What does the emergence and development of kleptomania tell us about the history of psychiatry and mental health in the 19th and 20th century?

From Zola’s *Au Bonheur des Dames* (1883) to Kinsella’s *Confessions of a Shopaholic* (2000), the pathologisation of women’s relationship to consumer culture has been an ongoing strand of social and psychiatric thought. First described in 1816 by Swiss physician Mathey as ‘a unique madness characterized by the tendency to steal without motive and without necessity’,¹ the change over time in how kleptomania has been diagnosed and treated provides insight into the intersection of popular and medical understandings of class, gender and mental illness. Kleptomania has been studied extensively in a nineteenth century context as a medico-legalisation of respectable women’s deviant consumer behaviour, and scholars have linked the diagnosis to the social control of women,² the rise of consumer culture and the department store,³ the professionalization of psychiatry,⁴ and the maintenance of bourgeois status and gender ideals.⁵ This essay will consider the extent to which these themes continued to define cultural representations and medical understandings of kleptomania into the twentieth century, in order to gain insight into the intersecting and mutually constitutive nature of psychiatric thought, popular understandings of mental illness and contemporary ideologies of class and gender.

Kleptomania is a controversial and contested disorder, both within the psychiatric profession and in the public sphere. Changing perceptions of the diagnosis following the Second World War are revealed by its removal from the second edition of the *Diagnostic and

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Statistical Manual of Mental Disorders (DSM-II) in 1968, only to be reinstated in the third edition (DSM-III) in 1980. The contested medical view of the disorder was both influenced by and reflected in how it was understood popularly, therefore to gain insight into the changing status of the disorder over time, this essay will analyse and compare court cases and opinion pieces which refer to kleptomania in The Guardian, The Observer, the Daily Mail, the Daily Express and the Daily Mirror between 1950 and 1980. How kleptomania is presented and understood in newspapers can provide insight more broadly into shifts in popular understandings of mental illness and the explanatory power of psychiatry. Section one will focus on theories of causation, considering the ways in which post-war psychiatric debates were influenced by understandings of gender and mental illness. Section two will consider diagnosis, arguing that class continued to underpin who could be diagnosed with kleptomania, but increasingly did so in new ways in response to the changing relationship between goods and status in post-war Britain. Section three will analyse reports of court cases in which kleptomania was used as a defence, highlighting the tensions between the professional claims of psychiatrists and the legal system.

Medical practices and theories are rooted in their time and culture, therefore to analyse how kleptomania was understood requires an awareness of both psychiatric thought and the wider cultural landscape in which this is produced, represented and understood. In the nineteenth century madness was not solely gendered female, as argued by Showalter, but the ways in which mental illness was experienced and understood was refracted through contemporary ideologies of class and gender. Kleptomania was understood to be linked to the female reproductive system, along with other diagnoses such as pyromania, homicidal

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and suicidal monomania which described as ‘menstrual psychoses’. Fullerton’s study highlights the variety of theories about the cause of kleptomania in the nineteenth century, from inherited moral degeneracy to cerebral defects, however the dominant theory was that the disorder was a form of moral insanity which was closely linked to women’s biological functions, in particular menstruation and pregnancy. The resilience of a gendered understanding of causation is evident in the Freudian theories of the early twentieth century, as the new psychoanalytical approach to the disorder remained rooted in an assumption of female weakness. For example, Stekel famously described kleptomania as caused by penis envy and unfulfilled sexuality. There seems, therefore, to have been a notable continuity in the gendering of kleptomania over time.

In post-war Britain, new debates were opening up as to whether affective disorders were environmental or biochemical, and these were reflected in how kleptomania was understood and represented, both medically and popularly. Healy argues that following the Second World War there was a move from former genetic or hereditary theories ‘toward theories of environmental causation’, claiming that the growing influence of dynamic psychiatry had ‘dramatic consequences’ on the field as a whole. In contrast, Haggett claims that ‘organic theories of mental illness and physical treatments predominated, augmented by a therapeutic optimism in new psycho-pharmaceuticals.’ The root of their disagreement seems to be the types of mental illness they focus on, as Healy bases his claims on the experiences of men and the impact of shell shock, whilst Haggett’s study focuses on

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housewives and neuroses. The direction of post-war psychiatric thought therefore seems to have diverged based on gender, and kleptomania provides a useful case study through which to assess this theory.

