



The Fifth Child

Patient #4036 (Ben Lovatt)

A Case Study By

Dr. Marian Ng Si Lin, Dr. Ong Ziying, Dr. Lim Yi Qing

ABSTRACT1

Nature versus Nurture – which is it?

This case study examines the development through infancy to adolescence / pubescence of a child who displays anomalous behaviour. Through interviews and professional analyses, we will attempt to evaluate how physical, familial and social conditions surrounding the patient may determine the greater influence – nature or nurture.



¹ Our creative project centers on Doris Lessing's *The Fifth Child*. By assuming the roles of psychologists at a research facility, we will examine the conundrum between nature and nurture through a medical format, with additional data from the text. Moreover, by using appropriate jargon and a medical gaze, we deliberately appropriate Ben Lovatt as a subject for a case-study, for the sole purposes of medical research.



SECTION A SUBJECT'S DETAILS



Name of Patient: Ben Lovatt

Date of Birth: XX/XX/1975

Gender: Male

Occupation: Student

Date of Examination: 14/11/1988

Nationality: British

Marital status: Single

SECTION B FAMILY PARTICULARS

Name: David Lovatt (1936)	Name: Harriet Lovatt (1940)			
Relationship to Patient: Father	Relationship to Patient: Mother			
Occupation: Multiple jobs	Occupation: Housewife			
Name: Luke Lovatt (1966)	Name: Helen Lovatt (1968)			
Relationship to Patient: Brother	Relationship to Patient: Sister			
Occupation: Student	Occupation: Student			
Name: Jane Lovatt (1970)	Name: Paul Lovatt (1973)			
Relationship to Patient: Sister	Relationship to Patient: Brother			
Occupation: Student	Occupation: Student			



SECTION C MEDICAL HISTORY²

This section details the patient's medical history from conception to pubescence, taking into account both medical and anecdotal evidence³ through the years, and is as follows:

Patient #4036 was previously examined by Dr. Brett from Lessing Medical Clinic, Dr. Macpherson from X Institution and Dr. Gilly from Lessing Child Treatment Facility. He was admitted to X Institution in 1979, only to be removed by his mother, Mrs Harriet Lovatt, several months later. He has no known allergies to medication and was prescribed sedatives by Dr Macpherson during his stay.

ADDITIONAL NOTES

The following statement was made by Dr. Brett about the mother's term of pregnancy:

"Mrs Harriet Lovatt had four children prior to Ben and each pregnancy was difficult, but none so painful as the last. Ben, it seemed, cause extreme emotional and physical distress to Harriet as a foetus, and I had to prescribe sedatives to ease her pain. She appeared to have requested for tranquilizer from external sources during the pregnancy as well."

² It is important to note that the patient's medical history is not solely contained to the "nature" aspect of our central question. "Nurture" affects the patient's development through various channels, including but not exclusive to the prenatal development of the patient and his time spent in various treatment facilities.

³ For a full account of the patient's medical history, please refer to the medical charts and letters attached to this section.



EVALUATION

Medical reviews of the patient's various bodily functions deem the patient as physically fit and in perfect health. With regards to physical health, patient does not have any known causes for behavioral deviance. The only abnormality observed of the patient was the immense physical pain he caused to his mother as a foetus. Nature, in this case, appears to have only a marginal influence on the patient's behaviour.

Based on Dr. Brett's and Dr. Gilly's analyses, we have reason to suspect that the unusual and erratic behaviour of the patient could be a result of negative emotions from his mother. Rejection, neglect and abhorrence on the mother's part could have been felt by the patient, subconsciously or otherwise, even as a foetus. Nurture, beginning as early from the point of conception, appears to have played a part in the patient's development.

