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An exploratory study of the mother-child relationship during the visiting period

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AN EXPLORATORY STUDY
OF THE
MOTHER-CHILD RELATIONSHIP
DURING (THE)
VISITING PERIOD

by

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(B. S. Nursing, Boston University, 1955)

A field study submitted in partial fulfillment
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CHAPTER I

INTRODUCTION

A healthy personality structure is thought to depend upon the experiences which a child has with his mother during the early formative years of life. Any situation which interferes with the primary mother-child relationship has been found to adversely affect the child's development. Separation of the child from the mother is considered a major factor in creating a disruption of this relationship.

Many children under five years of age have their first experience in separation from their parents, especially the mother, through the necessity of hospitalization. This is a vulnerable period in their development, since the child's energy is directed toward mastery of the processes of growth and development. His emotional and physical responses are primitive when he reacts to stress situations and tries to cope with them in a constructive manner.

The visiting period is one situation in the hospital to which the child reacts. Feelings the child has experienced in the hospital as a result of being left there by the parents are recalled when he again comes in contact with his parents during the visiting period. He responds to these feelings and expresses them in a variety of ways.

Statement of the Problem

The purpose of this study is to determine:

1. the interaction between the mother and her child during the beginning of the visit,
2. what subjects are discussed by the mother and child during the visiting period,
3. how the mother explains the necessity of having to leave at the end of the visiting period, and the manner in which leaving her child is accomplished,
4. how the child reacts to his mother leaving him at the end of the visiting period,
5. how the nurse might be of assistance in supporting the mother and her child during the visiting period.

Importance of the Problem

Knowledge of the areas of difficulty which mothers experience when they are with their child in the hospital, and the child's response during the visiting period, can be of value in identifying areas in which the nurse can give help and provide support to both mother and child.

Scope and Limitations

I became interested in conducting this study as a result of my field experience, where I had the opportunity to observe the effects of long term hospitalization and infre-

quent visiting by the parents, upon a child who had been ill for several months.

The study was conducted in the pediatric unit of a large general hospital in eastern Massachusetts. Data was collected on four of the eight pediatric floors of the unit. The visiting hours in the pediatric unit are from 2:00 P.M. to 7:00 P.M. daily.

Ten children, ranging from three to five years of age, were observed with their mothers during the visiting period. Each child was observed for ten minutes after the mother terminated her visit. Excluded from the sample were children who were severely ill, mentally retarded, emotionally disturbed, or who had been hospitalized longer than four days at the time the study was performed.

Definition of Terms

Hospitalism refers to the deteriorated condition of a child's physical and mental capacity, as a result of being confined in the emotionally arid atmosphere of an institution for a long period of time.

Hospitalization refers to the temporary placement of a child in a hospital for necessary treatment and nursing care.

Maternal deprivation refers to the loss of loving care and security which a child would ordinarily receive from his biological mother or mother-substitute.

Preview of Methodology

Unstructured, nonparticipant observation was the

method used for collecting the data. Observations were recorded at the time the interaction occurred between the mother and her child. The child was observed for ten minutes after the mother terminated her visit. The writer was present a short distance away from the subjects being observed.

Sequence of Presentation

Chapter II contains the theoretical framework of the study, and a review of the literature.

Chapter III describes the methodology, the selection and description of the sample, the tool used in collecting the data, and the procurement of the data.

Chapter IV contains a presentation and discussion of the data obtained.

Chapter V contains the summary, conclusions, and recommendations.

CHAPTER II

THEORETICAL FRAMEWORK OF THE STUDY

Review of the Literature

"En la Casa de Ninos Expositos el nino se va poniendo triste y muchos de ellos mueren de tristeza."¹

"In the House of Foundling Children the child keeps on being sad and many of them die due to sadness."²

The newborn infant is a helpless, dependent individual, who needs a nurturing kind of care that will help him to adapt to the outer world "with a minimum amount of discomfort and a maximum amount of pleasure."³ This kind of nurturing care in our culture is usually provided by the mother during the child's formative years. The fulfillment of this kind of care is of the utmost importance to the child's physical well-being and to his personality development.

¹Rene A Spitz, "Hospitalism: An Inquiry into the Genesis of Psychiatric Conditions of Early Childhood (I)," The Psychoanalytic Study of the Child (New York: International Universities Press, Inc., 1945), I, p. 53, citing the diary of a Spanish bishop, 1760.

²Translated by Mrs. Rita de Osorio of Puerto Rico, candidate for the degree of Master of Science in Nursing, Boston University School of Nursing, 1962.

³Florence G. Blake, The Child, His Parents and the Nurse (Philadelphia: J.P. Lippincott Co., 1954), p. 54.

During infancy and early childhood, the individual is governed completely by his inner drives. Through his relationship with the mother, he progressively develops the ability to tolerate limited amounts of discomfort and frustration. Through recognizing and meeting his needs, the mother assists her child in maintaining a harmonious balance between himself and the outer environment.

During the first year of life, the mother is the child's key to the social world. The interaction between the mother and child is one which is mutually satisfying to each member in the relationship, and serves as the basis for the child's future relations with others. Caplan views the mother-child interchange as being of a circular nature, in which fulfillment of the needs of both individuals frees the energy of each for their respective development and functioning. For the child, fulfillment of his needs releases the energy required for growth and adaptation. For the mother, fulfillment of her motherly role provides her with the energy needed to provide further care and emotional satisfaction for her child, and to find satisfaction in doing so.

A healthy mother-child relationship involves reciprocal gratification of mother and child, and the mother certainly satisfies her own needs to be motherly, protecting, nurturing, and comforting when she relates to her baby. The goal of these needs, however, is the baby's welfare, and the mother's gratification is consequent upon the

satisfaction of the baby's wishes.⁴

This pattern of mother-child interaction is in a state of continuous change, primarily due to the passing of the child through successive stages of development. As the child approaches the second half of the first year of his life, he shows signs of recognizing the nurturing person and begins to display signs of love for that person. This gives evidence that the child perceives someone apart from himself; someone who has provided for his comfort and pleasure, and that he has reached an important phase in his development. Caplan draws attention to the structure of the word mother, which contains the word "other", as having significance for this relationship.

She is the first "other" in his awareness, through whom he makes the first steps in developing a recognition of his own self identity, the basis for all subsequent personality development.⁵

After the child reaches this phase, there is a gradual process of separation from his mother, as he becomes increasingly independent in his physical and psychological development. In this situation, Allen considers separation to be a normal and necessary process.⁶ The child moves away from an

⁴Gerald Caplan, "The Roots of Human Relationships: Mother and Infant," The Healthy Child: His Physical, Psychological, and Social Development, ed. Harold C. Stuart, and Dane Prugh (Cambridge, Massachusetts: Harvard University Press, 1960), pp. 211-12.

⁵Ibid., 209.

⁶Frederick H. Allen, "Mother-Child Separation--Process or Event," Emotional Problems of Early Childhood, ed. Gerald Caplan (New York: Basic Books, Inc., 1955), p. 329.

almost constant relationship with his mother to form new relationships with father and siblings in the family constellation, and on to other individuals in the larger community.

In this changing relationship between mother and child, evidence of physical separation becomes more apparent than the slower evolving emotional autonomy which must pass through many phases before the child can function as a completely independent individual.

As a result of the maturational spurt during the second year of life, the normal toddler achieves relatively advanced physical autonomy. . . . Locomotion enables the child to separate physically-to move away-from the mother, although he may be emotionally quite unprepared to do so. The two-year-old becomes aware of his separateness in many other ways as well. He enjoys his independence, and perseveres with great tenacity in his attempts at mastery.⁷

In contrast to this normal process of physical and psychological separation of mother and child in which the two members in the relationship are usually in contact with each other, is that state of separation in which the child is prematurely removed from the biological mother and is deprived of her ministrations and stimulation.

Much of what is known about the normal relationships between mother and child, and the importance of the maternal figure in motivating the development of the child's physical,

⁷Margaret Schoenberger Mahler, "On Sadness and Grief in Infancy and Childhood: Loss and Restoration of the Symbiotic Love Object," The Psychoanalytic Study of the Child (New York: International Universities Press, Inc., 1961), XVI, p. 335.

psychological, and social abilities, has been discovered by studying children who have been deprived of maternal care in their early, formative years. Separation of the child from the mother can be caused by a variety of factors, and may occur for varying periods of time. Among the conditions which may bring about this event, can be cited chronic illness, emotional and mental inadequacy, death, desertion, or admission to a hospital for varying lengths of time.

The ill effects of maternal deprivation upon the child's future development vary with the degree of separation, its length, and the developmental phase of growth which the child is in at the time of the experience.⁸ The ill effects of deprivation of maternal care on institutionalized children have been found to produce adverse changes in their physical, psychological, social, and emotional development.

Evidence that the deprivation of mother love in early childhood can have a far-reaching effect on the mental health and personality development of human beings comes from many sources.⁹

From his own observations, Bakwin gives a detailed account of the ill effects of deprivation on the physical health of infants.

Infants under six months of age who have been in an institution for some time present a well-defined picture. The outstanding features are

⁸ John Bowlby, Maternal Care and Mental Health, Monograph Series No. 2 (Geneva, Switzerland: World Health Organization, 1952), p. 16.

⁹Ibid., 15.

listlessness, emaciation and pallor, relative immobility, quietness, unresponsiveness to stimuli like a smile or a coo, indifferent appetite, failure to gain weight properly despite the ingestion of diets, which in the home, are entirely adequate, frequent stools, poor sleep, appearance of unhappiness, proneness to febrile episodes, absence of sucking habits.¹⁰

In another article, he describes the remarkable changes in the condition of the infant once he is restored to his mother.

The rapidity with which the symptoms of hospitalism begin to disappear when an afflicted baby is placed in a good home is amazing. It is convincing evidence of the etiologic relation of the emotionally arid atmosphere of the hospital to the symptoms. The baby promptly becomes more animated and responsive; fever, if present in the hospital, disappears in twenty-four to seventy-two hours; there is a gain in weight and improvement in color.¹¹

Spitz and Wolf have confirmed by experiment that maternally deprived babies fail to respond with a smile at the sight of a human face.¹²

Infants kept in an institutional environment and tested during their first year of life with the Hetzer-Wolf baby tests, have been found to have shown such severe psychiatric

¹⁰Harry Bakwin, "Emotional Deprivation in Infants," Journal of Pediatrics, XXXV (October, 1949), p. 512.

¹¹Harry Bakwin, "Loneliness in Infants," American Journal of Diseases of Children, LXIII (January, 1942), p. 30.

¹²Rene A. Spitz and K.M. Wolf, "The Smiling Response: A Contribution to the Autogenesis of Social Reactions," Genetic Psychology Monographs, XXXIV (July-December, 1946), pp. 57-125.

disturbances that they either could not be tested, (in this instance Durfee and Wolf's study of infants institutionalized more than eight months during the first year),¹³ or their developmental quotient dropped catastrophically between the ages of four and twelve months. The drop in the developmental quotient was found to have occurred in the first six months of life (Spitz and Wolf).¹⁴

The aim of the latter authors' research was to isolate and investigate the pathogenic factors responsible for the favorable or unfavorable outcome of infantile development. Their findings were in agreement and lent support to the conclusions reported in the study conducted by Durfee and Wolf in 1933.

These major findings were:

1. Lack of stimulation. . . . Even the most destitute of homes offers more mental stimulation than the usual hospital ward.
2. The presence or absence of the child's mother. Stimulation by the mother will always be more intensive than even the best trained nursery personnel.¹⁵

Not all aspects of development are equally affected;

¹³John Bowlby, Maternal Care and Mental Health (Geneva, Switzerland: World Health Organization, 1952), p. 16 citing Z. Kinderforsch, XLII (1933), p. 273.

¹⁴Rene A. Spitz, "Hospitalism: An Inquiry into the Genesis of Psychiatric Conditions in Early Childhood (I)," The Psychoanalytic Study of the Child (New York: International Universities Press, Inc., 1945), I, p. 53.

