After the fall of France in 1941, the Royal Air Force, by winning the Battle of Britain, prevented German invasion of the British Isles. The evacuation from the Dunkirk beaches prevented the capture of the core of the regular army, including many of the generals who were later to distinguish themselves. There was, therefore, a chance to fight again but there was no land army of any size to do so. It was thus imperative that Britain build a large land army in a hurry. Attempts to meet this need created immense problems in the utilization of human resources (problems far more severe for the army than for the other services), but no measures tried in the first few months seemed to be effective.

In 1941 a group of psychiatrists at the Tavistock Clinic saw that the right questions were asked in Parliament in order to secure the means to try new measures. As a result they were asked to join the Directorate of Army Psychiatry, and did so as a group.

To understand how such a small group was able to be so influential, we must go back to the period immediately after World War I when there was a growing recognition that neurotic disabilities were not merely transitory phenomena related to the stress of war, but were endemic and pervasive in a modern society. In order to respond to the 'felt social need' thus arising, the Tavistock Institute of Medical Psychology (better known as the Tavistock Clinic), the parent body of the post-World War II Institute, was founded in 1920 as a voluntary outpatient clinic to explore the implications for treatment and research.

The founding group comprised many of the key doctors who had been concerned with neurosis in World War I. They included general physicians and neurologists, as well as psychiatrists, and one or two multiply-trained individuals who combined psychology and anthropology with medicine. The group, therefore, showed from the beginning the preparedness to be linked to the social sciences and to general medicine, as well as to psychiatry, which has characterized it ever since.

Interest focussed on the then new 'dynamic psychologies' as representing the direction which offered most hope. Because of the uncertain and confused state of knowledge in these fields, tolerance of different viewpoints was part of the undertaking and the Tavistock Clinic functioned as a mediating institution, a clearing-house where the views of several contending parties could be aired. On the one hand were the adherents of Freud, Jung and Adler, who were preoccupied with establishing their own professional societies and advancing their own theories. On the other were a neurologically-oriented general psychiatry, a somatically-oriented general medicine and a surrounding society puzzled, bewildered, intrigued and frightened by the new knowledge of the unconscious and its implications for important areas of life.

Since 'authoritarian' government of the medical kind in a pathfinding organization such as the Tavistock Clinic proved dysfunctional, a transition to a collegiate professional democracy took place.
in the early 1930s, when problems arising from the Depression shook many cherished beliefs and raised new questions concerning the role of social factors in psychological illness. This organizational revolution brought to the front a younger generation of clinicians with a level of ability and a maverick quality that would otherwise have been lost.*

*The staff now elected as their Director Jack Rawlings Rees, grouped around whom were Henry Dicks, Ronald Hargreaves, Tommy Wilson and Wilfred Bion, all of whom subsequently made world-wide reputations. They would have left the Tavistock had it not been for the opportunities opened up by the organizational revolution.

This younger group now began to take on a conceptual direction consonant with the emergent 'object relations approach' in psychoanalysis. The object relations approach emphasized relationships rather than instinctual drives and psychic energy.

As Dicks's (1970) history (Fifty Years of the Tavistock Clinic) shows, there were great variations in the quality of the services offered by the pre-war Clinic. Among the 80 physicians who contributed six hours a week, many had little or no psychiatric training. Nevertheless, by the beginning of World War II the Tavistock had attained international standing. It had developed links with organizations in the main Commonwealth countries and the United States, and had undertaken systematic research and teaching. It had obtained peripheral academic standing in London University with six recognized teachers. The outbreak of war, however, prevented this arrangement from being implemented.

### WAR-TIME BREAKTHROUGHS

The group who entered the Directorate of Army Psychiatry took a novel approach to the human resource problems facing the army. Rather than remain in base hospitals they went out into the field to find out from commanding officers what they saw as their most pressing problems. They would listen to their troubled military clients as an analyst would to a patient, believing that the 'real' problems would surface as trust became established, and that constructive ideas about dealing with them would emerge. The concept thence arose of 'command' psychiatry, in which a psychiatrist with a roving commission was attached to each of the five Army Commanders in Home Forces.

