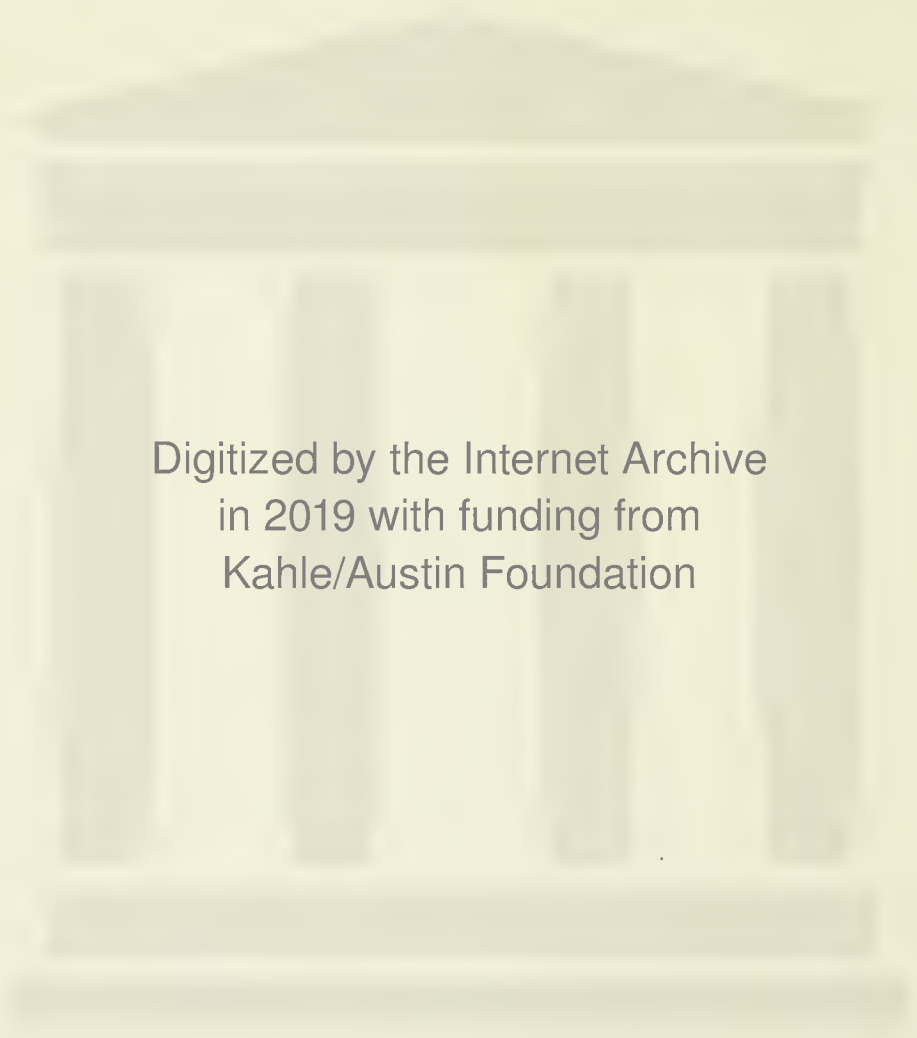


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THE ROLE OF SCHOOLS
IN MENTAL HEALTH

Joint Commission
on Mental Illness and Health

MONOGRAPH SERIES / NO. 7

The Role of Schools in Mental Health

WESLEY ALLINSMITH
GEORGE W. GOETHALS

including
A Field Study

W. CODY WILSON
GEORGE W. GOETHALS

A REPORT TO THE STAFF DIRECTOR, JACK R. EWALT

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Foreword

THIS is the seventh of a series of monographs to be published by the Joint Commission on Mental Illness and Health as part of a national mental health survey culminating in *Action for Mental Health*, the final report containing findings and recommendations for a national mental health program (Basic Books, 1961. \$6.75).

The present document constitutes a report of the project director to the staff director of the Joint Commission.

Titles of the monograph series, together with the principal authors, are listed here in the order of publication:

1. *Current Concepts of Positive Mental Health*
Marie Jahoda, Ph.D., Basic Books, 1958. \$2.75.
2. *Economics of Mental Illness*
Rashi Fein, Ph.D., Basic Books, 1958. \$3.00.
3. *Mental Health Manpower Trends*
George W. Albee, Ph.D., Basic Books, 1959. \$6.75.
4. *Americans View Their Mental Health. A Nationwide Interview Survey*
Gerald Gurin, Ph.D., Joseph Veroff, Ph.D., and Sheila Feld, Ph.D.,
Survey Research Center, University of Michigan, Basic Books, 1960.
\$7.50.
5. *Community Resources in Mental Health*
Reginald Robinson, Ph.D., David F. DeMarche, Ph.D., and Mildred
K. Wagle, M.S.S.A., Basic Books, 1960. \$8.50.
6. *Epidemiology and Mental Illness*
Richard J. Plunkett, M.D., and John E. Gordon, M.D., Basic Books,
1960. \$2.75.
7. *The Role of Schools in Mental Health*
Wesley Allinsmith, Ph.D., and George W. Goethals, Ed.D., Basic
Books, 1962. \$7.50.

8. *The Churches and Mental Health*

Richard V. McCann, Ph.D., Basic Books, 1962. \$6.00.

9. *New Perspectives of Mental Patient Care*

Morris S. Schwartz, Ph.D., Charlotte Green Schwartz, M.A., Mark G. Field, Ph.D., Elliot G. Mishler, Ph.D., Simon S. Olshansky, M.A., Jesse R. Pitts, Ph.D., Rhona Rapoport, Ph.D., and Warren T. Vaughan, Jr., M.D.

10. *Research Resources in Mental Health*

William F. Soskin, Ph.D.

These monographs, each a part of an over-all study design, contain the detailed information forming the basis of the final report. The Staff Review found in previous monographs has been omitted from the present work, as well as in others to follow, inasmuch as the material has been incorporated in *Action for Mental Health*. A short review of *The Role of Schools in Mental Health* may be found there.

Participating organizations, members, and officers of the Joint Commission and the headquarters staff are listed in Appendix III at the end of this book.

The Joint Commission, it may be seen, is a nongovernmental, multidisciplinary, nonprofit organization representing a variety of national agencies concerned with mental health. Its study was authorized by a unanimous resolution of Congress and was financed by grants from the following sources:

American Association on Mental Deficiency
American Association of Psychiatric Clinics for Children
American Legion
American Medical Association
American Occupational Therapy Association
American Orthopsychiatric Association, Inc.
American Psychiatric Association
American Psychoanalytic Association
Association for Physical and Mental Rehabilitation
Carter Products Company
Catholic Hospital Association
Field Foundation
Henry Hornblower Fund
National Association for Mental Health

National Committee Against Mental Illness
National Institute of Mental Health
National League for Nursing
National Rehabilitation Association
Rockefeller Brothers Fund
Benjamin Rosenthal Foundation
Smith, Kline and French Foundation

Additional copies of *The Role of Schools in Mental Health* may be purchased from the publisher or from book dealers.

JOINT COMMISSION ON MENTAL ILLNESS AND HEALTH



Acknowledgments

THIS PROJECT was brought to conclusion with the help of many people—not only those who worked with us as staff members but others who influenced us. In connection with the reviewing of literature we point out our indebtedness to Eleanor Daly, Catherine H. Powell, and the late Susan Morford Altfeld. They were of inestimable aid in organizing the material gathered. Those who provided that material by abstracting books and articles were Susan Baker, Eva Dakin, Edith Gammack, Deborah Gillies, Helen Hertzog, Richard Kluckhohn, Michael Maccoby, John Martin, Irene Nichols, J. W. Reed, Jane Roland, Judith Ann Seder, Robert Sedgwick, Dr. William N. Stephens, Fay Vogel Bussgang, Julia C. Whedon, and John Weatherby. Their careful scrutiny of many sources put at the disposal of the authors a wealth of information and opinion.

On the title page of the field study appearing later in this volume we have acknowledged the major assistance that Irene Nichols and Fay Vogel Bussgang gave to Wilson and Goethals. The field study was facilitated, too, by the work of Dr. Shaun Kelly, Barbara Kerstein, and Richard Kluckhohn.

The staff of the Joint Commission, especially Dr. Jack R. Ewalt, Dr. Fillmore Sanford, and Greer Williams, permitted us a welcome degree of autonomy yet were generous in giving counsel. Their eagerness to view the field of mental health in its broadest perspective, to entertain new avenues of investigation, and to provide insights from many years of experience in their separate fields made a substantial contribution to this undertaking. In this connection we wish to thank Dr. Gordon Blackwell for his advice during the

initial phases of the field study. The project has owed not only its inception but its chief financial support to the Joint Commission. We benefited, however, by help from two additional sources, the Milton Fund of Harvard University and the Fund for the Advancement of Education.

Cogent suggestions came from people who read our manuscript at one stage or another. These included Sandra Macleod Tonkin and Drs. Jane A. Hallenbeck, Donald C. Klein, Judy F. Rosenblith, Edward C. Scanlan, Judith A. Schoellkopf, John R. Seeley, M. Brewster Smith, David V. Tiedeman, and Martha S. White.

The content of the book reflects also the influence of a number of people with whose pertinent work or opinions we had the good fortune to be personally acquainted. Prominent among these have been Everett P. Balch, Lawrence K. Frank, Francis Keppel, and Drs. Robert H. Anderson, Edward S. Bordin, Morris L. Cogan, Abigail Eliot, Dana L. Farnsworth, William G. Hollister, Edward Landy, Norman R. F. Maier, Judson T. Shaplin, Donald B. Summers, Joseph Weinreb, and John W. M. Whiting. We should like to mention as well the stimulation gained from participating in discussions of college mental health with Dr. Benson Snyder and other members of the Group for the Advancement of Psychiatry at the 1958 meetings of that organization. We regret that we cannot, in the confines of this report, go more deeply than we do into the important and provocative area of mental health among the college population.

We are obliged to Christopher S. Jencks and Jared J. Jackson for contributing certain materials of a historical nature which put our task in better perspective. The patience and care of those who bore the main secretarial burdens deserves a particular expression of our appreciation—Ernestine Butler, Helen Hertzog, Celia Kalberg, Beverly Warren, and above all, Beatrice Zar, who not only aided in the review of literature but was responsible for many executive tasks in connection with the field study.

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WESLEY ALLINSMITH
GEORGE W. GOETHALS

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PART ONE

*A Commentary on
Issues and Practices*

Introduction

WE HAD two audiences in mind as we wrote—professionals in the fields of education and of mental health, and citizens without special training who are interested in our topic. To avoid needless confusion we have minimized the use of special terms and have tried to translate those we adopted.

Our aim is to answer the topical and important question, what, if anything, ought schools to do about mental health. Periodicals and the press have been filled recently with attacks on schools. A favorite target has been the practice of making “life adjustment” and “a healthy personality for every child” educational goals at the alleged expense of the three R’s. The critics, of course, are not against health. Instead, they believe that schools go about it in the wrong way or that seeking health is not the schools’ job. We discuss such views in Chapter II.

In addition to efforts to promote mental health via the classroom, services have multiplied that are concerned principally with handling or preventing mental illness and emotional disorders. At an accelerating pace, schools have been starting or expanding programs of psychological testing, guidance systems, and other practices aimed at advisement, assessment, or personal adjustment. In the past few years, especially, the rate may have increased because of the clamor for quicker detection of gifted pupils with scientific interests and concern for better counseling in regard to educational plans. At the same time, development of procedures related to mental health and illness may have been limited in some school districts in order to have funds available to hire science teachers or to equip new laboratories.

Mental illness brings a burden to the afflicted, to their associates,

and, financially, to every family that pays taxes. The school is the one place where all youths congregate and where it is thus feasible to detect, if not treat, illness. Many informed people, therefore, view the nation's schools as the most suitable single place to begin reducing this burden. Their goal is to improve the health of the "next generation"—children now in school. Preventive measures, taken during the "formative years" when the groundwork is laid for later disturbance, are said to be capable of forestalling trouble completely. If prevention has failed and actual illness begun, it is best treated when caught early. Even those emotional upsets that do not foreshadow serious psychiatric problems may justify treatment, because, in addition to humane considerations, they may keep a child from learning while in school.

Since one can distinguish among people free of mental disturbance various degrees of joy, zest, creativity, resiliency, skillfulness, and integration of life goals, it is clear that there are degrees of health as well as degrees of illness (Jahoda, 1958). Some propose that quite aside from preventing or alleviating illness, the degree of "positive health" can be increased, thus building strengths that may balance the "weak spots" of illness. Both "hard" classical curricula and "soft" programs of the so-called "life adjustment" variety have been justified by their proponents as producing positive mental health.

SOURCES OF DISAGREEMENT

There are disputes about what health is and what constitutes illness. While social adjustment has often been used as a criterion of health, it has also been criticized, however, because too much conformity may dampen creative fires and reduce the chance for idiosyncratic, but harmless, expression of fundamental needs (Allin-smith and Goethals, 1956). The distinction between striving for excellence and a meaningless perfectionism is another instance. If a pupil wastes his energy recopying assignments that are already neat, ought his teacher to thank God for the child's painstaking work, or refer him to the guidance department?

Differences exist, too, about the most effective ways to cope with emotional disturbance. Some educators hold the oversimplified view

that being tough with a youngster and allowing no nonsense is always the best way to “treat” a pupil with an emotional problem. They argue that if the student pulls himself together he will be the stronger for the experience. Often the decision about calling a troubled or troublesome child to the attention of a specialist hinges upon preconceptions about the cause of his difficulty—is it thought to be merely a maturational phase that will be outgrown? There is a wide variety of opinion about the capacity of given experiences to affect pupils’ health for better or worse. A rigorous curriculum emphasizing mathematics and ancient languages has been claimed to produce moral fiber as well as organized thinking.

Points of controversy arise also when goals appear incompatible. Some have feared that the academic function of education may be jeopardized when practices aimed at dealing with illness or promoting health become a function of the schools. The soundness of this contention depends, of course, upon the kinds of procedures used and who uses them. Extensive services indeed limit a school’s development in other directions, and teachers who use class time to discuss “human relations” cannot simultaneously make headway on arithmetic. Not only may health practices impede other goals, but techniques producing desirable responses at the time often are claimed to have undesirable consequences later. If a teacher demands too much docility, the pupils may someday have trouble in thinking independently and imaginatively; if too much time is spent in “free expression,” mastery of basic skills may suffer.

SCOPE OF THIS REPORT

The first six chapters present a general view of issues concerning schools and mental health. In Chapter II, five main approaches to positive health are portrayed. Later chapters try to convey the variety of efforts being made to deal with mental illness through student health services and programs of guidance and delineate the great number of procedures that may be used. It is not our purpose to capture the current scene in a photograph in order to show just how many school systems are taking a given tack; the picture would be out of date before it is printed. Rather, we aim to describe the range

of practices being tried, to call attention to some paths that may merit exploration, and to spell out the implications we see for health and for education. In particular, we take up the vexing question of whether classroom teachers should be expected to help with emotional problems of their students. The second part of the volume consists of the findings of a field study on selected aspects of the over-all topic.

In surveying the literature, the authors and their assistants read books and journals from the various behavioral and medical sciences relevant to mental health, in addition to publications in the field of education. When pertinent material was found, the abstractor dictated a summary. In some cases the abstracts were extremely brief; others filled as many as sixteen single-spaced pages.

When issues were obviously germane, all available material was covered at least five years back in the journals, and ten or more years when this seemed indicated. But in regard to an issue such as pupils' social class background, the abstractor sought chiefly those sources which mentioned schooling and covered only representative works of the wider literature. More than 5000 books and articles were examined in the preparation of this monograph, and our procedure yielded material consisting of well over 2000 completed abstracts. From the outset our chief hope was to gain perspective on our topic. Unexpectedly, we found that this hope was interfered with when we devoted enough time to the materials on any one aspect to do a proficient, thorough, critical review of the literature in its technical details. The over-all subject turned out to be too broad to cover in depth in each area. Our indexed abstracts remain available to scholars who wish to search them in connection with matters that we are able merely to touch on in this report.

Since the report is intended to give an overview and be interpretive rather than encyclopedic, all sources are not cited. If five different authors, for instance, have written about the same kind of procedure or expressed similar viewpoints, one study or article is often mentioned as representing the trend.

In addition to examining the published literature, we made contact with some people who spoke on related topics at professional meetings in order to learn about work in progress, and we solicited infor-

mation from mental health officers of each state and territory. Relatively complete coverage, however, was possible only in the case of the literature.

Topics Covered and Omitted

We have tried to encompass the entire educational scene from nursery school through university. Although most of our information is about public schooling, we touched on special problems of private and parochial schools. Our consideration was not limited to rich or poor areas; to rural, urban, or suburban settings; to vocational, business, or college preparatory curricula; to classical or instrumental philosophies. We were interested in the effects of school experience on mental and emotional illness in general, whether mild or severe, as well as on those particular psychic ailments that result in difficulties in learning. We were interested in all the school events, including those not intended to have any bearing upon mental health, that are thought to damage health or to promote positive health. We avoid a narrow definition of health in order to give a hearing to many views.

Because it is the mission of this report to discuss mental health in typical schools, we gave only peripheral consideration to certain special problems, each of which has a voluminous literature of its own that we could not hope to cover properly in addition to our central task. These include juvenile delinquency, racial integration, education of the mentally and physically handicapped, and programs for the gifted. Also, we have totally ignored the area of adult education.

SUMMARY

Aside from describing a field study in selected school systems (Chapters VII–XI), we report a survey we made of the bulk of the literature on our topic published after World War II. In an effort to offer perspective on the complex problems inherent in blending health endeavors with educational practices, we asked the following kinds of questions: What sorts of things are being done in schools that have been alleged to influence students' mental health for better

or worse? Among possible practices designed to prevent, detect, or treat illness—or to promote positive “health”—which seem amenable to use in connection with schools and which are now being used? Under what circumstances does the adoption of given practices interfere with other functions of the schools? The study encompasses virtually all kinds of schools and all degrees of illness and health but deals only peripherally with special topics, such as juvenile delinquency, problems of racial integration, programs for the gifted, and training of the mentally and physically handicapped that merit volumes in themselves.

The Curriculum and Mental Health

IN THIS chapter we are concerned with the ways in which the content of the learning experiences offered by the American school influences students, and with how the content has itself been shaped by our society's concern with the mental health of the individual. The discussion focuses on the promotion of positive mental health. In later chapters we discuss services dealing with illness.

A study of certain historical guidelines during the closing years of the 19th and the first half of the 20th century reveals that, in a broad sense, education in the United States has departed radically from a uniform preoccupation with "mental discipline." Nowadays there is frequent expression of concern with assuring each youngster socializing experiences which will make him an emotionally happy, vocationally able, and psychiatrically integrated adult.¹ This is a lofty goal that is open to a variety of interpretations. As one looks at the different ways in which the curriculum has been defined, it is important to note that the earlier trends still have a tremendous number of proponents and apologists and that none of the trends seems to have lost its vigor.

PRESENT TRENDS AND MENTAL HEALTH

There is very little new at present in school curricula. Many different points of focus seen in present day school offerings have, with few exceptions, been part of the educational scene for many decades. For example, there are some to whom training young people for what is called very generally "life adjustment" seems to be a relatively new idea, and to whom the goal of training young people in social skills and vocations seems something recent. An examination of historical sources, however, such as Cubberley (1934), reveals that the very broad interpretations of curriculum which such positions

imply were as present during the flowering of the "academy" movement in the eighteenth and nineteenth centuries as they seem today. These private schools were as much concerned with manners and social graces as they were with teaching academic subject matter.

A second thing to remember is that ideas about curriculum and their rationale have a dogged persistency. In some disciplines, a change in a fundamental aspect usually means that a particular procedure or practice has been or will be superseded. This is not true in American education—old themes fail to die. What is fascinating is that all the trends tend to be justified in new ways. The comment about old wine in new bottles can find no better example than that of the various arguments for, and rationales of, the curriculum. Let us take as an instance the curriculum built around the classical languages. Historically, this approach to education goes back to the Latin school of sixteenth-century England and has maintained its proud position in both public and private schools in this country to the present. However, the justifications offered for this particular curriculum have gone through a variety of changes. Once the classical curriculum was argued for in terms of the good that would accrue to the student from knowing the heritage of the past. At another time it was justified in terms of mental discipline, that is, facilitating the cognitive process. There was also implicit in this idea the belief that it was good for the adolescent to be forced to face the rigor of a demanding intellectual task. It is interesting to see that now this curriculum is being justified in terms of such character building. Thus, while American school curricula have not changed as totally as one might imagine in the past 200 years, the catch phrase or basic rationale chosen to justify a particular approach has changed with great rapidity.

Despite the fact that few trends are really of recent origin, one substantial development has occurred during this century—compulsory attendance. With virtually the entire national population in school between the ages of 6 and 16, a population representing various ethnic groups and social backgrounds, the problem of providing for their needs has created a shift in thinking about the content of school offerings. We forget sometimes that in the nineteenth century, while education was free and available almost uni-

versally, it was not always required. A child who could find nothing in school work which appealed to him was under no legal mandate to remain in school. When, however, the schools had to make provision for all students, they were obliged to try to meet the needs and demands of a widely divergent student population. The alteration caused a change in perspective. The student found that the school was responsible for offering him a suitable program rather than his being obliged to measure up to a single program of the school. A significant policy shift had taken place.

Compulsory attendance and a more liberal social philosophy have led to different ways of thinking about curriculum generally. The school has had to provide a many-faceted curriculum to meet the needs of those who plan to go on to college and at the same time give to those whose education ends with high school some preparation for future jobs. This provision of different paths through the school has been subject to much criticism. Many argue that such a curriculum tends to perpetuate social class lines and militates against the possible social mobility education can provide. As a way of compensating for such deficiencies, there have been attempts to build into the secondary school curriculum a core subject matter required of all students so that every literate citizen will share with his peers some common intellectual experiences. Such attempts have, in turn, opened up questions of whether or not to group by ability, what provisions should be made for the gifted, to what degree the fast should wait for the slow, and which students—the brilliant, average, or mediocre—should command most of a teacher's time.

Regardless of the ways at present that curriculum seems to be defined, the persistency of certain ideas, the fact of compulsory attendance, and the consequent need on the part of the school to present alternatives so that all children of all people might be educated are things which underlie all discussion of current curricular practice.

FIVE DEFINITIONS OF THE CURRICULUM

The ways in which the curriculum is presently defined, as viewed from our survey of the literature, fall into five general categories.

We are going to describe the five and then discuss each of them in some detail.

The *first* definition of curriculum might be called that which relies upon the three R's and is subject-matter centered. The *second* general definition sets as a goal helping students to learn about our society and to function properly and constructively within it. This is a point of view which suggests that education should be concerned with the realities that the child will have to face in the world beyond the school. It stems in part from the work that has been done from 1917 to the present in relation to vocational education.

A *third* approach to the curriculum is represented by those who see in the American school that opportunity for the child, and that setting, which will permit those interested in his welfare to provide him with a healthy personality integration. This approach suggests that a person's proper place in life and his handling of intellectual or vocational tasks are secondary to a program which will help him become an integrated, mature person. This position was adopted formally at the 1950 White House Conference. A *fourth* interpretation and definition of the curriculum concerns those who not only see in the American school the possibility of creating healthy personalities but go one step further. These people see in the school situation an opportunity to create a new kind of integration of personality and clarification of values which would do not only a great service to the democratic and humanitarian ethic but in the process "save civilization." For example, it is said that war would be eliminated if children could learn to express hostility in benign or indirect ways rather than storing it up to an eventual explosion against another group.

The *fifth* approach to the curriculum is represented by certain individuals who are deeply concerned with the intellectual betterment and healthy integration of the student. They see in provisions for mental health endeavors in the school a self-defeating tendency in which school personnel become confused about their proper functions. Those who are positively inclined toward mental health, yet highly critical of it within the school setting, form not a small group of articulate critics.

The Defense of the Three R's

The defense of the so-called traditional curriculum in terms of individual mental health is necessarily indirect. Essentially, this argument states that learning subject matter in a particular way will have a salutary effect in and of itself upon the individual's life, and will have a corollary effect upon his mental health. Further, it seems that it makes no difference whether applied to the brilliant student, the average, or even the dull. For example, Heyl *et al.* (1956) make the point that the development of the intelligence is paramount: if this is slighted to any degree a form of regression takes place which limits the individual forever thereafter. Brameld (1957) makes a similar point when he dismisses education for mental health or for life as a substitute for traditional curriculum by claiming that if we concentrate solely on the present needs and behavior of the child, without also holding up to him a vision of the proper uses of knowledge, this child will never have any clear perspective for organizing his experience.

One theme related to the idea that education must select the intellect as its most salient responsibility is that education which introduces psychiatric principles somehow violates fundamental moral laws. This idea is advanced by Alston Chase (1955), who sees in any attempt to depart from traditional curriculum a denial to the student of his chance to learn to control and structure his own behavior. Implicit is the concept that psychiatric or emotional problems of adolescence are best solved by the individual himself, and that if help is given, a kind of maturation opportunity, replete with pain, is withheld from the individual. This experience of "painful growth" is seen by many defenders of the traditional curriculum as a moral necessity and, indeed, as a spiritual cornerstone of the properly mature and integrated person.

Quite another defense of traditional curriculum comes from some mental health workers themselves. Bernard (1958) suggests that while mental health is a good thing for the student, it is better derived from the intrinsic quality of the intellectual educational experience than by a therapeutic regime grafted onto school life. According to Bernard, the goals of proper development can be best

met by teachers and educators who understand the principles of mental health but who seldom use them explicitly. This viewpoint is similar to the fifth of the positions to be described, but focuses upon defense of the subject-matter oriented curriculum rather than upon a clarification of the teacher's role.

Another justification offered is that departures from a traditional curriculum have often tended to move from the individual and his own personal educational process to certain rather unstructured and unclear group procedures (Nieman Reports, 1956). This implies that the only valid individual experience a youngster can have is in terms of intellectual tasks for which he is individually responsible and at which he either succeeds, or experiences clear failure. In order to provide for individual differences, the student should have the opportunity to face a traditional curriculum which will allow him to see his own ability—or lack of it—learning in this way to relate as an individual to the whole educational experience and, perhaps in consequence, to society. An accompanying assumption is that group-centered approaches are always intellectually “soft.”

Paul Woodring (1957) feels that it is impossible for the school to keep up with rapid changes in modern technological society and, further, that the attempt leads to constant interference by interested, though not necessarily sophisticated, individuals who would dictate the content of the curriculum in terms of the needs of the moment.

The conviction that the basis for education should be stable and permanent is an essential part of the thesis. Since man does not change, and since truth does not change, education itself should change but little from year to year or from century to century. . . . Education should change not merely in response to changing folkways or changing technology, but only as our grasp of the truth becomes more sure; and even this change will be of content, not of aims or methods. . . . The educational philosophy for a democratic nation cannot be created by one man or by a professional group. It must emerge from the convictions of the people and must stem from their mores, their folkways, their ethical beliefs, and their concept of the good life. In a diverse nation it must allow for diversity; in a changing culture it must provide for change. Yet it must have sound moorings; it cannot be merely a reflection of current ties or whims of an uncertain people; it must have deep roots in the past and possess the stability provided by these roots (Woodring, 1957, pp. 34, 59, 91).

Woodring feels then that if education remains essentially conservative, it can be criticized by, but not be prey to, special interest groups since the job of the school and the experience of pupils within the school would be clearly set forth and understood by all.

A similar point is made by Bestor (1953) who accepts traditional curriculum because vocational training is seen as an impossibility in a world with rapidly changing technology. He argues that it is better to teach the student how to approach intellectual problems and think through solutions than to provide pat answers for living which might well no longer be valid when the student graduates. To put the matter another way, intellectual training will have greater "generalization" and "transfer" than more specific, pat approaches.

Some justifications of traditional curriculum imply that, once it is abandoned, the individual can only be seen or know himself as a member of the group. As Keats sees it, the whole modern approach to education is actually producing some drastic changes, or trying to: "It is a shift in emphasis from hoping to educate the individual in his own right to become a valuable member of society, to the preparation of the individual for the realization of his best self in learning the higher loyalty of serving the basic ideals and aims of our society" (Keats, 1958, p. 81). It is important to recognize that most of those who defend education through subject matter see in other approaches the danger of overconformity to some vague group ideal and a negation and denial of the individual pupil, while they see their own methods as promoting individuality. The defense of the traditional curriculum in these terms is somewhat of a paradox. Attacks by those who would modify subject-centered education are most often directed at its alleged neglect of individual differences among pupils in motivation, background, and ability. As in any approach to curriculum, there is a wide variety of different applications of this particular organization of school subject matter. At one extreme, for example, is the attitude of sink or swim academically; at quite another is the idea that through careful provision for individual differences, such as grouping in terms of ability, subject matter curricula can be made suitable for all.

The defense of traditional curriculum in mental health terms suggests the following arguments: First, that a departure from it is

destructive of the character development and personality integration which is thought to result from the intellectual rigor of the traditional curriculum; second, that attempts to deal with present-day solutions to living shortchange the student by not providing him with a background that would be useful for solving all kinds of problems; third, the best possible mental health position which the schools should take, by default, is to accept traditional studies as "something that can be counted on in a changing world." There is the underlying suggestion that if the school departs from this, there is no alternative but to run helter-skelter after each new fad and fashion.

These justifications are very different and have different points of emphasis and flavor; nonetheless, they offer persuasive support to the idea of personal security coming out of a rigorous, though carefully guided, intellectual experience, and a security for education as a whole, in clearly defining its goals for itself.

The Curriculum as a Process of Life Adjustment

There is probably no area of philosophy concerning the curriculum more replete with controversy than the conviction that curriculum should serve the life adjustment of students. The idea of life adjustment touches upon some of the most sensitive areas not only of American education but of American social thought and philosophy. One will seldom find a direct attack upon the classical curriculum couched in emotional or philosophic terms; nor will one find attacks upon the concept that it would be good for each child to have a healthy personality. The concept of life adjustment, however, arouses controversy because of ways the problem is defined and the things that get in the way of any clear definition.

To some people, "life adjustment" and "vocational education" are equivalent. To others, life adjustment means a broader set of goals encompassing social skills as well as techniques for earning a living. Here the term is used in its broader meaning, except when we explicitly state "vocational."

Vocational education poses a second problem of definition. No one doubts that courses in shop, auto mechanics, or sheet metal work represent vocational training, but disagreements occur about

the vocational nature of certain offerings at the college level. For example, ought one to list a premedical program as essentially vocational? Even courses in English literature and aspects of college experience beyond the classroom may be interpreted as vocational training in the broadest sense on the grounds that they contribute to ways of behavior and to funds of information that are necessary for certain circles or occupations. Perhaps any given educational offering must be viewed as *more* or *less* vocational rather than as being clearly in the category of vocational or not.

A third problem is aroused by the word "adjustment." Educators are frequently accused of squandering school resources in seeking pupils' adjustment. Often the targets of such criticism are group practices intended to foster attributes of social adjustment, such as ease of manner and group cooperativeness. These practices are said to be capable of hampering "personal adjustment" or mental health by unintentionally encouraging everyone to think and act alike.

Such "conformity" is discussed later; what we wish to point out here is that a dreadful uniformity is not an inevitable outcome of group events, even though it doubtless results to some degree from the present practice in some places. Only when the leader's role is mismanaged are a group's values likely to be experienced as coercive. In class discussion a teacher can give a hearing, if not always "equal time," to dissenters; and not simply to those dissenters who in the teacher's view enrich everyone's understanding. He can also accept idiosyncrasies not only on the grounds that people have a right to be different but also because unusual interests and one-sided preoccupations may have creative results and because, in any case, they are often necessary as ways of resolving inner conflict. Such freedom is not incompatible with the promotion of social skills.

Pleas for leeway for the nonconformist sometimes distress those who want everyone to be law abiding. Absolving pupils from being socially "adjusted" in the sense of being like others in opinions and tastes need not mean giving permission to break the more fundamental rules of society. In fact, proponents of life-adjustment education often have seemed to aim at what may be called "societal" as well as social adjustment. There has tended to be an underlying theme of acquiescence to the dominant cultural currents which

would be as objectionable to some critics as the promotion of a drab uniformity of individual taste and personality is to others. Our society is pretty much accepted as it is and each child is helped toward a constructive place in it. The mores and standards of his culture tend to be accepted implicitly, if not explicitly.

Justification for such practices can be found in such writings as Sapirstein and Soloff (1955), who argue that conforming to a common cultural image or identity is necessary for mature development. Carson Ryan (1938), one of the central figures in the field of mental health in education, holds as part of the school's goals conformity and obedience to dictated uniform procedures, though not in all areas of life or not necessarily in the same ways. Kingsley Davis (1949), a sociologist, sees mental health as depending to no little extent upon the willingness of the individual to accept the mores of the culture and says that only in this way can the society accept him as a healthy, integrated person. We may question whether either political loyalty or personal identity depends upon the existence of firm convictions about the literal truth of all the patriotic and other myths of one's land. We merely cite here the general tendency of the life-adjustment movement to be on the side of promoting societal adjustment.

Schools that adopted the approach of life adjustment had to adapt many of their procedures. One of the most obvious of these changes was that if the youngster was to be led into some role in his culture, more effort should be spent in understanding those things which he as an individual, considered in the light of his probable future life situation, needed to make this a reality. Thus there was a shift in curricular thinking away from subject matter to pupil-centered interpretations. Rugg (1947), for example, makes the point that education in and for a democracy must, of necessity, be child and society centered, based upon real experience; for only in this way will the democratic ideals be learned and strengthened. Prescott (1945) takes the position that failure to take account of each child and his problems of development will result in detriments both to learning in school and adjustment to society. Mahan (1955) feels that the school that ignores the child, teaching only facts, is failing in its social

obligations; education should help to open each child's eyes to new experiences.

The mental health dimensions of this particular position are explicit. Adjusting the child to the culture requires a willingness to bring those learnings to the child which the child is ready for and which an adult judges proper for his best development. In contrast, forcing the youngster into a curriculum that is not centered upon his own needs will result in frustration, confusion, stress, and emotional disturbances which will block learning.

The responsibility of the school for life adjustment may have been accepted through a process of default. Two authors make, essentially, the point that the classroom is the only place for the development of the kinds of social interactions in group situations which will be required of many in life beyond school (Wright *et al.*, 1951; Pearson, 1956). Trow *et al.* (1950) suggest strongly that training for effective social and cooperative action can be best carried out in school and, further, be best accomplished when youngsters are trained to work as a group. Much of life-adjustment education is concerned with the idea that if real life can be replicated within the classroom, adjustment to life beyond the school will be easier and more effective.

The literature of this particular area substantiates some of the criticisms raised by proponents of conventional curriculum. There is overwhelming emphasis upon groups and group living which, when expressed in its more extreme forms, seems to define the individual only in terms of his ability to behave in a group. Possibly such adjustment constitutes a way of finding oneself by enabling later life in an urban, group-minded society to be accepted and coped with effectively. A tremendous emphasis is given in principle to individual differences, yet in operation excessive stress may be given to the idea of the pupil conforming to group behavior and to collective needs.

Schools may try often to provide a range of . . . solutions [to inner conflict] by allowing for some individual differences, but even when a school intends an opportunity for self-expression, this often gets perverted into another kind of conformity demand. For instance, there is a practice in some elementary schoolrooms of having a "sharing" period each day in which the pupils take turns telling of their previous day's experiences, or they bring newly found

pets or trophies to class. It frequently happens that such sharing is instituted or managed in such a way that soon the children are competing in the traditional ways either for teacher or for peer approval in their presentations; real spontaneity is gone, and each child feels compelled to find something to present, a painful experience sometimes for children whose home experiences are less rich or pleasant. Activity groups in which children are pressured to participate may provide satisfactions for some pupils, but other pupils need to be alone or need emotional support from an adult. Individual differences tend to become submerged (Allinsmith and Goethals, 1956, p. 444).

The work of Asch (1955) suggests that this kind of education may produce an individual who is easily persuaded to accept group norms even against the evidence of his own senses. Probably there is a happy medium between the "entrepreneurial" type of personality and the bureaucratic type in which one depends upon others for cues about how to behave (Miller and Swanson, 1958).²

The most concise statement of why this emphasis on group behavior exists has been made by Dr. William Van Til (1953) in *Forces Affecting American Education*. Van Til underscores the fact that one of the great debates which affected education markedly during the thirties and forties was the shaping of school content and of school practice in terms not only of widely accepted psychological principles but also of some specific social convictions held by some educators. The concept of group living, as Van Til suggested, was deeply a part of the liberal-democratic philosophy of the times. The idea of preparing youngsters to live in groups and think constantly in terms of group process was an implementation of deep personal, political, and social convictions. Many of these ideas have been branded recently as being radical, un-American, or worse; Van Til points out that they were none of these—they were an attempt within the school to prepare youngsters for certain problems which might be part of living in a culture which was becoming less and less rural and more and more urbanized. For a resumé of this whole matter the reader is referred to Berkson (1943) who treats the relationship of the school to social theory.

The liberal educator is brought face to face with a new realization: formerly he was inclined to believe that equality of educational opportunity was the key to general economic and social equality. The contemporary analysis re-

verses the order of factors: greater equality in the distribution of wealth and increase in the national production are seen as the prerequisites for the achievement of equality of educational opportunity. . . . Taken as a whole, the "adjustment" conception regards our institutions as they stand as essentially sound; it is the individual who is to change and adapt himself to our society . . . there is no suggestion that the teaching profession should participate in projecting ideas of social change. Even those variations of the few which emphasize the factor of change, imply that the school should keep pace with change rather than attempt to change it. . . . The position of most of the writers who accept the view that education is a process of adjustment of the individual to social institutions seems to be that propositions of social betterment must have either (a) the general support of the community or (b) the verification of "science." Both propositions deny to the school the possibility of effective influence in promoting social change . . . the general tendency of the scientific-sociological school is to regard the established institutional set-up as the norm, to identify that which is with that which ought to be. It does not set up an ideal standard of social welfare by which to measure the validity of present institutional arrangements; and it does not acknowledge the creative force of ideas as a factor in shaping social institutions. . . . But our educational theory has usually made explicit only two terms, "the individual," and "the social"—probably because these concepts were neglected in the educational ideas of the past. The individual-social analysis is a significant contribution to educational theory. But it should be supplemented by a third term, "ideality," to represent the factor of general ideas and systems of value. This concept should be made explicit in the formulation of educational policy and in the reconstruction of the curriculum (Berkson, 1943, p. 245).

There are many explicit statements by the proponents of life adjustment of the common goals of both mental health and education and of the necessity for a curriculum to recognize this fact. Rennie and Woodward (1948) assert that the general goals of education and of mental health are synonymous and involve integration and socialization of the individual. Further, that the immediate goal of the child's efforts must be things that he can attain as well as things that challenge all his powers.

Much of life adjustment education is viewed in terms of providing such well-rounded responses to what Prescott and Havinghurst call "developmental tasks." The role of the school, essentially, is to ensure the wholesome development of all children by recognizing

that the direct training involved in learning is part and parcel of social development (Butler, 1948).

The contribution of life adjustment to mental health is taken for granted by its advocates. There are many references to "proper development," "maturity," "adequate adjustment." In summary form, without discussing here the problems that this particular position creates, it may be said that, in general, the goal is one of fitting the curriculum to the child rather than expecting the child to fit the curriculum. This is approached in two quite different ways: the first holds that it is necessary to give content to the student in whatever form is necessary for him to comprehend it at any particular developmental stage; the second holds that the child's thinking processes must be developed so that he can get content through his own efforts. This latter point is quite similar to some of the justifications of traditional curriculum. This approach, however, departs from the conventional one in that its basic goal is the adjustment of the individual to *life*.

It is extremely difficult, taking these various trends into account, to characterize any one specific or carefully organized position when dealing with the life adjustment approach to the curriculum. One seeks to create what might be called "the whole realistic child." One presupposes that he is going into a culture which has all of the intricate problems of a technological society and the stresses of modern living. The school must take the responsibility for training him to meet these by providing specific learning situations paralleling those it is assumed he will meet in later life. This emphasizes group experience, field trips to industry, office decorum for those taking secretarial work, and the like.

Many of the attempts to help youngsters adjust to life have been formless and have proceeded without much clear evaluation of what has gone on. On the defensive about this fact, some of the proponents of this position make comments, at the present time, concerning the need to assess present practices with care.

First, comprehensive and adequately processed records of growth, both physical and mental, are needed to verify or refute present findings. Then the implications of this longitudinal approach for school practices will need thorough study (Cornell and Armstrong, 1955, p. 169).

Other proponents raise questions about some of the assumptions of the approach.

Until recently, we tended to operate our schools with the expectation that all children could achieve the standards set for them in the three R's and in spelling, composition, and grammar. Though we are now coming to see that this is impossible, the tradition lingers on. Only recently have we learned the importance of educational outcomes in personality and social maturation. There is a danger here, too, that we may expect all children to be equally interested in working in groups, in becoming leaders and executives. . . . We must remember that the "average" personality or the "average" in social maturity is not necessarily the best behavior for all. So long as a given individual can be said to be relatively healthy in emotional life, there seems to be little reason for insisting that the more self-contained child should become more gregarious, or that the outgoing child should become more introspective. In regard to such matters, the concept of the average child needs careful examination (Kearney, 1953, pp. 134-135).

Of course, a plea for research does not in itself guarantee that changes will follow research findings. There is a missionary zeal but there also may be a missionary blindness. Social adjustment and social skills are such central values to the proponents of life adjustment and they see this as so important to the total fabric of the culture that in their writings they seem to present an all-or-nothing point of view.

As in the conventional curriculum, we have here a wide range of different approaches. There are some who feel that the child-centered life adjustment program is merely a better way to impart traditional subject matter and that the adult should decide the program for the child (Redl and Wattenberg, 1951). One can recognize individual differences among children and differentiate instruction accordingly without depriving the children of the security and intellectual stimulation of adult influence. At the other extreme, there are those who feel that the only intellectual content necessary is that which the child defines for himself. There are, for example, quite a few writers who argue that the youngster should choose his own materials, his own textbooks, and even define his own courses (Gray, 1956).

The Curriculum as the Provider of a Healthy Personality

One of the key historical events in both education and mental health was the 1950 White House Conference on Education. It is simple to report the goal which this conference proposed for the American school:

The school, as a whole, has an opportunity and a responsibility to detect the physical and mental disabilities which have escaped parental or pre-school observations and which would prevent development of a healthy personality, and to initiate the necessary health services through the various agencies and resources of the community . . . (p. 176). All schools should move as rapidly as possible toward adequate guidance and counselling services for all individuals at all age levels. This should include 1) Study and understanding of the total personality as a basis for adaptation of the curriculum to individual needs for fullest physical, mental, emotional and spiritual development (Richards, 1951, p. 177).

Thus the school is enjoined to take the responsibility of seeking a healthy personality for each child as well as stimulating his moral ideals, clarifying his vocational goals, and giving him the chance to acquire knowledge and skills. The implications of the goal are profound. The assumption of this responsibility raised a number of searching questions not only about curriculum but about the function and proper role of schools in American society at the present time.

The school has now been charged with the responsibility of considering not only the "whole child" in a "child-centered situation," but of creating through the educative process "the whole, healthy, happy child." This means both a duty to impart academic skills and a tacit acceptance by the school of a very broad surrogate function which the conference directed to educators in specifying the kinds of knowledge to be sought by research:

The constitutional and physiological basis for personality, in the debilitating or dissipating diseases of childhood, personality and the psychology of development. . . . Knowledge of how the child achieves internal security and balance will probably help us reduce mental illness and juvenile delinquency. We also need to know the relative importance of early stages as contrasted to later stages of growth, and the extent to which one may override the other, the child in the family, the child and his family through the social order, the

child's group, social service, clinical and medical agencies, religion. . . . At the midcentury, the task still remains to evaluate our schools objectively. Most of us are so close to them that objective analysis and appraisal becomes difficult. Educators endeavor to relate the child to the task he faces both at the present time and in the future. Do our schools under- or over-emphasize intellectual mastery as a facet of personality development? . . . It is most important for the health of personality, therefore, that the school be conducted well, that methods and courses of instruction be such as will give every child the feeling of successful accomplishment (Witmer and Kotinsky, 1952, pp. 436-439).

We see how such mandates are applied in the following account:

More and more, in Crestwood Heights, the child is institutionalized in his leisure hours as well, both through the school and otherwise. . . .

Perhaps the most outstanding feature of the Crestwood Heights culture is becoming increasingly evident: the degree to which secondary groups are assuming responsibility for virtually the whole socialization process. As a result—or prerequisite—the Crestwood Heights child must learn very early how to function in secondary groups, which, as he grows older, will come to claim more and more of those areas of the personality once reserved for relationships with the primary group, and even those once thought private or open only to sacred scrutiny. The family is still necessary to ensure the launching of the child into the society, as it were, but its traditional social function is widely shared with other institutions, in the endeavour to procure early and radical emancipation from the family of orientation. It is largely in the time span between five and twelve that the psychological and social groundwork is laid for this particular type of functioning in society (Seeley, Sim, and Loosley, 1956, pp. 100-101).

In addition to this assumption of a broad, surrogate responsibility, another matter seems to have become quite unclear. When one is dealing with life adjustment there is a separation made in the literature between the goals of mature adulthood and the goals of the school curriculum. The latter is seen as only one factor contributing to mature adulthood. When one is dealing, however, with education and the development of the healthy personality, the curriculum cannot be easily disentangled from the whole philosophical and psychological conception of education as a broad experience. This may be where we have fallen down—education may have erred drastically in equating education with the total training of the child.

Regardless of the merits of either position, it must be pointed out that in this area a clear distinction is no longer maintained.

There is also a lack of decision about the relation which should exist between the goals of the curriculum and the specific content to be presented. That is to say, the curriculum may be clearly defined abstractly, in terms of seeking a healthy personality for each child, but the way in which this is to be accomplished is left somehow in limbo. Also, there is little discussion about the relative effect upon the student of the content of a particular course of study as opposed to the manner in which it is presented. Therefore, we do not know for certain whether the content *per se* is seen by writers as the crucial issue or the dynamics of learning the content are the point of emphasis. As in all approaches, this particular rationale for the curriculum leads to extremes. For example, if we are to concentrate on the production of a healthy personality for each child, it is possible to argue, as some seem to, that there should be little attention to subject matter in the traditional sense but rather the school should hold a series of group or individual meetings for the discussion of feelings and reactions to peers. Subject matter appears to be left to seep in by psychic osmosis. "Guidance and education are synonymous . . . to many teachers, subject matter to be covered has become less important than pupil growth; it is used only as a vehicle or means toward effecting pupil growth and adjustment" (Young, 1953, p. 68).

Most suggestions which have been offered about shaping curriculum are of course less extreme. The curriculum must be made appealing and must be planned to fit with each individual's process of maturation.

In general, motivated behavior or activity will be greatest when the school program encourages or facilitates growth of the individual according to the principles of psychosocial development. . . . The curriculum must be planned to fit the maturing individual . . . work must be made meaningful for each individual (Segel, 1951, p. 43).

There are a number of authors who believe that the process of relatively free expression of impulse and idea is the only way to create not only maturity but also creative activity. Their general

argument seems to be that the school should permit a considerable degree of personal expression, particularly in the earlier years, so that, by a process of guided sublimation, maturity, and social responsibility may be maximized.

The teacher must provide an emotional atmosphere which permits children to express their feelings about the teacher and the school . . . (p. 41). Listening to children as they express themselves without trying to press our thinking and feelings upon them is perhaps one of the most fundamental ways of promoting mental health in the classroom . . . (Moustakas, 1956, p. 42).

Anna Freud (1946) and Barbara Biber (1955) have pointed out the dangers of an overpermissive classroom environment. Biber sees ways to apply mental health principles to all aspects of school life. A particular curriculum practice, she states, should involve making initial diagnoses of group relationships and needs before any program is undertaken. To both Freud and Biber, mental health should be a cornerstone of all education, but should not necessarily be an explicit preoccupation of the teacher as he or she is helping the child's mastery of a given subject. To put the matter another way, they contend that analytic knowledge may help a teacher to be aware of the child's dynamics and thus maximize the tactics of learning, but a teacher should also be aware that the roles involved in teaching are quite separate and distinct from those involved in therapy.

Not a few authors maintain that mental health materials, in a specific sense, should be introduced into the curriculum. It is fascinating what are considered "mental health materials." For example, one author (Dickens, 1954) suggests that if one has good speech education, this contributes to the goal of an adjusted and effective personality. Although we do not quarrel with the idea that good speech education may give a person greater confidence and a greater sense of personal capacity, this instance illustrates well how a possible curricular offering of the school is now argued for in terms of the current catch phrase.

Ralph Ojemann (1951) believes, as does Biber, that we should train teachers to use understanding of human behavior as a lever to enhance students' learning in every aspect of the curriculum, but he also suggests that school programs include the teaching of mental



health materials in a direct fashion. Some arrangements for teaching "human relations" directly are conducted like any other information subject, others in a fashion similar to group therapy. Such classes are discussed in Chapter IV.

We have tried, throughout this volume, to present materials that will stimulate teachers, supervisors, administrators, and others interested in the improvement of instruction to initiate activity in behalf of mental health. We believe that such a wide-spread movement will lead not only to more efficient teaching and learning in our schools, but may assist also in the emergence of a generation of more secure and stable adults who will be able to cope more successfully than the present generation has with problems of human relations—at home and throughout the world (Henry, 1955, p. 389).

Goals I and II [develop understanding of mental hygiene and develop good mental health in children] may be based on the underlying principles that education, as preventive mental hygiene, attempts to reduce or prevent anxiety through the development of the individual's insight into his motivations (Andrew and Middlewood, 1953, p. 596).

Here is an example of the blending of the goals of the school with the broader issues of the goals of upbringing. Many different kinds of content ranging from speech education to handicrafts, music, drawing, and physical education are suggested as activities which, because they permit a degree of expressiveness, are automatically assumed to be related to mental health.

Caution about making too ready assumptions about one's success in promoting health is expressed by Redl and Wattenberg (1951). They suggest that teachers should be careful to have in mind the distinction between the appearance of health and its actuality. There are youngsters who will conform to learning and the behavioral demands of the school for pathologic reasons, compulsively. Others are coming to school and doing well out of a healthy and integrated motivational system.

The desirability of the school effort should not blind us to the fact that its pathological use constitutes a problem with which the child needs help. . . . Compulsive conformism may be so deeply ingrained that only a highly skilled specialist can help a child correct the difficulty (Redl and Wattenberg, 1951, pp. 203, 205).

Children who are successful in conforming to the learning and behavioral demands of the school usually are not studied carefully. Many of them leave school with important undiscovered or underdeveloped abilities, with various mistaken attitudes, with selfish asocial goals and aspirations or with undetected personality cleavages. Many of these children will become unsuccessful and maladjusted later (Prescott, 1945, p. 457).

The one major comment that must be made about this approach to curriculum is not in terms of its goals, but rather in terms of whether they should be the goals of the school. Is it to be an obligation of schools to aid in the development of healthy personalities, and, if so, are teachers or other school personnel such as guidance specialists the ones to have the responsibility? It appears to us that those who have proposed the idea of a "healthy personality for every child" have largely neglected other influences which may affect development outside school. Children seem to be thought of as existing solely to attend school and being influenced solely by the school, and the school, in turn, takes on broader and broader functions as though no other agencies had any concern or interest in the welfare of the youth of our country. In the enthusiasm for a laudable goal, those concerned with the school, be they citizens or educators, may not have given sufficient attention to the roles that are played by or that might be assigned to or shared with social institutions already in contact with youth such as the family, the church, and other community agencies and programs. ✓

Despite these cautions, we are glad to point out that although the goals of this particular kind of education seem to be very broad and possibly beyond the scope of the school, the question itself has at least been recognized and the need acknowledged for scientific investigations of educational procedures. For example, no one seems to know for certain exactly how curriculum administration in this area should operate. Thus no one really knows whether there are conditions under which it may be better to have the pupil plan and choose his own work or whether this is best accomplished by a teacher who knows the child. There is a constant plea for more focused and specific research than was reported in earlier writings on life adjustment.

One final point must be re-emphasized: On the theme of a healthy

personality for every child, materials and writings dealing with curriculum content are sometimes extremely vague. Curriculum goals seem generally, if they have a specific content, to be defined as "proper development." This leads to the conclusion that the scope of the curriculum is made as broad as the issues of life itself. Then the relevance of concepts concerning mental health and integrated personality development is axiomatic.

*Synthesis of Curriculum and Mental Health as a Means
of Altering the Culture*

In discussing the materials on life adjustment, we suggested that some of the proposals were closely related to profound convictions about the kind of training needed for success in modern living. There was the hope that by learning a particular kind of social interaction in the classroom, youngsters would acquire skills in group activities that would transfer to adult life. Another group of writers have seen in the schools a means of creating changes in pupils' attitudes or personalities that will, ultimately, bring about the betterment of our society, indeed its very survival. Some of the suggestions have to do with the problems of adapting to technological developments without sacrificing human values. A major spokesman for such a position is L. K. Frank (1958) who argues that if the school were to include such materials as city planning and the conservation of both natural and human resources, more rational solutions to our changing culture would result.

There is an emphasis in much of these writings upon the pointing out by teachers of the various evils in our culture and the possibility of social action as a means of bringing about improvements. In the case of evils which stem from immature personality development, the assumption is that if these can be exorcized in the educational setting, greater ethical, moral, and spiritual integration will result. One such evil is that of prejudice. Allport (1945) sees in the school a way to do away with some of the hostility and aggression that characterize racial relations and that intensify differences among minority groups. Noting the efficacy of role playing as a way of giving people new emotional experiences, he indicates that if youngsters can experience how it feels to be persecuted—through play

acting the part of a member of a minority group who is disparaged or discriminated against—prejudiced thinking could be minimized. Another author makes the following claim:

The schools are in a strategic position to help strengthen and reorganize family life, and unless they undertake to do so soon in deadly earnestness society will suffer further unnecessary damage and loss. . . . Specific training for marriage and home making for boys and girls can and should be initiated. To be worthwhile, it should begin with kindergarten and be integrated and continuous through college and graduate school. It should be a major educational objective incorporated in all phases of the curriculum (Miller, 1956, p. 174).



As will be discussed in another section, it has not been demonstrated that courses bearing on human relations or education for parenthood, as presently conducted, do cause all the changes hoped for or necessarily have effects long-lasting enough to be worth the effort. To mention that current instructional techniques may be inefficient, however, is not to deny the right of the authors cited to set forth their blueprints for educational advance.

One of the most sweeping views is presented by Lawrence Kubie (1955). Kubie, in assessing the whole process of personality development, believes that the educational system must make a profound decision: either it can continue in its present form and thus reinforce neurotic processes and distortions which are part and parcel of human development in our society, or it may permit, within the context of the school, the controlled expression and consequent constructive redirection or healthful neutralization of the basic infantile lusts and rages which mark all human beings. Kubie is convinced that if this could be accomplished, the school would instill courage, balance, and conviction in a generation of more mature adults who would be able, through this greater maturity, to bring about changes in our culture which would stop the tendency for civilization to destroy itself. The school in this case is seen as that agency responsible for realizing all aspirations of the individual's well being and his social welfare. Somewhat similar hopes have been voiced by L. K. Frank and Brock Chisholm.

Such arguments are accompanied by suggestions about the shap-

ing of the curriculum. McClusky (1949), taking a position like Kubie's, sees in curricular innovations both ways of contributing to students' emotional maturity through self-knowledge, and the chance to use role-playing and other classroom devices as instruments for diagnosis and therapy, rather than relying on guidance and health services as the main resources.

New emphases have emerged to enrich the interaction of mental hygiene in education. These emphases support the postulation that the central instruments for the educational process, namely the curriculum, method, administration, and the teacher, should supply the major contribution of education to mental health (McClusky, 1949, p. 405).

The most extreme position is stated by Dracoulides (1956) who feels that education should go on from eight in the morning to six at night for all four- to five-year-olds and continue until the age of twelve, creating by its psychopedagogical orientation the first "model generation of citizens." Ojemann (1951), while not as extreme, sees the necessity for creating a "mentally healthy race of psychologically oriented human beings free from mental disorders" and wants to accomplish this by introducing into the materials taught an explicit understanding of possible hidden motives behind the human behavior discussed.

To recapitulate this point of view, it suggests that in the culture and in the American educational system there is a crucial deficit as well as a challenging opportunity. Schooling does little at present to correct the deficiencies of personality and the immaturities that tend to result from growing up in our changing urban culture. We have the choice of achieving both personal and cultural maturity through a particular kind of education, or of ignoring the opportunity and suffering the deterioration of our civilization by having prepared our offspring inadequately to grapple with problems posed by our technological developments, bureaucratic structure, urban concentration, and waste of natural resources.

The Curriculum as Defined by the Neofundamentalists

The first widely-read writings about mental health and education which dealt with curriculum and procedures of learning were pub-

lished in the 1930's. Probably the most significant was that of Ryan (1938). Prosser made the first major public statement about the need for provisions for mental health within education (1945).⁸ Following the Prosser resolution, the White House Conference of 1950, as we have seen, not only voiced the achievement of a healthy personality for every child as desirable in itself but held it up to educators as a goal of schooling. In the decade since, some writers have taken a detached and sometimes bitter look at the whole mental health-education synthesis. Oddly enough, among those who recommend a divorce of education from a preoccupation with mental health are people who are friendly to both kinds of endeavor. These individuals have seen two aspects to mental health activities which must be reckoned with in any program: One is the specific procedures to be adopted; the other is the stress and strain which may accrue to any institution when it attempts to install a new program, regardless of its abstract value. The fear is expressed that in "taking over" education the mental health movement has objectified the old proverb and won the battle while losing the war. That is to say, the institution of the school was persuaded to accept mental health as of medical, educational, social, and humanitarian value, yet in attempting to implement this ideal the world of education may have set back the mental health movement. ✓

Basic to many of the arguments is the observation that education has been seduced into what Fritz Redl (1955) once called "the omnicompetence demand." The wider and wider encroachment upon the school's time, in terms of surrogate functions, the constant demands from interested and even positive supporters in the non-educational world for more and more services for all kinds and levels of young people, have placed teachers in an impossible position that damages their work. An anthropologist (Spindler, 1955) points out that the shift in the core values of our culture, changing from a rural to an urban society, creates conflicts not only between groups but within individuals. The teacher, who is an agent of cultural transmission, is in a particularly sensitive position and undergoes a considerable strain. As David Riesman (1954) indicates, at a time when the culture is in transition teachers will be harassed not only

by the changing and inconsistent expectations of other people but also by their own value dilemmas. As he sees it, a combination of these pressures results far too often in a kind of cumulative mediocrity as vague anxieties sap the teacher's energy and duties pile up which compound the problem. Riesman believes that the only solution for the teacher at the present time is to redefine his role in terms of what he knows he can and must do—instruct in subject matter—and let other agencies, such as home, Church, and the helping professions take over the heavy program implied by the mental health movement. "I would like to see teachers become more adult in the model of excellence they present to children, and hence in the demands they put on them intellectually, leaving the pal function to other agencies in the society, or to themselves on another occasion" (Riesman, 1958). Riesman, it must be emphasized here, is friendly to the idea of mental health, but he offers grave reservations about it as a central undertaking of teachers.

Goldman (1954) points out that, despite many criticisms, teachers today are better trained and more sophisticated in their understanding of human behavior than their forebears. The rapid dissemination of new methods, however, exposes a teacher repeatedly during his career to new ideas and pressure to change his techniques in ways that may be completely out of joint with his former training and with what is congenial to his skills and personality, if not also to the expectations of his students. The awkwardness of the teacher's position is confirmed by a very interesting piece of research (Gray, 1955): A large sample of elementary school teachers were asked what problems presented the greatest difficulty in teaching reading. They listed *general* matters in the educational world itself; the ever-increasing responsibility placed on the school, the changes in philosophy deriving from studies in child growth and development, and the complete change in what teaching reading involved. Teachers often characterize their own role as a kind of treadmill to oblivion. An investigation by Goethals and Wilson (Part Two) confirms the existence of confused values in a sample of American teachers.

This section closes with a quotation from two productive members of the field of mental health.

Mental health as an educational goal, either major or auxiliary, has become a cliché of the times. This fact is in part a reflection of a more general tendency to blame the school for all that goes amiss with the State, its citizens (save only a few physical ailments of unknown causes), and to charge the school with the responsibility for the realization of all aspirations for individual well being and social welfare. Is the divorce rate rising? Let the schools teach family living. Is there death on the highway? Let the schools go in for driver education. Does annihilating war seem increasingly difficult to avoid? Let the school give courses in international understanding. Do the churches fail to attract and hold young people? Let the schools purvey religious and moral teaching. Is emotional instability widespread and the incidence of mental illness high? Let the schools dispense mental health. Taken boldly, such demands can reduce the school from an educational institution to a bin into which, by law, for two hundred days each year all children are conveniently gathered. Thus, enclosed, they are a captive audience, easy to reach with whatever is thought to be good for them, from solicitation for worthy causes to mental health, whether or not a particular thing thought to be good for them has anything to do with education and the learning process. It is as though the home, . . . social and health agencies, and all the other agencies and institutions by which mankind lives, or lives better than it otherwise might, had no existence or no function to perform for the young. The young gather in the schools. Let the schools tend to them in all aspects of their being. The schools are bedevilled by the multifarious demands made upon them as a result of the prevalent tendency to hold them primarily responsible for all aspects of pupil well being both now, when they are young, and later when they will have become adult (Kotinsky and Coleman, 1955, p. 267).



COMMENTARY ON THE FIVE DEFINITIONS OF THE CURRICULUM

It will become apparent that we regard none of the five main currents of opinion described above as representing a balanced view that takes into account the complexity of the issues. If the promoting of students' mental health is defined very loosely as consisting of contributing to general effectiveness in living and working in our society, then, of course, schools contribute to mental health; they do so simply in their everyday work of imparting essential knowledge and skills. Although they do not perform this basic instructional function in an ideal fashion, present trends appear to be on the right track in seeking to blend an emphasis on fundamental subject-matter with capitalization upon students' motivations and talents

through attention to individual differences. When training such as driver education is provided, it need not be given "academic credit" and so be substituted for intellectual fare. The essential values of a focus on traditional subject matter and emphasis on life adjustment appear to be reconcilable.

If the goal of education is to increase pupils' general maturity and give them healthy personalities, then we believe that those who warn against such aspirations are right: teachers by and large cannot permeate their classroom endeavors with acts that have entirely mental health rather than instructional goals. (An exception may be the important work of nursery schools and kindergartens discussed in Chapter VI.) At the same time, we regard as too extreme the argument of the neofundamentalists that teachers should completely limit their concerns to instruction. Rather than ask teachers to forget all about mental health, we suggest that they should both avoid certain acts bearing on health and illness and engage in others. There are, we think, means of bringing about to some degree the noble aim of improving society through increasing individual maturity. We see a number of specific ways in which teachers, without overburdening themselves or subverting their instructional obligations, can at times contribute to the avoidance or alleviation of mental illness. We describe these ways in Chapters III and IV along with our analysis of the activities of professional specialists in guidance and health services. We think, too, that instruction itself is aided and positive mental health promoted by recognition of students' individuality that can be increased through certain kinds of teacher training (Chapter V) which involve a grasp on the teacher's part of personality dynamics and mental health principles, and which may include efforts to increase teachers' self-understanding. It is also possible that methods which will be discussed in Chapter IV of teaching students about human relations will become advanced enough to prove their worth in contributing to wiser behavior and thus to justify endeavors of this sort beyond those in the few schools doing the pioneering. When properly managed, such efforts supplement and enhance rather than compete with traditional curricular offerings.

