

Complex Attachments

Exploring the Relation Between Mother and Child When Economic Necessity Requires Migration to the North

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The changing global economy has brought changes in immigration patterns. Today female workers are sought in Western countries to serve as caregivers. These women leave behind their own children to provide a better future for them by caring for other people's family members in wealthier countries far from home. Immigration policy in the host countries often makes it impossible for these women to gain the documentation necessary to bring their own children to live with them for many years. This economic phenomenon has created a clinical one: the stress on the relationship between these mothers and the children with whom they are reunited. This article focuses on three distinct categories of separation and reunion experience among families who have migrated from the Caribbean to the United States. It suggests issues to be addressed in each category of relationship to promote successful treatment.

THE ADVENT OF A GLOBAL ECONOMY HAS BROUGHT A NEW GROUP of immigrants to the United States—parents who emigrate from the developing world in search of employment to support their children's life back at home. These are not political exiles, but economic ones.

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They often love their country of origin and would not have left if they could have provided for their families in any other way. Immigration policy and employment opportunities in the United States are such that it is often the mother who makes the journey. Although she might prefer to bring her children with her, it is not usually legally possible to do so (Lewis and Madalanscay, 1996).¹

Recently, the scholarly work of Ehrenreich and Hochschild (2003) has highlighted this phenomenon. Ehrenreich and Hochschild do not focus their attention on the separation and reunion of mothers and children but call attention to the situation of these families as an economic one with serious “side effects” for the emotional life of children and families, which they refer to as the “care deficit.” They note that further study of these effects on children’s development is needed because of the frequency with which the separation of mothers and children occurs as the unintended consequence of economic decisions made from a distance and seldom discussed with those most affected or their representatives.

When such children are at last reunited with their mothers, it is easy to see what difficulties may arise. Both mother and children have dreamed for years of an idyllic reunion and are faced with realities that neither is prepared for. The mother must continue to work long hours, often in other people’s homes, to support the children she has worked so hard, over so many years, to bring to her new home. Furthermore, time has gone by, and her children are the people that they have grown up to be, not the ones whom she left behind. Guilty and defensive, and somehow expecting babies instead of adolescents, she may withdraw.

For their part, the children are expected to manage a new school, a new climate and a new culture that is not what it appeared to be in films or on TV. They are faced not with the mother of their fantasies, but a tired, significantly older woman who never seems to have enough time for them. When things do not go well, families come to the attention of clinicians. To assist

¹According to Jonathan Rosenberg, an attorney who served as director of public policy and immigrant rights at the Children’s Aid Society (a child-serving agency in New York City), from 1996 through 1998, it can take years to bring a child along to the United States, and children may not all be brought together. Rosenberg states that under current immigration law, a documented immigrant noncitizen may apply to bring a child after three years of legal resident status. The person must, however, earn 125% of the poverty rate for a family of whatever size he or she intends to support before the child or children can be brought to the United States. Therefore, longer family separations than those originally planned are frequent (Lewis and Madalanscay, 1996).

these families properly, the precise nature of the difficulties that they are experiencing must be explored.

Far too often, it appears that such families have been misunderstood. At a roundtable discussion led by the department of psychiatry of a leading New York City hospital, the hospital spokesperson voiced his concern that when these children were brought to the attention of the outpatient clinic, staff members believed they had never become attached to their mothers and therefore had no reason to obey them. Instead, they were solely attached to the caregivers they had left behind in their country of origin. In addition, the clinicians at the roundtable felt that the parents had been so long separated from the children that perhaps such a long separation could only be endured by parents who had never formed an attachment bond and therefore were unable to tend to them empathically. We think that this is not a correct understanding of the nature of these relationships. Rather, we believe that it is precisely the difficulty that ensues when a strong attachment is made and loss is endured that can lead to a troubled reunion. Case material will show that a complex web of attachments, idealizations, and disappointments exists in these families (as in all families) who have been separated through the vicissitudes of economic necessity and immigration policy, which, if properly understood, could help to strengthen them. We show by case example that it is the intensity of attachment that may be at the heart of some of the difficulty, and conversely it is the understanding of the complexity of these attachments that can be the key to providing appropriate understanding and assistance.