A relationship of critical importance was formed between the Clinic's Ronald Hargreaves, as command psychiatrist, and Sir Ronald Adam, the Army Commander in Northern Command. When Adam became Adjutant General, the second highest post in the army, he was able to implement policies that Hargreaves and he had adumbrated. New military institutions had to be created to carry them out. The institution-building process entailed:

**Earning the right to be consulted on emergent problems for which there was no solution in traditional military procedures, e.g., the problem of officer selection.**

- Making preliminary studies to identify a path of solution - the investigation of morale in Officer Cadet Training Units.
- Designing a pilot model in collaboration with military personnel which embodied the required remedial measures - the Experimental War Office Selection Board.
• Handing over the developed model to military control with the psychiatric and psychological staff falling back into advisory roles or where possible removing themselves entirely - the War Office Selection Boards (WOSBs) and Civil Resettlement Units (CRUs) for repatriated prisoners of war.

• Disseminating the developed model, securing broad acceptance for it and training large numbers of soldiers to occupy the required roles, e.g., CRUs.

To meet these large-scale tasks the range of disciplines was extended from psychiatry and clinical psychology to social psychology, sociology and anthropology. The members of these various disciplines were held together by participation in common operational tasks in an action frame of reference. To varying extents they began to learn each others’ skills. The group became, to use a term that arose after the war in a project concerned with alternative forms of organization in the mining industry, a ‘composite’ work group. (Vol. I, ‘The Assumption of Ordinariness as a Denial Mechanism’)

Undertaking practical tasks that sought to resolve operational crises generated insights that led toward new theory. This process was familiar to those members of the group who were practicing psychiatrists, but it was new to those coming from other disciplines. This led to a generalized concept of professionalism.

The innovations introduced during the war years consisted of a series of ‘inventions’:

• Command psychiatry as a reconnaissance activity leading to the identification of critical problems.

• Social psychiatry as a policy science permitting preventive intervention in large scale problems.

• The co-creation with the military of new institutions to implement these policies.
  • The therapeutic community as a new mode of treatment.
  • Cultural psychiatry for the analysis of the enemy mentality.

By the end of the war a considerable number of psychiatrists and social scientists had become involved in this comprehensive set of innovative applications of concepts of social psychiatry. They saw in these approaches a significance which did not seem to be limited by the condition of war, and were determined to explore their relevance for the civilian society. Obviously, individual programs could not be transferred without considerable modification; entirely new lines of development would have to be worked out. Nevertheless, a new action-oriented philosophy of relating psychiatry and the social sciences to society had become a reality in practice. This event signified the social engagement of social science.

Post-War Transformation
New questions now arose. Who would be the next pioneers? Who would accept the risks, which were great? Could a setting be found that could nurture the new endeavors? An answer to these questions came about in the following way.

Toward the end of the war the existence of a democratic tradition in the Tavistock Clinic made possible the election by the whole staff (through a postal ballot) of an Interim Planning Committee (IPC) to consider the future of the organization. The election gave power to those who had led the work in the Army.* The IPC began meeting in the autumn of 1945 to work out a redefinition of the Clinic’s mission in light of the experiences gained during the war. The IPC was chaired by Wilfred Bion, who used his new findings about groups to clarify issues and reduce conflicts within the planning group itself. Council approved its report by the end of that year.

The IPC made a crucial decision in recognition of an impending political event - the then new Labour Government’s intimation that it would in 1948 create a National Health Service. The IPC resolved:

- To build up the Clinic to enter the National Health Service fully equipped with the kind of staff who could be entrusted with the task of discovering the role of out-patient psychiatry, based on a dynamic approach and oriented towards the social sciences, in the as yet unknown setting of a national health service.

- Separately to incorporate the Institute of Human Relations for the study of wider social problems not accepted as in the area of mental health.

