



WOMEN AND MENTAL ILLNESS IN POST-WAR BRITAIN

Organised by

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Project: 'The Last Taboo of Motherhood?:

Postnatal Mental Disorders in Twentieth-Century Britain'

Project website: <https://ltomhistory.org/>

Workshop Location: Room 2.43, Faculty Arts Building (FAB), University of Warwick

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PROGRAMME

Since World War Two, many policy, economic, medical, and socio-cultural changes in Britain have shaped and, at times, raised greater awareness of women's mental health. Additionally, different groups offered support systems to address and mitigate mental illness and to reduce its stigma. Support groups and services included former 'sufferers' and sufferers' families, friends and neighbours, and also recreational, workplace, local grassroots, voluntary, national and international organisations. However, these groups and services sometimes heightened mental health suffering by creating additional stress and expectations on those already struggling.

This workshop will focus on the attributed causes and tensions surrounding women's mental illnesses and shifting diagnostic frameworks. Numerous factors shaped post-war Britons' mental health. These included the aftermath of World War Two, mass migration, the introduction and expansion of the NHS, the changing influence of religion, new technologies, communication methods and mass media developments, and the blurring of private and public boundaries concerning everyday wellbeing and family matters. Furthermore, major policy changes were made in reproductive rights, abortion, marriage and divorce, housing support, education, and work opportunities. Finally, the growth in 'health', fitness, food, and 'beauty' advertising and campaigning by private, commercial, and even state services highlighted existing mental health issues or prompted new ones. Collectively, these post-war changes and cultures have been linked to 'dangerous' behaviours, including depression, eating disorders, addiction, self-harm, abuse, relationship, reproductivity or sexual issues, and difficulties living with acute or chronic illnesses or diseases.

Within the history of mental health, the 'who' of the sufferer presents drastically different challenges, which, in turn, can impact a sufferer's access to support systems and shape their everyday experiences. This workshop will consider and debate a broad range of post-war mental health experiences involving people of differing sexualities, classes, races, ethnicities, religions, cultures and ages. We will also evaluate how experiences differed and changed depending on the context, location, and accessibility to different institutions – educational, work, medical, recreational, everyday, communal, and even 'virtual'.

We are interested in the ever-expanding types of sources we work hard to locate and analyse as researchers. These range from but are not limited to diaries, memoirs, autobiographies, letters, interviews, print press, advertisements and campaigns, and family and institutional archives (i.e., governmental, medical, commercial and NGOs), to the growing use of radio, television, and film, and the new and exciting internet and social media 'archives'.

Finally, this workshop will ask a range of questions. As ethical researchers, how do we approach these source sets? And what new issues do they raise? How have scholars developed their ethics behind excavating, analysing, and historicising the narratives of women's mental illness experiences? How have we considered our positionalities and how has this influenced our relationship with our subjects and sources? How do we seek marginalised voices, and is it ethical to do so? Are there inter-generational issues? Are we simply re-producing these narratives? And if so, do we risk retrospectively diagnosing or perpetuating stigma ourselves? Can our research and findings help shape debates about mental health provision and care today? And how does our work impact us as researchers?

Collectively, this workshop will bring together researchers from various disciplines and topic areas to develop a better understanding of the causes and conflicts causing mental illness. It will also cultivate greater awareness of ethical considerations when historicising women's narratives in the post-war period.

DAY 1

Thursday 13 April 2023

Workshop Location: Room 2.43, Faculty Arts Building (FAB)

