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Infant observation, psychoanalysis and difference: reflections on the 2024 Tavistock Infant Observation Conference

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ABSTRACT



This article offers reflections on the Infant Observation Teachers Conference held at the Tavistock and Portman NHS Foundation Trust in April 2024, whose title was *Infant Observation, Psychoanalysis and Difference*. It considers reasons why the mainstream psychoanalytic tradition, at least in the writings of Freud, Klein, Winnicott Bion gave little attention to differences of race and ethnicity, and instead believed that psychoanalysis had a universal human application. The paper acknowledges the relevance of social differences to contemporary psychoanalysis and infant observation and proposes several ways in which these can be addressed. It argues that there is a need to retain the distinctive focus of psychoanalytic infant observation and to avoid this being eclipsed by sociologically-defined perspectives.

KEYWORDS

Infant observation; psychoanalysis; differences; race; ethnicities

Introduction

The Ninth International Infant Observation Teachers Conference held at the Tavistock Centre on 5th and 6th April 2024 had as its theme *Psychoanalytic observation, intersectionality, and the social matrix: Implications for infant observation and its applications*. The choice of this topic reflected an increased interest in recent years in the psychoanalytic field in issues of race and ethnicity and in differences of other kinds, such as those of gender and sexuality. The murder of the black citizen George Floyd by police in Minneapolis the USA on 20 May 2020, and the emergence of the Black Lives Matter movement in response to that, was one important stimulus to that concern, which rapidly extended from its origins in the USA to Britain and other countries. In this article, I shall offer some reflection on these issues, especially in their relation to the theory and practice of psychoanalytic infant observation.

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Concern about these issues in the psychoanalytic world preceded the rise of this recent movement by many years. In the United States, the movement of Relational Psychoanalysis, founded by Stephen Mitchell and Jay Greenberg, insisted on the importance of the social dimension of relations between analysts and patients, and berated the orthodox, largely Freudian, psychoanalytic establishment, for, on the whole, ignoring these. Significant psychoanalytic literature concerned with differences developed, associated with this movement, by writers such as Neil Altman (2000), Lynne Layton (2006) and Jessica Benjamin (1998) and featuring prominently in journals such as *Psychoanalysis Culture and Society*, *The Psychoanalytic Quarterly* and *Psychoanalytic Dialogues*. These concerns within psychoanalysis were deeply influenced by developments in the wider culture, for example in social science and literary and cultural studies, where issues of race, ethnicity and gender became prominent.¹ Fierce intellectual battles were fought between defenders of racial inequalities as the outcome of innate differences, such as Charles Murray (Herrnstein & Murray, 1994) and powerful advocates of racial equality. It seemed that political divisions in the United States were becoming redefined as conflicts of cultural identities, as 'identity politics', giving rise to what is known as 'culture wars'. These were to a large degree given their force by conservative attacks on the concerns being raised by radical critics of the dominant cultural order, in the UK and America. These were pejoratively characterised by conservatives as 'woke', appropriating a term whose origin lay on the left to refer to the need to awaken consciousness. Psychoanalysts and psychotherapists could hardly not be aware of the emergence of these issues in their wider environment and of the significance of writings and other cultural productions which expressed them.

A development closer to the immediate professional experience of psychotherapists, including child psychotherapists, was the increasingly multi-ethnic composition of the populations whom their public clinics and treatment centres served. A significant proportion of the inhabitants of many large towns and cities in Britain are of ethnic minority origin; in some boroughs in London, this is over 50%. Once upon a time, in the earlier life of psychoanalysis and child analysis in Britain, it might have seemed reasonable to assume that most clients being seen would be, as it were, 'people like us' – that is like the white middle-class professional practitioners that most analysts and psychotherapists then were. Even so, however, the psychoanalytic world in Britain (and in America) was always somewhat more cosmopolitan in origins and outlook than the larger society in which it lived. But the role of the Tavistock and its commitment to community mental health services, and the development of child psychotherapy as an NHS profession changed that situation. Child psychotherapists and their colleagues became increasingly aware that the families with whom they worked were often not, in any simple demographic sense, people with backgrounds similar to theirs. It became important to think about the possible

differences there were between families who were now coming for treatment in clinics and those who had previously come, and how this might be relevant to working with them. It was also the case that many professions in health and social services were becoming mixed in their ethnic composition, and that newly qualified members and trainees were asking serious questions about the applicability of the ideas of psychoanalysis, to people whose contemporary experience was different from that of their older teachers. Some trainees in these professions from 'ethnic minorities' reported being disrespected by their institutions and fellow professionals, and this was another impetus for taking differences seriously.