In this paper, we begin to discuss typical difficulties that can occur, even in the strongest of families, when children and parents are at last reunited. Our purpose is to explore three basic types of complications and give examples of how they were handled in treatment. Our premise is that even when there is a “good enough” bond between mother and child at the start of the separation, and even in cases of secure attachment to the parent who has emigrated, the very strength of the attachment bond between mother and child can present complexities that strain the relationship. These strains can come to the attention of clinicians when the ties that bind are ignored and denied for too long.

Review of the Literature

In beginning to do the research necessary to prepare this paper for its original venue—a conference of Caribbean and international social work educators

in Trinidad—we were struck by the paucity of clinical literature on this subject at that time. It was our observation that, because the majority of published psychodynamic literature relates to the experience of the majority culture as it is popularly defined, psychotherapists working with immigrants, most especially immigrants of color, may fail to find validation for their observations in the culture of the clinical community or venues in which to publish their work. Failing to find that validation, they may come to doubt the validity of their own perceptions, thereby limiting the scope of what is researched and discussed about the experience in the field (Perez-Foster, Moskowitz, and Javier, 1996).

The exceptions include Prince (1968), Glasgow and Gouse-Sheese (1971), and Gopaul-McNichol (1993). These authors thoroughly catalogue the nature of the difficulties that can arise through the separation from loved and living caregivers because of economic necessity as well as the complications inherent in the reunion. What they do not address, however, is a deeper understanding of the nature of the attachment bond between Caribbean mothers and their children, which exists from the start and may help to explain why there is a large portion of the population that is managing well and not coming to clinical attention.

Again, this lack of literature on the subject may not be surprising because there is a general paucity of literature that addresses the nature of attachment when multiple caregivers are present. The upper classes of Europe, for example, have traditionally been cared for by nurses and nannies rather than by mothers alone. Bleanonu (1994), in his biography of the psychoanalyst Wilfred Bion, elucidates how this theoretician recalled the importance of the Indian *ayah* (nanny) who had raised him in his later years. His recollection of the *ayah*'s importance in his early life and of his love for her had a profound effect on the development of his later theories. Bion was not alone among colonial children to have been primarily raised by a nanny and separated abruptly from her to be sent away to school in England, but this complicated attachment relation is rarely discussed in the literature. One wonders, in fact, whether Freud's emphasis on the importance of the father in child development, with early mothering playing a small role indeed, is because he, too, was raised by a nanny who was not necessarily recognized as a person in his life.

The original work on human attachment was done by Bowlby and Ainsworth, who observed infants and mothers across culture and class. Bowlby and Ainsworth studied only those children who were being primarily cared for by their natural mothers, whether working in an African village or a British city where this was not always the case (Bowlby, Vol. 1, 1982). It

is not possible or practical to review the vast scope of their work here. For the purpose of this discussion, we use their concepts of primary and secondary attachment and of the secure base. We also look briefly at Bowlby's view of the sequelae of prolonged separation from an object to which the child is securely attached.

Ainsworth and Bowlby demonstrate that even when the mother is the primary caregiver, secondary attachment behavior in securely attached babies begins to occur to other familiar figures in the environment, represented by smiling, reaching, and "crawling toward" behavior on the part of the child. The more secure the baby in his primary attachments, the more likely that he will attach to secondary objects; however, there is always a primary or preferred caregiver (Bowlby, 1989). The addition of transitional objects or phenomena at this stage is also noted (Winnicott, 1965; Bowlby, 1989). It is to this secure base that the child returns when he is frightened, hurt, or in need. It is out of this secure base that the baby ventures forth to be active and healthy in the world.

Bowlby (1973) devotes a complete volume to the difficulties of separation and included a lengthy discussion of the adverse affects of temporary separations in infancy and early childhood. Bowlby notes that a lack of security of attachment leads to anxiety accompanied by symptomatic behavior and anger. The problem we discuss here is complicated by the fact that the separations often occur after the secure base has been developed and the expectation of the child is that his base will continue to provide support.

