Celia Robertson’s book is in this tradition. It is about her grandmother, a poet who knew Virginia and Leonard Woolf and who maintained correspondence with Naomi Mitchison for many years. Robertson set out to paint a portrait of her grandmother; in the process she discovered the several lives she led and has written a masterly biography. Using letters, notebooks and the poetry of her grandmother, Joan Adeney Easdale (aka Sophie), Robertson has created a story that is both compelling and tragic, yet also inspiring and unforgettable.

The book is of interest to psychiatrists because it is a detailed exploration of the early development, adolescence and adult life of an individual who developed a psychosis later in life and whose conventional social life subsequently unravelled. The psychosis and its manifold impact are carefully described. There are instructive anecdotes that teach, more than any textbook can, how psychosis operates and how it may eventually sour relationships:

One night, when Jim was away on a work trip, she came tearing into the children’s rooms and gathered them all into her bed. Gripping them tightly to her beneath the covers, she whispered, “Shh, shh, we have to be quiet. There’s someone in the roof, they’re moving about taking photos. Lie on this side so they can’t see you!” (p. 167)

One of Sandy’s rare memories is of his mother calling him into the sitting room to agree that Jesus Christ was in the room. Standing there, wanting to be helpful, all he could see were the blue swirls of the Persian rug. He felt desperately awkward but eventually said yes, he could see him, because there were slants of light coming in through the blinds and catching on the dust in the air. Maybe that was Jesus (p. 164).

If you have a mother who you love deeply and who you feel is very special and she changes and goes away and is never the same again and yet has the same voice after all those years it’s very difficult to deal with the sense of constant bereavement and distress (p. 207)

Descriptions of incredible acts of generosity and kindness by strangers – a lawyer, a social worker, drinking companions – are included. These individuals reaffirm one’s faith that a sense of community still exists and that kindness is its currency. Furthermore, in spite of the corrosive power of psychosis on family life, this is a story of the resilience of family ties and the triumph of filial love over adversity.

Robertson has brought her grandmother back to life for our benefit. The account is truthful and unsentimental. Sophie’s portrait is drawn with warmth and affection. It is an intimate study of how a troubled spirit can still function sufficiently to live a life, albeit disorganised, that is worthy of our attention. Finally, it reminds us of the real person suffering within the turmoil of psychosis and that they, in Kant’s terms, have intrinsic value and dignity and continue to deserve our concern.

Clinical case studies are practically extinct as a means of exploring and understanding psychiatric phenomena, despite the fact that they have served medicine and psychiatry well. From the case of Phineas Gage onwards, medicine has benefited from the careful study of single or small series of cases. Ironically, as the medical and psychiatric literatures have moved away from case studies, novelists and writers have embraced the form and put it to good use. In recent times, extended fictional and biographical accounts of psychopathology have included McGrath’s Spider, McEwan’s Enduring Love and Loudon’s Relative Strangers. These accounts have succeeded in inviting the interested reader into the world that psychiatrists inhabit on a daily basis by bringing to life the abnormal experiences that we in psychiatry are familiar with, and rendering these understandable and meaningful as far as is possible.

Who Was Sophie? The Lives of my Grandmother, Poet and Stranger

The public typically focuses more on the men than the women who are involved in the criminal justice system, and popular interest in female criminality often emerges only after sensationalised crimes such as that of Rosemary West. But recent spikes in female arrests and incarceration rates, particularly in young women, are forcing us to take a critical look at the causes and consequences of female criminality and, especially, female violence.

Destruction, both for oneself and others, can indeed become an aim, even a dominant one, but only through perversion, recombination and narrowing of natural desires. The raw materials for this process are naturally passing hostilities towards others. In the first three parts of her book, Motz effectively and compellingly explores women’s violence against their children, their selves and others. With absorbing case illustrations and well-judged reference to the literature, the perversion of women’s

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natural desires through a process of retaining and cherishing them as obsessions (which become partially autonomous) is well argued. These then feed on the rest of the woman’s character, which atrophies, so that the individual disintegrates although her detached desires retain their force. From this perspective, the woman’s self-destruction is thus a secondary, but seemingly inevitable, consequence of indulged resentment.

Throughout the book Motz convincingly demonstrates that when we want to understand a woman’s violence, we need to grasp both the original motives involved and the kind of perversion to which they are liable. Spotting the particular motive involved is clinically difficult but generally attempted. What is rare, if ever, considered – and this is where Motz succeeds brilliantly – is the need to search for the characteristic involvement in the woman’s violent behaviour or her personal pay-off. Where a woman’s personality has begun to disintegrate her motives will no longer need to be adequate, since adequacy is a notion adapted to judgement by a complete, integrated personality. As Motz points out in such circumstances a woman’s motives essentially need only be obsessive, addictive or otherwise.

In her conclusion, Motz notes that her intention is to offer a model for understanding a range of cases of female violence. Her model integrates pathological foundations with developmental consequences and also proposes a cycle of maintenance for female violence. She underlines important contributory psychodynamic factors. In the post-Bowlby era of attachment theory, infants come equipped with a flexible repertoire, depending on the specific environment in which they live. Viewed from this perspective, it is now critical to specify how alternative patterns might be adaptive under what care-giving circumstances. Motz’s psychodynamic insights into the chaotic interactions during childhood that lead to the foundation of the woman’s pathology and effectively cause diathesis-stress syndrome, are forceful. She clearly underlines the resultant personality difficulties, distorted cognitive styles and psychiatric morbidity that occur in the women, arising from the interaction between their pathological antecedents and through interaction between themselves (e.g. there are likely to be significant and magnifying interactions between fantastic withdrawal, dissociative processes and the women’s developing relationship with their own bodies or that of their children).

Motz’s analyses in the case illustrations underline the effect of stressors (e.g. a significant life event such as rejection, maternal death) in causing the initial violent episode. The vignettes magnificently convey what follows the positive affect (or relief from negative affect) after a woman’s act of violence. Her examples show how such an initial episode may differ from subsequent violent acts in its level of planning and instrumentality. However, where the initial act is associated with relief (from stress or from positive psychotic symptoms), sexual gratification, or with success in evading something, then these operant processes will contribute to a cycle of maintenance.

The myriad manifestations of the women’s subjective experiences, both conscious and unconscious, and their impact on clinicians and services are well-developed in the fourth and final section of the book on clinical applications. Sometimes, the body of truths that we hold to be fixed in our clinical culture for caring for others develops a fissure, which widens into a crack and, as we watch, the whole shatters until nothing is left but fragments of prejudice lying in disarray at our feet. This can be felt and happen in secure services for women. Motz helps us understand how some of the particular challenges and provocations, unconsciously created by women with severe personality disorders, are bound to invite retaliatory behaviour and feelings by staff, particularly those staff who work most closely with them.

This deeply felt and well-researched book exposes the myths and challenges the rhetoric behind violent women. Its fascinating, sharply etched clinical portraits, richly embedded in their social and historical milieu, challenge us in a subtle and accessible manner. It offers an integrated approach to understanding and caring for a disadvantaged patient group. It should be read and reread.