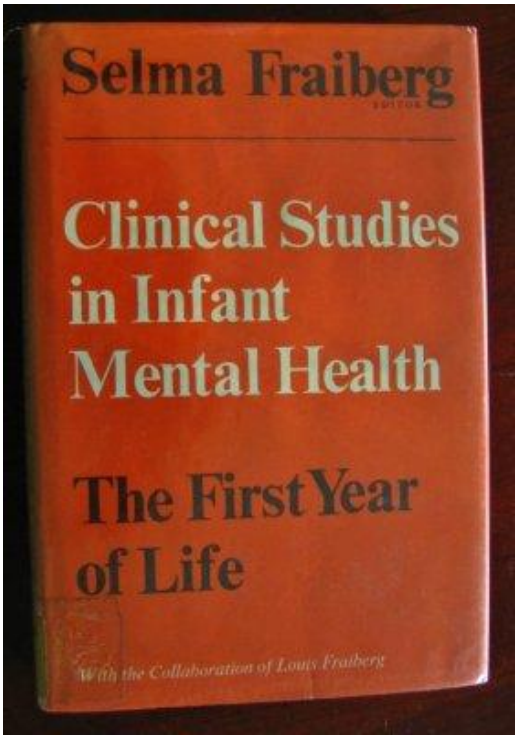
PATRICK TOMLINSON ASSOCIATES

'GHOSTS IN THE NURSERY' – A POWERFUL EXAMPLE OF EMPATHY IN THE WORK WITH A MOTHER AND BABY

PATRICK TOMLINSON (2014)



I recently found a book, which included a paper that had a big impact on my learning in the 1990s. I had lost the book, and after a while, it turned up on Amazon 'used and new'. The paper was by Selma Fraiberg et al. (1980), 'Ghosts in the Nursery: A Psychoanalytic Approach to the Problems of Impaired Infant-Mother Relationships'.

The paper is about therapeutic work with mothers and their babies (sometimes fathers too). The babies were in major peril, bordering on needing to be removed for their safety. The main thrust of the paper is that unresolved issues from the mothers' conflicted pasts were preventing them from parenting their babies. The way forward was to work with the mother's unconscious pain, through empathic understanding – to enable her to be in touch with her feelings. This would then reduce the risk of the mother's history being re-enacted with her infant. It is a great example of why early intervention is so important. Here are a few excerpts that beautifully illustrate the quality of work, with my comments in between.

> In every nursery there are ghosts. They are the visitors from the unremembered past of the parents, the uninvited guests at the christening. Under all favorable circumstances, the unfriendly and unbidden spirits are banished from the nursery and return to their subterranean dwelling place. The baby makes his own imperative claim upon parental love and, in strict analogy with the fairy tales, the bonds of love protect the child and his parents against the intruders, the malevolent ghosts. (p.164)

Interestingly, the use of fairy tales as a way of dealing with potential threats to the parent-child relationship is mentioned. Angus Burnett commented on a previous blog, where I also referred to fairy tales, that sometimes it takes a long time for something that is read to permeate and be understood. I think he is right!

> The methods of treatment which we developed brought together psychoanalysis, developmental psychology, and social work in ways that will be illustrated. The rewards for the babies, for the families, and for us have been very large. (p.167)

I think the integration of different disciplines can be extremely helpful. The paper goes on to discuss one of their cases. At the initial assessment meeting with a four-month-old baby (Mary) and her mother (Mrs. March), Mary became very distressed,

> What do you do to comfort Mary when she cries like this?" Mrs. March murmurs something inaudible. Mrs. Adelson (psychologist) and Mrs. Atreya (assessor) are

> struggling with their own feelings. They are restraining their own wishes to pick up the baby and hold her, to murmur comforting things to her. If they should yield to their own wish, they would do the one thing they feel must not be done. For Mrs. March would then see that another woman could comfort the baby, and she would be confirmed in her own conviction that she was a bad mother. (p.168)

The intuitive thing for the 'professionals' might have been to pick up the baby, but as they point out, interventions like that can be counter-productive. I think this can be what happens when we think that parents need training. The training might help, but it is less likely to if there isn't an understanding of why parenting is difficult for the parent. However, if there aren't major underlying issues, an educational focus may be effective.

