Drawing on the correspondence Ursula Bowlby wrote to John Bowlby following the birth of their first child, Mary Hamilton, this paper explores Ursula's experience with motherhood in the context of pre-War Britain. Notwithstanding Ursula's privileged position in British society, her expressed views and feelings about mothering are in many ways both timeless and classless. Ursula's experiences of motherhood are also significant since her husband was to become the world's leading 'expert' on attachment and a staunch advocate for mothers as primary attachment figures and selfless participants in childrearing. Ursula's letters provide a chronicle of the ordinary experiences of motherhood. Juxtaposed to the formidable influence that 'attachment theory' was to have in defining motherhood, her letters reveal what little influence her lived experiences had on her husband's theoretical writings on the subject.

Theory has shaped how we have come to understand women's nature. Women's proscribed roles, in Western industrialized societies, as both primary caregivers and 'homemakers' confirms how “people believe not only that women are caring and nurturing but that women should be” (Cole et al. 212). The fact is that regardless of whether women are full-time caregivers to the family's children or working full-time outside of the home in paid employment, women spend significantly more hours every week in childcare and household labour than do men (Bianchi; Statistics Canada). The belief that women, and not men, are natural nurturers not only defines a woman's role as primary caregiver, it underlays socially constructed ideas of what it means to be a 'good mother.' Achieving the 'good mother' status involves a set of socially proscribed rules—rules not only developed and defined by 'experts' but guarded and promoted by social norms. Although this point was made almost 100 years ago when
Hollingworth examined the social construction of motherhood in her article the *Social Devices for Impelling Women to Bear and Rear Children*, countless feminist researchers continue to refute patriarchal notions that naturally tie women to motherhood (Caplan; Cowdery and Knudson-Martin; Hare-Mustin and Broderick; Hager; Houseknecht; Kaplan; Russo; Thurer).

Attachment theory was developed more than half a century ago and is arguably the most influential of all theories to have shaped contemporary understandings of the ‘good mother.’ Although ignoring diverse and longstanding criticism, the theory continues to be a critical informant of the ways in which motherhood should be enacted. Attachment theory, from its inception, paid no attention to the influences of the economic, social and cultural contexts that influence mothering practice; favoured biological drives to explain infant exploratory and proximity seeking behaviours; downplayed the role of infant personality on bonding outcomes; and perhaps most egregious of all, privileged the mother-infant bond over all other social relationships in the infant’s world.

**Attachment Theory in Brief**

Bowlby’s attachment theory has shaped understandings about the course and consequence of intimate human relations across the life span (“Attachment”, “Separation”, “Loss, sadness, and depression”). Integral to the theory, Internal Working Models (IWMs) were conceptualized as active cognitive ‘maps’ governing memories, knowledge, perceptions, expectations, behaviours, and affects of self and other(s) in all attachment relationships. They were proposed as the mechanism determining the way individuals would function in all—present and future—attachment relationships. Developing in infancy and early childhood IWMs were hypothesized by Bowlby “…to persist relatively unchanged throughout adult life” (“Making and breaking of affectional bonds” 141). By evaluating the balance between attachment behaviours (e.g., proximity-seeking) and those antithetical to attachment (e.g., exploration) Ainsworth and Wittig isolated and measured three distinct infant attachment styles. These styles were used to define the strength and quality of infants’ attachment to their caregivers who were almost exclusively defined as their mothers.

Underlying the classification of infant attachment styles was Bowlby’s concept that infants use their caregiver as a ‘secure base’ during times of distress (“Attachment”). As such, infant attachment styles develop in direct response to the ways in which primary caregivers (often defined as mothers) manage their infants’ attempts at proximity seeking. Thus, appropriately responsive, consistently available, and ever sensitive caregivers become responsible for ‘secure’ infant attachment outcomes. Alternatively, according to the theory, inappropriate caregiving results in negative outcomes for the infant in the form
of ‘insecure’ models of attachment. Infants classified as ‘secure’ are described as being able to express their anger and fear of separation, while still able to explore novel surroundings. They can also be readily comforted when re-united with their caregiver(s). In contrast, those classified as ‘avoidant,’ although appearing unconcerned about separation, show signs of physiological arousal for longer periods of time compared to infants classified as secure. They also resist being comforted by their caregivers when re-united. Infants classified as ‘ambivalent’ show the same levels of arousal as ‘avoidant’ infants, but tend to respond to reunions with undue and exaggerated demands for attention and with clinging behaviours (Ainsworth, Blehar, Waters and Wall).