Bowlby and Ainsworth observe a phenomenon they label *avoidant attachment*, in which the young child, following disappointments and separations from the primary caregiver, deliberately avoids that object out of anger, leading to a desire to punish. When such abandonments are frequent, or when they take place in a time of great pain, such as occasioned by admission to the hospital, the child resorts to an attachment style characterized by avoidance of beloved objects for the dual purpose of inflicting pain and being protected from further hurt.

The question arises as to whether such a style set in when an older child is separated after a long and positive relationship with mother or is this something that only occurs in young children. Certainly this type of avoidant behavior frequently greets the mother on her return.

Howes (1999) has extended the discussion of attachment in situations of multiple caregivers. According to Howes, early research shows that extended family and communal caregiving and caregiving by one reliable person are likely to produce a greater degree of secure attachment than that provided by poorly paid institutional caregivers because of the high rate of

staff turnover and the high degree of sensitivity that may be required to provide a secure attachment situation in the context of multiple caregiving.

Although a full discussion of this theoretical development is beyond the scope of this paper, the reality of multiple caregivers is only beginning to be addressed in the larger clinical context. For the purpose of this discussion, we do want to address the relationship between attachment theory and object relations theory, emphasized most recently by Mitchell (2000).

Following Mitchell's lead into object relations theory, we begin with Winnicott, who was the first to say that there is no such thing as a baby without a mother, or mothering person, human survival being dependent on maternal care (Winnicott, 1965). Similarly, he observes in the baby's attachment the basis for attachment to other people and to the world. (Winnicott 1945b).

Also of interest here are two papers that Winnicott wrote in 1945 with regard to the difficulties of children separated from their parents, for their own protection, during World War II. It was Winnicott who first highlighted that despite the good intentions of parents and caregivers, the children's fantasy relationship with the parent, which had to replace the real relationship, and the reciprocal fantasies of the mother who missed her child created difficulties when these families were asked to reintegrate when the war was over.²

Stern's (1985) infant research serves to confirm all this in laboratory experiments with babies, showing that from the first moments of life, babies have a sense that they are separate and are beginning that lifelong process of reaching out to the other. Fonagy (1999) points out that although attachment theory was not originally welcomed by the psychoanalytic community as a whole, it was always seen as compatible with the object relations focus first emphasized by Klein. Fairbairn (1952) can also be seen to address this issue when he notes that an internalization of bad objects can develop if an object-seeking human is met with certain types of frustration. He divided these bad objects into two essential types, exciting objects and rejecting objects. We discuss here how these situations can be forcibly replicated through conditions arising from economic refugee status in the hope of informing the work of clinicians who are charged with treating the difficulties that may ensue.

²An advantage that British children had over immigrant children in the United States today is that their families' reunification was part of a national policy, whereas the immigrant children's situation sets them apart from the mainstream of nonimmigrant children, enhancing the feeling of being misunderstood.

For the purpose of this paper, we are primarily looking at attachment in the relational sense of Fairbairn, Bowlby, and Winnicott to enrich the general understanding of the nature of attachment in immigrant and especially Caribbean immigrant children, separated from their parents because of economic and political factors. Although there obviously may be many ways to view this attachment as there are families, we look at three distinct scenarios in the hope of beginning to shed light on the general situation. In bringing up these scenarios, we have included only those who have had a healthy enough start to exemplify how the immigration process itself affects the children and parents. In future studies, it may be useful to look at children who are damaged from the beginning. The three scenarios we have selected are the following:

1. The child who is primarily attached to mother as a primary object and is secondarily attached to the grandmother or auntie with whom he is left.
2. The child who is primarily attached to grandmother or auntie who has raised her from birth and is secondarily attached to mother.
3. The child who is primarily attached to mother but is left by necessity with a more distant caregiver, not an attachment figure for the child, who is paid for the task and provides inadequate nurture or even abuse.

