

Inventing Diseases:

Kleptomania, Agoraphobia and Resistance to Modernity

Published in "Society"

Thomas Lenz (University of Luxembourg, Luxembourg)

Rachel MagShamhráin (University College Cork, Ireland)

Medical practices and theories are never the purely pragmatic or scientific affairs they seem to be. Although the experts who articulate and propound them often treat them as if they were entirely unpolluted by their cultural, political and social matrices, they are deeply rooted in their specific time and culture. Kleptomania and agoraphobia, for example, which experienced a sudden heyday around 1900, were never just diseases. These diagnoses were in large part reactions to the radical modernization of society as a whole in the early twentieth century, including to the changes that this brought about in the lives of women. The following examines how kleptomania and agoraphobia were invented around 1900, and how these diseases were linked to that then-emerging symbol of modernity, the department store. These diseases have increasingly been read less as medical phenomena than as mechanisms of social control, designed to pathologize women and perpetuate their exclusion from the public sphere in an age of radical social upheaval.

While German discourse on the rapid spread of the department store phenomenon was perhaps more markedly pessimistic and loaded with misogynistic stereotypes than its French or American counterparts, the birth of the department store was attended internationally by negative public attitudes. As in Germany, department stores had mushroomed in most of the larger European and American cities in the early 1900s. Designed to be highly visible and attract massive attention, they soon became an icon of urban modernity, and an important trope in the political discourses of the day that opposed modernity and capitalism, and used the department store a symbol of what was seen as the dangerous commercialization of everyday life, and an emblem of the problems of modernity.

Despite negative reactions to the department store, this was an institution that played a crucial role in the evolving social identity of women in this period. For the first time, women had a more or less acceptable forum where they could not only shop but socialize with one another. In other words, department stores were one of the few places where women could move relatively freely at a time when female members of the middle and upper classes had little freedom to navigate cities on their own. To walk the streets unaccompanied was stigmatized, as is reflected by the idiomatic use of “walking the streets” to denote acts of prostitution. So, in an age when middle-class women still could not easily leave the house alone, the department store offered a semi-respectable haven within the public realm, outside the household and church, where they could be out and about, and yet not exposed to social opprobrium. As Cynthia Wright has argued, “the first department stores were a new kind of public space for bourgeois women. In addition to selling goods, many stores featured reading rooms, art galleries, and lounges where women could rest and socialize with friends [...] the equivalent for women of the downtown men’s club [...]. For this reason, some middle-class, nineteenth-century feminists celebrated the department store as an arena of freedom for women.”¹

Furthermore, the huge stores not only provided women with socially-acceptable meeting points, but also created employment opportunities for working and middle-class women. As a place where women could both mingle, purchase, and earn a living, department stores were part of a radical change in the socio-economic fabric of society, diminishing husbands’ and families’ financial and social control of their womenfolk, and therefore, unsurprisingly perhaps, quickly arousing suspicion and resistance. But critics were careful to couch the threat not in terms of the new liberties granted to women, but rather in the authoritative and (seemingly) irrefutable language of the body and illness. Department stores were cast as buildings that made women sick, not simply in a metaphorical way, but quite literally. Physicians, psychiatrists, psychologists and the press joined forces to invent specific gendered illnesses that were tailor-made for attacks upon these “cathedrals of consumption”: agoraphobia and kleptomania became the mental diseases *du jour*, discussed not only in the popular media, but also at great length in the weighty medical and legal journals of the day.

