the world. In the second half of the 1950s, many British GPs read this book and wanted to become part of this new movement. Many of the leaders of the Royal

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College of General Practitioners between the 1960s and 1990s were graduates of Balint groups; some of them, like Max Clyne and John Horder, were members of the original group.³ In the late 1950s, Michael and Enid Balint were appointed professors at the University of Cincinnati and regularly spent time there. Balint became a popular speaker not only in Britain but also around the world. What started as a small peer group of GPs at the Tavistock Clinic became, by the 1960s, a worldwide medical movement which still exists today.⁴

The theoretical presumption behind Balint's work was that there is no such thing as a medically objective diagnosis; rather, the diagnosis is always an intersubjective process negotiated by the doctor and the patient. Thus, the doctor and the patient are always in a process of negotiating the right way to describe a set of symptoms, name them, and finally treat them. By focusing on Balint, this chapter shows the ways that postwar GPs began to think more "psychoanalytically." Thus, the argument here draws together several themes considered in earlier chapters; it mainly demonstrates how Ferenczi's ideas, mediated by various influential British psychoanalysts, came to shape a significant swathe of medical opinion after 1945. This knowledge, Balint and others insisted, could be of immediate practical benefit in the work of Britain's GPs. It was especially the concept of regression that was shown to be of vital relevance in understanding the doctor-patient relationship more generally.

Balint believed that regressive situations require doctors to recognize that they are taking part in psychological role-playing exercises designed to recreate the patient's past. Moreover, a key presumption of this psychoanalytically oriented discourse was that regressive states appear more often in the context of authoritarian relationships, and that each such case contains hidden maternal aspects which return from the repressed, so to speak, in the clinical relationship with the doctor. An increased awareness of these aspects might give doctors a better understanding of their most demanding patients and help them discover the patient's needs in terms of both body and mind. Balint suggested that GPs should learn to recognize regressive situations as indications that patients need help; he also suggested that GPs should not look at situations solely from the outside, but take an active—indeed, sometimes parental—role in bringing regressive states to the surface and try to respond to patients' regressive needs as far as possible.

The chapter raises several questions about the motivations behind the founding of this movement, as well as the nature of the project itself: What

was the appeal of Balint’s new approach for a new generation of British doctors after the Second World War? What were the social and cultural conditions in the early 1950s that made psychoanalytical ideas relevant to them? Which aspects of the old models of doctor-patient relationships became unsatisfactory now and had to be revised? What new ideal of general practice did the Balints try to promote? And finally, how was this model of a family doctor fueled by the new maternalist discourse presented in this study?

Some answers to these questions can be found in the history of psychosocial medicine in the interwar period. This new way of thinking replaced an older paradigm, one which perceived medicine as dealing mainly with physiology. Additional explanations will emerge when Balint groups are examined within the context of other examples of group therapy, which became popular after the war, mainly within the Tavistock Clinic.⁵ Balint’s published writings, especially *The Doctor, His Patient and the Illness*, are also an important resource. There is, however, another source that has been overlooked by Balint scholars until now. A small discussion group on the role of psychology in general practice, led by Michael Balint and Henry Dicks, was founded in April 1951. It was there that GPs revealed many of the then problematic dimensions of their work under the new National Health Service (NHS) as well as their new needs as family doctors in the postwar era. The decision to establish the first Balint group was made during these meetings.⁶ The minutes of this group will serve as another important source for a deeper investigation of the social and cultural history of the Balint movement in postwar Britain, and will answer some of the questions about the motivations for its foundation.⁷ The Balint movement, I argue, helped GPs make their profession more attuned to mid-twentieth-century demands for psychosocial medicine and its unique interdisciplinary approach. Balintian methods enabled GPs to outline a new medical ethics, which they thought was much needed in the political and cultural climate of the postwar era. As will be discussed in the last part of this chapter, this new ethics was based on what were perceived as “maternal” values.

The “Psychosocial” Turn in British Medicine, Circa 1930–50

The “psychosocial” became a key notion in a number of areas in interwar medicine.⁸ A new generation of psychologists, psychiatrists, psychoanalysts, educationalists, social theorists, and policy makers made a major effort to

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detach themselves from biological approaches, which had been dominant in Britain since the second half of the nineteenth century. The new approach concentrated on the social factor as the most important one in the functioning of the human body and mind. Not only were social factors now perceived as the key to the psychological well-being of the individual, but “the conflation of mind and society promoted an implicit hierarchy in which the social took priority over the biological.”⁹

One product of this psychosocial discourse was the emergence of “social medicine” as a new discipline that, as sociologist David Armstrong described it, “incorporated preventive medicine, public health and a focus on social relationships.”¹⁰ The founders of social medicine aimed explicitly to politicize the medical domain, arguing that the state was obliged to provide its citizens with a decent standard of public health, which meant also taking into account the mutual influences of medicine and social factors such as the economy, education and urban planning in its medical and social policies. As historian Dorothy Porter argues, “debates surrounding social medicine in the interwar years intersected with the debates surrounding the planning of a national health service, and the establishment of access to services free at the point of delivery as a fundamental social right of democratic citizenship.”¹¹

Moreover, during the war, and increasingly in the postwar era, many believed that the psychosocial domain had much to contribute to protect democracy from totalitarianism. As historian Daniel Pick puts it in *The Pursuit of the Nazi Mind*, after 1945 “the psychological state of the citizen and the robustness of the polity were seen as intimately linked.”¹² The popularity of this way of thinking is well demonstrated in the records of the large-scale International Congress on Mental Health that took place in 1948 in London. The prime minister, Clement Attlee, was one of the patrons of the congress, and its participants included leading psychoanalysts, psychiatrists, and anthropologists, such as Anna Freud, Melanie Klein, J. R. Rees, and Margaret Mead.¹³ Delegates of almost sixty countries attended, as well as representatives of new international organizations such as the World Health Organization and the United Nations Educational, Scientific, and Cultural Organization (UNESCO). Many of the speakers emphasized the link between the mental health of individuals, families, groups, communities, and states. For example, when studying the psychosocial conditions for the emergence of Nazism, it was argued, there should be no differentiation between the psychology of the individual and the psychology of the group,

as each explains the other. Some speakers, such as John Bowlby, emphasized the role of good parenting and particularly good mothering as the basis for building strong families, and consequently creating good citizens. In the postwar years, “the idea that people were made by social forces, not born with given dispositions, attitudes, or abilities, became a dominant form of discourse.”¹⁴ If in the interwar period the psychosocial was still only a strong alternative to an old Darwinian understanding of medicine and public health, then after the war it supplanted the biological frame of explanation altogether. As we shall see later on, this was fertile scientific ground for influential medical experiments, such as the one conducted by the Balints.

This new attention to the wider implications of a healthy psychosocial environment also created the right conditions for influential changes in postwar psychiatry. First, psychotherapy became a key form of treatment for different kinds of patients, including the more severe cases. In fact, this shift began during the war. At the beginning of the war, psychiatrists treating traumatized soldiers were still using some of the earlier methods used by First World War psychiatry, such as reintroduction to military life after a short period of rest, or reeducation and persuasion in order to explain to soldiers the “real” nature of their mental collapse.¹⁵ These methods, however, appeared to be ineffective, and psychiatrists looked for different medical solutions. Alternative methods came from leading army psychiatrists such as Emanuel Miller, Wilfred Bion, and Lieutenant Colonel J. D. W. Pearce, who before the war worked at, or were trained by, the Tavistock Clinic in London. One of the most influential among these was J. R. Rees, the director of Tavistock, who was appointed, at the beginning of the war, as a consultant psychiatrist to the army at home and was responsible for much of the deployment of the psychodynamic approach in army psychiatry.¹⁶ Indeed, from 1942, many psychiatrists adopted the new psychodynamically oriented methods, and a lot of experimental work in this subject was done during the war. Perhaps most famous was the First Northfield Experiment in group therapy, which was carried out at Hollymoor Hospital in Northfield by Wilfred Bion and John Rickman in 1942–43.¹⁷

Under the guidance of Bion and Rickman, a group of soldier-patients was required to become a “leaderless” therapeutic group. The real aim was that the soldier-patient would eventually overcome his initial resistance to this antiauthoritarian approach and take full responsibility for managing his own hospital ward. In other words, Bion and Rickman hoped that this would become a “therapeutic community” rather than “group therapy.”¹⁸ For

many years, this experiment was considered very successful in clinical terms and a turning point toward the great popularity of psychodynamic approaches after the war. The fact that the army authorities did not think that Bion and Rickman did a good job only encouraged some scholars to applaud it. These researchers argued that it was precisely Bion and Rickman's antiauthoritarian stance that made their clinical approach so helpful for their soldier-patients and so unattractive to the army.¹⁹

By contrast, the historian Edgar Jones presents a much more skeptical view of these events and their influence on the development of postwar psychotherapy. First, he argues, Bion and Rickman were not the first to run group therapy in Britain: there were earlier experiments of this type in the 1930s. Furthermore, he maintains, their first experiment "proved short-lived."²⁰ After only six weeks, it was clear to the authorities that this experiment was a failure, and this was why Bion and Rickman were transferred to other units.²¹ According to Jones, the second experiment, led by Michael Foulkes and later by Tom Main, was slightly more successful, but ~~he claims~~ this does not change the big picture, which is that "wartime psychotherapy was not as efficacious as claimed."²² This is not to say that psychotherapy was not popular after the war—indeed it was. But according to Jones, Northfield became virtually a myth, and "when these techniques were introduced in the postwar health service they were accompanied by expectations raised beyond what might be reasonably achieved."²³

Both views concentrate primarily on the efficacy of the treatment and its impact on postwar psychotherapy. However, one may argue that group therapies became important not only for clinical reasons (justified or not), but also because of the postwar preoccupation with redefining what a "group" actually is.²⁴ In the postwar era, the need to explain why so many ordinary men and women in Europe became active—or passive—supporters of collectivist-totalitarian ideologies was one of the main reasons for "the emergence of 'the group' as a unit of study" in the "psy" professions.²⁵ Thus, for example, in order to understand the full context of the Northfield Experiments, we must remember that during the war, and moreover in the postwar years, "the group became virtually coextensive with the illness itself—psychopathology was a product of a pathology of group relations."²⁶ The inner dynamic of groups was now perceived as an enigma that had to be solved in order to save the democratic world from more catastrophes in the future.²⁷

The psychosocial discourse had other implications in reshaping public attitudes and policy debates. Notably, by the late 1940s, this discourse helped

blur the lines between the “pathological” and the “normal.” Indeed, as Hayward points out, old distinctions of illness and health collapsed and “created a situation in which the whole population became the target for therapeutic intervention.”²⁸ Illness and health were now perceived as two categories belonging to the same mental spectrum.²⁹ Thus, many asylums began to open their gates and allow their patients to leave and return more freely; psychiatric day hospitals were founded; and patient-centered approaches became increasingly popular. Psychotherapy, which traditionally was considered useful only in treating neurotic patients and not psychotics, now became a legitimate medical tool for all patients. Mental illness was perceived as a pathology caused, in overwhelming preponderance, by environmental factors, and therefore it had to be cured not through exclusion, but through a deep engagement with the community which to some extent created the illness in first place.

These new clinical approaches were not unrelated to the establishment of the new NHS. Indeed, the NHS, which was considered for many years “the crowning achievement of the postwar Labour government’s ‘welfare state,’” was to be extensively supported by leading psychoanalysts and psychiatrists.³⁰ Many of them strongly believed in the need to bring about a dramatic ethical shift in postwar British society, and this led some even to apply more directly social-democratic approaches in their clinical work.³¹ A key example is the attempt by the psychiatrist and psychoanalyst Tom Main to create a democratic “therapeutic community” at the Cassel Hospital, where he was a medical director starting in 1946. Drawing on the Northfield Experiments, Main’s aim was to create a democratic community of patients who would run all aspects of their lives at the hospital. Main challenged the then-authoritative model of hospitals, in which “staff [were] to be only healthy, knowledgeable, kind, powerful and active, and patients to be only ill, suffering, ignorant, passive, obedient and grateful.”³² For him, staff and patients were “inevitably to some extent creatures of each other.”³³ As we shall see shortly, this medical perspective is very similar to the way in which Balint understood the relationship between the doctor and his or her patient.³⁴

General Practice in the Postwar Era

The emergence of the group as a major unit of reference and the shift toward psychosocially oriented research in more and more domains of the British public sphere is the right context for understanding the success of Enid and

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Michael Balint in their work with GPs. But before turning to discuss their Balint group, a few historical remarks on general practice before and after the Second World War are necessary.³⁵

The National Insurance Act of 1911 provided, for the first time in British history, a scheme for a National Health Insurance (NHI), although its aim was to cover only the working population, namely low-income men and single working women, as well as a few waged-worker married women. However, except for paying maternity leave, the NHI scheme did not cover either the wives of working men or their children. Full coverage for all women and children was introduced only with the new NHS in 1948.³⁶ One of the main consequences of the NHI was the introduction of a new “panel” system, which greatly increased GPs’ income.³⁷ Moreover, the combination of more available doctors for all classes of society, along with major medical and technological developments in the first decades of the twentieth century, created what Anne Digby and Nick Bosanquet describe as “the enhanced authority of the medical practitioner, and an increase in his perceived ability to cure.”³⁸ Nevertheless, in some crucial respects the quality of their service did not improve. General practice remained an independent profession, and the implication was that GPs had to pay for new equipment, technologies, and training themselves, which many could not afford. The state also did not encourage doctors to specialize in new fields. In fact, in many cases it was much more profitable for GPs to send “panel” patients to voluntary or municipal hospitals than to keep them under their own medical care. By the 1940s there was a real conflict between the realization that the current NHI scheme encouraged a low quality of medicine, and the GPs, who enjoyed a major increase in their income.³⁹

The introduction of the NHS in 1948 brought radical changes in several aspects of British public health.⁴⁰ The most important change was the inclusion of all women and children in the health insurance. Another important step was the nationalization of all hospitals and the centralization of many services around teaching hospitals. In general practice, the major change was the rapid movement of middle-class private patients to the new free service. Within a few years, only a few GPs remained “all-private.”⁴¹ But apart from that, general practice, at least in the early days of the NHS, remained as it was during the NHI period. The British Medical Association (BMA), successfully fought to preserve general practice as a “liberal” occupation, and GPs remained independent contractors after the foundation of the NHS (and not salaried by the state, as initially planned by the more leftist

architects of the NHS). However, preserving their independence neither helped them much in improving their professional authority nor aided them in developing the quality of the care they provided: they remained the “Cinderella service of the early NHS.”⁴² Indeed, the state not only invested vast amounts of money in the newly nationalized hospitals—and thus greatly increased the number of hospital consultants—but also demanded an increasing professionalization of the service. Many of the medical problems that were traditionally treated by GPs now became the task of an expert.

The new scheme evoked strong feelings of injustice among GPs, mainly among the older generation (indeed, many old doctors took early retirement). Balint, for example, supported the new model of the NHS, even though, as André Haynal points out, “like most physicians, particularly of his generation, he had a certain aversion for decisions on health made by non-medical government officials.”⁴³ Some of the younger doctors, however, were more politically inclined toward the new welfarist ideology and more willing to cooperate with the state in fulfilling its welfarist vision. For example, many doctors hoped to integrate into new health centers, which the government officially encouraged. In fact, the expectations with regard to these health centers were very high among leftist circles, and the failure to make these centers a main feature of public health throughout the nation disappointed many of the young doctors.⁴⁴ Nevertheless, the influence of health centers on general practice as a profession should not be dismissed entirely. As David Armstrong has shown, GPs transitioned—in a process that began in the postwar period and increased rapidly in the 1960s—from working in their private homes to working in health centers and then in the new emerging “group practices.” This shift created a new workspace, which was now located in the community and which was neither a hospital nor a private house. The creation of such a workspace was crucial, from the 1960s onward, in the making a new professional identity for postwar general practice.⁴⁵

Another shift in primary care came with the publication of the Collings Report on the professional state of general practice in England, published in the *Lancet* in 1950, by the Australian-born practitioner J. S. Collings.⁴⁶ It was an indictment of the British state for utterly neglecting general practice. The report revealed that the medical quality of general practice was deteriorating and the working conditions in practices (particularly in industrial areas) posed a real danger to the public. Moreover, Collings argued, as long

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as general practice did not become a first priority for the state, there was no chance of real improvement in other medical services (including, for example, the level of hospitals, which were already prioritized by the state).⁴⁷ The Collings Report caused a substantial debate in medical circles. The BMA dismissed the report and composed an alternative one, which aimed to refute Collings's findings completely.⁴⁸ But other researchers took on the challenge and conducted further research, for which the Collings Report served as a starting point.⁴⁹

Not unrelated to the Collings Report, and equally important, was the establishment of the Royal College of General Practitioners in 1952. Not only did the new college create a major professional institute for training and research in general practice, but it also designated the intention of a new generation of GPs to turn their profession into a medical discipline in its own right.⁵⁰ There was also a strong affinity between the college and the emergence of the Balint movement. While, proportionally, only a small number of London-based doctors participated in Balint seminars between 1950 and 1970, many of them became leading figures at the college and in university departments of general practice. Their influence on the profession was nationwide.⁵¹

One should read the Collings Report, the establishment of the college, and the emergence of the Balint movement, as belonging to the same historical moment in British medicine. The influence of figures such as Collings, Balint, and Stephen Taylor was much wider than general practice itself.⁵² They were responsible for an epistemological shift in the understanding of the complex relationship between the doctor, the patient, and the illness. This turn to a psychosocial "patient-centered" approach dominated the discipline of general practice for nearly four decades.⁵³ In order to understand the crucial role of Michael Balint in helping to shift primary care in Britain to become more "psychosocially oriented," we should first go back to early twentieth-century Budapest, where Balint's worldview was fundamentally shaped.⁵⁴

Michael Balint: The Budapest School in London

The son of a local physician, Michael Balint (Mihaly Bergsmann) was born in 1896 in Budapest to an orthodox Jewish family.⁵⁵ The First World War interrupted his medical studies, and he was sent to Russia and then to Italy.

In 1915 he came back from the front and continued his studies, but he did not like medicine and spent most of his time listening to lectures in many other subjects, such as mathematics, chemistry, electrical engineering, economy, and also psychoanalysis.⁵⁶ It was Alice Szekely-Kovacs—who would become his first wife a year later and change her surname to Balint—who first exposed him to Freud’s “Three Essays on the Theory of Sexuality” and *Totem and Taboo*, and thus introduced him to the psychoanalytic world.⁵⁷

The new couple moved to Berlin, and both started their analysis with Hanns Sachs. However, Balint described himself as “very unsatisfied” with this analysis, and after finishing his training in 1924 the couple returned to Budapest.⁵⁸ The psychoanalytic movement of Budapest was already under attack by the right-wing authoritarian Horthy regime when Balint started taking a major role in developing the Budapest school’s institutions and ideas.⁵⁹ Inspired by the success of the Berlin Poliklinik, Balint was the spirit behind the opening of the Psychoanalytic Society’s clinic. He was determined that focus be placed on therapy rather than on training; he demanded subsidies for the treatment of patients who could not afford their therapy and for candidates who were not wealthy enough to pay their training fees; and he also convinced his senior colleagues to help raise money for these ambitious social plans.

After Ferenczi’s death in 1933, Balint became the senior figure in Hungarian psychoanalysis. But the political atmosphere of those years made it almost impossible to maintain any kind of psychoanalytic activity, and Balint had to face strong political pressures.⁶⁰ After the 1938 Anschluss in Austria, the Balints decided to leave Budapest, and Ernest Jones and John Rickman (both ex-analysands of Ferenczi’s) helped them move to Britain. These were difficult years for Michael. His wife, Alice, died suddenly in 1939, ~~just after leaving Hungary~~. Without his closest partner, both personally and professionally, he found himself isolated. Moreover, he also had to retake all his medical exams in Scotland before being able to find a job as a child guidance clinic director in Manchester. In 1944 he married Edna ~~Oakeschott~~, who taught pedagogy at the University of Manchester, but this marriage did not last. At the end of the war he received a message that his parents had died. However, only in 1948, after he was sent to Hungary to get in touch with surviving analysts, did he learn the tragic circumstances of their death: they committed suicide together to avoid deportation by the Nazis.

In 1948 Balint joined the Tavistock Clinic and opened his first practice. During the 1950s and 1960s, he became recognized as one of Britain’s

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leading psychoanalysts, and in 1968 he was elected president of the British Psycho-Analytical Society. In his work in Britain, Balint tried to apply many of the principles that had guided him and his colleagues of the Budapest school.⁶¹ This school was known for, among other things, its interdisciplinary approach, and some of its members were pioneers in applying psychoanalysis to other disciplines (as we already saw in the case of Geza Róheim).⁶² The school was also famous for its attempts to integrate psychoanalysis with general medicine. Interwar Hungarian psychoanalysts persistently argued for providing psychoanalytic education to all family doctors. As Franz Alexander put it in 1927 (when he was already a member of the Berlin Institute): “The ideal physician—one who has been simultaneously trained in mental as well as in physical science, who is as well versed in the structure and function of the psychical personality as in anatomy and physiology, who understands how body and mind interact on one another—belongs to the future.”⁶³ Balint was indeed part of this effort to change the general standards of medicine according to new psychoanalytic criteria. In 1930 he published a polemical article against general practice in Hungary, where he argued that “in the eye of doctors, the patient becomes an insensitive machine, a skillful combination of cleverly fitted parts; the totality of the person, a human being with his own goals and failures, his joys and sorrows, has practically vanished from their thinking.”⁶⁴ Restoring the holistic role of the GP as a family doctor was a vision that Balint outlined in 1930s Budapest, but came closer to fulfilling only in his work with British GPs in the 1950s and 1960s.

Who Needed the Balint Group?

Balint was not the first in Britain to promote the idea of providing GPs with psychotherapeutic skills. The therapist Eric Graham Howe started to run a psychoanalytic course for GPs at the Tavistock in 1931. In 1935, the deputy superintendent at the Maudsley Hospital, Aubrey Lewis, suggested that GPs take on many of the medical functions that had previously only been assigned to psychiatrists. The *Lancet* and the *Practitioner* organized a pedagogic series on the psychiatric dimension in general practice. Similar views were expressed after 1948 by the influential GP Arthur Watts.⁶⁵

Yet Balint groups had a much greater influence on the British medical scene than previous experiments. Firstly, it was not a course or a training program, but a “group”—a major focus of research for the Balints and their

colleagues at the Tavistock. Rooted in the Northfield Experiments, group dynamics became one of the most popular approaches in British psychotherapy in the postwar years. Moreover, in terms of research, it provided new findings that could not be obtained earlier. While Collings and others created “anthropological” documents on British GPs, in the Balint group the doctors were not passive subjects for an external observer.⁶⁶ In fact, one may say that they were rather participant-observers of their own profession and thus helped general practice redefine itself when this was much needed.

In the spring of 1951, Balint and Dicks co-organized a ten-meeting seminar with GPs. In these meetings, the two not only advised the doctors on the psychological perspectives of their clinical work but also heard from them about their specific difficulties and challenges in treating psychosocial problems under the new NHS scheme. The group included twelve GPs, one psychiatrist, and Balint and Dicks. The initial topics for discussion requested by the doctors included questions about the right time to refer patients to psychiatrists; nervous children with anxious parents; sufficient knowledge of common psychological syndromes; how to maintain patients’ physical treatment while they are undergoing a psychotherapeutic one; dealing with psychopaths; dealing with psychosomatic illnesses such as hysteria; discussing sex issues with patients; suggestion and hypnosis by GPs; impotence and frigidity; sleeping problems of patients; menopause; and adolescence.⁶⁷ All of these problems were discussed under the assumption that in these cases “the most frequently prescribed drug is the doctor himself but we have no pharmacology of this drug.”⁶⁸ Accordingly, the basic Balintian question is, What is the “drug ‘doctor’” and how should we use it?

Balint’s approach was that the GP’s role should be extended beyond its narrow definition as a provider of general medical services. He thought that “the doctor’s technique has both a medical and human aspect. He is a doctor and missionary who converts people towards a more realistic form of adjustment to life.”⁶⁹ Later on he would say that the doctor “[needs] to educate patients towards a mature attitude to their illness.”⁷⁰ In explaining how one should fulfill this missionary role, Balint distinguished between two possible medical attitudes: the “maternal” attitude and the “paternal” one. He did not explain in detail the difference between the two, apart from saying that the maternal attitude is a “missionary function” with “a major educational value,” and that the paternal attitude also has some educational value, but using this approach means providing less time and attention to each individual.⁷¹ Both attitudes are valid, and can be taken by doctors

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in different cases. However, as we shall see, Balint thought that the maternal attitude was the one the profession needed most.⁷² Nonetheless, Balint was still torn, I argue, between the postwar ideological “welfarist-yet-interventionist” approach of encouraging doctors to practice a highly paternalistic approach, taken from the “doctor-knows-best” tradition, and his psychoanalytic attitude in which the ideal of a caring and tender maternal relationship should be the model for all social relationships—doctor-patient included.

“Can You Do Any Better Than We Do?”: General Practitioners and the “Specialists”

In the discussions, the GPs repeatedly raised their lack of knowledge in psychology and their lack of training in psychosomatic medicine. These deficiencies created, they said, a structurally inferior position for them in their professional contacts with psychiatrists. One of the main problems for doctors was that a lack of psychosocial vocabulary prevented them from diagnosing many of their patients’ pathologies, even when they knew exactly what they were suffering from. However, Balint and Dicks strongly encouraged the GPs not to feel any inferiority for their “ignorance” in psychology. Balint argued that “the GP frequently knows better about his patient than the specialist, but . . . he has not the courage to back up his knowledge.”⁷³ One of the aims of this seminar, added Dicks, was precisely to encourage GPs “to think in holistic terms”—that is, to use their patients’ psychosocial record (socioeconomic background, family situation, and so on) to help them where the specialist could not.

Nevertheless, the GPs complained that although they can give “better treatment than the specialist from the point of view of the total personality[,] . . . at the medical schools students are given the impression that all GPs are fools.”⁷⁴ It turned out that the doctors’ problem was not only their lack of knowledge but also their poor professional status: “If the GP gives a diagnosis that the hospital thinks is not serious, they will say they have no beds. It is necessary, therefore, to state a false diagnosis over the phone so that the patient may be admitted.”⁷⁵ Balint noted that GPs have a double “apostolic function”: converting “both the patient and the specialist to his own belief.”⁷⁶ It is true that specialists have the skills to do things that the GP cannot, but the essential thing, Dicks noted, “is that specialists must act in the service of GPs,” and not the other way around.⁷⁷

At that stage of the conversation, the GPs realized that Balint and Dicks were suggesting that they increase their engagement with psychotherapy not only as a form of treatment, but also as a necessary skill for improving their professional status. The GPs were encouraged to ask specialists “Can you do any better than we do?,” when the answer, they believed, was very often no.⁷⁸ A few meetings later, in a discussion about premarital advice and talking about sexual matters with patients, some doctors were uncertain as to the limits of their duty regarding these matters.⁷⁹ Balint replied that “it is exactly the same situation as if the doctor were considering an operation. Some operations can be done in the surgery, others have to be done by specialists. In such circumstances the doctor goes as far as he feels able.”⁸⁰

Toward the end of the meeting, the GPs became much more assertive in their demand to extend their authority to include cases of marital problems. They argued that as family doctors they could do a better job than institutions such as the Family Discussion Bureau, and that time and money should be made available for this purpose.⁸¹ Here again, the doctors realized how much potential the psychosocial approach held for promoting their professional status. Indeed, Balint and Dicks really believed that GPs could apply psychosocial approaches better than anyone else, because they had a holistic view of their patients: physiologically, psychologically, socioculturally, and even politically. Seen from that perspective, general practice in the postwar years was not only a medical profession but also a civic duty.

General Practice and Maternal Ethics

At this stage it became clear to all participants that if the psychiatrist “must pay regard to social, political and ethical factors,” then so did the GP, and therefore general practice needed to define its ethical system. As one doctor put it, the question should be, “What are the ethical standards that the GP and the psychiatrist must subscribe to? Should we stick to the conventional legal, economic, and ethical code?”⁸² Suddenly, the GP’s ethics became the main focus of the discussion, and the doctors started to raise more and more specific ethical dilemmas for the group’s assessment.

One said, for instance, that psychiatrists often try to “patch up marriages when it is really quite unrealistic to do so. Why should we necessarily try to keep a marriage together?”⁸³ It was suggested that in marital problems, as in other issues, the GP should provide the patient with alternatives before

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letting the patient make up his or her own mind. Balint, however, rejected this approach, saying that “in certain cases one has to lay down rules.”⁸⁴ Balint perceived the GP as a parental figure, which meant that for him, the doctor had to take an interventionist position when necessary. In that sense, he adopted a similar interventionist approach to the one applied by the new welfare state in so many forms.⁸⁵

Other ethical discussions focused on the “clash between the happiness of the individual and that of the group.”⁸⁶ For example, doctors had certain views on whether to save the mother or the child when handling complications in childbirth. This discussion led one doctor to suggest that here, a GP’s opinion is no more correct than that of anyone else: “No-one will adopt any particular code of ethics simply because he is a GP.”⁸⁷ Balint, however, was consistent in his interventionist approach, arguing that “we do, in fact, lay down standards for other people, although we may only do this unconsciously. It is a function of these discussions to try to make these standards conscious.”⁸⁸ When GPs suggested that their ethics should match their patients’ ethics, “Balint expressed silent disagreement.”⁸⁹ He told the group of a suicide attempt, “where the girl had taken drugs and would not open her mouth to have her stomach washed. As a last resort, the doctor boxed her hard on the ears,” which caused her to open her mouth and saved her life.⁹⁰ He maintained that GPs have the responsibility for their patients and they are obliged to act according to what they think is right for them—a “doctor knows best” approach, one may say. Therefore, doctors cannot always follow their patients’ ethics but must have their own ethical standards. The doctor, for Balint, was similar to a parent, who should *not* always listen to his or her child’s will, as the child does not really know the potential dangers of his or her behavior.⁹¹

This parentalistic approach to patients, promoted in some of the cases also by Balint, is a telling example for the ways that the newly established welfare state aimed to form a protectionist social contract, which was based on the analogy between the state and a heteronormative family (i.e., an analogy between the relationships between citizens and the state, and the relationships of parents and their children). Within this political discourse, professional figures such as family doctors had also an ideological role to play by taking a proactive parental role toward their patient-citizens. Thus, under this model, it was assumed that doctors *must* know best, not only because of their medical authority but mainly because of their affiliation to the bigger parental entity of the “state.”

Another example of Balint’s tendencies to use authoritarian approaches in medicine came when the GPs discussed their problems with uncooperative Christian Scientist patients. One doctor said that “it is a matter for the individual to decide, how he lives and how he dies.”⁹² Balint replied that “doctors had a mission to heal and also a mission to teach. . . . It is part of the doctor’s role to adopt an apostolic approach to convert the patients towards his belief.”⁹³ For him, the GP was a social agent whose mission goes far beyond medicine itself. Thus, there are some beliefs that the doctor should actively reject. It should come as no surprise, then, that given this tone, one doctor asked Balint whether they “should also try to convert Communists and Fascists.”⁹⁴ Within the new Balintian interventionist approach, this question was not completely hypothetical. For Balint, the doctor should also have something to say on those issues.

The participants now turned to discuss abortions. They refused to carry out abortions because of their illegality but supported the legalization of abortion. One doctor told the group about a patient who got pregnant while separated from her husband but still “liv[ing] with her family.” She wanted to have an abortion because she was dependent on “her people,” who would not be tolerant of her situation. The doctor suggested that he would “send her away to have the child and that no-one would know anything about it, or else he would go and talk to the parents and talk to the neighbours, and do everything possible to help her except actually arrange the abortion.”⁹⁵

In the discussion, a few doctors mentioned that “some parents accept an illegitimate child very well, whereas others do not.”⁹⁶ Others expressed the need to change public perceptions about “illegitimate” children. Balint brought up a case from his work at the Family Discussion Bureau of a girl who got pregnant by an American soldier while her boyfriend was away. When the boyfriend returned from the war, he accepted the situation, but they decided that they would give the child up for adoption and then get married: “This worked out very well but the consequence was that ever since the woman has been unable to forget that her child has been taken away from her.”⁹⁷ This description of a mother whose child was tragically taken from her, and yet, according to Balint, it all nevertheless “worked out very well,” encapsulates the tension between the attempt to promote a psychosocial “patient-focused primary care” and the fact that this was supposed to be done under politico-medical conditions in which the social fabric was more important than each individual. Although the minutes might misrepresent what Balint really meant to say (it is part of a general summary made by the typist and not a direct quotation), we can still see how under such domestic

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values, managing to save a family in such historical and social circumstances could be perceived by doctors and other relevant social services as an achievement, regardless of the endless sorrow of the mother on her child.

For some GPs, the problem was not necessarily the legitimacy or illegitimacy of the child but the question of mothering. One doctor said that “she always thought it a pity for pregnant women not to become mothers.”⁹⁸ She said that she always explained this to pregnant girls, and that they usually accepted her opinion. She also noted that she did not necessarily recommend adoption since mothers have a few months to decide on that, and “usually by this time the mother is unwilling to give up the baby.” Balint immediately replied that “evacuation during the war showed that bombs mean very little but the loss of the mother means everything.”⁹⁹ According to Balint, the mother is crucial because she is the provider of a very specific type of care—maternal care—to her child. In postwar psychosocial discourse, maternal care was perceived by some as having far more influence on people’s lives than any political catastrophe. In fact, as John Stewart has shown, this was the view among a wide range of professionals in the “psy” disciplines still during the war. They believed that many of the cases of maladjustment in evacuated children simply revealed problems which had existed before, when the children had been at home.¹⁰⁰

At one of the first meetings, the doctors examined “the different reactions of patients to frustration” caused by their conditions.¹⁰¹ Some patients, the GPs observed, develop “pride” in their illness, which makes the doctor’s life easier: “They enjoy coping with their illness in an intelligent way. It is also probably a function of maturity.”¹⁰² Balint replied that “this is the way children are educated towards maturity,” and added that there is a similarity between “the doctor/patient relationship and the parent/child relationship.”¹⁰³ Strikingly, just at this point of the discussion, Dicks suggested that this sort of parental relationship is closely related to the notion of regression: “You must allow a patient to regress first so that later he may be helped to mature.”¹⁰⁴ Although the speaker in this case was Dicks, this discourse of “regression” was most notably evaluated by—and later identified with—Balint.

The Doctor, the (Regressive) Patient, and the Illness

Like his teacher, Ferenczi, Balint had a great interest in the study of regression, and he was a major supporter of regressive treatments.¹⁰⁵ For him, the regressive state of some people reflected an inherent “confusion of tongues,”

which exists in any authoritarian relationship: between parents and their children, in the classroom, between workers and their managers, and so on. The psychological source of this “confusion of tongues” is a traumatic gap between any child and his or her mother and father, since the child requires many things he or she cannot achieve without internalizing the parents’ inner selves and adjusting his or her psychic structure to theirs.¹⁰⁶ In other words, the child is forced not only to imitate the parents’ conscious language, behavior, and social norms, but also their unconscious ones. This confusion of tongues is the source of many regressive states in life, when a person in a relationship of authority reenacts a very private mode of maladjustment to authority derived from his or her own initial developmental stages. Ferenczi and Balint, however, believed that severe regressive states can be treated only through regression itself.

Balint sometimes conflated “regressed patients” and “children.” He tried to become a good parent for his adult patient—that is to say, to give the adult patient the good parenting of which he or she had been deprived. Balint attempted to do this by replacing parental authority, in the role of the analyst, with parental love—becoming solely a source of maternal love (or what he would define as “primary love”) for the patient. The psychoanalyst, according to Balint, had to fulfill certain primary maternal needs of his adult patients, for the patient to experience some initial feelings related to maternal care—such as the feeling of “the baby in its mother’s arms,” the feeling of “being in love,” and the “feeling of oneness with the universe.”¹⁰⁷ This approach, however, led Balint to blur the line between adult and child patients and ultimately treat them in almost the same way. Occasionally, Balint even uses the term *baby* or *child* and the term *regressed patient* almost interchangeably.¹⁰⁸ For him, “both the baby and the regressed patient in the end have no choice but learning to speak the language—in other words, vocabulary and grammar—of the adult on whom they are dependent, the baby for his life, the regressed patient for his restoration.”¹⁰⁹ In this case, Balint talks about a regressive situation in a psychoanalytic treatment. However, there are countless regressive situations in the GP’s consulting room which are not so severe but still require recognition from the doctor. Balint thought of regression as an unconscious form of symbolic replacement and role-playing; in other words, the patient replaces a formative person from his or her past with a symbolic authoritarian figure from the present—in this case the GP—and creates a psychological role-play. Understanding this regressive role-playing, Balint argued, is key to developing a new type of

general practice—one that will be able to approach patients' psychosocial problems.

