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TRANSCRIPT - LYDIA TISCHLER

This interview was recorded in 2019

*Transcript and video captioning very kindly provided by Gen Lowes, Child
Psychotherapist*

JANE:

Thank you very much for talking with me Lydia. You were one of the first child psychotherapists to start training ever in the world and I'm really interested in that. I know that the training had started a few years prior to you beginning at the Anna Freud centre - what was then the 'Hampstead Child Therapy Clinic'. It was quite an innovative thing to do.

LYDIA:

I was one of the early ones, yes. The pioneers were actually the nurses or the carers who looked after the children. When Anna Freud came to England, she set up the war nurseries for babies, for mothers who were working or couldn't look after the children and all the staff in those war nurseries (who were actually also refugees and probably about 18 or 19) they became the first cohort of the training. In fact, I imagine that Anna Freud's idea about training Child Therapists developed there.

When I came to England in '45, I came with the idea that I wanted to work with children. I didn't have any clear idea about how but just the idea that this is what I wanted to do. And how did this come about? Immediately

after the war, there was a Czech man called Premysl Pitter who was actually the equivalent of a Czech Brethren - religious sect - and he had worked with delinquents before the war. He commandeered a lorry, came to Terezin and brought out a whole lot of orphans - I mean real orphans - under-five children, who had stayed in Terezin while their parents were sent to Auschwitz.

JANE:

So to clarify, you have been in Theresienstadt; the concentration camp. So this was a formative period of your life and really affected your decision to train as a Child Psychotherapist.

[05.36] – “After a journey via Auschwitz and close contact with orphans, my idea was formed”

LYDIA:

Not exactly in the camp - and Theresien wasn't the only camp I was in. I started in Terezin and ended in Terezin; after a journey via Auschwitz. I came with these children (for some reason I don't know quite why) I came with these children to this home - and there, where I actually had close contact with these orphans, this is where my idea was formed.

JANE:

And you were aged what 16, 17 at the time?

LYDIA:

I was aged 16 at the time, yes. By then I had lost my own mother in Auschwitz. So it must have linked somewhere.

JANE:

In what way do you think it linked to your working with children?

[06.55] – “One of the ways you can mother yourself is to mother other children”

LYDIA:

I came to realize...you know we all have different motives why we want to do the work we do - and working with children also has a lot of complicated motives; often it is that we want to repair something or make it easier for the children than we thought we had it. I think one of the ways that you can mother yourself is to mother other children. I think that I came to realize that actually this was somehow my life motive - that I was really mothering myself by looking after other children.

JANE:

You grew up in Czechoslovakia. And I think you were around about 10 years old when Germany invaded? And your life changed forever?

LYDIA:

Yes, yes, yes - as it did for all the Jewish population of the whole of Europe but also for non-Jews.

JANE:

And your father escaped Poland then?

LYDIA:

Yes, he managed to get out, just after the Germans invaded. Or they didn't invade - they were given Czechoslovakia - they just marched in.

JANE:

But he left you and your mother and your older sister behind. It must have been very difficult?

LYDIA:

I have a sort of blur; I can't remember in detail anymore. It must have been hell for my mother, suddenly to be left with two children and no means of support but the idea was to follow him as soon as possible.

JANE:

So, you tried escaping Czechoslovakia by fleeing to Poland?

LYDIA:

In order to get to England to join our father. But before this could happen, war broke out on the 1st of September (or 3rd I think) and we were stuck in Krakow. We stayed there for six months and then we illegally, separately - my mother, my sister and I - all separately went back into Czechoslovakia; to Ostrava; to my hometown. Because my mother had no means of support, I was sent to this Jewish *orphanage*. It was nominally an orphanage although it had quite a few children, like myself, who weren't orphans but whose parents couldn't support them; either one parent was abroad or didn't have the means to support them. It was really a very enlightened children's home but there were some real orphans there too, yes.

JANE:

I think the director of that orphanage was someone who had worked with Anna Freud in the Jackson Nurseries.

LYDIA:

Yes, yes, yes.

