Establishing Bonds in the Caregiver-Baby Relationship: The Support Offered by Caregivers in the Maternal Function Exercise

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summary

The baby is a human from birth. Based on this Winnicottian premise, the research was elaborated, observing how mother-child relationships are fought within a foster home, how babies arrive at the institution, and what care they are offered for a good psychic and physical recovery after being neglected or mistreated by the family. The purpose of this article was to observe the mother-baby relationship,
mother in the sense of maternal function, to understand how the affective bonds of the child with the caregivers are established. This field and bibliographic research was based on the theories of the psychoanalysts John Bowlby, René Spitz and Donald Winnicott.

**Key-words: Bonding, Holding, Maternal Function, Mother-Baby Relationship.**

**INTRODUCTION**

This research was carried out in a shelter in Madalena, Recife-PE, the institution is called "Lar do neném". An interview was made with the Psychologist, whom we will call M. and with the Social Worker, who we will call T. The children arrive at the institution through the tutelary council so that the institution can make the temporary reception of children from 0 to 3 years who were beaten by their families. The team is multidisciplinary, counting on psychologists, social workers, nutritionists, doctors, educators, caregivers and volunteers. The research analyzed the relation of the caregiver to the activity of maternal and child care, which corresponds to the maternal function.

A good mother-baby relationship is very important for the healthy development of every human being. We direct our research on the relationship between the caregiver and the child, where this relationship is more direct and intense with the baby. Winnicott (1980) points out that in order to have quality in the contact between mother and child and the establishment of bonding, it is necessary to dedicate time in the very initial phase of the baby's life. For Winnicott (2000) the function of the initial mother-baby bond is related to a kind of continuous life support in the first months of life. For this author, in the initial period of the baby's life a close relationship is necessary, through which the mother can even predict the baby's needs.

Insufficient mothering harms the baby, hinders its development. Separation from the mother causes illnesses such as anaclitic depression and hospitalism, affective deprivation disorders of the baby that reverberate throughout her small, fragile body. According to Spitz (1957) anaclitic depression and hospitalism show that a great deficiency in object relations leads to a suspension of development in all sectors of the personality. In this way, such relationships play fundamental roles in the child's development.

For Bowlby (1989), any form of behavior that results in a person achieving and maintaining closeness to some other individual, considered more apt to deal with the world, will be characterized as attachment behavior. He further states that attachment behaviors refer to a set of innate behaviors exhibited by the infant, which promote the maintenance or establishment of closeness to his or her main care provider, the mother, most of the time. The behavioral repertoire of attachment behavior includes crying, making eye contact, clinging, snuggling, and smiling. All this discussion will be contextualized from the visit that was
made to the home of the baby, in the observation and listening of how to establish the affective bonds between caregiver and baby.

The physical and psychological health of a child hosted by an institution

Due to factors of various natures, many children are removed from their home and consequently separated from their parents and family members, it is often possible, through child care institutions, to ideally, when possible, child in their family nucleus, but there are cases in which separation becomes inevitable, and when this type of event happens, as for example: in some cases in which the psychological abandonment also tragically joins the physical abandonment through the lack of that material and moral assistance that parents and relatives have an obligation to provide;

In these cases, the child is hospitalized in public or private institutions for the protection and care of the child, in which attempts are made to produce, but very rarely with appreciable positive results, a family climate in order to compensate for the sensation of loss and lack of affection. (D'angelo, 1998, p.58)

In an attempt to improve the quality of life of children who go through processes that separate them from their homes, several studies have been developed to investigate the main problems as well as to discover the most effective ways of solving them. According to these studies, we can highlight the Austrian René Árpád Spitz; physician, psychoanalyst, professor and researcher specializing in children's psychology. Spitz (1965) found that among several forms of family separation, one significantly influences the maintenance of the normal physical and psychological health of the child, it is the breakdown of the mother-child relationship.

(...) the care of the mother gives the baby the opportunity for affectively significant actions within the framework of object relations. The absence of the mother is equivalent to emotional deprivation. (SPITZ, 1965, p.210).