Although the British psychoanalytic world was slow to engage with these concerns compared with the American, discussion of them began at the Tavistock in the early 2000s before the moment of George Floyd and 'Black Lives Matter'. Fakhry Davids' influential book *Internal Racism* was published in 2011 and the British Psychoanalytical Society instituted a course for its trainees in 2018² on issues of difference, with special regard to ethnicity and race, which it followed with an ongoing study group for its members. Frank Lowe conducted a seminar, *Thinking Space*, from 2002, for Tavistock members to explore these issues. He published a Tavistock Series book in 2014, whose aim was 'the promotion of thinking about race, culture, and diversity in psychotherapy and beyond.' Interest at the Tavistock in difference and disadvantage long preceded work during the last decade. A seminar for ethnic minority trainees in child psychotherapy was conducted in the 1980s; clinical work in systemic family therapy with refugees was undertaken by Renos Papadopoulos (2002) and his colleagues, and by Maureen Fox; and writings by child psychotherapists such as Mary Boston (1972) Cathy Urwin (2007), and Margaret Rustin (1989/2023, 2003/2023, 2013) gave close attention to ethnic and other differences.³

How can the issues of ethnic and other differences be understood in their relation to the field of psychoanalysis, child psychotherapy, and psychoanalytic infant observation? Before setting out to clarify these, the specific concerns of psychoanalysis as they have evolved from its beginnings need to be recognised, since it is these which have shaped child psychotherapy and infant observation.

Psychoanalysis

The distinctive object of study of psychoanalysis is the unconscious as a dynamic force in mental and emotional life. However, unconscious mental life is difficult to bring within the domain of conscious understanding, however, almost by definition the unconscious as an outcome of repression in Freud's seminal writing, and of splitting, in its development by Klein and others. Knowledge of unconscious desires, such as those originating in infancy in the Oedipal situation, is subject, as Freud put it, to 'resistance', to unconscious desires not to

understand or to acknowledge their existence. Psychoanalytic psychotherapists learn early in their practice to recognise their patients' resistance to interpretations of their states of mind. Psychoanalysts and child psychotherapists are required in their training to have a personal analysis to enable them to recognise the unconscious dimensions of their own mental lives – the phenomena of their 'Inner worlds' – and their own resistance to being understood.

The evolution of psychoanalysis has seen an immense enhancement of understanding of unconscious mental processes and their consequences for human relationships. Phenomena of projection, introjection, and projective and introjective identification, of splitting, of containment and the container-contained relation, of transference and countertransference, of Oedipal and reverse-Oedipal desires, are among the large array of descriptions of aspects of mental life that are learned about in psychoanalytic training. Related to these kinds of mental phenomena are the varieties of mental disturbances that arise in personal development. Disorders of anxiety, depression, psychotic, autistic and other troubling states of mind are the clinical focus of concern of psychoanalytic therapists.

Most of this 'theoretical' understanding of unconscious mental life has been developed through the clinical practice of psychoanalysts in their consulting rooms. 'Theoretical' understanding is set out in concepts and theories which have application to many individual cases. However, the origin of theories and concepts lies mainly in what has been learned inductively or abductively from clinical work with individuals (One such individual was Freud himself, through his self-analysis). Just as original discoveries in psychoanalysis came about through connections being established between actual experiences (especially experiences in feeling) and abstract concepts, so psychoanalytic education aims to create in its students personal connections between their clinical experiences and established psychoanalytic ideas. The purpose of the supervision of clinical cases and of infant observations is to help students to see and understand these connections, so that they become able to make them for themselves. This is a time-consuming process, which is why training in psychoanalytic child psychotherapy takes six years, including its pre-requisite Observation course. It is the connections between these elements of psychoanalytic education that explain its long-established three-part structure, consisting of a personal analysis, often (though not in child psychotherapy) called a training analysis, a theoretical curriculum based on psychoanalytic literature, and the undertaking of clinical cases with supervision.