¹⁵Ibid., pp. 54-55.

the most affected is speech. The ability to express has been found to be more retarded than the ability to understand. Improvement in speech has been seen to occur in a remarkable manner. Burlingham and Freud in their observations during their work at the Hampstead Nursery, reported that:

When children are home on visits, . . . they sometimes gain in speech in 1 or 2 weeks what they would have taken three months to gain in the nursery.¹⁶

The least affected is the area of neuromuscular development, which includes walking, and manual dexterity. Retardation in social response is moderate, and lies between retardation in motor development and speech.¹⁷

The effects of maternal deprivation upon intellectual and emotional development have also received intensive investigation. Goldfarb examined adolescent children who had been institutionalized in their early years, in contrast to adolescents who had experienced foster home placement, via Rorschach examination. He concluded that:

The intellectual attainments of the institution child tend to be lower. He reasons less well and is particularly deficient in ability to perceive relationships and to act in accord with the abstract attitude. . . . the particular intellectual and emotional trends of the institution children are inseparable. . . . All appear to reflect a basic syndrome of traits that permeates the total personality . . . The institution children tend to be:

¹⁶Anna Freud and Dorothy Burlingham, Infants Without Families (New York: International Universities Press, Inc., 1944), p. 19.

¹⁷Bowlby, p. 20.

1. less mature, less controlled, less differentiated, more impoverished.

2. more passive and apathetic, less ambitious, and less capable of adjustment related to conscious intention or goal.

These traits bear a dynamic relationship to the depriving influences of the early institutionalization experience up to the age of three years.¹⁸

There are critical periods in the developmental process when the child needs to be in close proximity with his mother. Without the presence of the mother during these phases, the child experiences stress reactions, and anxiety and tension result. The two phases which bear a relationship to this study are:

The phase during which he needs her as an ever-present companion; this usually continues until about his third birthday.

The phase during which he is becoming able to maintain a relationship with her in absentia. During the fourth and fifth years such a relationship can only be maintained in favorable circumstances and for a few days or weeks at a time.¹⁹

Hospitalization and illness certainly do not constitute favorable circumstances. These factors, coupled with the existing immature mental structure, make it difficult for the child to cope with the stress which ensues.

It is the results of these findings and of many other research projects conducted by representatives from the fields of psychology, and sociology, which have led hospital admin-

¹⁸William Goldfarb, "Effects of Early Institution Care on Adolescent Personality: Rorschach Data," American Journal of Orthopsychiatry, XIV (July, 1944), p. 446.

¹⁹Bowlby, p. 53.

istrators, physicians, and nurses to look at hospital practice in relation to the care of the ill child in a hospital setting. Before the advent of antibiotics, newer medications and treatment procedures, children were hospitalized for long periods of time. In an effort to reduce the incidence of infection in these children, visiting by parents was markedly restricted or non-existent. Thus the child was separated from the very persons he needed most during a critical experience in his life. The approach to the care of the child in a hospital setting was limited to a consideration of his physical ailments, and the treatments utilized to aid in his recovery. There was little or no consideration of the emotional factors relating to illness, nor of the importance of the parents to the child when he was ill.

The hospital setting, in contrast to that in public health, did not lend itself to any consideration of family-child relationship. . . . When a child was ill, attention was focused on his treatment and recovery. There was no place in the picture for parents; they were allowed to visit their children only briefly, if at all. The child's behavior during and after parents' visits was interpreted to mean "he is better off without them." The child almost literally became the property of the hospital.²⁰

The trend toward showing consideration for the parents' and the child's need for being together when the latter was hospitalized, began to develop during the late years

²⁰Imogene D. Cahill, "The Teaching of Maternal and Child Nursing, Part I: What is Maternal and Child Nursing?", Nursing Outlook, X, No. 1 (January, 1962), p. 38.

of 1940, and has gained in impetus.²¹ Much research and experimentation relating to liberalized visiting hours has been done since that time, and has been published in leading nursing, medical and hospital administration journals. Visiting hours now are longer and more frequent. Rooming-in plans for the mother to be with her child have been instituted in some pediatric departments. Home care plans, which have as their objective the return of the sick child to his home as soon as he is well enough to be cared for there, have been initiated by some forward-looking hospitals. Members of the hospital staff provide the necessary medical and nursing services for the convalescent child at home.^{22,23}

Although liberal visiting hours are common in most pediatric departments, and the length of a child's hospitalization is much shorter than in previous years, the state of being ill remains a stress situation for most children. It is difficult for a child under five years of age to understand the nature of his illness. The illness places a restriction upon his usual activities and prevents him from

²¹Ruth Frank, "Parents and the Pediatric Nurse," American Journal of Nursing, LII (January, 1952), p. 76.

²²Martin Cherkasky, "Montifiore Hospital Home Care Program," American Journal of Public Health, XXXIX (February, 1949), pp. 163-6.

²³Morris H. Kreeger, "What Happens When the Hospital Goes Home," The Modern Hospital, XXCII (January, 1954), pp. 54-7.

experiencing any pleasurable activity. There are additional tasks which the child must master when hospitalized. These include the need to adapt to a strange environment in which he meets new and unknown persons, and faces new and terrifying procedures. There are many factors which influence the child's ability to handle these stressful situations. Some of them include the age of the child and the level of his personality development, the ways in which he dealt with new and difficult situations in the past, the nature of his illness, the nature of the required medical and surgical procedures, and the nature of the hospital setting, its policies and practices.²⁴

However, research studies relating to hospitalization of children reveal that the experience does not always have a negative effect on the child's development. In some children, illness and hospitalization have tended to make them more mature than they were before the experience.

It would appear that some children, if the experience is not too overwhelming, are able to deal successfully with the troublesome reactions released by the illness and hospitalization, and to come out with renewed courage and vigor to move ahead in life.²⁵

The effect upon the young child, however, can be

²⁴William S. Langford, "The Child in the Pediatric Hospital: Adaptation to Illness and Hospitalization," American Journal of Orthopsychiatry, XXXI (October, 1961), pp. 669-70.

²⁵Ibid., p. 679.

quite traumatic. Because of his lack of understanding and his inability to cope with frustration in a constructive manner, the young child reacts in a negative way to the experience of illness and hospitalization. Some react in an angry, rebellious manner; some express hostile resentment toward their parents; and some respond to their parents with a passive, resistant-type of behavior which perplexes their parents very much. In some children, denial as a defense mechanism can be seen in their behavior. They deny that they are ill; they state they are well and ought to go home. Some feel that their mother is in the hospital somewhere, waiting to take them home. When they finally realize the mother is not there, their defenses break down and they express inconsolable grief through crying and hyperactivity. Their mother is gone. They may interpret this to mean that she has deserted them, or that she may be punishing them in this way for some wrong they have done in the past.

The concept of time, "today," "later," "tomorrow," means nothing to the young child. They cannot understand that eventually mother will return. They are not consoled by being told that mother will be back. They want her now! The hours hang heavy and long, and their grief over the mothers' absence continues.

It is evident that shock and anxiety serve as the basis for these reactions. Depending on the length of hospitalization, or separation from the mother, Bowlby states that the reactive behavior of the child will usually show a

predictable course. He likens this behavior to that of an adult who has lost a beloved person, in that a process of mourning occurs. He divides this process into three phases, and terms them protest, despair, and detachment. During the phase of protest, the child responds with tears, hyperactivity, and anger. He demands that his mother return, and he expects to succeed in getting her to return. Anyone who attempts to help or console him is rejected. During the phase of despair, he remains preoccupied with thoughts of his missing mother. He may cry intermittently, and may appear to be adjusting to the situation. He is usually less active physically. This stage may be erroneously misinterpreted by those in attendance to mean that the child has gotten over his distress, and is beginning to behave normally. The phase of detachment ushers in listless and apathetic behavior toward the mother, should she return. The child seems to be more sociable, and even enters into the activities of the ward, but his relationships with others are of a superficial quality. He seems to fear becoming involved in a similar relationship of this kind, for should he be deserted by that person, he would again experience the same hurt, unwanted feeling.²⁶

Bowlby compares healthy mourning with pathological mourning and their implications for the future development of the child.

²⁶John Bowlby, "Separation Anxiety," International Journal of Psychoanalysis, XLI (March-June, 1960), p. 90.

Now I wish to draw your attention to anger as an immediate, common and perhaps invariable response to loss. . . . The function of this anger appears to be to add punch to the strenuous efforts to recover the lost object and to dissuade it from deserting again that are the hallmarks of the first phase of mourning. So far from being pathological, the evidence suggests that the overt expression of this powerful urge, unrealistic and hopeless though it may be, is a necessary condition for mourning to run a healthy course.²⁷

In pathological mourning, the individual is unable to express overtly his anger and reproach at the lost object.

Instead of its overt expression, which though stormy and fruitless leads to a healthy outcome, the urges to recover and reproach with all their ambivalence of feeling have become split off and repressed.²⁸

This healthy, overt response to loss of the mother is usually seen in those children who have had the most happy and satisfying relationships with them. The loud crying and screaming of the child when his mother goes away, places a responsibility upon the nurse, and can be a strain upon the resources she has at her command to deal with this problem. With understanding of the underlying reasons for the child's behavior, the nurse can provide sympathetic support to the child in his misery.

The nurse who understands the simple fact that young children are in this respect so different from the older ones does not try to "cheer up" the tearful little one while avoiding reference to the

²⁷John Bowlby, "Childhood Mourning and Its Implications for Psychiatry," American Journal of Psychiatry, CXVIII (December, 1961), p. 485.

²⁸Ibid., p. 485.

reason for his grief. She shows sympathetic understanding of his feelings, makes it clear that she knows he wants his mother, and comforts him in his tears. In this way she helps him immeasurably more than by trying to jolly him out of his distress.²⁹

The visiting period is usually a pleasant interlude in the daily routine of a pediatric unit, to which the child looks forward, sometimes for hours before visiting time begins. The beginning and the end of the visiting period, however, is usually a stressful time for the child. When his mother does arrive, he may greet her with conflicting emotions. He may cry, or become hyperactive, or may respond verbally to his mother in a reproachful manner. He may not respond at all, and remain silent for several minutes; then state over and over again during the mother's visit, that he wants to go home. A baby-like talk may emerge, as well as a desire to cling to his mother when she visits. The child may want to be kissed and cuddled by his mother regardless of who may be present on the ward. He may also demand that mother feed him, or may accept being fed without resistance, even though he has in the past been capable of performing this act himself. This evidence of regression to an earlier level of functioning seems to serve the purpose of aiding the child to mobilize his defensive forces in order to deal with the stress he is undergoing.

During the visit, all may go well, each enjoying the

²⁹James Robertson, Young Children in Hospitals (New York: Basic Books, Inc., 1958), pp. 80-81.

others' company, until the visiting period is terminated. When the mother must leave, the child is again faced with the necessity of having to re-experience the departure of his mother. It is usually an unhappy experience for both mother and child. The child demands that his mother stay, and the mother wishes she did not have to leave him in the hospital.

To some, it may seem cruel to subject the child to the same unhappy experience of seeing his mother leave him in the hospital. However, her daily visits serve two important functions. It allows the child to give vent to his feelings, which helps to reduce the amount of emotional tension he is experiencing. It assures the child that his mother cares for him, and still exists, even when she is out of his sight.

The mother, too, responds to her child's hospitalization with distress. She, just as well as her child, finds it difficult to adapt to her child's necessary confinement in the hospital, and to having to leave him there until his recovery from illness. Some mothers feel it is best for the child if they do not visit him, since their children respond so unhappily whenever they leave. There are other mothers who come to the hospital to see their child, yet do not visit, but watch, unobserved by the child. They again prefer to do this, as they do not wish to upset their child.

The nurse can help these mothers to face their situation realistically; she can provide sympathetic support to them when they are visiting their child. They may not ask for help, but the sensitive, observant nurse can usually

identify areas in which her help may be welcome.

CHAPTER III

METHODOLOGY

Time and Place of Study

This study was conducted in the pediatric unit of a large general hospital in eastern Massachusetts. Permission for conducting the study was obtained from the Director of Nursing of the hospital. The hospital has a separate building devoted to generalized pediatric services. There are eight wards located in the pediatric building. Each ward is located on a separate floor. In general, the children who use the hospital are from families representing a low socio-economic level.

Four wards in the pediatric unit were the areas in which the data was collected. Children are admitted to the wards according to the criteria of age, sex, and diagnosis. Of these four wards, two admit surgical patients, and two admit medical patients. One surgical ward is composed of girls whose ages range from three to thirteen years; the surgical conditions include those with burns, and those who are to have a tonsillectomy and adenoidectomy. The other surgical ward is composed of boys whose ages range from three to thirteen years. Admitted to this ward are boys with surgical conditions, including hernia, appendicitis, burns, head injuries, and fractures; as well as boys who are to have eye,

ear, nose and throat, or dental surgery performed.