However, in the Ferenczian tradition, the capacity of the doctor to allow regression as part of the treatment is much more than solely a mode of treatment: it is part of the doctor's "maternal role." For Balint, and for many in the postwar psychoanalytical community, maternal care was neither solely a natural function, nor necessarily a nurturing one, but first of all a form of ethics—ethics that Balint wished to assimilate into general practice. In other words, Balint believed that family doctors needed to have not only the maternal skills of care but also a maternal ethics of care. This need to adopt a maternal ethics in the GP's consulting room was a key assumption of Balint's teaching, as the following case study, taken from *The Doctor, His Patient and the Illness*, clearly shows. Mr. P. was a very disturbed patient who became obsessively attached to, and completely dependent on, Dr. H., his devoted GP. After much effort, Dr. H. managed to help him overcome many of his inhibitions, including his obsession with her. The participants in the group discussed whether she could then revert back to her old role as a "family doctor" for him and his family. Balint concluded the discussion by comparing the role of the GP to the role of the mother: "After all, mothers have to go on being mothers all their lives"—the implication being that the maternal role could never be relinquished, even for a GP.¹¹⁰ Balint was perhaps the main representative of the maternal-oriented approach precisely because he thought of the therapist—be it a psychoanalyst or a GP—as provider of the maternal dimension to people who were deprived of good mothering and who therefore developed certain kinds of regressive needs. But to some extent, he thought, we have all been deprived of perfect mothering and therefore we all have regressive tendencies. After all, visiting a GP is always a reminder of our fragility and dependence on other people—indeed on society as a whole.

The General Practitioner as a Performer

The idea that being a doctor who treats psychosomatic illnesses necessitates also being also a performer, and that the relationships between doctors and patients are inevitably suggestive (if not hypnotic altogether, as some critics never stopped arguing), stands at the core of all the psychoanalytically oriented schools since the formative debate in late nineteenth-century France between Hippolyte Bernheim and Jean Martin Charcot over the real na-

ture of hypnosis. While Bernheim openly advocated hypnosis as essentially and inevitably a performative encounter between the doctor and the patient, Charcot’s aim was to articulate a scientific theory of hysteria as a pathology that could be observed and cured by and through hypnosis. Freud was tremendously influenced by both Charcot and Bernheim, but he also repeatedly argued that the real meaning of psychoanalysis was turning away from the hypnotic tradition. Abandoning the hypnotic tradition, Freud thought, enabled him to invent psychoanalysis as an objective science.¹¹¹

But throughout 1920s Ferenczi challenged this claim, arguing that psychoanalysis could not give up on the performative, and even hypnotic, dimensions of the treatment. He suggested that rather than denying these performative elements, some of those elements should be embraced as a useful tool for encouraging patients’ reenactment of the past.¹¹² It was this “reenactment” that regressive treatments could achieve and that Balint, as well as other of Ferenczi’s followers, aimed to practice.¹¹³ I would like to suggest that, for Balint, being a doctor—like being a psychoanalyst—was a constant encounter with “regressive situations” in which patients reenacted traumatic pasts, and which required the doctor to possess some “role-playing” skills. In that respect, the GP’s consulting room was not that different from the psychoanalytic couch, as both were spaces for regressive performances of the body and the mind. Thus, I conclude this chapter by presenting two case studies—taken again from *The Doctor, His Patient and the Illness*—in which Balint celebrates the capacity of family doctors to help their patients by *playing different roles* in their patients’ lives.

A young female patient had complained of indigestion for three years. When she came to ask for tablets, her GP plucked up the courage to ask her a few more personal questions. After a short discussion, he found out that her father left when she was five, and that she had suffered from a domineering mother. The GP gave her the opportunity to come and speak with him every week, and his influence on her was significant. After a while she found the courage to confront her mother and became engaged to her boyfriend, who her mother did not like. At that stage all her physical symptoms had almost vanished.

Much of the discussion among the GPs in the group was not about the case itself, but about what Balint described as “Dr. R’s rather forceful offer of himself as a father-substitute to his patient.”¹¹⁴ Dr. R. did not hesitate to put forth his views on some of his patient’s most personal issues. For instance,

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he encouraged her not to feel ashamed of having sexual relationships with her fiancé; on this issue, as on other sensitive questions, he had “deliberately turned against the mother and sided with his daughter-patient against her.”¹¹⁵ According to Balint, the main achievement of the group in this case was to show Dr. R. the ways in which he “was acting as an understanding, forgiving and powerful father. It was uncertain to what extent the patient should be made fully conscious of this, but it was certain that Dr. R. must become fully conscious of his rôle.”¹¹⁶ For Balint, the doctor must be conscious of his role not only to prevent any sort of inappropriate treatment, but also because this role itself was flexible and could change at any time during the long relationship between doctor and patient.

This case involves the doctor taking the role of the father. However, as I have been describing, Balint thought that the maternal relationship between the mother and her baby could be an even more effective paradigm for treating patients’ psychosocial and psychosomatic conditions. The doctor’s capacity to listen to the patient, and to then modify the primary care according to his or her needs—like a “good” mother with her child—was perceived as a “maternal” skill. As noted, this approach was very much in line with other psychoanalytic writers of the period, such as Winnicott, Bowlby, Fairbairn, and Main. The common belief of these post-Second World War theorists was that only the mother can provide an infant with continuous care that goes beyond language into a full understanding of his or her physical and mental needs.

Mrs. Q., a twenty-three-year-old married woman, often came to see her doctor, Dr. M., for “pain in her lower abdomen” followed by “attacks of trembling.” The doctor describes her as “very strongly attached to her mother, and has not been able to give up an infantile role towards her (mother runs the home, Mrs. Q. only has five shillings pocket-money).” In addition, the doctor described her as “frigid” and “afraid of having babies,” and reported she “even dreads dancing.”¹¹⁷ Mrs. Q. was then observed by a psychologist and a psychiatrist. The psychologist described her as “really unco-operative [*sic*], though a show of co-operation is built up when she feels she is getting attention.”¹¹⁸ According to him, she “puts up a consistent picture of helplessness.”¹¹⁹ “Her capacity for change is very little,” he concludes.¹²⁰ The psychiatrist reported that Mrs. Q. “is an immature, narcissistic, hysterical woman, very much tied ambivalently to her mother, and still more ambivalently to her father.” It seems, however, that the worst part was the fact that she was immature: “Her attitude is, ‘I am a baby, everybody must look

after me, and in return I shall be nice and kind and accommodating to everybody.” Only at this stage—after being totally dismissed by her doctors in typical highly gendered language—do we get to learn about Mrs. Q.’s “rather awful, but highly characteristic” circumstances. She lives with her husband in her mother’s house, in one room “cluttered up with furniture that they bought in the hope of getting a house.” The husband works as a baker and pays Mrs. Q.’s mother for washing and food. Although her husband wants to have children, “she is terribly afraid of the pain.”¹²¹

However, the psychologist and the psychiatrist were not in agreement about the severity of her situation: the former thought the situation was “very serious indeed” while the latter thought that it was serious but not “entirely hopeless.”¹²² It was then decided to send Mrs. Q. for a Rorschach test by a different psychologist. This report suggested that her defenses were “clearly not adequate for the maintenance of mental health, but they are sufficiently stable to keep her going in her present immature hysterical condition so long as she is not forced into a situation where the defences will be threatened.”¹²³ The assessor concluded that “after seeing her, I was left with the strong feeling that to penetrate her defences would be dangerous, and that she is far better left as she is.”¹²⁴

In the meantime, Mrs. Q.’s grandmother died, and as a result the grandfather had to move to their house, which meant that Mrs. Q. and her husband had to look for a different accommodation. She kept going to her mother’s house every day for a rest of several hours, but she also gradually started to collaborate with Dr. M. and to tell him more about her fantasies, which were “crude and aggressive sexual experiences.” She then also openly talked about her fantasies about Dr. M. as her “love- partner,” and about “her urge to take men away from their women,” as she did with her husband who was married before.¹²⁵ She continued to meet Dr. M. regularly and “by Christmas 1953 she had considerably matured, went out to do a job, made her flat into a nice little home, and early in 1954 became pregnant.” She insisted, Dr. M. reported, “on having the baby at home (in her maternal home), and was very insistent on my delivering the baby.”¹²⁶

Balint used this case study to demonstrate his belief that the GP must be able to provide flexible medical functions according to the patient’s changing needs: “When the psychotherapeutic relationship is broken off, he changes back into a doctor; then he becomes a psychotherapist again, then changes back into a doctor, and then into an obstetrician . . . and finally turns into a ‘friend of the family.’ During all this he has helped an impossibly immature,

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severely hysterical neurotic to grow up into an efficient woman, a wife and, very likely, quite an acceptable mother.”¹²⁷ Balint was pleased that the GP recognized his patient’s wish to enter into this role-playing with him and that he agreed to participate. For helping her, the doctor had to be attuned to the changing needs of the patient, and accordingly to perform different roles for different purposes.

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As I have showing in this and the previous chapters, the “psy” disciplines played a major role before and after the Second World War in setting the criteria for good citizenship in the new British welfare state. Psychoanalysts emphasized “maturity” as the necessary character for becoming good citizens in a democratic society. The fear of the “psy” professionals was very often that home—what Winnicott describes as a “good enough home”—would not be able to “produce” the future “mature” democratic citizens without the right guidance of the state by and through its different agents, such as the teacher, the social worker, and the family doctor. The new collective desire to have “mature” citizens was one of the reasons for the preoccupation of psychoanalysts with what one may consider as the opposite of maturity, namely regression. But the “regressive” citizen played a complicated role in the psychoanalytic discourse, sometimes characterized as the big threat for democracy, but in other cases as a symbol and a model to someone who has the emotional capacities to preserve and restore some fresh primary maternal feelings of caring and loving, that were perceived as so missing from public space. For many psychoanalysts, authentic “maturity” could be achieved only by refusing to give up on one’s more “regressive” parts of one’s unconscious.

But the family had also some other political functions other than producing mature citizens. The perception was that the family should serve as a mediator between the state and the individual, especially because of the danger that the former might become too powerful, even totalitarian. “Is it likely that the family group is going to disappear completely, and that all its functions will be taken over by the state?” asked the Swedish scholar and journalist, Torgny Segerstedt, in the London International Congress on Mental Health in 1948. And for D. R. MacCalman, a mental hygienist—who also participated at the same event—the question was: “[Is] the family unit surrendering its functions to the wider unit of the state, which has not yet learned to exercise them adequately?”¹²⁸ Protecting the “family unit” was

perceived as crucial for creating “autonomous, responsible citizens capable of upholding a version of representative democracy.”¹²⁹ The ideal of good citizenship as a form of personal maturity and responsibility could be achieved, many believed, only by creating a “healthy” domestic environment.¹³⁰ An outcome of this was the popularity of new forms of state support in the domestic sphere, such as marriage welfare services, as well as the development of psychosocial approaches, psychotherapy, group psychology, and primary care.¹³¹

This is the right context, I argue, in which to understand the emergence of the Balint movement in the 1950s. It was an attempt to teach GPs a new psychotherapeutic vocabulary, which was developed by prominent British psychoanalysts before, during, and after the war and which promoted mother-child relationships as a primary model for all sorts of social relationships. For Balint, as well as for other Tavistock colleagues, GPs’ adoption of a parental role, and ideally a maternal one, toward their patients, was a necessary tool for providing better medical services, and a way of solving structural problems of general practice as a profession. But it was also an expression of ideological commitment to postwar “welfarism.”

Moreover, in many social domains, the new welfare state adopted an interventionist parental authority as a model of the relationship between the state agents and its citizens. One of the reasons why this specific form of interventionism was perceived as being legitimate in the postwar years was the perception that a “good enough family,” founded on a “good enough mother,” is the best antidote to other, more threatening, interventionist, and authoritarian ideological regimes, such as Italian Fascism, National Socialism, and Stalinist Communism, which arguably were the major public political anxieties of that era, and for many decades to come.¹³² It was probably these forms of totalitarian regimes that Balint, like many of his colleagues, had in mind when making the case for a more benign social relationship, based on maternal values of care. For the Balints, a maternal approach was a form of medical *care* for the patient, but at the same time it was also a new form of *ethics*. For many of the GPs who joined Michael and Enid Balint in their groups in the 1950s and 1960s, these new ethics were as attractive as other factors—psychoanalytical and professional—that made the Balint movement such a sensation in the postwar medical world.

CONCLUSION

The coronation of Queen Elizabeth II on 2 June 1953 was one of the major events in 1950s Britain.¹ The notion that this event was also a starting point for a “new Elizabethan age” was widely promoted for “enabling ideas of modernity to be linked with history.”² Thus, for instance, Coronation Day was the first live television broadcast, making the event accessible to people around the world, including in nations of the ~~new~~ Commonwealth. This first live broadcast also symbolized an attempt to renew the monarchical tradition and to infuse it with modern media and technological progress, and thus to show that the royal family was still relevant in a modern age. Indeed, this occasion was the high point of a cultural and political effort to write a new narrative of Britishness: one that would present Britain after the war as bringing together tradition and modernity, imperial past and national present.³ As historian Wendy Webster suggests, it was a “notable example of the type of cultural representation by which Benedict Anderson has argued that people come to imagine a shared experience of identification with the nation.”⁴

This celebration of a new maternal figure for the British people ~~is an~~ appropriate point on which to conclude this book. It captures the postwar maternalist—as well as “maternalizing”—moment in mid-twentieth-century Britain. Moreover, the coronation events generated a myriad of personal and collective anecdotes related to the idea of the maternal cause. For example, several observers noted the preoccupation of the British press with one guest—Salote, Queen of Tonga. Within a few days, this unknown dignitary became hugely popular among the British public, famous first and foremost as the tallest queen in the world, and also as the only personage in the festivities who kept waving to the crowds from an open carriage in heavy rain. As Annette Kuhn points out, she figured in the popular imagination largely because of her unusual physical features, “as a powerful matriarch,” reminiscent, for some, of Queen Victoria.⁵ Her meeting with the new Queen

Elizabeth symbolized the potential of young Elizabeth to become matriarch one day. At the same time, the encounter was also a reminder that Britain was “a once mighty but now crumbling empire.”⁶

As Sonya Rose argues, in the postwar years “the government . . . apparently believed it had to manage decolonization in such a way that the British public believed colonial independence was a reward given by the ‘mother country’ to deserving colonies.”⁷ This was surely part of the reason the Commonwealth received so much attention in the early 1950s, and especially throughout the coronation events of 1953: the new queen embodied a transition from a colonial ethos to a national one and so from a narrative of “Empire” to a narrative of “Commonwealth.” To this point, the first successful ascent of Mount Everest—by Edmund Hillary of New Zealand and Tenzing Norgay of Nepal—was announced on the day of the coronation and described by the press as a gift for the new queen. It was celebrated as a symbol of a highly inclusive definition of Britishness, embodied by the Commonwealth and its new queen.⁸

The transition from an imperial perspective to a national one would have been viewed as a positive political development by some of the key interwar figures discussed in this study.⁹ For Isaacs, Malinowski, Róheim, and Suttie, the maternalization of British society was closely linked to the notion of its decolonization (even if they did not necessarily use these terms). They not only opposed colonialism but also emphasized its damaging effects on domestic life for colonized and Western people. Thus, the meeting of the two maternal figures, Queen Elizabeth and Queen Salote—now presented as equal female rulers of two different states—might represent a triumphant image of their worldview.

Each in turn—Isaacs in her attack on colonial psychology; Malinowski and Róheim in their study of the impact of matrilineal societies on developing a nonsadistic mind; Suttie in his critique of the ~~patriarchal dimensions of psychoanalysis~~—aimed to reveal the colonial project as an epistemological crisis of modern, Western man (indeed it was a man and not a woman), who discovers time and again that even when he occupies large parts of the world, he has no cultural and psychological tools to see anything but himself. But Róheim, Suttie, and others of their professional and cultural milieu were not free from epistemological blind spots, and very often suffered from the same kind that they so much criticized. They tended to ignore questions about colonial power relations and concrete political realities, and the ways in which they portrayed the “primitive” were very often a reflection of their

own idealizations and “exotic” cultural fantasies about so-called primitive people rather than a true effort to understand them. Where Róheim found, for example, unconditional happiness, others could be more aware of real hunger and terrifying child mortality.

To a large extent, Freudian psychoanalysis was linked to this colonial way of thinking, and especially bound up with nineteenth-century British anthropology.¹⁰ In *Totem and Taboo*, for example, Freud drew heavily on the work of nineteenth-century British anthropologists such as E. B. Tylor and James Frazer.¹¹ For them, “primitiveness” was a living testimony to human evolution: the “primitive” provided scientific confirmation of the long journey of the human species from a primitive polytheistic savage to the modern European men of the Enlightenment. This scientific perspective was a key component of a wider political discourse which, for many people, had the effect of legitimating the entire colonial project. Three of these interwar thinkers—Isaacs, Róheim, and Suttie—did not abandon psychoanalysis but looked for alternative psychoanalytical theories for their critique of modernity as an age imbued with colonialism and patriarchy. They found these mainly in the works of Ferenczi and Klein, who influenced the British school of psychoanalysis for many decades. Róheim, Malinowski, and Suttie argued that societies with strong maternalistic values are inevitably less authoritarian. The emergence of totalitarian ideologies in the 1930s and the catastrophes of the Second World War made this maternalistic view attractive not only to psychoanalytically oriented social thinkers, but also to policy makers who wished to implement these ideas in the newly designed welfare state. In fact, one may consider this strand of interwar anthropology as one form of antifascist stance, and the later effort of the postwar era to maternalize the British public sphere as another legacy of interwar antifascism.¹² After the war, the British Empire had to become a British nation-state in a short time. This state, as I have suggested, was designed according to values that were imagined, by some circles, as not only national, but, even more specifically, as “maternal.”

There are, however, discontinuities between the interwar and postwar periods that complicate the idea of Coronation Day as a symbolic concluding point for this book. Celebrating a new symbolic maternal figure for Britain should not necessarily be seen as the celebration of the “maternalizing” effort described here.¹³ The nation-state often portrayed itself as a maternal entity for its citizens—a precondition for the perception of the state as an extension of the nuclear family. The British Empire also made extensive use of family-related—and explicitly gendered—language, talking about “sister

nations,” “daughter dominions,” and the “mother country.”¹⁴ However, as some historians have noted, this “family metaphor speaks of a patriarchal paternalism. . . . Symbolically, empire building and maintenance was a masculine task whereas the home-place was feminized.”¹⁵ For example, one of the main goals of the Commonwealth was to preserve this image of a family, with the new British state at its center.

In the discourse very often adopted by nineteenth- and twentieth-century European national movements, the maternal figure had a symbolic role that bears almost no relation to real mothers’ lives. To quote Anne McClintock again (see also Chapter 5), “excluded as national citizens, women are subsumed only symbolically into the national body politic.”¹⁶ Indeed, as some scholars argue, nationalism was always based on “fraternity”¹⁷ and therefore “[favored] a distinctly homosocial form of male bonding.”¹⁸ This homosociality constructed femininity and motherhood as a collective fantasy of a “guardian” and an “angel” of the nation, but at the same time helped to preserve a patriarchal and heterosexual order. Thus, the maternal figure of the state did not represent real political power: this was preserved by the “brothers” for themselves. The fact that many nation-states had symbolic maternal figures did not guarantee a greater focus on the maternal perspective or special consideration of the needs of their citizen mothers. If anything, the opposite was true: it was a confirmation of a patriarchal order in which mothers are the rulers of their households and symbolic rulers of the state but have no real access either to decision-making circles or to any political dimension within the public sphere.

In this way, the “making” of British national identity was not very different from that of many other European countries. As Linda Colley has shown, the first stages of the formation of “Britishness” as a national identity occurred in the eighteenth and early nineteenth centuries, when the monarchy still played a central role in the governing of the state.¹⁹ During this period, the eminent figures in the royal family included Queen Caroline, Queen Charlotte, Princess Charlotte, and Queen Victoria. Thus, we can see a “remarkable prominence of the female component of the British Royal Family from the end of the eighteenth century right down to the present day,” which, as Colley argues, “supplied British women with a focus for their patriotism that was particularly their own.” However, it did not make their presence in public life more important: “Monarchy as soap opera made (and arguably still makes) the wrongs and rites of passage of ordinary women’s lives seem important and valuable in a way that no other aspect of

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British political life could or can do, run exclusively by men as it was then, and as it still largely is today.”²⁰ Even when women were at the highest positions in the royal family—when it still had political power—British women more generally did not enjoy better access to public life than in other European nation-states. In that sense, Britain was not an exception in its formation as a *fraternity*. In other words, Britain was not exceptional in adopting a national discourse in which the queen herself—powerful and impressive as she would be—embodied national values that excluded women from the public sphere.

However, after the war, psychoanalysts like Winnicott, Bowlby, and Balint, among others, took very seriously the idea that society needed to be maternalized and used their theory and practice to support this effort. ~~In this moment~~, the welfare state adopted an interventionist approach in several dimensions of the domestic sphere, and thus redefined the “public” and the “private” in a way that expanded the maternal role for both. The maternal role was performed, as always, by mothers in their own families, but it was now also aimed to be performed by the state, which became a provider of maternal qualities. “What my mother lacked, I was given,” writes Carolyn Steedman.²¹ This was true not only for extremely difficult stories of deprived children, but for more and more people, who met maternal capacities in their GP’s consulting room, in the classroom with their teachers, or in other sites of the public sphere. These maternal approaches in major public domains provided, at least to some extent, an alternative to certain older masculine national discourses. True, some policy makers (like William Beveridge) were committed to paternalistic values of domesticity, arguing that “housewives as mothers have vital work to do in ensuring the adequate continuance of the British race and of British ideals in the world.”²² But as I argue here, after 1945, these paternalistic approaches were translated—through psychoanalytic filters—into a new public discourse on motherhood, in a way that significantly challenged old cultural perceptions of gender and domesticity. The 1953 coronation, however, needs to be understood in the context of *older* fraternalistic national discourses, and not as a symbol of the postwar maternalistic efforts presented in this study. Therefore, the coronation is not the right place to end this book.

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Let us consider a possible objection to the proposed argument of this research. One may claim that, in many respects, mid-century British society

was dominated not only by men in positions of power, but also by the predominance of images of masculine authority.²³ In this sense, it could be claimed, the maternalizing movement presented here was a nonrepresentative marginal strand in postwar public life. Indeed, not only would it take many decades before women could be seen in parliament, cabinet, or other positions of power, but also many of the formative public domains in British society and culture—the boys' school, the college, the army, and clubland—were all historically designed as male institutions, and were also preserved as such in the postwar era.²⁴ The lack of a female presence in these places was part of their ethos. Even the “gentlemen's club,” whose importance in shaping masculine identity in the late Victorian period had declined by this time, still managed to preserve some of its symbolic capital.²⁵

Moreover, as some historians have ~~recently~~ shown, the deep homophobic public sentiment of the 1950s was closely related to the *fraternal* attempt of making a new nation-state: “[Produced] as a predatory and effeminate danger to the nation and its manhood, the homosexual embodied a wider crisis of Britishness.”²⁶ The emergence of homosexuality as a social problem in the 1950s reveals a much wider transgenerational crisis of fathers and sons, who held competing perceptions of masculinity—indeed, “competing versions of the self.”²⁷ As the historian Frank Mort recounts, his father's inability to discuss any aspect of sexuality with him, let alone understand his son's homosexuality, created an experience of absent fatherhood. Mort argues that this was not only his experience, but a phenomenon that perhaps characterized the whole postwar generation. Fathers characteristically spent long hours at their workplace, and in the little time they spent at home, they could not grasp the differences between themselves and their sons. Thus, fathers were often experienced as both authoritarian and absent, dominant in their nonexistence. This was a relationship which “for the most part existed only in a negative fashion.”²⁸ Mort claims that historians tended to emphasize the authoritarian dimensions of postwar fatherhood, without giving more attention to the cultural and psychosocial meanings of their absence. One of the implications of this absence is that we have to think anew the real role of mothers in postwar British society. Some study cases brought here (Chapter 5) confirmed not only the absence of fathers from children's everyday lives, but also an underestimation of the paternal role within “psy” practices and their most influential 1940s and 1950s agents. However, I have also argued that the vacuum left by the fathers' absence was filled by mothers in a way that could no longer be classified according to the

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traditional definitions of “private” and “public,” but only through a close reading of the specific vocabulary used by the new agents of the welfare state and the maternalistic intentions of some of its key architects.

It is, however, also true that strong evidence for the resilience of patriarchal features in British society after the war can be found in the dominance of men and masculine culture in the postwar job market. As Geoff Eley describes it: “The pressure of returning soldiers to their old jobs, the trade unions’ longstanding maintenance of the gender bar, deep ideological assumptions regarding women’s place, and the desire to rebuild society on the ‘healthy’ foundations of a reassembled familialism—all these factors remasculinized the world of work and the public sphere and constructed for women a naturalized domestic future.”²⁹

Nonetheless, even with regard to the male domination of the job market, the real picture we require is more nuanced. According to Michael Roper, the paradoxical situation among post-1945 industrial managers was that “despite men’s systematic domination of management, they do not experience themselves as powerful. Feelings of inadequacy pressed more urgently on them than those of manly virility.”³⁰ As Roper has shown, defining postwar British society as masculine is almost meaningless without a more detailed account of perceptions of masculinity at the time, which would determine whether the effort to construct a strict binary between men and women was as successful as some of the historical works cited have suggested.

Moreover, even if postwar British society was, in crucial respects, shaped by visions of masculinity and by the actual domination of men—in the workplace, the economy, politics, and other key aspects of culture and society—as suggested by so many scholars, this does not refute the argument proposed here. To recognize the historical significance of the attempt to maternalize the British public sphere does not require that we contradict extant analyses of other traditional patriarchal features of society. After the war, the idea of empowering the domestic sphere, thus empowering women and mothers, became central to national welfare policy. Bowlby, Winnicott, Balint, Main, and others promoted some of these ideas and believed that they were contributing to the creation of a new type of nation-state—one with maternal values at its center. However, they were neither feminists nor anti-feminists. These labels, I argue, are not helpful in understanding postwar public and private lives. Their perceptions of what ideal maternal care should be reflects a composite of several normative elements that governed

emotional economies and public culture in postwar Britain. At times, their theory and practice might seem to us hypermasculine, patriarchal, and even authoritarian—far from being “maternalist” to our own common sense today. But as already mentioned in the opening pages of this book, “maternalism” is an analytical tool and the “standard for assessing its utility must be its success in illuminating certain historical phenomena rather than its accuracy in categorizing individuals who laid claim to the term themselves.”³¹ This concept, I argue, is useful for having a better picture of the shifts in the public understanding of motherhood, gender, and domesticity in interwar and postwar Britain. Psychoanalysis provided the “maternalists” presented in this book with a psycho-political language, as well as ethical mandate, to reclaim a maternal cause, and to advocate it as necessary for the building of postwar New Jerusalem.

Stuart Hall suggested that “in societies like ours, ideological contestation does not take place between fully formed, competing world views—theirs and ours. It’s a field in which there are many different discourses and social forces in play at the same time.”³² It would be helpful to bear this in mind when thinking of the role of postwar psychoanalysis in shaping perceptions of motherhood and when considering whether those strands of thought contributed to the development of late twentieth-century feminism. Although none of the postwar psychoanalysts discussed here were particularly feminist—and indeed Bowlby has also been the object of much of the 1970s and 1980s feminist critique of psychoanalysis—it is nevertheless the case that figures such as Ferenczi, Klein, Winnicott, and even Bowlby served as an intellectual resource for some late twentieth-century feminist trends, which aimed to define motherhood as one of the main focal points of feminism itself. Whether or not the maternalistic movement failed would require a different form of research to that pursued here. But what this book has clearly shown is that such a movement did exist, and, in its existence, it paved the way for further developments, some of them in the feminist direction, in the way we understand gender, sexuality, and motherhood.

Psychoanalysis as a clinical theory, as well as a cultural discourse, has a major place in any intellectual history of twentieth-century feminism in general and of maternalist movements in particular.³³ Thus, further research into psychoanalytically-oriented maternalism might show the continuities and discontinuities between perceptions of motherhood in the 1930s, 1950s, and 1970s, as well as in more recent decades. My contention is that taking into account the central role of psychoanalysis in this maternal turn

discussed in this book might produce a different reading of the history of postwar feminist movements in the second half of the twentieth century.

“[If] you show me a baby you certainly show me also someone caring for the baby, or at least a pram with someone’s eyes and ears glued to it,” Winnicott wrote in 1952.³⁴ Almost sixty years later, in her book *Maternal Encounters*, psychoanalyst and feminist theorist Lisa Baraitser asks: “What is it like to stay alongside a child? What is it like to be exposed to incessant crying, incessant demands, incessant questioning, incessant interruption? . . . What is it like to be physically burdened by a child and their ‘stuff,’ to negotiate the child-plus-buggy-plus-changing mat-plus-nappies-plus-bag-plus-juice bottle around the urban cityscape?”³⁵ One may find strong continuities between Winnicott’s statement and Baraitser’s set of questions. At the same time, we need a more detailed history of post-Second World War feminism, motherhood, and psychoanalysis to better understand the similarities and differences between Winnicott’s “pram” and Baraitser’s “buggy.” They belong to very different historical moments, and each is part of a very different discourse on the maternal. More than any other aspect, assessing similarities and differences between such perspectives on motherhood will require a consideration of the political distinctions that exist between the postwar era and our own neoliberal age.³⁶ In the British context, the shift to a neoliberal way of thinking entailed a withdrawal from what Nikolas Rose and Peter Miller define as “a ‘responsibilizing’ mode of government”—that is, “welfarism,” whose heyday was the years following the Second World War.³⁷

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In the late 1970s, Michel Foucault argued that a main feature of twentieth-century history is a “state phobia,” rooted in the state’s “unlimited force of expansion in relation to the object-target, civil society.”³⁸ For Foucault, this phobia is characteristic of many forms of the state, including not only totalitarian regimes such as the Nazi or the Soviet ones, but also what he called post-1945 “Labour Party Keynesianism.”³⁹ This state phobia was always fed by “the unlimited growth of the state, its omnipotence, its bureaucratic development, the state with the seeds of fascism it contains, the state’s inherent violence beneath its social welfare paternalism.”⁴⁰ While some of Foucault’s assumptions about “English post-war planning” are historically inaccurate (in short, British economy was never as state controlled as Foucault describes it), the notion of “state phobia” is worth considering in the British context.

In fact, Alan Sinfield suggested a similar way of looking at the postwar years when he described how some elitist circles were terrified by “the strengthening of state power” and especially by its presumably bad influence on British high culture (see, for example, Sinfield’s reference to George Orwell).⁴¹ Their fear was such that even during the war, some intellectuals drew a comparison between Hitler and the power of the British state, based on the expectation that the latter would conduct a collectivistic policy after the war. The common ground between Sinfield and Foucault is that “state phobia” was often expressed by people who were widely considered by other members of society as agents of the state. Thus, state phobia demonstrates that the state itself is an elusive construct whose definition depends to a large degree on the personal perspective of the people who define it.

Pursuing this line of thought, I would like to consider here the maternalist movement described in this book as another example of a “state phobia.” On the one hand, we have seen that postwar maternalism was closely related to building the welfare state. Figures such as Bowlby, Winnicott, and Balint were not only part and parcel of the welfarist project, but their maternalist way of thinking was essential to the very definition of the state. On the other hand, they can be viewed as motivated by an antagonistic view of the state: by a perception that British central government was too powerful, too dangerous and prone to be dismissive of motherhood and maternal values. Hence, their attempts to maternalize the British public sphere were cast as an effort to forge a very different kind of state. In contrast to the national image of mothers as symbolic figures, they promoted the idea that the state should take on some benign—yet at the same time interventionist—maternal roles. Indeed, to a large extent their professional work reflected popular perceptions of the “maternal” realm, and thus had little to do with real mothers, only with a collective “ideal image” of mothers. Yet as Eley notes, indirectly, “the welfare state measures and citizenship reforms of the antifascist period built up a language of rights and capacities that later radicalisms could also deploy.”⁴² Indeed, feminist groups of the 1970s and 1980s, such as those that gathered under the banners of Radical Therapy or the History Workshop movement, sometimes used the older postwar narrative of motherhood, as well as psychoanalytic theory from that period, to think anew the nature of maternal discourse, this time for the sake of *real* mothers, not their idealized image.⁴³

This draws us toward another possible point of conclusion, an alternative to the coronation of Queen Elizabeth. Let us return to the adolescent

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Czech girl that we met in Chapter 6. She survived Theresienstadt and lived in a hostel in London, but never stopped dreaming of going back and “finding her mother in a ‘fairy land’ Czechoslovakia.”²⁴⁴ On Coronation Day, unlike her companions, she refused to celebrate. Perhaps she did not only reject the new Queen Elizabeth as a symbolic maternal figure, but also expressed a rejection of the idea of symbolic motherhood as such. She wanted a real mother; she wanted her own mother. The question of whether psychoanalysis succeeded or failed in maternalizing the British public sphere will remain open for the time being. But we have good evidence that several psychoanalysts who treated this Czech adolescent survivor in the early 1950s, including Winnicott who supervised the case, succeeded in helping one girl voice her feelings of resistance, as well as her fantasies and her deepest hopes, including the impossible one of meeting her real mother again. At the same time, we should not forget that this is only one story, indeed, one microhistory of the “maternal turn” of postwar Britain. It is not hard to imagine that there are, in archives, countless other personal lived experiences, narratives embodying postwar maternalism, waiting to be told.

NOTES

Introduction

1. [Iain Norman Macleod], “Nanny’s Last Fling,” *Spectator*, 26 February 1965, 214, 255. Although the *Oxford English Dictionary* refers to Macleod as the one who coined this term, there is at least one earlier reference to the British nanny state, made in 1952 by the American journalist Dorothy Thompson. In an article published in the *Pittsburgh Post-Gazette*, entitled “Middle East Appears to Be Suffering from Neurosis,” Thompson argued that “with the retreat of empire, Britons are turning Britain itself into a Nanny-state, perhaps out of long habit in persuading or coercing natives to do what is good for them” (13).

2. Lucy Delap, *Knowing Their Place: Domestic Service in Twentieth-Century Britain* (Oxford: Oxford University Press, 2011), 108. In this context, Mary Poppins immediately comes to mind, arriving from the sky with her umbrella to appear as the ultimate “nanny” figure in British culture. In the original 1934 book by P. L. Travers, the upper-middle-class children, Jane and Michael, adore Mary Poppins, who provides them with the maternal affection that—implicitly—their mother, a suffragette activist, deprives them of. In Mary Poppins’s world, infamously, “a spoonful of sugar helps the medicine go down,” and while she is a figure of maternal care and affection, Poppins also epitomizes the idea of the nanny as a benevolent rule maker. Interestingly, the Walt Disney film version of *Mary Poppins* came out in 1964, just a year before Macleod used this term in his *Spectator* column to denounce the “Nanny state.” I am grateful to Helen Tyson for helping me think through the unique position of Mary Poppins in British culture.

3. Cited in Rob Moodie, “Health and the Nanny State: Fairy Godmother or Wicked Witch?,” 23rd Lionel Murphy Memorial Lecture, 2 December 2009.

4. *Higher Education: Report of the Committee Appointed by the Prime Minister Under the Chairmanship of Lord Robbins* (London: Her Majesty’s Stationery Office, 1963), para. 465, accessed 13 October 2020, <http://www.educationengland.org.uk/documents/robbins/robbins1963.html>.