JANE:

So, you were in this orphanage away from your family. Yes. And that must have been a very difficult time for you.

[10.51] – “My own compliance was based on ambivalent feelings towards authority”

LYDIA:

I remember I was desperately unhappy there. First of all, it was the first time I had had to live a communal life. I felt so, I suppose, shocked, by the attitude of these girls who were orphans and who had a very different attitude to authority. They didn't care. They didn't try to please them. At least, that's how I perceived it. They were much more trying to find ways how to 'get around' authority, rather than comply. Now I think (having afterwards study psychoanalysis) my own compliance was, I'm sure, also based on quite ambivalent feelings towards authority. It wasn't straightforward but there was some kind of recognition that, *they* were the authority, however much I resented it but probably there to defy it.

JANE:

And then when you were age 13, the entire population of your village in Czechoslovakia was transported to Terezin. Including you and your sister and your mother.

LYDIA:

Yes, yes.

JANE:

And this began another phase in your life. You were a teenager. And your sister was with you and did you have much contact with your - what happened with your mother at that time?

LYDIA:

Oh, we were in Terezin. By the time we got there - we were first housed in barracks. Terezin was chosen, I think because it was a military town and it had a lot of barracks and so it could accommodate a lot of people. We had

three-story bunks - double bunks - so in one room, there could be 20, 30 people. We first all lived together in these barracks. Later on, I moved to what was called a 'children's home' where there were about 20 girls in the room. My sister, because she was older, she had a different group of friends, and they built themselves some kind of living quarters in one of the attics in the house. There were of course ordinary houses in Terezin that were also occupied. The Czech population was moved out of Terezin and it became a ghetto for the Jews.

JANE:

What was your life like there in that camp?

LYDIA:

Well, paradoxically, I got acquainted with literature and music in Terezin. I worked in the market gardens which meant we went outside Terezin every morning and came back in the late afternoon, I suppose, growing vegetables for the Germans - not for us of course but for the Germans. But because a lot of artists were Jews, we had composers, pianists, conductors. I heard them perform *Verdi's Requiem* in Terezin because the conductors and the singers formed choirs. I heard *Magic Flute* performed, as just a performance without of course the acting. So, as I say, paradoxically in Terezin, I came across literature and music that I didn't have access to at home.

JANE:

And then you were there until the age of 16.

LYDIA:

Yes. 15, just before 16 years. Yes.

JANE:

And then your life was to change again?

LYDIA:

That's right, yes. Then I volunteered to join my mother and sister when they were sent to Auschwitz. We did and didn't know that it was Auschwitz - but it was 'somewhere east'.

JANE:

And why did you choose to volunteer to go with them?

[15.14] - "One's defence mechanisms worked so well...the need to deny what was ahead was so strong in people"

LYDIA:

I think I somehow felt it was important to stay together as a family and, as I say because one's defence mechanisms worked so well. It was something that I didn't know at the time, but realized retrospectively, that in fact, the need to *deny* what was ahead was so strong in people that it was also, partly, the need to deny but partially also it was beyond imagination. I mean it was....

JANE:

It was truly horrifying when you got there.

LYDIA:

Yes.

JANE:

What you saw.

LYDIA:

Yes.

JANE:

So, what happened when you arrived in the country, you had a long journey together?

LYDIA:

Well, what happened first of all, was that when I went to volunteer (and I wasn't the only one - there a few of us) we were told that we couldn't go but we just sort of hung around; we thought we'd wait until the train leaves and then suddenly they had an extra carriage, so they let us go. Of course, by then my mother and sister were already sealed in an earlier carriage so my mother didn't know I was joining them. I, of course never saw my mother again because she was sent to the right and...

JANE:

When you said she was sent to the right was that Doctor Mengele?

LYDIA:

Yes. When we came - yes - when we got off the train - and I think it must have been on purpose - the trains always arrived in the night, when it was pitch dark and they were just these glaring headlights, electrified fences, and soldiers with bayonets and big dogs.

JANE:

So, people were extra disorientated because it was night time. Is that what you mean?

