

The Hospitalized Child

By Margaret Sutton Briscoe

IN THE good old-fashioned days there was a popular notion that any woman physically capable of bearing a child was mentally competent to care for the helpless little creature. In those times young mothers took little or no pains to educate themselves along scientific lines of nursery care; indeed, there was no opportunity for such training. The lore of the nursery?—it would descend like fire from heaven upon the young madonna. Along with that proverbial “love” which the baby is advertised to bring with it was supposed to arrive nursery wisdom.

When we compare this state of affairs with the present situation, contrast the ignorances of treatment we encountered with the favoring conditions surrounding a latter day infant, we might ask, “If all these anxious and surrounding precautions are needful to preserve life, how did we survive?”

The old supposition that maternal instinct, untutored and unlearned, might be depended on to preserve the race, cannot be altogether based in error, for here we are, persistently, though left to the mere mercy of mothers without training, who knew not one germ from another, who read no books on hygiene, who took us casually as to health laws, and who, last and worst, rocked us to sleep every night of our little lives!

There was then only the good, old family doctor to rely on, and he treated old and young impartially, relying upon and leaning heavily against that same maternal instinct that was a bit over-worked, perhaps, in those less scientific days. Now, in every city of any size we find physicians whose sole and sufficient occupation is the care of children and the study of their needs.

“‘The Book’ in my father’s house meant the Bible,” states a young husband. “In our home it means a volume my wife keeps on her candle table. It may be an inspired writing—I don’t know. She draws it on us continually. It’s a book on the care of young children by the babies’ pope.”

It is to these experts, popes and cardinals of popes, issuing their protocols in every city, that our young mothers now look for their instruction, and receive it in detail, with nothing spared, nothing left to the imagination, no chances taken, no dependence whatever placed upon that old staff of nursery care, maternal instinct. It may not be quite safe, quite sane, to say that to any instinct, untrained and unguided, may be wholly trusted the most responsible tasks; but neither does it appear quite safe, quite sane, to belittle those important instincts, so delicate and perceptive, that have in the past proved capable of great accomplishment.

As a case in proof we may cite the story of the poor afflicted child dragged from clinic to clinic, her case interesting because peculiarly obscure. When she worked up at last through subordinates into the clinic of the greatest diagnostician of them all, that aged prophet, as experienced in human life as he was in his profession, glanced fleetingly at the patient, listened uninterestedly to the intricate case history, but sat with deep eyes fixed on the child’s silent mother, a plain, hard-working woman, unintelligent of face, without apparent powers of observation, without vocabulary. To her he spoke at last briefly:

“What do you think, Madam, is the matter with your child?”

The answer was instant, spoken with patient humility, but with the readiness of one who had long held a fixed opinion for which no one had hitherto thought it worth while to call.

“I think she has thus and so, Doctor.”

It was not a specific disease she named, but certain neglected symptoms quoted, as, in her mind, directly responsible for the serious results. The departure indicated by her homely phrases was illuminating. It was the testimony of the closest and most accurate observer of them all, one intimate with the patient. If what she stated was correct, the case was absurdly clear. The consulting physician looked the child over

with a new interest. "It's what she has," he said briefly. "The mother knew." And the next case was called.

Here was an example of the perfect combination—pure science, pure instinct, working as one, neither arrogating to itself an excathedra position.

Perhaps it was the overworking of that old adage, "A mother should know," which has provoked in the profession a degree of re-actionary brushing aside of old reliance on mother-instinct. It is true—too true—that ignoring the mother appears (in all respects, be it stated) what the child specialist of today inclines toward. Relying first on the report of trained nurses, or of trained nursery maids, the mother of an ailing child is more often than not kept out of the sick room.

The Child's Natural Nurse

Who began this quarrel?—if so it may be called. Why is it (there must be some good reason) that the profession which has in charge the care of the nursery health relies less than ever before in race history on the report, the clear perceptions, the understanding of the child by the child's mother, its natural nurse? To assert that the scientifically trained nurse has proved the more efficient observer is not a sufficient explanation. There should be invaluable reports as to the condition and the history of a child-patient that only a mother can know.

Undoubtedly young mothers are spending more time than ever before in educating themselves in a knowledge of health laws, of nursery hygiene. Why then is it becoming increasingly evident that our nurseries are not in general presided over by mothers who best understand the heart of a child, who *know* their children, as children?