5. Carolyn Steedman, “Middle-Class Hair,” *London Review of Books* 39.20 (19 October 2017).

6. Although using this term in different texts ever since the late 1950s, Williams never properly fully defined what a “structure of feeling” is, leaving this concept as an open-ended project, yet to be reconstructed by his future readers and scholars. See, David Simpson, “Raymond Williams: Feeling for Structures, Voicing ‘History,’” *Social Text* 30 (1992), 9–26. Simpson recognized an ongoing tension at the heart of the concept of “structure of feeling,” between Williams’s attempt to define it as an analytical tool for capturing ideological moments in the Marxist sense (e.g., structures of feeling as a manifestations of “false consciousness” in

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a specific time and place), and his will to capture a more subjective, “felt sense of the quality of life at a particular place,” as he defined it in his book *The Long Revolution* (1961).

7. Jane Lewis, “Gender, the Family and Women’s Agency in the Building of ‘Welfare States’: The British Case,” *Social History* 19.1 (1994), 39.

8. Mark Mazower, *Dark Continent: Europe’s Twentieth Century* (New York: Vintage, 2000), 83; Adele Lindenmeyr, “Maternalism and Child Welfare in Late Imperial Russia,” *Journal of Women’s History* 5.2 (1993), 125n24.

9. Elisabetta Vezzosi, “Maternalism in a Paternalist State: The National Organization for the Protection of Motherhood and Infancy in Fascist Italy,” in *Maternalism Reconsidered: Motherhood, Welfare and Social Policy in the Twentieth Century*, ed. Marian van der Klein, Rebecca Jo Plant, Nichole Sanders, and Lori R. Weintrob (New York: Berghahn, 2012), 191.

10. Atina Grossmann, “Feminist Debates About Women and National Socialism,” *Gender and History* 3.3 (1991), 351. See, for example, Claudia Koonz, *Mothers in the Fatherland: Women, the Family and Nazi Politics* (London: Jonathan Cape, 1987), and the devastating critique of this book by Gisela Bock, “Die Frauen und der Nationalsozialismus: Bemerkungen zu einem Buch von Claudia Koonz,” *Geschichte und Gesellschaft* 15 (1989), 563–79.

11. Clare Midgley, “Anti-Slavery and Feminism in Nineteenth-Century Britain,” *Gender and History* 5.3 (1993), 357. For a different and later example of the antislavery maternalist movement, see also Susan Pedersen, “The Maternalist Moment in British Colonial Policy: The Controversy over ‘Child Slavery’ in Hong Kong 1917–1941,” *P&P* 171.1 (2001): 161–202.

12. Molly Ladd-Taylor, “Toward Defining Maternalism in U.S. History,” *Journal of Women’s History* 5.2 (1993), 112.

13. Jill Liddington, *The Long Road to Greenham: Feminism and Anti-militarism in Britain Since 1820* (London: Virago, 1989), 89. American historian Melissa R. Klapper has shown how post-World War I Jewish American women preferred to “speak about peace in maternalist terms because motherhood served as an important link between American and Jewish gender identities, especially for middle-class women” (“‘Those by Whose Side We Have Labored’: American Jewish Women and the Peace Movement between the Wars,” *Journal of American History* 97.3 [2010], 640). More recent historical examples of maternalist protest movements can be found in the Argentinian Madres de la Plaza de Mayo movement since the late 1970s, the Sri Lankan Mother’s Front in the 1990s, and the Israeli Arba Imahot in the 1990s. See Sara Eleanor Howe, “The Madres de La Playa Mayo: Asserting Motherhood; Rejecting Feminism?,” *Journal of International Women’s Studies* 7.3 (2006), 43–50; Malathi de Alwis, “Ambivalent Maternalisms: Cursing as Public Protest in Sri Lanka,” in *The Aftermath: Women in Post-Conflict Transformation*, ed. M. Turshen, S. Meintjes, and A. Pillay (London: Zed Books, 2001), 210–24.; Tamar Hermann, “Realistic Nonviolence: Arba Imahot, the Four Mothers movement in Israel,” in *Civilian Jihad: Nonviolent Struggle, Democratization, and Governance in the Middle East*, ed. Maria J. Stephan (New York: Palgrave Macmillan, 2009), 253–64.

14. On “patriotic motherhood” during the First World War, see Nicoletta Gullace, *The Blood of Our Sons: Men, Women, and the Renegotiation of British Citizenship During the Great War* (Basingstoke, U.K.: Palgrave Macmillan, 2002), 54–59; Paul Ward, “‘Women of Britain Say Go’: Women’s Patriotism in the First World War,” *TBH* 12.1 (2001), 23–45.

15. Barbara N. Ramusack, “Cultural Missionaries, Maternal Imperialists, Feminist Allies: British Women Activists in India, 1865–1945,” in *Western Women and Imperialism: Complicity and Resistance*, ed. Nupur Chaudhuri and Margaret Strobel (Bloomington: Indiana University Press, 1992), 119–36.

16. See Antoinette Burton, *Burdens of History: British Feminists, Indian Women, and Imperial Culture, 1865–1915* (Chapel Hill: University of North Carolina Press, 1994), 49.

17. See Margaret D. Jacobs, *White Mother to a Dark Race: Settler Colonialism, Maternalism, and the Removal of Indigenous Children in the American West and Australia, 1880–1940* (Lincoln: University of Nebraska Press, 2009).

18. Anna Davin, “Imperialism and Motherhood,” *History Workshop* 5 (1978), 29.

19. Susan Pedersen, *Family, Dependence, and the Origins of the Welfare State Britain and France, 1914–1945* (Cambridge: Cambridge University Press, 1993), 138–77.

20. Ann Taylor Allen, “Maternalism in German Feminist Movements,” *Journal of Women’s History* 5.2 (1993), 99.

21. See, for example, Midgley, “Anti-Slavery and Feminism,” for some of the antislavery maternalists who opposed any political challenge to the “separate spheres” ideology. See Pedersen, *Family, Dependence*, 166, for the tension between Labour women and middle-class feminists in the campaign for the endowment of motherhood. Both groups agreed that motherhood should be recognized, but Labour women refused either to think of themselves as “dependent” on their husbands or to define “‘maternalist’ policies as a means of displacing men,” as middle-class feminists did. On the differences between maternalism and feminism in American history, see Ladd-Taylor, “Toward Defining Maternalism.”

22. Seth Koven and Sonya Michel, introduction to *Mothers of a New World: Maternalist Politics and the Origins of Welfare States*, ed. Seth Koven and Sonya Michel (New York: Routledge, 1993), 4.

23. Lewis, “Gender, the Family and Women’s Agency,” 39–40.

24. Rebecca Jo Plant and Marian van der Klein, introduction to *Maternalism Reconsidered: Motherhood, Welfare and Social Policy in the Twentieth Century*, ed. Marian van der Klein, Rebecca Jo Plant, Nichole Sanders, and Lori R. Weintrob (New York: Berghahn, 2012), 10.

25. See, for example, Barbara H. Rosenwein, *Emotional Communities in the Early Middle Ages* (Ithaca, N.Y.: Cornell University Press, 2006); William M. Reddy, *The Navigation of Feeling: A Framework for the History of Emotions* (Cambridge: Cambridge University Press, 2001); Jan Plamper, *The History of Emotions: An Introduction* (Oxford: Oxford University Press, 2015); Susan J. Matt and Peter N. Stearns, eds., *Doing Emotions History* (Urbana: University of Illinois Press, 2014); Ute Frevert, *Emotions in History? Lost and Found* (Budapest: Central European University Press, 2011).

26. Lyndal Roper, quoted in forum discussion, “History of Emotions,” *German History* 28.1 (March 2010), 71. Roper is a long-standing advocate of using psychoanalysis as a legitimate historical analytical tool. Her contribution for the understanding of fantasy as a subjective and yet sociopolitical dimension of human agency is particularly relevant to this book. For example, her account of the role of fantasy behind witchcraft in sixteenth- and seventeenth-century Germany echoes some of the fantasies behind the “maternal” in mid-twentieth-century Britain: “Witchcraft was a fantasy. This does not mean that it was trivial or unreal. Rather, it had deep roots in the unconscious. The fantasies of witchcraft were formed in a particular period of European culture, but they drew their force from the relationship to the primary material of infantile experience, feelings about feeding and eating, about where the body of the child begins and mother’s ends, about emptiness and death. . . . They seemed real, and so, in psychological terms, they were real. . . . It therefore becomes important to ask how a society—or at least a powerful cross-section of it—could become persuaded of the truth of such a fantasy” (*Witch Craze: Terror and Fantasy in Baroque Germany* [New Haven,

Conn.: Yale University Press, 2004], 10). See also her *Oedipus and the Devil: Witchcraft, Sexuality, and Religion in Early Modern Europe* (London: Routledge, 1994).

27. *Oxford English Dictionary Online*, s.v. “utopia,” accessed 8 September 2020, <https://www.oed.com/>.

28. Anna M. Parkinson, *An Emotional State: The Politics of Emotion in Postwar West German Culture* (Ann Arbor: University of Michigan Press, 2015), 14.

29. Michael Roper, “Slipping out of View: Subjectivity and Emotion in Gender History,” *HWJ* 59.1 (2005), 70.

30. Raymond Williams, *Marxism and Literature* (Oxford: Oxford University Press, 1977), 126. In light of Williams’ notion of the “pre-emerged,” David Simpson suggested that the term “structure of feeling” indicates “only something in the past, something that we know, with the wisdom of hindsight, to have been pre-emergent” (Simpson, “Raymond Williams,” 20–21).

31. Carolyn Steedman, *Landscape for a Good Woman: A Story of Two Lives* (London: Virago, 1986), 122.

32. Bruce Robbins, *Upward Mobility and the Common Good: Toward a Literary History of the Welfare State* (Princeton, N.J.: Princeton University Press, 2007), 162.

33. Steedman, *Landscape*, 53.

34. Robbins, *Upward Mobility*, 163.

35. Steedman, *Landscape*, 122–23 (italics mine).

36. Rodney Lowe, “The Second World War, Consensus, and the Foundation of the Welfare State,” *TBH*, 1.2 (1990), 156. On the intellectual origins of “welfarist” thought in Britain, see Jose Harris, “Political Thought and the Welfare State 1870–1940: An Intellectual Framework for British Social Policy,” *P&P* 135.1 (1992), 116–41; Michael Freedman, “Needs and Community: The Emergence of British Welfare Thought,” in *Rights Needs and Welfare*, ed. Alan Ware and Robert E. Goodin (London: Sage, 1990), 54–72.

37. Nikolas Rose and Peter Miller, “Political Power Beyond the State: Problematics of Government,” *British Journal of Sociology* 43.2 (1992), 196.

38. *Ibid.*, 192.

39. *Ibid.*, 196.

40. Gareth Stedman Jones, *Outcast London: A Study in the Relationship Between Classes in Victorian Society* (Oxford: Clarendon Press, 1971), 262–70.

41. *Ibid.*, 314. At the time, welfarism was only one political option among others. Historians have ignored, as Gareth Stedman Jones notes, “other parallel proposals to segregate the casual poor, to establish detention centres for ‘loafers,’ to separate pauper children from ‘degenerate’ parents or to ship the ‘residuum’ overseas” (*ibid.*).

42. *Ibid.*

43. See Davin, “Imperialism and Motherhood,” 49; Seth Koven, “Borderlands: Women, Voluntary Action and Child Welfare in Great Britain 1840–1914,” in *Mothers of a New World: Maternalist Politics and the Origins of Welfare States*, ed. Seth Koven and Sonya Michel (New York: Routledge, 1993), 94–135.

44. Seth Koven and Sonya Michel, “Womanly Duties: Maternalist Politics and the Origins of Welfare States in France, Germany, Great Britain, and the United States, 1880–1920,” *AHR* 95.4 (1990), 1091.

45. *Ibid.*

46. Notable examples are the late nineteenth-century European movement for abolishing the state regulation of prostitution and, of course, the suffragettes’ struggle for the vote.

The literature on the suffragettes is too wide to be referred, but on abolishing state regulation, see essays in Anne Summers, ed., “Gender, Religion and Politics; Josephine Butler’s Campaigns in International Perspective (1875–1959),” special issue, *Women’s History Review* 17.2 (2008); Anne Summers, “Which Women? What Europe? Josephine Butler and the International Abolitionist Federation,” *HWJ* 62.1 (2006), 214–31. See also Lucy Bland, “Purifying’ the Public World: Feminist Vigilantes in Late Victorian England,” *Women’s History Review* 1.3 (1992), 409, for the countercampaign by puritan feminists, who aimed to “domesticate” the English public sphere.

47. Koven and Michel, “Womanly Duties,” 1079.

48. Lewis, “Gender, the Family and Women’s Agency.” For voluntary women’s associations in the interwar period and after the Second World War, see Caitriona Beaumont, *Housewives and Citizens: Domesticity and the Women’s Movement in England, 1928–64* (Manchester, U.K.: Manchester University Press, 2013).

49. See Jane Lewis, “The Working-Class Wife and Mother and State Intervention, 1870–1918,” in *Labour and Love*, ed. Jane Lewis (Oxford: Basil Blackwell, 1986), 99–120.

50. Mazower, *Dark Continent*, 87.

51. *Ibid.*, 88.

52. Geoff Eley, “From Welfare Politics to Welfare State: Women and the Socialist Question,” in *Women and Socialism, Socialism and Women: Europe Between the Two World Wars*, ed. Helmut Gruber and Pamela Graves (New York: Berghahn, 1998), 534.

53. Sally Alexander, “Becoming a Woman in London in the 1920s and 1930s,” in *Becoming a Woman, and Other Essays in 19th and 20th Century Feminist History* (London: Virago, 1994), 204–5.

54. Sally Alexander, “The Mysteries and Secrets of Women’s Bodies: Sexual Knowledge in the First Half of the Century,” in *Modern Times: Reflections on a Century of English Modernity*, ed. Mica Nava and Alan O’Shea (London: Routledge, 1996), 172n4.

55. Wally Secombe, “Starting to Stop: Working-Class Fertility Decline in Britain,” *P&P* 126.1 (1990), 152–53.

56. *Ibid.*, 153–54.

57. Alexander, “Mysteries and Secrets,” 166.

58. *Ibid.*, 169. On sexual difference and birth control in the interwar years, see Stephen Brooke, “The Body and Socialism: Dora Russell in the 1920s,” *P&P* 189.1 (2005), 179–209; Deborah A. Cohen, “Private Lives in Public Spaces: Marie Stopes, the Mothers’ Clinics and the Practice of Contraception,” *HWJ* 35.1 (1993), 95–116.

59. On the popularity of this and other Jungian texts in Britain, see Luisa Passerini, *Europe in Love, Love in Europe: Imagination and Politics in Britain Between the Wars* (London: I. B. Tauris, 1999), 92–96.

60. C. G. Jung, “Woman in Europe” (1927), in vol. 10 of *The Collected Works of C. G. Jung*, ed. Herbert Read, Michael Fordham, and Gerhard Adler, 20 vols. (London: Routledge and Kegan Paul, 1964), 114.

61. *Ibid.*, 116.

62. Passerini, *Europe in Love*, 14.

63. There is a surprisingly small amount of published research on the history of “~~blaming mothers,~~” and many of the existing literature relies on American history. See especially Molly Ladd-Taylor and Lauri Umansky, eds., “*Bad*” Mothers: *The Politics of Blame in Twentieth-Century America* (New York: New York University Press, 1998); Rebecca Jo Plant,

Mom: The Transformation of Motherhood in Modern America (Chicago: University of Chicago Press, 2010). Interestingly, quite a few studies point to the “psy” disciplines as a main source for “mother blaming.” See, for example, Jane Taylor McDonnell, “On Being the ‘Bad’ Mother of an Autistic Child,” in Ladd-Taylor and Umansky, “*Bad*” Mothers, 220–29; and Majia Nadesan, “Constructing Autism: A Brief Genealogy,” in *Autism and Representation*, ed. Mark Osteen (London: Routledge, 2007), 78–95, for postwar perceptions—shaped by influential psychiatrists and psychoanalysts such as Leo Kanner, Bruno Bettelheim, and Frieda Fromm-Reichmann—that “autism and other developmental disorders were thus sometimes inadvertently other times directly attributed to maternal negligence or transgression” (Nadesan, 87). Kanner also famously coined the term *refrigerator mother*, allegedly a type of a mother who is emotionally distanced and incompetent, and who should be blamed for all sorts of psychosocial pathologies of her children, mainly autism. Another site of interest of mother blaming is what was known in postwar America as *momism*. The term was coined by Philip Wylie in his infamous book *Generation of Vipers*, published first in December 1942, and aimed to present the American mother (“mom”) as “a self-righteous, hypocritical, sexually repressed, middle-aged woman. Having lost the household functions of preindustrial women, according to Wylie, mom got men to worship her and spend money on her instead” (Michael Rogin, “Kiss Me Deadly: Communism, Motherhood, and Cold War Movies,” *Representations* 6 [1984], 6). *Generation of Vipers* was a best seller for two decades, and momism was widely perceived as a collective threat to American masculinity (namely, mothers make boys more “vulnerable” to becoming homosexuals) and also a real danger for the American national security (namely, communism). While most historians tend to emphasize the clearly misogynist tone of Wylie’s book, Rebecca Jo Plant problematizes the picture by showing that most of his views would be considered then, in the 1940s and 1950s, as “liberal.” He attempted to attack one form of more traditional domesticity for promoting a different model of family values, in which women would not be valued only for their motherhood. Furthermore, mothers’ letters to Wylie show that while many of them were furious over his dismissal of them as housewives and mothers, other mothers found the book no less than emancipating. One can read *Generation of Vipers* as a call for every woman to be “respected and liked for herself and not because she happened to be someone’s mother” (Plant, *Mom*, 50), to use the words of one of Wylie’s readers. According to Plant, anti-maternalist inclinations, and indeed full-scale mother blaming, very often “appealed more to liberals who embraced psychological concepts of the self than to radicals who privileged class-based approaches to social problems” (Plant, *Mom*, 233n14). For mother blaming in Britain, see, for example, John Stewart, *Child Guidance in Britain, 1918–1955: The Dangerous Age of Childhood* (London: Pickering and Chatto, 2013), 90–102; Celia Jenkins, “New Education and Its Emancipatory Interests (1920–1950),” *HED* 29.2 (2000), 145.

64. Jacqueline Rose, *Mothers: An Essay on Love and Cruelty* (London: Faber and Faber, 2018), 27.

65. Thus, for example, as Carolyn Laubender has recently argued, for John Bowlby, the curation of “emotional ‘security’ was the primary job of the woman-as-mother” during the Cold War, when it seemed possible that nuclear catastrophe could arrive at any moment. (“States of Security: John Bowlby, Child Psychology, and National Security in the Cold War,” *Hidden Persuaders* (blog), 28 March 2019, <http://www.bbk.ac.uk/hiddenpersuaders/blog/states-of-security-john-bowlby-child-psychology-and-national-security-in-the-cold-war/>).

66. John Bowlby, *Can I Leave My Baby?* (London: National Association for Mental Health, 1958).

67. See Frank C. P. van der Horst, *John Bowlby: From Psychoanalysis to Ethology: Unravelling the Roots of Attachment Theory* (Chichester, U.K.: Wiley-Blackwell, 2011).

68. See Juliet Mitchell, *Psychoanalysis and Feminism* (Harmondsworth, U.K.: Penguin, 1975), 228–29.

69. See Birmingham Feminist History Group, “Feminism as Femininity in the Nineteen-Fifties?,” *Feminist Review* 3 (1979), 56.

70. Tony Judt, *Postwar: A History of Europe Since 1945* (London: William Heinemann, 2005), 75.

71. James Vernon, “The Local, the Imperial and the Global: Repositioning Twentieth-Century Britain and the Brief Life of Its Social Democracy,” *TBH* 21.3 (2010), 418.

72. Thus, for example, Geoff Eley argues that “nationalization and public ownership lacked a strong socialist content: it neither provided the impetus for economic planning nor created an arena for democratic self-management through measures of workers’ control and social accountability” (“Legacies of Antifascism: Constructing Democracy in Postwar Europe,” *New German Critique* 67 [1996], 90–91).

73. On pre-1990s historiographical debates about the welfare state, see Becky Conekin, Frank Mort, and Chris Waters, introduction to *Moments of Modernity: Reconstructing Britain 1945–1964*, ed. Becky Conekin, Frank Mort, and Chris Waters (London: Rivers Oram Press, 1999), 3–9. See also Michael Freeden, “The Stranger at the Feast: Ideology and Public Policy in Twentieth Century Britain,” *TBH* 1.1 (1990), 9–34, for a critique of British historiography for its reductionist understanding of “ideology” and for its insufficient analysis of the ways in which ideologies operated within politics and society. However, since the publication of Freeden’s article, a new generation of cultural historians have changed significantly the understanding of ideology in historiography. See Geoff Eley, *A Crooked Line: From Cultural History to the History of Society* (Ann Arbor: University of Michigan Press, 2005).

74. David Harvey defines neoliberalism as “a theory of political economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within an institutional framework characterized by strong private property rights, free markets and free trade” (*A Brief History of Neoliberalism* [Oxford: Oxford University Press, 2005], 2). See also Dotan Leshem, *The Origins of Neoliberalism: Modeling the Economy from Jesus to Foucault* (New York: Columbia University Press, 2016), for a *longue durée* intellectual history of “neoliberal” ideology.

75. See Lowe, “Second World War.”

76. *Ibid.*, 156.

77. Freeden argues, however, that the welfare state was never supposed to be a “radical” project but “clearly a liberal product” (Freeden, “Needs and Community,” 69). In contrast to leftist historians, he argues that the welfare state was “probably the most important domestic institutional achievement of Western political systems in the twentieth century” (Michael Freeden, *Liberal Languages: Ideological Imaginations and Twentieth-Century Progressive Thought* [Princeton, N.J.: Princeton University Press, 2005], 4).

78. Pedersen, *Family, Dependence*, 17. Pedersen shows how in France, where feminist movements were weak, and mothers’ rights were promoted by more conservative pronatalist and Catholic groups, that mothers were guaranteed generous state benefits. The French “parental” policies considered the family rather than the sole “breadwinner” as the basic unit of

entitlement for state benefits. See also Camille Robcis, *The Law of Kinship: Anthropology, Psychoanalysis, and the Family in France* (Ithaca, N.Y.: Cornell University Press, 2013), for an excellent account on the ideology of “familism” and the role it played in constituting French Republicanism.

79. Carole Pateman, “The Patriarchal Welfare State,” in *Democracy and the Welfare State*, ed. Amy Gutmann (Princeton, N.J.: Princeton University Press, 1988), 247.

80. See Denise Riley, *War in the Nursery: Theories of the Child and Mother* (London: Virago, 1983).

81. Sonya Rose, *Which People’s War? National Identity and Citizenship in Britain 1939–1945* (Oxford: Oxford University Press, 2003), 107–50. On the equation between motherhood and military service during the Second World War, see Angela Davis, “Wartime Women Giving Birth: Narratives of Pregnancy and Childbirth, Britain c. 1939–1960,” *Studies in History and Philosophy of Science Part C: Studies in History and Philosophy of Biological and Biomedical Sciences* 47 (2014), 257–66.

82. See Angela Davis, *Modern Motherhood: Women and Family in England, c. 1945–2000* (Manchester, U.K.: Manchester University Press, 2012); Sally Alexander, “‘Do Grandmas Have Husbands?’ Generational Memory and Twentieth-Century Women’s Lives,” *Oral History Review* 36.2 (2009), 159–76; Alexander, “Becoming a Woman”; Katharina Rowold, “‘If We Are to Believe the Psychologists . . .’: Medicine, Psychoanalysis and Breastfeeding in Britain, 1900–55,” *Medical History* 63.1 (2019), 61–81. For a history of experiences of motherhood in earlier period, circa 1880–1920, see Ellen Ross, *Love and Toil: Motherhood in Outcast London, 1870–1918* (New York: Oxford University Press, 1993).

83. Elissa Marder, *The Mother in the Age of Mechanical Reproduction: Psychoanalysis, Photography, Deconstruction* (New York: Fordham University Press, 2012), 22. It should be noted that, within the context of this book, I understand what Marder called “unconscious representations of feminine figures” not in a strictly psychoanalytic sense but in rather looser historical sense.

84. Raymond Williams, *Politics and Letters: Interviews with “New Left Review”* (London: Verso, 1981).

85. Almost three decades after its publication, cultural historians of postwar Britain still express their debt to Steedman’s book. See, for example, Mathew Thomson, *Lost Freedom: The Landscape of the Child and the British Post-War Settlement* (Oxford: Oxford University Press, 2013), 6; Heike Bauer and Matt Cook, introduction to *Queer 1950s: Rethinking Sexuality in the Postwar Years*, ed. Heike Bauer and Matt Cook (Basingstoke, U.K.: Palgrave Macmillan, 2012), 9; Frank Mort, *Capital Affairs: London and the Making of the Permissive Society* (New Haven, Conn.: Yale University Press, 2010), 21. A major achievement of this new cultural history is in expanding research on the post-1945 years beyond questions of citizenship and welfarism, into other ways in which postwar selfhood was shaped, such as consumerism, advertisement, and popular culture. See, for example, Chris Waters, “Representations of Everyday Life: L. S. Lowry and the Landscape of Memory in Postwar Britain,” *Representations* 65 (Winter, 1999), 121–50.

86. Sigmund Freud, *The Interpretation of Dreams*, trans. A. A. Brill (London: George Allen, 1913 [1900]).

87. Ernest Jones, *Papers on Psycho-Analysis* (London: Baillière, Tindall and Cox, 1913).

88. For a revisionist view of the late reception of psychoanalysis in Britain, see Rhodri Hayward, *The Transformation of the Psyche in British Primary Care, 1870–1970* (London: Bloomsbury Academic, 2014), 3–4.

89. On the reception of psychoanalysis in Britain before the First World War and in the interwar period, see Dean Rapp, “The Early Discovery of Freud by the British General Educated Public, 1912–1919,” *SHM* 3.2 (1990), 217–43; Dean Rapp, “The Reception of Freud by the British Press: General Interest and Literary Magazines, 1920–1925,” *JHBS* 24.2 (1988), 191–201; John Forrester and Laura Cameron, *Freud in Cambridge* (Cambridge: Cambridge University Press, 2017); Philip Kuhn, *Psychoanalysis in Britain, 1893–1913: Histories and Historiography* (Lanham, Md.: Lexington Books, 2017). On the eclectic character of psychoanalysis in Britain during that period, see Graham Richards, “Britain on the Couch: The Popularization of Psychoanalysis in Britain 1918–1940,” *Science in Context* 13.2 (2000), 183–230; Suzanne Raitt, “Early British Psychoanalysis and the Medico-Psychological Clinic,” *HWJ* 58.1 (2004), 63–85.

90. On psychoanalysis, occultism, and the SPR, see R. D. Hinshelwood, “Psychoanalysis in Britain: Points of Cultural Access, 1893–1918,” *IJP* 76 (1995), 135–51; James P. Keeley, “Subliminal Prompts: Psychoanalytic Theory and the Society for Psychical Research,” *American Imago* 58.4 (2001), 767–91; Júlia Gyimesi, “The Problem of Demarcation: Psychoanalysis and the Occult,” *American Imago* 66.4 (2009), 457–70; John J. Cerullo, *The Secularization of the Soul: Psychical Research in Modern Britain* (Philadelphia: Institute for the Study of Human Issues, 1982), 159–74. On psychoanalytic psychical research in the interwar period, see Joanna Timms, “Phantasm of Freud: Nandor Fodor and the Psychoanalytic Approach to the Supernatural in Interwar Britain,” *PAH* 14.1 (2012), 5–28. For a wider study of occultism in fin de siècle Britain, see Alex Owen, *The Place of Enchantment: British Occultism and the Culture of the Modern* (Chicago: University of Chicago Press, 2004). See also Júlia Gyimesi, “Why ‘Spiritism’?,” *IJP* 97.2 (2016), 357–83, for a wider cultural history of psychoanalysis and the “occult.”

91. For example, the cofounder of the London Psycho-Analytical Society in 1913, ~~M. D. Eder~~ (1865–1936), who became a Jung devotee, only to become a Freudian again at the beginning of the 1920s; or Constance Ellen Long (1870–1923), an English physician who was very close to Jung and abandoned Jungianism only in 1921, after meeting the new star of 1920s occultism, Peter D. Ouspensky (1878–1974). On Eder, see Mathew Thomson, “‘The Solution to His Own Enigma’: Connecting the Life of Montague David Eder (1865–1936), Socialist, Psychoanalyst, Zionist and Modern Saint,” *Medical History* 55.1 (2011), 61–84; on Long, see Richard Noll, *The Aryan Christ: The Secret Life of Carl Jung* (London: Macmillan, 1997), 236–60.

92. Richards, “Britain on the Couch,” 211.

93. On the Freudian circle in interwar Cambridge, see Forrester and Cameron, *Freud in Cambridge*. On psychoanalysis and the Bloomsbury group, see Forrester and Cameron, *Freud in Cambridge* 505–612; Hinshelwood, “Psychoanalysis in Britain,” 142–44; Barbara Caine, “The Stracheys and Psychoanalysis,” *HWJ* 45.1 (1998), 145–70; Perry Meisel and Walter Kendrick, introduction to *Bloomsbury/Freud: The Letters of James and Alix Strachey, 1924–1925*, ed. Perry Meisel and Walter Kendrick (London: Chatto and Windus, 1986), 3–49; Elizabeth Abel, *Virginia Woolf and the Fictions of Psychoanalysis* (Chicago: University of Chicago Press, 1989), 13–20.

94. Rickman, James Strachey, Tansley, Bernal, and Ramsey were part of discussion group, established in 1925 and known as the Cambridge Psychoanalytic Group (or the 1925 Group, as Forrester and Cameron called it). There was one main condition for being accepted: only those who had undergone personal analysis could become members. On the 1925 Group, see Forrester and Cameron, *Freud in Cambridge*, 363–431.

95. Rapp, “Early Discovery,” 231–32.

96. Geoffrey Alderman, *Modern British Jewry* (Oxford: Clarendon Press, 1992), 235.

97. On the Stracheys, see Meisel and Kendrick, introduction to *Bloomsbury/Freud*, 38. On Jones, see Ernest Jones, “The Psychology of the Jewish Question,” in *Essays in Applied Psycho-Analysis* (London: Hogarth Press, 1951), 284–300; Yosef Hayim Yerushalmi, *Freud’s Moses: Judaism Terminable and Interminable* (New Haven, Conn.: Yale University Press, 1991), 54; George Makari, *Revolution in Mind: The Creation of Psychoanalysis* (London: Duckworth, 2008), 349.

98. On psychoanalysis as a “Jewish science,” see Yerushalmi, *Freud’s Moses*. See also, Eliza Slavet, *Racial Fever: Freud and the Jewish Question* (New York: Fordham University Press, 2009).

99. Graham Richards, “Psychology and the Churches in Britain 1919–39: Symptoms of Conversion,” *HHS* 13.2 (2000), 79.

100. See Hugh McLeod, *Religion and Society in England, 1850–1914* (Basingstoke, U.K.: Macmillan, 1995).

101. Gregorio Kohon, ed., *The British School of Psychoanalysis: The Independent Tradition* (London: Free Association, 1985).

102. See Lyndsey Stonebridge and John Phillips London, eds., *Reading Melanie Klein* (London: Routledge, 1998); Eli Zaretsky, *Secrets of the Soul: A Social and Cultural History of Psychoanalysis* (New York: Vintage, 2005), 249–75. On Klein’s life and work, see Meira Likierman, *Melanie Klein: Her Work in Context* (London: Continuum, 2001); Phyllis Grosskurth, *Melanie Klein: Her World and Her Work* (London: Hodder and Stoughton, 1986); and Hanna Segal, *Melanie Klein* (New York: Viking Press, 1980).

103. Ferenc Erős, Judit Szekacs-Weisz, and Ken Robinson, eds., *Sandor Ferenczi—Ernest Jones: Letters 1911–1933* (London: Karnac, 2013); Shaul Bar-Haim, “The Psychoanalytic Languages: On the Intimate Rivalry of Michael Balint and D. W. Winnicott,” *PAH* 21.1 (2019), 73–103; Ernst Falzeder, “Family Tree Matters,” *Journal of Analytical Psychology* 43 (1998), 127–54.

104. Sigmund Freud, *The Ego and the Id* (1923), in *SE*, vol. 19, 1–66; Otto Rank, *The Trauma of Birth* (New York: Dover, 1993 [1924]); Georg Walther Groddeck, *The Book of the It* (1923), trans. V. M. E. Collins (London: Vision, 1950); Sandor Ferenczi, *Thalassa: A Theory of Genitality* (1924), trans. Henry Alden Bunker (London: Karnac, 1989). On the “maternal turn” of the 1920s, see Antal Bokay, “Turn of Fortune in Psychoanalysis: The 1924 Rank Debates and the Origins of Hermeneutic Psychoanalysis,” *International Forum of Psychoanalysis* 7.4 (1998), 189–99; Galina Hristeva and Mark F. Poster, “Georg Groddeck’s Maternal Turn: Its Evolution and Influence on Early Psychoanalysts,” *AJP* 73.3 (2013), 228–53; Peter L. Rudnytsky, *Reading Psychoanalysis: Freud, Rank, Ferenczi, Groddeck* (Ithaca, N.Y.: Cornell University Press, 2002).

105. *Ibid.*, 143.

106. Bokay, “Turn of Fortune,” 189.

107. As Rank writes in a letter to Freud from 15 February 1924: “You . . . speak of the ‘fantasized’ return to the womb, whereas in my view, both in neurotic symptoms and in the sexual act, much more than that is involved, i.e., a partial realization.” E. James Lieberman and Robert Kramer, eds., *The Letters of Sigmund Freud and Otto Rank: Inside Psychoanalysis*, trans. Gregory C. Richter (Baltimore: Johns Hopkins University Press, 2012), 188.

108. See Teresa Brennan, *The Interpretation of the Flesh: Freud and Femininity* (London: Routledge, 1992), 39–44. For the influential work of Horney and other neo-Freudians in

America, especially in thinking anew Freudian notions of sexuality, see Dagmar Herzog, *Cold War Freud: Psychoanalysis in an Age of Catastrophes* (Cambridge: Cambridge University Press, 2017), 21–55.

109. Sigmund Freud, “Some Psychical Consequences of the Anatomical Distinction Between the Sexes” (1925), in *SE*, vol. 19, 241–58; Sigmund Freud, “Female Sexuality” (1931), in *SE*, vol. 21, 221–44; Sigmund Freud, *New Introductory Lectures on Psycho-Analysis* (1933), in *SE*, vol. 22, 112–35. On Freud’s perceptions of female sexuality and femininity, see, among many, Mari Jo Buhle, *Feminism and Its Discontents: A Century of Struggle with Psychoanalysis* (Cambridge, Mass.: Harvard University Press, 1998); Sander Gilman, “The Image of the Hysteric,” in *Hysteria Beyond Freud*, ed. Sander Gilman et al. (Berkeley: University of California Press, 1993), 345–452; Brennan, *The Interpretation of the Flesh*, 37–66; Jacqueline Rose, *Sexuality in the Field of Vision* (London: Verso, 1986); Juliet Mitchell, *Psychoanalysis and Feminism* (Harmondsworth, U.K.: Penguin, 1975).

110. Freud, *New Introductory Lectures*, 116. For example, Freud admitted that he had no clear answer to the question of why “passivity (as a mark of femininity), and why . . . the marks of passive femininity, such as masochism, [are] not confined to women” (*ibid.*, 64).

111. Sandor Ferenczi, author’s preface to *Further Contributions to the Theory and Technique of Psycho-Analysis*, (London: Hogarth Press, 1926), 8–9.

112. Erős, Szekacs-Weisz, and Robinson, *Sandor Ferenczi–Ernest Jones*. The correspondence between the two shows a bitter, and often even hostile, relationship between Ferenczi and Jones. See Shaul Bar-Haim, review of *Sandor Ferenczi–Ernest Jones: Letters 1911–1933*, ed. Ferenc Erős, Judit Szekacs-Weisz, and Ken Robinson, *Psychodynamic Practice* 21.1 (2015), 92–97. On top of the personal hostility between the two, they also had some strong theoretical disagreements. For example, Ferenczi—like Freud, but even more than him—had a great interest in telepathy and thought this a topic with close affinities to psychoanalysis. Jones, however, was not only sceptical about telepathy, but moreover a lifelong opponent of connecting it to psychoanalysis. See Julia Gyimesi, “Sandor Ferenczi and the Problem of Telepathy,” *History of the Human Sciences* 25.2 (2012), 131–48; Pamela Thurschwell, “Ferenczi’s Dangerous Proximities: Telepathy, Psychosis, and the Real Event,” *differences: A Journal of Feminist Cultural Studies* 11.1 (1999), 150–78.