Psychoanalytic infant observation was invented in 1948 by Esther Bick as a development of psychoanalytic education. It soon came to be seen as a useful prerequisite to a child psychotherapy and later to an adult psychoanalytic training. It arose from the understanding of the central importance of experiences in infancy to the development of the personality. It assigned great importance to the observation of particular qualities, not only in the infants, mothers

and other family members being observed, but also in the subjective experience of the observer. Infant observation thus came to be recognised as a way of encountering the observer's inner world and the thoughts and feelings which emerged from this. A strength of Infant Observation is that it enables observers to learn to understand an infant and its family in a psychoanalytic way before they have to take any clinical responsibility for them. They are required as observers only to do no harm and to be an understanding and sympathetic presence for those they observe.

So singular and specialised is the psychoanalytic perspective on human experience that it surely must be a question for those undertaking an infant observation for the first time to know what exactly it is they are expected to observe. Unconscious dimensions of thought and feeling may well take time even to recognise.

It should be noted that psychoanalysis and child psychotherapy have a purpose that is at least in part normative and ethical. Its aim is not only to understand in as truthful a way as possible the states of mind of its subjects, but also to be aware of the states of mental pain which they may suffer. And related to this to understand the difficulties which adults may find in living satisfying lives and children in arriving at a desirable kind of development. Sometimes it is a virtue of psychoanalysis that it can be less moralising and 'improving' than some other therapeutic approaches, and more focused on the understanding of psychic truth and reality in its dialogue with patients. Nevertheless, patients and their families come to psychotherapists because they need help to overcome difficulties in their lives, and responsibility for their wellbeing has usually been central to psychoanalytic practice.⁴

Much of the above may be obvious to readers of *Infant Observation*. The reason for setting it out here is to note how specific, even unique, psychoanalytic understanding is. It is because of this that the content and form of its learning is so demanding.

Questions of difference

One needs now to ask, what about these other social and cultural aspects of the experiences of patients, therapists, and indeed infants and their families, which have hitherto figured little in the training of psychoanalysts and child psychotherapists? How can they now be taken into account, since there are good reasons why they should be.

I will suggest three ways in which this task might be approached, in the context of Infant Observation. One of these concerns is the origins of psychoanalysis and its theoretical pre-suppositions, and how they bear on questions of difference. A second invites reflections on the similarities and differences between the experiences and inner worlds of infants and their families, giving attention to their social and cultural particularities. A third focuses on the

states of mind of therapists, teachers and students in regard to their understanding of differences as they engage in this work.

Psychoanalytic theories

I will begin with the first of these. It is perhaps unexpectedly the case that the concepts of race, ethnicity and identity are largely absent from the foundational literature of psychoanalysis, for example in the writings of Freud, Klein, Winnicott and Bion, and most of their followers.⁵ Freud was, however, highly aware of the existence of powerful beliefs about race in his society, and their immense consequences. He was of course a Jew, although one without religious beliefs, and he lived in Austria whose climate of opinion during much of his lifetime was strongly anti-Semitic. Freud is reported (Schorske, 1981) to have had to abandon his career as a neurologist employed at the University of Vienna, at which work he was successful, because anti-Jewish prejudice was preventing his academic advancement. He developed the new profession of psychoanalyst to create an environment that would avoid these obstacles. One of his anxieties then became to avoid psychoanalysis becoming seen as a merely 'Jewish science'. This was one of his reasons for welcoming the Christian Carl Jung into the psychoanalytic movement, even though it turned out that Jung had little liking for Jews.

