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Tensions of a Discipline: The First World Congress of Psychiatry in Paris, between Global Ambitions and Local Practices

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ABSTRACT: In 1950, the First World Congress of Psychiatry took place in Paris. Gathering more than two thousand people, the event became a stage where many issues were negotiated for the psychiatric discipline in particular but also for the way of doing science of which the international conference was one of the most widespread practices. Between two wars—World War II and the Cold War—defining the international community was complex. Recently awarded a Nobel Prize for Medicine, psychiatry as a discipline negotiated its boundaries between biological and/or social determinants. This boundary work was framed by a narrative that underlined the novelty of the process—the first congress—and the materiality of a congress that also legitimized itself through a particular place, the Sorbonne in Paris.

KEYWORDS: history of psychiatry, science capitals, international conferences, history of science

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On September 19, 1950, French psychiatrist Jean Delay inaugurated the First World Congress of Psychiatry at the prestigious Grand Amphitheater of the Sorbonne, in the heart of Paris. His personality and his opening remarks reflected the crossroads at which psychiatry found itself at the time. Delay was a university professor with limited experience in asylums, at a time when the field was still dominated by physicians working in large psychiatric hospitals. In his speech, he alternated between praising French ingenuity and celebrating the assembled global community; he emphasized the centrality of therapeutics but did not mention asylums, which were the main concern of nineteenth-century psychiatry. The First World Congress of Psychiatry captured the essence of a discipline undergoing transformation, from nineteenth-century custodianship to the production of academic knowledge, from local and national horizons of experience to international epistemic communities, and from early twentieth-century nosological debates to a focus on (biological) therapies.

Academic conferences are a unique form of academic knowledge production and scientific culture that emerged during the eighteenth and nineteenth centuries, in addition to scientific societies and academic journals with scientific articles.¹ Through these infrastructures scientific disciplines were constructed, boundaries negotiated, controversies resolved, and the meaning of science (re)defined. These “knowledge containers” have received significant attention in the field of science and technology studies in the past twenty years,² as the

¹ Joris Vandendriessche, *Medical Societies and Scientific Culture in Nineteenth-Century Belgium* (Manchester: Manchester University Press, 2018).

² Eva Andersen, “A Republic of Alienists? A Transnational Perspective on Psychiatric Knowledge Circulation across Europe (1843–1925)” (Ph.D. diss., University of Luxembourg, 2021), 74–230.

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construction of knowledge is now a critical issue in knowledge-based Western societies.³

International conferences hold a special place in this abundant literature. Research in *histoire croisée*, transnational history, and global history often focusses on these conferences because they embody a relevant ideal type.⁴ This historiography has two major limitations. First, it is essentially focused on the first internationalization, from the late nineteenth century until the outbreak of World War I, and neglects the post-1945 period.⁵ Second, it does not take account of the nonacademic aspects of conferences. While this has been somewhat addressed for other “knowledge containers,” it remains surprisingly little addressed for conferences, despite its importance. The “object congress,” as Eric Brian referred to it more than thirty years ago, remains a black box, with little attention paid to its location, materiality, financing, and other key factors.⁶ These comments apply not only to the history of academic congresses in general but also to the history of psychiatry in particular. If the history of psychiatry has taken the

³ Jakob Vogel, “Von Der Wissenschafts- zur Wissensgeschichte. Für eine Historisierung der ‘Wissensgesellschaft,’” *Geschichte und Gesellschaft* 30, no. 4 (October 1, 2004): 639–60.

⁴ Anne Rasmussen, “Les Congrès internationaux liés aux Expositions universelles de Paris (1867–1900),” *Mil neuf cent. Revue d’histoire intellectuelle (Cahiers Georges Sorel)* 7, no. 1 (1989): 23–44, <https://doi.org/10.3406/mcm.1989.976>; Pascale Rabault-Feuerhahn and Wolf Feuerhahn, eds., *La fabrique internationale de la science. Les congrès scientifiques de 1865 à 1945* (Revue Germanique Internationale, 2010).

⁵ See the project “The Scientific Conference: A Social, Cultural and Political History” in the framework of HERA’s fourth joint research program, “Public Spaces: Culture and Integration in Europe.”

⁶ Eric Brian, “Y a-t-il un objet Congrès ? Le cas du Congrès international de statistique (1853–1876),” *Mil neuf cent. Revue d’histoire intellectuelle (Cahiers Georges Sorel)* 7, no. 1 (1989): 9–22.

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transnational turn,⁷ there has been little attention to the history of its congresses and conferences.⁸

This article uses a nine-day international conference in Paris in 1950 to explore the tensions within a scientific discipline—in this case psychiatry—in the aftermath of World War II by examining the four words used to define the conference. The first section, titled “First,” explains why the field of psychiatry felt the need to signal the start of a new era in the late 1940s, despite previous international conferences since the late nineteenth century. The second section, “World,” shows how the proclaimed scientific universalism was in fact dominated by the Global North, rife with language politics and shaped by the early stages of the Cold War. Third, the “Congress” section argues that the materiality of the congress—its locations, financing, and leisure activities—provides insight in the aforementioned tensions. Finally, the “Psychiatry” section explores the boundary work of a discipline in transition. One way the field attempted to differentiate itself from the mental health movement was by focusing on biological psychiatry, while also trying to produce scientific knowledge like the widely accepted medical field of neurology. Contemporary debates over therapeutic approaches—like that between psychoanalysis and psychiatric biology—were also reflected in the historical imaginary of the conference exhibit, “An Exhibition of the History and Progress of Psychiatry.”

⁷ Waltraud Ernst, ed., *Transnational Psychiatries: Social and Cultural Histories of Psychiatry in Comparative Perspective c. 1800–2000* (Newcastle: Cambridge Scholars, 2010); Harry Yi-Jui Wu, *Mad by the Millions: Mental Disorders and the Early Years of the World Health Organization* (Cambridge, Mass.: MIT Press, 2021).

⁸ Andersen, “Republic of Alienists?” (n. 2); Alexandre Klein, “1961. Montréal, capitale mondiale de la psychiatrie,” *PSN* 20, no. 2 (2022): 33–55.