This readiness enabled the IPC in 1945 to attract the attention of Alan Gregg, Medical Director of the Rockefeller Foundation, who was touring the various institutions that had been involved in war medicine. He was interested in finding out if there was a group committed to undertaking, under conditions of peace, the kind of social psychiatry that had developed in the army under conditions of war. So began a process that led the Rockefeller Foundation in 1946 to make a grant of untied funds without which the IPC’s post-war plan could not have been carried out.

The Rockefeller grant led to the birth of **the Tavistock Institute of Human Relations**, constituted at first as a division of the Tavistock Clinic. With these funds it became possible to obtain for the then joint organization a nucleus of full-time senior staff who would otherwise have been scattered in
universities and hospitals throughout the country and abroad.

A Professional Committee (PC), with Rees in the chair, and a small Technical Executive representing the new permanent staff, chaired by Bion, came into existence in February 1946. These arrangements lasted until the separate incorporation of the Institute in September 1947. The situation required the transformation of a large part-time staff, appropriate for the pre-war Clinic as a voluntary out-patient hospital, into a small nucleus of full-timers, supported by others giving substantial proportions of their time, and committed to the redefined mission of the post-war organization. Decisions were taken as to who should stay, who should leave and who should be added. Criteria included willingness to participate in the redefined social mission and to undergo psychoanalysis if they had not already done so. This critical episode became known as Operation Phoenix.*

*In addition to Sutherland and Trist, a number of other outsiders who had played prominent roles in the war-time effort, were brought in at this point. John Bowlby, a child psychiatrist and analyst, was made head of what he came to call the Department for Children and Parents. (The other senior psychiatrists appointed to the Clinic were all from the wider Tavistock group.) Elliott Jaques, a young Canadian psychiatrist and psychologist, was invited to join the Institute and played a prominent role during the five years he stayed.

As regards the requirement for psychoanalysis, it was felt that object relations theory had proved its relevance during the war in the social as well as the clinical field. It represented the most advanced body of psychological knowledge then available which could provide a common foundation for those who would in various ways be continuing, in the peace, the work begun under war conditions. Training would be in the hands of the British Psycho-Analytical Society, and social applications in the hands of the Institute. This understanding equilibrated relations between the two bodies. The Society agreed to provide training analysts for acceptable candidates, whether they were going to become fulltime analysts, mix psychoanalytic practice with broader endeavors in the health field or use psychoanalytic understanding outside the health area in organizational and social projects. The Society, therefore, recognized the relevance for psychoanalysis of work in the social field, while the Institute affirmed the importance of psychoanalysis for psycho-social studies. In this way some 15 individuals, some in the Clinic and some in the Institute, most of them in mid-life, undertook personal psychoanalysis as part of the enterprise of building the new Tavistock. It was a major 'experiment,' the outcome of which could not be known for a number of years.

The PC now faced painful tasks. When the decisions stemming from Operation Phoenix began to be implemented, a great deal of guilt developed over the termination of most of the pre-war staff who in one way or another did not meet the criteria for inclusion in the post-war body. An abdication crisis ensued. The PC agreed to stay in power only after a searching self-examination that enabled them to separate task-oriented factors from the tangle of personal feelings. Tension and confusion developed throughout the entire organization. Bion resigned as Chairman of the Technical Executive and restricted himself to the role of social therapist to an overall staff group that held weekly meetings to work through these matters. Without them the post-war organization could scarcely have survived its conflicts. Our first experiment with group methods was on ourselves.

THE JOINT ORGANIZATION

In preparing to enter the National Health Service (NHS) the Clinic had to develop therapeutic methods that would allow the maintenance of a patient load sufficiently large to satisfy the new authorities that out-patient psychotherapy could be cost effective. War-time experience suggested
that the best prospect would lie in group treatment. Accordingly, the PC asked Bion, considering his special achievements in this field, to pioneer this endeavor. His response was to put up a notice which became celebrated - "You can have group treatment now or wait a year for individual treatment." The groups he started, however, were not only patient groups but groups with industrial managers and with people from the educational world. He was developing a general method reflected in a series of papers in Human Relations (Bion, 1948-51), which put forward entirely new theory. By the time the Clinic entered the NHS most of the psychiatrists were taking groups, though none used precisely Bion's methods.