> **The Mother's Story (Mrs. March)**
> It was a story of bleak rural poverty, sinister family secrets, psychosis, crime, a tradition of promiscuity in the women, of filth and disorder in the home, and of police and protective agencies in the background making futile uplifting gestures. Mrs. March was the cast-out child of a cast-out family. (p.169)
>
> This led us to our first clinical hypothesis: When this mother's own cries are heard, she will hear her child's cries. (p.172)

I find the hypothesis poignant. Rather than showing or teaching the mother how to parent, the emphasis was on showing her empathy. The first few weeks of work were focused on the aim of hearing Mrs. March's unresolved distress.

> But now, as Mrs. March began to take the permission to remember her feelings, to cry, and to feel the comfort and sympathy of Mrs. Adelson, we saw her make approaches to her baby in the midst of her own outpourings. She would pick up Mary and hold her, at first distant and self-absorbed, but holding her. And then, one day, still within the first month of treatment, Mrs. March, in the midst of an outpouring of grief, picked up Mary, held her very close, and crooned to her in a heartbroken voice. And then it happened again, and several times in the next sessions. An outpouring of old griefs and a gathering of the baby into her arms. The ghosts in the baby's nursery were beginning to leave. (p.173)

That sounds like an amazing moment, when an intervention that has been so challenging begins to show a sign of working.

> Within four months, Mary became a healthy, more responsive, often joyful baby. At our 10-month testing, objective assessment showed her to be age-appropriate in her focused attachment to her mother, in her preferential smiling and vocalization to mother and father, in her seeking of her mother for comfort and safety. She was at age level on the Bayley mental scale. She was still slow in motor performance, but within the normal range. Mrs. March had become a responsive and a proud mother. (p.174)

When having to emotionally contain so much anxiety, there can be little more rewarding than seeing outcomes like this. And being able to intervene so early is valuable beyond words.

> For us, the story must end here. The family has moved on. Mr. March begins a new career with very good prospects in a new community that provides comfortable housing and a warm welcome. The external circumstances look promising. More important, the family has grown closer; abandonment is not a central concern. One of the most hopeful signs was Mrs. March's steady ability to handle the stress of the uncertainty that preceded the job choice. And, as termination approached, she could openly acknowledge her sadness. Looking ahead, she expressed her wish for Mary: 'I hope that she'll grow up to be happier than me. I hope that she will have a better marriage and children who she'll love'. For herself, she asked that we remember her as 'someone who had changed'. (p.178)

The paper, which also includes other case studies, concludes with this sentence,

> In each case, when our therapy has brought the parent to remember and re-experience his childhood anxiety and suffering, the ghosts depart, and the afflicted parents become the protectors of their children against the repetition of their own conflicted past. (p.196)

Also using the metaphor of ghosts, Bessel van der Kolk et al. (2007, p.429) emphasize the importance of integrating a personal narrative of the trauma,

> Many traumatized people continue to be haunted by "them" (unintegrated traumatic memories), without an "I" to put these feelings and perceptions in perspective. Treatment at this stage consists of translating the nonverbal dissociated realm of traumatic memory into secondary mental processes in which words can provide meaning and form, thereby facilitating the transformation of traumatic memory into narrative memory. In other words, what is currently implicit memory needs to be made explicit, autobiographical memory.

In many ways, the same principle applies to therapeutic work with traumatized children. They need to integrate their experiences, including the feelings involved, as part of their history. As well as enabling the child to move on from the past and live positively in the present, it also greatly improves the possibility that the cycle of trauma will not be passed on to future generations.

Having read 'Ghosts from the Nursery' again after so long, I am reassured to discover that it is just as impactful as it was the first time. It is a very moving and excellent example of the use of empathy.