LYDIA:

Yes, yes I think it was, in a way, to ... I imagine it was deliberate policy because wherever we arrived we always arrived in the night - except for Terezin. And you had to go through the gate where Mengele stood and he looked at you and decided if you looked like somebody who could work and could still be used, you would be sent to the left, and if you were too young or too old or perhaps looked not well enough, you were sent to the right, which meant you went straight to gas chambers. My mother was sent to the right and when I then came into this huge hall, my sister, my

poor sister, nearly had a heart attack because she thought I was in Terezin and suddenly I appeared in Auschwitz.

JANE:

So, she was hoping that you were safe?

LYDIA:

She believed that I was safe because she had no idea that I had come. But I think it must have been quite a help in the end that we were together, that she wasn't on her own.

JANE:

It helped her survive and perhaps you too?

LYDIA:

Well yes, but also I think we were lucky enough: first of all, we were only three days in Auschwitz and, that we were sent to a work camp which actually wasn't the worst. We were lucky enough that we were housed in what I thought was an old factory. My sister thought it was an old school – but well never mind, whatever it was, there was a heating system in the town - you know, where the whole town had these sort of heating tubes going right through the town. So that we were always warm. It was bitter cold. We came at the end of October and it was quite cold. So at least we were warm.

JANE:

And then the camps were liberated in the following year, is that right?

LYDIA:

The Americans were advancing from the west. We were evacuated and that was, I think, in about April 1945. We were evacuated in open cattle trucks this time. There were 500 women in that camp - 300 Czech girls

and 200 Polish girls. We were evacuated and ended up in Terezin. Back where we started. We got there at the end of April and on the 8th of May, the Russians liberated us on the way to Prague.

JANE:

And it was after then that you came to helping in the orphanage of children...?

LYDIA:

...in this home. Yes, yes; that was after that, yes.

JANE:

And what was that like working with children; they'd grown up in Terezin?

LYDIA:

They had no idea you know. There was a radio, and they went to look around the corner to see where the voice was coming from. I mean they literally had not much idea about what life outside Terezin was like.

JANE:

And they must have been really severely traumatized. You were 16/ 17 at the time.

LYDIA:

Yes, I mean, I wouldn't have known about what emotional state they were in. I was, myself, I suppose, in a way, cut off from my feelings.

JANE:

Not surprisingly.

LYDIA:

You know that one way of surviving is to be cut off from your feelings.

JANE:

So you know from your own experience the importance of defences.

LYDIA:

Indeed. Yes, yes.

JANE:

And then you travelled to the UK?

LYDIA:

Yes.

JANE:

And would be reunited with your father?

LYDIA:

We were... I mean, the whole world was looking for a relative; via newspapers, via radio, and I think we found our father through a newspaper and got in touch with him and there was an opportunity to come to England. My father very much wanted me to come and I wanted to come because I didn't really feel I had a life in the Czech Republic where it was Czechoslovakia then.

My sister was by then already living with her future husband and they found a flat in Prague. He went to Prague from Terezin with some Russian soldiers and he just walked into a flat that the Germans - some German occupants had run away from and they lived in that flat until they came to England in '68. So, you know my sister had no desire to come to England.

JANE:

And how was it being reunited with your father?

[23.14] – “My father had a nervous breakdown...his entire family perished...I had imagined he would make up for all of the hardships. It didn’t turn out like that...I found a way of coping by finding a school.”

LYDIA:

Sadly, another trauma, because he had what I think was a nervous breakdown. Once he learned that apart from my sister and myself, his entire family perished: his wife, his parents, all his sisters - he had six - well one was in France, one in Israel; four of his sisters, their husbands and children; everybody wiped out. So that was a bit too much for him and he never really managed to establish himself in work in England so it wasn't...it wasn't the welcome that I had dreamt about when I was in [the camps] and I imagined he was alone and would make up for all the hardships. It didn't turn out like that.

JANE:

That must be very difficult for you with a father who was really struggling.

LYDIA:

Yes, it was. It was... again I, somehow, I managed to - well, I found a way of coping with it by finding a school.