The demand of physicians has become very technical, minute and exact reports are more than ever required; but this demand has by no means eliminated a required understanding of the child, with personal and childish identities. It is easy to see how a vicious circle might here have been set up, young mothers eagerly seeking to machine themselves into half-way trained nurses, physicians ceasing to use the mother's services, be-

cause they are only half-way nurses, half-way mothers.

The practical, natural art of "mothering" is so invaluable when found it is but fair to the profession to believe that when a physician does find that half-lost art in the modern mother he will at once and only too gladly use her services. It is but reasonable, too, that he should greatly prefer to use a thoroughly trained professional nurse if he has to choose between her and a mother who is imperfectly trained in nursing, but so steeled in theory that she has dulled her mothering powers.

"I am very anxious today"—this was the report of a physician given recently in response to an inquiry for his small patient. "I thought the child was better this morning, the nurse thought so, but the mother says the child is worse, and I don't like it. *She* is the kind of mother who by instinct knows." The kind of mother who by instinct knows must be one to whom mothering has not only come naturally but one who has allowed nothing to blunt her gift.

Mothering in such a nursery may rise to the dignity of a power, for it means a practical condition in which all the perceptions are delicate and sharpened. It may be unsafe to trust infancy and especially an ill child, to wholly untutored, emotional mothers, but there is such a possibility as overtraining and perverting maternal instinct through technicalities and curbing. The athlete who overtrains is known to "show stale" under the supreme test; he has sacrificed all his natural inclinations, his freshness of feeling, to an over-active conscience.

Overtrained Mothers

To take an example that shadows forth the possibility of overtraining the young mother; in the old madonna poems, those of sentiment and motherhood, there are lines upon lines describing with beauty and feeling the response of the young mother to the cry of her child, the instinctive mother-response to that call, which has no language but a cry.

Perhaps the greatest recent upheaval of nursery law is that which has been disciplining the young mother to hear her child's crying and make no response

whatever. It is today no extraordinary sight to watch a young matron placidly continuing whatever it may be she is employed upon while her child cries loudly, both unchecked and untended. This she would tell you has been a distinct part of her—the mother's—training. She, of course, is to be trusted to supply the needed judgment in the matter, to know when to go to the child, how long to leave it uncomfotred.

It is reasonable to suppose that some degree of what we may call careful neglect is beneficial to any child. It is good for all children to be allowed the privilege of some crying, unmolested; but there are on the other hand some children who are definitely and more or less seriously injured by this very kind of indorsed neglect. A minority report is to be reckoned with and it should give us pause to find a fair percentage of serious and unhappy failures in the wake of any abrupt reversal. We might say that no mother could, she would not, be so "staled in training" as to let her baby lie in wailing discomfort, uninformed as to whether it did or did not require her attention. As a matter of fact, all powerful as maternal instinct is, nothing human is protected against impairment.

Maternal instincts hold no immunity from becoming blunted. History has proved that there is no instinct which can be safely trusted as permanent, not even cupidity. It would seem impossible that a man could wilfully beat his own horse to death, starve the slave he purchased, neglect to its injury the child of his own body; with no argument, we know that all of these things can—they do—happen.

Our grandmothers would not, they could not, have let their babies lie and cry, well knowing that they needed *nothing*. They were not trained to do this—on the contrary. Not to take up a crying baby! They never heard of such a thing. Perhaps (this has to be said with careful reservation) it might be better for many of our young mothers had they too never heard of such a thing.

"How long is it safe for me to let my baby cry?" A young mother asked this question of her old family physician, a scientist with all the gospels of the present and yet one who knew how to

strengthen that which remained. He gave his advice shrewdly. The child was benefited by some crying. It was to be gone to at once, carefully observed, made in every regard physically comfortable, then if all seemed as it should be, left to cry comfortably until it wearied of the exercise. "It is safe and beneficial to let a baby cry quite a long time, Madam," he ended, "always provided that its mother continues to listen for it and *to mind hearing its cry*. When a child's caretakers begin to be leisurely in going to a crying child, or not hear its cries, or not be troubled by its crying, that child is in danger of neglect."

An uncomfortable, wise doctrine; a trifle, too, like being told it is safe to kiss your cousins until you begin to enjoy it.

There is certainly no selfishness, no saving of care to a mother in a rule that bids her to let her baby cry, yet be troubled while it cries. A theory that has been allowing the caretakers of infants—the pressure of a shocked public opinion removed—to allow their charges to cry continuously and uncomfotred, has unquestionably proved a trifle too convenient for some of the caretakers.