Sadly, Selma Fraiberg died just a year after this book was published. A few comments about her by Constance Brown, https://jwa.org/encyclopedia/article/fraiberg-selma

"Selma Fraiberg was a psychoanalyst, author, and pioneer in the field of infant psychiatry. A woman and a social worker in a profession dominated by male physicians, Fraiberg rose to prominence because of her brilliance, originality, and dedication. She devoted her life to understanding the developmental needs of infants, to creating programs that promote infant mental health, and to reaching parents and policymakers through clear, persuasive prose…. Fraiberg accomplished enough in her life to fill three careers…. During this last phase of her career, Fraiberg started the Child Development Project at the University of Michigan, which served troubled families, trained clinicians, and developed a treatment model that has been widely replicated…. Selma was feisty, shy, and intellectual…. She was known to colleagues and students as brilliant, demanding, fiercely principled, difficult, and inspiring. Those close to her knew that she was shy and self-conscious, and that public exposure caused her strain... In 1981, she received the Dolley Madison Award in recognition of her critical role in the field of infant mental health."

This comment in response to Constance Brown, who wrote about Selma Fraiberg, says a lot!

Dear Descendants of Selma Fraiberg,
I want to let you know what a critical impact Selma Fraiberg's book The Magic Years made for me as a mother, as a student of Early Child Development, and as a human being. I had a very difficult childhood with very little genuine love and desperately wanted to create my own family. I intentionally studied all I could at UC Berkeley on Child Development and Education because I discovered I adored working with children but did not dare have my own precious children unless I understood thoroughly the needs of children, the critical early stages especially. Her work, The Magic Years, distilled all I learned about in my undergraduate years in a very touching way, showing me that given a little understanding and love and guidance, children will develop just fine and in fact will develop to be kind, loving beings on their own. I saved my copy all these years and am just so sorry I never wrote her myself to tell her the impact she made, not just on giving me the courage to be a mother, way different from my own mother, but in understanding that I was just as precious as all those children quoted in example after example in her wonderful book.

We all have our Magic Years, no matter what stage we are in. Your mother's book gave me self-love and self-acceptance of a kind and loving person dedicated to children despite all odds. So, thank you, Selma Fraiberg, and thank you to her descendants. Please, please, make her book

available again today. And a word of advice: if you can find anyone to write an adaptation in simpler, more practical terms as a manual for the everyday parent, it would go a long, long way in teaching today's young parent about everyday kindness, acceptance, and understanding in raising their children they themselves chose to bring into this world. Really, it would make an incredible difference. I just know that as wonderful as The Magic Years is, many young parents just need a distilled version in some form. Please consider this for today's world to become a little kinder.

Thank you so much. Would you do me the kindness of responding to my comments with an email letting me know you have sent this on to the appropriate person? Thank you so much!

Sincerely, Janette Schulte

References

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PATRICK TOMLINSON ASSOCIATES
DEVELOPING PEOPLE AND ORGANIZATIONS

PATRICK TOMLINSON BRIEF BIO: The primary goal of Patrick's work is the development of people and organizations. Throughout his career, he has identified development as the driving force related to positive outcomes for everyone, service users, professionals, and organizations.

His experience spans from 1985 in the field of trauma and attachment-informed services. He began as a residential care worker in a therapeutic community for young people and has experience as a team leader, senior manager, Director, CEO, consultant, and mentor. He is the author/co-author/editor of numerous papers and books. He is a qualified clinician, strategic leader, and manager. Working in several countries, Patrick has helped develop therapeutic models that have gained national and international recognition. In 2008, he created Patrick Tomlinson Associates to provide services focused on development for people and organizations. The following services are provided,

- Therapeutic Model Development
- Developmental Mentoring, Consultancy, & Clinical Supervision
- Character Assessment & Selection Tool (CAST): for Personal & Professional Development, & Staff Selection
- Non-Executive Director

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