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On Struggle, Survival and Psychoanalysis: The Budapest Polyclinic in the 1930s

In this paper, I look at the Budapest Polyclinic in the 1930s, one of the first free clinics of psychoanalysis, and I discuss its institutional struggles, which are important for a broader conversation on the boundaries of psychoanalysis, on the status of lay analysis, on money and the fee in psychoanalysis, and on the issue of practising psychoanalysis in a time of oppression and political unfreedom. Drawing on original archival material and on press coverage of the time, I capture the moment of emergence of the Budapest Polyclinic, but also a telling exchange of official letters on the status of lay analysts, taking place between the members of the Hungarian Psychoanalytical Society (and of the Budapest Polyclinic) and the Hungarian Ministry of Social Welfare. Happening in a moment of crisis and upsurge of fascism, in 1926 and after, this exchange shows the kinds of contestations that psychoanalysts in Budapest were met with, in their effort to open training to non-medically trained practitioners and to create a free psychoanalytic clinic. Officials in Hungary question psychoanalysis as 'not a science', susceptible of 'sexual saturation', and as having 'an arousing effect on laymen'. Psychoanalysts in Budapest respond with a letter-manifesto that defends the interdisciplinarity and autonomy of psychoanalysis, that situates it among other scientific discourses, and that also argues for the social mission of psychoanalysis. Ultimately, I trace infrastructural and institutional currents that animated psychoanalysis since its very beginning. I look at the concentric crises that psychoanalysis was bound to operate in and I ask questions about resilience and infrastructural invention.

Keywords: free psychoanalytic clinics, Budapest Polyclinic, lay analysis, money and the fee in psychoanalysis, infrastructural thinking.

Entering the Budapest Polyclinic

In the summer of 2023, during an archival trip to Budapest, with three other psychosocial researchers and historians of psychoanalysis, we arrived in front of a large multi-storeyed classical building in Budapest, built in the 1910s, and located at the corner of Mészáros and Ag streets.[1] We knew that this was the address of the Budapest Polyclinic, the free psychoanalytic clinic that opened its doors in 1931 in Budapest, and we wanted to trace the location of the apartment where the clinic operated. On that day, we were coming from Ferenczi's last residence, a villa on the Sunny Hill (Naphegy) in Budapest, found only a few minutes' walk away from the Polyclinic's address. At first, we lingered in front of a large wooden entrance gate. There was no obvious way to get into the building, but we decided to just wait at the gates. After being allowed in by one of the residents some time after, we stepped into the corridor, and walked up to the square inner yard, passing by an imposing dark-green metal-and-glass lift shaft. We imagined how it must have felt for the patients coming to the clinic to open these doors, or to walk across the courtyard, preparing themselves for their psychoanalytic sessions. We were arduously trying to work out – from limited archival clues – which of the twenty flats of the building hosted the clinic. We spent over an hour in the inner yard, and on the threshold of the staircase, while the only one of us who spoke Hungarian rang a door bell and was welcomed by an elderly resident, who held some memories of the building's life. It had been bombed in the Second World War and had survived all the turmoil of the twentieth century. I recall the joint intensity of sitting and waiting on the threshold, as the conversation was happening behind one of the closed green doors. It seems like heterogeneous traces were standing side by side, and the building we found ourselves in existed in a bifurcated temporality: both in 1930s and in 2023. It was both the site of the clinic and a regular private residence with locked gates. The conversation with the resident was also highly charged, as she showed one of us an original plan of the building from 1910, signed by its architect Frigyes Kovács (see figure 5), and she was willing to help us reconstitute the location of the clinic. It was a point of intensity, separated by over ninety years from its object of interest. A century after the plans for opening the Polyclinic began, the psychoanalytic field is still working out how to understand and to practice its social mission, and how to keep its individualising and privatising tendencies in check.

Later on, we were able to locate the apartment of the clinic: it was apartment 4, across the courtyard, on the left side. I also realised the difference between the original architectural plans, and the building as we encountered it in 2023: the façade and the upper floor are not the same in the two instances (see figures 5 and 6). The top of the building was damaged by the bombardments in the Second World War, and rebuilt.[2] In weaving together my archival notes, I recalled a scene from Sándor Márai's (1971/1996) *Memoir of Hungary*, where he describes his sense of loss but also strange feeling of freedom, after seeing the ruins of the library in his bourgeois family house, which had been hit by three bombs and some thirty grenades. With only some of the walls still standing and no roof, with dismembered books

[1] The researchers taking part in this field trip were: Julianna Pusztai, Lizaveta van Munsteren, Ana Tomcic and the author. We are all part of the FREEPSY interdisciplinary research project ('Free Clinics and a Psychoanalysis for the People: Progressive Histories, Collective Practices, Implications for our Times'), studying the legacies and practices of free psychoanalytic clinics around the world.

[2] Personal communication with Anna Borgos, on the basis of oral history.

scattered everywhere, Márai could experience an enforced parting with his material possessions and family legacy. As he writes (1971/1996, p. 113):

> The blasts had, like some paper mill, ground the books into a pulp. Still, one book with an undamaged title page lay on the rubbish pile right next to my top hat. I picked it up and read the title: *On the Care of a Middle-Class Dog*, this was its title. I stuck the book in my pocket and cautiously climbed down from the rubbish pile to the ground floor. At this moment – I later thought about this a lot – I felt a strange sense of relief.

Márai was part of the same intellectual circle as the psychoanalysts working in the Budapest Polyclinic. I believe most of them had an understanding of the complexities of their own class position. They saw that to the extent that they have material privilege, and access to space and knowledge, it is their responsibility to devise ways of practising psychoanalysis in a way that considers the less privileged, and also the social bond at large.

The Budapest Polyclinic opened its doors on the 18th December 1931. It was called Allgemeines Ambulatorium für Nerven- und Gemütsskranke (General Ambulatorium for Nervous and Mental Disorders). Its opening followed years of struggle and negotiations with the Ministry of Public Welfare in Hungary. The very name chosen, 'general ambulatorium' or 'general outpatient clinic', reflects this struggle and the fact the psychoanalysis was not regarded by the Hungarian authorities of the time as an independent science, but part of general psychology and neuropathology (Danto 2005, p. 233).[3] The authorities requested for this 'general' quality to be recorded in the name of the clinic, which was barred from calling itself 'psychoanalytic'.