Meanwhile, in the Department for Children and Parents, Bowlby laid the foundations of family therapy (Vol. I, ÒThe Reduction of Group Tensions in the FamilyÓ). Also at this time he began his world famous studies of mother/child separation.

Another major and still continuing enterprise that began during this early period emerged from a crisis in the Family Welfare Association (FWA), which co-ordinated family case work in the London area. The coming of the welfare state rendered unnecessary its task of dispensing material aid to the poor. Its offices were now besieged by clients with social and emotional problems with which its staff were unable to deal. Through Wilson (1949) the Institute was consulted. An attempt to train FWA staff proved unsuccessful. The Institute therefore set up within its own boundary what was called the Family Discussion Bureau (FDB), which later became the Institute for Marital Studies (IMS). This created the first non-medical channel in Britain for professional work with families. In time it was supported by the government through the Home Office.

Michael Balint, one of the senior analysts at the Clinic, introduced a group method of training family welfare workers in which stress was laid on making them aware of their counter-transferences: their projections of their own problems onto their clients. Balint later developed these methods for training large numbers of health professionals, including general physicians (Balint, 1954). This allowed the Clinic to have a multiplier effect which, along with group treatment and the inauguration of family therapy, showed that what had been learnt in the Army about using scarce resources to meet the needs of large scale systems could be applied in the civilian society in entirely new ways.

Hostility to the Institute's work, however, developed in the academic world. The Medical Research Council dismissed the first draft of the WOSB write-up as being of only historical, not scientific, interest. No further funds were granted.

Several strategic moves were nevertheless made to establish the Tavistock's academic claims. There was very little chance at that time of getting much of its work accepted by existing journals. A new journal was needed that would manifest the connection between field theory and object-relations psychoanalysis. With Lewin's group in the U.S., the Research Center for Group Dynamics, now at the University of Michigan, the Institute created a new international journal, Human Relations, whose purpose was to further the integration of psychology and the social sciences and relate theory to practice.

In 1947 a publishing company - Tavistock Publications - was founded, which in the longer run succeeded in finding a home in a major publishing house (the Sweet and Maxwell Group) while retaining its own imprint. A joint library was also established with the Clinic that provided the best collection of books and journals then available in London in the psycho- and socio-dynamic fields. This was needed for teaching as well as research purposes. John Rickman, a senior analyst closely associated with the Tavistock, said that there should be no therapy without research and no research without therapy and that the Institute should offer training in all the main areas of its work.
By the time the Institute was separately incorporated there was a staff of eight with Wilson as chairman. Six of the eight had taken part in one or other of the war-time projects. The disciplines included psychology, anthropology, economics, education and mathematics.

Achieving a Working Identity

INDUSTRIAL ACTION RESEARCH

By 1948 the British economy was in serious trouble. The pound had been devalued, productivity was low and there was a scarcity of capital for investment in new technology. The government formed an Industrial Productivity Committee which had a Human Factors Panel. This made grants for research aiming to secure improved productivity through better use of human resources.

The grants were for three years and were administered by the Medical Research Council. The Institute proposed three projects, all of which were accepted. The first focussed on internal relations within a single firm (from the board to the shop floor) with the aim of identifying means of improving cooperation between management and labor and also between levels of management; the second focussed on organizational innovations that could raise productivity; the third pioneered a new form of post-graduate education for field workers in applied social research.

