

C H A P T E R 1

A Point of View

TO WRITE of the treatment of children's behavior problems is a hazardous undertaking. Each year adds to the number of volumes which give us understanding of the causes and bases of behavior, but the knowledge of how to modify and change behavior lies for the most part in the practical experience of clinical psychiatrists and psychologists, social workers, and teachers. Few serious attempts have been made to organize or set down in more than fragmentary form the extent of our knowledge in this area, since practical workers are notoriously backward in giving verbal expression to their techniques. As a consequence we find twenty books dealing with the origin of behavior problems for one which touches upon their treatment. While this makes the need for a comprehensive study of therapeutic methods all the more imperative, it adds greatly to its difficulty. We find large and unexpected gaps in our knowledge, when we endeavor to organize it. We find it necessary in many instances to fall back upon the judgment of the clinician, where our conclusions should be based upon experimental evidence. It is the purpose of this volume to survey the total area of treatment possibilities in a preliminary way, in order to summarize the knowledge which we have regarding the treatment of difficult children, and also to point out with some emphasis those areas where we are in need of further investigation and research.

In this book we shall deal with the child, not with behavior symptoms. One will look in vain for a chapter on stealing, thumb-sucking, or truancy, for such problems do not exist, nor can they be treated. There are children—boys and girls—with very different backgrounds and personalities, and some of these children steal, and some of them run away from school, and others find satisfaction in sucking their thumbs, or in saying obscene words, or in defying their parents; but in each instance it is the child with whom we must deal, not the generalization which we make about his behavior.

THE FACTORS THAT INFLUENCE BEHAVIOR

In order to understand more fully the reason for this point of view, it may be well to review very briefly some of the available data as to how behavior is determined. What decides the form which our conduct, or our children's conduct, shall take? Why is it that some children exhibit, for the most part, a social type of behavior, while others become anti-social? Can we account for all the deviations in behavior which cause children to be described as delinquent, shy, extroverted, or aggressive? Such topics have already been thoroughly covered by others. A brief summary of some of the conclusions is all that can be given here. The reader who is unfamiliar with the field will do well to consult the selected bibliography at the end of this chapter.

The Hereditary Factor. If we are to understand behavior we must begin with those limits of individual capacity, development, and action which are set by the process of inheritance. At the time of conception certain qualities are fixed which have a decided influence upon later behavior and behavior patterns. It is no longer a question whether it is heredity or environment which controls or determines the individual. Indeed it is doubtful if this was ever a question for thoughtful scientists, who have recognized that both the innate equipment of the individual and the conditions of his life experience are of importance, and cannot actually be separately

weighed. Of much more interest is the study of specific qualities or attributes in which heredity plays a significantly large part.

One of these attributes is the size and physical constitution of the individual. Ample evidence exists to indicate that the limits of growth and the tendency toward one or another body type are set by the mechanisms of inheritance. This is not to say, of course, that such qualities for any individual can be predicted by measurements of the parents, since the complex process of combining the genes contributed by the parents insures variability as well as similarity. Nevertheless the essential limits of bodily development are determined at birth, and the modification of these limits through environmental conditions is not great. The influence which these attributes have upon behavior is clear both from scientific study and from everyday observation. The child endowed with a robust physique and a size above the average for his age finds it easier to compete with his fellows, comes more easily into positions of group leadership, and is more likely to stir feelings of pride within his parents. On the other hand, his above-average growth may cause others to expect of him behavior and knowledge beyond that of his fellows. The variety of ways in which this hereditary characteristic may interact with his environment to produce behavior reactions is legion.

Still more important is the intellectual equipment of the child, which is of importance both in creating opportunities and in setting limits for the child. We do not, for our purposes, have to settle the extent to which innate capacity may be modified by education. It is enough to know that intelligence is in large degree limited by hereditary endowment, but that early stimulation and wise training during the infant period can produce changes in the measured intellect. Later the extent to which environment can thus modify intelligence is small. We will not review here the voluminous researches regarding the relationship between intelligence and behavior. The fact that a significant positive correlation is found between intelligence and such qualities as honesty, co-operation, and service to others, suggests the importance of this factor. There is no question but that the child of borderline mentality has much greater difficulty meeting the ordinary societal demands, and hence is much more likely to exhibit "problem" behavior, than the youngster who is better endowed with intelligence.