Agoraphobia, coined by the German physician Carl Friedrich Westphal, was a term he used to diagnose a condition presenting in three of his patients: they felt unsafe and uncomfortable when they had to traverse wide-open spaces. While all three patients in these cases were, in fact, male, the term,

¹ Cynthia Wright, “‘Feminine Trifles of Vast Importance’: Writing Gender into the History of Consumption,” in *Gender Conflicts: New Essays in Women’s History*, ed. Franca Iacovetta, Mariana Valverde (Toronto: UTP, 1992) 229-60, here 235.

nevertheless, soon came to be applied almost exclusively and liberally to women, in no small measure because of the intervention of Sigmund Freud. In 1896 Freud published a paper stating that agoraphobia was mainly a women's disease, claiming that women who showed symptoms of agoraphobia were actually suffering from a repressed envy of "public women" or prostitutes. In other words, according to Freud, agoraphobic women were suffering the symptoms of the repressed desire to have sex with men whom they randomly encountered on the streets.² And, since the unconscious was thought to be so powerful that it could control individuals completely for short periods of time, and women were seen as being particularly susceptible to these impulses, Freud's interpretation of agoraphobia lent weight to the view that women wandering alone through the streets of the city could only end badly.

Interestingly, at the turn of the century, physicians and psychiatrists reported more and more cases of women seeking medical help for an unreasonable fear of leaving the safety of home, and extreme anxiety in public places, confirming simultaneously the belief in female psychological frailty and in the dangers of the modern urban space, especially for women. As the department store, with its cheap mass-produced and mass-displayed wares, was seen as one of the main reasons that a lone urban woman would decide to venture forth from the safety of the domestic sphere, the agoraphobia diagnosis and the *grand magasins* soon became inextricably associated with one another. The department store featured as the catalyst more and more frequently in agoraphobia cases recorded by psychiatrists, although, as Gillian Brown points out, this was, in fact, ironically "an environment more inducive of claustrophobia."³ Nevertheless, these crowded in-door environments somehow came to be seen as places that elicited anxieties traditionally associated with streets and open spaces. It is interesting to examine more closely this transferred epithet (or strategic transference of a syndrome) from outdoors to indoors: The reason that the department store becomes linked to *agoraphobia* rather than *claustrophobia* suggests that the problem is not actually with open or closed spaces at all, but rather with what the space represents. The "agora," whether physically open, or, in its most modern incarnation now enclosed, first in arcades, then department stores, was not the proper place for women to be. In short, the resistance to women in department stores, expressed in the "incontrovertible" language of disease (albeit the wrong disease), was a resistance to women in the agora representing the marketplace in general, and the freedom to engage in economic transactions.

² Sigmund Freud, *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887-1904*, ed. Jeffrey Moussaieff Masson (Cambridge, MS.: Harvard UP, 1985), 217-218.

³ Gillian Brown, *The Empire of Agoraphobia*, in *Representations*, No. 20, Special Issue: Misogyny, Misandry, and Misanthropy (1987), 134-157, here 143

While medical discourse was busy diagnosing women with a general fear of the great outdoors, scientists, the authors of popular fiction, as well as psychiatrists and news reporters were simultaneously fuelling the fear in these women themselves, warning them of the dangers of venturing abroad, and exposing themselves to the irresistible temptations of the big stores. With the agoraphobia diagnosis, middle-class women who left the house and tried to range freely in the public sphere faced not only moral ruin but illness. Primed by popular discourse, women duly started to display the necessary symptoms, reflecting what Barry Wolfe and Kathleen Brehoney describe as “the sex role training of women as helpless and dependent lead[ing] to their socialization into a prescribed role that promotes fearfulness and non-development of mastery skills and leads them to be more vulnerable to phobic conditions”⁴.

Another topic that dominated discussions of department stores and their female clientele and workforce around 1900 was that of shoplifting. While shoplifters before the emergence of the department stores were mainly imagined as lower-class, stealing because of economic necessity and because of what were seen as intrinsic links between poverty and moral degeneracy, the discourse on shop-lifting changed significantly with the arrival of the *grand magasins*. Now the popular imagination recast shoplifters as thoroughly middle class women, who stole because of a magpie-like attraction to the goods on display.