A clipping from a newspaper of the days records the atmosphere of the clinic's launch: '[w]hile we are accustomed that, upon the inauguration of clinics, we get to admire state-of-the-art surgery rooms equipped with operating theatres and X-ray machines, this time we are welcomed by six plain offices, of puritan simplicity'[4]. The free clinic was located at 12 Mészáros Utca, in a building that belonged to Vilma Kovács's husband, Frigyes Kovács. Vilma Kovács was a key figure of the Budapest School, analysand of Ferenczi, and also mother of Alice Bálint, Michael Bálint's wife. The apartment where the clinic operated was situated on the mezzanine floor and could be accessed from a square inner courtyard, typical for Budapest city architecture of the time. The Hungarian Psychoanalytical Society rented and refashioned the space into five consulting rooms and a large vestibule or meeting area, where the Society was holding its meetings, lectures and training seminars, and which also hosted the library. The vestibule could be separated through a heavy curtain into two spaces, one that served as a waiting room for patients, and the other for the administrative use of the clinic. As psychoanalyst Judith Dupont – granddaughter of Vilma Kovács – evokes, the walls of the high-ceiling meeting had conference programmes and flyers on display and some issues of the journal *Gyógyászat* (*Therapeutics*) at hand (Danto 2005, p. 234). In the interwar period, several members of the psychoanalytic society contributed to this radical and interdisciplinary publication.

[3] Ferenczi records this this in a letter to Freud. See letter no. 1206 of May 31, 1931 (Freud, Ferenczi, & Brabant, Falzeder & Giampieri-Deutsch 1993, p. 411).
[4] MH 19/12/1931.

As Judith Dupont documents (2015, pp. 22-23, in Borgos 2021, p. 156), a web of family and psychoanalytic connections made the address 12 Mészáros Utca a point of reference on the intellectual and cultural circuits of interwar Budapest:

> In the Buda building of 12 Mészáros street […] my parents and I lived on the fifth floor, next to my grandmother's widowed sister, Irén Székely. The Bálints lived on the fourth, my uncle Ferenc on the third, Nóra, one of my father's sisters and her family on the second and Erzsébet Bér, my grandmother's cousin, on the ground floor. Let us add that Mimi Keifel, the German lady who took care of my cousin János Bálint, and me also lived on the fifth. On the ground floor there was the psychoanalytic polyclinic, the first in its genre to operate, led by Sándor Ferenczi: most psychoanalysts, including Mihály Bálint and my aunt, Alice, worked there for one or two days a week for free.

The same newspaper article I cited above, after announcing the opening of the Polyclinic, goes on to detail for the general public, in an appealing paragraph, the aims of the clinic and its working methods.[5] Perhaps following up on Ferenczi's interest in the professional hypocrisy/sincerity,[6] the journalist puts 'intuition' and 'honesty' at the centre of the overview of the psychoanalytic method:

> The institute was founded with the purpose to cure psychological disorders, the psychoanalysts' main instrument in achieving this being human understanding and intuition. Their working method: a doctor always works one-on-one with the patient. In addition to treating mental illness, the new institute has other aims as well, namely the training of psychoanalyst-doctors and to offer educational counselling. The educational counsellor shall also treat children who are difficult to educate, by analysing and mapping out the origins of their problems and the roots of their inhibitions and lastly cure them, with the powerful weapon of honesty.

There is an inscription in the statute of the Budapest Polyclinic which makes its social mission central. It is stated that only people who cannot afford to pay regular fees, or 'only justified poor outpatients'[7] are accepted to the clinic. In other words, it is a clinic for the poor. The statute of the Hungarian Psychoanalytical Society was revised on December 7 1931, a couple

[5] MH 19/12/1931.

[6] The ideas of 'sincerity' and 'hypocrisy' are at the centre of Ferenczi's clinical and political vocabulary. The work of psychic reconstruction that the psychoanalytic process entails can only be attained, in Ferenczi's view, if the analyst practices a particular sort of clinical sincerity which is in direct contrast to the denial that the patient would have experienced in childhood. This clinical sincerity (the counterpoint of professional hypocrisy) makes it possible for the patient to experience the traumatic events of the past as thoughts or as objective memories, not only as hallucinatory reproductions. The new position of clinical sincerity taken by the analyst is akin to a new environment, or a set of 'new conditions', which can lead to a new psychic resolution for the patient. Ferenczi argues that '[t]he most essential aspect of the altered repetition is the relinquishing of one own's rigid authority and the hostility hidden in it. The relief that is obtained thereby is then not transient and the convictions derived in this way are also more deeply rooted' (Ferenczi 1932, p. 108).

[7] See Hungarian Telegraph Office Archive, 25 June 1931, cited in Borgos (2015, p. 36).

of weeks before the official opening of the clinic.[8] It was refashioned to reflect the new realities of the Polyclinic, and the existence and functioning of the free clinic were at the centre of the revised statute:

> Only patients who are not able to pay the current minimum fees of the Budapest Medical Association (BMA) because of their financial situation (situation which they must prove in the form of a poverty certificate, tax register, etc.) may be admitted for treatment.

The question of the fee for the session is important here. There are enough archival traces to establish that the psychoanalysts of the Budapest Polyclinic gave this extensive thought. The analysts worked for free, while the patients paid a minimal amount, and only if they could (around 5 pengős) (Borgos 2021, p. 156).[9] In terms of its own economy and institutional life, the Polyclinic was self-sustaining. It relied on members' contributions, course fees and small donations from patients. Let us look at another section from the same Statute of the Hungarian Psychoanalytical Society, ratified in December 1931,[10] which both establishes the meaningful presence of a fee for psychoanalytic treatment, but also takes the necessary precautions so that the offer of the Polyclinic stays in the realm it was intended for – the poor, the destitute, those who cannot afford higher fees. The fee thus effectively varies from zero payment to 50% of the minimum fee as set at the time by the medical association in Budapest:

> The Institute's services are free of charge. The only exception is psychoanalytic treatment, when justified by the therapeutic objectives, in the patient's best interest. Psychoanalysis, in the interest of the patient's desired healing, is generally provided only against payment of a financial contribution, the amount of which is left to the patient's discretion. These amounts are paid directly into the Institute's treasury. Physicians are forbidden to accept money of any kind. If the said fee is more than 50% of the minimum fee laid down by BMA [Budapest Medical Association], the patient cannot be treated at the Institute.