One medical ward is composed of boys whose ages range from two to thirteen years. Many of the admissions are due to pneumonia, croup, bronchitis, rheumatic fever, and growth and development problems. The other medical ward is composed of girls whose ages range from two to thirteen years. The majority of the girls admitted to this ward have rheumatic fever, or genito-urinary infection as a diagnosis. Each ward contains individual cubicles. There is a room provided for play activity on each floor of the pediatric unit.

The daily visiting hours for the pediatric unit extend from 2:00 P.M. to 7:00 P.M. Parents or other visitors are allowed to visit at any time during this interval. Visiting is limited to two visitors at a time.

Selection and Description of Sample

Ten children between the ages of three and five years were observed with their mothers during the visiting period. In addition, each child was observed for ten minutes after the mother terminated her visit. The children included in the sample were selected by consulting the patient kardex located at the head nurse's station on each ward. Those children who were between the ages of three to five years, were selected for the study. Excluded from the sample were children who were severely ill, mentally retarded, emotionally disturbed, or who had been hospitalized longer than four days at the time the study was conducted. This procedure was

performed approximately fifteen minutes before visiting hours began.

The writer remained in the pediatric unit from 2:00 P.M. to 7:00 P.M. During that time she stationed herself on the ward in which the potential child candidate was located, and waited for the mother to visit her child. When the mother came, the initial greeting of mother and child was observed. The writer then approached the child's mother and introduced herself. She explained that she was conducting a study of the behavior of children during the visiting period. An explanation was given to the mother that knowledge of the child's behavior during the visiting period would enable nurses to be of more help to parents and children during that time. The mother was not informed that her behavior would be observed and recorded, as it was felt that if she did know this, it would affect her behavior with her child. It was thought that this would have a negative influence upon the findings.

Many children were potential candidates for study during the visiting period. The final criteria for inclusion in the sample depended upon the mother actually coming to see her child during the visiting hours. One factor which influenced the final sample occurred when there was more than one child available for study on the same day. Some of the children were located on separate wards and were visited by their mothers at approximately the same time. Since the beginning of the visit had occurred without the presence of the observer that particular mother-child relationship could not be inclu-

ded in the sample.

Method Used to Collect Data

Unstructured, nonparticipant observation was the method used to collect the data. The observations were immediately recorded in written form. This method was thought best in this situation since it was possible to record behavior as it naturally occurred. What was actually said and done by the participants during the visiting period was recorded immediately, thereby limiting to a large extent, distortions in recall. Furthermore, observation as a method of inquiry, is less demanding of active co-operation on the part of the subjects being observed. It therefore overcomes some of the natural resistance of people to being studied, which would occur if the interview was the method used to obtain data.

The major disadvantage to observational method is that it is often impossible to predict when an event will occur so that one may observe it. Although the visiting period extended over five hours, at times there was more than one patient available for observation during that time. The fact that these patients were not situated on the same ward prevented the writer from being present when each of the mothers came to visit.

Observations were made in different areas of the particular ward on which the mother and her child were located, as they did not limit themselves to the bedside unit. However, observations were made when they roamed about the ward;

such as when they were sitting watching television in the middle of the ward, or when they retired to the playroom. The observer followed them wherever they went.

The observations were made in uniform, as it was thought that the mother would more readily accept a request to observe her child during the visiting hours. No mother refused permission to have her child participate in the study.

CHAPTER IV

FINDINGS

Six boys and four girls were observed when their mothers came to visit them in the hospital. A classification of the children and their ages follows:

TABLE 1

AGE AND SEX OF CHILDREN
OBSERVED DURING THE MOTHER'S VISIT

Age	Number of		Total
	Girls	Boys	
3	2	3	5
4	2	2	4
5	0	1	1
Total	4	6	10

All of the children who were observed came from families which resided in communities located near the hospital. All the children were in the hospital no longer than three days after admission when they were observed with their mothers. At the time of the observations, eight of the ten mothers who visited, came to see their child for the first time since the child's admission. Of these eight mothers, one visited her child on the second day after admission; two mothers visited on the third day after admission. Five

mothers visited on the day following admission. The remaining two mothers visited their child each day. The length of the individual visits ranged from twenty-five minutes to five hours.

Seven of the ten children were allowed out of bed and were ambulatory. Three were on bedrest.

The Interaction Between Mother and Child
During the Beginning of the Visit

Six of the children who were allowed out of bed greeted their mothers in a happy, affectionate manner; expressing their joy upon seeing the mother by direct verbal, or motor activity. One child who was ambulatory, greeted his mother whom he hadn't seen for two days, in a reproachful manner: "I been lookin' for you, I want you." The three children who were on bedrest did not respond to their mothers in the same manner as those children who were ambulatory. One child smiled as her mother approached, and then began to cry. The other two children confined to their beds, responded in a passive way when their mothers approached. One child sat up as her mother came toward her, but did not show any outward sign of emotion. This child appeared tired, and had not taken an afternoon nap as she had been waiting for her parents to visit. She was recuperating from lobar pneumonia at the time the observation was conducted. The other child was lying in bed, and did not attempt to sit up as his mother approached, although he was capable of doing so. His first words in response to her greeting were uttered in a plaintive

voice: "Ma, I want to go home."

The mothers' response in greeting their child was warm and affectionate. They either lifted the child in their arms, or drew near and displayed their affection by embracing and kissing their child.

Examples of Mother-Child Interaction
During the Beginning of the Visit¹

Child was sitting in bed as her mother approached. The child smiled, and then began to cry. Mother kissed her and told her to wipe her eyes. The child soon stopped crying, and took out a coloring book and crayons from the bedside table. Her mother helped her color the book.

Mother walked into the ward. The child ran toward her, smiling, and saying over and over again, "Momma, momma." Mother lifted him into her arms and kissed him. She said, "Hi! Have you been a good boy?" She put the boy down, and they walked into the playroom.

This mother came to visit her child for the first time on the third day after his admission. When the child was admitted, his mother informed the admitting doctor that she would not visit her child, as she feared the child might become, in the doctor's words, "apprehensive." She came to see her child after she was informed that he would have to remain in the hospital longer than was first expected.

Mother came to visit her child for the first time since his admission, which was two days ago. She walked into the ward. A nurse went to the back of the ward to bring the boy to his mother. Upon seeing his mother, the child stated in a reproachful manner,

¹See Appendix for the mother-child interaction during the entire visit.

"I been lookin' for you, I want you." Mother picked the boy up in her arms, kissed him, and sat him on her lap. The child began to finger his mother's wool scarf that was draped around her neck, sometimes putting the edges of the scarf into his mouth.

The child and a student nurse were sitting at the table in the center of the ward. The child stated, "My mother's comin' to see me today." At the same time, her mother had come into the ward, and had overheard this statement. She asked, "How do you know she will?" Upon hearing her mother's voice, a look of surprise came into the child's eyes. She turned around, and upon seeing her mother, ran to her. Mother lifted her child high into the air, and both hugged each other and laughed. Mother sat in a chair, holding child on her lap.

Mother smilingly approached her child and said, "Hello, Johnny! How are you?" Her child did not attempt to get up from his lying position in bed. As mother leaned over him to kiss him, he stated in a plaintive voice, "Ma, I want to go home." His mother stated, "You'll go home pretty soon, when you get better." The child sat up and looked at some comic books on his lap. He held some crayons in his hand.

This was the mother's first visit to her child in three days. She came to the ward wanting to see the doctor only; she had not planned to visit her child, since she thought he would be too disturbed by seeing her there. After the head nurse encouraged her to visit him, and explained why it was important, the mother did go to her child.

Subjects Discussed by Mother and Child During the Visiting Period

The amount of conversation which occurred between the mothers and their children varied from very little verbal communication, to an almost continual verbal exchange during the entire visit. All of the mothers placed controls upon

their children, and reprimanded them in a negative manner for some of the activities which their child performed. Some of these were in regard to the child's safety, and some were in relation to preventing them from performing an act which would be socially unacceptable to the mother. Two mothers controlled their child's activities more than the other mothers. Two mothers used physical as well as verbal control in reprimanding their child.

Child climbed up on the bed and picked at the inside of his nose. Mother slapped his hand as she stated, "Don't do that!"

Child sat on his mother's lap and playfully hit her. Mother: "You don't hit mommy, now stop it!" She slapped his hand.

Child sat on bed facing her mother, at the same time picking at her nose and scratching her head. Mother: "Don't pick your nose."

Child took water from a small bottle in the beauty kit and poured water on the doll. Mother jumped up from the chair and stated, "That's enough!" as she took the bottle away from her. Child did not protest.

Pamela hit the doll. Mother: "O Pam, stop that! Pam, sit back in bed, I don't want you to fall." Child moved back a little.

The boy walked past his mother and placed his heels on the lower rung of the bed, and his hands on the upper rung of the bed and looked at his mother. He moved his back against and then away from the bed. His mother cautioned, "Don't fall." The boy continued to do this. His mother repeated, "Don't fall."

Child peeled the paper from the crayon and let it fall to the floor. Mother: "Hey! Pick up the paper from the floor. You don't do that at home, do you?" Child pouted, but picked the paper from the floor. She put the crayon in her mouth. Mother: "Hey! Don't eat the crayons. Want me to take them away from you?" Child sulked at this remark.

Child played "pat-a-cake" with her mother and slapped her mother hard. Mother: "Stop that!" Child: "Why?" Mother: "Because that hurts." Child slapped her mother lightly. She then slapped hard again. Mother: "Stop! You're too fresh! I don't appreciate that at all!"

Child played with the truck while kneeling on the floor. Mother: "Bobby, don't sit on the floor!" Get up off the floor!" The car rolled under the bed and the child went to retrieve it. Mother: "Bobby, don't go under the bed to get it, I'll get it."

Mother tickled child who was by now sitting on the floor. Mother: "Get up off the floor!" Child said, "No!" Mother: "Did you hear me?" Child: "Shut up!" Mother: "What did you say?" Child: "Shut up." Mother: "Come here! Let me hear you say shut up and I'll give you a spanking!" Child leaned on his mother's lap and became recklessly playful again. Mother: "Stop it now! You're going to hurt yourself!"

When the mothers were with their children, they almost invariably initiated conversation with them by asking them questions relating to events which occurred in the hospital. Some of the questions were not directly related to the child's hospital experiences.

Three of the mothers asked their children what they had for lunch and for breakfast on the day they visited.

Mother: "Did you eat your lunch?" Child nodded her head. "What did you eat for lunch?" The child answered, giving a confused picture of what she had for lunch.

Mother: "Did you eat your breakfast?" Child shook her head no. Child had a special test that morning. Mother: "Did you have ice cream today?" Child said, "Yes."

Mother: "Did you have breakfast this morning?" Child: "Yup." Mother: "What did you have?" Child told her what he had for breakfast. Mother: "What did you have for lunch?" Child: "Hot dogs and beans."

Three of the mothers asked their children if they slept well the evening before, or if they had taken a nap in the afternoon before the mother visited.

Mother: "Did you sleep all right?" Child nodded yes.

Mother: "Are you tired?" Child nodded yes.
 Mother: "Didn't you sleep today?" Child shook her head no.

Mother: "Did you take a nap today?" Child shook her head no.

Three of the mothers either asked their child where the toys were that the child had brought into the hospital or helped the children look for them. Other possessions were also mentioned.

Mother: "What happened to the crayons? They're all broken. What happened to your crayon box? Where is your gown, didn't they want you to wear a gown today?" "Where's the book I brought you?" Child ran to her bedside unit and returned with the book in her hand, and gave it to her mother. Mother: "There it is! Want me to read it to you?"

Mother: "Where's your other car?" Child: "I don't know, if I only could find it." Mother: "Did you bring the car on the porch? Let's see if we can find it."

Mother: "Where are your horses?" Mother followed her child and picked up a toy. "Who's that belong to?" Mother and child return with the toys. Mother: "I'm going to take some of your toys home." Child: "No! Don't take my toys home!" Mother: "It doh't make much sense keeping them. You can't find half of them."

Two of the mothers had asked their children what had been done to them in the hospital, relating to procedures. They also asked their children for information about what the doctor had done to them, or what he had said to them.