Freud saw his new science as the study of elements of the aspects of the condition of all of humankind, and not merely sub-species of it. He followed Darwin whose achievement he wished to emulate, in seeking to contribute to a science of human nature whose scope was universal. Freud saw the human species as essentially of one kind, sharing evolved attributes that included unconscious dimensions of the mind which he believed he was the first to understand scientifically. Freud recognised that creative writers and artists like the ancient Greek tragedians, Shakespeare and Goethe had their own powerful but different forms of understanding of these phenomena. Freud was like other great thinkers of the rational Enlightenment in believing that there was a common human nature, and thus a shared human potential for good and harm. Karl Marx's critique of the destructiveness of capitalism was also formulated in terms of its violation of the needs and potential of a universal human nature. He refers to it using the term 'species being'.

Freud made a distinction between an aboriginal or prehistoric era which he referred to as a 'primitive' state of being, and what he saw as the historical and present era, which was populated by the same kind of human being at least as far back as ancient Egypt and the ancient Greeks. He made use of this distinction, which he based on his reading of an anthropological literature focused on early peoples, to explain the emergence of what he saw as the universal human nature of modern times. His account of the Oedipal situation and the Oedipus complex figures large in his explanation of the origins of the unconscious. In what amounts to a prehistorical fable, set out most fully in *Totem*

and Taboo (1912/13) Freud theorised the overthrow of a despotic patriarchal order in which a dominant male monopolised sexual access to all females within his clan or kinship group (Freud, 1913). The imagined overthrow of this dominant father-figure by his sons gave rise to the modern form of kinship, in which a taboo on incestuous sexual relations ensured that sexual partnerships would take place within each generation and would not be monopolised within a clan or kinship group by a single dominant male.

This account of the aboriginal origin of family structures does not now today have much credibility. Its main legacy of importance to the current discussions of 'difference' arises from Freud's choice to refer to aboriginal and supposedly pre-Oedipal states of mind and early human life as 'primitive'. Psychoanalysts have retained the use of this term to characterise infantile and sometimes pathological states of mind. This terminology has confused psychoanalytic and anthropological terminology in wholly unhelpful ways. However, the fact that Freud adopted this language from his reading of anthropological writings of the early twentieth century is not a good reason for ascribing to him or psychoanalysis as some have done (Brickman, 2017), as an essentially colonial world view, requiring 'decolonisation.'

Freud's assertion that his science of human nature had a universal application to humankind enabled him to transcend the parochialism of understandings that were merely specific to particular nations or religious cultures. The aim, which many liberals and socialists shared with him, was to develop a way of thinking through which the potentials of a universal human improvement could be imagined, although it must be said that Freud himself was far from utopian in his hopes for a better society.

The universalist perspective of psychoanalysis has shaped its understanding of the needs of infancy and early life, and thus the practice of psychoanalytic infant observation. This has been framed around the belief that the phenomena of early life such as attachment and its variations, containment or its lack, mechanisms of projection and introjection, the emergence of Oedipal desires and parental responses to them, and the larger range of states of mind which psychoanalysts have described, are usually present during the life-stage of infancy. A pre-supposition of Infant Observation is that what happens in these early years is likely to some degree to shape the developments of personality that will later take place.

It is important to understand why psychoanalysis has hitherto given so little attention to differences of race, ethnicity and culture which have now become of great concern. The received theories and practices of psychoanalysis need to be examined from this point of view. One should ask if the theories of the psychoanalytic tradition dominant in Britain, that of Freud, Anna Freud, Klein, Winnicott and Bion and their associates, are capable of development to take account of social, cultural and political differences. One hopes that this will become a subject for ongoing study and discussion.