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The article has two main goals: to present a multifaceted image of a scientific field undergoing significant change and to illustrate the heuristic value scientific conferences have to offer to the historical gaze. It is based on two main sources. First, the particularly voluminous conference proceedings (about 4,500 pages) proved to be extremely revealing. They consist of two parts: the first part, which was published prior to the conference, contains the papers that were presented, while the second part, published after the conference, includes the discussions, which provide insight into how psychiatry was discussed and practiced at conferences at the time. All of the papers were circulated beforehand and the debates were transcribed, a tradition retained from the journals of nineteenth-century learned societies. The second principal source is Henri Ey's archives, which document the everyday work of organizing a congress. Part of this private archive can be found at the municipal archives of Perpignan, where they were deposited after Ey's death in the 1970s. More of his papers were recently discovered at the Henri Ey Library at Sainte-Anne Hospital in Paris, pertaining almost exclusively to the 1950 conference.⁹

First

Initially, the organizers did not feel the need to label the upcoming conference the "first": the organizing committee's letterhead bore the heading "International Congress of Psychiatry" in

⁹ Henry Ey (1900–1907) was a prominent figure in twentieth-century French psychiatry. He was the author of several influential handbooks (*Traité de psychiatrie de l'Encyclopédie médico-chirurgicale. Manuel de psychiatrie . . .*) and played an important role in organizing the professional field. Being quite eclectic in his approach, mixing psychoanalysis with neurological theories, he played a mediating role in the divided French context: Jean-Christophe Coffin, ed., *Conceptions de la folie & pratiques de la psychiatrie. Autour d'Henri Ey, Les Cahiers Henri Ey 20–21* (Perpignan: Association pour la Fondation Henri Ey, 2008). I would like to express my gratitude to Catherine Lavielle for bringing these archives to my attention.

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1947 and changed only in 1950, when the first part of the proceedings was published prior to the congress. It was during the congress itself that the official name was changed to “First World Congress of Psychiatry” by a decision of the attending national societies of psychiatry, on the proposal of Henri Ey. Labeling it the “first” made sense once the organizers started to project a future where they would hold regular congresses. This was how Henri Ey justified his proposal: “I propose that this International Congress, which should be the starting point for periodic world congresses, take the official name of First World Congress of Psychiatry.”¹⁰ By declaring the congress as the first in a series, the organizers were able to assert their position and influence as founding members in future events. Henri Ey and other French psychiatrists on the committee would maintain this influence long afterward and use it to their advantage in later disputes. The idea of a founding act was highlighted in speeches, both by French officials such as Minister of Health Pierre Schneiter, who expressed his “satisfaction at seeing that it is in France, in Paris, that this first Congress is being held,”¹¹ and by foreign guests such as Peruvian psychiatrist Honorio Delgado, a prominent figure in the Spanish-speaking field. Later on, this congress assumed even greater importance when it was cast as the founding moment of the World Psychiatric Association (WPA). Although it was formally created in 1961, claiming that it dated back to 1950 gave it a more venerable age: in 2020, the WPA thus celebrated its seventieth anniversary.¹²

¹⁰ Henri Ey, ed., *Premier Congrès Mondial de Psychiatrie—VIII—Actes Généraux Du Congrès* (Paris: Hermann & cie, 1952), 131.

¹¹ *Ibid.*, 111.

¹² Vera Sartorius and Norman Sartorius, “The WPA Celebrates Its 70th Birthday,” *World Psychiatry* 19, no. 3 (2020): 403–4.

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Designating this congress as the first clearly distinguished and demarcated it from former conferences. Some, such as the *Congrès de psychiatrie et de neurologie de langue française*, which first took place in 1890 in Rouen and still exists today, already had a long tradition.¹³ Several others had an international touch, although they were all held in (Western) Europe (six in Belgium, two in Paris). A dozen international conferences on psychiatry could be documented in the nineteenth century,¹⁴ in reality mostly national events with few participants from elsewhere in Europe. At the 1878 conference in Paris, for example, over 80 percent of the 148 participants were French. The rest were from nine other countries, mostly Italy (8 percent), plus one non-European participant from the United States.¹⁵ Thirty years later, the *1^{er} Congrès international de psychiatrie, de neurologie, de psychologie et de l'assistance des aliénés*, held in Amsterdam, was more globally ambitious. Although the Dutch delegation was by far the largest (almost a third of the 450 participants), Europe was represented in greater diversity than in Paris in 1878, and important delegations from South and North America gave it more international flair. Asia was also represented, thanks to Japanese psychiatrist Riuji Shima from Kyoto University. There were two arguments driving the desire for a more international assembly in Amsterdam. Organizers emphasized the need to submit the “diverse opinions that develop within the narrow confines of countries speaking the same language . . . to the forum of international criticism,” while the psychiatric field was feeling pressure after other disciplines—including psychology—had

¹³ Frédéric Carbonel, “Rouen 1890: Le premier Congrès national de la psychiatrie française,” *Etudes Normandes*, no. 4 (2005): 29–34.

¹⁴ Robert Doré, *Essai d'une bibliographie des congrès internationaux* (Paris: É. Champion, 1923), lists eight of them.

¹⁵ *dCongrès international de médecine mentale, tenu à Paris, du 5 au 10 août 1878* (Paris: Imprimerie Nationale, 1880).

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already organized international conferences: the Dutch organizers complained in 1907 that “psychiatry alone has not given rise to international discussions.”¹⁶

Unlike other international conference cycles, such as those on public hygiene (Office International d’Hygiène Publique in 1907) or tuberculosis (International Central Bureau for Campaign against Tuberculosis in 1902), those on insanity did not lead to the institutionalization of international cooperation until 1914.¹⁷ This loose-knit international community of alienists did not survive World War I. While other professional associations resumed activity after 1918 (excluding the members of the Triple Alliance for a more or less extended period), this was not the case for psychiatry.¹⁸ During this era, the League of Nations and its numerous agencies and the International Labour Organization (ILO) were created, based on international assemblies that had been formed before World War I, and international epistemic communities began to institutionalize.¹⁹ International congresses on psychiatry during the interwar period focused essentially on mental hygiene or emerging specialties such as child psychiatry. When, at a preparatory meeting for the Paris conference in 1950, Swiss psychiatrist André Répond proposed that it be inspired by the international congresses of the Belle Époque, Henri Ey retorted that

¹⁶ “Avant-Propos,” in *Compte-rendu des travaux du 1er Congrès international de psychiatrie, de neurologie, de psychologie et de l’assistance des aliénés tenu à Amsterdam Du 2 à 7 Septembre 1907* (Amsterdam: J.H. de Bussy, 1908), v–vi.

¹⁷ Paul Weindling, “Introduction: Constructing International Health between the Wars,” in *International Health Organisations and Movements, 1918–1939*, ed. Paul Weindling (Cambridge: Cambridge University Press, 1995), 1–16.

¹⁸ For example, Geneviève Warland and Matthias Middell, “‘Pirenne and Co.’: The Internationalization of Belgian Historical Science, 1880s–1920s,” *Revue Belge de Philologie et d’Histoire* 90, no. 4 (2012): 1227–48.