Mother: "Did they take a picture of you this morning?" Child nodded yes. "Did they give you a needle?" Again the child nodded yes. Mother: "See, didn't I tell you that would be all they would do?" Child nodded yes. Mother: "Robina, who came to see you last night?" Child: "Angelo." Mother: "Dr. Angelo? Did she come to see you last night?"

Mother: "What did the doctor do to you?" Child did not answer her. Mother: "What did the doctor do to you?" Child: "They gave me four needles." Mother: "Four needles!?" Child: "Yuh, I didn't like them." Mother: "What did they give you four needles for?" Child: "I don't know." Mother: "Are you going to have any more needles?" Child: "Nope, 'cuz I'm goin' to go home." Mother: "Did the doctor say you could go home?" Child: "He said nothin'." Mother: "He didn't say anything?" Child: "Nope, I'm goin' to my home, then I'll be home." Mother, to all the boys: "What did the doctor say to you?" Child: "He said, 'Don't do it again, and don't put anything in your mouth.'"

Two mothers tried to convince their child that doctors were all right, and that the hospital was a nice place.

Mother: "The doctor told me you want to stay here." Child: "Nooooo." Mother: "He says it's nice here."

Mother: "Do you like the doctor?" Child: "No." Mother: "No? Why? I like the doctor, don't you?"

Four of the mothers apparently were concerned about their child's behavior while in the hospital, for they asked them questions related to this.

Mother: "Have you been a good boy?"

Mother: "Did you wet your bed last night?" Child: "No." "Did you cry? I'll bet you did cry." Child indicated no. Mother: "Are you remembering your manners?" Child nodded yes. Mother: "Did you say grace this morning?" Child nodded yes.

Mother: "Did you get out of bed and watch television?" Child: "Yup, over there." Mother:

"Did you talk to the nurses?" "Answer me!"
Child nodded yes.

Child: "Ask the nurse for another cookie."
Mother: "No," Child: "I want another." Mother:
"Well, go and ask for them yourself." The child
did so, and returned with the cookies. Mother:
"Did you say 'thank you'?" Child turned and
called out his thanks to the nurse who was on the
other side of the ward.

Five of the mothers encouraged their children to eat
food or to drink fluids. Through their questioning of them,
the mothers wanted to know if they could be of help to their
child in any way.

Mother: "You're going to eat something before
I go, aren't you?" Mother asked child in reference
to some food he was eating, "Is that good? Do you
like it? You want some more milk? Take some peaches.
Open up, that's good! I want you to eat tomorrow,
too."

Mother: "What do you want for Easter, an Easter
bunny?" Child: "Yeah." Mother: "And some Easter
eggs, too?" Child nodded his head, smiling.

Mother: "Want any water or anything, Pat? Pat?"
Child: "What?" Mother repeated the same question.
Child shook her head no. "Want to sit on mommy's
lap?" Child leaned toward her mother and mother
picked up her child and placed child on her lap.
Mother: "Now, do you want some water?" Child
nodded yes. Later mother asked, "Want me to lay
you down so you can rest?" Child shook her head no.

As mother was preparing to leave, she asked her
son, "What do you want me to bring you?" Child:
"Candy." Mother: "Not candy, you have enough of
that. How about a nice stuffed animal?" Child:
"Yeah, get me four." Mother: "O'ho, no! I'll
go out and get one."

Mother: "Tony, would you like to hear a story,
or play with the toy?" Child said, "No." He con-
tinued to play with the toy. Later, she tried again.
Mother: "Let me tell you a story." Child sat
quietly and listened.

Two of the mothers seemed to have the need to be reassured that their child still loved them, for they directly asked their child this question several times during the visit.

Mother leaned closely over child: "Do you still love me, Pat?" Closer. "Do you still love mommy?" Child shook her head yes.

Mother: "Who's boy are you?" Child did not answer. "Who's boy are you, Johnny?" Child began to talk about the book. Mother: "Do you love mommy, do you love me?" Child did not answer.

The same two mothers noted a different type of behavior in their child, and frequently made reference about this to their child.

Child placed a finger in his mouth. He looked solemn. Mother: "Will you give me a smile?" Child shook his head no. Mother, softly: "Why, why don't you smile? What's the matter? What's the matter?" She tickled him. "Have you been a good boy? Have you?" Child rubbed his eyes. Mother: "What are you doing? Smile! Do you love mumma, do you love me? What's the matter? What's the matter?"

This mother was especially perplexed about her child's behavior, and the visit was a rather unhappy one for both mother and child.

The following mother noted a change in her child's behavior, but was not influenced by it in her relations with her child. She seemed to understand the reason for her behavior.

Mother: "Boy! She isn't talking to me. Just wait 'til she gets home, she'll change then."
 Mother: "What's the matter, you're so sad today. Are you tired, honey?" Child nodded yes. "Didn't you sleep today?" Child stated something to mother.
 Mother: "I think she misses the kids. Do you miss Mary and Rickey?"

Two of the mothers placed their child in an unhappy position by asking them when they wanted to go home, despite the fact that they knew their child would not be able to go home when he wanted to. One of these mothers directly reprimanded her child, and added to his frustration by stating that he should not have performed the act which directly influenced his being in the hospital.

Mother asked her child, "You gonna stay here or what?" Child: "I want to go home." Mother: "Want to go home tomorrow? When do you want to go home?" Child: "Now." Mother: "O, you don't want to stay here, now?" Child walked to the center of the playroom, crying. Mother: "Don't you want to stay here with Joey and Kiethy?" Child: "No!" Mother: "Why don't you want to stay here with Joey and Kiethy?" Child: "Cuz!" he cried. Mother: "Then you shouldn't have drank the lye." Child: "I wanna go home."

Mother asked her child some questions, but he did not answer. Mother: "Answer me! Do you want to go home tomorrow?" Child: "Yeah." Later, she asked, "Do you want to go home tomorrow, or the next day? If you carry on like this, you won't be able to go home." Child continued to cry. "What are you crying for? Do you want to stay here?" Child answered, "No!" Mother: "Well, stop your crying."

One child was very active, and his mother wanted to quiet him by reading him a story. He apparently did not wish to remain still, because he wandered away from his mother each time she asked him if he were listening to the story. This mother was reading a story to another boy who was lonesome, and this may have influenced her child's subsequent behavior.

Mother read a story to another boy. Her child moved closer to his mother and continued to listen. He looked at the other boy, and at the book as his mother read. Mother: "Are you listening?" Child: "No." He played with his toys on the floor. Later, the child seemed tired. His mother held him on her

lap. Mother: "Now, where's the book? Are you going to listen to the story?" Child did not answer, he went to the bedside unit. Mother read the story to another boy. Mother, to son, "Are you going to listen to the story?" Child stated, with a toy in his hand, "I'm going to hit him on the head." Mother: "No you're not!" Child ran off; mother continued to read.

All of the children were verbally outspoken in their attempts to satisfy their need for food, play, and knowledge. Eight children displayed independent behavior when their mother attempted to control their activities. One mother stated to her child, "I might just as well have stayed home." When her child asked why, she replied, "Because you're not paying any attention to me." Her child replied, "You gonna stay here?"

Four children frequently expressed their desire to go home. Four children often demanded that their mother stay with them, telling her not to go home.

How Mothers' Terminated Their Visit, and the Childrens' Response

Seven of the mothers prepared their children realistically about their leaving when they terminated their visit. Three mothers prepared their child early in the visit for their eventual departure. Each of these seven mothers patiently explained why they had to leave, and eight mothers devoted some time to reassuring their child that they would return again to visit. One of the mothers pretended that she was leaving before her actual departure, and her child became very anxious. One mother experienced much difficulty in explaining to, and in leaving her child.

A nurse explained to one of the three remaining children that his mother needed to leave. This child's mother did not indicate whether she would return to visit. Another mother used the excuse that she had to leave to make a telephone call. Before she left, the child learned through questioning, that her mother was leaving and would return the next day. One mother and father did not verbally prepare their child for their departure. The child gathered from their actions that they were preparing to go, and this created a tense, unhappy experience for her. They left the ward when their child was out of sight. The effect upon the child, when she found them gone, was traumatic.

Three children gave evidence during the visit that they knew their mother would eventually leave.

One child, four years of age, took some coins from his bathrobe pocket, and handed them to his mother, saying, "Take 'em home, put in you pocket." One child was overly anxious and kept wanting reassurance from his mother that she was not going home. The other child, who was five years of age, asked his parents early in the visit when they were going home.

Seven of the mothers either cautioned their child not to cry, or made reference to their child's crying when they were preparing to leave. The remaining mothers did not caution their child not to cry, nor did these three children display any obvious evidence that they were emotionally upset. Five of the children became upset when their mother's prepared to

leave. Three of these children were three years of age, and two were four years of age. These five children, and two others, delayed their mother's departure. The latter two children prolonged their mother's visit, by seeking reassurance and comfort, and promises that she would return the next day. The remaining three children accepted their mother's leaving with ease. Of these last five children, two were three years of age, two were four years of age, and the remaining child was five years of age. The boy of five seemed to be in better control of his emotions throughout the visit, than the younger children. Two three year old children resorted to auto-erotic behavior during and after their mother's departure.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

As mother displayed a picture in a book which she was coloring for her child, she looked about the ward and realized that visiting hours were over. "I guess everybody has gone. I guess it's time to go."
 "Tomorrow, sure, I'll come tomorrow." She held her child's hand while stroking child's leg. "I'll be back tomorrow, O.K.?"
 "Yes, I come tomorrow, yes, I'll come tomorrow." She leaned close to the child and kissed her.
 Mother leaned close to her child, and asked over and over in a soft voice, "What, what, what?"
 "I'll come tomorrow, 'bye."

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

Child sat up. "You comin' tomorrow, mommy?"

She watched her mother put her coat and kerchief on. "You come tomorrow." She stated this plaintively, not crying.
 "Come tomorrow, mommy, tomorrow. Come 'morrow, mommy, mommy," softly.
 Child smiled, murmured softly, inaudibly. She lay in the same position in bed,

She left her child.

not moving, looking off into space, not crying.

In this observation of a four year old, the mother stated realistically that it was time for her to leave. Her child begged her over and over again for reassurance that she would come back to see her tomorrow. Mother did not become impatient with her child's continuous request to be reassured. The mother's behavior was warm, reassuring, and tinged with a little bit of humor. The child's talk became that of a child younger than four years, as she asked her mother to return tomorrow. She remained in the same position in which her mother left her, as if to retain the feeling of warmth and affection which her mother displayed.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

Mother picked her child up in her arms and placed her in a sitting position in bed. The parents stood close to their child, talking with her. Mother put the siderail up as father took mother's coat off the hook. They are preparing to leave.

"What are you crying about?" Mother stood near the siderail. She put the siderail down and lifted her child out of bed. She sat down with her child on her lap. She talked softly to her, with her face close to her child's face. She placed her child on the bed. The student applied the restraint binder on the child's chest. The student completed her task, and mother put her arms about

Child began to cry, and started in a loud voice, "I don't want you to go, mommy!" She jumped up and down as she spoke. "I'm goin' with you, mommy!" She repeated this over, and over, now wailing. "I want to go with you!" she cried. She put her thumb in her mouth and began to quiet down. She saw a student nurse approach with a johnny, and a restraint binder, and exclaimed, "No! Gonna stay here, mommy!" and again began to cry. She cried vehemently, calling, "Mommy, mommy!" in a frightened voice.

her child. "I ain't going anywhere. Am I going anywhere? I'm going to just sit here." She sat on a bedside stool near her child, and removed the shoulder straps of the chest binder. She untied the straps of the binder from the bed, and took the child in her arms. She sat down in the chair and held the child as she would a baby, rocking her back and forth, speaking to her softly, in inaudible tones. Mother and child are talking together. Mother placed her child on father's lap and the three are engaged in conversation about her toys.

Mother did so. The parents prepare to leave. They looked in the direction in which their child had gone. As they were leaving, the father looked at another mother, shook his head, and stated, "I hate to do it." and left the ward with the mother.

She began to jump up and down while in a sitting position as she cried.

Child's crying began to cease.

The child placed her fingers over her own mouth and moved them back and forth. She is quiet now, with an occasional sob shaking her body.

"Mommy, put my shorts on." She ventured away from her parents, and out of sight. She joined the other girls in their play.

The child did not see them leaving. A short time later the child returned, looked into the bedside unit, and around her in a startled manner, and then began to cry loudly. She sobbed, "Mommy, mommy!" over and over again as she stood near her bed.