PATIENT'S PHYSICAL HEALTH RECORDS [PATIENT #4036]

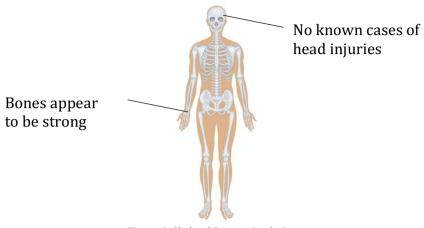


Figure 4: Skeletal System Analysis

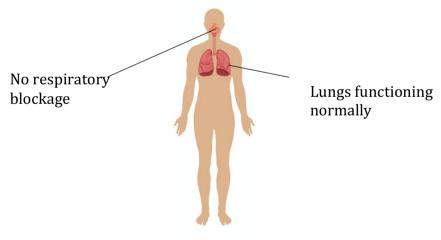


Figure 2: Respiratory System Analysis

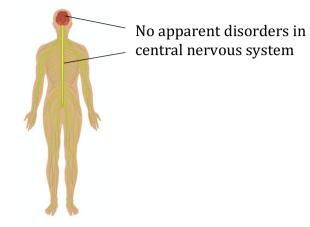


Figure 3: Nervous System Analysis

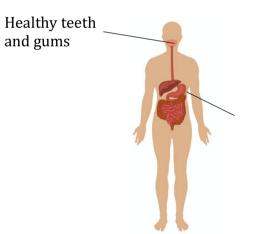


Figure 1: Digestive System Analysis

Unusually large appetite observed at a voling age

PATIENT'S PHYSICAL HEALTH RECORDS [PATIENT #4036]

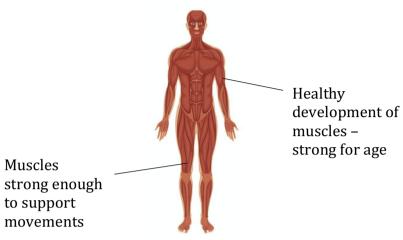


Figure 5: Muscular System Analysis

Muscles

to support movements

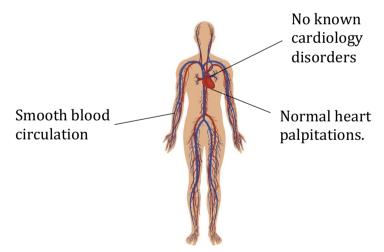


Figure 6: Circulatory System Analysis

Evaluation:

Patient appears to be fit and does not display any symptoms of physical disorders.

Large appetite is observed – normal for children experiencing growth spurt.

Had milk infection at two months old – normal if not breastfed.

Delayed speech and language development is observed - normal for certain toddlers.

Motor skills are well developed.

REFERRAL FOR TREATMENT PURPOSES

DR. X. BRETT

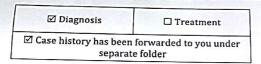
Lessing Medical Clinic 231 Morningside Road CA 123987 Telephone: (+44) 1880-4036

Date: 17 September 1988

TO DR. MARIAN NG, DR. ONG ZIYING, DR. LIM YI QING

This will introduce my patient, Ben Lovatt (Ref #4036)

For



Remarks:

Thank you for agreeing to evaluate Mr. Lovatt for his behavioral condition. Mr. Lovatt was under my care during his childhood health. His medical history includes the delay of speech and motor skills, and severe violence tendency. He was admitted into X Institution, and during his stay, he was prescribed potent sedatives. He displayed resistance towards human interactions, and was known to show hostility towards people whom he is not keen in interacting with.

However, full clinical examination had been made and we found no concrete bodily malfunctioning that may have caused his behavioral deviation. Although his physical health appeared excellent, I am referring him to your care for further evaluation due to the concerns of Mrs. Lovatt, his mother. Enclosed are the results of my clinical analysis for your perusal.

Once again, thank you for seeing Mr. Lovatt. Please do keep me updated on his progress.

Best regards, X. Brett

> Dr. Brett's Letter Lessing Medical Clinic 17 September 1988



P: (+44) 20 7946 0318 F: (+44) 20 7946 0318 5 Tottenham Court Road London

20 September 1988

TO: DR. MARIAN NG, DR. ONG ZIYING, DR. LIM YI QING

PATIENT'S INFORMATION

Name: Ben Lovatt Referral Number: #4036

RE: BEN LOVATT'S BEHAVIORAL CONDITIONS

I received a request from Dr. Brett with regards to your research on one of my previous patient, Ben Lovatt. In my records, Ben did not display any extraordinarily unusual behavior, although he was observed to be slightly wary of the people around him.