Dinner Location: Scarman Conference Centre

13:30	Arrival and Coffee
13:55	Welcome and Opening Remarks
Panel 1: Gender and Mental Health	
14:00	Fred Cooper, University of Exeter (20 minutes) Formidable Discontents: Loneliness, Gender, and Feminism in Post-war Britain
	Tracey Loughran, University of Essex (20 minutes) Under a Glass Cloche: "Ordinary" Unhappiness and Alienation in Women's Life Stories, c. 1960-1990
	Questions and Discussion (20 minutes)
15:00	Short Break (15 mins)
Panel 2: Student Mental Health in the 1960s	
15:15	Sarah Crook, University of Swansea (20 minutes) Contested Spaces: Women Undergraduates and Mental Illness in Post-war Britain
	Fabiola Creed, University of Warwick (20 minutes) "Dropp[ing] in and out": Mental Health, Marriage, Motherhood and Education, c.1960-1975
	Questions and Discussion (20 minutes)
16:15	Short Break and Coffee (15 mins)
Panel 3: Chronic Illness and Mental Health	
16:30	Andrew Burchell, University of Warwick (20 minutes) Narrating Chronicity: Biographical Voices, Gender and Illness from the Mass Observation Project Archive
	Hannah Elizabeth, London School of Hygiene and Tropical Medicine (20 minutes) Recovering Experiences of HIV-affected Pregnancy in Edinburgh
	Questions and Discussion (20 minutes)
17:30	Drinks and Break
19:30	Dinner (Scarman)

DAY 2

Friday 14 April 2023

Workshop Location: Room 2.43, Faculty Arts Building (FAB)

9:30	Coffee and Pastries
Panel 4: Mental Health and Institutions of Help and Harm	
10.00	Alice McKimm, University of Cambridge (20 minutes) Mental Health and the Women's Refuge Movements in Britain, 1971 to c. 2004.
	Louise Hide, Birkbeck, University of London (20 minutes) Reflections on Sensitivities in Mental Health Research
	Questions and Discussion (20 minutes)
11.00	Short Break (15 mins)
Panel 5: Confinement, Motherhood and Mental Health	
11.15	Hilary Marland, University of Warwick (20 minutes) 'I felt totally inadequate as a mother': Motherhood, Guilt and Mental Illness in Post-war Britain
	Georgia Poplett, University of Durham (20 minutes) "Terrifying Spectres": Confined Motherhood in Pandemic-Era Postpartum Psychosis Narratives
	Questions and Discussion (20 minutes)
12.15	Lunch and Coffee (1 hour)
Panel 6: Mental Health in the Twenty-First Century	
13.15	Louise Morgan, University of Warwick (20 minutes) 'But I Only See the Positive': Orthorexia and Clean Eating in Twenty-First Century Britain
	Charli Colegate, University of Sheffield (20 minutes) Positionality and Ethical Questions in a Qualitative Study of the Reproductive-related Experiences of Women with a History of Severe Mental Illness
	Questions and Discussion (20 minutes)
14.15	Short Break (15 mins)
14.30	Workshop Summary and Roundtable Discussion (Sources and Ethics).
15.15	Close

ABSTRACTS AND BIONOTES

Andrew Burchell

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Narrating Chronicity: Biographical Voices, Gender and Illness from the Mass Observation Project Archive

Collecting since 1981, the Mass Observation Project has produced an extensive repository of individuals' writing, observations and opinions on a range of topics. In the last decade or so, historians (most notably James Hinton) have developed more longitudinal methods to read the collection vertically: treating the archive as life-writing and autobiography (even if incidental and fragmented). This paper uses a series of case-studies of individual project participants to explore the ways in which the archive can be read both for individuals' own narration of 'chronicity' in illness and also to allow historians to assess the construction of narrative in moments of biographical disruption caused by illness (taking advantage of the diary-like, longitudinal aspects of the archive). It explores this across mental health and chronic disability (in particular, myalgic encephalomyelitis or ME) and focuses on the lives of those who self-identify as female – whilst also exploring how the archive offers an incidental window onto the lives of others (children, partners, friends and other relations) known to the writers. It will conclude with some discussion around the ethics of using the archive in this way, focusing on how the voices of these women can challenge, interpolate and speak back to the reader, or disrupt the imposition of academic narratives on their acts of health disclosure.

Biography: Biography: Andrew Burchell is a Wellcome Trust Postdoctoral Research Fellow in the Centre for the History of Medicine at the University of Warwick. A historian of medicine working on modern British history, his current research examines the medicalisation of stammering in twentieth-century Britain and the emergence of activism by people who stammer. Prior to this, he worked for a short period as a postdoctoral researcher on the Cultural History of the NHS project, exploring the Mass Observation Project archive and MOP participants' views of the NHS. This research evolved into a small side-project on mental health narratives in MOP (collaborating with Mathew Thomson) which forms the basis of the presentation at this workshop.