A site for the first project was obtained in the London factories of a light engineering concern (the Glacier Metal Company) whose managing director had a special interest in the social sciences. The project, headed by Elliott Jaques, led to far-reaching changes in the organization and culture of the firm. A novel role was elaborated that enabled process consultation to take place across areas of conflict. Some radically new concepts were formulated such as the use of social structure as a defense against anxiety (Vol. I, 'On the Dynamics of Social Structure'). Jaques's (1951) book, The Changing Culture of a Factory, was the first major publication of the Institute after it became independent. While it was an immense success in the literature, being reprinted many times, no requests were received to continue this kind of work. As Jaques said at the time, the answer from the field was silence.

A component of the second project, under Erie Trist, led to the discovery of self-regulating work groups in a coal mine - the first intimation that a new paradigm of work might be emerging along the lines indicated by the Institute's work with groups. It opened up the study of 'Socio-Technical Systems' which has become world-wide.

The training program for the six industrial fellows was for two years and experience based. All participated in a common project (the Glacier Project) while each took part in another Institute project. To gain direct experience of unconscious factors in group life each was placed in a therapy group. To gain experience of managing their own group life they met regularly with a staff member in attendance. Each had a personal tutor. After the first year they returned to their industries to see what new perceptions they had gained and reported on them to a meeting of Institute staff. They also attended regular staff seminars at which all projects were discussed. This was the first opportunity which the Institute had to apply its methods in training. It was, however, too experience based to receive favor at that time.

CONSULTANCY DEVELOPMENTS
With the ending of the government’s Human Factors Panel, no further research funds were available from British sources. Though Rockefeller help continued, the Institute had to develop its work in the consultancy field and prove that it could pay its way by directly meeting client needs while at the same time furthering social science objectives.

Further work in the Socio-Technical field was arrested in the coal industry, but unexpected circumstances yielded an opportunity in India to work collaboratively with the Calico Mills, a subsidiary of Sarabhai Industries, in Ahmedabad. In view of his experience of the tropics, the MC selected A. K. Rice to go to India as the project officer. He proposed that a group of workers should take charge of a group of looms. The idea was taken up spontaneously by the workers in the automatic loom shed who secured management permission to try out a scheme of their own creation. This led to developments that continued for 25 years showing that the socio-technical concept was applicable in the culture of a very different kind of society.

Unilever had established a working relationship with the Institute immediately after the war. It was now expanding. It needed to recruit and train a large number of high caliber managers. The Chairman, Lord Heyworth, had been interested in the WOSBs and approached the Institute for assistance. The result was the joint development of the Unilever Companies’ Management Development Scheme based on a modification of WOSB methods. This led to a still continuing collaborative relationship, with many ramifications, of which Harold Bridger has been the architect.

With the profusion of new products in the 1950s, advertising agencies and the marketing departments of firms were under pressure to develop new methods for increasing sales. Motivation research had made its appearance but was narrowly conceived. One or two trial projects gave rise to a new concept which brought together Lewinian and psychoanalytic thinking - the pleasure foods region. This consisted of products of little or no nutritional value that were consumed, often in excess, because of their power to afford oral satisfactions which reduced anxiety and relieved stress.

Early studies by Menzies and Trist (1989) concerned ice cream and confectionery. Later studies by Emery (Emery et al., 1968) and Ackoff and Emery (1972) concerned smoking and drinking. The smoking study identified the affect of distress, as formulated by Silvan Tomkins (1962), as a continuing negative state (as distinct from acute anxiety and depression) which required repeated relief such as smoking affords. The drinking study produced a new social theory of drinking behavior that distinguished between social, ‘reparative’ and indulgent drinking, only the last leading to alcoholism.

As regards the consultancy style that developed, the method was adopted of having two Institute staff attend the early meetings. This was both to obtain binocular vision and to show that the relationship was with an organization and not simply with an individual. With only one person, the dangers of transference and counter-transference would have been greater. A project officer was appointed. After the opening stage the second staff member remained largely outside the project so that a more objective appreciation could be made. Other staff were added as required by project assignments.

