

## Editorial

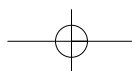
Hilary Wakefield

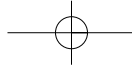
I was born in March 1948 and contracted polio at ten weeks. I was admitted to Chailey Heritage for Girls for manipulation to my right ankle on 16 May 1949 at the age of fourteen months. My discharge date was 19 September 1950 (a duration of sixteen months). I was re-admitted on 27 November 1951 for a further two weeks.

Once a fortnight the sister on the 'Toddler Ward' would send home to my parents a postcard with a 2–3 line message about my 'progress'. My Mum kept these cards until I was in my twenties, and I read them only once. The sister complained, on several cards, of my rages, temper tantrums, incessant crying, and noise. I put up a determined fight over several weeks before lapsing into withdrawal, apathy, and head-banging behaviour.

Many people believe that it is not possible to remember events before two or three years of age. This is not so. One remembers in a different way. A perception of time is the key to cognitive memories, because without time it is not possible to remember a sequence of events. I can remember individual visual images with accompanying feelings, as follows. Image: myself standing crying and rattling at the cot-side (feelings: loneliness, desperation, feeling abandoned); image: being force-fed cornflakes with ice-cold milk ('I'm too sad and angry to eat!'); image: drowning in the bath (terror, choking, 'I can't trust anyone'); image: being shouted at for upsetting the other children on the ward, and contributing to the death of an older child (horror, guilt, fear, 'I am evil'). I cannot tell when these things happened or in what sequence. All I know is that they did happen at the preverbal stage before I could articulate them. This would correspond with right brain dominance until the cognitive abilities of the left side take over at the verbal stage. Interestingly, I cannot access these preverbal feeling memories in therapy, but I can in writing, so I have kept a journal for many years.

It is generally agreed that the only thing one can do for a child whose attachment bonds have been broken is to reforge them. A problem arises, however,



**viii**     *Attachment*

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at the preverbal stage, in that you do not recognize your parents as the same parents you had before. Even though, cognitively, I know that the parents to whom I came home were the same ones I left when I went into hospital, they do not feel the same people to me, even now. They have a different 'feeling' label attached to them. The 'Mark I' Mum and Dad provided security, love, and met all my needs (but ultimately abandoned me). The 'Mark II' parents were strangers who found me difficult, aggressive, disruptive, and insecure, so their response to me was accordingly different. They seemed critical, exasperated, and treated me as a black sheep who upset my brother and sister. I guess I was exhibiting the behaviour of many insecure adopted children. I never felt attached to the Mark II parents, which is very sad for them. I have spent the last eighteen years of my life unravelling the long-term effects of this episode in my life and am still discovering new facets even now.