Charli Colegate

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Positionality and Ethical Questions in a Qualitative Study of the Reproductive-related Experiences of Women with a History of Severe Mental Illness

The intersection of the experiences of motherhood and mental illness are complex. 'Risk' features heavily in professional discourses relating to maternal mental health and women often fear being deemed a risk to their child by professionals, which can complicate care-seeking. Evidence suggests women with a personal or family history of severe mental illnesses (SMI) are at higher risk of an episode of SMI during the perinatal period. If not offered help in a timely manner, this may have consequences for women and families. Public services, particularly the NHS, provide support to women with histories of SMI who are contemplating motherhood, who are pregnant or who are already mothers. However, evidence suggests socioeconomic and ethnic inequalities in access to perinatal mental healthcare exist. Complex interpersonal, institutional and systemic factors likely influence this example of the 'inverse care law' at work. In my research I am bringing a critical, sociological perspective to understanding these complexities.

In this presentation, I will present a reflexive account of the ethics of conducting in-depth interviews women with a personal/family history of SMI. I will discuss positionality, how this has influenced my relationship with the women I have interviewed as well as the practicalities of conducting research on sensitive topics. I will outline how I have addressed questions of ethics and positionality particularly in relation to seeking voices which are often marginalized within the existing qualitative literature on women's experiences of severe postnatal mental illness.

Biography: Charli is a doctoral researcher in the Department of Sociological Studies at the University of Sheffield. Charli's research seeks to understand how race, ethnicity and class intersect with mental health status to influence women's reproductive-related experiences, both inside and outside of healthcare. She's particularly interested in the experiences of women who have a history of severe mental illness, their experiences of perinatal mental healthcare and their experiences of stigma. As part of her research she has interviewed women from different backgrounds, including women whose voices are often marginalized within the research literature on perinatal mental illness. Prior to starting a PhD, Charli worked for philanthropic foundations funding health related research. She also volunteered with an activist-led organisation seeking to improve access to trauma-informed healthcare for women who've experienced sexual violence.

Fred Cooper

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Formidable Discontents: Loneliness, Gender, and Feminism in Post-war Britain

The immediate post-war years in Britain framed the entanglement of two overlapping (and at times dissonant) mental health 'crises', as social, political, and cultural problems which had been exigent for far longer entered into – or were widely depicted as entering into – a heightened and particular state of tension. In the first instance, a purported epidemic of loneliness was attributed to experiences of urban and suburban living, a decline in religiosity and neighbourliness, a growth in ideologies of privacy beyond the middle and upper classes, and a raft of challenges to family life and healthy childhood development. In the second, contemporaries 'uncovered' a series of scenes where different women's neuroses, desperation, unhappiness, fatigue, boredom, frustration, and loneliness were thought to play out. For post-war feminists, this broad malaise represented the direct inscription of social and economic injustices on the psyche. In the context of broader anxieties over loneliness as a comparable mirror on a society gone awry, attention turned – through a growing formulation of the concept of gender – to how determinants of isolation landed in ways that harmed women in particular. Through critical attention to contemporary sources in medicine, charity work, advertising, the media, and the psy and social sciences, this paper will explore how loneliness was gendered in post-war discourses on women's mental health; where it figured in conversations over changing roles and responsibilities; and how it was leveraged (and resisted) as an experience with transformative political and social implications.

Biography: Fred Cooper is a contemporary historian of medicine and multidisciplinary researcher in the medical humanities, and presently a research fellow at the University of Exeter's Wellcome Centre for Cultures and Environments of Health. His primary interests are in loneliness and shame, specifically their histories (and futures) as objects of analysis, anxiety and intervention in medicine, public health, the humanities, and the psy and social sciences.

Fabiola Creed

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“Dropp[ing] in and out”: Mental Health, Marriage, Motherhood and Education, c.1960-1975

Drawing from a wide range of oral history projects (e.g. Mental Health Testimony, Oral Histories of Disabled People's Experience of Education, Millennium Memory Bank and finally, the Women's Liberation Oral History Project), this paper explores how women born in the 1930s and 1940s, navigated the growing educational and employment opportunities – or perhaps “endless” changes, choices and conflicts – of the 1960s and 1970s. Most of these women had married young when access to contraception was limited, and divorce was taboo. As such, they struggled to experience the new freedoms as liberally as women from younger generations. Additionally, despite the post-war marital and Baby Boom, the status of ‘wife and mother’ was slowly deteriorating in favour of ‘the new career woman who could have it all’. As a result, many felt “pressured” into pursuing further education and successful careers while navigating marital issues, motherhood and, in turn, their mental health. To survive, these women “dropped in and out”.