We do not mean to suggest glibly that the controversies about

curriculum are subject to easy resolution. In part they represent conflicting values and goals rather than merely differences over means. The concept of positive mental health is itself judgmental, and attempts by psychologists to create definitions amenable to research on the topic have proven difficult. Brewster Smith (1959) suggests that the seemingly roundabout approach of doing basic research on personality functioning and development may prove, in the long run, to be the most fruitful tack. He also points out that "if mental health is personality somehow evaluated, we are handicapped by the relatively primitive state of the science of personality" (p. 680). Until such basic research has progressed much further in advancing our understanding, educators must gloss over complicated issues of definition and evaluation. We shall have to assume that everyday definitions of positive mental health in terms of zest, joy, creativity, and the like can be viewed as sufficiently agreed upon to merit our discussing schools' endeavors in such terms.

In contrast to the unsettled state which characterizes the topic of the curriculum and promotion of positive mental health, the problem of students' mental illnesses is simpler: everyone agrees that freedom from illness is desirable—the only issues concern the procedures to follow. These we take up in the next two chapters.

SUMMARY

In this chapter we have described five main viewpoints that are expressed about mental health and the curriculum. These five clusters of opinion advocate respectively: (1) a focus on traditional subject matter; (2) an emphasis on life adjustment; (3) the seeking of a healthy personality for every child; (4) the improvement of society through increased maturity of individuals; and (5) "neofundamentalism," in which teachers are enjoined to stick to instruction and schools are urged to restrict their burgeoning nonacademic functions. In conclusion we have given our own position on the topic of the curriculum and mental health.

Dealing With Mental Illness in Schools

WE HAVE pointed out earlier that mental illness and “positive mental health” are different dimensions: a person may be free of emotional disturbance but lack such signs of positive health as zest, joy, skillfulness, and creativity. In the previous chapter we described various ways in which educational approaches have been justified in terms of promoting positive mental health by helping students to develop desirable characteristics. In this chapter and the next we deal with illness.

Everyone has heard of “school psychologists” and of “psychological testers.” Many people, perhaps, assume that virtually all school systems employ such workers, that their training is fairly uniform, that whatever schools have occasion to do about mental illness is done by these specialists, and that two or three headings, such as “referral,” “diagnosis,” and “treatment” span the range of activities that a school or any other agency may undertake or instigate to cope with students’ troubles. Each of the conceptions is partly false. The subject is far more complex than it may at first appear. We have categorized the issues in the form of three questions: (1) Which students are to receive help? (2) What services could be provided to help them? (3) Who could staff the services offered? (This last question is dealt with in Chapter IV.)

We ask first which students are to receive help, because questions about the types of services that may be provided and the types of personnel necessary must rest on a clear conception of the degree of responsibility for student health that school authorities accept or

have thrust upon them. We sketch now the possible extent of this responsibility. As we proceed, and it becomes apparent to the reader that virtually all students could be regarded as suitable candidates for preventive, if not diagnostic and therapeutic, measures, the impression may be gained that we are advocating some totally unrealistic ideal or aspiration for schools' mental health endeavors. Such an interpretation misconstrues our intent; we are not espousing a cause. We describe the enormous range of pupils' troubles in order to examine the existing situation. Each level of student predicament is being dealt with as a problem of illness or potential illness under the auspices of some educational institutions or school systems in the United States today.

Students with Serious Difficulties

Unlike the many cases that school officials and teachers can ignore if they choose, students who present problems *to the school* or challenge its traditional functions require some kind of action. Lack of cooperation stemming from severe mental illness or retardation may create a classroom dilemma even in the absence of hostile or aberrant acts. The fact that such cases cannot be ignored does not, of course, insure their being handled with regard for the student's well-being in terms of mental health. The number of possible actions is great. Private schools are free to expel students with the tendencies mentioned or to refuse them admission in the first place. Many public schools do not have these options. Often, instead, they take administrative steps to segregate such pupils: special schools or special classes can eliminate the disruption in regular classrooms caused by severely disturbed children, whether or not there are efforts to cure them.

Another group of pupils who are not readily ignored are those who are repeatedly absent. Attempts to learn the causes of the behavior and to take remedial steps may be made, but the problem can often be left to legal sources who may or may not suggest help for the emotional problems that are often involved.

Then there are the many children who have adequate capacity to learn, but do not perform successfully in most or all academic tasks. Study of such cases often shows that emotional conflicts are a causal

factor, quite aside from the signs of disturbance that appear as a *consequence* of repeated failure (Weisskopf, 1951). A sink-or-swim attitude about cases of academic disgrace may prevent anything constructive from being done. Those who regard it as the responsibility of the school to "do something" about extreme cases of disability, such as total nonreading, may not necessarily feel that schools should be staffed to deal with the emotional aspects of such disabilities and sometimes argue that to treat the symptom by offering special instruction in academic subjects is as far as the schools should go.

Students Who Are Underachieving Academically

Great numbers of students do less well in school or college than their intellectual potential warrants. In many cases there is no cause for alarm: other worthwhile or necessary types of endeavor may absorb youthful energies. In many instances, however, the problem stems from emotional conflicts or from motivational difficulties including, quite frequently, a lack of understanding about the opportunities that success in school can open or a lack of recognition on a student's part of his own mental power. While there is a clear educational as well as psychiatric justification for looking into cases of underachievement, some would be resistant to staffing schools in order to give special help to students who, while functioning substantially below capacity, are not failing or doing so poorly as to hold up the progress of their fellow students in the classroom.

Students with Emotional Problems Not Interfering with School Performance

Included here are those troubled students whose torments can readily be ignored by the school since their behavior does not impede the school's instructional or custodial functions. In some schools, the attempt is made to help unhappy pupils regardless of the scholastic repercussions of their illnesses. Naturally there is a great variation in the severity of the ailments detected. Most of the efforts of mental health workers need not automatically be devoted to especially sick children. In some cases it may be thought more efficient, more strategic, or more worthwhile for society to apply limited resources

to the benefit of mildly disturbed students who can be treated relatively quickly than to work endlessly with more tragic cases.

Students for Whom There Is a Prospect of Future Illness

Some pupils in this category are those who have personality characteristics indicative of future problems. For instance, an extremely overconscientious child may absorb his tensions in meticulous work that earns praise in school, but severe cases of this sort often have difficulty in adult life if they do not find a niche calling for such cautious, painstaking effort.

Another kind of student who may be getting along all right is the one with a decision problem, such as that of choosing a college major or settling a career plan. A poor decision may result in misery in school and temporary or permanent occupational maladjustment. Many students arriving at such an intersection of life take the wrong route and—to pursue the metaphor—not finding a parking place, return to the crossroads and perhaps misread the signs again. Time is lost even if the student does not run completely out of gas. Counseling interviews at such a time of decision are used to help students to make a more satisfying decision more promptly than may otherwise have been arrived at. The counselor serves as a catalyst in the resolution of a normal developmental problem.

In addition to forestalling disturbances that can actually be discerned on the horizon, there is the possibility of engaging in preventive measures with pupils with no known prospective problems. Just as all children are vaccinated as a precaution, even though many might escape smallpox anyway, so preventive mental health endeavors may be applied to an entire classroom.

It is obvious that the kinds of students for whom help is to be provided will be important in determining the types of service it is feasible to offer. The number and sorts of personnel needed are similarly affected.

WHAT SERVICES COULD BE PROVIDED?

In delineating steps of intervention in students' illnesses that are now used, or might be used, we imply neither approval nor dis-

approval of a school's engaging in such a step. Initially we seek only to point out the existence or possibility of various avenues and techniques. Evaluations of them are reserved for a later section.

Detection

Detection needs to be distinguished from "diagnosis" and "prognosis." A difficulty is detected when we notice or infer that a child is upset and disturbed, that he is chronically or intensely unhappy, that he is functioning below his capacity in school, or that he has characteristics that foreshadow problems in the future. *Diagnosis* provides confirmation of detection and attempts to add a "because" statement: "The child is upset *because*." *Prognosis* constitutes a prediction about the course of the illness, e.g., that the disturbance will go away by itself ("he'll feel better tomorrow") or that it will continue and have some adverse consequence in later years.

When should detection be accomplished? It is commonly assumed that it should be *as early as possible during the course of an illness*. Early detection may prevent dependence on "secondary gains" derived from illness. If rewards for staying home when sick are excessive, a child may later deceive himself or others about the state of his health at times of anxiety. Staying home not only provides a retreat (primary gain) but is experienced as pleasant in itself (secondary gain).

Of vital importance too is the fact that "circular effects" of symptoms are prevented when early detection permits prompt treatment. Some types of symptoms cause difficulties for a child in life that leave him eventually with two problems, the original emotional disturbance that led to the symptom and new failures attributable to the symptom. Examples of symptoms with circular effects are speech ailments or obesity that hamper a person's social relationships, reading difficulties that handicap learning and lead to difficulties in school, and alcoholism that causes problems on the job and at home. When there are certain kinds of emotional problems during the pre-school years, experiences later in school often complicate the picture so that "many children unable to cope with the demands of the school because of their abnormal ego development end up after several school years with seriously distorted self-images and in-

feriority feelings" (Vaughan, 1955, p. 204). In contrast, symptoms such as a facial tic or mild eczema, when not so pronounced as to lead to social embarrassment, may reflect—or even symbolically solve—an emotional problem without in themselves causing new troubles.

Research on the efficacy of treatment for intense fear of school has demonstrated that treatment is far more efficient and likely to result in complete remission when a child is referred soon after developing the phobia (Waldfogel, Hahn, and Landy, 1955). The advantages of early treatment are probably also true for many other ailments. The problem of secondary gains and the creation of added frustrations because of the social repercussions of symptoms make it hard to doubt that early treatment, and therefore, early detection, are preferable.

To detect an illness early often means doing so *early in life*, if we accept the frequent conclusions of mental health workers that a substantial proportion of illnesses get started in the first few years. In addition, many illnesses with a later onset perhaps would not have occurred if the person's capacity to resist stress were not reduced because of childhood problems. There would be a question about the utility of detection early in life if ailments were commonly outgrown. While occasional fortunate circumstances reverse the factors causing an ailment early enough to offset the effects, it is a general opinion that while symptoms are "outgrown," the underlying problem is less likely to be outgrown. The disappearance of a symptom often means merely that a shift to new symptoms has occurred.

Many authorities believe that it is easier to treat childhood disturbances during the years before five or six when the child is more amenable to outside influences because his neurotic ways of reacting are less crystalized (Fraiberg, 1954; Dawes). Dawes states that children who will later have "learning difficulties" can be spotted in kindergarten. They could, presumably, be treated at that time more easily than after actual school failure has occurred to disturb the child further and complicate the problem. But later too, from age six to age eight, "many neurotic or unhealthy solutions and ways of reacting are not yet firmly fixed and are still open to correction if recognized and properly handled" (Dawes, p. 36).

The shadowy images of the future adult hysteric, the compulsive neurotic, the psychopath, the delinquent, the life long misfit, all are discernible to the trained eye at this time. The cruel, aggressive, ruthless character, the passive boy, the aggressive girl, the gifted intellectual with infantile emotional structure, the invalid with countless psychosomatic complaints—all these show that somewhere the environment lacked the proper ingredients for healthy development (Dawes, unpublished manuscript).¹

Against the advantages of detecting problems early in the child's life is the fact that parents are in a position to prevent the child from receiving treatment. Rather than cope with the parents, some argue, one can wait until the child is grown to begin treatment. It is obvious that in many cases the relationship with the parents is a causal factor in the child's problem. The effects of a child's treatment, then, may be vitiated by the continuing influence of the parents. Yet if the problem is tackled early, the damage may not be fully accomplished, and hopefully, if the parents are not too seriously disturbed themselves they can often help modify the child's situation. The weight of informed opinion and of the existing evidence is clearly on the side of efforts to detect early. A clear implication is that efforts of detection ought not to be solely passive in their design. Rather than wait until a child's difficulties happen to be noticed or to become manifest, it is obviously desirable to be alert and notice purposefully; otherwise one will miss a lot of cases (Poucher, Shapiro, and Phillips, 1956). Responsible adults in contact with children can go even further than be alert about detection; they can institute systematic "screening" procedures to scrutinize or examine children.

Mass screening need not be less precise than that applied to a small number of children, providing that the arrangements permit care. In the light of the foregoing, screening is particularly advocated in connection with school entrance. A major change such as going to school for the first time represents a challenge that has stressful as well as rewarding elements. In some children with emotional problems, the anxiety produced will bring some over-reaction, making detection particularly feasible and intervention timely. However, detection some months before actual school entrance allows time for planning and preventive work that may make

the transition to school more successful (Lindemann and Ross, 1955). The timing of screening in connection with impending school entrance is strategic because virtually all children can be reached; often up to that time no professional person with extensive mental health training will have had an opportunity to see a given child or will have been in contact with the family.

It would be even better to discover difficulties as they arise during the preschool years, without waiting until school entry. Preschool children are plastic enough to benefit by a modification of environment brought about simply through advice to parents. Also, there is a marvelous opportunity during this period for skilled nursery educators (see Chapter VI) to do preventive work by recognizing and correcting some of the misconceptions children frequently develop about human relationships and carry unconsciously into later years at tragic cost.

Many systems or types of organizations are used for detection. We need simply note here that where such procedures exist at all, they vary from elaborate teams with many methods to entirely informal and unplanned practices, such as occasional mention by classroom teachers to a school psychologist or principal of patterns which happen to be seen by the teacher as indicative of emotional problems. Intermediate practices often involve the presence in the school of a mental health consultant or a visiting teacher who acquaints teachers and administrators with mental health issues and stimulates the referral of children who appear to have problems. In some cases, there are systematic efforts to extend the competence of the classroom teacher to include detection.

To go about detecting does not solely involve having some knowledge about types of symptoms. Many emotional problems do not show themselves as obvious symptoms. Hidden problems must be discovered from the discrepancy between actual and expected behavior. For instance, sometimes, when going to the hospital for surgery, a boy or girl shows no fear whatsoever—a clearly unrealistic response. The parents may be happy the child is “so brave” when they should be unhappy because he is probably using extreme techniques of self-deception to cope with the threat he perceives. Of course, such a disturbance may not remain “underground” in-

definitely, and there may be delayed reactions that can be recognized by one alert to the possible connection with an earlier fright or severe disappointment.

Another problem of detection exists when symptoms disappear spontaneously. A child who wets the bed until seven or eight years of age may stop, but develop handicapping and prolonged irrational fears that are clearly symptomatic, in contrast to the lesser fears many children experience at some time or other. Later the fears may diminish, but the child perhaps shows obsessive traits that constitute a disorder of personality or "character disorder" rather than the usual symptoms. A child who at six was quarrelsome, unruly, and a bully may develop into a model of deportment by ten, but have acquired one striking symptom such as the inability to learn to read.

There are "false positives" as well as "false negatives." For instance, among false positives are children who are really well, but who look emotionally disturbed if examined at a time of temporary disturbance or of bodily illness. A child whose maturity at play is being observed in order to evaluate him for admission to school may be judged too immature because he is coming down with a physical ailment, feels cranky, and behaves erratically. If the presence of symptoms such as fever is not noticed until some hours later at home, no connection with the earlier behavior may be recognized, especially if the parent is unaware of the false conclusion drawn at school. Another possible basis for too pessimistic appraisals of a child's developmental level occurs in connection with intelligence testing. Most psychometrists have heard the story about the little boy who reported to his mother that he told the testing lady silly answers. If she was so stupid that she needed to ask him those questions, he wasn't going to be the one to enlighten her. An emphasis on detection is likely to result in the referral of trivial cases (Seeley, Sim, and Loosley, 1956). While it would be possible to err too much on the side of alerting people about detection, it seems preferable ordinarily to have a few trivial cases referred rather than to miss the detection of serious problems.

The kinds of information about a child that may yield relevant evidence about his health and his illnesses are many. Schools typically

have a great deal of formal information about a child's school performance. The data concern intellectual potential, actual intellectual performance, and general adaptation to school, including social and emotional well-being. Attendance records may be checked to discover habitual absentees. Report cards may be examined to see who is failing and to evaluate discrepancies between aptitude and actual achievement. In addition to the children who are performing below capacity, there are some who "overachieve," and in some instances they are doing so at excessive cost or strain.

It is desirable to have cumulative records on file so that changes over time can be noted. Marked dips in achievement or sudden changes in deportment often betoken problems of adjustment (Stringer, 1959). A relatively mature child who is doing poorly compared to his past performance may be more in need of help than a less mature child who has maintained a consistent level. The latter has less "positive mental health" than the first, but may be free of illness. When a child showing one or more areas of difficulty is observed or checked on more fully, it may be apparent that his general adjustment is good and that the particular problem is being surmounted or is too minor or circumscribed to bother with in view of the shortage of available facilities.

Beyond checking school records by the home room teacher or the guidance or health personnel, a great many specific endeavors have been used in one detection program or another. We are only beginning to assess the relative utility of these methods. Rating scales filled out by teachers are one source of information (the evaluation of such information is discussed below). Pupils sometimes provide useful information by rating one another (Bower, 1958). Their opinions may vary in interesting ways from those the teacher would have predicted. Children who are rejected by their peers bear watching: they very often have problems because of aggressiveness, docility, inexpertness, or unresponsiveness. A particularly common approach has been to use the sociometric method in which children indicate their choices among classmates for a leader or companion. Chapter II has shown why social adjustment may be a poor criterion of health in particular cases, since popularity may result from attempts to relieve guilt feelings by winnings others' approval, reflect-

ing personality problems, and because the less popular person may be a well-integrated individual with different interests and talents from the average. In some cases, too, being "chosen" sociometrically may not indicate social effectiveness or popularity; it can occur because a given child is valued as a convenient target on whom aggression may be vented (Alexander and Alexander, 1952).² Nevertheless, such ratings and descriptions by children of the ways others impress them may provide useful information when these data are evaluated in the light of other evidence. It is important to seek a balanced picture of a child's functioning because difficulties in school can be overemphasized when they are not accompanied by social or extra-scholastic handicaps. Another method which may be administered by a classroom teacher is to ask students to prepare a diary or autobiography (Bennet, 1953). Such devices as story completion or word association tests are sometimes used (Rothman and Berkowitz, 1953). Elementary school pupils as well as older students may be given the opportunity to "detect themselves" by expressing their own feelings of distress to a professional person such as a school social worker (Goldin, 1955). A number of technical devices used in psychodiagnosis such as the more complicated projective tests and doll play techniques are often used. With older students in college or high school, questionnaires about health history and personality inventories may be used along with interviews with mental health specialists.

Questions about the limitations of a given sort of worker to participate in detection revolve about the evaluation of data rather than about the providing or collecting of it. No one seriously questions the fitness of asking teachers to comment on children who seem to have problems or to administer a questionnaire in a classroom as part of a testing program, but questions may indeed be raised about the degree of responsibility a teacher ought to be asked or allowed to take concerning the evaluation of and access to the data assembled. Such questions are discussed below.

Diagnosis and Prognosis

These two steps provide a basis for *decisions* about the management of an illness or potential illness. Diagnosis has already been

defined as going beyond the simple confirmation of a problem's existence. While not necessarily fathoming the ultimate sources of a difficulty or even being able to discover a precipitating event, it does call for understanding of the extent of the problem, what may lie behind it, and what distinguishes it from other types of problems. When such understanding cannot be won, it still helps in the management of a case to know what illness it resembles, for if one does not know just what to do, one may be able, nevertheless, to rule out some inappropriate actions. A diagnosis of depression is better than a mere description by a teacher of a pupil as having "something wrong with him—he's listless; often doesn't follow what I'm saying." Such symptoms might reflect physical illness or mental deficiency rather than an emotional disorder. The range of possible causes to look for and to try to remedy is narrowed when a diagnostic formulation can be attained.

It is possible to detect but not diagnose—to discern a problem and suspend judgment as to cause. Often, however, an implicit diagnosis is made, e.g., when a teacher labels the child as "lazy." Since laziness is popularly viewed as a stable trait and not as a response to low motivation or to the presence of conflicting aims, the problem may be mistakenly thought of as understood. The possibility of making a considered, perhaps professional, diagnostic investigation will be overlooked when diagnosis is implicit. Therefore, the distinction between diagnosis and mere description accompanying detection ought to be in the minds of all who bear responsibility for children's welfare.

Usually various factors work in combination to produce an emotional or behavioral problem. While typically some of the factors are not readily discovered, even ruling out one major possibility as false improves the decisions made about a child. When a girl's scores on an intelligence test are examined to shed light on her poor work in school, the evidence of adequate aptitude eliminates one kind of explanation. Information about the hard work the girl does helping her mother may remove the nonexplanatory term "lazy" from further discussions.

A major step is taken toward recognizing a need for diagnosis when the person responsible for an educational or remedial decision

avoids hasty and oversimplified judgments. The class buffoon in second grade may indeed have problems competing with a talented older sister, but his current inability to concentrate may be assessed differently should it be learned that he is faced with the arrival of still another sibling.

Furthermore, a useful diagnostic evaluation goes beyond the mere categorizing of symptoms under a particular label. Even a rubric like depression is not enough. One must learn when and under what circumstances the child first appeared listless and inattentive, whether these reactions occur uniformly or only at school, what other reactions, if any, preceded or now accompany apathetic behavior, and how the child himself accounts for his behavior. Then and only then can one *begin* to evaluate intelligently the seriousness of the reaction and to plan next steps appropriately.

Work with children typically demands that there be at least some preliminary diagnostic appraisal, however tentative. Most often this necessitates obtaining and evaluating information from parents because a young child often cannot directly describe his problems. Many educational and therapeutic decisions about a child that may affect his present or future psychic health require information that it would be inefficient or impossible to get by initiating treatment of the child without carefully evaluating his situation.³

As in the case of diagnosis, a *prognostic* decision, a prediction about the course and duration of illness, can be implicit rather than explicit and is likely at times to be unfortunate as a consequence. A child may be labeled as "incorrigible" or as "flighty just like her mother." Permanency of the condition is assumed, and the implicitness of the prognosis allows the assumption to escape notice. The decision, "It's just a phase he's going through," naturally rules out treatment because the unspoken addition is, "He'll outgrow it." The question of whether it is reasonable to be confident he'll outgrow it is not even asked. Such a reassuring forecast, whether implicit or explicit, is often too sanguine: if the behavior is symptomatic of a major, chronic, emotional problem, the eventual disappearance of the behavior may represent a shift to a new symptom rather than the child's having progressed to a new level of maturity.

At other times, even when diagnosis is explicit, not even an

implicit prognosis is made. A child may be said to be a bully and the conclusion drawn: "It's because of his older brother. His brother picks on him and then he takes it out on the others." Getting at a possible cause in this way leaves the feeling of having wrapped up the matter so that avenues for dealing with the problem may not be explored. Thus, absence of prognosis, like implicitness, reduces the chance that constructive action will be taken.

One key issue in evaluating the long-term implications of a child's disturbance is whether a symptom has the circular effect of causing new problems in addition to the original one giving rise to the symptom. Passive resistance reflecting, perhaps, only a temporary resentment of some pressure from parent or teacher may get a pupil off to a slow start in learning to read, spell, or cipher. Getting behind initially may lead to progressively more inadequate performance. Anxiety about such a deficiency, if intense enough, may interfere further with the child's intellectual functioning in one or more phases of schoolwork far more than is compensated for by the assiduousness that the anxiety may spur in the pupil's scholarly endeavors. Anxiety over his failings, then, is a problem in itself, independent of the original cause. The anxiety leads to additional symptoms, some of which, in their turn, may have social or scholastic repercussions.

However, in judging the severity of a case and predicting the outcome, concern over an existing or envisaged spiral of symptoms must be balanced against strengths in the individual that may win him adequate human relationships and satisfactions despite his flaws. Not only may his talents lead to approbation despite demerits in other areas but sometimes the development of potential strengths changes the person's life so profoundly that the conditions which gave rise to symptoms cease to exist.

Some behaviors in a child may be assigned undue weight by the adult untutored in mental health. For example, an initial instance of theft by a child may have no implications for future delinquency provided that the event is handled properly (Green and Rothenberg, 1953). The act, of course, should be disapproved unequivocally, but rather than assume that the child is headed for a criminal career, the emotional conflict that may have led to his misdeed should be

discovered. Often an isolated act of theft is precipitated by a very specific situation that can be corrected. Another instance of behavior the import of which may be exaggerated is that of a new boy in a school who promptly gets into a fight. He may not be hostile or defiant; he may not always attack others in order to feel safe in a frightening situation; he may just have been challenged by his new companions in order to test his mettle and be unable to escape combat without losing face and accepting a powerless position in the pecking order.

As far as academic difficulties go, schools have had a crude means of detection all along in the form of marks or grades. Academic deficiency was commonly accompanied by an implicit prognosis that nothing could be done, that it resulted from stupidity or some lack of motivation that was, in a sense, an inherent characteristic of the child. Scores on aptitude tests, if contrasted with a student's grades, enable us to discover discrepancies. When the discrepancies are substantial, diagnostic appraisals can be made. These require skill and technical knowledge not likely to be in the possession of one who has simply read through a testing manual. In the case of individual intelligence testing, for the proper evaluation of any numerical outcome it is crucial to scrutinize the *nature* of a child's errors and to assess his observed test behavior in order to get cues about how hard he was trying, whether his effort fluctuated unduly, whether he was overanxious, and what other factors may be disturbing his mental health.

This is one of several reasons why numerical scores on intelligence tests ought not to be told to pupils or parents; the score in itself may need qualification in terms of such things as the child's motivation during testing. Also, of course, scores from two different tests, or the same test given under varying conditions, are not necessarily closely comparable. False conclusions may be drawn when the IQ of one child is contrasted with that of a second. Suppositions about a child's ability are also not infrequently used to browbeat him. Finally, most parents are unlikely to understand even the simpler ways scores are presented, grossly misinterpreting small numerical differences between two IQ's or assuming incorrectly that they know the impli-

cations of a given score in telling a child's standing compared to the distribution of IQ's in the general population. Of course, parents have a right to have their questions answered in terms of meaningful predictions about a child's relative capacities. Such predictions do not have to be accompanied, however, by easily misunderstood technical details.

[Educators] hold a healthy skepticism about any *single* test score and make use of it as an *estimate* rather than a literally true and exact measure of intelligence. Educators study the complete record of the child and are slow to draw any but tentative conclusions until the evidence is overwhelming. A single IQ is a potentially dangerous piece of information unless its values and limitations are fully understood (Durost, n.d.).

As Mullen (1959) points out, even when properly done, diagnosis is difficult and not a routine operation, although unfortunately it is often treated as such.

Mullen, too, calls attention, as have others, to the need to learn more about the circumstances under which certain children turn out, when studied over a period of time, not to have been in need of professional help despite a dire initial prognostic forecast. Much general improvement in the prognostic prowess of each of the mental health professions is desirable, and it is astonishing how little appears in the literature about prognosis. We need to understand more about the implications of difficulties in home background so that when a problem is detected in a child with a horrifying home situation, pessimistic predictions are not automatically made. We know that some such children "survive" the disadvantages and traumas, despite temporary setbacks or upsets and despite periods of unhappiness. What is lacking is the ability to distinguish consistently between more and less vulnerable children.

As with diagnostic decisions, any prognostic one should be recognized as tentative and revised promptly as more evidence develops. The importance of tentativeness is well illustrated by attempts to detect children as "predelinquent." Such detection in advance involves a prognostic decision. Powers and Witmer (1951) found that while there was substantial success in predicting the delinquent

children, there were also a great many false positives. Such cases should give pause to those who make prognostic decisions or those who know the forecasts, so that they may be aware of the tentativeness of such labels and so they do not react to a child with the signs of a "predelinquent" as though he were *bound* to become delinquent.

It is fairly safe to say that agreement among professionals about the degree of a child's disturbance and whether it warrants the referral that brought it to the attention of the worker is reached in a majority of cases. Agreement on the general nature of a problem is usually readily attained. When it comes to causes of certain kinds of problems, there are tendencies toward disagreement in the field, but the picture is generally one of wide consensus on most issues with a few deviant opinions. Of course some of the latter may turn out to be right—mere consensus hardly validates an idea. But despite cases where opinion differs or where it is hard to grasp the nature of a child's trouble, in most instances it is all too obvious. The problem lies in determining what remedies are feasible rather than in fathoming the predicament in the first place. The disagreements that exist tend to be on theoretical questions—for example, the universality of a given phenomenon such as oedipal rivalry or castration fear, its central importance, or the conditions necessary to produce it in its various forms. Few informed members of the mental health professions doubt that such feelings exist and are important for some children. Whether or not all children resent siblings, view the parent of the same sex as a rival, or have a potential emotional problem on entering school, moving to a new neighborhood, encountering death, or in connection with hospitalization, surgery, or separation from parents, few persons acquainted with the fields of personality development and psychopathology doubt that some children suffer from these phenomena to a pronounced degree and that exacerbation of such children's conflicts ought to be avoided.

Unquestionably, more efficient techniques of diagnosis are needed, but at present—unlike the situation with prognosis, in which present knowledge is seriously deficient—we are potentially capable of giving useful diagnostic formulations in many, if not most, cases. It may be that further improvements in the quality of diagnostic pro-

cedures will come about chiefly in response to advances in knowledge about both prognosis and treatment.

First Aid

The concept of emotional first aid, "first aid for mental health" (Green and Rothenberg, 1953) or "psychological first aid" (Seeley, Sim, and Loosley, 1956) is mentioned explicitly by only a few writers as a step of intervention in mental illness. It ought to be included in any discussion of emotional healing because many acts loosely considered as attempts at treatment or prevention are better viewed as first aid. By being understood as such they are more likely to be practiced properly. The term "prevention" usually means eliminating conditions that would lead to illness, either by saving a person from undergoing undue strain or preparing him in advance with extra strength, confidence, or means of relieving tension and of acting constructively. By first aid, in distinction, we refer to measures taken after upset has occurred or is suspected to have occurred. We mean, further, the kinds of timely action of which nonprofessional adults are capable if they have rudimentary knowledge of mental hygiene or are intuitive enough to make good guesses about the nature of a child's disturbance. The goal is one of "secondary prevention," to keep further sickness from developing by minimizing existing turmoil and circumventing or eradicating unhealthy responses to stress. If the upset is extremely serious, regular treatment may be called for later, but prompt first aid can reduce the amount of treatment needed. In general, first aid is applicable chiefly to less serious events—to the usual "childhood diseases" of personality that many or most children get and that are treated not because they are so dire in themselves, but in order to make the child more comfortable and to avoid "complications." First aid is intended not for neurotic children with chronic ailments but for normal children with an illness, particularly for illnesses just beginning or upsets that may continue if no help is given. Unlike the practice of calling upon a physician in the case of the physical diseases of childhood, parents rarely seek professional help in the case of mental diseases of comparable mildness and brevity. By applying first aid they can escape the need for such help even though some day one

may hope that there will be enough trained people to give expert counsel about the care of lesser as well as the major emotional casualties of growing up.

Upsetting situations gain their potency from the interaction of the events themselves with other factors. One such factor is the developmental level of the child with its characteristic socialization demands, urges, jealousies, and guilts, and the proneness it creates to experience certain kinds of misunderstandings and insecurities.⁴ A second element is the particular quality of the child's family relationships which, without being pathological *per se*, may yet provide conditions in which an occurrence has much more impact on one child than another. Children who lack security in important respects or who are not old enough to grasp some of the cause-and-effect relations which adults take for granted are more prey to a given stress than a stronger, more mature, and more knowledgeable person. There are great differences among individual children in the reactions to crises and predicaments; it is not suggested that *every* child needs help in all stressful situations.

Conditions creating opportunities to do first aid may be divided into two general categories: events that cause injury or that evoke fear of death or injury, and those that cause loss of a valued human relationship or threat of separation from needed or loved people. Disasters and threatened disasters, fires, surgery, being in an accident, or witnessing an accident all may terrify a child. Experiencing the death of a friend, relative, or pet may remind him of his own vulnerability as well as give rise to anxiety about separation or loss. Other conditions in addition to actual bereavement give rise to fear of losing support and love. When parents separate or are divorced the children experience distress and conflict. Often a child incorrectly imagines that the parent who has left the home did so because the child was unlovable—a belief that can shatter fragile self-confidence when sufficient reassurance is not given. Children who have not been told they were adopted are likely to get the news accidentally. The fact that they were not voluntarily told contributes to the false impression that there is doubt about their being kept. Behavior symptomatic of the resulting anxiety may then develop (Green and Rothenberg, 1953). Other types of loss occur in connec-

tion with moving to a new city or neighborhood, a circumstance that leads many children to feel wrenched, bereft, and frightened at the need to win a place in the new setting. Social rejection, such as occurs through failure to win election to a high school sorority, and other types of failure may bring extreme reactions.

Major role changes that are frequently thought of as joyous occasions nevertheless have potentially distressing aspects to some participants. The arrival of a baby may create fears of loss of the mother's interest in an older child or in the husband. For children, the major event of starting school brings challenges as well as pride. Even if departure for college or job causes a youth no anxiety, it may still bring his mother the same distress that retirement does to her husband, when he no longer feels needed and looked up to. There are great differences among individuals in their susceptibility to distress and the nature and duration of consequent neurotic development that may follow. The consensus is that many children are particularly prey to some incidents, but that when an upset has occurred, first aid can often handle the problem adequately and easily, provided a child is reasonably free of illness in other aspects of his life.

First aid involves relieving a child of the stress of the immediate situation and giving him reassurance and explanation. The child needs to feel that he can rely on the adults (or older children) to protect or take care of him. Even when he is ordinarily self-reliant, the upset child, like most troubled adults, feels more dependent underneath, whatever his surface actions. If his own parents or loved ones are not able to be with him, communication with them as frequently as possible helps. Modern hospitals, for example, are liberalizing their arrangements about visits by parents to bedridden offspring and may allow a parent to sleep on a cot by a very sick or frightened child. When a parent is hospitalized, at least one hospital uses closed circuit TV to permit youngsters who cannot enter the patient's ward to see and converse with mother or father from the waiting room.

False reassurances risk disillusionment and loss of trust: the responsible adult should be honest and answer the spirit of the child's questions fully without, however, burdening him with information

beyond the intent of his questions. The upset child is encouraged to express his feelings rather than to suppress them. This keeps communication open so that distorted perceptions of the experience come to light and can be corrected. If he wants to talk on and on about the experience that bothers him or to repeat the story again and again, the caretaker should hear him out. This technique of avoiding suppression and permitting expression, it will be noted, is not the same as those techniques of depth psychotherapy that are designed to relieve a state of repression in which the patient cannot recall certain events or feelings about events even when encouraged to do so. The devices described here can not only be used by an untrained person but are constantly so used, in fact, by adults sensitive to a child's perceptions of situations. Unfortunately, not all adults, especially at times of crises, are able to be sensitive and use good judgment. They become impatient, tell youngsters to be quiet, lay down the law hastily, refuse to discuss matters further, ask small boys to "take it like a man," and ridicule them at a time when their resoluteness and self-assurance is already minimal. On such occasions, when there are other children "in the same boat," putting a frightened child in contact with them often relieves him. Whenever possible, too, children ought to be given a chance to decide and act in relation to the experience, so that they feel more mastery (U.S. Dept. of Health, Educ. & Welfare, 1953). We need to point out that a really skilled "first-aider" not only knows some rules of thumb, some do's and don'ts, and perhaps some particular techniques but also has some understanding of the kinds of misinterpretations to which youngsters are particularly prone when involved emotionally in complex events beyond their usual experience. With such knowledge of common perceptual distortions in children, a first-aider can make shrewd guesses from partial information as to the explanations and specific reassurances a child needs. Because children so often cannot express in words what is troubling them (as, indeed, distraught adults often cannot), the first-aider should develop what Green and Rothenberg (1953) describe as skill in reading a child's "language of behavior."

Even when upset has not been detected, first aid may be applied on the assumption that it may be present. For example, if a girl,

having begun to menstruate for the first time, came to the school nurse, reassuring words could be spoken about the normalcy of this process even if the girl appeared calm. The fact that there is nothing contaminating about menstrual blood could be mentioned too. Such a procedure of first aid or secondary prevention is distinguished from primary prevention because, in the latter, the girl, along with others, would have been taught the facts about menstruation and had a chance to integrate and master the idea well in advance. Primary prevention obviously will not always eliminate, but may reduce, the need for first aid.

There is increasing evidence that many pathogenic chains of events begin at some period of acute crisis related to birth, death, pregnancy, change of role, or interruption of relationships in the smaller social circle of family or friendship groups. At such times we do not have to worry about the level of anxiety among the participants—it is usually quite high! At such times it is usual for the participants to be in contact with caretaking agents of the community whose function it is to help, and who are turned to very naturally and easily by the persons in trouble. If we could assist these community agents to learn some techniques of mental health first-aid, we could prevent many pathological developments; and if the more difficult cases could be immediately referred for special intervention, how much subsequent effort and suffering could be avoided (Lindemann, Vaughan, and McGinnis, 1955, p. 29).

It is apparent that teachers as well as clergymen, lawyers, and officials of police and fire departments could learn to master the principles of first aid. When the parents themselves are not on the scene or are too upset or too ignorant of mental hygiene, the intervention of other caretakers from the community could not only save burdening clinics with many trivial cases that can be handled completely by first aid (Seeley, Sim, and Loosley, 1956) but could also reduce the number of more chronic cases, the reactions of some of whom might have been ameliorated or alleviated through more prompt, first-line, mental health work.

Referral

When a child is referred for diagnosis or treatment it means that further steps seem indicated which cannot be undertaken by the

referring agent. Whether or not first aid has been applied or a diagnostic decision attempted, some potential difficulty has at least been detected, either by an adult or by the child himself. College students, particularly, often refer themselves to a counseling service or to the student health offices, and voluntary seeking of help has been reported among elementary school children (Goldin, 1955). Perhaps such self-referral should be encouraged when we have enough systematic evidence to judge whether it leads to earlier detection of appropriate cases and greater benefit than in less voluntary cases.

A major factor in referral is the nature of the diagnostic and prognostic conclusions that may have been reached explicitly or implicitly. The recommendations that are likely to be made about getting professional help depend upon the cause to which the difficulty is attributed. When a representative sample of people in a large city were asked their opinion of what should be done in the cases of some troubled people described to them, some respondents suggested self-help; others suggested some kind of professional aid. It was then discovered that those people who suggested self-help tended to see the person as being to blame for his ailments because he was not using his will power to pull himself out of it or because "He lets himself worry." Those who suggested outside help more often saw the person as a victim of environmental circumstances or personality difficulties (Survey Research Center, 1956). It is apparent that, when the cause of a problem was seen as a matter of the person's volition, a prognosis was being made that "he'll get over it if he really wants to." It is easy to see why it is unlikely that someone would be referred to a specialist in mental health in the event of such a judgment.

Whoever is responsible for mental health practices in a community or school would do well to initiate the development and publicizing of a policy that would guide key personnel who see families at times of crisis and those who see children a great deal, such as teachers, as to what sources there are to whom a referral may be made. By having reasonable policies and clear statements about them, haphazard conditions that may result in unnecessary delays are avoided.

In inviting referrals, however, it is important not to give the

impression that every case can be helped that is brought to the attention of mental health workers. Certain character disorders and cases of ego deficiency may be far less responsive to treatment than patients with ordinary neurotic illness. The limited resources of local agencies and the difficulties of combatting emotional disorders when they are complicated by other adverse life circumstances may restrict therapeutic efforts to more promising cases. Finally, not everyone referred needs help. Every family is under strain at times and the inevitable detection of false positives can occasionally result in the referral of children free of basic psychopathology.

Should parents always be consulted before a student is referred? The answer often depends upon the age of the student and the need for the parents' cooperation. Ethical questions seldom arise about diagnostic steps but in the case of psychotherapy with younger children as opposed to counseling for high school and college students it is typically regarded as necessary to get parental permission. It is obviously only tactful and proper that referral for diagnosis at an outside agency and any activities that would involve the parents should be cleared with them in advance. Ultimately it is a function of each community to create or approve whatever policies are adopted.

Ordinarily the referring agent, when he is someone with information about the child or, like a teacher, with a continuing relationship to the child, may need to cooperate in the steps of diagnosis and treatment that may ensue. The cooperation may involve providing information and, in some cases, discussing with the child's therapist ways in which the child's environment might be modified. For example, a remedial worker might ask a teacher to be stricter with a boy about his deportment, but to put less pressure on him for a time about spelling. It may be desirable to help a child in his relationships with his classmates while he is in treatment or to handle "public relations" for him if other classmates inquire when he leaves a room or is absent in a special group. When the needs of the individual and the group clash, both the teacher and the clinician have a responsibility to work out the problem together (Goldman, 1956).

In the case of an older student who comes to talk with a teacher, the latter's prompt recognition of the need to refer him for pro-

fessional help does not usually require immediately terminating the conversation by suggesting his seeking the advice of another person or agency. Such "rejection" of the student's desire to talk can impede his accepting the suggestion; one may need to converse awhile before the topic can be broached. At the same time, as we discuss below, the conversation should be structured so as to avoid starting a therapeutic relationship that would interfere with the professional help for which the student is to be referred.

Treatment

For our purposes the term treatment is broader than "psychotherapy." The latter denotes a particular class of techniques or approaches to treatment, whereas the general concept of treatment embraces the range of actions possible in the management of a case.

Our aim here is to cut through the confusion that exists about whether teachers ought to do psychotherapy or to participate in it by defining the kinds of approaches actually possible in treating a troubled or troublesome child. Then we shall discover that the proper way of phrasing the question is not "ought teachers to take part in doing treatment?" but "*in what respects* may they participate?"

It should be noted that in discussing treatment we include methods of "preventive treatment" ("preventive intervention") dealing with currently mild cases of illness. The aim, as with first aid, is to forestall more severe illness in the future.

Treatment becomes an issue when first aid has not solved the difficulty or is inapplicable because the disorder was not of recent origin. The six general methods or avenues of treatment described here are not all mutually exclusive—some may be used in combination with others. Although the welfare of a student himself is the ultimate goal, he may not be the direct recipient of treatment efforts. Instead, advice may be given to parents or teachers in the hope that they may be able and willing to influence the student or alter his situation in therapeutic ways. Occasionally peers are enlisted to help. Finally, an entire group of children may be subjected to an experience intended particularly to influence a given member. Especially good results have been claimed for a multiple approach in which

direct work with small groups of unpopular children was supplemented by training both the teachers and healthy fellow students (Lippitt, 1957).

Reduce a person's feelings of tension and conflict (without necessarily changing their sources). A frightened or worried person may be allowed to lean on those trying to help him; he may be reassured of protection or help. The feeling that he can rely on others to solve his problems, or at least to help him solve them, is deliberately created. He experiences relief and feels cared for. Merely listening to a distraught person's troubles often produces such effects because it represents the giving of love, as well as providing an opportunity for "catharsis" through expression of feelings. People undergoing a period of adjustment or transition have often been brought together in groups where discussion of their tribulations was encouraged. For instance, women beginning training as nurses and suddenly faced with disagreeable, if not frightening, tasks that they had only vaguely anticipated have been enlisted in discussions of their experiences with a group of classmates and a trained group leader. The members feel better when they hear that classmates are also having difficulties. Guilt and shame are reduced, there is a feeling of support from the assemblage and of renewed belonging, and there has been some opportunity for expression of emotion. (In some cases, too, suggestions emerge from the discussions that acquaint the students with techniques others have hit on for doing things better, but this benefit belongs under the fourth type of treatment.)

Expression of feelings and release of tension can be an important safety valve. Conditions are often provided both within the confines of a therapeutic situation and in the culture at large to make release possible by lowering the usual restrictions. The youngster being treated in play therapy is permitted to say anything he wishes, even though he is still faced with some firm limits on his behavior. For example, he is not allowed to hurt the therapist and, depending upon the facilities, may be restrained from writing on the walls or throwing objects out the window, although he is permitted to stamp his feet and shout out his anger. Often the annual party for students under tension in a training program allows them to turn the tables by lampooning the faculty in skits. The sanctioning of certain

kinds of mischief on such special occasions as Hallowe'en or the Mardi Gras may perform a similar function. Cultural sanction of displaced aggression in the forms of athletic rivalry or mass hazing may—if kept within limits—serve as a safety valve.

Another avenue to reducing tension is the giving of satisfaction that compensates for frustration. For example, bestowing upon children from wretched homes special attention and kindness in a residential treatment center serves to ease their misery, although, as Bettelheim (1950) describes, love is not enough to “cure” them. Rest and recuperation in themselves are, of course, fundamental ways to alleviate illness because they increase a person's ability to endure tension. In some cases it may be possible to augment strength too by means of improved diet.

These kinds of treatment are often labeled “supportive therapy.” They aim at “repair” rather than “reconstruction” of the personality. There is no attempt to improve the person or his situation basically, by reorganizing his personality or fundamentally improving his circumstances. To set such goals may be quite unrealistic or even unnecessary. Simply repairing the damage by getting the person back to normal is the treatment of choice when the stress that caused it is unlikely to recur. If a freak storm has blown off the shingles, it is sufficient to replace them without building a stronger roof against an unlikely repetition of the disaster. When a child who escaped bodily harm in an auto accident was nevertheless severely frightened, helping him calm down by allowing him to express his fear as repetitiously as he needs to and giving him a chance to sleep or rest are likely to be all the remedy needed.

Often there is no way to eliminate the stress. In such cases, providing temporary refuge may be better than giving a child no let-up at all from misery and harassment. A child guidance clinic may be able to do little when a youngster is preoccupied by an intolerable situation at home such as acute poverty, illness, or alcoholism. “In cases of this sort a school can often do much for a child in giving him a focus of stability, and the teacher may be the one steady person in an otherwise shaky world” (Marsh, 1952, p. 346). Such sanctuary may give both a chance for recuperation and some satisfactions to make the bad times bearable.

Supportive approaches ought not always to be used to the point of relaxing a person thoroughly. If one believes that the patient needs some kind of psychotherapy, a certain amount of anxiety is necessary to motivate him to cooperate with a therapist and to consider whether his own characteristics and behaviors play a part in his problems. By strengthening the existing "defenses," the ways the person copes with anxiety and with guilt feelings, supportive treatment can be carried to the point where a patient feels no need for self-examination. At the same time, in certain cases when a patient is very upset, he may have to be helped to be calmer before he can begin psychotherapy. Then supportive methods will have to precede "insight therapy" or accompany it. In attempting psychotherapy with most very young patients, as well as with very disturbed adults, it may be necessary to provide great satisfactions in order to get them interested in knowing the therapist and cooperating with him.

Not only may a disturbed child or older student be the direct recipient of reassurance, of opportunity for release of tension, of compensatory satisfaction, or of recuperation, but others such as parents or teachers may be guided in providing such reparative measures. In extreme forms, of course, such techniques require special class placement of the pupil before endeavors can be undertaken at school. But there are milder forms, and it is not unheard of that the agents of support may be peers who, spontaneously or at the request of adults, show understanding or tolerance of his dependency and fears, accept his need to release tension in unusual ways, and tolerate the giving by an adult of special gratifications to a particular child.

Eliminate external sources of tension and conflict. This entails changing a person's situation or setting; a substantial change in the external pressures rather than a respite from undiminished pressures for purposes of rest or recuperation. ("External sources" refers to current environmental conditions causing strain rather than to attitudes that, while originally acquired from the environment, are now part of the subject's personality. When environmental dangers or exhortations have been "internalized" so that the subject's demands upon himself or the fears he experiences are relatively inde-

pendent of external conditions, the problem cannot be solved readily by changing the environment.) Maximum benefit from external change is more likely to occur in very young children in whom fewer external influences have become internalized and the neurotic patterns are less crystallized. Fortunately, however, among older children and adults, too, many reactions to external stress do not continue after removal of the source of tension. For instance, if diagnosis of a tense, eight-year-old boy who draws pictures of nude adults and causes classroom giggling and embarrassment indicated that the child was being made excited and uneasy by seeing or hearing sex activities of his parents, advice might be given in the hope of inducing a change in the sleeping arrangements. In another case of environmental treatment cited by Margolin and Williamson (1957), a boy of 12 who could hardly read was distressed at missing his father who, separated from his wife, had moved to another state. A plan was made for the boy to visit the father. Coaching in reading by a remedial teacher was accompanied by suggestions that he would be able to manage the long bus trip better if he could read signs like other travelers. The child later went to see the father and thereafter gained seven grades in reading skill in one year. Perhaps the visit to the father healed some of the division of loyalties the boy felt and enabled the remedial teaching to take effect.

Much of the mental illness in our society is partly a function of handicapping social conditions that afflict millions of children. The high rate of treated mental illness in the lowest economic stratum has been documented (Hollingshead and Redlich, 1958), and as Faris (1959) points out, there is little doubt of the direction of causation: the state of being underprivileged leads to illness rather than vice versa. Even though it is not known just which aspects of slum upbringing are pathogenic, the eradication of slums or other measures for reducing group stresses and "treating society" rather than individual patients would probably reduce illness. It is clearly not a function of the school as an institution to act directly in relation to such social problems, yet we believe it an essential function of schools to expose children to information about the shortcomings as well as the merits of our society, and of course school personnel as citizens may provide enlightened leadership in civic endeavors. While the

creation of therapeutic changes in the wider society is beyond the scope of this discussion, sometimes the social system existing in a given school or classroom can be influenced to make children more sympathetic to handicapped or troubled pupils. Lippitt (1957) and his colleagues have been studying the attitudes of classmates toward disturbed children and ways of changing those attitudes.

As for influencing parents to ease a child's distress by taking the pressure off one topic while perhaps becoming firmer about other rules or expectations, many clinical workers in child guidance agencies express discouragement when they find that parents advised about an emotionally disturbed child often subvert the recommendations. They only appear to apply them while they do the opposite in disguised ways or, in following advice literally, neglect its spirit. The inability of a neurotic parent to control his behavior will always limit the creation of environmental changes to benefit a child, yet many parents of troubled children, even though they have certain blind spots, can take *some* advice, and relatively healthy parents can take a great deal of advice. Millions of fairly healthy children with one or more areas of disturbance that may result in neurotic problems in later life probably have such relatively healthy and effective parents.

We digress here to offer our personal opinion as to why many children who could benefit from professional help have parents well within the normal range in their own adjustment. In common with most parents in our society, these parents are ignorant of the bodies of knowledge and experience that comprise the academic disciplines of personality development and preventive psychiatry. These fields are so new that most adults lack awareness of suitable books which would be intelligible to informed laymen, and it does not occur to them that they could study anything or read extensively about such topics as a way of arming themselves with insight into children's behavior. Although American adults typically orient themselves toward recreational pursuits, occupational advancement, or the fulfillment of self-imposed social obligations, the expending of effort and time at becoming more skillful parents would rise from its present low priority if parents knew that relevant information exists in palatable form⁵ and realized how much they themselves might benefit by

having fewer and less intense troubles in the parental role. As matters stand, a parent reads one or two "cook books" which provide valuable information about rashes and infant feeding and may make sound recommendations about handling topics related to children's emotional experiences, but which cannot, in the space of one volume, tell nearly enough about the nature of childhood, the intensity of children's fantasies, and the vulnerability of the very young to certain kinds of misunderstandings. The parents remain largely oblivious to such matters. They know some rules of thumb, but lack an underlying grasp to help them interpret situations not covered in the book and to help them judge when not to follow it because, for their particular child, the prescribed method is not working.

We do not suggest, of course, that knowledge of child development will enable parents to rear paragons—they will still make mistakes, and sufficient knowledge does not exist. All they can hope to accomplish is a reduction in the incidence or severity of illness; yet is this prospective gain not worth the effort involved? We also do not suggest that, if parents are suffering from marked disturbances themselves, their intellectual understanding will safeguard a child from their neurotic influences. Our point is that even some fairly healthy parents, when their ignorance of childhood is combined with their own minor emotional problems, will have children with clear-cut disorders. The disorders, however, may be amenable to partial correction at least, if these baffled parents, able to listen to advice, are given suggestions, provided that they become persuaded to seek such advice by coming to realize that blameworthiness consists not especially in having children with problems—a fate one's neighbors may have escaped more out of good fortune than wisdom—but in failing to do something about the affliction. Advising parents to modify their behavior at home in order to ease a child's distress touches on techniques about which there is at present only limited scientific information and psychiatric experience, but there is reason to believe that action is justified in many cases.

Both parents and teachers may be faced with the question of whether the attainments they expect from a child are reasonable. Obviously demoralization is produced by demanding too little—a common error. Yet expecting too much is also common. A high

school student whose scholarly attainments are only moderate may suffer extreme tension if a parent drives the youth to seek admission to a college with a highly competitive and highly selected student body where the student, even if admitted, will have difficulty performing well in comparison with his classmates. Aptitude tests usually give a fair indication of the child's potential when combined with other evidence, and may help a family have more reasonable expectations if the findings are explained to them.

If the question arises of "making allowances" for an emotionally disturbed child in school, a teacher may be faced with a complicated problem which can probably never be solved perfectly. Usually one would attempt to remove only undue, excessive pressures, more likely to have been applied at home than at school where there is more basis for judging realistically the child's capacities. In other words, one would not ordinarily excuse a child from normal challenges or relieve him of his everyday obligations and responsibilities. However, special allowances have to be made during a period of treatment and convalescence when a child is sufficiently distressed. Thus, if the child is known to be upset owing to death or critical illness in a parent and is unable to work well, the teacher may tolerate temporarily poor performance that would otherwise be unacceptable, just as a teacher would excuse a child from gym if he had a sprained ankle. But the teacher has a responsibility to the institution and to its standards. One can be sympathetic with an emotionally immature college student going through a difficult period of adjustment, but one cannot properly award the school's diploma signifying certain accomplishments until those have been fulfilled. It is understandable that some educators become confused on this issue, particularly if they are fairly well informed about mental health and therefore inclined to be understanding about a student's problems. They do not recognize where to draw the line between sympathy for the student and upholding the school's requirements. Some, as a result, behave with unjustifiable leniency and others, bending over backward for fear of being tender, try to avoid admitting any candidate with a history of emotional distress, even though there may be no evidence calling into question present adjustment. Fortunately, sympathy is not incompatible with firmness

about the rules of society or a particular organization and, in higher education at least, the problem can usually be solved quite clearly: students who cannot perform may sometimes be able to take a lighter course load for a time or may be able to leave school with the option of returning once there is reason to believe they can do adequately. There ought to be no question that the student must ultimately meet the same requirements as others if he wishes a degree.

The conflict of values is more difficult to resolve in the lower grades. When a child's work has been held up because of physical or emotional illness, ought he be passed on to the next class with his friends or held back because of incomplete assignments or inadequate performance on measures of achievement? In some cases the argument is persuasive that a given child needs to stay with his group for emotional reasons, yet the progress of the entire class may be impeded by the presence of children who lag far behind and the latter may suffer because of their obvious inadequacy. Two educational developments may help in this dilemma. One is the practice of having "homogeneous grouping" only within subject matter. That is, a given student may be assigned to a "fast" group in reading, a more moderately paced group in history, and a slow group in mathematics. In this system some children with special talents or interests may be in an advanced group in one subject even if they do poorly in others; they have areas of success to compensate for their limitations and are not held back in the things they are good at since the level of challenge is appropriate in each subject. As a result, the child who varies greatly in prowess from topic to topic may be placed in some classes composed largely of older children and some chiefly of younger children. A child who gets behind his age-mates in most subjects can remain with them for some of the school activities, even though in individual classes he may be with younger children. There can always be a home room group with whom his social interests may be most congruent. The present trend toward consolidation of small school districts leads to schools large enough to run more than one section of a given subject in order to provide for covering material at different speeds (Conant, 1959).

Although such practices are quite inconsistent with the organization of typical elementary schools, where the child stays in the same

room all day with the same classmates and receives most of his instruction from the same teacher, breaks with tradition are being made with apparently good results. For instance, in Lexington, Massachusetts, the children at one elementary school have different teachers for each subject and, rather than missing the closer contact with one adult, appear to benefit from the variety. The advantages are especially evident, of course, when a pupil whose relationship with a given teacher becomes uneasy has several additional chances to experience comfortable ties.

Another procedure that permits the reducing of demands at least for a time when a child is disturbed is that of having "nongraded" elementary schools (Goodlad and Anderson, 1959). In such schools children are not labeled as being in a particular grade, but advance in their academic work in accordance with their individual accomplishments rather than their ages. In a nongraded primary school, for example, some children may finish in two years the work ordinarily covered in grades one, two, and three. Others may take four years, but during that period the child is not faced with "failure" signalized by staying behind all his classmates. Certain pedagogic advantages are plain not only from the benefits of taking into account individual differences in rates of maturation and in learning ability but also from the benefits to older children of grasping material more fully as a result of trying at times to help younger ones.

There are also advantages to younger children in that they are not being measured solely against their own age mates. Recognizing the greater accomplishments of older children puts learning in perspective and prevents excessive feelings of failure if they are not learning a given topic as fast as the quickest ones (MacKinnon, 1957).⁶ The goal becomes an individual one: to learn as ably as one can, rather than to compete with everyone else. Proponents of nongraded elementary schools are the first to admit, however, that potential advantages to all pupils from being free to compete only with themselves, as well as advantages to the fast learner and the slow learner, do not automatically accrue from dropping grade labels. Unless curricula can be genuinely individualized, appropriate standards maintained, and progress reported upon accurately, the

nongraded school will become only a gimmick and may go the way of all fads and fashions.

To summarize, mental health workers in the school can arrange through parents, teachers, and others to limit the demands on a child for a time. If the child's emotional handicaps are sufficiently severe they can reduce the pressures on a long-term basis without in any way encouraging the lowering of academic standards in the sense of granting awards to children for accomplishments not attained. Newer educational practices such as nongraded elementary schools and homogeneous grouping by subject matter seem potentially capable of solving many problems for the majority of children.

Restrict the ways a person expresses his tension and inner conflict (without necessarily reducing their degree). A different kind of modification of a patient's environment is made when, instead of trying to ease the person's conflicts themselves, one aims at protecting others by forcing him to adopt alternate means of satisfying his needs, relieving his anxieties, or alleviating his guilt feelings. One hopes that the new means will be more acceptable socially if not necessarily more healthful for the individual. In such cases one may deliberately maintain discipline or set new limits upon the person's behavior as a way of compelling change. Described in another section below are ways of teaching a person healthier means of dealing with conflict that he may *voluntarily* adopt, in distinction to what is discussed here—changes or limits imposed on the person in order to force a response. Although such influence may aim primarily to protect others, it may protect the person himself too by keeping him from getting into further difficulty. In the hope of creating a less handicapping symptom one may be justified at times in treating symptoms rather than causes. The shift to a less handicapping symptom is particularly likely when the discipline is accompanied by suggestions or opportunities in this direction. If the patient is fortunate he may even find ways to express himself that are socially desirable rather than merely unobjectionable and that may or may not have the status of symptoms from the viewpoint of their efficiency in relieving his inner conflict. While a shift of symptoms

might occur without external pressure, ordinarily one cannot count on the timely occurrence of the necessary fortuitous events.

When a child is restrained from unacceptable behavior, his anxiety may be lowered because his fears of the consequences of his impulsive acts are lessened. At the same time, admittedly, tension from the unsatisfied needs that caused his symptoms will be increased until he finds some alternative means of expression. (Some children will not be able to find alternatives or to control themselves, despite emphatic setting of rules, and more intensive treatment is essential: children who repeatedly masturbate in public after they understand that this is improper public behavior, or children who attack others in ways that could produce real injury and who cannot be enjoined to stop.)

An extreme but important example of the use of environmental restraints is in the case of a student who gives signs that he may be thinking of taking his own life. More than once the description of suicide or of his own impending death in a student's English theme has foretold the event.

With persons who are judged healthy enough to be potential candidates for regular psychotherapy, the restraining and disciplining may be done deliberately with the intention of *increasing the person's motivation to do something about his problem, whether or not he now sees the problem as partly one of his own conflicting feelings or motives*. The chief respect in which this goal differs from endeavors aiming solely to protect society is that one may decide to intervene in behaviors that are not especially intolerable, and one might not attempt to accompany the restraint or discipline with other approaches, as one might if one's main goal was to reduce the person's anxiety as well as alter his overt behavior. That is, one wants him to be anxious when one is hoping to motivate him to seek professional help for his problems. The reason persons become tense and anxious when symptomatic behavior is blocked is that the behavior itself relieved anxiety, according to present-day understanding of psychopathology. One would not, of course, restrict expressions of tension if the person seemed on the verge of going to pieces, since an increase in tension might create worse behavior than the present form.

Another kind of blocking of a symptom is attempted when, instead of directly restraining someone from unacceptable behavior, one holds up reality to him by calling his attention to the consequences of continuing his present actions and to alternative ways of seeking his goals. One might tell a camper who is careless about pointing a rifle on the camp range that he will be deprived of the privilege of shooting unless he conforms. Another camper who splashes in the water and ignores the Red Cross instructor may be reminded that unless he passes the first aid and life saving course he will not be allowed to use the boats at the lake front. Similarly, one may point out to a student that if he does not improve in his school work some goals he cherishes will be unattainable. At the same time one might offer help for his difficulty by special coaching. Such statements may be made in complete sympathy with the emotionally ill person—sympathy need not be accompanied by excessive leniency.

Another method is to block the secondary gains from illness. In addition to the primary gain of relieving anxiety or assuaging guilt feelings, ailments commonly have some additional advantages, such as the attention they may bring. Consider as an example a high school boy who is handling his anxiety by obsessive neatness at the price of staying up until 2 A.M. recopying assignments which are already neater than most. If a teacher who has been adding a notch to each of the boy's grades for neatness can be induced to announce to the class an end to pluses for neatness (even if demerits are maintained for extreme illegibility), the reward of the symptom is reduced and the boy's capacity to recognize his obsessive behavior as undesirable may grow. He then may become interested in seeking help for his emotional problems.

Of course, these methods will not work if a child whose symptoms are blocked can "leave the field." If he can quit school when unpleasant realities are forced on his attention, the intervention may have had no useful effect. Similarly, if a college girl decides to put a stop to the inconsiderate behavior of a roommate who insists on playing rock-and-roll records late at night, the regretful but firm statement of her intention to arrange for a different room unless the music stops will be of no avail unless her friend is tied enough

by affection or other needs to be led to comply. Very commonly, various needs keep a person in the field and make some blocking of symptoms possible. The secretary who depends upon her job may finally be willing to follow the family physician's recommendation that she seek psychiatric help for headaches when she is threatened with the loss of her position because of her frequent absences.

The application of ordinary limits may often be undertaken to good effect without professional advice, simply by following the dictates of custom about the protection of others. Thus, restrictions on behavior as a way of curbing certain forms of expression may be applied by parent or teacher. In some cases age-mates could be enlisted to cooperate in enforcing the curbs. In the case of attempts to reduce secondary gains, however, this effort would be made usually only after the child's problem had been appraised diagnostically. Attempts to force a person out of a particular response ought to be done only with the utmost caution, if at all, when the symptomatic behaviors are involuntary. Take as an example bed wetting in a child in whom the behavior has recurred after he has been dry at night. It is generally believed unwise to treat bed wetting by means of electric shock set off by urination or by ice water baths that occur when urine melts the stopper of a "hot" water bottle. Wetting is almost always involuntary; only a seriously disturbed child would be likely to adopt deliberately so regressive and humiliating a practice. The assumption is that a symptom is the most "economical" way the child knows, consciously or unconsciously, to solve his emotional conflict. Therefore only the provision of some "desirable" alternative is likely to bring about a worthwhile shift, and in the case of acts such as bed wetting the child is unlikely to be able to make the shift because the behavior is not under conscious control. In contrast, the placing of a phonograph needle upon a rock-and-roll record is a consciously-conducted act which a sleepless college roommate can safely try to thwart.

Sometimes, of course, the imposing of limits in order to force a change of behavior cannot be managed in the person's present life situation at home or in his regular classroom. Then placement in a special class or special school may be required.

Help person acquire the skills or the understanding of a problem

that will enable him to eliminate sources of his tension and conflict. This approach includes various ways of dealing with the problem cognitively. The person may be taught (or shown how to learn) things at which he was ineffective, or he may be helped to get the facts that will aid him in reaching a decision he had been unable to make. If a child is bothered or his opportunity limited by his being poor in swimming, he is coached in that sport; many a child with mild fears of water learns to swim when coached skillfully. When it is not feasible to help the person in the area of his deficiency he may be helped to develop in some other area as a compensation. Indeed, a person with no particular deficiency benefits by help in capitalizing upon his talents, but this falls into the area of promoting positive mental health rather than treatment (see Chapter II). We are talking here about helping a child *bear* an illness by having other areas of strength or helping him *recover* from emotional disturbance through resolving his own dilemma or through relieving a chronic neurotic ailment. He may do this by discovering avenues of endeavor and achievement in which his blocked needs and preoccupations may find indirect or disguised expression in socially acceptable or desirable ways.