Child Securely Attached to Mother Is Left with Secondary Attachment Figure

In the first instance, we have children who, in the early months of life, are securely attached to their mothers as primary caregivers and secondarily attached to the grandmother or auntie who cares for them (Bowlby, Vol. 1, 1969, p. 307). For these children, the mother's leaving causes a sense of profound loss (Bowlby, 1973). Because, however, they are left with a secondary attachment figure who has been known to them from birth, they tend to do well and thrive in short order. Here we are talking about a child who has been well cared for, often in a rural situation, where even hardworking caregivers tended to be physically available, and mother substitutes abound. The resilience of such children is well documented and certainly enhanced when they are left with a loved person.

To lessen the child's sense of mourning and keep the child cheerful, the mother's memory is kept constantly alive by the caregiver. Mother calls, writes, and sends packages. The child is informed that mommy has gone

away for the good of the family—and for the child's good most of all. She is making a better life for them in the north. A better life is defined for the child as more money at an age when love is more important to children than material wealth, and the real meaning of material goods is often not yet fully understood. Because mommy is sacrificing for her, the child must not be angry.

Mommy calls frequently, and the eventual reunion is constantly discussed. Over time, Mommy takes on a romantic and distant glow. Sometimes she comes to visit. On these visits, she is vacationing. She devotes all of her time to her child, and the union between them can be perceived as a perfect one. It is grandmother who is insisting that chores and school work be kept up with and that household discipline be maintained. The mother may simply want to bask in her children's loving arms, away from the harsh other reality of life in a hostile northern city. So she invites the intimacy of her child, whom she desperately misses and whose repressed longing for her is excited. Then she leaves. The child longs to be taken along with her but fears that this will be a breach of family standards. Mommy is sacrificing for her own good, and the child mustn't be ungrateful or demanding. Through her love for her child and the desire to be a good and nurturing mother, Mommy has become an exciting object (Fairbairn, 1952), someone unattainable who calls forth the child's love only to abandon her again and again and forbid the child to express her disappointment.

The struggle over a sense of betrayal may also be related to the threat of abandonment that Bowlby (1973) notes as a pervasive cause of anxious attachment. Although parents may work hard to provide security of attachment to their children, the children observe other families separating as mothers emigrate. When their turn comes, they may have been worrying about it for a long time.

Furthermore, assuming they are old enough to understand, the family expectation is often that children will not become symptomatic because there has been a careful explanation of the necessities and benefits involved and of all the ways that the absent parent will remain available. What Bowlby's work shows us is that this intellectual understanding often serves to send the sadness further underground. Often what emerges here is avoidant behavior, which we would argue may not represent avoidant attachment *per se*, but rather the same phenomena in the form of withdrawal that serves to punish the mother for having left by withdrawing love from her.

Meanwhile, a deepening attachment is being formed to the caregiver who has remained behind and is there for the daily stress and strife of

growing up. This person has become the comforter, the source of wisdom and strength, as well as the disciplinarian. This often good enough object is determined not to steal the child's love for her mother, however, and so may unwittingly play a part in the difficulties by downgrading the sense of the attachment between them and continuing to romanticize mom. When the child leaves the secondary caregiver, there is again mourning. The child often feels in the grip of a dilemma, made more complicated by the harsh realities of life in a northern city. Do I adjust here, and leave behind the people who cared for me? Can my real mother ever live up to the mother of my dreams? What happens to the buried anger I may have felt when mother left time after time when I wished she would stay or, at the very least, take me along?

**Child Is Left with Grandmother (or Other Close
Relative) to Whom He Is Securely Attached, Separated
from Mother to Whom He Is Secondarily Attached**

Our second scenario involves the frequently encountered situation in which the mother has gone off to work from the earliest months of the child's life, leaving the baby in the care of her own mother, or her mother-in-law, who is the child's primary attachment figure. In these circumstances, mother's entrance to the room may be greeted with pleasure, but her comings and goings are not a source of threat or danger to the child because they have happened throughout his life. This should not be confused with a loved child who is left in a day-care center from the early months, but mother has remained the stable attachment figure. Rather, this is a situation in which the child has been given over to the grandmother so that mother could spend long hours working. In these situations, mother was often left with her own grandmother for similar reasons of economic necessity. In some instances, mom's leaving for the north is associated with her desire to be able to bring the child along and be able to care for him herself.

