



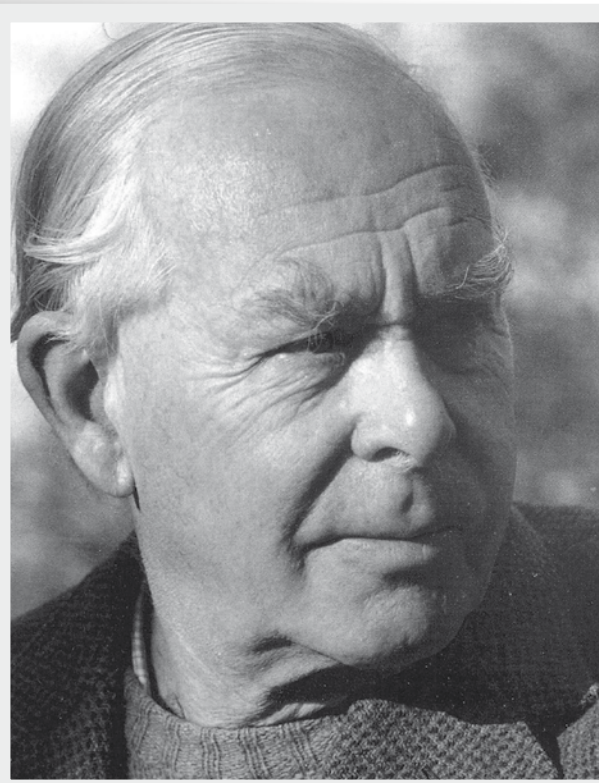
The heart's affections

John Bowlby wrote about 'affectionless characters' for *Nursery World* as his hugely influential work on attachment was first published. The piece, from 1953, is reproduced below

It is 15 years since I first became interested in the problem of the deprived child. I was treating a boy who had been referred to the Child Guidance Clinic where I was working, because he stole, and it seemed to me that his hardboiled, couldn't-care-less attitude to life had been caused by his long separation from his mother in very early childhood, when he had been in hospital. Afterwards I noticed a steady trickle of children coming to the clinic for the same trouble – theft – and having the same sort of character. These children had all been repeatedly punished, but that had had no effect on them. Praise and kindness were equally water off a duck's back.

Their family histories, when I came to trace them out, were many and varied, but one thing stood out with monotonous regularity: most of them had suffered complete and prolonged separation (six months or more) from their mothers or their established foster-mothers during their first five years of life. I called them 'affectionless characters'. Unknown to me, doctors on the other side of the Atlantic were studying the same 'affectionless characters' and finding the same cause for them – prolonged separation from their mothers during the first few years.

Since then, my chief interest has been in further study of these characters and in trying to discover ways of preventing young children from being separated from their mothers, so that the condition need not occur. For, of all crippling conditions, surely the inability to love is the worst of all? It is a worse disability than losing a limb or one's sight, because our whole happiness and the happiness of all those linked to us is based on our ability to give and receive love. At the present time very little is known of how the heart's affection grows. Yet surely we need



John Bowlby is widely considered to be the father of attachment theory

to know about this, above all. Love, hate, disobedience, co-operation – these are the things we all want to know about. That is one reason why I have gone on studying the problems of separation. They open a window on to this rich and rewarding area of knowledge.

We already know quite a bit about sensory and motor development. In America, Professor Arnold Gesell and many others have for some time been studying in this field. They have been concerned with such things as the development of the ability to walk, to eat and to see. These abilities tend to be taken for granted until one of them goes wrong.

Then it is vital to know exactly how they have developed and how they function. Among other discoveries, they found out that babies flourish better when they are fed by a method based on their 'own rhythm of hunger, instead of by the clock' – 'on demand', in other words.

Many of us nowadays work in a different field; in technical jargon, the field of 'object relations'. This concerns our relations with people with whom we are really intimate – our 'love objects'. In childhood this means the relationship of a baby to his mother and of a mother to her baby. This whole area of experience has not yet been systematically studied at first hand. The reason for this is that this relationship flourishes in the home, where there is no one to see and record. As a result, much of the work which has been done in the past on the children in whom I am most interested, the under-three-year-olds, has been done in institutions. These are unnatural conditions for young children, who behave very differently there than when at home. As a result, seriously wrong conclusions have sometimes been reached.

What methods are the most useful for research into 'object relations'? Hitherto the most valuable studies have been clinical ones. Workers in Child Guidance Clinics have collected data about the children (and their parents) whom they are called upon to treat. And psycho-analysts have discovered much from the long, detailed, analytic treatment of individual patients. These methods will continue to be useful, but they must be supplemented by more first-hand studies of what actually happens with ordinary children, made as it is happening. For time blurs the memory and it is hard to remember accurately what really happened many years

ago. We are especially liable to 'forget' things that were very painful and even to fabricate our past to make it seem less disagreeable. Occasionally you will meet an adult who assures you that the six weeks he spent isolated from his parents in a fever hospital at the age of three was a stimulating experience which did him a power of good. For research purposes it is much more reliable to make first-hand observations of a child's experiences and what they mean to him by making them as they occur. We call these observations 'current studies'.

