

BRETT KAHR

HIDDEN HISTORIES OF BRITISH PSYCHOANALYSIS

FROM FREUD'S DEATH BED TO LAING'S MISSING TOOTH



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Distinguished psychoanalyst and historian,

With love and affection and admiration,

To whom I owe much gratitude.

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INTRODUCTION

My Love of Deceased Psychoanalysts

s a little boy, I developed a huge obsession with history. Indeed, I spent quite a lot of time memorising the names and dates of all the kings and queens of England; and thus, to my shame, I can still recall that Henry VIII ascended the throne on 21st April, 1509, without having to consult Wikipedia!

Everyone assumed that I would become a geeky, professional historian, and to a certain extent, I have done so. But I also decided at quite a young age that, irrespective of my love for the past, I wished to devote my life to something more immediately impactful, namely, the practice of depth psychology, helping to alleviate the suffering of souls in great distress.

In some respects, while studying psychology and psychotherapy and psychoanalysis, I became, I suppose, what I have come to refer to as a "clinical historian", namely, a historian who does not necessarily peruse the life and times of Henry VIII but, rather, one who delves into the archives of the history of my patients and thus often unearths important and long-forgotten data from the internal filing cabinets of the mind.

As it happened, although I have dedicated the last forty-plus years of my career to the field of mental health, I have never abandoned my love for history. In fact, after I qualified and set up my long-standing clinical practice, I then returned to university in my spare time and completed my formal training in historiography, specialising, in particular, in the medieval and early modern eras. Thus, I would now consider myself both a "clinical historian" and, also, an academic historian in the more traditional sense.

In some ways, I see little difference between the fields of psychoanalysis and history; in fact, I have always regarded psychoanalysis not only as a clinical discipline but, also, as a historical one, with a deeply rich and insufficiently explored past. And, from my undergraduate days as a baby student of psychology, I did my very best to meet and interview as many of the elderly grandees of psychoanalysis as possible, desperate to preserve their priceless memories of the olden days, and eager to learn as much as I could from these extraordinary pioneers.

While still in my mid-twenties, I had managed, somehow, to spend a most memorable afternoon with Professor Sigmund Freud's greatniece, Mrs Anne Marlé, who shared with me a wealth of unpublished stories about the family of this great man. I enjoyed both an extremely pleasant tea and, also, a most delicious supper with Dr John Bowlby, a pioneering child psychiatrist, who reminisced at length about his mentors from the 1930s, and who treated me to a vicious impersonation of his vexing clinical supervisor, Mrs Melanie Klein. And, after taking tea with Mrs Marion Milner, and talking at length with Mrs Enid Balint, and dining with Dr Ronald Laing, I began to embark upon a more focused and more extended research project about the life of one of my most profound heroes, the great child psychiatrist and psychoanalyst, Dr Donald Winnicott. Indeed, over the course of the next several decades, I succeeded in interviewing more than 900 people who knew this man personally, including his loyal and long-standing secretary, Mrs Joyce Coles, who bequeathed to me her unique archive of unpublished Winnicott papers and letters and drawings.

Although I had the privilege of training with a number of truly inspiring and amazing teachers—all eminent psychoanalysts and psychotherapists and psychiatrists and psychologists—I often found my time with those elderly octogenarians and nonagenarians far more engaging and, also, far more instructive than my formal seminars and supervisions with those in their fifties and sixties. Often, I learned more about psychopathology and psychotherapy from imbibing the writings of the

early psychoanalysts of the 1910s and 1920s than I did from my own teachers and colleagues. Thus, to my great delight, the study of the history of this profession proved not only a rich research experience, but, moreover, my immersion in the Freudian past gave me a unique education and made me feel so very deeply at home while sitting in my consulting room.

Most of my contemporaries took little interest in the past and I knew no one else of my age who had taken the trouble to meet all of these remarkable personalities or who had studied their unpublished archives. In fact, during my early days as a fledgling researcher, only the late Miss Pearl King, a brilliant psychoanalyst and, also, the founder of the Archives of the British Psycho-Analytical Society, really encouraged me to pursue my historical interests; and, across many decades, she shared her knowledge with me in a most liberal fashion, regaling me with unpublished stories about her own training analyst, Dr John Rickman—one of Professor Sigmund Freud's patients—and, also, with tales of such colourful figures as Mrs Joan Riviere and the hugely controversial Rajah Masud Khan, with whom she had trained in the 1940s.

I absolutely fell in love with each of the elderly psychoanalysts whom I met in person and with the writings of those who had already died. Sadly, all of my ancient mentors have since passed away and I fear that I may well be the only person of my generation to have had personal contact with so many of these extraordinary grandparental figures of the previous eras.

