

***“Approximately 240,000 children every year find themselves experiencing the emotional and practical difficulties arising from their parents separating or divorcing.”*** (NACCC 2001). In most cases parents can be responsible, put their own feelings aside and do what is best by their children by mutually agreeing on contact without the use of solicitors and the courts etc. Unfortunately however there are many cases where this does not occur. Usually this happens through lack of trust and communication, which develops because of many different reasons e.g. one partner having an affair. As a result of this many children lose contact with close attachment figures and many members of their extended family. If children are denied contact with their non-residential parent they may start to feel rejected or abandoned, blame themselves for what has happened, feel increasingly insecure and may even become withdrawn and in some cases depressed. Research by the NACCC has indicated that children who experience this situation may start to take unnecessary risks or even harm themselves through feelings such as ‘I just don’t care anymore’. In many cases children have become rebellious and in some cases to the extent of anti-social behaviour within their communities and in school or wherever they can receive the most attention. Most disturbingly however many researchers state that the denial of contact can lead to a child experiencing difficulties in establishing happy and lasting relationships in adulthood and thus the cycle continues.

***“A Child Contact Centre is a meeting place where children of separated families can enjoy contact with one or both parents, and sometimes other family members, in a comfortable and safe environment when there is no viable alternative.”*** (NACCC 2001). Child Contact Centres can ensure that children involved in parental disputes can not only enjoy contact with a non-residential parent (s) and/or other family members but:

- Can cope more effectively with the end of their parents relationship
- Have greater peace of mind and more sense of personal identity
- Become less likely to suffer either short or long-term emotional harm
- Have stronger links with and better understanding of their family roots, culture and tradition etc. (NACCC 2001).

Parents can also benefit from using the Contact Centre too. Most obviously it provides a place for contact to occur where otherwise they would not see their children. It provides support and encouragement to parents who for some length of time have had no contact and don’t know how to go about interacting with their children and attempting to reform a relationship with them. Finally after initial support it encourages both parents to:

- Put their children’s best interests first
- Co-operate over childcare and contact arrangements
- Keep their own disagreements away from the child.

There are currently 280 Child Contact Centres throughout England, Wales and Northern Ireland. Here in N.I. there are four Centres. Three of these are in Belfast and Cookstown hosts the fourth. Knock Child Contact Centre on the Kings Road in East Belfast is taken as the example. It is staffed by approximately 40 volunteers who are trained in rigorous child protection, domestic violence and conflict, confidentiality approaches and other relevant

areas. The centre is organised and co-ordinated by a senior social worker. It is overseen by a management committee and is now an independent charity.

During the year 1 June 2002 to 31 May 2003, 74 families used the Knock Child Contact Centre. This involved 102 children and provided 784 family contact visits or 1043 individual children's visits. There were also 56 visits where children came but the contact adult did not attend and 80 visits where the contact adult attended but the children were not brought. These situations can be very disappointing and distressing for both children and adults. Seventy per cent of the children attending the Centre in 2002/2003 were in the 0-5 years age range (71 children), 26% were between 6 and 10 years of age (27 children) and 4% were 11 years of age and older (4 children).

While the majority of contact adults are fathers, in the past year, the number of mothers coming for contact with their children has risen from 11% to 19% (14 mothers). In 10 families the resident adult was the father, in one the grandparents, one was an aunt and in two families the children were in foster care. The remaining resident adults were mothers. Most of the families using the Knock Child Contact Centre have been involved in the legal system. Sixty-three families (85%) had contact orders when they were referred to the Centre and others obtained orders during the time they were using the Centre. In 22 cases (30%) there were non molestation orders, with allegations of domestic violence in a further 16 families.

The Knock Child Contact Centre is open on Saturdays from 10.00 am till 12 noon. Between 10 and 15 families attend and there are usually 8 volunteers plus the Coordinator present. Throughout the year the Centre continued to open on Wednesdays from 2.30 to 4.30 pm. From the middle of June 2003, this has been extended to 3.00 – 7.00 pm to enable older children to attend after school and also to make midweek contact available to parents who are working. Four volunteers plus the Coordinator are present on Wednesdays.

Throughout the first few visits families arrive where adults are apprehensive, often hurt and angry, and children are upset and confused. Over a period of time, in most cases, tensions lessen between parents and trust and confidence begin to build again to the extent that families can move on and make their own arrangements in the community. Ideally, the Child Contact Centre is a stepping stone which provides a neutral, relaxed setting for children to build or rebuild relationships with a parent or other relative with great practical and emotional support. It is not a "normal" situation or a long-term solution.