Role playing has been used as a method of helping pupils with inadequate social skills because of excessive aggressiveness or too much timidity. Each child plays the imaginary part of a person trying to accomplish something in dealing with another. Over-aggressive children learn how it feels to be the victim; frightened ones gain experience in handling interpersonal tasks and disagreements with adequate initiative (Lippitt, 1957).

When a person is faced with a major and difficult decision that keeps worrying him and that may have begun creating signs of illness, he may be helped to think over the real nature of the alternatives and to reason through their implications. Factual information about the environment and about himself in relation to the environment can be valuable. For instance, a high school junior or senior may be uncertain about his plans and may have no clear idea that he is intellectually gifted enough to aspire to a professional or scientific career. The comparison of his intelligence test scores with groups upon which tests have been standardized may alter his perception of

himself. Information about the requirements, the programs, and the social and financial structures of various colleges may be crucial, too.

If the person does not spontaneously explore the possible means to his goals he can be guided in his thinking by questions such as: What would happen if you did that? What would be the effects of such a choice? Are there any other ways that might accomplish this? Asking such questions is likely to result not only in a fuller examination of the topic but in discovery by the person himself of paths to solution. Because he participated actively, he can have some satisfaction in having discovered them and less justification for disclaiming responsibility by blaming the counselor if the solution he chooses proves inadequate. Thus, a direct suggestion that a lonely person try meeting people by attending a local church or joining a young people's group may be less effective than saying to him, "I wonder where a stranger could go to get acquainted with people in a town like this."

But helping a person by providing him with information upon which to base a decision will not work if there is a conflict of goals that underlies the difficulty in deciding about means. Often it is such unrecognized confusion about goals that hampers a decision among alternatives. For instance, a girl admitted to two different graduate schools may be unable to decide between them because she is actually uncertain whether she wants to go to graduate school or marry. She may be totally unaware of the conflict and have no conscious interest at the time in marrying, but the conflict manifests itself in her indecision. The hidden components of the struggle can be brought to her awareness with the aid of additional techniques. In such a case, before she can gain perspective on her goals and discover which one more fully represents her predominant needs and ideals—or what compromises may be possible that will solve both—the nature of the conflict must be helped into the open. Then rational processes, not operative when the true nature of the problem was not in the person's awareness, can take over. As a second example, consider a young man who has vacillated during his college training between his interest in music and his interest in business and economic topics. Obvious compromises have not

occurred to him that would permit his enjoying both areas of interest, either by going into some business involving music or making music an extensive part of his life avocationally. The reasons for his unclarity may involve difficulty in acknowledging the fact that he has negative as well as positive feelings both about music, which has feminine connotations to him, and about business, which he regards as crass and ignoble. He cannot think clearly about the alternatives until all the "facts"—which include his feelings and attitudes—are in the open and available for scrutiny.

In such a case, then, the clarification of goals can be accomplished only as further steps of treatment are undertaken. The need for the additional steps becomes apparent during counseling interviews when rational discussion of the alternatives does not help. In some cases it may be necessary not only to unearth negative attitudes toward contemplated courses of action but to go further in order to discover some of their bases. More rational feelings can then predominate. For instance, it may be that the young man's mother criticized his father's commercial values and the father derided his wife's esthetic activities. Instead of simply having two positive interests, one derived from each parent, the son has two interests which he sees as incompatible because he experiences conflict about both, and he swings unhappily between them, feeling dissatisfied with either choice but not knowing why.

It will be apparent why "advice" so often does not work. The problem may be more complicated emotionally in terms of the person's real wishes, fears, hopes, and aspirations than the advisor has a chance to find out in ordinary discussion. Where the topic is dealt with as in ordinary social interchange, the factors mentioned tend to be limited to obviously rational considerations. If a choice facing a high school senior is between going to Harvard and Yale, the fact that his father attended Yale may have many meanings to the student that affect the decision, but he may not have any clear ideas of these meanings. He may not think to mention to an advisor the fact that his father is relevant to the decision since he does not realize it himself and since bringing in "emotional" considerations or "feelings" as elements in the choice has not been generally accepted in our society.

Since advice is likely to ignore important elements of the problem, it is better counseling practice to give a client the opportunity to reason through the problem himself rather than to start out offering advice. Yet, if a person has not made progress in talking about his problem and engaging in logical reasoning about it and if the counselor is untrained in more psychotherapeutic techniques that would permit going further, it is far preferable to give advice as a last resort instead of trying to deal with the hidden conflicts. When advice does not work, if the person is unable to follow it or finds it unacceptable, there is no point in repeating it endlessly or becoming exasperated. Its not working is a cue that there is more to the problem and that some kind of therapy may be necessary. In the same way, if one has led the person to reason out his problem and he reaches a solution, but instead of taking effective action returns dissatisfied to the advisor, there is reason to think that the conflict is deeper or more far reaching.

One kind of advice, of course, is the suggestion that the person seek professional help. Our allegation that direct advice is most unlikely to work does not apply to attempts to refer a student who has had enough interest in being helped to have sought counsel. Quite often the suggestion will be followed provided that suitable services are available (see Chapter IV).

The business of helping a person reason through a problem often amounts to helping him find "rationalizations" that justify his doing what he wanted to do all along. But if the newly-found ability to justify, to himself or others, a key decision such as a career or curricular choice enables a person comfortably to renounce alternatives and take constructive action, he has gained from the encounter.

Just as help with a difficult decision will not be achieved through reasoning and information alone if there are unconscious factors or emotional issues not taken into account, so remedial work, "re-education," and the teaching of skills will not be successful if there are strong neurotic motives against the accomplishment. Thus, a child with learning difficulties may be unable to benefit from special instruction because of the secondary gains his symptom provides or because the initial motive blocking learning is still there. In such cases psychotherapy to deal with the neurotic problem must precede

or accompany the remedial measures or teaching. Many children, however, are able to respond to remedial teaching because the problem initially was an inadequacy of instruction, rather than a neurotic one, or because the symptom has become detached from its original cause (Bower, 1958), or again, because the original cause is solved or expressed now in some different symptoms. As with advice, reasoning, and information giving, there is no point in pursuing remedial measures if they are clearly not working. They should be attempted at a pace sufficiently moderate so that failure will be avoided unless there are counter motives in the student. When a suitable pace has been followed and there has been no progress after a reasonable time, additional steps of the sort to be described later ought to be used.

Certain facts about the world may have been learned wrongly or misinterpreted, causing conflict resulting in symptoms, the treatment of which sometimes requires essentially nothing more than correct information. An example is the case of a six-year-old boy whose obsessive sexual curiosity caused consternation when he tried to look under little girls' dresses and to poke his finger into their genitals. He turned out to have a secret fear that his mother would be torn apart in childbirth because "the hole is too small" (Buxbaum, 1949, p. 108). When the nature of his misunderstanding was skillfully brought to light and correct information supplied, including the fact that the opening would stretch, the unacceptable behavior ceased. As the author comments, "obviously his naughty behavior was not 'naughty' but was research." While questions are often raised about the propriety of schools' supplying "sex education" blanketly to all pupils (we take up this issue under Prevention), there seems to be no question that in certain individual cases, the curative factor may lie in correcting misinformation or misinterpretations or in supplying missing information. We discuss presently which adults may appropriately undertake such a task.

Help person to see himself as others do so that he realizes his problem and becomes able to recognize occasions when his behavior is inappropriate. Instead of pointing out to someone that his behavior is getting him into trouble or is to his own disadvantage, one may use techniques that help him discover this for himself. When it

dawns on him, he is more likely to be convinced than if it were pointed out directly. If a person can learn that a certain behavior is irrational or is obnoxious to people with whom he wishes to get along, he can try to control that behavior or can avoid situations which elicit it. His new understanding represents the first level of "insight": he recognizes that he is faced with a problem, even though he does not understand it fully. His behavior may or may not be undesirable now in his own eyes, but he at least recognizes the fact of others' objections.

A wish for increased understanding of himself is the effect of a second kind of partial insight in which the person recognizes that there is more to a problem than he had realized, that the difficulty is partly "in him," that his own feelings and emotional attachments, prejudices, or fears are relevant to an issue the complexity of which had hitherto escaped him. An example is the case cited earlier of the young man unable to choose between two colleges who finds himself talking about his father in connection with the decision. If a person is sufficiently distressed by his symptoms or sympathetic with others' feelings and desirous of pleasing them, and if he also senses that his own personality is a factor, he may now wish help in understanding his motives and in finding more constructive ways of gratifying them so that he does not have to go through life inhibiting himself in order to get along satisfactorily.

The conditions under which these partial insights are elicited usually include a "permissive" atmosphere in which the "client" or counselee feels freer to state his feelings than he would in an ordinary social context. Often the counselor says little. As a result, the person can hear himself talk and, failing to get the usual kinds of reciprocity or conversational response, can fill in the gaps and react to his own statements as though he were another person.

The effect of such techniques is to hold up a mirror to the client. In addition to letting the client react to his own statements, many counselors hold up a mirror by their verbalizations. They "reflect" the client's statements, partially rephrasing them, often emphasizing the feelings that have been expressed explicitly or implicitly. (The practice of reflecting statements in this way is not the same as "interpreting" material of which the person is unaware.) Deliberate

lack of reciprocity in conversation is sometimes extended to the making of statements that challenge the client in ways that a person in an ordinary social relationship would seldom attempt. The effect of such techniques is to have the person see himself more clearly, to become more aware of feelings on the periphery of his consciousness, to note the way he himself is reacting in the situation, and, seeing it somewhat objectively, notice any odd things about it or discrepancies from his previous impressions of himself.

In general, the counselor avoids suggesting connections between one set of feelings, e.g., about father, and another set, e.g., about educational or career plans. He tends to leave it to the client to notice such connections, reflecting them only when they are relatively explicit, because clients who have not fully achieved the second level of insight and who are thus only on the verge of becoming able to accept the nature of their real feelings are likely to be scared away by premature interpretations.

Often, therefore, the counselor has to accept the client's definition of his problem as an objective one in which he needs information or advice. In many cases the objective information is all the client can tolerate, so that one cannot deal with his *feelings* about material or discuss anxiety provoking desires and ideals that he cannot acknowledge in himself. When skillfully used, however, such information as test scores may challenge him to think about and discuss himself and his plans in new lights, particularly when the outcome of occupational inventories or aptitude tests is different from what the person expected. Such discrepancies are especially relevant for the person not yet in any particular trouble or very anxious, e.g., a student who is not yet behind schedule in choosing a college major or a course of study in high school. Until faced with an unexpected pattern of test scores, in an atmosphere where he can react to them thoughtfully, the student may have little motivation to question whether he has a particular problem. Preventive counseling of this sort is particularly applicable to the youth whose educational and vocational decisions, if not also more personal ones about his religious practices and marriage plans, have been delayed longer than necessary, not because of neurotic illness, but by a complexity of his personal identity and life aims which has kept him from acquiring

perspective and hinders him from taking action toward his goals. As a result partly of counseling, obstacles to his growth may be removed; the counseling properly may be conceived of as serving more as a catalyst in normal maturing than as a curative agent (Bordin, 1955).

One does not have to be a specialist in mental health to perform some of these functions with friends. When one listens without responding actively one gives the person a chance to notice his own statements. Almost everyone has had the experience of finding a solution to a problem when trying to explain it to someone else. However, parents should not be optimistic about solving any severe problems in their youngsters or adolescents just by listening. The often intensely personal and emotional nature of the inner conflicts causing mental illness makes it unlikely that a parent can either respond neutrally or be seen by his offspring as sufficiently objective. Some of the same limitations apply to most classroom teachers who adopt a counseling role in relation to their own students. In particular, cautions are in order about "just listening." For instance, it is time that a conversation be tactfully terminated if the person grows agitated and does not become less so as he continues. Another condition for terminating a discussion is evidence of a misperception of the situation on the part of the person seeking counsel, e.g., his beginning to reveal extremely personal or bizarre deeds or imaginings that are out of place in terms of the setting, as he could reasonably be expected to perceive it, or of the extent of his acquaintance with the advisor.

Increase a person's self-understanding by helping him recognize more accurately his own feelings and motives. By increased self-understanding we mean the recognition of ideals that a person may have been disowning, as well as hidden longings and unacknowledged angers or resentments.⁷ At times such augmented self-knowledge may be accompanied also by some understanding of the ways the person has been deceiving himself to relieve anxiety while expressing his disguised needs in symptoms. We now discuss the kind of treatment usually called psychotherapy, the goal of which is to achieve the third level of insight. In achieving this level, the person not only sees that he has a problem and recognizes that part

of the difficulty lies in his own responses or strivings but gets at the causes enough to gain more accurate perceptions of himself and others. Some of the other five treatment approaches described are sometimes called psychotherapy; for instance, the first may be referred to as "supportive" psychotherapy. In such a usage, the present category may be called "insight therapy." The goal is to *free* the client or patient of his tendencies to behave inappropriately, rather than just helping him to *control* his reactions. These tendencies no longer arise to plague him or his misperceptions are quickly noticed by him so that he "recovers" quickly.

Not all insight therapy sets maximal goals in terms of personality change produced—there are limited forms as well. In general, there are two levels of therapeutic endeavor. Limited methods such as "case-work" and "psychological counseling" try to help the patient recognize the connection among two or more contemporary events. For example, if a person has become angry at person X that day at noon, as he describes his resentment in his treatment hour the thoughts that spontaneously come to mind may lead him to connect his anger with events of the morning with person Y to which he did not respond with anger. He then becomes aware that it was the situation with person Y that caused his anger and that the intensity of his anger at noon or even its very existence was a function, at least in part, of the morning experience. If the person himself does not recognize the connection, the therapist may be able to discern it from the sequence of topics that comes to the patient's mind or from slips of the tongue or other disguised giveaways of what the person has on his mind. One patient, for instance, reported a dream about a white dog. He described the dream as about a "dog with a white coat." Since the doctors wore white coats in that clinic, it was not hard to guess about whom the dream may have been, although a therapist would wait for confirmatory evidence before assuming that he knew for sure.

If the discovered connection is close enough to recognition to be capable of assimilation and concerns a subject that it seems wise to pursue in terms of the strategy of the treatment, the therapist may then point out the apparent connection. This is called an "interpretation."

After a series of such interpretations (or spontaneous insights of the client promoted by the conditions fostered in treatment), over a period of weeks or months the therapist may have helped the client considerably in understanding and in curbing his irrational reactions. His functioning at home, on the job, or in school is thus improved and the more serious consequences that may have ensued are prevented. If there is a neurosis underlying the client's particular dilemma, the goal of such limited psychotherapy is to maximize functioning within the limits of the neurosis. The neurosis itself is not removed; it remains and the person is aided in his functioning despite its continuing existence (Fraiberg, 1957).

The second, more extensive level of treatment—"psychotherapy" when the term is used in contrast to casework or counseling—involves not only contemporary connections but also the exploration of historical connections. Thus a person may discover that his inability to be aware of his anger at Y and perhaps the very fact that his anger was aroused by Y, may be related, whether consciously or not, to his feelings about a parent or sibling or with other events in childhood that still bother him.

After an even longer period of interpretation of both contemporary and genetic connections, often over a period of years, the neurosis pattern itself may have been eradicated. Systematic historical delving⁸ which aims at major reconstruction of the patient's personality structure is practiced particularly by Freudian and some other psychoanalysts.⁹

While the theoretically clear distinctions in goals and method between casework and psychotherapy are difficult to maintain in practice, in work with children especially, it is essential to be clear about them. Is the goal to help a child live more comfortably within the confines of his symptoms? Then casework is appropriate. Is it to remove the symptoms by treating the neurosis? Then psychotherapy is the method of choice. The appropriate treatment for any child depends, even more heavily than it does for older clients, on a correct diagnostic appraisal. If we are told, for example, that Johnny refuses to go to school, we must learn why. Is he afraid of a gang of bullies, he meets en route? Does he have a new baby sister for whom he feels intense rivalry so that he wants to stay home close

to mother? Does he have a phobic reaction to school? According to Fraiberg (1957), only psychotherapy can help Johnny if a genuinely neurotic pattern of the last sort is evolving.¹⁰

The kinds of gains sought by both limited and extensive psychotherapy include the following: (1) the person acquires the foresight to avoid, much of the time, situations that will arouse severe conflict; (2) when unable to control or escape environmental stimuli that formerly aroused irrationally-strong responses, the person reacts less intensely; (3) having fewer conflicts to cope with, he has more energy available to control himself at times when he is under tension from the conflicts he still experiences. Since he knows his feelings and goals better and his patterns of self-deception are reduced, he can seek better compromises that bring satisfaction without harming others and causing self-reproach or self-punishment. He makes wiser decisions about courses of action that will influence the environment in beneficial ways and can carry these decisions into action because of the lessening of irrational fears and inhibitions that influenced his behavior in the past, even though he may not have been aware of their influence.

The question may be asked whether a layman might not produce a therapeutic effect in talking with a distressed person by expressing his own insight into the person's behavior or in some other way taking the therapeutic role. Indeed amateurs who intentionally or unintentionally attempt psychotherapy may happen to produce occasional beneficial results, but their doing the right thing is rare, since they do not know what they are doing. In most cases, those who testify to the efficacy of an amateur, or of a quack healer, are probably people whose symptom was relieved but whose illness was not. That is, a shift of symptom occurred, but the person failed to realize that obsessive ideas or the new physical ailment he developed soon after he suddenly became "cured" are a different form of the same problem. Amateurs are unschooled in the kinds and amount of evidence that must be present as a basis for certain actions. They cannot judge which cases are unsuitable for a given treatment. They are likely to misjudge the timing and make premature interpretations of a patient's behavior. They are given to interpreting too many things at once

so that the "dosage" is excessive or to exploring the wrong areas of the problem initially. They fail to understand tactical issues about the interpretation of defenses as opposed to impulses. Psychotherapy as currently practiced is a complex art based on an incomplete scientific understanding of the conditions under which personality change occurs. It involves skills which take years of experience to master. Therapists still in training work under intensive supervision by senior people and it is not unusual for fully trained therapists often to get the opinions of colleagues about a case. Hence a notion that having read some books about therapy justifies amateur dabbling is extremely wrong.

In addition, the patient has no protection against the amateur therapist's misjudgments stemming from unrecognized irrational feelings he may develop toward a particular patient ("countertransference"). In advising mothers about children, an untrained counselor may unwittingly be influenced by his attitudes toward his own mother and fail to distinguish fully the unique characteristics of the woman before him. Professional training channels try to weed out unsuitable candidates and attempt to sensitize each trainee to his own tendencies to misread patients so that he can recognize and correct for them.

Even when amateur treatment ends up doing no active harm, it wastes time that might have been better spent seeing a qualified professional. There is always the possibility that the amateur may do serious harm, making the person not only sicker but also much more difficult for a qualified therapist to treat later.

Perhaps we can illustrate some issues here by describing how to avoid a therapeutic relationship, either because one is untrained or because the person seeking help is a friend or has some other role incompatible with that of patient. Thus, for example, a teacher to whom a student in high school comes for advice may avoid some of the following practices. He would avoid interpreting to the student meanings or connections he might believe he discerned in the student's behavior that the student himself does not recognize. For instance, he would not say, "Your hesitancy in phoning this girl suggests that you are afraid of dating her," or "I notice from what you say that you get a headache every time you have a date with her," or "When something happens that makes you ill at ease you

begin to act silly." Making such statements is like telling an overweight man whose second piece of pie keeps falling off his fork, "Apparently you think you shouldn't be eating the pie." Particularly one would avoid historical interpretations, such as, "The reason you can't stand the child's sulking is that sulking is one thing your father would never tolerate." Both contemporary and historical interpretations go beyond simply holding up a mirror by describing behavior ("You keep putting off phoning her," or "You're having trouble with that piece of pie,") because they openly suggest motives or patterns of self-deception and thus confront the person in a way that holding up a mirror need not, since the image in the mirror conveys no really new information and its implications can be ignored.

In general, the teacher who wishes to avoid getting into a therapist's role will not be a "blank screen" on whom the student can "project" all kinds of imaginings. That is, he will not be mysterious to the student and sit out of his clear view in a dim room; rather he will be matter of fact and natural, keeping the conversation at a relatively social and rational level. The therapist often keeps his own personality vague in order that the particular patterns of imagining about other persons' feelings and reactions that are part of the neurosis of the patient may come to the fore in the patient's thoughts and be studied. If allowed to develop by someone who cannot handle the situation, intense irrational positive or negative feelings may be evoked. Such "transference" reactions can cause havoc. The person without training in psychotherapy, then, is relatively safe if he is a real person, revealing his own interests and tastes so that he is less easily confused unconsciously by the advisee with the latter's images of father or mother, and if he sticks to the reality level of reasoning and information giving and perhaps with some self-restraint and tact holds up a mirror. If a student does not get the point of descriptions of his behavior the teacher offers and does not make progress with his problem when helped to reason about it, the wise teacher will do nothing but give his own opinion or advice (frankly labeled as such, with mention under some conditions of his lack of professional qualifications to aid with a complex decision or problem in the way that a trained counselor can) and continue to be himself

in the situation rather than shift gears into a "therapeutic" role. If it becomes apparent that the student is not going to be able to solve his problem with the help of such advice, he must then be referred for a professional evaluation, provided he is uncomfortable enough about himself or his situation to be interested in further help.

The question whether people are treated individually or in groups does not, in itself, limit which of the six approaches to treatment or which combination of approaches is used.¹¹ It should not be assumed that one approach or one particular technique is "better" than another or that one combination is "better" than another. The method of treatment that is best is that which is best for the patient (Knight, 1954). Which one is used then depends on what is possible as far as a student's situation, motivation, and type of problem go and in terms of the facilities and staff available. These, of course, will vary in accordance with the policies a community establishes for its mental health endeavors in schools or elsewhere.

Rehabilitation

If, during treatment, a person has been removed from his usual associates or relieved of his ordinary tasks, problems of returning to duty may arise. In cases where stigma is associated with illness or treatment, the stresses of returning include problems of public relations. A child, for instance, who is re-entering his regular classroom after some kind of special schooling or one whose social relationships have been disrupted because of disturbed behavior on his part may need help in rejoining his class or his friends. Under some conditions, then, the maintenance of benefits from treatment requires attention to rehabilitation.

Obviously the classroom teacher may play a key role in rehabilitation. Generally, this assumes that the teacher be given appropriate information concerning the convalescent child (Wittenberg, 1944). Such problems of rehabilitation are discussed hardly at all, however, in the published literature, except in regard to remedial teaching discussed earlier. Not all children who have been treated need rehabilitation, but when rehabilitation is included as an explicit step in a program of clinical services for children, the need for com-

municating the situation to the teacher or others is less likely to be overlooked.

Follow-Up

It is not always possible to be certain when treatment is fully complete. By following a case over a period of time one can try to judge whether further work is needed. The opportunity of assessing the efficacy of treatment with respect to duration of benefits is also gained. When gains do not last, challenging questions get asked that produce new ideas and may lead to revision of therapeutic techniques.

Follow-up is needed whenever a disorder was detected, even when no therapeutic action was taken. Check-ups are especially important after the application of first aid as well as after more extensive treatment, for subsequent to an upsetting experience a child may succeed in hiding his upset from himself and from others. The false conclusion may be drawn that whatever first aid was administered alleviated his excessive anxiety. If the child's behavior is accurately observed for a time, new symptoms are seen which would not have been connected with the original event except for the follow-up. It is surprising how little attention is paid to follow-up in the literature. A comment in an article by Lindemann, *et al.* describing a particular case should be taken as applying widely:

The approach described in this case makes very great demands on diagnostic acumen and clinical experience, and depends in the final analysis upon a continuing contact with each case during an indefinite follow-up program so that inevitable misjudgment may be subsequently revealed for self-education and for the protection of our clients (Lindemann, Vaughan, and McGinnis, 1955, p. 30).

SUMMARY

In this chapter we pose three questions:

1. Which students are to receive help?
2. What services could be provided to help them?
3. Who could staff the services offered?

Officials of some American school systems have accepted responsibility—or had it thrust upon them—for dealing with an enormous range of pupils' ailments or prospective ailments. We describe this range in order to clarify the matter of policy that lies at the heart of decisions about the staffing and financing of any school-affiliated program. Then we examine seven possible levels of intervention in pupils' illnesses: detection, diagnosis and prognosis, first aid, referral, treatment, rehabilitation, and follow-up. A final level, prevention, is discussed in the next chapter, along with a consideration of the staffing and organization of services, the role of the classroom teacher, and an evaluation of the current scene and future prospects.

Dealing with Mental Illness in Schools, II

WE RESTRICT ourselves now to the topic of *primary prevention*. The person is not sick, no treatment is indicated, and the object is to keep him well. The topic of "secondary prevention," in which curative techniques are directed at mild ailments or at personality tendencies not requiring attention in themselves but which foretell possible future difficulties, has already been covered.

Although primary prevention is most efficient when endangered cases can be recognized, there does not necessarily have to be successful anticipation of trouble. Preventive measures can be applied blanketly in some circumstances with no assumption that the impending or feared untoward events are capable of disturbing all children. If any substantial proportion of children is likely to be influenced adversely, alertness to the opportunity for prevention is warranted.

The idea of prevention is appealing since our present methods of treatment are cumbersome, uncertain, and unavailable to many who need them. In practice, however, prevention is only at a pioneering stage. In many settings, mental health workers are so busy with clearly ill cases that they have little opportunity to think about prevention. Also, there are limits to what can be accomplished because so many of the evils reside in social and economic dislocations and family conflict.

Clearly, too, the idea of prevention is potentially controversial. "The extent to which a physician should interfere with a patient's life in order to cure him is more easily defined than the extent to

which a physician should interfere with an apparently well person in order to try to steer him away from future illnesses" (Paul, 1950, p. 197). These limitations need to be acknowledged to counter-balance the excitement often expressed about the potential of primary as well as secondary prevention to spare society its present enormous volume of psychological casualties.

There are two general methods of primary prevention. One is to influence the occurrence or the extent of a traumatic event or predicament, i.e., to avoid it entirely or reduce its intensity. (Instead of avoiding stress it may be possible to time it in order to avoid multiple crises: one kind of event is deferred so that two upsetting incidents do not occur simultaneously.) The second method, applicable when one is unsure of being able to forestall or modify the event itself, is to circumvent or minimize undesirable reactions to it and, in some cases, to substitute desirable responses.

In seeking to accomplish such goals, the issue is not one of relieving pupils of their normal responsibilities or letting them escape the appropriate challenges of life. It is one of protecting especially vulnerable pupils, or protecting all pupils, from exceptional stresses the reactions to which are likely to be in the form of immature behaviors rather than constructive mastery experiences.

AVOIDING OR REDUCING SOURCES OF TENSION

Children may be frightened and upset, for example, by contact with uncontrolled or seriously delinquent children in their classes. Even the presence of disturbed children who do not annoy or terrorize others may impede instructional goals if the teacher has to devote a disproportionate amount of time and emotional energy to them. When administrative arrangements can be made to remove such children, their vulnerable classmates may reap benefits.

When there are large numbers of difficult children, special classes, special schools, or care by other agencies seems mandatory.¹ When difficult cases are fewer, there is less need to make other provision and schools are often able to cope successfully with the seriously disturbed child as he continues in the regular classroom. One example of a pioneering attempt to do broad preventive work under

such circumstances is described by Adlerblum (1950). Groups of five kindergarten and first grade children were selected for special weekly sessions by the teachers and the school's "project worker." These sessions permitted fuller observation and improved handling of difficult, withdrawn, or "different" children by the regular teacher after she had observed and worked with the school social worker over a period of time. She was given specific relief from, individualized information about, and help with the children who gave her trouble. The goals of this kindergarten-first grade program were preventive, not curative, although referrals outside the school setting were made for parents as well as children when such action was indicated and feasible.

Pupils may need to be spared not only from disturbed classmates but from disturbed or sadistic teachers (Snyder, 1947). Unfortunately, some teachers are poorly selected and inevitably a few, also, become mentally ill after being employed. Teachers can be asked to obtain professional help for such problems and, despite the critical teacher shortage, should be asked, if necessary, to seek other employment.

School endeavors in the area of counseling and guidance may result in decisions about the students' educational plans that prevent difficulties from arising later. Information about the many differences among various colleges, for instance, can help a student avoid one in which he is likely to experience excessive financial or academic pressure or inordinate conflict about social life or social values. Such counseling is preventive in the same sense that premarriage counseling may forestall trouble (in contrast with counseling that ensues after marital trouble has occurred). As mentioned in Chapter III, help with vocational and educational plans for a student who is not in distress, but who has a complex pattern of values and diffuse or complicated personal identity, can often help him find satisfactory ways to reconcile his various needs and express them constructively.

An important contribution is made to prevention of stress when failure in schoolwork is minimized by such factors as effective teaching and proper selection of students for a given class. Attempts being made through such arrangements as nongraded schools to reduce the chance of failure are described on pages 70-73. Many

believe that national progress toward maximizing each student's academic success involves a radical departure from the notion that rewarding the gifted, suitable grouping of students for efficient learning (see Chapter III), and spending extra time on occasion with the student who has a desire to learn the particular matter being taught is somehow undemocratic, un-American, or unhealthy. Indeed, the healthy state of affairs is to have students working at an appropriate level of difficulty, one in which they are challenged but not overwhelmed. As Kandel (1957), among others, has warned, providing equality of opportunity does not require identity of experience. Is it undemocratic that students weighing under 160 pounds are not chosen for the football team?² Because of differences in home background, it is impossible in school to give every child an absolutely equal experience in every subject. The school has faced and settled the issue of the degree to which it is responsible for changing the social order—it is not itself the instrument for changing American society, even though it may well be an ideal institution for bringing together the best in ideas and ideals that may lead to action outside of school.³

MINIMIZING PATHOLOGIC RESPONSES TO UNAVOIDABLE EVENTS

There are several ways of achieving this goal, among them preparing prospective victims in advance for an experience that may be stressful, providing means of relief for tensions that may become aroused, and making a person stronger so he is less distressed when tension occurs that must be borne.

Preparing in advance takes advantage of people's capacity to adjust to events when they can anticipate them (Peller, 1956) and to some extent to master them emotionally through encountering them in the safety of thought. The intensity of the event as experienced in forethought being less than when the actual event occurs, the problem can be faced and possible actions considered or planned. One may hope to prepare in advance in such a way that no pathologic reaction at all occurs. As mentioned, the possession of information about the facts of reproduction may greatly reduce the

likelihood that a girl, discovering herself menstruating for the first time, will think she is suffering a hemorrhage. Many other responses may be reduced in intensity or kept from becoming pathologic. There are well-recognized procedures for preparing children for the birth of a sibling or for surgery. A film, *Al in the Hospital*, has been made for use in schools (Barclay, 1959).

Occurrences in school as well as events outside can be made easier through preparation. The child can visit a school before he starts there, getting to know the teacher and learning of the pupils' activities. He can be given realistic expectations of school tasks. Sometimes even the brightest kindergarten children worry that first grade will be too difficult for them because "in first grade, you work instead of play." The simple explanation that new work will be built upon the experiences he already knows, and that of course he will be able to master it when the time comes, is often all the reassurance that is needed. Occasionally, an extremely gifted child, having heard that in first grade you learn to read, looks forward to arriving home after the first day able to scan the *Scientific American*. Resentment when he is disillusioned can be avoided if preparation for school has been realistic.

In regard to a child's beginning school, preparation can be accomplished through parents who may participate in group meetings in connection with the event (Klein and Ross, 1958). Often the child's beginning school brings a feeling of loss to the mother, and both parents are sometimes uneasy because they regard the child's behavior in school as a test of the training given him at home. Reassurance obtained in a meeting about the frequency of such feelings among parents may ease their anxiety and enable them to be more relaxed, supporting, and reasonable with the child. In addition, they gain specific information about methods of helping him avoid false expectations. Longer range preparation of a child for schooling can include his being permitted experiences away from the mother at the homes of other children so that he is used to separation. Part-day nursery school attendance would also pave the way (see Chapter VI).

Older pupils may be prepared for experiences later in life in courses that deal with human relations, child development, repro-

duction, and personality dynamics (for other material on these topics see pages 122-123 and 132-133). An adolescent gains understanding of what it means to parents to have a child grow up and leave home, perhaps leaving the mother "emotionally unemployed." He may gain perspective, too, about the "developmental tasks" that adolescents in our society must achieve to reach comfortable adulthood. These insights may enable him to recognize how his own underlying needs and those of his parents are reflected in disagreements he may have with them about use of the family car, the hours he keeps, girls he dates, and his financial status and educational plans. As a result of his insight he may become more effective in controlling himself and influencing others. In similar fashion, from discussions of rivalry he may gain new understanding of the feelings and actions of his brothers and sisters. Aside from the preparatory value of conceptual understanding about human emotion, the teaching of such material has been justified on intellectual grounds: education about human emotions can be regarded as a logical part of a liberal education (Farnsworth, 1955). Albee (1959) has pointed out an additional advantage: the teaching of psychology in high school may aid in the recruiting of future members of the mental health professions.

Within the category of preparation, too, help may be provided by experiences that reduce "secondary reactions" to upset. The self-deprecation of a fearful child because of his timid feelings adds to his fears the new problem of feelings of inadequacy. When children are instructed in the normalcy of anxieties under certain conditions, and when they learn, further, that bravery consists of doing what has to be done in spite of sometimes being intensely afraid, they may feel reassured on later occasions. To discover that others admit fears in various circumstances can protect the timid child's self-image and enable him to retain a feeling of belongingness.

Another category of minimizing pathologic responses is the *provision in advance of channels for relief of tension*. Direct expression of angers and frustrations may be institutionalized in the hard competition of athletic contests, in the fierce chants at a football game, and the raucous struggle to break or defend the goal posts. Tallmadge

and Tallmadge (1957) suggest that children in the primary grades "sing trouble away." The words of one song are as follows:

Sometimes I wake up very cross. I want to kick and cry,
And yell, "I won't! I won't, I won't! I will not even try!"
I want to shake my head and shout: No! No! No! No! No! No!
You cannot play! You must be still, I will not let you out!
Oh, No! Oh, No! Oh, No! No! No! No! No!
Oh, No! Oh, No! Oh, No! No! No! No! No! Ha!

In addition to making expression available to all, leeway may be provided for individual and idiosyncratic interests, since some students have needs different from others that are not relieved by the institutionalized patterns that provide an adequate safety valve for most. One of the values of making music, dance, drama, poetry and the graphic arts and crafts available as extracurricular, if not curricular, activities is their benefits in this regard. Some avenues of creation and expression, including some of the esthetic endeavors, may be indirect and even disguised or symbolic in nature. For instance, one's aggression may find constructive vent when one "attacks" one's work.

Many believe in the desirability of having a broad enough range of curricular offerings so that each student can find some kind of work that is hard enough to require investment of energy and to absorb him, but that he enjoys and can perform with some success. According to Peller (1956), work that is liked contributes to the development of vocational or avocational activities in which tension and immature needs that would otherwise cause trouble are "sublimated"; the energy is used constructively. Such conflict resolutions may develop if a teacher's relationship with a child leads him to work hard, even if initially it is only in order to please the teacher. In the process, he may find work he likes that develops his capacity to sublimate. Then in times of stress he can relieve his turmoil and avoid symptoms by intensifying his efforts in the chosen activity.

A third way of minimizing pathologic responses is to *make a person strong so that he is less bothered by tension*. Having skills in some areas, even if there are deficiencies in others, can balance weaknesses. High morale is another source of strength; the experiences

of military psychiatry have demonstrated the value of morale and feelings of belongingness in preventing breakdowns under intense stress. Very relevant for prevention, then, are the increasing attempts of social psychologists and sociologists to understand social systems as they operate, both in classrooms and in industry, and to evaluate classroom "climate" that may contribute to morale.

Some schools create poor morale for many of their pupils even when the morale of many others is good. Although academic performance can be underemphasized as a valued kind of prowess, it can also be stressed to the exclusion of other qualities.

It is not difficult to understand why these pressures arise in many schools. Social acceptability in an intimate group such as a school class requires a high degree of conformity to group standards in all sorts of public behavior. The first step in achieving such acceptability is to set goals in accordance with the group standards. In schools where evaluation is largely on the basis of academic achievement this means that poor students are forced, by the social pressure of the classroom, to set goals they cannot achieve or else to admit that they are mavericks; both are undesirable alternatives from a mental hygiene viewpoint. There is pressure upon bright students, also, to set their goals in conformity with the achievements of their room mates, rather than with their own.

Adults on the other hand are infrequently subjected to such pressures for long periods of time, . . . achievement in most adult activities is not estimated with the precision that is attempted in many schools. Doctors, lawyers, plumbers and bakers can vary within a considerable range of effectiveness and no one is wiser; they are still adequate. This gives a fundamental security which is denied to pupils who are frequently and publicly evaluated, i.e., acclaimed or humiliated by an authority from whose decisions there is no recourse and in a group from which there is no escape. . . .

If the school is one in which the rewards are all centered about a very limited variety of achievements, for example academic achievements, the child who is relatively dull or uninterested in academic activities must experience continual failure. He must fail even though he is kind, or good looking, or has a sense of humor or has physical prowess, even though he is full of energy, graceful, courageous, friendly or with mechanical abilities. He will fail in school even though these behavior characteristics are very highly valued by many other institutions, until in adolescence he becomes sufficiently independent to establish affiliations with other groups which do reward non-academic achievement.

Compared with life outside school, many schools distribute success and

failure in an extremely unrealistic way. Adults, for example, are inevitably influenced by various pressures, and rewarded according to conflicting values of a variety of institutions and social groups (family, vocation, clique, church, lodge, union, etc.), and these influences are likely to be of somewhat equal potency in their lives. This means that the adult can to some extent balance the failures in one region of his life by successes in other regions. The effects of vocational failures may be mitigated by successes in family and recreational relationships where quite different achievements are valued. In schools that emphasize academic achievement [exclusively], this kind of balancing is impossible . . . (Barker, 1942).

Perhaps we may include the giving of hope to children as a way of helping them weather stress. Recent reports recount work with deprived children. The program described by Downing (1959) enriches the lives of the youngsters by outings and recreational opportunities, and their socially-isolated families are helped to become a part of the neighborhood. In New York's "Higher Horizons" program (*Time* magazine, 1959), the children are exposed to museums, opera, and ways of life that are possible in our society for a child from a poor family who develops, through schooling, his capacity to hold a good job. Such efforts are said to raise the level of academic performance strikingly in some school classes.

Counseling of students may contribute to prevention not only by circumventing specific bad decisions about life plans but also in strengthening the person against those stresses that do occur by hastening his maturation and increasing personality integration.

The preventive approaches we have been describing may be applied to individuals or in group settings. We take up now the topic of human relations classes and the kinds of prevention that may be attempted through them. Some such classes consist of regular course offerings with an overt or announced agenda. Other practices involve setting time aside, but leaving the content covered up to the students, assuming that in the area of their emotions the members know best what they need to talk about and that problems which are important will emerge in time.

Despite the popular stereotype, these classes are not the same as offerings in which the focus is discussing grooming or what to say on a date, unless such topics are particular sources of anxiety to the

pupils. Both factual preparation for events, reassurance about the commonness of certain fears, expression of feelings in the discussions, and an enhancement of morale and belongingness as preventive devices may be accomplished through skillfully led groups. Among the foremost attempts to run such groups with trained leaders are those described by Seeley (1954, 1959) and Hertzman and Mueller (1958). The understanding of others' feelings and individuality and an acceptance of others' needs are said to be promoted by such classes, which may be one way of relieving the plight of children who are low in the power structure of a classroom. According to Lippitt and Gold (1959), initial stereotypes formed of low-power children tend to persist so that they are seen in the same unflattering terms late in the school year as they were earlier. Preventive work might involve attempts to develop group acceptance of idiosyncrasy and the providing of a "home" in the class for "different" children. By providing some children with insights about their own tendencies to displace anger, for example, such classes may contribute to more reasonable behavior in the future, since the child is aware of his tendency. By staying out of trouble, he reduces future stress on himself as well as improving resolutions of conflicts he does get into. To equate a school classroom with a usual "group work" or group therapy situation is inappropriate (Wittenberg, 1944). It is involuntary on the part of the children and, if the classroom teacher runs the discussion, there is a potential confusion of his disciplinary and instructional roles with that of discussion leader. Moreover, the composition of the group is selected in terms of instructional needs or age rather than by the emotional needs of the children. Because of the necessity to control the extent therapeutic techniques are used in group discussions of "sensitive" topics, the teaching of human relations material primarily by evoking relevant issues in free class discussions needs to be confined to specially trained people or those working under close supervision.

Instead of limiting questions about the causes of behavior to time set aside for the purpose, the ambitious work of the Iowa Preventive Psychiatry Research Program under Ojemann (1956, 1959) seeks, by training teachers intensively, to promote comprehension of the dynamics of human behavior during the teaching of all subjects. In

addition to getting pupils used to asking "why" about behavior, the approach seeks to extend such causal thinking to all of a pupil's intellectual endeavors, so that he will better understand physical phenomena and environmental events. In the broadest sense of the concept "prevention," any improvement in understanding of the world is of value, for it helps in avoiding some troubles and it fortifies against others.

Brim (1959a, 1959b) has pointed out how little is known at present about the conditions under which various kinds of human relations training are effective. Because of this, such endeavors in schools must be regarded as pioneering attempts, not yet well enough worked out to be entrusted to instructors who lack special training for the work.

Aside from the pioneering work in human relations education, either in special courses or throughout the curriculum, there are attempts to impart specific information of preventive value. For example, knowledge of reproduction is sometimes taught in connection with physical hygiene or biology courses. From the viewpoint of prevention, the imparting of information about reproduction is appropriate if done in a skilled way, especially since parents often fail to provide such information and children easily misunderstand the material they gain from peers or parents. To present factual material about reproduction is not to gainsay the right of parents and religious institutions to emphasize their own interpretations of such facts and to make moral evaluations of given behaviors. Similarly, description of the anesthetic effect of alcohol on the brain constitutes important information in its own right, and implicitly provides cautions about drinking in certain circumstances that are often lacking for many a youth whose technical knowledge about alcohol derives solely from moral instruction unaccompanied by sufficient, or even correct, information.

PERSONNEL WHO COULD INTERVENE IN STUDENTS' ILLNESSES

The Health Professions

The functions that mental health workers perform in connection with schools are determined less by the professional label of the

worker than by his particular array of skills and by what needs doing. In consulting with teachers about troubled children, the psychiatrist, the social worker, and the psychologist may be interchangeable. Problems of conflict about their respective roles may occur, but the chief problem is that we do not have nearly enough of any kind of mental health specialist.⁴ Although the predominant difficulty is the shortage, there are relatively minor problems of other kinds that diminish the effectiveness of present endeavors. Our comments below about ways training sometimes fails to prepare the psychiatrist for work in schools apply to the training of psychologists and social workers as well.

Psychiatrists. Psychiatrists' professional background is relevant for all eight steps of intervention in illness. There are important variations in interests, however. In treating mental disturbance, some psychiatrists emphasize physical methods such as drugs, and may have had minimal experience with certain other approaches such as psychotherapy. Many other psychiatrists are centrally interested in disturbances as products of emotional conflict, but such focus on individual dynamics sometimes narrows vision so that diagnostic factors stemming from the social position of a family in society at large or in the family's specific community are not always noted. To take only one example, distress may stem partly from social uneasiness accompanying a family's recent move to a part of the nation where people are reputed to be cold and snobbish and where the husband's changed job involves a succession of new social contacts. If the considerable temporary tension aroused in such a family is reflected in the children's behavior, a correct diagnostic formulation will require assessing the contribution of the family's geographic, occupational, and social mobility, factors which may be overlooked if the focus is only on forbidden impulses which the persons involved have been mismanaging since childhood. The field of psychiatry is attempting now to absorb the increasing knowledge about sociological and cultural factors in illness.

A second difficulty with present training in psychodynamics is a tendency to focus on principles of psychopathology and on work with neurotic cases, without providing experience with normal children and adults. This imbalance in training may lead the inexperienced worker to rely too heavily on symbolic interpretations

of a patient's reactions to diagnostic devices (tests, toys, or questions in an interview) and to overemphasize evidence of forbidden impulses, forgetting that all people have such impulses. The key questions are more subtle. How are the inner conflicts being handled, and at what price to the person's general level of functioning? Intensive observation and expertly guided participation with normal children in settings such as a nursery school are reported to increase the diagnostic acumen of members of the mental health professions (Schoellkopf, 1959).

Another limitation is the problem of understanding the effects of a group situation on children's behavior. A teacher who lacks skill in handling a group may have some pupils who act in ways that look disturbed to a psychiatrist, but that represent pedagogical rather than psychological problems. A lack of training in educational practice on the part of mental health workers often results in friction with educators because some of the former have little grasp of the realistic burdens, responsibilities, and duties of teachers (Wittenberg, 1944). Their suggestions about classroom procedures that they may see as affecting particular children may therefore be neither tactful nor helpful.

We have confined our discussion of medical personnel thus far to psychiatrists. General practitioners or pediatricians serving as school physicians may or may not have any particular qualifications for performing psychiatric work. While some physicians without formal specialization in psychiatry have acquired relevant skills, it is hazardous to assume that psychiatric proficiency is in the possession of nonpsychiatric physicians. We have not talked separately about psychoanalysts because virtually all are psychiatrists as well as analysts and presumably can provide services beyond those for which the special methods of psychoanalysis are appropriate.

Psychologists. Psychologists represent a broad category. Of the types of mental health personnel now hired by school systems, the majority have had their training principally in psychology, although the courses may have been offered by faculty members outside of the psychology departments themselves. Many psychologists, of course, are not trained at all to work with people diagnostically or therapeutically, but are experienced in industrial research or various

kinds of experimentation with animals, or are equipped solely with academic knowledge without having any practical skills. Such psychologists are not in any way qualified to undertake the role of a school practitioner unless they get additional training.

Other psychologists have had training relevant for some, at least, of the eight steps of intervention. The types of psychologist who may have the most suitable training are those with the label clinical psychologist with the Ph.D. degree, counseling psychologist with the Ph.D. (or sometimes Ed.D.), or persons explicitly trained at the doctoral level in school psychology or guidance. Persons with less than doctoral training who may fill useful roles working under supervision often bear such titles as "psychometrist." They generally have not had much exposure to knowledge about psychodynamics and psychopathology, but have developed skills in the routine aspects of psychological testing.

In the mental health field in general, there are too few people who seek to become specialists in work with children. Often the only mental health specialists available are those whose work has been primarily with adults and who do not find it as easy as they had imagined to be effective in the school situation. In psychology, for example, work with children and in schools has had relatively low status. Some otherwise fine departments of psychology offer little or no professional training about children and no extensive academic training in the field of developmental psychology. As a result, practitioners with children are often trained in schools or departments of education, educational psychology, guidance, human development or home economics. Although some of these training centers are outstanding, in other cases certainly the result is a less thorough grounding than would be ideal.

One factor in the relatively low status among psychologists of work with children may be that so many people who are doing psychological work in schools have had only a small amount of training beyond a bachelor's degree. If there had been clear-cut, nationwide recognition of more than one level of accomplishment within psychology—if the presence of people doing useful jobs but trained far short of the doctorate was a well-understood phenomenon—there would be no diluting of the reputation of the field by the

careless application of the term "psychologist" to people without full training, any more than "medical technicians" are thought of as "medical men." Attempts to clarify the standards of training and the degrees of responsibility to go with varying amounts of training are progressing, but it may be some time before we can hope for substantial improvement. Historically, of course, the psychometrist or "mental tester" has long had a place in many school systems. The administration of most paper and pencil and group tests can be done by people with little training. Often the job of the so-called school psychologist has been almost a clerical one. Group achievement and aptitude tests are scored and graphs, grades, and scores of various sorts issue from the psychometrician's office. There may be little use of individual testing beyond giving a few intelligence tests to underage kindergarten applicants. Greater availability of individual testing may itself create misunderstandings because teachers and principals are sometimes unaware that a psychometric test does not cure a disturbed child. As a result they may refer "problem" cases for routine testing, expecting this to solve matters. Even worse, psychometrists may be totally untutored in psychodynamics and may, therefore, unwittingly either go way beyond their training and understanding in interpreting test responses to teachers or, at the other extreme, be content never to interpret their data in any but the most mechanical way.

The fully-trained school, counseling, or clinical psychologist may or may not have had extensive training and experience in all levels of intervention. Some specialize chiefly in diagnosis by means of individually-administered psychological tests, a function in which psychiatrists and psychiatric social workers are rarely trained. Another contribution the psychologist often brings uniquely to a psychiatric team is training in the design and statistical evaluation of scientific research. Mullen (1959) made an eloquent plea for her colleagues to reappraise the school psychologist's usual role, to recognize the potential in school settings for exciting, creative research of theoretical as well as practical importance.

The psychologist's chief roles within a school are typically to supervise educational measurement of achievement and aptitude, to conduct diagnostic assessment of cases with educational problems, and

to advise or counsel parents, teachers, and students where matters of aptitude and motivation seem central. Depending on the school system's organization and policies, he may also be called upon to examine or even to treat emotionally disturbed children. The psychologist, like the psychiatrist and the social worker, may perform various other functions. He may provide formal or informal instruction to teachers and administrators about the psychodynamics of normal children and about mental illness. Whenever he solicits the cooperation of educators in regard to particular children, he conveys information about such subjects. This fact ought to be recognized explicitly because then the psychologist can be more alert to performing skillfully this informal teaching. In addition to such tasks, a mental health worker may do some primary and secondary preventive work, such as teaching human relations classes or helping teachers apply emotional first aid.

He may also bring his knowledge of the principles of human learning and educational psychology to bear in consulting about curricular plans and educational practices. However, to suggest educational changes and even to recommend special class placements of given pupils may create awkward situations when psychologists are not well acquainted with schools and the problems of day-to-day teaching from the educator's viewpoint. As a result, questions are raised repeatedly about whether people going into the schools as psychologists ought not to have taught before or after becoming trained as psychologists. This problem might be settled in the long run if work in the schools acquires the status it deserves and attracts goodly numbers of top-flight applicants who aim toward such a career from early undergraduate days. It can be hoped that they would then take the relatively few undergraduate courses in education that are usually required in order to obtain certification as a teacher (majoring in education is not ordinarily required). By getting teaching experience they would unquestionably enrich their qualifications for their later mental health work. Admitting this point, Gray (1959) and others have asserted that there are more economical ways of gaining the needed understandings. She adds that "teaching experience is no guarantee that a person understands schools and school people. Does the high school teacher of algebra

understand what it means to face 30 first graders on the first day of school?" (Gray, 1959, p. 703.) In any case, if mental health workers are to be lured in greater numbers, it often will not be practicable at present to insist on teaching experience. A perfectly adequate alternative to a teaching background is extensive, supervised experience in school as a part of professional training. By working as a psychological intern in a guidance department, for example, the trainee learns from the senior staff about working effectively in the school setting.

The diagnostic function is crucial in schools because only after the nature of a problem appears to be understood can a choice be made about handling it by an administrative decision, such as postponing school entrance, changing class placement, advising parents, counseling, remedial work, or other treatment of the pupil. One important factor in diagnosis often is the pattern of the child's test scores. Therefore, someone involved in diagnosis has to have a knowledge both of the predictive capacity of psychological tests and their limitations. This usually means a person with technical training of a psychological nature. Social workers and psychiatrists seldom have much background of this sort, and teachers almost never have enough from a single course in educational psychology to contribute to differential diagnosis by interpreting test results with precision. Because of the extensive use of psychological tests nowadays in educational as well as mental health decisions, and the concomitant necessity of protecting the public from overinterpretation of them as well as underinterpretation, if there is to be only one mental health worker available in a school it is probably more appropriate that it be a person with psychological training than one with other kinds of skills. Unfortunately, many people who serve as "guides" or advisers are simply teachers who have shown an aptitude for getting along with students or parents. They thus benefit the school's public relations or seem to "deal well" with pupils, but they may have minimal understanding of the strengths and weaknesses of available psychological evidence about a child. Such guides or advisers may perform useful functions just as regular teachers may, but they should not be equated with psychologically-trained personnel. There is lamentable confusion in the minds of those

hiring people to do psychological work in the schools about the kind and extent of training necessary for performing given functions well without supervision by a more experienced person. Ideally, a guidance person in a school needs enough knowledge of psychopathology to surmise when to seek consultation by an expert or to refer a child to such a specialist and to understand the principles of psychotherapy enough to know how to avoid getting into therapeutic relationships if he lacks the training and suitable auspices.

Social Workers. Some of the problems about psychologists in the schools apply also to social workers. There is a well-defined program leading to a master's degree in social work that requires two years of graduate study, including intensively supervised practice. Such training creates many high caliber professionals whose therapeutic skills may be equal to those of the best psychiatrists and clinical psychologists, although their shorter training means that they do not have the medical knowledge of the physician or the specialized diagnostic and research skills of the psychologist. But many persons who work in schools as "visiting teachers" or "social workers" have had a year or less of graduate study, if any, and may or may not have acquired the degree of skill desirable. Among qualified social workers there are not only those properly described as psychiatric social workers with skills of individual casework, but many who are skilled, instead, in group procedures. Still others may not be especially well versed in either group or individual counseling techniques, yet perform useful functions in communities such as helping find a job for the family breadwinner or arranging suitable employment for a handicapped man or the person about to be discharged from a mental hospital. When properly acquainted with psychodynamics and psychopathology, social workers in the schools, like psychologists and psychiatrists, can fulfill an educational role, formally or informally, in sensitizing teachers to individual differences and problems of mental disorder.

There are several other kinds of personnel within the health professions: school nurses, psychiatric nurses, and public health nurses. The degree of psychological sophistication of such workers varies greatly and it is to be hoped that over time, training and selection will become more uniformly of high quality, since in many

schools the only person available in a position to do psychological as well as physical first aid is, for example, the school nurse.

Educational Personnel

In addition to health personnel, educators take action in relation to students' emotional problems—sometimes intentionally, sometimes inadvertently; sometimes wisely and well, sometimes not. Before coming to the major topic, the proper role of classroom teachers, attention should be called to the fact that other educational personnel may be in a position to help or harm students: attendance (truant) officers, remedial teachers, curriculum supervisors, and administrators such as principals, superintendents, and deans. Obviously the more thorough acquaintance these persons have with concepts of mental hygiene, the better off many students will be. Since most such persons start their careers as teachers, improvements in teacher training (Chapter V) would provide future administrators and others with the necessary background.

Teachers and detection. As indicated, teachers are in an ideal position to aid in detection by providing information. In addition to making informal observations, they may administer measures in the classroom designed to help discover mental disturbance. Ordinarily only a very small amount of class time is involved in such efforts and no objection need be raised to teachers' participating because of interference with their instructional role. The question that arises is to what extent teachers are able to perform the full act of detection themselves, by evaluating the behaviors they observe, the material they collect, and the information available to them in the form of students' records.⁵

If left to their own devices without coaching or training, teachers are likely to focus on misbehavior in the classroom, both because it is a real source of trouble to them and because overt misbehavior is more likely to represent emotional problems in some teachers' eyes than it is in the eyes of mental health workers. The latter are perhaps inclined to regard exuberance as a positive rather than a negative sign, and in the case of the clearly overaggressive youth, to be no more worried about him than about the overinhibited or withdrawn child who is no trouble to the teacher but who is a

problem for the clinician. A long series of investigations have compared attitudes of teachers and clinicians toward signs of illness in children. Unlike the early investigation of Wickman (1928), it appears that a larger proportion of present-day teachers agree with clinicians, at least in their responses to questionnaires about symptoms (Beilin, 1959, p. 23). Unquestionably, giving teachers even a limited acquaintance with mental health concepts, as tends to be done in current teacher training, affects results of this sort.

Evidence about teacher attitudes more pertinent than that from questionnaires comes from studies of teachers' ability to spot actual children with disturbances. There is some evidence that teachers can be taught such detection. When it comes to indicating which children needed referral about emotional disorders, one group of teachers was successful in duplicating the judgments of a psychologist who observed the class (Mok, 1959). It must be emphasized that these teachers had heard a lecture, had been given a brief manual on various types of childhood disorders, and had been asked to say which pupils matched descriptions of case-types in the manual. The teachers did *not* succeed in matching a given child in the way the psychologist did—they did not diagnose as well as detect—but they did agree on which children fell somewhere in the category of disorders. Other studies reached a similar conclusion that teachers cannot be relied upon to diagnose successfully, but that, when specifically trained, they may be able to do a good job of detection.

But a given teacher's chance to get to know the pupils in a class varies greatly. The maximum opportunities occur, no doubt, in nursery school, kindergarten, and in the early elementary school years. When children move from class to class as they do commonly in high school and sometimes in earlier grades, the chance to become acquainted is greatly reduced. Exceptions may be those teachers of English who grade themes that may give personal cues and those classes where the method of teaching allows quite free interaction, and thus is revealing of students' social responses. In the large lectures characteristic of much higher education, there often is no acquaintance whatsoever of professor with student. Although an instructor may occasionally note signs of disturbance in peculiar examination answers, in gross discrepancies between one test grade

and another, or between some other evidence of high ability and poor or fluctuating performance in the same student, he may never get around to calling the student in for a conference in which he might perhaps confirm the existence of a problem.

Whether any one teacher ordinarily has access to the array of a pupil's grades and to indices of his aptitudes is a function of the situation and the school organization. Clearly, if neither teachers nor guidance staff has ready access to all of any one pupil's grades and no one is responsible for periodic review of these data, one of the more obvious opportunities for noting possible problems has been ignored.

An advantage of a teacher's having access to information about his pupils is the insight he may get into them that may give him cues about better ways to approach them for instructional purposes. When the teacher has sociometric information or other indexes of pupils' impressions of their fellow pupils, it sometimes gives him a start to find that a boy or girl he regards in a given light is seen differently by his companions. Such insight into the relativity of his perceptions of the child may lead to a less ethnocentric view henceforth.

Yet information may be misused by teachers, whether it be facts collected by others like aptitude scores, or data that the teacher may derive himself, such as an autobiography written as an assignment in English. Where the materials in a child's literary product happen to touch on an area of emotional disturbance in the teacher, or simply on an area of insensitivity because of the teacher's own background and values, the teacher's blind spots may prevent him from seeing the problem for what it is. It may get either underestimated or exaggerated. For teachers to interpret rich material such as autobiographies, they would need to be able to recognize symbolical behavior in which conflicts are expressed and resolved in disguised forms. Virtually no teachers have the training to attempt this kind of analysis and, even if they seemed to have succeeded and happened to be right, a specific warning seems in order against assuming they now "understand Eddie" from having detected hostile impulses toward his father in a drawing or a composition. One possible safeguard against misdiagnosis or limited understanding as well as

against unintentional misuse of correct information is the restriction of the teachers' counseling or advising function.

As for teachers having access to test scores, it is vital that high standards be maintained in courses in educational psychology during teacher training, in order that all teachers understand fully such matters as the difference between "group" and "individual" predictions. Virtually all psychological tests of any satisfactory validity are useful for improving the proportion of cases correctly predicted (e.g., for admission to some kind of training), but tests in existence that measure anything useful to know educationally or diagnostically do not predict precisely for any given individual. It would thus be unethical to tell a high school student or his parents that his score on an aptitude test or interest questionnaire indicates that he definitely ought, or ought not, to aspire to a given career. One can simply say that out of a number of people who scored as he did, a certain specified proportion failed in a similar opportunity. Even if 99 per cent failed, he might be the exception if he wishes to make the attempt and can persuade those responsible to let him. Moreover, it is easy to misunderstand test scores unless one has a thorough understanding of the forms, such as percentile and standard scores, in which test results are reported. One needs to know, too, the normative group with which the subject is being compared before one can judge whether the validity claimed for the test has any meaning for a given pupil.

Since most classroom teachers cannot be expected to retain whatever grasp of such details they may have gained during training, they should not be expected to serve as guidance personnel for their students. Most teachers are, however, expected to understand the achievement and aptitude test scores resulting from the school's routine testing programs. They are called upon to report to parents children's standings in some general fashion that does not include actual numerical scores. It is imperative that teachers clearly understand the meanings and limitations of the test scores, and can give information to parents that is not only correct but also is properly interpreted. Discussions of all the teachers with the school psychologist before embarking on a period of parent conferences might serve

to eliminate many misinterpretations which are unfortunate for parents, teachers, and pupils.

Still another occasional limit of teachers in regard to detection is the inner conflict they may experience because of uncertainties about their own competence. Sometimes they may not call an academic difficulty to the attention of remedial workers for fear their teaching will be blamed. We hope that increased sophistication about mental health, increased availability of mental health facilities, and a greater degree of assurance about their own proper roles in relation to their pupils will aid teachers in revealing facts about a child's problems as they see them.

Finally, teachers need to be alerted to the dangers of implicit prognosis and diagnosis, lest they fail to report difficulties they discern in pupils because of the false assumption that nothing can be done.

Teachers and diagnosis-prognosis. What evidence there is suggests that teachers with a modicum of training can be rather good at detection, but cannot match a psychologist's judgments of diagnoses. An inability to do diagnosis himself, however, does not suggest that a teacher has no role in the achievement of a diagnostic formulation. Information from the school is vital in helping in the evaluation of a child's development. When a teacher is experienced with children and well acquainted with a child, he can contribute his awareness of the child's general progress and give evidence from which one can infer strengths and get a balanced picture of the child's present functioning as opposed to the clinician's insights into the dynamic meaning of symptoms—insights that may represent an overemphasis on pathologic elements. Assessment of strengths as well as flaws is crucial in determining diagnosis and, especially, prognosis. If teachers perform diagnostic functions by themselves, however, they are likely to oversimplify if they get the impression of a causative factor or two. Often they look for "the" cause in a given case. If they try to go further, they may fall into the desperate situation of adding to their teaching burden the obligation to keep extensive records on every child in a fashion with which Prescott (1945) has experimented.

The best kind of diagnostic decision by an untrained person, such

as a teacher, may be a frank admission of incompetence to decide. It seems reasonable to say that most teachers should limit their prognostic decisions to the question of whether or not to refer the student to a professional agent.

Teachers and first aid. Despite the need for teachers to restrain themselves diagnostically, giving emotional first aid may be an appropriate role. Of course, to be able to provide first aid a teacher must not be too harassed by numbers of pupils and extraneous duties; the nature of his instructional work must permit him to get to know his students and, ideally, to know about recent or forthcoming events in a child's home. To the extent that these conditions obtain, he may be able either to apply first aid at times of upset or to guess when it may be needed and refer a child to one of the health or guidance specialists for such help. Sensitive teachers probably do more first aid than they themselves realize and they may stimulate others such as parents to do the same. Often a well-put question to either child or parent can focus people's attention upon incipient upset. Statements to a mother like "Joanne has seemed especially quiet and troubled the last few days, Mrs. Jackson. Is anything worrying her?" may cue the mother that the child's apparent lack of concern about the death of the family dog masks troubled puzzlement about why the dog had to be done away with.

As another instance, the teacher might tell a boy that he knows the pupil is worried about his father's illness and not to feel distressed about the sudden low scores he has been getting the last few days on arithmetic quizzes. Such a statement, of course, in no way condones poor work when the crisis is past and is not inconsistent with upholding the school's standards. To practice first aid in this instance the teacher has to be interested enough in his young pupil and have a sufficiently close relationship with him to have learned of the father's illness. The friendly, warm, interested, and strong teacher whom we all can probably recall in an idealized form from our own childhood experiences is the sort of person who may do a great deal of this kind of intervention, often without conscious planning.