The funding crisis had proved a blessing in disguise. The Institute had now proved to itself that it could earn a substantial part of its living from private industry. Though it still needed support from foundations and government funding agencies, it was no longer completely dependent on them. It needed these funds to add a research dimension to projects that clients could not be expected to pay for and to cover the costs of writing up the results.
TOWARD AN OPTIMUM BALANCE

In 1954 the Institute succeeded once more in obtaining research funds. A four-year grant enabled the socio-technical studies in the coal industry to be resumed through the government’s Department of Scientific and Industrial Research (DSIR) which administered counterpart US/UK funds that were part of the Marshall Plan. The Nuffield Foundation supported the research component of the family studies program, while the Home Office supported the operational part.

The most difficult funds to obtain were untied funds such as had been provided by the Rockefeller Foundation. As no further grants of this kind were available, a development charge was added to all consultancy projects so that a special reserve could be built up to tide staff over between projects and to enable them to be taken out of the field to write up work that had already been done. It was felt that 15 percent of the Institute’s income should be from untied funds. A much larger proportion - 35 percent - should be sought from foundations or government for specific long-range projects of a primarily research character, though the research would largely be action research. Experience in the consultancy field had now shown that long-range projects with serious social science outcome could be obtained of a kind too unconventional to be supported by foundations or governments. These could account for another 30 percent of income. Experience had also shown the value of short-range projects which could lead into new areas. The remaining 20 percent of income could best be generated by projects of this kind.

Another dimension concerned the sectors of society in which the projects would take place. The aim was to have work going on in more than one sector, though the larger proportion would be in industry. By 1961 there were nine industrial projects and six in other sectors.

Separately categorized were projects related to the Clinic which was regarded solely as a treatment institution by the NHS. As originally intended, however, it was developing large research and training programs. These were financed by foundation grants, especially from the U.S., and were administered by the Institute through what was called the Research and Training Committee (RTC). Some of the Institute’s own activities came into this area. The RTC succeeded in resolving conflicts as to which projects should be put forward for funding.

Among such Institute activities was a program to develop new projective tests and to train people in their use. This led during the 1970s to the creation of the British Society for Projective Psychology through which a large number of clinical psychologists have been trained. New Tavistock tests which were widely adopted included Phillipson’s Object Relations Technique. His book with R.D. Laing (Laing et al., 1966), Interpersonal Perception, opened up fresh ground. A leading part in these developments was played by Theodora Alcock (1963), recognized world-wide as a Rorschach expert, who was kept on by the Institute when she reached the retiring age in the NHS. This path of development represents a pioneer effort that would not otherwise have taken place.

Of crucial importance was the duration of projects. Action research projects concerned with change tend to be long-range as they unfold in unpredictable ways. Projects lasting more than three years were regarded as being in the long-range category, those between 18 months and three years were considered medium-range, and those lasting six to 18 months short-range. A balance was needed between these types of duration. In addition, it was found advantageous to keep going a few very brief exploratory assignments as these sometimes opened up new areas and led to innovative developments which could not be foreseen.

In the industrial sector, Socio-Technical studies continued in the coal industry and then in
industries with advanced technologies, both funded through DSIR. There was also a program of research on labor turnover, absence and sickness (Hill and Trist, 1955: Vol. I, "Temporary Withdrawal from Work"). Under conditions of full employment there was widespread concern about these phenomena. New theory and a new practical approach emerged.

Toward the end of the 1950s problems of quite a new kind began to be brought to the Institute. They arose from changes taking place in the wider contextual environment and led to what has been called the socio-ecological perspective. These problems and the theories and methods to deal with them are encompassed in Volume III. The opportunities to build up this perspective came initially from exploratory projects with Bristol Siddeley Engines, the National Farmers' Union and a Unilever subsidiary in the food industry, all of which were facing major changes in their contextual environments. (These changes were not understood.)

