

## JAMES AND JOYCE ROBERTSON



**“He will always be remembered as the man who revolutionised children’s hospitals”.**

*John Bowlby on James Robertson*

James and Joyce Robertson met when they were students in the late 1930's. During the Second World War they were both conscientious objectors and whilst they were working with a pacifist service unit in the East End of London they heard about a woman in Hampstead who was giving shelter to East End mothers and children who had been bombed out of their homes. The woman was Anna Freud, child psychoanalyst and daughter of Sigmund Freud, and both James and Joyce went to work with her at what was to become the Hampstead Wartime Nurseries. They stayed at the Nurseries throughout the war with Joyce working as a student caring for infants and very young children who had lost family life through the bombing of London, and James working on the organisation of the maintenance and fire-watching services. In addition, James became the social worker. The practical teaching they got from Anna Freud on the psychological development of young children formed the theoretical basis for their future work.

**“These were important years and inspired many of us to go on working with young children in one way or another”**

*James Robertson on his time at Anna Freud’s Nurseries*

A wartime Diploma in Social Science led James to LSE qualify as a psychiatric social worker in 1947 and in 1948 he went to work with John Bowlby (the pioneer of attachment theory) at the Tavistock Clinic. The task was to make direct observations of the behaviour of young children during separation from the mother. The easiest place to get access to numbers of young children separated from the mother was in the children’s wards of local hospitals.

Visiting hours on children’s wards at this time were severely restricted. Some hospitals did not allow parents to visit at all, others only allowed them to see their child through partitions or whilst the child was sleeping. In fact the hospitalised child was considered essentially a ‘biological unit’, far better off without the disruptive effect of their parents, especially as the parent might bring infection in to the ward with their visit.

Observations were made at the short stay children’s ward at the Central Middlesex hospital (parent hospital of the Tavistock Clinic), other London teaching hospitals and at the long stay TB wards of Harefield hospital. Children with TB were frequently

nursed in hospital for two or three years with very little contact with their parents. Despite the doctors and nurses being competent, efficient and caring they seemed unaware of the suffering around them.

James observed that the children initially protested at being separated from their parents but then ‘settled’, and eventually became quiet and compliant. These stages were seen by many at the time as the natural process of the child settling in to the ward, but his observations suggested otherwise. He formed his ‘phases of response’ theory – Protest, Despair and Denial (Detachment). The ‘settling in’ was in fact a despair and hopelessness at their situation. If the separation went on long enough the young child could become ‘detached’, denying the need for the parent.

**“There is a tendency for even the best-educated and the best-motivated of people working with young children to become to some extent habituated to (their) states of distress and deviant behaviour... and (they) will in time develop a second skin against being upset....”**

*James Robertson*

At the British Paediatric Association annual conference in early 1951 Professor James Spence sweepingly attacked James Robertson’s presentation of his observations and outline of ‘Protest, Despair, Detachment’. Other paediatricians were considerate but not ‘lit up’ about Robertson’s concerns.

**“I had a sense of the inadequacy of words to convey what I saw and how I understood it”**

‘By professional aptitude colleagues at the Tavistock Clinic were ready to accept what he said, but the problem was one of description and evaluation. He knew that no matter how well he chose the words each listening colleague could construe them differently and have differing impressions of the child. It seemed well nigh impossible to convey satisfactorily images of the child’s behaviour: to paediatricians because they were too well defended, in his view, to empathise with the subject, and even to well-oriented colleagues because of the limitations of words.

The answer came by chance. James read somewhere that visual communication pierces defences as the spoken word cannot do. It allows what is shown to be examined and re-examined. That was the answer. He decided to attempt a film record of a young child throughout a short stay in hospital. Misunderstandings of verbal descriptions would be avoided; everyone in a group

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would see the same scenes, while sequences could be viewed and reviewed in order to heighten perception and understanding through repetition until the gaps in understanding had narrowed. The child would be seen longitudinally, day after day, following the changes of state and behaviour not noted usually amid the preoccupations of ward work. The behaviour of one child would be seen over a number of days and the inadequacy of words would be overcome, and the immediacy of the medium of film would ensure that it would always remain vivid and relevant.

A spring-wound 16mm cine camera, a hand-held light meter and 80 minutes of black and white film were purchased in mid 1951. James Robertson had never handled a cine camera before. He studied the handbook over the weekend and then exposed one precious 4 minute reel of film on the family.

**“With that amount of practice I had to begin the single-handed project, to load and unload the camera without assistance and to keep the ward accepting of what I was doing.”**

The resulting film completed in 1952 was *A Two Year Old Goes to Hospital* ([link](#)), and is regarded as a classic of national and historic importance; a copy is preserved in the National Archives. The film shows Laura aged two who is in hospital for eight days for a minor operation and it demonstrates clearly the subtle ways in which she shows or conceals deep feelings of distress. Then she becomes quiet and ‘settles’ but by the end of the stay she is withdrawn from her mother, shaken in her trust.

“Without preaching it bears a message of reform” (Contemporary Psychology review of ‘A two year old goes to Hospital’)

After viewing *A Two Year Old Goes to Hospital* some paediatricians and nurses were won over and changes to visiting hours on children’s wards did begin to happen. It was often the more senior professionals who were resistant James noticed, the younger ones being more open and accepting of his findings.