In order to consider the extent to which kleptomania remained a disorder associated with women, descriptions across all newspapers which referred to causation were analysed and compared. There was no clear association between kleptomania and any single gender, with equal numbers of articles referring to kleptomania as occurring to both men and women. However, there was a notable divide in understandings of causation along gendered lines. Articles referring to men were half as likely to refer to causation, and those that did cited environmental causes twice and psychosexual once. For example, in a 1954 report on a trial for theft, the male defendant attempted to use the kleptomania defence and his lawyer called on ‘Dr S Leviten, a psychologist’ who argued that as the man worked in a mental hospital with ‘eccentric’ people he had ‘become a little eccentric himself.’

For cases in women, by contrast, all but one article discussed the underlying causes, and the disorder was clearly understood to be linked to the female reproductive cycle. Indeed, the association between female biology and kleptomania was noted as if widely understood and accepted, such as when The Observer described one case as the ‘kleptomania so often found in menopausal women.’ This therefore suggests that although new theories on mental illness were accepted in the case of male kleptomaniacs, where the causes were likely to be seen as environmental, older understandings of the biological inferiority of women coloured

how their experiences of mental illness were understood. This pattern highlights the way in which explanatory models, although built on the science of the day, reflect and reinforce established notions about class, gender and mental illness.

Both shifts in psychiatric thought and contemporary gender ideologies therefore seem to have interrelated in shaping how kleptomania was understood and represented in post-war Britain, and it is important to consider how these processes also influenced how the disorder was diagnosed. Studies of kleptomania in the nineteenth century suggest that class was central to diagnosis both due to the criteria that the thief should not need or want the item, and because of ideologies of femininity and respectability which made it unthinkable that a bourgeois woman could steal unless influenced by an insane and uncontrollable impulse. This section will argue that although newspaper articles increasingly described kleptomania as something which could affect either men or women, class and gender assumptions continued to defined how it was diagnosed meant that kleptomania continued to be primarily associated with privileged wealthy women of higher social classes.

The class distinction built into the diagnosis of kleptomania generated popular resistance in the Victorian period, and this continued to be evident in post-war Britain. Abelson describes the kleptomania defence as a medico-legalisation of ‘middle class shoplifting’ which upheld bourgeois values by denying both female agency and working-class respectability. Whitlock has studied the response of working-class Victorians who were unable to call upon the kleptomania defence, highlighting the social tensions expressed

through the diagnosis in the nineteenth century ballads such as ‘Rich and Poor Law’. The sense that this was not so much a disease as evidence of middle-class privilege continued to be evident in post-war Britain, particularly in newspapers aimed at a working-class audience. The Daily Mail was particularly critical, in 1955 offering the definition ‘kleptomania: stealing by the rich as distinct from stealing by the poor.’ On another occasion they critiqued ‘an unwelcome note of class distinction’ in policing, commenting cynically that ‘what is larceny in Lambeth becomes kleptomania in Kensington.’ Middle-class papers such as The Guardian also invoked kleptomania as an ironic synonym for theft, but did so not to critique class as in the Daily Mail but to joke about the perpetrator not being responsible as they were taken over by an irresistible compulsion. However, an interesting shift occurred across the newspapers in the late-1960s and 1970s, as representations of kleptomania became both more common and more sympathetic. In order to understand this, popular representations need to be situated in their wider social and cultural context.

Kleptomania has historically illustrated the tensions between gender ideals and consumer culture, expressed through the pathologisation of women first in shopping arcades and then the department store. In the nineteenth century, goods were central to the maintenance of class status, yet even as women maintained the image of their family through consumption they were criticised for their irrational and extravagant purchases. In post-war Britain, particularly from the 1960s and 1970s, the development of consumer culture had resulted in a new relationship between class, status and goods, which can in turn provide

insight into how and why kleptomania was being diagnosed and represented in new ways. As famously argued by Bourdieu, ‘taste’ increasingly became a mechanism of distinction which was understood to be innate and used to mark and regulate class boundaries. As such, unlike in the nineteenth century context, when status was marked by the ownership of goods, social standing was increasingly expressed through the ownership of the ‘correct’ goods, demonstrating the ability to be a knowledgeable and tasteful consumer. As these changes in consumption practices marked class boundaries in new ways, they were equally adopted by advertisers and marketers as a way to deny the ongoing social significance of class. Instead, people were sold the idea that simply through consumerism they could construct their own identity and lifestyle. Changes in how class was experienced and reproduced altered peoples’ relationships to material goods, and this was reflected in how kleptomania was represented and understood.