113. Although a single authoritative biography on Ferenczi is yet to be written, there does exist a substantial body of literature about his life and work. See Judit Szekacs-Weisz and Tom Keve, eds., *Ferenczi for Our Time: Theory and Practice* (London: Karnac, 2012); Peter L. Rudnytsky, *Reading Psychoanalysis*; Martin Stanton, *Sándor Ferenczi: Reconsidering Active Intervention* (London: Free Association Books, 1990); Peter L. Rudnytsky, Antal Bokay, and Patrizia Giampieri-Deutsch, eds., *Ferenczi’s Turn in Psychoanalysis* (New York: New York University Press, 1996); Lewis Aron and Adrienne Harris, eds., *The Legacy of Sándor Ferenczi* (Hillsdale, N.J.: Analytic Press, 1993); Adrienne Harris and Steven Kuchuck, eds., *The Legacy of Sándor Ferenczi: From Ghost to Ancestor* (London: Routledge, Taylor & Francis Group, 2015); Judit Szekacs-Weisz and Tom Keve, eds., *Ferenczi and His World: Rekindling the Spirit of the Budapest School* (London: Karnac, 2012); André E. Haynal, *The Technique at Issue: Controversies in Psychoanalysis, From Freud and Ferenczi to Michael Balint*, trans. Elizabeth Holder and Archie Hooton (London: Karnac, 1988); Judit Szekacs-Weisz, ed., “Sincerity and Freedom: London Conference Inspired by Ferenczi’s Clinical Diary,” special issue, *AJP* 75.1 (2015).

114. See Ernest Jones, *The Life and Work of Sigmund Freud*, vol. 3 (New York: Basic Books, 1957), 190. On the Freud-Ferenczi controversies, see, among other works, André E. Haynal,

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“In the Shadow of a Controversy,” *IJP* 86 (2005), 457–66; Carlo Bonomi, “Flight into Sanity: Jones’s Allegation of Ferenczi’s Mental Deterioration Reconsidered,” *IJP* 80 (1999), 507–42; Martin S. Bergmann, “The Tragic Encounter Between Freud and Ferenczi and Its Impact on the History of Psychoanalysis,” in Rudnytsky, Bokay, and Giampieri-Deutsch, *Ferenczi’s Turn in Psychoanalysis*, 145–60. Only a few scholars, however, studied the philosophical dimensions of this debate. The few who did so only made it clearer that such an analysis is necessary for an understanding of this argument. See John Forrester, *Dispatches from the Freud Wars: Psychoanalysis and Its Passions*, (Cambridge, Mass.: Harvard University Press, 1997), 44–106, for a comparative study of these two epistemological perspectives, drawing on sources earlier than the 1920s; see also the seminal study by Ruth Leys, *Trauma: A Genealogy* (Chicago: University of Chicago Press, 2000), 153–89.

115. See Emanuel Berman, “The Ferenczi Renaissance,” *Psychoanalytic Dialogues* 6.3 (1996), 391–411; Harold P. Blum, “The Confusion of Tongues and Psychic Trauma,” *IJP* 75 (1994), 871–82; Ilse Grubrich-Simitis, “Six Letters of Sigmund Freud and Sándor Ferenczi,” *IRP* 13 (1986), 259–77; Eva Brabant, Ernst Falzeder, and Patrizia Giampieri-Deutsch, eds., *The Correspondence of Sigmund Freud and Sándor Ferenczi*, trans. Peter T. Hoffer, 3 vols. (Cambridge, Mass.: Belknap Press of Harvard University Press, 1993–2000).

116. Jeffrey Moussaieff Masson, *The Assault on Truth: Freud’s Suppression of the Seduction Theory* (New York: Harper Perennial, 1992), 145–87; Jody Messler Davies and Mary Gail Frawley, *Treating the Adult Survivor of Childhood Sexual Abuse: A Psychoanalytic Perspective* (New York: Basic Books, 1994), 16–17.

117. See, for example, Leys, *Trauma*.

118. Sandor Ferenczi, “Confusion of the Tongues Between the Adults and the Child—(The Language of Tenderness and of Passion),” *IJP* 30 (1949 [1933]), 225–30.

119. On the revision of hypnosis, see Sandor Ferenczi and Otto Rank, *The Development of Psycho-Analysis*, trans. Caroline Newton (Madison, Conn.: International Universities Press, 1986 [1924]). For “active technique,” see Sandor Ferenczi, “On the Technique of Psycho-Analysis” (1919), in *Further Contributions to the Theory and Technique of Psycho-Analysis*, trans. Jane Isabel Suttie et al. (London: Hogarth Press, 1950 [1926]), 177–89; “The Further Development of an Active Therapy in Psychoanalysis” (1921), in *Further Contributions*, 198–217. On mutual analysis, see Therese Ragen and Lewis Aron “Abandoned Workings: Ferenczi’s Mutual Analysis,” in *The Legacy of Sándor Ferenczi*, ed. Lewis Aron and Adrienne Harris (Hillsdale, N.J.: Analytic Press, 1993), 217–26. On sexual abuse, see Ferenczi, “Confusion of the Tongues.”

120. Ferenczi and Rank, *Development of Psycho-Analysis*.

121. Sigmund Freud, “Analysis Terminable and Interminable” (1937), in *SE*, vol. 23, 230. On the debate between Freud and Ferenczi over the hypnotic tradition see, Leys, *Trauma* 153–89. See also Andreas Mayer, *Sites of the Unconscious: Hypnosis and the Emergence of the Psychoanalytic Setting* (Chicago: University of Chicago Press, 2013), for a detailed study of the continuities and discontinuities between psychoanalysis and other earlier nineteenth-century hypnotic traditions in Europe.

122. Judith Dupont, ed., *The Clinical Diary of Sandor Ferenczi*, trans. Michael Balint and Nicola Zarday Jackson (Cambridge Mass.: Harvard University Press, 1988), 116 (italics in the original).

123. James A. Secord, “Knowledge in Transit,” *Isis* 95.4 (2004), 654–72.

124. Isaacs was one of Klein’s main representatives in the so-called Controversial Discussions. These were a series of scientific meetings of the British Psychoanalytical Society, which

took place in London between 1941 and 1945 and aimed to resolve the fundamental disagreements between Melanie Klein and Anna Freud and their followers. See Pearl King and Riccardo Steiner, eds., *The Freud-Klein Controversies, 1941–45* (London: Tavistock and Routledge, 1991).

125. Ian D. Suttie and Jane I. Suttie, “The Mother: Agent or Object? Part II,” *BJMP* 12.3 (1932), 230.

126. For what I described as professional and personal “intimate rivalry” between Winnicott and Balint, see Bar-Haim, “The Psychoanalytic Languages,” 73–103.

Chapter 1

Notes to epigraphs: Letter from Jones to Freud, 30 September 1927, in *The Complete Correspondence of Sigmund Freud and Ernest Jones, 1908–1939*, ed. R. Andrew Paskauskas (Cambridge, Mass.: Belknap Press of Harvard University Press, 1993), 627. Carolyn Steedman, “Bodies, Figures and Physiology: Margaret McMillan and the Late Nineteenth-Century Remaking of Working-Class Childhood,” in *In the Name of the Child: Health and Welfare, 1880–1940*, ed. Roger Cooter (London: Routledge, 1992), 37.

1. Sigmund Freud, “Analysis of a Phobia in a Five-Year-Old Boy” (1909), in *SE*, vol. 10, 5.

2. Sigmund Freud, “New Introductory Lectures on Psycho-Analysis” (1933), in *SE*, vol. 22, 150.

3. Letter from Freud to Jones, 18 February 1928, in Paskauskas, *Complete Correspondence of Freud and Jones*, 641.

4. The first child psychoanalyst was actually neither one of them, but Freud’s Viennese pupil and colleague, Hermine Hug-Hellmuth (1871–1924). See Claudine Geissmann and Pierre Geissmann, *A History of Child Psychoanalysis* (London: Routledge, 1998), 33–59.

5. See, for instance, Deborah P. Britzman, *After-Education: Anna Freud, Melanie Klein, and Psychoanalytic Histories of Learning* (Albany: State University of New York Press, 2003); Russell Viner, “Melanie Klein and Anna Freud: The Discourse of the Early Dispute,” *Journal of the History of the Behavioural Sciences* 32.1 (1996), 4–15; Jacqueline Rose, *Why War?: Psychoanalysis, Politics, and the Return to Melanie Klein* (Oxford: Blackwell, 1993), 191–230; Riccardo Steiner, “Some Thoughts About Tradition and Change Arising from an Examination of the British Psychoanalytical Society’s Controversial Discussions (1943–1944),” *IRP* 12 (1985), 27–71.

6. Ferenczi’s support of Anna Freud was also expressed by writing a foreword to the English translation of her *Introduction to the Technique of Child Analysis* (although, by 1928, when the book was published, the foreword was omitted). See Anna Freud, *Introduction to the Technique of Child Analysis*, trans. L. Pierce Clark (New York: Arno Press, 1975 [1928]). Ferenczi was Klein’s first psychoanalyst and one of the most encouraging figures in her early career, but the two did not stay close after she moved to Berlin at the beginning of 1921. Klein never fully acknowledged his contribution to her psychoanalytical theory (as she acknowledged her second psychoanalyst, Karl Abraham, for example). After 1921, Ferenczi also distanced himself from Klein, and mentioned her only a few times in his writings (at least in one case he was very critical of her work, although not mentioning her by name). See Peter L. Rudnytsky, foreword to *Sandor Ferenczi–Ernest Jones: Letters 1911–1933*, ed. Ferenc Erős, Judit Szekacs-Weisz, and Ken Robinson (London: Karnac, 2013), xix. However, some scholars have shown recently that Ferenczi did have an important impact on Klein’s work. See Gábor Flaskay, “From Patient to Founder of a Psychoanalytic School: Ferenczi’s Influence on the Works

of Melanie Klein,” in *Ferenczi for Our Time: Theory and Practice*, ed. Judit Szekacs-Weisz and Tom Keve (London: Karnac, 2012), 3–17; Meira Likierman, *Melanie Klein: Her work in Context* (London: Continuum, 2001); Juliet Mitchell, “Introduction to Melanie Klein,” in *Reading Melanie Klein*, ed. Lyndsey Stonebridge and John Phillips (London: Routledge, 1998), 13; Joseph Aguayo, “Historicising the Origins of Kleinian Psychoanalysis: Klein’s Analytic and Patronal Relationships with Ferenczi, Abraham and Jones, 1914–1927,” *IJP* 78 (1997), 1165–82.

7. In the distinction between *diachronic* and *synchronic* structures of childhood, I draw on Ivar Frønes, “Structuration of Childhood: An Essay on the Structuring of Childhood and Anticipatory Socialisation,” in *Studies in Modern Childhood: Society, Agency and Culture*, ed. Jens Qvortrup (London: Palgrave Macmillan, 2005), 271.

8. See Jonathan Culler, *Saussure* (London: Fontana Press, 1986), 35. In the history of psychoanalysis, it was most notably Lacan ~~and certainly not Klein~~ who used Saussurean linguistics extensively in his theory of language. See Bruce Fink, *Lacan to the Letter: Reading “Écrits” Closely* (Minneapolis: University of Minnesota Press, 2004), 63–105. Interestingly, Klein knew Saussure’s son, the psychoanalyst Raymond de Saussure. See Jean-Michel Quinodoz, “Melanie Klein’s Letters Addressed to Marcelle Spira (1955–1960),” *IJP* 90.6 (2009), 1410.

9. Culler, *Saussure*, 40.

10. Melanie Klein, “Our Adult World and Its Roots in Infancy,” *Human Relations* 12 (1959), 291–303.

11. Nick Lee, *Childhood and Society: Growing Up in an Age of Uncertainty* (Buckingham, U.K.: Open University Press, 2001), 5–6.

12. *Ibid.*, 38.

13. Allison James, “Life Times: Children’s Perspectives on Age, Agency and Memory Across the Life Course,” in *Studies in Modern Childhood: Society, Agency and Culture*, ed. Jens Qvortrup (London: Palgrave Macmillan, 2005), 250 (*italics in the original*).

14. *Ibid.*, 252–53. In this context, see also Lee Edelman, *No Future: Queer Theory and the Death Drive* (Durham, N.C.: Duke University Press, 2004) for a polemic argument against what he called “reproductive futurism.”

15. On the immense influence of this book and on the ongoing debate among historians on Ariès’s provocative thesis, see Jeroen J. H. Dekke and Leendert F. Groenendijk, “Philippe Ariès’s Discovery of Childhood after Fifty Years: The Impact of a Classic Study on Educational Research,” *Oxford Review of Education* 38.2 (2012), 133–47; Hugh Cunningham, *Children and Childhood in Western Society Since 1500* (New York: Longman, 1995).

16. Philippe Ariès, *Centuries of Childhood: A Social History of Family Life*, trans. Robert Baldick (New York: Vintage Books, 1962), 10.

17. Cunningham, *Children and Childhood*, 134–62.

18. Viviana A. Zelizer, *Pricing the Priceless Child: The Changing Social Value of Children* (Princeton, N.J.: Princeton University Press, 1994), 11. According to Zelizer, a new form of domesticity emerged in the United States between 1870 and 1930: “For reformers, true parental love could only exist if the child was defined exclusively as an object of sentiment and not as an agent of production” (72).

19. Harry Hendrick, *Children, Childhood, and English Society, 1880–1990* (Cambridge: Cambridge University Press, 1997), 64.

20. Claudia Castañeda, *Figurations: Child, Bodies, Worlds* (Durham, N.C.: Duke University Press, 2002), 26.

21. Jo-Ann Wallace, “Technologies of ‘the Child’: Towards a Theory of the Child-Subject,” *Textual Practice* 9.2 (1995), 293.

22. The identification of the “savage” with the “primitive” started to take place only in the 1860s. See Thomas Trautmann, “The Revolution in Ethnological Time,” *Man* 27.2 (1992), 379–97.

23. Ann Laura Stoler, *Race and the Education of Desire: Foucault’s History of Sexuality and the Colonial Order of Things* (Durham, N.C.: Duke University Press, 1995), 150.

24. Ashis Nandy, “Reconstructing Childhood: A Critique of the Ideology of Adulthood,” *Alternatives: Global, Local, Political*, 10.3 (1984), 365. See also Ashis Nandy, *The Intimate Enemy: Loss and Recovery of Self Under Colonialism* (Delhi: Oxford University Press, 1983). This nineteenth-century “ideology of adulthood” was disparaging not only of children but also of women, as femininity was perceived as a primitive and undeveloped form of masculinity. See Rita Felski, *The Gender of Modernity* (Cambridge, Mass.: Harvard University Press, 1995), 39–40.

25. Richard Appignanesi, “Some Thoughts on Freud’s Discovery of Childhood,” in *Changing Childhood*, ed. Martin Hoyles (London: Writers and Readers Publishing Cooperative, 1979), 189. From a different perspective, some literary scholars have shown the strong affinities in imperial discourse between “the child” and the “colonized.” See Sue Walsh, *Kipling’s Children’s Literature: Language, Identity, and Constructions of Childhood* (Farnham, U.K.: Ashgate, 2010), 31–51; Don Randall, *Kipling’s Imperial Boy: Adolescence and Cultural Hybridity* (Basingstoke, U.K.: Palgrave, 2000), 24–61; Perry Nodelman, “The Other: Orientalism, Colonialism, and Children’s Literature,” *Children’s Literature Association Quarterly* 17.1 (1992), 29–35; Jacqueline Rose, *The Case of Peter Pan, or, The Impossibility of Children’s Fiction* (London: Macmillan, 1984). For the historical context of early twentieth-century imperial representations, including children’s literature, see John M. MacKenzie, “The Popular Culture of Empire in Britain,” in *The Oxford History of the British Empire*, vol. 4, *The Twentieth Century*, ed. Judith M. Brown and W. Roger Louis (Oxford: Oxford University Press, 1999), 212–31.

26. Anna Davin, “Imperialism and Motherhood,” *History Workshop* 5 (1978), 49.

27. *Ibid.*, 16. On the implications of the Boer War on the perception of imperialism within British public opinion, see Andrew S. Thompson, “The Language of Imperialism and the Meanings of Empire: Imperial Discourse in British Politics, 1895–1914,” *JBS* 36.2 (1997), 147–77.

28. Macmillan drew mainly on the work of the French physiologist and psychologist Edouard Seguin (1812–1880). Seguin was a highly influential figure for many nineteenth-century educationalists, such as Maria Montessori (1870–1952).

29. See Steedman, “Bodies, Figures and Physiology,” 34.

30. For the cultural history of the notion of growth in nineteenth-century natural and social sciences, see Carolyn Steedman, *Strange Dislocations: Childhood and the Idea of Human Interiority, 1780–1930* (London: Virago, 1995), 43–95. The notion of growth is also crucial for the understanding of the flourishing of nineteenth-century developmental anthropology and developmental psychology as leading disciplines. On nineteenth-century developmental social sciences, mainly in Britain, see Margaret T. Hodgen, *The Doctrine of Survivals: A Chapter in the History of Scientific Methods in the Study of Man* (London: Allenson and Company, 1936). On the colonial aspects of nineteenth-century developmentalism in the Anglo-American world, see Castañeda, *Figurations*, 12–45.

31. The literature on the nineteenth-century scientific origins of psychoanalysis is too extensive to be fully cited. See, however, Katja Guenther, *Localization and Its Discontents: A Genealogy of Psychoanalysis and the Neuro Disciplines* (Chicago: University of Chicago Press, 2015); Andreas Mayer, *Sites of the Unconscious: Hypnosis and the Emergence of the Psychoanalytic Setting* (Chicago: University of Chicago Press, 2013); Arnold I. Davidson, “How to Do the History of Psychoanalysis: A Reading of Freud’s ‘Three Essays on the Theory of Sexuality,’” *Critical Inquiry* 13.2 (1987), 252–77; George Makari, *Revolution in Mind: The Creation of Psychoanalysis* (London: Duckworth, 2008), 9–125. On nineteenth-century child psychology and child psychiatry, see Sally Shuttleworth, *The Mind of the Child: Child Development in Literature, Science, and Medicine, 1840–1900* (Oxford: Oxford University Press, 2010). On the training Freud had received in 1886 with the Berlin pediatrician Adolf Baginsky and the impact of his interest in pediatrics on his theory of sexuality, see Carlo Bonomi, “The Relevance of Castration and Circumcision to the Origins of Psychoanalysis: 1. The Medical Context,” *IJP* 90 (2009), 551–80. On the influence of nineteenth-century cell theory on Freud’s work, see Steedman, *Strange Dislocations*, 77–95.

32. See J. Laplanche and J. B. Pontalis, *The Language of Psycho-Analysis* (London: Hogarth Press, 1973), 111–14. Following the work of Jacques Lacan, *après-coup* became one of the fundamental concepts of post–Second World War French psychoanalysis. Interestingly, one of the reasons that Lacan opposed Ferenczi was that he thought that Ferenczi’s influential article “Stages in the Development of the Sense of Reality” (see Chapter 2) was the cornerstone of all chronological-developmental tendencies in the history of psychoanalysis. For him, *après-coup* was the main refutation of any developmental reading of Freud. See Shuli Barzilai, “‘History Is Not the Past’: Lacan’s Critique of Ferenczi,” *Psychoanalytic Review* 84.4 (1997), 553–72.

33. See John Stewart, *Child Guidance in Britain, 1918–1955: The Dangerous Age of Childhood* (London: Pickering and Chatto, 2013); Adrian Wooldridge, *Measuring the Mind: Education and Psychology in England, c. 1860–c. 1990* (Cambridge: Cambridge University Press, 1994); Michal Shapira, “‘Speaking Kleinian’: Susan Isaacs as Ursula Wise and the Inter-War Popularisation of Psychoanalysis,” *Medical History* 61.4 (2017), 525–547.

34. Michael Roper, “From the Shell-Shocked Soldier to the Nervous Child: Psychoanalysis in the Aftermath of the First World War,” *PAH* 18.1 (2016), 53.

35. Sandor Ferenczi, “The Principle of Relaxation and Neocatharsis,” *IJP* 11 (1930), 440.

36. Sandor Ferenczi, “Child-Analysis in the Analysis of Adults,” *IJP* 12 (1931), 469.

37. *Ibid.*

38. Sandor Ferenczi, “Confusion of the Tongues Between the Adults and the Child—(The Language of Tenderness and of Passion),” *IJP* 30 (1949 [1933]), 227.

39. Anna Freud, “The Theory of Child Analysis” (1927), in *Introduction to Psychoanalysis: Lectures for Child Analysts and Teachers, 1922–1935* (London: Hogarth Press, 1974), 163.

40. Anna Freud, “Four Lectures on Psychoanalysis for Teachers and Parents” (1930), in *Introduction to Psychoanalysis*, 118.

41. *Ibid.* For Sigmund Freud’s classic discussion of the superego see Freud, *The Ego and the Id* (1923), in *SE*, vol. 19, 1–66, where he introduces and defines this concept. See also Freud, “The Economic Problem of Masochism” (1924), in *SE*, vol. 19, 168; and Freud, “New Introductory Lectures on Psycho-Analysis” (1933), in *SE*, vol. 22, 1–182: “Since [the super-ego] goes back to the influence of parents, educators and so on, we learn still more of its significance if we turn to those who are its sources. . . . Thus a child’s super-ego is in fact constructed on the model not of its parents but of its parents’ super-ego; the contents which fill it are the same

and it becomes the vehicle of tradition and of all the time-resisting judgements of value which have propagated themselves in this manner from generation to generation” (67).

42. A. Freud, “Theory of Child Analysis,” 171.

43. *Ibid.*, 171–72. For the political dimensions of Anna Freud’s perception of authority see Carolyn Laubender, “On Good Authority: Anna Freud and the Politics of Child Analysis,” *PAH* 19.3 (2017), 297–322; Suzanne Stewart-Steinberg, *Impious Fidelity: Anna Freud, Psychoanalysis, Politics* (Ithaca, N.Y.: Cornell University Press, 2011).

44. Sigmund Freud, “Fragment of an Analysis of a Case of Hysteria” (1905 [1901]), in *SE*, vol. 7, 116.

45. Sandor Ferenczi, “Psycho-Analysis and Education,” *IJP* 30 (1949 [1908]), 223. According to Ferenczi, “mankind [is] educated to *introspective blindness*”—a process which can be compared to a “post-hypnotic suggestion of a negative hallucination” (*ibid.*).

46. *Ibid.*

47. *Ibid.*, 224.

48. Letter from Ferenczi to Sigmund Freud, 5 February 1910, in *The Correspondence of Sigmund Freud and Sándor Ferenczi*, vol. 1, 1908–1914, ed. Eva Brabant, Ernst Falzeder, and Patrizia Giampieri-Deutsch, trans. Peter T. Hoffer (Cambridge, Mass.: Belknap Press of Harvard University Press, 1993), 130.

49. Sandor Ferenczi, “Psycho-Analysis of Sexual Habits,” *IJP* 6 (1925), 377–78. From our perspective today, “re-education,” with its totalitarian connotations, is probably not the most accurate phrase in this case (we must remember that the article was translated by Edward Glover in 1925). Ferenczi’s description of the process—“wir . . . die erste, zu gut gelungene Erziehung durch eine neue ersetzen”—could also be translated as “we substitute the first, too-successful education, with a new one.” I would like to thank Matt ffytche for helping with the translation.

50. *Ibid.*, 392–93.

51. *Ibid.*, 395.

52. Joseph Sandler and Anna Freud, “Discussions in the Hampstead Index on ‘The Ego and the Mechanisms of Defence’: V. The Mechanisms of Defence, Part 2,” *Bulletin of the Anna Freud Centre* 4.4 (1981), 258.

53. Ferenczi, “Psycho-Analysis of Sexual Habits,” 378.

54. *Ibid.*, 379.

55. Sandler and A. Freud, “Discussions in the Hampstead Index,” 258.

56. Melanie Klein, “Early Stages of the Oedipus Conflict,” *IJP* 9 (1928), 168. See also Klein, *The Psycho-Analysis of Children*, trans. Alix Strachey (London: Hogarth Press, 1932), 230; Klein, “A Contribution to the Theory of Anxiety and Guilt,” *IJP* 29 (1948), 119.

57. Klein, “Early Stages,” 167–68.

58. Letter from Alix Strachey to James Strachey, 11 February 1925, *Bloomsbury/Freud: The Letters of James and Alix Strachey, 1924–1925*, ed. Perry Meisel and Walter Kendrick (London: Chatto and Windus, 1986), 200–1.

59. Speakers included Edward Glover, Ella F. Sharpe, M. N. Searl, Joan Riviere, and Melanie Klein.

60. Anna Freud, *Introduction to the Technique of Child Analysis*.

61. Letter from Jones to Freud, 30 September 1927, in Paskauskas, *Complete Correspondence of Freud and Jones*, 628.

62. Melanie Klein, “The Development of a Child,” *IJP* 4 (1923), 448.

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63. Phyllis Grosskurth, *Melanie Klein: Her World and Her Work* (London: Hodder and Stoughton, 1986), 75–79.

64. Klein, “Development of a Child,” 448. I use the Kleinian-oriented *phantasy* (rather than *fantasy*) whenever the context is—arguably—the British psychoanalytic tradition, or whenever it was used in an original quotation. On the difference in English between the two terms, see James Strachey, ‘General Preface’, *SE*, vol. 1, xxiv.

65. This view on the inner sources of children’s curiosity bears some resemblance to the Freudian one. See Sigmund Freud, “Leonardo Da Vinci and a Memory of his Childhood,” in *SE*, vol. 11, 78.

66. Melanie Klein, “The Importance of Symbol-Formation in the Development of the Ego,” *IJP* 11 (1930), 26.

67. Klein, “Early Stages,” 169.

68. Klein developed the concept of the epistemophilic impulse already in Berlin, mainly through her treatment of Erna, one of her early child patients, whom she analyzed between 1924 and 1926. See Claudia Frank, *Melanie Klein in Berlin: Her First Psychoanalyses of Children*, trans. Sophie Leighton and Sue Young (London: Routledge, 2009), 226–32. On Erna, see also Claudia Frank and Heinz Weiss, “The Origins of Disquieting Discoveries by Melanie Klein: The Possible Significance of The Case of ‘Erna,’” *IJP* 77 (1996), 1101–26.

69. Susan Isaacs, *The Nursery Years: The Mind of the Child from Birth to Sixth Years* (London: Routledge and Kegan Paul, 1929), 24.

70. See especially Susan Isaacs, “The Nature and Function of Phantasy,” *IJP* 29 (1948), 73–97. This important paper was first read in January 1943, at one of the scientific meetings between Kleinians and Anna Freudians, which later came to be known as the Controversial Discussions.

71. Lyndsey Stonebridge, *The Destructive Element: British Psychoanalysis and Modernism* (Basingstoke, U.K.: Macmillan, 1998), 44.

72. On this point there is an important difference between Klein and Freud, because as Rachel Bowlby points out, “Freudian curiosity is always, primarily, sexual curiosity—or at least, as with the question of new babies, a curiosity that finds a sexual answer.” Rachel Bowlby, “A Freudian Curiosity,” in *Literature, Science, Psychoanalysis, 1830–1970: Essays in Honour of Gillian Beer*, ed. Helen Small and Trudi Tate (Oxford and New York: Oxford University Press, 2003), 109.

73. Lyndsey Stonebridge and John Phillips, introduction to Stonebridge and Phillips, *Reading Melanie Klein*, 7.

74. Mitchell, “Introduction to Melanie Klein,” 27.

75. Stonebridge, *Destructive Element*, 39.

76. R. D. Hinshelwood, *A Dictionary of Kleinian Thought* (London: Free Association, 1991), 393. In Kleinian theory there are two major positions in infancy: the *paranoid-schizoid position*, which (in normal development) is followed by a *depressive position* (and therefore Klein has a developmental dimension in her theory). I focus here only on the idea of the position as such, without considering the specific psychoanalytic content of Klein’s theory.

77. See Melanie Klein, “A Contribution to the Psychogenesis of Manic-Depressive States,” *IJP* 16 (1935), 145–74.

78. Hinshelwood, *Dictionary of Kleinian Thought*, 393.

79. Thomas H. Ogden, “On the Dialectical Structure of Experience—Some Clinical and Theoretical Implications,” *Contemporary Psychoanalysis* 24.1 (1988), 18. See also Hanna Segal, *Melanie Klein* (New York: Viking Press, 1980), 125.

80. Mitchell, “Introduction to Melanie Klein,” 27.
81. Ferenczi, “Psycho-Analysis of Sexual Habits,” 401.
82. Klein, “Symposium on Child-Analysis,” *IJP* 8 (1927), 370.

Chapter 2

1. Johannes Fabian, *Time and the Other: How Anthropology Makes Its Object* (New York: Columbia University Press, 1983), 17–18 (italics in the original).

2. See Fabian, *Time and the Other*; Edward Said, *Orientalism* (London: Routledge and Kegan Paul, 1978); Frantz Fanon, *Black Skin, White Masks*, trans. Charles Lam Markm (London: MacGibbon and Kee, 1968).

3. See Ranjana Khanna, *Dark Continents: Psychoanalysis and Colonialism* (Durham, N.C.: Duke University Press, 2003).

4. On Susan Isaacs’s life and work, see her latest biography, Philip Graham, *Susan Isaacs: A Life Freeing the Minds of Children* (London: Karnac, 2009); John Forrester and Laura Cameron, *Freud in Cambridge* (Cambridge: Cambridge University Press, 2017), 432–74; Shaul Bar-Haim, “The Liberal Playground: Susan Isaacs, Psychoanalysis and Progressive Education in the Interwar Era,” *History of the Human Sciences* 30.1 (2017), 94–117; Michal Shapira, “Speaking Kleinian: Susan Isaacs as Ursula Wise and the Inter-War Popularisation of Psychoanalysis,” *Medical History* 61.4 (2017), 525–47.

5. For the story of the Malting House School, see Graham, *Susan Isaacs*, 95–166; Bar-Haim, “Liberal Playground”; Forrester and Cameron, *Freud in Cambridge*, 432–74; Willem Van der Eyken and Barry Turner, *Adventures in Education* (London: Allen Lane, 1969), 15–67.

6. Susan Isaacs, “The Function of the School for the Young Child,” *Forum of Education* 5 (1927), 123. This was the first paper in which we can clearly recognize a real influence of Melanie Klein on Susan Isaacs’s work. The exact year in which Isaacs started to be more “Kleinian” is important for showing that both women carried out some of their formative experiments at the same time (early 1920s) in different places (Berlin and Cambridge), developed some of their ideas regarding psychoanalysis and education separately, and finally arrived at some similar conclusions independently. The work of these two women is paradigmatic of the ways in which, after the First World War, similar “progressive” circles in different places in Europe, such as Berlin and London, were preoccupied by the same questions about the affinities between psychoanalysis and education and the role of child-psychoanalysis in education. A full account, however, of the personal and professional affinities between Klein and Isaacs is beyond the scope of this study.

7. Isaacs, “Function of the School,” 116.

8. Piaget was one of a few prominent figures who visited the Malting House. The lecture he gave when visiting Cambridge in 1927 was published in 1928 by the *British Journal of Psychology* and became one of his key texts in the 1920s. See Jean Piaget, “La causalité chez l’enfant” [Children’s understanding of causality], *BJP* 100.S1 (2009), 207–24.

9. See, for example, Sigmund Freud, “One of the Difficulties of Psycho-Analysis,” *IJP* 1, (1920), 20.

10. Sando Ferenczi, “Stages in the Development of the Sense of Reality,” *First Contributions to Psycho-Analysis*, trans. Ernest Jones (London: Hogarth Press, 1952), 213–39.

11. A few other progressive schools besides the Malting House were established throughout the 1920s, most notably the Beacon Hill School, founded by Bertrand and Dora Russell, and Summerhill School, founded by A. S. Neill. On progressive education in interwar Britain,

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see Mathew Thomson, *Psychological Subjects: Identity, Culture, and Health in Twentieth-Century Britain* (Oxford: Oxford University Press, 2006), 109–39; Jenkins, “New Education”; Carla Hustak, “Love, Sex, and Happiness in Education: The Russells, Beacon Hill School, and Teaching ‘Sex-Love’ in England, 1927–1943,” *Journal of the History of Sexuality* 22.3 (2013), 446–73; Richard Bailey, *A. S. Neill* (London: Bloomsbury Academic, 2013); Helen Tyson, “‘Little Mussolini’ and the ‘parasite poets’: Psychoanalytic Pedagogy, Modernism, and the Illegible Child” in *Wild Analysis: From the Couch to Cultural and Political Life*, ed. Shaul Bar-Haim, Elizabeth Sarah Coles and Helen Tyson (London: Routledge, forthcoming).

12. See Wooldridge, *Measuring the Mind*, 24–25. Another figure who inspired Isaacs in her educational work was Maria Montessori (1870–1952). Mathew Thomson argues that Montessori was particularly popular among many “progressives,” including Isaacs, because her “approach presented itself as offering an ideologically progressive freedom, but one that did not degenerate into socially unacceptable disorder” (Thomson, *Psychological Subjects*, 122). However, a main difference between these two was that Montessori was much more committed than Isaacs to the feminist cause. On Montessori’s feminism, see Valeria Babini, “Science, Feminism and Education: The Early Work of Maria Montessori,” *HWJ* 49 (2000), 44–67.

13. For the history of educational psychology in Britain, see Thomson, *Psychological Subjects*, 110–39; Wooldridge, *Measuring the Mind*, 1–72; Nikolas Rose, *The Psychological Complex: Psychology, Politics and Society in England, 1869–1939* (London: Routledge and Kegan Paul, 1985).

14. Few of the leading progressive educationalists such as Burt and Nunn were identified as “new liberals.” See Gal Gerson, *Margins of Disorder: New Liberalism and the Crisis of European Consciousness* (Albany: State University of New York Press, 2004), 74–76. Isaacs, however, was identified as Fabian.

15. Harry Hendrick, *Child Welfare: England, 1872–1989* (London: Routledge, 1994), 152.

16. Harry Hendrick, *Children, Childhood and English Society, 1880–1990* (Cambridge: Cambridge University Press, 1997), 77. On childcare literature in interwar Britain, see Cathy Urwin and Elaine Sharland, “From Bodies to Minds in Childcare Literature: Advice to Parents in Inter-War Britain,” in *In the Name of the Child: Health and Welfare, 1880–1940*, ed. Roger Cooter (London: Routledge, 1992), 174–99. For the shift from “authoritative” motherhood to “permissive” motherhood in the interwar and the postwar period, see Diane Richardson, *Women, Motherhood and Childrearing* (Basingstoke, U.K.: Macmillan Press, 1993), 28–42. Leonore Davidoff and others argue that the emergence of psychoanalytic notions in childcare guides and women’s magazines created, after the Second World War, some intergenerational tensions between young mothers who read this new literature and some older midwives, health visitors, and social workers, who were trained in the interwar period still under the influence of Truby King’s authoritarian approach. See Leonore Davidoff et al., *The Family Story: Blood, Contract and Intimacy, 1830–1960* (London: Longman, 1999), 209.

17. See Deborah Thom, “‘Beating Children Is Wrong’: Domestic Life, Psychological Thinking and the Permissive Turn,” in *The Politics of Domestic Authority in Britain Since 1800*, ed. Lucy Delap, Ben Griffin, and Abigail Wills (Basingstoke, U.K.: Palgrave Macmillan, 2009), 263–67. Many historians would agree that at the turn of the century, corporal punishment was more common among the working classes and the poor. See Hendrick, *Children, Childhood and English Society*, 23–24. Anna Davin, however, has shown that many parents of working-class children in that period objected to corporal punishment by teachers at school.

See Anna Davin, *Growing Up Poor: Home, School and Street in London, 1870–1914* (London: Rivers Oram, 1996), 129–31.

18. “Free will” was not only a core liberal notion but also a main subject of discussion for nineteenth-century continental and British biologists, psychologists, and philosophers. This topic was also a main concern for Freud, whose two great English heroes—Charles Darwin and John Stuart Mill—were main representatives of the two poles in the dispute on the possibility of free will. On the place of the debate on free will in the history of psycho-analytical ideas, see Daniel Pick, “Maladies of the Will: Freedom, Fetters and the Fear of Freud,” in *Medicine, Madness and Social History: Essays in Honour of Roy Porter*, ed. Roberta E. Bivins and John V. Pickstone (Basingstoke, U.K.: Palgrave Macmillan, 2007), 197–209.