¹⁹ Sandrine Kott, “Une ‘communauté épistémique’ du Social?,” *Genèses*, no. 2 (2008): 26–46.

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“one never finds references to these congresses in the literature.”²⁰ Designating the congress as the first marked a turning point in the discipline, a shift away from the usual method of treating individuals in custodial asylums. It firmly established psychiatry as a medical specialty distanced from its prior practices and set a new direction for the field.

World

Like the word “First,” “World” was not part of the congress name until it took place. Prior to September 1950, the word “international” was used. The name change set the congress apart from those that referred to themselves as “international.” Over the twentieth century, scientific communities that crossed national borders increasingly began to identify themselves through the concept of “world,” which had broader and more universal connotations than “international.”

The congress was held after two *world* wars and the establishment of the *World* Health Organization and the *World* Federation of Mental Health in 1949. The meanings of “international” or “world” were both open to interpretation, however: while universalism was frequently proclaimed in various speeches, its meaning was constantly reinterpreted. Three points demonstrate this: the origin of participants, the issue of language, and the impact of the Cold War.

²⁰ Archives Sainte Anne, fonds Henri Ey, box 5, preparatory meeting for the meeting of the psychiatric societies, September 18, 1950.

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The Origins of Congress Participants

Despite their lofty claims, the international conferences of the Belle Époque were still essentially national conferences with a minority of international participants. The distribution of the presidency and vice-presidencies of the 1950 congress is one indication of the organizers’ mental map of the world: the presidency was given to France and the six vice-presidencies were allotted to Switzerland, Great Britain, the United States, Brazil as representative of Latin America, the Soviet Union as representative of Eastern Europe, and Sweden as representative of the Scandinavian countries.

Although psychiatrists from France were not the absolute majority of participants at the 1950 congress, they represented the largest national contingent by far. If this “domination” by numbers was not exceptional as such, it was the last time that France held such a central position, to be usurped by the United States. The Paris congress was still a very European gathering, despite the noteworthy Latin American presence led by Brazil.

Paris 1950		Zürich 1956		Montreal 1961	
Country	Percentage	Country	Percentage	Country	Percentage
France	33.72	USA	25.80	USA	48.72
USA	8.80	Germany	13.18	Canada	26.74
Great Britain	8.22	Switzerland	9.68	Great Britain	4.48
Italy	5.72	France	9.37	France	3.06
Brazil	4.95	Great Britain	7.62	West Germany	2.13

Table 1. Most represented countries at the first three World Congresses of Psychiatry

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	Paris 1950 (%)	Zürich 1956 (%)	Montreal 1961 (%)
Africa	1.35	0.94	0.64
Asia	1.67	1.81	1.99
Europe	75.47	63.71	15.72
North America	9.89	27.73	75.39
Latin America	10.98	4.68	5.69

Table 2. Representation of the continents at the first three World Congresses of Psychiatry

In a way, the Parisian conference was consistent with the international conferences of the nineteenth century, dominated as it was by Western European countries and the rest of the world being mainly represented by North and South America. The (French) organizers never explicitly discussed what they meant by “international” or “world.” Two “geographical” issues were discussed during the preparation. First, the organizers were truly obsessed with securing the participation of the American Psychiatric Association (APA). In the APA’s letter of agreement, it moreover requested a vice-presidency on the congress planning committee, which Henri Ey was quick to grant.²¹ The APA’s approval was significant due to its large membership base and central role in funding the congress: it was the only organization that consistently paid its contributions

²¹ Ibid.

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on time.²² APA representatives henceforth appeared regularly in conference planning discussion. Pierre Pichot, a member of the organizing committee, went to the 1949 APA congress to discuss planning in person.²³ He returned rather disappointed because his American peers were not happy with previously made choices, notably the choice of “US rapporteurs who are not of American origin.”²⁴ The date of the congress was even chosen according to their ability to participate.

The second “geographical” issue was identifying which countries would be part of the newly formed international scientific community, which was discussed at a meeting shortly after World War II. In November 1947, a gathering of approximately twenty countries decided to invite countries “that were either members of the United Nations or had signed a peace treaty.”²⁵ They excluded regions that were engaged in struggles for independence, but the main omissions were Germany and Japan. This discussion raised the issues of Germany starting World War II and psychiatrists’ involvement in the euthanasia of psychiatric patients, but these issues were not explicitly addressed at the conference. Despite a consensus that German psychiatrists should be allowed to attend, they were not invited by the organizing committee; only psychiatrists

²² Archives Sainte Anne, fonds Henri Ey, box 1, minutes of the meeting of the organizing committee, July 5, 1948.

²³ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, May 4, 1949.

²⁴ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, July 6, 1949. They were likely referring to the numerous psychiatrists who fled Nazi Germany and Austria and played a crucial role in shaping American psychiatry from the late 1930s onward. Aleksandra Loewenau, “Between Resentment and Aid: German and Austrian Psychiatrist and Neurologist Refugees in Great Britain since 1933,” *J. Hist. Neurosci.* 25, no. 3 (2016): 348–62.

²⁵ Archives Sainte Anne, fonds Henri Ey, box 3, minutes of the administrative meetings, November 2, 1947.

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permitted to work by the Allies were allowed to participate,²⁶ and even then, only as observers and not to present their own research.²⁷

Between World Languages and Psychiatric Languages

Language policies are highly symbolic representations of what words mean at a given time. This is evident in the choice of the word “world,” which further reveals how a shared world can be created. Adopting almost word for word the argument of the organizers of the 1907 Amsterdam congress in his opening speech, Jean Delay stressed the necessity of getting past “congresses with a restricted objective periodically grouping together psychiatrists of the same language.”²⁸

In 1949, the French organizers held a meeting where the official languages of the coming conference were chosen: twenty-two voted for French, twenty for English, and ten for Spanish. The four votes for Russian were linked to the possible participation of the Soviet Union.²⁹ At the opening of the congress, representatives of the top three linguistic areas took the floor, each explicitly claiming to speak on the behalf of their linguistic community: the Englishman John R. Rees spoke in the name of “We who are English speaking,”³⁰ the Peruvian Honorio Delgado for “Nosotros los psiquiatras espanoïes e hispanoamericanos.”³¹ Sessions in the Grand Amphithéâtre

²⁶ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, November 30, 1949.

²⁷ Max Müller, *Erinnerungen. Erlebte Psychatriegeschichte 1920–1960* (Berlin: Springer, 1982), 410.

²⁸ Henri Ey, ed., “Discours de M. Le Professeur Jean Delay,” in Ey, *Premier Congrès Mondial de Psychiatrie–VIII* (n. 10), 88.

²⁹ Archives Sainte Anne, fonds Henri Ey, box 3, minutes of the administrative meetings, November 2, 1947.