Observing differences

Let us now look at a second approach to these issues. This concerns the similarities and differences between the experiences and mental lives of infants and their families. Infant Observation has its own resource for investigating differences. There are precedents for observational studies which have identified these. For example, in this journal in 2000, Suzanne Maiello published a report of an infant observation she had conducted in a township, in Cape Town, South Africa (Maiello, 2000). She observed a remarkable difference between the way in which African mothers in the township kept their infants in close physical contact with them well into their second or third year of life, and the emphasis in patterns of Western European and American child-care on bringing about early physical separations between mothers and babies. It seemed to Maiello that what Western culture valued most in the development of their infants was their rapid attainment of autonomy and independence. At night parents often wish to have their infants sleeping in their own cot or bed, as soon as they can be persuaded to allow this. Maiello believed she was observing a practice that valued bodily, emotional and social closeness above individual autonomy and independence. She suggested this might indicate and sustain quite deep differences between the black African culture she was observing, and the life-world or 'habitus' (to use Bourdieu's terms) of the individualist western society which she knew best. In recent decades, many mothers and fathers in the West have taken up the use of baby slings, and among some groups co-sleeping, recognising that often nothing made infants more contented than allowing them to remain in close contact with the bodies of their parents. Studies of the needs and desires of infants have perhaps played some part in this development. As infant observation has reached Taiwan and China, it has been learned that babies ordinarily share their mother's bed for a number of years. This seems to have a considerable impact on children's development and on relationships within families.

Another significant discovery of distinctive experience of infant care has been that made by Jenifer Wakelyn (2019) through her observations of babies cared by foster parents. What she saw was a discrepancy between the high standard of physical care that foster carers usually provided, and a lack of close interest in and emotional contact with an infant. The explanation of this included the circumstance that foster mothers might expect their contact with a baby to be very limited in time, which might discourage them from becoming closely attached. But it also seemed that sometimes limited expectations were placed by the social work professionals or fostering agencies who placed children in temporary care, on what the foster-parents of infants should provide, since these authorities might have had little understanding of infancy and its needs. Wakelyn observed that this situation of distance was not good for either the infant or foster carer. She has also devised a method related to infant observation that enables foster

mothers to find enjoyment and interest in their role as carers. This is the practice she has named *Watch Me Play*. It consists of enabling foster mothers (and other carers including mothers in difficulty) to 'observe' their infants in company for a short but regular and uninterrupted time. That this practice is beneficial to the care of infants has become widely known.

Cathy Urwin (2007) undertook (with sociologist Wendy Hollway) a comparative study of experiences of infant care in families of Bangladeshi and white British heritages in an east London borough. This made use of both psychoanalytic infant observation and sociobiographical narrative interviews as their methods of research. It found that the isolation of young Bangladeshi mothers, who were not with their extended families who had remained in Bangladesh was a telling difference from the experience of white mothers who were often well-supported by family members living near to them.

There are many kinds of differences in the experiences of infant and their families which should be further illuminated by the methods of psychoanalytic infant observation. These may be differences whose origin lies in patterns of social or cultural life; sometimes they may be significant from the particular perspective of a psychoanalytical understanding of infant experience and development, and sometimes they may not be. To give an example, observers of infants in China have reported that some families have a strong preference for male over female infants (Lin, 1997). Observations over a two-year period might reveal the consequences this may have for the development of male and female infants in those families.

There is a considerable diversity of family patterns in modern British society. Among the particular situations which observers might encounter are those where there are male or female same-sex parents, adoptive parents, and parents who have been traumatised by becoming refugees or asylum seekers. Differences in wealth, occupation, and education have always been likely to be linked with some differences in the experience of infants and young children, although such comparisons have not yet been widely recorded in writing arising from infant observations. Observing families of different ethnic and cultural backgrounds also offers the possibility of identifying particular kinds of care. A question for the practice of Infant Observation is what if any relationships may be found to exist between differences that have these social dimensions, and those related to understandings of infancy which make primary use of the central psychoanalytic concepts such as attachment, containment, anxiety and depression.

It must be doubted how well the established practice of Infant Observation is adapted to exploring these social and cultural questions. Most infant observers are not trained as researchers and are usually having their first experience of a psychoanalytic observation. Learning its 'primary task', which is to closely observe the infant and its family, and to understand and record the experiences and developments which are taking place, is difficult enough in itself. It is not surprising that some significant discoveries have taken place through this

practice, for example by Esther Bick (1968) in her identification of the developmental pattern of the 'second skin'. Wendy Shallcross (2019), in revisiting her own observation for her doctoral dissertation found that mental integration, in the infant she observed, could take place earlier than had been recognised. Further, the cited examples of Suzanne Maiello and Jenifer Wakelyn's work were made by analysts or child psychotherapists with considerable experience of infant observation.