In view of that fact, I have remained determined to pass on as much of the wisdom that I absorbed, not only from my personal encounters with the great and the good but, also, from their archives of papers. And I hope that, by sharing my passion for these ancient figures, I might encourage the next generation of mental health colleagues to benefit from the insights of our founding mothers and founding fathers, as I believe that I have done.

My obsessional interest in the history of psychoanalysis has exposed me to Berlin in the 1920s and 1930s, to Paris in the 1940s and 1950s, and, especially, to Vienna in the 1890s and 1900s and to the study of the early Austrian psychoanalysts who had trained with Freud. But, as someone who has lived most of my life in London, I have also developed a huge interest in the English school of psychoanalysis as well.

And, in the pages that follow, I hope to share a wide range of unknown, hidden stories about different aspects of psychoanalysis in the United Kingdom.

Although Sigmund Freud may have had little do with *British* psychoanalysis *per se*, I have chosen to launch this volume with two very brief essays about some rather tiny, but symbolically important, links to England. In the very first chapter, I will describe the rather unknown fact that, in 1919, Freud engaged an English teacher to help him spruce up his linguistic skills in order to receive patients from both Great Britain and the United States of America. This proved a very helpful decision indeed, as it permitted Freud to revive his flagging clinical practice, hard hit by the ravages of the Great War. I will also consider how Freud helped to foster the psychoanalytical movement in Great Britain through his treatment of such pioneering Englishmen as Dr David Forsyth.

In the following chapter, I shall discuss a much-overlooked detail about Freud's death in London. It will not be widely known that, on 23rd September, 1939, Freud died on a couch ... not the famous psychoanalytical couch upon which his patients had prostrated themselves for decades but, rather, a very different couch, namely, a death couch or death bed, placed specially in his consulting room, only inches away from his carpet-covered psychoanalytical divan. This chapter will explore Freud's death bed in some detail and will help us to remember that although Freud lived most of his life in the Austrian empire, he did spend his very last months in Great Britain; hence, the story of his death bed does indeed constitute a small, but, nevertheless, interesting moment in the history of British psychoanalysis.

Thereafter, over the course of two chapters, I shall describe the private world of Dr Donald Winnicott, examining how his domestic circumstances impacted upon his professional life. In the first of these studies of little-known Winnicottiana, I will consider the nature of his marriage to Miss Alice Buxton Taylor, a talented, but troubled, woman; and, after chronicling his eventual divorce from his first wife, I shall explore the nature of his subsequent marriage to the social worker, Miss Clare Britton, a much sturdier individual who brought Winnicott far more happiness. In particular, I will investigate whether Winnicott's lengthy personal psychoanalyses with Mr James Strachey

and Mrs Joan Riviere had helped him to overcome his wish to rescue an ill woman and thus forge a more mutually satisfying marriage to a stronger partner.

In the second of these Winnicottian essays, I shall reconsider the case of Donald Winnicott's most famous patient, namely, the little girl known as "The Piggle". During the 1990s, I had the privilege of meeting and interviewing "The Piggle" in person and I also engaged in correspondence with the father of "The Piggle" and enjoyed an informative telephone interview and a rich exchange of letters with the mother. In later years, "The Piggle" and her sister kindly permitted me access to their unpublished family archives. I have drawn upon all of these materials in order to help us understand this important and compelling story more fully.

After engaging with Dr Donald Winnicott's divergent marriages and with his remarkably rich and detailed child case history, I will then offer two chapters inspired by Winnicott's younger colleague, the visionary Dr John Bowlby, whom I first met in 1984 and who kindly permitted me to interview him and to engage with him on several subsequent occasions, prior to his death in 1990. In the first of my two Bowlbian essays, I shall describe the horrific way in which so-called experts would treat psychologically troubled children, from medieval times until the early twentieth century. Bowlby, like Winnicott before him, had the courage to challenge some of the cruel methods of neglect and punishment, which characterised much of the ethos of child psychiatry prior to the 1920s and 1930s; and in my historiography of child mental health, I will chronicle how Bowlby contributed hugely to the development of a depth-psychological approach to the treatment of emotional illness in the young.

In the second Bowlbian essay, I will provide an introduction to the great woman behind the great man, namely, Dr Bowlby's devoted spouse, Mrs Ursula Longstaff Bowlby. I first met Mrs Bowlby in 1995, several years after her husband's death, and she welcomed me warmly into the family home and generously shared with me a welter of stories about her marriage, and, also, her reminiscences of some of the early psychoanalysts such as Dr Ernest Jones, as well as Dr Edward Glover, Dr Adrian Stephen, Dr Karin Stephen, and so many more. A woman of tremendous modesty, Ursula Bowlby neglected to tell me about her own

informative writings on the psychology of infancy, which I discovered only after her death and which I shall discuss in this survey.