³⁰ Henri Ey, ed., “Discours de J.R. Rees,” in Ey, *Premier Congrès Mondial de Psychiatrie–VIII* (n. 10), 105.

³¹ Henri Ey, ed., “Discours de Honorio Delgado,” in Ey, *Premier Congrès Mondial de Psychiatrie–VIII* (n. 10), 107.

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were simultaneously translated into all three official languages, but presentations in the other auditoriums were consecutively translated only into French and English, for lack of financial and technical means.

German was a common language of international congresses of the latter half of the nineteenth century.³² But when German psychiatrists (supported by some Swiss psychiatrists) tried to have German made one of the official congress languages late in 1949, their request was refused.³³ Several German-speaking professors of psychiatry brought the issue up again with Henri Ey a few weeks before the congress, but the answer was the same: “The question of language has not been settled as you would wish: your text will therefore have to be read in French or in English. Nevertheless, you may say a few words at the beginning of your talk and read it, or have it read by a secretary, in English or French, as you wish. You can have your text translated yourself or you can leave it to us to have it translated.”³⁴ Several German psychiatrists refused to come to Paris as a result. During the congress, Austrian psychiatrist Erwin Stransky, who had been a radical German nationalist during the interwar period, requested that German be accepted as the official language at the next congress.³⁵ Not hearing German at the congress was reassuring for some attendees, especially those who had fled Germany or Austria after 1933.

³² Andersen, “Republic of Alienists?” (n. 2).

³³ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, November 30, 1949.

³⁴ Archives Sainte Anne, fonds Henri Ey, box 4, letter from Henri Ey to Jürgen Zutt and Aubrey Lewis, August 3, 1950. Jürgen Zutt seems not to have come to the congress after all. Similar answer for Hans Kehrer of the University of Freiburg.

³⁵ H. Strotzka, “Bericht über den Internationalen Kongreß für Psychiatrie, Paris 1950,” *Wiener Medizinische Wochenschrift* (1946) 101, no. 3 (January 20, 1951): 56.

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Swiss psychiatrist Max Müller recalled a meeting in Paris with former Austrian colleague Erwin Stengel, who had left for England in 1938; Stengel refused to speak German with him.³⁶

In addition to its geopolitical implications, language also touches on heuristic issues. There was discussion of a common conceptual language. Nineteenth-century classifications were local systems associated with the doctors who designed them. The rise of international conferences in the late nineteenth century gave rise to plans to develop international classifications; there was a panel on this topic in Antwerp in 1885. In 1950, the Swiss Ferdinand Morel and the German-British Wilhelm Mayer-Gross proposed the development of a transnational glossary to facilitate international communication. Mayer-Gross took the example of schizophrenia, “which, in France, for example, is different from what is meant by the same term in America.”³⁷ A lively discussion ensued, mixing linguistic and conceptual issues. The Austrian Erwin Stransky asserted that “it is impossible to find equivalents from one country to another.” At the end of the congress, a motion was nevertheless passed in favor of a commission to find a common vocabulary, notably because “the World Health Organization is in the process of publishing a nomenclature of diseases and causes of death, but this list does not contain a list of these diseases such as schizophrenia.”³⁸

³⁶ Müller, *Erinnerungen* (n. 27), 188.

³⁷ Henri Ey, ed., “Assemblée Générale Du 24 Septembre 1950,” in Ey, *Premier Congrès Mondial de Psychiatrie—VIII* (n. 10), 139.

³⁸ *Ibid.*, 139.

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The Cold War

The Cold War was the third element that framed the notion of “world.”³⁹ The main organizers of the congress were not the French reformist psychiatrists close to the Communist Party who are often central in narratives about French psychiatry in the immediate postwar period;⁴⁰ they were situated on the other side of the political divide. Regardless, the Soviet Union and “Slavic countries” were initially among the countries that were supposed to attend. Czechoslovakia and Poland were represented at an early meeting in late 1947, and Russian was planned as an official language if the Soviet Union participated. Similarly, the presidency of one of the six days of the congress was reserved for the Soviet Union,⁴¹ until it was suddenly given to Poland a few months later. In the end, the only country of the region to attend was Yugoslavia, which had been pursuing a voice independent of the Soviet Union since Tito’s break with Stalin in 1948. It was ultimately Yugoslavia that got the vice-presidency that had been reserved for the Soviet Union, then Poland.⁴² In June 1950, a few weeks before the congress began, the organizational discussions were overshadowed by the outbreak of the Korean War, which made many potential participants wary. Domenico Pisani, professor of psychiatry in Messina, explained the weak

³⁹ H. Heyck and D. Kaiser, “Focus: New Perspectives on Science and the Cold War. Introduction,” *Isis* 101, no. 2 (June 2010): 362–66.

⁴⁰ Nicolas Henckes, “Le nouveau monde de la psychiatrie française. Les psychiatres, l’Etat et la réforme des hôpitaux psychiatriques de l’après-guerre aux années 1970” (Thèse, Ecole des Hautes Etudes en Sciences Sociales, 2007), 164–65.

⁴¹ Archives Sainte Anne, fonds Henri Ey, box 3, minutes of the administrative meetings, November 2, 1947.

⁴² Archives Sainte-Anne, fonds Henri Ey, box 7, *Journal du 1^{er} Congrès Mondial de Psychiatrie*, n°2—20 septembre 1950, p. 8.

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Italian presence by “the present international situation.”⁴³ At the opening of the congress, the minister of public health, the centrist Pierre Schneider, implicitly addressed the absence of Eastern European countries by regretting that “all the countries of the world were not represented.”⁴⁴

Although Soviet psychiatrists were not present in person, the works of Ivan Pavlov and Lev Vygotsky were frequently mentioned. Some authors expressed their regret over the difficulty of staying up to date with research in Russia.⁴⁵ In a section devoted to genetics and eugenics, several French communist psychiatrists openly criticized the absence of research carried out in the Soviet Union. Sven Follin referred “to the mass of discovered facts and to the conceptions developed in Soviet Union by the school of Ivan Mitchourine of which one is entitled to regret that it was not mentioned in the reports of the Congress and of which it would be desirable that they are more objectively analyzed.”⁴⁶ The reference to the school of Mitchourine was probably a call to consider the work of Trofim Lysenko, who claimed to be a Mitchourinite. Lysenko opposed the Mendelian genetic model and advocated a more environmental approach. In 1948, the Soviet Academy of Agricultural Sciences proclaimed this theory as the one true doctrine.

⁴³ Archives Sainte-Anne, fonds Henri Ey, box 4, letter from Domenico Pisani to Henri Ey, August 5, 1950.

