



Infanticide and the influence of psychoanalysis on Dutch forensic psychiatry in the mid-twentieth century

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Abstract

This article demonstrates how psychoanalytic thought, especially ideas by Adler, Reik, Deutsch, and Alexander and Staub, informed forensic psychiatry in the Netherlands from the late 1920s. An analysis of psychiatric explanations of the crime of infanticide shows how in these cases the focus of (forensic) medicine and psychiatry shifted from somatic medicine to a psychoanalytic emphasis on unconscious motives. A psychoanalytic vocabulary can also be found in the reports written by forensic psychiatrists and psychologists in court cases in the 1950s. The new psychoanalytic emphasis on unconscious motives implied a stronger focus on the personality of the suspect. This article argues that psychoanalysis accelerated this development in the mid-twentieth century, contributing to the role of the psy-sciences in normalization processes.

Keywords

Criminology, forensic psychiatry, infanticide, motherhood, psychoanalysis, 20th century

Introduction

Much research has been devoted to explaining the dissemination of Freudian psychoanalysis in several countries in the twentieth century (Burnham, 1982). Less attention, however, has been paid to the influence of psychoanalytic theory on criminology and forensic psychiatry. Only limited aspects of psychoanalytic criminology have been studied regarding Germany and Austria (Finder, 2006), the USA (Schmeiser, 2007), Britain (Shapira, 2013) and Spain (Lévy Lazcano, 2019). This article will show how psychoanalytic thought impacted forensic psychiatry in the Netherlands in the mid-twentieth century; this has not previously been recognized by the historiography of Dutch psychiatry. This research is part of a broader recent trend in historiography to explore the role of psychoanalysis ‘beyond the couch’, that is, beyond private practice, in a variety of social and institutional settings such as the courtroom and the forensic psychiatric clinic (Herzog, 2017; Shapira, 2013: 1–2). By taking the crime of infanticide as an example, this article aims to demonstrate how psychoanalytic theories influenced Dutch forensic psychiatric thought on motives, (pathological)

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personality, (un)accountability and punishment. The last part of this article explores what impact psychoanalytic criminology might have had on actual infanticide trials.

Overall, the main argument of this article is that psychoanalytic criminology, with its emphasis on the unconscious motives of the perpetrator, strongly contributed to a development noticed by philosopher Michel Foucault (Foucault, 1978), for example the shift from a penal focus on the crime and its evidence ('did the suspect commit the crime?') to an emphasis on the suspect's personality and motives ('what kind of person is this perpetrator?'). This shift incorporated the rise of the 'psy-sciences' (psychiatrists, psychologists, probation services, social workers), and Foucault warned of the risk that suspects would be judged by who they were instead of what they had done. He thus criticized scientists' contribution to normalization processes, situating this shift in the nineteenth century. I argue that this change accelerated in the mid-twentieth century and that psychoanalytic criminology contributed strongly to it.

The origins of psychoanalytic criminology in Germany and Austria

In the first half of the twentieth century, Dutch science and culture were strongly influenced by German authors. Psychoanalysis, of course, had its origins in Austria and Germany. Although Sigmund Freud (1856–1939) himself had not written much about crime, his few insights into this theme were the building blocks for other psychoanalysts who elaborated on the causes of crime and the therapeutic needs of criminals. In a chapter on 'Criminals from a sense of guilt' in a 1916 essay discussing 'Character types met with in psycho-analytic work', Freud argued that men committed criminal acts because these deeds were forbidden. The crime brought them relief. An unresolved Oedipus complex had led to guilt, which was therefore already present before the crime, and to the need for (self-)punishment (Freud, 1916/1946).

In addition to Freud, psychotherapist Alfred Adler (1870–1937), who broke with Freudian psychoanalysis in 1911 and pioneered individual psychology, would be influential in criminal psychology. Adler contended that the social realm is as important to psychology as Freud's interiority and that the dynamics of power and compensation extend beyond sexuality. From these assumptions, he theorized in 'Neurose und Verbrechen' that criminal acts could derive from an inferiority complex, for instance caused by parental neglect, leading the neurotic personality to overcompensate these feelings of inferiority ('manly protest') or to prove one's superiority (Adler, 1924).