This paper, therefore, historicises the vast political, economic and cultural shifts of the 1960s and 1970s and how women deflected their lives to cope. It will also explore the tensions within the feminist movement and how ‘choice’ could be more debilitating for some women and their mental health.

Biography: Dr Fabiola Creed is a Research Fellow on Professor Marland’s project ‘The Last Taboo of Motherhood?: Postnatal Mental Disorders in Twentieth-Century Britain’. Drawing from books (diaries, letters, memoirs, and autobiographies), the media (magazines, newspapers, radio, television, and film) and oral histories, Fabiola explores the ways in which mothers narrated their experiences of postnatal mental illness and how the ‘public’ responded. She has also converted her medical humanities PhD on the sunbed industry into several publications. These focused on the fake tan industry, motherhood on talk shows, and the working-class pathologising of tanning ‘addicts’. She is also writing her first monograph, *The Rise and Fall of the Sunbed: Tanning Culture from Fad to Fear* (MQUP).

Sarah Crook

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Contested Spaces: Women Undergraduates and Mental Illness in Post-war Britain

Recalling her time as an undergraduate at Somerville College, Oxford, in the heady final years of the 1960s, Michéle Roberts observed that her tutors ('dons') had been 'sympathetic, in their bracingly cool way, about pregnancies, abortions, depression, freak-outs, anxiety-induced overeating, admissions to the Warneford (the local mental hospital)'. These topics were not yet terrain charted by feminist politics, because 'we hadn't begun using those words', Roberts says. They were 'problems which we felt were personal and that was that.' Despite being considered personal, however, these problems – depression, freak-outs, anxiety, and hospitalisation – were (sometimes) visible to the sympathetic, if 'bracingly cool', tutors. These tutors could not have been unaware, either, of the patriarchal environment that female students found themselves navigating as members of the wider university. At Oxford, as at other universities, female students were in the minority, although often over-represented in university mental health statistics. This paper explores female students' mental distress in postwar Britain. It places this distress within the wider context of a sector in flux, and within a history of emerging interest in student mental health.

Biography: Sarah Crook is a Senior Lecturer at Swansea University. She joined Swansea in 2018 after two years as the Sir Christopher Cox Junior Fellow at New College, Oxford, and completed her PhD, which was funded by the Wellcome Trust, at Queen Mary University of London. She is in the final, dreadful stages of writing a book about the ways that maternal unhappiness came to be an issue of public concern in post-war Britain. Her other research strand looks at the history of student mental health, and a book on this topic is being written for Yale University Press. Alongside Sarah Kenny, she is a co-editor of the Routledge Handbook of Contemporary British History. She is currently an investigator on a three-year interdisciplinary project, funded by the MRC, that looks at loneliness in students, and has recently completed a project funded by the ESRC via SMARTEN, on the relevance of student health histories. She has two lovely toddlers.

Hannah Elizabeth,

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Recovering Experiences of HIV-affected Pregnancy in Edinburgh

In the 1980s and 90s, many women in Edinburgh only discovered they were living with HIV when tested as part of pregnancy-related investigations. For many this test – often undertaken without informed patient consent – was accompanied by advice to terminate a wanted pregnancy, and avoid all future pregnancies. For those who carried their pregnancies to term, the positive HIV-test shaped what care they received and how they experienced it. These moments, from getting the test results, to terminating the pregnancy or giving birth with knowledge of their serostatus, profoundly affected many HIV positive women's ongoing mental health and experience of living with the virus, shaping interactions with their families and health and social care practitioners. Memoirs, poetry, counselling manuals, training material, newspaper articles, submissions to the contaminated blood enquiries and oral histories all offer fragments of these moments, revealing the complex and heavy emotional toll an HIV diagnosis during pregnancy had. Indeed, when reflecting on their mental health, family relationships, and life with the virus, many women returned to these early moments to explain ongoing difficulties.