To the clinical worker the inherited tendencies toward unstable, neurotic, or psychotic behavior are also of significance. To be sure the inheritance of such tendencies has not been so carefully studied nor so positively determined as the inheritance of intelligence. It seems established by Myerson¹ and others that certain psychoses and neurotic states have a tendency to reappear in the descendants. There is also the possibility that the grouping of different types of mental instability in certain family stocks indicates that a predisposition or tendency toward instability may be inherited. Certainly Stockard's² work with dogs suggests this possibility in subhuman species. In the light of the available data we are not far afield if we judge that a child whose ancestry boasts of several psychotic individuals and some whose neuroses seem evident is more likely than the average to exhibit erratic, unstable, or neurotic behavior.

As to the inheritance of behavior patterns themselves, the very suggestion would have been derided some years ago. But patient and painstaking investigation, especially of twins, has shown similarities of motor patterns, at least, which are scarcely to be accounted for by environmental influences. Gesell's³ work, while it lends no support to the popular notion of the child's

¹ Myerson, Abraham. *The Inheritance of Mental Diseases*. Baltimore: Williams and Wilkins, 1925. 336 p.

² Stockard, C. R. *The Physical Basis of Personality*. New York: W. W. Norton, 1931. 320 p.

³ Gesell, A. "The Developmental Psychology of Twins," chap. 6 in *The Handbook of Child Psychology*, pp. 158-203. Ed. by Carl Murchison, Worcester, Mass.: Clark University Press, 1931.

inheritance of his bad behavior from one of his parents, or from a disreputable uncle or aunt, nevertheless brings to view certain stubborn facts which cannot be dodged. It concedes the possibility that some of the simple elements of behavior, and the ways of adjusting to physical situations, may have a basis in hereditary influences. Thus it is not only the physical and mental equipment of the individual, his size and type and intellectual endowment, which are inherited and which to some extent limit and determine his conduct, but even his behavior patterns themselves which may have some small basis in inheritance.

The Organic Influence. Scarcely separable from the hereditary determinants of behavior are the organic influences which operate from birth onward. Subtle glandular imbalances, often hereditary in their origin, may be at work to cause this child to be sluggish, listless, and docile, while another child becomes restless, alert, hyperactive, and consequently annoying and difficult to manage. Much that is untrue has been written of the influence of the endocrine glands. The most cautious research, however, finds ample reason to believe that glandular maladjustment is without doubt a most important factor in determining certain deviations from normal behavior.

Even the everyday influence of nutrition cannot be disregarded. Deficiencies in the quantity of food or in any one of several vitamins or vital food substances may easily produce behavior and personality symptoms of a "problem" variety such as irritability or apathy. The possibility that there may be a correlation between body-acidity and emotional excitability is also suggested by recent research.⁴ In various ways the subtle aspects of body-chemistry influence personality traits and behavior.

Of much more significance is the influence of illness. The direct effects upon behavior of such diseases as epilepsy, encephalitis, and chorea are well known. Likewise the loss of vitality which accompanies any long illness is recognized. But it is probable that the indirect effects of illness have an equal effect upon the child. The increased desire for attention, the resistance to assuming normal responsibilities, the infantilizing tendency of bed care, all of these are known to every parent, as well as to physicians. Where illness or accident results in a physical deformity, the child's reactions are altered in various ways, primarily compensatory in nature. It is not surprising that in a so-called normal group of young people, the number of physical defects correlated significantly with feelings of inadequacy and inferiority.⁵

The Family. In any mention of the environmental influences which shape and mold the individual's behavior, the family comes first. The emotional attitude of the parents toward the child's birth and the degree of secure affection which he finds in the family life have long been emphasized by clinical workers as having a profound effect upon behavior reactions. For the most part the behavior resulting from these influences has been studied through case histories alone, an inadequate method. But some of the more recent studies have shown that such attitudes as parental rejection not only can be gauged, but can be proved to be closely associated with the degree of problem behavior and the extent to which it can be treated. This data will be reviewed in a later chapter on the changing of family attitudes. The significance of parental attitudes toward growth and the development of independence also calls for mention. The youngster who has been allowed and encouraged by the parents to continue infantile behavior patterns into the years of childhood and adolescence is a familiar picture in every clinic.

