

CHAPTER 6

RESEARCH INTO EFFECTS OF DEPRIVATION

It is now demonstrated that maternal care in infancy and early childhood is essential for mental health. This is a discovery comparable in magnitude to that of the role of vitamins in physical health, and of far-reaching significance for programmes of preventive mental hygiene. On this new understanding social measures of great consequence for the future will be based. These measures will only be wisely planned, however, if knowledge of what is essential and what is not is progressively increased.

Not only is further research in the field necessary to guide immediate preventive measures, but it promises also to cast light on some of the fundamental problems of personality development, on the understanding of which all the social sciences depend. Personality growth is the result of an interaction between the growing organism and other human beings. In some way the organism assimilates features of its social environment, and in so doing grows increasingly like its culture medium, though it is ever an unique synthesis of the social material of which it is made. How this process of psychic assimilation proceeds is not understood. Deprivation in infancy and early childhood is an experience which deranges it to a severe degree, and in the history of medicine it has often been the study of gross dysfunction which has most clearly illuminated the nature of the function itself. It may well be that in studying these grave derangements of the assimilatory process a clearer light will be thrown on this central process of personality growth.

Whether research in this field is undertaken with a view to promoting better preventive measures or greater fundamental understanding, henceforward it should be regarded as unnecessary to spend time demonstrating the validity of the general proposition respecting the adverse effects of deprivation. Instead, the research worker should be encouraged to move on, both to the study of basic processes and to the identification and unravelling of the effects of the many variables operating. Though aware of some of them—age and emotional development of the child, length of deprivation, degree of deprivation, relations with mother-figure before and after deprivation—there are, no doubt, some of which we are still ignorant. Matters of immediate practical significance on which information is needed are the lengths of the safety margin (*a*) during which deprivation can, if absolutely necessary, be permitted, and (*b*) within which there is

time to make good damage already done. On the theoretical side, as the previous chapter has shown, investigators are still far from clear on the principles of psychic metabolism, without which their mode of action cannot be understood. Working hypotheses, however, can be erected and these should be elaborated in some detail so that clear formulations are made which can be tested. There is no place for systematic research unguided by explicit hypotheses.

In addition to the problems of theoretical clarification, there are immense problems of execution. In the first place, it is not possible cold-bloodedly to arrange for children to be deprived of mothering at various ages and for various periods. To a high degree the investigator is dependent on experiments of opportunity, in which groups of children who for one reason or another are being or have been subject to this experience are discovered and studied. Ideally, to isolate the effects of deprivation, all other factors known to be emotionally disturbing would be absent from the cases. Thus the ideal sample would consist of healthy children of good parentage, who, so long as they were with their mothers, would have enjoyed good relationships with them. The reason for separation, moreover, would not be traumatic in itself, while the conditions obtaining during separation would be carefully regulated. In practice few of these ideal research conditions hold. Deprived children are often sick and many are born of unstable or defective parents. Family relationships while they last leave much to be desired and the home is commonly broken because of destitution, neglect, or death. Many of the children are illegitimate and unwanted. Psychological conditions in institutions or foster-homes cannot easily be arranged to suit the research worker.

A further major difficulty is that of access. Detailed studies of infants in their homes and of their relations to their mothers require a degree of intimate contact not easily attained by the professional observer. Even when these infants are in institutions, the susceptibilities of the workers who are caring for them may impede objective study. Finally, parents who are anxious and guilty about their children's later behaviour may resent further inquiry.

There are no simple ways round these difficulties. Samples can be more carefully selected than has sometimes been the case in the past, however. Now that so much is understood regarding the theory of small samples, the large heterogeneous sample with many gaps in its data must be regarded as a thing of the past. No amount of statistical analysis will remedy data which are inadequate and inaccurate. The small, homogeneous, and carefully matched samples of the kind studied by Goldfarb are far more likely to give unequivocal answers. Each sample can then be selected from all the deprived children available to conform to some extent to certain defined criteria. It will be possible, for instance, to avoid children of bad heredity or those who have had unhappy experiences in their homes. The age at

which a child first experiences deprivation can be held constant, though it may be necessary to wait some time before finding sufficient cases to fulfil these criteria and to cover all age-groups. To regulate the child's experiences while in an institution is more difficult, though, in the main, it will be possible to select places where insightful attempts are being made to provide substitute care and others where such attempts are not being made. Other variables difficult to control are the length of time the child is in an institution and what happens to him afterwards. Suffice it to say that only planned investigations of large numbers of very carefully selected cases are likely to unravel the influences of all these variables.