This paper will discuss not just what we can recover, but how we can tell these intensely personal and difficult moments with sensitivity. Specifically, it will ask how we can write a history which includes personal experiences of HIV-affected pregnancy without repeating the agency-stripping behaviour so prevalent within some of the sources which document this history.

Biography: Hannah Elizabeth is a cultural historian of health, sexuality, and childhood in Britain. They are currently working on a Wellcome funded fellowship investigating how HIV-affected people built and maintained families in Edinburgh and influenced national and international policy and practice through daily acts of love, care, and activism. Their most recent publication from the project can be read here: [‘Recovering Mothers’ Experiences of HIV/AIDS Health Activism in Edinburgh, 1983-2000’](#). They have published widely on the history of British public health education and teenage sexual health.

Louise Hide

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Reflections on Sensitivities in Mental Health Research

Research in the field of mental health – whether through documentary evidence or in-person interviews – invariably involves encounters with highly sensitive information. Not only does it raise myriad ethical questions, but it can impact on our own emotional and mental well-being too.

Over the past four years, I have led and participated in various events that have explored some of the methodological approaches and ethical conundrums of addressing a range of sensitive topics. For this workshop, I will share some of the critical concerns that have been raised during these events framing them within my own research on cultures of harm in institutions of care, particularly regarding a number of inquiries into abusive practices in psychiatric and ‘mental handicap’ hospitals in the late 1960s and 1970s. Questions I will consider include, for example, what do we mean by ‘sensitive’? How do we work with potentially sensitive materials that were generated and archived when less stringent rules and practices were in place? What are our responsibilities to our historical subjects and their descendants? And what should we do about anonymisation?

Finally, I will briefly touch on how working with potentially distressing and difficult subject matter can impact our own mental health before suggesting different routes to support whether peer-to-peer, through supervision, or at an institutional or funder level.

Biography: Dr Louise Hide is a social historian of psychiatry and its institutions. She is a Wellcome Trust Fellow in Medical Humanities and a Senior Honorary Research Fellow at Birkbeck, University of London. She co-edited a special issue of the *Social History of Medicine* (November 2018) and has published on the histories of pain, delusions and institutional cultures as well as, most recently, on working with psychiatric sources. Her first monograph, *Gender and Class in English Asylums, 1890-1914* was published in 2014. She is a founding member of the [Challenging Research Network](#).

Tracey Loughran

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Under a Glass Cloche: “Ordinary” Unhappiness and Alienation in Women’s Life Stories, c. 1960-1990

“I know when my kids were young and I felt stressed and tired, I always felt like a cloche, a glass cloche over me [...] and, er, and everything was happening a little way away, and I used to photograph it a lot because I knew that I felt like I was slightly missing out, as if I wasn’t really engaged, so I’ve got albums full of photos, because I somehow just knew that I would need them to help me remember! [...] But no, yeah, I think I was still, I’m pretty sure I was a fun mum. I think my kids would say that I was a fun mum.” MJ (born 1968), interviewed in 2020, described a state of mind that did not slip into mental illness, but was certainly not optimal mental health. These feelings of separation from everyday life recur in the stories of many women, often associated with specific moments in the cycle of their caring responsibilities for children or for parents. This paper explores women’s stories of these liminal states of mental health/illness, drawing primarily on oral history interviews with women born between 1940-1970 and placing these in the context of other forms of individual testimony such as Mass Observation and evidence from the “woman’s world” of mass-market magazines. It asks what it means to accept certain forms of unhappiness and alienation as an “ordinary” part of women’s lives, and how such acceptance may reinforce gendered patterns of behaviour and discrimination.

Biography: Tracey Loughran is Professor of History at the University of Essex. From 2017-2022 she was PI on the project ‘Body, Self and Family: Women’s Emotional, Psychological, and Bodily Health in Britain, c. 1960-1990’ (Wellcome Trust). This project aimed to create an intersectional history of women’s “everyday health” from the ground up, drawing on oral history interviews, Mass Observation directives, mass-market magazines, and archival materials on feminist, LGBTQ+, and Global Majority activism. She is the author of *Shell-Shock and Medical Culture in First World War Britain* (2017), and co-editor of *The Palgrave Handbook of Infertility in History: Approaches, Contexts and Perspectives* (2017; with Gayle Davis), and *Emotion and the Researcher: Sites, Subjectivities and Relationships* (2018; with Dawn Mannay). Her research interests centre on how knowledge is constructed, ‘translated’ and transformed across different disciplines and contexts, and the interaction of representation and experience in shaping selfhood.