German and Austrian psychoanalytic thinkers were the first to apply Freudian theory to criminal psychology, especially Theodor Reik (1925) and psychoanalyst Franz Alexander and jurist Hugo Staub (1929). Alexander and Staub elaborated on Freud's brief insights by stating that all human beings are potential criminals born with antisocial impulses needing satisfaction, but that normally the Oedipus complex is overcome, transforming these instinctual drives (especially the desire to kill the father and possess the mother) into socially acceptable behaviour. However, criminals suffering from neuroses did not have the capacity for the psychological management of conflicts in family relations. Therefore, the neurotic criminal perpetrated an offence primarily to relieve his unconscious feelings of guilt, thus displacing his feelings of guilt for his wish to kill his father with a lesser offence. According to Alexander and Staub, in neurotic criminal behaviour, the ego is insufficiently supported by an independent superego, and the ego is too weak to control the demands of the id, so the ego can satisfy its antisocial tendencies. Correspondingly, the neurotic criminal who acts under the strong pressure of unconscious motives cannot be held legally accountable, or at least only partially (see Finder, 2006: 452–3).

As Finder writes, psychoanalysis dovetailed with new developments in criminology (p. 449). On the one hand, from *c.* 1880 the focus of penal policy had shifted from the crime itself to the protection of society from the criminal, and there was a new focus on the personality of the offender.

The modern school of criminal law, headed by the Austrian-German lawyer Franz von Liszt, and supported by lawyers in other European countries, advocated the centrality of social defence, the protection of society against criminals and the prevention of crime, instead of the classical legal principles of equal punishment for similar crimes. For the modern school of criminal law the perpetrator's motives and personality became important in order to assess his dangerousness and the punishment, security measures or medical treatment to be meted out (Oosterhuis, 2014a: 7–8).

At the same time, in Germany there was dissatisfaction with the prevailing paradigm of criminal biology (1920s until 1945), especially with the determinism of hereditarian criminology. Alexander and Staub argued that jurist and law reformer von Liszt's demand for individualized punishment was only possible with psychoanalysis: 'Psychoanalytic criminology was vital to social defense, they argued, because it assured that a person would be sentenced for the real – that is, unconscious – motivation for his crime' (Finder, 2006: 451). Both the Freudian and Adlerian strands attributed criminal behaviour to acquired psychological maladjustment in childhood (unlike criminal biology, which explained criminal behaviour on the basis of inherited traits). Both underlined unconscious processes and both regarded legal punishment as meaningless, possibly even harmful to society's interests (p. 455).

German and Austrian psychoanalysts and, as I will show, from the 1930s and 1940s onwards their Dutch colleagues as well, envisioned several roles for psychoanalysis in criminal trials. The first was to help with the detection of crime and the establishment of guilt or innocence. Reik had written that criminals tended to accuse themselves and betray themselves by means of slips of the tongue and also by making mistakes in erasing the traces of their crimes (see Carp, van Bemmelen and Wiersma, 1956: 38). Secondly, psychoanalysis could establish the unconscious or 'real' motives of the crime. Several psychiatrists admitted that pre-trial detention or the fear of punishment impeded psychoanalysis, yet contended that the methods of free association and transference could provide much information on motives (Westerman Holstijn, 1938a: 70). Thirdly, it could be used to establish (un)accountability: psychiatrists could find evidence on the mental state of the suspect to inform the judge. Finally, it could provide treatment for criminals. This article will mostly address the second and third roles: the discussion of unconscious motives and accountability. These particular functions come to the fore in the Dutch forensic psychiatric and psychological writings and in assessments for the courts.

Finder concludes that, in Weimar, Germany, and Austria, psychoanalytic criminology was marginalized in the courtroom in practice. Judges feared that it would exonerate criminals. Its reception among psychiatrists was not very enthusiastic either (Finder, 2006: 465–6). In the following sections, I will first sketch a background history of (forensic) psychiatry in the Netherlands in the first half of the twentieth century and show that psychoanalytic criminology was welcomed by a number of influential Dutch psychiatrists, although psychoanalytic theories were never received uncritically. Then I will demonstrate how these theories were applied in cases of infanticide.

Dutch (forensic) psychiatry in the first half of the twentieth century

From around 1830, doctors and public health officers were sometimes called in as experts to assess the state of mind and accountability of suspects, but it was not until about 1915–20 that Dutch forensic psychiatry started to become professional and to be a standard element of trials (Ruberg, 2019a). Two developments stand out in the history of the institutionalization of Dutch forensic psychiatry. The first was the enforcement of the Dutch psychopath laws in 1928, which gave judges the power to send fully and partly irresponsible criminals to an asylum for psychopaths after their

potential prison sentence. This so-called TBR (*Ter Beschikking van de Regering*) status could be indefinitely extended by the judge every two years, and was intended to provide treatment for the perpetrator and protection from dangerous delinquents for society (Oosterhuis, 2014b: 41). Oosterhuis argues that these psychopath laws ‘anchored forensic psychiatry in the Dutch legal system’ (p. 37).