JANE:

So, when you came to the UK, you established yourself in London and had to catch up on your education even enrolling yourself into a secondary school I believe?

LYDIA:

Right. Yes, yes. I think much to the surprise of everybody - that somebody volunteered to come to school.

JANE:

And after getting yourself a degree, you started your Child Psychotherapy training. That was established by Anna Freud.

LYDIA:

Yes.

JANE:

How much contact did you actually have with Anna Freud during your training?

[26.03] - "Students were only invited [to scientific meetings] if Anna Freud thought they were worthy of being invited... Later on it became compulsory."

LYDIA:

Once a week, regularly, on a Wednesday. Wednesday meetings are a tradition in all psychoanalytic societies. I think started because Freud had his meetings on Wednesday and I think the Institute still continues having their scientific meetings on a Wednesday and Anna Freud instituted it at the clinic; at the training, on Wednesday afternoon.

All the teachers and interested people who were invited came to hear a presentation; mostly by students or by qualified therapists or occasionally an invited speaker. In fact, when she started - when we had the house and started the Wednesday meetings - students were only invited if Anna Freud thought they were worthy of being invited. Not every student was invited. Later on, it became compulsory but when I was training it wasn't. It wasn't open to everybody.

[26.29] – “Anna Freud...had such clinical acumen...however good or bad the presentation; she would put her finger on where the child's problem was and even predict what the outcome might be.”

It was during those meetings when, after the presentation, Anna Freud commented on the ‘presentation’ and she had such clinical acumen; she would home in on what the child's problem was - however good or bad the presentation; she would put her finger on where the child's problem was and even predict what the outcome might be.

[27.06] – “Anna Freud believed in following the child, not imposing her theory on the child but listening to the child.”

But more importantly, it was the place where you watched technique being changed. Anna Freud believed in following the child, not imposing her theory on the child but listening to the child and as she would listen to the presentation she would say, “You know, I don't think this child can understand your interpretation of defences; they're not there yet. You have to approach it from another angle. You have to perhaps actually help the child recognize that they have feelings or name their feelings.”

[27.42] – “It was really an education in how technique evolved in front of our eyes.”

And it was really an education in how technique evolved in front of our eyes. I think this is what - I mean - apart from the other very important aspects of the training - but this is where one learned from her.

JANE:

So, your training was mostly in Freud's theories?

[28.21] – “It was such a well-planned consistent, coherent, theoretical background ...it allowed one to develop from it...you didn't have to stick rigidly to it, but you could grow from it; you had this as a good solid base.”

LYDIA:

Yes, really almost exclusively I would say. His case studies, his theory of sexuality, his basic ego and superego - all his basic analytic theory and I must say that it was such a well-planned consistent, coherent, theoretical background that it has stood me in really in very good stead throughout my whole life. I can still somewhere kind of fish out something that I learned 60 years ago. It really was a very, very, good grounding and it allowed one to develop from it. You know you didn't have to stick rigidly to it but you could grow from it but you had this as a good solid base.

JANE:

What inspired you to train as a Child Psychotherapist? There was very few around.

LYDIA:

When I came to England in '45, after I had caught up a bit with my education, I went to work in a nursery for - they were called 'difficult children' at that time - they were actually children who were not able to be returned home after evacuation for various reasons because parents weren't able to look after them and there was a nursery was run under the auspices of the National Association for Mental Health and the director of this home was Ruth Thomas, who was at the time in analysis with Anna Freud and training to be an analyst and she introduced this regime that Anna Freud had introduced in her war nurseries, namely that we made observations.

[30.12] – “Every night we wrote up our observations of the children [in the nursery]. Ruth Thomas came at the weekend and [began] to teach us psychoanalytic concepts based on our observations.”

Every night we wrote up our observations of the children: of what they did and how they did it and what they said and what they felt; on index cards and Ruth Thomas came at the weekend and we had seminars with her, and we went through these cards and she would begin to teach us psychoanalytic concepts based on our observations. So, we began to get an inkling of what psychoanalytic theory is like and also the beginnings of what transference feels like.