From my professional point of view, he was perfectly normal as a child, and if there was any abnormality in his behavior, it could be attributed it to his family conditions. Mrs. Lovatt appeared to be worrying excessively over her son, and had displayed obvious contempt towards him on several occasions. Rejection faced in childhood often has the ability to alter a child's behavior. For Ben's case, I would think that showing him more affection would have easily suffice.

I hope that the information provided here will be of much use to you and your team.

Regards, X. Gilly

> Dr. Gilly's Letter Lessing Child Specialist 20 September 1988



SECTION D FAMILY ENVIRONMENT

This section details the patient's familial environment, based on an interview⁴ conducted on the patient's family, as well as evidence from the photographs⁵⁶ they provided. As the previous section has shed light on the mother's feelings about the patient during his prenatal development, we have reason to believe that the mother's role, along with that of the other family members, may have had an impact on the patient's behaviour, either improving or worsening it.

EVALUATION

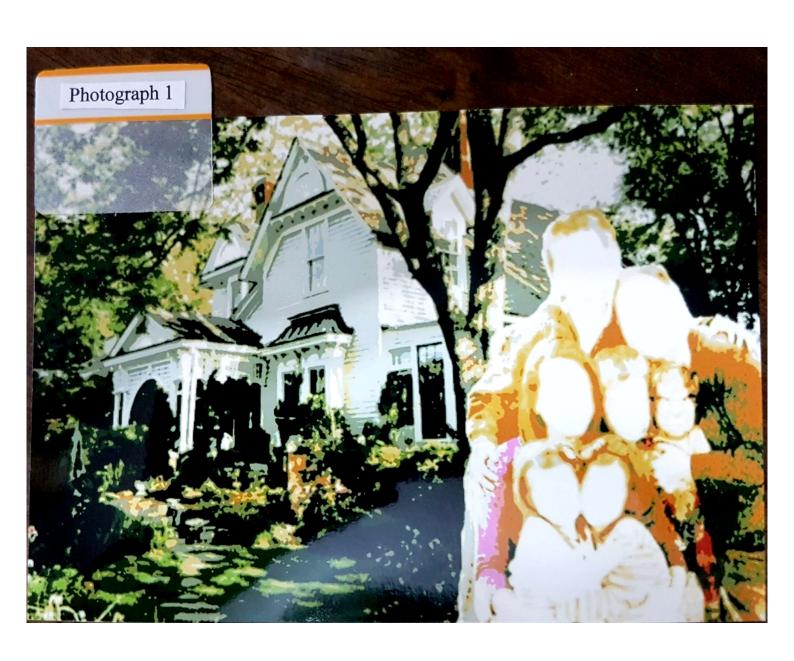
A close study of the interactions between the patient and his family, along with their perceptions of him, have revealed an environment that is lacking in genuine affection for the patient. The patient's father has exhibited varying degrees of indifference towards him, and his physical and emotional unavailability may have resulted in the patient feeling unwanted. A similar indifference has been displayed by the patient's siblings, who appear to go out of their way to avoid him. Majority of the interaction stems solely from the patient's mother, yet her tendency to regard him with fear may have been subconsciously felt by the patient.

Given such a negative environment, we have reason to believe that the patient may have felt both unwanted and unloved. Nurture here, particularly with regards to the family, has played a huge role in affecting the development and behaviour of the patient.

⁴ For a full account of the patient's familial environment, please refer to the transcript of the interview attached to this section.

⁵ Photograph 1 shows a picture of the patient with his family. This closely resembles a phrase in *The Fifth Child*, where Harriet described Ben as troll-like.

⁶ Photograph 2 shows a picture of the patient with his siblings. This closely resembles a scene in *The Fifth Child*, where Ben was seen watching his siblings' reaction towards a show, and then reproducing similar reactions.







CONFIDENTIAL

OFFICIAL TRANSCRIPT FOR INTERVIEW

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PARTICIPANT: DAVID

Interviewer How will you describe your relationship with your child Ben?

David Well, for a start, he certainly isn't mine.

Interviewer Interesting, why so?

David He doesn't allow me to go near to him without backing away. He even snarls at me if I get too close to him!