The second important step in institutionalization took place around 1950. Psychiatrists (from 1953) and psychologists (from 1958) became permanently attached to some court districts as their regular experts, and overall the role of psychiatric examination and therapy for offenders was increasingly recognized (p. 43). Moreover, a new forensic psychiatric clinic was founded in Utrecht: the Psychiatric Observation Clinic of the Prison System (1949, later called the Pieter Baan Centrum), which produced psychiatric reports for the courts based on the observation of suspects. Leading experts of the so-called Utrecht School were legal scholar Willem Pompe, criminologist Gerrit Kempe and legal expert and psychiatrist Pieter Baan, who all strove towards renewal and improvement of the criminal law, the prison system and the treatment of mentally disturbed delinquents. Working from German phenomenological-anthropological psychiatry and French personalism, the Utrecht School assumed that the guideline for criminal law was understanding the criminal’s personality, life history and individual circumstances. By focusing on human relationships and empathy expressed through the ‘encounter’ with patients, the aim was to reintegrate them into society (Oosterhuis, 2014b: 43). In the Utrecht and other Dutch clinics, several forms of psychotherapy were used and combined, including psychoanalytic approaches (Weijers and Koenraadt, 2007: 54–6).

Generally, the first decade after World War II saw increased institutionalization of Dutch forensic psychiatry, and also a strong trust in the latter by the judiciary (Weijers and Koenraadt, 2007: 60). Before I continue to discuss the impact of psychoanalysis on Dutch forensic psychiatry, I will describe the general reception of psychoanalysis in the Netherlands.

Psychoanalytic criminology and Dutch forensic psychiatry

Early psychoanalysis was welcomed in the Netherlands, in spite of objections from religious circles (Bulhof 1982: 588; Stroeken, 1997: 42). In the decade 1910–20, Freud’s ideas were disseminated in the Netherlands and, at the end of World War I, psychoanalysis was well known in medical circles and also outside them (Stroeken, 1997: 11, 16, 22). From *c.* 1920, psychoanalysis became institutionalized (Blok and Vijselaar, 1998: 66–77). In the 1930s, a psychoanalytic vocabulary increasingly permeated psychiatry (Abma and Weijers, 2005: 66) and cultural discourse (Bulhof, 1983: 18). Brinkgreve (1984: 23–8) argues that, especially after World War II, psychoanalytic theory became influential in psychiatry and elsewhere, but around 1980 it started its downfall.

Although different strands in psychiatry and psychology adopted psychoanalytic concepts, many academic scholars hesitated to apply the full body of Freudian theory. Religious scholars objected to its attention to sexuality, and others regarded it as too abstract and lacking empirical proof. Professor Frits Grewel, specializing in orthopedagogics and neuropsychology, for instance, argued that psychoanalysis did not provide sufficient systematization (Grewel, 1957: 106). The phenomenological approach, especially that of Jaspers, was better received and was regarded as an interpretative method without psychoanalysis’s pretensions to be a natural science (Bulhof, 1983: 291).

The reception of psychoanalysis among Dutch forensic psychiatrists and jurists was slow but detectable. In 1932 a meeting of the *Psychiatrisch Juridisch Gezelschap* (Psychiatric Legal Society) in Amsterdam was devoted to psychoanalysis, guilt and punishment; Hugo Staub, one of the German authors of the main book on psychoanalytic criminology, gave a talk (Staub, 1932; see also Stärcke, 1932). In 1938, Toon Westerman Holstijn – a nerve doctor, psychoanalyst and

lecturer at the University of Amsterdam – published a series of articles making a plea for the use of psychoanalysis to examine and treat criminals, especially to reconstruct their unconscious motives, which would complicate the simplistic notion of free will (Westerman Holstijn, 1938a: 75).

In criminology textbooks, psychoanalysis was mentioned from the 1930s. In her 1939 book *Female Criminals*, legal scholar JC Hudig summarized Freud's psychoanalysis as follows: 'Freud has broken with the natural scientific methods of research, with searching for causality and tries to approach the complex of psychological responses along the road of empathic understanding' (Hudig, 1939: 183). However, Hudig did not critically assess psychoanalysis.