⁴ Rich, Gilbert J. "A Biochemical Approach to the Study of Personality," *Journal of Abnormal and Social Psychology*, vol. 23 (July, 1928), pp. 158-175.

⁵ Paterson, D. G. *Physique and Intellect*, pp. 227-231. New York: Century Company, 1930.

Not only does this direct interplay of affection between parent and child influence behavior, but the other relationships of the home have their effect as well. The relationship between the parents affect the child, and more behavior problems occur in homes where there is deep marital friction than in harmonious homes. Furthermore the home that is broken, whether by death or by marital friction, produces more than its proportion of personality problems in children, with differing family constellations showing different effects. The father-stepmother combination seems to have the most deleterious effect upon behavior, while the children living alone with their mother are the least maladjusted of these broken home groups.⁶

Considerable attention has also been given to the influence of sibling rivalry. Various patterns of jealous behavior and of attention-getting devices have been shown to arise from this source. Attempts to show that the child's ordinal position in the family influences his behavior have not been so successful. No general picture can be drawn of the behavior of the first or second child or even the only child. In a particular family, however, the child's ordinal position may be a factor of considerable significance.

The ideals and standards of the home affect the child's behavior even more than the ideals of his companionship group, according to the studies conducted by Hartshorne and May.⁷ Their evidence, like that cited above in regard to the broken home, points to the primary place of the mother in the home, since the child's standards show a closer association with the mother's ideas than with any other source. Several investigators have shown the close relationship between the wholesomeness of parental discipline and the behavior difficulties of the children. Unwise or unwholesome discipline, even though crudely judged and measured, correlates very significantly with delinquent behavior.

These brief statements suggest rather than describe the steadily accumulating evidence of the vital fashion in which the family group sets and determines patterns of conduct.

Cultural and Social Influences. In any individual, child or adult, much of his behavior is conditioned by the pressure of cultural traditions and beliefs. Anthropological research has clarified for us the way in which our beliefs and actions, from our attitude toward war to our sexual behavior, are molded by the social group. Sociologists have brought this material home to us by studies such as those of Shaw,⁸ which indicate that a boy living in the midst of certain disintegrating social influences in one of our large cities has twenty times as much chance of becoming a delinquent as a boy who lives in another part of the city. The cumulative force of low economic status, combined with a crumbling system of social controls and group tradition, is nowhere more forcibly pictured. It is difficult to overemphasize the effects of such forces upon the individual. Even the psychoanalyst, whose interest has been almost entirely centered upon the inner life of the individual, has been forced to a recognition of the strength of these social forces, and the trend of recent years is toward a more careful study of the influence of culture upon personality.

⁶ Burgess, E. W. "The Cultural Study of Adolescence," in *Physical and Mental Adolescent Growth; Proceedings of the Conference on the Adolescent*. Cleveland: Brush Foundation, 1930.

⁷ Hartshorne, Hugh, and May, Mark. *Studies in Deceit*. New York: Macmillan, 1928. 720 p.

⁸ Shaw, Clifford R. *Delinquency Areas*. Chicago: University of Chicago Press, 1929. 214 p.

Yet it is not only the broad elements of culture, but narrower and more specific factors which determine behavior. Within the home, the economic level of the family has its effect upon conduct. Levy⁹ has shown that problem children coming from the homes of the well-to-do tend to exhibit personality problems and inner tensions and difficulties in personal adjustments while those from homes of lower economic status tend to develop more outgoing and anti-social behavior and delinquency problems. While these facts are also related to the intelligence level of the home, the economic factor is definitely involved.