The studies indicate that the lack of emotion in the first years of life, due to the deprivation of the object relations, can cause damage in the psychophysical development of the child. The reception process carried out by the institution interviewed by a team of professionals in the areas of psychology, education, social and health, receives children in the age group between 0-3 years, this team takes into consideration the possibility of the presentation of some anomalies in child development, especially those related to the absence of relatives, giving greater emphasis to the absence of the mother during the reception of children who will be temporarily in their care. In this context we can see that the responsibility of the institution is at a very high level, because they welcome children who are still very young. It will assume the role of the family, while the role of the parents will be assumed by the caregivers, all this work has relevant importance, since as Spitz (1965) affirmed, the experiences and actions lived by the child in the first year
of life will contribute to the formation of personality.

Contemporary research on child psychology increasingly emphasizes the role played by the affective bond between a child and the person who cares for it. Such a connection, in fact, is the fundamental premise for harmonious and balanced development. (D'ANGELO, 1998).

Through the information gathered in the interview carried out in the day care center, we were told that, over time, these affective bonds (child-caregiver) arise and are reciprocated by the team that is always in the process of training and specialization, for a better performance of their profession, treating the children with equal affective participation.

All this work seeks to prevent health problems to which children are exposed due to their vulnerability that can increase when the social and environmental structures undergo a sudden change.

Through the interview conducted with the psychology professional working in that institution, we can observe that there is a work in order to avoid a prolonged separation between the host and the family. This can prevent children from having psychological problems such as affective deficiency diseases defined by Spitz, who classified them into two categories, both of which present quantitative and qualitative factors: inadequate relationships between mother and child are the factors qualitative, while insufficient relations are the quantitative factors. "... all the children in our sample who developed this syndrome had a common experience: at one time, between the sixth and eighth month of life, all of them were deprived of their mother for a period of almost uninterrupted three months . "(SPITZ, 1987).

In the Anaclitic Depression the evolution of symptomatology is as follows: in the first month, children become tearful, demanding and tend to cling to the observer when he or she can establish contact with them; in the second month, crying becomes a groan. Weight loss begins. There is a halt in the development coefficient; in the third month, the children refuse contact. It happens to remain most of the time prone in bed, a pathognomonic symptom, insomnia begins, weight loss continues, there is the tendency to contract illnesses; the motor delay becomes generalized and gives rise to facial stiffness, after the third month, facial stiffness consolidates the crying ceases and is replaced by whining, The motor delay ceases and is replaced by lethargy, and the quotient of development begins to decline. (SPITZ, 1987)

The author still ratifies that in the Hospitalismo, the disturbance assumes other forms. One of these is that if a child suffering from anaclitic depression remains deprived of his or her mother, without receiving someone who assumes this function, for a period of more than five months, there will be further deterioration of their condition.
The work offered by the institution interviewed to the community aims to combat the appearance of such diseases in the child that is received, seeking to fully address the needs of the same.

**Caregivers in the exercise of good enough mothering**

For psychoanalysis, in order to be a mother, it is not necessary to have begotten the child, to be a mother does not only mean biological maternity; it also demands feelings and attitudes of adoption that stem from the desire for the child. (DOLTO, 1996). A woman or a man can perform the maternal function. The maternal figure is the person who is being the auxiliary ego of the baby, responding well enough to the physical and psychological needs of the newborn, as we already know, the baby is in the first months of life is totally dependent on the mother.

According to Winnicott (1983), good emotional development will depend on effective maternal care. The concept of holding is used by this author for his theorization of the first moments of mother-baby relationship and its influence on the development of the child. This concept is not only related to the physical care of an infant to the baby, but also to what the environment that welcomes it can offer. Winnicot (1983) refers here to the maternal-infant relationship, which occurs early in infancy, when the infant has not yet been able to separate the self from maternal care, where there is still an absolute dependence on its psychological sense. He further states that it is at this stage that the baby will need an environment that can provide what it needs. Their physiological needs are met, and at that moment, Physiology is not separate from Psychology.