In this mother-child relationship, the child was three years of age. Her mother had been a practical nurse in the operating room of a local hospital. This was the child's first hospitalization, and the mother's first visit since the child was admitted the previous day. The child reacted adversely to her mother's leaving; crying when she saw her parents preparing to go. The child responded to this stress situation by putting her thumb in her mouth, and accepted being held closely by her mother. She again experienced

stress when the student nurse approached and applied a restraint binder to prevent her from falling out of bed. After this was done, crying and hyperactivity were the two responses which the child expressed. The mother denied she was going anywhere, even though the child could see that the parents were preparing to leave. However, their staying reassured the child, and when she felt reasonably secure, she walked away from her parents. The father apparently felt guilty about the manner in which they were leaving their child, for he felt the need to explain his actions to another mother who observed the incident. The effect upon the child, of not seeing her parents when she returned, was quite traumatic.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

In this observation, the child seemed to understand that his mother would leave him, for he took out some coins from his bathrobe pocket and handed them to his mother, saying, "Take 'em home, put in you pocket." A short time later he wandered away to the other end of the ward to play with the children there.

The nurse in charge of the ward brought him back to his bed, and removed his bathrobe. She placed him in a sitting position on the bed. She placed a restraint binder on the child, explaining to his mother the reason for this. The nurse replaced the johnny on the boy. She stated, "Visiting hours are over. It's time for visitors to go, Mrs.

The boy looked at his mother, and then at the nurse, not speaking. He touched his ear and the johnny that was removed by the nurse. He silently looked at the nurse and then at his mother.

Blank." She informed the child, "Mommy has to go now, mommy will be back tomorrow." As the nurse left, she stated to Mrs. Blank, "I hope you will be able to come in tomorrow." The mother approached her child, leaned close to him, and placed her face close to his and asked, "Gonna give me a kiss?" She, in turn, kissed him and stated, "Bye, 'bye, don't cry." She moved away from him, looked back, lingered, and again stated, "'Bye, 'bye." She left, saying good-night to another mother nearby, and walked out of the ward.

The boy nodded, and kissed his mother. He sat up, did not answer, and played with his toy bunny that the nurse had tucked in bed with him. He covered the bunny up to its neck with the bedsheet, fixed its ears, and then bent them over the bunny's eyes. He released the bunny, and tried to bend his own ears forward toward his face, while talking and smiling at the bunny. He coughed occasionally as he hugged the bunny. He then continued to kiss the bunny over and over again, hugging and talking to it between kisses. He had displayed no outward sign that he was unhappy about his mother leaving him.

It was surprising that this four-year-old child did not become emotionally upset when his mother left him. During the two days when his mother did not visit, he cried and called for her frequently. When previous visiting hours were in session, this little boy would wander from one child's mother to another, as if seeking some comfort from that mother as a substitute for his own.

The soft, stuffed bunny that he played with during and after his mother's visit, had been given to him by another child's mother. When he received this bunny, he was overjoyed

with it. One wonders whether this influenced his behavior toward his mother during and after her visit. There was very little communication between this boy and his mother, in comparison to the other mothers and their children. This child was certainly happy when his mother was present, but felt free to wander away from her. He was aware of her presence, for he would look at her occasionally, and touch her.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

In this observation, the mother indicated early in the visit that she would be going home soon. As the children's dinner was being served, she leaned over her child and asked, "You're going to eat something before I go, aren't you?" Much later in the visit the mother put her arms about her child and stated, "I have to go now. You gonna be a good boy?" She asked, "You gonna cry?" She smiled and drew him near her. "I can't stay anymore, now. Don't you want me to go home and feed Stevie? I'm comin' back, O.K.? Don't you want me to go home and feed Stevie? You're a big boy, you don't want to cry." She sat him on a chair and replaced his slipper. "If I pick you up, are you gonna cry when I go?" "O.K. If you cry, I won't come back tomorrow." She stated in a quiet tone, "O, you're a baby. Shame on you." She folded her arms and looked out the window and stated, "Don't cry. Sit right there until I come back after I feed Stephen." She

Her child did not respond to this question.

He appeared about to cry.

He mumbled something.

He began to whine softly. His face puckered; he rubbed his slipper against his opposite leg, and the slipper fell off.

"Pick me up, ma."

He shook his head no.

He began to cry.

hugged him, and then looked out the window. She picked him up in her arms and asked, "Want to look out the window? I have to go, Michael. I have to feed the kids." "Gonna walk with me to the doors? Come over with the kids and watch T.V. Want to watch T.V.?" She took his hand.

His mother continued to walk slowly out of the ward, looked back once and smiled. She continued to leave the ward without looking back.

He cried softly.

He walked along with her, still crying. As they approached the television set, he released his mother's hand and sat on the floor, crying loudly, and kicking his heels against the floor. He got up and ran to the entrance of the ward and cried out loudly as he watched his mother leave the unit. A student nurse approached him to pick him up in her arms. He pushed her away, and sat on the floor and kicked his heels against the floor.

This child's mother had not gone back to see him after she had given the history of her child's condition to the doctor. This was her first visit to her three-year-old child in three days. She prepared her child early in the visit for her eventual departure, although the child did not respond to this at the time. When she did prepare to leave, she directly informed him of her leaving, and the reason for her departure. She displayed affection and patience when her child became upset. She attempted to control his actions by reminding him that big boys don't cry. She imposed an impossible condition upon her child; that if he did cry, she "would not come back tomorrow," whereupon the child immediately

began to cry. She added to his unhappiness by calling him a baby, and gave him the impression that it was a shameful thing to cry. She tried to divert his attention by having him look out the window, but he continued to cry. As she left the ward, he let his anger burst forth forcefully, and rebuffed the student who approached to offer him emotional support.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

In this observation, the child's mother brought up the subject of her leaving half-way during the visit. "When I go, I don't know how you're going to take it."

"I'll stay herefor a little while to make sure you eat your dinner." Later, "I hope they bring your dinner soon." As the dinner tray was placed before the child, and she began to eat, mother stated, "Bina, mother's going to go and make a telephone call, O.K.? You going to be a good girl?"

"I don't know if I'll be able to come back this afternoon, honey. Tomorrow you will be coming home." She stood up and walked away to the door of the ward. She returned and kissed her child. "You be a good girl, now, O.K.?, and I'll be back tomorrow, O.K.?"

"Bye, Bina."

"You gonna stay here?"

"You going to come back?"

"O.K., 'bye." She began to eat her food, and did not appear upset at her mother leaving. She continued to eat her meal, while watching other children at the table.

This was the child's first hospitalization, and although she cried bitterly for a long time throughout the eve-

ning of her admission, she did not cry during or after her mother's first visit. She was three years of age, and was allowed out of bed. During the observation, the mother expressed her concern about how her child would react to her leaving at the end of her visit. She had learned of her child's distress of the previous night, and was afraid the same reaction would occur again. She felt it would be best to leave her child during mealtime. When her child was a short distance away, her mother stated, "When her dinner comes, I'll sneak out so it won't bother her." When mother decided to leave, she gave the child the excuse that she was leaving to make a telephone call. In response to her child asking her if she would come back, the mother gave an indefinite statement, and reassured her child that she would be coming home tomorrow. The mother did not know at the time if the child would be allowed to go home the next day. She reassured her child that she would be back tomorrow, and the child appeared to accept this explanation.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

Mother: "You tired?"
 "I have to go, sweetheart, I have to change Mary."
 "You're a faker, you know."
 She hugged her child. "You're a faker. Honey, we have to go home. Want us to come tomorrow?" She kissed her child. Father lifted child and placed her in the crib.
 "Patty, are you going to be a good girl? You won't be able

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"Yes. . . . I don't want you to go, mom." She lay quietly on mother's lap, looking off into space.
 "Mommy, I don't want you to leave me here."
 She sat quietly on mother's lap. She yawned. She began to cry, "I don't wanna!"

to come home Monday, if you cry like that. Sit down and give me a kiss. Now we'll be in tomorrow. No, don't carry on so. Want me to tell the nurse to come over and hold you?" "Well, we have to go home and feed the kids; don't you want me to feed the children?" Parents put sideboard up. "We'll be back tomorrow. 'Bye, 'bye." They leave, not delaying, but not rushing. A student nurse approached child and talked to her, attempting to give her some comfort.

She stood up in bed.
"O, momma, momma!"

"No, I don't want you to go home." Crying.

"I wanna go home!"
"I don't want to!" She began to cry loudly, and continued to do so as they left. She continued to cry, "Mommy, mommy," in a moaning sort of way. She stood up and looked out the window as if looking for her parents, and ignored the student. She continued like this for approximately five minutes; then she lay down, still crying in a moaning voice, and rested her head in her arms, and did not stop crying.

This child was four years old, and was recuperating from lobar pneumonia. The parents were patient with their child, who kept insisting that she did not want them to go home. They were realistic in telling her that they were leaving, and why they were leaving. Although the father was present, the child addressed her remarks to her mother. Crying was referred to by the mother, and she indirectly implied that good girls do not cry. Mother explained that they would be back tomorrow, but nothing seemed to console the child, since she wanted to be with them and they could not stay. This mother seemed to realize that a nurse might be of some help in consoling her child, for she asked the child if she would like a nurse to come and hold her. The parents did not

become upset or disturbed by the child's unhappy response to their leaving. They remained firm, and truthful in their explanations and in their leaving.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

Mother and other visitors prepare to leave. Mother hugged him and asked, "What do you want me to bring you?" "Not candy, you have enough of that. How about a nice stuffed animal?" "O, ho, no! I'll go out and get one." She kissed him and said, "You be a good boy, and don't cry." Mother and others walked out of the ward. "Now I thought you weren't going to cry. If you cry like that, I'm not going to come back and see you." She lifted him in her arms and kissed him. She put him down and told him to go back into the ward. "We'll be back to see you later, 'bye, 'bye."

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

Child ran to his mother and began to cry.

"Candy."

"Yeah, get me four."

David ran to his mother and began to cry loudly.

He backed away, looking at his mother, and continued to cry. He followed his other two friends into the ward. One other boy was crying loudly also. The other boy was not, and beckoned the two crying children to play with him in the playroom. They went there slowly, began to play and soon appeared to forget that they had visitors.

This child was one of three boys who were thought to have ingested lye, while they were playing together. His mother and some other friends had come to visit. During the observation, the mother pretended that she was going home sooner than she had intended.

Mother exclaimed, as the boys were swinging their toy golf clubs at each other, "Stop that now, don't

hit each other!"

Child: "Hey, what did you come for?"

Mother: "Well, do you want us to go home?"

Child: "Yeah."

Mother, to other friend: "Just make believe we're going home." She reached for her coat and bag; child saw this and went to his mother and placed his head against her body. He began to cry.

The child had to cope with two instances in which he saw his mother preparing to leave. One, her pretended departure, the other, her actual departure. She attempted to console him by asking him what material object he would like her to bring on the next visit. She told her child not to cry, and made a condition that if he did cry, she would not come back to see him. Whereupon the boy cried more than before. However, before she left, the mother assured her child that she would come back. One child in the trio seemed to give this boy and another boy emotional support, for he beckoned them to come to the playroom with him; they did, and began to play.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

"Do you want to go home tomorrow?"

"Yeah."

"Well, be a good boy, give me a kiss, and I'll go home and tell daddy to bring your clothes in tomorrow."

"I'm going home, I can't stay here. Tell me what's wrong? What's the matter?" She leaned close to him. "Do you love mommy?" "Yes, I gotta go home, I can't stay here. I've gotta go home. Now give me a kiss good-bye. I've got to talk to the doctor and then

"Don't go." He appeared sad.

He lay back in bed and then he sat up. Tears were rolling down his cheeks. "Don't go home!"

"I'll go home."

"Don't cry. You going to be a good boy? Ah! ah! ah! don't cry. All right, I'm going to go home. Give me a kiss good-bye." She returned to the side of the bed. "Listen, Johnny, I've got to go out and ask the doctor if you can go home tomorrow, O.K.? Huh?" She stood there, looking down at her child. "What do you want? I can't stay here, they won't let me stay here."

"Do you want to go home tomorrow, or the next day? If you carry on like this, you won't be able to go home."

"What are you crying for? Do you want to stay here?"

"Well, stop your crying. Wipe away the tears, wipe them away. Now stop your silly crying.