In “Women and Mental Illness,” Elaine Abelson ascribed the sudden rise in currency of the idea of kleptomania in the nineteenth century to “two parallel developments: the rising status and authority of medical science and the unique importance of the department store as an urban institution.”⁵ She also crucially points out that the kleptomania diagnosis (a term coined in 1838 by Jean-Etienne Esquirol and CC Marc, modifying the earlier *klopemanie* first used by André Matthey in 1816)⁶ was a “repressive medical argument based on the belief that women were likely to be physically and mentally unstable.”⁷

The target of much negative reception from their inception, one recurring accusation levelled at department stores, the new cathedrals of glass, light and cheaper, was that they were, quite literally, designed for the temptation of women, exposing their wares in a seductive and un-protected fashion

⁴ Judith Worell, *Encyclopedia of women and gender. Sex similarities and differences and the impact of society on gender* (San Diego: Academic Press, 2002), 120

⁵ Elaine Abelson, “Women and Kleptomania,” in *Women and Health in America: Historical Readings*, ed. Judith Walzer Leavitt (Madison: U Wisconsin Press, 1999) 389-404, here 390.

⁶ See Jon Grant and Daniel Kim, “Kleptomania,” in *Mental Disorders of the New Millennium*, vol. 1, ed. Thomas G. Plante (Westport, CT: Praeger, 2006) 99-116, here 99.

⁷ Abelson, 392.

that, according to Munich psychiatrist and professor Hans Gudden in 1906, gave rise to the “märchenhaft[es] Gefühl, als müsse man nur die Hand nach den Schätzen ausstrecken,”⁸ a feeling that women, in particular, according to the prevailing beliefs of the day, would find hard to resist. This image, which, of course, draws on a long-standing cultural repertoire in which women, since Eve, have been associated with temptation and weakness, fuelled the enduring view that department-store shoplifting was a predominantly female and middle-class problem, a fact that crime statistics do not, incidentally, support.⁹ Guilt for this phenomenon was ascribed half to the corrupting influence of the institution itself, half to corruptible women, who, from a Victorian perspective, were seen as constitutionally pre-made to be carried away in such a frenetic environment, due to their unruly bodies, with wandering wombs and accompanying hysteria. The Parisian psychiatrist and forensic specialist Paul Dubuisson, author of the famous 1902 *Les voleuses de Grand Magasins*, defines (or, more precisely invents) this kleptomania as “special folly which seizes a woman the moment she crosses the threshold of a great department store.”¹⁰ According to Kerry Segrave, “within this model, women and the department store were seen in a symbiotic relationship in which the shops filled an elemental need for women,”¹¹ and something was felt to be inherently troubling about both.

It is important to note, alongside the proliferation of department stores themselves, the proliferation of forensic psychiatric treatise in this period (1880s to early 1900s) that deal with shoplifting, and in which this crime is emphatically differentiated and distanced from common theft. As Patricia O’Brien has suggested, part of the reason for the currency of the concept at the time was that psychiatrists were using the new mass phenomenon of kleptomania (and also of agoraphobia) to help them to wage “a winning battle at the turn of the century to demonstrate the utility of psychiatry as expert testimony in law courts,” thereby legitimizing what was relatively new profession, particularly in the eyes of magistrates “who doubted medicine’s place in determining guilt or innocence.”¹² In addition to this, the level of interest in what was essentially an invented or socially-constructed disease reflects attempts in

⁸ Hans Gudden, “Die Zurechnungsfähigkeit bei Warenhausdiebstählen,” *Neurologisches Zentralblatt* 25 (1906) 922. [The magical feeling that one only had to stretch one’s hand out to [possess] the treasures.]

⁹ As Gudrun M. König points out, there is no actual evidence from the period for recurring claims that department store theft was, in fact, a 99% female problem, a figure that that originated in Julius Hirsch’s 1910 text *Das Warenhaus in Westdeutschland*, and went on to become a persistent and largely unchallenged mantra. Gudrun M. König, “Zum Warenhausdiebstahl um 1900: Über juristische Definitionen, medizinische Interpretamente und die Geschlechterforschung,” *Geschlecht und materielle Kultur: Frauen-Sachen, Männer-Sachen, Sach-Kulturen*, ed. Gabriele Mentges, Ruth E. Mohrmann, and Cornelia Foerster (Münster: Waxmann, 2000) 49-66, here 55.