Caregivers of the institution where the observations were made play the role of mothers. They carefully observe the needs of each child, feed them, put them to sleep, play with them, are always willing to meet the physiological and emotional demands of each child. They are there offering physical and emotional support to each child; since the babies arrive very debilitated in the host institution, the caregiver is the support of the baby. The work done by the caregivers is a job that requires professionalism and a lot of technique, but it is impossible that there is not an affective relationship, says the psychologist. And children need not only have their physical needs met, they need in the same proportion of great care, protection and affection.

Child care revolves around the term "hold", especially if we allow its meaning to widen as the baby grows and his world becomes more complex. The term can very well include the function of the family group, and, in a more sophisticated way, can also be used to characterize the work with case, as it happens in the professions whose basic characteristic is care. (WINNICOTT, 2006, p.53).

The term hold, which is what Winnicott calls a holding company, has a very broad and very important meaning for understanding the maternal function. To hold means: to make sure, to establish, to support, to
prevent that it falls, to grasp, to contain, to hold, to guarantee, to affirm, to assure, to reassure, to calm
down, to settle down; not to undo; affirm, guarantee; support yourself, be on your guard. This is the
performance of caregivers, among all these functions of insuring, the most are exercised by them are to
reassure, affirm, serenely, settle. Babies who arrive at the foster home are very restless, lost, frightened,
they were in a broken family, families that attacked them, by physical violence or drug-using mothers or
fathers, a family that was not able to promote an environment favorable for their psychological
development.

The personality base will be well-placed if the baby is adequately insured. Babies do not remember that
people held them well, however, they remember the traumatic experience of not having been adequately
insured. Bad treatment are the words that best express the effect that has on the child, the fact of holding
badly. These types of maltreatment are very significant, they contribute to a general sense of insecurity,
and that the development process is delayed by reactions to maltreatment, which break the continuum that
is the child.

Primitive emotional development comprises three main tasks: the integration of the self, the psyche that
inhabits the body and the object relation. From these matched demands we will have a good enough
maternity. The touch is fundamental for the constitution of the child's psychic skin, so that it goes from a
crumpled being to an integrated being, talking, looking, all that care must be primitive and primordial for
babies. And all these care were found in the relationship between the caregiver and the baby.

Very quickly the baby turns into a person easily identifiable as human, but in fact, he has been human
since birth. The sooner we recognize it as such, the better. (WINNICOTT, 2006, p.57).

A good enough mother is one who meets the needs of the baby with excellence and for these demands to
be met, it is necessary first for the mother to recognize the baby as human from birth, a human who is
more inexperienced, more fragile, but who has always been gifted of an enormous need for care,
protection, food, rest, affection. Caregivers in the exercise of maternal function conceive of these ideas to
establish a satisfactory affective bond for good child development.

**The formation of bonds in the care-baby relationship**

In our interview when we questioned the issue of establishing links between caregivers and the child it
was clear evidence that these bonds naturally settle, "the child chooses a caregiver," says the institution's
psychologist. The caregivers begin to perform temporary work as a mother, and consequently there will
be an identification of a maternal figure - even if temporary, as in the case of the institution that shelter
children for a certain period of time - generating bond and attachment.
Bowlby (1969) argues that the child's attachment to his mother is the result of the activity of a number of behavioral systems that makes bonding inevitable, predictable; he mentions that this maternal figure does not have to be the natural mother, but it can be that person who dispenses maternal care to the child and to whom she is attached. Children who arrive at the institution - often because of reports of ill-treatment or judicial determination - are fragile, in need of care not only in the physical sense - undernourished, with skin diseases, respiratory problems - but also lacking in love, cozy, touch, warmth. Then, this role of establishing affection supply is performed by caregivers, since the biological mother is unable to do so.