We have discovered that we cannot depend on motherly devotion to be sufficiently scientific by instinct, and we may have to learn still further that neither can we depend upon it to be persistently tender, under too heavy temptations toward an unrebuted carelessness.

There seem to be two undesirable results for the child itself that may follow upon this particular rule of indorsed neglect; the first and least important being that a child who is allowed to lie and cry too long and too often, its cries unchecked, may form a bad habit of useless and causeless screaming to become a torment later to itself and others. More seriously, the child may make the discovery that its cries are unheeded, and in what stands for the mind of the child is slowly bred a distinct distrust, or rather an absence of confidence in his caretakers, to whom he should instinctively turn, as a flower to the sun.

We are not here discussing that type of mother (she will appear in every generation as a departure from race standard) who has looked on her mar-

riage as the climax of her life and to whom the first child is an insult, an anticlimax, something she might reasonably have expected, perhaps, but has failed to reckon into her calculations. No, we are considering only the normal young mother to whom the first baby has come as the best the world has to offer, a flower, a gift, sunrise and sunset, something for which it seems impossible that she shall be parted in body or in spirit, yet from whom, to her bewilderment, she finds herself separated.

To briefly sum up the more important recent laws that have obtained in our modern nurseries; these have undoubtedly tended to more or less divide the child from the mother because the whole tenor of these regulations (most of them very wise) is toward an effort to reproduce as nearly as possible for the newborn baby the secluded prenatal conditions. The child, during the first months of its life, is supposed to be protected from the outside world, infrequently touched, not cuddled, not rocked, not chirped to nor amused.

It is to be allowed to cry and it is to understand that it is not to be constantly "comforted," "patted;" in a word, "munched," as the old negro nurses, those invaluable and lost comforts of childhood, phrased it. On the very face of such rules and such training, used with proper moderation, is writ large so much of sound sense it seems captious to quarrel. One has only to ride in street cars, to visit cheap places of amusement and there watch the ignorant mistreatment of small children, their parents dandling them, exciting them, wearing out their little strength, to become an ardent advocate of a valuable nursery reform that is spreading, slowly, even to the more ignorant classes. What can be better than peace for these little, we might almost say, half-born morsels of humanity? They seem *unfinished*, these highest animals at birth, needing to remain years longer than the lower animals near to their parents.

This new effort to obtain for them a wholesome repose, in which mental stimulation, nervous excitement limited, they may go on with physical growth, is almost like the discovery of a new and valuable law of life. But all these conditions have been obtained for the

child only by means of a more or less rigorous training of the mother, a readjusting of what has been in the past the ideal of relation between the mother and child.

Back to Nature

We have—have we not?—fallen upon a day of trained mothers. In the old times it was the children who were supposed to be trained; the training of the mother seems now regarded as the first and more important task. This training begins almost before the birth of the child and continues from the hour of its advent. I have in mind a mother of five children, still a young woman, who, at the birth of her sixth child maintained that she had discovered the bearing of her children was not what she found to be the burden; what she could not endure was the training imposed upon her. With the birth of this sixth child she waited until the baby had safely arrived, then chose her hour of revolt.

"Bring in the child; I hear it crying," she said. The nurse, a childless woman, but perfectly equipped as instructress to mothers, made the customary response. The baby was only crying to be taken up. The child needed exercise, crying was its exercise. Last of all, "You don't want a spoiled baby." The mother of the baby could have said it all for her. It might just as well not have been said at all. She had heard every word of it five weary times before; tried to believe that others knew better than she the needs of her own child. She knew now exactly what she wanted, thought she knew what her child needed, and, in any event, she meant to have her own way in the matter. "Bring me the child." It was an order, but amiable. She could afford to be amiable.

"I haven't decided as to spoiling him, I mean to enjoy him; I've never enjoyed one of my babies before. I mean to play with him—now. Sometimes I may treat myself to rocking him to sleep!" It was quite final. There was no horror left to produce.

There's a balance in all things, great good concealed in great harms, losses in what seems all good. It appears not impossible that through denying to the young mother these old close contacts with her child, through absorbing her

in these technicalities of child culture, rather than in a study of the individual nature of her own particular offspring, the bond between these two may be made much less intimate.