¹⁰ Quoted in Kerry Segrave, *Shoplifting: A Social History* (Jefferson, NC: McFarland & Co., 2001) 21.

¹¹ Idem.

¹² Patricia O’Brien, “The Kleptomania Diagnosis: Bourgeois Women and Theft in Late Nineteenth-Century France,” *Journal of Social History* 17.1 (1983) 65-77, here 65.

this period to find a new language and thereby means of restriction and control in a modern world: these texts pathologize both the stores and, with them, their thieving female clientele, understood in these works not as criminals *per se* but rather as either ill and/or constitutionally unable properly to control themselves. In short, this is a diagnosis that attempts to reassert male middle-class control over socio-economic developments that threaten to unleash forces previously held in check.

The creation of a middle-class female theft-illness of supposedly epidemic proportions in precisely this period is, in other words, a reaction to modernity, specifically to growing freedoms for women. In this sense, attacks on department stores as arenas of temptation, luring women into the crime of petty theft, are attacks on an institution which, for all its undoubted other faults, embodied and housed certain of these freedoms. And, as arenas for female desire in one form, these stores quickly became associated with other female desires, considered even more dangerous.

Demonstrating that male fears of female liberties, including the liberty of sexual desire, inform these texts, at least in part, as Ann Shapiro has pointed out, psychiatrist accounts of shoplifting from the 1880s onwards “contain a characteristic subtext that arises [...] from a veiled focus on the sexual body.”¹³ She goes on to cite a typical passage from an 1883 text on female hysteria by French psychiatrist Henri Legrand du Saulle, in which the language is unmistakably that of sexual desire: “The new stores contain and expose, competing for attention, the richest materials, the most sumptuous *objets de toilette* and the most seductive excesses. Women of every rank, attracted to this elegant milieu by the instinct that is natural to their sex, fascinated by so much imprudent provocation, dazzled by the profusion of laces and trinkets, find themselves surprised by a sudden incitement which is not premeditated and is nearly brutal: they place an inexpert, but furtive, hand on the exposed goods, and, there it is; they cancel in a thoughtless touch, the most respectable past, becoming thieves, making themselves into delinquents.”¹⁴

It is important to note, in the context of accounts of shoplifting in this period, the fact that the turn of the century showed a shift from biological explanations of female theft to Freudian psychological ones: Famously, Austrian psychiatrist Wilhelm Stekel wrote an article in 1911 entitled “The Sexual Root of Kleptomania” in which he interpreted all such theft as an expression of repressed unconscious sexual desire in women, writing: “The root of all these cases of kleptomania is ungratified sexual instinct. These

¹³ Ann-Louise Shapiro, “Disordered Bodies / Disorderly Acts: Medical Discourse and the Female Criminal in Nineteenth-Century Paris,” *Gendered Domains: Rethinking Public and Private in Women’s History*, ed. Dorothy O. Helly and Susan M. Reverby (Ithaca: CUP, 1992), 123-134, here 128.

¹⁴ Henri Legrand du Saulle, *Les hystériques: Etat physique et état mental, actes insolites, délictueux et criminels* (Paris: Baillière, 1883) 437.

women [...] are engaged in a constant struggle with their desires. They would like to do what is forbidden [...]. Theft is to them a symbolic act. The essential point is that they do something that is forbidden, *touch* something that does not belong to them.”¹⁵ According to Stekel, these thefts had the advantage of being “a sin in which [the thief] could yet retain her sexual purity.”¹⁶ However, as Elaine Abelson has noted, the shift around the turn of the century from a biological concept of kleptomania to a Freudian interpretation that examined the unconscious causes of these crimes was not really a radical shift at all. In both cases, arguments claiming diminished responsibility on the part of these lady thieves were based on the idea of essential female inferiority, and whether this inferiority was primarily biological or psychological made little difference.