It is surely desirable for infant observers to be aware of the existence or indeed prevalence of 'differences' of many kinds in the communities in which they live, and among the families of infants whom they might encounter. The broader the awareness and sensitivity of observers, supervisors and psychotherapists, the better. But one wonders how far such an awareness should change the central function and purpose of infant observation as a form of learning. This practice, both in its subjective dimension and as a way of understanding the development of infants, was not designed to be an instrument of research into social differences, and it would require a substantial change in its methods to enable this purpose. Infant observers, like psychoanalysts, are expected to listen and respond to whatever emerges in their contact with the observed or clinical subjects, 'to work from the material', and not allow their response to them to be unduly shaped by pre-determined or indeed prescribed agendas.

Differences from a subjective point of view

I will now give attention to a third and more 'subjective' approach to the question of differences and their relevance to Infant Observation. I believe that this dimension is important in current Tavistock thinking and in the conception of the 2024 Conference. There have been demands in recent years for issues of difference, and especially those concerning race, racism and anti-racism to be given more attention in Tavistock training, and the agenda of EDI (Equality Difference and Inclusion) has been given considerable priority. Seminars have even been allotted additional time where they address these issues and students are required to explicitly address them in their assessed work.

In the recent Tavistock Conference, the issue of how teachers, therapists and students might consider these issues was framed in a paper by Matthew Chuard called *Psychoanalytic observation, intersectionality and the social matrix: Implications for infant observation and its applications*. This was also the title given to the Conference itself. One element of this presentation was a diagrammatic representation, in the form of a circle, divided into numerous slots or boxes; a social matrix. Each of these identified a hypothetical 'difference' which from an infant observation perspective might be applicable to a family being observed. But its potential relevance is also to individuals undertaking an observation, or indeed attending a course at the Tavistock. Among the 33 'differences' or attributes plotted on this template were those of sex, gender identity, and

sexual orientation; race, ethnicity, citizenship status, parental occupation and household income.

This matrix extends categories of difference to a larger field than those of race and ethnicity, although those have been the most prominent in many recent discussions. One can see it as a useful way of broadening or universalising 'difference' questions. Numerous locations are located on this matrix (e.g. level of education, occupation, religion) and it is possible to plot what combination of them might be applicable to an individual or a family, or indeed oneself. The 'variables' identified are for the most part of a sociological kind. The paper in which this social matrix was presented was preceded by a clear outline of the ideas that have underpinned the psychoanalytically-based practice of infant observation. It was acknowledged that the affinity or correspondence between these two kinds of formulation, which arise from quite different conceptual frameworks, was problematic to establish, and had led to some unease when the task was attempted.

One problem in making use of these categories of the social matrix in an Infant Observation context may be that few students of Infant Observation have much knowledge of the social sciences. The same is the situation for most of their supervisors. A further complication is that a psychoanalytic perspective tends to give weight to the particular qualities and potentialities of individuals, rather than to their shared social attributes. Indeed, psychoanalytic psychotherapy is sometimes a resource that enables individuals to escape from imposed 'social' definitions of themselves, whether these are those of education, class, race or gender. Sociological methods are better adapted to understanding the behaviours of 'types' than of individuals. In setting out the methods of sociology, the great sociologist Max Weber differentiated 'average' from 'ideal types.' Sociology is usually too blunt an instrument for understanding individual persons.⁶

The primary 'object of study' of Infant Observation is infants under two years of age, observed in the setting of their close families. Many of the categories of the 'social matrix' (education, religion, occupation, etc.) have no useful application to infants. They may in principle have reference to their parents, but the methods of Infant Observation have not been designed to elicit such information about them. Observers are enjoined to be sympathetic and receptive observers of infants as they develop and of their relationship of feeling with those around them. Their task is not to seek information from parents or others about their personal histories or social circumstances. Something of those dimensions will be learned through an observer's presence in a family over one or two years, and by what they observe and what is said to them in conversations. But this is likely to be a limited and partial kind of knowledge. If too much attention is given to the social circumstances of a family (for example in Infant Observation seminars) it seems likely to diminish attention to the primary emotional and psychoanalytic focus of this work.