The economy of the fees in the Budapest Polyclinic is intimately connected to the economy of training. There is a particular ethos of training emerging from documents of process of the Hungarian Psychoanalytical Society. The operation of the Polyclinic is not treated as a 'special project', or an interest of a few members with a more left-leaning orientation. Instead, it is assumed a core project, which is the shared responsibility of all members of the psychoanalytic society. There is a collective investment in creating a process that allows both marginal people to have access to psychoanalytic treatment *and* candidates without economic means to be have access to training, through the same set of linked guidelines. Furthermore, this economy of the Polyclinic means that there is no sharp separation between the generations, or between training (senior) clinicians or in-training (junior) psychoanalysts. Seeing poor patients is not regarded as a way of facilitating training activities, or ensuring

[8] See Statute of the Hungarian Psychoanalytical Society was revised, December 7 1931.
[9] One pengő was equivalent to approximately 0.2 of a dollar at that time, which means that the value of the session was 1 dollar.
[10] See Statute of the Hungarian Psychoanalytical Society was revised, December 7 1931.

access to ‘training cases’, but it is a goal in itself. If anything, senior analysts are further bound to this economy, by stating that in the case they cannot contribute with their labour to this arrangement, they will still need to cover the equivalent of this contribution in money, or by offering training analysis free of charge. The idea of ‘free training’ is part of this economy, giving a radical destiny to the question of psychoanalytic formation, which is notoriously expensive and thus exclusionary for those who cannot afford to pay. Getting close to the logic of these guidelines could have important ramifications for the organisation of contemporary free clinics of psychoanalysis, especially if they are linked to psychoanalytical societies, by offering a possible model for binding together the system of fees to the system of training. It can also be of interest to the many clinics around the world who are currently putting together free and open trainings,[11] radically different from the classical IPA trainings offered by psychoanalytical societies.

In the document accompanying the statute, called ‘Provisional Guidelines for the Operation of the Training Committee’,[12] two paragraphs of ‘part I’ are dedicated to the functioning of the Polyclinic, and articulate this joint economy of fees and training:

> [2] Every practising psychoanalyst member of the Association is required to spend 6 hours per week treating the patient/patients referred to him by the Institute. This obligation can be waived against a monthly fee, payable annually for at least 10 months. The amount of this fee shall be fixed jointly by the head of the Institute, the treasurer of the Association and the member concerned. If they cannot agree, the matter shall be referred to the Committee, which shall take a final decision.
> The same obligation applies to candidates who are already working under supervision. However, candidates may not waive this obligation.
> In duly justified cases, the Committee may waive this obligation for a limited period. The exemption may be extended.
> [3] Training analysts may also pay off this obligation by performing training analysis free of charge. These cases must as well be notified to the Institution. Any vacancy for a free training place must be notified immediately to both the secretary of the Committee and the head of the Institute.

The Budapest Polyclinic thus differed from other early psychoanalytic clinics in that it considered therapy to be its primary mission, with training taking second place. This order of priorities was widely debated and contested among its members, but ultimately passed the test of collective consensus. We could say that the Polyclinic had consistent autonomy in relation to the Hungarian Society: it was a fully-fledged therapeutic and training establishment. Michael Balint was energetically involved in ensuring this configuration. As he recounts in an interview: ‘training should be integrated into this therapeutic work, and not the other way around. The clinic's first commitment is to therapy, and when therapy is offered on a permanent basis, training can be easily integrated’ (Swerdloff 2002, p. 390). Overall, the work of the Polyclinic showed great concern for the social issues of the time.

[11] See for example the open formation offered by the collective Margens Clínicas (São Paulo, Brazil) formed in 2012. See Poli dos Santos (2022).

[12] Provisional Guidelines for the Operation of the Training Committee, annex to the Statute of the Hungarian Psychoanalytical Society was revised, December 7 1931.

Even before the opening of the clinic, Mészáros Utca 12 was a well-known meeting place for psychoanalysts, writers and musicians. With the clinic, Friday meetings became regular, and they brought together Sándor Ferenczi, Alice and Michael Balint, Vilma Kovács, and also Endre Almássy, Robert Bak, Lilly Hajdu, Imre Hermann, István Hollós, Kata Lévy, Géza Róheim, Edith Gyömrői, and Lilian Rotter. Through a special arrangement, Endre Almásy lived in a room at the clinic in exchange for a taking up the role of the clinic's assistant (Danto 2015, p. 234). Senior analysts gave lectures, and they were followed by a seminar in psychoanalytic technique, led by Vilma Kovács. Here, cases were presented and discussions on countertransference were given a key place. It is also here that the particularities of the Hungarian training system emerged, making the analysis of the countertransference of the analyst to their patient an essential part of psychoanalytic training. This is discussed by Vilma Kovács (1936) in her paper 'Training and Control Analysis'. In April 1933, following up on Ferenczi's suggestion (who died just three weeks later), the gratitude of the Society for her successful training activities was recorded in the minutes (Borgos 2021, p. 156).

Another little-known characteristic of the clinic is the place that children had within its population of patients. Both adult and child patients were referred to the clinic by physicians. The very first patients at Mészáros Utca 12 were children. As Elizabeth Danto (2005, p. 234) records, drawing on an interview with Judith Dupont, '[o]ne tall pale girl, from a family so poor they ate nothing but potatoes morning, noon, and night, was brought to the clinic faint from crying for days. Her younger sister seemed fine, more concerned about her sibling's sadness than her own lack of food'. The analysts were invested in working out why the two sisters responded so differently to the same situation. Working with children brought a lot of valuable clinical insights to the analysts working in the Polyclinic. Let us consider, for instance, Alice Balint's (1931) work *Psycho-analysis of the Nursery*.[13]

This 'economy' of the Budapest Polyclinic, integrating so closely the issue of training with that of the social mission of psychoanalysis, was marked by the political views of the psychoanalysts involved in its creation – especially by Sándor Ferenczi's political sensibilities. Overall, the Budapest School of Psychoanalysis and Ferenczi were further to the left than their Viennese counterparts. Their political background could be described as liberal radicalism. Compared to Freud, Ferenczi emphasised certain social aspects of the theory, and he thought about power, authority, submission, the nature of the social bond and the possibility of the collective (Nyiri 1980, Harmat 1984, Soreanu 2018). As a neurologist, working in a hospital setting, he encountered many 'outcasts', such as prostitutes or homeless people. He was keenly aware of the incapacity of the mental health service and social services in Budapest to accommodate the needs of the poor. In 1929, Ferenczi oversaw the translation to German of ` memoir written by one of his patients who committed suicide; it was published by the journal *Zeitschrift für Psychoanalytische Pädagogik*. Ferenczi also wrote an introductory note to this publication, titled 'From the Childhood of a Young Proletarian Girl' ['Aus der Kindheit eines Proletarmädchens'], which is meant to give an insight into the way the failure of the public mental health system can lead to extreme suffering and to loss of life. Ferenczi himself had invited his nineteen-year-old patient to write her memoir, as part of the therapeutic process.