As we have noted, in the many medico-legal treatise on kleptomania in this period, including Leopold Laquer’s famous *Das Warenhausdiebstahl* of 1907, such theft is an almost exclusively female phenomenon. However, this is not to be understood as the somehow liberating discovery that women too can be men’s equals, if only in crime. In fact, we encounter a curious split in the diagnosis and discourse of department store kleptomania: on the one hand women are guilty of the crime, but with an equal and opposite exoneration of the thieves (as long as they adhere to Esquirol’s 1838 landmark characterisation of kleptomaniacs as middle-class women who are only interested in stealing valueless trifles) on the grounds that they are women and therefore incapable of the necessary agency needed for a guilty verdict. Laquer’s expert psychiatrist testimony led, for example, to the acquittal of the female department store thieves whose case studies make up his text. However, the acquittal is a pernicious rather than benign one. They are acquitted as not legally criminal, but nevertheless damned to a kind of harmless guiltiness not worthy of serious penalty. They are placed, in a sense, outside the law, and thereby disempowered.

This double-edged diagnosis (guilty but not-guilty) of department store kleptomania comes into being in reaction to specific and specifically-male fears about modernity and modern middle-class female behaviour, fears that are fuelled or exacerbated by the appearance of mass retail phenomena, and concomitant angst about mass production and the changes that it was bringing to the established socio-economic order. These fears have been encoded in the medical and medico-legal texts of the period *inter alia* in the language of biological re-production, a physical process that already came with its own set of attendant beliefs about female biological imbalance and pathology. In Laquer’s case studies,

¹⁵ Wilhelm Stekel, “The Sexual Root of Kleptomania,” *The Journal of Criminal Law* 2.2 (1911): 239-246, here 240.

¹⁶ Stekel, 243.

the female thieves frequently “suffer” not only from a magpie desire to purloin cheap and useless goods, but from pregnancy, menstruation, and puberty. So, as Segrave puts it, while “[n]ot explicitly gender specific in the beginning [...] the diagnosis [of kleptomania as the impulse of a diseased imagination] was quickly associated almost exclusively with women, specifically with the female reproductive economy, considered to be the seat of the disorder.”¹⁷

With the almost complete bracketing out in the discourses on kleptomania and agoraphobia of male cases, these diseases were made into the perfect metaphorical vehicles for other unstated fears about a degenerate modernity, including especially fears about the erosion of traditionally male roles in society. The unease, then, expressed in the turn-of-the-century obsession both among psychiatrists and in the popular imagination with middle-class female department store kleptomania and agoraphobia is not really about these illnesses or deviant acts *per se*, nor indeed about women and department stores. It is rather, as Bill Lancaster puts it, the “freedom afforded to such large numbers of women by the new type of shopping that caused unease in a society dominated by patriarchal values.”¹⁸ Certain diseases seem to epitomise the fears of an era. In the 19th century it was tuberculosis that was linked to the poverty of the masses and the overcrowding in the evolving cities¹⁹, just as agoraphobia and kleptomania were linked to modernisation and the changing roles of women at the beginning of the 20th. An interesting study, building on Susan Sontag’s work in *Illness as Metaphor*, would be a taxonomy of the various phobias and illnesses used to articulate and cope with the specific fears of today.

¹⁷ Segrave, *Shoplifting: A Social History*, 25.

¹⁸ Bill Lancaster, *The Department Store: A Social History* (London: Leicester UP, 1995) 188.

¹⁹ Joshua Holmes, *Building Bridges and Breaking Boundaries: Modernity and Agoraphobia*, (Opticon1826, 1, 1, <http://www.ucl.ac.uk/opticon1826/archive/issue1>, 2006)