Teachers and referral. Referral is clearly in the province of teachers if detection is, because so often it is the necessary next step. If the

school system does not have any mental health worker to whom the teacher can turn and no administrative officer is designated as the appropriate referring agent, there may be a family service agency or child guidance center in the area that could either take on the case or suggest other appropriate resources for diagnosis or treatment. The County Medical Society and the State Association for Mental Health are other sources of information, and one can always write to organizations with headquarters in Washington, D.C., such as the American Psychiatric Association or the American Psychological Association, for information about sources of advice locally or in nearby cities.

When parents of a child who obviously needs professional help do not cooperate in the referral process, teachers sometimes become incensed and discouraged. They should understand that even if one were in a position to force a family to undergo diagnosis or treatment, nothing will ordinarily be gained in the face of determined resistance. When all reasonable pressures have been brought to bear by the school authorities and parents continue to resist cooperating, the teacher should still continue to report to them on the child's behavior at school. Sometimes it may take months or even years for parents to overcome their fears of seeking psychiatric help. For a teacher to give up in disgust after an initial attempt at explaining her concern about a child's behavior is certainly understandable, but rarely helpful to the child or his parents.

If treatment can be initiated, cooperation with the therapist is also an appropriate function of teachers; however, a teacher may have to stand firm and try to "educate" the therapist if he fails to grasp the fact that pupils are not an assemblage of patients in group treatment, and attempts to manipulate the class for the benefit of a single member. The teacher needs to take cues from the therapist, but needs a respect for his own professional role and for his fundamental obligations to instruction.

Teachers and treatment. Many articles in the literature dealing with the issue of teachers doing treatment distinguish between the teacher and the psychotherapist, concluding that teaching and psychotherapy have fundamentally different properties and cannot be done by the same person for a given recipient. Psychotherapy, as we

have indicated, is not the only form of treatment, however, and many of the objections to teachers doing psychotherapy do not apply to other types of treatment. In beginning our discussion, we need to say parenthetically that our remarks do not apply to nursery school teachers (see Chapter VI), whose lack of formal instructional obligations may, depending upon the other kinds of duties and roles they assume in a given school, permit them more leeway than other classroom teachers to undertake intervention in illness. It is not our intention to catalog in the following paragraphs all the things classroom teachers can do that may have therapeutic effects, but merely to suggest representative types as a basis for judging the suitability of teachers' using each of the six approaches.

Teachers can help *reduce feelings of tension* in pupils by giving reassurance and, at times, special kindness and special opportunities for expression of feelings or tension release. Most teacher behavior in this category, however, will probably be in the nature of first aid rather than treatment for disturbances of long standing. Any serious and systematic attempts to use supportive methods as treatment ought to be conducted only with the advice of mental health personnel, but the "unintended" contribution to keeping anxiety low that any mature and flexible teacher can make both in relation to the class as a whole and to individual pupils also should be acknowledged. His firmness and sureness of touch in managing the class reduces the uneasiness of many young children who might otherwise be much more disturbed by a disorganized or overpermissive atmosphere. At the same time his perceptive, tactful interest allows him to be concretely supportive and helpful when such ministration is needed.

A teacher can help *eliminate external sources of tension* by reducing pressures on a pupil. Perhaps he might tell a pupil who was too distressed about his poor spelling to enjoy composition to forget about spelling for a while and just think about what he was trying to describe and how to phrase it: "When the words begin to flow again, it will be time enough to pay attention to their spelling."

Sometimes teachers feel that parents are excessively worried about children's academic progress and are putting so much pressure on a child at home that they are impeding his learning. If, upon care-

ful inquiry, a child's school work *does* seem to be in serious jeopardy (and not just temporarily awry), the teacher cannot hope to solve the child's problems by telling him to take it easy in school! This only adds to his burdens a conflict of authorities. If in conference with the parents, simple reassurance, when it can be given to them honestly, brings about no change in their feelings and actions, and if the teacher cannot persuade parents to try it his way for a while and ease up on the child temporarily, the teacher's position is extremely awkward. Of course, it is his job to see to it that the child continues to grow and learn. If the child has ceased over a period of time to do these things, it becomes his responsibility, if his relationship with the parents permits and there are no guidance personnel who might assume the burden, to help the parents seek help from professional sources for the child. Outside of academic matters, attempts to treat students by easing pressures on them seem ordinarily to be outside the teachers' realm of responsibility, although in co-ordination with health or guidance personnel they may occasionally help with such efforts.

As a normal part of maintaining discipline a teacher is accustomed to *restrict expression* of disrupting symptomatic behaviors. To go further and deliberately exceed the usual requirements of discipline in order to motivate a student to seek help or to cause a shifting of symptoms assumes understanding of the problem that is beyond the instructional province; such efforts might of course be made upon the advice of a mental health consultant. Often, of course, the normal disciplinary actions of a teacher successfully terminate unacceptable behavior without any deliberate attempt to do so on therapeutic grounds. The holding up of reality to students seems within the accepted role of teachers when students consult them about progress or plans.

Teachers can help a student *develop skills or gather information and gain intellectual understanding of a problem* that may enable him to alter his sources of conflict. With students facing difficult decisions, teachers often give help in reasoning the problem through (see Chapter III). With sufficient knowledge about the various levels of treatment, a teacher can determine when to leave off reasoning and simply give his own opinion, and when the more complex

techniques of the psychological counselor or psychotherapist are needed.

Imparting skills and information is a normal instructional function, but any one teacher's ability to help is limited since the type of talent or skill to be enhanced in a given student in order to compensate for other deficiencies may be beyond the scope of the teacher. Similarly, the kinds of information that may help a pupil solve a conflict may be outside normal curricular content. However, in addition to giving what information, stimulation, and encouragement he can, the teacher may help a child with his understanding of the world in ways that are not usually thought of as giving information. An example is cited by Caswell (1956): Some youngsters in a classroom were engaged in dismantling a store in which they had been acting as storekeepers. Other children were working at their desks. One of the youngsters made a lot of noise at the store and seemed to be disturbing the rest of the class. An adult observer wondered why the teacher did not interfere with the noise. The teacher later explained that the child was extremely dominated at home and this was the first time he had been able to let himself go at all. The child did become more normally self-confident as time passed; some persons may argue that the incident may have been the child's most important learning experience all year. No doubt, justification for the teacher's abstention from censure is a function of how long and how intensely the other children were disturbed and how clear it was that the pupil was testing the possibility of being a little naughty rather than losing control of himself. We believe that the seizing of such opportunities is sometimes desirable, even though we do not subscribe to the theory that tension release in and of itself ever cured a neurosis. Many an inexperienced child therapist has learned to his dismay that neurotic problems cannot be let out like demons merely by opening the lid of Pandora's box—nor indeed by providing the child with punching bags, noisy guns, or other so-called release toys. In the case cited, the benefit to the child presumably consisted of the partial correction of his exaggerations about the sternness of his environment, rather than from simply venting his feelings.

One way of helping the development of skills for therapeutic

purposes is remedial work in the area of handicap. Such coaching, however, must be co-ordinated with the work of specialists if psychotherapeutic as well as pedagogical techniques are indicated. If remedial attempts with a child who is behind his class are not proving effective after a reasonable period of time, they should be abandoned until an evaluation of the case can be made. Perhaps diagnostic appraisal would indicate their being continued only in combination with either limited or extensive psychotherapy, or perhaps a different type of remedial instruction will be all that is required.

Teachers can sometimes help a student *achieve the first or second level of insight* by allowing him, when he stops to talk after school perhaps, to get beyond social preliminaries and broach, even in the most remote way or at the most superficial level, things that are bothering him. However, such consideration for the student can create problems, particularly if the teacher actively holds up a mirror and verges on interpreting what the youth says in ways that convey deeper meanings than the student may have been aware of. That is, the danger of verging into psychotherapy is great and the absence of training for making a running diagnostic appraisal as the conversation proceeds can lead to pursuit of the technique when it is inappropriate. Thus the qualifications we shall express about teachers' doing psychotherapy apply to the present topic, too.

It would be unreasonable to suggest that as a safeguard against such involvement pupils be deprived of the opportunity to talk with teachers, who may be the only mature and intelligent persons with whom some distraught adolescents, temporarily ill-at-ease with their parents, feel comfortable in talking. No one can draw a line between the teacher as a formal or informal advisor about a student's educational plans narrowly conceived, like choice of a course of study during a given semester, and the broader issue of plans for higher education and career plans that depend on such things as life values, ideals, and self-image. The solution, we believe, lies in educating teachers to the implications of various actions on their part and to the signs that problems are developing, so that they can tactfully terminate conversations that are getting beyond their skills and can provide adequate referral sources (see Chapter III).

The problem of teachers engaging in *psychotherapy* involves a

number of issues that apply regardless of the age of student one has in mind. Let us assume that a very unusual teacher has had training in personality dynamics, psychopathology, resistance, transference, countertransference, the dosage of interpretations, the timing, the selection of patients, the type and amount of evidence necessary before taking certain action, and so on. Let us assume further that in the particular school setting there is enough privacy to practice any of the levels of psychotherapy. Still, attempting psychotherapy would be contra-indicated.

A teacher using psychotherapeutic techniques confuses the pupil, who may be unable to respond to therapeutic intervention when it comes from a person he sees partly as a disciplinarian and partly as a fount of facts, wisdom, or esthetic judgment. It also may confuse the teacher, who may be unable to perform any one role well when it tends to get mixed up with his others. To erase any doubt that the behaviors of instruction and those of psychotherapy are incompatible, we need to describe only a few areas of difference. Many writers have pointed out contrasts in the way anxiety is handled: for certain purposes a therapist may allow or encourage expression of feelings that are accompanied by anxiety, while it is part of the teacher's job to keep anxiety down in order to make cognitive concentration possible. An uncontrolled classroom is an anxious classroom and many an assemblage of pupils has been made anxious because of the teacher's losing perspective on the kind of control needed. We do not suggest that all pupils are alike and that all need extremely strong discipline. Under certain conditions the classroom can be quite free in verbal expression or in movement around the room without the pupils' feeling a loss of control and support, but therapeutic conditions are different from those that obtain in the most free classroom setting.

Sometimes psychotherapy is spoken of as representing a special kind of learning. This analogy is sound, but psychotherapy cannot be equated with instruction in school. The teacher's central job is to help all of his students advance in their acquaintance with the world of reality. The therapist helps his patient to learn about his own inner world and its meaning for his unique life situation. Teachers can have a relationship to their pupils which is beneficial

for all the children in their classes. They can serve as models for positive growth and learn to listen to what their pupils are telling them, giving individual support and encouragement when it is appropriate to do so. That is, teachers can have a relationship to children which is "therapeutic" without, however, taking on the special responsibilities of a "therapeutic relationship."

Teachers and rehabilitation. Earlier, in discussing the topic of rehabilitation, we indicated the key role teachers may play when alerted that the behavior of a given child may need to be seen in the light of his convalescence. Indeed, the mere fact of the child's return to the regular classroom may be a significant rehabilitating experience. He now knows that those who treated him have confidence that he can return. The teacher may be asked to do no more than his usual job in both helping and expecting him to function in the classroom.

Teachers and follow-up. Teachers may be expected to contribute to follow-up in much the same limited but important way they can help with detection. Follow-up, however, may pose some problems that detection does not because certain particular behaviors of a child that were formerly important in his pathology may need to be observed carefully; a teacher may, therefore, need to be in closer contact with the clinician in attempting follow-up than would be the case in detection. The teacher may be of immense help simply by noting and reporting accurately and factually what he sees.

Teachers and prevention. It is evident that teachers can undertake preparation of classes for events that all their pupils will soon experience—whether these be the first fire drill in kindergarten or the move to the large junior high school to which sixth graders can look forward. There will be chances to engage in preventive measures with individual children from time to time, too, just as there are occasions for the application by teachers of individual first aid. Supplying information and correcting misinformation for pupils "bothered by" family illness, hospitalization, separation, etc., can often be appropriate. At times, teachers have the opportunity to make suggestions to a parent about paving the way for a child's starting school or entering a new group, or about ways to help the pupil deal with interpersonal or academic crises to which the parent

might not otherwise be alerted. They can try to support unusual interests in children that may be important dynamically as potential conflict resolutions; above all they can try to make children strong in some areas of endeavor and in general feelings of belongingness and hope.

As for human relations teaching, we believe that only specially trained teachers should undertake leading class discussion groups on topics of emotion. This endeavor, while extremely promising, requires skills that are hard to instill, and little is known about the conditions under which lasting benefits occur. Clearly, unless such work is done with selected students for therapeutic rather than instructional purposes, the caveats applied to psychotherapy apply also to such discussions: the use of either contemporary or historical interpretation of behavior of actual children of the class is taboo. We do not suggest that interpretations *to the group* of responses of the group (when viewed in terms of behaviors and feelings shared by many) is always inappropriate. Even in ordinary instruction such interpretations can help a class progress in its work. If an event has occurred that would disappoint or create hardship for students, the teacher can often clear the air by acknowledging their probable feelings. A skilled leader may sometimes get a discussion back on the track by making observations about "group process." Such elementary techniques of group dynamics, or even the subtler ones that may be used by experts in human relations teaching, are not the same as interpretations of individual dynamics.

Most people will applaud efforts to develop in teachers themselves what Ojemann and his colleagues (Ojemann, Levitt, Lyle, and Whiteside, 1955) call a "causal" rather than a "surface" understanding of human behavior. To the extent that such an approach to human interactions and to curriculum content in general can be truly absorbed and applied, pupils would, it seems, indeed be strengthened both emotionally and intellectually. As they learn to go beyond amassing facts and to ask *why*; whether about a classmate's feelings or about the growth of cities and railroads in a particular kind of terrain (Bruner, 1959), the crucial demands we make of our educational system would be increasingly met.

The teacher and students' illness. We discuss now the general

contraindications and advantages of teachers' engaging in mental health activities. Among the disadvantages are the time involved and the emotional conflicts teachers themselves often experience. When mental health goals are set in addition to instructional goals, teachers will often feel overwhelmed and discouraged as a result of noting unhappiness in pupils that they have not relieved as they aspired to do. In addition, they may be unduly fatigued—teachers bear an exceptional burden when they undertake to keep all their children happy and healthy as well as making progress academically. To the extent that the mental health duties the teacher undertakes are complex or consume a great deal of his time or occupy his thoughts, the teacher may also deprive his pupils of instructional attention and feel guilty about such neglect as well as about the inadequacy of his mental health accomplishments. Clearly, the engagement of teachers in mental health activities must be kept fairly limited, quite aside from the necessity of completely avoiding certain types of behavior. As a general principle, teachers who are not in active contact with guidance officials or mental health specialists about a case should avoid all attempts to settle on diagnostic and prognostic formulations and all use of psychotherapeutic techniques. They can engage with justification in efforts to detect and refer in helping a student who seeks advice to reason about his problem, and in those practices of psychological first aid and prevention which are within the accepted range of behavior toward children of a sympathetic and insightful adult in our society, and in helping a student who seeks advice to reason about his problem. Other approaches to treatment and intervention are borderline instances which ought to depend upon consultation with a professional specialist.

ORGANIZATION OF SERVICES TO DEAL WITH STUDENTS' ILLNESS

As more attempts are being made to cope with students' emotional problems, one way of describing what has been happening is to say that two quite different traditions are converging. One tradition is that of the "health professions" concerned with mental illness:

psychiatry, clinical psychology, and psychiatric social work. (We omit psychiatric nursing because that profession has little to do with school mental health.) Despite an emerging concern about prevention, the orientation of the health professions is chiefly toward existing sickness.

The second tradition is an educational one and the orientation is, broadly speaking, toward the solving of instructional problems as they arise from myriad individual differences within the range of normality. Since these individual differences have been increasingly appreciated as often due more to motivational factors than to talent or aptitude, interest in psychodynamics has grown without reflecting a primary inclination toward the fields of psychopathology and mental hygiene. Practitioners representing the educational tradition tend to have backgrounds in school guidance, vocational advisement, educational psychology, and educational measurement. Recently explicit training in "counseling psychology" has developed, a field in which training is akin to that of clinical psychology but which probably attracts candidates whose aims are more toward working at rational levels than at the levels of unconscious motivations. They apply their techniques to "clients" or "advisees" rather than to "patients" and are glad to leave the responsibility for disturbed students with the health professions whenever possible. When inadequate provision is made for handling "disturbed level" cases, the educational practitioner sometimes is overwhelmed by referrals of that sort, but he prefers to work with "decision level" cases such as the person wrestling with a choice about his vocational, educational, or marriage plans.

Because of the two traditions, in a number of universities two kinds of service have come into existence: there may be both a health service and a counseling center. (Something of the history and implications of these two kinds of agency in American universities are described in Note 6.) With some of the students who are seen, it may be hard to say initially which kind of practitioner is more appropriate. Cases that turn out to need the other kind of help can often be shifted. To facilitate such decisions it is important that there be good communication or liaison between the agencies, or else independent medical consultation available to the educa-

tionally-oriented workers. The proportion of cases that begin at the wrong agency is relatively small, provided that fairly clear images of the two resources exist in the minds of those most active in referring students and in the minds of the student body, some of whom may initiate contacts spontaneously. Inevitably there are cases which could be handled by the skills represented in either agency. It may sound wasteful to offer two kinds of services that partially overlap, but there are clear advantages to doing so. The unwillingness or inability of some students to recognize themselves as having "problems" or to seek professional help for "illness" may not impede their accepting help if they can broach the subject initially in a context of getting vocational information or of learning about their performance on aptitude tests and on occupational interest inventories. Other students may seek advice about educational plans or other decisions long before they are troubled or in difficulty. In so doing some become amenable to preventive work, even though they would reject "treatment."

It is not crucial that the two kinds of service be physically or administratively separated. The argument is sometimes advanced that all such help should be under medical aegis. A number of psychiatrists envisage their field broadly as encompassing preventive work at all levels. Indeed, some of them look favorably upon a situation in which psychiatrists would not simply repair the wreckage of a social system, but would actively try to influence the structure and functioning of the system. Others express qualms about a world where there is no privacy from psychiatric surveillance. The question is academic at this time. Not only is the supply of psychiatrists inadequate, but the proportion who are so visionary is small and techniques for manipulating the structure of social systems are in their infancy. Viewed broadly in terms of attempts by behavioral scientists of all stripes to understand and to influence for benign purposes social systems such as industrial organizations, the advance in basic knowledge is promising. Like other new scientific knowledge, it might someday be used with malevolent intent, but "artists" at societal manipulation such as the many dictators who have reigned during this century achieved their ends without benefit of social science. Similarly, we had brainwashing before psychologists

tried to explain it. It is not an unreasonable hope that the good uses to which new psychological knowledge is put will exceed the bad.

A criticism similar to that made of the promotion of psychiatry as a panacea has been made of overenthusiasm among some poorly-trained guidance personnel. But the shortage of such workers keeps the existing ones so busy that it prevents most of those who might be so inclined from trying to force advice or "talks" upon students who do not need such help or who prefer to be left alone.

The most rapid growth appears to be within the sphere of the educationally-oriented practitioner; there is active expansion of counseling and guidance facilities. In contrast, it seems unlikely that the health professions will provide the number of people necessary to compete in volume for control of the whole range of guidance and health functions. For example, there are about 25,000 high schools in the United States, not to mention a much larger number of elementary schools, but only 12,000 psychiatrists, including all those in private practice and those devoting their time to hospital work. We surmise, then, that what we have called educationally-oriented practice will predominate. Such a state of affairs in no way precludes the supplementation of the services by psychiatric consultation, nor the use instead, if appropriate, of facilities in the community such as a family service agency or child guidance clinic.

It is hard to conceive of our ever having efficient enough techniques of treatment (of psychotherapy, anyway) to cope with all the students who might benefit by such help. But many casualties could have been spared, or the damage lessened, by preventive efforts, including sounder educational decisions and methods. The interest in bringing current knowledge about personality development to bear on education may result in the evolution of a new profession blending skills in mental health with those of the educational psychologist and falling heir to the growing empire of guidance services.⁷ By earning a secure place within the power structure of a school system, the guidance administrator may be able to speed educational progress more effectively than can those with less identity as educators.

The inclusion of health services within a school in conjunction with the physical health facilities offers the possible advantage to a

student of disguising from others the fact that a consultation is about emotional illness. Having the services at school may make it easier for parents to seek advice, since some may feel less strange in going to a school for help than to a clinic. A contrary argument in favor of separating services from the school geographically is that students in group or individual counseling may feel more able to speak their minds freely outside the school setting. Aside from these points, many workers believe that to be effective a clinician whose job it is to aid students must spend his working hours within the social system of the school in order to have the necessary understanding to capitalize both diagnostically and therapeutically upon the situation as it exists uniquely in each institution. At the same time he may become embroiled in problems of role relations that might not exist if he were a more remote figure coming in as a consultant. One can argue both ways as to which role creates more problems. When the guidance practitioner is educationally-oriented, he may be accepted as a fellow educator and have readier co-operation from instructional personnel than may the "outside" consultant. On the other hand, at times he may appear more directly competitive with other educators.

Some mental health workers who have been invited to work in schools by the administration have found that their jobs became many sided. They may do little direct treatment in the school setting and yet do a great deal of indirect and preventive work by serving as consultants to teachers, by holding in-service workshops on normal emotional development, and such activities as detection and psychological first aid, and by giving the teacher a place to turn when she wishes to refer a child either for further study or for treatment of some sort. The mental health consultant can then deal with the feelings and attitudes of parents about referral and can arrange appropriate work at outside agencies. Where sound co-operation between mental health personnel and school people can be worked out, detection of disturbances can be made earlier and more accurately, referral can be expedited as well as ruled out where it is not appropriate or feasible, and the classroom teacher can be given considerable support in handling problem cases, as well as relieved of the burdens of dealing with other parents and children whom he is

not in a position to help. Thus the mental health consultant, whether he be a psychiatrist, social worker, or psychologist, serves as a "psychological trouble shooter" who, by enlisting educators as allies, can multiply the benefits from his efforts.

Like their brethren housed in the school itself, mental health consultants based in community agencies have managed to develop relationships with teachers in which they become well acquainted with the ongoing educational enterprise, learn to support the teacher rather than to create new pressures upon him, and accomplish informal training about mental health and personality development. The question of whether a school system is able to integrate health and guidance services into its structure or reacts to them as to foreign bodies which it encapsulates and limits in impact appears to be one no one fully understands in all its aspects. Often the principal of a school serves as the gatekeeper whose views determine the efficacy of preventive or curative endeavors within his school. Sometimes the gatekeeper turns out to be one of the older teachers in the school to whom younger teachers gravitate for advice. The superintendent of schools in a community, of course, may control the destiny of health and guidance services for many schools. The promotion of such services will be enhanced as more understanding is achieved of the complex position of school executives who, as Gross, Mason, and McEachern (1958) have shown, are often in positions of intense role conflict, faced with competing expectations from the school board, their faculties, and administrative subordinates. The fate of innovations in a school system or of expansion of existing services is in no small degree of function of the nature of such conflict and the ways it is resolved.

Some people in large city school systems where the number of troubled children enormously exceeds the available services believe that the use of special classes is the only hope for coping with the problem (Hay, 1953). These small classes are composed of types of pupils for whom individual therapeutic help is unsuitable or cannot be offered. Selected teachers try to provide an instructional milieu which helps the children to some extent and at least spares them the handicaps their emotional disorders would create in a regular class. Related to this kind of approach is a fact that has become widely

appreciated only in recent years, that patients from lower socio-economic groups are often unresponsive to treatment procedures, at least to the usual techniques of insight therapy. There may be great difficulties in communication between therapist and patient because there is great difference in social background (Hollingshead and Redlich, 1958). Often progress is made only by using some of the other approaches to treatment. Obviously the combinations of treatment approach that must be provided in a typical large city, where a high proportion of the cases are from low socio-economic backgrounds, may be different from the kinds of services that can be used effectively in suburban neighborhoods, where psychotherapy is more likely to be useful. No service unprepared to offer combined approaches is likely to fulfill the needs of any one school setting. An especially frequent combination is the use of pedagogic techniques after psychotherapy (Liss, 1955).

Since personality change in any one person creates a change in his roles and interpersonal relationships, it alters, too, the opportunities of those with whom he associates to express both love and irritation. Treatment, then, may cause problems among members of the patient's family. If a boy, as treatment progresses, becomes less vulnerable to his father's teasing, the father may begin teasing the mother. Sometimes the readjustments need to be helped along by counseling additional members of the family. Often, though, the others, less neurotic than the patient, are able to weather the transition. Temporary changes as well as permanent gains may characterize treatment and cause adjustment problems. Under certain conditions, when a child begins intensive treatment he may, for a time, become less manageable in the classroom. Many a misunderstanding among school personnel would be avoided if teachers could be systematically warned of such temporary phases and asked to help in the easing of these problems by discussing them with the child's therapist. It is often necessary simultaneously to treat a parent or one of the patient's siblings, but the electorate of a community is not likely in the near future to assign this responsibility to schools, beyond simple and brief counseling or consultation and advising. Thus effective co-operation with community agencies is essential

even in those schools where outside agencies are not relied upon for all treatment.

Unfortunately it is not often recognized that when the personnel of educationally-oriented or health-oriented programs are utterly exhausted and harassed by an excessive caseload, the quality of work suffers; in such circumstances the staff must either be expanded or encouraged to limit itself to particular kinds of cases until community support can be developed to provide more funds or strengthen outside agencies that will accept referrals. To help only a little bit may conceivably be worse for some types of cases than to help not at all.

EVALUATION OF CURRENT PRACTICES

We have distinguished eight principal steps of intervention that can be taken in dealing with pupils' mental illnesses: detection; diagnosis and prognosis; first aid; referral; treatment; rehabilitation; follow-up; and prevention. One of these steps alone, treatment, may involve six main forms or approaches. Then there are several categories of pupil when viewed in terms of the kinds of illnesses or potential ailments they have. To each category some of the steps and approaches of intervention are applicable.

The picture of potential mental health endeavors is thus complex even if one ignores the additional fact that there are a number of types of people whose training qualifies them to participate in the various steps and approaches. If this panorama were static, it might be possible to understand and make reasonable evaluations of each aspect in order to say which endeavors look "good" and which "bad" or unpromising, but the scene is kaleidoscopic. The kinds of training offered to specialists and the kinds of training in mental health given to "auxiliary" personnel, such as teachers, are in flux. Values concerning the sorts of children who most merit attention shift with the newspaper headlines: gifted pupils, especially those with a scientific bent, are seen as particularly worth the ministrations of guidance personnel, as is the child from the slums caught smashing windows and regarded as typifying a national problem.

The scene is complicated by incompatible trends that exist with

regard to the steps likely to gain support. Guidance personnel schooled in problems of pupil motivation as well as aptitude are seen as valuable, yet "coddling" pupils by worrying about their "adjustment" may be considered inappropriate unless, perhaps, the maladjustment is clearly in the academic sphere or adversely affects vocational aims. Since schooling is supposed to impart hard subject matter without frills, teaching pupils about human emotion, personality dynamics, and child growth may be regarded by some as engaging in a subversion of the goals of the school, even though from the viewpoint of preventing illness the pioneering attempts to find ways to convey more human understanding may turn out to be a well-justified curricular innovation.

Although the attempts described in the literature to teach human relations with specially trained instructors are intelligent as well as earnest, we do not question the possibility that similar efforts by less skilled teachers are conducted in a banal and largely useless fashion. If there were involved an enormous national investment and millions of pupils were sacrificing opportunities to study other subject matter, efforts to learn better ways to teach human relations might not be worth pursuing at this time. The fact is, however, that despite the variety of approaches there are only a handful of places seriously engaged in such teaching. In view of the needs that could be fulfilled by high-quality performance as techniques improve and the numbers of personnel with good training increase, it seems desirable that such current efforts be supported.

The same reasoning applies to the work of guidance and health specialists, although their case is stronger. A tremendous amount is still to be learned. For instance, our use of preventive techniques is primitive and knowledge of prognosis unfortunately limited. But the presence in many schools of one or more specialists and their participation in educational decisions have brought to bear techniques and understanding previously unavailable that unquestionably have increased the judiciousness of countless such decisions affecting the lives of students. Each sound increment to understanding about a case lessens the chance of misguided or tragic action. Therefore every additional trained guidance or health worker active in a school represents a gain. There is no need to worry about getting too many;

we shall never get enough. Through trial and error learning and frequent communication of evident failures as well as successes in large professional conventions (such as those of the American Orthopsychiatric Association) and small workshops, it will gradually become apparent that some methods look more fruitful than others.

Then the time will have come when the methods of controlled research can be brought to bear more fruitfully than now to evaluate what approaches are paying off. For the present, workers are not only few in number but also limited by the state of ignorance about promising lines of endeavor, methods, and organizational procedures. We need to encourage an immense increase in research, not only in psychopathology in general as applied to schools but in studying, for example, the conditions under which auxiliary personnel such as teachers and guidance personnel with subdoctoral training may be effective in aiding mental health specialists and supplementing their efforts. It seems clear that certain avenues for dealing with pupils' illnesses are best left to experts, yet there are several functions that reasonably sophisticated teachers can perform without being excessively burdened and without appreciable interference with instructional aims. If anything is to be done about emotional disorders among American youth—and there are aspects bearing on academic performance that it is clearly “educational malpractice” (Gardner, 1953) to ignore—then teachers must be called upon to assist. No adequate number of other personnel will probably ever be available.

SUMMARY

Initially in this chapter we describe techniques of prevention and thus complete our answer to the question posed in Chapter III about the kinds of steps that could be taken to deal with students' emotional disorders. Then we discuss the staffing and organization of the services that could be offered, giving special attention to the advantages and risks of encouraging classroom teachers to perform each of the functions. Finally, we evaluate the current national scene and its implications.

The Training of Teachers

THERE ARE many ways in which teacher training may be discussed. In considering the topic from an over-all point of view, it appeared that approaches try to take into account some or all of seven possible attributes of the teacher. It must be emphasized that the selection of these particular attributes is simply our own way of organizing the material. Certain of these attributes may be the sole or predominant goal of particular types of teacher training; other types of training may seek to develop a combination of several attributes. The focus of a program depends not only upon the philosophy of instruction represented but also upon the grade level the trainee is being prepared for.

Other Issues with Indirect Mental Health Implications

We shall not explore certain interesting and controversial issues. One matter on which we shall have to refer the reader to other sources is that of teacher certification, which has been reviewed by Lieberman (1956), Lynd (1950), and Bestor (1953). A second topic we bypass is the history of the teacher training movement itself and its relation to American colleges and universities. This topic has been succinctly discussed by Jones, Keppel, and Ulich (1954) as well as in a review by Borrowman (1956). Finally, we are omitting from our discussion systematic consideration of the teacher's place in American society. All of these areas have indirect mental health implications, but our concern here is with how teachers are being trained and the relevance of theories and methods of training for mental health within the school.

ATTRIBUTES WHICH DIFFERENT FORMS OF TEACHER
TRAINING SEEK TO DEVELOP

Grounding in the subject to be taught. Some approaches to teacher training emphasize, more than others, thorough mastery by a future teacher of the concepts and methods of the field in which he is to teach. As an example, a future teacher of biology is expected to be generally well versed in the theories and data that make up that branch of science. In a like manner, the teacher of language or literature should have a rich acquaintance with representative literary works.

Familiarity with methods of teaching. Some approaches to the training of teachers emphasize techniques of instruction. Such training may involve the strategy of order of presentation, the background knowledge and basic skills which pupils must have before new topics can be introduced, a repertoire of readings and illustrative material available in the field, and the technical aspects of laboratory demonstrations and exercises. When appropriate, there may be training in field excursions from which pupils may profit by direct observation. Ways are suggested in which teachers may test a pupil's grasp of particular subject matter.

Training in teaching methods may also stress those aspects of the teacher's job that apply to many kinds of subject matter and to dealing with pupils in general. To varying degrees the student is offered perspective by studying the history of education and is exposed to philosophical and psychological concepts relevant to the goals and procedures of instruction. Understanding may be enriched further by exposure to the developing fields of educational anthropology and educational sociology. More concrete issues that apply to many subject offerings are considered as well, such as the assigning of grades, the devising of effective examinations, deciding about promotion of pupils, conducting conferences with parents, and uses of visual aids. Problems of classroom management are usually covered, such as techniques of maintaining discipline and of handling groups in ways that promote learning.

Grasp of psychological principles concerning intellectual development and individual differences in aptitude. Another element often

stressed in teacher training is an understanding of individual differences among children and adolescents in the development and functioning of general learning ability or intelligence. Such training may include rudimentary acquaintance with tests of aptitude and achievement and with educational uses and misuses of test scores. Sometimes highly specialized instruction is given: the prospective teacher may be taught to derive individual predictions from aptitude scores and to discuss such information with possibly anxious parents and their children.

Understanding normal personality development and individual differences in motivation. Some training courses encompass a discussion of individual differences not only in ability and achievement but also in motivation and personality. Such training stresses the importance of motivation in determining school performance and may deal specifically with the effects on pupils' subsequent school work of various methods of evaluating and reporting academic progress. The training may involve, further, a consideration of the problems of healthy adjustment in the classroom, family, and community. The difficulties that accrue for children of various ethnic and socio-economic backgrounds are often examined.

Acquaintance with mental hygiene and psychopathology of childhood and adolescence. Some of the causes and signs of inner conflict and emotional disturbances are discussed. Typically, developmental troubles with their myriad individual resolutions are considered, even when they have no major repercussions academically. Some astuteness in recognizing emotional difficulties may be imparted. Most such training does not presuppose that the teacher will attempt to treat illness; it does assume that he will become more sensitive in detecting ailments and more effective in cooperating with mental health workers when indicated. To this end, some acquaintance with professional guidance techniques is likely to be provided. Often the supplementing of material about normal personality development with knowledge of mental hygiene and abnormal phenomena is defended partly on the grounds that, while the concept of individual differences is likely to be explicit in the former kind of training, it is frequently group differences (e.g., between middle-class and working-class children) that are stressed. Developmental events

often are described as though each child in his given subcultural setting had the same formative experience as another from the same setting. The consequence may be a helpful grasp of what children in general are like at various ages, but not necessarily an accompanying understanding of the more subtle differences among children who are similar in age and background. An untrained teacher soon becomes aware of such differences but, lacking knowledge about their nature, he may be overwhelmed by them or become callous. The addition of material about psychopathology may supply the lacking sensitivity.

Personal maturity in the teacher. Some forms of teacher training emphasize the idea that only the mature and integrated person can inspire and motivate learning in the classroom. Since the supply of such candidates is limited, attempts have been made to increase it. Some training programs, for instance, try to serve as catalysts in advancing maturity by asking teachers-in-training to face themselves in sessions of group therapy or psychodrama. As a consequence of understanding their own motivations more completely, they are said to be able to view pupils' behavior with a minimum of distortion and will present themselves as an anchor upon or against which the pupil may begin to build his own firm attitudes.

What does psychoanalysis suggest as the fundamental requirements for the most favorable relationship between teacher and taught? . . . first . . . the educator has need of knowledge of his own psyche, in order to know and deal with his special tendencies and complexes. . . . "Only the person who is educated and inwardly free can educate others properly . . ." (Low, 1928, p. 52).

Or again,

Bank Street College has done something that was in the beginning unique, but fortunately is beginning now to catch on: that was to stress the importance, in the preparation of student teachers, of the teacher's own growth and development as a person, so that teachers would get an image of themselves consonant with the constantly enlarging responsibilities of education today. Helping them to understand themselves will give teachers some of those psychological insights they will need to carry on the endless task of helping the younger generation to grow up (Frank, 1955).¹

It may or may not be practicable on a large scale to provide teachers with sufficient personal insights in the course of training to insure their having inner freedom in the psychoanalytic sense; nevertheless, the importance of personal qualities in the teacher has been expressed at various times in the form of ideals to which teachers-in-training may aspire. For instance, John Ruskin wrote:

Education does not mean teaching people to know what they do not know—it means teaching them to behave as they do not behave. It is not teaching the youth of England the shapes of letters and the tricks of numbers, and then leaving them to turn their arithmetic to roguery and their literature to lust. It is, on the contrary, training them into the perfect exercise and kingly continence of their bodies and souls,—by kindness, by watching, by warning, by precept, and by praise,—but above all, by example (Ruskin, 1885, p. 370).

The application of this ideal to college teaching was expressed by Nathan M. Pusey:

The close observer soon discovers that the teacher's task is not to implant facts but to place the subject to be learned in front of the learner and, through sympathy, emotion, imagination, and patience, to awaken in the learner the restless drive for answers and insights which enlarge the personal life and give it meaning (Pusey, 1959, p. 9).

✓ *Preparation to teach subjects related to mental health.* Some training programs equip teachers to impart subject matter that bears on mental health directly, for example, sex education, courtship and marriage, child-rearing practices, human relations, and certain aspects of elementary psychology as offered in some secondary schools.² Often the preparation in special subjects involves instruction in procedures for leading group discussions in ways believed to promote emotional understanding of material beyond what an ordinary classroom method can make possible (Cabot and Kahl, 1953).

In the training of any one teacher, some of these seven different foci may be emphasized heavily to the relative exclusion of others. We now wish to examine the ways in which each of the seven attributes bears on pupils' mental health. In thinking about the various dimensions of mental health, five aspects seemed most germane to

the role of teachers. Again, we have devised an arbitrary scheme more for illustrative purposes than with a claim to covering completely all imaginable issues.³

ASPECTS OF STUDENTS' HEALTH AND ILLNESS RELEVANT TO TEACHER TRAINING

Mastery of the environment. One category of health that teachers always affect is the pupil's present or future capacity both to understand and to cope with the world. Ideally, the teacher can, without scorning the value of imagination and the meanings in legend and fantasy, help pupils to distinguish present reality from myth or wish, guide them to think about the real world instead of merely amassing facts about it, and impart whatever knowledge or skills are appropriate for such mastery of the environment. To the extent that teachers are trained to do this job well, they contribute to one major aspect of their pupils' mental health.

Creativity, zest, and joy. The argument that education should instill skills and knowledge in ways that also maximize pupils' creativity, zest, and joy is certainly not new. Riesman (1958, p. 166) has carried the argument recently to the point of stressing the need for some educational "institutions where those who dared to be one-sided would find their gifts encouraged, their values affirmed." Schachtel (1947) discusses how, even recently, formal educational procedures may stultify the child's ability to think for himself, to suspend judgment, and to have the persistence and freedom of thought and imagery to find new ways to put ideas together and his skills to work. From the point of view of a given student's mental health, it is clear that furthering his constructive accomplishments may release him from emotional preoccupations and provide him with resolutions to inner conflicts that have not found amelioration in more commonplace activities. To preserve these aspects of positive mental health is always at least a tangential, and sometimes a central, goal of education. Debate arises primarily around means to this goal.

Interpersonal skills. While there is more room for debate as to education's responsibility for imparting interpersonal skills, schooling

can and does influence such skills and their relevance for mental health is apparent: children need to learn to see the other person's point of view as well as their own, to be comfortable with different kinds of people in a variety of situations, and to cooperate with others when appropriate. Biber stresses that many of these skills can be taught children through relationships with teachers.

She can be to the child a member of the adult community, one of the most important ones in his life, who can connect with him as a person, respectful of his distinctness, attuned to his feelings as well as to his capacities and aware of the importance of his private world to him. Through her he will experience again but differently what he has already lived through with his parents: the taste and the boundary of freedom; the comfort and the irritation of being controlled; the safety and threat of being known. By the way these relations are mediated for each child and by the kind of climate she creates for the 'yeast' of the children's relations to each other, the teacher is in a position to make an impact on the child's image of the adult world into which he is growing. She can also be a force in determining how safe and non-defensive he will feel with people, how benign and without hostility toward himself (Biber, 1956).

Avoidance of mental illness. Chapter IV discussed how the molding of a pupil's environment in school and outside may help avoid or reduce undue strains for him and that preparation for potentially disturbing events may strengthen him to meet those that are unavoidable. Prescott (1957), on the basis of some 15 years of experience with training teachers, feels that extensive changes in educational practice are called for. In the course of discussing needed changes, he mentions that in his opinion many children actually become maladjusted as a result of attending school. Demands upon them are inappropriate to their capacity, maturity, backgrounds, and motivations. Furthermore, many who are already maladjusted go unrecognized and their problems are heightened by inappropriate school management.

Handling of mental illness. Here we only remind the reader in passing that teachers do indeed play various roles with regard to handling mentally ill pupils. The practices in which they engage range from detection and emotional first aid to active forms of treatment (see Chapters III and IV).

TRAINING GOALS AND STUDENTS' MENTAL
ILLNESS AND HEALTH

The seven themes that characterize teacher training give rise, when combined in various manners, to many shades of emphasis. In order to give a clear image of the ways training goals are related to pupils' mental illness and health, we ignore the nuances and discuss training broadly as being primarily subject centered, pupil centered, or teacher centered. Admittedly, curricula within each of the three patterns differ in the weight given to subject-matter, teacher methods, and individual differences in aptitude, motivation, and personality.

Subject-Centered Training

The approach places an emphasis upon the teacher's knowledge of his subject. Those who favor this position (e.g., Bestor, 1953) argue that the best teacher is one who has not had his intellectual life vitiated, disturbed, or otherwise corrupted by any courses in education. The arguments against other kinds of teacher training or against courses in methods seem to fall into two general categories. First, there is the conviction that most courses in education have meager content and really aid the candidate but little in his daily teaching; also, they tend to take him away from materials which might help him further in the mastery of his own field. A second set of attitudes encompasses the proposition that while good teaching is important, it is an art and cannot be taught; it is a knack a person possesses or does not, depending upon fortuitous circumstances of his personality development and his power of expression.

Other individuals de-emphasize the importance of teaching skill, holding that if a teacher knows his subject well, one need pay relatively little attention to his personal characteristics. A more moderate view is that knowledge of subject matter is a necessary though not sufficient condition for excellence in teaching (Lynd, 1950). When the teacher who focuses on subject matter has no exceptional personal qualities, it is probable that he will affect the pupils' mental health only by contributing to their mastery of the environment. If he knows what he stands for and has enthusiasm or perhaps charis-

matic qualities in addition, he may stimulate thinking and also aid in the integration of pupils' personalities; the students' personal identities become clearer either because they identify with the teacher or because they discover something about their already existing identities by experiencing clashes with the instructor's convictions. With or without such an exemplary model, emphasis upon subject matter as a basis for teacher preparation characterizes the subject-centered approach.

Child-Centered Teacher Training

Kandel (1957) in his history of American education in the twentieth century suggests that the single most profound influence upon teacher training was the growth of interest in child development and the inner life of the child. The impact of psychoanalytic theory upon the culture as a whole and the recognition of the importance of the early years of life—years which offered opportunities not only for growth but for personality damage—evoked statements that a teacher ought to have a degree of expertness and autonomy unrivalled by any other professional group in our culture. As has been pointed out by a number of different authors—Kandel (1957), Taylor (1952), Kilpatrick (1957), and Dewey (1956), who was probably the most articulate spokesman—the interaction between the philosophical concept of instrumentalism and developmental psychology also had a tremendous impact upon American intellectual life and upon teacher training in particular. Mental health as a specific preoccupation involving concern for the psychic well-being of both teacher and child was still quite a new idea only 20 years ago. We have mentioned the publication of Carson Ryan's book *Mental Health through Education* (1938). A few pioneers such as Sherman (1934) had preceded Ryan, but often such writings dealt almost entirely with the phenomena of abnormal psychology as they might be observed among students. During the thirties and forties, not only Ryan but later Prescott (1945) and Havighurst (1948) made pleas that teachers have what might be called mental hygiene awareness. This process of making a teacher aware of the individual student as a person who not only is undergoing a learning experience but, concurrently, is going through the total process of

maturation, had a profound effect upon teacher training. These events were reflected on a legislative level by the fact that more and more States began to require courses in educational or developmental psychology as a prerequisite for certification. Possibly the most explicit statement concerning this orientation to teacher training is to be found in a book published by the American Council on Education, *Helping Teachers Understand Children* (Prescott, 1945). Placed above all else is the aim of helping teachers gain a thorough understanding and knowledge of the child, not only in the classroom but also in relation to his parents and the community at large. For example, Prescott describes a teacher without such understanding as saying of a particular youngster, "Emily never listens to what she is told . . . she is not dependable . . . the trouble is that she has never been made to mind her parents" (Prescott, 1945, pp. 12, 13). A different teacher in a later year remarks on Emily's relationship to her nagging mother and alcoholic father. Prescott praises this second teacher, saying "she was interested in helping the child do well in her school work, but this was not her exclusive or even primary concern" (Prescott, 1945, p. 14).

It is a paradox that the demands of the orientation may have created more problems in teacher training than they have solved. The conclusion of Prescott's (1945) book is blunt concerning the limitations of his own child study approach. We feel that we do not detract from Prescott's contribution by making some further criticisms along the same lines.

The key problem that this child-centered approach presents is the degree to which most teachers can actually absorb and make a part of their total teaching the new insights gained from a study of child development. It might be said that the child-study aspect of teacher training brought with it many new insights and many new techniques for seeing and understanding the behavior of the individual child, but this was not accompanied by an equally rigorous attempt to define the role of the teacher in terms of these new responsibilities. This led to a great deal of confusion about the role of the teacher. Having been encouraged to make detailed analyses of a youngster's behavior, having been trained in the necessity to co-ordinate education in school with the dynamics of family relationships in the home,

the teacher feels called upon to "help" the children like Emily who have been so carefully studied in ways that are not necessarily appropriate for the classroom. In opening the teacher's eyes, the child study approach often has failed to specify the way that this new knowledge is best used.

Child-centered training, then, is potentially valuable in enabling teachers to vary their instructional approaches so as to "reach" all their pupils, to create a classroom atmosphere that makes learning, reasoning, exploring, and mastering possible for all individuals. In pleading for more training of teachers about the emotional reactions of their charges, Sarason *et al.* state:

In presenting [new material to the class] some teachers show little understanding that some children respond to new tasks with anxiety and doubts about their ability to master the material. In the extreme case the teacher presents the material in a way which communicates to some children that they should be able to grasp the material quickly, if not on initial presentation. Such a teacher makes it difficult, if not impossible, for a child to make public his lack of comprehension. Most frequent is the situation where the teacher is aware that one must present new material slowly with several repetitions, but . . . the teacher presents and re-presents the new material as if all children approach it in a rational, detached manner. As teachers themselves well know, this is rarely the case. Unfortunately, however, we are not impressed with the frequency with which such knowledge gets reflected in a psychological climate in the classroom in which the emotional reactions of children during the learning process are verbalized, discussed, and managed so as to make possible the kind of comprehension which makes future learning easier and more enjoyable (Sarason, *et al.*, 1960, pp. 274-275).

As Sarason suggests, it is not enough for teachers to have some theoretical knowledge about pupils' emotional reactions. They must apply this knowledge effectively. Thus, child-centered training must insure a more sophisticated understanding of dynamic principles of normal and pathologic development than it customarily imparts. Teachers with such understanding can both avoid exacerbating emotional disorders and also judge when, where, and how to go about seeking help for difficulties which are beyond their province. It is primarily with regard to the twin problems of teaching dynamic

psychology effectively and at the same time defining limits on teachers' use of this vital knowledge that the child-centered approach has foundered.

Teacher-Centered Teacher Training

The most recent trend in teacher training seems to suggest a new emphasis: the teacher rather than the child as the center of the educational process. Representative of this approach are Barbara Biber and her colleagues. Biber (1956) has been one of the most incisive critics of the child study approach. She feels that training in either mental health or personality dynamics has little meaning if the teacher lacks a clear picture of his role so that he cannot judge when it is consistent with his other functions to apply his knowledge of mental hygiene.

Knowledge, skills, direct experiences with children are not sufficient preparation for carrying a stimulating, guiding, supporting relation to children in the orbit of the classroom. This role requires a facility that derives, in part, from understanding of one's self in relation to the reality of becoming a teacher. To individual conferences with an advisor the student brings her personal response to the experience of being a teacher with children as well as her individual needs for improving concrete teaching skills. This relation becomes a core experience for each student's need to arrive at her own teaching role (Biber, 1956, p. 9).

Teacher-centered training grew out of the kinds of criticisms made of the child-centered practices. The teacher-centered position, unlike the concept of a charismatic teacher whose attributes are rare and not helped by formal training other than in subject matter, holds that a teacher can be created. The raw material must include, however, a strong desire to teach, sufficient intelligence, and certain characteristics of personal maturity.

Lest the reader assume that it is a simple matter to select candidates qualified for teacher-centered training, consider the elusive dimensions of maturity, only a few of which are sketched in the questions below, from the list asked about applicants to the training program at the Bank Street College of Education in New York City.

Relatedness to children. What aspect of childhood does the candidate respond to? (spontaneity, ignorance, powerlessness? etc.) How strong is the impulse to protect and support children? To censor? To retaliate? To protect the adult against child exploitations or submerge the adult self for child needs?

Relation to authority. Is there prospective fear, delight, ambivalence regarding taking an authority role? etc.

Emotional strength. How much ease and depth in expressing feeling? In responding to feeling? Would aggression be met with guilt, weakness, fear, anger? How much need for façade? etc.

In addition to knowledge of subject matter, techniques of instruction, and a thorough understanding of normal and pathologic principles of dynamic psychology, two qualities must be instilled through training. First, the teacher needs perspective about himself and some insight into his own dynamics. Blos (1953), and Farnsworth (1955) are two others of many who have emphasized the importance of teachers' knowing themselves. Second, and most epitomizing the whole orientation, he should have a knowledge of his role as a teacher, distinguished from other roles that may be a part of the educational setting. A teacher who is both effective in getting his subject across and grownup as a person is the ideal. Mental health is seen as fostered by the consequence of pupils' interactions with such teachers.

WHEN AND WHERE TEACHERS ARE TRAINED

As American schools were called upon to take over more and more functions, pressures on teachers mounted and the need was felt for additional training beyond that of the standard preservice variety. Preservice training generally has included simply undergraduate courses required for certification in a given locale and practice teaching which may or may not be carefully supervised. We do not attempt to review here the extensive work being done to improve preservice curricular offerings; for only one example, see Keppel (1956). Various sorts of inservice training methods have evolved over the years, that is, additional experiences for teachers already employed. Sometimes it is strongly recommended, if not

made obligatory, that a teacher enroll, from time to time, in courses during the summer or during the school year. These courses may be given either in the local community—perhaps in the school where the teacher is employed—or in a nearby college or university. Because inservice training often is a requirement for advancement in pay or responsibility, the teacher may suffer it in a mechanical fashion and discontinue his studies as soon as a required amount has been completed. But, at its best, it can keep the teacher up to date and in touch with recent research and ideas, both in his particular subject and in educational techniques.

It became increasingly apparent to those who wished to train teachers in what we have called the child-centered types of curricula that merely superimposing post-graduate courses upon pre-service training was not helping in many cases. Before the prospective teacher had worked in a classroom, the child-centered curricula frequently had little interest or meaning. Brief summer courses taken later often did not meet high enough standards or challenge the students with relevant material. In the hope of remedying the situation a great variety of arrangements have been tried for giving teachers additional training, particularly in the areas of developmental psychology and psychodynamics of normal and abnormal behavior, as well as more technical training in remedial work, guidance, and the like. These have consisted of such devices as workshops or institutes where teachers and psychiatrists or psychologists can meet and discuss mental health problems (e.g., Laserte, 1955); courses by psychiatrists for small groups of teachers; internships for teachers in a local clinic; informal conferences between clinic and school personnel (Ackerly, Bernstein, Erwin, and Noble, 1958) or between school mental health consultants and teachers; a mental health training program for an entire school system consisting of courses, films, lectures, and discussion groups (Rankin and Dorsey, 1953); and group therapy sessions for teachers (Berman, 1954).

While not enough is known as yet about the conditions under which such procedures are helpful to permit prediction as to which approach is the best to employ in a particular community with a particular school administration and particular teachers, certain lessons are emerging as worthy of notice (Falick, Levitt, Ruben-

stein, and Peters, 1954). The psychological education of teachers must be accompanied by constant acceptance of teachers' feelings and other kinds of emotional support. It can arouse anxiety and hostility if discussions of particular children include sexual material (Weinreb, 1953) or other matters that may border on some teachers' personal problems. Success of such inservice training ventures depends most heavily on the ability of the mental health personnel to accept and support the teachers in their roles as educators.

As experience increases in techniques of inservice training about mental health and illness, it may become worth considering whether preservice exposure to such topics could not be limited in order to influence teachers when they have been and are being faced with classroom problems. Often they seem then to have more motivation and capacity for raising and recognizing issues than is true of most preservice trainees. Some who teach mental hygiene and related topics both to preservice trainees and experienced teachers report that the most appreciative members of the audience tend to be those with experience in the classroom.

In addition to the many and varied endeavors to give teachers inservice training of the child-centered and teacher-centered types, there are on the horizon new attempts to give subject-centered inservice training. We refer to the suggestion of Keppel (1956) that more experienced teachers be used to train new teachers in subject-matter and teaching methods. If generally adopted, such efforts hold promise of providing the new teacher with help on the job when it is most needed and most meaningful, and of up-grading "career" teachers into supervising "master teachers" benefiting from augmented salaries. Both groups could thus be given encouragement to remain in the profession.

THE IMPROVEMENT OF TEACHER TRAINING

Everyone knows that school teaching in the United States varies widely in quality and that raising the over-all quality is desirable, if not imperative. One avenue to this goal is recruitment of higher caliber prospective teachers. This depends, in turn, on making the profession more attractive, in terms of both financial rewards and

increased status. The movement that is now developing to find ways of restructuring educational organizations so as to provide "career lines" may make advancement to positions of greater responsibility possible. If recruitment can be enhanced by making the profession more attractive, it seems likely that more men will enter teaching. In the opinion of many, the presence in the classroom of more male figures may help some children accept school by offsetting the impression that learning is "feminine" (Parsons, 1949; Liss, 1955) and may offer some balance to maternal influence for those without fathers present or active in the home.

Not only would recruitment be improved by such changes, but morale among practicing teachers would be raised and the present fantastic turnover reduced (about 50 per cent of all teachers leave the profession within five years—an incalculable waste of training and experience). If our goal is the improvement of teaching, however, steps to aid recruitment are insufficient unless we can also step up the quality of teacher training. We do not imply that teachers without formal training in some respect necessarily lack the attribute that the training seeks to instill. The fact that some teachers are "naturals," however, does not gainsay the value of training for others, and it will never be possible to recruit enough "natural" teachers to fill the ranks.

We believe that six of the seven themes in teacher training, listed at the beginning of this chapter not only are important but can be included in training programs without sacrificing others and without making the training any longer or more expensive than at present. Admittedly, the paucity of evidence from well-designed research makes it impossible to be sure that some of the six may not deserve less emphasis than we suggest in the following discussion, but in terms of the conception of mental health followed in this book all six seem essential. Heads of training programs are likely to react with the statement that they already offer such a rounded program. We believe that a large proportion of existing training institutions have in their present programs a course structure that encompasses the six elements, but the coverage of some topics is incomplete. Those topics that do get dealt with are often treated in superficial or obvious ways when they might otherwise be meaning-

ingful and contribute to the teacher's later competence. Often students are not challenged to think for themselves and to become emotionally involved in their career plans and the issues they study.

Subject to Be Taught

First of all, an intensification of emphasis on thorough grounding by teachers in subjects to be taught is needed. Laws may have to be changed in many cases to increase training requirements in subject matter for teacher certification. State departments of education may have to regulate such instruction in those teacher-training institutions unaffiliated with a faculty of liberal arts. For example, they may need to ascertain that an adequate proportion of instructors have had their doctoral training in the basic subject matter and are qualified to teach on a faculty of arts and sciences rather than having been trained by instructors whose own doctoral studies emphasized teacher training instead of a content area such as history or chemistry.

Methods of Teaching

Many teachers will rely on cumbersome devices if they are not given the benefit of the accumulated experience of others and of evidence that exists about the inferiority of some techniques. In passing on lore about tactics of teaching a given subject, time need not be wasted on the obvious; considerable reliance can be placed on the resourcefulness of teachers in discovering or inventing their own procedures later during their class room work. As a result, large amounts of time will not have to be devoted to "methods" at the expense of subject-matter mastery. As for general strategies of instruction, teachers need standard psychological knowledge about ways to maximize the transfer of school learning to outside endeavors and ways to evaluate the outcomes of instruction. They need the fruits of research on handling classes, on techniques of dealing with groups, and on the implications of various types of discipline. We need much more research of high quality on such issues than is available at present. In the meantime we must tolerate wide diversity of practice and encourage new exploration. We can have no expectation that one single teaching technique will eventually be

established as "best." The goals of a course, the kinds of teaching that students have been used to before, the goals, personalities, and talents of the students, and the abilities and predilections of teachers are all relevant in determining the most suitable approach in a given classroom.

Exciting findings are emerging from investigations of the interaction of teaching method with pupil personality (Grimes and Allinsmith, 1961; McKeachie, 1958). Given approaches turn out to be more effective for some students than for others. Soon in the teaching of reading and certain other types of content it may be feasible systematically to gauge students' personality tendencies and assign them to teachers using methods attuned to them.

Differences in Aptitude

Future teachers need to grasp the systematic knowledge we have today of individual differences in aptitude. Correct and thorough understanding of the kinds of information about pupils available from modern psychological and educational tests will enable teachers who later have access to such information to use it appropriately and to avoid misuses of it.

Differences in Motivation

Future teachers need to have a real feeling for, and be "set" toward, recognizing individual differences in motivation and personality. As a result they can guess much better how a given child is seeing things and can influence him selectively. Teaching is not a mechanical process with inanimate objects. The personality of the child must be enlisted in the learning process and inevitably is so even in the most traditional type of instruction, if the teaching is to result in learning. With younger children especially, a grasp of the kinds of misunderstandings children often have about the world and about human relationships may help a teacher be sensitive to them, so that the teacher can help a child straighten out his misinterpretations before they lead to cognitive confusions and interpersonal difficulties. Knowledge of younger children is not out of order even for those who will teach at older levels. Exposure to children of nursery school age, with expert guidance of the observations, can

give a young adult who has seen little of children a dramatic sense of what the raw material of human emotional lives is like. He then knows better what exists under the surface even in older pupils and can take it into account when necessary.

The question may be asked, why, instead of training teachers to be sensitive to individual differences and children's emotional lives, do we not recommend selecting people who already have such sensitivities or who are likely to develop this characteristic when exposed to children in their work. It would be nice if this were possible. To some extent, teachers select themselves in terms of such interests, particularly those planning to teach younger children. The means for systematic selection are relatively lacking, however, and since every teacher who can be recruited is needed, we cannot afford to do much selecting and have to resort to training.

Although a great deal has been written about teacher training and many excellent suggestions made about the relationship of personality development to the educational process, not nearly enough time has been spent, either in education or in allied fields, in determining ways in which these matters actually should affect the tactics and strategy of instruction. To phrase the matter another way, there has been little attempt to put together in a calculated fashion what is known about child development and what is known about learning. For example, not nearly enough attention has been given to determining the time in the child's growth and development when it might be best to focus upon personal factors, social factors, or intellectual skills. Psychoanalytic and psychological literature suggests that there are different times when youngsters' motivations and interests may be optimally involved in the different kinds of learning; far too little in teacher training concerns itself with this idea.⁴ Of course, the classroom teacher cannot apply knowledge about pacing materials with the development of the children until the necessary knowledge is found through research and the curriculum of a school revised accordingly, but the general concept that there may be strategic times in children's development to attack given problems can be taught to future teachers so that they become hospitable to curricular changes as these grow out of research.

Mental Hygiene

Teachers need knowledge of mental hygiene. They need to understand individual differences in the presence of inner conflict and the ways of resolving it. The sensitivity gained to pupils' reactions will contribute to mental health directly as well as to instruction.

By giving teachers information about mental health we can make them aware of the distinction described in Chapter II between conformity and adjustment and of the steps of intervention outlined in Chapter III. Thus they can be much more clear, for example, concerning the distinction between diagnosis and detection and can avoid implicit diagnostic and prognostic decisions that may unthinkingly label a child in such ways that avenues of help for him may go unrecognized. In those instances where a pupil is undergoing professional psychotherapy, the teacher, instead of having the unsympathetic reaction, "There is something wrong with that child," may understand his own role and the limits within which he can be sympathetic without surrendering the academic standards of the school. As a result, also, he may be better able to cooperate effectively with the therapist.

The teacher himself, of course, needs to be cautioned about the use of psychotherapeutic techniques. The distinctions between the teacher's role and that of the therapist should be emphasized so that the teacher advising a pupil does not slip into a deep therapeutic involvement that is incompatible with the teacher's function and skills. Specific ways of avoiding such involvement can be taught. At the same time, teachers can learn how at a time of crisis to give a pupil emotional first aid in order to circumvent the need for later psychiatric intervention.

The point is that, beyond the contribution of instruction in its own right to students' emotional well-being, the teacher does have possible functions that bear positively on mental health such as encouraging creativity and some normal degree of social responsiveness. He has the negative functions (whether or not pupils' illnesses affect school learning as they so often do), of aiding in detection, giving first aid, in some cases co-operating with the therapist, and helping in the prevention of ailments or the preparation of chil-

dren for anticipated stress. While we need research on the best ways of communicating the necessary level of understanding, enough is known to justify intensification of training about mental hygiene either at the preservice or inservice level or both.

Self-Understanding

Perhaps the most crucial aspect of training other than instruction in subject matter is the communication of issues about teachers' roles. In helping the teacher become clear about his own role, there must be effective discussion concerning the functions of schools as institutions and the duties of other agencies whose proper responsibilities are now sometimes allocated to schools.

We suggest that the kind of thinking revealed in the work of Zander, Cohen, and Stotland (1957), as well as in the attempt made by Merton, Reader, and Kendall (1957) to understand the problems of socialization within the medical profession, be seriously considered by those who are concerned with teacher training. The work of Merton and his colleagues discusses the changes in perspective that are brought about in the student physician by different segments of his training. Medicine has realized that the mere fact of being a student physician is not sufficient to inculcate professional attitudes; such attitudes are developed in specific interactive situations. The teacher, like the doctor, must learn to interact with fellow professionals (in the case of the teacher, with guidance personnel and others) who are concerned with the same client but from a different view. Perhaps specific steps in teacher training could be incorporated to convey the teacher's professional role.

In addition to helping the teacher become clear about his role and that of others who have responsibilities for pupils, it is important for teachers to become aware of their own values so that they can sense their biases. If a teacher is emotionally secure enough to be honest with himself about his imperfections and thus to allow some preconscious feelings to be recognized, he will note—for everyone has such immature reactions even if he deceives himself about them—that at times he finds some pupils he much prefers to others, and that at other times he actually dislikes some of his pupils. The assumption of most people experienced in the field of mental health

is that awareness and self-acknowledgement of bias helps one to correct for it and that such awareness may be enhanced by means of skilled supervision during early teaching experiences.

Special Subjects

The one area of teacher training that we would restrict at present to those with special interest and particular ability is that concerning subjects such as family life and human relations education. We believe that these courses must be of especially high quality and that they need people with imagination who can try new ways of teaching them. We also need people with some research sympathy who can help educational investigators study the merits of various approaches.

SUMMARY

Other than problems of recruiting able and motivated trainees, the chief troubles with many present training programs for teachers have been inadequate requirements in the basic subject matter to be taught, low quality and incomplete coverage in some of the courses in "education," and failure to communicate a realistic image of the functions of teacher and school in our society. In this chapter we have traced seven attributes of teachers that may be acquired through training, and the consequences of these for pupil health. We conclude that, despite the existence of some teachers who do well with background only in subject matter, teachers as a group need certain formal training. Even the "natural" teacher will benefit. From the viewpoint of mental health, grounding in the subject to be taught ought to be accompanied by training in: techniques and materials for teaching given subjects; philosophies and psychological principles of instruction; range and nature of differences among pupils in aptitude and motivation; and personality development and mental hygiene coupled with emphatic clarification of the teacher's role as opposed to that of psychotherapist. This list sounds formidable, but the requirement of such training need not eclipse teachers' mastery of basic subject matter. The list can be encompassed in a very few courses provided that they are well-designed, vividly taught, and rigorous in the demands made of the candidates.

