

25

REPRINTED FROM

Case Conference

Vol. 10. No. 4 September, 1963

Reception into Care—its Meaning for all Concerned*

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THIS TITLE HAS been chosen to emphasise that reception into care is an action which is deeply significant to everyone involved in it. Or at least, it should be so and, if it is not, something is seriously wrong. Although there are many variations—long stay, short stay, committal to care, reception with the agreement of the parents and so on, there are problems and feelings common to all the variations and it is these that I wish to stress in this article.

I begin with the assumption that all the participants in this situation are "emotionally involved"; the social workers and residential staff no less than the client, adult or child. Without such involvement there can be no concern and therefore no helping, though we may search for understanding and control of our involvement so that we may help people more.

In a sense, the workers must suffer anew each time a child comes into care—suffer with the child and with his parents. Familiarity must never breed contempt or indifference; we must not seal ourselves off from the experience by denying its impact or meaning for those involved in it. Of course, repeated experience of these situations brings a certain acceptance in the worker, both of the inevitability of pain and of the fact that healthy children can and do make adjustments which enable them to tolerate and even thrive in their new situations. So there is no need to be permanently miserable about it all. But each time this "reception into care" happens, we must remain sensitive to its impact on others and on ourselves; we must seek to observe *freshly* in each case what it means to the individuals concerned.

Let us therefore think about each of the participants in the situation; the child, the central

point; the parents, foster parents or houseparents and the Child Care Officer.

The Child

What child? A child of one or of ten years? A dim child or an intelligent child? In generalising about the impact of this experience on children, it is perhaps helpful to see progress towards maturity as finding a balance between independence and dependence, which is based on a certainty of one's own worth and inner resources, combined with the acceptance of a need for others. Looking back to the baby, we can see the new human being utterly dependent, without certainty of his beginnings and endings, of his identity. In the normal family, the mother, father and others work with the child to bridge that gap between the baby and the man. We can see how very gradually the strong primitive ties of the child to the mother are slackened—watching how the toddler runs in and out of the room a dozen times in an hour to check that mother is there—watching the faces of the 5-year-olds walking into school for the first time. Observing all this and much else in normal, healthy situations, it is hardly necessary to remind ourselves that when we receive into care we are breaking prematurely the lifeline of the developing child. The fact that many of the children received into care have not known this sound, sensitive upbringing simply makes our problem the harder. For deep down the children know it, and have unsatisfied longings. So we need to ask ourselves not simply what *age* is this child but what *stage* is this child, for it may be that if his 2-year-old longings were unsatisfied, the 12-year-old in his behaviour and attitudes, will be in effect pleading for what he missed and we must adjust our treatment of him accordingly.

*Based on talks given to the Children's Departments of Kent and Hertfordshire at their departmental conferences.

Of course the whole design and purpose of the Child Care Service is to mitigate the effects of this "breaking of the life-line" and many improved provisions reflect this. Yet still, as each child comes into care, there is a need to try and get inside the meaning of this experience to him. Kindness and warmth are not enough. There must be awareness of those details of a child's behaviour and speech which may give us the clue to how he is feeling. It is so tragically easy to miss the significant moments which we need to help the child.

A student was working in a children's home. As she got two little girls ready for bed, she noticed that one whose dressing gown was too large needed a cord to pull it together and she borrowed it from the other little girl. She became aware that gloom had descended upon the child whose dressing gown cord had been taken and presently she turned to the child and said something like "I think you're upset because I took the cord" . . . The child burst into tears and said . . . "My mother gave it to me" . . . The illustration is a small undramatic one. Yet how many such moments must pass unnoticed, and the child unhelped; to say "you feel it's something of Mummy you've got here and you miss her" is to acknowledge and accept as natural the grief and maybe the anger of the child. Such feelings unexpressed may fester and poison other relationships. My general impression is that we are, in the Child Care Service, much better now at telling the child what has happened to him but still have a long way to go in talking about it with him. To do this, of course, we need knowledge of the limitations of his understanding; for example, in the toddler or the retarded child—intellectually or emotionally—the concepts of time and distance may be undeveloped so that our soothing comments about "seeing Mummy next week, etc." may have no reality. It is vital, too, to remember the primitive ideas of cause and effect working in the child's mind so that he may see his separation as caused by his own naughtiness.

The need is therefore for intuition and knowledge; intuition which enables us to divine the feelings of the child at a given moment, through our imaginative identification with him; know-

ledge to check the intuition, to give us a framework for our hunches. The recent W.H.O. publication "Maternal Deprivation—A Reassessment of its effects"¹ is a useful addition to our knowledge. Despite the battles that have raged over Bowlby's work and the continuing need for research, this pamphlet shows us clearly that we are right to go on striving to mitigate the effects of this experience for the child. But a recent article in the American Journal *Child Welfare* by John Rose² suggests that more extensive knowledge of child development will reveal how diverse are children's reactions to separation, depending partly on their constitutional capacities for adaptation, partly on the environment prior to separation. In other words, for the social workers there is no substitute for the individual study of each and every child, as he comes into care. One can, however, make one generalisation from the theory about reception into care. If the child, as Bowlby and Robertson suggest, goes through three phases of protest, despair and detachment in his reaction to separation, those who care for him cannot and should not prevent the first or even the second; we cannot deny him his grief; we must stay with him and permit his grief. But by staying there and holding him (whether physically or psychologically) we may prevent him from withdrawing from relationship because there is no safe adult in his world.