⁴⁴ Archives Sainte-Anne, fonds Henri Ey, box 7, *Journal du 1^{er} Congrès Mondial de Psychiatrie*, n°2—20 septembre 1950, p. 1.

⁴⁵ William Walters Sargant, “Indications and Mechanism of Abreaction and Its Relation to the Shock Therapies,” 192–202, and Ugo Cerletti and Henri Ey, “L’électrochoc,” 1–52, both in *Premier Congrès Mondial de Psychiatrie–IV–Thérapeutique Biologique–Indications Respectives Des Méthodes de Choc* (Paris, 1950).

⁴⁶ Sven Follin, “Réflexions Méthodologiques Sur Le Thème ‘Génétique et Eugénique,’” in *Premier Congrès Mondial de Psychiatrie–VI–Psychiatrie Sociale–Comptes Rendus*, ed. Henri Ey (Paris: Hermann & cie, 1952), 112.

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Sven Follin was the only attendee to use the term “Soviet”—the other speakers always said “Russian.” Few post-congress reports mentioned the absence of the Soviets, and never in detail.⁴⁷

Congress

As mentioned in the introduction, the concept of the “congress” or “conference” as an object of study is still underexplored. As we will see, such research can shed new light on the legitimacy and definition of epistemic communities by examining certain aspects of a conference, such as its location, funding sources, and leisure activities, explored here through gender and social dynamics.

A Place That Lends Legitimacy

The choice of Paris for the congress stemmed from the fact that the initiators of the event were French. The French capital was interesting not only for its wide range of diversions—“the glories of Paris and the excitements of the City of Light,”⁴⁸ as John Rees put it—but also because it had been one of the world’s leading cities of science since the mid-nineteenth century. It had hosted countless international conferences in an increasingly internationalized scientific movement, largely thanks to the numerous universal exhibitions.⁴⁹ Names such as Louis Pasteur, Marie Curie, and Claude Bernard were intimately associated with Paris, as were Pinel and Esquirol in

⁴⁷ For example, “tutti i Paesi del mondo (non intervennero quelli della Russia e Nazioni satelliti”): C. Rizzo, “Il Congresso Internazionale di Psichiatria Parigi, 19–27 Settembre 1950,” *Giornale Di Medicina Militare* 97, no. 5 (October 1950): 475.

⁴⁸ Ey, “Discours de J.R. Rees” (n. 30), 104.

⁴⁹ Rasmussen, “Les Congrès internationaux” (n. 4).

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psychiatry. References to these names were numerous in the congress speeches of psychiatrists and politicians alike, not to mention the media coverage and reports in scientific journals. A fine example of this comes from Honorio Delgado: “And these meetings could not be initiated in any better place than in Paris, for here the genius of Pinel offered to the world not only the model of humanitarian assistance to the mentally ill, but elevated the study of psychiatry to the dignity of an organic discipline.”⁵⁰

Paris’s scientific legitimacy was reinforced by its political capital, and organizers made explicit use of the proximity of the French political elite. The French minister of health, Pierre Schneiter, opened the conference. A small circle of participants was received by the French president, Vincent Auriol, who chaired the patronage committee that included four ministers and the top political representatives of Paris, notably the president of the General Council of the Seine, the president of the Paris City Council, the prefect of the Seine, and the prefect of police. But this legitimization worked both ways. At a time when France’s position seemed to be threatened by rivaling superpowers and colonial rebellion, sponsoring a world congress was a way of affirming French cultural power and influence.⁵¹ The congress was geographically legitimized by more than Paris in general; it also happened through the specific places where participants met. The congress’s opening session was in the Grand Amphithéâtre of the Sorbonne, “symbol of studious Paris,”⁵² decorated with the colors of the forty-seven participating

⁵⁰ Ey, “Discours de Honorio Delgado” (n. 31), 106.

⁵¹ Christopher Endy, *Cold War Holidays: American Tourism in France* (Chapel Hill: University of North Carolina Press, 2004), 2.

⁵² C. A. Pierson, “Le Congrès International de Psychiatrie (Paris, 18–27 septembre 1950),” *Maroc Medical* 30, no. 308 (January 1951): 16–21.

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nations. The main organizers and invited politicians were on a platform facing about two thousand congress attendees. On the other days, participants gathered in various scientifically prestigious places in Paris, including the Faculty of Medicine, the Sainte-Anne Hospital, and the Cité Universitaire. Beyond the symbolic performativity of these places, the university infrastructure made the conference materially possible. The largest auditorium was equipped with enough translation booths, and several rooms were fitted with projectors allowing the projection of films. The widely advertised exhibit on the history of psychiatry took place at the Palais de la Découverte, one of the preeminent exhibition spaces in Paris.

State and Private Funding

Financing is a rarely discussed aspect of the history of conferences, but it has a major place in the archived discussions leading up to the congress. It reveals the interwoven logics of state policies to promote France, global organizations striving for a worldwide network of researchers, efforts to enable the attendance of psychiatrists from the Global South, and the pharmaceutical industry globalizing its market strategies. To start the planning, national psychiatric committees had to start paying an annual fee in 1947. Initially estimated at six million francs, the anticipated expenses grew steadily, ultimately reaching eight million francs. The most expensive item by far was the printing and mailing of reports and minutes. All active members received reports on all the topics before the congress (1,600 pages in seven volumes) and the minutes of the discussions (2,900 pages in eight volumes) afterward. Publications accounted for just over 50 percent of conference expenses. The scheduled receptions took 25 percent of the budget. The third major

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item was simultaneous interpretation, which cost two million francs.⁵³ In terms of revenue, the organizers benefited from significant support from the French authorities. Various (state-run) hospitals contributed to the costs, as did the City of Paris, the Prefecture of Paris, and some government ministries, notably the Ministry of Health. Henri Ey, Jean Deniker, and Henri Sivadon used their personal connections with certain members of the administration to plead their cause.

Organizers encountered a perceptible marginalization of psychiatry during their fundraising efforts. With a degree of bitterness Paul Sivadon noted, “Ministry of Health: credits allocated for the subsidies to all the congresses: 2,000,000 in all ([Ministry of] Finance asked that cardiology be favored).”⁵⁴ Nevertheless, almost two-thirds of revenues were collected in this way. Slightly less than 20 percent came from pharmaceutical laboratories,⁵⁵ which demonstrates their importance in the field well before the launch of neuroleptics a few years later. Jean Thuillier, a close collaborator of Pierre Deniker and Jean Delay, was the link with the pharmaceutical companies. They had promotional stands at the Sorbonne and the center of the congress and placed advertisements in the daily congress journal. Pharmaceutical laboratories might have contributed more had they not already pledged to support the Congress of French-speaking Alienists and Neurologists held two months earlier.⁵⁶ The third source of funding was the Conseil de coordination des congrès internationaux des sciences médicales (CCICMS),

⁵³ Archives Sainte Anne, fonds Henri Ey, box 5, letter from Henri Ey to Maisin, July 28, 1950.