[13] Alice Balint's book *Psycho-analysis of the Nursery* (translated to English in 1953, 22 years after its publication in Hungarian, in 1931) brings important constructions on the relationship between psychoanalysis and education, on the role of psychoanalytic insight for children, and on key theoretical topics such as the Oedipus complex and identification.

The published notes capture the first ten years of her life, and create a sharp window into what the life of a poor child looked like in the 1920s in Hungary. Ferenczi sets the stage from the beginning for the readers, and invites them to tune in to the exceptional qualities of his patient: 'I found her to be highly developed and unexpectedly deeply educated; her views [were] […] somewhat refined, and her morals were sound' (1929, p. 141, my translation). Ferenczi also stresses in his introduction that the patient could not satisfy her desire for knowledge and art, due to her poverty. The patient diary has a striking opening and it reads: 'Inner life is like a sensitive, independent instrument. The slightest touch of a single key is enough to set off a chain reaction that runs through the entire scale, awakening the most distant tones' (Ferenczi, 1929, p. 142). The young patient continues with lucid psychosocial commentary (Ibid., pp. 155-156):

> Rich children find it easy to learn all kinds of things; for them, it is a mere distraction, for which they receive praise and chocolate at home when they do well. Their memories are not burdened with so many horrors from which they cannot free themselves. What's more, they are treated with special respect by their teachers at school. That's how it was in our school. Although the children deserve a little more tenderness and humanity, which they do not receive at home, the adults are insensitive and blind to the suffering of the children, as I have experienced time and time again. Those who do not exude the beauty, health, and freshness that youth bestows […] are despised by them. They consider these poor, neglected, crippled, fearful, and oppressed children to be devious and make their misery even worse through their insensitivity. They do not consider that it is only the sin of the grown-ups if these children are deceitful and malicious!

The Inauguration of the Budapest Polyclinic

In 2017, I spent extensive time studying the Michael Balint Archive, which had recently arrived at the British Psychoanalytical Society, through the generosity of psychoanalyst and historian André Haynal, who had taken exquisite care of it. Although this large archive was very well-organised and obviously much loved by its previous owner, it was still uncatalogued, so I had the fortune of approaching it through many points of entry, following multiple threads of correspondence, and browsing through the rich records of the first Balint groups that Michael Balint ran, as he and Enid Balint invented and expanded this group method.[14] After several months of work with the archive, as I was going through a box that contained many kinds of material, from notebooks, to photos, to postcards, I came across a light brown envelope. Inside it, I found a bunch of typed papers, newspaper clippings, some letters and even building plans. With excitement, despite the fact that I understand only very limited Hungarian, I worked out that the envelope contained materials that referred to the Budapest Polyclinic. I realised there were statutes of the clinic from the year it was founded, and some earlier official correspondence referring to the question of lay analysis in Budapest. There were also several newspaper clippings, all recording how the local press in Budapest captured

[14] I would like to thank Judit Szekacs and the Archive Committee of the British Psychoanalytical Society for facilitating my access to the Balint Archive. I would also like to thank archivists Joanne Halford and Ewan O'Neill.

the opening of the clinic on December 18 1931: they were articles from December 19 published by the main Budapest newspapers.

It took six years to fully traverse and translate this material,[15] and to further disentangle it through two archival trips in Budapest, at the Ferenczi House Archive[16] and other archives in Budapest. I now imagine it could have been Sándor Ferenczi himself who preserved the material in the brown envelope, and then passed it over to Michael Balint. I also image the collective of psychoanalysts of the Polyclinic sitting together and going through the press coverage, discussing how the opening of the clinic was reflected in the public space the day after the event. They perhaps opened the heavy curtain in the vestibule of the clinic, which joined up the space to create the meeting room, allowing them to sit together and flick through the newspapers. The clippings I found are fragile, printed on thin yellow wood-pulp paper. They create a window into the day the clinic was inaugurated: a kind of outside-in view, recording what the journalists picked up from the speeches of the psychoanalysts present there on the day. It is this outside-in view, from the public to the space of the clinic, that I would like to assemble here.

All the articles on the inauguration of the Budapest Polyclinic inscribe this free clinic in a tradition, starting with Freud, but having travelled from Vienna to London, Berlin and New York. One article notes that the clinic has been on the minds of Hungarian psychoanalysts for a while, and it finally materialised with the opening of an 'experimental' clinic on 1 July 1931 at Mészáros Utca 12.[17] Another article records Michael Balint's intervention (or Mihály Bálint, if we observe his Hungarian name before the move to the UK in 1929), as a Deputy Director of the Polyclinic. Balint states that at the time of the inauguration, in December 1931, there are 31 analytic treatments going on in parallel, accounting for a total of 120 hours per week. He highlights this as is a remarkable achievement, considering that the Association has only 21 members in total.[18] He also details for those present another 'experiment' that is ongoing at the Polyclinic, which he calls 'analytic conversations': this refers to a less intense analytic cure, with one or two sessions a week (instead of the usual five times a week treatment).[19] While Balint states clearly that not enough evidence has been gathered on the value of the 'analytic conversations', he also mentions that this was an adaptation that was necessity-driven, and that it opened interesting possibilities for practising psychoanalysis. I read this as a trace of the 'elasticity' of psychoanalytic technique in the space of the free psychoanalytic clinic of Budapest: the five times a week rule was adapted to the circumstances of reality and to the needs of the patients.

On the day of the opening, five psychoanalysts involved in the works of the clinic spoke: Sándor Ferenczi, Michael Balint, Imre Hermann, Margarit Dubovitz and István Hollós. They all brought different angles on the place of the clinic in the wider society, on its social

[15] I thank translator Krisztina Vladu for the help with the translation of the archival documents and newspaper articles referenced throughout the piece.
[16] I would like to thank Antal Bókay, Judith Mészáros, Mónika Takács, and the Ferenczi House Budapest for facilitating the access to the Ferenczi House archive. I would also like to thank researchers Ráhel Csizmadia and Bertalan Balázs Sütő for their help with the translations from
[17] Article [2].
[18] Article [3].
[19] Idem.

responsibility, on its principles and modes of functioning, and on its connection to the psychiatric establishment and the university. In reading all the paper clippings together, what comes across is a kind of transparency about the struggles which the collective had encountered up to that point, and on the unique place psychoanalysis occupies in approaching mental illness.