The children were organized in groups so each one of us had five children and we were the group ‘mother’ and were the first person they related to and then they had not such good close contact with others. So, it was very much based on the idea that relationships matter, and the fewer children have to relate to one adult, the easier it is for them. Particularly because they are more or less at the same age. This is where I began to get an idea about psychoanalysis and the possibility of training, yes.

JANE:

And you began in 1953 at age 24. What was the training comprised of in those days? How did they train you?

LYDIA:

Well, we were actually trained as analysts. We had, in fact, a much more thorough training than the analysts at the Institute: we had five times a week of personal analysis. We had to see three children, five times a week: an under five, a latency child and an adolescent. We had lectures on Freud’s theories and of course, well when I started, Anna Freud hadn’t developed a developmental theory yet. We used those seminars in the lecturers’ homes because the first house, I think, wasn’t bought ‘till about -

well it must have been later...I know that I finished my training when there was already a clinic and I managed to see some of the children in the Hampstead Clinic. But I started out as a trainee psychotherapist in Ilford – Walthamstow, Ilford - and I saw children there before the Hampstead Clinic was actually set up. So, I was actually around when the clinic properly got a home.

JANE:

And by this time, by the time you started your training, there was already considerable rivalry and enmity between Anna Freud and Melanie Klein. Was that something you were aware of at the time?

LYDIA:

I was aware of the fact that the Tavistock, which was based on Melanie Klein's teachings (although she herself wasn't involved with the training)... Anna Freud... there was, you know, a big gulf between 'us' and 'their teaching' and 'our teaching'. I didn't know directly about the 'controversial discussions'; I learned about this much later. But we had one Hungarian seminar leader/lecturer Dr Barbara Lantos who was very instrumental in the controversial discussions and very much championed Anna Freud. I must say she literally dripped poison about Melanie; she really hated her and when she was teaching us, she couldn't stop herself from bad-mouthing Melanie. So in some ways, I was a bit infected by my view of Melanie from Barbara Lantos but the Association of Child Psychotherapists was also founded and actually Ruth Thomas was very instrumental in this.

JANE:

And she'd been in the nursery that you trained in, that you worked at.

[34.58] – “The Association of Child Psychotherapists was determined...not to replicate the hostility and rivalry in the Institute.”

LYDIA:

No, yes, that's right, yes, that nursery, yes. But what the Association of Child Psychotherapists was determined to do, was not to replicate the hostility and rivalry in the Institute. So, we were very careful not to (at least officially) have these disagreements. Very interestingly, what happened was, we set up study weekends where we had - at that time there were four training schools - there was Hampstead, Tavistock, the Lowenfeld Centre (which wasn't really analytic but sort of became part of the association) and the Jungian training. And speakers from each of the schools - we took a topic and we... I can't remember the first topic was, I think short-term psychotherapy / once weekly psychotherapy and from each school, from each of the trainings, somebody presented the paper.

[36.06] – “What we discovered was that we used the same concepts but had a completely different meaning...we took a concept...presented it from all these different points of view and we agreed that we would agree to differ.”

And what we discovered was that we used the same concepts but had a completely different meaning. So, we took concepts like 'defence', 'internalised objects', whatever. We took a concept and again, presented it from all these different points of view, and we agreed that we would agree to differ. Privately you know, the Tavi thought, 'Oh, those Anna Freud people - they don't know what they're talking about,' and we had similar views of them but that was private. Publicly - and really, it helped that people weren't so...you know they weren't enemies. So, it helped to create a different atmosphere in the ACP.

JANE:

So, it's been more than 60 years since you've qualified as a Child Psychotherapist, how much has child psychotherapy - Psychoanalytic Child Psychotherapy - changed during that time.

LYDIA:

The kind of disturbances that our trainees have to cope with... I mean, never in a hundred years would I have been given a child who is *impulse-driven*; has *no visible internal conflict*, as a training case at the Anna Freud. They wouldn't have even passed the threshold there. Today our trainees have to deal with the most complex disturbances, and they have to find a way of working with these children.