Special Types of School

IN THIS chapter we discuss special kinds of schooling that can be particularly valuable for some students under certain conditions but may be less desirable under others.

NURSERY EDUCATION

The potential contribution of nursery schools to the nation's mental health is enormous. Yet at present many such schools fall far short of the ideal characteristics we define below, and some children are better off not attending even a well-run school. Because lack of information about early childhood education is frequent even among otherwise informed adults, we deal with the topic in some detail.

A forerunner of "schooling" for children below kindergarten age developed in the United States during the last century in the form of day care centers (*crèches*) where working mothers left their children. The goal was custodial rather than educational. In the present century the modern nursery education movement was initiated and new aims were added. Even where there are new goals, however, the custodial function in itself remains a major feature of day care centers and commercial nurseries.¹ We still have working mothers, and many mothers who do not hold a job find it desirable for their own mental health to have hours of surcease from child care. Indeed, the child as well as the mother may benefit. He gets away for a time from his mother's tension and from any difficulties with siblings or others with whom he lives.

We shall now describe a number of additional kinds of contribution that nursery education may make to a child's development. Nursery schools vary greatly in their plans of operation and their

potential for making these contributions. Before we will know under what conditions given benefits can be obtained, far more controlled research will have to be done in which the differences in methods used in various schools are taken into account, as well as differences in intelligence, maturity, and social background of the children attending. While lasting gains in social maturity have been shown to result (Thompson, 1952), evidence suggests that most benefits may be confined to pupils in schools of exceptional quality (Bonney and Nicholson, 1958). Probably, well-run schools are of substantial benefit in at least some of the ways described to most of the children enrolled. If this is true, the propagation of nursery school efforts of adequate quality will be a major step forward in the fields of primary and secondary prevention of illness, as well as in the promoting of positive mental health.

Preparation for Transition to Regular Schooling

Many children attending school for the first time have problems of separation from close contact with the mother. Some boys and girls do not find the transition easy and may develop academic difficulties, especially when they start first grade without having been to kindergarten. The experience of going to nursery school a part of each day may aid in the later adaptation to the more formal instructional requirements of first grade by giving the child an extra year or so to become at ease in a larger world. Also, among his new companions in nursery school a child may discover more congenial friends than happen to be available in the immediate vicinity of his home. These friendly attachments can dilute excessively close parental ties.

During the first years of life a child has a certain security and being able to take his status in the neighborhood for granted, to ascribed in terms of such factors as age, sex, and family membership. A characteristic of our society is that at school and as despair status must be achieved. Even though ascribed status still exists, why may bring with it some degree of favoritism or discrimination? A child is rare who is not threatened by anxiety when the chance arises to win his place. Among the causes of anxiety is a child's uncertainty about his classmates' feelings.

reactions. Observers repeatedly describe the tense preoccupation many children show with their social position at school and the bad effect this worry may have on school work. By enabling a child to get used to competition for status (Parsons, 1957) and become at ease with his peers, nursery school is said to reduce the chance for academic difficulties later.

Kindergarten experience, of course, may make the same kind of contribution as nursery school in this and several other respects. The proponents of schooling prior to first grade would tend to say that providing nursery schooling in addition to kindergarten amounts, in respect to the overlap in goals, simply to providing more of a good thing.

Another aspect of the transition to regular schooling provided by nursery school is the child's gradual acquaintance and familiarity with the inevitable routines of a school environment: the presence of peers, the heeding of instructions uttered to the group, the novel practices of singing in unison, answering questions, or describing events before many others, and the use of school equipment.

The responsiveness of the child to these demands, his capacity to pay attention, and his relative freedom from the tensions that children new to group situations may feel about their capacity to deal with their peers provide useful evidence about his readiness to go on to kindergarten, or about in which section he ought to be placed—far better evidence than may be had from a single interview, observation, or test. Unfortunately, the records from private nursery schools are often not made available to the officials of the public school the child later attends.

the
cent. *Enhancement of Social Skills*

and in addition to mere comfort in the presence of peers, the child's own may influence the behavior of others in peaceful ways and to the child, to actively in cooperative work or play may grow under time from age of helpful adults who know how to teach such skills or others, bling, disconcerted preschooler.

We share children, however, nursery school may provoke more bution than it resolves (Pearson, 1954). They are unready for Nursery playthings and conforming to social requirements. The

consequence may be antagonistic behavior. At the same time, the play equipment of a well-equipped nursery school usually affords less fragile outlets for aggression than most homes.

The direct or indirect teaching of politeness and of conformity to various customs may be less important in a child's development of social effectiveness than the acceptance of him as an individual, fostered both by adept handling of the group and of the given child. The youngster needs the freedom to stay by himself or play by himself at times; and overemphasis on peer group action can defeat other aims of the school (Martin, 1957).

General Intellectual Stimulation

A major advantage of nursery education is held to be the enrichment of the child's experiences it offers. The variety of children's books and songs to which the child is exposed, the range of art media, the quantity of building blocks and apparatus for outdoor play, and the space available far exceed the facilities of most homes. In a professionally-run school the choice of reading materials and equipment is not haphazard. Experience with young children has given rise to a definite "curriculum" for nursery education (Read, 1950), one that gives a child a new sense of mastery of the environment and of himself as he learns new skills. The potential importance of such gains for the mental health of the very young has been expressed by Susan Isaacs:

One of the biggest sources of trouble for the little child is precisely that at the time when his need to make things better is the most intense and urgent, his skill in doing this is so much less than the ease with which he can destroy. At eighteen months and two years it is so easy to dirty, to knock things down, to make a mess with one's food, to scream and shout. It is so difficult, indeed, almost impossible, to make things clean, to build and draw, even to speak or sing in a way that brings pleasure to oneself or others. Many children are overcome by the sense of the insufficiency of the good within them to counterbalance the bad; and this despair very largely rests on this real lack of skill and knowledge. This, again, is why children so often have to play at being bigger and wiser and cleverer than they are. They have to be on top of things in imagination because they do not know how to achieve in reality. Provided their faith is kept alive, however, this contrast lessens step by step. One of the biggest changes

that occurs in the child between one and four years of age is the growth in confidence in his own skill and in the possibility of real achievement, whether in making things or speaking or giving pleasure to others. Everything we can do to further the child's development of bodily skill, of artistic expression, of confidence in his power to help others and gain pleasure from their company, will aid his struggle with the destructive forces inside himself, and carry him out of the despair that confirms him in his destructiveness and defiance. Tantrums and obstinacies and night terrors thus gradually get less, not so much by the direct comfort we give to the child at the time, as by the indirect support against the very source of these things, which he gains by his normal growth in the arts of life. Much could be said about the immense psychological value of the little child's play, and of all his impulses to learn and to do. Many of you are already familiar with the remarkable changes in health and peace of mind which a good nursery school will effect for the child of three or four years. It does this by means of providing the right materials and the right opportunities for the child's own normal impulses to skill and achievement, thus giving him a profound reassurance against his inner doubts and difficulties and depressions (Isaacs, 1952, pp. 191-193).

The Nurturing of Creativity

A major impetus that led to the development of modern nursery education early in the present century was the wish to offer a climate in which a child's spontaneity could be preserved and in which his joy in discovery and pleasure in mastery of new opportunities could flourish. An example is the abandonment of traditional practices in art education such as asking preschool children to paint or draw particular objects or scenes. It was felt that the pupils' ineptness often discouraged them too much; they lost enthusiasm for artistic efforts and later showed great stereotypy in their products. The claim was made that such inhibitions were avoided when young children were allowed to do as they wished with the media and that this freedom did not prevent the acquisition later of the precision required in certain more constrained forms of artistic endeavor. It is not suggested that the pupils should be misled about adult standards; a teacher can accept their efforts without becoming one who, as Peller (1956, p. 443) complains, "shows lavish admiration for any scribble."

The notions of capitalizing on the child's natural richness of imagery and feeling and taking advantage of his curiosity as a

motive for learning were not confined to the creative and expressive arts. No matter what the subject matter, an attempt can be made to rely upon the child's interests for cues about how to approach him and about what topics to introduce at a given point. Such a focus on the child's needs has sometimes led to a lack of firmness on an inadequately trained teacher's part in imposing the discipline that young children require at times to help them control themselves when they become anxious, tired, or upset. Sometimes, too, the carrying into later school years of the effort to individualize instruction gives rise to situations with which only a remarkably well-staffed school can cope. These facts do not gainsay the advantages of methods in the nursery school that make learning in school both pleasurable and meaningful and lay a base of positive feelings and expectations about kindergarten and later years.

Some parents nowadays give a child at home the kind of freedom at which nursery schools pioneered. The child with such leeway at home may gain little from similar chances at school.

Nurseries have their best results when they do not duplicate the educational efforts made at home but extend or supplement them. Where home life is free and easy, the child will benefit from directed occupation and the orderly routine of a nursery day. Where the child's life at home is regimented and devoid of outlets, only the opportunity for free, undirected play activity in the nursery will be beneficial. Educational toys and working material in the nursery will be most useful to those children who lack toys at home, free movement and outdoor activities to those who live under cramped conditions (Anna Freud, 1949, p. 36).

Direct Mental Hygiene Goals

We refer here not to those specialized nursery schools that deliberately enroll disturbed or emotionally-deprived children with therapeutic intent, but to the ways in which schools with normal pupils may contribute to the prevention or alleviation of illness. The child worried about his place in the group, about separation from his mother, about difficulties with a sibling, or about such common anxieties as incorrect notions concerning childbirth or death may express his feelings directly or symbolically in dramatic play. A skilled teacher can sometimes aid him in bringing out his disturbing

ideas and can often reassure him by answering his questions or showing him that he is cared about and can count on help. In other words, the situation is ideal for trying to circumvent or dampen disturbance by doing both preventive work and first aid for mental health (Chapter III), as well as offering a chance for the early detection of incipient problems that may require referral. At the same time, such an adult is ready to help the child apply brakes to his behavior when necessary and to control the expression of his feelings. The ability of a teacher with special training to read a child's "language of behavior" is particularly important. If a youngster's anxious or repeated questions suggest that he is overinterested in knowing whether a car's bumper can be fixed, he may be concerned about physical injury and can sometimes be reassured about dangers whose severity or probability he overestimates.

The typical nursery teacher is not equipped to deal with imaginings of the sort described except by tolerating them courteously and, when their meaning is manifest enough to be inferred by an untrained person, to give correct information. But there may be benefits even when latent meanings are ignored. A teacher can accept dramatic play without doing play therapy (Read, 1950). Sometimes just the change from the home setting seems to be of benefit: according to Isaacs (1952), Freud (1949), and Read (1950), it is often observed that a child who has eating problems at home and who attends a nursery school where luncheon is served in the school context loses his eating problems. When the limits set on the child's behavior at home have been too strict or enforced in too humiliating a fashion, or when he has been indulged too much by his parents or has been too much the focus of attention, he may get at nursery school a valuable experience with standards outside the home. Unlike the situation in later years of schooling when a focus on goals of preventive mental health may conflict with academic aims, in the nursery school setting and in kindergarten there need be no such conflict since direct instructional goals are minimal.

A particular way that nursery schools may contribute to pupils' mental health is by the understanding of child development and of mental hygiene that a parent may gain from conversations with a

teacher if his child attends a school run by well-trained, professional nursery educators. We have pointed out earlier (Chapter III) the amenability of young children to help through environmental manipulation; their emotional conflicts are less fixed than those of school-age youngsters and their ways of responding not as crystallized. We mentioned, too, the capacity of many parents to apply advice or new information. The chance for parent education is especially good because parents are often more actively involved with their children during the nursery years than later, because the nursery school is so manifestly aimed at helping with personality development more than (as the kindergarten) the direct promotion of readiness for academic instruction, and because the ratio of children to teacher is low in a properly staffed nursery school.

Training and Research

An additional justification offered for nursery schools—at least in university communities—is the opportunity for the training of specialists in early childhood education and others who can benefit by observing and interacting with normal children of nursery age and experiencing the vivid human emotions—fear, joy, envy, curiosity, longing, rage, bewilderment—that often underlie the more camouflaged behaviors of older children and adults.

The gradual process of coming face-to-face with their own positive and negative feelings toward themselves and toward young children's behavior and impulses, results, in most instances, in a student far better equipped for his chosen career, whether it be in the theoretical or applied fields (Schoellkopf, 1959).

Training of this sort has been given to such varied professionals as residents in pediatrics and psychiatry, pediatric nurses, and students of clinical psychology, school psychology, human development, home economics, and social work. Those preparing to teach at the elementary and secondary levels may also profit; Anna Freud (1952) has pointed out the value of such experience for classroom teachers. If we had enough professionally staffed nursery schools, any high school student or undergraduate looking ahead to parenthood might,

indeed, be a suitable candidate for such exposure, as might also the legion of children attending junior high school who are beginning to baby-sit.

Still another helpful function of nursery schools has been their contribution in providing a supply of research subjects to investigators of child psychology and personality development—subjects too young to be available in groups otherwise. But no one would seriously advocate that a child who had any alternative attend the occasional university school where the function of helping the pupil may perhaps be subordinated too much to research goals. A school needs a strong director empowered to maintain the integrity of the organization against an excessive influx of researchers.

Criteria for Evaluating a Nursery School

Number of hours per day that children attend. Children differ in terms of the number of hours of school per day that are appropriate. Experience indicates that most children age three or four are usually not mature enough to benefit by going for the entire day. Many schools that enroll pupils for the whole day probably set only custodial goals: the caretaker who is conscientious will necessarily try to fulfill the youngsters' needs for a mother during the long day and cannot maintain the somewhat greater distance that differentiates the teacher from the mother.² In effect, establishments aiming at day care seek to provide a substitute for the home, whereas the true nursery school adds to it.

For children of two and one half or younger, attendance at a regular nursery school is ordinarily contraindicated unless they take part in special groups with sessions lasting only an hour or so. As a transition to regular nursery schools, such an introductory experience may have the advantages of increasing both the child's readiness for going to nursery school the following fall and of testing it. Another gain is the possibility of dealing with developmental disturbances even earlier than the usual nursery school ages. This is a stage, for instance, where children whose rivalry with a sibling is causing excessive bitterness or regression may be helped to cope more maturely with the problem before the reactions have progressed far.

Number of pupils per teacher. One teacher is ordinarily needed for every seven or eight children, although when all those enrolled are over four years old, as many as twelve youngsters can sometimes be managed. If a teacher has to deal with an excessive number, too much time is consumed in the routine management of activities: the tying of shoes, the pulling on and fastening of boots, the struggle with recalcitrant zippers and snaps during the donning of layers of winter clothing. The goals of the school must be reduced when so much professional attention has to be devoted to such duties, and too heavy a disciplinary hand may be applied to keep control.

State laws or policies of health departments vary, but even if no more children are enrolled than one adult can handle, there has to be a second, not necessarily trained teacher, available in case of an emergency such as a child's hurting himself. When two-year-olds attend, there should be a teacher for every three or four children (Buxbaum, 1949).

Total number of children in a group. The presence of enough teachers for the number of children attending does not justify assembling a large class. Experience indicates, for example, that 20 three-year-olds is too many, but the same number of four-year-olds may not be.

Do the children enjoy school? A parent choosing a nursery setting for his offspring could probably visit the school to make this judgment. Of course, almost all young children feel strange early in the fall and such an estimate is unreliable. The mothers of other children who attend the school can often give useful evidence about whether their own children like school and benefit from it.

The school's facilities and equipment. The criterion here is the extent to which there is an improvement over those available in a pupil's home.

The amount of freedom given the children. Perpetual chaos creates anxiety, but restraints and demands can be excessive and cause tension or cramp development. One basis for judging that the children have adequate freedom would be a lack of pressure for representational art work. Another would be the devotion of a relatively small amount of time and concern to keeping pupils and equipment orderly. There should, however, be enough order in the routines

followed, in the rules enforced, and in the location of materials to provide a comfortable structure. Children will be deprived of someone to emulate and may become anxious if the teacher too often abandons the adult role and literally or figuratively gets down to their level. Peller describes the nursery teacher who goes too far in this respect:

She may sit on the floor while telling a story, although this is uncomfortable for her, makes her squirm, and makes it harder to hold the attention of her listeners. By eliminating the traditional aura surrounding the function of the teacher, by dispelling the awe and the projections of the young school child, it was hoped to eliminate anxiety and to solicit the child's fuller participation in the school program and a more relaxed use of his abilities. This expectation failed (Peller, 1956, p. 443).

Enrollment procedures. Before accepting children as pupils, agents of a well-run school will make a practice of meeting both parent and child. As Biber has pointed out in a Bank Street publication, not all children of a given age are ready for nursery school; many may be too immature in one respect or another. Such children, when separated from the mother, should be left with a warm, attentive sitter or neighbor who will be a substitute mother rather than a teacher who has more divided responsibility and maintains more distance. Other children, although mature enough for nursery school, have such varied facilities, companionship, and intellectual opportunity at home or in the neighborhood that their need for early childhood education is minimal.

When nursery attendance is discussed between school official and parent, the possibility needs to be considered that the young child may interpret his being ushered from the home each day as a rejection. This risk is greater under certain conditions; for example, a younger sibling may be envied and seen as favored when he gets to stay home with mother while the older child is hurried off. If possible, the beginning of a child's school experience should not coincide with other challenging events such as moving to a new neighborhood. The child should also have a chance to visit the school prior to the onset of regular attendance in order to know something of what to expect. The parent will be advised about

appropriate management of such factors, provided that the school has a trained and experienced staff who are not oblivious to sources of potential distress.

The Training of Teachers in Nursery or Early Childhood Education

Training gives a nursery teacher both essential supervised practice and the benefit of others' accumulated knowledge about the effective ways of coping with young children in groups and in the handling of frequent, and often severe, individual problems, such as that of helping both child and mother become comfortable when first separated. (On the latter point, most good nursery schools nowadays allow a mother to stay with her child to reassure him during the first days of school (English and Pearson, 1955); the teachers are versed in the tactics of resolving separation difficulties without residual upset.)

Stone and Church have this to say about the qualifications of an early childhood educator:

A preschool teacher has to know about a great deal besides children. If she is going to deal with the cosmic questions her pupils ask—about God, Santa Claus, Jesus, death, and life—she is going to have to be prepared in advance. Apart from metaphysics, she will have to cope clearly and honestly with such issues as what happens when you flush the toilet; why did Mommy go and is she coming back; tell me about when I was a baby; . . . and a variegated host of questions impossible to predict but essential to anticipate. She can convey by her answers that learning is exciting, or that grownups are stupid, or that the world is full of fascinating mysteries, or that curiosity is dangerous and the child had better learn to keep his ideas and questions to himself.

It is evident that the teacher's qualifications are more than intellectual. She will do well to have an abundance of physical stamina. Keeping pace with a pack of preschool children can be a strenuous business, especially at those moments when they all decide to go their separate ways at full speed. She must be prepared to suppress her fears or revulsions when the children present her with pet mice, frogs, snakes, and other fauna (or pieces of them) that she might otherwise find unattractive. She must be more or less shockproof, but this does not imply a lack of emotion. She will have occasion to become angry, but in an adult fashion. She will inevitably be moved to occasional laughter, but a sympathetic laughter in which children can share, and not a laughter that makes them feel ridiculous. She will have

her irritable days and her depressed days, but without imposing her moods on the children or expecting that they be overly sympathetic and considerate. *Unlike a mother*, the preschool teacher keeps the children's needs in the foreground, for the most part subordinating her own interest to theirs. Even while a preschool is helping its pupils to grow it remains more child-centered than any home could healthily be. It would seem, in effect, that the central qualification of the preschool teacher is maturity, but a special form of maturity responsive to childhood and its magic (Stone and Church, 1957, pp. 199-200).

In exceptional cases the training of nursery school teachers includes intensive study of psychodynamics and both the principles and practices of mental hygiene. When teachers have had training of this additional sort they can set goals most nursery teachers should eschew.

In 1951, 10 per cent of cities in the United States had nursery schools as part of the public school system and there were many private schools.³ All indications are that the number of both public and private schools has grown since then and will continue to grow. However, the difficulty of keeping up with population growth in regard to elementary schools and kindergartens may retard the expansion of public nurseries.

Many present-day nursery schools are cooperative arrangements set up by the parents and staffed by the mothers themselves for lack of available trained personnel or of funds to pay them. Even untrained teachers can fulfill some of the goals of nursery education, but they are unlikely to achieve some of the other goals. They may exacerbate separation problems and other difficulties by failing to take into account the nuances of the given case and by improvising solutions unsound from the standpoint of present knowledge. When the parents of the "co-op" have hired an exceptional nursery teacher who is both professionally trained in child development and able to deal with adults in addition to children, the cooperative arrangement offers the advantage of direct involvement of the parents in the management, if not also in the teaching, of the school. As a result, more wisdom and perspective about child rearing and more understanding of given children can be communicated than may be the case when the parents see little of the school and of the teacher.

Participation of parents as teachers assisting the one professional teacher may have disadvantages, too; for instance, occasionally one of the mothers is manifestly unsuitable in the role, but may be hard to dissuade.

In general, when choice is possible, parents will prefer to have their children attend a school with trained teachers. This is particularly so for children under four years of age and for children with intense emotional problems. The risk of having an unfortunate experience is always greater in the case of an immature or somewhat disturbed child.

The profession of early childhood education, through the National Association for Nursery Education and its regional and local affiliates, is striving to raise standards, make them uniform, and regulate both public and private nursery schools by law as is already done in some states. It may be hoped that as a result, custodial enterprises will be raised in quality to the level of true nursery schools with a corresponding benefit to many children.

PRIVATE SCHOOLS AND RESIDENTIAL SCHOOLS

The place of private and parochial schools on the national educational scene has long been a matter of debate. The extreme advocate of public education makes the point that the private school vitiates the funds available to the public school. In those areas of the country where there is extensive parochial education, parents quite naturally are not as much in favor of higher tax rates to support public education when they have also to shoulder the burden of paying for parochial education. A similar argument against the secular private school is that influential people have lost interest in public education and are indifferent to financial support for public schools since they are sending their youngsters to private schools. In addition to this fiscal argument, there is a plea made that our young people ought not to be exposed to such differential experiences within a democratic society; that private and parochial schools breed snobbery, or suspicion of other religious or ethnic groups, and, in general, perpetuate a divisive influence in American life.

The argument in favor of parochial education is that a person

should be permitted to follow the dictates of his conscience and his religion. If his convictions require that he send his youngster to a parochial school, the decision is his privilege as well as his responsibility. Proponents of both the private and parochial school insist that the control of the youngster's education and his nurturance are a fundamental right of the parent; that while it is proper for the state to legislate matters of attendance and matters of standard, it is not the role of government to tell the parent precisely how the task is to be accomplished.

American education is characterized by its diversity; the private and parochial school are part of our national life. Advocates of the private school stress the importance for the total educational scene of guaranteeing such diversity through the continuing existence of independent schools. In theory at least, the good independent school is free to experiment with new methods, to focus on one or another aspect of training, to choose its students, to keep classes small, and to hire talented teachers. Potentially it can thus stimulate and lead education generally.

Admittedly, not all of our independent schools are of the caliber to qualify as leaders in education. The role of the private school in the United States has always been and still is highly ambiguous. It has not existed, as in England, with the specific goal of training young men for public service. Some of our private schools have had as their *raison d'être* satisfying mobility needs of socially striving parents. Military schools have often been chosen to "straighten children out." Sometimes the expectation is that a private school curriculum will impart sound study habits and assure the pupils entrance into colleges of high academic standing. Now, as in the past, private schools are sometimes elected to cope with various kinds of academic and emotional "problem children." In places where parents judge public schools to be inadequate, they may elect private education not so much for what it can provide as for what it can help their children to avoid in the way of overcrowding, poor facilities, double sessions, and so on. In actuality, however, there are great discrepancies in quality among independent as well as among public schools.

If one wishes to make a judgment about the mental health im-

plications of private school for a given child, the first question is, of course, why send him? Obviously a child's feelings about going to any private school will depend on why he thinks his parents are sending him, and what this means to him.

Inseparable from this first question in the child's own mind will be: what sort of a place is the school, and what will life there be like? Is the choice that of a day school where he sees his family each evening, or is it a boarding school where the separation may be more extreme and his dependence on teachers instead of parents may be much greater? What does greater separation mean for this child? Rejection or punishment? A chance to be on his own at long last? Actually, what are the faculty like as people and as teachers? Will he be isolated from members of the opposite sex or is this a coeducational school? What is the present and future import of all this for him?

Some have argued that separation of the sexes at adolescence enhances scholastic accomplishment, and others state that casual interaction with the opposite sex is more "natural" and forms a better foundation for later life. It has been said that residential coeducation, in contrast to day school coeducation, can create for the adolescent an undue amount of sexual tension if the school's practices minimize chaperonage. In reaction to anxiety over being given considerable freedom in certain such residential settings, some children may develop a kind of avoidance behavior in relation to the opposite sex, while others may learn to live comfortably and cooperatively with both sexes, and thus become ideally prepared for their future roles as responsible adults. Proponents of each of these outcomes have argued similarly about the advantages and disadvantages of separating the sexes at the college level too, but there is as yet little research on the question.

What advantages does the child see for himself, now and in the future, in going to the private school or the public one, and are his ideas at all realistic? Are all his peers in private school, or is he the only one leaving "the gang?" Does he adapt to change easily, and if not, is the strain of a new way of life going to be worth it? Is he capable of coping with the particular school's academic standards, and if not is it a question of his needing remedial or psychothera-

peutic help? Is the school equipped to deal with his outstanding academic ability or exceptional lack of it? Is his home situation so unhealthy that separation from it would be beneficial? Here, then, are a few examples of some questions to be explored in estimating the implications for a child's mental health of choosing a particular private school.

SUMMARY

In this chapter we have described the many advantages attributed to nursery education and have discussed the conditions under which children are likely to benefit from such experience. Then we have stated some of the issues about private and residential schools.

PART TWO

A Field Study

BY

W. CODY WILSON

AND

GEORGE W. GOETHALS

in association with

IRENE A. NICHOLS

FAY VOGEL BUSSGANG

Introduction

THE SECOND part of this monograph is a technical report that deals with the results of an investigation of some factors we feel to be relevant to the issue of mental health and the schools. Although the first part of this book is a commentary upon the literature pertaining to mental health and education, the pages which follow are an attempt to explore some of the issues found in the literature through basic research.

One persistent theme, we discovered, was what has been called "the problem of shifting and conflicting expectations." The American school has been asked to accomplish a great variety of tasks and its teachers to fulfill many roles. These have shifted and changed as different values became predominant in our social philosophy. These many responsibilities and roles bring with them corollary pressure and stress. Because of the shifting and conflicting expectations, both the school as an institution and the teacher as a person may find themselves in a position of profound ambiguity, which in turn can also contribute to stress.

It was decided to investigate this situation in a systematic fashion.¹ Although there existed many alternatives for "field work," most of them, despite their value and demonstrated worth, could not be accomplished during the span of time Congress had allotted for the Joint Commission's work. For example, the extremely sophisticated and multidimensional approaches to mental health, education, and community represented by such undertakings as the St. Louis Community Project (Domke, *et al.*, 1953), the work of John Seeley and his associates in Canada (1954, 1956), and the Wellesley human relations project (Naegele, 1955) could not be duplicated. All of these undertakings were able to accomplish their many missions because

they were 'relatively long term. Thus, we defined our problem to encompass a relatively modest, but we hoped highly symbolic, undertaking.

One of the most trite conventions of an applied science is the plea for "basic research" or the comment that "basic research is needed." Unfortunately, this plea often remains on a level of sophistication and depth which can only be called "behavioral science gamesmanship." It is the comment to make; it is the ritualistic corollary to many articles, monographs, and books. Yet often those who plead the loudest for research are those who are most impatient with its process and are most unmoved, to say nothing of unimpressed, by its findings. We decided to heed this plea and carry out a fairly formal research on an aspect of mental health. The findings, we feel, can best be described as suggestive, but it is our hope they may be of value in illuminating some aspect of the situation as it presently exists for the American school and the American teacher. We have also tried to plan this research in consonance with the present preoccupation with conserving mental health; thus, our research is intended to analyze some of the stresses and pressures in the American school and to offer some guidelines to future troublespots.

The matter may be viewed in an alternative way. Mental illness is often described as consisting of two related phenomena: predisposing factors and precipitating incidents. The focus of our investigation is with the former, with factors which *could* at some future time, if increased and maximized, create a very serious problem for our schools. Such a design of necessity limits us to a concern with the functional aspects of mental health and possible illness and our findings should be viewed within this scope.

It should also be remembered that we have no way of knowing if these particular predisposing factors can ever reach a level of intensity extreme enough to produce illness, yet we feel we may have shown some of the dilemmas and troublespots which exist even in a healthy school community and that such information should be of some value to those committed either to education or to the mental health profession.

The research reported here can best be described by stating at the outset a comment made in the following chapter:

The approach . . . is not typical of mental health research. This study, rather than observing an abnormal or unhealthy situation and either making suggestions for treatment or drawing generalizations that may be applicable to more healthy situations, examines a normal, relatively healthy situation for potential trouble spots, with a view to taking preventive action. The two public school systems whose personnel furnished much of the data are not "sick" systems. They perhaps are not typical, for they do have regional and even national reputations for educational excellence; their bias is in the direction of health. Similarly, the college seniors who supplied another large portion of the information are representative of institutions which, though perhaps not typical, can hardly be diagnosed as anything but healthy (p. 182).

There are many whom we should like to thank for their help and support during this undertaking. In particular, we should like to acknowledge the free hand given us by Francis Keppel, Dean of the Graduate School of Education, Harvard University, and Dr. Jack R. Ewalt, Director of the Joint Commission on Mental Illness and Health. Their confidence in the authors and their willingness to permit us to proceed without interference allowed us to accomplish within a relatively short span a task which would have been otherwise impossible.

The research was a cooperative effort; it is impossible to acknowledge or to differentiate the contributions made by the senior authors and their associates. The usual lines between junior and senior staff become extremely blurred in the actual operations of a research and no acknowledgement can ever be sufficient to those who have been involved. We should like, nonetheless, to thank Sandra Beberman, Maureen Donnelly, and Donald Hardy, in particular, for their many contributions to the planning of the research and to the analysis of the data.

Sources of Potential Tension in the Public Educational System

AN OVERVIEW

ALLINSMITH AND GOETHALS in their article, "Cultural Factors in Mental Health," state the following:

A helpful way of defining circumstances under which a person becomes mentally ill is to talk of four conditions that necessarily occur. Illness, of course, is a relative concept. No one is ever either perfectly healthy or completely ill in all respects. For our purposes, illness is defined as the presence of signs of psychopathology or symptoms. The criteria are:

1. The person is in emotional conflict. Two of his ideals, needs, or goals are incompatible. If he is to satisfy one, the other is blocked. In actuality, a person often has several needs involved in a conflict or is in more than one conflict situation at once.

2. The person is unable to solve the conflict rationally. That is, he cannot find a detour to his goal or a way of surmounting the barrier, or he cannot discover a direct or symbolic substitute satisfactory for the blocked need.

3. The tension produced by the conflict leads to anxiety. He develops the feeling, "I can't stand it," and he fears becoming rattled, panicked, disorganized, or losing control of himself.

4. Having become anxious, he then either remains chronically so, with anxiety and its physiological concomitants as his major symptoms, or he resorts to immature, irrational methods of solution that relieve the anxiety. These immature solutions may or may not indirectly solve the original conflict by satisfying the opposed needs to some extent. Such solutions are accomplished by means of defensive compromises (defense mechanisms) which involve cognitive distortions and gives rise to symptoms. The person's perceptions of his own feelings or of the environment undergo a change so that he sees things differently and feels more comfortable. In some cases

self-delusion may even cause a patient to assert that he is happy, but his distortions leave him less equipped to deal accurately with the situation: a rational solution becomes less likely.

In contrast, a mentally healthy person, then, is one in whom the following conditions exist. In describing them, we are aware of the possible bias of the mental health movement itself in setting criteria of health explained in articles by Davis (1949) and Seeley (1953).

1. The person is not in conflict. This is the ideal state. In reality, everyone experiences many minor conflicts daily since life does not permit one to have full satisfaction in all respects. In defining health, we are speaking here of the absence of intense or chronic conflicts.

2. When in conflict the person has skills for solving it rationally.

3. When in conflict and unable to solve the matter rationally, the person has strong enough personality organization ("ego strength") or, as some would say, is "secure" enough, to be able to stand the tension. A person with these characteristics is often spoken of as having "frustration tolerance" or being able to "delay gratification"; tension does not put the person into a panic.

Everyone, of course, gets into conflicts that cannot be solved immediately. In such a situation, it is normal to be unhappy or tense. A healthy person, however, seeks some way to cope with events so that misery does not persist. When someone is chronically unhappy or tense, he can be considered mentally healthy only if his circumstances are such that there are no avenues of escape. Thus, a wretched and frightened prisoner in a concentration camp might be viewed as mentally sound if he were making the best possible adaptation (Bettelheim, 1943). Yet, we cannot be content with the assurance that such a person is mentally sound when we regard him from a humanitarian viewpoint or in terms of society's needs for people whose energies are free for constructive use. We bemoan those situations that cause needless stress and consider them sources of illness even though some victims have the strength to weather the experience relatively unshaken.

4. A person may still be considered healthy, for practical purposes, when, unable to stand tension, he resorts to defensive compromises, provided the mechanisms used are those that yield relatively mild distortions and provided they are not employed in the most extreme degree since any mechanism may be used to excess. Excess here is defined partly in terms of the social implications of the distortion. Some distortions, such as reaction formation, result in derivative behaviors that are socially acceptable and even socially desirable in certain cultural situations. Other derivatives may have devastating social repercussions. A facial tic may not be handicapping socially, but a tic that results in stuttering may cause secondary ill effects which undermine the person's health by putting him in further conflict situations.

We would have to say that a person whose life situation leads to very

great conflict which could not be avoided would be considered sound even though he showed symptoms if those symptoms were the minimally handicapping ones that could be chosen in the situation. Children are occasionally seen, for example, who engage in mild antisocial behavior. Upon investigation they turn out to be healthy in the sense that, in their life plights, the relatively minimal degree of pathology they are showing is the least disturbance that could be expected of anyone.

In evaluating health, we are thus forced to look at both the quality of a person's adaptation and the circumstances in which, and to which, he is adapting. Mental health, speaking loosely, consists of being relatively symptom-free and tension-free. Definitions in more positive terms that talk about "effectiveness," or ability to work and to love, follow logically from this more rigorous definition in terms of symptoms. A person who cannot fulfill the minimal criteria of social effectiveness is certain to be in conflict and highly unlikely to resolve the conflict in a healthy manner.

In urging consideration of a person's circumstances when evaluating his health, however, we have been suggesting that an important qualification is to be made: Health is situational. . . . Anyone under sufficient stress may appear ill. Often such a person is in a temporary difficulty from which he eventually recovers, never to be ill again. Therefore, assessments of present effectiveness have to be supplemented by asking questions about the future prospects. If these prospects imply a different kind of life from the present one, have the current experiences paved the way for adaptation to the new? If not, is the person adaptable enough to undergo the stress of transition? How will the ideals that a person carries with him be satisfied in the new life situation? These are very relevant questions for educators, dealing as they do with children who later leave the school situation for a tremendous range of life settings (Allinsmith and Goethals, 1956, pp. 431-433).

From this general rationale, we decided to undertake a study which would investigate areas of possible conflict for teachers in two first-rate American schools. This study presents data concerning differences in teachers' attitudes which are suggestive of possible conflict. It hopes to make these differences more explicit so they may be dealt with rationally rather than remaining hidden, unresolved sources of danger. Although our study focuses almost entirely on teachers and teachers' conflicts, it can readily be related to students, for teachers are the salient point of contact between students and the educational system. This has direct implications for the mental health of students, particularly in view of two circumstances pointed out elsewhere in this book: First, the amount

of time during his youth which the student spends at school in direct personal contact with the teacher is increasing; and second, the probability, given the present manpower situation, of the teacher having to take some responsibility for identifying those students in need of mental health services is much greater. These circumstances create a situation which can work for or against the mental health of the student. The teacher may be able to identify emotional disturbances and even take first aid steps if a referral is not available. Or, in contrast, he may take advantage of the increased contact in the classroom to work out his own personal conflicts. In the light of such contingencies the potential conflicts teachers face are legitimate foci of inquiry.

Three sources of potential conflict are reported in this study. The first of these is the question of the clarity and explicitness of the charter of the school system. Charter, as used here, refers to a complex of legitimate ends and means and their concomitant values, norms, and behaviors (Malinowski, 1944).¹ A charter which is ill-defined, ambiguous, or contains contradictions provides insufficient guidance for activity and, therefore, may be a constant source of conflict and tension for the teacher. A second source of conflict is that of discrepancy. This discrepancy, defined as a lack of congruence between values (personally held norms for behavior) and normative practices (institutional norms for behavior), may create conditions of tension and anxiety. The third source of conflict is that of differences in attitudes toward education between professional educators and laymen—students and citizens.

The data presented were collected in the course of a series of researches undertaken by certain members of the Laboratory for Research in Instruction of the Harvard Graduate School of Education. These researches were conducted under the auspices of the School University Program for Research and Development and the Joint Commission on Mental Illness and Health. The Laboratory was asked to investigate the attitudes of school personnel toward ongoing projects in two school systems in the metropolitan Boston area; both projects dealt with innovations. One was concerned with a new method of salary determination, the other with a radical departure in instructional procedures. On the one hand, the two

investigations were specific, discrete, and unrelated; on the other, they both could be viewed as related to the broader problem of teachers' attitudes toward "innovation." It was decided that teachers' attitudes toward a specific innovation could best be understood in the context of their broader educational values. The research was developed within the framework of the discrepancy hypothesis, namely, that a situation in which there is a discrepancy or lack of congruence between an individual's values and the prevailing practices has negative affect for that individual.² A person's attitude toward a given innovation would, then, be a function of his perception of the innovation as increasing or decreasing the discrepancy between his values and existing practices.

The data presented in Chapter IX represent part of the information collected in these two investigations. In Chapter X data from three sources are discussed. Concurrent with the investigation of the teachers' attitudes toward the innovation in instruction, an investigation was made of students' attitudes toward this same innovation. A part of the data collected in this study is presented in the subsection on the teacher and the student. The data on liberal arts seniors' attitudes toward teaching had been collected previously by one of the members of the Laboratory in a study of factors influencing the choice of teaching as an occupation. Comparable data on teachers college seniors were collected explicitly for the present study.

This brief description of the background and sources of the material to be presented hints at a point which should be made explicit. The approach of this study is not typical of mental health research. This study, rather than observing an abnormal or unhealthy situation and either making suggestions for treatment or drawing generalizations that may be applicable to more healthy situations, examines a normal, relatively healthy situation for potential trouble spots, with a view to taking preventive action. The two public school systems whose personnel furnished much of the data are not "sick" systems. They perhaps are not typical, for they do have regional and even national reputations for educational excellence; their bias is in the direction of health. Similarly, the college seniors who supplied another large portion of the information

are representative of institutions which, though perhaps not typical, can hardly be diagnosed as anything but healthy.

One other characteristic of our sample should be pointed out. Although the number of individuals for whom data are reported is not small, the number of school systems represented is. If, therefore, the school system is taken as the sampling unit, the sample is extremely small. It would be hazardous to claim generality for findings based on such a small number of sampling units and no such claims are made. This study may best be considered a pilot study which provides information about the fruitfulness of a given research approach, helps to clarify and formulate hypotheses for further study, renders information that stimulates further thought, and provides one limited set of data which, when taken in conjunction with other limited studies, may eventually provide a basis for general statements.

A Report from the Teachers

THE TEACHERS whose views are reported here are employed in the public school systems of two suburban communities in the metropolitan Boston area. A large proportion of the population in these two communities is upper middle class in socioeconomic status, and over 75 per cent of the students who graduate from high school continue their formal education. The two communities provide strong support for public education and both school systems have regional and national reputations for educational excellence.

The total number of teachers included is 280. About one third are males and two thirds females. Almost 50 per cent of the total sample is married and the median age of the group is 35 years. A majority of these teachers consider themselves Protestants, were born in urban communities, and have fathers employed in lower middle class semiprofessional or skilled occupations.¹ Over one half of the teachers received their Bachelor's degrees from liberal arts colleges and almost half of them have earned their M.A. degree. Forty per cent of the group have been teaching for five years or less and almost two thirds have been employed by their present school system for five years or less. The median salary for this group of teachers is just under \$5000 and approximately one sixth of them work at part-time jobs other than teaching. Nearly 50 per cent of the teachers live in a community which is neither the community in which the school system is located nor adjacent to it. A description of the sample is found in table IX.1.

The question might be asked whether this sample is representative of the population of public school teachers in the United States. The data needed to give a definitive answer are not readily available. Some idea of their similarity to teachers generally, however, may be

**Table IX.1—Description of Sample: Percentage of Teachers
Having Certain Characteristics**

Characteristics	PERCENTAGE OF TEACHERS			
	X Elementary (N = 137)	X Secondary (N = 66)	Y Secondary (N = 77)	Total Group of Teachers (N = 280)
Sex				
Male	17	53	44	32
Female	83	47	56	68
Marital status				
Single	46	38	53	45
Married or other	54	62	47	55
Age				
Under 35 years	66	40	41	52
35 years and over	34	60	59	48
Father's occupation				
Professional and monogerial	26	23	41	29
Semiprofessional and skilled	62	64	46	58
Semiskilled and unskilled	12	13	12	12
Religion				
Catholic	43	28	13	30
Jewish	4	0	4	3
Protestant	47	65	76	59
Other or not reported	6	7	7	8
Bachelor's degree (source)				
Liberal Arts College	31	81	83	57
Teachers College or Department of Education	68	16	13	39
Other or not reported	1	3	4	4
Master's degree				
Yes	27	56	76	48
No	73	44	24	52
Number of years teaching				
Less than 5 years	51	32	27	39
5 to 20 years	39	42	38	39
More than 20 years	10	26	35	21
Number of years in system				
Less than 5 years	70	60	55	63
5 to 20 years	26	23	25	24
More than 20 years	4	17	21	12
Does work other than teaching				
Yes	8	27	21	16
No	92	73	79	84
Salary				
Less than \$4,000	54	32	7	35
\$4,001–\$5,000	20	14	26	20
\$5,001–\$6,000	4	8	41	15
Place of residence				
Community where school is located	29	36	50	36
Adjacent to community where school is located	22	24	9	19
Not adjacent to community where school is located	49	40	41	44
Birthplace (kind of community)				
Rural	5	6	5	5
Small town	17	26	21	20
Suburban	17	18	21	18
Small urban	21	20	27	22
Large urban	41	30	26	34

Note: When total percentage differs from 100, the error is due to rounding.

gained from a comparison of the relevant parts of Table IX.1 with some recently published data on the social origins of teachers in Texas.² Although the categories are not exactly equivalent in both studies, they are close enough to warrant meaningful comparisons.

The Boston sample, when compared with the Texas sample, contains more persons who are under 40 years of age, are men, have a liberal arts college background, were born in urban or suburban communities, whose parents are in semiprofessional and skilled occupations, and who are not Protestants.

In a preliminary analysis of the data gathered on Boston teachers, a significant relationship was found between educational values and such variables as age, kind of education, degree of urbanization of birthplace, and religion. No relationship was found, however, either between sex of the teacher or occupational status of the teacher's father and educational values. It would be hazardous, considering the differences found between the Texas and the Boston teacher in terms of these variables and the relationship between several of these variables and educational values, to attempt a direct extrapolation to other groups of the values reported by the Boston teachers. This does not, of course, invalidate the findings for the Boston teachers, nor does it detract from their usefulness as stimuli to further inquiry.

Three different subsamples drawn from two school systems make up the total sample of teachers included in this study. There is a sample of teachers from the secondary schools of community Y ($N = 77$), a sample of teachers from secondary schools in community X ($N = 66$), and a sample of teachers from the elementary schools of community X ($N = 137$). The inclusion of these three groups makes possible a discussion of differences between the levels and between the various local systems which constitute the American public school system. In other words, elementary teachers may be compared to secondary teachers while holding the school system, X, constant, and system X may be compared with system Y while holding the level, secondary, constant. It must be emphasized that direct extrapolation of the results of such comparisons, since they are based upon an extremely small number of sampling units, is tenuous. It should also be emphasized, however, that the differences found in such comparisons may be highly suggestive.

Secondary teachers in system X when compared with elementary school teachers in the same system may be characterized as older, more experienced, having been in the system longer, and receiving higher salaries. The group of high school teachers contains more males, more Protestants, more individuals with a liberal arts background, more individuals with M.A. degrees, and fewer individuals born in large urban communities. The secondary school teacher is also more likely to hold a part-time job (see Table IX.1).

The secondary school teachers of system Y, as compared with those in system X, have fathers of higher occupational status, have a larger number of Master's degrees, are more experienced, receive higher salaries, and are less likely to be Catholics (see Table IX.1). Thus there are differences between the personnel in the two systems when level is held constant and also differences between the personnel at different levels when the system is held constant. There seem to be more differences between levels than between systems in the matters focused upon in the study.

EDUCATIONAL VALUES

The term "educational value" as used here refers to the teachers' response to a series of questionnaire items employing the verb "should." There were two types of such items in the questionnaire. In the first type the teachers were required to agree or disagree with a statement. For example, teachers were asked to indicate the degree to which they agreed or disagreed with such statements as: "The primary focus of the teaching job should be to guide and assist the student in learning activities and experiences"; "Teachers should treat students as equals, not as subordinates, even in the classroom"; and "Teachers' salaries should be based on the amount of education or the number of degrees possessed by the teacher." The dimension of agreement-disagreement ranged from strongly agree, through agree, slightly agree, slightly disagree, disagree, to strongly disagree. The responses were given numbers from 1 to 6; 1 meant strongly agree and 6 meant strongly disagree. In second type of item the teachers were presented with a series of educational goals and methods of teaching which they were asked to rank in order of the

degree of emphasis they felt each should receive. There were nine goals and eight methods included. Thus the score for each goal could range from 1 to 9 and for each method from 1 to 8. Lower numbers indicated greater emphasis and higher numbers less.

In addition, the teachers were asked to rank 10 areas of education with respect to their importance for the successful functioning of teachers. These 10 areas, in order of their importance as determined by the median rank given each area by the total group of teachers, are shown in Table IX.2.

Table IX.2—Importance of Ten Areas for Successful Functioning of Teachers: Median Ranks of Three Groups of Teachers for Each Area

Area	MEDIAN RANK			
	X Element- ary	X Second- ary	Y Second- ary	Total Group of Teachers
Relationship between teachers and pupils	2.9	2.0	2.1	2.3
Role of the teacher	4.2	4.3	2.8*	3.9
Educational goals of the school	4.6	4.1	3.1	4.1
Relationship among teachers	4.5	5.2	4.7	4.8
Methods of teaching	3.8	4.8	6.2	4.9
Role of teacher's immediate superior	4.1	5.3	6.5*	5.3
Principles of solory determination	7.4	6.0	5.9	6.4
Methods of policy formation	6.8	6.0	6.4	6.5
Methods of acknowledging outstanding teaching	7.9	6.4	7.3	7.1
Relationship between teachers and parents	6.7	8.3	8.4	7.7

Note: Possible ranks range from 1.0 (most important) to 10.0 (least important).

* Differs significantly at .05 level from X Secondary on basis of median test.

Teachers as a group considered the "relationship between teachers and pupils" to be by far the most vital area affecting successful teacher performance. After teacher-pupil relationships in importance there is a cluster of five areas: the role defined for the teacher in the school system, the goals of the school system in which the individual teaches, the relationship among teachers in the school setting, the methods of teaching utilized by the teachers, and the roles adopted or performed by the teacher's immediate superior. Of lesser im-

portance to the teacher were the following areas: the principles upon which salary is based, the procedures for determining policy, the kind of acknowledgment given for outstanding performance in the teaching role, and the relationship between teachers and parents.

The areas that were considered most important—teacher-pupil relationships, teacher’s role, educational goals, relationships among teachers, teaching methods, and the role of the immediate superior—all relate, directly or by implication, to the nature or quality of the most common or frequent direct interpersonal relationships of teachers. All impinge upon the relationship between the teacher and one of three groups: his subordinates (students), his co-ordinates (fellow teachers), or his superordinates (principals or department chairmen). It would appear that teachers tend to see as important those relationships which are direct and frequent and as less important those which are indirect or infrequent.

Relationship between teachers and pupils. The teachers prefer a friendly superordinate-subordinate relationship with their students when in class, but feel that this mode may be relaxed somewhat outside the classroom. Most of the teachers agreed that they should be friendly but reserved with their students. They did not feel that the students should be treated as equals (Table IX.3).

Table IX.3—Relationship Between Teachers and Pupils: Median Scores of Three Groups of Teachers on Value Items

Value Item	M E D I A N S C O R E			
	X Elemen- tary	X Second- ory	Y Second- ory	Total Group of Teachers
Friendly but reserved	1.8	1.8	1.9	1.8
Close friends outside school	3.3	3.7	2.9*	3.3
Impersonal in classroom, informal and friendly outside classroom	4.3	2.6	3.2	3.5
Social distance maintained at all times	3.5	3.0	3.9*	3.5
Treated as equals, not as subordinates	3.7*	4.7	4.3	4.1

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Role of the teacher. Teachers agreed strongly that the teacher’s role should include the primary functions of stimulating thinking

and interest, guiding and assisting students in their learning experiences, and being a personal character model for the pupils. They also agreed, but to a lesser extent, that the teacher's role should include evaluating student progress and imparting subject matter. They did not agree that controlling students should be a primary function of the teacher.

The teachers, thus, subscribe to a definition of their role in terms of rather vague, generalized characteristics. They emphasize stimulating, guiding, and serving as a model. There is a lesser inclination to accept the function of evaluation and there is an outright rejection of discipline as a primary function. To emphasize these latter functions would, of course, tend to interfere with the establishment of certain kinds of teacher-pupil relationships. All in all, the teachers' definition of their role suggests an ideal positive parent image; that is, an omniscient, competent person deserving of and receiving love and admiration, rather than an evaluative, controlling, or punitive person (Table IX.4).

Table IX.4—Role of the Teacher: Median Scores of Three Groups of Teachers on Value Items

Value Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Serve as character model	1.3	1.5	1.4	1.4
Guide and assist learning experiences	1.4	1.5	1.7	1.5
Stimulate thinking and interest	1.7	1.7	1.7	1.7
Evaluate progress and motivate dilatory student	2.2*	2.6	2.5	2.4
Impart subject matter	3.2	3.7	2.9	3.2
Control students	5.7	5.6	5.5	5.6

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Educational goals of the system. A clear-cut hierarchy exists among the educational goals of the teachers. Intellectual goals receive first priority, personality oriented goals are considered secondary, and pragmatic goals are least desired. The goals ranked highest by the teachers are developing love of and interest in learning, teaching knowledge and skills in subject matter, and developing intellectual ability. Next in order of preference are character formation, emo-

tional maturity, and transmission of cultural values. Low in preference are the development of social skills, preparation for college entrance, and preparation for a vocation (Table IX.5).

Table IX.5—Preference for Educational Goals: Median Ranks of Three Groups of Teachers for Value Items

Value Item	MEDIAN RANK			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Develop love of and interest in learning	2.1	2.2	2.2	2.2
Develop knowledge and skill in subject matter	2.6	2.8	3.2	2.8
Develop intellectual ability	3.4	3.3	2.7	3.2
Form character	2.8*	4.0	3.6	3.4
Develop emotional maturity	4.8	4.9	5.6	4.9
Transmit cultural values	6.2*	5.1	4.5	5.5
Develop social skills	6.5*	7.5	7.8	7.1
Prepare for college entrance	8.2*	7.5	6.7	7.7
Prepare for a vocation	8.0*	7.2	7.0	7.7

Note: Possible ranks range from 1.0 (most preferred) to 9.0 (least preferred).

* Differs significantly at .05 level from X Secondary on basis of median test.

Relationship among teachers. Teachers value the opportunity for informal interaction so that they can discuss both professional and nonprofessional matters with their colleagues. They desire that such interaction not be limited to organized faculty meetings or committee meetings (Table IX.6).

Table IX.6—Relationship Among Teachers: Median Scores of Three Groups of Teachers on Value Items

Value Item	MEDIAN SCORE			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Informal nonprofessional conversation	1.4	1.5	1.6	1.5
Informal discussion of professional problems	1.6	1.8	1.8	1.7
Regularly scheduled meetings only	5.4	5.0	5.2	5.2
Minimum of professional and personal interaction	5.2	5.4	5.6	5.4

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

Methods of teaching. The most preferred teaching methods are presentations to small groups and small group discussions. Next in

order of preference are individual and group projects and teacher supervised study and practice. Least preferred are independent study, assign-study-recite, and lectures to large groups. There seem to be two essential aspects of the instructional process which must be present in order to satisfy the teacher; relatively close interpersonal relationships and active teacher participation (Table IX.7).

Table IX.7—Preference for Teaching Methods: Median Ranks of Three Groups of Teachers for Value Items

Value Item	MEDIAN RANK			
	X Element- tory	X Second- ary	Y Second- ary	Total Group of Teachers
Presentation to small groups who can ask questions	1.9	1.9	1.8	1.9
Small group discussion	3.1	2.6	2.5	2.8
Individual and group projects	3.0	3.4	3.8	3.4
Large group lecture combined with small group discussion	4.6	5.1	3.6*	4.3
Teacher-supervised study and practice	3.7	4.3	5.1	4.3
Independent study	5.4	5.4	6.2	5.6
Assign-study-recite	7.6*	5.7	6.1	6.7
Large group lecture	7.0	7.5	6.9	7.0

Note: Possible ranks range from 1.0 (most preferred) to 8.0 (least preferred).

* Differs significantly at .05 level from X Secondary on basis of median test.

Role of teacher's immediate superior. The teacher's immediate superior, the chairman of the department or the principal, is expected to fulfill a number of functions. He is expected to provide leadership, to supervise and evaluate teachers, to make decisions and direct operations, to provide administrative machinery, and to mediate conflicts and differences. He is not expected to act as an intermediary between teachers and higher administrative officials. The interpretation of this last item raises an interesting question. Does the teacher desire to have a direct relationship with the higher administrative officials, or does he feel that any relationship between the teacher and the higher administrative officials is not necessary? Our data, unfortunately, cannot provide an answer (Table IX.8).

Principles of salary determination. Teachers feel that salary should be based on the number of duties and responsibilities they are assigned, on the length of service in a given system, on the initiative

Table IX.8—Role of Teacher's Immediate Superior: Median Scores of Three Groups of Teachers on Value Items

Value Item	MEDIAN SCORE			
	X Elemen- tary	X Secand- ary	Y Secand- ary	Total Group of Teachers
Provide stimulating leader- ship for teachers	1.7	1.8	1.4*	1.7
Supervise and evaluate work of teachers	1.9	2.2	1.7	1.9
Make decisions and direct operation of school or department	1.8	2.0	1.9	1.9
Provide administrative machinery for efficient functioning of school or department	2.0	2.1	2.4	2.1
Mediate internal differences and conflicts within school or department	2.6	2.9	2.4	2.6
Serve as intermediary between teachers and administrative officials	4.0	3.8	4.2	4.0

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

and creativity exhibited, and, to a lesser extent, on the achievement and performance of their students. They do not feel that salary should be based on the total years of teaching experience a teacher has had or upon the amount of education or number of degrees a teacher holds (Table IX.9).

Table IX.9—Principles of Salary Determination: Median Scores of Three Groups of Teachers on Value Items

Value Item	MEDIAN SCORE			
	X Elemen- tary	X Secand- ary	Y Secand- ary	Total Group of Teachers
Number of duties and responsibilities	1.4	1.4	1.3	1.4
Length of service in system	2.4	2.2	1.9*	2.2
Demonstration of initiative and creativity in teaching	2.3	2.3	2.3	2.3
Achievement and performance of students	3.2	3.3	4.1	3.4
Total years of teaching experience	4.0	4.0	3.8	3.9
Amount of education or number of degrees	4.0	5.0	4.6	4.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Methods of policy formation. The teachers want to participate in the decision making process. They feel that changes in policy should either be agreed upon by a majority of the teachers, be co-operatively planned by all teachers, or somehow be initiated by the teachers in general. They do not want these activities carried out by the administration alone, by a selected committee of teachers, or by a combination of the two, neither do they want what might be called a *laissez faire* situation in which every individual teacher makes his own decisions and policy (Table IX.10).

Table IX.10—Methods of Policy Formation: Median Scores of Three Groups of Teachers on Value Items

Value Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Initiated by immediate superior and agreed upon by majority of teachers	1.5*	1.7	1.9	1.8
Planned co-operatively by all teachers	2.1	2.1	2.1	2.1
Initiated by teachers and carried out by immediate superior	2.7	2.7	2.9	2.8
Initiated and implemented by immediate superior	3.8	3.7	4.1	3.9
Planned and carried out by elected committee of teachers	4.6	4.1	4.3	4.4
Initiated by immediate superior in consultation with selected teachers	4.7*	3.7	4.6	4.4
Initiated and carried out by individual teacher	4.7	4.5	5.0	4.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Methods of acknowledging outstanding teaching. Teachers do not feel that personal satisfaction is adequate reward for outstanding performance in the teaching role. They think that an increase in salary, praise, and public recognition, and increased autonomy in the teaching role would be more appropriate. They are not as convinced, however, about the desirability of a promotion to a position with greater responsibility (Table IX.11).

Relationship between teachers and parents. Teachers who participated in this study want a close relationship with the parents of

**Table IX.11—Methods of Acknowledging Outstanding Teaching:
Median Scores of Three Groups of Teachers on
Value Items**

Value Item	M E D I A N S C O R E			
	X Elemen- tory	X Second- ory	Y Second- ory	Total Group of Teachers
Increase in salary	1.8	1.8	1.6	1.8
Praise and public recognition	2.0	2.0	2.1	2.0
Increased autonomy in teaching activities	2.2	2.3	2.1	2.2
Promotion to positions with greater responsibility	3.5	3.0	3.5	3.4
Personal satisfaction only	4.3	4.6	4.7	4.5

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

children they teach. They prefer that parents come to the school to visit and get acquainted, but they would also like to visit the parents in their homes. They feel that parent-teacher acquaintance should not be limited to semiformal meetings such as PTA, and they strongly reject the idea that there should be no contact with parents. They also feel strongly that parents and teachers should not become acquainted only when a problem arises (Table IX.12).

**Table IX.12—Relationship Between Teachers and Parents: Median
Scores of Three Groups of Teachers on Value Items**

Value Item	M E D I A N S C O R E			
	X Elemen- tory	X Second- ory	Y Second- ory	Total Group of Teachers
Parents visit teachers in school	1.5	1.8	1.4*	1.5
Teachers visit parents in homes	2.5	3.0	2.9	2.8
Teachers and parents become acquainted only at meetings such as PTA	5.0	5.0	5.1	5.0
Teachers and parents have no contact whatsoever	5.9	5.7	5.9	5.9
Teachers and parents become acquainted only when problem arises	5.6	5.4	5.4	5.5

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

The image of the teacher which begins to emerge here is that of a person who wants to be recognized as a competent professional in

a wide range of activities and who places a special value on warm interpersonal relationships.

VARIATION IN VALUES

There is not, of course, complete consensus among the teachers in their responses to any of the items. Two kinds of variation will be considered here, the extent of consensus among the individuals in the total sample³ and the differences between the subsamples of teachers.

Consensus among Teachers

The possible range of responses for most of the items was 6; from strongly agree, through agree, slightly agree, slightly disagree, disagree, and strongly disagree.⁴

The range of actual responses for over 85 per cent of the items was 6; that is, for these items there were individuals who disagreed strongly with the item and also individuals who agreed strongly with it—as well as persons who responded in all of the intermediate categories. This dispersion of responses is interpreted as indicating a lack of consensus among the teachers in the sample.

The quartile deviation, a more stable measure of response dispersion than the range, was calculated for each item.⁵ The median quartile deviation for the value items was 1.0. Quartile deviations of less than 1.0 in magnitude were interpreted as indicating relative consensus and quartile deviations with magnitudes larger than 1.0 relative lack of consensus.

In general, more unanimity of opinion was found among the teachers in the areas of teacher-parent relations, teacher-teacher relations, the role of the teacher's immediate superior, and the role of the teacher than elsewhere. For these areas the average quartile deviation was 0.7. The least consensus was found in the areas of policy making and teacher-pupil relationships. For these latter two areas the quartile deviation averaged 1.3. The remaining four areas, educational goals, methods of teaching, salary basis, and methods of acknowledging outstanding teaching, had an average quartile deviation of about 1.0.

It is also instructive to note the three or four items on which there was the greatest teacher consensus and the three or four items on which there was the least. Teachers were in accord in rejecting the idea that there should be no contact between parents and teachers, in accepting the idea that the role of their immediate superior should be primarily one of making decisions and directing operations, and in feeling that teachers should be paid in terms of the duties and responsibilities assigned to them. There was least consensus among teachers concerning treating students as equals, defining the role of the teacher as one who imparts subject matter, using an assign-study-recite teaching method, and basing salary on the achievement of students.

Often, consensus occurred among the teachers on a single item within a given area, even though there was a general lack of consensus in that area, and vice versa. Each of the 10 areas of educational values investigated will now be discussed in terms of the extent of consensus among teachers' responses.

Relationship between teachers and pupils. Although this area was the one in which there was the least consensus among the teachers generally, there was one item on which there was a great deal of consensus. Approximately half the teachers responded to the item "Teachers should be friendly but reserved in their relationship with students," in the single response category, "agree."

Role of the teacher. There was consensus among the teachers in this area, generally. However, on one item, "The most important role of the teacher should be that of imparting subject matter," there was no consensus. The teachers' answers were well distributed throughout the six response categories.

Educational goals of the system. There was an average amount of consensus on all the items in this area.

Relationship among teachers. Consensus among the teachers was very high on all the items in this area.

Methods of teaching. Little consensus existed among teachers concerning the appropriateness of assign-study-recite and large group lecture in combination with small group discussion as teaching methods, but there was relative consensus in their rejection of large group lecture as a teaching method.

Role of the teacher's immediate superior. Although there was, generally, a high degree of consensus among the teachers in this area, there was only average consensus on the items which define the superior's role as a mediator of internal differences and an intermediary between teachers and the higher administration.

Principles of salary determination. There was general accord that a teacher should be paid according to the number of duties and responsibilities assigned to him, but there was no agreement as to whether total teaching experience and achievement of students should be taken into consideration in determining salary.

Methods of policy formation. In this area there was relative consensus that teachers should participate in the policy making process and that a *laissez faire* situation in which each teacher makes his own policy is undesirable. There was, however, less consensus upon those items which suggest that the administration assume a major responsibility for policy making.

Methods of acknowledging outstanding teaching. Teachers generally agreed that outstanding teaching should be acknowledged by increased salary and increased autonomy. There was no unanimity of opinion, however, as to whether outstanding teachers should be promoted to positions of greater responsibility nor was there agreement as to the sufficiency of personal satisfaction as a reward.

Relationship between teachers and parents. There was an almost unanimous rejection of the idea that there should be no contact between parents and teachers but considerable divergence of opinion as to whether teachers should visit parents in their homes.

The major conclusion which may be drawn from these findings is that great variation exists among the teachers in their educational values. Perhaps it can be most colorfully expressed in somewhat pedantic language: Teachers in the aggregate do not form a monolithic group so far as educational values are concerned.

Similarity between Secondary and Elementary School Teachers

Very few differences in educational values appear when elementary teachers are compared with secondary teachers in the same system (Tables IX.3 to IX.12). Statistically reliable differences between the

two groups were found, but there were no radical differences. These similarities and differences are reviewed briefly here.

Relationship between teachers and pupils. Both the elementary and secondary teachers feel that they should be friendly but reserved with the students. The elementary teachers, however, are more accepting of an equalitarian relationship with their pupils and tend to desire a closer, more personal relationship (Table IX.3).