Interviewer Is that the reason why you chose to send him to an institution when he was four?

David It was either him or us. I couldn't tolerate him any longer.

Interviewer Do you spend a lot of time with him?

David Hell, no. I'm hardly ever at home. I have a lot of work to do for my teaching job at the polytechnic.

Notes:

David assumes a disdainful tone when talking about Ben. He openly declares that he does not see Ben as his child, and also hints at Ben displaying animalistic qualities. He sets up an opposition towards Ben; Ben is excluded as a member of his family, and considered as an outsider.



PARTICIPANT: HARRIET

Interviewer How will you describe your youngest son, Ben?

Harriet He's like a little troll, or goblin or something.

Interviewer That is a rather unusual way to describe him. Do you mean he is quite different from us?

Harriet Well, he has always been an oddball. Sometimes, he acts like an animal and even gets violent!

Interviewer Can you give me an example of him acting like an animal?

Harriet He'd make a lot of awful noises, raging and hissing and spitting when he doesn't get his way. He once ate uncooked chicken in some sort of savage fit like he couldn't control it. Who does that? We even had to clad him in heavy, durable clothing as he tended to destroy the normal ones.

Interviewer How about an example of him being violent?

Harriet I suspect he killed two of our family pets. Our terrier and our cat, Mr McGregor. He also sprained Paul's arm and even tried to strangle him!

Interviewer How do you deal with him whenever he gets violent then?

Harriet I say to him, "down, Ben, down".

Notes:

Her anecdotal accounts of Ben reveals how she seems to find Ben unnatural, although she implies it only very subtly. She does occasionally comment on his unusual physique, revealing her awareness that Ben is different from the rest of her children. From the way she commands Ben, she disciplines Ben as though he is an animal, and not a child.



PARTICIPANT: LUKE

Interviewer Hi Luke, can you tell me why you do not like your little brother, Ben?

Luke He killed Mr McGregor.

Interviewer Okay, but wasn't he sent to the institution to be punished?

Luke They sent Ben away because he isn't really one of us.

Interviewer Okay, so can you tell us who you like in your family?

Luke I stay with grand dad and step grandma! I get on really well with them! Oh, and Aunt Deborah too! She is a lovely lady. I do miss mum and dad sometimes though, so I will come home for half-terms occasionally.

Notes:

This suggests that Ben is often ostracized due to his deviance from his family. Luke also confirms Harriet's suspicions regarding the death of the pets. Luke stays with his paternal grandfather James, step-grandmother Jessica and Aunt Deborah, with whom he "got on so well", which seems to be a contrast to that of his relationship with Ben. This could suggest some kind of family conflict which he does not wish to face at home.



PARTICIPANT: HELEN

Interviewer Can you tell me why you dislike your brother Ben?

Helen Everything was alright when Ben wasn't here. Now that he's back, everything seems to be going wrong at home.

Interviewer I am sorry to hear that. Do you think everyone else is feeling miserable at home because of Ben?

Helen Yes. And also, for our poor dog who died because of him too.

Interviewer I see. I heard that you are staying at your grandparents' house now. How is your experience there?

Helen Great! I am step-granddad's favorite! I absolutely adore grandmum too!

Notes:

It appears that Ben is believed to be the reason for the tension plaguing the house. Like Luke, she also adds on to Luke's accusations of Ben and confirms Harriet's suspicions. Helen seems to be happy being able to get attention and love at her grandparents' house. We can assume that she does not get much of that at her own house.



PARTICIPANT: JANE

Interviewer I heard that you are living with your grandmother Dorothy now. How is your experience there?

Jane I get along well with Amy! She is a little different, but she is loving and adorable.

Interviewer How did you feel when your parents sent Ben away?

Jane I was relieved. But I was also afraid that they would send me away too.

Interviewer Your mother said that Ben is a little different. Do you think that Ben could get along with Amy, who is also a little different like him?

Jane I don't know. Will he hurt Amy the way he hurt Mr McGregor?

Interviewer What do you think is so different about Ben?