The child's behavior is also much influenced by the attitudes and actions of his own companionship group. Both Shaw's work and that of Hartshorne and May give reason to believe that such influence is second only to the family in determining modes of behavior. The child tends to be as honest or as deceitful, as delinquent or non-delinquent, as the group of his companions. Psychologists and others dealing entirely with the individual are prone to overlook or underestimate the strength of such social forces.

The Needs of the Organism. If we could end at this point our description of the elements which give us some understanding of the child, we could avoid confusion and difference of opinion. The conditions which have been described are not, however, the complete story. For the human being, as an organism, has certain needs which are vital to the individual. Psychologists differ as to how these fundamental desires are to be classified, but for the purposes of the clinic it may be said that there are two great classes of needs. The first is the need for affectional response from others. This would include the need for recognition, the desire for parental and other affection, the desire in the mature individual for sexual response from a mate. The second great need is the need to achieve, to obtain the satisfaction which comes from accomplishment and from having added to one's sense of self-esteem. Both of these needs the individual must satisfy, at different levels, to be sure, depending on the stage of growth and maturity which has been reached. The way in which it is possible to satisfy them depends on the more basic factors of his life-situation.

The Interaction of Factors. Although very briefly described, these are, in the main, the forces which produce behavior symptoms. It is not however a simple process. The complex interaction and reaction of these forces within the experience of the individual mold and change and shape the patterns of behavior. The sheepish-looking lad who comes into my office and sits beside my desk restlessly fingering everything in sight is not simply a problem of stealing. He is not even the simple total of many facts. He is rather the resultant, if we may borrow a term from physics, of many forces, some of them operating to produce a normal degree of adjustment, others creating maladjustment, still others relatively neutral in their effect. As we endeavor to untangle the web of interaction of these influences some of the major strands stand out significantly. He is endowed with a distinctly subnormal mentality. This fact had little importance during his childhood days in his family, but became decidedly significant as his school life brought him into competition with an average group of his fellows. The consequent academic failure assumes more importance because of a persistent tendency, probably glandular in origin, to be "on the go," over-active, unable to give long periods of concentration. This restless behavior adds to his inability to meet the traditional demands of the school. His residence in a "delinquency area" brings other cultural forces to bear: the examples of others who have stolen, the lack of constructive community controls. Thus his desire to achieve, thwarted in other directions, and his need for social response from his fellows, make his stealing almost inevitable. Were we discussing the situation in full, the many other influences, family and social, physical and hereditary, which round out the picture might be brought into our discussion, each contributing in its own way to produce the present behavior of this boy.

⁹ Levy, John. "A Quantitative Study of the Relationship Between Intelligence and Economic Status as Factors in the Etiology of Children's Behavior Problems," *American Journal of Orthopsychiatry*, vol.I (1931), pp. 152-162.

This summary of the bases of behavior may be sufficient to give some notion of the point of view which underlies this book. Behavior problems are not to be attributed to any one cause or group of causes. Any influence which has a verified effect upon the development of behavior patterns is worthy of consideration. We have merely mentioned what seem to be the most important general classifications of these influences. The discussion may also serve to indicate the reason for refusing to deal with behavior symptoms. It is obvious to anyone who has worked with children's troubles that the only purpose in considering the child's symptomatic behavior is to aid in the process of understanding that behavior. Once the causes are clear, it is futile to deal with the symptoms. To enlarge upon this statement it may be well to discuss some of the implications of the term "treatment," as it is used throughout this book.

WHAT IS MEANT BY "TREATMENT"

In reviewing the meager literature on the treatment of misfit children, one is struck by the way in which the writers define the field. There are those who define treatment in terms of the various professions, and we have discussions of different aspects of psychiatric treatment, or social case-work treatment, psychological treatment, or educational treatment of the individual child. Usually in such discussions there is little to indicate that the writers are aware of the tremendous degree of overlapping among the techniques of these various professions when they are dealing with youngsters who come to them. Rather we are given the notion that each profession has its own methods, though the fields of application are never clearly defined. In a second group we might place those writers who approach the problem each from the point of view of his own school of thought. The psychoanalyst, who writes of his therapeutic methods, tends to make it quite clear that the field of treatment is the field he is describing. Treatment and psychoanalytic methods are for him synonymous. The same is true of those who speak for the school of thought which uses relationship or "passive" therapy, which we will discuss in a later chapter. These writers tacitly assume that passive therapy is treatment and that treatment is passive therapy. Similar statements might be made regarding the less cohesive group of those who stress habit training. This group concerns itself more with the problems of young children, but exhibits the same complacent attitude of assuming that the methods used constitute the whole field of treatment.