Apart from the collective of the clinic, guests and journalists, a few official figures were present at the inauguration. They were Achilles Rostagny, Chief Notary, Deputy Head of the Capital's Public Health Department; Péter Németh, President of the Court, Head of the Juvenile Court; and Rudolf Fabinyi, Director of the mental hospital of Lipótmező. Achilles Rostagny conveyed the greetings of the Capital and congratulated the Hungarian Psychoanalytical Society for having set the grounds for an institution of great scientific and public health importance, by their own efforts.[20] One of the newspaper articles records an important detail, capturing the status of psychoanalysis in the thirties in Hungary – present and alive in the cultural discourse at large and in the public consciousness, but in tension with state authorities and medical establishment: Ferenczi, the Director of the Polyclinic, states that he is very moved in receiving the greetings of the Capital, this being the first official recognition he is given in Hungary, after twenty-five years of hard work.[21]

While this punctuates the way Ferenczi must have felt at the time, there is a previous moment when he was officially recognised, even if this was short-lived. In 1918, around 80 medical students asked the rector of the University in Budapest for Ferenczi to be invited to give university lectures on psychoanalysis. Against the initial resistance of the professorial council, Ferenczi was appointed university professor by Zsigmond Kunfi, the Social Democratic People's Commissar for Education, after the proclamation of the Republic formed jointly by Communists and Social Democrats in April 1919 (Harmat 1984, p. 255). This was the first appointment of a psychoanalyst as a university professor. In August 1919, after the fall of the Soviet Republic, an extreme right-wing and antisemitic regime (under Admiral Horthy) came to power. Ferenczi was removed from his university position and expelled from the Budapest Medical Association (Harmat 1984, p. 255). Two psychoanalysts who had been closely associated with the communist organs, Jenö Hárnik and Sándor Radó, were forced to emigrate (Harmat 1971). With the new Horthy regime, psychoanalysis became a tolerated practice in a reactionary society.

It is this history of struggle that traverses Ferenczi's brief intervention on the day of the launch of the Polyclinic, and it is captured by the journalists present. Ferenczi states that the history of psychoanalysis is marked by a series of 'rejections', both by academic forums and by private individuals.[22] Interestingly, he adds that one of the first countries to understand the great importance of psychoanalysis was Hungary.[23] This led to the creation of the Hungarian Psychoanalytical Society in 1913, with only five founding psychoanalysts. Ferenczi continues by saying that he sees in the authorisation and official recognition of the Polyclinic a sign of validation of the 'psychoanalytic ideal'. The Institute not only fulfils a social mission by making this therapeutic method accessible to the poor, but also provides an opportunity for

[20] Article [1].
[21] Idem.
[22] Idem.
[23] Idem.

professionals to train in the practice and theory of psychoanalysis.[24] Furthermore, the space of the Polyclinic also constitutes the meeting place for the members of the Hungarian Psychoanalytical Society, thus on its way to becoming the epicentre of the Hungarian psychoanalytic movement, where, in addition to treatment, counselling and teaching, educational and public-orientated work is also carried out.[25] Ferenczi finally draws attention to the fact that the Institute was founded and is maintained by the efforts of its members, without any external support.[26]

Michael Balint followed Ferenczi, and detailed the functioning of the Polyclinic, as I mentioned above. Imre Hermann was the third voice to be heard, and he spoke about the teaching work carried out in the Polyclinic and about its permeability and orientation to the public. Hermann pointed out that the practising psychoanalyst needs not only theoretical knowledge, but also the mastery of the 'analytic spirit', which can only be acquired by placing the trainee in the direct working environment of a practicing analyst.[27] He here mentioned the role of the trainee's own analytic process. He also stressed that one of the roles of the free clinic is to expose the analysts in training to varied patient material. Another role is to provide space for theoretical education. He reminded those present that for several years the Society had organised a series of regular lectures and seminars for people who want to learn about the theory of psychoanalysis – these would continue to be offered at the Polyclinic.[28] Hermann also invited the public to use the Society's library, now also found at the address at the Polyclinic: it contained a rich collection of psychoanalytic literature, and some literature of the 'frontier sciences'.[29]

The next intervention of the day was made by Margit Dubovitz, who interestingly focused on the pedagogical importance of the work done at the Polyclinic, namely the counselling of parents with difficult children.[30] Just as in the case of analytic treatment, this type of counselling has as an aim exploring the conflicts in the child's psyche and mapping out the role of the unconscious. Dubovitz pointed out the method is also identical: 'honest discussion' of all the issues that arise with the child and, if possible, with the parents. She gave the example of a case of a little girl who was able to overcome the great difficulties she had in going to school by allowing a discussion on the conflict arising from her Oedipus complex.[31] Dubovitz concluded that all educators and doctors who work with children should have a psychoanalytic approach, because analysis reveals and makes the child's soul understandable.[32]

István Hollós spoke about the psychiatric aspects of the work at the institute. He explained that psychiatry and psychoanalysis can both benefit greatly from collaboration and mutual learning.[33] He formulated the urgent necessity for more psychiatrists to train as analysts [3].

[24] Article [3].
[25] Idem.
[26] Idem.
[27] Articles [1 & 3].
[28] Article [3].
[29] Idem.
[30] Articles [1 & 3].
[31] Article [3].
[32] Article [1].
[33] Idem.

Psychoanalysis, in his view, can make an intervention for those patients who do not yet or no longer need to be institutionalised.[34]

These interventions considered together locate psychoanalysis in an interdisciplinary, porous and permeable configuration, vibrantly aware of the social issues of the time, and energetically mobilised to take a position in defence of those who are most marginal and underprivileged.