It was noteworthy that there were few presentations of observations of actual infants and young children at the 2024 Conference.

I have thought for a long time that it would be valuable to adopt some of the methods of Infant and Young Child Observation in the curriculum of Sociology, which I once taught. Students might be placed in a social setting (such as a supermarket, a pub, or backstage in a theatre), and asked to observe what takes place and what they see and hear. I have found in brief trials of this kind that students find it refreshing to encounter 'society' through a direct experience, rather than it mainly being mediated to them through reading and lectures. This is similar to the benefits of learning about psychoanalysis through experiences of observations rather than through reading accounts of them written by others.

The frame of reference for sociological observations would be sociology's own array of concepts, such as roles, types of authority, relations between peers, gendered behaviours, etc. Recognition of the phenomena of transference and counter-transference might valuably become part of such a learning experience too. The Tavistock practices of psychoanalytic organisational consultancy, and of Work Discussion following the Tavistock model, involve such hybridisations of 'objective' and 'subjective' perspectives. Sociological observers can complement what they learn from passive observation with interaction and conversation with subjects, in ways which do not disturb the setting being observed. However, I think there are limits on how far the procedures of psychoanalytic infant observation should be extended in that direction.

I believe that it would be useful to provide, within a Psychoanalytic Observation and Psychotherapy training, a complementary course whose purpose is to examine the larger social and cultural environment of therapeutic work. The facts of demography, the life chances of different social groups, and experiences of migration, might be among the topics considered, together with key writings on the issues and debates about race and gender. The American psychoanalyst Otto Kernberg (2016) has long argued that psychoanalytic education should be located in broad university faculties, and thereby escape the narrow confines of its traditional craft-apprenticeship model. How much university students learn from disciplines other than their main field of study must be variable. But there is no doubt that the more broadly educated and aware students in the psychotherapeutic professions can be, the better. However, it has been a strength of psychoanalysis that its principal location and affinity has been more clinical than academic. Its greatest discoveries were made when the psychoanalytic movement had little connection with universities.

A main point of reference for the concept of intersectionality was a widely-cited paper by Kimberlé Crenshaw, published in the *Stanford Law Review* in 1991, 33 years ago. This set out the view that the causes of social injury and deprivation are multiple and often act in combination with one another. It is this conjoint incidence that is meant by intersectionality. Crenshaw's paper had the particular aim of showing that women of colour in the USA were disadvantaged by the combined effects of their class position, their race, and their gender, and not by any one of these. Crenshaw argued that unless all of

these dimensions of oppression were recognised, the exceptional vulnerability of women of colour went unnoticed. She showed that this was the case. But how is that situation relevant to the practice of Infant Observation?

In part, through the influence of the agenda of EDI (Equality Diversity and Inclusion) it was contended at the 2024 Conference that the differences which should be of most concern to the field of Infant Observation were those giving rise to situations of marginalisation, exclusion, and inequality of opportunity. But in institutions and professions whose specialist work is concerned with mental health and ill-health, is it obvious that these should be their main preoccupations, or that they are best equipped in their professional capacities to address them? Their civic responsibilities as citizens are a separate matter. The EDI agenda was specifically designed, in the USA and in the UK, to focus on enactments of inequality and marginalisation in workplaces. But are these harmful enactments so prevalent in institutions like the Tavistock to require them to be the overriding concerns they have become?