***“Attachment theory supplies us with an understanding of the abiding need for secure attachments, the profound significance of separation and loss and the lifelong importance of our relationship with others.”*** (Fox, I. Website 1).

Originally attachment theory has been based upon and is greatly influenced by psychoanalytic theorists e.g. Freud. Attachment theorists especially Bowlby (1969) agree with psychoanalytic tradition that the attachment bond between mother and child forms the basis of all relationships in later years of life. Erik Erikson suggests that the child's early experiences will determine how he /she will be able to attach to other people. He further notes that some people work on this problem all their lives if they have not engaged successfully as a child. He states that they will become rigid in their efforts to find optimum distance and their relationships will either become too close (symbiotic) or too distant (ambivalent)

Although attachment appears to be an inherited disposition, infants do not have a natural inclination to become attached to any one specific adult. Rather, the baby becomes attached through 'learning'. It is the primary caregiver of the child who is the object of attachment, which is usually the mother. However attachments with other adults, especially fathers has been increasingly researched and deemed extremely important. Birch, A (1997) identifies that research, which has been carried out in a number of societies has shown that fathers are just as capable of performing the parenting role, as are mothers. Other research detected few differences in signs of attachment with both parents. (Lamb 1977 as cited in Birch, A. 1997). Grandparents have also have recently been viewed as having positive influences in attachments. They can considerably influence the behaviour of their grandchildren and provide emotional support especially when a child is in conflict with their parents.

There are many behaviours that are evident in children that indicate that attachment has been formed. An example of this includes a child moving close and staying close to the attachment figure, particularly when the child is afraid. Young children will cry and even cling to their attachment figure if they feel threat of separation. Other conditions, which activate these sorts of attachment behaviours, include strangeness, fatigue, and unresponsiveness of attachment figure. They do not exist however in a familiar environment for example but termination of attachment behaviours may require touching or clinging etc. (Bowlby, J. 1981). The greater the threat of separation the greater and the more intense are the actions elicited to prevent it occurring. This has become known as the stage of protest and involves great amounts of stress and emotional distress. If these behaviours are successful in prohibiting the separation, the bond is restored and the distress becomes alleviated. However if they are unsuccessful the efforts diminish but do not usually disappear. Usually after periods of time the urge to search for the attachment figure return and behaviours reappear. Bowlby (1981) comments that, ***“the condition of the organism is then one of chronic stress and is experienced as one of chronic distress.”***

Research into attachment behaviour in babies carried out by Mary Ainsworth and her colleagues (1967, 1974) hypothesised that in an effective attachment relationship the child would use the mother as a base to explore from, would be distressed by her absence and would seek closeness on her

return. (Birch, A. 1997). This concept of using the mother as a base was developed by Bowlby, J (1969) who formed the opinion that the attachment figure provides a secure base which is needed for a child to operate. The stability of security will establish social confidence, lack of behaviour problems, greater autonomy, interpersonal competence and enables eagerness to learn and problem solve. Maternal deprivation is the term coined to describe the effects of a child being separated from its attachment figure in the prime stages of development. This was primarily proposed by John Bowlby in 1951 who believed that if a child was deprived of the opportunity to form an attachment during the early years of life then social, emotional and/or intellectual problems would develop later in life. Bowlby also suggested that it could lead to conditions such as depression, bed-wetting and even dwarfism. (Birch, A. 1997). Rutter, M (1972, 1981) supported Bowlby's position that disruption of early child care could have adverse effects on psychological development. However he disagreed and contested Bowlby's concept of maternal deprivation. He stressed the effects of maternal deprivation were more likely to be due to the lack of something (privation) rather than any kind of loss (deprivation). Rutter M. believed that the crucial factor in determining the adverse effects of psychological development was what happened before and after the separation. His more plausible explanation attributed children's problems to family discord, loneliness, and changes in discipline and the changed circumstance of the residential parent e.g. the lower income or having to go out to work.

Despite the debate on the actual causes, either the separation itself or other factors surrounding it all researchers agree that children are seriously affected in their psychological development and more often than not will continue into adulthood with serious problems. This could and does lead to a vicious cycle that is affecting many families. The concepts of 'attachment', 'loss', 'separation' and 'change' are very important for understanding lifelong human development and is a crucial component for social work.

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