The Struggle over the Heart of Psychoanalysis

We have so far looked at a moment of important institutional creation: a moment when a set of principles and ideals about what psychoanalysis is and what it can be were put into practice and into process. The opening of the space at Mészáros Utca 12 was a moment of crystallising plans and collective intentions, but also one preceded by difficult conflicts and struggles. Drawing on archival material, mostly found in the same brown envelope I mentioned above, I capture a telling exchange of official letters on the status of lay analysts, taking place between the members of the Psychoanalytical Society of Budapest (and of the Budapest Polyclinic) and the Hungarian Ministry of Social Welfare. Happening in a moment of crisis and upsurge of fascism, in 1926 and after, this exchange shows the kinds of contestations that psychoanalysts in Budapest were met with, in their effort to open training to non-medically trained practitioners, thus maintaining psychoanalysis porous to other discourses, as well as preserving its multidisciplinary and non-mainstream qualities. Officials in Hungary question psychoanalysis as 'not a science', susceptible of 'sexual saturation', and state that it has 'an arousing effect on laymen'. Psychoanalysts in Budapest respond with a letter-manifesto that defends the interdisciplinarity and autonomy of psychoanalysis, that situates it among other scientific discourses, and that also argues for the social mission of psychoanalysis.

The focus point of the exchange of letters is the question of lay analysis, its pursuit by the members of the Hungarian Psychoanalytical Society, and its prohibition by the authorities of the time. The way the question of lay analysis is framed, however, creates a much broader insight into the status of psychoanalysis in 1920s and 1930s in Budapest. The exchange of letters follows from the Hungarian Psychoanalytical Society's submission of a revision of its statute, which would have allowed the formation of 'lay' (non-medically trained) psychoanalysts. The Hungarian Ministry of Social Welfare opposes this change, and formulates this opposition in a letter addressed on August 24 2026 to the Minister of Interior. Let us look at an extended excerpt of this letter:

> For the Society, by intending to admit as a member, without further comprehensive intellectual assessments, any individual aged 24 or beyond who is engaged in an independent or commendable activity in the scientific or practical field of psychoanalysis, opens the door wide to the influx of unauthorized elements. It is true that the association shall thus benefit from ample financial resources in the form of membership fees and a substantial

[34] Idem.

> annual literary allowance, but it shall proliferate with members who, because of the orientation of psychoanalysis to sexual matters, wish only to satisfy their sensuality and curiosity about sex.
> Psychoanalysis is not a science in its own right, it is merely a modern branch of psychology, its scientific value is doubtful, at any rate, its doctrines have come under strong attack from many serious, great scientists, and especially psychoanalysis, because of its sexual saturation, has not as much an enlightening but rather an arousing effect on laymen. It is therefore desirable that psychoanalysis should be practised only by medically qualified practitioners.
> In the light of the foregoing, I can only give my approval of the amended statutes in question if they distinguish between ordinary and honorary members only and maintain unchanged at least the provision in §4 (2) of the old statutes according to which only a person who holds an academic degree (title of scientist) or has performed independent and commendable activities in the intellectual or natural sciences may become an ordinary member. It should also be stated that the Society may admit foreign nationals as members only with the consent Your Excellency.

In this letter and all their communications, the authorities of the Hungarian Ministry of Social Welfare propose a sharp separation between medical doctors and 'others', and do not give in to the Society's insistence on being allowed to train 'laymen'.

Furthermore, the expert opinion of the State Public Health Council of the Ministry of Social Welfare, dated September 19 1927, offers a summary stressing again that 'psychoanalysis is not a science' and it is 'over-saturated with sexual aspects'. It goes on to say that the opinion of the Council is that it is 'highly recommended that the psychoanalytic association should select its members strictly, limiting admission only to individuals with a medical degree, otherwise it is to be feared that the Hungarian Psychoanalytical Association would become a centre for the pseudo-scientific tackling of sexual experiences under the guise of science.' The letter references an additional note submitted by Imre Herman, then the Secretary of the Hungarian Psychoanalytical Association, in support of the case for lay analysis, as not containing any new date or arguments. The decision to prevent non-medically trained professionals is maintained. The expert opinion, in another section, calls for the additional opinion of the Ministry of Religion and Public Education, thus inviting further official scrutiny and surveillance.

One year and a half later, on February 4 1928, lawyer Géza Dukes, who was representing the Society's case, submits an elaborate response to the letter cited above, which is addressed to the Ministry of Interior. This response is very likely to have been a collectively formulated text by the members of the Society. I include below the text annexed to this extraordinary letter:

> From Aristotle to the present day, many scientists have attempted to divide the sciences, with little success, because the scientific methods and the areas that science can explore change over time. Sciences that seem to be independent of each other come into close contact, such as physics and chemistry most recently, while the formerly part-sciences gain independence,

such as psychology itself, which used to be a branch of philosophy or theology. What makes a discipline autonomous is its specific method and the specific field of knowledge that can be explored through this method. Everyone agrees that the method of psychoanalysis is different from other medical and psychological methods, and that it has its own specific field of knowledge is tangible and demonstrated in our days by a whole library's worth of literature which has been written by psychoanalysts and which has been able to reveal the meaningful psychological aspects of phenomena of individual psychology, both healthy and pathological, of folk psychology and of biology, which were hitherto thought to be meaningless. It goes without saying that the autonomy of the sciences does not imply a complete separation from other sciences, and that is true not only for psychoanalysis but for all disciplines, which are linked to other sciences by many threads. As much as mathematics may appear to be a science in its own right, it nevertheless contains many questions that border upon logic, philosophy and psychology and in its applications comes into contact with all natural sciences.

The autonomy of psychoanalysis also follows from the fact that its mastery cannot be expected from reading one or two books, but only from long personal preparation, from the systematic practice of the Socratic *gnothi seauton*,[35] from a long series of experiences with others and from laborious literary studies.

It is true that psychoanalysis has been and still is strongly attacked by many serious scholars of high repute. In contrast, however, there are many serious, eminent scientists who, though not psychoanalysts themselves, can see and appreciate the importance of this new science. We may mention one of the leading figures in logic today, B. Russell, or the famous psychologist McDougall, or the psychiatrists E. Bleuler of Zurich, K. Goldstein of Frankfurt, R. Sommer of Giessen. One of the foremost scholars of child psychology, the Hamburg professor W. Stern, has recently dropped his former dismissive attitude and replaced it with a more fair-minded one, thus joining in his friendly attitude that of the Geneva professor E. Claparède. Anyone who has flipped through the book *Medical Psychology* of the famous psychiatry teacher E. Kretschmer of Marburg will see what non-psychoanalytic psychiatry owes to psychoanalysis.

Also within the framework of psychoanalytic associations we meet with the names of serious and eminent scientists: university professors Bouman in Amsterdam, Jelgersma in Leyden, Tansley in Cambridge, Flournoy in Geneva, Minkowski in Zurich, Piaget in Neuchatel, Schneider in Riga, Friedjung in Vienna, Pötzl in Prague, Schilder in Vienna; aside from the fact that the professionalism of the professor Freud of Vienna has never been doubted by any truly serious and eminent scholar.