Bonger (1932), in *Introduction to Criminology*, did not explain psychoanalysis in his chapter on 'Criminal Psychology'.¹ However, in the second edition, published in 1951 and revised with/by legal scholar and criminologist Kempe, this particular chapter not only mentioned psychoanalysis, but also expressed praise for psychoanalysis, developmental psychology and criminal-psychological personality research. In addition, psychoanalysis had contributed to witness psychology (Bonger, 1951: 194). Bongers and Kempe also lauded Karl Jaspers' '*verstehende Psychologie*', which they thought could relativize psychoanalysis's strongly causal explanation (pp. 188–9).

In the 1950s, psychoanalysis was considered to be a serious approach within forensic psychiatry, although this view was not shared by every colleague and it was critically discussed; its potential was regarded as not yet fully explored. From 1955 on, universities increasingly appointed psychoanalytic psychiatrists (Brinkgreve, 1984: 28; Bulhof, 1982: 588). Looking back at the first half of the twentieth century, in a 1957 collection of articles by influential (forensic) psychiatrists, the psychiatrist S.P. Tammenons Bakker (1957) argued that initially psychoanalysis did not make a big impact on forensic psychiatry. The general opinion in this volume was that psychoanalysis still held much promise, but that some aspects also deserved criticism. Grewel, for example, suggested that modern depth psychology was good for the pre-trial investigation of the suspect who was often not forthcoming (Grewel, 1957: 111). However, he did not think all 'occasional offences' were unconsciously determined (p. 126). Furthermore, Tammenons Bakker (1957: 182) found that a psychoanalytic treatment was not sufficient for criminals because a successful analysis took much more time than was available. Also, he stated that forensic psychiatric research always needed a clinical psychologist (p. 177).

In a 1952 lecture, the renowned Professor of Psychiatry Henricus Rümke (1893–1967), who also provided expert advice for the courts, proved to be optimistic, yet modest, about the role of psychoanalysis for forensic psychiatry. He stated that clinical psychiatrists were at the time more positive about psychoanalysis than before (Rümke, 1953: 2). For Rümke, the benefits of psychoanalysis lay in it being an exploratory method, exploring the conditions and understanding the psychological behaviour of the person living under abnormal conditions (pp. 5–6). Rümke appreciated psychoanalysis: it had deepened knowledge of human behaviour and broadened criminological understanding, having coined concepts such as repression, symbolism, sublimation, ambivalence, Adler's overcompensation, and the role of child sexuality. Yet Rümke did not believe in the notion of latent criminality (all people being latent criminals), which he found an overestimation of the drives (he regarded the ego as more important). He had a high regard for the notions coined by Adler, especially the overcompensations, the wish for protection, and the concept of resentment. Rümke agreed with Reik and Freud that a failed Oedipus complex caused guilt and the need for punishment, yet he also claimed on the basis of his experience as expert that this psychism was very rare (pp. 9–12).

Rümke concluded that depth psychology could never explain everything, only the conditions, which the clinical psychiatrist needed to place in an overall framework (p. 12). He regarded the role of depth psychology in forensic expertise as important, but never as decisive: it could only reveal the conditions making the act possible (p. 8). Admitting that very little was certain about the

results of psychoanalysis, Rümke would nevertheless recommend it for forensic psychiatry when he as a clinician saw that the analytical method could do more than others (p. 9). Rümke added that a psychiatric examination before the court could not entail a psychoanalytic exploration, because the suspect could not speak freely and it would cost too much time (pp. 5–6). With regard to the effects of psychotherapy, also for the treatment of convicts, Rümke acknowledged its benefits, but wrote that reliable statistics were lacking to prove that psychotherapy attained more results than other types of therapy (Rümke, 1957: 57). Bulhof (1983: 291) argues that Rümke – regardless of his appreciation of core psychoanalytic notions – overall preferred phenomenological approaches, since psychoanalysis was too much a theoretical system for him, instead of an empirically based therapy.

The application of psychoanalysis to forensic psychiatry found a more ardent supporter in Eugène Carp (1895–1983), Professor of Psychiatry at Leiden University and also acting as an expert witness in court cases.² From the 1930s, Carp was the first to consistently apply psychoanalysis in his work on forensic psychiatry (Rümke, 1957: 37). In his co-authored textbook on forensic psychiatry published in 1956, Carp remained convinced of the insights of psychoanalysis, and agreed with the work of Reik and Adler. Adler had identified as the main aim of the criminal the flight from his sense of inferiority via revenge on society. Although Carp found this description too general, he was still convinced that many criminals belonged to this category and in this vein he regarded, for example, sadistic crimes or perverted erotic crimes as responses to repressed genital feelings of inferiority (Carp et al., 1956: 36–41).