Role of the teacher. The elementary teachers accept the role of evaluating and encouraging the student more than do the secondary teachers (Table IX.4).

Educational goals of the system. The elementary teachers ranked character formation and social skills higher than did the secondary teachers, while the secondary teachers emphasized transmission of cultural values, college preparation, and vocational preparation more than did the elementary teachers (Table IX.5).

Relationship among teachers. There were no significant differences between elementary and secondary teachers in this area (Table IX.6).

Methods of teaching. Secondary teachers believe assign-study-recite to be a more appropriate teaching method than do elementary teachers (Table IX.7).

Role of teacher's immediate superior. There were no significant differences between elementary and secondary teachers in this area (Table IX.8).

Principles of salary determination. There were no significant differences between elementary and secondary teachers in this area (Table IX.9).

Methods of policy formation. The elementary teachers were more strongly in favor of a majority of teachers approving policy decisions, whereas the secondary teachers were more likely to accept policy formed by a committee of selected teachers (Table IX.10).

Methods of acknowledging outstanding teaching. There were no significant differences between elementary and secondary teachers in this area (Table IX.11).

Relationship between the teachers and parents. There were no significant differences between elementary and secondary teachers in this area (Table IX.12).

Similarity between Two Educational Systems

More agreement on educational values exists between the secondary school teachers of the two educational systems than between elementary and secondary teachers within a system. Again there are statistically reliable differences between the two systems, but no extreme differences. The statistically significant differences are to be found in Tables IX.3 through IX.12. The differences and similarities are summarized below.

Relationship between teachers and pupils. Secondary teachers of the two systems agreed that teachers should be friendly but reserved with students, but teachers of system Y are more willing to relax this reserve, especially outside the classroom (Table IX.3).

Role of the teacher. There were no significant differences between the two systems in this area (Table IX.4).

Educational goals of the system. There were no significant differences between the two systems in this area (Table IX.5).

Relationship among teachers. There were no significant differences between the two systems in this area (Table IX.6).

Methods of teaching. Secondary teachers in Y system consider large group lecture combined with small group discussion to be more appropriate as a teaching method in the secondary schools than do the teachers in system X (Table IX.7).

Role of the teacher's immediate superior. The teachers in system X expect their immediate superior to provide more leadership than do the teachers in system Y (Table IX.8).

Principles of salary determination. Teachers in system Y are more willing that salary be based on length of service in the system than are the teachers in system X (Table IX.9).

Methods of policy formation. There were no significant differences between the two samples in this area (Table IX.10).

Methods of acknowledging outstanding teaching. There were no significant differences between the two samples in this area (Table IX.11).

Relationship between teachers and parents. The teachers in Y system are more in favor of inviting parents to visit the school in order to get acquainted with the teachers (Table IX.12).

The differences that have been reviewed are real differences, that is, statistically reliable, but it should be emphasized that they are small both in number and in size. The general profile of educational values for these two groups of secondary school teachers drawn from different systems is essentially very similar.

Sources of Variation among Teachers

In our discussion of the extent of consensus among the total group of teachers, we pointed out that a good deal of variation was found in their educational values. This variation cannot be accounted for in terms of differences between teachers at the elementary and secondary levels, nor in terms of differences between teachers in two different systems, for as shown these groups are essentially similar. We must, therefore, ask the question: To what may this variation be attributed?

A preliminary analysis of the data revealed, as reported earlier (p. 186), that the background experiences or attributes of the teachers, such as status of family, religious orientation, degree of urbanization of home community, source of general education and professional training, and amount of teaching experience, are related to educational values. The sex of the respondent and his father's occupation were found to have less influence on educational values than religion, amount of urban influence, type of college attended, and amount of teaching experience. This material is only suggestive, however. A more intensive examination of these relationships is being undertaken. Perhaps some of the variations in values which cannot be attributed to differences between levels or between systems will be accounted for by differences in the background characteristics of teachers.

INSTITUTIONAL NORMS

The term "institutional norm," as used in this study, refers to a response to a questionnaire item that is couched in the present indicative and refers to a *practice* in a specific educational institution. The institutional norms, then, are the teachers' perceptions of the practices in a given area within a given school system. The items

reflecting institutional practices were similar in form and in content to those reported in the previous section on values, and teachers were asked to respond to them in a similar fashion. For example, teachers were asked to reply by indicating the degree to which they agreed or disagreed with such statements as: "The primary focus of the teaching job in X school is to guide and assist the students in learning activities and experiences"; "Teachers in X school are expected to treat students as equals, not as subordinates, even in the classroom"; and "Teachers' salaries in X school are based in part on the amount of education and the number of degrees possessed by the teacher." The dimension of agreement-disagreement ranged, as it did on the value items, from strongly agree, through agree, slightly agree, slightly disagree, disagree, and strongly disagree.

In addition, the subjects were presented with a series of educational goals and methods of teaching which they were asked to rank according to the emphasis they felt the school placed on each one.

Relationship between teachers and pupils. The teachers reported that they are expected to be friendly but reserved with their students and, to a lesser extent, that it is proper for them to be close friends with students outside the school. The teacher is expected to be impersonal in the classroom, but informal and friendly outside the classroom. They did not feel that teachers are expected to treat students as equals or that they are expected to maintain social distance between themselves and the students. The general picture

Table IX.13—Relationship Between Teachers and Pupils: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Friendly but reserved	2.0	2.0	2.0	2.0
Close friends outside school	2.9*	3.8	2.8*	3.1
Impersonal in classroom, informal and friendly outside classroom	3.8*	3.0	2.9	3.3
Treated as equals, not as subordinates	3.8	4.1	4.0	3.9
Social distance maintained at all times	4.1	4.1	4.2	4.1

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

is one of friendly but differentiated superordinant-subordinant relationships within the classroom which may be relaxed somewhat outside the classroom (Table IX.13).

Role of the teacher. The practice in the schools is for the teacher to be a character model for the student, to guide and assist the learning activities and experiences of the student, to stimulate thinking and interest, and to evaluate student progress and encourage the dilatory student. Teachers also perceive themselves as imparting subject matter and controlling students, but to a lesser degree than as performing the other functions (Table IX.14).

Table IX.14—Role of the Teacher: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	M E D I A N S C O R E			
	X Elemen- tary	X Secand- ary	Y Second- ary	Total Group of Teachers
Serve as character model	1.8	1.9	2.1	1.9
Guide and assist learning experiences	1.9	2.2	2.2	2.1
Stimulate thinking and interest	2.1	2.1	2.3	2.2
Evaluate progress and motivate dilatory student	2.3	2.4	2.3	2.3
Impart subject matter	3.2	3.3	2.9	3.1
Control students	3.5	3.4	2.7*	3.2

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Educational goals of the system. The goals which the teachers perceive as receiving most emphasis in the schools are teaching knowledge and skills in subject matter, developing intellectual ability, developing love of and interest in learning, and preparing students for college. Character formation is a "lukewarm" goal of the school systems, and the schools tend to give little emphasis to the development of social skills, transmission of cultural values, development of emotional maturity, and preparation for a vocation. In general, the teachers see the schools as tending to emphasize intellectual goals. It seems likely, however, that these intellectual goals are emphasized for pragmatic reasons, because a parallel emphasis is placed on subject matter and preparation for college (Table IX.15).

Table IX.15—Emphasis Placed on Educational Goals: Median Ranks of Three Groups of Teachers for Norm Items

Norm Item	MEDIAN RANK			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Develop knowledge and skill in subject matter	2.0	2.1	2.2	2.1
Develop intellectual ability	3.4	4.0	3.5	3.6
Develop love of and interest in learning	3.5*	4.4	4.9	4.0
Prepare for college entrance	7.1*	3.0	1.9*	4.1
Form character	4.2*	5.6	6.5*	5.2
Develop social skills	5.6	6.5	6.3	5.9
Transmit cultural values	6.2	5.7	6.3	6.2
Develop emotional maturity	5.8*	6.7	6.8	6.3
Prepare for a vocation	7.8*	6.4	5.6	7.0

Note: Possible ranks range from 1.0 (most emphasized) to 9.0 (least emphasized).

* Differs significantly at .05 level from X Secondary on basis of median test.

Relationship among teachers. Teachers, in general, perceive their colleagues as carrying on nonprofessional interaction and also informal discussion of professional problems. They perceive them as having little interaction with each other at school, such interaction being limited to regularly scheduled semiformal meetings. These data give rise to two alternative interpretations: One, there is little desire for interaction and what little there is is given ample opportunity for expression; and two, a strong need for interaction is expressing itself in a situation in which no provision has been made for it. In the light of information concerning teachers' values presented above, the latter interpretation seems more plausible (Table IX.16).

Table IX.16—Relationship Among Teachers: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Minimum of professional and personal interaction	2.6	2.7	2.2	2.5
Informal nonprofessional conversation	2.4	2.2	3.1	2.6
Informal discussion of professional problems	2.7	2.5	3.1	2.7
Regularly scheduled meetings only	2.8	3.3	2.6	2.9

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

Methods of teaching. The dominant practice in the area of teaching methods centers around active teacher participation with small groups of students. The teaching methods most emphasized are individual and group projects and presentations to small groups. Following these come three others, small group discussion, assign-study-recite, and teacher-supervised study and practice. Large group lecture and independent study by the student are perceived as receiving less emphasis (Table IX.17).

Table IX.17—Emphasis Placed on Teaching Methods: Median Ranks of Three Groups of Teachers for Norm Items

Norm Item	M E D I A N R A N K			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Individual and group projects	2.7	2.5	4.1*	3.0
Presentation to small groups who can ask questions	3.2	3.6	3.9	3.5
Small group discussion	3.8	3.5	4.6*	4.0
Assign-study-recite	6.3*	2.9	1.4	4.0
Teacher-supervised study and practice	2.5*	4.6	5.1	4.2
Large group lecture combined with small group discussion	4.9*	6.2	3.8*	4.9
Independent study	5.4	5.5	6.7*	5.7
Large group lecture	7.1	7.5	4.1*	6.9

Note: Possible ranks range from 1.0 (most emphasized) to 8.0 (least emphasized).

* Differs significantly at .05 level from X Secondary on basis of median test.

Role of teacher's immediate superior. The principal or department head is perceived as performing a number of functions: making decisions and directing operations, providing administrative machinery, supervising and evaluating teachers, and providing leadership. To a lesser extent he is perceived as a mediator of internal conflicts. In the teachers' opinion, their immediate superior does not function as an intermediary between them and the higher administration (Table IX.18).

Principles of salary determination. The teachers perceive their salary as being based primarily on the amount of education and the number of degrees they have and their length of service in the system; total years of teaching experience is also taken into account, but to a lesser degree. The duties and responsibilities assigned to

Table IX.18—Role of Teacher's Immediate Superior: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	MEDIAN SCORE			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Make decisions and direct operation of school or department	2.0	2.2	2.1	2.1
Provide administrative machinery for efficient functioning of school or department	2.1	2.2	2.3	2.1
Supervise and evaluate work of teachers	2.2*	2.6	2.3	2.3
Provide stimulating leadership for teachers	2.1	2.6	2.5	2.3
Mediate internal differences and conflict within school or department	3.4	3.4	3.5	3.4
Serve as intermediary between teachers and administrative officials	3.9	4.1	4.0	4.0

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

them, their initiative and creativity, and the achievement and performance of their students have very little relation, as they see it, in determining their salary. Teachers' perceptions of the principles on which salary is based are consistent with the general philosophy of salary determination prevalent in education (Table IX.19).

Table IX.19—Principles of Salary Determination: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	MEDIAN SCORE			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Amount of education or number of degrees	2.1	2.0	1.6*	1.9
Length of service in system	2.3	2.2	1.9*	2.1
Total years teaching experience	3.0	3.2	2.7	3.0
Number of duties and responsibilities	4.9	4.3	3.3*	4.5
Demonstration of initiative and creativity in teaching	4.3	4.1	4.9*	4.5
Achievement and performance of students	4.5	4.4	5.4*	4.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Methods of policy formation. Teachers have unclear perceptions of the policy making processes and practices in a school system. The median response to six of the seven items in this area is either slightly agree or slightly disagree. The teachers slightly agree that policy is initiated by the principal, but agreed upon by a majority of teachers, that policy is both initiated and executed by the principal or department head, and that policy is planned co-operatively by all teachers. They slightly disagree that policy is made by the principal or department chairman with a committee of selected teachers, that it is initiated by teacher opinion and implemented by the administration, and that it is made by a selected committee of teachers. There is, however, a consistent strong rejection of the idea that policy making is a *laissez faire* matter in which each teacher individually makes and carries out his own policy (Table IX.20).

Table IX.20—Methods of Policy Formation: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Initiated by immediate superior and agreed upon by majority of teachers	3.8*	2.6	2.5	3.0
Initiated and implemented by immediate superior	2.8	3.2	3.4	3.1
Planned co-operatively by all teachers	3.8	3.1	3.1	3.4
Initiated by immediate superior in consultation with selected teachers	4.0*	2.7	3.6	3.5
Initiated by teachers and carried out by immediate superior	3.9	3.0	3.9	3.7
Planned and implemented by elected committee of teachers	4.0	4.1	4.7	4.2
Initiated and carried out by individual teacher	5.0*	4.6	4.7	4.8

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Methods of acknowledging outstanding teaching. There is no clear-cut perception on the part of teachers of the way in which superior teaching is rewarded by the school. The responses to all five

items in this area range between slightly agree and slightly disagree. There is a tendency to see increased autonomy or promotion as being more usual ways of rewarding a teacher than increased salary or praise and public recognition (Table IX.21).

**Table IX.21—Methods of Acknowledging Outstanding Teaching:
Median Scores of Three Groups of Teachers on
Norm Items**

Norm Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
Increased autonomy in teaching activities	3.4	2.9	3.0	3.1
Promotion to positions with greater responsibility	3.9	3.6	2.9*	3.4
Personal satisfaction only	3.6	3.8	3.4	3.6
Increase in salary	3.2	3.5	4.9*	3.8
Praise and public recognition	3.7	4.1	3.8	3.9

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .05 level from X Secondary on basis of median test.

Relationship between teachers and parents. Parents have definitely been extended an invitation to visit the schools and teachers do get to know them. The parents' actual interaction with the teachers in the school, however, is by and large limited to such semiofficial activities as PTA meetings. Teachers neither visit parents in their homes, nor is the interaction between teacher and parent limited to times when a problem has arisen. This interaction pattern suggests that the initiation of relationships rests more with the parents than with the teachers (Table IX.22).

VARIATIONS IN PERCEIVED NORMS

Teachers are not in complete accord among themselves in their perceptions of the institutional practices for behavior. The extent and location of this variation are the topics of this section. As in the discussion of values, two kinds of variations are considered, the extent of consensus among the total group of teachers⁶ and the differences between the subsamples of teachers.

Table IX.22—Relationship Between Teachers and Parents: Median Scores of Three Groups of Teachers on Norm Items

Norm Item	M E D I A N S C O R E			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
Porents visit teachers in school	1.5*	1.8	1.3*	1.5
Teochers and parents become acquainted only at meetings such as PTA	3.7*	2.7	3.5	3.3
Teachers visit parents in homes	3.3*	4.7	5.1	4.2
Teachers and porents become acqouinted only when problem arises	4.8*	3.7	4.3	4.5
Teachers and parents hove no contact whatsoever	5.8*	5.5	5.8*	5.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).
* Differs significantly at .05 level from X Secondary on basis of median test.

Consensus among Teachers

The actual range of teachers' responses for over 95 per cent of the norm items was 6; that is, there were individuals who agreed strongly that a given practice prevailed in their school and other individuals who disagreed strongly that such was the case. This spread of responses is interpreted as indicating a lack of consensus among the individuals in the sample.

The quartile deviation was calculated for each of the norm items.⁷ The median quartile deviation of the norm items was 1.1. Quartile deviations of less than this magnitude will be said to reflect relative consensus and quartile deviations greater than this magnitude will be said to reflect relative lack of consensus.

The 10 areas of education considered were split into two groups, one on which there was relatively high consensus among the teachers and the other on which consensus was relatively low. The areas in which there was relatively high consensus, teacher-pupil relationships, role of the teacher, principles of salary determination, role of the immediate superior, and teacher-parent relationships, have an average quartile deviation of 0.9. The areas in which there was relatively low consensus, goals of education, methods of teaching, methods of policy making, acknowledgement of outstanding teach-

ing, and teacher-teacher relationships, have an average quartile deviation of 1.2.

It is instructive to note the three or four items on which there is the most consensus among teachers and those three or four items on which there is the least. There was a high degree of consensus among teachers that they are friendly but reserved with their students, that their immediate superiors make decisions and carry out operations, that their salary is based on the amount of education and the number of degrees they have, and that they interact with parents. Little consensus was found concerning the emphasis placed on assign-study-recite as a teaching method, the degree to which teachers discuss professional problems informally, the emphasis placed on vocational preparation as an educational goal, and the extent to which teacher-parent relationships are limited to meetings such as the PTA.

Although each of the 10 areas of education considered may be characterized, generally, as one in which relative consensus did or did not prevail among teachers, this general characterization did not necessarily hold for every item within a given area. Therefore, each area will be briefly discussed pointing out those items, if any, on which the teachers' responses differed from their responses on the other items in the area.

Relationship between teachers and pupils. Teachers were agreed that, "Teachers are friendly but reserved in their relationship with students," although on the other items in this area there was only an average amount of consensus.

Role of the teacher. There was a relative lack of consensus among teachers as to whether the role of the teacher includes as an important function imparting subject matter and controlling students. There was considerable consensus on the other items in this area.

Educational goals of the system. There was relative consensus that the teaching of knowledge and skills in subject matter is an important goal, even though there was a general lack of consensus among the teachers on the other items.

Relationship among teachers. Consensus was generally low on all the items in this area.

Methods of teaching. Consensus was generally low on all the items in this area.

Role of teacher's immediate superior. There was more consensus in the teachers' perceptions of their immediate superior as one who makes decisions, directs operations, and provides administrative machinery than on the other items.

Principles of salary determination. The teachers agreed among themselves that salary is based on the length of service in the system rather than upon the amount of education and number of degrees possessed by the teacher. On the other hand, they did not agree among themselves as to the importance of total years of teaching experience or number of assigned duties and responsibilities in determining salary.

Methods of policy formation. Although in general there was no consensus among the teachers in their perceptions of the policy making process, they all did agree that it was not a *laissez faire* procedure in which each teacher acted independently.

Methods of acknowledging outstanding teaching. There was generally low consensus on all the items in this area.

Relationship between teachers and parents. In this area the teachers agreed, generally, that they do have some contact with parents and that parents are invited to visit the school. There was a relative lack of consensus, however, as to whether the actual interaction is limited to informal but semiofficial meetings such as the PTA.

Similarity between Secondary and Elementary School Teachers

Teachers in the elementary and secondary schools of the same system perceive somewhat similar practices, even though they teach at different levels. There are, however, considerable differences between them.

Teachers at the two levels are most similar in their perceptions of the role defined for the teacher, teacher-teacher relationships, the role of the teacher's immediate superior, principles upon which salary is based, and the methods of acknowledging superior teaching. These are all areas in which central policy can be made.

Conversely, their perceptions of the practices in the areas of

teacher-pupil relationships, goals of education, methods of teaching, teacher-parent relationships, and policy making are less similar. These areas are less subject to central control. Furthermore, since they impinge more directly on the teachers' relationships with students, practices in these areas may be more affected by differences in age and status of students. Thus, differences between practices at the two levels and, as a result, the teachers' perceptions of practices would be expected.

Data on the perceptions of the secondary and elementary school teachers and the differences between the two groups are found in Tables IX.13 through IX.22 and are reviewed briefly here.

Relationship between teachers and pupils. Both the elementary and the secondary teachers perceive that friendly but reserved relationships with students, which need not be maintained in all circumstances, constitute the dominant practice in this area. Elementary teachers, more than secondary teachers, tend to treat their students as equals. They perceive it as proper for a teacher to be a close friend of a student outside the classroom, whereas the secondary school teachers do not. The secondary teachers report that they are expected to be impersonal in the classroom also, while the elementary teachers do not. Thus, the norms call for closer, more personal, and more equalitarian relationships for the elementary school teachers both in the classroom and outside of it. This may reflect a feeling that because the age difference is large, a close relationship between teachers and pupils is "less dangerous" in the elementary school than it is in the secondary school (Table IX.13).

Role of the teacher. There were no significant differences between secondary and elementary teachers in this area (Table IX.14).

Educational goals of the system. Elementary and secondary schools differ most dramatically on the matter of preparation for college entrance. This is the second most emphasized goal in the secondary, but the second least emphasized in the elementary school. The elementary school tends to emphasize the development of love of and interest in learning, character formation, and emotional maturity more than does the secondary; the secondary school emphasizes vocational preparation more than does the elementary. Developing

intellectual ability and teaching knowledge and skill in various subject matters both receive about the same emphasis and were two of the three most highly ranked goals for both the elementary and the secondary schools. These rankings probably take on different meanings at the two levels, however, because of the different emphasis put on preparation for college. Intellectual skills are likely to be considered as more legitimate ends in and of themselves in the elementary school than they are in the secondary school. In the secondary school they take on a pragmatic value in light of the problem of college entrance (Table IX.15).

Relationship among teachers. There were no significant differences between elementary and secondary teachers in this area (Table IX.16).

Methods of teaching. The norms in the elementary and secondary schools differ markedly on two techniques: The assign-study-recite method is the second most emphasized in the secondary school, but is the second least emphasized in the elementary school. Teacher-supervised study and practice is the most emphasized method in the elementary school, but it receives only a medium emphasis in the secondary school. The various other techniques were given about the same median rank by both secondary and elementary teachers (Table IX.17).

Role of teacher's immediate superior. The perceived practices in this area are very similar for the elementary and secondary samples, but the elementary school teachers perceive their immediate superior as functioning slightly more in the role of a supervisor and evaluator (Table IX.18).

Principles of salary determination. There were no significant differences between elementary and secondary teachers in this area (Table IX.19).

Methods of policy formation. The initiation and implementation of policy is viewed as the prerogative of the principal and not of the teachers in the elementary school. In the secondary school, on the other hand, policy making is perceived as being shared by the teachers and the administration. A *laissez faire* method of policy formation is not perceived as prevailing in either the elementary or

secondary school, although this method tends to be more prevalent in the secondary school (Table IX.20).

Methods of acknowledging outstanding teaching. There were no significant differences between elementary and secondary teachers in this area (Table IX.21).

Relationship between teachers and parents. Both elementary and secondary teachers perceive the norms as sanctioning the extension of invitations to parents to visit the school and disapproving both the idea of having no contact with parents and the idea of having contact only in case a problem arises. There is a tendency, however, for these practices to be more emphasized in the elementary school; that is, the secondary school is less likely to emphasize inviting parents to visit the school and is more likely to accept some limitation of contact with the parents. The elementary school teachers report visiting with parents in their homes, but the secondary school teachers do not. The secondary school teachers' acquaintance with parents is limited to informal but semi-official groups such as the PTA, whereas the elementary school teachers' is not. Thus, in terms of perceived institutional practices, the elementary teacher has a closer, more intimate, and more personal relationship with the parents of his students than does the secondary school teacher (Table IX.22).

Similarities between Two Educational Systems

Differences in perceived institutional practices do occur between secondary teachers in both systems, but they are not so dramatic as the differences between secondary and elementary teachers within a single system. The median scores on the norm items for the two groups of secondary teachers and the differences between them are reported in detail in Tables IX.13 through IX.22 and are reviewed briefly here. It is interesting to note that the major differences in practices between these two systems are in the areas in which they are experimenting with innovations, namely, principles of salary determination and methods of teaching.

Relationship between teachers and pupils. The practices in the two school systems are very similar in this area. However, it is more

proper in school Y than in school X for teachers to become close friends with their pupils outside the classroom (Table IX.13).

Role of the teacher. In this area the practices in both systems are very much alike. There is a tendency to emphasize the disciplinarian function of the teacher in school Y (Table IX.14).

Educational goals of the system. The goals of the two systems are quite similar in general, but more emphasis is put on college preparation in school Y and on character formation in school X (Table IX.15).

Relationship among teachers. There were no significant differences between the two systems in this area, yet there is a tendency for interaction between teachers to be somewhat more restricted in school Y than in school X (Table IX.16).

Methods of teaching. School X tends to place relatively more emphasis on individual and group projects, small group discussion, and independent study as techniques of instruction. School Y tends to emphasize assign-study-recite and large group lectures as methods (Table IX.17).

Role of teacher's immediate superior. There were no significant differences between the two systems in this area (Table IX.18).

Principles of salary determination. The general principles upon which salary is based are similar in the two schools, but there are some slight differences in emphasis. School Y places more emphasis on the objective criteria of experience, length of service in the system, amount of education, number of degrees, and assigned duties and responsibilities, while in school X initiative and creativity in teaching and the quality of achievement and performance of students are emphasized (Table IX.19).

Methods of policy formation. There were no significant differences between the two systems in this area (Table IX.20).

Methods of acknowledging outstanding teaching. An outstanding teacher in school X is likely to be rewarded with an increase in salary; in school Y he is more likely to be promoted to a job with greater responsibility (Table IX.21).

Relationship between teachers and parents. There is a tendency for teacher-parent relationships to be closer in school Y than in school X (Table IX.22).

A COMPARISON OF VALUES AND NORMS

Although the discussion in this section is based on the data presented in two previous sections, attention is focused on differences between values and norms and not on the values and norms themselves.

Consensus in Values and in Norms

A rough index of the clarity and explicitness of an institution's norms is assumed to be the amount of consensus which prevails among the personnel in their perceptions of its norms. If the personnel associated with an institution come from a relatively heterogeneous background and if the norms of the institution are relatively definite, one would expect more consensus among the personnel's perceptions of the norms for behavior in a given area than in their reported values in that same area.

Table IX.23—Relative Frequency of Quartile Deviations of Various Magnitudes for Value and Norm Items

Type of Item	MAGNITUDE OF QUARTILE DEVIATION			Total
	$Q > 1.1$ <i>f</i>	$1.1 \geq Q \geq .9$ <i>f</i>	$.9 > Q$ <i>f</i>	
Value	13	19	29	61
Norm	24	23	14	61
Total	37	42	43	122

$$\chi^2 = 8.88 \quad p < .02$$

Table IX.23 shows that there was more consensus among teachers' values than in their perceptions of norms. As pointed out previously, Q is a measure of the dispersion of the responses to a given item, the smaller the Q the more consensus among the group on that item. The norm items tended to have relatively large Q 's; the value statements to have relatively small Q 's. The same result obtained for the three subsamples, as well as for the total group of teachers.

Another test of this same phenomenon may be made. Each item may be inspected to see whether the Q for the norm or the Q for the value statement is the larger.⁸ The Q for the value statement was larger than the Q for the norm statement in only 78 of the 183 cases (61 items for three groups). The probability of such an

occurrence, if there were no real difference between the quartile deviation for the norms and the values, is less than three times in one hundred.⁹ Thus it may be concluded that there is more dispersion among the responses to the norm items than among the responses to the value items or, in other words, that there is more consensus among the teachers on values than on perceived norms.

There are at least two alternative interpretations of these data. The first interpretation, in the light of our argument at the beginning of this section, is that education lacks a definite and clear-cut charter or statement of legitimate ends and means. The second is that the charter, although clear-cut in its statement, legitimatizes a plurality of ends and means without providing the necessary criteria for determining priorities among them. In either case, the teacher is provided little guidance within the institutional setting and may find it difficult to deal rationally with felt conflicts between personally held values and the institutional charter, if the latter is vague and ambiguous.

These statements concerning the ambiguity of the charter must be qualified. It was noted earlier that in certain areas there is considerable consensus among the teachers in their perceptions of practices in the schools. The charter appears to be rather explicit in the areas of relationship between teachers and pupils and the principles of salary determination; it is relatively explicit in the areas of role of the teacher, role of the teacher's immediate superior, methods of policy formation, and relationship between teachers and parents. The charter is least explicit in the areas of educational goals, relationship among teachers, methods of teaching, and methods of acknowledging superior teaching. In three of the areas where the charter is relatively explicit, however, it affirms the legitimacy of a plurality of practices; that is, in the areas of teacher's role, role of the teacher's immediate superior, and policy making, there is consensus among the teachers in reporting the existence of a wide variety of normative practices.

Congruence between Values and Norms

Here we will focus on the amount of congruence between the values of the teachers and their perceptions of practices in the schools.

The hypothesis underlying this concern with congruence between values and perceived norms is that lack of congruence is a potential source of conflict and teacher stress (Goethals, 1958).

The emphasis will be on differences between values and norms rather than on the values and norms themselves. The presentation of data is in terms of sample medians. An assumption underlying this presentation is that a discrepancy between a group's median value and that group's median perceived norm reflects a discrepancy between value and norm for a number of individuals within that group. Such discrepancies are a source of personal conflict leading to tensions, and it is these with which mental health is ultimately concerned.

In order to test the validity of our assumption, discrepancies between norms and values for individual teachers were computed. The areas in which differences were found between group medians on values and norms were the same areas in which individuals had large discrepancies between values and norms. Conversely, the areas in which there was congruence between a group's median norms and values were the same areas in which there were few discrepancies between values and norms for individual teachers.

Areas in which there is most congruence between values and norms, and which, therefore, have the least potential for conflict and stress, are teacher-pupil relationships, role of the teacher, and role of the teacher's immediate superior. Areas with moderate congruence are methods of teaching, methods of policy determination, and teacher-parent relationships. The areas in which there is the most discrepancy between values and norms, and which, therefore, have the most potential for conflict and teacher stress, are the educational goals, relationship among teachers, principles of salary determination, and reward for superior teaching.

Relationship between teachers and pupils. There is relatively close congruence between values and norms in this area. The teachers would prefer that a little more distance be maintained between themselves and the students, but not too much more (Table IX.24).

Role of the teacher. The teachers act as disciplinarians much more than they think they should. The practice is for the teacher to be a character model, to guide and assist the student in learning, and to

Table IX.24—Relationship Between Teachers and Pupils: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	M E D I A N S C O R E			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
<i>Friendly but reserved</i>				
Value	1.8*	1.8	1.9	1.8*
Norm	2.0	2.0	2.0	2.0
<i>Close friends outside school</i>				
Value	3.3*	3.7	2.9	3.3
Norm	2.9	3.8	2.8	3.1
<i>Impersonal in classroom, informal and friendly outside classroom</i>				
Value	4.3	2.6	3.2	3.5
Norm	3.8	3.0	2.9	3.3
<i>Treated as equals, not as subordinates</i>				
Value	3.7	4.7	4.3	4.1
Norm	3.8	4.1	4.0	3.9
<i>Social distance maintained at all times</i>				
Value	3.5	3.0*	3.9*	3.5*
Norm	4.1	4.1	4.2	4.1

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

stimulate thinking and interest of the student, but not as much as the teachers would like. This same pattern is reflected in each of the three subsamples (Table IX.25).

Educational goals of the system. There is considerable discrepancy between values and norms in the area of goals of education. In general, knowledge and skills in subject matter, social skills, vocational preparation, and college entrance are perceived as receiving too much emphasis, whereas love of and interest in learning, development of intellectual ability, character formation, emotional maturity, and transmission of cultural values are not emphasized enough.

This lack of congruence between the valued goals and the perceived goals of the school system is reflected in an extreme manner in the two secondary schools. Preparation for college entrance is a goal with rather high priority in both secondary schools, but has a rather low priority among the teachers' values. Conversely, love of and interest in learning, the most valued goal among the secondary

Table IX.25—Role of the Teacher: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	MEDIAN SCORE			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
<i>Evaluate progress and motivate dilatory student</i>				
Value	2.2	2.6	2.5	2.4
Norm	2.3	2.4	2.3	2.3
<i>Impart subject matter</i>				
Value	3.2	3.7	2.9	3.2
Norm	3.2	3.3	2.9	3.1
<i>Stimulate thinking and interest</i>				
Value	1.7*	1.7*	1.7*	1.7*
Norm	2.1	2.1	2.3	2.2
<i>Serve as character model</i>				
Value	1.3*	1.5	1.4*	1.4*
Norm	1.8	1.9	2.1	1.9
<i>Guide and assist learning experiences</i>				
Value	1.4*	1.5*	1.7*	1.5*
Norm	1.9	2.2	2.2	2.1
<i>Control students</i>				
Value	5.7*	5.6*	5.5*	5.6*
Norm	3.5	3.4	2.7	3.2

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

school teachers, is perceived as low in priority among the schools' goals. Similarly, but to a lesser extent, we find that knowledge and skill in subject matter, social skill development, and vocational preparation receive more emphasis from the schools than the teachers personally would like; whereas development of intellectual ability, development of emotional maturity, formation of character, and transmission of cultural values receive less.

In short, secondary teachers value the development of various aspects of the individual's personality as an end in itself, and they also value the transmission of certain cultural values. They perceive the schools, however, as placing more emphasis on pragmatic skill development and training to meet rather specific demands for the future.

An example of how a simple shift in emphasis can change the over-all picture is found by examining the three goals the teachers value most highly and the three goals they perceive as receiving top priority in the schools. The teachers value love of an interest in learning, knowledge and skills in subject matter, and development

of intellectual ability; the goals which receive top emphasis from the schools are preparation for college entrance, knowledge and skills in subject matter, and development of intellectual ability. Although two of these—knowledge and skills in subject matter and development of intellectual ability—are found in both lists, they take on entirely different connotations when they are viewed as serving the end of love of and interest in learning rather than serving as tools to insure college entrance.

The situation is different in the elementary school. Although the schools still tend to emphasize intellectual development and to de-emphasize personality development more than elementary teachers think they should, the differences are not so dramatic as

Table IX.26—Educational Goals: Median Ranks of Three Groups of Teachers for Value and Norm Items

Educational Goal	MEDIAN RANK			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
<i>Develop intellectual ability</i>				
Value	3.4	3.3	2.7*	3.2
Norm	3.4	4.0	3.5	3.6
<i>Develop knowledge and skill in subject matter</i>				
Value	2.6*	2.8	3.2*	2.8*
Norm	2.0	2.1	2.2	2.1
<i>Prepare for a vocation</i>				
Value	8.0	7.2	7.0*	7.7*
Norm	7.8	6.4	5.6	7.0
<i>Form character</i>				
Value	2.8*	4.0*	3.6*	3.4*
Norm	4.2	5.6	6.5	5.2
<i>Develop social skills</i>				
Value	6.5*	7.5*	7.8*	7.1*
Norm	5.6	6.5	6.3	5.9
<i>Transmit cultural values</i>				
Value	6.2	5.1	4.5*	5.5*
Norm	6.2	5.7	6.3	6.2
<i>Develop emotional maturity</i>				
Value	4.8*	4.9*	5.6*	4.9*
Norm	5.8	6.7	6.8	6.3
<i>Develop love of and interest in learning</i>				
Value	2.1*	2.2*	2.2*	2.2*
Norm	3.5	4.4	4.9	4.0
<i>Prepare for college entrance</i>				
Value	8.2*	7.5*	6.7*	7.7*
Norm	7.1	3.0	1.9	4.1

Note: Possible ranks range from 1.0 (highest rank) to 9.0 (lowest rank).

* Differs significantly at .05 level from norm rank on basis of median test.

they are in the secondary school. In the elementary school, thus, it seems to be a matter of relative emphasis rather than a question of disparate goals (Table IX.26).

Relationship among teachers. Here we find that teachers value teacher-teacher interaction and reject the idea that such interaction be limited. They report that although interaction occurs in the school, it is quite restricted in nature. The data suggest that, whether intentionally or through oversight, the schools have failed to provide an opportunity for teachers to interact and communicate with each other to a sufficient extent either on a purely social or professional level. Informal observation leads one to suggest that this failure is twofold—schools provide neither the time nor the place for such interaction to take place. These findings hold in all three subsamples (Table IX.27).

Table IX.27—Relationship Among Teachers: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
<i>Informal discussion of professional problems</i>				
Value	1.6*	1.8*	1.8*	1.7*
Norm	2.7	2.5	3.1	2.7
<i>Informal nonprofessional conversation</i>				
Value	1.4*	1.5*	1.6*	1.5*
Norm	2.4	2.2	3.1	2.6
<i>Regularly scheduled meetings only</i>				
Value	5.4*	5.0*	5.2*	5.2*
Norm	2.8	3.3	2.6	2.9
<i>Minimum of professional and personal interaction</i>				
Value	5.2*	5.4*	5.6*	5.4*
Norm	2.6	2.7	2.2	2.5

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

Methods of teaching. The rank ordering of teaching methods in terms of the emphasis the total group of teachers think each should receive as compared with the emphasis they think each does receive is rather similar. However, there is one exception—the assign-study-

recite method. This latter method is little valued by the teachers, but receives considerable emphasis in practice. Small group sessions in which there is an active interchange between teacher and students receive a bit less emphasis in practice than teachers think they should.

The results in this area differ in the three subsamples. Among the elementary school teachers there is rather close congruence between the instructional methods they value and the institutional practices. Teacher-supervised study and practice and assign-study-recite receive somewhat more emphasis than elementary teachers would like, while presentation to small groups and small group discussion receive less. The relative position of these various methods in both the value and the norm hierarchy, however, is similar.

There is less congruence between values and norms among X secondary school teachers than among X elementary teachers. Here, the assign-study-recite technique is perceived as prevalent in practice, although it is little valued by the teachers. On the other hand, small group sessions with active teacher-student interaction are less emphasized than X secondary teachers think they should be.

Y secondary teachers have less congruence between values and norms than do either of the other two groups of teachers. These teachers report that assign-study-recite and lectures to large groups, methods they do not feel should be emphasized, are quite prominent instructional techniques in their school. The techniques they feel should be emphasized, presentations to small groups and small group discussion, receive little emphasis in practice.

The area of instructional methods, then, seems to be a potential source of conflict primarily within the secondary schools where the assign-study-recite method is emphasized at the expense of the more highly valued methods, presentations to small groups and small group discussions. These findings may very well be related to the finding that preparation for college is, in practice, the goal which is paramount in the secondary schools (Table IX.28).

Role of teacher's immediate superior. There are no dramatic differences between values and norms in this area. Teachers want their immediate superior to perform a wide variety of roles and they report that their principal or department head does perform these

Table IX.28—Teaching Methods: Median Ranks of Three Groups of Teachers for Value and Norm Items

Teaching Method	MEDIAN RANK			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
<i>Teacher-supervised study and practice</i>				
Value	3.7*	4.3	5.1	4.3
Norm	2.5	4.6	5.1	4.2
<i>Independent study</i>				
Value	5.4	5.4	6.2	5.6
Norm	5.4	5.5	6.7	5.7
<i>Large group lecture</i>				
Value	7.0	7.5	6.9*	7.0
Norm	7.1	7.5	4.1	6.9
<i>Individual and group projects</i>				
Value	3.0	3.4*	3.8	3.4
Norm	2.7	2.5	4.1	3.0
<i>Large group lecture combined with small group discussion</i>				
Value	4.6	5.1*	3.6	4.3*
Norm	4.9	6.2	3.8	4.9
<i>Small group discussion</i>				
Value	3.1*	2.6*	2.5*	2.8*
Norm	3.8	3.5	4.6	4.0
<i>Presentation to small groups who can ask questions</i>				
Value	1.9*	1.9*	1.8*	1.9*
Norm	3.2	3.6	3.9	3.5
<i>Assign-study-recite</i>				
Value	7.6*	5.7*	6.1*	6.7*
Norm	6.3	2.9	1.4	4.0

Note: Possible ranks range from 1.0 (highest rank) to 8.0 (lowest rank).

* Differs significantly at .05 level from norm rank on basis of median test.

roles, although not quite to the extent they would like. The teachers want more activity, rather than less, on the part of their immediate superior. The same general findings hold across all three subsamples (Table IX.29).

Principles of salary determination. This is another area that seems to be a potential source of conflict. The teachers feel that they should be paid on the basis of their assigned duties and responsibilities rather than in terms of the amount of education or number of degrees that they possess. They prefer to be paid for the amount of work they do rather than for the amount of training they had before assuming the position. In actual practice, however, they report being paid in terms of the amount of education or number of degrees they have, and they feel that very little consideration is given to the

Table IX.29—Role of Teacher's Immediate Superior: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	MEDIAN SCORE			
	X Elementary	X Secondary	Y Secondary	Total Group of Teachers
<i>Provide administrative machinery for efficient functioning of school or department</i>				
Value	2.0	2.1	2.4	2.1
Norm	2.1	2.2	2.3	2.1
<i>Serve as intermediary between teachers and administrative officials</i>				
Value	4.0	3.8	4.2	4.0
Norm	3.9	4.1	4.0	4.0
<i>Make decisions and direct operation of school or department</i>				
Value	1.8	2.0	1.9	1.9*
Norm	2.0	2.2	2.1	2.1
<i>Supervise and evaluate work of teachers</i>				
Value	1.9	2.2*	1.7*	1.9*
Norm	2.2	2.6	2.3	2.3
<i>Provide stimulating leadership for teachers</i>				
Value	1.7*	1.8*	1.4*	1.7*
Norm	2.1	2.6	2.5	2.3
<i>Mediate internal differences and conflict within school or department</i>				
Value	2.6*	2.9	2.4*	2.6*
Norm	3.4	3.4	3.5	3.4

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

duties and responsibilities they carry out. In addition, the teachers would like to have their salaries based on their initiative and creativity in teaching and perhaps, but to a lesser extent, on the quality of achievement and performance of their students. These latter two areas are given little weight in practice. Total years of teaching experience is a highly weighted factor in determining salary but is little valued by the teachers. They feel, however, that length of service in a given system should be an important basis for salary and report that in practice it is. These findings hold for all three subsamples (Table IX.30).

Table IX.30—Principles of Salary Determination: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	MEDIAN SCORE			
	X Element- ary	X Second- ary	Y Second- ary	Total Group of Teachers
Length of service in system				
Value	2.4	2.2	1.9	2.2
Norm	2.3	2.2	1.9	2.1
Total years of teaching experience				
Value	4.0*	4.0*	3.8*	3.9*
Norm	3.0	3.2	2.7	3.0
Achievement and perform- ance of students				
Value	3.2*	3.3*	4.1*	3.4*
Norm	4.5	4.4	5.4	4.7
Demonstration of initiative and creativity in teaching				
Value	2.3*	2.3*	2.3*	2.3*
Norm	4.3	4.1	4.9	4.5
Amount of education or number of degrees				
Value	4.0*	5.0*	4.6*	4.7*
Norm	2.1	2.0	1.6	1.9
Number of duties and responsibilities				
Value	1.4*	1.4*	1.3*	1.4*
Norm	4.9	4.3	3.3	4.5

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

Methods of policy formation. Teachers think they should participate in policy making more than they actually do and they report the administration dominates such processes more than they would like. It is interesting to note that although joint policy making by teachers and administration is the preference of teachers, they feel no one method of policy formation predominates. It seems as if teachers know what they would like to be the case, yet have no clear-cut impression of what are the actual procedures in this area. There is one exception to this generalization. Teachers do not value a *laissez faire* manner of forming policy, nor does it seem to exist in practice.

This description applies to all three subsamples, but is most clear in the elementary school. The elementary teachers value participation in the policy making process more and administration-dominated

processes less than do secondary teachers. It is also true that within the elementary school, particularly, the teachers are not able to report precisely what policy making process actually prevails. Thus the conflict is perhaps intensified here (Table IX.31).

Table IX.31—Methods of Policy Formation: Median Scores of Three Groups of Teachers on Value and Norm Items

Item	MEDIAN SCORE			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
<i>Initiated and carried out by individual teacher</i>				
Value	4.7	4.5	5.0	4.7
Norm	5.0	4.6	4.7	4.8
<i>Planned and carried out by elected committee of teachers</i>				
Value	4.6*	4.1	4.3	4.4
Norm	4.0	4.1	4.7	4.2
<i>Initiated and implemented by immediate superior</i>				
Value	3.8*	3.7	4.1*	3.9*
Norm	2.8	3.2	3.4	3.1
<i>Initiated by immediate superior in consultation with selected teachers</i>				
Value	4.7*	3.7*	4.6*	4.4*
Norm	4.0	2.7	3.6	3.5
<i>Initiated by teachers and carried out by immediate superior</i>				
Value	2.7*	2.7*	2.9*	2.8*
Norm	3.9	3.0	3.9	3.7
<i>Initiated by immediate superior and agreed upon by majority of teachers</i>				
Value	1.5*	1.7*	1.9*	1.8*
Norm	3.8	2.6	2.5	3.0
<i>Planned co-operatively by all teachers</i>				
Value	2.1*	2.1*	2.1*	2.1*
Norm	3.8	3.1	3.1	3.4

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

Methods of acknowledging outstanding teaching. The teachers value an increase in salary, praise and public recognition, and increased autonomy as rewards for superior teaching; they do not feel that personal satisfaction is sufficient. But they are not sure that they get any one of these as a reward for outstanding teaching.

This, then, is another area in which there is no clear-cut normative practice. Consequently, teachers feel that they are not getting sufficient increases in salary, praise and public recognition, and autonomy. They feel, on the other hand, that too often personal satisfaction is their only reward.

The same findings hold for all three subsamples. Generally, however, in X system there is, for both elementary and secondary teachers, more congruence between norms and values on "increase in salary" and for secondary teachers on "increased autonomy." There is one other interesting finding. Promotion to positions with more responsibility is utilized more in system Y than teachers in that system think it should be (Table IX.32).

**Table IX.32—Methods of Acknowledging Outstanding Teaching:
Median Scores of Three Groups of Teachers on
Value and Norm Items**

Item	M E D I A N S C O R E			
	X Elemen- tary	X Second- ary	Y Second- ary	Total Group of Teachers
<i>Promotion to positions with greater responsibility</i>				
Value	3.5	3.0	3.5*	3.4
Norm	3.9	3.6	2.9	3.4
<i>Personal satisfaction only</i>				
Value	4.3*	4.6*	4.7*	4.5*
Norm	3.6	3.8	3.4	3.6
<i>Increased autonomy in teaching activities</i>				
Value	2.2*	2.3*	2.1*	2.2*
Norm	3.4	2.9	3.0	3.1
<i>Praise and public recognition</i>				
Value	2.0*	2.0*	2.1*	2.0*
Norm	3.7	4.1	3.8	3.9
<i>Increase in salary</i>				
Value	1.8*	1.8*	1.6*	1.8*
Norm	3.2	3.5	4.9	3.8

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Value score differs significantly at .05 level from norm score on basis of median test.

Relationship between teachers and parents. Teachers want to invite parents to visit the school and report that they do so. On the other hand, although they would like to visit parents in their homes, they are not invited. They do not think teacher-parent relationships should be limited to meetings such as the PTA, but feel that this tends to happen in practice. Furthermore, they do not want their

relationship with parents limited to problem situations, but feel that this also happens too often. In general, then, the teachers want close relationships with the parents and initiate efforts in this direction. Parents either do not reciprocate or find the school situation one which somehow does not promote intimate relationships.

This same pattern appears in all three subsamples, but it is not quite so extreme in the elementary school. There the teacher sometimes visits parents in their home and the parents are more likely to visit the school on other than semiformal occasions (Table IX.33).

**Table IX.33—Relationship Between Teachers and Parents:
Median Scores of Three Groups of Teachers on
Value and Norm Items**

Item	MEDIAN SCORE			
	X Element- ary	X Second- ary	Y Second- ary	Total Group of Teachers
Parents visit teachers in school				
Value	1.5	1.8	1.4	1.5
Norm	1.5	1.8	1.3	1.5
Teachers and parents have no contact whatsoever				
Value	5.9	5.7	5.9	5.9
Norm	5.8	5.5	5.8	5.7
Teachers visit parents in homes				
Value	2.5*	3.0*	2.9*	2.8*
Norm	3.3	4.7	5.1	4.2
Teachers and parents become acquainted only when problem arises				
Value	5.6*	5.4*	5.4*	5.5*
Norm	4.8	3.7	4.3	4.5
Teachers and parents become acquainted only at meetings such as PTA				
Value	5.0*	5.0*	5.1*	5.0*
Norm	3.7	2.7	3.5	3.3

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).
* Value score differs significantly at .05 level from norm score on basis of median test.

SUMMARY

It is not possible to summarize all of the interesting and potentially important items of information which have been presented in the foregoing chapter. Rather, several generalizations which will

be discussed later on and their implications for mental health will be enumerated.

1. The interpersonal relationships involved in the various tasks teachers perform every day are of primary concern to them.

2. There is considerable variation among teachers within each subsample in their educational values.

3. Elementary teachers and secondary teachers as groups have essentially similar values.

4. Elementary and secondary teachers' perceptions of practices differ in a number of areas.

5. There was considerable lack of consensus within each subsample's perceptions of normative practices within a given school.

6. Discrepancies between teachers' values and their perceptions of institutional norms occurred in approximately two-thirds of the items for each of the three subsamples. These discrepancies occurred in the same areas for the three subsamples and were often of considerable magnitude.

7. The areas with the largest discrepancies between values and norms are, with one exception, also the areas in which the teachers have the least consensus in their perceptions of normative practices. These areas are goals of education, relationship among teachers, methods of teaching, methods of policy formation, and methods of acknowledging outstanding teaching; the exception occurred in the area of principles of salary determination.

The Professional Educator and the Layman

TWO SETS of data will be presented in this chapter. First, the students in Y high school will report, in a manner similar to the teachers, on their educational values and their perceptions of institutional practices. This report will be followed by a comparison between the views of the students and those of the teachers which focuses on differences between them. Second, the attitudes and views of college seniors towards teaching as an occupation will be presented. The focus will be on differences between students who are preparing to be teachers and students who are not.

A REPORT FROM THE STUDENTS

A questionnaire similar in form and content to the one administered to teachers was also given to a sample of students in Y high school.¹ This questionnaire was somewhat shorter in form than that of the teachers and the items were reworded to fit the experience and vocabulary of high school students. Both value and norm items were included for the areas of relationship between teachers and pupils, role of the teacher, educational goals of the system, relationship among teachers, methods of teaching, and relationship between teachers and parents. The students were also asked to report their feelings about the appropriateness of certain behaviors in the areas of salary determination, reward for superior teaching, policy making, and the role of the chairman of the department. Because the form of the items in these latter four areas departed from the form used in the teachers' questionnaire, they may not be strictly comparable.

Description of the Sample

The questionnaire was administered to 182 students, 88 males and 94 females, enrolled in the tenth and eleventh grades of Y high school. The fathers of 72 per cent of these students are in professional and managerial or semiprofessional occupations; only 28 per cent of the fathers are "blue collar workers."² As for religious orientation, 48 per cent of the sample identified themselves as Jewish, 25 per cent as Catholic, and 21 per cent as Protestant; the other 6 per cent did not report their religious affiliations. Six-sevenths reported that they plan to continue their education after high school; some of these plans are for business school and junior college, but a large majority of them include four year colleges.

Students' Values and Norms

The students' values and perceptions of institutional practices, presented in terms of sample medians, are discussed together. They are organized around the same areas that were used to explicate the teachers' values and norms.

Relationship between teachers and pupils. In general, the students do not perceive their teachers to be as friendly, equalitarian, and personal as they would like. Students feel that their teachers should be friendly, equalitarian, and personal both inside and outside the classroom, but perceive them as reserved and even impersonal inside the classroom, although informal and friendly outside. They do not perceive teachers as treating students as equals, nor do they perceive teachers and students as trying to be close friends (Table X.1).

Table X.1—Relationship Between Teachers and Pupils: Median Scores of Students on Value and Norm Items

Item	MEDIAN SCORE	
	Value	Norm
Friendly but reserved	2.2	2.2
Impersonal in classroom	3.5*	2.6
Not close friends	4.4*	3.3
Informal and friendly		
outside classroom	1.6*	3.0
Students treated as equals	2.0*	4.8

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from norm score on basis of median test.

Role of the teacher. Students define the teacher's role in terms of imparting subject matter, encouraging thinking and interest in learning, being a character model, evaluating and motivating students, and controlling and disciplining students. They also perceive the teacher as actually fulfilling all these roles, although not to the extent that they would like. This perception of teachers as not adequately fulfilling all the functions defined for them is perhaps quite realistic considering the range of activities that the teacher is expected to engage in (Table X.2).

Table X.2—Role of Teacher: Median Scores of Students on Value and Norm Items

Item	MEDIAN SCORE	
	Value	Norm
Control and discipline to keep class from disorder	2.0	2.2
Be of high morals and serve as model	1.6*	2.6
Watch progress and help student who falls behind	1.9*	3.0
Give grasp of subject matter	1.2*	2.4
Encourage thinking and active interest in learning	1.2*	2.5

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from norm score on basis of median test.

Educational goals of the system. There is, in general, considerable congruence between the goals that students value and the goals they perceive the school as emphasizing. The goals they value, in order of preference, are: knowledge and skills in subject matter, preparation for college, character formation, development of intellectual ability, development of love of and interest in learning, development of emotional maturity, vocational preparation, and transmission of cultural values. The goals they perceive to predominate in the school are similar. There is, however, a tendency for the school to emphasize knowledge and skills in subject matter and preparation for college even more than the students do and to emphasize development of love of and interest in learning less (Table X.3).

Relationship among teachers. The students feel that interaction between teachers should not be limited to formal meetings. They perceive, however, that although teachers usually have a few mo-

Table X.3—Preference for Educational Goals: Median Ranks of Students for Value and Norm Items

Item	MEDIAN RANK	
	Value	Norm
Develop emotional maturity	6.1	6.4
Import cultural values of our society	7.1	6.7
Develop intellectual ability	4.4	4.9
Form character	4.3	5.2
Teach knowledge and skills in subject matter	3.2*	2.2
Develop love of and interest in learning	5.4*	6.5
Prepare for a job	6.5	5.3
Prepare for college entrance	3.8*	2.0

Note: Possible ranks range from 1.0 (most preferred) to 8.0 (least preferred).

* Differs significantly at .01 level from norm score on basis of median test.

ments each day to talk to other teachers, they have very little contact with each other apart from regularly scheduled meetings (Table X.4).

Table X.4—Relationship Among Teachers: Median Scores of Students on Value and Norm Items

Item	MEDIAN SCORE	
	Value	Norm
Time to chat informally	2.8	2.7
Discuss problems in meetings	4.0*	3.3
Very little contact of any kind	4.7*	3.7
Time to talk over work problems	2.4*	3.6

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from norm score on basis of median test.

Methods of teaching. Students do not differentiate very sharply among the teaching methods they value. They prefer small group discussion, assign-study-recite, and presentations to small groups. Then grouped closely together come independent study, individual and group projects, large group lecture combined with small group discussion, and teacher-supervised study and practice. The least preferred method is lectures to large groups.

In the students' perceptions of the practices in their school, the assign-study-recite method is by far the most common; lectures to large groups is second. All the other methods are closely clustered and viewed as receiving little emphasis in practice.

It should be noted, parenthetically, that lectures to large groups is a method being experimented with in this school and is, therefore, very salient in the students' thinking. If this technique is excluded from the analysis, the students still perceive assign-study-recite as receiving too much emphasis and small group discussion and presentation to small groups too little (Table X.5).

Table X.5—Preference for Teaching Methods: Median Ranks of Students for Value and Norm Items

Item	MEDIAN RANK	
	Value	Norm
Teacher-supervised study and practice	5.0	4.6
Individual and group projects	4.6	5.1
Independent study	4.4	5.0
Large group lecture combined with small group discussion	4.8	5.5
Presentation to small groups	3.8*	4.8
Small group discussion directed by teacher	3.1*	4.8
Assign-study-recite	3.3*	1.2
Large group lecture	6.8*	3.7

Note: Possible ranks range from 1.0 (most preferred) to 8.0 (least preferred).

* Differs significantly at .01 level from norm score on basis of median test.

Relationship between teachers and parents. Students do not want teachers to visit in their homes, nor do they want teacher-parent relationships to be limited to situations in which a problem has arisen. The students perceive, however, that sometimes there is little contact between teachers and parents and that what little there is occurs at PTA meetings or when a student is in some difficulty. In general, then, the students desire more of the semiformal contacts between teacher and parent which occur at PTA meetings and feel that contacts should not be limited to circumstances in which the student is having difficulty (Table X.6).

The teacher and selected educational areas. The students were also asked what *should* be the practice in several other areas: role of teacher's immediate superior, principles of salary determination, methods of policy formation, and methods of acknowledging outstanding teaching. They were not asked, however, what their perceptions of existing practices were in these areas. These items were also quite different in form. Thus, they are not directly comparable

Table X.6—Relationship Between Teachers and Parents: Median Scores of Students on Value and Norm Items

Item	MEDIAN SCORE	
	Value	Norm
Teachers visit parents in homes	5.2	5.6
Become acquainted at PTA	1.7*	2.5
No contact whatsoever	5.5*	4.6
Become acquainted only when problem arises	4.6*	2.4

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from norm score on basis of median test.

to the items in the other areas. Nonetheless, the students' responses to these items will be discussed.

Role of teacher's immediate superior. A three-quarters majority of the students feel that the department chairman should be an adviser to teachers and about one-half feel that the department chairman should be a leader and introduce new methods and ideas. Somewhat less than half feel that it is the department chairman's job to encourage originality and independence in the teachers and to decide what is to be taught. Only a small minority of the students feel that it is the department chairman's job to supervise and evaluate the teachers (Table X.7).

Principles of salary determination. A majority of students feel that salary should be based on assigned duties and responsibilities and on the quality of teaching. The students were evenly divided in opinion as to whether salary should be based on the achievement of the students or on the originality of the teacher. A majority think that salary should not be based upon the total number of years a teacher has taught, the amount of education or number of degrees the teacher has, or the number of years the teacher has served in a given system (Table X.7).

Methods of policy formation. A fairly large majority of the students feel that policy decisions should be made co-operatively by all the teachers. Less than half feel that these decisions should be made by a committee elected by the teachers. The students were almost unanimous in their rejection of the idea that such decisions should be made by the chairman of the department alone or with selected teachers. The suggestion that policy formation should be a

laissez faire matter with every teacher making his own decisions was also unanimously rejected. It seems, therefore, that these students believe a town meeting type of democracy should prevail in determining policy (Table X.7).

Methods of acknowledging outstanding teaching. The students apparently do not have any well-formed opinions about how a superior teacher should be rewarded. Praise and recognition, a salary increase, and personal satisfaction were considered appropriate by approximately one half of the students. About one third suggested more autonomy, and about one quarter suggested a promotion (Table X.7).

Table X.7—Selected Educational Areas: Percentage of Students Who Value Certain Practices

Area and Items	Percentage of Students
<i>Role of teacher's immediate superior</i>	
Advise teachers	75
Lead and inspire other teachers	48
Encourage originality	34
Decide what is taught	30
Supervise and evaluate teachers	19
<i>Principles of salary determination</i>	
Assigned duties and responsibilities	63
Quality of job performance	60
Achievement and performance of students	54
Originality and initiative	48
Total years teaching experience	37
Amount of education and number of degrees	36
Number of years in a given system	24
<i>Methods of policy formation</i>	
All teachers cooperatively	69
Committee elected by teachers	34
Chairman and selected teachers	4
Laissez-faire	3
Chairman alone	2
<i>Methods of acknowledging outstanding teaching</i>	
Praise and recognition	47
Raise in salary	46
Personal satisfaction only	43
Increased autonomy	38
Promotion	24

Note: The standard error of the percentage at $P = 50$ is 3.7.

Consensus among Students

Because of the difference in the form of items, a discussion of consensus among the students is possible only for the first six areas

reported in this section. The average quartile deviation of the students' values in these areas was 1.2.³ There was, however, considerably more consensus concerning the teacher's role, where the average quartile deviation was only 0.7. The two items on which students had the least consensus were assign-study-recite as a method of teaching and vocational preparation as a goal of education. The two items on which there was most consensus were the definitions of the teacher's role as an imparter of subject matter and a stimulator of thinking and guide of learning.

The average quartile deviation of the students' perceptions of institutional practices was 1.1. This magnitude was fairly stable over all the areas. The three norm items on which the students had the least consensus were the educational goal of vocational preparation, the teaching methods of small group discussion, and presentation to small groups. The students had the most consensus on the following items: teachers discuss problems in meetings, teachers do not visit parents in their homes, and teachers are friendly but reserved with students.

Over-all, there were no differences in the amount of consensus among students on values and on norms. There was a tendency toward less agreement on values than on norms in the areas of teacher-pupil relationships, teacher-teacher relationships, and goals of education. A contrary tendency—toward more agreement on norms—was found in the area concerning definition of the teacher's role.

A COMPARISON OF TEACHERS AND STUDENTS

Direct comparisons between the responses of students and teachers in Y high school were made on those items which were equivalent, that is, similar in form and content. In some areas this was not possible because the form and content of the items were too radically different. Certain indirect comparisons may be made in these areas, however.

It should be emphasized that the comparisons were made between students and teachers in the same school and that both groups had responded to equivalent items. The focus of the discussion is on

those differences between the two groups which are potential sources of conflict and tension.

Values

On two-thirds of the value items which were directly comparable, teachers and students differed. Some of these differences are more meaningful than others. They will be discussed in keeping with the previous format.

Relationship between teachers and pupils. There were three comparable items in this area. Teachers and students agreed that teachers should be friendly but reserved in the classroom. They also agreed, but to a lesser extent, that it is permissible for teachers and students to be close friends outside class. Students feel they ought to be treated as equals but teachers do not subscribe to this idea.

Yet teachers and students both desire a warm, close, personal relationship. Teachers want this relationship to be in the framework of a differentiated status system, whereas students would like this relationship to be on a more equalitarian basis (Table X.8).

Table X.8—Relationship Between Teachers and Pupils: Median Scores of Teachers and Students on Equivalent Value Items

Value Item	M E D I A N S C O R E	
	Teacher	Student
Friendly but reserved	1.9	2.2
Social distance maintained at all times	3.9	4.4
Treated as equals, not as subordinates	4.3*	2.0

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Role of the teacher. Teachers value all the roles, except that of disciplinarian. The students value these same roles for the teacher, but they also feel that the teacher should be a disciplinarian. Thus, it seems that even though teachers want to be “omnicompetent,” students want them to be even more “omnicompetent” than they are (Table X.9).

Educational goals of the system. The teachers emphasize the development of intellect and character as ends in themselves, but the students emphasize college preparation and view intellectual and

Table X.9—Role of Teacher: Median Scores of Teachers and Students on Equivalent Value Items

Value Item	MEDIAN SCORE	
	Teacher	Student
Serve as character model	1.4	1.6
Stimulate thinking and interest	1.7*	1.2
Evaluate progress and motivate		
dilatatory student	2.5*	1.9
Impart subject matter	2.9*	1.2
Control students	5.5*	2.0

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

character development as means toward this end. Teachers ranked the development of love of and interest in learning, the development of intellectual ability, and the transmission of cultural values as more important than did their students. Students ranked vocational preparation somewhat higher and preparation for college considerably higher than did teachers (Table X.10).

Table X.10—Preference for Educational Goals: Median Ranks of Teachers and Students for Equivalent Value Items

Value Item	MEDIAN RANK	
	Teacher	Student
Develop knowledge and skill		
in subject matter	3.2	3.2
Develop emotional maturity	5.6	6.1
Prepare for a vocation	7.0*	6.5
Form character	3.6	4.3
Develop intellectual ability	2.7*	4.4
Transmit cultural values	4.5*	7.1
Prepare for college entrance	6.7*	3.8
Develop love of and interest		
in learning	2.2*	5.4

Note: Possible ranks range from 1.0 (most preferred) to 8.0 (least preferred).

* Differs significantly at .01 level from student score on basis of median test.

Relationship among teachers. Both teachers and students think that teachers should have time to interact with each other on an informal level both professionally and nonprofessionally, but this is not as important to students as to teachers. The students do not value such interaction as highly, nor do they reject so strongly the idea that limitations be placed on this interaction (Table X.11).