In this scenario, it can well be the mother who has idealized the child, longing for a baby who has since grown to adolescence. This desire can be laced with envy for the grandmother who got to nurture the child while she was struggling with many responsibilities.

Complicating all of this can be the relationship of mother to the caregiver back home. Is this a mother who is able to be more giving to her child than she had been to her, in part because of the assistance made possible by the

mother's outside work? Here we may in fact see cases of avoidant attachment, not only on the part of the child, but on the part of the mother toward her own mother. Mother in this situation may find herself resentful and refuse to let the child mourn the loss of the earlier caregiver.

It is not because she is not attached to this child, however, but rather that she is again attached to the child in a romanticized way and has lived with the hope of the reunion for a long time. Too often, the reunion is meant to take place in a short time, but the immigration law's vicissitudes lengthen a lapse that was meant to last for only a year or two.

Nor should we believe that this child is not attached to the mother, or that no bond exists between them from his point of view. This mother was always a secondary attachment figure for the child and there is remembered joy in their meetings. Now the child wants to please the mother but at the same time is baffled because he cannot bring back his lost baby years. Similarly, he does not want to be ungrateful for all that the mother has done for him, yet cannot stop missing the person who was his constant companion. So it is not separateness that is giving them trouble, but the complexity of their very attachment.

Child Securely Attached to Mother and Secondarily Attached to Father Is Left with Strangers Who Take Money for the Child's Care but Who Are Unkind

These situations are painful indeed. Sometimes, however, there is no secondary attachment figure available to take the child. A more distant relative or friend of the family is sent money to care for the child and provide for his education. A securely attached child will go dutifully to strangers (or boarding school, etc.) if told by a loved and loving parent at a sufficiently advanced age that she will send for him as soon as possible. That child will try to please the new caregiver in every way that he can and long of course for the moment of rescue. This is the stuff of children's tales and melodrama from *Les Misérables* to *The Little Princess*.

What we wish to identify here is the effect on the attachment relationship that the interval of bad or abusive caregiving may have at the time of reunion. In popular fables, the rescued child is simply happy and grateful, and all goes well. In the real world, however, the child may find it difficult to trust anyone who could have left him in such difficult circumstances and may have built up anger and resentment that make him hostile and difficult

to reach. Furthermore, the child may not have been to school or may have been beaten severely, so that unlike the child who was left behind, the reunited child may be difficult to care for, symptomatic, and unprepared for his or her new life.

Children who are not sent to school lose out educationally regardless of where they are living. Those who had been sent previously, however, and who know that their parents expect them to be attending are also resentful at being denied an important opportunity. They may have difficulty socializing with working peers, for whom school has always been an unattainable dream, because they were initially raised with higher expectations. Furthermore, the anger that they feel at having been denied often leads to acting-out behavior such as stealing or fighting with peers. Girls tend to turn their anger inward in depression. (These phenomena are not, of course, exclusive to children separated from parents in this manner; they are noted by Winnicott, 1984, and Bowlby, 1988.)

There is an impressive and growing literature on the effects of physical and sexual abuse of children by their own parents (Green, 1985; Bowlby, 1988). Children who are abused by caregivers who are not their parents differ somewhat from children abused at home, however, because the beloved caregiver is not directly implicated and the child can realistically distinguish between a loved and loving parent and the cruel interim caregiver. There is little specific scientific literature on this phenomenon, although it remains the stuff of children's literature, including the currently popular Harry Potter series. Keilson's (1971) longitudinal study of Dutch orphans' behavior following the Holocaust indicated that children who were abused by caregivers during that period of time were more mistrustful and had greater difficulties in reuniting with family members or adjusting to new adoptive families after their rescue and tended to be resistant to therapy.