The establishment of bonds in the first years of a child's life is essential for their healthy physical and psychic development. The institution interviewed receives children from 0-3 years old in a situation of helplessness, as already mentioned; therefore, that they tend to be easily attached to someone who offers them care. Unlike Freud, Bowlby does not agree that the child attaches himself to a person only by receiving food supply, but that, in the first instance, attachment happens because the child receives affection. In this first moment of the child, according to Bowlby (1969), the attachment behavior is always directed to the maternal figure; so the importance of this support early in life. The child clings to feel protected, is part of his instinct for survival; attachment is also necessary to enable the child's socialization and learning.

With an opportunity for rapprochement and bonding that is offered to the institutionalized child, it begins to direct its attention to a specific caregiver, taking it as a reference, seeing it as stronger and / or wiser. Looking at this view we see the emergence of the bonding behavior developed by Bowlby (1979). He further states that such behavior has some characteristics: that it is directed to one or more specific individuals with a clear order of preference; a connection persists for much of the life cycle; the threat of loss of this bond generates anxiety; the more experiences a child has with a person, the more likely it will be for that person to become attached to the person who most cares for him or her; the bonding behavior differs from feeding behavior and sexual behavior. According to the author, the behavior of the parents or any person who assumes the role of caring for the child is complementary to the bonding behavior. For this to be effective, the caregiver must be available and ready to go when asked, and to provide help when the child needs it most.

There are certain responses that lead to attachment behavior:

Crying, smiling, tend to approach the baby's mother and keep him close to him. Two others, follow and approach the mother of the baby and keep it close to her. The role of fifth, suction, is less easily categorized and requires detailed examination. A sixth call is also important: at any moment, after four months, a baby will call his mother with brief, high-pitched calls and later shout his name. (BOWLBY, 1969, p.223)
It is important to emphasize the provision that these caregivers - in the exercise of the maternal function - must have the "weapons of seduction" that the child uses to guarantee the attention of the other. This caretaker figure being present when requested will generate safety in the child, Bowlby's "secure attachment", enabling her to grow and become more and more independent.

"No form of behavior is accompanied by feeling stronger than attachment behavior" (BOWLBY, 1969, p.224). Children who are effectively given maternal care - whether offered by their own mother, or caretakers, as the case may be - will reciprocate their care, their affection, loving them, being happy to see them, feeling safe, calm.

FINAL CONSIDERATIONS

The children who arrive at the institution of Lar do Neném are deprived of what is necessary to them in the beginning of life, not only the food, but also the affection, mainly. All the theoretical theorists of our article assure that without affection the child gets sick, gets sick until it reaches death.

Far from their mothers, children who come to the institution soon need someone to provide them with maternal care, and this maternal function is soon assumed by caregivers, who provide them with what is necessary for survival, protection, and learning. Such characteristics are intrinsically related to attachment, they are their mode of functioning. And this attachment becomes the relationship of bond between the child and the caregiver, it will choose as the figure of attachment the one who most identifies.

As Spitz (1987) has already stated, the absence of maternal care will generate in the child several diseases named as affective deficiency diseases of the baby. It is also necessary to look at the physical condition of the child, many of whom arrive very ill-treated, with skin, food and respiratory problems; for this it is necessary the presence of a multidisciplinary team, composed of doctors, nutritionists, social workers, psychologists, so that a physical and psychic restoration work of this child is done.

The environment also has a great contribution to this restitution of the conditions with which these children arrive at the institution. In the institution interviewed, we identified a very favorable environment, which allows the children to adapt not too long. It was possible to observe that they cherish the individuality of the child, each one has its own cradle or walk, characterized and with its name, its separated clothes; nurseries are divided by age group; the schedules and activities are well divided.

Finally, all this institutional structure allows for the amelioration of the pain that the child has been experiencing since being removed from the family who was no longer attending to their needs. A suitable place, a favorable environment and people willing to give what the child needs to develop, as is the case
of the caregivers, will cause spontaneous bonds to be formed and the attachment consequently be directed to this figure of care.

REFERENCES


