
MOTHERHOOD, MELANCHOLIA AND MUTUAL GROUPS

by

Sue Holland

As a clinical psychologist dealing with mental health issues, mental health and what we call mental illness, I don't find it satisfactory to concentrate on the problem of illness as an individual issue which we have tended to do in the National Health Service. I favour the view that we have to also look at the social and political issues if we really want to tackle the problems of mental health. That is why, in my work with very depressed women and their families on a particular council estate in West London, I don't find it enough to do psychotherapy alone. Having got the women out of the most profound depression they go on to find mutual help with others in similar situations which enables them to do the more social and structural things about changing their lives and the lives of people around them.

The project is about doing individual work of a very specific kind, psychotherapy, and it is about developing the mutual social structures that hopefully in the future will help us understand how depression is both a psychic and a social construction.

Depression in itself is a strange phenomenon, because it is a uniquely human ability to be depressed.

Psychodynamicists believe that unless somebody can be depressed they cannot be humanised, they cannot be civilised, they cannot be socialised. Depression is about caring about somebody enough to be afraid that you might lose them and also about being afraid that your own behaviour might have contributed to losing them. That is the psychodynamic view of depression, but there are many others, particularly the medico-psychiatric view which says depression is about chemicals and about genetics and about inheritance which is why there are so many people on tranquillisers and anti-depressants. It is a functionalist view which treats humans as machines or organisms which are 'dysfunctioning'. A lot of my work has been trying to wean people off pharmacological solutions by doing individual work with them and then by moving them on into groups.

Depression is ultimately about loss. It is about loss that can go very far back to earliest relationships with parents in which something has gone wrong in terms of a separation. It could be through death, rejection or a number of other reasons, but what is left in the individual's sense of self, in their psyche, in how they see

themselves, is a deep feeling of badness because they have been left and they have lost the loved person. It is melancholic hostility towards the self and implicitly towards others. A depressed person finds it very difficult to actively go about doing things, whether it's meeting in groups or talking to other people, or fighting for what they are due. If an individual feels disabled, because they somehow carry a sense of wrongness and badness about themselves, you can't expect that person to look to the outside world for what's wrong and to fight it. So in order to get that person to find out what's really going on, we've got to be able to liberate the energies and feelings that are tied up in that person. That's why we use psychotherapeutic methods. These methods can be dangerous because they can be very reducing; they can individualise people; they can be used in a very reactionary way. This is particularly so if the therapy does not move on from the interpretive stage into the more radical areas of group work where people can define their collective desires and ultimately put them into the form of radical social action for change. This is particularly so for those sectors of society who are underprivileged and oppressed. For them revolutionary rage is a justifiable feeling which must not be **reduced** to melancholic hostility but **disengaged** from it. This has become very apparent in my work with Afro-Caribbean mothers whose profound depression stems from 'failed' relationships with their own mothers. After exploring this in individual psychotherapy I try to move the women into our Afro-Caribbean Women's History Group

which puts their personal sense of loss into the wider cultural and political context of colonialism, imperialism, immigration and racism. This is conscientization (Paulo Freire's term) and emphasises the women's shared sense of suffering and loss but also their collective strengths and their mutual dependence on each other in their struggle for change and emancipation. This is very different from the therapeutic concept of 'self-realisation' which is built on the false premise that we are essentially free and it is only our internal world which imprisons us. That is why the 'Growth' movement has little to say for those who are oppressed by the forces of capital, poverty and racial oppression. 'Who and What is the Real Enemy?' is a fundamental question for mental health and will underlie the therapeutic progression from melancholic hostility to revolutionary rage.

But we would lose some very important weapons in the fight if we discount doing individual work with a depressed person. When you're really depressed you don't want to get out of bed, you don't want to eat, you don't want to talk, you don't like people, you don't like yourself, you wake up early, you go to bed late, your bowels go wrong, you over eat, you under eat, you have all kinds of things go wrong with your body and your mind and it affects all your relationships. You're in no position to pull up your socks and go to a group and do all the things that you ought to do to change the rotten system around you. Psychotherapeutic methods can be very helpful in order to really stop with the

person long enough to go back over what's wrong, what's holding them up, what's preventing them doing those things we know they should do in order to change the situation.

A depressed person always wants to be loved and in a state of romantic love. We have to blame western culture and society for teaching us that marriage and relationships are a romance. We've done quite a lot of work on this in our groups. We've got one group that the women themselves call 'Mixed Blessings' because it is about living in relationship and having children with men from other cultures. One way in which the political structure impinges on something like a very confidential personal therapy group about marriage and sexual relationships is that many people mentioned that they felt their marriage had split up because they felt that the man only wanted them so they could get a British Passport. As if there was something bad about that and that our normal way of going about things, romantic love, is good. Yet nobody could actually say what romantic love was. When you say somebody only wanted me for a British Passport, but they didn't love me, no one could actually say what it was to be loved. We had to go back to the fact that the Home Office can destroy a marriage relationship between people of two cultures, planting all sorts of suspicions about a relationship that might in fact have been working quite well until the Home Office came along and said this person should not be here.

I have found that in order to get people out of a depression you've got to have a next step to move them onto. One of the things that we

found useful is something I call the study group. That is a basic education group which meets weekly and which the women join when they feel ready. I give them a talk and then there is a discussion. The talk could be about mental health in Britain, about the Welfare State, about family relationships, about the effect of the social structure on mental health and vice versa, and what individuals can do about it. This group has now run for about four years.

It's difficult to see that something as simple as allowing a woman to have the time to go and think about something other than staying alive and domestic work and looking after the children was quite a radical move. We found that women hadn't actually experienced that kind of feeling, that kind of stimulation to think about a topic that was other than their own personal problems and their own personal family. I put it in these terms to the women when I was doing individual work with them: that what we've done so far is just about inside and now we've really got to talk about the outside, and about how really the things that are going on outside had probably contributed very deeply to how you feel inside. So that draws people out, when they're ready, into that kind of discussion group. And it is from that kind of discussion group that some of the women got together and set up their own kind of structure for dealing with and looking into some of the issues that we met on that particular estate and which caused a lot of the pain for the women themselves. They got funding from the GLC and now run their own centre named Women's Action for Mental Health.