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**ANNUAL REPORT**  
*of a*  
**RESIDENTIAL WAR NURSERY**

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*Else Hellman*

ANNUAL REPORT

*by*

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AND

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FOSTER PARENTS PLAN FOR WAR  
CHILDREN

HAMPSTEAD NURSERY

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CHILDREN'S REST CENTRE  
13 WEDDERBURN ROAD LONDON NW3

BABIES' REST CENTRE  
5 NETHERHALL GARDENS LONDON NW3

COUNTRY HOUSE  
NEW BARN LINDSELL NEAR CHELMSFORD ESSEX

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# ANNUAL REPORT

January 1942

## I. INTRODUCTION

The Hampstead Nurseries consist of three houses:

- (1) 5 Netherhall Gardens, London, N.W.3, *a large residential nursery* for babies and young children (50 children);
- (2) 13 Wedderburn Road, London, N.W.3, *a day nursery* run for the children from the residential nursery and some outsiders;
- (3) Newbarn, Lindsell, near Chelmsford, Essex, *a country house* for evacuated London children from 3-6 years (30 children).

At the present moment the Nurseries look after 80 resident children from the age of 10 days to 6 years, and 40 outside children who receive help, partly through attendance at the day nursery, partly through gifts of food, clothing, and some general supervision.

The Nurseries further give lodging and paid work to mothers while they nurse their own babies, and extend hospitality to the parents of all children.

The staff consists of highly trained workers in the field of medicine, psychology, education, nursing, and domestic science; besides 20 girls who receive training in the various departments. Most of the trained workers are refugees from the continent who have done specialised work in their own countries.

The actual period of time covered is 14½ months, from the middle of December 1940, to the end of February 1942. The number of children dealt with altogether is 138; 103 resident and 35 non-resident; 50 of them lived with us for more than six months, 20 for a year or more. These numbers will not seem very impressive to larger organisations, but so far as the war experiences of the children, their family circumstances, and their reactions to the war are concerned, the nursery probably presents a fair average of the circumstances met with by other establishments. Larger numbers of children would multiply facts; they might detract from the intensity of observation what they add in extensiveness.

Work in the Nurseries is based on the idea that the care and education of young children should not take second place in war-time and should not be reduced to war-time level. Adults can live under emergency conditions and, if necessary, on emergency rations. But the situation in the decisive years of bodily and mental development is entirely different. It has already been generally recognised, and provision has been made accordingly, that the lack of essential foods, vitamins, etc., in early childhood will cause lasting bodily malformation in later years, even if the harmful consequences are not immediately apparent. It is not yet generally recognised that the same is true for the mental development of the child. Whenever certain essential needs are not fulfilled, lasting psychological malformations will be the consequence; these essential elements are: the need for personal attachment, for emotional stability, and for permanency of educational influence.

War conditions, through the inevitable breaking-up of family life, deprive children of the natural background for their emotional and mental development. The present generation of children has therefore little chance to build up their future psychological health and normality which will be needed for the reconstruction of the world after the war. To counteract these deficiencies, war-time care of children has to be more elaborate and more carefully thought out than in ordinary times of peace.

On the basis of these convictions our efforts are directed towards four main achievements:

- (1) *To repair* damage already caused by war conditions to the bodily and mental health of children. We therefore accept children who have suffered through bombing, shelter sleeping, indiscriminate evacuation and billeting. We try to serve on the one hand as a convalescent home and on the other, whenever necessary, as a home for problem children.
- (2) *To prevent* further harm being done to the children. If small babies have to be separated from their mothers we try to keep them in comparative safety within easy reach of their families. We provide every facility for visiting so that the baby can develop an attachment for and knowledge of its mother and be prepared for a later return to normal family life. For the older children we make the necessary provision for ordinary peace-time

education and, again, try to preserve the remnants of family attachments so far as possible.

- (3) *To do research* on the essential psychological needs of children; to study their reactions to bombing, destruction and early separation from their families; to collect facts about the harmful consequences whenever their essential needs remain unsatisfied; to observe the general influence of community life at an early age on their development.
- (4) *To instruct* people interested in the forms of education based on psychological knowledge of the child; and generally to work out a pattern of nursery life which can serve as a model for peace-time education in spite of the conditions of war.

## II. STATISTICS

### A. AGE OF RESIDENT CHILDREN ON ADMISSION

1—4 weeks	..	..	..	7
1—6 months	..	..	..	24
6—12 months	..	..	..	7
1—2 years ..	..	..	..	25
2—3 years ..	..	..	..	17
3—5 years ..	..	..	..	17
5—10 years	..	..	..	6

TOTAL .. .. 103

### B. FAMILY SITUATIONS OF RESIDENT CHILDREN

*Occupation of Parents:* 36 children have fathers in the Forces (Army, Navy, R.A.F.), and the mother of 2 children is serving in the A.T.S. The fathers of 25 children and the mothers of 27 are engaged on war work in munition factories, etc.; 31 children still have fathers or mothers in civilian occupations, mostly labourers in the building and other trades, railway porters, lorry drivers, etc.; 6 mothers (of 11 children) are working in our own households; 4 of them at the same time nurse their own babies.

*Illness of Parents:* The mothers of 4 children are bad cases of tuberculosis and will have to remain in hospital for many months; 1 father of 3 children is in hospital after a bad accident at work; 1 father, a discharged soldier, is in a mental hospital with an anxiety state relating to the war; 1 mother suffers