⁵⁴ Archives Sainte Anne, fonds Henri Ey, box 1, report of the secretariat, January 18, 1950.

⁵⁵ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, June 7, 1950.

⁵⁶ Archives Sainte Anne, fonds Henri Ey, box 1, meetings of the organizing committee, July 6, 1949, and October 6, 1949.

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created in 1949 as part of the World Health Organization, which quickly gave the World Congress of Psychiatry a grant covering one-tenth of the expenses. The rest of the income came from membership fees. Active members entitled to receive the proceedings had to pay six thousand francs, and associate members (without the proceedings) paid half. A 50 percent discount was given to students and “congress participants from poor countries.”⁵⁷ The organizers were counting on a minimum of fifteen hundred participants to cover their costs, and Paul Sivadon proudly announced at the conference that the threshold of two thousand registrations had been passed. But these revenues could be a problem because registration payments were not transferred immediately, and transfers from some countries were relatively complicated and costly, making this revenue stream uncertain.

Leisure Time

Congresses were (and still are) significant opportunities for after-hours sociability and (academic) tourism. In the late 1940s, international tourism was recovering from the war years, and flying became more common. Paris, already a tourist hub, was well equipped to handle large numbers of visitors; indeed, France was the most visited country in the world in the latter half of the twentieth century.⁵⁸ In cooperation with another international conference, the First World Congress of Psychiatry chartered Air France planes to bring participants to Paris for a price 40 to

⁵⁷ Archives Sainte Anne, fonds Henri Ey, box 5, questionnaire sent by the CCICMS to Henri Ey, October 16, 1950.

⁵⁸ Endy, *Cold War Holidays* (n. 51), 7.

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50 percent less than full fare.⁵⁹ Air France was one of the only nonmedical companies to take out advertising (in French) in the congress proceedings, which shows that it considered these doctors as valuable potential customers. For the days leading up to the congress, French tourist associations offered excursions outside Paris. The British Royal Medical-Psychological Association organized a weeklong “medical-tourist trip” by bus after the congress that included visits to psychiatric hospitals and spas in touristic regions such as Burgundy, the Jura, and the Alps, organized by the Havas-Exprinter travel agency. France wasn’t the only European country to seize the opportunity of the congress to promote itself to visitors from other countries. The British Travel and Holiday Association, which had an office in Paris, used the congress to distribute brochures in English, French, Spanish, Portuguese, Dutch, Danish, and Swedish promoting the charms of Britain.

This sociability outside conference hours was also an opportunity for the local organizers to “invent” France.⁶⁰ In addition to the receptions at the Hôtel de Ville, the opening of the exhibit devoted to the history of psychiatry, and the banquet, they also presented several facets of French culture: theater and ballet at the Théâtre Marigny, music with a concert at the Palais de Chaillot, an evening of “ball and attractions” featuring the famous French singer Maurice Chevalier and cancan dancing, and two evenings at the Louvre. These events often required social capital not possessed by all. Language was also a problem, of course. English was not yet the lingua franca, and even Henri Ey was not fluent. Translators were important intermediaries during the academic

⁵⁹ Archives Sainte Anne, fonds Henri Ey, box 2, letter of the organizers of the 2nd International Congress of Criminology to Henri Ey, June 21, 1950.

⁶⁰ Eric Hobsbawm and Terence Ranger, eds., *The Invention of Tradition* (Cambridge: Cambridge University Press, 1983).

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presentations, but they did not attend the parties, so multilingual psychiatrists assumed their role. Furthermore, reestablishing personal contacts, especially after years of migration and war, was a central element of the meeting place in Paris. As Swiss psychiatrist Max Müller stated in his memoirs, “These personal contacts were thus also more important than the scientific gains.”⁶¹

The division between the academic and social events was very strongly gendered. There were no women on the organizing committee. The overwhelming majority of psychiatrists registered for the congress were men (82 percent).⁶² Many participants came accompanied by their wives, for whom a special program had been planned. The ladies’ committee was composed of four men plus two women, the wives of Jean Lhermitte and Jean Delay.⁶³ This committee prepared a specific program, also very gendered, including a day dedicated to haute couture and fashion collections.⁶⁴ The wives played an important social role at the nonscientific events. In his opening remarks, John Rees explicitly mentioned “Mrs. Delay and Mrs. Ey [who] are dear, charming, intelligent, and friendly people, whom we are all glad to know.”⁶⁵ The convention reproduced the gendered roles of sociability that had been established in late nineteenth-century bourgeois society, when women were considered essential to sociable representation.

⁶¹ Müller, *Erinnerungen* (n. 27), 410.

⁶² The gender determination of the participants was based on first names. For a quarter of the participants we were unable to identify their gender.

⁶³ Archives Sainte Anne, fonds Henri Ey, box 1, meeting of the organizing committee, February 8, 1950.

⁶⁴ Ey, *Premier Congrès Mondial de Psychiatrie–VIII* (n. 10), 179–80.

⁶⁵ Ey, “Discours de J.R. Rees” (n. 30), 104.

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Psychiatry

The words “First,” “World,” and “Congress” hint at the key issues that pervaded the field of psychiatry. Further (un)certainities of the discipline emerge when we establish its boundaries with adjacent professional fields, examine the significance organizers and participants attributed to the words, and trace their genealogies.

Mental Hygiene and Neurology, Embarrassing Cousins

Throughout congress preparation, discussions, and follow-up debates, two other approaches were particularly problematic for the identity of psychiatry: mental hygiene and neurology. The challenges were situated at different but closely intertwined scales: the perimeter of the field, its scientific legitimacy, and its societal recognition.

If psychiatry as a medical discipline had barely any international gatherings in the interwar period, another social shift, partly led by psychiatrists, had been internationalizing since the early twentieth century. Indeed, after Clifford Beers launched the mental hygiene movement in Connecticut in 1908, national leagues were founded in several European countries (Belgium, Great Britain, and France in the 1920s). The first world congress was in Washington, D.C., in 1930, attended by three thousand delegates from forty-one countries. A second, much smaller conference of three hundred participants was held in Paris in 1937.⁶⁶

⁶⁶ Mathew Thomson, “Mental Hygiene as an International Movement,” in Weindling, *International Health Organisations and Movements* (n. 17), 283–305.