The present discussion is written from a very different point of view. While readily admitting greater agreement with some schools of thought than with others, while granting the differing contributions of the various professional fields, it seems to the writer that neither of these considerations defines the field of treatment. Rather, if we are to study treatment methods we should consider the steps and the techniques which are actually used by those dealing with children. Regardless of their theoretical viewpoint, regardless of the professional person responsible, what do workers do to change the behavior of problem children? What is the experience and practice, not the theory, of the child-guidance and child-study clinics, the juvenile-court clinics, the departments of individual adjustment in the public schools? What are the means which they have found helpful and effective? It is in a consideration of these actual methods that we may hope to find the type of child, or the type of situation with which each technique is useful. For our purposes we may regard as treatment measures any planned procedures by which professional workers have sought to modify the behavior or the adjustment of the individual child.

With such a viewpoint it will be our intent to survey the various methods used by the many clinics devoted to the study and adjustment of children's problems, as well as techniques used by teachers, counselors, and social workers whose field lies outside of such organizations. In so doing we shall not be concerned to ask what school of thought is represented by any technique we shall be considering, or whether it is a method used by one professional group or another. We shall be concerned instead with the results which the method can achieve with children, and with

the sort of situations in which it seems most helpful.

The Next Step. Back of this catholic approach to the causation and treatment of behavior problems lies the belief that the treatment of children's problems may become a science if we are but willing to lay the basis for it by careful examination of the data at hand. At present no such science exists. Yet if the study of methods used brings to light certain general principles whose validity can be tested by further experimentation, we shall have made the first step toward scientific method in this field. If on the other hand we take the viewpoint that human behavior is too complex and intangible ever to be dealt with save as some people possess the art or gift of influencing others, then we admit that we can never deal in any large way with the multitude of ills which we group together as conduct problems, since the talents of the artist can be but little conveyed to his fellows. Only as our treatment of such problems can be placed on a scientific basis can we hope to deal significantly with the social ills which they bring upon society.

This constitutes the challenge to the clinical field. It is widely recognized that the child who today exhibits personality problems and behavior deviations is the delinquent, the criminal, or the neurotic of tomorrow. The damage which these groups inflict upon society, the tragic unhappiness which they bring to themselves and their families, it is impossible to measure. To what extent have we developed rational means of treating the childhood symptoms so as to prevent and avoid the later serious consequences? It will be our purpose, throughout this book, thoroughly to explore this question.

BIBLIOGRAPHY

The Hereditary Factor

Schwesinger, Gladys C. *Heredity and Environment*. New York: Macmillan Company, 1933. 484 p.

Organic Factors

Kanner, Leo. *Child Psychiatry*. Springfield, Ill.: Charles Thomas, 1935. 527 p. Chapter 6 and chapters 19-30 incl.

Louitt, M. C. *Clinical Psychology*. New York: Harper and Brothers, 1936. 695 p. Chapters 14 and 15.

Family Influences

Folsom, J. K. *The Family*. Part V. "Family Problems and Individual Adjustments." New York: John Wiley, 1934. 603 p.

Cultural Factors

Hartshorne, Hugh, and May, Mark A. *Studies in Deceit*. New York: Macmillan Company, 1928. 720 p.

Mead, Margaret. *Coming of Age in Samoa*. New York: Morrow and Company, 1928. 297 p.

Shaw, Clifford R. *Delinquency Areas*. Chicago: University of Chicago Press, 1929. 214 p.

The Process of Adjustment

Shaffer, L.F. *The Psychology of Adjustment*. Boston: Houghton Mifflin Company, 1936. 600 p.