The severity of the difficulties should be expected to be proportional to the severity of the abuse. Sometimes there is even physical or neurological damage. The grief-stricken mother's guilt is often compounded by her disappointment as she cares for the damaged child. Grief, guilt, and denial may make it difficult for the mother to plan appropriately for the child. Furthermore, both may have difficulty speaking about the terrible events of the past, creating a widening gulf between them that can be taken for a lack of attachment, but is in fact a symptom of the tragedy that has occurred within the attachment itself.

Case Examples

Cheryl

Cheryl was born to a young-adult mother in Guyana and raised in an extended family consisting of mother, two aunts, cousins, and a maternal grandmother who, although she lived some distance away, was a regular visitor to the household. Cheryl's parents never married, but her father was also a frequent visitor in her early years of life, and she has warm memories of going for long, solitary walks with him.

Cheryl's mother emigrated to the United States when Cheryl was five years old, leaving her in the care of the aunts. Her father left independently for the United States, and her grandmother left for Canada some years later. Cheryl remembers them sending gifts. As time went on, however, the contacts became fewer, and eventually she had little memory of any of them. Cheryl worked hard to establish a close bond with one aunt, Linda, who eventually appeared to become the psychological mother, with Cheryl competing with her cousins for her attention.

Her mother, on the other hand, never mourned or parted from, became a real presence again when she was finally able to visit after a gap of several years. Cheryl recalls a warm reunion, with pride in showing off her own mother to friends and teachers and in showing off to her mother her growing accomplishments. Because mother was not working and was there to visit her alone, they had many long cozy times together. Her disappointment was enormous when her mother left again without taking her along. Cheryl reports that she had simply gone along in a kind of limbo before the visit; afterward she consciously loved her mother and longed for her. Her dreams were of rejoining her mother and how close their bond would be.

By the time this occurred in real life, Cheryl had become an adolescent. For her part, mother had married and had another child. Circumstances had changed on both sides, but neither was able to think about this. Cheryl's actual reunion with her mother was characterized by disappointment and frustrated longing and fantasies about joining her aunt back at home. Cheryl's experience of her mother was of an overworked and preoccupied woman, so cold and distant that she was not at all the mommy of her childhood or the wondrous visit of her dreams.

The mother, however, experienced a distant and secretive young woman, who criticized her every move and acted as though the other

members of the family, particularly the new child (who had been expecting an instant sister), did not exist. She particularly was unprepared for the icy reception accorded her husband, whose sponsorship had made Cheryl's arrival possible. She was offering her teenaged daughter a perfect family, and her ungrateful daughter barely spoke to any of them. She was particularly injured when her sister Linda moved to the area and Cheryl was conspicuously warm and close to her and her cousins in marked contrast to her distant and rejecting behavior in her own home.

Cheryl's strong developmental foundation was evident in her ability to remain an excellent student, popular with her peers, and appropriately careful in her relations with the opposite sex. She drank up praise and warmth from friends' parents and her teachers. There she dispensed the warmth she conspicuously withheld from her mother, who, in turn, behaved correctly and coldly to her daughter.

Cheryl maintained contact with her biological father; he also had married and had other children, with whom she competed emotionally. She also competed for the attention of the grandmother, who was reunited with the family in the United States. Although the grandmother appears to understand the feelings of both her daughter and granddaughter, she is unable to play a mediating role.

Cheryl today has been in treatment to try to resolve her bitter and painful feelings about her mother. She is now professionally successful and engaged to an emotionally distant but equally successful man. Cheryl continues to long for a closer relationship with her mother and to mourn her absence during many of her formative years. Again, the pain and the longing come from the oneness of this pair and not from the separateness that they show to the world.

Pamela

Pamela grew up in the Jamaican countryside, in the extended family group of her paternal grandparents and their young-adult children. Her young mother worked in the city and visited at frequent intervals. Pamela was cared for by several aunts, although it was the paternal grandmother who raised her. Her father was a constant presence in the household. Her parents married when she was seven years old, and she went to live with them in the city, becoming separated from her grandparents and the only home she had ever known.