To summarize, psychoanalytic criminology was taken seriously by a number of Dutch criminologists and (forensic) psychiatrists from the 1930s, but was not received uncritically. Generally, psychoanalysis was accompanied or replaced by phenomenology until the second half of the 1950s, when psychoanalysis gained more influence, both academically and in therapeutic practice (Brinkgreve, 1984: 224). Psychoanalysis would remain influential in the 1960s and 1970s (de Waardt, 2005: 151–95), but in 1980 Goudsmit (1980: 388–9) concluded that a true psychoanalytic treatment of criminals in forensic clinics was very rare; there were too few analysts and too few motivated patients.

Psychoanalytic theories on infanticide, as presented by Dutch psychiatrists

Psychoanalysis was applied by Dutch scholars to different types of crime (van der Sterren, 1946; Westerman Holstijn, 1938b, 1938c, 1939). In this section I will focus on its application to the explanation of infanticide, showing how psychoanalytic theories and concepts were used from 1927 to elucidate women's psychoses and how this caused a shift from somatic to psychological reasoning.

In the nineteenth century, child murder was mostly committed by young, unmarried servant girls, who killed their babies because of the shame of becoming an unmarried mother and the fear of discovery of the child, and of being fired. Only in rare cases were doctors or psychiatrists called in to examine the minds of these women. Nevertheless, it was clear to many jurists and physicians that they experienced severe emotional upheaval during birth and that they were victims both of a patriarchal society, which did not punish men for extramarital sex, and also of the painful, lonely delivery. Therefore, this particular emotional condition had found its way into the Dutch laws on infanticide formulated in 1886, leading to lower sentences for infanticidal mothers. Legal scholars and doctors, however, debated whether this condition was a pathological condition, and whether it was a somatic disease or a mental, psychiatric disorder. Physicians had discussed the notion of 'puerperal insanity' (sudden insanity during or directly after childbirth) since the nineteenth

century. In the Netherlands, even in the first decades of the twentieth century, doctors doubted the existence of this mental disorder (Ruberg, 2013: 371). Legal scholars confirmed this doubt (van Dijck, 1908: 40–4; Verdam, 1909: 30–5).

From 1927, psychoanalysis entered this debate, when Dr Dine Bakker published an article in the Dutch medical journal, based on a presentation for the ‘Zuid-Hollandsche Neurologen-Vereeniging’ (South-Holland Society for Neurologists); she argued for a psychoanalytic approach to explain and treat puerperal psychoses (Bakker, 1927). Based on a sample of 46 patients admitted since 1918, with statistics taken from medical publications and the psychiatric clinic Endegeest, her main argument was that researchers so far had neglected the mental origins of puerperal psychosis. Although she also underlined the role of infections in relation to these psychic origins and presented a quantitative study of patients, she used a psychoanalytic explanation to explain women’s behaviour; she underlined a woman’s hatred of her child and towards her husband (or the baby’s father), triggered by her loss of beauty and independence and by the delivery. Interestingly, Bakker also analysed the dreams of her female patients:

They often dream that they have been heavily infected, that they have an evil tumour in their bodies, that they have been poisoned and irrevocably have to die. Often they dream of death and funerals, while they repeatedly wake from these dreams in fear. Sometimes their child has already been born in their dreams. For instance, she has to take care of it again and again, whereas her husband becomes increasingly impatient, asking her attention for something. Exhausted from hurrying, excited by anger against the child, she awakes. Or the pram with the child falls down along a slope and crashes into an abyss. Or the mother goes out walking with the child and leaves it somewhere in a park, forgetting it, and not blaming herself for it, to her own astonishment. (p. 2433)

Bakker mentioned Austrian psychologist Dr Wilhelm Stekel (1868–1940), one of the first followers of Freud, as her teacher. She referred to the work of (among others) Krafft-Ebing, Bleuler, van der Hoeven’s textbook on forensic psychiatry and Meyer. Bakker’s article was one of the first to use psychoanalysis to explain puerperal psychosis. Bakker only mentioned infanticide when she quoted Krafft-Ebing and Kirchberg, who opined that women who kill their babies in this mental state should be held unaccountable (p. 2434).