Table X.11—Relationship Among Teachers: Median Scores of Teachers and Students on Equivalent Value Items

Value Item	MEDIAN SCORE	
	Teacher	Student
Informal discussion of professional problems	1.8*	2.4
Minimum of professional and personal Interaction	5.6*	4.7
Informal nonprofessional conversation	1.6*	2.8
Regularly scheduled meetings only	5.2*	4.0

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Methods of teaching. Both teachers and students ranked lectures to large groups as the least preferred teaching method. Teachers emphasize presentations to smaller groups and large group lectures combined with small group discussions more than do students. Students emphasize assign-study-recite and independent study more than do teachers.

It is difficult to know whether these differences are really meaningful, or whether they should be attributed to the fact that teachers, as a consequence of their training, are able to discriminate among various teaching methods whereas students are not. If these differences in emphasis are not artifacts, then their meaning may become clear by examining the differing goals of the two groups.

In any event, students value those teaching methods which emphasize the knowledge and facts they feel will serve their goal of college preparation. Teachers prefer those methods which provide them with more control over the learning situation (Table X.12).

Relationship between teachers and parents. The students are more willing to accept extreme limitations on teacher-parent relationships and reject less the idea of teachers and parents having no contact with each other. They also reject less the suggestion that teacher-parent relationships be restricted to situations in which problems arise.

The teachers' and students' ideas differ sharply concerning whether teachers should visit in students' homes and whether parents and teachers should become acquainted at PTA meetings. Teachers want to visit parents in their homes and not limit relationships to semiformal meetings such as PTA; students, however, do not want

Table X.12—Preference for Teaching Methods: Median Ranks of Teachers and Students for Equivalent Value Items

Value Item	MEDIAN RANK	
	Teacher	Student
Teacher-supervised study and practice	5.1	5.0
Large group lecture	6.9	6.8
Small group discussion	2.5	3.1
Individual and group projects	3.8	4.6
Large group lecture combined with small group discussion	3.6*	4.8
Independent study	6.2*	4.4
Presentation to small groups who can ask questions	1.8*	3.8
Assign-study-recite	6.1*	3.3

Note: Possible ranks range from 1.0 (most preferred) to 8.0 (least preferred).

* Differs significantly at .01 level from student score on basis of median test.

the teachers visiting in their homes and prefer to have teacher-parent relationships limited to such meetings (Table X.13).

Table X.13—Relationship Between Teachers and Parents: Median Scores of Teachers and Students on Equivalent Value Items

Value Item	MEDIAN SCORE	
	Teacher	Student
Teachers and parents have no contact whatsoever	5.9*	5.5
Teachers and parents became acquainted only when problem arises	5.4*	4.6
Teachers visit parents in homes	2.9*	5.2
Teachers and parents became acquainted only at meetings such as PTA	5.1*	1.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Not Directly Comparable Values

As pointed out, the form of the items in the remaining areas on the two questionnaires was considerably different and so they are not directly comparable. The content of the items was similar enough, however, so that some comparisons may be discussed.⁴

Principles of salary determination. The students, as compared with their teachers, tend to emphasize more the achievement and performance of students and to emphasize less the number of years the teacher has been in the system.

Methods of policy formation. Students and teachers agreed rather well in terms of their relative preference among policy making procedures. Both groups prefer that policy be formed by all the teachers co-operatively and reject the *laissez faire* or autocratic approaches in which the department chairman initiates and implements policy.

Methods of acknowledging outstanding teaching. Students tend to emphasize personal satisfaction more and increased autonomy less than do teachers.

Norms

The teachers and pupils differed on less than half the items that reflect their perceptions of institutional practices. The largest differences between the two groups were in the areas of teacher-parent relationships and teacher-teacher relationships.

Relationship between teachers and pupils. There was rather good agreement between teachers and students in their perceptions of institutional norms in this area. Both groups perceive that teachers are friendly but reserved, that teachers do not attempt to become close friends with students, and that teachers do not treat students as equals. The students, however, tend to perceive a little more distance between the teacher and pupil (Table X.14).

Table X.14—Relationship Between Teachers and Pupils: Median Scores of Teachers and Students on Equivalent Norm Items

Norm Item	MEDIAN SCORE	
	Teacher	Student
Friendly but reserved	2.0	2.2
Social distance maintained at all times	4.2*	3.3
Treated as equals, not as subordinates	4.0*	4.8

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).
* Differs significantly at .01 level from student score on basis of median test.

Role of the teacher. Both teachers and students perceive the teacher as fulfilling all the roles investigated. There is, perhaps, a natural tendency for teachers to perceive themselves as performing the roles of character model, stimulator of thinking, and guide of learning

more fully than students think they do. The students, in turn, perceive the teacher in the role of disciplinarian and imparter of subject matter more. These differences are not large, however, and the general agreement in this area is very good (Table X.15).

Table X.15—Role of Teacher: Median Scores of Teachers and Students on Equivalent Norm Items

Norm Item	MEDIAN SCORE	
	Teacher	Student
Stimulate thinking and interest	2.3	2.5
Serve as character model	2.1	2.6
Control students	2.7	2.2
Impart subject matter	2.9	2.4
Evaluate progress and motivate dilatory student	2.3*	3.0

Note: Possible scores range from 1.0 (strangly agree) to 6.0 (strangly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Educational goals of the system. There also was rather good agreement in this area between the perceptions of teachers and students. The relative ordering of the list of goals by students and teachers was, on the whole, very similar, and there were only two items on which the median responses of the two groups were significantly different: teachers feel more emphasis is placed on developing intellectual ability and developing love of and interest in learning than do students (Table X.16).

Table X.16—Emphasis Placed on Educational Goals: Median Ranks of Teachers and Students for Equivalent Norm Items

Norm Item	MEDIAN RANK	
	Teacher	Student
Develop knowledge and skill in subject matter	2.2	2.2
Prepare for college entrance	1.9	2.0
Prepare for a vocation	5.6	5.3
Transmit cultural values	6.3	6.7
Develop emotional maturity	6.8	6.4
Form character	6.5	5.2
Develop intellectual ability	3.5*	4.9
Develop love of and interest in learning	4.9*	6.5

Note: Possible ranks range from 1.0 (most emphasized) to 8.0 (least emphasized).

* Differs significantly at .01 level from student rank on basis of median test.

Relationship among teachers. Neither teachers nor students are quite certain that teachers have time during the day to interact with each other; median responses to all the items in this area are between “slightly agree” and “slightly disagree.” The students tend to perceive any interaction that occurs between teachers as concerned with nonprofessional rather than with professional problems. The teachers perceive themselves as having a minimum of interaction with each other. The students do not perceive this limitation of teacher-teacher interaction so clearly (Table X.17).

Table X.17—Relationship Among Teachers: Median Scores of Teachers and Students on Equivalent Norm Items

Norm Item	MEDIAN SCORE	
	Teacher	Student
Informal nonprofessional conversation	3.1	2.7
Informal discussion of professional problems	3.1	3.6
Regularly scheduled meetings only	2.6*	3.3
Minimum of professional and personal interaction	2.2*	3.7

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Methods of teaching. Both teachers and students perceive assign-study-recite as being by far the most prevalent teaching method in their high school. There is little differentiation, by either group, as to the extent that other methods are used.

An interesting phenomenon concerning the experiment being carried out in this school with large group lectures should be pointed out. The teachers tend to perceive the innovation as consisting of large group lectures combined with small group discussions; the students perceive it as large group lectures unrelated to small group discussions.

On the whole, however, the two groups have very similar perceptions of the teaching methods which are being used in their high school (Table X.18).

Relationship between teachers and parents. Teachers and students feel that parents and teachers do get to know each other and that this contact most commonly occurs at meetings such as PTA. Neither group perceives the teacher as visiting in the parents' home.

Table X.18—Emphasis Placed on Methods of Teaching: Median Ranks of Teachers and Students for Equivalent Norm Items

Norm Item	MEDIAN RANK	
	Teacher	Student
Assign-study-recite	1.4	1.2
Small group discussion	4.6	4.8
Large group lecture	4.1	3.7
Teacher supervised study and practice	5.1	4.6
Presentation to small groups who can ask questions	3.9	4.8
Individual and group projects	4.1	5.1
Large group lecture combined with small group discussion	3.8*	5.5
Independent study	6.7*	5.0

Note: Possible ranks range from 1.0 (most emphasized) to 8.0 (least emphasized).

* Differs significantly at .01 level from student score on basis of median test.

The teachers, however, tend to reject the idea that teachers and parents get acquainted only when a problem arises concerning a student, while the students tend to perceive this to be the common case.

There was a general tendency for students to perceive little, if any, interaction between parent and teacher. In fact they typically perceive no contact at all between parents and teachers. A few perceive the teacher as visiting in their homes and considerably more perceive the teacher and parent as getting together only when a problem arises (Table X.19).

Table X.19—Relationship Between Teachers and Parents: Median Scores of Teachers and Students on Equivalent Norm Items

Norm Item	MEDIAN SCORE	
	Teacher	Student
Teachers visit parents in homes	5.1*	5.6
Teachers and parents became acquainted only at meetings such as PTA	3.5*	2.5
Teachers and parents have no contact whatsoever	5.8*	4.6
Teachers and parents became acquainted only when problem arises	4.3*	2.4

Note: Possible scores range from 1.0 (strongly agree) to 6.0 (strongly disagree).

* Differs significantly at .01 level from student score on basis of median test.

Variation in Response

There was more consensus on values among teachers than among students. The quartile deviation for students was greater than the quartile deviation for teachers on 28 of the 32 equivalent items. The probability of this occurrence is considerably less than .01. The items on which there was more consensus among students than among teachers were limited to the areas of teacher's role and teacher-parent relationships.

There were no over-all differences between students and teachers in the amount of consensus on perceived practices. The teachers had more consensus among themselves in the areas of teacher-pupil relationships, goals of education, and teaching methods; the students had relatively more consensus on teacher-parent relationships and on teacher-teacher relationships.

Some Complex Comparisons

Two questions will be considered in this section, whether there is more agreement between teachers and students on values or on norms, and whether there are more discrepancies between values and norms for students or for teachers.

When the teachers' median response and the students' median response for any given item are compared, there may or may not be a significant difference between them. If each item concerning values and norms is classified according to whether there is a significant difference between the teachers' median response and the students' median response, it is found that there is a significant tendency for students and teachers to agree in their perceptions of the institutional norms and to disagree in their values. This is what one would predict if *perceptions* of practices were related to the *actual* practices; such a finding provides a kind of validation of the reports from students and teachers (Table X.20).

There were 32 equivalent items on which discrepancies between values and norms for both teachers and students might have occurred. About the same amount of congruence between values and norms was found for both teachers and students. Although the table does not reveal this information, it should be noted that the

Table X.20—Relative Frequency of Significant and Nonsignificant Differences Between Median Scores of Teachers and Students on Value and on Norm Items

Type of Item	Significant Difference	Nonsignificant Difference	Total
	<i>f</i>	<i>f</i>	
Value	22	10	32
Norm	13	19	32
Total	35	29	64
	$\chi^2 = 5.1$	$p < .05$	

items on which there was a lack of congruence were in the same general areas for both students and teachers (Table X.21).

Table X.21—Relative Frequency of Significant and Nonsignificant Differences Between Median Scores on Paired Value and Norm Items for Teachers and Students

Group	Significant Differences	Nonsignificant Differences	Total
	<i>f</i>	<i>f</i>	
Students	19	13	32
Teachers	19	13	32
Total	38	26	64
	$\chi^2 = .00$	$p > .50$	

Generally, then, we found considerable difference between teachers' and students' values and much less difference between teachers' and students' perceptions of norms. On the other hand, both teachers and students had about the same discrepancy between their values and norms and these discrepancies were in similar areas. There was also a tendency for perceived practices to be closer to the students' values than to the teachers' values.

LIBERAL ARTS SENIORS COMPARED TO TEACHERS COLLEGE SENIORS

The data presented in this section consist of the responses given by three samples of college seniors to a series of questions reflecting their attitudes and their perceptions of the attitudes of other people towards education as an occupation. The items reported are selected from a longer questionnaire used in another study, but the data have not been reported in this form previously.

Description of the Samples

The three groups of subjects whose responses are reported here are: a random sample of the senior class of 1957 in a male, Ivy League, liberal arts college ($N = 171$),⁵ a random sample of the senior class of 1957 of the coeducational counterpart of the same Ivy League, liberal arts college ($N = 55$), and a random sample of the senior class of 1958 in a private, female, teachers college specializing in preparation for elementary school teaching ($N = 73$).

The male seniors come from a predominantly upper middle class background and are planning to enter such occupations as college teaching, law, medicine, finance, or managerial-business. Very few are considering teaching secondary school and none are considering teaching elementary school. The female, liberal arts seniors come from a similar upper middle class background and most are hoping to be married in the not-too-distant future. Some of these girls are planning to do graduate study, some hope to enter the editorial or advertising fields, others are planning to take various secretarial positions for a year or so, a sizable minority are considering teaching secondary school. None, however, are considering teaching elementary school.

The teachers college girls come from a slightly lower but still middle and upper middle class background and are in the program leading to the Bachelor of Science degree in elementary education. Not all of them will actually teach in elementary schools. A sizable minority will marry soon after graduation and not enter an occupation, a few will take secretarial positions. Most who do enter the work force will teach elementary school.

Rationale

The men and women from the two Ivy League colleges are taken as representative of those upper middle class, professional and managerial families who exercise considerable influence on educational policy. They may be expected to influence educational policy in three ways. First, this is a group to whom education is of paramount importance and who, 10 to 15 years after graduation from college will probably be very vocal in their concern about the educa-

tion their children are receiving. Secondly, this is the group from whom the school board members of the future will most likely be drawn. Thirdly, this is the group who will bear a substantial share of the tax burden for the support of the public schools and will furnish the members of the informal power structure that determine fiscal policy of a community and ultimately control the activities of the school. Informal observation of the two school systems discussed earlier supports these assumptions.

The women in the private teachers college are considered fairly representative of professional teachers, especially elementary teachers. Indeed, a number of the teachers in the elementary school sample reported on earlier were graduated from this particular college.

In making the comparison which follows, then, we are examining at a given point in time the attitudes towards education of a group of lay people who will be influential in determining educational policy for the public schools and a group of people who, to a large extent, will constitute the professional personnel of the public school systems. Differences between these groups are potential sources of conflict and tension for the teacher.

Attitudes toward Secondary Teaching

The respondents were asked to rank 12 occupations under four different conditions. The possible ranks ranged from 1.0 (highest) to 12.0 (lowest). The 12 occupations were actor, business executive, college teacher, elementary school teacher, engineer, lawyer, medical doctor, minister of religion, sales manager, secondary school teacher, small business proprietor, and writer. The four conditions were: first, in terms of the prestige that the respondent felt the occupations commanded in our society; second, in terms of the prestige which the respondent's closest friends at college would accord the occupations; third, in terms of the prestige that the respondent's family would accord the occupations; and fourth, in terms of the contribution which the respondent himself felt the occupations make to the total life of our society. The median rank given secondary school teachers under these four conditions by the three groups of respondents is shown in Table X.22.

Some of these findings warrant further discussion. First, the

Table X.22—Perception of Prestige Given to and Contribution Made by Secondary Teacher: Median Ranks of Three Groups of College Seniors

College Seniors	M E D I A N R A N K			
	Prestige Given by Society	Prestige Given by Friends	Prestige Given by Family	Contribution to Society
Male liberal arts	8.7	8.8	8.0*	4.6*
Female liberal arts	9.0	8.1	8.4*	5.1*
Female teachers college	8.7	8.7	8.1*	5.1*

Note: Possible ranks range from 1.0 (highest) to 12.0 (lowest).
* Differs significantly at .05 level from corresponding rank in Column 1 on basis of median test.

median rank, in terms of prestige perceived to be accorded by society to secondary school teachers, is approximately 9.0. This places them near the bottom of the 12 occupations in terms of prestige; they are thus considered on a par with sales managers and small business proprietors, but above elementary school teachers. Second, all three groups of seniors have essentially the same perceptions of the prestige accorded secondary school teachers by society. Third, the three groups, in general, perceive their parents as according the secondary school teacher slightly more prestige than does society in general; the families are thought to place them slightly above the sales manager and the small business proprietor. Fourth, in terms of contribution to society, secondary school teachers receive a considerably higher rank than they do in terms of prestige. In fact, in terms of contribution to society they are placed fourth, below medical doctors, college teachers, and ministers of religion, and above lawyers, engineers, elementary school teachers, and business executives.

College seniors were asked the following question: "If, during Christmas vacation, you told your family that you had decided to become a secondary school teacher, what would their reaction most probably be?" The responses to this item were coded in terms of a nine-point scale, 1 representing an enthusiastic acceptance of the decision, 5 representing a neutral attitude, and 9 representing a very negative or rejecting attitude. The respondents were also asked how their closest friends at college would react if the respondents were to make such a decision. Responses to this item were coded in an identical fashion (Table X.23).

Male liberal arts seniors tended to feel that such a decision would

Table X.23—Perception of Family's and Friends' Reaction if Respondent Were to Enter Secondary Teaching: Median Scores of Three Groups of College Seniors

College Seniors	MEDIAN SCORE	
	Family	Friends
Male liberal arts	5.9*†	6.2*
Female liberal arts	3.0†‡	3.2†‡
Female teachers college	5.0*‡	5.7*

Note: Possible scores range from 1.0 (enthusiastic acceptance) to 9.0 (complete rejection).

* Differs significantly at .05 level from female liberal arts on basis of median test.

† Differs significantly at .05 level from female teachers college on basis of median test.

‡ Differs significantly at .05 level from male liberal arts on basis of median test.

be met by a slightly negative reaction from their family and friends. Female teachers college seniors felt the reaction would be neutral, neither favorable nor unfavorable. An active favorable response to such a decision was expected by female liberal arts seniors.

A qualitative inspection of the responses by the male liberal arts and the female teachers college seniors gives us further insights. The negative reaction expected by male liberal arts seniors was, "You can do better than that"; while the female teachers college seniors expected a surprised, "Well, what are you doing in elementary education?"

There is a consistent tendency for the friends' reactions to be more negative or rejecting of such a decision than those of the families, although this reaches statistical significance only in the case of the female teachers college seniors. This greater rejection by the friends of a teachers college senior perhaps represents an attitude of in-group members, those preparing for elementary teaching, toward a member who has decided to leave, such a decision being interpreted as a negative evaluation of the in-group's values.

The seniors were asked their opinion of the desirability of secondary school teaching as a way of life. Their responses to this item were coded in terms of a seven-point scale of desirability, 1 representing very desirable, 4 representing a neutral or "pro-con" attitude, and 7 representing a highly undesirable evaluation. The median responses of the three samples of college seniors to this item are as follows:

Group	Median Response
Male liberal arts	4.4
Female liberal arts	4.0
Female teachers college	5.1

The over-all median response to this item is in the area between pro-con and not satisfactory, indicating a general evaluation of secondary school teaching as a relatively unrewarding way of life. It is interesting to note that the teachers college seniors, who are training to be elementary school teachers, have the lowest evaluation of secondary school teaching as a way of life.

On another item the seniors were asked to list what they consider the primary function of a secondary school teacher. There were two general kinds of responses to this item. One of these reflected an academic or intellectual orientation and included such subcategories as imparting subject matter, stimulating interest, developing thinking and the intellect, explaining and elucidating material, developing study habits, and preparing for college. The other general category of response reflected a personal or social-emotional orientation and included such subcategories as treating students as persons, preparing the student for life, preparing the individual to function in society, helping the social adjustment of the student, offering guidance, and developing character. It was possible for a given senior's responses to be classified in either or both of these categories. Table X.24 shows the responses to this item.

Table X.24—Relative Frequency of Primary Functions Attributed to Secondary Teachers by Three Groups of College Seniors

College Seniors	PRIMARY FUNCTION			Total
	Academic- Intellectual	Both	Personal- Social	
	f	f	f	
Male liberal arts	75	72	14	161*
Female liberal arts	34	17	1	52†
Female teachers college	22	28	23	73
Total	131	117	38	286
$\chi^2 = 32.5; \quad p < .001$				

* Ten seniors did not respond to this item.
† Three seniors did not respond to this item.

The teachers college seniors are more likely to consider the primary function of the secondary school teacher to be a personal or social-emotional one, whereas the liberal arts seniors, both men and women, are more likely to consider it to be academic or intellectual. These differences have a high degree of statistical reliability.

Attitudes toward Elementary Teaching

Table X.25 contains the median rank given to elementary school teaching by the three samples of college seniors under the four different conditions discussed previously.

Table X.25—Perception of Prestige Given to and Contribution Made by Elementary Teacher: Median Ranks of Three Groups of College Seniors

College Seniors	M E D I A N R A N K			
	Prestige Given by Society	Prestige Given by Friends	Prestige Given by Family	Contribution to Society
Male liberal arts	10.7	10.6	9.8*	5.9*
Female liberal arts	10.5	9.7	9.6*	5.3*
Female teachers college	9.0	8.5	7.8*	4.0*

Note: Possible ranks range from 1.0 (highest) to 12.0 (lowest).

* Differs significantly at .05 level from corresponding rank in column 1 on basis of median test.

The liberal arts seniors, both male and female, give elementary school teachers a median rank of approximately 11 in terms of the prestige they command from society in general. This places elementary school teachers at the bottom of the list below secondary school teachers, sales managers, and small business proprietors. The teachers college seniors, who, it should be remembered, are preparing to be elementary school teachers, give elementary school teachers a rank of 9 in terms of the prestige they command from society in general. This is significantly higher than the rank given by the liberal arts seniors and places elementary school teachers on a par with secondary teachers, sales managers, and small business proprietors. There is a tendency for the seniors to perceive their families as ranking elementary school teachers higher than society ranks them.

Elementary school teachers are ranked considerably higher in terms of the contribution they make to society than in terms of the prestige accorded to them. In terms of contribution to society the liberal arts seniors place elementary school teachers in a general category with lawyers, engineers, and business executives, below medical doctors, college teachers, ministers, and secondary school teachers. The teachers college seniors, however, rank elementary

school teachers higher than do liberal arts seniors in relation to the contribution they make to society. This places them in the same category with college teachers and ministers, below medical doctors, but above secondary school teachers, lawyers, engineers, and business executives.

Seniors were asked how their family and friends would respond if they decided to enter elementary school teaching as an occupation (Table X.26).

Table X.26—Perception of Family's and Friends' Reaction if Respondent Were to Enter Elementary Teaching: Median Scores of Three Groups of College Seniors

College Seniors	MEDIAN SCORE	
	Family	Friends
Male liberal arts	7.1	7.9
Female liberal arts	4.0*	4.7*
Female teachers college	3.1*	4.6*

Note: Possible scores range from 1.0 (enthusiastic acceptance) to 9.0 (complete rejection).
* Differs significantly at .05 level from male liberal arts on basis of median test.

The male liberal arts seniors perceive both their family and their friends as rejecting such a decision, friends even more so than family. The families of the female liberal arts seniors would accept such a decision with reservations, but their friends would be neutral. Teachers college seniors feel that their families would receive such a decision favorably but that their friends would have more reservations.

Here again we see the tendency for families to be more favorably disposed toward educational occupations than friends. In view of these data it would seem that elementary teaching is considered a woman's occupation.

The three samples responded to elementary school teaching in terms of its desirability as a way of life. The responses were coded according to the same seven-point scale of desirability discussed earlier. The median responses are as follows:

Group	Median Response
Male liberal arts	6.1
Female liberal arts	3.7
Female teachers college	1.8

The male liberal arts seniors conceive of elementary school teaching as an undesirable way of life for them; the female liberal arts seniors have mixed feelings; and the female teachers college seniors consider elementary school teaching to be a desirable way of life.

The three samples were asked to list what they considered the primary function of an elementary school teacher. Again, the responses could be grouped into two general categories, one reflecting an academic or intellectual orientation and the other reflecting a personal or social-emotional orientation. A given individual's responses could be classified in either one or both of these categories (Table X.27).

Table X.27—Relative Frequency of Primary Functions Attributed to Elementary Teachers by Three Groups of College Seniors

College Seniors	PRIMARY FUNCTION			Total
	Academic- Intellectual	Both	Personal- Social	
	f	f	f	
Male liberal arts	72	48	27	147*
Female liberal arts	17	23	11	51†
Female teachers college	20	31	22	73
Total	109	102	60	271
	$\chi^2 = 11.8; \quad p < .02$			

* Twenty-four seniors did not respond to this item.

† Four seniors did not respond to this item.

The male liberal arts seniors tend to emphasize the academic or intellectual functions; the female teachers college seniors the personal or social-emotional function. Female liberal arts seniors were between these two extremes.

Attitudes toward Training in Education

The seniors responded to the statement, "Teaching is an art; some people are natural teachers and others are not—and there isn't much that can be done about it," by indicating the extent to which they agreed or disagreed. The responses were in terms of a five-point scale, 1 indicating complete agreement, 3 indicating slight agreement with reservations, and 5 indicating complete disagreement. The median responses of the three samples of seniors are as follows:

Group	Median Response
Male liberal arts	2.3
Female liberal arts	2.2
Female teachers college	2.6

All three samples of seniors tended to agree with the statement, but with reservations. The teachers college seniors had significantly more reservations than did the liberal arts seniors.

The seniors reported their conception of what education courses are about. The responses to this item tended to fall along two dimensions, one having to do with the content of these courses and the other with the quality of such courses. The responses in terms of these two dimensions are shown in Table X.28 and X.29, respectively.

Table X.28—Perception of Education Courses: Frequency and Percentage of Responses of Three Groups of College Seniors in Three Content Areas

College Seniors	CONTENT AREA					
	Methods and Techniques		Educational Theory		Psychology	
	f	p	f	p	f	p
Male liberal arts	87	50	13	8	79	46
Female liberal arts	30	55	5	9	31	58
Female teachers college	37	51	12	16*	20	27*

* Differs significantly at .05 level from both groups of liberal arts seniors on basis of median test.

The responses pertaining to the content of education courses fall, for the most part, into three main categories: methods and techniques, educational theory, and psychology. There were no differences among the three samples in terms of the proportions of each that named methods and techniques as the content of education courses; about 50 per cent of each sample had responses in this category. The responses of more teachers college than liberal arts seniors fell into the category of educational theory, the proportions being .16 and .08, respectively. The responses of more liberal arts than teachers college seniors were in the category “psychology.” About 50 per cent of the former as opposed to only one-quarter of the latter fell into this category.

An evaluative judgment of education courses was not specifically requested, but a considerable number of evaluative statements were

volunteered. The liberal arts seniors, in particular, tended to volunteer negative evaluations of such courses. The teachers college seniors, on the other hand, volunteered as many positive as negative evaluations. These differences have a high statistical reliability (Table X.29).

Table X.29—Evaluation of Education Courses: Frequency of Types of Statements Volunteered by Three Groups of College Seniors

College Seniors	TYPE OF STATEMENT			Total
	Positive Evaluative Statement	Na Evaluative Statement	Negative Evaluative Statement	
	f	f	f	
Male liberal arts	0	107	48	155
Female liberal arts	2	32	19	53
Female teachers college	7	51	8	66
Total	9	190	75	274*
	$\chi^2 = 10.5\dagger; \quad p < .01$			

* Twenty-five seniors did not volunteer evaluative statements.

† In computing χ^2 columns 1 and 2 were combined.

Distinctions between Elementary and Secondary Teaching

This section is concerned with whether discriminations are made between attitudes toward the two levels of the public school system, secondary and elementary, and by whom such discriminations are made. The same data presented in previous sections are discussed in a new context.

Table X.30 compares secondary and elementary teachers in terms of seniors' perceptions of the prestige accorded them by society, friends, and family. In general, the liberal arts seniors distinguish between the two levels in terms of prestige and place secondary considerably above elementary teachers. The teachers college seniors, however, do not make this distinction and, in general, perceive elementary and secondary school teachers as receiving the same amount of prestige.

Table X.31 presents the seniors' perceptions of the contribution that secondary and elementary school teachers make to society in general. The male liberal arts seniors differentiate between the two and generally place secondary school teaching in a higher position.

Table X.30—Perception of Prestige Accorded Secondary and Elementary Teachers by Other People: Median Ranks of Three Groups of College Seniors

	M E D I A N R A N K					
	Society		Friends		Family	
	Second- ary Teacher	Elemen- tary Teacher	Second- ary Teacher	Elemen- tary Teacher	Second- ary Teacher	Elemen- tary Teacher
College Seniors						
Male liberal arts	8.7*	10.7	8.8*	10.6	8.0*	9.8
Female liberal arts	9.0*	10.5	8.1*	9.7	8.4*	9.6
Female teachers college	8.7	9.0	8.7	8.5	8.1	7.8

Note: Possible ranks range from 1.0 (highest) to 12.0 (lowest).
* Differs significantly at .05 level from elementary teacher on basis of median test.

The female liberal arts seniors, however, do not make such a differentiation and generally place elementary and secondary teachers in the same position. Female teachers college seniors also make a differentiation between secondary and elementary teachers, but it is in the opposite direction to that made by male liberal arts seniors. That is, teachers college seniors believe that elementary school teachers make more of a contribution to society than do secondary school teachers.

Table X.31—Perception of Contribution Made to Society by Secondary and Elementary Teachers: Median Ranks of Three Groups of College Seniors

	M E D I A N R A N K	
	Secondary Teacher	Elementary Teacher
College Seniors		
Male liberal arts	4.6*	5.9
Female liberal arts	5.1	5.3
Female teachers college	5.1	4.0

Note: Possible ranks range from 1.0 (highest) to 12.0 (lowest).
* Differs significantly at .05 level from elementary teacher on basis of median test.

Table X.32 compares the seniors' perceptions of their families' and friends' reactions to a hypothetical decision on the part of the senior to enter secondary or elementary teaching. Reactions are more negative toward elementary school teaching for both liberal arts groups, more positive for the teachers college sample.

Table X.33 compares secondary and elementary school teaching in terms of the seniors' perceptions of their desirability as a way of life. The male liberal arts seniors differentiate between secondary

Table X.32—Perception of Family's and Friends' Reaction if Respondent Were to Enter Secondary or Elementary Teaching: Median Scores of Three Groups of College Seniors

College Seniors	MEDIAN SCORE			
	Secondary Teaching		Elementary Teaching	
	Family	Friends	Family	Friends
Male liberal arts	5.9*	6.2†	7.1	7.9
Female liberal arts	3.0*	3.2†	4.0	4.7
Female teachers college	5.0*	5.7†	3.1	4.6

Note: Possible scores range from 1.0 (enthusiastic acceptance) to 9.0 (complete rejection).

* Differs significantly at .05 level from corresponding score in column 3 on basis of median test.

† Differs significantly at .05 level from corresponding score in column 4 on basis of median test.

and elementary school teaching and find the latter less desirable. The female liberal arts seniors do not differentiate between the two levels. Female teachers college seniors do differentiate between the two levels and find elementary school teaching a more desirable way of life.

Table X.33—Perception of Desirability of Secondary and Elementary Teaching as a Way of Life: Median Scores of Three Groups of College Seniors

College Seniors	MEDIAN SCORE	
	Secondary Teaching	Elementary Teaching
Male liberal arts	4.4*	6.1
Female liberal arts	4.0	3.7
Female teachers college	5.3*	1.8

Note: Possible scores range from 1.0 (very desirable) to 7.0 (very undesirable).

* Differs significantly at .05 level from elementary teaching on basis of median test.

Tables X.34 to X.36 compare elementary and secondary teachers in terms of their primary function as viewed by the three samples of students.

The male liberal arts seniors differentiate between secondary and elementary teachers. They consider the primary function of a secondary teacher to be an academic-intellectual one, while the function of an elementary school teacher is seen to be more personal-emotional-social.

The female liberal arts seniors differentiate between secondary and elementary school teachers in a similar manner to the male liberal arts seniors. That is, they also perceive the secondary teacher

Table X.34—Relative Frequency of Primary Functions Attributed to Secondary and Elementary Teachers by Male Liberal Arts Seniors

Teacher	PRIMARY FUNCTION			
	Academic- Intellectual	Both	Personal- Social	Total
	f	f	f	
Secondary	75	72	14	161*
Elementary	72	48	27	147†
Total	147	120	41	308

$\chi^2 = 8.7; \quad p < .01$

* Ten seniors did not respond to this item.
† Twenty-four seniors did not respond to this item.

as having an academic-intellectual function and the elementary teacher a more personal-emotional-social one.

The female teachers college seniors do not differentiate between secondary and elementary school teachers in terms of their primary function. They perceive secondary and elementary school teachers as giving equal emphasis to academic-intellectual activities and personal-emotional-social concerns.

To sum up, then, we see that male liberal arts seniors generally differentiate between secondary and elementary school teaching. They perceive secondary school teaching to be more concerned with academic-intellectual activities, and they generally rank it higher in terms of the contribution it makes, the prestige accorded to it, and its general desirability. The female liberal arts seniors perceive the secondary school teacher to be more concerned with academic-intellectual matters than is the elementary school teacher. They

Table X.35—Relative Frequency of Primary Functions Attributed to Secondary and Elementary Teachers by Female Liberal Arts Seniors

Teacher	PRIMARY FUNCTION			
	Academic- Intellectual	Both	Personal- Social	Total
	f	f	f	
Secondary	34	17	1	52*
Elementary	17	23	11	51†
Total	51	40	12	103

$\chi^2 = 13.8; \quad p < .001$

* Three seniors did not respond to this item.
† Four seniors did not respond to this item.

Table X.36—Relative Frequency of Primary Functions Attributed to Secondary and Elementary Teachers by Female Teachers College Seniors

Teacher	PRIMARY FUNCTION			
	Academic- Intellectual	Both	Personal- Social	Total
	f	f	f	
Secondary	22	28	23	73
Elementary	20	31	22	73
Total	42	59	45	146

$$\chi^2 = .10; \quad p > .50$$

generally differentiate between the two in terms of prestige, ranking elementary school teachers lower. They do not differentiate between the two, however, in terms of the contribution that they make to society or in terms of their desirability as a way of life. The female teachers college seniors do not differentiate between secondary and elementary teaching in terms of their function, nor in terms of the prestige accorded them. The teachers college seniors do differentiate between elementary and secondary teaching in terms of their contribution to society, in terms of their families' and friends' reaction to a decision to go into either occupation, and in terms of the desirability of the two occupations as a way of life. Elementary school teaching is considered superior on all these counts.

SUMMARY

This chapter has reported the attitudes of two lay groups toward education. The first part focused on differences between the values and norms of teachers and students in Y high school. It is not possible here to recapitulate all the potentially important findings relating to both these groups. We will, however, enumerate a series of selected generalizations:

1. Students have about the same degree of discrepancy between values and norms as do teachers, and these discrepancies are in the same areas for the two groups.
2. Students and teachers disagree more in their values than in their perceptions of the practices in the school.
3. Differences between teachers and students in their educational

values are distributed throughout all the areas of education considered.

4. There are no radical differences between teachers and students in their perceptions of practices, and the differences that do occur are distributed fairly evenly throughout the various areas of education considered.

In a like manner we have investigated the attitudes and views of college seniors toward education as an occupation. The most salient features of our findings are summarized here.

1. Liberal arts college seniors tend to differentiate between elementary and secondary school teachers in terms of their function and status; teachers college seniors do not.

2. Liberal arts seniors perceive teaching as making a considerable contribution to society but as having relatively low status as an occupation.

3. Teachers college seniors tend to perceive education and teaching in a more favorable light than do the liberal arts seniors.

These generalizations will be elaborated upon in Chapter XI.

The Field Study's Implications for Mental Health

THIS REPORT is oriented toward the prevention of mental illness. Normal, relatively healthy situations are examined for possible trouble spots with a view to taking preventive action. We hope that such a presentation makes more explicit some of the potential sources of conflict in education in order that they may be dealt with rationally and some of the conflicts resolved.

EDUCATION'S CHARTER

The term "charter" refers to a complex of legitimate ends and means and their related values, norms, and behaviors upon which an institution is based. The charter, then, guides the behavior of the personnel of the institution and provides them with criteria for making decisions when faced with conflicting alternatives. We may use as a rough index of the clarity and explicitness of an institution's charter the amount of consensus among the personnel in their perceptions of the institution's norms.

The data presented in Chapter IX indicate that there was considerable variation in the teachers' perceptions of normative practices in their school. We suggest two alternative interpretations: that education lacks a definite, clear-cut charter, or that the charter may be clear-cut in its statement but may sanction a plurality of ends and means without providing the necessary criteria for determining priorities among them. Either interpretation has implications for mental health.

In either case teachers lack an adequate guide for determining

action as well as an external standard with which to compare any course of action decided upon. In such an amorphous situation it is almost impossible for the teacher to define his role in terms of objective criteria. Teachers are forced to turn to subjective criteria, their own values, for the determination and validation of a role definition. Conflicts among the personnel who may have different values are thus encouraged. Still another factor operates when the charter is vague or ambiguous. In such a situation it becomes difficult to deal rationally with felt conflicts between values and norms because the norms are not explicitly stated. This latter conflict is illustrative of the second phase in the development of mental illness.

It is interesting to note that, in general, the areas in which teachers have the least consensus in their perceptions of practices, that is, the areas in which the charter is most ambiguous, are also the areas in which teachers report the largest discrepancies between their values and their perceptions of the institution's norms.

DISCREPANCY BETWEEN VALUES AND NORMS

The research design in terms of which the data in Chapter IX were collected is based upon the hypothesis that a situation in which there is a discrepancy between values and norms is a conflict situation which has negative affect for the individual. The hypothesis seems in the main to be supported. There is a significant correlation between the degree of negative affect which the teaching situation has for an individual and the size of the discrepancy between that individual's educational values and his perceptions of the institution's norms.¹

The sequence of events leading to mental illness which was previously discussed may be applied to the teacher in the teaching situation. There are areas in which teachers' values and teachers' perceptions of schools' norms are not congruent. The ambiguity of the charter makes it difficult to deal with these conflicts rationally. Tension rises to the point where the teaching situation has a negative affect for some personnel. Several outcomes are possible. Certain individuals will have a high tolerance level for stress and will not be affected by the situation, some will leave teaching when the stress

exceeds their tolerance level, and others, for various reasons, may not be able to make the decision to leave teaching. For this latter group there are two alternatives: They may develop further tolerance for stress; or they may develop anxiety, the next phase leading to mental illness.

This discussion hints at a rather interesting further research in the area of education and mental health: an inquiry into stress tolerance in teachers as related to teacher turnover. The goals of education, relationship among teachers, methods of teaching, methods of policy formation, reward for superior teaching, and methods of salary determination would be worthy of consideration, for these are the areas in which the largest discrepancies between the teachers' values and the school's norms now exist.

Conflict between Teachers and Students

Data were presented in Chapter X indicating a discrepancy between students' educational values and norms. There was also a considerable difference between the teachers' values and the students' values. Therefore, we may expect the school to have a slight negative affect for students as well as teachers. Because the teacher and student are joint participants in the educative process and are mutually dependent upon each other, the area of teacher-pupil relationship in light of these findings has high potential for conflict.

It should be noted that although the data presented in Chapter IX did not indicate that teacher-pupil relationships are an area of conflict for teachers at present, the inquiry was limited to a particular dimension of teacher-pupil relationships which is not necessarily the only crucial one. Furthermore, although it is not an area in which striking differences were found for teachers, it is an area they consider to be very important for their successful functioning. Here, then, is another area that should be given high priority for future research in mental health and education.

Conflict between Teachers and Citizens

The professional teacher and the lay citizen in our American educational system share the responsibility for the determination of

educational policy. It may be that the ambiguity of the charter noted earlier is a product of an inability on the part of these two groups to resolve their differences. The data in Chapter X do not represent a comprehensive coverage of areas in which differences between teacher and citizen, or professional and layman, may occur.² They are, rather, data relevant to circumstances which may affect the interaction of these two groups.

Data presented in Chapter IX indicate that there were few differences in values between elementary and secondary teachers, yet considerable difference between the two levels in their perceptions of institutional norms was found. In Chapter X data were reported which suggest that teachers college seniors tend not to differentiate between elementary and secondary teaching, but that liberal arts college seniors do make such a distinction. These two sets of data are of the same pattern. Thus, the educator and the layman may be at cross purposes in carrying out their joint responsibility.

The data in Chapter X also suggest that the occupation of teaching commands relatively little prestige from society when compared with other occupations. In our society a general "halo effect" operates so that "high prestige" people are often considered omniscient and "low prestige" people, incompetent. As a consequence, teachers are placed in an inferior status position in their interactions with upper middle class members of the community.

An interesting paradox is suggested by the data in Chapter X. The teacher is perceived as being accorded little prestige, but as making a considerable contribution to society. An occupation which is not able to command the prestige commensurate with its contribution to society may be viewed askance, the individuals who enter it may well be considered deviants, and may be under some amount of tension.

The data on seniors, although not concerned with educational values and perceived norms, do indicate circumstances which may make it difficult for the professional teacher and the layman to fulfill their joint responsibility in determining educational policy. The teacher in all likelihood is the one who will bear the tensions resulting from differences between these two groups.

A BROADER SCOPE

As stated in the introductory remarks to this field study, it was the conviction of the investigators that it would be fruitful to uncover and discuss those areas in the American school which seemed to be potential sources of conflict and, by implication, areas of possible stress and threat to the mental health of teachers and students. Before commenting on the broader meanings of the various findings and their relationship to the literature surveyed, we have asked our readers to bear with us as we presented the empirical data and the specific implications of these data for mental health. We have done this for two reasons: We are convinced that the thoughtful reader will probably be interested in thinking through some of our findings for himself; and the relationship of our data to mental health, although important, requires subtlety in analysis. The subtlety is required not because the findings are unclear but because the findings relate to prevention rather than cure.

The Teachers' Values: Their Relation to Mental Health

A value, whether personal or educational, suggests that an idea or an attitude has been internalized and has become a part of the individual's personality structure. This means that in a time of stress or conflict, defenses and distortions may arise due to the need of the individual to maintain a coherent structure in relation to this particular value. For teachers, acting as professional people in the school, interference with their values or a sense of threat to their value structure may be an extremely serious matter.

Two kinds of questions about the educational values of a teacher can be asked. The first of these has been discussed in an earlier section of this chapter—the degree to which the teachers' values are the same or differ from their perceptions of institutional norms. Some may claim that the only time a teacher is in conflict is when his norms and values are in some kind of disparate relationship. We are convinced, however, that there may be another way in which educational values can become sources of conflict and stress not only in terms of the sample under consideration but also in terms

of what might be called a "national charter" of the teacher's responsibility.

For example, let us review some of the things that teachers stated and comment upon them in terms of mental health. Teachers make the point that they consider the relationship between teachers and pupils as most important. This idea is in keeping with recent trends in teacher training discussed earlier. It should be noted, however, that teachers define this teacher-pupil relationship in a very specific way. That is to say, they want to "teach" youngsters by stimulating their thinking and guiding them into learning experiences and also want to take on the responsibility of serving as personal character models. In their framework of values the functions of discipline and, essentially, the function of caretaking are rejected. In fact these teachers go so far as to say that such roles will interfere with learning and the establishment of that kind of teacher-pupil relationships which will maximize learning. Herein may be an interesting though subtle phenomenon relating to mental health.

We have discussed earlier the fact that the culture demands that the teacher assume the position of a surrogate, yet these teachers reject this role. In a positive sense we may conclude that teachers are evolving and developing a professional role. The question is, however, to what extent are their ideas in conflict with the cultural values which define the teacher's role as a surrogate socializing agent.

Another aspect of these data relating to teacher-pupil relationships should be commented upon in terms of certain trends in teacher training. For example, there are some who suggest that classroom management should be geared either to a definition of the learning situation by the students or to a learning situation worked out between the teacher and students. Among the teachers in our sample there is a general desire to be friendly with students, but an avoidance of any relationship of equivalent status as far as classroom procedures are concerned. This suggests that the teacher's role has been defined rather specifically in instructional terms. We might observe that such a definition by the teacher of his role vitiates the possibilities for a therapeutic relationship being developed between teacher and student.

There is another way of viewing the teacher's definition of his role. As mentioned earlier, teachers reject as part of their role the control of students' behavior. Coincident with this rejection is an emphasis upon the intellectual dimensions of the teacher's role. One might see in this particular definition an unwillingness to tolerate a less rigid classroom situation in which therapeutic observations might be possible. To put the matter another way, the teacher who sees his role as focused primarily upon the *structure* of learning situations does not want to risk becoming involved in situations which might develop within a less rigid framework. These teachers, it would seem, desire to control the classroom situation for one purpose, the intellectual excellence of their students.

There also seems to be a conflict between the way in which teachers view salary determination and ideas that have been enunciated nationally. For example, they place little value on amount of education or number of degrees as criteria. At a time when many are recommending in-service training to keep a teacher up to date with latest trends so that their performance in school may be maximized, this is indeed a contradiction. These teachers, it would seem, do not accept the idea advanced by many that the training of teachers should be continued throughout their professional career. Teachers believe instead that the number of duties and responsibilities and the length of service in a system should be the criteria in determining their salary.

This may underscore a matter alluded to earlier. Teachers generally equate the fact of being a teacher with the phenomenon of being a professional. Thus, it is fascinating to observe that training and advanced degrees are not seen as proper or even important criteria for determining salary. Whether the teachers are commenting upon a series of items *all* of which they feel are important and judging the ones they feel to be more or less important or whether they are completely rejecting the value of professional training as a criterion is a moot point.

The teachers' definition of the teacher-parent relationship also has certain mental health implications. First, more emphasis is placed upon the idea of the parent visiting the school and getting to know the teacher than is placed upon the teacher visiting the parents in

their homes. This has two possible interpretations; one is that a teacher feels less free to visit a parent in a social situation. This supports Brookover's (1955) contention that a teacher is in a community but never a part of it. Another interpretation is that teachers see themselves as primarily responsible for the socialization of the child and believe it is up to the parents to come to them when a question may arise. It is interesting, however, to note that teachers respond negatively to the idea that relationships with parents should be restricted to problem areas or structural situations such as the PTA.

There are a number of different matters which reveal themselves when we consider the goals of education to which teachers subscribe. For example, it seems fairly consistent that teachers in our sample value most the idea of learning and knowledge and tend to reject the idea of developing social skills and preparing for a vocation. They state that preparation for college entrance is to be avoided as much as training for a vocation. There is a radical departure in this group of teachers from the ideas suggested in the so-called child-centered education, either in relation to the construction of the curriculum or to the content of teacher training. One of the most fascinating contradictions within these data, which highlights comments made earlier about justification for the subject-centered curriculum, is that these teachers seem to make a dichotomy between the concept of character building and the concept of personal and emotional maturity.

Teachers seem to favor, in line with present educational theory, presentations to small groups and small group discussion as the proper instructional methods. They do not see any antithesis between the use of these instructional procedures and the development of subject matter skill. They reject consistently the idea of lectures to large groups, the idea of traditional assign-study-recite procedures, and also, for some reason, the concept of independent study by the student. This latter phenomenon may be consistent with the desire of the teachers to control the classroom situation and their unwillingness to trust the students' ability to learn on their own. These findings have particular relevance in the light of the discussion concerning use of techniques in the schools which would permit large

groupings, lectures, and television. Teachers, one might predict, would oppose such methods for they see learning occurring best in a fairly personalized situation and would reject a procedure which separates them from their pupils.

In conclusion, an examination of the median rank attached to different areas of teacher satisfaction suggests that teachers' values form a pattern which has characteristics of an identifiable nature. Teachers tend to place greatest emphasis upon their relationship with pupils; they tend to devalue areas which might be called extrinsic to the school itself. For example, teacher-parent relationships are ranked lowest in importance for teacher satisfaction. They also reject any method of acknowledging outstanding teaching which would encourage teachers to become competitive. One can raise the question of the degree to which a teacher's perspective and sense of self extends beyond the limits of his own classroom to the culture as a whole. We have suggested earlier that teachers seem to reject the surrogate function that so many experts say they should assume. This can be interpreted as a positive dimension of role definition; on the other hand, it could also be viewed as an unwillingness on the part of the teacher to face cultural and social reality in broad terms.

The Teachers' Perceptions of Institutional Norms: Their Relation to Mental Health

Teachers' perceptions of the institutional norms for behavior in some cases agreed and in some cases disagreed with their own values in similar areas. The implication for this particular discrepancy between norms and values has been discussed in detail in an earlier section. In most cases the norms revealed that teachers see a pattern of institutional values, whether this is congruent with their own or not.

However, two areas come to light as having implications for mental health. One of the conditions which can create mental health problems exists when a particular situation becomes ambiguous or diffuse. It was reported that teachers did not perceive any consistent procedure either for policy determination or for evaluating and

rating teachers. These two areas stand out in sharp contrast to the other areas of norms.

If teachers do not know how policy is determined and if they do not feel it proper for teachers to determine policy themselves, then a good deal of stress may arise for the individual in the teaching situation and he may not know where to turn for clarification. This suggests that there is no mechanism in the school to protect the individual teacher from arbitrary demands made upon his time or competence, or any center in which school policy as a whole may be clarified for him. As discussed earlier, one of the most intricate problems is that the school tends to incorporate into its structure various approaches to education and then justify them in slogans proper for a particular moment in history. At a time when the school is under great criticism to adopt this or that course of action in terms of the need for engineers, scientists, or even "well-adjusted human beings," it is not reassuring to see a situation in which clear school policy seems to be nonexistent.

The teachers feel that there do not exist at the present time criteria which may be used to differentiate the superior teacher from the inferior. It is not certain whether teachers feel such criteria do not exist or whether they feel that the schools themselves are unclear, but in any case a norm of importance to the individual teacher—the evaluation of his or her work in the classroom—is not clear.

Differences in Attitudes between the Professional Educator and the Layman: Their Relation to Mental Health

Teachers and students. In dealing with the report on student values and norms as compared to teachers we introduce the problem of whether a difference in opinion is equivalent to a conflict of opinion. For example, it is pointed out in Table X.1 that there are some differences between students' values and norms in the area of teacher-pupil relationship. In general, students desire a more equalitarian and personal interaction with teachers than teachers are willing to permit. It may be questioned, however, whether, although this difference exists, it actually represents a conflict crucial for mental health.

There are also two areas where the students' values and norms

seem to show quite a different frame of reference from the teachers', both of which may have mental health implications. First, the students seem to circumscribe the parent-teacher relationship far more than do teachers. Whereas students and teachers agree that no contact whatever is inadvisable or that becoming acquainted only when a problem arises is also unsatisfactory, the students feel that acquaintance or interaction between teachers and parents should be restricted to school or educational settings. Students, for some reason, do not seem to want the parent to ask the teacher into the home nor do they wish the teacher to invite the parent to school solely when some problem arises. As the pupil sees it, the interaction between parent and teacher should be limited to those social occasions which are primarily educational in nature, such as the PTA. This could be interpreted as the normal diffidence of the adolescent who might see in this visit to the home an attempt to influence the teacher. On the other hand, pupils may be suggesting by the rather strict limits they place upon teacher-parent relationships that the teacher is viewed as a social isolate.

This particular point of view of students is contrary to some of the techniques or spread of responsibility suggested by such authorities as Prescott (1945), who see in the home visit a cornerstone of understanding of the pupil. This point of view also suggests that, although the school may have wished or been asked—for a variety of motives—to take over many surrogate functions, the function of the family and the function of the school are seen by the students as separate.

Probably the most interesting material that we can deal with here is in the area of teachers' role. Data relating to the pupil's perception of the teacher show that there are few values or norms which are very much "out of line" with the exception of the definition of the parental relationship. When a student is asked, however, to define the role of the teacher, it is interesting to note that in general the student and teacher view the situation in the same way. For example, the student wants the teacher to be everything that the teacher wants to be only more so. The student asks that in addition to the role of character model, stimulant to thinking, and imparter of subject matter, the teacher also assume the role of disciplinarian. Teachers,

however, do not view this as part of their professional role. The students, in their desire to have the teacher serve as disciplinarian, may be stating, in a roundabout way, a need for the teacher to provide limits within the learning situation as well as the stimulus and materials for learning. Furthermore, these broad expectations on the part of students may reflect the omnicompetence demand spoken of by Redl (1955).

Some further data require comment. This is that students tend to relate the teacher's role of intellectual stimulation and presentation of subject matter to the specific goal of college entrance, whereas teachers, although they value the same general goals for education, shy away from the idea of preparing a student specifically for college. One is tempted to ask in this situation whether the student is not more realistic than the teacher. The teachers' avoidance of the pragmatic goal of college entrance may be a reflection of their desire to keep secondary school teaching separate and distinct from the influence of colleges. At the end of the nineteenth century the curriculum of the high school was largely determined by college entrance; it may be that this denial of the importance of college or preparation is a reaction of the teachers against this old trend and a statement of the secondary school teachers' desire for autonomy.

Both teachers and students agree upon what seem to be the most valued techniques of instruction, but they report that the most commonly used teaching method is one on which they both place a low value. Both students and teachers report that they value presentation to small groups, yet both report that the school ethos retains the conventional assign-study-recite technique. This finding suggests that both teachers and students may have abstract ideas about how learning may best proceed, but that for some reason this process cannot be accomplished within the context of a typical high school. This finding may be interpreted as evidence of cultural lag, conflict between new methods and old procedures, or the inability of the school to get rid of a procedure that has been long in style. Nonetheless, it cannot be denied that such evidence suggests that progressivism scarcely has a stranglehold on procedures in the two high schools studied. Finally, it is to be noted that in a context in which both students and teachers are being exposed to large group

instruction, and at a time when many proposals are being made for this as a means of solving some of America's educational dilemmas, both teachers and students reject the idea of a large lecture system and, further, suspect that the school itself is lukewarm about accepting it.

Student opinion also seems to differ fairly radically from teacher opinion concerning policy formation. Students hold that policy should be determined co-operatively by the teachers whereas teachers place a great emphasis upon the efficient functioning of the department head to set policy. It must be stated once again, even at the risk of redundancy, that neither teachers nor students seem to have any clear picture of what the norms of the school are in relation to policy decisions, even though they have values about how such decisions should be made.

Teachers and college seniors. Sometimes by looking at a group of people who have chosen not to go into an occupation and comparing their responses to similar questions which have been asked individuals who are going into an occupation we can draw some inferences about both the occupation in question and the people who are entering it. Certain general findings concerning college seniors might be pointed out in relation to our analysis of the educational literature.

Education creates an image in the mind of Ivy League college seniors which places it extremely low on the prestige hierarchy of middle class occupations and even suggests that education is an occupation they discourage their friends from entering. It will be noted that there is some evidence for the idea that parents support students' occupational choices in this area, but certain occupations and roles tend not to be chosen. Women tend not to choose college teaching; men tend not to choose elementary teaching. In this sample, in fact, it may be stated that the only reason that one goes into teaching—with the possible exception of college teaching—is because one is indecisive or unclear about other occupations.

Typically the university senior views the function of the secondary school and even of the elementary program primarily in intellectual terms rather than in terms of life adjustment or emotional maturity. Teachers college seniors do see some relationship between the

emotional and personal development of the child and the intellectual skills, but all groups seem to place high priority on the development of the intellect rather than that of personality or adjustment to life.

Possibly the most profound mental health implication of these data, viewing them in the larger picture, is that the individuals who some day will occupy positions of prestige and power within individual communities leave their university experience with an extremely low opinion of teaching and of those who choose it as an occupation. Thus there may be a perpetuation of conflict between those who control education in terms of its economic and fiscal resources and those who will fill the actual teaching positions.



Appendixes



Appendix I

THE TEACHER QUESTIONNAIRE

ON THIS and the following pages a number of items of personal data about yourself are requested. This information is for research purposes only and will be held in strictest confidence by the Harvard Research Team. The information will be reported to the _____ School System in group form only: e.g., the sample was composed of 120 females and 40 males; 70 persons were single, 80 were married, and 10 were widowed. Please answer all the questions as frankly and straightforwardly as you can.

1. What is your sex?

_____ Male

_____ Female

2. What is your marital status?

_____ Single

_____ Single, engaged to be married

_____ Married

_____ Separated

_____ Divorced

_____ Widowed

_____ Remarried

3. How many children do you have? _____

4. What is your spouse's occupation? _____

5. What is your local address? (*NO* Street and Number) _____
(City)

6. What was the date of your birth? _____
(Day) (Month) (Year)

7. Where were you born? _____
(City) (State)

8. What kind of community was this?

_____ Rural _____ Small Town _____ Small Urban _____ Large
Urban _____ Suburban

9. Where was your father born? _____
(State) (Country)
10. What kind of community was your father's birthplace?
_____ Rural _____ Small Town _____ Small Urban _____ Large
Urban _____ Suburban
11. Where was your mother born? _____
(State) (Country)
12. What kind of community was your mother's birthplace?
_____ Rural _____ Small Town _____ Small Urban _____ Large
Urban _____ Suburban
13. What is (was) the occupation of the following members of your family?
Father _____
Mother _____
Brothers _____
Sisters _____
17. What was the religious orientation of your family?
_____ Catholic _____ Jewish _____ Protestant _____ Other
_____ None
18. How often do you now attend religious services?
_____ Regularly _____ Fairly often _____ Seldom _____ Never
19. What kind of secondary school did you attend? _____ Public
_____ Private
20. In what kind of community was this school located?
_____ Rural _____ Small Town _____ Small Urban _____ Large
Urban _____ Suburban
21. Please list the colleges and universities you have attended and the degrees you received from each.

22. _____
23. What were your fields of concentration?
Major _____
Minor _____
24. To what professional organizations do you belong? _____
25. How do you usually spend your summers? _____
26. How did you spend this past summer? _____

27. How many years have you been teaching? _____
28. How many years have you taught in the _____ System?

29. What is your position and school in the _____ System?

30. How long have you been in your present position? _____
31. Have you ever taught in private schools? ____ Yes ____ No
32. If yes above, where and how long? _____
33. Have you engaged in any occupations on a full time basis other than teaching and summer work? ____ Yes ____ No
34. If yes above, please list the occupations and give inclusive dates of employment. _____
35. Do you hold any part time job now? ____ Yes ____ No
36. If yes above, what is the nature of this job? _____
37. Why did you leave your last previous full time job (including teaching in another system)? _____
38. Have you ever contemplated leaving the occupation of teaching and educational work? ____ Yes ____ No
39. If yes above, what was the reason? _____
40. Have you ever contemplated leaving your present position? ____ Yes ____ No
41. If yes above, what was the reason? _____
42. What salary are you receiving at present? \$ _____ per yr.
43. Considering the salaries of other professions and your training and experience, how much do you think you should be receiving? \$ _____ per yr.

Following is a list of general statements about the teacher and the school, some of which you may find extreme, others quite reasonable. We should like to find out how school personnel feel about these statements—whether they agree or disagree with them. The best response to each statement is *your personal opinion*. You may find yourself agreeing with some of these statements, disagreeing just as strongly with others, and perhaps uncertain about others. Whether you agree or disagree with any statement, you can be sure that many other school personnel feel the same way you do.

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write in +1 (plus one), +2, or +3 to show how much you agree if you agree, and -1 (minus one), -2, or -3 to show how much you disagree if you disagree.

+1 = slightly agree

-1 = slightly disagree

+2 = agree

-2 = disagree

+3 = strongly agree

-3 = strongly disagree

- ___ 1. Teachers should get together for a few minutes of non-professional social conversation with some of their fellow workers at school each day.
- ___ 2. Social distance should be maintained between the teacher and the pupil at all times.
- ___ 3. It is a good thing for a teacher to become acquainted with the parents of a number of his pupils and to visit them in their homes.
- ___ 4. One of the most important jobs of the principal or department chairman is the supervision and evaluation of the work of teachers in his school or department.
- ___ 5. If a decision about school policy is to be made, it should be initiated as a result of teacher opinion and carried out by the principal head of the department.
- ___ 6. The most important role of the teacher should be that of imparting subject matter.
- ___ 7. If a teacher shows superior performance in his job, he should be rewarded with an increase in salary.
- ___ 8. Teachers' salaries should be based on total years of teaching experience.
- ___ 9. The primary focus of the teaching job should be to guide and assist the student in learning activities and experiences.
- ___ 10. If a change in policy of a school or department is to be made, it should be initiated and implemented by the principal or head of the department.
- ___ 11. It is best if parents become acquainted with a teacher only when a problem arises concerning their child.
- ___ 12. A teacher should be impersonal in his dealings with students

in the classroom, but informal and friendly outside the classroom.

- 13. A principal or department chairman should take the initiative and provide stimulating leadership for the teachers in his school or department.
- 14. Interaction between teachers at school should be limited primarily to regularly scheduled meetings where they can work cooperatively on school and professional problems.
- 15. The salary of a teacher should be based, in part, on the length of service in the system.
- 16. A committee elected by members of the school or department should plan and carry out all changes in school or departmental policy.
- 17. The primary job of a teacher is to control the students and prevent the school from sinking into chaos.
- 18. When a teacher does an exceptionally good job in his work, he deserves praise and public recognition.
- 19. One of the primary functions of the principal or department chairman role should be the mediation of internal differences and conflicts within the school or department.
- 20. Teachers should treat students as equals, not as subordinates, even in the classroom.
- 21. Every teacher should be a man or woman of highest personal character so that his behavior can serve as a model for students.
- 22. Teachers who show initiative and creativity in teaching should be awarded an increase in salary.
- 23. Teachers should have a minimum of personal and professional interaction with each other at school.
- 24. Teachers and parents should limit their acquaintance with each other to such informal but semi-official groups as the P.T.A.
- 25. Although a change in policy would be initiated by the principal or head of the department, it should be agreed upon by a majority of the teachers.
- 26. One of the most important functions of the teacher is to

- evaluate student progress and prod and encourage the dilatory student.
- 27. The primary job of the principal or department chairman should be to provide the administrative machinery for the efficient carrying on of the school or department's functioning.
 - 28. Those who do outstanding jobs as teachers should be promoted to jobs with greater responsibility.
 - 29. Any changes in educational procedures should be neither the principal's decision nor a group decision, but should be left up to the individual teacher to initiate and carry out.
 - 30. Teachers' salaries should be based on the amount of education or the number of degrees possessed by the teacher.
 - 31. It is proper for a teacher to be a close friend with one of his pupils outside of the school situation.
 - 32. Personal satisfaction is sufficient reward for a job well done.
 - 33. The main job of the principal or department chairman is to serve as an intermediary between the other teachers of the department and the higher administrative officials.
 - 34. It is important for teachers to discuss informally with their fellow workers during the school day professional problems of mutual concern.
 - 35. Teachers should have no contact whatsoever with parents of their pupils.
 - 36. A change in policy should be initiated by the principal or head of the department in consultation with selected teachers.
 - 37. A teacher should spend a major portion of his time in efforts to stimulate the thinking and interest of his students and in motivating them to learn.
 - 38. If a teacher is given increased duties and responsibilities, his salary should be increased.
 - 39. One main job of a principal or department chairman is to make decisions and direct the operation and functioning of his school or department.
 - 40. Teachers should be friendly but reserved in their relationship with students.

- 41. A change in school policy should be cooperatively planned by all teachers.
- 42. If a teacher is outstanding in performing his role as a teacher, he should have increased autonomy in the exercise of his teaching activities.
- 43. Parents should be invited to visit school and become acquainted with their children's teachers.
- 44. The quality of achievement and performance of his students should be an important criterion in establishing a given teacher's salary.
- 45-53. There has been considerable professional discussion recently about the proper and legitimate goals of the school. You will find below a list of goals for the school, all of which have been proposed by some reputable professional educator and supported by some segment of the public. Please rank these goals in terms of what *you feel should be the most important* for present day schools at your grade and/or for your subject. Place a 1 in the blank to the left of the goal which you feel should be given precedence in the schools, place a 2 in the blank beside the one you feel to be next most important, and so on down to a 9 beside the goal which you feel should deserve the least consideration.
 - _____ teaching of knowledge and skills in various subject matter
 - _____ formation of character
 - _____ transmission of cultural values
 - _____ preparation for college entrance
 - _____ development of social skills
 - _____ developing love of and interest in learning
 - _____ preparation for a vocation
 - _____ emotional maturity
 - _____ development of intellectual ability
- 54-61. Another subject about which there has been considerable discussion is that of what should be the instructional method used in the school. Please rank the following list of proposed instructional procedures according to how *you feel* about their appropriateness in your grade and/or for your subject.