The diagnosis of kleptomania was increasingly proved not by arguing that the item was a ‘mere frippery’ and not needed, as in the nineteenth century, but by suggesting that in her right mind the lady would never have chosen an item that was so lacking in taste. For example, the Mirror reported a successful case for the defence of the ‘fashionably-dressed Mrs Downing’, where it was argued that the hat she had stolen was of a style ‘she would never dream of wearing.’ More important than the fact that she could have bought the item had she wanted, was the claim that in viewing the item as tasteless, rationally it was therefore also worthless to her. By 1980 even the Daily Mail, formerly a critic of the diagnosis, ran a lengthy article about kleptomania describing the ‘women in their Wetherall or Jaeger suits

27 ‘She Mustn’t Go Shopping By Herself’, Daily Mirror, 14 April 1956.
with matching hats and well-polished shoes, who had stolen things they neither wanted nor needed.\textsuperscript{28} The disjuncture between fashionable, tasteful, wealthy women and their actions was just as unthinkable as deviant bourgeois housewives of the nineteenth century, but with the advent of modern consumer culture these ideas were expressed through concepts of ‘taste’ rather than ‘class’ and as such were increasingly widely accepted. The changes in how the diagnosis of kleptomania was popularly understood reveals how psychiatric thought was rooted in its cultural context, at the intersection of contemporary understandings of class, gender, mental illness and consumer culture. Despite there still being a bias towards white, elite women in diagnosis and treatment, as Kohn et al. argue continues today,\textsuperscript{29} middle-class privilege was reimagined not as a source of resentment but as a means of legitimising the diagnosis.

Another important way kleptomania provides insight into the history of psychiatry and mental health is how the defence was treated in court, which highlighting the tensions between psychiatrists, the legal system, and popular understandings of mental illness. Lenz argues that the kleptomania diagnosis was first popularised as part of the battle of psychiatrists to demonstrate the utility of their expert testimony, legitimising their profession.\textsuperscript{30} Reports of trials in post-war Britain suggest that this was still an important consideration for the profession, and highlight the popular and legal changes in the persuasive power of psychiatry. This section will first situate these processes in the professional and legal context of post-war psychiatry, before examining uses of the kleptomania defence to consider what these can reveal about the history of psychiatry and mental health.

\textsuperscript{30} Lenz and MagShamhráin, ‘Inventing Diseases’, p. 282
Shorter argues that in the mid-twentieth century, the psychiatric profession attempted to establish its reputation as a scientific body of thought.\textsuperscript{31} This became increasingly important in the 1960s in response to the anti-psychiatry movement led by thinkers such as RD Laing and Thomas Sasz. Kirk and Kutchins describe the construction of a diagnostic nosology in the *Diagnostic and Statistical Manual of Mental Disorders* to overcome these challenges as an ‘instrument of professional dominance’.\textsuperscript{32} However, even with a clear and codified set of guidelines, the scientific claims of the psychiatric profession were not recognised by the legal system. The 1968 Theft Act set out the definition as ‘the illegal taking of another person’s property without their permission with the intent to permanently deprive the owner’ stressing that ‘it is immaterial whether the appropriation is made with a view to gain, or is made for the thief’s own benefit’.\textsuperscript{33} As such, the kleptomania defence was legally ungrounded as it was actions, rather than motive or mental health, which defined culpability. Nevertheless, psychiatric expert witnesses continued to testify in cases of theft, and the response to their claims by the court and the public provides insight into the explanatory power of psychiatry during this period.

Legal acceptance of the insanity plea is intrinsically linked to wider perceptions of the psychiatric profession. Fullerton suggests that with the rise of psychoanalysis, belief in kleptomania amongst retailers and the public reached its height between 1930 and 1950, but that as psychoanalysis was questioned and challenged the kleptomania diagnosis was

increasingly dismissed both in popular thought and as a legal defence.\textsuperscript{34} Popular understandings of mental illness were important even before a case of theft got to court, as it could affect how an individual was treated by shop staff. \textit{The Guardian} reports a security guard in 1966 as saying ‘we have never caught a kleptomaniac...shoplifters are not a queer bunch of mentally sick people as many sociologists would have us believe.’\textsuperscript{35} This scepticism with the profession as a whole is reflected in a 1968 report of a trial in which a psychiatric expert witness was now in court himself accused of theft. The \textit{Mirror} reported that ‘with his usual fluency, he gave expert opinion on himself. Kleptomania, he told the court, was a mental disorder which should result in medical treatment rather than jail’. The article, entitled ‘Carry On, Doctor’, then notes that only 7 years earlier the doctor had advised in a major criminal trial that ‘kleptomania was a mean type of theft and should be treated by the court as such.’\textsuperscript{36} The scepticism evident both on behalf of the public and the courts highlights the tensions between the scientific claims of the psychiatric profession and the reality of the subjectivity of their expertise.