19. Susan Isaacs, *Children and Parents: Their Problems and Difficulties* (London: Routledge and K. Paul, 1968), 35.

20. *Ibid.*, 37.

21. “To me [Isaacs] means lots and lots of un-spanked babies and a lot more love in the world,” said one of her readers many years afterward. Quoted in D. E. M Gardner, “Susan Isaacs—An Appreciation,” 1948, Papers of Susan Isaacs, IOE (SI/A/2).

22. Piaget, “La causalité chez l’enfant,” 209. Piaget’s four stages are: sensorimotor stage (birth to 2 years); pre-operational stage (2 to 6 years); concrete operations stage (6 to 12 years); and formal operations stage (12 years and older).

23. For an introduction to Piaget’s work, see Margaret A. Boden, *Piaget* (London: Fontana, 1994).

24. Susan Isaacs, review of *The Child’s Conception of the World*, by Jean Piaget, *Mind* 38.152 (1929), 511.

25. On Piaget’s research methodology, see Susan Jean Mayer, “The Early Evolution of Jean Piaget’s Clinical Method,” *History of Psychology* 8.4 (2005), 362–82.

26. Isaacs was perhaps Piaget’s most famous critic ~~in the Anglo-American world in the interwar period~~, but she was certainly not the only one. For other critics, see Barbara Beatty, “Transitory Connections: The Reception and Rejection of the Jean Piaget’s Psychology in the Nursery School Movement in the 1920s and 1930s,” *History of Education Quarterly* 49.4 (2009), 442–64.

27. For Piaget’s reply to Isaacs’s critique, see Jean Piaget, “Le développement intellectuel chez les jeunes enfants: Étude critique,” *Mind* 40 (1931), 137–60. Piaget also published another piece in English, but this one was mainly devoted to Nathan Isaacs’s essay “Children’s ‘Why’ Question” (which was published as an appendix to Susan Isaacs’s *Intellectual Growth in Young Children*). See Jean Piaget, “Retrospective and Prospective Analysis in Child Psychology,” *British Journal of Educational Psychology* 1 (1931), 130–39. On the impact of the debate between Isaacs and Piaget on post-Second World War education in Britain, see Jody S. Hall, “Psychology and Schooling: The Impact of Susan Isaacs and Jean Piaget on 1960s Science Education Reform,” *HED* 29.2 (2000), 153–70.

28. Isaacs, review of *The Child’s Conception*, 509.

29. *Ibid.*, 509–10.

30. *Ibid.*, 511.

31. For Piaget’s view that “experience” has little to do with the development of abstract thinking in the child’s mind, see, for example, Piaget, “La causalité chez l’enfant,” 223.

32. Isaacs, review of *The Child’s Conception*, 511.

33. *Ibid.*, 510. The political dimensions of her critique are particularly interesting also because Piaget's early career was very much motivated by theological and moral questions. See Fernando Vidal, "Jean Piaget and the Liberal Protestant Tradition," in *Psychology in Twentieth-Century Thought and Society*, ed. M. Ash and W. R. Woodward (Cambridge: Cambridge University Press, 1987), 271–94. Vidal argues that "for Piaget, psychology could establish 'objective' hierarchies of values, by determining the 'psychological or biological superiority' of certain values" (271–72). This may explain what one scholar recently described as Piaget's "Whiggish account of cognitive change" (Paul L. Harris, "Piaget on Causality: The Whig Interpretation of Cognitive Development," *BJP* 100.S1 [2009], 229).

34. Susan Isaacs, *Intellectual Growth in Young Children* (London: Routledge and Kegan Paul, 1930), 57 (italics in the original).

35. *Ibid.*, 72. Interestingly, Isaacs strongly supported intelligence testing. Like many interwar educational psychologists—and arguably in some contradiction to her own views on the role of experience in children's growth—she believed in the crucial importance of intelligence in children's development and in the centrality of heredity in determining its level. See Graham, *Susan Isaacs*, 316.

36. Piaget refers to Bleuler on "autistic thought" in his early book *The Language and Thought of the Child*, trans. Marjorie Gabain and Ruth Gabain (London: Routledge and Kegan Paul, 1959 [1923]), 43. On the history of the term *autism*, see Bonnie Evans, "How Autism Became Autism: The Radical Transformation of a Central Concept of Child Development in Britain," *HHS* 26.3 (2013), 3–31. While Bleuler, Piaget, and their successors used the term *autistic thought* to describe a form of nonaccessible inner life (such as hallucinations, fantasies, and the like), in the 1960s this term acquired the opposite meaning—namely, it "[refers] to a complete lack of an unconscious symbolic life" (Evans, "How Autism Became Autism," 4).

37. On Piaget and Lévy-Bruhl, see Gustav Jahoda, "Piaget and Lévy-Bruhl," *History of Psychology* 3.3 (2000), 218–38.

38. Isaacs, *Intellectual Growth*, 76.

39. Lucien Lévy-Bruhl, *The "Soul" of the Primitive* (London: Allen and Unwin, 1965 [1927]), 16.

40. Isaacs, *Intellectual Growth*, 76.

41. Robert A. Segal, "Jung and Lévy-Bruhl," *Journal of Analytical Psychology* 52.5 (2007), 335–36. Lévy-Bruhl was particularly important for the work of Carl Jung. As Segal points out, "for both Lévy-Bruhl and Jung, 'primitives' and moderns do not merely think different things, as for Tylor and Frazer, but actually think differently" (646). By the end of his life, however, Lévy-Bruhl moderated some of his views about the "pre-logical" character of "primitives."

42. Isaacs, *Intellectual Growth*, 76.

43. Isaacs, review of *The Child's Conception*, 511.

44. *Ibid.*, 512.

45. Fernando Vidal, "Sabina Spielrein, Jean Piaget: Going Their Own Ways," *Journal of Analytical Psychology* 46.1 (2001), 139–53; Eva M. Schepeler, "Jean Piaget's Experiences on the Couch: Some Clues to a Mystery," *IJP* 74 (1993), 255–73.

46. Piaget, *Language and Thought of the Child*, 2.

47. Ernest Jones, "A Linguistic Factor in English Characterology," *IJP* 1 (1920), 257.

48. Sigmund Freud, *Introductory Lectures on Psycho-Analysis (1916–1917)*, SE, vol.16, 371.

49. Edwin R. Wallace, *Freud and Anthropology: A History and Reappraisal* (New York: International Universities Press, 1983), 101.

50. Ferenczi, “Stages in the Development,” 213. This article was particularly popular among British psychoanalysts. See, for example, Owen Berkeley-Hill, “The Anal-Erotic Factor in the Religion, Philosophy and Character of the Hindus,” *IJP* 2 (1921), 306–38; Edward Glover, “The Relation of Perversion-Formation to the Development of Reality-Sense,” *IJP* 14 (1933), 486–504; M. N. Searl, “The Psychology of Screaming,” *IJP* 14 (1933), 193–205; John Rickman, “Obituary: Sandor Ferenczi,” *Proceedings of the Society for Psychical Research* 28 (October 1933), 124–25. It was also a key source for Klein and her followers. See Meira Likierman, *Melanie Klein: Her Work in Context* (London: Continuum, 2001), 36–38.

51. Ferenczi, “Stages in the Development,” 238.

52. *Ibid.*, 219.

53. *Ibid.*

54. *Ibid.*, 222.

55. *Ibid.*

56. *Ibid.*, 225.

57. *Ibid.*, 226.

58. *Ibid.*

59. *Ibid.*, 227. This stage is particularly similar to Lévy-Bruhl’s notion of “participation,” which was discussed earlier in this chapter.

60. *Ibid.*, 228.

61. *Ibid.*, 229.

62. *Ibid.*, 230.

63. *Ibid.*

64. *Ibid.*, 232.

65. *Ibid.*, 233.

66. *Ibid.*

67. *Ibid.*, 213.

68. Isaacs, *Intellectual Growth*, 31.

69. *Ibid.*, 32.

70. *Ibid.*

71. Piaget, “La causalité chez l’enfant,” 209. Isaacs referred to this article when she mentioned Piaget’s “second stage.” Piaget read this paper at a lecture he gave in Cambridge in 1927, and it is reasonable to think that Isaacs was in the audience.

72. *Ibid.*, 213.

73. Isaacs, “Function of the School,” 127–28. Freud was actually the first to use the term *omnipotence of thought*. This term was suggested to Freud by his patient Ernst Lanzer, better known as the “rat man,” and became a main concept in Freud’s *Totem and Taboo*. See Wallace, *Freud and Anthropology*, 87–90. ~~For a clarifying discussion of~~ omnipotence in Freudian thought, see Jose Brunner, “Wordly Powers: A Political Reading of the Rat Man,” *American Imago* 58.2 (2001), 501–24.

74. Isaacs, *Intellectual Growth*, 32. For example, “if you wish the string of your sailing boat to hold fast, then ‘you *must* tie it’ in one of a certain number of ways” (*ibid.*).

75. *Ibid.*

76. *Ibid.*, 33.

77. *Ibid.*

78. Nicholas Owen, “Critics of Empire in Britain,” in *The Oxford History of the British Empire*, vol. 4, *The Twentieth Century*, ed. Judith M. Brown and William Roger Louis (Oxford: Oxford University Press, 1999), 202.

79. See Anna Snaith, “The Hogarth Press and Networks of Anti-Colonialism,” in *Leonard and Virginia Woolf, the Hogarth Press and the Networks of Modernism*, ed. Helen Southworth (Edinburgh: Edinburgh University Press, 2010), 103–27.

80. Peter Cunningham, “Innovators, Networks and Structures: Towards a Prosopography of Progressivism,” *HED* 30.5 (2001), 439.

81. See, for example, Sue Middleton, “Clare Soper’s Hat: New Education Fellowship Correspondence Between Bloomsbury and New Zealand, 1938–1946,” *HED* 42.1 (2013), 92–114.

82. In what follows, I draw particularly on Peter Kallaway, “Conference Litmus: The Development of a Conference and Policy Culture in the Inter-War Period with Special Reference to the New Education Fellowship and British Colonial Education in Southern Africa,” in *Transformations in Schooling: Historical and Comparative Perspectives*, ed. Kim Tolley (Basingstoke, U.K.: Palgrave Macmillan, 2007), 123–49.

83. Kallaway, “Conference Litmus,” 136.

84. See Graham, *Susan Isaacs*, 247.

85. Jane Martin, “Commentary on Susan Isaacs,” *Gender and Education* 23.2 (2011), 217.

86. Snaith, “Hogarth Press,” 117. In 1925 the Woolfs’ Hogarth Press published the pamphlet *Notes on Law and Order* by another famous anti-imperial intellectual, J. A. Hobson. On Leonard Woolf and Hobson, see Gerson, *Margins of Disorder*, 88–89. Peter Wilson, however, challenges the view that Woolf was anti-imperial and argues that Woolf never stopped being an imperialist, though he became a “disillusioned” one over the years. See Peter Wilson, “Leonard Woolf: Still Not Out of the Jungle?,” *Round Table* 97.394 (2008), 147–60. On critics of empire in the interwar period (including Woolf), see Owen, “Critics of Empire,” and Stephen Howe, *Anticolonialism in British Politics: The Left and the End of Empire, 1918–1964* (Oxford: Clarendon Press, 1993).

87. Erik Linstrum, “The Politics of Psychology in the British Empire, 1898–1960,” *P&P* 215.1 (2012), 197.

88. *Ibid.*, 200–1.

89. Susan Isaacs, “Lectures on Anthropology—Lecture I: Introduction,” Susan Sutherland Isaacs Collection, BPS (P19-B), 5 (italics in the original). In these lectures she drew heavily on the Hungarian anthropologist and psychoanalyst Geza Róheim, who—as will be discussed in the next chapter—can certainly be considered as an anti-colonial thinker. See also Susan Isaacs, review of *The Riddle of the Sphinx*, by Geza Róheim, *IJP* 17 (1936), 367–82.

Chapter 3

1. Thus, for example, Freud’s objection to the utopian-matriarchal thinking played a central role in his debate with Jung. See Peter Davies, *Myth, Matriarchy and Modernity: Johann Jakob Bachofen in German Culture, 1860–1945* (New York: De Gruyter, 2010), 233.

2. Letter from Andreas-Salomé to Freud, 30 January 1919, in *Sigmund Freud and Lou Andreas-Salomé: Letters*, ed. Ernst Pfeiffer (London: Hogarth Press, 1972), 89.

3. Letter from Freud to Andreas-Salomé, 9 February 1919, in Pfeiffer, *Sigmund Freud and Lou Andreas-Salomé*, 90.

4. Sigmund Freud, “The Taboo of Virginité (Contributions to the Psychology of Love III)” (1918), in *SE*, vol. 11, 205.

5. Ibid.

6. Ibid., 205–6.

7. Sigmund Freud, “Some Psychological Consequences of the Anatomical Distinction Between the Sexes” (1925), in *SE*, vol. 19, 244.

8. Freud, “Taboo of Virginity,” 198.

9. Davies, *Myth, Matriarchy and Modernity*, 227.

10. See Elizabeth Abel, *Virginia Woolf and the Fictions of Psychoanalysis* (Chicago: University of Chicago Press, 1989), 25–29. According to Abel, in the 1920s, Woolf became very interested in the Kleinian turn “toward a maternal point of origin” (ibid., xvi). In the 1930s, however, “Woolf swerved abruptly, although reluctantly, from Klein toward Freud as the ideologies of motherhood that flourished in the 1920s and that fostered her critique of Freud were appropriated and irretrievably contaminated for her by the fascist state” (ibid.).

11. Margaret Mead was another non-British anthropologist with great interest in psychoanalysis, who was also highly engaged with the local anthropological scene in Britain, not least because of her English-born husband since 1936 (separated in 1947), the anthropologist Gregory Bateson. Indeed, in 1943 she began fieldwork in Britain for what would turn out to become a failed project about the English national character. See Peter Mandler, *Return from the Natives How: Margaret Mead Won the Second World War and Lost the Cold War* (New Haven, Conn: Yale University Press, 2013), 87–121. For more examples of the usage of psychoanalysis among interwar British anthropologists, see Erik Linstrum, *Ruling Minds: Psychology in the British Empire* (Cambridge, Mass.: Harvard University Press, 2016), 43–79.

12. Although the correct distinction would be between *patriarchal* and *matriarchal* societies, I am following Malinowski, who used the term *matrilineal* in a much wider sense and contrasted it with *patriarchal*. One may argue that this was part of his critique of Victorian anthropology, which, according to some anthropologists, distinguished between *matriarchal* and *matrilineal* in a slightly artificial way, as if descent is only a formal issue.

13. Warwick Anderson, “Hermannsburg, 1929: Turning Aboriginal ‘Primitives’ into Modern Psychological Subjects,” *JHBS* 50.2 (2014), 142.

14. Bachofen was born to one of the more distinguished families of nineteenth-century Basel. He studied in Berlin and took a degree in law, where some of his teachers were prominent figures, including Leopold von Ranke, August Bockh, and Friedrich Karl von Savigny. In 1841 he received a chair in Roman law at the University of Basel, but in 1844 he had to resign, after some people in Basel argued that the university should invest its money in modern subjects rather than in Roman law. After his resignation, Bachofen remained an independent researcher and dedicated his life to the study of history, archaeology, and law. On Bachofen’s life and work, see Lionel Gossman, *Basel in the Age of Burckhardt: A Study in Unseasonable Ideas* (Chicago: University of Chicago Press, 2000), 109–200.

15. Debates on “mother-right” lasted, according to some scholars, up until the 1920s. See Rosalind Coward, *Patriarchal Precedents: Sexuality and Social Relations* (London: Routledge and Kegan Paul, 1983), 47–48. For a different periodization, see Cynthia Eller, *Gentlemen and Amazons: The Myth of Matriarchal Prehistory, 1861–1900* (Berkeley: University of California Press, 2011). For Eller, the later works of E. B. Tylor on this topic, published in 1889 and 1896, signify the end of this period, as they “marked both the pinnacle and the end of the reign of mother right in Anglo-American anthropology” (99). Nevertheless, also according to Eller, mother-right theory was still highly influential in many twentieth-century philosophical and political schools, even when it was no longer a main issue among anthropologists.

16. In what follows, I draw particularly on Eller, *Gentlemen and Amazons*, 36–64.

17. Johann Jakob Bachofen, *Myth, Religion, and Mother Right: Selected Writings of J. J. Bachofen*, trans. Ralph Manheim (London: Routledge and K. Paul, 1967), 94.

18. *Ibid.*, 92.

19. Eller, *Gentlemen and Amazons*, 45.

20. *Ibid.*

21. Friedrich Nietzsche, who lived in Basel when he wrote *The Birth of Tragedy* and knew Bachofen well, was particularly influenced by the idea of Dionysian and Apollonian civilizations. See *ibid.*, 62.

22. Bachofen, *Myth, Religion, and Mother Right*, 109.

23. For the history of the debate on mother-right between the 1860s and the 1920s, see Eller, *Gentlemen and Amazons*; Ann Taylor Allen, “Feminism, Social Science, and the Meanings of Modernity: The Debate on the Origin of the Family in Europe and the United States, 1860–1914,” *AHR* 104.4 (1999), 1085–113; Adam Kuper, *The Invention of Primitive Society: Transformations of an Illusion* (London: Routledge, 1988), 17–89; Coward, *Patriarchal Precedents*, 17–129; Elizabeth Fee, “The Sexual Politics of Victorian Social Anthropology,” *Feminist Studies* 1.3/4 (1973), 23–39.

24. James Frazer, *Adonis, Attis, Osiris: Studies in the History of Oriental Religion* (London: Macmillan, 1907), 391. The question of whether matriarchies ever really existed is still open. Most anthropologists still insist on distinguishing between “matrilineal” and “matriarchal” societies and argue that there is little evidence for the existence of the latter. However, since the 1970s, some feminist anthropologists have argued that the sharp distinction between the “matrilineal descent” of a society and its power relations is, in many cases, only a “sexist bias” and that many of these societies should be defined as matriarchies. See Anne Siegetsleitner, “Matriarchy,” in *Encyclopaedia of Anthropology*, ed. H. James Birx, 5 vols. (London: Sage, 2006), 4:1553–55.

25. Cathy Gere, *Knossos and the Prophets of Modernism* (London: University of Chicago Press, 2009), 77.

26. *Ibid.*, 80.

27. The most probable etymology of the name, however, is not “most holy” but “very pure.” I am very grateful to Danae Karydaki for drawing my attention to Evans’s misunderstanding, as well as to the fact that although the Minoan civilization, as part of the Greek culture and myths (such as the myth about Ariadne and Theseus), appears in the classical times, we tend to forget that Cretan-Minoan people spoke another language and had a different writing system (namely “Linear A”).

28. See Sigmund Freud, *Moses and Monotheism: Three Essays* (1939), in *SE*, vol. 23, 1–138.

29. Sigmund Freud, “Female Sexuality” (1931), in *SE*, vol. 21, 226.

30. As H. D. described it in a letter: “We got to Crete yesterday. I went off the deep end, and we sobbed together over Greece in general. He hasn’t one of the little Crete snake goddess[es]. I said, ‘I will get you one.’ . . . He loves Crete almost more than anything.” (quoted in Gere, *Knossos and the Prophets*, 168–69).

31. Gere, *Knossos and the Prophets*, 154.

32. For a wider study of Bachofen’s intellectual legacy, see Davies, *Myth, Matriarchy and Modernity*. For Bachofen’s impact on fin de siècle European feminism, see Allen, “Feminism, Social Science.” On Bachofen’s influence on “maternal” (and to some extent non-Freudian) psychoanalysis, see Daniel Burston, “Myth Religion and Mother Right: Bachofen’s Influence

on Psychoanalytic Theory,” *Contemporary Psychoanalysis* 22 (1986), 666–87. On other influences, see Joseph Mali, “The Reconciliation of Myth: Benjamin’s Homage to Bachofen,” *Journal of the History of Ideas* 60.1 (1999), 165–87; Carolyn Fluehr-Lobban, “Marxism and the Matriarchate: One-Hundred Years after the Origin of the Family, Private Property and the State,” *Critique of Anthropology* 7.1 (1987), 5–14; Nitzan Lebovic, “The Beauty and Terror of ‘Lebensphilosophie’: Ludwig Klages, Walter Benjamin, and Alfred Baeumler,” *South Central Review* 23.1 (2006), 23–39.

33. Rita Felski, *The Gender of Modernity* (Cambridge, Mass.: Harvard University Press, 1995), 50.

34. In fact, this is the literal meaning of *nostalgia*: *nostos* means “return home,” and *algia* means “longing.” See Svetlana Boym, *The Future of Nostalgia* (New York: Basic Books, 2001), xiii. Boym herself defines nostalgia as a “longing for a home that no longer exists or has never existed” (*ibid.*).

35. Felski, *Gender of Modernity*, 39.

36. For biographical details on Malinowski, see Adam Kuper, *Anthropology and Anthropologists: The Modern British School*, 3rd rev. and enlarged ed. (London: Routledge, 1996), 1–34; George W. Stocking, “Anthropology and the Science of the Irrational: Malinowski’s Encounter with Freudian Psychoanalysis,” in *Malinowski, Rivers, Benedict and Others: Essays on Culture and Personality*, ed. George W. Stocking (Madison: University of Wisconsin Press, 1986), 13–49; James Urry, “Malinowski, Bronisław Kasper (1884–1942),” in *Oxford Dictionary of National Biography* (2006), online ed. accessed 16 September 2020, <http://www.oxforddnb.com/view/article/37731>.

37. While Westermarck thought that the taboo of incest should be explained by an instinctual aversion to inbreeding, Freud believed that it is precisely because there is no such instinctual aversion that the taboo exists. His alternative explanation was based on the “primal-crime,” which created what Freud described as the “horror of incest.” See David H. Spain, “The Westermarck-Freud Incest-Theory Debate: An Evaluation and Reformulation,” *Current Anthropology* 28.5 (1987), 623–45.

38. His deep engagement in the life of the Trobrianders became a new standard for ethnographic fieldwork and dramatically changed anthropology as a discipline. See Kuper, *Anthropology and Anthropologists*, 12–17.

39. On the Cambridge expedition as a turning point in the histories of anthropology and psychology, see Graham Richards, *Race, Racism and Psychology: Towards a Reflexive History* (London: Routledge, 2012), 47–73.

40. Forrester and Cameron, *Freud in Cambridge*, 91.

41. W. H. R. Rivers, “Dreams and Primitive Culture,” *Bulletin of the John Rylands Library* 4.3–4 (1918), 387–410.

42. C. G. Seligman, “Anthropology and Psychology: A Study of Some Points of Contact,” *Journal of the Royal Anthropological Institute of Great Britain and Ireland* 54 (1924), 13–46. See also C. G. Seligman Papers, LSE (Seligman/8/10), for letters of appreciation on this paper that Seligman received from Róheim (1 September 1924) and Carl Jung (3 September 1924).

43. Letter from Jones to Max Eitingon, 29 May 1929, London, Ernest Jones Collection, BPS (P04-C-B-16).

44. See Linstrum, *Ruling Minds*, 43–63.

45. Malinowski claimed that “he had first heard of Freud at the age of eighteen, by which time he already knew that he had an ‘Oedipus complex’—having been very frequently

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distressed in adolescence by incest dreams and dreams of his father's death" (Stocking, "Anthropology," 31).

46. Quoted in Stocking, "Anthropology," 32.

47. Bronisław Malinowski, "Psycho-Analysis and Anthropology" (Letter to Editor), *Nature* 112.2818 (3 November 1923), 650–51; "The Psychology of Sex and the Foundations of Kinship in Primitive Societies," *Psyche* 4 (April 1923), 98–128; "Psycho-analysis and Anthropology," *Psyche* 4 (April, 1924), 293–332; *Sex and Repression in Savage Society* (London: Routledge and Kegan Paul, [1927] 1960).

48. Letter to Princess Marie Bonaparte, 6 September 1938, Bronislaw Malinowski Papers, LSE (Malinowski/31/1).

49. Letter to Anna Freud, 18 June 1938, quoted in Stocking, "Anthropology," 13.

50. Malinowski, "Psycho-Analysis and Anthropology," 650.

51. *Ibid.*

52. *Ibid.*

53. *Ibid.*

54. Malinowski, "Psychology of Sex," 99–100.

55. *Ibid.*, 101.

56. For example, the Trobrianders "are not aware that anything is produced in [the testis]" (*ibid.*, 103); they regard "menstruation . . . as a phenomenon connected with pregnancy in a vague manner, but without any special cause or function" (104). However, as one of Malinowski's informants told him, they believed that "blood on the head makes child. . . . Spirits bring at night time the infant, put on women's heads—it makes blood. Then, after two or three months, when the blood . . . does not come out they know: 'Oh! I am pregnant'" (116).

57. See Maurice Godelier, *The Metamorphoses of Kinship* (London: Verso Books, 2011), 252. According to Malinowski, the Trobrianders did not know a woman "becomes a mother through the sperm the man deposits in her womb. She becomes a mother through the intervention of spirits, which discover that she has been opened and send her a spirit-child" (*ibid.*).

58. Malinowski, "Psychology of Sex," 113.

59. *Ibid.*, 114.

60. *Ibid.*, 119.

61. Godelier, *Metamorphoses of Kinship*, 253. Malinowski was not the first to introduce the idea that some so-called primitive people were ignorant about procreation and sexuality. Several late-nineteenth- and early-twentieth-century theorists, such as Baldwin Spencer, F. J. Gillen, Edwin Sidney Hartland, and James Frazer, also held this view. See Andrew P. Lyons and Harriet D. Lyons, *Irregular Connections: A History of Anthropology and Sexuality* (Lincoln: University of Nebraska Press, 2004), 91–97. On debates over primitive ignorance after Malinowski, see *ibid.*, 178–83.

62. Moreover, Malinowski himself did not deny that the father is not only the mother's husband but also takes "an active part in the tender cares lavished on the infants, invariably feels and shows a deep affection for them, and later on shares in giving them instructions" (Malinowski, "Psychology of Sex," 100). In fact, the word *tamala* in local language means "the mother's husband, the man, whose rôle and duty it is to take the child in his arms and to help her in nursing and bringing it up" (120).

63. Ernest Jones, "Mother-Right and the Sexual Ignorance of Savages," *IJP* 6 (1925), 109–30.

64. Malinowski, “Psychology of Sex,” 124.
65. Jones, “Mother-Right,” 127.
66. *Ibid.*, 128.
67. Malinowski, *Sex and Repression*, 82.
68. *Ibid.*, 139–40.
69. *Ibid.*, 143. Following the psychologist Alexander Shand, Malinowski suggested replacing the more pathology-connotated term *complex* with the term *sentiment*, which means that “round each person or object the emotions are organized into a definite system—the love or hate or devotion we feel for a parent, a country or a life-pursuit” (176).
70. See Coward, *Patriarchal Precedents*, 237–45; Eric Smadja, “The Oedipus Complex, Crystallizer of the Debate Between Psychoanalysis and Anthropology,” *IJP* 92 (2011), 985–1007.
71. For example, Malinowski strongly supported his LSE student Jomo Kenyatta—later to become the president of Kenya—when the latter used a relativistic approach to legitimize clitoridectomy in Kenyan society. See Bodil Folke Frederiksen “Jomo Kenyatta, Marie Bonaparte and Bronislaw Malinowski on Clitoridectomy and Female Sexuality,” *HWJ* 65.1 (2008), 23–48.
72. Malinowski, *Sex and Repression*, 83–134.
73. *Ibid.*, 83.
74. *Ibid.*, 83–84.
75. *Ibid.*, 86.
76. *Ibid.*
77. *Ibid.*, 85–86.
78. *Ibid.*, 87.
79. *Ibid.*, 87.
80. *Ibid.*, 88–89.
81. *Ibid.*, 92.
82. *Ibid.*, 92–93. However, the Trobrianders had a different type of dream, which Malinowski called “official dreams,” or “traditional dreams.” For example, “in the ceremonial overseas trading there is a certain spell which acts directly on the mind of the partner, induces in him a dream, and this dream makes the partner desire the exchange [. . .]. Thus these natives, remarkably enough, reverse the Freudian theory of dreams, for to them the dream is the cause of the wish” (93–94).
83. *Ibid.*, 110.
84. *Ibid.*, 117. Malinowski’s objection to psychoanalysis remained very limited. He denied neither the psychoanalytical concepts nor the methodological tools of the discipline, nor even the existence of the main subject of his critique, namely, the Oedipus complex.
85. Malinowski’s work was highly influential among interwar sexual reformers such as Marie Stopes, Havelock Ellis, and Bertrand Russell. These figures were preoccupied with comparing “primitive sexuality” with their own, and the Trobrianders served as a reference point for any of these comparisons. See Lyons and Lyons, *Irregular Connections*, 155–84.
86. Interestingly, Bonaparte and Malinowski met at the beginning of the 1930s and became close friends, remaining so until his death in 1942. See his letters to her in the Malinowski Papers, LSE (Malinowski 31/1). See also Frederiksen, “Jomo Kenyatta,” 30.
87. Both Bonaparte and Malinowski tried to help Róheim find a new place to immigrate to in the 1930s, although Malinowski preferred that Róheim go to America, as he had “certain

doubts as to whether [Róheim] does not go a little too far” (letter to Seligman, 3 May 1933, Malinowski Papers, LSE [Malinowski/27/6]). Seligman replied:

At present the number of people from Germany—and perhaps later Austria—out of a job on account of religion or politics or hair & eye colour is so great that it seems to me that it is not the time to make new jobs for people who already have a corner in the world of their own, even if it is not the ideal one. Now Róheim, as I understand, has got a house to live in, & the princess is allowing him a certain amount, upon which he can live. I don’t myself think that Róheim with the personality he has is ever going to achieve a personal success, and so I should regard it as unwise to attempt to make a personal job for him at the school (Seligman to Malinowski, 6 May 1933, *ibid.*).

88. Geza Róheim, “Psycho-Analysis of Primitive Cultural Types,” *IJP* 13 (1932), 2. On this point Róheim was always a loyal Freudian, maintaining that the “avuncular complex,” if it exists, is only a repressed version of an earlier Oedipus complex. Róheim explained it by the fact that the child spends the first five to ten years with his mother and biological father, and therefore has all the conditions for developing an Oedipus complex.

89. Contrary to what some scholars have said, Róheim was never appointed as a “professor of anthropology” in Budapest in 1919 but was only appointed to give popular lectures at the National Museum. See Ferenc Erős, Judith Szekacs-Weisz, and Ken Robinson, eds., *Sándor Ferenczi–Ernest Jones: Letters 1911–1933* (London: Karnac, 2013), 117.

90. See Rickman and Róheim’s correspondence in the John Rickman Collection, BPS (P03-C-A-01).

91. Paul Robinson’s substantial chapter in his book *The Sexual Radicals* (first published as *The Freudian Left*) remains the best overview on Róheim ([London: Paladin, 1972], 64–113). See also the fascinating, and more personal, obituary by Michael Balint, “Géza Róheim 1891–1953,” *IJP* 35 (1954), 434–36; and chapters and sources in *E. Pichon-Rivière, Av. Santa Fe 1379, Buenos Aires. G. Róheim, Hermina ut 35 b, Budapest*, ed. Joanny Lelong and Samuel Rambaud (Villeurbanne, Fr.: Nouveau Document, 2017). On Róheim’s ethnography of the Arrente, see Sam D. Gill, *Storytracking: Texts, Stories and Histories in Central Australia* (New York: Oxford University Press, 1998), 145–61. See also Joy Damousi, “Geza Róheim and the Australian Aborigine: Psychoanalytic Anthropology During the Interwar Years,” in *Unconscious Dominions: Psychoanalysis, Colonial Trauma, and Global Sovereignties*, ed. Warwick Anderson, Deborah Jenson, and Richard Keller (Durham, N.C.: Duke University Press, 2011), 75–95; John Morton, “‘Less Was Hidden Among These Children’: Géza Róheim, Anthropology and the Politics of Aboriginal Childhood,” in *Growing Up in Central Australia: New Anthropological Studies of Aboriginal Childhood and Adolescence*, ed. Ute Eickelkamp (New York: Berghahn Books, 2011), 15–48. Although Róheim was largely overlooked by mainstream anthropology in the second half of the twentieth century, one may find his legacy in postwar “ethnopschoanalysis,” led by Paul Parin, Goldy Parin-Matthèy, Fritz Morgenthaler, and Georges Devereux, who was Róheim’s analysand for a short period. See Dagmar Herzog, *Cold War Freud: Psychoanalysis in an Age of Catastrophes* (Cambridge: Cambridge University Press, 2017), 179–211.

92. As Adam Kuper noted, “The Australian aborigines were naked, black hunters and gatherers. Compared with the American Indians, they had limited contact with Europeans.

In other words, they were as close as could be to the Victorian image of primitive man” (*The Invention of Primitive Society: Transformations of an Illusion* [London: Routledge, 1988], 92).

93. Sigmund Freud, *Totem and Taboo: Some Points of Agreement Between the Mental Lives of Savages and Neurotics* (1913), in *SE*, vol. 13, 1.

94. Geza Róheim, *The Riddle of the Sphinx: Or Human Origins*, trans. R. Money-Kyrle (London: Hogarth Press, 1934), 238.

95. *Ibid.*, 239.

96. *Ibid.*, 276.

97. According to Róheim, the idealization of the “native” by “some of our foremost field-workers” is due to their lack of countertransference, “for good field-work proves transference and transference again cannot be maintained without counter-transference” (“Psycho-Analysis of Primitive Cultural Types,” 17).

98. Damousi, “Geza Róheim and the Australian Aborigine,” 93.

99. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 37.

100. *Ibid.*

101. Geza Róheim, “The Evolution of Culture,” *IJP* 15 (1934), 399. See also his *Riddle of the Sphinx*, where he claimed that “among the savage and half-savage peoples whom I know, masculine psycho-sexual impotence does not occur, female frigidity and perversions are relatively rare, and sado-masochistic perversions . . . are unknown except for a few doubtful symptoms” (237).

102. Róheim, “Evolution of Culture,” 394.

103. *Ibid.*, 395.

104. *Ibid.*

105. *Ibid.* *Tjurunga* is the transformation of a mythical ancestor figure into a ritual object, where it still resided. According to Róheim, *tjurungas* which are carried in pairs represent the Freudian primal scene. See Gill, *Storytracking*, 237n73.

106. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 75. Róheim’s focus on weaning as crucial for the psychosexual development of children echoes Klein’s paper, “Weaning,” published just a few years later, in 1936. Klein did not refer to Róheim in her article, but she did so in other earlier papers where she refers to Róheim’s 1920s publications. Róheim was popular among British psychoanalysts from Klein’s circle, such as Susan Isaacs, as mentioned in the previous chapter, and it is very likely that Klein read and absorbed some of his other works where he discusses weaning in primitive societies. See Melanie Klein, “Weaning,” in *Love, Guilt and Reparation, and Other Works, 1921–1945* (New York: Free Press, 1975), 290–305. See also in this context, another leading contemporary anthropologist, Margaret Mead, who critically described the American mother as “faithfully, efficiently providing the child with a bottle, external to both of them, substituting for a direct relationship a relationship mediated by an object” (*Male and Female: A Study of the Sexes in a Changing World* [London: Victor Gollancz, 1950], 270).

107. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 78.

108. *Ibid.* The physical conditions at the time when Róheim visited Australia were particularly difficult, and the natives suffered from hunger and diseases. See Anderson, “Hermannsburg, 1929,” 130–34.

109. Róheim, “Evolution of Culture,” 406.

110. *Ibid.* Róheim’s view on the absence of a latency period among central-Australian children is very similar to that of Malinowski in his observations on the Melanesian child.

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Moreover, Róheim would probably have agreed with Malinowski that in European societies, too, the latency period is much stronger among the upper classes than among the “peasant and proletarian child.” While in the lower classes the “early curiosity in genital matters [is] present at the same time and [establishes] a continuity, a steady development from the early period to that of full sexual puberty,” the “well-to-do child,” when getting to the age of six, has to go to school, which creates a crucial discontinuity in his or her psychosexual development (Malinowski, *Sex and Repression*, 53).