Only babies cry. You're a big guy. Gonna give me a kiss, huh? I'll go home and tell daddy to bring back your shoes, O.K? Now listen, if you do cry, I will go. Big boys don't cry." She hugged him.

"I'm going to go, now."

Mother looked at the observer and asked, "What do you do in a case like this?" She hugged and kissed her child again.

"What's the matter? I'm going to leave you. Mommy's got to go. Why? Why? Now stop, no tears. Mommy loves you so much."

She hugged him once more and slowly walked away, looking back; about to cry herself. As she left, she stated, "I'll be back tomorrow." She walked away and out of the ward.

"No!" He began to cry.

"Stay here!" He continued to cry. He cried loudly.

He continued to cry.

"No!"

He just sat there, crying. He began to cry loudly

The child followed her with his eyes, crying loudly, and kicking the bed with his heels. He became very upset, attempting to stand up in bed, looking at his departing mother, crying loudly, "Mommy, mommy, ma! ma!" His mother began to talk with a doctor near the doorway where the child could see, and he kept calling to her, crying at

the same time. He cried for a long time.

Despite the child's repeated expressions of "Don't go home!" and "I want to go home," the mother of this child seemed perplexed about his behavior. The mother did give the child an explanation of her leaving, but she seemed to prolong her departure unnecessarily. During that time, she interspersed her conversation with her child with questions about his behavior. She still seemed perplexed even when the child gave her the reasons for his behavior. She seemed to have the need to see her child behave in this manner, to serve as reassurance to her that she was needed, for during her visit, she frequently asked him, "Do you love mummy?" She, too, admonished him not to cry, and attempted to control his behavior. This child was three years of age. Several times during the visit, she placed the responsibility upon her child for deciding which day he would like to go home, despite the fact that she also stated that she wanted to talk with the doctor to determine when he could go home. She threatened her child that she would go home if he cried, and yet kept stating that she had to go home. "I can't stay here, they won't let me stay here." All this seemed to frustrate and confuse the child, and seemed to place an added burden upon his ability to cope with his hospital experience. The mother did not appear to know how to handle the situation, as she addressed the observer by saying, "What do you do in a case like this?"

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

"Robert, come here. Mommy and daddy got to go, and we'll be down tomorrow, and I'll bring you a coloring book, O.K.?" She kissed him. "Go kiss daddy. We'll be back tomorrow, O.K.?" The parents began to leave the ward.

Mother kissed him, "You be a good boy, now, O.K.?, and behave. We'll see you tomorrow. 'Bye."

The child in this observation was five years of age, and appeared to accept his mother's explanation of her need to leave, with equanimity. This was the second day of his hospitalization, and the second visit by his parents. His mother realistically explained her departure, and reassured him that she and his father would re-visit the next day. This boy had asked his mother earlier in the visit, "What time are you going home?" His mother replied, "When visiting hours are over." His response to this was "Oh." He returned to the activity he was performing, giving no sign that he was affected by her response. This one observation of a five-year-old child, gives evidence of the greater amount of emotional development and self-mastery which a child of this age possesses.

MOTHER'S EXPLANATION OF HAVING TO LEAVE, AND MANNER IN WHICH LEAVING IS ACCOMPLISHED

Mother tucked her child under the bedclothes, and

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

"O.K. 'Bye, ma." He joined a group of boys near the television set. He then ran to his mother to hug and kiss her.

He turned away and rejoined the boys.

HOW CHILD RESPONDS TO MOTHER LEAVING AT THE END OF THE VISITING PERIOD

placed her head close to his and kissed him. "I'll see you in the morning. Which toy shall I leave?" She patted his arm, leaned over him, and cuddled him.

She leaned over him and kissed him. "O.K., I'll read you a story. Now you go to sleep." She read the story. After the story was read, she had her child put his hands together, and told him to say his good-night prayers. She listened to him recite them. Then she put her coat on.

"I'll be back in the morning. Don't cry. You didn't cry yesterday."

"Will I see you in the morning?"

She obtained the water.

"O.K., lie down." She kissed him. "I'll be back tomorrow, O.K.?"

"I'll see you. I'll be back when you wake up." She waved good-bye, and walked out of the ward.

"The toy tractor." He placed his thumb in his mouth, and silently watched his mother place the toys in a bag.

"You stay her, mummy."

Child listened with his thumb in his mouth.

"Mommy, don't go!"

"I want you to stay here." He asked her all sorts of questions.

"No! I want some water." He sat up and drank the water.

"No, mommy." He stated this naturally, and did not cry. He waved to his mother. He remained lying down in bed, looking off into space, with his thumb in his mouth, and his other hand stroking his hair. He did not cry, and did not attempt to get out of bed. He remained like that, drowsily looking off into space.

This mother had been with her three-year-old boy for the entire visiting period. He was very active all during his mother's visit, and she attempted to have him rest occasionally. He was tired, but still wanted to play. His mother was firm in her insistence that it was time for him to go to bed. She indirectly indicated that she was leaving, by asking him to decide which of his toys she could take home

with her. There was a moment of rebellion on his part, when she put him to bed, and when she sorted the toys to be taken home. He shouted, "Don't take no more!" He could not sustain this negative behavior, and soon displayed his affection for her. He attempted to prolong his mother's visit, and she consented to his whims for a short period of time. During this time, he resorted to auto-erotic behavior, sucking his thumb and stroking his hair as his mother was preparing to leave. The mother obviously continued the same bed-time routine as the child was accustomed to at home. His mother reassured him that she would return the following day. She also admonished him not to cry. He finally accepted his mother's departure, taking consolation from his thumb that was in his mouth.

Nursing Implications

Five children became emotionally upset when nursing procedures were performed during their mother's visit. Two three-year-old children cried and protested when their temperatures were taken rectally. One three-year-old cried when a restraint binder was applied, prior to her parents leaving. The two remaining children were four years of age; one cried when a bedpan was offered, without her voluntarily asking for it. The other child cried when she received an intramuscular injection. This child's mother did not offer her child any support until the procedure was completed.

Other children in two of the families were affected

by the child being in the hospital. In one family, one child cried for her sister, and the other children could not sleep for several hours after they had been put to bed at their regular hour.

Mother: "Freda cried last night." The child became attentive, watching her mother. "Why?" she asked. Mother: "Why? Because she didn't want you to be in the hospital. The children miss you." Her mother informed several student nurses nearby, that none of the other children at home could sleep at their regular bedtime, because they were upset that their sister was in the hospital. She then addressed her child: "You know, it's so quiet at home, because you're not there. There are no fights." Her child did not respond to this.

In another family, the mother stated, in response to her child's quiet behavior:

"I think she misses the kids. Do you miss Mary and Rickey? Mary misses you. She says: 'Where's Patty? Is she in the hospital?'"

Two mothers who were visiting their children, were sympathetic to other children whose mothers were not visiting at the time the observations were conducted. A child's mother who had not been included in the sample, gave a furry toy bunny to a little boy who was among the ten children observed. This mother stated she felt sorry for this boy, who had not been visited by his mother for two days. She gave him the toy bunny, because she had noticed that he had no toys. This boy was happy about having been given the bunny, and played with it quite often during the observation. One mother devoted some of her visiting time to giving attention to a boy in the bed next to her son. She read several stories to him. This boy seemed to have enjoyed this experience, since he

called the "lady" to come and talk to him, again and again during the visiting period.

All the children who were observed, played with various toys, or took part in play activities either by themselves, with their parents, or with other children. It appeared as if they had the need to involve themselves in some other activity in addition to talking and being with their mothers. This play activity seemed to absorb their attention for a period of time. All the children played with more than one toy. When they tired of one activity, they involved themselves in another. The children did not share their toys. In fact, two children were overly possessive and one child wanted to take a toy that did not belong to him, from another child.

A child ran up to the table and took one of the cars. Michael ran after him. His mother did not interfere, and let her son settle the argument himself. Michael returned with the car. . . . Two other boys approached the table; one tried to take a car. Michael said, "No, Larry!" and retrieved the car. He looked at his mother, and drew near her.

Another child reached for her books. Robina swept the book away, and stated, "That's my book! It's not her book!" She looked reproachfully at the other girl, and then returned to coloring her book. Later this same child returned from her bedside unit, with a new toothbrush, and toothpaste tube in her hand. She said, "That's for me, not for her, or her."

Robert attempted to take a coloring book from another child. His mother stated, "Don't do that!" Robert replied, "He'll let me." Mother retorted, "Don't be fresh! I'll get you one tomorrow." Robert answered, "No!" He walked to the corner of his bedside unit and pouted.

One child was so happy at receiving three teddy bears, that she left her parents to display them to other children and their mothers.

Four nurses directly offered their assistance to mothers and children during the visiting period. A head nurse encouraged one mother to visit her child, as she stated she had come in only to see the doctor, because she feared her child would become too upset by her visiting. This mother did experience difficulty in her relations with her child during, and at the end of her visit. She seemed to realize that she needed assistance, for she turned to the observer for support. A charge nurse explained to one child that his mother had to leave, and indirectly suggested to his mother that she return to visit the next day. Two student nurses directly offered their support to two children who became upset during their mothers' departure.

Nursing services could have been of beneficial help to six mothers in their relations with their children during the visiting period. Nursing assistance could have been of help to:

1. the mother who had made a pretense of leaving her child before she actually did.
2. the mother who experienced so much difficulty in explaining her departure to her child.
3. the mother who had given her child the excuse that she was leaving to make a telephone call.

4. the parents who terminated their visit with their child when she was out of their sight.
5. the two other mothers who had not visited their child for two or more days, by informing them, during the child's admission, of the importance of their frequent visiting to their child.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

This study was undertaken to explore the mother-child relationship during the visiting period. The purpose of the study was to determine:

1. the interaction between the mother and her child during the beginning of the visit,
2. what subjects were discussed by the mother and her child during the visiting period,
3. how the mother explained the necessity of leaving at the end of the visiting period, and the manner in which leaving was accomplished,
4. how the child reacted to his mother leaving him at the end of the visiting period,
5. how the nurse might be of assistance in supporting the mother and her child during the visiting period.

A review of the literature relating to the importance of the mother-child relationship; the effects upon the child of separation from his mother during hospitalization and illness, and the importance of the visiting period to the child, has been presented.

The data obtained from unstructured, nonparticipating observation of the interaction between ten children, ranging from three to five years of age, and their mothers, has been presented and discussed. The study was conducted in the pediatric unit of a large general hospital in eastern Massachusetts.

Conclusions

On the basis of the data given, the writer has drawn these conclusions:

1. Some mothers do not visit their child, as they fear the child may become upset during their visit.
2. The visiting period for most of the mothers and their children was a pleasant experience. Most of the mothers displayed much warmth and affection for their child during the visit.
3. Children who are allowed out of bed appear to be happier, and more able to involve themselves in activities which allow them to discharge their energy through verbal and motor activity.
4. Three and four-year-old children possess a relatively large vocabulary, which aids them in making their needs and desires known to their mothers and nursing personnel.
5. All the mothers controlled their child's behavior to a certain degree, reprimanding them in a

negative way for some of the activities they performed.

6. During their visit, mothers obtained information from their child in the following areas:
 - a. They asked their children questions relating to their ability to sleep, whether they were eating well, and where their toys and other possessions were on the ward.
 - b. Some mothers probed their child for information about procedures that were performed, and what the doctor had said and done to them.
 - c. Some mothers were concerned about their child's behavior in the hospital, and attempted to determine from the child whether he was behaving in a socially acceptable manner.
7. Although the mothers displayed the need to be of help to their child in providing for their physical, social, and emotional well-being, some of them were contradictory in their verbal expressions and behavior, and created unnecessary frustration and anxiety in their child.
8. In spite of the fact that some children appeared to accept their mother's departure with composure, her leaving proved to be stressful to most

children. They delayed their mother's leaving either by their behavior, or by expressing the need to be reassured that she would return again.

9. Most children displayed independent behavior at various times during their mother's visit. However, there were occasions when their dependency needs were apparent, and the assistance of a nurse would have been of help to both the mother and child.
10. Some nurses were sensitive to the child's emotional needs, and attempted to satisfy them at the beginning or at the end of the mother's visit.
11. Most mothers patiently prepared their child for their departure in a truthful manner, and did state when they would return again. However, the majority of the mothers cautioned their child not to cry. When the child did exhibit this activity, the mothers resorted to expressing negative statements in attempting to suppress this behavior.
12. Some children became upset when relatively minor procedures were performed in their mother's presence, and appealed to her for assistance and support.
13. Hospitalization of some children seemed to have an adverse effect upon the other children in the family constellation.