[35] 'Gnothi seauton' is the Ancient Greek phrase for 'Know thyself' (γνῶθι σεαυτόν).

The development of psychoanalysis so far has shown that although it is mainly practised by doctors by virtue of their competence, several discoveries in its realm can be attributed to non-physicians. This is one of the reasons why we should not exclude non-physicians, at least from membership, but a more important reason is that teachers and clergymen are by vocation necessarily interested in psychoanalysis. Pastor Pfister of Zurich himself was a pioneer, but he is no longer the only pastor who declares to be a believer in psychoanalysis. The German medical and theological community has given psychoanalysis a rightful place.

The above may also shed some light on the question of whether psychoanalysts deal with sexuality for the purpose of arousing the senses. I believe that it is precisely the psychoanalytic associations that must take care that their science is not discredited by individuals (elements) who are unable to distinguish life's serious issues from frivolity. The accusation has been made more than once that psychoanalysts are sectarians, isolating themselves from others too much. If we point out that our association, which has been in existence for 14 years, has 15 members, we can prove, firstly, that we do not seek to excite the sexuality of the public and, secondly, that we do not aim to gather many members. An influx of unauthorised elements would do us the most harm, we know this well and we feel our responsibility to science on the one hand and to our sister associations on the other.

We do not think that we would admit members without any higher intellectual censorship if we demanded from them 'independent and commendable activity in the scientific or practical field of psychoanalysis', since, as we have already indicated, the correct mastery of psychoanalysis is not an easy task and those who have been able to do it certainly belong to the higher intellectuals, even if they only have a degree in school-teaching. As for the financial means of the association, it should be pointed out that the association itself does not need financial means, but it may need financial support for poor patients who are taken on by the association's doctor-members or remedial teachers. The association is of the opinion that the benefits of psychoanalytic treatment should not be available only to the rich.

Finally, I would like to point it out that membership in the association should not be confused with the right to carry out psychoanalytic treatment. Membership promotes the theoretical activities, and the right to the practical profession is determined by national legislation anyway.

The Association would readily agree that a foreign national may be admitted as an honorary member only with the consent of Your Excellency, Minister of the Interior.

One of the ways to approach this letter is as a manifesto in defence of the place of psychoanalysis among the other sciences. It paints a fresh and dynamic picture of the relation between different sciences, where boundaries shift or are permeated, scientific discourses

bifurcate into new directions, there is contagion and one can count on mutual influence. There are other works of the Budapest School voices that offer a critique of science that is much ahead of its time, and resonate with the manifesto. In 1933, Ferenczi cautions against the perils of a medical science that proceeds rigidly by looking, as if hypnotized, into the microscope (1933, 146–147). Ferenczi also proposes a horizontal model of the encounter between the sciences, where each scientific discourse has the attribute of bringing insight into a particular semiotic code, while none of the codes is deemed superior. The final chapter of *The Development of Psychoanalysis*, a book co-authored by Ferenczi and Otto Rank, brings elements of a utopia of the unification of the natural and mental sciences, with psychoanalysis taking up the role of making the integration. Within this utopia, *utraquism* – a curious term coined by Ferenczi, meaning a disposition of arriving at insight by oscillating *between* the different the perspectives at hand [from the Latin *utra que*, meaning 'one and the other'] – is central (Soreanu 2019). We could argue that Ferenczi adopts a nomadic disposition in science, where knowledge is created by straying off from one point of perspective to another, from one stratum of reality to another. As he writes in his commentary on Freud's *Group Psychology and the Analysis of the Ego*, '[l]ooking at scientific advance as a whole, we see that direct, rectilinear advance keeps coming to a dead end, so that research needs to be resumed from a completely fresh and improbable angle' (1922, p. 371). The letter also offers a snapshot into the network of supporters of psychoanalysis at the time – a true mapping exercise of prominent scientists of the time that had held psychoanalysis in high regard, but also a note on the internationalism of psychoanalysis.

In spite of this letter-manifesto, the decision on lay analysis remains negative. After mid 1931, psychoanalysts with no medical qualifications could not have a practice at the Polyclinics. Analysts such as Alice Balint, who was an ethnologist and education specialist, continued the treatments in her own apartment, found on one of the upper floors, at the same address as the Polyclinic (Borgos 2021, p. 111).

In this field of struggle, it is surprising that the government permission for the opening of the Polyclinic was secured only a relatively short time after, on May 23 1931. As Ferenczi notes in a letter written half a year before, 'the antirevolutionary and Catholic re-action [is] at the height of its power'.[36] There were internal quarrels as well (Danto 2005), as it was difficult to maintain a clear motivation and a steady action plan under the weight of the political pressures. Michael Balint (Swerdloff 2002, pp. 390–391) records the atmosphere of the time in an interview:

> We were under great pressure in the university under the Horthy regime and all the antisemitism, and analysis was considered a very left thing. We had all sorts of troubles. The other members of the Society all tried to accept things: 'This is what it is and we have to live with it.' I said: 'Nonsense. Times are changing, we have to do something.' So, first I got through the revision of our statutes – because of a government action at that time – then I got all sorts of things moving. I got some money and gained permission – there had to be special permission from the government in order to open a clinic.

[36] Letter by Ferenczi, November 30, 1930 (Freud, Ferenczi, & Brabant, Falzeder & Giampieri-Deutsch 1993, p. 403).

Even the wording of the decree that approves the opening of the Polyclinic is bitter-sweet. The fact of obtaining the permission remains an outstanding achievement, for which Ferenczi and Balint worked tirelessly, but psychoanalysis is marked out again as 'not an independent science', and, as I mentioned above, the authorities do not agree to the Polyclinic being called 'psychoanalytic'. The Minister for Welfare and Labour writes to the Mayor of Budapest:

> I authorise the establishment of the Out-patient Clinic of the Hungarian Psychoanalytical Association on the ground floor of the premises on street Mészáros u. 12, in District I, Budapest, on the following terms and conditions: [1] Given that psychoanalysis is not an independent science and is only a branch of psychology and can be considered as a complementary method to general psychopathological treatments, for the out-patient clinic to be established, it can only be a clinic for general nervous and mood disorders, one in which psychoanalytic treatment can be practised in addition to the treatments generally practised in medical science. The name and address of the establishment must be chosen accordingly and without any possibility of doubt, and the rules of the establishment must be adapted to this principle. [2] The chief physician in charge of the institute and the attending physicians must have a medical degree in psychiatry and/or neurology and must be duly registered with the mayor of the capital city, in accordance with the provisions of paragraph 67 of Act XIV of 1876 on the regulation of public health.