JANE:

And so they do need different techniques, is that what you're saying?

[38.09] – “Anne Hurley...developed...what became known as ‘Developmental Therapy’. That is children who really haven't got a well-functioning ego.”

LYDIA:

Yes, they need different techniques. Anne Hurley was very much somebody who developed (again something that Anna Freud started but then distanced herself from it because she felt it wasn't pure analysis) what became known as ‘Developmental Therapy’. That is children who really haven't got a well-functioning ego; who don't know that they have...you know, they're angry but they don't know that they can call it, “I'm angry” - they punch. So, they haven't developed a capacity to symbolise in order to be able to control their impulses better. So, this is very much more what Child Psychotherapists have to face today and of course, children who are ‘looked-after’, who've had severe losses, you know so much.... Also, therapists have to deal with the loss of the biological mother; five foster homes before they are six. Very, very, different...the social fabric has changed and has produced different disturbances.

[39.24] – “The social fabric has changed and has produced different disturbances.”

JANE:

Are you seeing that children are more emotionally disturbed these days than when you started training - even in the post-war era when there was a lot of trauma?

LYDIA:

Different, yes.

JANE:

So, after you qualified in 1957, aged 24, you spent some years working in what were then called Child Guidance Clinics and then in 1962 you went to work somewhere called the Cassel Hospital where you developed the department of Child Psychotherapy there. In fact, you were the very first Child Psychotherapist to be employed there.

LYDIA:

Yes.

JANE:

Tell me about the Cassel Hospital and what they did there.

[40.10] – “Tom Main was the medical director and took the Cassel Hospital [a psychoanalytically informed therapeutic community] into the National Health Service in 1948.”

LYDIA:

Tom Main was appointed as medical director. In '48 he took it into the National Health Service and started what was essentially a therapeutic community with psychoanalytic treatment; a psychoanalytically informed therapeutic community.

JANE:

By the time you came to work there, there were women and their children being treated there, but you transformed the Mother and Baby Unit into a Family Unit.

[41.30] – “We began to admit fathers also as patients.”

LYDIA

Fathers were never admitted as patients, but they could visit. But we began to look at the family as a unit and found that often fathers may have been the disturbed patient and we began to look at families to see what family functioning - how it worked and didn't work - and so gradually after we started having children referred with mothers, we began to admit fathers also as patients, to have either individual therapy or being seen together. I think this was actually Fayed Nakhla, one of my colleagues, who was very interested in doing this.

JANE:

Can you tell me about the daily life in the clinic there? The people you were treating were living there?

LYDIA:

Seeing children as outpatients and seeing children as in-patients was very different because you had so much more information about the children from all kinds of sources: the nurses; the parents; the reports, so it wasn't pure psychotherapy as it was done in an outpatient but you had to take

into account all this other information that you had and find a way of treating the children but also involving, for instance, the nurses, in helping them to think about the children - not just as 'mothers' appendages' but as children in their own right.

JANE:

So, do you think it would be a good idea if these sort of in-patient family units were created again for families who are struggling?

[43.30] – “Economically it would make sense, [to create in-patient family units] but you would have to have enlightened politicians who would do it and I don't think we have them.”

LYDIA:

I think it would certainly be, also, financially cheaper for the Health Service because if a family can't function as a family, the child may end up in an institution, which is much more expensive for them to maintain a child in a boarding school or in a school for delinquents or whatever. So economically it would make sense, but you would have to have enlightened politicians who would do it and I don't think we have them.

JANE:

So, you retired quite early, I think age 55?

LYDIA:

Yes.

JANE:

From the Cassel Hospital and you've been involved in the Association of Child Psychotherapists from the 1950s onwards on the Executive Committee I believe, and you actually then became Chair of the Training Council of the ACP. And then in the early '90s you were instrumental in setting up the Child

Psychotherapy Section of the 'European Federation of Psychoanalytic Psychotherapy' and you became its First Secretary.

LYDIA:

Yes.

JANE:

And you've been very active teaching and developing child development and child psychotherapy in Eastern and Central European countries ever since. What motivated you to get involved?