14. Some mothers displayed compassion for other hospitalized children while they were visiting their own child, and voluntarily performed acts of kindness in their attempt to make another child's hospital experience a more pleasant one.
15. Although the children enjoyed their mother's presence in the hospital, they displayed a strong need to participate in play activities which did not always involve her participation. Most mothers allowed their child this freedom, but a few mothers expressed directly or indirectly, their wish that the child pay more attention to them.

Recommendations

1. It is recommended that members of the nursing profession participate in activities designed to assist mothers and nursing service personnel in improving the mental health of the hospitalized child by:
 - a. informing mothers, during their child's admission to the hospital, of the importance of their visits to the child, and of the need for giving a truthful and adequate explanation of their eventual departure, and subsequent return.
 - b. being available to mothers when they visit their child, to offer them reassurance

and support, and to assist them in meeting their child's needs more effectively.

- c. recognizing the young child's dependence upon the mother, and attempt to gain her assistance in accomplishing simple nursing procedures which would be more acceptable to the child, if performed by her.
- d. inviting mothers to participate in small groups with nursing service personnel, to discuss problems which they encounter during their visit, to share their experiences, and to learn effective ways to support their child, while visiting him in the hospital.
- e. publishing articles in nursing and medical journals, and lay magazines concerning the effects of hospitalization upon the behavior of children. Primary focus should be upon the principles and methods which can be utilized to make the visiting period more pleasant for both the mother and child.

2. As outgrowths of the data, the following are recommended as studies which might be considered.

- a. What factors influence the mother's decision not to visit her child while he is hospitalized.

- b. The effect of enforced bedrest upon the child's behavior, as compared to his behavior prior to hospitalization.
- c. Determine why mothers attempt to control their young child's crying, and why they regard this activity as socially unacceptable.
- d. The effects of separation upon other young children in the family, when hospitalization occurs.

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APPENDIX

The child in this observation was four years of age. This was his mother's first visit since he was admitted two days ago.

Mother walked into the unit. A nurse went to the back of the ward to bring the boy to his mother. Upon seeing his mother he said, "I been lookin' for you, I want you." She picked him up in her arms and sat him down in her lap. He began to finger the wool scarf that was draped around his mother's neck, sometimes putting the edge into his mouth.

Mother: "What do you want for Easter, an Easter bunny?"

(He had been given a fluffy yellow bunny that evening by another child's mother, who had bought it for him)."

Child: "Yeah." He fingered the fringe of the wool scarf and nodded at the same time.

Mother: "And Easter Eggs, too?" He nodded his head, smiling. She leaned near her child and talked softly to him. Her conversation cannot be heard. As mother continued to speak, the child smiled, put a finger in his mouth, and placed the edge of his shoe against the metal part of the bed. As child did this, mother smiled down at him, and placed her hand on the child's back. She reached for the bunny and gave it to the boy, who began to bend the ears over its eyes.

Mother, chuckling: "O look at that, you're covering his eyes up." Child did not speak. He pulled the ears down again, and they popped up. He slid off his mother's lap and stood at the foot of the bed, with the bunny held in the crook of his arm. He untied the ribbon from around the bunny's neck.

Mother: "You going to take the ribbon off the bunny?" He nodded yes.

Mother: "You going to give me the ribbon?" He nodded and handed the ribbon to her. She fingered the ribbon while she watched her child. He placed the bunny on the bed, alternately bending and straightening its ears. Mother silently looked at her son's activities. He turned away from the bunny, and faced his mother. He placed one hand on the bedrail, and one foot on the lower rung of the bed, and swung once, got off the bed and walked by his mother. He went to the next bed and played with the bed handle. He then ventured a little further away, picked up a blue rubber toy that squeaked when squeezed. He turned toward his mother, whose back was facing him. She had made no effort to turn around. He squeezed the toy, walked by her, and passed in front of her. He placed the blue toy against the bunny's face, and each time he did this, he squeezed the blue toy. His mother looked silently at this activity, with a little smile on her face. She then looked down at the ribbon in her hand. Her child walked past her to the bed in the farther corner of the ward, and stood in front of it, while watching a boy. His mother turned in her chair to see where he had gone. He returned to his mother, and in doing so, he touched her left arm, her right leg, and right side of her body. He walked past her to enter his cubicle. His mother followed his

actions without saying a word. He peered into his bedside stand and took out a toy tractor. Mother looked at the toy in the child's hand.

Mother: "Who gave it to you?"

Child: "Nurh."

Mother: "Who? Come here so I can hear you." He approached her and repeated, "Nurh."

Mother: "O, a nurse." He nodded his head, and returned to the bedside stand and played with the squeaky toy on the top of the stand. He looked at his mother occasionally. Mother looked at her child's activity, until some other activity on the unit caught her attention. He looked at his mother two times while her attention was directed elsewhere. He reached under the bed, and pulled a stool out, and pushed it about three feet away from his mother. He placed the toys on it, and played alone. He turned around; a bag on the bed caught his eye, and he reached for it.

Child: "What 's that, ma?" She took the bag and placed it on her lap.

Mother: "Some cookies."

Child: "Me see." She opened the bag and let the boy look into it. He looked at his mother. "That mine?" he asked.

Mother: "Uh-huh." The child then returned to his toys and talked quietly with them. His mother looked at his activity, and remained silent. He pushed the stool under the bed. He walked past her and placed his heels on the lower rung of the bed and his hands on the upper rung; looked at his mother and moved his back against, and then away from the bed.

His mother cautioned, "Don't fall." The boy continued to do this. She repeated, "Don't fall." He gave up this activity, put his hand in the pocket of his bathrobe, and took out some coins. He handed them to her, stating, "Take 'em home, put in you pocket." The mother did so, without questioning the boy. He again placed his heels on the lower rung of the bed and swung back and forth. His mother looked at him and admonished, "Uh, uh!" He smiled at her and stated, "Da nurh let me out of bed-I didn't cry." while shaking his head.

He wandered away to the other end of the ward to play with the children there. The nurse on the unit brought him back, removed his bathrobe, and placed him in a sitting position in bed. He looked at the nurse and then at his mother, not speaking. The nurse placed a restraint binder on the child, explaining to mother the reason for this. The child touched his ear, and handled the johnny that was removed by the nurse. The nurse replaced the johnny on the boy. He silently looked at the nurse and then at his mother. The nurse stated, "Visiting hours are over. It's time for visitors to go, Mrs. Blank." She informed the child, "Mommy has to go now, mommy will be back tomorrow." As the nurse left, she stated, "I hope you will be able to come in tomorrow, Mrs. Blank." The mother approached her child, leaning over him, and placed her face close to his and asked, "Gonna kiss me?" The boy nodded, and kissed her. She in turn kissed him and stated,

"'Bye, 'bye now, don't cry." She moved away from him, looked back, lingered, and again stated, "'Bye, 'bye." The child sat up, did not answer, and began to play with his bunny that the nurse had tucked in bed with him. His mother left, saying goodnight to another mother nearby, and walked out the ward.

The boy covered the bunny up to its neck with the bed sheet, fixed its ears, and then bent them over the bunny's eyes. He released the bunny, and bent his own ears forward toward his face, while talking and smiling to the bunny. He coughed occasionally, as he hugged the bunny. He continually kissed the bunny over and over again, hugging and talking to the bunny in between kisses. He has displayed no outward sign that he is unhappy about his mother leaving him.

The mother of this three year old boy visited him for the first time on the third day after his admission. She had come to the pediatric unit to see the doctor only; she did not plan to visit her child, since she thought he would become too upset by seeing her there. After the head nurse encouraged her to visit him, and explained why it was important, the mother did go to her child.

As mother approached her child, she smiled, and greeted him. "Hello, Johnny! How are you?" He did not attempt to get up from his lying position in bed.

Child: "Ma, I want to go home." He did not cry, but stated this in a plaintive voice.

Mother: "You'll go home pretty soon, when you get better." The child sat up and looked at some comic books on his lap. He held some crayons in his hand.

Mother: "Who's that?" She pointed to a picture in the book.

Child: "A birdie."

Mother: "Where's the birdie? Got any girl friends in here? Who's boy are you?" He did not answer. "Who's boy are you, Johnny?" He began to talk about the book.

Child: "Don't go home, mummy."

Mother: "You don't want me to go home? No, I won't go home, O.K.? Do you love me?" She kissed him. "Where's daddy?"

Child: "My daddy's sick."

Mother: "Did you get out of bed and watch television?"

Child: "Yup, over there." He pointed to the television set. He then looked through the comic books.

Mother: "You know who that is?" No answer. "Did you talk much to the nurses?" No answer. "Answer me!" He nodded yes.

Mother: "Did you have breakfast this morning?"

Child: "Yup."

Mother: "What did you have?" He told what he had for breakfast. "What did you have for lunch?"

Child: "Hotdogs and beans."

Mother: "Do you love mummy?" He did not answer. "Who's that?" She pointed to a picture in the book. He pointed to the picture and said repeatedly, "That's my daddy, that's my daddy."

Mother: "Where are the little piggies?" She tickled his toes as she asked the question. The child squealed with delight.

Child: "Mumma." He tapped her shoulder. "Mumma, take your coat off." Mother did as she was directed and placed the coat on the table. She smiled as she watched his activities. He played with some plastic toys.

Child: "Mumma, here." He handed the comic books to her, except one.

Mother: "What? You're going to give me them?"

Child: "No." He began to color the comic book, and held it up for her to see what he had done.

Mother: "What is it?"

Child: "Donald Duck." She leaned near him. She questioned him about the pictures in the comic book. She helped him to pronounce some words from the book.

Child: "Put the crayons over here." He pointed to the bedside stand. She did as she was directed. The child picked up the rest of the comic books.

Mother: "What is this called? Is it a book?"

Child: "Yup."

Mother: "Is it a funny book?"

Child: "Yup." Here, mumma. Mumma, put this away."

Mother did so; "O.K.? Are you happy?" She looked at him and stated, "Listen little boy, I'd give you the world if I could."

Child: "Mumma, I want to go home."

Mother: "You can't come home until the doctor says so." She leaned close to him. He rolled up the comic book and tapped her nose playfully with it.

Mother: "You want me to go home?"

Child: "No, wait me."

Mother: "Wait for me?"

Child: "Yeah." He gave the book to her and directed her to "Put it back." She did so.

Mother: "O.K., what are we going to do now?"

Child: "Watch television." He could not watch television until a nurse was available to move his bed in front of the set. Mother gave him some plastic toys to play with.

Child began to whine softly, "Mumma, I want to go home and see daddy."

Mother: "Don't cry, big boy, don't cry." She put her arm about him and held him close to her. "Daddy will come tomorrow."

Child: "Don't go 'way."

Mother: "I won't go away." A few moments of silence ensued. The boy looked out the window, and mother looked down at him, resting her hands on the bed.

Mother: "Where's Gary and Marie? It's unfair to talk about them-he misses them." The boy did not respond to this.

Mother: "Did the cat get your tongue?" He shook his head. He looked off into space, with a finger in his mouth. She stood close to her child, and spoke in a whisper to him. He placed an arm about her shoulder.

Child: "Mumma, there's a cop outside."

Mother: "Where?"

Child: "Out there." He pointed to the window.

Mother: "Did you get out of bed?" He nodded yes.

Mother: "Where's your slippers?"

Child: "At home." He placed a finger in his mouth. He looked solemn.

Mother: "Will you give me a smile?" He shook his head no.

Mother softly asked, "Why? Why don't you smile?" He remained quiet. She began to sing a song to him. He scratched his ear a long time.

Mother: "Don't pick your ear. Are you going to smile?" He did not answer. He placed a finger in his mouth, and looked at a boy in the next bed. Mother looked down at him.

Mother: "What's the matter? What's the matter?" She tickled him. "Have you been a good boy? Have you?" He rubbed his eyes.

Mother: "What are you doing?" She kissed him.

Child: "This ain't my bed."

Mother; surprised: "Sure it is! You're sleeping in it, aren't you?"

Child: "My bed's at home. Mumma, don't go home."

Mother: "I'm here, and I don't want to go home." She laughed as she stated this. He poked a finger in the blanket.