In 1930, the physician V.W.D. Schenk, working in the Psychiatric-Neurological Clinic in Utrecht, led by Professor Leendert Bouman, discussed a case of infanticide, explaining it with the help of the psychoanalytic theories of Helene Deutsch (1884–1982) – the first psychoanalyst to publish extensively on the psychology of women (Deutsch, 1925) – and of Gregory Zilboorg (1929), but he did not quote Bakker. Schenk stated that the classical literature on infanticide was too superficial, merely discussing circumstances such as honour and not delving into a concrete psychology. It was necessary to excavate the deeper motivation of the pregnant and lactating woman, her relationship to her unborn child and her parents, since the old literature seldomly discussed hatred towards the child (Schenk, 1930: 597–8). Psychoanalytic literature, instead, traced the underlying cause of vomiting during pregnancy and the failure of breastfeeding to hatred towards the child (p. 601).³ Also, the analysts underlined the mother’s identification of the child with the father and the husband, and the projection of negative feelings towards him onto the child. The child is approached ambivalently by the mother, because the child becomes her *Über-Ich*, but also because the child frees itself from the motherly *Ich*, while the mother wants to keep her child as part of the motherly *Ich* (‘child-penis’). Schenk admitted that the ‘psychoanalytic construction of the Uber-Ich is for me too schematic and mechanical’, yet for him it also contained valuable contributions (p. 611). In addition, Schenk used Jaspers’ theory of feeling lonely and estranged when common structures disappear, which could lead to impulsive behaviour (p. 609).

Schenk suggested that, for child murder, we need to look at the feelings of bonding between mother and child, separating at birth and reconnecting again during breastfeeding. Psychoanalysts pointed to the death drive which surfaces just before, during and after birth (sexual drives are turned off, freeing sadistic destruction drives), but this was doubted by Schenk (p. 611). He pointed out that the concrete circumstances of each case were important, particularly the family relationships (p. 612). In short, Schenk's explanation is similar to Bakker's, both relying mostly on Deutsch's psychoanalysis, in combination with other authors. Schenk added more criticism regarding those theories than Bakker did. Overall, in the period 1927–41 some Dutch physicians and psychiatrists clearly became more interested in psychoanalytic explanations for puerperal psychoses.⁴ Like a group of (student) psychiatrists gathered around the Leiden Professor Gerbrandus Jelgersma (1859–1942) – one of the first eager academic proponents of Freud in the Netherlands – they applied psychoanalytic theory to psychoses, in contrast to Freud's own focus on neuroses (Blok and Vijselaar, 1998: 66).

In the later 1940s, two prominent Dutch psychiatrists were working with criminal psychoanalysis in their discussion of child murder. Professor Rümke (1945) applied psychoanalytic and psychological literature on the female psyche during the 'generative' processes (Deutsch, Schenk, Bakker) to one case of infanticide, assessing these theories as useful but not sufficient. Professor Carp (1948: 104), aiming to 'objectively reconstruct the true motives' rather than believe the subjective motives in two cases of child murder, focused on 'repressed hatred'. A man claimed to have murdered his four children out of desperation, but in fact, so Carp argued, this was an act of revenge towards his unfaithful wife. Similarly, the hatred another child murderess felt towards her child resembled the hatred she felt towards her husband, who had left her helpless. Carp concluded that 'In both cases these criminals wanted to target the child and via the child another person; this "psychism" deserves the attention of the patho-psychologist' (p. 98).⁵ In short, the articles by Rümke and Carp show that in the late 1940s, psychiatrists took considerable interest in psychoanalytic and psychological explanations for infanticide, looking for unconscious motives and going beyond a medical-biological focus on puerperal psychoses. This particular focus can be found in forensic psychiatry until at least the 1960s (Havermans, 1962: 136).

To summarize: from 1927, psychoanalytic theories were used to explain child murder, initially in combination with a clinical, statistical study of puerperal psychosis, but later shifting to individual, psychiatric case studies. In these, different psychological approaches were combined, both psychoanalytic and phenomenological (Freud, Deutsch, Adler, Jung, Jaspers). These ideas were not applied uncritically. The shift from biologicistic psychiatry and quantitative methods towards qualitative, hermeneutic psychiatric case studies also implies a shift from natural sciences to interpretative methods, such as dream analysis, which were hard to test or check. Until the first decades of the twentieth century, the infanticidal mother was only examined for physical evidence of pregnancy or psychiatric evidence of insanity (although the latter was rare), but from about 1927 the unconscious motives for this crime became of interest to psychiatrists who were influenced by psychoanalysis.