As noted above, the official name of the Budapest free clinic was Allgemeines Ambulatorium für Nerven- und Gemütsskranke (General Ambulatorium for Nervous and Mental Disorders). On May 31 1931, shortly after obtaining the permission, Ferenczi writes to Freud that every medical forum that the psychoanalysts in Budapest summoned to support their efforts 'was rude and disdainful'.[37] The same day, Ferenczi writes to Eitington announcing the news: 'Thanks to the efforts of Dr. Bálint, Frau Kovács, and one of her patients, despite vehement opposition from the State Health Council, permission to establish the polyclinic was finally granted nus by the Ministry of Public Welfare. We, totally from our own means, rented a five-room apartment and will set it up in a few weeks, so that I will already be able to report to the Congress the beginning of the therapeutic and instructional activity there' (cited in Borgos 2021, p. 165, footnote 27). Despite the frictions with the medical establishment, the Polyclinic was inundated with referrals. Ferenczi notes in another letter to Freud: 'We are positively overrun' […] 'and are striving to master the difficulties that are arising in this manner.'[38]

Less than four years after the opening of the Polyclinic, the state was exercising more and more surveillance over private medical institutions, in an impulse to also control the circulation of foreigners. Through a decree of the Mayor of Budapest, released on March 29 1935, the heads of 'private medical establishments (private hospitals, maternity homes) and other health resorts operating on the territory of the capital city' were instructed to report directly to the Central Authority for the Control of Foreigners (part of the Ministry of the

[37] Ferenczi to Freud, letter no. 1206 of May 31, 1931, Freud, Ferenczi, & Brabant, Falzeder & Giampieri-Deutsch 1993, p. 410).
[38] Cited in Danto (2005, p. 249).

Interior), and at the same time to their local police authority. The reports needed to include all the patient's personal details and their last place of residence, and any further information available to the clinicians. This requirement and close scrutiny weighted heavily on clinical work and on the rules of patient confidentiality. If effectively bound the Polyclinic to the surveillance machine of the state.

Only two years later, in 1938, the impulse of surveillance and control materialised in an actual police officer being present for the meetings of the Society and of the Polyclinic. While the clinic operated until 1942, its last four years of functioning were reaching the limit of what was possible in terms of the strategies conjured by psychoanalysts for keeping their doors open to their patients.[39] In an interview, Michael Balint recollects the work conditions of that time:

> But then something happened. The Nazis took over Germany, then Austria, and things became very, very sticky. For instance, every meeting of the Society and every seminar for the candidates had to be announced to the police, and they sent a plainclothes detective who sat in on all our meetings. […] 'We know that a number of Communists come to this clinic.' […] I remarked: 'Of course. They are neurotic people and they need treatment. And may I add something? As long as they come here you needn't be afraid of them.' […] That was in 1938. Then came the occupation of Vienna, and I thought that it was time to go. I did not want to be caught up in it. I tried to make all sorts of contacts. I mobilized Jones and John Rickman, my two contact men. […] Eventually we got permission to come to England.

From the traces assembled in these pages, the Budapest Polyclinic appears in friction with the state agendas of the time. By friction I mean that the semi-autonomous collective of psychoanalysts working in the free clinic show a kind of 'up-againstness' in relation to the demands of the state (Estarque & Soreanu 2022). They were not entirely absorbed in negotiation with state bureaucracies, nor were they relying on state funding in order to function. The psychoanalysts practicing there were part of a new social contract within their own local community, and they were also part of a fundamental revision of the social contract at large. There was concern among their members about the dangers of becoming bureaucratized or even co-opted by the state, and being put to work in line with the dark agendas of the time, such as those of the Nazi state, which sought to instrumentalize mental health institutions for the purposes of promoting their ideologies and political projects.

[39] The Polyclinic lost Michael and Alice Balint in 1939, when they emigrated to England; it functioned until 1942, but the years that followed brought even more struggles for survival for Budapest School psychoanalysts and psychoanalysis was under constant attack. At the beginning of 1948, in a radio discussion, László Faragó and Ferenc Mérei attempted to defend psychoanalysis. They advocated a critical review, but spoke out against a complete rejection of psychoanalysis (Harmat 1984). In 1949, during the discussions in the Communist Party Committee of the University of Budapest, in which the psychoanalyst Imre Hermann had also participated initially, philosopher Georg Lukács spoke out against Freudian theory. The advice given then to the Hungarian Psychoanalytical Society was to dissolve their association themselves, so as to pre-empt official dissolution. While psychoanalytic treatment was not itself not explicitly banned, the Society was dissolved, and the psychoanalysts continued to see patients and train others, to a limited extent, until the first half of the 1950s. In 1945, Pál Gartner had said: 'One can be both an analyst and a Marxist, and there are quite a few such people in Hungary'; by 1949, such a statement had already become an anachronism (Harmat 1984).

Conclusion: On Infrastructures and Survival

In Budapest in the 1920s and 1930s, psychoanalysts did their work in a world of concentric crises – a crisis within a crisis within another crisis – which tested their resilience and capacity for infrastructural invention. The crises that I referred to in these pages are: the upsurge of Nazism and its machine of surveillance and control; the increasingly difficult intersection between Marxism (and more broadly left-leaning orientations) and psychoanalysis; the tense relationship between psychoanalytic institutions and the university; and also, between psychoanalysis and the medical establishment. Despite living in times of unfreedom and in concentric crises, the psychoanalysts of the Budapest School not only managed to open a free psychoanalytic clinic, in an improbable conjecture, but they also formed an intricate coalition of resistance, and transformed a mental health institution into a place for 'infrastructural thinking' (Soreanu & Minozzo 2024, Berlant 2022). Infrastructural thinking is a particular kind of orientation of action, which looks at institutions 'slantwise' (Ahmed 2006). This means that it does not fully entrust itself to formalised rules, statutes, or official guidelines. Instead, is stays with the disorientations that usually accompany the moments when collective work can be done, in order to carve out zones of alternative life-worlds, or to invent new forms of alter-lives within existing forms of life. I return here to a material image of the Budapest Polyclinic: the heavy curtain that was opened in the vestibule, when two spaces became one, forming an area for the collective to get together. For me, the curtain stands for pliability, it is a 'soft device' that both divides and unites, transforming the institution into an infrastructure.

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