Mother: "Smile! Do you love mumma? Do you love me?"

Child: "Daddy bring my shoes." He appeared as if about to cry.

Mother: "Yes, daddy will bring your shoes. Don't you cry, don't you cry! Have you been a good boy here?"

Child: "Don't go home."

Mother: "No, I won't go home. Don't you cry. You're a big boy. I'm staying here, I'm right here." She comforted him by hugging him.

Mother: "Lay down." He shook his head no.

Mother: "Why? I'm going to stay right here, don't cry. Is my big boy going to cry?" He appeared about ready to do so.

"My boy gotta be a big boy and eat all his breakfast." He sat up, with several fingers in his mouth, making sobbing noises.

Mother: "What's the matter? What's the matter? Mommy's right here." She hugged him close to her, to comfort him.

Mother: "Hey, what are you thinking about?" He did not answer. "What's the matter?" No answer. "Well, if you're going to cry, mommy's going to go home." He shook his head no. "Do you love mummy, huh? What's the matter?"

Child: "I want to go home."

Mother: "You'll go home tomorrow. Do you like the doctor?"

Child: "No."

Mother: "No? Why? I like the doctor, don't you?" He sat looking up at her, with his fingers in his mouth. A nurse came to take his temperature. He cried loudly and angrily. The nurse returned and removed the thermometer. Mother went to her child and leaned close to him. He began to quiet a little.

Mother: "Johnny, what is wrong? If you continue crying, I'll go home. All right, I'm going home." He began to cry loudly.

Mother: "Don't cry, daddy will come in tomorrow."

Child: "No!"

Mother: "Don't you want daddy to come in tomorrow?" He did not answer, but continued to cry.

Mother: "No more tears, smile a while, come on, sing a song. Come on, smile." She began to sing a song. He smiled at his mother's singing. "That's a boy, you're mommy's handsome kid." His crying began to cease.

Mother: "Do you love mommy? Do you love me?" He did not answer. Mother sat in a chair near the child. She asked him some questions, but he did not answer.

Mother: "Answer me! Do you want to go home tomorrow?"

Child: "Yeah."

Mother: "Well, be a good boy, give me a kiss, and I'll go home and tell daddy to bring your clothes in tomorrow."

Child: "Don't go." He appeared sad.

Mother: "I'm going home, I can't stay here. Tell me what's wrong, what's the matter?" He lay back in bed and then he sat up. She leaned close to him. "Do you love mommy?" Tears began to roll down the child's cheeks. A nurse approached to take the child's pulse. He cried loudly and called, "Mommy!" Mother wiped his eyes and stated, "Now stop it!" She attempted to divert his attention by talking about his sisters and brothers at home.

Child: "Don't go home!"

Mother: "Yes, I've gotta go home. I can't stay here. I've gotta go home. Now give me a kiss good-bye. I've got to go and talk to the doctor and then I'll go home."

Child: "No!"

Mother: "Don't cry. You going to be a big boy?" He began to cry.

Mother: "Ah! ah! ah! Don't cry! All right, I'm gonna go home. Give me a kiss good-bye." She returned to the side of the bed. "Listen, Johnny, I've got to go out and ask the doctor if you can go home tomorrow, O.K.? Huh?" She stood there, looking down at him. "What do you want?"

Child: "Stay here!" He continued to cry.

Mother: "I can't stay here. They won't let me stay here." He cried harder.

Mother: "Do you want to go home tomorrow or the next day? If you carry on like this you won't be able to go home." He continued to cry. "What are you crying for? Do you want to stay here?"

Child: "No!"

Mother: "Well, stop your crying. Wipe away the tears, wipe them away. Now stop your silly crying. Only babies cry. You're a big guy. Gonna give me a kiss, huh? I'll go home and tell daddy to bring back your shoes, O.K.? Now listen, if you cry, I will go. Big boys don't cry. No one needs to cry. Don't cry, big boy, don't cry." She put her arms around him. He sat there crying.

Mother: "I'm going to go now." He began to cry loudly. She looked at the observer and asked, "What do you do in a case like this?" She hugged her child and kissed him.

Mother: "What's the matter? I'm going to leave you. Mommy's got to go. Why? Why? Now stop! No tears. Mommy loves you so much." She hugged him once more, and left slowly.

She looked back, about to cry herself. As she left she stated, "I'll be back tomorrow." She walked away from him and out the ward. The child watched her leave, crying loudly, and kicking his heels against the bed. He became very upset, and attempted to stand up in bed. He cried, "Mommy, mommy, ma! ma!" loudly. His mother was talking to a doctor near the doorway where he could see her, and he kept calling to her, and crying at the same time. After she left, he cried for a long time, while sitting in bed facing the door of the ward.

The girl in this observation was three years of age. This was her first admission to the hospital

Child and student nurse were sitting at the table in the center of the unit.

Child: "My mother's comin' to see me today." At the same time, her mother had come into the ward and had heard this.

Mother: "How do you know she will?" Child heard her mother's voice. A look of surprise came into her eyes. She turned around, and upon seeing her mother, ran to her. Mother lifted child high into the air and both hugged each other and laughed. Mother sat down with child on her lap.

Mother: "Did they take a picture of you this morning?"

Child nodded yes. "Did they give you a needle?" Again her child nodded yes. "See, didn't I tell you that would be all they would do?" Child nodded yes.

Mother: "Mommy brought you something."

Child: "What?"

Mother: "What? Look in the bag. Look in there, everything's for you."

Child: "Kin I look?"

Mother: "Sure!" Mother had brought a book and an apple for her child. Mother wanted to know the results of the tests and informed child that she would be right back; that she wanted to talk to the doctor. Child accepted this and began to color a book. When the mother returned, the child again ran to her. Mother picked child up in her arms and sat down with the child on her lap.

Child: "I want to play with the ball."

Mother: "O.K., go ahead and play ball. Child played ball with a student nurse.

Mother: "Robina, who came to see you last night?"

Child: "Angelo."

Mother: "Dr. Angelo? Did she come to see you last night? What did you do last night, did you cry?" Child nodded yes. "I told you I would come back, you didn't have to cry."

Child asked mother for some gum, because mother was chewing gum.

Mother: "I can't give you any gum, they won't let children have gum." Mother threw her gum into the wastebasket.

Mother: "Freda cried last night." The child became interested, and looked at her mother.

Child: "Why?"

Mother: "Why? Because she didn't want you to be in the hospital. The children miss you." Child watched mother while she talked. As child colored the book, mother informed several student nurses nearby, that none of the other children at home could sleep at their regular time for sleep, because they were upset that Robina was in the hospital.

Mother: "What happened to the crayons? They're all broken. What happened to your crayon box? Where is your gown, didn't they want you to wear a gown today? Did you wet your bed last night?" Child indicated no. Child peeled paper from

the crayon and let it fall to the floor.

Mother: "Hey! pick up the paper from the floor, you don't do that at home, do you?" Child pouted, but picked the paper from the floor.

Mother: "Did you take a nap today?" Child indicated no.

"Did you cry? I'll bet you did cry." Child shook her head no.

Mother: "Hey! Don't eat the crayons. Want me to take them away from you?" Child sulked at this remark. A ward aid commented about how healthy the child appeared.

Mother: "She's spoiled. Did she say any naughty words?"

Mother lifted child onto her lap.

Mother: "Let me see where they put the needle." Child held out her arm. Mother hugged the child.

Mother: "Mother missed you, you know. You might go home tomorrow. Did you eat your breakfast?" Child shook her head no. (Child had a special test that morning). "Did you have ice cream today?"

Child: "Yes."

Mother: "Are you remembering your manners?" Child nodded yes.

Mother: "Did you say grace this morning?" Child nodded yes. Child wanted to color and did so. She pointed to a picture.

Mother: "That's a duck."

Child: "A duck? Duck! Duck!"

Mother: "Yes, a duck. What color are ducks anyway?" She stated this as she was choosing a crayon for her child.

"Here, use this color." Child colored, covering all the page, while talking about ducks.

Mother: "You know, it's so quiet at home, cuz you're not there. There are no fights." Child did not respond to this. She offered crayons to another girl. After doing this, she smiled shyly. Child sat near her mother and showed her a book. Child pointed to a picture in the book. She said "Frog."

Mother: "Who told you that was a frog?"

Child: "A man."

Mother: "What man?" Mother lifted child onto her lap, and hugged her fiercely, and said, "Golly, what am I going to do with you?" She playfully slapped the child's bottom. Child smiled happily. She wriggled off her mother's lap and reached for a small handbag on the table.

Mother: "Uh, uh! That's the other girl's handbag. Put it back." Child did so and then walked away from her mother.

Mother: "I might just as well have stayed at home."

Child: "Why?" She turned around and faced her mother.

Mother: "Because you're not paying any attention to me.

When I go, I don't know how you're going to take it."

Child: "You gonna stay here?"

Mother: "I'll stay here for a little while to make sure you eat your dinner."

Child: "I want some milk."

Mother: "You want some milk? Then ask the nurse for some milk." As child did this, mother stated, "When her dinner comes I'll sneak out so it won't bother her."
Child returned with some milk and drank it standing near her mother.

Child asked mother, "What is her name?" (A girl sitting at the table).

Mother: "I don't know her name. If you stand near her and ask her, maybe she would tell you." Child does this shyly. She returned to her milk after asking the girl her name.

Mother: "Where's the book I bought you?" Child ran to her bedside unit and returned with the book in her hand, and gave it to her mother.

Mother: "There it is! Want me to read it to you?" Child nodded yes.

Mother: "Oh, boy! Look! Someone has written your name in the book." Child looked; she then wandered to a student nurse who was reading to another child and showed the nurse a small book she had in her hand. After this, she took the book from her mother and carried it to the student nurse. She and the nurse looked through it. As the nurses left the unit, the child stated; "They're my nurses." Child showed the book to her mother, who turned the pages.

Mother: "What's that?" Child did not know about the pictures. Mother identified them for her child. She began to read the story. Child stood near her mother, with her hand on her mother's chest.

Mother: "Mommy can't read any more, the rest has been torn."

Child: "How about this?"

Mother: "That's a frog." Another child reached for her book. Child swept the book away.

Child: "That's my book! It's not her book!" She looked reproachfully at the other girl. She returned to coloring her book. She then ran about the unit, and then returned to her mother.

Mother: "You don't look sick, your a phoney." Mother looked at the child; the child pouted playfully. Mother leaned toward the child, and the child fell into her mother's lap. They laughed.

Mother: "Oh, by golly, you are sweet." Mother then told child what clothes she would bring tomorrow to take her home. Child played pat-a-cake with her mother and slapped her mother hard.

Mother: "Stop that!"

Child: "Why?"

Mother: "Because that hurts." Child slapped her mother. lightly. She then slapped hard again.

Mother: "Stop! You're too fresh! I don't appreciate that at all!" Child then rocked back and forth on her mother's lap. She slid off, and went to her bedside unit, and returned with a new toothbrush and toothpaste.

Child: "That's for me, not for her, or her." She opened

the box and displayed the toothpaste tube. At this time mother appeared in deep thought, and did not relate with her child. She then turned her attention to her child, while child handled the toothbrush and toothpaste tube, talking all the while. She dropped the toothbrush on the floor.

Mother: "Oh, let's stop that, Robina, you're going to get the toothbrush all dirty from the floor. I hope they bring your dinner, soon." Child walked around the table several times, watching a social worker talk to a child on her lap. Child wanted the attention of the social worker.

Mother: "Come here, Robina. I want to put a bib on you. It's time for dinner." After the bib was put on and tied, the child walked away and began to untie it.

Mother: "Robina, you're not going to get your supper until it's on right! Come here!" The child drew away. She apparently wanted to have a nurse tie it for her. This was done, and the tray was placed before her at the table. The child began to eat.

Mother: "Bina, mother's going to go and make a telephone call. O.K.? You going to be a good girl?"

Child: "You going to come back?"

Mother: "I don't know if I'll be able to come back this afternoon, honey. Tomorrow you will be coming home."

Mother stood up, and walked away to the door of the ward. She returned and kissed her child. "You be a good girl, now, O.K.? and I'll be back tomorrow, O.K.?"

Child: "O.K. 'Bye."

Mother: "'Bye, Bina." Child began to eat her food, and did not appear upset at her mother leaving. She continued to eat her meal, while watching the other children at the table.