Psychoanalysis and Dutch forensic psychiatry in practice: a 1958 case of infanticide

In the last part of this article, I will explore the impact of psychoanalytic theory and concepts on actual criminal cases of infanticide. Although more research is needed to assess the extent of its influence, a psychoanalytic vocabulary can be found in expert testimony in the 1950s. For example, Professor Carp acted as an expert psychiatrist in an infamous murder case in 1954, in which a

male doctor had murdered his wife. Using psychoanalytic notions, Carp argued that the suspect had actually hated his mother-in-law, but had repressed this hate and then projected his feelings onto his wife (Ruberg, 2019b). In addition to murder cases, we also encounter a psychoanalytic discourse in cases of infanticide. For instance, in the case of M.A. in 1958, in which a father had murdered his three children, concepts such as inferiority complex, sublimation, a weak ego structure, projection, objects of identification and 'Father ideal' all feature in the psychological and psychiatric reports made by the experts (NHA, AGA).

To demonstrate how psychoanalytic notions were used, I will explore another 1958 case of infanticide in more detail. C.V., a 32-year-old widow who had three children, was sentenced to two years' imprisonment for child-manslaughter (while being held accountable) (NHA, AA). The famous pathologist Dr Zeldenrust performed the autopsy and concluded that the baby had lived, and probably during or shortly after the birth had died, with signs of suffocation. Another doctor confirmed signs of recent pregnancy in the mother. She already had three children when she became pregnant by a lover, who had initially promised to marry her, but had then disappeared. She gave birth to their child alone, and when she saw that the baby resembled her former lover, she killed the child in a rage. She claimed that 'fear of discovery of her delivery', as described in the particular sections of the law on child murder and child manslaughter, did not play a role, even after police officers had explained to her that this could have given her a lower sentence.

The case file for C.V. contains extensive reports by the pathologist, probation services, two psychiatrists (Dr S.F. Tammenons Bakker and Dr W.F. Theunissen) and one psychologist⁶ (drs. H. in 't Veld). The psychiatrists declared that the suspect had not experienced a period of 'lowered consciousness' directly after birth. Theunissen claimed that there was no mental disturbance and thus no diminished accountability. The psychiatric report described her as insecure, immature, 'hysteroid', cold, 'not completely harmonic in her erotic urges', which, it is said, might count as mitigating circumstances. The report by probation services extensively sketched the suspect's family background, especially her relationship with her tyrannical mother. The family, living in a strict Protestant village, was 'cold, affect-poor', and sexuality was a taboo. These facts elucidated the lack of motherly love displayed by the suspect. Her shame for her pregnancy out of wedlock was explained by extensive reference to the Protestant norms of the village, which she had internalized although no longer living there.

The psychologist in 't Veld performed an IQ test, the results of which were normal. The psychological research concluded that she was an impulsive, immature, passive and conflictual woman. The psychologist noted her aim to compensate, which Adler had called 'manly protest': an over-compensation of the feeling of inferiority and weakness, associated with femininity. She expressed this via an urge to dominate and via her sense of honour. Her 'I' as centre of the person, in 't Veld continued, was weak and easily overplayed by the urges and affects. He concluded that the suspect had not distanced herself from her mother. She wanted to be independent, but in fact needed help. When she felt threatened physically, she responded primitively with a strong aggression, which could break through easily in a condition of 'lowered consciousness'. The psychologist concluded that this type of fragmented, unstable personality could, in serious stress situations, escape to a lowering of consciousness and also repress painful facts from consciousness (she forgot for some time that she was pregnant). He did not preclude the facts that the emotional stress of the pregnancy, avoiding the outside world for months, and her tough delivery including much blood loss making her think she would die, had all brought her into a condition of lowered consciousness. So, whereas the psychiatrists found this woman fully accountable, the psychologist's report was more ambivalent, leaving the question of accountability open and presenting possible mitigating circumstances. The final verdict in the case did not mention the expert reports of the psychiatrists and psychologist explicitly, but the judges held the perpetrator accountable.