Over the past four decades these infant attachment style categories have remained largely unchallenged. A fourth style, ‘disorganized-unresolved’ (Main and Solomon), was introduced to explain the behaviour of infants who appear confused and display no organized strategy for handling reunions (Main and Hesse). Using these classification categories between 57–73 percent of infants could be described as ‘secure,’ leaving the balance to be labelled as insecure (avoidant or ambivalent) or disorganized-disoriented (Main and Hesse; Spieker and Booth). These attachment styles were typically viewed as descriptors of infant-caregiver interactions as well as the somewhat fixed cognitive strategies developed by infants to manage interactions in their attachment relationships. These fixed styles were also conceptualized as the templates that would govern all future attachment relationships. As well, they were viewed to play a powerful role in mediating a variety of psychopathologies (Green and Goldwyn). From a description of cognitive coping strategies used to navigate interpersonal relationships, the ‘secure’ style has now become the privileged benchmark defining ‘normal,’ healthy relationship functioning. And, it is this privileged style that mothers are largely responsible for grooming in their children. When children deviate from attachment ‘security’ it is the mother who is blamed.

The Man Behind the Theory

Dr. John Bowlby, a member of the British upper class and heir to a baronetcy, was a medical doctor and a trained Freudian child psychoanalyst (Dally). Bowlby was cared for by a nanny during his childhood and sent off to boarding school when he was just eight years old.2 Throughout much of his early career Bowlby worked in a variety of psychiatric settings. He spent almost three decades of his working life as the Consultant Child Psychiatrist, the Director of the Department for Children and Parents, and Deputy Director at the Tavistock Clinic in London. For almost the same length of time, Bowlby was also the Consultant in Mental Health for the World Health Organization (WHO)
Attachment theory was borne out of Bowlby’s interest in children who had been displaced from their homes and removed from their primary caregivers. In April of 1948 the Social Commission of the United Nations resolved to study the needs of homeless children—“children who were orphaned or separated from their families for other reasons and need[ed] care in foster homes, institutions or other types of group care” (United Nations Economic and Social Council 28–29 cited in the “Preface” to “Maternal Care and Mental Health”). Bowlby took on this major task. The results of his inquiries were first published by the WHO in 1951 as a monograph entitled *Maternal Care and Mental Health*, republished two years later as *Child Care and the Growth of Love* for “the ordinary reader” (8). A study that was designed to look at the needs of ‘homeless children’ curiously resulted in a monograph entitled *Maternal Care*. Within this monograph, there were two main sections: the first devoted to discussions about the *Adverse Effects of Maternal Deprivation* on child development; the second to the *Prevention of Maternal Deprivation*. Bowlby brought with him into this important study of homeless children, the concept of ‘maternal deprivation’; a concept that sealed mothers’ fate for decades to come.

Between 1938 and 1950, Bowlby published a number of articles that connected his ideas about juvenile delinquency with that of maternal deprivation. He also worked with a research group whose focus was on children who had been placed in different therapeutic settings away from their homes and their mothers; these settings included tuberculosis sanatoriums, fever hospitals, and residential nurseries (Smith). James Robertson was an important member of this research team, hired to “observe and describe the behaviour of young children during and after separation from the mother” (Robertson and Robertson 12). As the researcher intimately involved with observing infants’ and young children’s responses to separation, Robertson disagreed both publicly and privately with Bowlby’s assumptions about the effects of maternal deprivation, noting how Bowlby’s analysis was “…based on inferences from his therapeutic work; there were no first-hand observations on the processes of separation/deprivation” (12). In regards to infant and child psychological well-being, Robertson consistently held that the context under which separation occurred, as well as the circumstances in which the separation occurred, were at least as, if not more important, than the periods of separation from the mother. Nonetheless, ‘maternal deprivation’ became the phrase of the day and set the agenda for attachment theorizing for the next six decades.