Jane He seems to have a complete lack in social skills unlike us. He doesn't seem to know what actions are appropriate. He studies how we move, sit, stand and even eat! He then mimics our actions. It's really odd

Notes:

Her interview is in synchronisation with most of the family - all of them persisted in their belief that Ben is the killer of the pets. Jane displays anxiety as she appears to think that Ben is capable of causing hurt. From her perspective, Ben is also seen as very different from the rest of the family.



PARTICIPANT: PAUL

Interview was cancelled as participant refused to be interviewed.

Notes:

Paul appears to be experiencing some sort of psychological trauma stemming from a visible antagonistic relationship with Paul. It is also important to note that Paul and Ben are the only children living in the house and thus, have more interactions with each other.



SECTION E SOCIAL ENVIRONMENT

This section details the patient's social environment, taking into account anecdotal evidence⁷ from his time at Lessing Academy, as well as a photograph⁸ that shows the patient's interaction with his peers.

Patient #4036 attended Lessing Academy from 1981-1985, and has been attending Tayler public school since 1986. Since then, he has shown vast improvement in social interactions since attending Tayler public school and now belongs to what students at Tayler call "Ben Lovatt's gang", one of the most envied in the school where truants and drop-outs alike want to be a part of.

EVALUATION

Based on evidence from the patient's time at Lessing Academy, he appears to have demonstrated delays in cognitive development during early stages of childhood and lacked the ability to socialise. It is imperative to note that he exhibited violent behaviour only when provoked, and did not go out of his way to antagonise his peers.

During his preteen years, the patient has shown a remarkable improvement, not only displaying far less aggression and hostility, but appears to be genuinely liked and accepted by his peers. There is no doubt that the patient thrives in a more accepting and tolerant social environment. Nurture, when done right, clearly has a positive impact on people like Patient #4036.

⁷ For a full account of the patient's school environment, please refer to the letter and report card attached to this section.

⁸ Photograph 3 shows a picture of the patient with his friends from the public school. This closely resembles the part in *The Fifth Child* where Harriet learnt about 'Ben Lovatt's gang'.

LESSING ACADEMY REPORT CARD

Student

Ben Lovatt

Grade

1

Teacher

Miss Doris

First Semester

Attendance	1st Quarter	2nd Quarter	Total	
Absent	0	5	5	
Tardy	0	0	0	
Attended	45	40	85	

Grades

Subject Reading	1st Quarter		2nd Q	Final	
	30	F			F
Writing	28	F	-	-	F
Math	45	D			D
Science	41	D-	•	-	D-

Grade Point Average:

0.425

Status:

Unsatisfactory

Grading Scale

A+	95-100	B+	80-84	C+	65-69	D+	50-54	F	< 40
A	90-94	В	75-79	C	60-64	D	45-49		
A-	85-89	B-	70-74	C-	55-59	D-	40-44		

Comments

Ben is an extremely hard-working student and tries his best in every area he possibly can. However, I am concerned with this extraordinary energy he seems to have, with contributes to his inability to sit still and tendency to distract the rest of the class. Please continue to work with him on this issue because apart from that, Ben is a wonderful and rewarding student with plenty of potential.

Additional Notes

Ben was not able to sit for his examinations in the 2nd Quarter. Please refer to Headmistress.

Homeroom Teacher's Signature:

Headmistress's Signature:

Date

14th November 198

Parent's Signature:

HL

LESSING ACADEMY

Date 20 September 1988

Dear Dr. Marian Ng, Dr. Ong Ziying, Dr. Lim Yi Qing

Evaluation of Student

As requested, this letter is my evaluation of student Ben Lovatt, who attended Lessing Academy through the years 1981-1985. I trust that this report will remain confidential and in good hands, with the sole purpose of helping Ben.

During Ben's years at Lessing Academy, he exhibited all the wonderful qualities of a good student. He was polite, resilient and hardworking. Several of my teachers had, in fact, noted that he tried harder than anyone else in their classes and were very pleased with his performance, albeit not with his grades (see attached copy of Ben's first grade report).