If it is true that a lessening of physical contact begets a lesser spiritual understanding, then the price is high, and in the end it will be the child who pays. Given the letter—some of us are built so—the spirit often follows, and it is indeed a sex misfortune that, for some strange reason, so few mothers are today able to nurse their children. That natural and inevitable fondling held undoubtedly its own education for the child and for the mother.

In the early mutable years of her young maternity any of these questions that seem to affect the young mother's training may become matters of very real moment. Watching the modern young mother handling her child, then comparing her dexterity with that of the old-time mother who more constantly "dandled" her baby, it is not to be denied that the matron of old-time habits mastered the art with a grace and air that the latter day matron has not. Practice doubtless made for that physical and lovely "mothering," for it is not that the present-day mother never touches her child, but that she handles it so rarely as to be awkward in this contact, and so lacks that old abandon, that swinging, cradling grace which gave to us the old madonna group, that vision of appeal, beloved of artists.

Art and grace must stand aside—by-products—for health and wisdom; but is it quite wholesome or wise to ignore so wholly the appeal of the human touch, to order the miniature nursery more or less according to laws that must regulate large hospitals and institutions? The necessities are widely different, and it is difficult to safely transplant laws that have to be operative in caring for the many to a nursery where the rigors of those laws must concentrate on the few. A hospitalized nursery is apt to mean a "hospitalized" child, and what a hospitalized child means, every institution, to its cost, well knows.

Turning over a magazine the other day the page opened at the picture of a number of fat, wholesome looking babies described by the legend below as

infants from an institution upon whom had been tried the experiment of "mothering;" namely, they had been given out to adoptive mothers to be treated to a course of "natural affection," experience teaching the progressive directors of this institution that in spite of careful and most scientific care the children were dying for lack of "mothering."

The Child's Morale Ignored

Directly below this picture was one of a huge machine advertised to turn out sixteen machine-made pies a minute. There was a perhaps intentionally suggested comparison. The bodies of institution-reared children are cared for, in all likelihood, more scientifically than can be arranged for in any home nursery, and in routine-ruled, hospitalized home nurseries the bodies of the children may also be highly favored; but in both these cases there still remains a pitiful neglect. Neither in an institution, nor yet in a rule-ridden nursery is the individuality of the child considered; the morale of the child is perforce more or less ignored, for only under the tenderest and most personal care can the morale of a child be early developed and reinforced. In the care of all childhood there is a grave necessity to consider the body. But that is not all; the affections, too, should be developed and trained, but neither is that all—the MORALE of the child must be remembered as perhaps the most important of all these, because upon a sound morale, as on a cornerstone, will depend all future strengths.

It can hardly be too early recognized that this fundamental source of power, this understructure, may be by the child's caretaker founded in the child, or reinforced.

Not long since a young and wealthy man came to the office of a prominent physician and laid his case before him. He was ill; he had no wish to live, not if he must suffer as he was then suffering, from what he knew not. "Is there nothing you can't die and leave?" he was asked.

"Nothing."

"What interests you?"

"Nothing—my little old pipe, perhaps."

The puzzled physician looked his pa-

tient over again. Physically he was perfect, the mind clear, even clever. "I shall need to see you again before I can prescribe," said the physician. "Will you promise to do a little thing for me? I want you to begin to collect pipes, not one to cost more than ten cents. Tell me this day week how many you get."

The patient laughed in the doctor's face, but promised.

That day week he burst into the office, his color good, eye bright, manner buoyant. "I have one hundred pipes! Got four the first day. Didn't know where to look. Yesterday, got thirty! Had to have my den rearranged to hold them—cases—I'm going to—"

"Hold on there," said the physician. "How are you?"

"Never was better! There was nothing the matter with me."

"You had something you could have died of," warned the physician. "We call it apprehension, and it's the result of a diseased morale."

A "diseased morale," "apprehension." We have come then to officially recognize these conditions and they have their own therapeutics. We know that the king pin of power to live our lives is a sound morale, that this means for us a healthy mentality, a strong nature; we know that when the morale is weakened, or mislaid, or has never been properly created in us, the result will be an invalid—one who is *invalid*. When through some outside stimulation or through our own will to lay hold on that salvation, the morale is built up again, we know there is a return of strength in all directions—body, heart, mind.

So much for the adult; but have we recognized further the necessity of building up in our children a morale so sound, along such wholesome lines that in adult life curative treatments will not be called for? And do we through our present-day nursery methods, in our determined efforts to build up the perfect body, ignore, in degree, the construction of the sound morale? The trend of this century has been toward the deification of the body. In higher education physical culture has been the accented feature. The body which was yesterday discredited, today, in contradistinction, has been glorified.