Stated simply this may all sound platitudinous. Yet we forget. In a children's home I heard of, a new rota for staff meant that small children were not being woken up by the person who put them to bed. There were anxious questionings from the younger ones: "Will you be here in the morning, miss?" This is such an easy thing to happen, yet it all contributes to the bewilderment of the child. It is essential to ensure that in the casework, administrative and domestic processes concerned with receiving children into care, there is constant revision and development. The Children's Act 1948 sprang from the concern of the Curtis Committee that the care of the deprived child had become somehow sterile and unrelated to the needs of the child. This is the moment, after 15 years, to take care that we do not enter into another phase of insensitivity; even if we do know more of the children's needs

and problems, there are still so many unexplored areas, and still so many unique puzzles in the individual child coming into care.

The Parents

We know that we affect the whole family when we receive into care. So what of the parents? We have to deal with parents at every level of emotional development; so that we may be working with people who behave like adolescents—stormy, rebellious, up against authority; or like 3-year-olds, unable to tolerate much frustration, demanding of attention and affection; or even like babies—this last often the most difficult—people who have never formed the capacity to see others as really separate from themselves, who have never learnt, as the baby does in the first year of life, that there is someone who can be trusted to stand them. But these people are *not* children. They have had a child and that child is part of them. Reception into care breaks the primitive tie which can be seen in all species of animal, in endless variety of pattern. So something is done to the parents, too, by this action, but what their feelings are about it will obviously vary greatly according to the particular circumstances. In a routine short stay reception, intervention of the children's department may be seen simply as an extension of good neighbourliness, providing the foster home which is equivalent to the relatives or friends whom Mrs. Brown might have had in different circumstances. But—she did not have those relatives or friends and every short stay reception is indicative to an extent of a breakdown in normal relationships. About this the parents will have feelings. At the least, it will be the feeling of loneliness and lack of support where the mother has moved away from her wider family circle. We know, for example, that young mothers in new housing estates have used maternity and child welfare clinics more, presumably missing the advice and support of their own mothers and other relatives.

Furthermore, perfectly normal parents will feel that in asking for help, even for a short period, they have revealed their own inadequacy as parents and it will be a part of our service to them to help assuage such feelings. The very fact that they are relatively stable people may

mean that their guilt and anxiety about this is easily admitted—because they have enough confidence in their worth as parents to admit to a doubt. In fact, of course, every Child Care Officer knows that many short-stay applications reveal a history of difficulty within the applicant's family—quarrels with relations, marital discord and so on, which greatly increases the guilt about asking for help.

Social workers work with every imaginable variation of parent from the relatively normal, to those who continually disappoint or let their children down and of whom one must at times in desperation ask: "do they really care at all?" There must be occasions when one meets parents who are so impoverished that it seems they have nothing to give their children. But for every one of those, there are dozens who with help will still have something to offer their children. Now the point of reception into care is a crucial time in establishing the possibility of continuing contact. It is at this time, when we are breaking the biological tie, that so much can be done to alleviate the sense of despair which causes these parents to turn away from their children, make the promises they do not keep, and gradually widen the gaps in the family. There are so many ways in which both the Child Care Officer and the residential worker can help the parent by sincere recognition of the part he has played in the child's life. It is difficult sometimes to perceive the needs of the parent through the smokescreen of defiance or apathy, or the 100 other ways in which we at all times, in more or less degree, hide the reality of what we feel, not only from others but from ourselves. But we need constantly to remind ourselves that to make a success of parenthood, perhaps especially motherhood, is one of the fundamental gratifications of most human beings, through which they achieve a sense of worth and of fulfilment. How many "problem mothers" who have babies annually despite all offers of help to prevent this, do so because for them it is their one achievement? Disillusioning and trying experiences with parents must not blind us therefore to the fact that somehow, somewhere in the vast majority of instances, the parents we work with do care. Our sensitivity to this will inform and illumine

our dealings with them and will help us to cope better with the guilty bags of sweets or the last minute funk which fails the waiting child; the sullen resentment of those who are seen as making a better job of caring for the children. We will recognise, too, that because of these feelings of worthlessness and because of the limited practical and intellectual ability of many of these parents, we may need at the time of reception to play quite a positive rôle in helping them keep contact—by looking up trains and buses, by giving lifts and so on. We do this not simply because "John will be so disappointed if his mother doesn't come" but because in doing it we convey to the parent the value we place on him for the child. Thus the parents' awareness—however tenuous—of our respect for his relationship to his child makes it more possible for him to cope with the deep doubts he may be experiencing.