Hilary Marland

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‘I felt totally inadequate as a mother’: Motherhood, Guilt and Mental Illness in Post-war Britain

In his 1994 BBC documentary ‘Baby Blues’, now discredited journalist Martin Bashir highlighted the advantages of admitting mothers suffering postpartum psychosis to specialised Mother and Baby Units (MBUs), where mother and baby would be kept together, as opposed to general psychiatric wards. He also warned, drawing on expert opinions, of the likely negative impact of the mother’s mental illness on the infant’s development and future prospects.

This paper explores the tensions between the provision of treatment for mothers and the needs of the infant, that emerged during the post-war period against the backdrop of attachment theory. The establishment of MBUs was seen as the best option for restoring mothers to health, but also, critically, by encouraging bonding, they would mitigate the impact of ‘mothers predisposed to attachment failure’ on their babies and address the ‘unconscious conflicts in the woman about assuming the role and responsibilities of mother’. This paper draws on medical literature, the press, the archives of organisations advocating for improved maternity care, and mothers’ own accounts of their illness and recovery, which described their feelings of ambivalence about becoming mothers and fears that their illness would damage their infants. It reflects on the potential of those advocating MBUs to perpetuate stigma and exacerbate the anxieties placed on women already suffering severe mental illness, who were subjected to explicit warnings that their postpartum illness and failure to bond and nurture might jeopardise their new-borns’ future development.

Biography: Hilary Marland is Professor of History at the University of Warwick. She is author of *Dangerous Motherhood: Insanity and Childbirth in Victorian Britain* (2004), *Health and Girlhood in Britain 1874-1920* (2013) and with Catherine Cox, *Disorder Contained: Mental Breakdown and the Modern Prison in England and Ireland, 1840-1900* (2022). Between 2014 and 2021 she was co-Principal Investigator on a Wellcome Trust funded project on prison medicine in England and Ireland, 1850-2000 and is currently Principal Investigator on a Wellcome Trust Investigator Award, ‘The Last Taboo of Motherhood: Postnatal Mental Disorders in Twentieth-Century Britain’ (2021-24). She was founder and for many years Director of the Centre for the History of Medicine at Warwick and former editor of *Social History of Medicine*. Her research interests and publications have focused on women, medicine and psychiatry, migration and mental illness, prison medicine, medicine and the household, and the history of childbirth and midwifery.

Alice McKimm

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Mental Health and the Women's Refuge Movements in Britain, 1971 to c. 2004.

When victims and survivors of domestic abuse arrived at early women's shelters, the first of which was established in Chiswick, London in 1971, roughly forty percent were taking Valium or other anti-depressants. Aware of the widespread pathologization of 'battered women', and plagued by a persistent lack of funds, women's refuges initially dedicated few resources to the mental health of victim-survivors, their children, and the workers who supported them. In contrast, by the early 2000s, a majority of shelters across Britain provided professional mental health support to all residents and workers, and had even contributed to the development of new diagnostic concepts, including 'battered woman syndrome' and 'vicarious trauma'. This paper traces women's refuges' changing approaches to mental health between 1971 and the early 2000s. It asks to what extent the increasing attention paid to women's mental health within these organisations from the early 1980s positively or negatively affected refuge workers, the support offered to victim-survivors, and the position of the latter in wider society. Drawing from a range of sources, from the annual reports and newsletters of national refuge organisations to archived sociological and oral history interviews, the paper also contributes to discussions over the ethical issues involved in retrospectively 'diagnosing' historical actors, and the limits of reading historical sources 'against the grain'.

Biography: Alice McKimm is a PhD student at the University of Cambridge. Her thesis examines the multivocal yet interconnected movements to establish women's shelters across the UK after 1971. Alice's research compares the literal and symbolic accommodation of women of different ages, ethnicities, sexual orientations and disability statuses in individual women's refuges across the UK. It further characterises women's shelters as a collaborative social movement, considering their influence on cultural discourses and public policy. This project is fully funded by the Derek Brewer Research Studentship and Gordon Glasgow Scholarship at Emmanuel College.