At about the same time as Bowlby was promoting his ideas about the critical importance of an exclusive mother–infant bond for healthy child development there were an unprecedented number of women working outside of the home as a consequence of Word War II. The fifties were rife with warnings to mothers
about the harmful effects on infant development of non-maternal child care (Etaugh). Following the War it was seen as important for men’s employment opportunities as well as for the stability of societies that women should find their way out of the workforce and back into the home (Gauvreau; Gleason). As a result of his investigations into the plight of institutionalized children, Bowlby warned mothers that depriving a child of maternal care, even for brief periods of time, “...may have grave and far-reaching effects on his character and so on the whole of his future life” (“Maternal care” 46). Bowlby’s position further advocated that

Just as the baby needs to feel that he belongs to his mother, the mother needs to feel that she belongs to her child and it is only when she has the satisfaction of this feeling that it is easy for her to devote herself to him. The provision of constant attention day and night, seven days a week and 365 in the year, is possible only for a woman who derives profound satisfaction from seeing her child grow from babyhood, through the many phases of childhood, to become an independent man or woman, and knows that it is her care which has made this possible (“Maternal care” 67).

Attachment theory not only articulated the ‘how-tos’ of child care, particularly with the demands it made for mothers to be constantly and consistently available to meet their infants’ needs, but the theory also defined the maternal feelings that should accompany this constant infant care. Above all, attachment theory demanded that women should approach mothering with an absolute selflessness. Today, this sentiment continues to be expressed and promoted by advocates of attachment parenting and in the psychopathology literature with the marketing of attachment ‘disorders’ and attachment therapies (Cain; Brisch). And thus, the effects of ‘attachment’ are no less evident today than they were when Bowlby first began promoting his theory. Indeed, one might argue that the weight of the burden placed on women by attachment theory has increased rather than diminished in recent years (Ross).

The Personal Side—Ursula’s Experiences with First Time Motherhood

When Dr. John Bowlby died in 1990, many of his papers were archived at the Wellcome Institute, in London England. Ursula added to this collection in the mid and late ’90s. Included in her contributions were a series of letters she had written to John during the year following the birth of their first child—Mary Hamilton. She also added several journals to the collection, one that was written four weeks after Mary Hamilton was born and two others
that contained accounts and reflections of her life with John—one written in 1942 and the other written six months after John had died.

The years just prior to and during the Second World War can not be considered as ordinary times in Britain; nor could the Bowlbys be seen as ordinary people. Like John, Ursula came from a privileged family. Her father, like her husband, was also a medical doctor. In one of her early journals, reflecting on what initially attracted John to her as a marriage partner, Ursula writes “No doubt my private income was not a hindrance” and then she goes on to say “Of course he didn’t marry me for my money, [but] I rather suspect that he liked my moneyed background.” She brought with her into the marriage a 400 pound a year allowance—in today’s terms that would have a buying power equivalent to approximately $40K a year. Ursula was the third oldest of seven daughters. Her parents were in the throws of divorce at the same time as she and John were planning to be married; they married in April of 1938. While they were still courting, Ursula made it clear to John that she “didn’t hold with divorce” and that she “thought marriage was for life”. She also told him that “if you married me, I would never agree to a divorce.” Before marrying both agreed that they “wanted 4 children.” This is exactly how their family worked out—Mary Hamilton was born in February 1939; their three other children—Richard, Pia, and Robert—were born between 1941 and 1948.

Ursula had been married for just under two years when Mary Hamilton was born. She was 24 years old. John was ten years her senior. During the latter part of Mary Hamilton’s first year, England was at war. Just prior to the birth, John and Ursula had left their home in London and Ursula was living with her mother and older sister Dick, in her mother’s home outside of London. John remained in London where he continued working as a psychiatrist with the London Child Guidance Clinic and then in 1940 as a specialist psychiatrist with the Royal Army Medical Corps. Because of his work and the distance from their temporary residence, John was only able to visit the family on weekends. Usually he made these trips every week, but sometimes he was only able to find time to visit every other weekend. Although this was not an unusual situation, given the times, it was one that Ursula found very difficult, and especially so during her time of ‘confinement’ following the birth of Mary Hamilton. While still in hospital Ursula writes of her difficulties with nursing the new baby and having anticipated a visit from John that he cancelled at the last minute she says:

I am very unhappy. The feeding is going badly…. I get so tired by the evening that my milk goes. Visitors make me so tired, but I am so lonely and on edge with only seeing Nurse all day. Nurse says I must
stay 2 ½ weeks or 3, but I can’t stand this much more. If only I had Mummy. There is no one here to comfort me and I get so worried about the feeding and everything…. Please come soon.7

She also expresses frustration with her nurse while in the hospital

Oh, how I long for Nurse to go! Not that she isn’t very hard-working, and really kind and concerned about me, and she handles the baby so beautifully. But she treats me like … a child, and there is such a dutiful, moral tone about her. She’ll never let me enjoy the baby in the way I want to.8

For these first few weeks Ursula, like many new mothers, was absorbed with the physical needs of her new baby and her thoughts and energies, as indicated by the content of her letters, were often focussed on feeding. Although she was not opposed to supplemental bottle feedings, she felt strongly that she should be able to do this herself, rather than the bottle feeding being the nurse’s responsibility. And she was also concerned about rigid scheduling and about allowing Mary Hamilton to cry too much. Although the common wisdom of the time suggested both scheduling and infant crying as acceptable ways of managing infant behaviours, Ursula was less inclined to endorse this sort of care. When Mary Hamilton was four weeks old, Ursula wrote in her journal:

The baby should never be allowed to cry unnecessarily. Picking the baby up and walking about with it, drinks of sugar and water, and a little judicious rocking, are devices to which I am sure any mother depending on her own resources would willingly resort.9

And:

Gladly, I am sure, would any mother take a little trouble to quieten her baby, rather than suffer the misery of hearing it cry and doing nothing to comfort it. Many mothers, I think, suffer untold agonies through the mistaken idea that it is for the baby’s own good to let it cry.10

Ursula did stay in the hospital for almost three weeks following the birth, and was then confined to bed for another week when she returned with Mary Hamilton to her mother’s home. There did not appear to be anything unusual about the birth or her state of health following. The length of ‘confinement’ instead seemed entirely appropriate for both her class and the historical times.
At least for this first month, Ursula was sharing mothering responsibilities with her nurse while in the hospital, and again with her nurse—although she was not fond of her—as well as her mother and sister when she was recuperating at home. Although John was not present for a large portion of this early period of Mary Hamilton’s life, Ursula’s letters certainly made clear that there were other capable adults attending to her own, as well as to Mary Hamilton’s needs. Although John’s theory was to demand ‘24/7’ infant care from the mother, due to her own circumstances, for at least this first month, Ursula was not in a position to be the sole provider of care to her new baby. And further, when she was up and about, she continued to have help with childcare from other adults in the household. Ursula’s reality was not one John was privy to on a day-to-day basis but was one that she shared with him through her letters. However, it was a position that ultimately was not reflected in his theoretical writings. In fact the demands he made of women were quite in opposition to the position his own wife found herself in following the birth of their first child. From reading Ursula’s letters and journals there appeared to be no adverse effects on Mary Hamilton’s emotional development resulting from this shared care arrangement. Throughout this first year of motherhood—one in which Ursula and John were largely separated—Ursula continued to express in her letters the loneliness she was feeling and her distress at being separated from him. She described this distress in terms of depression and despair and in a dread of Mondays, as he always left on Sunday evenings to return to work. In her letters she would write, for example:

Last night after you left was pretty awful. I was trembling with apprehension…. 12

It’s horrid, you going away, you know. I loathe it…. 13

When you left yesterday I felt blank, and knew that nothing made up for not seeing you every day. And last night I woke up and thought you were still there. Soon we shall be together again all the time.14

And while it was not a central focus of his developing theory, John did comment in the 1951 WHO publication about how

…fathers have their uses even in infancy. Not only do they provide for their wives to enable them to devote themselves unrestrictedly to the care of the infant and toddler, but, by providing love and companionship, they support her emotionally and help her maintain that
harmonious contented mood in the aura of which the infant thrives. (“Maternal care” 13)

Certainly, this emotional support was not readily available to Ursula during her first year of motherhood. And yet, the way John emphasized father’s involvement further insinuated that mothers should not only provide their infant’s with constant care but that they needed to feel ‘contented’ and ‘harmonious’ in that role. Again, while it is unlikely that Ursula felt lonely or was absorbed with John’s absence all the time throughout this first year, her letters do suggest that she was distressed and missing John’s emotional support at least some of the time. This was Ursula’s reality, and undoubtedly the reality faced by many mothers in Britain at that time. And yet Ursula’s revelations about how difficult this situation was and the strength required for her to function as a new mother were never really acknowledged in his theoretical writings about motherhood.