Nevertheless it is important not to overstate the criticisms of psychiatry during this period, for just as some stores dismissed the existence of kleptomania, equally others were willing not to press charges if the person agreed to seek psychiatric treatment.\textsuperscript{37} Furthermore, although the legal definition of theft made the kleptomania defence problematic, it continued to be used throughout this period, occasionally with success. Comparing reports of cases in which psychiatric testimony was dismissed to those in which it was successful provides insight into the intersection of popular, legal and medical understandings of mental health and criminal responsibility. The clearest pattern that emerges is that a successful outcome in a

\textsuperscript{34} Fullerton and Girish, ‘Shoplifting as Moral Insanity’, p. 13.
\textsuperscript{36} ‘Carry On, Doctor’, \textit{Daily Mirror}, 9 September 1968.
\textsuperscript{37} ‘Free For All’, \textit{The Guardian}, 17 November 1970.
legal trial required the defendant to fit into popular understandings of who could be a kleptomaniac. Although men and women called on the defence in roughly equal numbers, only women who fit the perceived class and gender requirements were successful. Across all reported cases no man was reported to be let off his charges, whilst no woman was sent to prison. This suggests that there was a difference between perceptions of who could have the disorder and for whom it was a legitimate legal excuse for their behaviour.

The differences between newspaper reports support Whitlock’s argument for the nineteenth century that the kleptomania defence could protect middle-class women, but did so by removing their right to defend themselves in court. In order to successfully put forward an insanity plea, women had to allow psychiatrists to speak on their behalf. Whitlock argues that this decision could be both rational and harmful, which supports Appignanesi’s thesis that women have historically colluded in their own medicalisation. Reports of trials suggest that this process was still evident in post-war Britain, as women played up to stereotypes which defined their gendered inferiority in order to gain protection in court. For example, the Mail suggested in 1980 that ‘kleptomania, as a symptom of distress in middle-aged housewives became widely publicised’ and ‘sufferers received sympathy, compassion and forgiveness in the courts.’ By bringing an insanity plea, women such as one reported in the Mirror in 1956 had to deny their voice and agency, accepting instead the testimonial of a doctor as to her mental state. The outcome of the case further reinforces the denial of female agency involved in this process, as the defendant was freed on the assurance of her husband to the court that she would have psychiatric treatment and would not be allowed to go

shopping alone. The complex interplay of popular understandings of who could be a kleptomaniac and how they should look and act did not necessarily align with medical thought, yet seem to have been the most powerful factor shaping how mental illness was treated by the court. As such, the shifting status of kleptomania must be recognised as a point of intersection between the psychiatric profession and contemporary social thought, which was then represented and negotiated through the courts and the media.

The interrelated but distinct histories of popular and medical understandings of kleptomania are a useful means to consider change over time in perceptions of mental health and the explanatory power of psychiatry. Post-war Britain was a period in which psychiatry was attempting to be seen as a more scientific and rigorous profession, but was equally under attack from a growing movement of anti-psychiatrists. Popular representations of kleptomania reflected medical debates to some extent, but most notable is the resilience of older models for understanding the cause and diagnosis of the disorder through intersecting ideologies of gender, class and mental illness. These findings merit further study to test Whitlock’s claim that kleptomania still remains as a resort for the ‘hysterical’ modern housewife. Following its inclusion in DSM-III in 1980, kleptomania has been categorised as an ‘impulse control disorder’ and linked to other mental illnesses such as anxiety and bulimia. The highly gendered popular image of the girl with an eating disorder or the anxious housewife suggests that there is an ongoing tendency to pathologise female coping mechanisms in response to social pressures surrounding not just consumption, but also their bodies and their social role. An interesting avenue of further study would be to compare widely normalised male coping strategies, such as violence and alcoholism, with the processes by which women are pathologised by modern society.

41 ‘She Mustn’t Go Shopping by Herself’, Daily Mirror, 14 April 1956.
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