Foster Parents and House Parents

Now I will turn to those who care for the child day by day, both foster parents and residential workers. Obviously there are many differences not only between those two groups but within them. Indeed one of the most acute problems in child care today turns on the residential workers' need to define their rôle in relation to the children they care for. It is not therefore possible to generalise much about such widely differing situations; one can only bring out certain points which will have validity for some. In this context, I have taken "reception into care" to mean "receiving a child into your home" though I realise it may be after a period elsewhere.

The one generalisation one can make is that everyone has to cope with the impact on himself of a child's distress. There are so many ways in which this distress shows itself—not just straightforward tears. The tears may be difficult enough, our instinct being to divert or cheer up, probably because we ourselves cannot bear to be reminded of the crying child within us. More difficult still, however, may be the child who cannot respond, even with tears. Some of us need quick responses or we begin to feel rejected in turn. Foster mothers will often need help to wait quietly for the moment when a dazed or angry child can

begin to respond. The reactions to the child will always be a personal and intimate one—some for instance can bear an angry child better than a tearful one. Some the other way round. Behind it all there must be acceptance that it is right and proper to be moved by receiving a child because it is such an important thing.

But other feelings will enter in for some. Some may feel guilt that they are indirectly "taking the children away from their parents". The more strongly they long to make these children their own, the more anxious they may be about usurping the parents' rôle. They may seek to find fault with the parents, to prove that they *are* better parents and are justified in their desires to possess the child. Much of the friction which arises, for example over clothing, at the time of reception is attributable to such feelings in foster parents, combined with the parents' guilt.

Sometimes, too, those who care for children must feel resentment against parents who seem to find it so easy to shelve responsibility and hand over their children. Those of us who have struggled hard and perhaps suffered too in our own lives may see others as "getting away with it". I suppose it partly depends on what one means by "getting away with it" bearing in mind the suffering implicit in breaking the tie between parent and child. Nevertheless, more may be roused than just our parental feelings; it may call out a deep sense of the injustice of things—perhaps of injustice to those who are left "holding the baby" as well as injustice to the child. This may seem illogical in that those who care for the child have chosen to do so—but this is an area where strange mixtures of feelings are always present.

In receiving a child into a children's home or foster home, there has to be a readjustment within the existing group. It is natural, therefore, to see the approaching child as an outsider; every group is a mass of subtle interactions. Introduce someone new and you change the pattern. Consciously or unconsciously, the "insiders" are aware of this. The age and stability of the group of children will determine to an extent how the newcomer is seen. Young children will see him as a rival, yet another emotional

mouth to feed. Older children may look forward to a companion; yet in a group of deprived children, there must even in the older child be a fear that the newcomer will mean the available affection will be spread more thinly and the grown-ups may wonder if they have enough to spread over one more. Grown-ups and children alike may fear a threat to the existing stability—perhaps hard won—of the group. The residential staff have to be aware of their feelings about this so that they may the more effectively help the children to receive “the outsider”. The need is particularly acute for the unlucky “special school child” with all his comings and goings. Even in a foster home the introduction of one child is of great significance to the existing group.

The Child Care Officer

We are left then with the Child Care Officers, scurrying hither and thither in motor cars. It is not a pleasant duty to be the “receiver into care”—the person taking an action which results in separation. In the early days, to “rescue” children from unsavoury homes seemed on the surface compatible with the desire—a motivating force in most Child Care Officers—to help the child. More knowledge and experience, however, has greatly increased our doubts about the breaking of family ties; this has added to the emotional impact of an action which cuts across the Child Care Officer’s fundamental concern about parent-child relationships. The Child Care Officers today, therefore, are wiser and sadder at this part of the job. There is anxiety too in the better Child Care Officers that in so many cases there cannot be proper planning to mitigate the distress to the family. Even though many emergencies can be averted, there are times when action is not related to the immediate

emotional needs of the child—when there is no mother at home to say what soft toy Johnny takes to bed, no chance to reassure the mother he is not being “put away”, no opportunity to avert distressing scenes in court. This is, of course, a part of the challenge of every area of the Child Care Officer’s job. She has to have on the one hand her standards of good child care, to know what is right and to fight for it, yet, on the other, to find some acceptance of the limitations of her own powers and of the inevitability of children’s suffering. To find this balance implies an ability to hold on to an imaginative ideal and yet to adapt to the dictates of reality. Reception into care offers many illustrations of this dilemma and the Child Care Officer has to endure and come to terms with a permanent strain.

All this makes the theme of reception into care sound sad, even depressing. It is. But only by recognising the truth about this infinitely complicated process can we begin to lay the foundations for good work. I have only begun here to examine the issues involved.

The theologian Paul Tillich has written:³

“The depth . . . of suffering is the door, the only door, to the depth of truth. The fact is obvious. It is comfortable to live on the surface so long as it remains unshaken. It is painful to break away from it and descend into an unknown ground . . .”

But as each child is received into care we need to look for the truth and the depth of this experience for everyone involved in it. This demands courage and honesty from the professional workers. But it also offers a constructive and positive approach to an action which might otherwise seem destructive and negative

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