LYDIA:

Because I'm really a European. I am not a native Brit and although I've lived here all these years, I still have somewhere... and I still feel European, and for me Brexit is a tragedy, but that's another story. So, I was interested in helping to set up something that would bring together the Europeans.

[45.50] – “Czechoslovakia had...a...thriving analytic community before the war. Then Hitler ...you know - the Nazis, forbade it and then the communists forbade it but somewhere, underground, it still kind of existed.”

How I got involved with the Czech training - that was again a different story. Before the Iron Curtain came down, there was a Hungarian analyst [Judith Seckasz] who had an organization called 'East-West Imago' and she used to invite analysts from behind the Iron Curtain who were somehow managing to work as analysts. One day, one of the Czech analysts was invited to talk, so I came and listened to him. I thought, well he's Czech, I'll see what's happening in Czechoslovakia. And afterwards, I went up to him and introduced myself and one thing led to another and when he heard that I was a Child Therapist... (Czechoslovakia had a child analyst before the war - she emigrated to Israel. Czechoslovakia had actually a very thriving analytic community before the war. Then Hitler ... well, many of

them were Jews who emigrated to America or Britain... First Hitler - you know - the Nazis, forbade it and then the communists forbade it but somewhere, underground, it still kind of existed) ...when he heard that I was a Child Therapist, he had the idea that I should come and help them set up a training for Child Therapists. So that's how that came about.

JANE:

So what has been the impact of this to-ing and fro-ing from here to Eastern and Central Europe?

[47.16] - "I am the grandmother of the training."

LYDIA:

We are very much, kind of, 'revered people' there because we actually did start something that has flourished and is now self-sufficient training. There was a lull after the first group trained but now it's very much a thriving undertaking and a lot of training - they have a lot of trainees - and I am the grandmother of the training.

JANE:

And you still involved?

LYDIA:

Well, I'm still involved to the extent that they have biannual conferences and somehow, I always have to produce something for the conference.

JANE:

And then you have become more involved since your retirement in the British Association of Psychotherapists which became the British Psychotherapy Foundation and you've described that as your home.

LYDIA:

I describe it as my 'professional' home, yes.

JANE:

Why is that?

LYDIA:

Well, I was never offered a job at the Hampstead Clinic after I qualified and then I went off and did my thing at the Cassel. By the time I retired, I was asked to teach on the training and then I got more involved and joined the training committee and it was a very congenial place and I kind of adopted it and they adopted me. So, it was a successful mutual adoption.

JANE:

So, you've seen many generations of Child Psychotherapists come through and being involved in their training, both here and in Europe. What would you say to Child Psychotherapists just starting out? What's the most important thing for them?

[48.42] – *“Listen to the child...being with a child...how you are with the child; that is more important than what you say to the child.”*

LYDIA:

Listen to the child. Don't go in with preconceived ideas but just listen to the child. You have to establish a relationship with the child before they will trust you with their problems. You know, every trainee considers making the 'right interpretation' the most important thing and it's somehow helping them to let go of this idea. Maybe just *being with a child* is more important than what you say to the child; it's *how you are* with the child that is more important than what you say to the child, but you *follow* the child, you don't dictate to the child.

JANE:

And looking back on your career, what are you most satisfied about your contribution to the lives of children that you've worked with?

[49.55] – “Setting up the training in the Czech Republic. That, I feel, is my important contribution.”

LYDIA:

Setting up the training in the Czech Republic. That, I feel, is my important contribution. I used to be the first point of contact when people were ringing up the BAP and said, “Can we...? Is there a child training?” And I was always the first point of contact and I enjoyed listening to why people wanted to train and helping them to get going and so often I'm very touched when they say, “Well Lydia was the first person I talked to and she actually got me interested in starting to train.” So that feels very kind of satisfying, yes.

JANE:

I think that's a good note to end on. Thank you for your contribution to Child Psychotherapy, Lydia. It's appreciated by us all and thank you for spending the time with me talking about your career.

LYDIA:

You're welcome.