Louise Morgan

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‘But I Only See the Positive’: Orthorexia and Clean Eating in Twenty-First Century Britain

Orthorexia was initially named in 1996, referring to symptoms of patients who were obsessed with healthy eating and food purity, rather than body size and weight as in cases of anorexia nervosa. Recent popular interest in ‘clean eating’ in twenty-first century Britain, along with the rise of health gurus through expanding social media networks, such as Ella Mills (Deliciously Ella), has been cited as the cause of an outbreak of orthorexia. Current medical discourse on the illness presents it as a modern development in the wider history of eating disorders, with campaigners fighting for its inclusion in the Diagnostic and Statistical Manual of Mental Disorders.

This paper will explore the place of orthorexia in a wider history of eating disorders, particularly its role as a potentially ‘genderless’ disorder. It will examine the ways in which women became embroiled in debates surrounding diet culture, the dangers of obsessive food behaviours, and the problem of social media in encouraging these issues. Finally, it asks whether orthorexia can be understood as part of a wider history of dieting and disordered eating, furthered by contemporary obsessions with social media and influencers, as current medical literature would suggest? Or rather, is it part of a longer cultural obsession with our own health and diet?

Biography: Louise Morgan is a final-year PhD candidate at the University of Warwick. Based in the Centre for the History of Medicine, her research focuses on the historical and cultural context of orthorexia nervosa, a form of disordered eating obsessed with health. Her thesis examines the rise in the popularity of ‘clean eating’ in Britain through the use of cookbooks, mass media, and the Internet. The thesis aims to question the links between this growth and the construction of disordered eating surrounding healthy food and healthy lifestyles in the past thirty years.

Georgia Poplett

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“Terrifying Spectres”: Confined Motherhood in Pandemic-Era Postpartum Psychosis Narratives

My research investigates contemporary, pandemic-era birthing conditions and postpartum psychosis (PPP) through creative practice after the gothic tradition. PPP is a highly stigmatised and clinically complex mental illness, whose treatment pathways predominantly lead to the psychiatric unit. The isolation often attendant on this experience extends interesting parallels to the challenges of COVID-19 birthing conditions and instigates a dialogue with the haunted houses and confined spaces of Gothic, often mapped through the terror of supernatural haunting.

In Gothic, Carol Margaret Davison writes, ‘the potentially nightmarish, “dark side” of [...] motherhood is explored and exposed’ (2004). This resonates with Cheryl Beck’s narrative analysis of PPP accounts, which makes visible ‘overwhelming feelings of fear and of being trapped in [...] insanity’ (2020). This paper will trace how Gothic motifs of entrapment and haunting provide a narrative framework to articulate these fears, lending many fictional representations of what we might read as PPP a distinctly gothic quality as in Julia Fine’s 2021 novel *The Upstairs House* and Jennifer Kent’s 2014 film *The Babadook*.

In using the textual anatomy of Gothic to cultivate greater awareness of PPP, my project walks a delicate line between presenting and perpetuating the stigmas present here. What practices of reading will best inform such a narrative, one both enriched by Gothic and true to embodied experience? This paper will consider the tensions of this approach, drawing on Davison and Beck’s work in interrogating how Gothic may be reconfigured to help destigmatise a fraught juncture of post-war women’s mental health.

Biography: Georgia Poplett is a Postgraduate Researcher in Medical Humanities and Creative Writing at Durham University, where she is currently completing an interdisciplinary practice-led PhD. Her research considers models for writing the lived experience of postpartum psychosis under pandemic-era birthing conditions, and looks to the textual anatomy of Gothic – a genre notable for its power to haunt and unsettle – in articulating what is difficult to represent about this experience. She draws on the insights and tensions of life-writing and fiction from the late modern to contemporary periods and, as part of her methodology, explores the production of original novel-writing as academic discourse. Through this unusual partnership, her work aims to contribute to cultural dialogue around postpartum psychosis and locate the fiction novel as an important site for thinking and communicating about maternal mental health.