111. See Jean Laplanche and J. B. Pontalis, *The Language of Psycho-Analysis* (London: Hogarth Press, 1973), 234–35.

112. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 32.

113. *Ibid.*

114. *Ibid.*, 35.

115. See Róheim, “Psycho-Analysis of Primitive Cultural Types,” 86.

116. The prolongation of childhood is one of the main characteristics distinguishing human beings from other animals. This is a consequence of what Róheim called—drawing on the work of the physiologist Ludwig Bolk—“the principle of retardation.” But while the physiological development of human beings is retarded, their sexuality is not. Men and women mature sexually before they are physically capable of satisfying their needs. Therefore, according to Róheim, the repression of sexual needs in early childhood is a defense mechanism of the human body. See Róheim, *Riddle of the Sphinx*, 246–56. On Róheim’s principle of retardation, see also Robinson, *Sexual Radicals*, 90–91.

117. Róheim, *Riddle of the Sphinx*, 278.

118. Geza Róheim, *Children of the Desert*, vol. 1, *The Western Tribes of Central Australia*, ed. Werner Muensterberger (New York: Basic Books, 1974), 75. This book is based on materials from Róheim’s expedition in the late 1920s but was published only two decades after his death. For an interesting discussion of Róheim’s understanding of “sadistic pedagogy” in European cultures and its absence in the native societies of central Australia, see Morton, “Less Was Hidden.”

119. On the Hermannsburg mission as a “research site” for Western psychologists and anthropologists, see Anderson, “Hermannsburg, 1929.”

120. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 37. See also *Riddle of the Sphinx*, 244, for the native people’s objection to corporal punishment of their children by the missionaries in their school.

121. See Paul Crook, *Darwinism, War, and History: The Debate over the Biology of War from the “Origin of Species” to the First World War* (Cambridge: Cambridge University Press, 1994); Daniel Pick, *War Machine: The Rationalisation of Slaughter in the Modern Age* (London: Yale University Press, 1993).

122. See Sigmund Freud, “Why War?” (1933), in *SE*, vol. 22, 195–216.

123. Richard Overy, *The Morbid Age: Britain Between the Wars* (London: Allen Lane, 2009), 190.

124. Quoted in *ibid.*, 195.

125. See, for example, Malinowski’s objection to the popular anatomist and paleoanthropologist Arthur Keith, who claimed, “Nature keeps her human orchard healthy by pruning—war is her pruning hook” (quoted in Overy, *Morbid Age*, 199). Malinowski was known as “a lifelong pacifist” (*ibid.*, 201) but by the late 1930s became more skeptical. In a letter to Bonaparte from 29 September 1938, he admitted that he does not know “which I dread

most, war or a complete surrender to Fascism and Nazism” (Malinowski Papers, LSE [Malinowski/31/1]). Three years later, when Malinowski was already settled at Yale University, he was much more convinced of the necessity of the war against the Nazis: “As an anthropologist, I know that this particular war must be won if civilization is to go on, since the Nazis attack not merely contemporary peoples but the very roots from which our culture and civilization spring” (Eleanor Kittredge, “An Anthropologist Looks at the War,” *New York Times Magazine*, 12 October 1941, 7, 20).

126. Edward Durbin and John Bowlby, *Personal Aggressiveness and War* (London: Kegan Paul, 1939).

127. See Susan Sutherland Isaacs Collection, BPS (P19-B); Róheim, *Riddle of the Sphinx*; Susan Isaacs, review of *The Riddle of the Sphinx: Or Human Origins*, by Geza Róheim, in *IJP* 17 (1936), 367–82. Zuckerman’s influence on Róheim is particularly interesting considering the former’s strong patriarchal character. See Jonathan Burt, “Solly Zuckerman: The Making of a Primatological Career in Britain, 1925–1945,” *Studies in the History and Philosophy of Science Part C: Studies in the History of Biological and Biomedical Sciences* 37.2 (2006), 307.

128. See Sigmund Freud, “Thoughts for the Times on War and Death” (1915), in *SE*, vol. 14, 273–300; “Civilization and Its Discontents” (1930), in *SE*, vol. 21, 57–146.

129. See Sigmund Freud, “Beyond the Pleasure Principle” (1920), in *SE*, vol. 18, 1–64.

130. Meira Likierman, *Melanie Klein: Her Work in Context* (London: Continuum, 2001), 86.

131. In 1931 Glover gave a series of lectures titled “Pacifism in the Light of Psycho-Analysis,” published as *War, Sadism and Pacifism* (London: George Allen and Unwin, 1933). In 1936 he gave a series of BBC broadcasts on psychoanalysis and society, one of which was about psychoanalysis and war. This was published as *The Dangers of Being Human* (London: George Allen and Unwin, 1936).

132. See Hope Wolf, “A Tale of Mother’s Bones: Grace Pailthorpe, Reuben Mednikoff and the Birth of Psychorealism,” in *A Tale of Mother’s Bones: Grace Pailthorpe, Reuben Mednikoff and the Birth of Psychorealism*, ed. Hope Wolf, with Rosie Cooper, Martin Clark, and Gina Buenfeld (Camden Arts Centre and De La Warr Pavilion, 2019), 8–41.

133. Cited in *ibid.*, 22.

134. Róheim, “Evolution of Culture,” 400.

135. Róheim, *Riddle of the Sphinx*, 241.

136. Róheim, “Psycho-Analysis of Primitive Cultural Types,” 102.

137. *Ibid.*, 77. The prolonged weaning of indigenous people was a major focus of research for psychologists, anthropologists, and other social scientists who investigated so-called primitive societies. However, most researchers did not value prolonged weaning as Róheim did. The common view—even among critics of colonialism such as Wulf Sachs in South Africa and J. F. Ritchie in Northern Rhodesia—was that prolonged weaning is the major cause for the “dependent character” of colonized people, and the main obstacle in developing their political agency and their will to resist. See Linstrum, *Ruling Minds*, 73–79.

138. Róheim, “Evolution of Culture,” 398.

139. *Ibid.*, 398. This last concept of the “sphincter-morality” appeared also in *The Riddle of the Sphinx*, when Róheim wrote that the difference between savages and civilized people is that “while they repress the Oedipus love (primal scene), we repress pre-genital forms of pleasure as well and inculcate a sphincter morality” (244n1). This quotation appears in a footnote that can tell us something about the strong links between the British anthropological and

psychoanalytical communities: in it, Róheim refers to Seligman—Malinowski’s mentor and a Freudian-oriented anthropologist—who in turn refers to Klein’s work. A strong influence of anthropological discourse in general, and of Róheim in particular, on 1930s British psychoanalysis can also be found in a draft for a series of lectures on anthropology that Susan Isaacs delivered at the Institute of Psychoanalysis. The draft is undated, but as Isaacs used Róheim’s writings from 1932 to 1934 as her main source (and used almost no other sources), we can assume that she gave these lectures sometime in the second half of the 1930s. See Susan Sutherland Isaacs Collection, BPS (P19-B).

140. Ferenczi, “Psycho-Analysis of Sexual Habits,” 379.

141. Róheim was known in the histories of anthropology and psychoanalysis as a dogmatic follower of Freud. But his Ferenczian-Kleinian understanding of the superego is not only a deviation from the Freudian line but also a critique of Freud. This concept was crucial also for other psychoanalytically oriented critics of civilization during the interwar period. See, for example, the Tavistock psychiatrist Henry V. Dicks’s usage of this concept in his unpublished lecture “Anal Sadistic Basis of Culture,” Henry Dicks Papers, WEL (PP/HVD/B/3/2: Box 4), 6.

142. M. N. Searl, “Some Contrasted Aspects of Psycho-Analysis and Education,” *British Journal of Educational Psychology* 2.3 (1932), 280.

143. On the decline in Freud’s authority after the First World War, see also George Makari, *Revolution in Mind: The Creation of Psychoanalysis* (London: Duckworth, 2008), 321–485.

144. Róheim, “Evolution of Culture,” 388.

145. *Ibid.*, 417. Margaret Mead took a different position in 1936 when arguing that damaging forms of dominant motherhood in the West are the outcome of unrealistic expectations of a patriarchal society from its mothers. See Margaret Mead, “On the Institutionalized Role of Women and Character Formation,” *Zeitschrift für Sozialforschung* 5.1 (1936), 69–75. In this text, Mead takes issue with interwar studies about mothers in American society that show how “the domination of the mother is having a destructive effect upon the emotional development of both girls and boys” (69). For her, the problem is not necessarily with mothers’ “domination” in itself but with the fact that mothers “must function in a social situation which does not allow for that domination, which surround it with no safeguards and dignifies it with no socially sanctioned role” (73).

146. Mead, “On the Institutionalized Role of Women,” 72. See also Ruth Feldstein, *Motherhood in Black and White: Race and Sex in American Liberalism, 1930–1965* (Ithaca, N.Y.: Cornell University Press, 2000), for the history of the myth about “black matriarchy” and the racial dimension of the matriarchal discourse in modern American history.

Chapter 4

Note to epigraph: Ian D. Suttie, “Religion: Racial Character and Mental and Social Health,” *BJMP* 12 (1932), 306 (italics in the original).

1. See J. Laplanche and J. B. Pontalis, *The Language of Psycho-Analysis*, trans. Donald Nicholson-Smith (London: Hogarth Press, 1973), 386–88. For Freud’s definition of regression, see Sigmund Freud, *The Interpretation of Dreams: Second Part* (1900), in *SE*, vol. 5, 548 (the paragraph on regression was added in 1914).

2. ~~Beyond the scope of this study is an analysis~~ of the various actual forms of patriarchy that existed in British society before the First World War. On that question see John Tosh,

A Man's Place: Masculinity and the Middle-Class Home in Victorian England (New Haven, Conn.: Yale University Press, 1999); Jose Harris, *Private Lives, Public Spirit: A Social History of Britain 1870–1914* (Oxford: Oxford University Press, 1993), 61–95. See also Sheila Rowbotham, “The Trouble with ‘Patriarchy’” (1979), in *Dreams and Dilemmas: Collected Writings* (London: Virago, 1983), 207–14. Here Rowbotham criticized the usage of “patriarchy” as a social and historical category, especially in the age of capitalism. See also the reply by Sally Alexander and Barbara Taylor, “In Defence of ‘Patriarchy’” (1979), in *Becoming a Woman: And Other Essays in 19th and 20th Century Feminist History*, by Sally Alexander (London: Virago, 1994), 271–74. For Alexander and Taylor, patriarchy is a necessary concept because it “points to a strategy which will . . . transform the whole web of psycho-social relations in which masculinity and femininity are formed” (273).

3. Ernest Haeckel, quoted in Stephen Jay Gould, *Ontogeny and Phylogeny* (Cambridge, Mass.: Belknap Press of Harvard University Press, 1977), 80.

4. Stephen Jay Gould, *I Have Landed: The End of the Beginning in Natural History* (London: Jonathan Cape, 2002), 148.

5. On Freud and “recapitulation,” see Gould, *Ontogeny and Phylogeny*, 155–64; Laura Otis, *Organic Memory: History and the Body in the Late Nineteenth and Early Twentieth Centuries* (Lincoln: University of Nebraska Press), 181–205.

6. Celia Brickman, *Aboriginal Populations in the Mind: Race and Primitivity in Psychoanalysis* (New York: Columbia University Press, 2003), 86.

7. For Freud’s writings on phylogeny, see Sigmund Freud, *Totem and Taboo: Some Points of Agreement Between the Mental Lives of Savages and Neurotics* (1913), in *SE*, vol. 13, vii–162; Freud, “Beyond the Pleasure Principle” (1920), in *SE*, vol. 18, 1–64. On the influence of Lamarck and Darwin on Freud, see Lucille B. Ritvo, *Darwin’s Influence on Freud: A Tale of Two Sciences* (New Haven, Conn.: Yale University Press, 1990); Frank J. Sulloway, *Freud, Biologist of the Mind: Beyond the Psychoanalytic Legend* (New York: Basic Books, 1979), 238–76.

8. On 11 January 1844, Charles Darwin wrote to his friend Joseph Dalton Hooker: “Heaven fend me from Lamarck nonsense of a ‘tendency to progression’ adaptations from the slow willing of animals’ &c,—but the conclusions I am led to are not widely different from his” (“Letter no. 729,” Darwin Correspondence Project, University of Cambridge, accessed 14 September 2020, <https://www.darwinproject.ac.uk/letter/DCP-LETT-729.xml>).

9. L. J. Jordanova, *Lamarck* (Oxford: Oxford University Press, 1984), 105.

10. For Lamarck’s understanding of progress, see Michael T. Ghiselin, “Perspective: Darwin, Progress, and Economic Principles Evolution,” *Evolution* 49.6 (1995), 1029–37.

11. See Sigmund Freud, “Overview of the Transference Neurosis,” in *A Phylogenetic Fantasy: Overview of the Transference Neuroses*, ed. Ilse Grubrich-Simitis, trans. Axel Hoffer and Peter T. Hoffer (Cambridge, Mass.: Belknap Press of Harvard University Press, 1987), 5–20. On Freud’s “Lamarckism,” see Eliza Slavet, *Racial Fever: Freud and the Jewish Question* (New York: Fordham University Press, 2009), 68–126. Slavet argues that Lamarckism was a particularly attractive theory for interwar Jewish scientists in Europe, because “it seemed to support the idea that the negative characteristics and conditions associated with being Jewish were the result of malleable environmental conditions (specifically, centuries of anti-semitism) rather than of *a priori* differences perpetuated by hard-wired heredity” (78).

12. *The Correspondence of Sigmund Freud and Sándor Ferenczi*, vol. 2, 1914–1919, ed. Eva Brabant, Ernst Falzeder, and Patrizia Giampieri-Deutsch (Cambridge, Mass.: Belknap Press of Harvard University Press, 1996), 166.

13. *The Complete Correspondence of Sigmund Freud and Karl Abraham, 1907–1925*, ed. Ernst Falzeder (London: Karnac, 2002), 361.

14. Sigmund Freud, “Three Essays on the Theory of Sexuality” (1905), in *SE*, vol. 7, 131.

15. Freud, *Totem and Taboo*, 159.

16. *Ibid.*, 31.

17. *Ibid.*, 159.

18. This question was raised a few times in the last few decades by psychoanalytic scholars who attempted to achieve a better understanding of the traumatic event as a transgenerational phenomenon. See, for example, Maria Torok, “Story of Fear: The Symptoms of Phobia—the Return of the Repressed or the Return of the Phantom?” (1975), in *The Shell and the Kernel: Renewals of Psychoanalysis*, ed. and trans. Nicholas T. Rand (Chicago: University of Chicago Press, 1994), 177–86; Ilse Grubrich-Simitis, “Extreme Traumatization as Cumulative Trauma—Psychoanalytic Investigations of the Effects of Concentration Camp Experiences on Survivors and their Children,” *Psychoanalytic Study of the Child* 36 (1981), 415–50; Stephen Frosh, “Hauntings: Psychoanalysis and Ghostly Transmission,” *American Imago* 69.2 (2012), 241–64. On intergenerational transmission and “Jewishness” in Freudian thought, see Gilad Sharvit and Karen S. Feldman, ed., *Freud and Monotheism: Moses and the Violent Origins of Religion* (New York: Fordham University Press, 2018); Slavet, *Racial Fever*; Yosef Hayim Yerushalmi, *Freud’s Moses: Judaism Terminable and Interminable* (New Haven, Conn.: Yale University Press, 1991).

19. Sigmund Freud, *Moses and Monotheism: Three Essays*, in *SE*, vol. 23, 132–33.

20. See C. U. M. Smith, “Evolution and the Problem of Mind: Part I. Herbert Spencer,” *Journal of the History of Biology* 15.1 (1982), 55–88; Smith, “Evolution and the Problem of Mind: Part II. John Hughlings Jackson,” *Journal of the History of Biology* 15.2 (1982), 241–62; Leonardo Niro Nascimento, “Evolution in the Brain, Evolution in the Mind: The Hierarchical Brain and the Interface Between Psychoanalysis and Neuroscience,” ~~*Psychoanalysis and History*~~ 19.3 (2017), 349–77.

21. See A. Scott Dowling, “A Reconsideration of the Concept of Regression,” *Psychoanalytic Study of the Child* 59 (2004), 197–201; Riccardo Steiner, “An Essay Marking Its Centenary: Some Observations on the Sources of Freud’s *The Psychopathology of Everyday Life*,” *Neuropsych psychoanalysis* 3.2 (2001), 229–30; Valerie D. Greenberg, *Freud and His Aphasia Book: Language and the Sources of Psychoanalysis* (Ithaca, N.Y.: Cornell University Press, 1997), 117–58; Harold P. Blum, “The Conceptual Development of Regression,” *Psychoanalytic Study of the Child* 49 (1994), 61–62; John Forrester, *Language and the Origins of Psychoanalysis* (New York: Columbia University Press, 1980), 1–39.

22. Sigmund Freud, “Sándor Ferenczi” (1933), in *SE*, vol. 22, 228.

23. Sandor Ferenczi, *Thalassa: A Theory of Genitality*, trans. Henry Alden Bunker (London: Karnac, 1989 [1924]), 103.

24. See Ilse Grubrich-Simitis, “Metapsychology and Metabiology: On Sigmund Freud’s Draft Overview of the Transference Neurosis,” in Grubrich-Simitis, *A Phylogenetic Fantasy*, 84–97.

25. Brabant, Falzeder, and Giampieri-Deutsch, *Correspondence of Freud and Ferenczi*, vol. 2, 1914–1919, 46.

26. *Ibid.*, 126.

27. The Hungarian translation of *Thalassa* (1929) was entitled *Catastrophes in the Development of the Sexual Life*. See György Hidas, “Ferenczi and Trauma: A Perilous Journey to the

Labyrinth,” in *Ferenczi and His World: Rekindling the Spirit of the Budapest School*, ed. Judit Szekacs-Weisz and Tom Keve (London: Karnac, 2012), 114.

28. Sandor Ferenczi, “A Case of ‘Déjà Vu’” (1912), in *Final Contributions to the Problems and Methods of Psycho-Analysis*, ed. Michael Balint; trans. Eric Mosbacher, Michael Balint, and unknown others (London: Hogarth Press, 1955), 320.

29. *Ibid.* Freud also suggested a few years later that déjà vu (although he did not mention explicitly the term) is an enactment of the feeling of being in the mother’s womb: “There is a joking saying that ‘Love is home-sickness’ and whenever a man dreams of a place or a country and says to himself, while he is still dreaming: ‘this place is familiar to me, I’ve been here before,’ we may interpret the place as being his mother’s genitals or her body” (Sigmund Freud, “The Uncanny” [1919], in *SE*, vol. 17, 245). On Freud and déjà vu, see Peter Krapp, *Déjà Vu: Aberrations of Cultural Memory* (Minneapolis: University of Minnesota Press, 2004), 1–29.

30. Ferenczi, *Thalassa*, 52.

31. *Ibid.*, 45.

32. *Ibid.*, 84–85.

33. Sandor Ferenczi, “Psycho-Analysis of Sexual Habits,” *IJP* 6 (1925), 382. See Elizabeth A. Wilson, *Gut Feminism* (Durham, N.C.: Duke University Press, 2015), 49–59, for an excellent discussion in Ferenczi’s bio-analysis).

34. Ferenczi, “Psycho-Analysis of Sexual Habits,” 379–80.

35. See Galina Hristeva, “‘Uterus Loquitur’: Trauma and the Human Organism in Ferenczi’s ‘Physiology of Pleasure,’” *American Journal of Psychoanalysis* 73.4 (2013), 339–52.

36. Sandor Ferenczi, “Psycho-Analytical Observations on Tic,” *IJP* 2 (1921), 29.

37. *Ibid.*

38. On this point, Ferenczi takes his examples from Freud: in the case of Anna O., “a tear that obscured her sight was the cause of Macropsia which developed later,” and “the accidental catarrh of a patient of Freud’s (Dora) was the finely graduated means of expressing the most complicated love emotions under the mask of a ‘nervous cough’” (*ibid.*, 29).

39. Patricia Kitcher, “Freud’s Interdisciplinary Fiasco,” in *The Prehistory of Cognitive Science*, ed. Andrew Brook (Basingstoke, U.K.: Macmillan, 2007), 241.

40. See Tracey Loughran, “Evolution, Regression, and Shell-Shock: Emotion and Instinct in Theories of the War Neuroses, c. 1914–1918,” *Manchester Papers in Economic and Social History* 58 (2007), 1–24.

41. W. H. R. Rivers, *Instinct and the Unconscious: A Contribution to a Biological Theory of the Psycho-Neuroses* (Cambridge: Cambridge University Press, 1922), 152.

42. *Ibid.*, 119.

43. Loughran, “Evolution, Regression,” 14–15.

44. William McDougall, “Four Cases of ‘Regression’ in Soldiers,” *Journal of Abnormal Psychology* 15.2–3 (1920), 136.

45. *Ibid.*

46. “I have been told that it is improper to use the word **regression** in this fashion, because the Freudians have annexed it for their exclusive use. I cannot assent to such surrender of the words of our language” (*ibid.*).

47. Thus, for example, S. M. Payne described one of her patients in a typical language as follows: “He had entered the phallic phase and had partially regressed after puberty. The inability to establish adult genitality was due to regression to a fixation in the oral and anal phases” (Payne, “Some Observations on the Ego Development of the Fetishist,” *IJP* 20 [1939],

165). Or, James Glover (Edward's brother) had a patient who had to "drink increasingly large quantities of alcohol till his narcissistic regression over-invested his homosexuality en route" (J. Glover, "Notes on an Unusual Form of Perversion," *IJP* 8 [1927], 22). However, Melitta Schmideberg (Melanie Klein's daughter and a major critic of her mother) suggested in 1935 more caution in using this term (a statement which can also tell us something about the popularity of regression among psychoanalysts). In her work on children's bad habits, she argued that some of these habits "are regarded as substitutes for masturbation. Though they show the same structure it is not justifiable to regard them only from the point of view of regression" (Schmideberg, "'Bad Habits' in Childhood: Their Importance in Development," *IJP* 16 [1935], 456).

48. See Melanie Klein, "Criminal Tendencies in Normal Children," *BJMP* 7.2 (1927), 191; R. Money-Kyrle, "Morals and Super-Men," *BJMP* 8.4 (1928), 280; Edward Glover, "On the Aetiology of Drug-Addiction," *IJP* 13 (1932), 315.

49. Donald Winnicott, "Children's Hostels in War and Peace," *BJMP* 21.3 (1948), 175.

50. Very little is known about Suttie's life. The most informative source—though far from being exhaustive—is Dorothy Heard, introduction to *The Origins of Love and Hate*, by Ian D. Suttie (London: Kegan Paul, Trench, Trubner, 1988), xix–xl. Heard was Jane Suttie's niece, and her introduction was published in the new reprinted edition of the book. One of the reasons for the lack of sources on Suttie is that Jane did not keep any of her husband's personal papers.

51. In 1930, and perhaps even before, Jane Suttie was undergoing training analysis at the Institute of Psychoanalysis with the senior psychoanalyst Ella Freeman Sharpe. In January 1931, however, her candidacy was suspended due to "an analytical crisis of a severe type" (Minutes of Meeting of the Training Committee, 12 January 1931, Training Committee: Minutes, BPS [S-D-01-A-01]).

52. Ian D. Suttie, *The Origins of Love and Hate* (London: Kegan Paul, Trench, Trubner, 1988 [1935]).

53. Henry V. Dicks, *Fifty Years of the Tavistock Clinic* (London: Routledge and Kegan Paul, 1970), 40. One example of Suttie's engagement in the intellectual life of the Tavistock Clinic is the lively argument he had with Carl Jung, when the latter gave a series of lectures at Tavistock (1935), just a short time before Suttie died. For their discussion, see C. G. Jung, *Analytical Psychology: Its Theory and Practice: (The Tavistock Lectures)* (London: Routledge, 1998), 67–69.

54. In the preface to this volume, Ferenczi was very grateful to Jane Suttie for her translation, saying that she "has not flinched from the toil of following the train of my thought with so much understanding" (Ferenczi, author's preface to *Further Contributions to the Theory and Technique of Psycho-Analysis*, [London: Hogarth Press, 1950 (1926)], 9). On her part, Jane said that although Ferenczi "is rather a quaint creature from a translator's point of view," she still made a great effort to preserve in her translations what she called the "Ferenczi atmosphere": "I confess myself helpless before his enthusiasm for inverted commas, capitals, brackets etc. and found it the simplest thing just to keep meekly to his way of it" (letter to Ernest Jones, 6 August 1921, Ernest Jones Collection, BPS [P04-C-E-5]).

55. Suttie, *Origins of Love and Hate*, 75.

56. Suttie submitted only one of his earlier critical articles to the *International Journal of Psychoanalysis*, but it was rejected. Jones took the famous botanist Arthur George Tansley—who also had a great interest in psychoanalysis—as a reviewer of this article. After receiving

Tansley's critique, Jones replied: "It is a pity, because it is one of the few valid criticisms of the psycho-analytic theory we have experienced, and I am most willing to publish even adverse criticisms in our Journal provided that their form and content warrant it" (letter to Tansley, 27 May 1923, Ernest Jones Collection, BPS [P04-C-E-15]. On 14 June 1923, Jones wrote to Suttie: "I have never given more anxious consideration to any paper than to yours" (quoted in Vincent Brome, *Ernest Jones: Freud's Alter Ego* [London: Caliban, 1982], 144). However, the correspondence between the two reveals Suttie's deep commitment to psychoanalysis despite his critique. Thus, for example, he writes that his argument is only "a reductio ad absurdum of a *Psychoanalytic* defence of Recapitulation" (italics in the original), and that he prefers not to circulate a version of his critique among the Scottish Section of the Medico-Psychological Association, because it "would be regarded, if at all as powder and shot for the anti-Freudians" (letter from Suttie to Jones, 14 April 1923, Ernest Jones Collection [BPS, P04-C-E-15]).

57. Elisabeth Young-Bruehl, "The 'Taboo on Tenderness' in the History of Psychoanalysis," in *Understanding Dissidence and Controversy in the History of Psychoanalysis*, ed. Martin Bergmann (New York: Other Press, 2004), 232.

58. Daniel Burston, "Conflict and Sociability in Hegel, Freud, and Their Followers: Tzvetan Todorov's 'Living Alone Together,'" *New Literary History* 27.1 (1996), 75. On the other hand, historian John Forrester argued that "Suttie is by no means typical and is a very marginal figure in British psychoanalysis" (see Eli Zaretsky, "The Place of Psychoanalysis in the History of the Jews," *PAH* 8.2 [2006], 244).

59. Suttie, *Origins of Love and Hate*, 5.

60. Not to mention the fair acceptance of *The Origins of Love and Hate* just after it was published. See Heard, introduction to *Origins of Love and Hate*, xxvii–xxxii.

61. J. A. C. Brown, *Freud and the Post-Freudians* (Harmondsworth: Penguin Books, 1961), 65.

62. Quoted in Frank C. P. van der Horst, *John Bowlby: From Psychoanalysis to Ethology: Unravelling the Roots of Attachment Theory* (Chichester, U.K.: Wiley-Blackwell, 2011), 15.

63. Germaine Greer, *The Female Eunuch* (London: Macgibbon and Kee, 1970), 91.

64. Omnia El Shakry, *The Arabic Freud: Psychoanalysis and Islam in Modern Egypt* (Oxford: Princeton University Press, 2017), 27, 74–75.

65. Carol Gilligan and David A. J. Richards, *The Deepening Darkness: Patriarchy, Resistance, and Democracy's Future* (Cambridge: Cambridge University Press, 2009), 191.

66. See Gabriele Cassullo, "Back to the Roots: The Influence of Ian D. Suttie on British Psychoanalysis," *American Imago* 67.1 (2010), 5–22; Gal Gerson, "Culture and Ideology in Ian Suttie's Theory of Mind," *History of Psychology* 12.1 (2009), 19–40; Gavin Miller, "A Wall of Ideas: The 'Taboo on Tenderness' in Theory and Culture," *New Literary History* 38.4 (2007), 667–81; Graham S. Clarke, *Personal Relations Theory: Fairbairn, McMurray and Suttie* (London: Routledge, 2006), 169–89.

67. It is very likely that this idea was taken from Ferenczi's last article: "Confusion of the Tongues Between the Adults and the Child—(The Language of Tenderness and of Passion)," *IJP* 30 (1949), 225–30.

68. Peter Homans, *The Ability to Mourn: Disillusionment and the Social Origins of Psychoanalysis* (Chicago: University of Chicago Press, 1989), 228.

69. See John Bowlby, "The Nature of the Child's Tie to His Mother," *IJP* 39 (1958), 350–73; Bowlby, *Attachment and Loss*, vol. 2, *Separation: Anxiety and Anger* (London: Basic Books, 1973).

70. John Bowlby, foreword to *The Origins of Love and Hate*, by Ian D. Suttie (London: Kegan Paul, Trench, Trubner, 1988), xvii.

71. Suttie, *Origins of Love and Hate*, 229.

72. Ian D. Suttie, “Metapsychology and Biology: Some Criticisms of Freud’s ‘Beyond the Pleasure Principle,’” *Journal of Neurology and Psychopathology* 17 (1924), 61–70.

73. Ian D. Suttie, “Critique of the Theory of Mental Recapitulation,” *Journal of Neurology and Psychopathology* 17 (1924), 1–12.

74. Yet in a letter to Jones from 14 April 1923, Suttie made it clear that his critique was not anti-psychoanalytic. On the contrary, he thought that “psychoanalysis compels us to doubt the BIOLOGICAL interpretation of the onto-phylogenetic parallelism. Each of its triumphs is a nail in the coffin of the ‘Biogenetic Law’” (Ernest Jones Collection, BPS, [P04-C-E-15], all caps in the original).

75. James Strachey translated Freud’s *Todestrieb* as “death instinct” rather than as “death drive.” Suttie, like most English readers of Freud, adopted the former term, *death instinct*, and therefore I will use it here. This controversial translation surely influenced the way in which Suttie understood—or perhaps misunderstood—Freud as a “biologist of the mind.” Yet my aim is not to assess the validity of Suttie’s critique but to understand why it was so important for him to refute Freud’s allegedly biologicistic perceptions.

76. On the influence of the First World War on Freud and the entire psychoanalytic movement, see Peter Gay, *Freud: A Life for Our Time* (London: Dent, 1988), 342–416; Daniel Pick, *War Machine: The Rationalisation of Slaughter in the Modern Age* (New Haven, Conn.: Yale University Press, 1993), 243–57; Paul Lerner, *Hysterical Men: War, Psychiatry, and the Politics of Trauma in Germany, 1890–1930* (Ithaca, N.Y.: Cornell University Press, 2003), 163–89.

77. Freud, “Beyond the Pleasure Principle,” 60.

78. *Ibid.*, 37–38.

79. *Ibid.*

80. *Ibid.*, 36.

81. See Freud, “The Economic Problem of Masochism,” in *SE*, vol. 19, 155–70.

82. See Barbara Low, *Psycho-Analysis: A Brief Account of the Freudian Theory* (London: G. Allen and Unwin, 1920), 73. It seems, however, that Low’s understanding of the Nirvana principle as “the desire of the newborn creature to return to that stage of omnipotence, where there are no non-fulfilled desires, in which it existed within the mother’s womb” (*ibid.*) is much closer to the Ferenczian notion of the desire to return to the womb than what Freud described as the tendency to the “inorganic.”

83. Freud, “Beyond the Pleasure Principle,” 56.

84. Freud, “Economic Problem of Masochism,” 159.

85. *Ibid.*

86. *Ibid.*, 160.

87. *Ibid.*

88. *Ibid.* According to Freud, the Nirvana principle is a “trend of the death instinct,” while the “*pleasure* principle represents the demands of the libido.” The reality principle is a modification of the life instinct—a modification which “represents the influence of the external world” (*ibid.*).

89. Suttie, “Metapsychology and Biology,” 64.

90. *Ibid.*, 65.

91. *Ibid.*

92. For example, Jones wrote to Suttie in their correspondence about the latter's unaccepted paper that he finds it hard to "imagine the mode of transmission of such ancestral experience. Freud has no difficulty about this, because he is Lamarckian. I, however, am a bigoted Weismanian; hence my pickle" (10 April 1923, Ernest Jones Collection, BPS [P04-C-E-15]).

93. The notion of memory as a biological force—a force which is part of one's biological inheritance—was very popular in European fin de siècle biology, psychology, medicine, and social theory. As the historian Laura Otis has shown, many European intellectuals, scientists, and artists such as Émile Zola, Théodule-Armand Ribot, Thomas Mann, and Freud himself—to name just a few—shared the belief in "organic memory": that is, the notion that "just as people remembered some of their own experiences consciously, they remembered their racial and ancestral experiences unconsciously, through their instincts" (Otis, *Organic Memory*, 3).

94. Suttie, "Metapsychology and Biology," 65 (italics in the original).

95. *Ibid.*, 65–66.

96. Suttie was not the only psychoanalytically oriented scholar in interwar Britain who dismissed the theory of recapitulation. See, for example, Susan Isaacs, *Intellectual Growth in Young Children* (London: Routledge and Kegan Paul, 1930), 61–63.

97. Suttie, "Critique of the Theory of Mental Recapitulation," 7.

98. *Ibid.*, 8.

99. Suttie, *Origins of Love and Hate*, 13.

100. *Ibid.* On the popularity of this view among Darwinian and post-Darwinian psychologists in England, Germany, France, and the United States, see Sulloway, *Freud, Biologist of the Mind*, 243–51. See also Chapter 1 of this book, for the great interest of late nineteenth-century natural and social sciences in the concept of "growth."

101. Suttie, *Origins of Love and Hate*, 13.

102. *Ibid.*, 15 (italics in the original).

103. For the distinction between "nature" and "nurture," see Francis Galton, *English Men of Science: Their Nature and Nurture* (London: Cass, 1970 [1874]). Suttie is considered today to be one of the precursors of the mid-twentieth-century psychosocial approach in psychology, psychiatry, medicine, and the social sciences. Historically, psychosocial thinkers had always prioritized environmental factors, which meant that in the old debate between nature and nurture they tended to identify with the latter. See Rhodri Hayward, "The Invention of the Psychosocial: An Introduction," *HHS* 25.5 (2012), 3–12; see also Chapter 6 of this book. Holistic approaches that aimed to synthesize biology, psychology, and ethics were not uncommon also among interwar natural scientists, especially biologists, although some of these biologists were still committed to the Victorian ethos, which linked biological evolution with progressive morality. See Roger Smith, "Biology and Values in Interwar Britain: C. S. Sherrington, Julian Huxley and the Vision of Progress," *P&P* 178.1 (2003), 210–42.

104. In intellectual terms, Malinowski and Briffault were considered opponents, especially after a famous debate over the history of marriage, which they conducted in a series of radio broadcasts in 1931. Briffault argued that modern marriage reflects a specific phase in the history of social and economic relations, while Malinowski claimed that marriage and family are transhistorical and are part of human nature. This debate was first published in the *Listener* in 1931 and was republished twenty-five years later as Ashley Montagu, ed., *Marriage: Past and Present: A Debate Between Robert Briffault and Bronislaw Malinowski*

(Boston: Porter Sargent Publisher, 1956). See also Claude Lévi-Strauss's highly dismissive review of this book in *American Anthropologist* 59.5 (1957), 902–3. Despite their strong disagreements, I consider here Briffault and Malinowski as belonging to the same interwar maternal discourse, because both attempted to use social anthropology to imagine alternatives to what they perceived as damaging forms of Western motherhood.

105. Robert Briffault, *The Mothers*, abridged ver. (London: George Allen and Unwin, 1959), 431. For a fine analysis of this book, see Luisa Passerini, *Europe in Love, Love in Europe: Imagination and Politics in Britain Between the Wars* (London: I. B. Tauris, 1999), 149–60.

106. Robert Briffault, “Family Sentiments,” *Zeitschrift für Sozialforschung* 2 (1933), 367. Erich Fromm, who was very impressed with Briffault, was the one who initiated this publication in what was known as the Frankfurt school's official journal. See Jay Martin, *The Dialectical Imagination: A History of the Frankfurt School and the Institute of Social Research, 1923–1950* (Boston: Little, Brown, 1973), 95.

107. Briffault “Family Sentiments,” 368. According to Briffault, the “biological instinctive response is so overlaid with cultivated concepts and sentiments that it becomes hard to distinguish what is natural from what is cultural” (373).