In 1958 James made his second and contrasting film *Going to Hospital with Mother* which shows Sally, aged 17 months, having her mother stay with her throughout her five day hospital stay for a minor operation. The film shows Sally secure in the presence of her mother and surviving the experience of investigation and hurt without becoming depressed and withdrawn, and as lively and cheerful at the end of her stay as when she was admitted. This arrangement is shown to be also very practical, and helpful, to the nursing staff.

By 1957 professional and public concern about the whole issue of children in hospital had become sufficient to cause the Minis-

ter of Health to appoint a Committee on the Welfare of Children in Hospital (the Platt Committee), which invited both professional and lay organisations to submit evidence and so along with others James Robertson presented his original findings to the Committee. James sensed that now the time was right to ‘go public’ with his findings. Due to their upsetting content and potentially disruptive influence the two films he had made had only been available to professional audiences so far. So James gained the co-operation of the BBC to make a programme based around excerpts from the two films. However at the last moment the BBC pulled it, explaining that they had consulted ‘medical opinion’ and as a result felt that the programme could cause too much anxiety to ordinary families, which they did not want to do.

Left feeling rather angry James took the advice of Sir Harry Platt, chairman of the Welfare of Children in Hospital Committee, and speedily shaped the memorandum he had submitted as evidence to the Committee into a book ‘*Young Children in Hospital*’, which was published in 1958. The book gained a lot of very positive attention in both the professional and lay press in Britain and throughout the world, and was translated into nine languages.

The Platt Committee subsequently went on to adopt virtually all of James Robertson’s recommendations in its 1959 report. Notably it recommended that children should not be admitted to hospital if it can possibly be avoided, that parents should be allowed to visit their child whenever they can, and to help as much as possible with their care, and that consideration should be given to the admission of mothers with their children, especially if the child is under five. It was the Platt Report that paved the way to involving the community in putting pressure on hospitals to allow parents to visit children in hospital, and gradually to allow them to stay with their children.... Success!



Joyce Robertson (centre) with her daughter, Jean, and Lydia Vulliamy, co-founder of Concord

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### YOUNG CHILDREN IN BRIEF SEPARATION - SERIES OF FIVE FILMS 1967-1976

By the 1950's much research had been published about the general effects of separation from the mother in early childhood, but mostly it was retrospective and in the form of follow-up studies. The few direct observational studies had been done exclusively in hospitals and other residential institutions, as with the Robertson films. The drawback of this was that it was impossible to differentiate the child's response to being separated from their mother to the child's response to other factors such as illness, pain and multiple caretakers. So the literature on early separation was mainly a literature on an assortment of factors - among which loss of the mother was only one.

At this time opinion was divided about how important the various factors were in a child's distress at separation, some experts believing that acute distress is the usual response of any child between six months and four years to separation from its mother regardless of circumstances and quality of substitute care. Others believing that the variables, such as the quality of substitute care, made a vital difference.

**“Maternal separation has never been studied under pure conditions”; that is, other, complicating factors were always present”**

*Leon J. Yarrow,  
Paediatrician and Psychologist, 1961*

So, moving on from their previous work, Joyce and James Robertson decided to try to clarify the subject by looking more closely at the influence of variables on the behaviour of healthy young children during a ten-day separation from their mother. In order to achieve 'maximum coverage' they decided they would become foster-parents to a series of young children, giving care for twenty-four hours a day and making written and filmed observations while doing so.

In order to facilitate this Joyce left the Hampstead Well Baby Clinic where she had worked for the previous ten years and joined James in his work, and after a number of difficulties they

found enough funding to enable them to commit to the project. Between 1967 and 1976 the Robertsons filmed five children who needed looking after whilst their mother was having another baby. KATE 1967, JANE 1968, JOHN 1969, THOMAS 1971 and LUCY 1976

They took Kate, Jane, Thomas and Lucy into their own foster care and filmed John during his stay in a residential nursery. This became the series Young Children in Brief Separation. (link). 'John' showed the Protest and Despair of separation in an institution, already recognised and shown in 'A Two-year-old Goes to Hospital'. The Robertsons' 'Young Children in Brief Separation' research, by providing the young child with a substitute mother, showed that Protest, Despair and Detachment is not inevitable when the young child is separated from the mother. This positive finding contributed to the closure of residential nurseries and the expansion of foster care for young children.

Each film is a complete study and stands in its own right. But as a series the films complement each other by showing how the young child's ability to cope with separation from the mother is affected by age, level of maturity, previous parent-child relationships, length of separation and the quality of substitute care. JOHN in particular has a use beyond teaching about child development. He is a microcosm of the human dilemma of how to give appropriate care to those in need, whether they be infants, the aged, the mentally ill, or prisoners, all of whom need stable supportive relationships.

**“We are proud to have been associated with James and Joyce Robertson and their groundbreaking and compassionate work over many years. The films, which revolutionised residential care for young children, continue to be in great demand throughout the world. All the James and Joyce Robertson films are available from Concord Media.”**

*Eric Walker and Lydia Vulliamy, co-founders of Concord Media*

See also [www.robertsonfilms.info](http://www.robertsonfilms.info)