Throughout the remaining chapters, I will provide glimpses into the professional and private lives of three extremely fascinating psychoanalysts from the post-Winnicott, post-Bowlby cohort, namely, Mrs Marion Milner, Mrs Enid Balint, and Rajah Mohammed Masud Raza Khan. I first met Marion Milner at a conference in Cambridge, back in 1985, and I enjoyed my growing friendship with her. She shared a multitude of reminiscences about the early pioneers of British psychoanalysis and offered unique encapsulations of the work of such celebrated figures as Dr Donald Winnicott, as well as vignettes concerning those whose contributions we have now forgotten, such as Mr Anton Ehrenzweig, Dr Margaret Little, and Mr Adrian Stokes. After exploring the life and work of Mrs Milner, I shall then offer an insight into the early years of the wonderfully inspiring Enid Balint, who, as Mrs Enid Eichholz (prior to her marriage to Dr Michael Balint), pioneered the development of couple psychoanalysis in Great Britain. And, after presenting these portraits of both Milner and Balint, I will offer an extremely frank summation of more than sixty unpublished encounters with those individuals who knew the infamous Masud Khan, undoubtedly the most controversial figure in the entire history of psychoanalysis.

I have also provided an account of the memorable day that I spent with none other than Dr Ronald David Laing, back in 1983. Although Laing had trained in London at the Institute of Psycho-Analysis, he always harboured a considerable loathing for many of his teachers, and he eventually removed himself from the formal British psychoanalytical community in order to develop the controversial, but game-changing, anti-psychiatric movement. Although many orthodox Freudians do not regard Laing as a member of the professional family, he does, nevertheless, hold a significant place within the history of British psychoanalysis, not least in view of his work on the meaning of madness; hence, I have included my memories of this genius who, rather like Khan, could also be quite troubling and damaging and, even, at times, somewhat broken.

Thus, across the nine historical cases described in this book, ranging from the brief study of Freud's death bed to the more lengthy examination of "The Piggle", I will reveal some of the hidden tales of British psychoanalysis which deserve to be told and which, I would argue, do *need* to be told. Many of these stories expose the ugly, shadow side of psychoanalytical life. And yet, if we do not discuss these stories and become more conscious of them, and if we fail to understand them, we run the risk of repeating the very errors that our predecessors had made years and years previously. Therefore, I hope that these engagements with Freud and Winnicott and Bowlby and Milner and Balint and Khan and Laing will offer not only some interest and inspiration and, also, some gossip, but, above all, that they will provide younger colleagues with an introduction to these significant figures, thus stimulating, I trust, a fascination with their contributions.

It would certainly please me greatly to know that the individuals featured in these historical essays might furnish us with some fine role models, and, moreover, with a sobering warning about how we might, at times, comport ourselves more sanely.

If I have enjoyed any success during the course of my career, I owe so much of that to my own training analyst, to my clinical supervisors, to my teachers, and to my colleagues within the mental health profession, all of whom have nurtured me and educated me and supported me in a great many ways. Moreover, I must also acknowledge my enormous debt to all of those wonderful pioneering figures, many of whom I have had the privilege of meeting in person and some of whom I have endeavoured to bring to life in the pages which follow.

My love and gratitude to all of the deceased psychoanalysts described herein remains huge, and I warmly encourage others to come to know the older generation and to learn from the incomparable wisdom of our ancestors.

PART I SIGMUND FREUD AS AN ENGLISHMAN

"Zooming" in Old Vienna: How Sigmund Freud Became an English-Speaking Psychoanalyst

n March, 2020, the deadly coronavirus pandemic erupted on both sides of the Atlantic Ocean and changed our world immeasurably, causing huge disruption and terror and bereavement.

As the infection rate of this shockingly lethal disease skyrocketed with alarming rapidity, each one of us had to readjust our lives, both personally and professionally, in a desperate effort to ensure our physical safety and our psychological health.

After the outbreak of COVID-19, virtually every single mental health professional, myself included, had to alter the very physicality of our daily clinical work. In more normal times, those of us who practise psychoanalysis and psychotherapy would welcome our patients into a quiet, cosy consulting room and invite these men and women and children to sit in a comfy chair or, even, to recline upon the Freudian couch, perched only inches away from our own seat. But once the coronavirus began to spread, each of us had to transform our practices from such in-person intimacy to a more remote method of mental health care.

As someone who has never particularly embraced modern technology, I elected to communicate with my patients on the old-fashioned landline telephone, rather than via the computer. During the apex of the pandemic, I found this to be a surprisingly effective means of