108. The anthropologist Ashley Montagu—an early student of Malinowski, a friend of Briffault, and an admirer of Suttie—argued that Suttie was highly influenced by Briffault. See Daniel Burston, “Myth Religion and Mother Right: Bachofen's Influence on Psychoanalytic Theory,” *Contemporary Psychoanalysis* 22.4 (1986), 678. It is not clear, however, if Montagu heard it from Suttie himself, or even if he knew him personally at all. I also could not find any reference by Suttie to Briffault's work. But the two certainly shared some fundamental perceptions, and it is very likely that they knew each other through some interwar psychological-anthropological networks. On Montagu's work as one of the leading figures in the influential American “culture-and-personality” school, see Joanne Meyerowitz, “‘How Common Culture Shapes the Separate Lives’: Sexuality, Race, and Mid-Twentieth-Century Social Constructionist Thought,” *Journal of American History* 96.4 (2010), 1057–1084.

109. Bowlby, however, emphasizes also the strong affinity between Suttie and Freud: “After all, for all his disagreements, he was working within the tradition set by Freud, as he himself explicitly recognized” (Bowlby, foreword to *Origins of Love and Hate*, xvii).

110. Suttie, *Origins of Love and Hate*, 15.

111. In his reply to Suttie's critique of his work, Géza Róheim argued that “like certain matrilinear people Dr. Suttie is led by the fiction that there are no fathers. The infant is born with only one instinct that of ‘attachment to mother’ while terror and rage originate when this instinct is thwarted” (Géza Róheim, “The Origin and Function of Culture,” *Psychoanalytic Review* 29.2 [1942], 146). Róheim also accused Suttie that although he “knows very well that a considerable part of psychoanalytical literature deals with the preoedipal phase of development he persists in representing himself as the inventor of this phase” (ibid.).

112. Ian D. Suttie and Jane I. Suttie, “The Mother: Agent or Object? Part II,” *BJMP* 12.3 (1932), 212.

113. Ibid., 230.

114. Suttie, *Origins of Love and Hate*, 133.

115. Ibid., 120.

116. Gal Gerson, “Ian Suttie's Matriarchy: A Feminist Utopia?,” *Psychoanalysis, Culture and Society* 14 (2009), 389.

117. See Catherine Hall, “The Early Formation of Victorian Domestic Ideology,” in *White, Male and Middle-Class: Explorations in Feminism and History* (Cambridge: Polity Press, 1992), 75–93.

118. John Tosh, *Manliness and Masculinities in Nineteenth-Century Britain: Essays on Gender, Family, and Empire* (Harlow, U.K.: Pearson Longman, 2005), 162. Yet Evangelical churches—and especially their believers—were varied in many respects, one of which was their perceptions of domestic life; some were more “patriarchal,” while others were much more “progressive.” See *ibid.*, 148–69.

119. *Ibid.*, 161.

120. Resisting the two dominant theological schools in nineteenth-century Scotland—the “rationalist” Moderates and the “anti-intellectual” Evangelicals—Robertson Smith attempted to find a third way for practicing Christianity. See Marjorie Wheeler-Barclay, “Victorian Evangelicalism and the Sociology of Religion: The Career of William Robertson Smith,” *Journal of the History of Ideas* 54.1 (1993), 59–78.

121. William Robertson Smith, *Lectures on the Religion of the Semites: The Fundamental Institutions* (London: A. and C. Black, 1927), 29. The sociologist Robert Alun Jones distinguished between Robertson Smith and his contemporaries, anthropologists Frazer and Jones. The latter were “[children] of the Enlightenment. Smith . . . had drunk from another well” (Robert Alun Jones, *The Secret of the Totem: Religion and Society from McLennan to Freud* [New York: Columbia University Press, 2005], 86).

122. Suttie, *Origins of Love and Hate*, 156.

123. By the beginning of the twentieth century, a resistance to modernity and nostalgia for more traditional forms of life were not necessarily translated into a wish to get back to religion. Thus, for example, some secular “utopian feminists” took their inspiration from an early twentieth-century revival of neo-medieval thought and preferred to fulfil their feminist beliefs by living a communal life in the countryside and participating in “back-to-the-land” and “arts and crafts” movements. See Lucy Delap, *The Feminist Avant-Garde: Transatlantic Encounters of the Early Twentieth Century* (Cambridge: Cambridge University Press, 2007), 217–48.

124. Suttie, “Religion,” 301.

125. *Ibid.*, 296.

126. *Ibid.*, 289.

127. Gavin Miller, “Scottish Psychoanalysis: A Rational Religion,” *JHBS* 44.1 (2008), 38–58.

128. Robertson Smith, *Lectures*, 274. For a fine introduction to Robertson Smith’s life and work, see R. A. Jones, *Secret of the Totem*, 59–103. For his understanding of the maternal role in creating the “social” and its link to the British object-relations school, see Harriet Lutzky, “Deity and the Social Bond: Robertson Smith and the Psychoanalytic Theory of Religion,” in *William Robertson Smith: Essays in Reassessment*, ed. William Johnstone (Sheffield, U.K.: Sheffield Academic Press, 1995), 320–30. On Freud and Robertson Smith, see Gordon K. Booth, “The Fruits of Sacrifice: Sigmund Freud and William Robertson Smith,” *Scottish Corpus of Texts and Speech*, accessed 25 February 2020, <http://www.scottishcorpus.ac.uk/document/?documentid=682&highlight=robertson+smith>; Edwin R. Wallace, *Freud and Anthropology: A History and Reappraisal* (New York: International Universities Press, 1983), 95–96. See also Cyril Levitt, “Freud, Smith, and Feuerbach on Sacrifice,” *Canadian Journal of Psychoanalysis* 18 (2010), 20–42, for Ludwig Feuerbach’s work on “sacrifice” and its influence on Robertson Smith and Freud.

129. Miller, “Scottish Psychoanalysis,” 40.

130. *Ibid.*, 45.

131. See Ian D. Suttie, “A Symposium on Property and Possessiveness,” *BJMP* 15.1 (1935), 51–83. The other speakers in this symposium were Susan Isaacs and the sociologists Morris Ginsberg and T. H. Marshall.

132. *Ibid.*, 56. Later in this article he maintains that “patrimony represents psychologically, or is a means of recapturing, a substitute for the nurtural mother” (59).

133. *Ibid.*, 56.

134. *Ibid.*, 57.

135. *Ibid.*, 60.

136. Ferenczi, however, suggested in his *Clinical Diary* (1932) the possibility that the death instinct itself is “an instinct of kindness and self-sacrifice, something maternal-feminine” (Judith Dupont, ed., *The Clinical Diary of Sandor Ferenczi*, trans. Michael Balint and Nicola Zarday Jackson [Cambridge, Mass.: Harvard University Press, 1988], 91).

137. Suttie, “A Symposium,” 62 (*italics in the original*).

138. Max Weber, “Science as a Vocation” (1922), in *From Max Weber: Essays in Sociology*, ed. and trans. H. H. Gerth and C. Wright Mills (New York: Routledge, 2009), 155. Weber’s disenchantment theory was highly influential throughout the twentieth century, and until recently it was largely uncontested by historians. This has changed significantly in the last two decades. Many historians today insist that modernity was no less “enchanted” than any other epoch. See Michael Saler, “Modernity and Enchantment: A Historiographic Review,” *AHR* 111.3 (2006), 692–716.

139. Suttie, *Origins of Love and Hate*, 151.

140. *Ibid.*, 153.

141. Jan Assmann, *Moses the Egyptian: The Memory of Egypt in Western Monotheism* (Cambridge, Mass.: Harvard University Press, 1997), 7.

142. Alex Owen, *The Place of Enchantment: British Occultism and the Culture of the Modern* (Chicago: University of Chicago Press, 2004), 240.

143. *Ibid.*, 146.

144. Suttie’s anthropological inclinations ~~and~~ psychological and psychiatric ideas were always closely related. As early as 1924, in the introduction to the dissertation for the degree of doctor of medicine at Glasgow University, he writes: “In 1918 in Mesopotamia, I had an opportunity of studying insanity among Orientals. In six hundred admissions in that year I came across twenty-seven different races representing most cultures on the South Pacific littoral. . . . [I]t seems more than probable that over and above brain disease and defect and various endopsychic mechanisms, that there are a group of causes affecting unfavourably the social rapport of certain individuals, i.e. their affective relations with their fellows and with their culture” (quoted in Heard, introduction to *Origins of Love and Hate*, xxi).

145. Suttie, *Origins of Love and Hate*, 127.

146. This was not only a theoretical conclusion; Suttie thought that, also in practical terms, modern medicine should learn a great deal from “religious medicine” (for example, “Christian science”). See *ibid.*, 159–74.

147. Ronald Hutton, “Modern Pagan Witchcraft: The Background to Pagan Witchcraft,” in *The Athlone History of Witchcraft and Magic in Europe*, vol. 6, *The Twentieth Century*, ed. Bengt Ankarloo and Stuart Clark (London: Athlone Press, 1999), 18.

148. Suttie, *Origins of Love and Hate*, 155.

149. *Ibid.*, 169.

150. *Ibid.*, 172 (all italics in the original). Suttie's belief that the source of an illness can also be its cure may explain his endorsement of the principles of homeopathy, which should, he believed, be adopted by modern medicine. See *ibid.*, 162–66.

151. *Ibid.*, 155.

152. *Ibid.*

Chapter 5

Notes to epigraphs: Donald W. Winnicott, "This Feminism" (1964), in *Home Is Where We Start From: Essays by a Psychoanalyst*, ed. by Clare Winnicott, Ray Shepherd, and Madeleine Davis (Harmondsworth, U.K.: Penguin, 1986), 190. Donald W. Winnicott, "Metapsychological and Clinical Aspects of Regression Within the Psycho-Analytical Set-Up," *IJP* 36 (1955), 16.

1. Dicks was born in Estonia in 1900. His father was English and his mother was German. He studied medicine at Cambridge and London and qualified as a doctor in 1926. In 1928 he joined the Tavistock Clinic, and between 1934 and 1946 he served as an assistant medical director. In the Second World War he served as an army psychiatrist in a few missions. In 1941 he was charged with the medical care of the German POW and senior Nazi officer Rudolf Hess. In 1942 he joined Military Intelligence and became a special adviser on German morale. Between 1948 and 1965 he served as deputy director of the Tavistock Clinic. On Dicks, especially during the Second World War, see Daniel Pick, *The Pursuit of the Nazi Mind: Hitler, Hess, and the Analysts* (Oxford: Oxford University Press, 2012).

2. H. V. Dicks, "Personality Traits and National Socialist Ideology: A War-Time Study of German Prisoners of War," *Human Relations* 3.2 (1950), 111–154. Dicks should be located within a much wider group of mid-twentieth-century social scientists, mainly in Britain and the United States, who aimed to use anthropology and psychoanalysis for the investigation of national and cultural character, with an increasing effort to produce research on German, Japanese, and Soviet personalities. The leading figures in what was known in America as "culture-and-personality" school were anthropologists Ruth Benedict, Margaret Mead, Gregory Bateson, and Ashley Montagu; and neo-Freudian psychoanalysts Karen Horney and Erich Fromm, and Harry Stack Sullivan. In Britain, the main figures were Gregory Gorer and Dicks. See Joanne Meyerowitz, "How Common Culture Shapes the Separate Lives: Sexuality, Race, and Mid-Twentieth-Century Social Constructionist Thought," *Journal of American History* 96.4 (2010), 1057–1084; Peter Mandler, *Return from the Natives How Margaret Mead Won the Second World War and Lost the Cold War* (New Haven, Conn.: Yale University Press, 2013).

3. Letter from Cohen to Dicks, 10 March 1945, Henry Dicks Papers, WEL (PP/HVD/B/1/11: Box 3).

4. Letter from Dicks to Cohen, 7 March 1945, Henry Dicks Papers, WEL (PP/HVD/B/1/11: Box 3). Cohen's reply to this letter is worth mentioning: "By merely raising the status of women, it does not necessarily follow that a society becomes less militaristic. . . . It is perhaps worth observing that the peaks of imperialistic expansion in this country were reached when two influential women (Queen Elizabeth and Queen Victoria) were in throne." Furthermore, he said, even though "one associates sadism with the male and protective behaviour with the female, I am not so certain that 'tenderness and mercy' are exclusively feminine qualities" (Cohen to Dicks, 10 March 1945, Henry Dicks Papers, WEL [PP/HVD/B/1/11: Box 3]).

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5. Dicks's familiarity with Ferenczian language can be seen in his observation about the repressed modern as suffering from a "severe sphincter morality" (Dicks, "Anal Sadistic Basis of Culture," Henry Dicks Papers [PP/HVD/B/3/2: Box 4], 6). However, he does not mention Ferenczi, and we can assume that by 1940, Ferenczi had already been dismissed by too many circles in Britain and could not get credit for many of his ideas.

6. Dicks, "Personality Traits," 126. One may find some similarities between Dicks and Suttie in their analysis of religion and economy as closely related in modern patriarchal societies. In his lecture "Anal Sadistic Basis of Culture" (9), Dicks referred the audience to the 1934 Symposium on Property and Possessiveness, in which Suttie presented some of his ideas on economy (Ian Suttie, "A Symposium on Property and Possessiveness," *BJMP* 15.1 [1935], 51–83; see, again, Chapter 4).

7. Dicks, "Anal Sadistic Basis of Culture," 3.

8. *Ibid.*, 6–7.

9. *Ibid.*, 9.

10. *Ibid.*, 11.

11. *Ibid.*

12. Camille Robcis, *The Law of Kinship: Anthropology, Psychoanalysis, and the Family in France* (Ithaca, N.Y.: Cornell University Press, 2013), 6. From the perspective of the theoretician, "bridge-figuring" could be a thankless mission: as Robcis notes, the tension between the descriptive and the prescriptive—tension that can be found in any form of theoretical thinking—cannot be maintained anymore once the theory has "filtered into the public sphere" (104). In other words, in order to make a real influence in the public domain, bridge-figures must compromise on the purity of their ideas to make them usable.

13. See the introduction to this book.

14. Jose Harris, "Political Thought and the Welfare State 1870–1940: An Intellectual Framework for British Social Policy," *Pe&P* 135.1 (1992), 116–41.

15. Ann Taylor Allen, *Feminism and Motherhood in Western Europe, 1890–1970: The Maternal Dilemma* (New York: Palgrave Macmillan, 2005), 209. See *ibid.*, 209–33, for a comparative study of the social and cultural history of motherhood in Europe after the Second World War. See also Gisela Bock and Pat Thane, eds., *Maternity and Gender Policies: Women and the Rise of the European Welfare States, 1880–1950s* (London: Routledge, 1991).

16. Sonya Rose, *Which People's War? National Identity and Citizenship in Britain 1939–1945* (Oxford: Oxford University Press, 2003), 120.

17. Michal Shapira, *The War Inside: Psychoanalysis, Total War, and the Making of the Democratic Self in Postwar Britain* (New York: Cambridge University Press, 2013), 136.

18. On the fruitful relationship of Winnicott with his producers, as well as on the wider context of these broadcasts within the history of the BBC, see Anne Karpf, "Constructing and Addressing the 'Ordinary Devoted Mother,'" *HWJ* 78.1 (2014), 82–106.

19. According to some historians, this message should not be dismissed too easily, even from a feminist point of view. For example, in her oral history research on post-Second World War motherhood, Angela Davis argues that "Winnicott's endorsement of mothers and their inherent aptitude for caring for their babies could be empowering to women." See Angela Davis, *Modern Motherhood: Women and Family in England, c. 1945–2000* (Manchester, U.K.: Manchester University Press, 2012), 120.

20. On Winnicott's life and work, see Brett Kahr, *D. W. Winnicott: A Biographical Portrait* (London: Karnac, 1996); Adam Phillips, *Winnicott* (London: Fontana Press, 1986).

21. Sally Alexander, “Primary Maternal Preoccupation: D. W. Winnicott and Social Democracy in Mid-Twentieth-Century Britain,” in *History and Psyche: Culture, Psychoanalysis, and the Past*, ed. Sally Alexander and Barbara Taylor (Basingstoke, U.K.: Palgrave Macmillan, 2012), 165.

22. *Ibid.*, 166.

23. *Ibid.* In ideological terms, one may locate Winnicott’s social thought within a British liberal tradition rooted in John Stuart Mill. See Gal Gerson, “Individuality, Deliberation and Welfare in Donald Winnicott,” *HHS* 18.1 (2005), 107–26.

24. Quentin Skinner, “The Republican Ideal of Political Liberty,” in *Machiavelli and Republicanism*, ed. Gisela Bock, Quentin Skinner, and Maurizio Viroli (Cambridge: Cambridge University Press, 1990), 303.

25. *Ibid.*

26. Barbara Taylor, *Mary Wollstonecraft and the Feminist Imagination* (Cambridge: Cambridge University Press, 2003), 211.

27. Linda Kerber “The Republican Mother: Women and the Enlightenment—An American Perspective,” *American Quarterly* 28.2 (1976), 187–205. According to her, “the Republican Mother’s life was dedicated to the service of civic virtue; she educated her sons for it; she condemned and corrected her husband’s lapses from it” (202). However, in difference from Kerber’s model, my emphasis would be on the call made by Winnicott and others to make the republic more maternal rather than to make mothers more republican. On the major role of the republican tradition in the development of the European state, see Martin van Gelderen and Quentin Skinner, eds., *Republicanism: A Shared European Heritage* (Cambridge: Cambridge University Press, 2002). Indeed, republican notions influenced not only the construction of early modern Italy, or the eighteenth-century French and American Revolutions, but also the making of what some historians define as English “monarchical republicanism,” rooted in the age of Queen Elizabeth I. This tradition, some historians argue, remained effective in the British political imagination until the twentieth century. The formative text about English monarchical republicanism is Patrick Collinson’s “The Monarchical Republic of Queen Elizabeth I,” *Bulletin of the John Rylands Library of Manchester* 69.2 (Spring 1987), 394–424. For the great impact of this essay on the historiography of the English republican tradition, see John McDiarmid, ed., *The Monarchical Republic of Early Modern England: Essays in Response to Patrick Collinson* (Aldershot, U.K.: Ashgate, 2007).

28. Winnicott himself was not a feminist—certainly not by our terms, but probably also not by those of his contemporaries. For example, in one of his radio broadcasts in 1944, he said: “Talk about women not wanting to be housewives seems to me to be just nonsense, because nowhere else but in her own home is a woman in such a command” (D. W. Winnicott, *The Child and the Family: First Relationships* [London: Tavistock Publications, 1957], 88). For his traditional and highly gendered views about the ideal division of labor within the house, see D. W. Winnicott, “What About Father?” (1945), in *The Collected Works of D. W. Winnicott*, vol. 2, 1939–1945, ed. Lesley Caldwell and Helen Taylor Robinson (New York: Oxford University Press, 2017), 271–75.

29. Nikolas Rose, *Governing the Soul: The Shaping of the Private Self* (London: Free Association, 1999), 157.

30. *Ibid.*, 160. Historian Jane Lewis argues that during the twentieth century, there were three main periods in which the family became a site of social concern: the fin de siècle, the post-Second World War period, and the 1980s: “The cause of concern was very different in

the two earlier periods. At the turn of the century the focus on the family was given additional impetus by . . . the firm conviction that the family should be the main supplier of welfare in society. [This] has also played a large part in the thinking of 1980s governments, which have sought to stress the importance of the family, the voluntary sector, and the market in the provision of welfare and to downplay the role of the state” (Jane Lewis, *Women in Britain Since 1945: Women, Family, Work and the State in the Post-War Years* [Oxford: Basil Blackwell, 1992], 10–11).

31. On the debate on postwar Bowlbyism, see particularly Denise Riley, *War in the Nursery: Theories of the Child and Mother* (London: Virago, 1983); Mathew Thomson, *Lost Freedom: The Landscape of the Child and the British Post-War Settlement* (Oxford: Oxford University Press, 2013), 79–105. For the feminist critique of Bowlby, see Juliet Mitchell, *Psychoanalysis and Feminism* (Harmondsworth, U.K.: Penguin, 1975), 228–29. On the reception and influence of Bowlby in Cold War America, see Marga Vicedo, *The Nature and Nurture of Love: From Imprinting to Attachment in Cold War America* (Chicago: University of Chicago Press, 2013).

32. James Vernon, “The Ethics of Hunger and the Assembly of Society: The Techno-Politics of the School Meal in Modern Britain,” *AHR* 110.3 (2005), 724.

33. Carolyn Steedman, *Landscape for a Good Woman: A Story of Two Lives* (London: Virago, 1986), 122.

34. Matt Houlbrook, *Queer London: Perils and Pleasures in the Sexual Metropolis, 1918–1957* (Chicago: University of Chicago Press, 2005), 238–39.

35. Chris Waters, “‘Dark Strangers’ in Our Midst: Discourses of Race and Nation in Britain, 1947–1963,” *JBS* 36.2 (1997), 207–38; Frank Mort, *Capital Affairs: London and the Making of the Permissive Society* (New Haven, Conn.: Yale University Press, 2010), 125–36.

36. Waters, “Dark Strangers,” 225.

37. Quoted in *ibid.*, 228.

38. See Jeremy Nuttall, *Psychological Socialism: The Labour Party and Qualities of Mind and Character, 1931 to the Present* (Manchester, U.K.: Manchester University Press, 2006), 49–54; Ben Mayhew, “Between Love and Aggression: The Politics of John Bowlby,” *HHS* 19.4 (2006), 19–35. Bowlby and Durbin had certain socialist leanings, but we should bear in mind that the “welfarist” politics they promoted were not confined to left-wing circles. See Harris, “Political Thought,” 41.

39. See E. F. M. Durbin and John Bowlby, *Personal Aggressiveness and War* (London: Kegan Paul, 1939), 41–45.

40. Nuttall, *Psychological Socialism*, 52.

41. Donald W. Winnicott, *The Child and the Outside World: Studies in Developing Relationships* (London: Tavistock Publications, 1957), 137.

42. Donald W. Winnicott, “Some Thoughts on the Meaning of the Word Democracy,” *Human Relations* 3.2 (1950), 179.

43. Dicks, “Personality Traits,” 128.

44. *Ibid.*, 141.

45. *Ibid.*, 142.

46. *Ibid.*, 138.

47. Winnicott, “Some Thoughts,” 179.

48. *Ibid.*

49. Winnicott, “Metapsychological and Clinical Aspects of Regression,” 17.

50. *Ibid.*, 21.
51. *Ibid.*, 25.
52. Margaret I. Little, “Winnicott Working in Areas Where Psychotic Anxieties Predominate: A Personal Record,” *Free Associations* 1.3 (1985), 32.
53. *Ibid.*, 32–33.
54. Winnicott, “Some Thoughts,” 180. See also Katharina Rowold, “‘If We Are to Believe the Psychologists . . .’: Medicine, Psychoanalysis and Breastfeeding in Britain, 1900–55,” *Medical History* 63.1 (2019), 61–81.
55. *Ibid.*
56. See Donald W. Winnicott, “Withdrawal and Regression” (1954), in *Holding and Interpretation: Fragment of an Analysis* (New York: Grove, 1987), 192. This book contains a detailed clinical account written by Winnicott of a fragment from the analysis on which he based his “Withdrawal and Regression.”
57. For Winnicott’s nonauthoritarian approach to children, see Donald W. Winnicott, “The Teacher, the Parent, and the Doctor” (1936), in *Thinking About Children*, ed. Ray Shepherd, Jennifer Johns, and Helen Taylor Robinson (London: Karnac, 1996), 77–93. In this early paper, Winnicott makes a claim for mothers being the most important source of knowledge for teachers and doctors about anything to do with the child: “It should not be forgotten that usually the mother really does possess, and it is only she who possesses, the valuable knowledge of the child’s progress from birth onwards” (85).
58. Winnicott, “Child Department Consultations,” *IJP* 23 (1942), 139–46.
59. “It is no good our pretending to do what we cannot do. It is no good anyone asking us to consider a case if the address is in a remote district, unless there are exceptional facilities for travel, or if the child can attend on his own. And then, of course, there is hardly ever a vacancy. Further, if there is a vacancy, a candidate cannot be given so difficult a case as this one was certain to be. That is why it is so futile to do consultation work, unless a wide view is taken of the duties of the consultant” (Winnicott, “Child Department,” 141).
60. *Ibid.*, 141–42. Winnicott’s account of the child’s problems is telling: “This boy had had many changes of physical background and he had reacted badly to each change. He was said to have no power of concentration, to be moody, to be suspicious of good and of children of his own age, and to be unloved. And then there was the matter of his being a Jew, this having hitherto been hidden from him” (142).
61. On Winnicott at wartime, see Shapira, *War Inside*, 63–64. Winnicott was engaged publicly in the war effort as early as December 1939, when he published, together with John Bowlby and Emanuel Miller, a public letter in which they warned against the dangerous psychological effects of evacuating young children without their mothers. See John Bowlby, Emanuel Miller, and Donald W. Winnicott, “Evacuation of Small Children,” *British Medical Journal* 2.4119 (1939), 1202–3. On the evacuations and their wider social and cultural implications, see John Welshman, “Evacuation and Social Policy During the Second World War: Myth and Reality,” *TBH* 9.1 (1998), 28–53.
62. For example, in the case of Nelly (aged 20 but according to Winnicott “clinically adolescent”), he thought that analysis could be helpful, but he insisted that she not be put on a waiting list. He suggested to her that she apply for analysis later on in her life as “at the moment when she applies, free psycho-analysis may not be available” (Winnicott, “Child Department,” 144).
63. *Ibid.*

64. *Ibid.*, 145.

65. *Ibid.*

66. For the theoretical differences between Anna Freud and Melanie Klein, see Chapter 1. For the records of this series of arguments, see Pearl King and Riccardo Steiner, eds., *The Freud-Klein Controversies, 1941–45* (London: Tavistock and Routledge, 1991). This book is one of the most important psychoanalytical archives and a major source in the history of psychoanalytic ideas. It was widely served in the literature as an evidence for the strong differences between the major schools in British psychoanalysis and their leaders. But close reading of this historical document reveals not only theoretical disagreements, but also what Shapira describes as “concealed similarities” between Anna Freud and Klein. See Shapira, *War Inside*, 104. From the extensive literature on the “Controversies,” see for example Claudine Geissmann and Pierre Geissmann, *A History of Child Psychoanalysis* (London: Routledge, 1998), 172–83; Martin S. Bergmann, “The Historical Roots of Psychoanalytic Orthodoxy,” *IJP* 78 (1997), 69–86; Meira Likierman, “The Debate Between Anna Freud and Melanie Klein: An Historical Survey,” *Journal of Child Psychotherapy* 21.3 (1995), 313–25.

67. On British psychoanalysts during the war, see Pearl H. M. King, “Activities of British Psychoanalysts During the Second World War and the Influence of their Inter-Disciplinary Collaboration on the Development of Psychoanalysis in Great Britain,” *IRP* 16 (1989), 15–32; Pick, *Pursuit of the Nazi Mind*; Shapira, *War Inside*.

68. Little, “Winnicott Working in Areas,” 19.

69. Sylvia M. Payne, “The Principles and Methods of the Training of Child Psychoanalysts,” *IJP* 24 (1943), 63.

70. *Ibid.*, 61.

71. In what follows I am drawing on documents related to records of anonymous child patients at the London Clinic of Psychoanalysis, 1946–1955 (Child Patient Records, BPS [S-F-03-02]). Most documents have no specific date, only the year of writing. I would like to thank Georgina Tate for helping me transcribe these records.

72. Winnicott, “What About Father?,” 271.

73. See Denise Riley, “Some Peculiarities of Social Policy Concerning Women in War-time and Postwar Britain,” in *Behind the Lines: Gender and the Two World Wars*, ed. Margaret Randolph Higonnet et al. (New Haven, Conn.: Yale University Press, 1987), 260–71, for a discussion on how to assess “the impact on ‘women themselves’ of their continually being described as mothers, girlish employees, docile mother-workers?” (270). This question is important “especially when these ‘women themselves’ may not have access to a contrasting set of descriptions” (*ibid.*).

74. *Ibid.*, 266.

75. I. Bennett, “Final Report on Clinic Patient,” 1952, Child Patient Records, BPS (S-F-03-02).

76. *Ibid.*

77. M. Bavin, “6 Monthly Report of Clinic Patient,” 1953, Child Patient Records, BPS (S-F-03-02).

78. *Ibid.* The capital *M* in “Mother” is in the original.

79. *Ibid.*

80. Annette Kuhn, *Family Secrets: Acts of Memory and Imagination* (London: Verso, 1995), 67.

81. Bavin, “6 Monthly Report,” 1953.

82. B. H. Cooke, "Final Report on Clinic Patient," 1947, Child Patient Records, BPS (S-F-03-02).
83. Ibid.
84. S. Mervis, "6 Monthly Report on Clinic Patient," 1953, Child Patient Records, BPS (S-F-03-02).
85. Ibid.
86. Case report of the London Clinic of Psycho-Analysis, 1951, Child Patient Records, BPS (S-F-03-02).
87. Ibid.
88. "Report from Dr. Bonnard, East London Child Guidance," 1951, Child Patient Records, BPS (S-F-03-02) (*italics mine*).
89. Letter from the headmistress of Gayhurst Primary School in Hackney to Winnicott, 1951, Child Patient Records, BPS (S-F-03-02) (*italics mine*).
90. R. M. Dorn, "Final Report on Clinic Patient," 1952, Child Patient Records, BPS (S-F-03-02).
91. Ibid.
92. A. Bonnard, "6 Monthly Report on Clinic Patient," 1953, Child Patient Records, BPS (S-F-03-02).
93. Ibid.
94. A. Bonnard, "Final Report of Clinic Patient," 1954, Child Patient Records, BPS (S-F-03-02).
95. Riley, "Some Peculiarities of Social Policy," 261.
96. George L. Mosse, *Nationalism and Sexuality: Respectability and Abnormal Sexuality in Modern Europe* (New York: H. Fertig, 1985), 17. See also Nira Yuval-Davis, *Gender and Nation* (London: Sage, 1997), 45.
97. Anne McClintock, "'No Longer in a Future Heaven': Women and Nationalism in South Africa," *Transition* 51 (1991), 105.
98. Davis, *Modern Motherhood*, 84.
99. See Pat Thane, "Family Life and 'Normality' in Postwar British Culture," in *Life After Death: Approaches to a Cultural and Social History of Europe During the 1940s and 1950s*, ed. Richard Bessel and Dirk Schumann (Cambridge: Cambridge University Press, 2003), 193–210. This paradigm was widely accepted among postwar feminists as well, and some of them, such as Alva Myrdal and Viola Klein, promoted models that combined motherhood and career under the assumption that the first years of motherhood must be devoted to the children. See Lewis, *Women in Britain*, 24–25.
100. Thane, "Family Life."
101. Eli Zaretsky, *Secrets of the Soul: A Social and Cultural History of Psychoanalysis* (New York: Vintage, 2005), 172–73.
102. Ibid., 173.
103. See, for example, Dolly Smith Wilson, "A New Look at the Affluent Worker: The Good Working Mother in Post-War Britain," *TBH* 17.2 (2006), 206–29. Wilson convincingly argues that the social and cultural effort to restrict women's share of the job market was only partially successful. Many mothers took part-time jobs (an option that did not exist before the war), but more importantly, they tried to "change the image of good mother from one who stayed home to one who took on extra work for the benefit of her family" (228). But as Wilson shows, "the tendency to characterize women's work as being for pin money ironically

strengthened the male breadwinner ideal” and “upheld the notion of women’s position as second-tier workers outside the real workforce” (229).

Chapter 6

1. See Michael Balint et al., “Report on the Conference Held by the Family Discussion Bureaux in September 1950,” Enid and Michael Balint Papers, Albert Sloman Library at the University of Essex (Box 17). The Family Discussion Bureau was later known as the Tavistock Institute of Marital Studies. On the Family Discussion Bureau and the emergence of postwar, state-supported marriage welfare services, see Teri Chettiar, “More Than a Contract: The Emergence of a State-Supported Marriage Welfare Service and the Politics of Emotional Life in Post-1945 Britain,” *Journal of British Studies* 55.3 (2016), 566–91.

2. Michael Balint, *The Doctor, His Patient and the Illness* (London: Pitman Medical Publishing, 1964 [1957]), 1.

3. See Rhodri Hayward, *The Transformation of the Psyche in British Primary Care, 1870–1970* (London: Bloomsbury Academic, 2014), 91–115; John Horder, “The First Balint Group,” *British Journal of General Practice* 51.473 (2001), 1038–39.

4. For an overview of Balint groups in the 1950s and 1960s, see Robert Gosling, “The General Practitioner Training Scheme” and “GP Training and Psychoanalysis” in *Michael Balint: Object Relations Pure and Applied*, by Harold Stewart, with chapters by Andrew Elder and Robert Gosling (London: Routledge, 1996), 66–85. Gosling was also Balint’s assistant for a few years. See also Jonathan Sklar, “Regression and New Beginnings: Michael, Alice and Enid Balint and the Circulation of Ideas,” *IJP* 93.4 (2012), 1017–34; Raluca Soreanu, “On Michael Balint, Cases and Countertransference,” *Journal of the Balint Society* 46 (2018), 57–63; Thomas Osborne, “Mobilizing Psychoanalysis: Michael Balint and the General Practitioners,” *Social Studies of Science* 23.1 (1993), 175–200. For the Balint movement worldwide, see John Salinsky, “The Balint Movement Worldwide: Present State and Future Outlook: A Brief History of Balint Around the World,” *AJP* 62.4 (2002), 327–35. While there is a recent renewal of interest among scholars in Michael Balint’s work, substantial research on Enid Balint’s life and work has yet to be done. See, however, Sklar, “Regression and New Beginnings.”

5. See E. L. Trist and Hugh Murry, eds., *The Social Engagement of Social Science: A Tavistock Anthology* (London: Free Association, 1990). This important collection exemplifies the experimental work in group therapy carried out at the Tavistock Clinic after the war and reveals how widely defined the concept of the “group” was. Indeed, it could include anything from families (see John Bowlby, “The Study and Reduction of Group Tensions in the Family” [1949], in Trist and Murry, *Social Engagement*, 291–98), to POWs (see A. T. M. Wilson, Eric Trist, and Adam Curle, “Transitional Communities and Social Reconnection: The Civil Resettlement of British Prisons of War” [1952], in Trist and Murry, *Social Engagement*, 88–111), to the nation itself (see Donald W. Winnicott, “Thoughts on the Meaning of the Word Democracy” [1950], in Trist and Murry, *Social Engagement*, 546–67). Although this anthology does not include any of Balint’s papers, there are several examples of Balint’s interest in the “group” as a unit of study (some of which will be discussed shortly). See, for example, the discussion of modern criminality as a “public drama” in Michael Balint, “On Punishing Offenders,” in *Psychoanalysis and Culture: Essays in Honour of Géza Róheim*, ed. by George B. Wilbur and Warner Muensterberger (New York: International Universities Press, 1951), 254–79.

6. For the decision to establish a regular seminar for discussing GP case studies (~~i.e., the first Balint group~~), see Henry Dicks to Balint, 2 July 1951, Balint Papers, GEN. Interestingly,

most writings on Balint cite 1950 as the year the Balint group was established, which is a mistake. The only published source where I found mention of this initial discussion group—and so 1951 as the starting year—is the obituary of Max Clyne, an eminent figure in the Balint movement and a member of the first Balint group. See Michael J. Clyne, “Obituary: Max Berthold Clyne,” *Psychiatric Bulletin* 24.10 (2000), 398.

7. See Tenth Session of GPs Discussion Group, 21 June 1951, GEN. This last meeting of the “pre-Balint seminar” shows that the demand for the group, and some suggestions as to its form, came from the doctors and not from Balint. In other words, GPs were as interested in finding ways to apply psychodynamic approaches in their practice as the Tavistock doctor was in exploring this approach with GPs. There are no names of participants in these initial meetings, but we know that some of the GPs attended both the pre-Balint seminar and the first Balint group.

8. See Rhodri Hayward, “The Invention of the Psychosocial: An Introduction,” *HHS* 25.5 (2012), 3–12.

9. Hayward, “Invention,” 6. As Hayward notes, Ian Suttie, who was discussed extensively in Chapter 4, is a prominent example of this new line of thought.