Once Ursula was back in her mother’s home with her new baby her anxieties about feeding and scheduling gradually eased. After the first few months, Ursula wrote less about the baby’s feeding and sleeping habits, and instead would very occasionally mention milestones in Mary Hamilton’s development. Her letters became filled with the details of her own daily life—the walks she was finally able to take by herself, books she had read, pipes that had frozen and burst, people who came to the house to visit, and about rationing concerns, particularly the shortage of sugar. However, throughout the year she continued to write to John about her loneliness and the despair she was feeling at being apart from him.

Another theme that surfaced during this year was the ambivalence she began to feel about her new role as a mother.

Half the day I feel a great longing to get away from my baby and this room, and to be out running or walking somewhere out-of-doors. Or to meet people again and talk about the war, or books or something other than the baby.15

Some weeks later she again notes:

Tonight I feel somewhat tired and depressed…. I have made the depressing discovery that Mary Hamilton is in my arms, except when I’m eating breakfast, from 6-11 a.m., with only breaks of a few minutes when I lie her on the bed, and again from 2 p.m. solidly till 7 p.m., so that by the evening I really feel as though I never wanted to see her again.16
She ended that particular letter with a sentiment all mothers could relate to by saying, “Mary Hamilton is crying again. Oh, God!”

In January, she writes:

Often I long for the time before M.H. came, when I was so free and could go out whenever I liked, and when we used to go out in the evenings so often together, or could spend hours on the sofa talking. We were such companions then, and now all that seems to have ended. If I hadn’t got M.H. I could be with you, and feel free to go anywhere and do anything. Now all the time I have to subordinate my own desires, and you have no idea of the degree of self-discipline this entails. I’ve never had to do it before in my life.17

And, again in February:

I got very depressed … and longed so much for you. Always before when I have felt depressed and lonely in the daytime I have you to comfort me…. Sometimes, just for a moment, I wish Mary Hamilton weren’t here and we were the same as before.18

These are very strong statements, reflective of the genuine and powerful feelings Ursula was having about motherhood. There is no suggestion that these feelings had any sort of negative impact on Mary Hamilton’s well being or any implication that there was anything pathological in Ursula’s response to becoming a mother. In fact, her response seems quite normal—she was young, and to some extent relatively undisciplined. She had assumed very few adult responsibilities prior to marriage. By her own admission she could not cook and she had never kept house before. Following their brief honeymoon, Ursula had noted in her journal:

I must learn to housekeep. I had done nothing in this way before and I was deeply afraid of living in town. Jenny, John’s servant, was my greatest trial, as well as my own lack of confidence. When John was out for lunch, I used to escape to Selfridge’s snack bar as I was far too frightened of Jenny to stay in with her.19

And here she was, effectively deposited, with the birth of their first child, into the role of being an almost single parent. This was not how she likely imagined it would be when they began their family. These admissions of how difficult she was finding her new role, and certainly her feelings of despair and regret were both transient and temporary. These expressions of ambivalence
as she was feeling torn between her own needs and the needs of her baby were nonetheless real. As well Ursula throughout the year expressed concerns about how the relationship she was forming with Mary Hamilton might be creating a chasm between herself and John. So this was another cause for her distress and, no doubt one that contributed to the ambivalence she was feeling towards her role as mother. In terms of John’s future theorizing about maternal feelings there is no evidence, as he crafted his demands about how mothers should feel in their caregiving role, that Ursula’s experiences were given the least bit of consideration.

Statements, by John, that would ultimately appear in his theory about the ease of women’s devotion to their infants and the “profound satisfaction” they were expected to garner from this role do not accurately reflect Ursula’s lived experiences. There were, of course, many other admissions of the joys of motherhood and the overwhelming sense of connectedness Ursula felt to Mary Hamilton. For example, even as she was feeling frustrated, she would say:

But all the while I feel a great tie between Mary Hamilton and me, and that I mustn’t leave her, nor would I be really happy away from her, I know. It’s very odd. I hope it becomes less acute soon.20

But there was an ambivalence that should not have so readily been disregarded by John in his theoretical writings.