As regards other social sectors, the work in family studies produced a major book by Elizabeth Bott (1957) entitled Family and Social Networks (Vol. I, II Conjugal Roles and Social Networks). This put the concept of network, as distinct from that of group, firmly on the social science map and generated a whole new literature. The Prison Commissioners asked the Tavistock to test the value of a scheme for greatly increasing time spent in "association," which had been successfully tried out in the Norwich local prison. A systematic action research study was carried out of its adaptation in Bristol. The prison officers' union, the inmates, and the staff immediately reporting to the Governor were all involved. This study, which broke new theoretical ground, was carried out by Emery (Vol. I, 'Freedom and Justice Within Walls'). Also during this time Dicks completed studies of the Russian national character at the Harvard Center for Russian Studies (Vol. I, 'Notes on the Russian National Character'). They were a sequel to his work on the German national character during World War II to which he returned in Licensed Mass Murder (Dicks, 1972). These studies established a firm empirical base on which cultural psychology using psychoanalytic findings could develop.

Another development during this period was the creation, in collaboration with the University of Leicester, of a U.K. equivalent to the form of sensitivity training pioneered by the National Training Laboratories for Group Development in the United States. This is still continuing. An overall review of it is given by Miller in Vol. I, 'Experiential Learning in Groups (I/II)' Two other models were developed (Bridger, Vol. I, 'Courses and Working Conferences'; Higgin and Hjelholt, Vol. I, The Psycho-Dynamics of an InterGroup Experience), the idea being to experiment with alternative forms. These are also still evolving.

A basic pattern could now be discerned in the projects of the Institute:

- They were all responses to macro- or meta-problems emerging in the society with which the Institute, in Sommerhoff's (1950) terms, became directly correlated.

- Access to organizations struggling with meta-problems was initially obtained through networks of individuals who had come to know about the Institute's work during World War II. As time went on the initiating individuals became people with whom the Institute had made contact in the post-war period.

- There was not yet a wide appreciation of these emergent meta-problems so that the connections through which the Institute could become directly correlated with them were scarce and fragile. To discover the role of networks in this situation was new learning.
The projects were carried out by interdisciplinary teams with the project officer having a second staff member as his consultant. Later on these teams became joint with internal groups in the client organization. Project reviews took place not so much in Institute seminars as in joint meetings with these internal groups.

Though seminal projects might begin from short-term relations, those with the most significance as regards the advance of basic social scientific knowledge depended on very long relationships being maintained with client organizations or other sponsoring agencies. Change processes take time. They unfold in interactions between the system and its environment in complex ways which are not predictable. One is able to understand the course of a social process only so far as it has manifested itself and then only so far as one is able to stay with it.

Clients actively collaborated with the Institute. The projects were joint enterprises of action research and social learning. No results were published without the agreement of all parties.

Great stress was laid on 'working through' difficulties and conflicts by analogy with the psychoanalytic method. Not that interpretations of a psychoanalytic kind were directly made. Jaques called the process 'social analysis.' No standardized procedures, however, were established. Suitable interpretative languages had to evolve in different projects and some of the methods introduced were manufactured more by the clients than by the Institute.

The aim was to build social science capabilities into organizations that they could then develop by and for themselves.

Some of the innovations were ahead of their time, often by a number of years. There was little recognition of their significance and no short-term diffusion of the practices involved.

New theory was as apt to be generated by research paid for by client organizations as by work paid for by research-funding agencies. One of the functions of the latter was to fund work in which organizations would be willing to collaborate operationally, but for the scientific analysis of which they were not yet willing to pay. There were, of course, other projects which could only be initiated if research funds were available.

The aim was eventually to secure publication at a fully scientific level, but this had sometimes to be delayed for several years and sometimes never emerged at all. Those concerned were often understandably unwilling for work to be made public that described internal processes of a sensitive kind or led to changes the outcome of which could not be assessed for a long time.

This pattern established the Institute's working identity. It expresses what is meant by the social engagement of social science. It treated all projects as opportunities for organizational and personal learning, both for the client and for itself. Though this basic pattern has since undergone much elaboration and improvement, its fundamental character has remained the same.