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The strength of the mental hygiene movement lay in the recognition it received from international organizations—from the League of Nations to the International Red Cross—in the interwar years. Under the dynamic leadership of Englishman John Rees, the movement held a third international conference on mental health in 1948, leading to the creation of the World Federation for Mental Health, which replaced the International Committee for Mental Hygiene. The latter had limited its activities to planning conferences, but its more ambitious successor demonstrated the movement's establishment in a context of proliferating global agencies and institutions. From 1948 onward, the federation became the privileged interlocutor for the WHO, UNICEF, and UNESCO.⁶⁷ In addition, the federation succeeded in institutionalizing itself and forming a small administration. These two elements—international recognition and an administrative structure—explained the important place that John Rees played in the congress. When Henri Ey proposed to organize subsequent conferences with a committee exclusively composed of French psychiatrists, the critical response obliged him to accept a committee chaired by Rees that included Pierre Adolphe Chatagnon (secretary of the French Mental Hygiene League), Georges Heuyer (organizer of the first international congress of child psychiatry in 1937), British psychiatrist Kenneth Soddy (involved in the mental health movement), Pierre Pichot, Charles Pidoux, and Henri Ey himself.⁶⁸

One way that organizers of the 1950 Paris congress distinguished their approach from mental hygiene was emphasizing the medical side. In theory, the conference was intended

⁶⁷ John R. Rees, *Reflections: A Personal History and an Account of the Growth of the World Federation for Mental Health* (New York: U.S. Committee of the World Federation for Mental Health, 1966), xiv.

⁶⁸ Archives Sainte Anne, fonds Henri Ey, box 5, meeting, June 18, 1950.

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exclusively for “doctors,” and other specialists had to apply in writing for an exemption.⁶⁹ At the general meeting following the Paris congress, it was decided that only societies “composed of a majority of physicians” would be admitted.⁷⁰

This medical focus contrasted sharply with international conferences of the latter half of the nineteenth century and national conferences such as the Congrès des aliénistes et des neurologues de France et des pays francophones, which favored more social approaches to care for the insane (through management, architecture, and so on). This congress was, in fact, scheduled to occur two months prior to the First World Congress of Psychiatry and was a major competitor for funding, but its organizers refused to reschedule despite the pleas of several important figures in French psychiatry, revealing the tensions that existed between the academic elite and doctors working in hospitals. This division was made explicit by Jean Delay: “Two different orientations exist in psychiatry: classical psychiatry applied to biological problems and mental hygiene applied to moral problems.”⁷¹ There was no doubt that the president of the congress favored the first.

The other problematic discipline was neurology. There have been well-known tensions between asylum-based alienists and neurologists in France since the nineteenth century. The latter managed to occupy the first two chairs of psychiatry in France, in 1878 and 1882, and

⁶⁹ “Le premier congrès international de psychiatrie se tiendra à Paris du 18 au 27 Septembre 1950,” *Revue Française de Psychanalyse* 14, no. 1 (1950): 149.

⁷⁰ Henri Ey, ed., “Réunion des délégués des sociétés de psychiatrie,” in Ey, *Premier Congrès Mondial de Psychiatrie—VIII* (n. 10), 129.

⁷¹ Robert Michel Palem, *Henri Ey et les congrès mondiaux de psychiatrie: avec des textes inédits d’Henry Ey* (Perpinyà: Trabucaire, 2000), 12.

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psychiatry was recognized as an independent medical specialty only in 1968.⁷² This feeling of inferiority was reinforced by the fact that neurology had succeeded in maintaining an international scientific arena between the wars and rebounded rapidly after World War II, organizing an international congress in Paris in 1946. One of the most animated debates in 1950 was the extent to which psychiatric conference organizers should go to work around the timing and location of neurologists' conferences. Behind these organizational discussions were deeper disciplinary issues. Jean Delay and Georges Heuyer pled for more cooperation between psychiatry and neurology, but Henri Ey (supported by his mentor Paul Guiraud) doubted the latter had much to offer because it was "more naturally limited in its field."⁷³ These divisions affected not only the French community but the whole international community as well. Peruvian psychiatrist Delgado strongly rebutted the APA representative who pled for close cooperation between neurology and psychiatry: "Of course there is a certain relationship between psychiatry and neurology, but there is also one with psychology, psychotechnics, philosophy."⁷⁴

The Triumph of Biological Psychiatry

The French organizers of the first congress—especially Henri Ey, who advocated a holistic approach through organo-dynamic psychology—wanted a wide range of psychiatric approaches represented. The congress was therefore organized around six themes: psychopathology, clinical

⁷² Benoît Majerus, *Du moyen âge à nos jours, expériences et représentations de la folie à Paris* (Paris: Parigramme, 2018), 51–52.

⁷³ Archives Sainte Anne, fonds Henri Ey, box 5, meeting, June 18, 1950.

⁷⁴ Archives de la Ville de Perpignan, 7S, box 502, report of the meeting, September 18, 1950. George Weisz has sketched the turbulent history full of tensions between psychiatry and neurology in *Divide and Conquer: A Comparative History of Medical Specialization* (Oxford: Oxford University Press, 2006).

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psychiatry, cerebral anatomical physiology, biological therapeutics, psychotherapy/psychoanalysis, social psychiatry/genetics and eugenics, and child psychiatry. Some criticized this heterogeneity, even Ey himself, who outwardly presented himself as a defender of this very broad approach but was more candid in private: “Personally, I would have liked to give more attention to biochemistry, endocrinology, and the somatic side of psychiatry, but you know that the great contemporary schools consider that progress is turned toward psychology, psychoanalysis, and the social side of psychiatry.”⁷⁵

This heterogeneity was well illustrated by the “stars” of the congress identified by the press: Ugo Cerletti, Ladislav Meduna, Manfred Sakel, Walter Freeman, and Egas Moniz were all defenders of biological psychiatry and direct physical interventions, and Franz Alexander and Anna Freud were eminent representatives of the psychoanalytical movement.⁷⁶ That said, somatic psychiatry undoubtedly attracted the most attention. The advancements of these notable guests directly influenced the optimistic tone of Jean Delay’s opening address: “If the word ‘cure,’ so serious in the hopes it raises, must always be pronounced with reserve, it is no longer forbidden to us. Today, mental medicine aims essentially to cure the sick, thus joining the object of all medicine.”⁷⁷ The Nobel prizes awarded to Julius Wagner-Jauregg for malaria therapy in 1927 and Egas Moniz for the lobotomy in 1949 seemed to have placed psychiatry in the medical field for good: they also lent legitimacy to these new therapies in psychiatry. Some of these

⁷⁵ Archives Sainte Anne, fonds Henri Ey, box 1, letter from Henri Ey to Derek Richter, April 19, 1949. Derek Richter, a British neuroscientist, was one of the founding fathers of brain chemistry.