This case shows how extensive the involvement of psychiatrists, psychologists and probation services (who all read each other's reports and built on them) had become. This means that, as Foucault has argued, the powerful 'psy-discourses' determine the way the suspect's personality is analyzed. As Foucault (1978: 18) states, 'a system of sanctions based on what one *is* [has] been taking shape'. Or in other words, confessional discourse is steered by expert mediators who convert it into discourse on normality, on dominant structures of subjectivity (Alcoff and Gray, 1993). In the case of C.V., professional psy-discourse on the one hand means that she was held accountable (not insane), and thus qualified as 'normal', but on the other hand the psychological analysis of her personality declared her to be 'guilty' of all kinds of abnormal behaviour: her personality explained her crime.

This case also demonstrates the strong and critical focus on motherhood, which in the 1950s was a dominant theme in psychiatric literature generally (Bolt, Gijzeman and Vijselaar, 2019: 66), but particularly a hallmark of psychoanalysis. The latter's emphasis on the failure of mothers (varying from tyrannical and cold to suffocating behaviour) would lead to criticism from feminists in the later 1960s and 1970s. The Dutch feminist Joke Kool-Smit, a central figure in the second feminist wave, argued that Freud's heritage regarding motherhood was an obstacle to women's emancipation (Kool-Smit, 1967). In this case of child murder, not only was the (lack of) motherly behaviour of the murdering mother studied, but also the influence of her own mother on this female perpetrator was included in the reports.

Since the late nineteenth century, forensic psychiatrists had – in addition to considering the question of insanity/unaccountability – increasingly paid attention to the perpetrator's motive, to be explained from family relationships and other social circumstances. However, the involvement of psychologists was new in the 1950s. Interestingly, in the psychologist's report, quantitative material research (IQ tests) dovetailed unproblematically with an interpretative method. This method was clearly informed by a psychoanalytic vocabulary. Now an interest in unconscious motives was added.

Conclusion

Taking the crime of infanticide as a case study shows that, from 1927, at least some Dutch (forensic) psychiatrists were influenced by psychoanalytic theory on crime, especially Adler's ideas and texts by Reik and by Alexander and Staub, as well as Deutsch's psychoanalytic writings on women and femininity. However, research on the history of psychoanalysis in the Netherlands has not previously shown its influence on forensic psychiatry. Psychoanalysis was especially influential in its emphasis of unconscious motives, a focus that could be found in cases of infanticide tried before a Dutch court in 1958, in which a psychologist, in particular, used Adler's concept of overcompensation, in addition to other psychoanalytic notions. Generally, Dutch psychiatry from the 1920s combined methods from the natural sciences with hermeneutic approaches, fusing psychiatry, psychology and neurology (Bolt, 2010: 16). In psychiatric texts on infanticide from the later 1940s, too, puerperal psychoses were still mentioned, but psychological (psychoanalytic-phenomenological) accounts were suggested as better explanations.

The new psychoanalytic emphasis on unconscious motives implied a stronger focus on the personality of the suspect, a trend observed by Foucault, who saw its origins in the nineteenth century. I argue that psychoanalysis accelerated this development in the mid-twentieth century, contributing to the role of the psy-sciences in normalization processes.

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Notes

1. Kempe wrote that Bonger 'was sceptical towards psychoanalytic views because they tended to make complex "simple" correlations and human motives', but he was unclear whether he meant Bonger's first or second edition (Kempe, 1957: 73). I have not found this particular quote in either of the editions.
2. For more information on Carp's work, see Wilschut (2009).
3. Schenk does not mention a particular author, but it must be Helene Deutsch. Bakker also mentions vomiting during pregnancy as evidence of hatred of the child.
4. Maria van Steenberghe-van der Noordaa (1941), a doctor, discussed 'generation psychoses' in her PhD thesis, based on clinical and quantitative analysis. She endorsed the study of 'psychogenic factors' in the outbreak and the form of puerperal psychoses (not excluding infections, and also referring to other theories on psychoses). She approvingly quoted Bakker's psychoanalytic analysis, including her reliance on Helene Deutsch (pp. 136–7, 149).
5. Carp added that from an 'anthropological-phenomenological' perspective the person had become estranged from his/her own Ego (depersonalization); he has got 'out-of-himself', leading to impulsive acts. Carp spoke of 'I-paralysis', the primitive urges dictating the acts and the 'I' having lost its connection to its own self. Carp here based his views on Jaspers and Jung.
6. This was the first psychologist to be permanently attached to the Amsterdam Court, from 1958 (Bolt, Gijzeman and Vijselaar, 2019: 150). Before World War II, in the Netherlands, in contrast to Germany for instance, psychologists had only played a marginal role in forensic psychiatry (Weijers and Koenraadt, 2007: 32).

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