Not very many of these current studies have as yet been made on a systematic basis. In America, Dr Rene Spitz has studied the smiling response of babies. He found that the first real smiles occur at between six and ten weeks, in response to the sight of a human face. Young babies of this age are very indiscriminating, however, and even a dummy head with just two eyes painted on it, moving on the end of a pole, will produce a smile from them. Soon they can discern a real human face from a mask, and by about five months they know who's who. Before that age they respond to the advances of any friendly person, but from about five months onwards Mother is the one who matters and she receives a very special welcome from her baby. Soon he begins to cry at the sight of strangers.

Another current study, this time especially of mothers, has been made in America by Dr Sybille Escalona. She has studied mothers' attitudes to their babies from birth through their first seven months of life. And Dr Kathe Wolf is working at Yale observing the progress of children in their first few years. A similar project is going forward in London under the direction of Mr Terence Moore and sponsored jointly by the Institute of Child Health at Great Ormond Street, and the Institute of Education.

A current study, which the Tavistock Clinic has done as part of its research into the effects of separation, is a film called *A Two-Year-Old Goes to Hospital*, made by Mr James Robertson. The film traces the course of one small child admitted to hospital for a minor operation. It is a sad film, but an illuminating one. No one before, I believe, has sat down in a busy children's ward all day for eight days and watched and recorded what actually happens to one small child. You can see how, as the nurses whisk by, this

little girl, who is mostly quiet, must seem to be settled and reasonably happy. But the camera records her grief, her bewilderment, and her perpetual search for the mother who

has incomprehensibly vanished. Another striking thing the film picks out is the kindness of the nurses and the doctors. Yet their kindness is of little avail to her because no one but her own mother can really comfort and reassure her.

A major difficulty in this sort of research is that, unless you follow up children over the years, you cannot learn how they develop as a result of the early experiences. To do this would be a very ambitious and expensive undertaking.

Although ultimately we must hope that such long-term follow-ups will be done, we think it is nonetheless well worthwhile to do short-term studies to begin with. There are many things to be done. For instance, we can study a number of children from birth onwards and see what happens to them, or alternatively we can study children's responses to a situation known to be upsetting, such as separation. The Tavistock Research Unit is doing the latter, and for the present we have decided to do nothing but current studies. These will be carried on over, perhaps, two or three years, and will certainly be extended if money is available.

Many of the things that are being discovered by research workers in this field have long been known intuitively to mothers. They know how responsive their babies are to their own moods, and the closeness of the bond that links them together. And they realise how necessary their presence is to a small child when he is afraid, or ill, or in strange surroundings, or when danger threatens.

These things are being rediscovered in a scientific way, and as time goes on, this knowledge, which experienced mothers already have, is being broadened and deepened. And only by putting it on a scientific basis can it be made available to the multitude of professional workers who now deal with children and set themselves up to advise parents. Perhaps, indeed, if this research goes favourably, the experts may one day really know more than the experienced mother, who has for long been the victim of much mistaken advice. **nw**

John Bowlby is the author of the reports Maternal Care and Mental Health (1950) and Child Care and the Growth of Love (1953)



Comment

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My very first thought on reading this delightful piece from the start of the history of attachment theory is amazement at just how much of Bowlby's ideas have stood the dual test of time and hard-nosed research.

Attachment as a concept has powered a veritable PhD industry, taking off in just about every imaginable direction over the intervening years. Most significantly, the long-term observational studies that Bowlby wished for here have been done, and are still underway. This has provided a wealth of data that in the main has confirmed Bowlby's initial insights; and not only that – we now know the neurological basis behind how those early experiences with caregivers create the basic foundations upon which the future growth of the mind will be built.

On the other hand, it may jar that Bowlby appears to limit caregiving to the mother, a thought that may appear antiquated to modern readers, but reflected common reality in Western society in the 1950s. It also matches a couple of hundred thousand years of human prehistory. We now know that the 'natural' state of affairs for mothers in our remote ancestral past was most likely to have a set of back-up mums (allomothers) who could be relied upon both every day and in emergencies.

This is also a useful reminder for some that attachment theory is based in psychoanalysis, and there are many psychotherapists and analysts today who continue to contribute in a creative way to attachment theory – most notably in how this lens onto human behaviour can contribute to helping vulnerable and unhappy individuals and families. The names of Arietta Slade, Beatrice Beebe and Peter Fonagy spring to one's notice immediately. Any psychotherapist or counsellor who does not keep attachment theory at the back of their mind is not worth their salt. This was another of Bowlby's early assertions that has stood the test of time. Most importantly, it has led to a whole field of specialised early therapeutic intervention (infant mental health) – although the provision across the country is scarce.