⁷⁶ Benjmain-Joseph Logre, “Les progrès de la psychiatrie au cours du dernier demi-siècle seront examinés à Paris lors du congrès mondial de septembre,” *Le Monde*, June 30, 1950.

⁷⁷ Ey, “Discours de M. Le Professeur Jean Delay” (n. 28), 89.

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congress stars behaved like divas.⁷⁸ The currents promoting these new therapies battled fiercely and explicitly over the primacy of the notion of shock therapy and its effectiveness, although direct attacks on these therapeutic practices were rare. While giving congress attendees a guided tour of the Charenton psychiatric institution, one of the French organizers, Henri Baruk, did take a jab (“As in the time of Esquirol, Charenton remains the center of resistance to blind and brutal shock methods, the center of etiological and moral psychiatry”), but he was in the minority.⁷⁹

Imagined Psychiatry

At least since Benedict Anderson’s groundbreaking book *Imagined Communities*, we have known how important memorial practices are to the building of communities.⁸⁰ The conference was accompanied by an exhibit titled “An Exhibition of the History and Progress of Psychiatry,” which was designed to present a wide view: “Place will be given to psychoanalysis, psychotechnics, psychosurgery, child psychiatry, criminology, legislation and assistance to the mentally ill.”⁸¹ It was meant to be international in scope, but some national sensitivities were particularly pronounced. The Mexican minister of health personally intervened to have Mexico mentioned as the first country to establish a psychiatric hospital in the Americas. The APA demanded a space specifically devoted to psychiatry in the United States, the only country to be spotlighted this way, placed in the section “Progress in Psychiatry.”

⁷⁸ Müller, *Erinnerungen* (n. 27), 156.

⁷⁹ H. Baruk, “Le congrès international de psychiatrie et la visite de Charenton,” *La semaine des hôpitaux* 27, no. 63–64 (August 26, 1951): 2543–46.

⁸⁰ Benedict Anderson, *Imagined Communities: Reflections on the Origin and Spread of Nationalism* (London: Verso, 1983).

⁸¹ *Bulletin du Congrès International de Psychiatrie*, n°3, mars 1950, p. 18.

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Organized under the themes “ancient psychiatry,” “classic psychiatry,” and “modern psychiatry,” the exhibit ultimately told the story through famous psychiatrists since the nineteenth century. The last section, intended to show a wider audience how modern contemporary psychiatry was, focused mainly on electroshock therapy, psychosurgery, malariatherapy, and electroencephalograms. Psychoanalysis was placed under “classic psychiatry.” The illustrated brochure given with each purchased ticket depicted three psychiatrists: Etienne Esquirol in front of a bust of Pinel on the opening page, as the founding fathers of French psychiatry, and Walter Jauregg, the inventor of malariatherapy presented as the “Nobel laureate.”⁸² The Spanish-speaking delegate Delgado suggested that a different, less medical genealogy would have been possible in his introductory speech: “Modern psychiatry was born in Spain. It was there that the first psychiatric hospitals were founded, which served as a model for those that were later established in the rest of the world. . . . In Spain and Spanish America, the first religious orders specialized in the humanitarian care of the mentally ill were created.”⁸³ This narrative was distinctly absent in the exhibit.

Conclusion

Conferences, especially ones of this magnitude, are always places for the negotiation of the definition of a discipline. Although psychiatry was one of the first medical specialties to establish itself through dedicated scientific journals, specific teaching, and distinct professional

⁸² *Exposition Internationale de l'Histoire et du Progrès de la Psychiatrie* (Paris, 1950).

⁸³ Ey, “Discours de Honorio Delgado” (n. 31).

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associations in the nineteenth century,⁸⁴ its boundaries—including the definition, classification, and management of mental disorders—are still highly debated today. One of the key challenges facing the organizers of the Paris conference was their legitimacy to speak on behalf of “psychiatry” as they defined it. Defining psychiatry involved disciplinary theoretical issues, but there was much more to it than that: the transnational institutionalization of adjacent fields in the interwar period had already shaped definitions of the field, nonmedical international organizations developed their own conceptions of it, and the international context, including the beginning of the Cold War and the diplomatic role of such conferences, also had a powerful influence.

The First World Congress of Psychiatry, held in Paris in September 1950, demonstrates the renewal of scientific internationalism after World War II. The conference’s transnational character lent it significant legitimacy, while also highlighting how much this international community was shaped by geopolitical factors.⁸⁵ The congress was impacted by the aftermath of World War II and the emerging Cold War. German psychiatrists were not allowed as official speakers, and German was not an official language. While this reflected the boundary between the victors and the vanquished of the previous war, the former Allied camp was divided, since the Communist Bloc was absent save for Yugoslavia. The “World Congress” was therefore only a meeting of Western European psychiatrists with significant delegations from South and North America.

⁸⁴ Weisz, *Divide and Conquer* (n. 74).

⁸⁵ Steve Sturdy, Richard Freeman, and Jennifer Smith-Merry, “Making Knowledge for International Policy: WHO Europe and Mental Health Policy, 1970–2008,” *Soc. Hist. Med.* 26, no. 3 (August 2013): 532–54.

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The French capital was an appealing location for the conference. It became an internationally recognized scientific capital in the 1870s and a center for international conferences thanks to its many world exhibitions, among other things. Because of this history and the presence of prestigious institutions such as the Sorbonne, Paris offered the scientific legitimacy sought by such a conference. It was also an attractive city for the nonacademic parts of the congress, offering numerous venues for the social events and sightseeing excursions that are considered essential to the success of an academic conference.

Psychiatry as a scientific field was in a peculiar situation. It internationalized its community later than related scientific fields. Both neurology and the mental health movement had succeeded in establishing institutional frameworks for transnational cooperation between the wars and reviving themselves after 1945. At the same time, a mood of optimism reigned in psychiatry. There was barely a mention of the recent war or its dramatic consequences on asylum residents. In 1950, somatic therapies, legitimized by two Nobel prizes in medicine, seemed to announce a new era when chronicity was no longer the fate of psychotic patients. Biological psychiatry dominated the conference in the guises of lobotomy, ECT, and insulin therapy, even if its French organizers presented a wide range of psychiatric practices that were also reflected in the press. The domestic conflict between the First World Congress organizers (mainly French academic psychiatrists) and the Congrès des Aliénistes et Neurologistes de Langue Française (primarily consisting of French asylum physicians) reveals a broader discussion about what psychiatric congresses should be: Should they resemble other medical conferences where issues of diagnosis and therapy were central, or should they also deal with broader legal, architectural,

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and organizational issues like the international psychiatric conferences of the late nineteenth and early twentieth centuries? The first option won out in 1950.

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