Experiences of difference have become the subject of what one calls a form of consciousness-raising, which is sometimes prescriptive and accusatory in its approach. Fakhry David's *Internal Racism* (2011) drew attention to states of mind of unconscious racism which he suggested might be located unsuspected in anyone. In *The Work of Whiteness* (2021), Helen Morgan, a psychoanalytic psychotherapist, argued that white people carry a burden of responsibility for racism and colonialism by virtue of their colour. She described how she came late to recognise the racialised attitudes of Carl Jung, who had been the founding inspiration of her own analytic training. She wrote that she had found that realisation painful. Donald Moss's book, *On Having Whiteness* (2021), made a similar argument more forcefully. But there can be different views of how deep-seated, prevalent and toxic such racialised mentalities are.

The concept of the unconscious can refer both to deeply entrenched states of mind, enforced by mechanisms of repression and splitting (the psychoanalytic 'dynamic unconscious') and to unrecognised beliefs and attitudes which can be brought to consciousness, without too much difficulty, when experience provides reason and cause to do this.⁷ Sociologists such as Pierre Bourdieu, in a large body of writing, have characterised the extent to which societies and cultures shape the patterns of thoughts and feelings of their members, through schooling, the everyday transmission of cultures, and the interactions of a group membership. One of Bourdieu's key terms for the states of mind which are acquired most of the time by most people in a non-reflective way is 'habitus'. His ideas followed in the tradition of his great sociologist predecessor in France, Emile Durkheim, whose central concepts included the collective conscience (the normative order of society) collective representations (its symbolic system), and social solidarity, referring to social bonds. Bourdieu proposed that sociology should be 'reflexive' (Bourdieu & Wacquant, 1992). In other words it can bring about the understanding and recognition of implicit beliefs and

values, and thereby advance freedom from social constraints, especially those of social class. He was however unsympathetic to psychoanalysis, and in most of his writings, he scarcely referred to Freud at all. Until that is, in his (2008) *Sketch for a Self-Analysis*. In this book, written at the end of his life, he writes of his own intellectual development, and how this was influenced by his relationship to his father and to his provincial origin. These led him to define himself as opposed to the intellectual aristocracy of Parisian culture, in which the highest intellectual status was assigned to philosophy, which had appropriated its own fashionable version of psychoanalysis. Sociology for Bourdieu was by contrast a science of practice, researching society from below. But in his late *Sketch*, he acknowledges that Freud's theory of the unconscious had after all been valuable in his understanding of himself.

For some individuals, the encounter with differences provokes anxiety or hostility, consciously or unconsciously. For others, differences, although they may call for reflection, do not cause fear or offence, but may on the contrary lead to interest and pleasure. Experiences in social groups, in particular their levels of shared anxiety, shape these contrasting states of mind.

A multi-cultural society such as Britain's today is made up of countless encounters between individuals who are different from one another. Some believe that most people's experience of each other as human beings and their response to each other as such, in the various roles they occupy, for example as patients, therapists, or in their education takes precedence for them over ethnic or racial social identities. For those who hold that view, as I do, the future is more hopeful.

Notes

1. Ethnicity is racial difference as it is socially defined and constructed, race is constituted biologically (Hall, 1992).
2. For its first three years, it was conducted by Fakhry Davids, Maxine Dennis, and myself.
3. See also M.J. Rustin (1991, 2012, 2023; and Crehan & Rustin, 2018).
4. Rustin (2019) sets out at length this view of psychoanalysis as a field of knowledge and practice.
5. In a recent article Rustin (1994) I pointed out that while the idea of identity has a small place in the foundational psychoanalytic literature, the concept of identification has been prominent from its beginning. The psychoanalyst who first gave prominence to the phenomena of identity, Erik Erikson, was more interested in those differences which were related to phases of the life cycle, than to those defined in more sociological terms. The issues of troubled identity explored so sensitively in Margot Waddell's *Inside Lives* are also mainly focused on phase of the life-cycle.
6. Socio-biographical methods have been used to bridge this gap (e.g. in Chamberlayne et al. 2002 and Hollway & Jefferson, 2000).
7. In Britain it seems that antipathy to immigrants and negative feelings about them is sometimes inversely related to the density of the migrant population in a geographical area. This suggests that where districts become socially mixed, people often learn from experience to overcome preconceptions they may once have had.

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