10. David Armstrong, *Political Anatomy of the Body: Medical Knowledge in Britain in the Twentieth Century* (Cambridge: Cambridge University Press, 1983), 38. On the history of social medicine in Britain, see Dorothy Porter, “Changing Disciplines: John Ryle and the Making of Social Medicine in Britain in the 1940s,” *History of Science* 30.2 (1992), 137–64; Porter, “From Social Structure to Social Behaviour in Britain After the Second World War,” *Contemporary British History* 16 (2002), 58–80; Jane Lewis, *What Price Community Medicine? The Philosophy, Practice and Politics of Public Health Since 1919* (Brighton, U.K.: Wheatsheaf, 1986), 35–44. See also Jane Lewis and Barbara Brookes, “The Peckham Health Centre, ‘PEP,’ and the Concept of General Practice During the 1930s and 1940s,” *Medical History* 27.2 (1983), 151–61, for the strong influence of the experimental Peckham Health Centre on social medicine as a discipline.

11. Porter, “From Social Structure,” 62–63.

12. Daniel Pick, *The Pursuit of the Nazi Mind: Hitler, Hess, and the Analysts* (Oxford: Oxford University Press, 2012), 182.

13. See J. C. Flugel, ed., *Proceedings of the International Congress on Mental Health* (London: H. K. Lewis, 1948).

14. *Ibid.*, 187.

15. See Edgar Jones, “War and the Practice of Psychotherapy: The UK Experience 1939–1960,” *Medical History* 48.4 (2004), 496.

16. *Ibid.*, 495.

17. See Wilfred Bion and John Rickman, “Intra-Group Tensions in Therapy: Their Study as the Task of the Group,” *Lancet* 242.6274 (1943), 678–81.

18. This experiment was followed by what was known as the Second Northfield Experiment, which according to some scholars produced the first therapeutic community in Britain. See John Mills and Tom Harrison, “John Rickman, Wilfred Ruprecht Bion, and the Origins of the Therapeutic Community,” *History of Psychology* 10.1 (2007), 22–43. For a detailed study of the Northfield Experiments, see Tom Harrison, *Bion, Rickman, Foulkes and the Northfield Experiments: Advancing on a Different Front* (London: Jessica Kingsley Publishers, 2000). See also the personal accounts of Tom Main, “The Hospital as a Therapeutic Institution” (1946) in *The Ailment and Other Psychoanalytic Essays* (London: Free Association,

1989), 7–11; Tom Main, “The Concept of the Therapeutic Community: Variations and Vicissitudes,” in *Ailment and Other Psychoanalytic Essays*, 123–41.

19. See Pearl H. M. King, “Activities of British Psychoanalysts During the Second World War and the Influence of Their Inter-Disciplinary Collaboration on the Development of Psychoanalysis in Great Britain,” *IRP* 16 (1989), 25; Mills and Harrison, “John Rickman,” 33. However, Michael Roper has shown that Bion identified with, and committed to, the British army and its military goals more than his portrayal by some of his followers might suggest. See Michael Roper, “The ‘Spear Head of an Advance’: Wilfred Bion’s Wartime Letters to John Rickman,” *PAH* 14.1 (2012), 95–109.

20. Jones, “War and the Practice of Psychotherapy,” 497.

21. This point is supported by Tom Main, who arrived at Northfield in 1945 and who argues that “Bion was sacked from Northfield” because “neither the commanding officer nor his staff was able to tolerate the early weeks of chaos, and both were condemning and rancorous about Bion’s refusal to own total responsibility for the disorders of others” (Main, “Concept of the Therapeutic Community,” 131).

22. Jones, “War and the Practice of Psychotherapy,” 494. See also Main, “Concept of the Therapeutic Community,” 135.

23. Jones, “War and the Practice of Psychotherapy,” 494.

24. In the following sentences, I am drawing especially on Pick, *The Pursuit*, 190–99.

25. *Ibid.*, 190. Main, for example, thought that there are strong affinities between some forms of psychiatric hospitalization and the creation of psychosocial conditions for totalitarian regimes. See Teri Chettiar, “Democratizing Mental Health: Motherhood, Therapeutic Community and the Emergence of the Psychiatric Family at the Cassel Hospital in Post-Second World War Britain,” *HHS* 25.5 (2012), 119.

26. Peter Miller and Nikolas Rose, “The Tavistock Programme: The Government of Subjectivity and Social Life,” *Sociology* 22.2 (1988), 181.

27. As Rickman noted in 1943 on the First Northfield Experiment: “*Attention was focused not on what brings pain or happiness to the individual but what movement or action strengthens the group*—not our group, nor the Army’s group, nor a British, nor any other established group but first of all a group of their own making” (quoted in Mills and Harrison, “John Rickman,” 32 [emphasis in the original]). For an interesting discussion on the history of twentieth-century group theories, including Bion’s, see Teresa Brennan, *The Transmission of Affect* (Ithaca, N.Y.: Cornell University Press, 2004), 51–73.

28. Hayward, *Transformation of the Psyche*, 78.

29. Armstrong, *Political Anatomy*, 67.

30. John Stewart, “Ideology and Process in the Creation of the British National Health Service,” *Journal of Policy History* 14.2 (2002), 113. Stewart, however, suggests in this article a revision to the view that the NHS was a realization of politically radical leftist ideas and shows instead that the original program for the NHS—never accepted—was designed by the more leftist people of the Labour Party and was much more radical in its social-democratic vision.

31. For the history of the “therapeutic community,” see Chettiar, “Democratizing Mental Health”; Mills and Harrison, “John Rickman”; Tom Main, “On the History of the Cassel Hospital,” *Therapeutic Communities: The International Journal for Therapeutic and Supportive Organizations* 23 (2002), 229–46.

32. Tom Main, “Some Psychodynamics of Large Groups” (1975), in *Ailment and Other Psychoanalytic Essays*, 103.

33. *Ibid.* However, during the 1950s the Cassel Hospital became much more family oriented, and the therapeutic community became more focused on bringing patients, and mainly mothers, back to normative function in their nuclear families. As we have already seen in the last chapter, this focus on normative motherhood as a key to the stability of the family was typical of the therapeutic discourse of the 1940s and the 1950s. See Chettiar, “Democratizing Mental Health,” 114–18. See also John Welshman, “In Search of the ‘Problem Family’: Public Health and Social Work in England and Wales, 1940–70,” *SHM* 9.3 (1996), 447–65, on the emergence of the postwar “problem family.”

34. Indeed, Main was known as one of Balint’s most prominent followers in Britain. Balint had been Main’s psychoanalyst, after his previous analysis with Susan Isaacs, and also his supervisor, alongside such high-profile figures as Anna Freud, Melanie Klein, and Paula Heimann. For Balint’s influence on Main, see Eric Rayner, introduction to Main, *Ailment and Other Psychoanalytic Essays*, xxiii–xxiv. See also Main’s report (1957) on a weekly “short-term psychotherapy workshop” convened by Balint in the Tom Main Collection, BPS (P07-F-C-02).

35. In what follows, I concentrate only on the history of general practice in the interwar and postwar periods. For the origins of the discipline in the early nineteenth century, see Anne Digby, *The Evolution of British General Practice, 1850–1948* (Oxford: Oxford University Press, 1999); Irvine Loudon, “The Concept of the Family Doctor,” *Bulletin of the History of Medicine* 58.3 (1984), 347–62.

36. See Anne Digby, “Poverty, Health and the Politics of Gender in Britain, 1870–1948,” in *Gender, Health and Welfare*, ed. Anne Digby and John Stewart (London: Psychology Press, 1996), 75.

37. See Anne Digby and Nick Bosanquet, “Doctors and Patients in an Era of National Health Insurance and Private Practice, 1913–1938,” *Economic History Review* 41.1 (1988), 74–94. A “panel doctor” was a GP who was registered to accept patients under the NHI and the NHS schemes. Most GPs, however, mixed private and panel practice in a way that created the possibility for class discrimination to be “formally built into the provision of medical treatment” (82).

38. *Ibid.*, 87.

39. *Ibid.*, 90–92.

40. On the founding of the NHS and its differences from the NHI, see Anne Digby, “Continuity or Change in 1948? The Significance of the NHS,” in *Realism and Reality in the National Health Service: Fifty Years and More*, ed. by Karen Bloor (York: University of York, 1998), 4–17.

41. Discussing the “before” and “after” of the NHS in one of the first meetings of the Balint group, one doctor said: “Working classes are OK. It is the middle classes that are taking their revenge” (Seminar on Psychological Problems in General Practice, 11 October 1951, Balint Papers, GEN, p. 3).

42. Digby, “Continuity or Change in 1948?” 7.

43. André E. Haynal, *The Technique at Issue: Controversies in Psychoanalysis, from Freud and Ferenczi to Michael Balint*, trans. Elizabeth Holder and Archie Hooton (London: Karnac, 1988), 123.

44. See Mark Perry, “Academic General Practice in Manchester Under the Early National Health Service: A Failed Experiment in Social Medicine,” *SHM* 13.1 (2000), 111–30; Digby, “Continuity or Change in 1948?,” 6–9.

45. See David Armstrong, “Space and Time in British General Practice,” *Social Science and Medicine* 20.7 (1985), 659–66.

46. Joseph S. Collings, “General Practice in England Today: A Reconnaissance,” *Lancet* 255.6604 (1950), 555–85. On the report and its implications, see Irvine Loudon and Mark Drury, “Some Aspects of Clinical Care in General Practice,” in *General Practice Under the National Health Service, 1948–1997*, ed. by Irvine Loudon, John Horder, and Charles Webster (London: Clarendon Press, 1998), 92–95; Roland Petchey, “Collings Report on General Practice in England in 1950: Unrecognised, Pioneering Piece of British Social Research?,” *British Medical Journal* 311.6996 (1995), 40–42.

47. See Collings, “General Practice in England,” 555.

48. See Stephen J. Hadfield, “A Field Survey of General Practice, 1951–2,” *British Medical Journal* 2.4838 (1953), 683–706.

49. See Stephen Taylor, *Good General Practice: A Report of a Survey* (London: Oxford University Press, 1954). On the central role of Taylor in shaping general practice as a psychosocial occupation after the Second World War, see Hayward, *Transformation of the Psyche*, 61–89.

50. Denis Pereira Gray, “Postgraduate Training and Continuing Education,” in Loudon, Horder, and Webster, *General Practice Under the National Health Service*, 182–85.

51. See Marshall Marinker, “‘What Is Wrong’ and ‘How We Know It’: Changing Concepts of Illness in General Practice,” in Loudon, Horder, and Webster, *General Practice under the National Health Service*, 65–91.

52. See Hayward, *Transformation of the Psyche*; Marinker, “What Is Wrong.”

53. As one GP witnessed, “On entering general practice in the 1980s, two of my heroes were Michael Balint and JS Collings. They stood out because the general practice which I saw emerged clearly from what they wrote. Both were outsiders, from disciplines allied to general practice, both were ruthless in describing what they saw, and both were influential in mobilizing change” (Sally A. Hull, “The Method of Balint Group Work and Its Contribution to Research in General Practice,” *Family Practice* 13, supp. 1 [1996], 10).

54. *Ibid.*

55. On Balint’s life and work, see Sklar, “Regression and New Beginnings”; Michelle Moreau-Ricaud, “Michael Balint: An Introduction,” *AJP* 62.1 (2002), 17–24; Harold Stewart, *Michael Balint: Object Relations Pure and Applied*, with chapters by Andrew Elder and Robert Gosling (London: Routledge, 1996); Judith Dupont, “Michael Balint: Analysand, Pupil, Friend, and Successor to Sándor Ferenczi,” in *The Legacy of Sándor Ferenczi*, ed. by Lewis Aron and Adrienne Harris (Hillsdale, N.J.: Analytic Press, 1993), 145–57; Haynal, *Technique at Issue*, 71–125.

56. Bluma Swerdlhoff, “An Interview with Michael Balint,” *AJP* 62.4 (2002 [1965]), 384.

57. On Alice Szekely-Kovacs, later to be known as Alice Balint, see the illuminating Anna Borgos, “Alice Bálint and Her Diaries: ‘... This Little Fixation Seems to Remain ...,’” *PAH* 21.1 (2019), 23–52.

58. *Ibid.*, 390.

59. See Judit Mészáros, “Progress and Persecution in the Psychoanalytic Heartland: Antisemitism, Communism and the Fate of Hungarian Psychoanalysis,” *Psychoanalytic Dialogues* 20.5 (2010), 600–22.

60. See Swerdloff, “Interview,” 393–94.

61. On the Budapest school, see Ferenc Erős, “Some Social and Political Issues Related to Ferenczi and the Hungarian School,” in *Ferenczi and His World: Rekindling the Spirit of the Budapest School*, ed. Judit Szekacs-Weisz and Tom Keve (London: Karnac, 2012), 39–54; Elisabeth Young-Bruehl, “A Visit to the Budapest School,” *Psychoanalytic Study of the Child* 57 (2002), 411–32; Michelle Moreau-Ricaud, “The Founding of the Budapest School,” in *Ferenczi’s Turn in Psychoanalysis*, ed. Peter L. Rudnytsky, Patrizia Giampieri-Deutsch, and Antal Bokay (New York: New York University Press, 1996), 41–59; Gyorgy Vikar, “The Budapest School of Psychoanalysis,” in Rudnytsky, Giampieri-Deutsch, and Bokay, *Ferenczi’s Turn in Psychoanalysis*, 60–76.

62. See Chapter 3 of this book. Róheim was also one of Balint’s closest friends. Another good friend of Balint was Otto Fenichel, and their 1930s correspondence suggests that Balint was part, at least for a time, of what some scholars have called “the Freudian left.” See Haynal, *Technique at Issue*, 111. On the Balint-Fenichel correspondence, see Russell Jacoby, *The Repression of Psychoanalysis: Otto Fenichel and the Political Freudians* (New York: Basic Books, 1983), 102–4.

63. Franz Alexander, “Discussion: Lay Analysis,” *IJP* 8 (1927), 227–28. See also Ferenczi’s *Rundbrief* of 18 April 1926, in Eva Brabant, Ernst Falzeder, and Patrizia Giampieri-Deutsch, eds., *The Correspondence of Sigmund Freud and Sándor Ferenczi*, vol. 3, 1920–1933, trans. Peter T. Hoffer (Cambridge, Mass: Belknap Press of Harvard University Press, 2000), 256.

64. Michael Balint, “The Crisis of Medical Practice,” *AJP* 62.1 (2002 [1930]), 13.

65. Hayward, *Transformation of the Psyche*, 52–59.

66. It should be noted, however, that while the participants of 1950s Balint groups were London-based, enthusiastic, young, and often idealistic doctors, the observed GPs in the Collings Report came from several regions other than London (industrial, urban-residential, and rural areas in north and south England) and were more diverse in terms of age and background. See Collings, “General Practice in England,” 555.

67. “GP Course,” notes on requests for discussion, undated, Balint Papers, GEN; although undated, it was probably written in the first session Balint and Dicks held with the GPs.

68. Second Session, 26 April 1951, Balint Papers, GEN, p. 1. The “drug ‘doctor’” (Balint, *The Doctor, His Patient*, 5) became one of the most notable Balintian notions.

69. Second Session, 26 April 1951, p. 6.

70. Third Session, 3 May 1951, Balint Papers, GEN, p. 1.

71. Second Session, 26 April 1951, p. 7. Interestingly, some participants contrasted the roles of the doctor in Britain and Ireland: “In Ireland the local doctor and the parish priest work together and it is usual for a patient to go to the priest first. In Britain we need an official priest, perhaps with a State stipend, who would be able to take much of the work off the doctor’s hands and sign certificates etc.” (Fourth Session, 10 May 1951, Balint Papers, GEN, p. 6).

72. The portrayal of the ideal doctor as a maternal figure has several relevant sources. Ferenczi suggested in his *Clinical Diary*, to which for many decades Balint was one of the only people to have access, that “analytic guilt consists of the doctor not being able to offer full maternal care, goodness, self-sacrifice” (Judith Dupont, ed., *The Clinical Diary of Sandor Ferenczi*, trans. Michael Balint and Nicola Zarday Jackson [Cambridge, Mass.: Harvard University Press, 1988], 52). A more relevant source, however, might be Georg Groddeck, who strongly advocated for the “maternal” types of doctors (and condemned the “paternal” ones). See Galina Hristeva and Mark F. Poster, “Georg Groddeck’s Maternal Turn: Its Evolution and

Influence on Early Psychoanalysts,” *AJP* 73.3 (2013), 228–53. According to Groddeck, doctors should aim to achieve a “strong bond between patient and physician resembling the mother-child relationship” (Hristeva and Poster, “Groddeck’s Maternal Turn,” 235). Balint knew and appreciated Groddeck’s work, as he himself testified: “*The Book of the It* is one of my favourite books, perhaps the very first writing in medicine that took seriously the idea that illnesses which impress us as somatic or organic are caused by emotions, in fact are un-understood or misinterpreted expressions of emotions” (Michael Balint, review of *Exploring the Unconscious*, by Georg Groddeck, *IJP* 32 [1951], 251). It is very likely that Groddeck was in Balint’s mind when thinking of maternal and paternal types of doctors.

73. Seventh Session, 31 May 1951, Balint Papers, GEN, p. 2. However, when one doctor suggested applying “common sense” before sending a patient to psychotherapy, Balint strongly opposed the use of this term: “What we must aim to do is ‘proper’ therapy and nothing else” (Sixth Session, 24 May 1951, Balint Papers, GEN, p. 3).

74. Seventh Session, 31 May 1951, p. 2.

75. *Ibid.*, 3.

76. *Ibid.*, 4.

77. *Ibid.*, 7.

78. Eighth Session, 7 June 1951, Balint Papers, GEN, p. 2.

79. Other doctors were more confident in discussing these topics with their patients, but not necessarily wiser: “[The doctor] had gone into the matter quite fully with her, asking her whether she had had any previous relationships with boy friends and whether they included kissing, cuddling etc. He also asked her who was her famous film star and whether she would like to have sex relations with him” (Ninth Session, 14 June 1951, Balint Papers, GEN, p. 4).

80. *Ibid.*, 7.

81. *Ibid.*, 13.

82. Eighth Session, 7 June 1951, p. 4.

83. *Ibid.*

84. *Ibid.*

85. See, for example, Welshman, “In Search of the ‘Problem Family,’”; James Vernon, “The Ethics of Hunger and the Assembly of Society: The Techno-Politics of the School Meal in Modern Britain,” *AHR* 110.3 (2005), 693–725; Chettiar, “More Than a Contract”; Denise Riley, *War in the Nursery: Theories of the Child and Mother* (London: Virago, 1983); and Carolyn Steedman, *Landscape for a Good Woman: A Story of Two Lives* (London: Virago, 1986). See also the introduction to this book.

86. Eighth Session, 7 June 1951, p. 5.

87. *Ibid.*, 6.

88. *Ibid.*

89. *Ibid.*, 7.

90. *Ibid.*

91. In a discussion of the best way to give patients “bad news,” one doctor suggested that it is not always good to provide the patient with all the information. Balint immediately noted that this approach reminds him of a “strict mother who knows what is best for her children” (Third Session, 3 May 1951, p. 4). Indeed, doctors thought that strictness with patients was sometimes necessary, but this approach was often identified with the paternal role rather than the maternal one. For example, some doctors thought that when neurotics “cannot benefit

from psychotherapy,” it is better to adopt “the ‘strict father’ attitude” with them (Fourth Session, 10 May 1951, p. 6).

92. Eighth Session, 7 June 1951, p. 9. A similar discussion occurred several weeks later, on giving childbirth advice to Catholics. See Ninth Session, 14 June 1951, p. 4.

93. Eighth Session, 7 June 1951, pp. 9–10.

94. *Ibid.*, 10. Compare with the discussion about “the difficulty of a Jewish doctor in treating Fascists or a Communist doctor in treating a Tory” (Second Session, 26 April 1951, 7).

95. Eighth Session, 7 June 1951, pp. 10–11.

96. *Ibid.*, 11.

97. *Ibid.*, 12.

98. *Ibid.*, 13.

99. *Ibid.*

100. John Stewart, *Child Guidance in Britain, 1918–1955: The Dangerous Age of Childhood* (London: Pickering and Chatto, 2013), 107–24. As Bowlby put it in 1940, “The child who feels happy in his own home is the child who settles best in a foster-home. It is the child who has felt unhappy and insecure at home who finds it most difficult to leave it” (quoted in *ibid.*, 112).

101. Third Session, 3 May 1951, p. 2.

102. *Ibid.*, 3.

103. *Ibid.*

104. *Ibid.*

105. On the usage of regression by psychoanalysts in the late twentieth century, especially in Britain, see Harold Stewart, “Regression Post-Ferenczi,” in Szekacs-Weisz and Keve, *Ferenczi and His World*, 129–37. On the reception of Balint’s ideas in Britain, see Shaul Bar-Haim, “The Psychoanalytic Languages: On the Intimate Rivalry of Michael Balint and D. W. Winnicott,” *PAH* 21.1 (2019), 73–103; Ken Robinson, “Primary Agreements and Disagreements: Michael Balint’s Reception in British Psychoanalysis,” paper presented at *The Balints and Their World: Object Relations and Beyond* (conference), Freud Museum, London, 9 December 2018.

106. See Sandor Ferenczi, “Confusion of the Tongues Between the Adults and the Child—(The Language of Tenderness and of Passion),” *IJP* 30 (1949 [1933]), 225–30.

107. Michael Balint, “Friendly Expanses—Horrid Empty Spaces,” *IJP* 36 (1955), 231. This article was later incorporated into Balint’s classic book *Thrills and Regressions* (London: Hogarth Press, 1959).

108. See Balint, “Friendly Expanses,” 229.

109. *Ibid.*, 230. On Balint’s philosophy of language, see Bar-Haim, “Psychoanalytic Languages”; Raluca Soreanu, “Michael Balint’s Word Trail: The ‘Ocnophil,’ the ‘Philobat,’ and Creative Dyads,” *PAH* 21.1 (2019), 53–72.

110. Balint, *The Doctor, His Patient*, 210.

111. See Sigmund Freud, *Introductory Lectures on Psycho-Analysis (1916–1917)*, *SE*, vol. 16, 450–51.

112. See, for example, Sandor Ferenczi, “The Principle of Relaxation and Neocatharsis,” *IJP* 11 (1930), 437.

113. See, for example, Julia Gyimesi, “Hypnotherapies in 20th-Century Hungary: The Extraordinary Career of Ferenc Völgyesi,” *HHS* 31.4 (2018), 58–82.

114. Balint, *The Doctor, His Patient*, 184.

115. *Ibid.*, 184–85.

116. *Ibid.*, 188.

117. *Ibid.*, 162.

118. *Ibid.* 163.

119. *Ibid.*, 164.

120. *Ibid.*, 165.

121. *Ibid.*

122. *Ibid.*, 166.

123. *Ibid.*

124. *Ibid.*, 167.

125. *Ibid.*

126. *Ibid.*, 168.

127. *Ibid.*, 169. It should be noted that from the late eighteenth century until the post-Second World War period, family doctors (physicians and later GPs) commonly served as obstetricians, either alone or in tandem with local midwives. This practice changed after the war, when they were replaced by professional midwives, but did not disappear until the 1970s. I would like to thank Angela Davis for helping me clarify this point. See also Irvine Loudon, “General Practitioners and Obstetrics: A Brief History,” *Journal of the Royal Society of Medicine* 11 (2008), 531–35.

128. Quoted in Jonathan Toms, “Political Dimensions of ‘The Psychosocial’: The 1948 International Congress on Mental Health and the Mental Hygiene Movement,” *HHS* 25.25 (2012), 102.

129. *Ibid.*, 104.

130. See, for example, D. W. Winnicott, “Some Thoughts on the Meaning of the Word Democracy,” *Human Relations* 3.2 (1950), 175–186.

131. Thus, for example, Chettiar argues: “Marriage therapy services were often provided by government employees and made available as a condition of national belonging and work-force participation, which had the effect of legitimating the desire for a fuller and deeper private emotional life as a basic guarantee of citizenship” (Chettiar, “More Than a Contract,” 591).

132. In the words of Sally Alexander, “maternal devotion, ordinary families in good enough homes as the basis for government, had become an orthodoxy—the maternal super-ego—of the post-war settlement; the political context in which they had been advocated (total war against fascism and Nazism, the need to strengthen the child’s inner aliveness and creativity as the foundation of mature independent citizens capable of withstanding totalitarian or dictatorial forms of thinking) forgotten or never known” (Sally Alexander, “D. W. Winnicott and the Social Democratic Vision,” in *Psychoanalysis in the Age of Totalitarianism*, ed. Matt fytche and Daniel Pick [New York: Routledge, 2016], 127).

Conclusion

1. This discussion draws on the work of a number of cultural historians who have shown the significance of the coronation in the formation of postwar British identity. See Frank Mort, *Capital Affairs: The Making of the Permissive Society* (New Haven, Conn.: Yale University Press, 2010), 25–48; Sonya Rose, “From the ‘New Jerusalem’ to the ‘Decline’ of the ‘New Elizabethan Age’: National Identity and Citizenship: Britain, 1945–56,” in *Histories of the Aftermath: The Legacies of the Second World War in Europe*, ed. Frank Biess and Robert G. Moeller (New York: Berghahn, 2010), 231–47; Billie Melman, *The Culture of History: English*

Uses of the Past, 1800–1953 (Oxford: Oxford University Press, 2006), 281–86; Wendy Webster, *Englishness and Empire, 1939–1965* (Oxford: Oxford University Press, 2005), 92–118; Richard Weight, *Patriots: National Identity in Britain, 1940–2000* (London: Macmillan, 2002), 227–39; and the now classic paper of Edward Shils and Michael Young, “The Meaning of the Coronation,” *Sociological Review* 1.2 (1953), 63–81.

2. Webster, *Englishness and Empire*, 98. Diana Taylor suggested that the royal funeral of Princess Diana in 1997 was another, if very different, monarchical “performance” that signified a real change in national “structures of feeling.” The royal family was reluctant at the beginning to acknowledge the tragic event as something that happened to one of their own. It was “the people” that demanded to honor highly popular Diana with a full royal ceremony: “The ritual, traditional to the extreme, could be read as a subversive reversal, for it was the public, not the crown, who ordered it. . . . The Queen is dead; long live Diana, the Queen of the people’s hearts. Diana was the new face of the new England—stylish, youthful, and compassionate” (Diana Taylor, “Dancing with Diana: A Study in Hauntology,” *TDR/The Drama Review* 43.1 [1999], 72).

3. For a previous attempt to celebrate a national recovery from the war, namely the Festival of Britain, see Becky Conekin, *The Autobiography of a Nation: The 1951 Festival of Britain* (Manchester, U.K.: Manchester University Press, 2003). However, while the 1951 festival celebrated mainly a “modern” ethos of consumption, technology, and science, the coronation could be seen as “a more reassuring balance of the modern and the quintessentially British” (246).

4. Webster, *Englishness and Empire*, 95. Webster refers, of course, to Benedict Anderson, *Imagined Communities: Reflections on the Origin and Spread of Nationalism*, rev. and extended ed. (London: Verso, 1991). On the role of monarchical ceremonies in the making of “Britishness,” see David Cannadine, “The Context, Performance and Meaning of Ritual: The British Monarchy and the Invention of Tradition, c. 1820–1977,” in *The Invention of Tradition*, ed. Eric Hobsbawm and Terence Ranger (Cambridge: Cambridge University Press, 1983), 101–64. Cannadine shows how, paradoxically, royal ceremonies became important from a national perspective only in the late nineteenth century, when the political influence of the royal family was in decline.

5. Annette Kuhn, *Family Secrets: Acts of Memory and Imagination* (London: Verso, 1995), 76.

6. *Ibid.*, 77.

7. Rose, “From the ‘New Jerusalem,’” 242–43. See also Jordanna Bailkin, *The Afterlife of Empire* (Berkeley: University of California Press, 2012), for an in-depth study of decolonization in postwar Britain.

8. See Peter H. Hansen, “Coronation Everest: Empire and Commonwealth in the ‘Second Elizabethan Age,’” in *British Culture and the End of Empire*, ed. Stuart Ward (Manchester, U.K.: Manchester University Press, 2001), 57–72.

9. All were dead by the time of the coronation, apart from Róheim, who died five days later.

10. See Ranjana Khanna, *Dark Continents: Psychoanalysis and Colonialism* (Durham, N.C.: Duke University Press, 2003).

11. The third influential anthropologist was William Robertson Smith, who was the exception, as discussed in Chapter 5.

12. On these “legacies,” see Anson Rabinbach, “Introduction: Legacies of Antifascism,” in “Legacies of Antifascism,” special issue, *New German Critique* 67 (Winter, 1996), 3–17;

Geoff Eley, “Legacies of Antifascism: Constructing Democracy in Postwar Europe,” in “Legacies of Antifascism,” special issue, *New German Critique* 67 (Winter 1996), 73–100.

13. See, in a different context, Jacqueline Rose, “Margaret Thatcher and Ruth Ellis,” *New Formations* 6 (1988), 3–27. One of the issues Rose’s essay addresses is “what happens when it is a woman who comes to embody the social at its most perverse” (4). For Rose, Thatcher’s success among British voters was a consequence of “the way she functions as both authority and fantasy” (22). This double function was based on her ability to embody a set of different feminine images: “from denial (‘People are more conscious of me being a woman than I am of being a woman’), through an embracing of the most phallic of self-images (the iron lady), to the insistence on her femininity as utterly banal (the housewife managing the purse-strings of the nation)” (19).

14. Andrew S. Thompson, “The Language of Imperialism and the Meanings of Empire: Imperial Discourse in British Politics, 1895–1914,” *JBS* 36.2 (1997), 175.

15. Catherine Hall and Sonya Rose, “Introduction: Being at Home with the Empire,” in *At Home with the Empire: Metropolitan Culture and the Imperial World*, ed. Catherine Hall and Sonya Rose (Cambridge: Cambridge University Press, 2006), 27.

16. Anne McClintock, “‘No Longer in a Future Heaven’: Women and Nationalism in South Africa,” *Transition* 51 (1991), 105.

17. Anderson, *Imagined Communities*, 7.

18. Andrew Parker et al., introduction to *Nationalisms and Sexualities*, ed. Andrew Parker et al. (London: Routledge, 1992), 6.

19. Linda Colley, *Forging the Nation, 1707–1837*, 4th ed. (New Haven, Conn.: Yale University Press, 2009).

20. *Ibid.*, 278.

21. Carolyn Steedman, *Landscape for a Good Woman: A Story of Two Lives* (London: Virago, 1986), 122.

22. William Beveridge, *Social Insurance and Allied Services* (London: H.M.S.O., 1942), 53.

23. See, for example, Martin Francis, “A Flight from Commitment? Domesticity, Adventure and the Masculine Imaginary in Britain After the Second World War,” *Gender and History* 19.1 (2007), 163–85. This is not to say that notions of masculinity itself were coherent and stable. Perceptions of masculinity significantly changed after the First World War, particularly because of the growing influence of the psychological discourse. See Michael Roper, “Between Manliness and Masculinity: The ‘War Generation’ and the Psychology of Fear in Britain, 1914–1950,” *JBS* 44.2 (2005), 343–62.

24. See Peter Lewis, “Mummy, Matron and the Maids: Feminine Presence and Absence in Male Institutions, 1934–63,” in *Manful Assertions: Masculinities in Britain Since 1800*, ed. Michael Roper and John Tosh (London: Routledge, 1991), 168–89.

25. See, for example, Mort, *Capital Affairs*, 52–55, on the notable Thursday Club in London. On the Victorian gentlemen’s club and masculinity, see John Tosh, *A Man’s Place: Masculinity and the Middle-Class Home in Victorian England* (New Haven, Conn.: Yale University Press, 1999), 127–29.

26. Matt Houlbrook and Chris Waters, “The Heart in Exile: Detachment and Desire in 1950s London,” *HWJ* 62.1 (2006), 145.

27. Frank Mort, “Social and Symbolic Fathers and Sons in Postwar Britain,” *JBS* 38.3 (1999), 369.

28. *Ibid.*, 355.

29. Geoff Eley, “Legacies of Antifascism,” 84.
30. Michael Roper, *Masculinity and the British Organization Man Since 1945* (Oxford: Oxford University Press, 1994), 11. Roper’s book offers a detailed account of the gendered dimensions of postwar “organization men.”
31. Rebecca Jo Plant and Marian van der Klein, introduction to *Maternalism Reconsidered: Motherhood, Welfare and Social Policy in the Twentieth Century*, ed. Marian van der Klein, Rebecca Jo Plant, Nichole Sanders, and Lori R. Weintrob (New York: Berghahn Books, 2012), 10.
32. Quoted in Seth Koven, “Borderlands: Women, Voluntary Action and Child Welfare in Great Britain 1840–1914,” in *Mothers of a New World: Maternalist Politics and the Origins of Welfare States*, ed. Seth Koven and Sonya Michel (New York: Routledge, 1993), 125.
33. This book, of course, has no intention of covering all mid-twentieth-century psychoanalytically oriented maternalists. One example of a potential “maternalist” that this book has not discussed is the psychoanalyst Lieutenant Colonel Claud Dangar Daly (1884–1950). Daly was analyzed by Jones, Freud, and Ferenczi, and wrote extensively on femininity and motherhood before and after the Second World War. See Akshi Singh, “A Soldier in the Psychoanalytic Army: Claud Daly’s ‘Defence of the Garrison,’” *PAH* 18.1 (2016), 71–92; Christiane Hartnack, *Psychoanalysis in Colonial India* (New Delhi: Oxford University Press, 2001), 61–75; and Mary Jane Lupton, *Menstruation and Psychoanalysis* (Urbana: University of Illinois Press, 1993), 109–46. Other “maternalists,” such as Robert Briffault or Tom Main, have been mentioned here, but they deserve much broader study.
34. Donald W. Winnicott, “Anxiety Associated with Insecurity” (1952) in *Collected Papers: Through Paediatrics to Psycho-Analysis* (London: Hogarth Press, 1975), 99.
35. Lisa Baraitser, *Maternal Encounters: The Ethics of Interruption* (London: Routledge, 2009), 11. See also, in this context, the [classic](#) essay by Sara Ruddick, “Maternal Thinking,” *Feminist Studies* 6.2 (1980), 342–67.
36. On motherhood in the neoliberal age, see Jacqueline Rose, *Mothers: An Essay on Love and Cruelty* (London: Faber and Faber, 2018).
37. Nikolas Rose and Peter Miller, “Political Power Beyond the State: Problematics of Government,” *British Journal of Sociology* 43.2 (1992), 196. See also the introduction to this book.
38. Michel Foucault, *The Birth of Biopolitics: Lectures at the Collège de France, 1978–79*, trans. Graham Burchell (Basingstoke, U.K.: Palgrave Macmillan, 2008), 187.
39. *Ibid.*, 87.
40. *Ibid.*, 186–87. It should be noted, however, that Foucault was ambivalent about this line of critique of the state. He acknowledged that whilst in the first half of the twentieth century there were good historical reasons for criticizing the state for its excessive power, in the neoliberal age of the late twentieth century the state became less interventionist than before. This is not to say that the situation now is better or worse, but that many critics did not grasp the massive change in the form of the state and the emergence of new neoliberal ways of “governmentality.” See also Paul Patton, “Foucault and Normative Political Philosophy: Liberal and Neo-Liberal Governmentality and Public Reason,” in *Foucault and Philosophy*, ed. Timothy O’Leary and Christopher Falzon (Chichester, U.K.: Wiley-Blackwell, 2010), 204–21.
41. Alan Sinfield, *Literature, Politics, and Culture in Postwar Britain*, new ed. (London: Athlone Press, 1997), 49. See also, in this context, Danae Karydaki, “National Socialism and the English Genius: Revisiting George Orwell’s Political Views on Nazi Ideology,” *Dapim: Studies on the Holocaust* 30.1 (2016), 53–73.

42. Eley, “Legacies of Antifascism,” 86.

43. See, for example, Luise Eichenbaum and Susie Orbach, *Outside In . . . Inside Out: Women’s Psychology: A Feminist Psychoanalytic Approach* (Harmondsworth, U.K.: Penguin Books, 1982); Sally Alexander, ed., “Psychoanalysis and History: Virtual Issue,” special issue, *History Workshop Journal* online (2018), accessed 28 September 2020, https://academic.oup.com/hwj/pages/psychoanalysis_virtual_issue.

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