Economic times were hard for the family, and the father had few profitable skills to use in the urban economy. Mother continued to work in other people's homes, again making her more of a visitor than a mother, while dad remained constantly available. When Pamela was 10, her mother visited the United States, where she was able to secure more lucrative employment with a family who agreed to sponsor her and make it possible to bring her family along some day. Pamela did not anticipate the resulting separation from the mother. She and her father returned home to live with his family as before. The whole family had a better life with the financial contribution of Pamela's mother, and while Pamela reports that she missed her, she was happy to be home again and knew that mommy was helping everyone by working in the north.

After many years, mother secured a green card and began to visit the family. When mother came and left again without taking her along, Pamela reports feeling heartbroken. When her parents were finally reunited in the United States during Pamela's late adolescence, the marriage failed, and the parents went their separate ways, divorcing and marrying others.

Pamela experiences herself as a displaced person. Her experience is one of discontinuity and disruption. Her grandmother has since died. She has an enormous pain about not having been able to go to the funeral and has not attended another funeral since. Her primary attachment was to her grandmother, who for all practical purposes was her mother, and that attachment was secure. The difficulty came around the family's need to acknowledge her biological mother, whose comings and goings were not reliable, as her real mother—hence, Pamela's own confusion about her difficulty in bonding with mother when she finally arrived in the States, and her complex struggle with her unresolved mourning for grandmother.

To this day, despite close relationships to many members of the extended family who remained behind in Jamaica, she longs for and fears a more intimate relationship with her mother. Both she and her mother feel baffled by their difficulties and the complex nature of their attachment to one another.

Pamela has been able to obtain a college degree and begin a path of professional success. She began a relationship with an accomplished young man and entered treatment when he suddenly broke it off for reasons she could not understand.

At this writing, Pamela has had some professional success but feels stuck in her career path. Similarly it has been difficult for her to sustain an intimate relationship, as she devotes much of her energy to trying to get her

mother's attention. She enacts in the treatment through frequent comings and goings, declaring herself "cured for now," invariably preceding planned vacations on the part of the therapist. She also tends to glance at her watch a few minutes before the end of the session, asking, "Are we done yet?" Her need to control the level of intimacy in the sessions, as well as all comings and goings can only be gently interpreted as her therapist remains a steady presence. It has recently become apparent that Pamela fears that if she has another intimate relationship, such as that with an appropriate male partner, it will threaten the treatment and the constancy of the therapist's attention. Clarifying and understanding the meaning of her attachments to mother, father, and grandmother remain the primary concern as treatment continues.

Sheila

Sheila's experience was one of separating from both parents when they left Trinidad for the United States, leaving her and her two siblings in the care of the close family friend who had cared for Sheila's mother when her own mother died. Unfortunately, this woman became ill and was forced to place the children in care of other, more distant relatives, who had not really known the children well and were paid by the parents to care for them.

This family was abusive to the children, demanding that they take on numerous household chores and punishing them severely if they performed imperfectly in any way. The foster family expressed clear resentment at having the children with them and tolerated no unnecessary conversation, seeing the children as essentially a source of income and household help. The children were not fed properly, clothed adequately or sent to school with the money that was sent for that purpose. Sheila was seven years old when her parents left, and her attachment to her mother seems to have been secure. She missed her family and longed for the promised reunion. She never complained about the treatment that she was receiving when corresponding with her parents.

The girls were finally reunited with their mother when Sheila was 10. They traveled together, and so the sibling bond remained intact. Sheila longed to tell her parents about the abuse they'd suffered, but the mother seemed unable to hear it and told the girls they were exaggerating. For Sheila, this disappointment, and the concomitant and unacceptable anger that she felt for her mother, are what she subsequently experienced in therapy as worse than the actual abuse. It was as though a wall had gone up

between her and her mother that could never be breached. Furthermore, her mother was clearly disappointed by her daughter's academic difficulties. Because she could not accept her daughters' tale of abuse and neglect, she could not acknowledge the missed years of education that left them ill prepared for school.