Conclusions

On the one hand, although Ursula wrote to John two to three times a week, these letters represent only a brief glimpse into her world as a new mother; on the other hand, her letters were a permanent record of her feelings and insights about what it was truly like to be a first time mother. Juxtaposed with an understanding of a theory that would not fully surface for another ten years, it seems evident that John paid little attention to his own wife’s reality—the fluctuations she experienced between despair and joy as she negotiated motherhood for the first time. It was as if Ursula’s experiences were less valid or important than the scholarly work that he was ultimately to base his theory on. Or perhaps Ursula’s experiences were construed by him as individual and therefore not reflective of the way women should be feeling about mothering. While not speaking specifically about attachment theory, Ursula did note in her journals “I’m sure he would accept useful concepts from trusted colleagues, without hesitation. He certainly wouldn’t from me.”21 In fact, very much in contrast to Ursula’s own experiences, the image of motherhood promoted by
Bowlby was a nineteenth century Victorian creation, where talk of ‘maternal instinct’ provided an image of mother as “…adored for her self-abnegation, her altruistic surrender” (Spencer 17).

From her accounts, Ursula certainly did cherish her role as a new mother, and later on, as the mother of four children. However, the path she travelled to achieve this state required sacrifice, critical self-reflection, and hard emotional work. It also required the help of other close adults with whom she shared the first year of Mary Hamilton’s life. It is impossible to know why Ursula’s experiences and insights into motherhood were not used to strongly inform John’s attachment theory. What can be known from her experiences is that mothers are not perfect people; they do not always behave in perfect ways, nor do they always think perfect thoughts. Nor should anyone expect them to. That motherhood was not always performed with unending joy, with a complete self-abandonment, seems evident from letters Ursula wrote to John. Mothers sometimes need to be women first—nurturing their own interests and relationships. And so, in many ways, John got it wrong. And in getting it wrong, he set an unachievable standard for generations of women. There is no denying that motherhood can and does shape women’s lives. If we stop imagining, as Bowlby did so many years ago, that women can accomplish this work with a selfless dedication, we can start re-imagining and re-valuing the complex labour and the sacrifices women make to provide the nurturing environments in which children are raised. And perhaps as importantly, we can begin to nurture and give credence to the idea that other caregivers in children’s lives, not just mothers, are important participants in raising children and in ensuring their well-being.

1All primary sources cited in this paper were retrieved from the PP/BOW collection (CMAC ACC No.396,567) in the Contemporary Medical Archives Centre at the Wellcome Institute for the History of Medicine, London, UK.

2Ursula noted in her journals how John had told her “I wouldn’t send a dog to boarding school at 8.” And from Ursula’s assessments, although John made it clear to her that discussions about his family were “tabu”, she saw John’s family as “a quarrelsome household” (PP/BOW/P.6.3: from Ursula Bowlby’s “As it was,” December 1941-January 1942, p 25). In response to their elder son’s questioning John about why he had “gone for psychology,” she notes in a later journal entry how “John replied that his own childhood had been sufficiently unhappy to want him to investigate—but not so unhappy that he had obliterated the subject” (PP/BOW/P.6.3: from Ursula Bowlby’s “A memoir of John,” March 3, 1992).

3The original book was reprinted five times between 1951 and 1952.
As an aside, while all four of the Bowlby children were, by Ursula’s accounts, dyslexic, this had nothing to do with the care the children were receiving. When questioned in later life about what it was like to raise four children with dyslexia she replied “I couldn't get over my good fortune to have 4 wonderful children, that I supposed there always had to be some fly in the ointment, but in this case the fly (dyslexia) was amply compensated for by the very superior quality of the ointment” (PP/BOW/P.6.3: from Ursula Bowlby’s “A Memoir of John” started March 1991, p. 40). She went on to say in this same entry that “John did not accept the concept of dyslexia. Altho’ he didn’t show it, he was cast down by the children’s academic failure, but did not come up with constructive suggestions, I assume because he didn’t know any.”
References


Robertson, James, and Joyce Robertson. *Separation and the very young*. Free Association Books, 1989.