The problem of access, to permit the observation of relevant data, is present in all psychological studies of human beings which are not content with superficial description and, instead, seek to understand motivation, since people habitually hide many of their feelings especially those about which they are anxious and guilty. The only key yet found to unlock these secrets is the therapeutic approach, in which the research worker holds himself in readiness to help his subjects should they wish it. Naturally many will not respond, but others, sensing that the research worker is ready to aid them as well as to study them, will give him opportunities for both.

Fortunately, the problems both of sampling and of access are absent if we use animals as our experimental subjects, as Liddell is doing. At present he is studying goats, but it might be that dogs would be more rewarding subjects, since much of a practical kind is already known about their social development. For instance, it is a commonplace that a sporting dog must be trained by one master who must feed him himself, and that there are difficulties of transfer to a new master. Starting with the knowledge already available, it should be relatively easy to construct a series of experiments and perhaps gain insights which could then be tested with human beings.

A research team working on these problems, whether with animals or humans and preferably with both, needs to be equipped with many different techniques of observation, since each technique, whatever its value, has strict limitations. Only by ensuring that data derived from one source are complemented by data derived from others is all the necessary information likely to be obtained. It is especially important to combine the experimental, the psychometric, and the clinical approaches, since each can give indispensable data not provided by the others. In the past there has been a deplorable tendency for the experimentalist to despise the clinician's lack of precision and the clinician to reciprocate with contempt for the experimentalist's lack of insight into human nature. Each has stoutly maintained that his own method was the one true way to knowledge. These claims are absurd : each method is indispensable. It is the clinician who usually has the earliest insights, defines the problem, and formulates the first hypotheses. By the

detailed minute study of the feelings and motivations of his patients, and the complicated intellectual and emotional repercussions to which they give rise, the clinical worker provides information regarding the relations of psychic and environmental forces which can be obtained in no other way. This is the first sketch-map, which, though erroneous in many particulars, gives an invaluable overall picture of the new territory. (In elucidating the adverse effects of maternal deprivation it is no accident that psycho-analysts and clinical workers closely associated with them played a leading part.) The clinician is rarely in a position, however, or scientifically qualified, to test the hypotheses he has advanced : the next step must be done in more-controlled conditions by those with other skills. The planned experimental and psychometric study of statistically significant samples of subjects gives information regarding the validity of hypotheses which no amount of clinical work can give. Similarly, systematic work will in its turn lead to hypotheses, some of which can be profitably studied in a clinical setting before plans to verify them are elaborated. This combination of clinical and experimental techniques, in which work of each kind is designed to complement and promote work of the other, is the way to future progress. But it means that each type of worker must learn to understand the merits of the others' skills and the limitations of his own. Surveys and experimental work must be planned and executed using all the insight the clinician can supply. Equally, the clinician must select for study just those cases which the statistically trained worker indicates are likely to give most understanding of the problems selected for study, and must also concern himself with the recording and reliability of data, which has not been his strongest point in the past. Only by working together in a common team will the experimental psychologist, the statistician, the psycho-analyst, the psychometrist, and those with other trainings learn to respect each other and to mobilize to the greatest advantage all the skills available.

In addition to utilizing all the psychological techniques, there is good reason to include techniques of physiological measurement. The probable value of the Wetzel Grid has already been noted. Electro-encephalographic studies may also be of great interest. For instance, it is known that there is a similarity in the (abnormal) electro-encephalograms of aggressive psychopathic adolescents and those of normal young children between the ages of three and five. Though it is commonly assumed that these abnormal cerebral rhythms are due to a physical factor, as for instance genetic defect or birth injury, there are no data to support such an assumption and they may prove to be psychogenic in origin and in the nature of a fixation at an earlier level of functioning. If further inquiries proved this to be the case, a valuable link would have been made between psychopathology and neurophysiology.

Clearly then here, in the embryology of personality, is a field rich and ripe for research and one to be exploited to the full before increasingly

effective preventive measures have robbed the research worker of his clinical material. The growth of an individual proceeds by differentiation "from large diffuse unfocused responses to goal determined, limited, precise and consequently efficient modes of response" (Goldfarb⁶²). In his search for clearer understanding and more precisely adapted action, the scientist proceeds similarly, moving from the perception of certain general and gross relationships to a finer and finer appreciation of the nature of the forces at work and of their influence on each other. In the field of mental health and its relation to parental care investigators have so far done no more than perceive the gross relationships. It is for workers in the coming half-century to refine perceptions, to elucidate complexities, and to give the power to prevent mental illness.