To say that we had not noticed several inconsistencies in Ben's behaviour would not be entirely accurate. This was first brought to my attention in Ben's first year. His homeroom teacher, Miss Doris, told me about how Ben seemed to have an extraordinary energy, incapable of keeping still for long periods of time and because of that, she had to spend far more time and effort than she spent on the rest of the class. To put this down to hyperactivity alone, however, does not quite seem to address the issue. Over the years, my teachers and I have noticed that Ben seemed unable to fit in and interact porperly with his classmates.

There was another unusual happening about Ben – he was often brought home by a group of young men instead of his parents. A brief meeting with Ben's mother, Mrs Harriet Lovatt, had that arrangement pegged down to Ben simply being an – and I quote – an "unusual child" and an "oddball"

Ben had but one occasion of misconduct and that was during the second term of his first year. He attacked a third-grader called Mary Jones in the playground. She ended up with bruised legs, bite marks and a broken arm. Ben did not appear to be remorseful when I talked to him in my office afterwards, and his mother had to take him home. He was unable to sit for his exams afterwards, due to the attack occurring so close to the end of the school term.

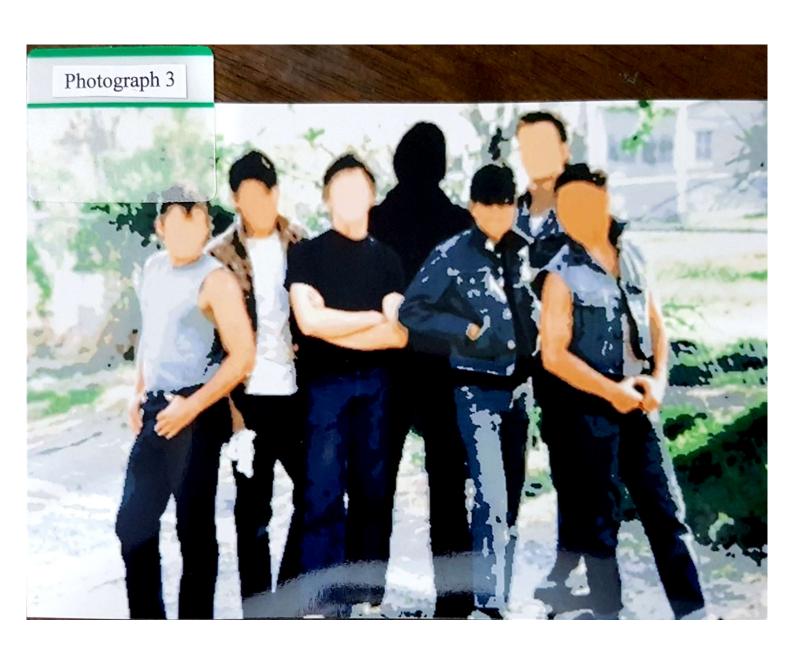
The closest to a conclusion I have to offer is that Ben, at least in the years that he attended Lessing Academy, was a very difficult child, although he was not a bad one. Apart from that one incident where he physically harmed a student, he never hurt anyone else and never went out of his way to create trouble. There are far more troubling children than Ben and I hope that for his sake, you will be able to find a proper diagnoses, whatever that may be.

Sincerely, Mrs Graves Headmistress of Lessing Academy





Mrs. Graves' Letter Lessing Academy 20 September 1988





SECTION F CONCLUSION

From our analyses of the medical, familial and social aspects of Patient #4036, we may conclude that both nature and nurture has their respective influences on the patient's behaviour. However, given that the patient has been given unusual treatment even prior to his birth, one may conclude that nurture has by far a greater part to play in shaping his character, further aggravating his volatile and erratic behaviour, and causing him to feel unwanted or even marginalised. Furthermore, we have observed that among all the aspects of nurture, the one factor that appears to have affected the patient the most is his familial environment, where from a young age, the patient was made to believe that he was not only different and meant to be regarded with fear.

Nevertheless, the field of psychology thus far has often seen its limitations, where conditions of the mind may be too complex to diagnose and treat effectively. We refrain from passing a proper diagnoses on what mental condition affects the patient and, as such, are more than ambivalent about the progress and future of the patient, particularly where his mental faculties are concerned.

Dr. Marian Ng Si Lin Research Doctor Dr. Graham Matthews Director of Graham Mental Health Research Clinic