The most debated question in the open discussions of educators is, invariably, whether this departure has swung too far. We can read some reaction in the satiric and deservedly popular story of the alumnus lately writing to the president of his college to query in alarm at some athletic restrictions if the intent was to make "a blamed institution of learning of the dear old college."

Perhaps the first indication of personal morale, morbid or sound, that is shown in a child is in his capacity for fears, or through an exhibited fearlessness. Much later come the more definite indications. Earlier than seems quite credible a child's moral confidence is built up, or fails fatally to develop the substitute increasing apprehensions, and it is only in the solid comfort of a mild and brooding human care, a guardianship, close and intimate, that the child escapes all sense of self-responsibility, that peculiar menace to childhood.

The Child's Self-Confidence

A grounded confidence in his caretakers, established almost before he can think, will train a child better than any other method, into self-confidence and the habit of personal fearlessness. The awakening nature, reaching out, experimenting, will constantly feel fear and then will reach back again for support; which it should invariably find. In a word, through all his progress the child calls not only for a vital interest in his physical condition, but for a watchful brooding presence perceiving the unspoken need, individualizing the child, responding adroitly. In fine, he needs first, last and best a mother perfectly trained in "mothering."

It must be through the days of her child's babyhood, step by step, one day telling another, that the heart and mind of the mother are schooled to meet this second demand upon her. What her child later finds in her, will be largely what his early infancy has developed in her.

Our question is then, Does our new training for young mothers tend to fit them for the second stage of the child's need? Invaluable as the knowledge of nursery hygiene of today has proved, it seems not out of the question that a well-drilled young woman striving to fit

her individual child to a book of directions, keeping her mother instinct carefully in check, is in somewhat the dangerous position of the man against whom we are warned "whose god is in the skies," kept there, and for reference only.

Whatever the training, ancient or modern, it would seem that it might be agreed upon that a grounded confidence in his caretakers, established as a habit of mind, is not only the birthright of every child but the one certain foundation on which we can hope to have him build up for himself a wholesome morale. Without that solid understructure as his support we know that the most exceptional gifts of mind, the most brilliant qualities may pervert into a mere evil fairy's birth wish.

It cannot be denied that the old-time baby, cuddled and comforted, intimate with its mother through that sweet "language of the baby" suffered physical disadvantages from overhandling. (Yet there were giants in those days!) and we can hardly fail to cordially accept the dictum that the nearer a child's condition on earth, in the first months of its life, can be made a reproduction of the prenatal state, so much the better for physical weal; but let us still question whether, under this new regime, in these very formative years of the young mother's life, she is being deprived of some needed *training*, that it is her right to have. Is the child, too, being robbed, failing to acquire a habit of intimacy and confidence, which he may in his early childhood come to need even more than he requires this well-bred repose for baby days?

It is certain that there is now in air a distinct reaction against the over-isolated, germ-protected nursery in favor of a much more natural life for the young child and for its mother also; a

life in which young matrons will again confer together more simply as mothers have been wont to talk, less as young popular scientists discussing (with the wrong terms applied as often as the right) the theory half grasped, causes, results uncorrelated—in a word as half-trained laymen must inevitably discuss the sciences. There is a growing demand for a life for the child in which fears are less a part, with some risks run, some chances taken, this point ever held in view, that the child has a right to his natural life, to some tilting with his destiny, some strengthening wrestling with whatever menaces him, with fewer disinfectants, more rugged enjoyment. What more pitiful object can we find than the child of a nursery of today who, with its teeth in a luscious peach, pauses, anxious eyed, to ask "will it hurt me?"

Let us add to this a positive plea for more of the old, old human touch between the mother and the child. Let him wake in the night and cry out, sure that she will quickly come; let her well-known touch be the steady influence he unconsciously gropes for, on which he instinctively leans and from which a strange, deep, well-established communion, he draws a security that will wax with him into something of his own; a wholesome power within himself, a sound morale balancing unafräid between his body and his mind, supporting them and by them supported.

We have come through much child study to understand the child's body, its needs, as never before; but he is not wholly body, he is human, with all our human craving. And because this is so, let us be sure that

. . . the touch of lips, of hands

The human touch—

Close, vital, warm, life's symbols dear,
These needs he most,
And now—and here.