Sheila befriended the "bad girls" who did not care if she failed a math class. They found her talented and clever. She, in turn, found company who could accept the aggression she despised in herself when directed toward her loved and loving mother. This behavior and the conflicting stories the school had heard about her educational experience caused her to be referred for treatment.

For Sheila, treatment became an exercise in what Winnicott (1971) called the "use of an object." Sheila stole small objects from the therapist's office, waiting to see if they would be noticed and was late to appointments. The therapist had to first show that she could tolerate the real Sheila; that she noticed her stealing and would expect the objects returned, but would not retaliate against her; that Sheila could not destroy her, but that she had no wish to destroy Sheila. Sheila then began to come regularly to appointments and to tell her story. Vacations and separations were always a trial. At first Sheila would use herself badly in the therapist's absence, drinking, smoking, or staying out at night. Then she was able to talk about wanting to make the therapist suffer when she was away.

Sheila was then able to use treatment to understand and work through the anger at and disappointment in her mother and to come to enjoy the safe and comfortable surroundings her parents were now able to provide for her. She eventually became successful professionally and socially, and has married a warm, affectionate man whom she met at her first job. In her work, she uses her own experiences to sensitize others to the trauma that so affected her own life. She has again sought treatment around disagreements with her husband in regard to child rearing, which raised the issue of the continued gulf between her and her mother over the abuse that the mother remains too distressed to acknowledge.

Discussion

These three cases confirm the role of a secure primary attachment to a primary caregiving object at the beginning of life and its critical function in enabling these children to withstand the vicissitudes of the separations and disruptions occasioned by their mother's emigration, eventually to make a

favorable adjustment. It is also clear from these examples, however, that even with such an attachment relation in place, serious difficulties arise when socially determined circumstances stretch that bond. We have seen here that absent optimal real-life contact, fantasy and desire, both conscious and unconscious, take a prominent role in sustaining the bond. Furthermore, we have shown that when the pairs are separated over long periods of time, the real relationship can take a back seat to the fantasy relationship. When the real relationship resumes after many years, the kinds of adaptations normally made over time as children grow up, between the fantasy of the parent (both perfect and perfectly evil) and the reality of the parent, have to be made all at once. Meanwhile, the parent has to adjust to a real child who has been raised for some time by someone else, not necessarily as she would have wished.

Obviously, best case scenarios take place when all has gone well despite the separation. More difficulties arise when the care during separation has been poor, and if the parent herself has suffered hardships during the separation. Clearly, such experiences can be difficult and destabilizing for parent and child alike. It is then important for the therapist who meets the family to be attuned to the possibility that what makes the process so difficult is not that the pairs who come to them in distress feel no connection to one another. Rather, it is that the attachment bond has been sustained through fantasies that must now be delicately adjusted to meet the realities of everyday life.

In this paper, we have highlighted three situations in which attached pairs can find themselves in difficulties not because of their lack of attachment but because of the complexities that arise in the attachment. We are aware that each family has a story of its own and that every theme has infinite variations. It is our hope that this preliminary discussion will begin a process of looking at the attachment narratives of immigrant families to understand the source of their well-documented strengths and to lend greater strength to those who find themselves in difficulties.

Clearly, the long-term solution to these issues relate to public policy and are beyond the scope of this paper. It is our hope, however, that the discussion of the specific needs of children and families will contribute to a broader discussion among the appropriate bodies to address the creation of a global development policy that allows those who wish to do so to remain in their own countries, and creates immigration laws that are based on the preservation and strengthening of families (Ul Haq, 1995). At the very least, it is our hope that family reunification would become the number-one priority for economic refugees, as it is for those who receive political asylum.

Allowing opportunities for children to maintain contact with secondary attachment figures, as well as primary ones, whether in the home country or in the United States, would seem to contribute an essential element of continuity, allowing the children to achieve gradually a greater integration among their separate objects, toward an integrated sense of self. Further investigation on the part of clinicians as to the nature and complexity of the attachment bond in families that are separated will create a larger community of those able to provide skilled and appropriate assistance.

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