Put a 1 in the blank beside that teaching method which you feel should receive precedence in the schools, put a 2 in the blank beside the method you think is next most appropriate for school, and so on down to an 8 beside the method which you consider least useful.

- _____ assign-study-recite
- _____ small group discussion
- _____ lecture to large groups
- _____ presentations to small groups who can ask questions
- _____ independent study
- _____ individual and group projects
- _____ large group lecture combined with small group discussion
- _____ teacher supervised study and practice

62-72. Please rank the following areas in terms of the importance that you feel they have for the successful functioning of a teacher: i.e., in terms of the extent to which satisfactions in the area contribute to, and dissatisfactions detract from, the teacher's overall performance as a teacher. Place a 1 in the blank to the left of the area which is in your eyes the most important for teacher morale, a 2 in the blank beside the area of next most importance, and so on down to an 11 beside the area of least importance to the teacher.

- _____ The principles upon which salary schedules are based
- _____ The relationship between teachers and pupils
- _____ The recognition given for outstanding performance in the teaching role
- _____ The relationships among teachers within the school situation
- _____ The methods of teaching utilized by the teacher
- _____ The teacher's participation in community affairs
- _____ The ways in which decisions on school or departmental policy are made
- _____ The relationship between teachers and parents
- _____ The role defined for the teacher in the school system
- _____ The goals of the school system in which the person teaches

_____ The roles performed by the principal of the school or the chairman of the department in which the person teaches

What other areas not listed above are highly important for teachers' morale? _____

The various members of any organization often feel quite differently about being a member of that organization; some may have a very positive feeling about their group, others may feel extremely negative, and still others may feel quite indifferent about this particular membership. The following set of statements represents a wide variety of reactions which a person may have about being a member of the faculty of the _____ Schools, some of which you may find quite extreme, others not. Please react to these statements by indicating the degree of your agreement or disagreement with each of them. You may find yourself agreeing with some of them, disagreeing just as strongly with others, and perhaps uncertain about others. No matter what your feeling is—agreement or disagreement—the best response is your own personal reaction.

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write in +1 (plus one), +2, or +3 to show how much you agree if you agree, and -1 (minus one), -2, or -3 to show how much you disagree if you disagree.

+1 = slightly agree

-1 = slightly disagree

+2 = agree

-2 = disagree

+3 = strongly agree

-3 = strongly disagree

- _____ 1. I plan to utilize the valuable experience I have received teaching in _____ by going into administrative work in the near future.
- _____ 2. I like very much being a member of the school or department in which I teach.
- _____ 3. I would have no particular feeling, either positive or negative, about being chosen as a typical member of my school or department.

- 4. I do not think the other members of my school or department would miss me personally if I were to leave _____.
- 5. A teacher could not do better than _____, in selecting the ideal system in which to carry out one's professional career.
- 6. I feel that the other members of my school or department accept me and are glad to have me in the school or department.
- 7. I am not concerned about how the other members of my school or department feel about me personally.
- 8. I am not happy as a member of the school or department in which I teach.
- 9. Teaching in _____ provides me with the greatest opportunity, of any system I know, for professional growth as a teacher.
- 10. The members of my school or department are one of the finest groups of people I know.
- 11. The other members of my school or department tend to avoid working closely with me.
- 12. I am fairly indifferent about being a member of my school or department.
- 13. I would not hesitate to move from _____ if another school system offered a 10% higher salary scale than _____.
- 14. There are a number of groups whose members I would rather be with than to be with the other members of my school or department.
- 15. I do my work and am not too concerned about whether people like to work with me or not.
- 16. I would secretly be quite pleased to be selected as the typical teacher of my school or department.
- 17. _____ is an excellent place to get good experience in teaching, but not to spend one's entire teaching career.
- 18. I feel that the other members of my school or department accept my contributions and like working with me.
- 19. I am somewhat indifferent about working with the other members of my school or department; they don't affect me one way or the other.

- ____20. I would be considerably upset if I were selected as a typical teacher in my school or department.
- ____21. It would be very difficult to find a school system which would provide more personal satisfaction to a professionally oriented teacher than _____ does.
- ____22. Working with the other members of my school or department is not a particularly rewarding experience.
- ____23. I enjoy working with the other members of my school or department.
- ____24. I do not pay much attention to the other members of my school or department; we tolerate each other.

The goals of a given educational system are not necessarily congruent with what a given teacher thinks those goals should be. Please rank the goals in the following list in terms of what you feel the _____ *Schools*, as an educational system, *emphasizes* in so far as one can generalize. Place a 1 in the blank to the left of the goal which you feel the _____ system thinks is most important, place a 2 in the blank beside the goal which _____ gives the next most emphasis to, and so on down to a 9 beside the goal which you think _____ feels is least important.

- ____ development of social skills
- ____ developing love of and interest in learning
- ____ preparation for a vocation
- ____ emotional maturity
- ____ development of intellectual ability
- ____ teaching of knowledge and skills in various subject matter
- ____ formation of character
- ____ transmission of cultural values
- ____ preparation for college entrance

Similarly, the teaching methods emphasized by a given school system are not necessarily congruent with the methods which a given teacher thinks are most appropriate. Please rank the instructional methods in the following list in terms of the *emphasis which* you feel the _____ *Schools*, as an educational system, *places on*

each. Put a 1 in the blank to the left of the method which you feel the _____ system thinks is most important, place a 2 in the blank beside the method which _____ gives the next most emphasis to, and so on down to an 8 beside the method which you feel _____ thinks is least appropriate.

- _____ independent study
- _____ individual and group projects
- _____ large group lecture combined with small group discussion
- _____ teacher supervised study and practice
- _____ assign-study-recite
- _____ small group discussion
- _____ lecture to large groups
- _____ presentations to small groups who can ask questions

The best response to each of the following statements is your own personal opinion as to whether or not this statement properly characterizes a situation in the _____ Schools. Any given statement may or may not reflect an actual situation or condition in _____; you may find yourself agreeing with some of the statements, disagreeing just as strongly with others, and perhaps uncertain about others.

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write in +1 (plus one), +2, or +3 to show how much you agree if you agree, and -1 (minus one), -2, or -3 to show how much you disagree if you disagree.

- | | |
|---------------------|------------------------|
| +1 = slightly agree | -1 = slightly disagree |
| +2 = agree | -2 = disagree |
| +3 = strongly agree | -3 = strongly disagree |

- _____ 1. Teachers in _____ are expected to be of the highest personal character so that their behavior can serve as a model for students.
- _____ 2. Initiative and creativity in teaching are usually rewarded in _____ by an increase in salary.

- 3. _____ teachers have a minimum of personal and professional interaction with each other during school hours.
- 4. At _____, teachers and parents usually limit their acquaintance with each other to such informal but semi-official groups as the P.T.A.
- 5. Although a change in school or department policy in _____ is often initiated by the principal or head of the department, it is nearly always agreed upon by a majority of the teachers before being implemented.
- 6. One of the most important functions of the teacher in _____ is to evaluate student progress and to prod and encourage the dilatory student.
- 7. The primary job of the principal or department chairman in _____ is to provide the administrative machinery for the efficient carrying on of the school or department functioning.
- 8. In _____, teachers who do an outstanding job as teachers are often promoted to jobs with greater responsibility.
- 9. Changes in educational procedures in _____ are made neither by the principal or chairman's decision nor by a group decision on the part of the teachers, but are left up to the individual teacher to initiate and carry out.
- 10. Teachers' salaries in _____ are based in part on the amount of education and the number of degrees possessed by the teacher.
- 11. It is proper for a _____ teacher to be a close friend with one of his pupils outside of the school situation.
- 12. Personal satisfaction is about the only reward that a teacher in the _____ system gets for doing a good job of teaching.
- 13. In _____, the main job of the principal or department chairman is to serve as an intermediary between the other teachers of the school or department and the higher administrative officials.
- 14. Teachers at _____ often discuss informally with each other during the school day professional problems of mutual concern.

- 15. Teachers in _____ are expected to have no contact whatsoever with parents of their pupils.
- 16. A change in policy in _____ is usually initiated by the principal or head of the department in consultation with selected teachers.
- 17. Teachers in _____ spend much of their time stimulating the thinking and interest of the students and motivating them to learn.
- 18. In _____, when a teacher is given increased duties or responsibilities to perform, his salary is increased.
- 19. One of the main jobs of a principal or department chairman in _____ is to make decisions and direct the operation and functioning of his school or department.
- 20. _____ teachers are expected to be friendly but reserved in their relationships with students.
- 21. It is usual for a change in policy in _____ to be co-operatively planned by all the teachers in a school or department.
- 22. If a teacher in _____ is outstanding in performing his role as a teacher, he is given increased autonomy in the exercise of his teaching activities.
- 23. _____ parents are invited to visit school and become acquainted with their children's teachers.
- 24. The quality of achievement and performance of his students is an important criterion in establishing a teacher's salary in _____.
- 25. Teachers at _____ usually manage to get together for a few minutes of non-professional social conversation with some of their fellow workers at school each day.
- 26. _____ teachers are expected to maintain social distance between themselves and the pupils at all times.
- 27. Teachers at _____ are expected to become acquainted with the parents of a number of their pupils and to visit them in their homes.
- 28. One of the most important responsibilities of the principal or department chairman in _____ is to supervise and

evaluate the work of the teachers in the school or department.

- 29. Decisions about policy change in _____ are usually initiated as a result of teacher opinion but are carried out by the principal or head of the department.
- 30. In _____, the most important role of the teacher is that of imparting subject matter.
- 31. Teachers who do a superior job are awarded increases in salary at _____.
- 32. Teachers' salaries in _____ are based on the total years of teaching experience.
- 33. The primary focus of the teaching job in _____ is to guide and assist the student in learning activities and experiences.
- 34. In _____ a change of policy is usually initiated and implemented by the principal or head of the department.
- 35. Parents and teachers become acquainted at _____ only when a problem arises concerning the parent's child.
- 36. _____ teachers are expected to be impersonal in their dealings with students in the classroom, but informal and friendly outside the classroom.
- 37. My principal or department chairman in _____ takes the initiative and provides stimulating leadership for the teachers in his school or department.
- 38. Interaction between _____ teachers at school is limited primarily to regularly scheduled meetings where they work cooperatively on school and professional problems.
- 39. The salary of teachers in _____ are based, in part, on the length of service in the _____ system.
- 40. At _____, committees elected by members of the school or department plan and carry out all changes in school or departmental policy.
- 41. An important job of the teacher in _____ is to control the students and prevent the school from sinking into chaos.
- 42. When a teacher at _____ does an exceptionally good job in his work, he receives praise and public recognition.
- 43. One of the primary functions of the principal or department

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chairman in _____ is the mediation of internal differences and conflicts within the school or department.

- 44. Teachers in _____ are expected to treat students as equals, not as subordinates, even in the classroom.

Statistical Tables

Median Scores and Quartile Deviations of Students and Teachers on Value and Norm Items in Ten Educational Areas

Educational Area and Items	Y Second- ary Students		Y Second- ary Teachers		X Second- ary Teachers		X Elemen- tary Teachers		Total Group of Teachers	
	Md	Q	Md	Q	Md	Q	Md	Q	Md	Q
<i>Relationship Between Teachers and Pupils</i>										
Friendly but reserved										
Value	2.2	1.0	1.9	.6	1.8	.5	1.8	.6	1.8	.6
Norm	2.2	.8	2.0	.4	2.0	.5	2.0	.4	2.0	.4
Close friends outside school										
Value	—	—	2.9	1.0	3.7	1.0	3.3	1.2	3.3	1.1
Norm	—	—	2.8	1.0	3.8	1.0	2.9	1.0	3.1	1.0
Impersonal in class-room, informal and friendly outside classroom										
Value	—	—	3.2	1.4	2.6	1.4	4.3	1.5	3.5	1.5
Norm	—	—	2.9	1.0	3.0	1.0	3.8	1.5	3.3	1.2
Treated as equals, not as subordinates										
Value	2.0	1.9	4.3	1.3	4.7	1.3	3.7	1.3	4.1	1.4
Norm	4.8	1.1	4.0	1.0	4.1	1.1	3.8	1.1	3.9	1.1
Social distance maintained at all times										
Value	4.4	2.0	3.9	1.3	3.0	1.3	3.5	1.4	3.5	1.3
Norm	3.3	1.7	4.2	1.0	4.1	1.1	4.1	1.0	4.1	1.0
<i>Role of the Teacher</i>										
Evaluate progress and motivate dilatory student										
Value	1.9	.9	2.5	.8	2.6	1.0	2.2	.8	2.4	.8
Norm	3.0	1.6	2.3	.7	2.4	.9	2.3	.9	2.3	.8
Impart subject matter										
Value	1.2	.4	2.9	1.4	3.7	1.5	3.2	1.4	3.2	1.4
Norm	2.4	1.0	2.9	1.2	3.3	1.0	3.2	1.3	3.1	1.1
Stimulate thinking and interest										

**Median Scores and Quartile Deviations of Students and Teachers
on Value and Norm Items in Ten Educational Areas**

Educational Area and Items	Y Second- ary Students		Y Second- ary Teachers		X Second- ary Teachers		X Elemen- tary Teachers		Total Group of Teachers	
	Md	Q	Md	Q	Md	Q	Md	Q	Md	Q
Value	1.2	.5	1.7	.7	1.7	.6	1.7	.6	1.7	.6
Norm	2.5	1.6	2.3	.7	2.1	.6	2.1	.7	2.2	.7
Serve as character model										
Value	1.6	.7	1.4	.6	1.5	.7	1.3	.5	1.4	.6
Norm	2.6	1.3	2.1	.8	1.9	.5	1.8	.6	1.9	.6
Guide and assist learning experience										
Value	—	—	1.7	.6	1.5	.7	1.4	.5	1.5	.6
Norm	—	—	2.2	.6	2.2	.6	1.9	.5	2.1	.6
Control students										
Value	2.0	1.1	5.5	.8	5.6	.9	5.7	.6	5.6	.7
Norm	2.2	1.0	2.7	1.0	3.4	1.1	3.5	1.4	3.2	1.3
Educational Goals										
Develop intellectual ability										
Value	4.4	1.6	2.7	.6	3.3	1.0	3.4	1.0	3.2	.9
Norm	4.9	1.7	3.5	.9	4.0	1.0	3.4	1.3	3.6	1.1
Develop knowledge and skill in subject matter										
Value	3.2	2.0	3.2	1.5	2.8	1.4	2.6	1.4	2.8	1.2
Norm	2.2	1.2	2.2	1.3	2.1	1.4	2.0	1.1	2.1	2.0
Prepare for a vocation										
Value	6.5	2.4	7.0	.8	7.2	1.2	8.0	7.2	7.1	1.3
Norm	5.3	2.5	5.6	1.5	6.4	2.2	7.8	1.6	7.0	2.1
Form character										
Value	4.3	2.0	3.6	1.2	4.0	1.3	2.8	1.3	3.4	1.1
Norm	5.2	2.0	6.5	1.8	5.6	1.1	4.2	1.2	5.2	1.4
Develop social skills										
Value	—	—	7.8	1.4	7.5	1.1	6.5	1.3	7.1	1.4
Norm	—	—	6.3	1.6	6.5	1.8	5.6	1.6	5.9	1.5
Transmit cultural values										
Value	7.1	1.6	4.5	.8	5.1	1.2	6.2	1.2	5.5	1.0
Norm	6.7	1.6	6.3	1.7	5.7	1.2	6.2	1.4	6.2	1.5
Develop emotional maturity										
Value	6.1	1.9	5.6	1.6	4.9	1.2	4.8	.7	4.9	1.0
Norm	6.4	1.6	6.8	1.4	6.7	1.6	5.8	1.6	6.3	1.6
Develop love of and interest in learning										
Value	5.4	2.3	2.2	1.0	2.2	1.0	2.1	1.2	2.2	1.2
Norm	6.5	1.9	4.9	1.1	4.4	1.9	3.5	1.0	4.0	1.4
Prepare for college entrance										
Value	3.8	2.2	6.7	1.3	7.5	1.5	8.2	.7	7.7	1.2
Norm	2.0	1.4	1.9	1.2	3.0	1.5	7.1	2.1	4.1	2.6

**Median Scores and Quartile Deviations of Students and Teachers
on Value and Norm Items in Ten Educational Areas**

<i>Educational Area and Items</i>	<i>Y Second- ary Students</i>		<i>Y Second- ary Teachers</i>		<i>X Secand- ary Teachers</i>		<i>X Elemen- tary Teachers</i>		<i>Total Group of Teachers</i>	
	<i>Md</i>	<i>Q</i>	<i>Md</i>	<i>Q</i>	<i>Md</i>	<i>Q</i>	<i>Md</i>	<i>Q</i>	<i>Md</i>	<i>Q</i>
<i>Relationship Among Teachers</i>										
Informal discussion af professional problems										
Value	2.4	1.2	1.8	.5	1.8	.5	1.6	.6	1.7	.6
Norm	3.6	1.1	3.1	1.5	2.5	.9	2.7	1.3	2.7	1.3
Infarmal nanprofessional conversation										
Value	2.8	1.4	1.6	.7	1.5	.6	1.4	.6	1.5	.6
Narm	2.7	1.2	3.1	1.4	2.2	1.2	2.4	.9	2.6	1.2
Regularly scheduled meetings only										
Value	4.0	1.8	5.2	.7	5.0	.6	5.4	.7	5.2	.7
Narm	3.3	1.3	2.6	1.2	3.3	1.0	2.8	1.3	2.9	1.2
Minimum of pra- fessional and persanal interaction										
Value	4.7	1.2	5.6	.6	5.4	.6	5.2	.7	5.4	.6
Narm	3.7	1.2	2.2	1.1	2.7	1.1	2.6	1.5	2.5	1.3
<i>Teaching Methods</i>										
Teacher-supervised study and practice										
Value	5.0	1.9	5.1	.9	4.3	1.0	3.7	1.3	4.3	1.1
Norm	4.6	1.7	5.1	.8	4.6	1.2	2.5	1.5	4.2	1.4
Independent study										
Value	4.4	1.9	6.2	1.7	5.4	1.4	5.4	1.1	5.6	1.4
Narm	5.0	1.9	6.7	1.9	5.5	1.6	5.4	.9	5.7	1.2
Large graup lecture										
Value	6.8	1.4	6.9	.9	7.5	1.0	7.0	.7	7.0	.9
Norm	3.7	1.9	4.1	1.5	7.5	1.0	7.1	1.2	6.9	1.5
Individual and group prajects										
Value	4.6	1.7	3.8	.6	3.4	.6	3.0	.6	3.4	.7
Narm	5.1	1.6	4.1	1.2	2.5	1.8	2.7	.8	3.0	.9
Large graup lecture combined with small graup discussion										
Value	4.8	1.8	3.6	1.0	5.1	1.2	4.6	1.4	4.3	1.3
Norm	5.5	1.5	3.8	1.3	6.2	1.3	4.9	1.2	4.9	1.3
Small graup discussion										
Value	3.1	1.6	2.5	1.1	2.6	.8	3.1	.6	2.8	.7
Narm	4.8	2.0	4.6	.9	3.5	.8	3.8	.8	4.0	.9
Presentation to small groups wha can ask questions										
Value	3.8	1.5	1.8	1.2	1.9	1.1	1.9	1.1	1.9	1.2
Narm	4.8	2.0	3.9	1.4	3.6	1.0	3.2	1.1	3.5	1.2

**Median Scores and Quartile Deviations of Students and Teachers
on Value and Norm Items in Ten Educational Areas**

Educational Area and Items	Y Second- ary Students		Y Second- ary Teachers		X Second- ary Teachers		X Elemen- tary Teachers		Total Group of Teachers	
	Md	Q	Md	Q	Md	Q	Md	Q	Md	Q
Assign-study-recite										
Value	3.3	2.5	6.1	1.5	5.7	1.4	7.6	1.2	6.7	1.8
Norm	1.2	.6	1.4	1.3	2.9	1.6	6.3	1.6	4.0	2.3
<i>Role of Teacher's Immediate Superior</i>										
Provide administrative machinery for efficient functioning of school or department										
Value	—	—	2.4	.9	2.1	.6	2.0	.7	2.1	.8
Norm	—	—	2.3	.8	2.2	.6	2.1	.5	2.1	.6
Serve as intermediary between teachers and higher administrative officials										
Value	—	—	4.2	1.1	3.8	.9	4.0	1.2	4.0	1.1
Norm	—	—	4.0	1.1	4.1	.9	3.9	1.6	4.0	1.1
Make decisions and direct operation of school or department										
Value	—	—	1.9	.6	2.0	.5	1.8	.5	1.9	.5
Norm	—	—	2.1	.5	2.2	.6	2.0	.5	2.1	.5
Supervise and evaluate work of teachers										
Value	—	—	1.7	.7	2.2	.8	1.9	.9	1.9	.8
Norm	—	—	2.3	.8	2.6	.7	2.2	.8	2.3	.8
Provide stimulating leadership for teachers										
Value	—	—	1.4	.5	1.8	.4	1.7	.6	1.7	.6
Norm	—	—	2.5	1.2	2.6	.9	2.1	1.1	2.3	1.0
Mediate internal differences and con- flict within school or department										
Value	—	—	2.4	.8	2.9	1.3	2.6	1.1	2.6	1.1
Norm	—	—	3.5	1.0	3.4	1.0	3.4	.9	3.4	1.0
<i>Principles of Salary Determination</i>										
Length of service in system										
Value	—	—	1.9	.5	2.2	.7	2.4	1.4	2.2	.8
Norm	—	—	1.9	.6	2.2	.6	2.3	.9	2.1	.7
Total years teaching experience										
Value	—	—	3.8	1.2	4.0	1.2	4.0	1.4	3.9	1.3
Norm	—	—	2.7	1.3	3.2	1.1	3.0	1.2	3.0	1.2
Achievement and per- formance of students										
Value	—	—	4.1	1.4	3.3	1.1	3.2	1.4	3.4	1.4
Norm	—	—	5.4	.9	4.4	1.5	4.5	1.2	4.7	.9

**Median Scores and Quartile Deviations of Students and Teachers
on Value and Norm Items in Ten Educational Areas**

Educational Area and Items	Y Second- ory Students		Y Second- ory Teachers		X Second- ary Teachers		X Elemen- tary Teachers		Total Group of Teachers	
	Md	Q	Md	Q	Md	Q	Md	Q	Md	Q
Demonstration of Initiative and cre- ativity in teaching										
Value	—	—	2.3	1.0	2.3	.8	2.3	.9	2.3	.9
Norm	—	—	4.9	.7	4.1	1.0	4.3	1.2	4.5	1.0
Amount of education or number of degrees										
Value	—	—	4.6	1.2	5.0	1.0	4.0	1.2	4.7	1.2
Norm	—	—	1.6	.5	2.0	.5	2.1	.6	1.7	.5
Number of duties and responsibilities										
Value	—	—	1.3	.5	1.4	.6	1.4	.6	1.4	.5
Norm	—	—	3.3	1.2	4.3	1.1	4.9	1.0	4.5	1.2
Methods of Policy Formation										
Initiated and carried out by individual teacher										
Value	—	—	5.0	.9	4.5	.7	4.7	.9	4.7	.8
Norm	—	—	4.7	.9	4.6	.8	5.0	.8	4.8	.8
Planned and carried out by elected com- mittee of teachers										
Value	—	—	4.3	1.0	4.1	1.2	4.6	1.2	4.4	1.1
Norm	—	—	4.7	1.0	4.1	.9	4.0	1.0	4.2	1.0
Initiated and imple- mented by immediate superior										
Value	—	—	4.1	.8	3.7	1.3	3.8	1.5	3.9	1.3
Norm	—	—	3.4	.9	3.2	1.0	2.8	1.2	3.1	1.1
Initiated by immediate superior in consul- tation with selected teachers										
Value	—	—	4.6	1.0	3.7	1.2	4.7	1.0	4.4	1.4
Norm	—	—	3.6	1.3	2.7	1.0	4.0	1.3	3.5	1.3
Initiated by teachers and carried out by immediate superior										
Value	—	—	2.9	1.2	2.7	1.0	2.7	1.0	2.8	1.0
Norm	—	—	3.9	1.1	3.0	.9	3.9	1.0	3.7	1.0
Initiated by immediate superior and agreed upon by majority of teachers										
Value	—	—	1.9	.6	1.7	.8	1.5	.6	1.8	.7
Norm	—	—	2.5	1.1	2.6	1.1	3.8	1.3	3.0	1.3
Planned co-operatively by all teachers										
Value	—	—	2.1	.9	2.1	.8	2.1	.8	2.1	.8
Norm	—	—	3.1	1.0	3.1	1.2	3.8	1.3	3.4	1.2

**Median Scores and Quartile Deviations of Students and Teachers
on Value and Norm Items in Ten Educational Areas**

Educational Area and Items	Y Second- ary Students		Y Second- ary Teachers		X Second- ary Teachers		X Elemen- tary Teachers		Total Group of Teachers	
	Md	Q	Md	Q	Md	Q	Md	Q	Md	Q
Methods of Acknowledging Outstanding Teaching										
Promotion to position with greater responsi- bility	—	—	3.5	1.3	3.0	1.1	3.5	1.3	3.4	1.3
Value	—	—	2.9	.7	3.6	1.1	3.9	1.0	3.4	1.2
Norm	—	—	2.9	.7	3.6	1.1	3.9	1.0	3.4	1.2
Personal satisfaction only	—	—	4.7	1.1	4.6	1.0	4.3	1.2	4.5	1.2
Value	—	—	3.4	1.3	3.8	1.1	3.6	1.2	3.6	1.2
Norm	—	—	3.4	1.3	3.8	1.1	3.6	1.2	3.6	1.2
Increased autonomy in teaching activities	—	—	2.1	.6	2.3	.7	2.2	.7	2.2	.7
Value	—	—	3.0	.8	2.9	1.0	3.4	1.2	3.1	1.0
Norm	—	—	3.0	.8	2.9	1.0	3.4	1.2	3.1	1.0
Praise and public recognition	—	—	2.1	.8	2.0	.8	2.0	1.0	2.0	.9
Value	—	—	3.8	1.0	4.1	.8	3.7	1.0	3.9	1.0
Norm	—	—	3.8	1.0	4.1	.8	3.7	1.0	3.9	1.0
Increase in salary	—	—	1.6	.9	1.8	.7	1.8	.6	1.8	.7
Value	—	—	4.9	1.1	3.5	1.5	3.2	1.4	3.8	1.3
Norm	—	—	4.9	1.1	3.5	1.5	3.2	1.4	3.8	1.3
Relationship Between Teachers and Parents										
Parents visit teachers in school	—	—	1.4	.6	1.8	.6	1.5	.6	1.5	.6
Value	—	—	1.3	.5	1.8	.6	1.5	.5	1.5	.6
Norm	—	—	1.3	.5	1.8	.6	1.5	.5	1.5	.6
Teachers and parents have no contact whatsoever	5.5	.9	5.9	.3	5.7	.5	5.9	.3	5.9	.3
Value	4.6	1.3	5.8	.4	5.5	.6	5.8	.4	5.8	.5
Norm	4.6	1.3	5.8	.4	5.5	.6	5.8	.4	5.8	.5
Teachers visit parents in homes	5.2	1.1	2.9	1.1	3.0	1.0	2.5	.9	2.8	.9
Value	5.6	.7	5.1	1.0	4.7	1.0	3.3	1.2	4.2	1.1
Norm	5.6	.7	5.1	1.0	4.7	1.0	3.3	1.2	4.2	1.1
Teachers and parents become acquainted only when problem arises	4.6	1.9	5.4	.7	5.4	.6	5.6	.5	5.5	.6
Value	2.4	1.7	4.3	1.1	3.7	1.1	4.8	.8	4.5	1.0
Norm	2.4	1.7	4.3	1.1	3.7	1.1	4.8	.8	4.5	1.0
Teachers and parents become acquainted only at meetings such as PTA	1.7	.7	5.1	.7	5.0	.8	5.0	.7	5.0	.7
Value	2.5	1.2	3.5	1.4	2.7	.9	3.7	1.4	3.3	1.4
Norm	2.5	1.2	3.5	1.4	2.7	.9	3.7	1.4	3.3	1.4

Appendix III

Joint Commission on Mental Illness and Health

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American Academy of Pediatrics	Association of American Medical Colleges
American Association for the Advancement of Science	Association of State and Territorial Health Officers
American Association on Mental Deficiency	Catholic Hospital Association
American Association of Psychiatric Clinics for Children	Central Inspection Board, American Psychiatric Association
American College of Chest Physicians	Children's Bureau, Department of Health, Education, and Welfare
American Hospital Association	Council of State Governments
American Legion	Department of Defense, U.S.A.
American Medical Association	National Association for Mental Health
American Nurses Association and The National League for Nursing (Coordinating Council of)	National Association of Social Workers
American Occupational Therapy Association	National Committee Against Mental Illness
American Orthopsychiatric Association	National Education Association
American Personnel and Guidance Association	National Institute of Mental Health
American Psychiatric Association	National Medical Association
American Psychoanalytic Association	National Rehabilitation Association
American Psychological Association	Office of Vocational Rehabilitation, Department of Health, Education, and Welfare
American Public Health Association	United States Department of Justice
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Appendix IV

Footnotes

II-1. While it is impossible in a survey of this nature to scrutinize in any detail the specific events in history that affected the rationale of the curriculum, four points should be kept in mind: first, the meeting of the Committee of Ten in the 1890's; second, the passage of the Smith-Hughes Act in 1917 providing for federal aid to vocational education; third, the so-called Prosser Resolution of 1945; and finally, the 1950 White House Conference. The meaning of these particular events has been reviewed by Cubberley (1934) and by Kandel (1957).

II-2. Riesman (1950) has called attention to a trend in our society in suggesting that more and more people seem "other-directed" rather than "inner-directed"—they are being guided by peer values and practices rather than by unshakable personal convictions. Miller and Swanson (1958) extended Riesman's speculation and brought empirical evidence to bear on the topic. These authors agree that there is a decline of inner-direction, but add a new dimension to the problem. They reason that there has been an increasing integration of members of our society into urban settings where there are large-scale business and industrial enterprises. Here job security is much greater, and risk taking less, than was true in the small independent enterprises that used to be typical. Riesman's lost-in-the-crowd people are in a phase of transition from the emotional security of inner-direction to the new kind of security available in a complex, bureaucratic organization. Miller and Swanson assume that more lenient child-rearing practices are less likely to produce rigid internal controls and predict that these technics will be characteristic of families where the breadwinner is employed in a bureaucratic setting. The more "individuated-entrepreneurial" parent who is mainly self-employed, works in a small enterprise, or is in some other respect not integrated fully into the urban society will still tend to see his children as facing a risk-taking existence and as needing strong inner controls. The argument is that the "bureaucrat" has less need of a sense of providing his own direction because he is subject to the elaborate external checks on behavior provided in a complex organization. Taking a random sample of Detroit families, Miller and Swanson found that, as expected, it is the entrepreneurial middle-class families who use

the more stringent child-rearing practices traditionally associated with the middle class and believed to produce relatively pervasive internal controls. The technics of the bureaucratic middle classes are less likely to have this effect.

II-3. Kandel (1957, p. 173) considered the Prosser Resolution as the first direct statement of the school's involvement in mental health. The Resolution was introduced at a meeting of vocational teachers and is important because it marks a point often overlooked: the time when mental health became allied with vocational education since both were concerned with a similar goal which was called, quite generally and loosely, "life adjustment." One of the reasons for this alliance was that vocational education, to be carried out effectively, required staff members to counsel and guide students, not only in their chosen vocations but also to help them adjust to the culture as a whole (Prosser, 1945).

III-1. Laymen may bridle at the kind of statement quoted, retorting that we would not want all children to be alike, that some aggressive women, for example, have contributed beneficial things to society. Most mental health workers would agree that it is undesirable to have everyone alike in values or interests and impossible to have everyone alike in energy, but that certain extreme characteristics have marked present or future disadvantages. It is often held, too, that the positive contributions of a person may occur despite, rather than because of, his pathologic deviations.

III-2. Scheidlinger (1952) has pointed out that while sociometric choices may help us gauge momentary conscious attitudes, as commonly used they reveal nothing explanatory concerning the reasons for these attitudes, nor, indeed, do they even yield clues as to how intensely the choices are held. He warns further that sociometric choices are not guaranteed to provide the teacher with the most appropriate groupings in the classroom for instructional or any other purposes. They are attachments between some pupils which not only do not promote growth but make for increased individual pathology as well as group disharmony.

III-3. *Formal* diagnostic procedures are not always required, of course, and in the case of older people who can describe their problems they need not necessarily precede the onset of treatment. Sometimes treatment begins, in effect, the minute a patient or "client" arrives in the office of a psychotherapist or psychological counselor; diagnostic appraisals are made as information develops during the contact. Indeed, the particular goals of certain sorts of treatment may not require an historical formulation of the case:

In this agency, there is no attempt to arrive at a standardized psychiatric history, which is dependent upon the collection of many "factual" details, in order to build up a genetic formulation of psycho-pathology and diagnosis. The interviews

are focused mainly upon assessing the client's feelings in the here-and-now situation, and upon building up and maintaining a meaningful relationship around a discussion of one or two central problems.

Such an approach may be criticized as laying the workers open to mistakes in "diagnosis." In this case, for instance, the worker's general impression is that Mrs. V. has a fairly healthy personality and that her compulsive behavior in relation to her children is derived from her cultural background. Treatment was therefore focused upon her maladaptation to an adult traumatic experience, and no attempt was made to explore possible links with deeper conflicts. The disorder in the child was viewed as mainly reactive to the stress of the mother's disordered perception and handling of him, and a treatment plan based upon a detailed assessment of his intrapsychic condition was avoided (Lindemann, Vaughan, and McGinnis, 1955, p. 30).

In some types of psychotherapy, not only is no attempt made to gain historical understanding of a problem but no conceptual formulation at all is held to be necessary. In the "client-centered" therapy advocated by Rogers (1951) the technique used is viewed as applicable regardless of the type of client. In the "functional" (as opposed to "diagnostic") approach to casework stemming from the ideas of Otto Rank (Kasius, 1950), the effectiveness of the procedure is said to lie so centrally in its emotional impact that diagnosis is irrelevant.

III-4. Misinterpretations of happenings and misreading of others' motives play a large part in the genesis of illness of all ages, but they are more prevalent for the younger child. An example is the child who heard that Christ died "on a cross" and concluded that Christ died because of being angry. Such a child might develop an excessive fear of the emotion and bottle up his irritations too much. The youngster sent away to nursery school may imagine that he is less loved than his little brother who is allowed to stay home with mommy. The timid child with rigidly high self-expectations may react to a teacher's first reprimand with undue anxiety or with a further increase in his stringent self-discipline.

III-5. Some sources from which parents may gain further understanding of children are: Dorothy Baruch, *One Little Boy* (New York: Julian Press, 1952); Edith Buxbaum, *Your Child Makes Sense* (New York: International Universities Press, 1949); O. S. English and G. H. J. Pearson, *Emotional Problems of Living* (rev. ed.; New York: W. W. Norton & Co., 1955); Selma Fraiberg, *The Magic Years* (New York: Charles Scribner's Sons, 1959); S. L. Green and A. B. Rothenberg, *A Manual of First Aid for Mental Health* (New York: Julian Press, 1953); and L. J. Stone and J. Church, *Childhood and Adolescence* (New York: Random House, Inc., 1957).

III-6. Being with some older children may give youngsters from small families other benefits too. For example, boys without older brothers, de-

prived of a suitable array of male identification figures by the fact that most teachers are women, may find the need fulfilled by somewhat older fellow pupils (Peller, 1956).

III-7. A pertinent explication of this point has been made by Allinsmith (1960), who cites the contribution of Mowrer (1950) in calling attention to the importance in personality of repression of conscience. Allinsmith goes on to say of Mowrer:

He implies that neurosis in our time is almost entirely a function of defense against guilt rather than defense against impulse. This is as one-sided a view as the position he attacks. Defense against guilt may well be a more prominent feature in current neuroses than it was in the neuroses treated by psychoanalysis at the turn of the century. But to suggest, as Mowrer does, that defense against impulse is not also a prominent feature in contemporary neuroses is to take a position we regard as untenable. Mowrer views psychoanalytic writers as being generally unaware of the significance of defense against guilt. Two authors who have written at length about the subject are Flugel (1945) and Fenichel (1945) (Allinsmith, 1960, p. 150).

III-8. It is a popular misconception that Freudian psychoanalysts seek knowledge of a person's entire history insofar as it can be reconstructed. They are interested, basically, only in those aspects of past events that exist in the present because they represent the "unfinished business" of growing up and still influence the patient in adverse ways.

III-9. This is a grossly oversimplified description of casework versus psychotherapy and ignores completely a number of the crucial complexities of both, e.g., coping with patient's resistances, transference, and counter-transference, the proper depth of any interpretation given, and so on. Admittedly, the two kinds of treatment are rarely so sharply differentiated in actual practice, nor in the minds of those writing about techniques of psychotherapy. Thus Wolberg (1954) distinguishes in addition to supportive therapy, "insight therapy with re-educative goals" and three categories of "insight therapy with reconstructive goals": Freudian psychoanalysis, non-Freudian psychoanalysis, and psychoanalytically-oriented psychotherapy. If we accept Wolberg's definitions, most casework as it is done today would fall in the last category.

III-10. For some illustrative material on the techniques of casework and psychotherapy with children, see Fraiberg's papers published by the Family Service Association of America, and see Anna Freud (1946).

III-11. A variety of methods can be used to treat children in groups, of course, in school as well as clinic settings. In addition to taking a therapeutic approach to an entire class, there may be special "project classes" or "play groups" for selected youngsters conducted by volunteer teachers or mental health workers. There are reports of improvement in school behavior and in the academic progress of pupils given these special experiences (for

example, Stark and Bentzen, 1958, and Schiffer, 1958), but there are also specific warnings sounded of difficulties encountered. If the goal is simply to provide a tension release for disturbed pupils, the permissive group is highly inappropriate for certain youngsters and may indeed lead to unfortunate consequences for the school as well as the young participants themselves. Even with care in selecting pupils for one small therapeutic group, for example, the workers had to disband their venture after a year. Problems of acting-out, transference, and behaviorial contagion led to the conclusion that for seriously disturbed children, schools were not the proper setting for group treatment (Falick, Rubenstein, and Levitt, 1955). Although working with children in groups can greatly improve diagnosis and serve as a valuable adjunct to casework treatment, if done with the proper care in the selection and management of cases it is no less time-consuming and costly than individual approaches (Pennock and Weyker, 1953).

IV-1. Until the issue of compulsory attendance (discussed in Chapter II) is reviewed by educators and by those citizens concerned about the schools, we are likely to have problems of the sort that arose in New York City when the decision had to be made whether to readmit to school disturbed or seriously troublesome pupils for whom there was no provision available other than regular classes. Unquestionably, most young people profit from the requirement of compulsory attendance, but difficulties are created when extreme interpretations of the principle are made. The legal and educational controversy that went on in the spring of 1958 in New York concerned the delinquency issue. The question was that of the extent to which schools have a caretaking as well as an educational function. Commissioner Allen's insistence that certain schools re-enroll a number of "troublemakers" when there were insufficient openings in special schools and other agencies has been debated from many angles (1958). The point that needs emphasis is this: ought regular public schools be required to accept students who do nothing but create confusion and impede the instruction of others who have come with a desire to learn? Commissioner Allen's decision was based upon the fact that there were no other agencies available at that time for these difficult students. Everyone recognizes that such wayward pupils do come usually from impoverished social conditions and, in many cases, their frustrations and hostilities are products of circumstances in which they have had far less chance in life and far more hardship than most, yet can regular schools afford to entertain a pupil population dedicated to destroying the very goals the school upholds? The desirability of making schooling available to all who demonstrate that they are profiting from it is not in question. Many will question, however, the concept that education should be carried out under conditions and in relation¹ to pupils who can jeopardize the whole educational undertaking.

The problem is even broader than the issues of mental health and maximization of learning. At this moment in our history, in some large cities the continued existence of the American public school as an effective democratic instrument may be at stake. Perhaps other social agencies, possibly paralleling the CCC work of the 1930's, could be created or existing ones expanded to give useful experience to troublesome youths who, for one reason or another, cannot take advantage of the opportunities schools offer.

IV-2. We further agree with Templeton (1958) that although Kandel has raised a crucial issue for our schools, he has not gone the next step and exemplified core subjects which, taught to all students, would provide a common experience for members of our democracy.

IV-3. We suggest that those concerned with the curriculum's construction consider carefully some of the suggestions of such educational philosophers as Ulich (1951) and Espy (1939) who have many valuable recommendations to make for maintaining the democratic atmosphere of the school, yet at the same time recognize the necessity for dealing with diversity of interest and skill. Although Ulich and Espy disagree with some of the extreme interpretations that have been made of the philosophy of John Dewey, they concur that the school must, in the best sense of the word, come out of, be part of, and contribute to the ideals of a democratic society. It is their plea that the validity of all honest work, intellectual or manual, be recognized by all members of a democratic society as contributing to the good of the body politic.

IV-4. The shortage of psychologists is well illustrated by the situation in Chicago (Mullen, 1959). If the city had the commonly recommended minimal proportion of one school psychologist for each 1,000 pupils, it would have 450 such workers. In 1957 the budget allowed for 66; in 1958, the figure was 90. The increase is laudable; the remaining shortage is, to say the least, substantial.

IV-5. In theory, adequately kept cumulative records can be of value not only to school mental health workers but also to teachers. For example, the anecdotal notations, if they describe a child's typical reactions in an unbiased fashion, can alert teachers to changes in behavior that may be significant. If Johnnie has been described by former teachers as liking to read everything he can find concerning rocks, coins, or hurricanes, and his present teacher notes that he wanders aimlessly about the library never getting interested in anything, some questions are in order. Are all the books too easy? Has she not simulated him to find new interests? Is there something major or minor troubling the child, so that this year he cannot concentrate as he seemed to in earlier years? All too often valuable observations are never recorded by the overworked teacher, or what is even worse, they may be carefully written down but then left to gather dust in the front

office file room. A useful description for teachers of the uses and misuses of cumulative records may be found in Fisher (1955).

IV-6. There is probably no area in mental health and education that reveals more clearly both past and future issues than that which relates to the proper function of mental health endeavors in college and university. The setting of higher education has provided an arena in which the mental health movement has sometimes collaborated and sometimes conflicted drastically with other aspects of the educational establishment.

Historically, it was not until the early twentieth century and especially after World War I that psychiatric medicine began to achieve professional recognition as an essential ingredient of both medical education and treatment. Once this recognition came psychiatrists were appointed to medical schools and thus came to be consulted by college physicians. In the early 1920's, both West Point and Yale followed the road of including mental hygiene in their programs.

Major Harry Kerns at West Point was added to the medical staff in order to investigate the large number of psychosomatic complaints of cadets. As might be predicted, once his presence was known he found that droves of young men descended upon him without physical symptoms but with a surplus of emotional problems. Several years later Yale University appointed Arthur H. Ruggles, a former consultant in psychiatry at Dartmouth, as lecturer in psychiatry at the School of Medicine and consultant to the University Health Department. Within a year a grant from the Commonwealth Fund brought into being a mental hygiene program with two full-time and two part-time resident psychiatrists as well as two psychiatric social workers. Some fifteen years later one of these men, Clements C. Fry, looked back at the program and wrote:

Student mental hygiene was from the beginning an integral part of a broad medical program. . . . This fact is important for many reasons: it showed that the work was properly regarded as a necessary part of the university's medical services to students, . . . (Fry and Rostow, 1942, Preface, xii).

While the programs at Yale and West Point had their genesis from the medical profession, two other pioneer programs in college mental health, those at Vassar and Dartmouth, had their beginnings in psychology. Influenced by the enthusiasm for testing which followed successful military use of aptitude tests, both colleges established personnel bureaus in the early twenties. These bureaus were intended to test, classify, and advise students. It was not long before the staff members had become aware of a high incidence of personality turbulence among students. Almost as important was the fact that college administrators tended to turn to these specialists in educational measurement for explanations when students went off the deep

end academically or socially. At Dartmouth this led to a situation in which the head of the Personnel Bureau became a sort of father confessor to students and faculty alike (Ruggles, 1925).

As mental health endeavors have developed in many colleges, they have usually reflected one of these two types of trend, either an expansion in medical terms of the services of a university health service or else a testing and counseling enterprise stemming partly from a desire of academic advisers and admissions officers for help in dealing with student problems.

In the light of these different paths of development, however, certain issues seem to have remained in the forefront from the beginning. One of the most central concerns the extent of the responsibility for student well-being that is assumed. If particular colleges are dealing with the problem of student mental health from a minimal point of view they can define a student as sick only when he no longer can cope with the world, when he is on the verge of hospitalization, suicide, violence, or academic or social catastrophe. If such a definition guides the program, they will pay little attention to minor maladjustments and lesser miseries of the human condition. Such programs were clearly delimited by Ruggles when he was at Yale:

It may be that later on, when we have perfected our technique for improving human efficiency, we shall be able to do something even for these so-called normal students—to assist them to a more efficient life—but we certainly have neither the personnel nor the time to undertake anything of the kind now (Ruggles, 1925, p. 263).

There was probably a particular kind of mental hygienist who worked in such a setting. He was clinically oriented and his case descriptions represented the desperate cases mentioned earlier (Kerns, 1923, 1925; Menninger, 1927; Riggs and Terhune, 1928; Groves, 1929). He probably chose the college community because of a taste for the intellectual milieu and because he found working with young and intelligent patients easier or more satisfying than struggling with recalcitrant problems of older adults.

Quite in contrast to what we have characterized as a "minimal" point of view is that of the psychiatrist or psychologist whose convictions make him strive to obtain what might be called a maximal standard of mental health. Eloquent spokesmen for this view were Stewart Paten (1920) and Frankwood Williams (1925, 1931). They conceived of mental health as an ideal toward which all should strive. The business of the college, like the business of every other human institution, is directly or indirectly to promote this absolute good, a sort of secular salvation. These people also advocated mental hygiene courses, departments, and programs. Some, viewing ignorance as the root of all evil, argued that a good mental

hygiene course would eliminate emotional disturbances in college by a process of personal revelation (Harrington, 1927).

The contrast between the minimal and maximal point of view should not be overemphasized. Those who seek universal improvement in human personality often agree that in practice it is most important to help the sickest people; and those concerned with the sick admit that ideally it is desirable to help everyone who could benefit. As reported by Riggs and Terhune (1928), a single program such as the one at Vassar could easily accommodate this whole spectrum of attitudes.

There is a danger that mental hygiene may become almost a faith and lead its followers to make exaggerated claims as to its value, . . . (Riggs and Terhune, 1928, p. 568).

These authors go on to say that their *proper* concern is with the 10 per cent of the college students who they estimate are sick, yet within the same institution President MacCracken (1925) had stated that the value of mental hygiene is that it saves the college from futile efforts to cope with academic and disciplinary problems by traditional means, and Dean Thompson (1927) of the same institution had indicated that every dean needs a psychiatrist to advise her as she goes about her business.

Another position might be that the mental health services in a college or university exist to facilitate academic learning. As such they are available to those young people who in the process of reaching maturity face emotional and personal dilemmas with which they need help. The goal of such a program is to salvage those who might, through emotional blocks or personal dilemmas, be unable to survive the college experience. Quite another point of view might be that even the best and most well functioning student may have his work facilitated by a deeper understanding of his personal processes, motivations, and life goals. The difference between the two processes implies a central issue—that of initiation. In the former program, the initiative comes from the student who finds himself in difficulty and who turns to the psychiatrist or psychologist to help him with problems beyond his control. In the latter case, however, enthusiasts from the university health service might infiltrate the campus in order to intervene in the social system of the institution and, potentially, in the lives of all students in order to make them “better.” At the present time, the controversies stemming from these different orientations are anything but resolved in college mental health programs.

Regardless of the question of initiation, it is clear that originally, most of the mental health programs, despite their dual origin, were instituted to help a student cope with the impact of college studies. As time has gone along, however, there has been more and more concern with trying to

help the student cope with the general impact of college life. This has been particularly intriguing from both the standpoint of clinical work and the standpoint of research since it gave an opportunity to work with a relatively normal population of young adults at a critical period in their lives.

Nonetheless, this shift in emphasis has caused on some campuses not a little discontent with those engaged in mental health. If the focus of study is upon college life itself, of necessity all departments, all areas, and all activities of students and faculty sooner or later come under scrutiny. While these endeavors are undertaken with the best intentions and with genuine desire to serve the institution either by research or through practical benefits, some recipients of the attention have responded with the following kinds of objections: A person, it is claimed, who is constantly exposed to a probing of his personal problems and developmental progress, may be denied one of the most important experiences of young adulthood—that is, the capacity to be alone, to face problems which the individual must learn to solve on his own, and to gain not only the sense of interdependence upon other people but equally important a sense of self and a sense of privacy. Essentially it is argued that the ability to be private, to be isolated, is a kind of necessary moratorium in learning to relate to other human beings. In situations where privacy is denied and where constant advising and constant counseling goes on in both personal and academic matters there may be an inability for the youngster to develop his own ego identity as contrasted with the many identifications he will make with those who are attempting to advise and counsel him. A rather outspoken reaction to a program of this kind was made in a commencement address at Sarah Lawrence when the president of the senior class made the following statement:

Our lives are one big family album; when we feed we're not hungry—we're oral. The ability to love is perceived as participation in some monstrous mythological event: the Oedipal Dilemma. . . . [Our generation] must rise above the limp predictions and limp expectations.

One of the constant problems in dealing with the field of mental health is what Jahoda (1958) has called the "value dilemma." Jahoda points out that dealing with the subject all too often unwittingly commits one to value assumptions about the most useful, productive kinds of human beings. Coincident with the mental health movement in the colleges and universities, and possibly as a consequence of it, questions have been asked in different institutions which essentially may be summed up in the phrase, "What is happening to the students?" Closely related to this question—since this begins to introduce evaluative rather than research findings—are statements about the degree to which students *should* "change" as a result of college experience. The so-called Jacob Report (1957) points out that

students at different colleges apparently do reveal different personality manifestations and that these tend not to change during the four years. The reaction to this report has been a general lament that "College doesn't seem to change people." There is a kind of undertone that unless a person changes his values, somehow the college experience has not been a success. Many of these laments are related to basic ideas of what is involved in psychological and personality development and the comments are restricted to the hope that after four years of college one will be a more effective adult without basically altered values. On the other hand, some statements seem to imply that the college should change a person into a particular kind of human being who will seek to improve his society. At the present time, just as the secondary schools are attempting to develop and make clear what their role is to be and how important personal maturity is compared to intellectual achievement, so, too, is there a reaction on the part of college personnel to ask some fundamental questions about what the purpose of the college experience is to be. The future of college mental health endeavors will be closely tied to the answers that are arrived at.

IV-7. One who foresees such a development is David V. Tiedeman of the Harvard Graduate School of Education.

V-1. Additional comments about the Bank Street program have been made in Chapter II.

V-2. The growing interest in teaching elementary psychology in secondary school has received general support from such organizations as the American Psychological Association. Matters pertaining to sex education, courtship and marriage, and child rearing are questioned in many quarters as to whether they are proper for school curriculum and also by certain religious groups as being beyond the proper responsibility of the school.

V-3. An authoritative review of characteristics of mental health has already been published as a monograph of the Joint Commission on Mental Illness and Health (Jahoda, 1958). We have selected aspects of particular relevance for schooling.

V-4. It is unfortunate that the kind of thinking developed by Witmer and Kotinsky (1955) in collaboration with Erik Erikson, Robert Merton, and others in relation to research on juvenile delinquency is not translated into working with the normal child. This monograph has many implications for pacing the task of the school in terms of the different problems the child may have at different stages.

VI-1. The name attached to a school does not necessarily reflect its program. For historical reasons some centers preserve the "day care" label although they have evolved into true nursery schools. The noun "preschool" is sometimes used synonymously with "nursery school." We avoid this usage

because of the ambiguity it fosters: the term "preschool child" may mean either a child younger than school age who does not yet attend any school or one who goes to a "preschool."

VI-2. Present-day nursery educators usually distinguish the functions of the teacher from the role of mother. Only in the case of certain therapeutic nurseries and in custodial settings would the roles blend markedly. Some writers, however, have seen in such a blending a panacea for society. Envisaging nursery schools as capable of making up to emotionally-deprived children for love their homes failed to provide them, Frank states:

The nursery school, in close and cooperative relationship with the home and parents, is the primary agency for mental hygiene. The opportunity in pre-school education to build wholesome, sane, cooperative, and mature personalities, and to determine the future of our culture, is unlimited. The discharge of that responsibility lies in helping the young child to meet the persistent life tasks and to fulfill his insistent needs. But the nursery school cannot do this alone. It must have collaboration from the kindergarten and the grade schools, and it must find some way of cooperating with the home and the family, despite the frequent blindness and resistance of the parents. If nursery-school teachers were to realize that they are like parents, with their personal peculiarities, their emotional resistance and susceptibilities, their ignorance and rigid convictions—which may be just as undesirable for the child as the home practices they deprecate—perhaps such a realization would make them more tolerant and more willing to seek a basis of collaboration in meeting the fundamental needs of the child. The family can and does provide the child with a place, a status, with "belongingness" and often much needed love and affection. Can the nursery school organize its procedures and prepare its teachers to meet these same needs and also those other educational needs which the family has difficulty in supplying?

The fundamental needs of the child are in truth the fundamental needs of society (Frank, 1938, p. 141).

VI-3. Seeley, Sim, and Loosely (1956, pp. 93-96) discuss some differences between typical private nursery schools and public nursery schools or kindergartens.

VII-1. The original ideas and rationale for this research were discussed informally by a group consisting of Francis Keppel, Dean of the Graduate School of Education, Harvard University; Judson T. Shaplin, Associate Dean of the Graduate School of Education, Harvard University; Dr. Wesley Allin-smith, Associate Director of the Laboratory of Human Development, Harvard University; Dr. Fillmore Sanford, Study Director of the Joint Commission on Mental Illness and Health; and Dr. George W. Goethals, Assistant Director of the Laboratory for Research in Instruction, Harvard University. These ideas were brought into focus later in association with W. Cody Wilson,

when the Graduate School of Education at Harvard began several projects in cooperation with selected school systems in the metropolitan Boston area. These projects were supported by the Fund for the Advancement of Education of the Ford Foundation and the Milton Fund of Harvard University, as well as by funds from the Joint Commission on Mental Illness and Health.

VIII-1. Throughout our research we have employed the terms *values*, *norms*, and *charter*. These all have been derived from the thinking of Malinowski; however, we have modified some of these terms from their original meanings, to give them greater utility in this investigation.

VIII-2. This hypothesis states more generally that the amount and kind of affect a particular situation generates is a function of the discrepancy between what an individual expects or personally believes and what he actually sees or finds in the situation. This particular version of this hypothesis derives from the thinking of Hebb (1949) and McClelland (1953). It was translated for this research in the school setting by Goethals (1958a, 1958b).

IX-1. Anne Roe's (1956, p. 151) classification was used to determine level of occupation.

IX-2. McGuire and White (1957, p. 29) report that their subjects "were drawn to represent four populations of school people: elementary, secondary, counselors, administrators. The 150 individuals included, of course, represent only one in every 370 persons employed in public education in Texas."

IX-3. The extent of consensus was calculated for each subsample and did not differ significantly from that of the sample as a whole.

IX-4. For convenience in exposition, the range of those items whose possible range exceeded 6 was transformed so that it approximated 6 and was, therefore, comparable to the other items.

IX-5. In a symmetrical distribution, 50 per cent of the cases would occur in the interval defined by the median plus and minus the quartile deviation. For example, if the quartile deviation is 1.0 and the median response to an item is midway between agree slightly and agree, then 50 per cent of the sample would have either agreed slightly or agreed with that item. A complete tabulation of the quartile deviations will be found in Appendix B.

IX-6. The extent of consensus was calculated for each subsample and did not differ significantly from that of the sample as a whole.

IX-7. A complete tabulation of the quartile deviations will be found in Appendix B.

IX-8. A complete tabulation of the quartile deviations will be found in Appendix B.

IX-9. The sign test (Mosteller and Bush, 1954, pp. 312-315) was applied here.

X-1. It was assumed for the purposes of this research that student responses to these teacher-centered items would be meaningful and valid. The answer to the degree of their validity probably rests with the Almighty. It is always dangerous to assume that a given set of items will have the same meaning to different groups. In this particular situation, however, because of the nature of the school and the pupil population, such teacher-oriented material we feel has a great deal of meaning for students.

X-2. Anne Roe's (1956, p. 151) classification was used to determine level of occupation.

X-3. A complete tabulation of the quartile deviations will be found in Appendix B.

X-4. Neither the form nor the content of the items in the area of role of the teacher's immediate superior was similar enough to warrant comparison with items on the teachers' questionnaire.

X-5. It should be pointed out that like many Ivy League liberal arts colleges, this college is part of a large university.

XI-1. The degree of negative affect was measured by a nine-item, Likert-type scale. The respondents were asked to indicate the extent to which they agreed or disagreed with a series of items which characterized the work situation as attractive or unattractive.

XI-2. The reader who may be interested in these matters is referred to two books by Neal Gross and his associates, *Who Runs Our Schools?* (1958) and *Explorations in Role Analysis* (1958). These are probably the best attempts to employ sophisticated research techniques to explore the area of role definition and conflict which may exist between education and the society within which it carries out its enterprise.

References

- Ackerly, S. S., Bernstein, Lotte, Erwin, E., and Noble, Helen, 1958. Extension of a child guidance clinic's services to the schools. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Adlerblum, Evelyn D., 1950. Beginning school guidance early. *Ment. Hyg.*, 34:600.
- Albee, G. W., 1959. *Mental Health Manpower Trends*. Basic Books, New York.
- Alexander, T., and Alexander, Marie, 1952. A study of personality and social status. *Child Develop.*, 23:207.
- Allen, J. E., Jr., 1958. (Commissioner of Education.) As reported in the *New York Times*, February and March.
- Allinsmith, W., 1960. The learning of moral standards. In D. R. Miller and G. E. Swanson (eds.), *Inner Conflict and Defense*. Holt, New York.
- and Goethals, G. W., 1956. Cultural factors in mental health: an anthropological perspective. *Rev. Educ. Research*, 26:429.
- Allport, G. W., 1945. Is intergroup education possible? *Harvard Educ. Rev.*, 15:83.
- Andrew, Gwen, and Middlewood, Esther L., 1953. The goals of mental health education commonly selected by a group of experts. *Ment. Hyg.*, 37:596.
- Asch, S. E., 1955. Opinions and social pressure. *Sci. Amer.*, 193:31.
- Barclay, Dorothy, 1959. Helping the hospitalized child. *N.Y. Times Magazine*, January 18, p. 49.
- Barker, R. G., 1942. Success and failure in the classroom. *Progressive Educ.*, 19:221.
- Baruch, Dorothy, 1952. *One Little Boy*. Julian Press, New York.
- Beilin, H., 1959. Teachers' and clinicians' attitudes toward the behavior problems of children: a reappraisal. *Child Develop.*, 30:9.
- Bennet, B., 1953. Establishing rapport. *Childhood Educ.*, 30:118.
- Berkson, I. B., 1943. *Education Faces the Future*. Harper, New York.
- Berman, L., 1954. The mental health of the educator. *Ment. Hyg.*, 38:422.

- Bernard, Viola, 1958. Teacher education in mental health from the point of view of the psychiatrist. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Bestor, A., 1953. *Educational Wastelands*. University of Illinois Press, Urbana.
- Bettelheim, B., 1943. Individual and mass behavior in extreme situations. *J. Abnorm. Soc. Psychol.*, 38:417.
- , 1950. *Love Is Not Enough*. Free Press, Glencoe, Ill.
- Biber, Barbara, 1955. Schooling as an influence in developing healthy personality. In Ruth Kotinsky and Helen L. Witmer (eds.), *Community Programs for Mental Health: Theory, Practice, Evaluation*. Harvard University Press, Cambridge, Mass.
- , 1956. Teacher education in mental health. Paper delivered at 33rd annual meeting, American Orthopsychiatric Association, March 17.
- Blos, P., 1953. Aspects of mental health in teaching and learning. *Ment. Hyg.*, 37:555.
- Bonney, M. E., and Nicholson, Ertie L., 1958. Comparative social adjustments of elementary school pupils with and without preschool training. *Child Develop.*, 29:125.
- Bordin, E. S., 1955. *Psychological Counseling*. Appleton-Century-Crofts, New York.
- Borrowman, M. T., 1956. *The Liberal and Technical in Teacher Education*. Bureau of Publications, Teachers College, Columbia University, New York.
- Bower, E. M., 1958. A process for early identification of emotionally disturbed children. *Bull. Calif. State Dept. Educ.*, 27:6.
- Brameld, T. A., 1957. *Cultural Foundations of Education: An Interdisciplinary Exploration*. Harper, New York.
- Brim, O. G. Jr., 1959. Some basic research problems in parent education with implications for the field of child development. Monographs of the Society for Research in Child Development, 24 (No. 5):51.
- , 1959^b. *Education for Child Rearing*. Russell Sage Foundation, New York.
- Brookover, W. B., with the collaboration of O. C. Smucker and J. F. Thaden, 1955. *A Sociology of Education*. American Book, New York.
- Bruner, J. S., 1959. Learning and thinking. *Harvard Educ. Rev.*, 29:184.
- Butler, J. M., 1948. On the role of directive and non-directive techniques in the counseling process. *Educ. & Psychol. Measurement*, 8:201.
- Buxbaum, Edith, 1949. *Your Child Makes Sense*. International Universities Press, New York.
- Cabot, H., Kahl, J. A., et al., 1953. *Human Relations: Concepts and Cases in Concrete Social Science*. 2 vols. Harvard University Press, Cambridge, Mass.
- Caswell, H. L., 1956. *How Firm a Foundation? An Appraisal of Threats to the Quality of Elementary Education*. Burton Lecture (1955). Harvard University Press, Cambridge, Mass.

- Chase, A. H., 1955. Moribus antiquis. *Phillips Bull.*, 59:November, p. 6 Phillips Academy, Andover, Mass.
- Conant, J. B., 1959. *The American High School Today: A First Report to Interested Citizens*. McGraw-Hill, New York.
- Cornell, Ethel L., and Armstrong, C. M., 1955. Forms of mental growth patterns revealed by re-analysis of the Harvard growth data. *Child Develop.*, 26:169.
- Cubberley, E. P., 1934. *Public Education in the United States: A Study and Interpretation of American Educational History* (revised). Houghton Mifflin, Boston.
- Davis, K., 1949. Mental hygiene and the class structure. In P. Mullahy (ed.), *A Study of Interpersonal Relations*. Hermitage Press, New York.
- Dawes, Lydie G., Leaving home for school (mimeographed).
- Dewey, J., 1956. *The Child and the Curriculum* and *The School and Society*. University of Chicago Press.
- Dickens, M., 1954. Speech education for personality development. *Bull. of Nat. Assoc. Secondary School Principals*, 38:199, 30.
- Domke, H. R., Buchmueller, A. D., Mensh, I. N. and Gildea, M. C. L., 1953. A research project to evaluate a community mental health program. *Interrelations between the social environment and psychiatric disorders*. Milbank Memorial Fund.
- Downing, Ruth, 1959. A cooperative project of an elementary school and a family agency. *Social Casework*, 40:499.
- Dracoulides, N. N., 1956. Pre-school education and mental health. *Understanding the Child*, 25:84.
- Durost, W. N., n.d. How to tell parents about standardized test results. *Test Service Notebook* No. 26, Division of Test Research and Service, Harcourt, New York.
- English, O. S., and Pearson, G. H. J., 1955. *Emotional Problems of Living* (revised). Norton, New York.
- Espy, H. G., 1939. *The Public Secondary School*. Houghton Mifflin, Boston.
- Falick, M. L., Levitt, M., Rubenstein, B., and Peters, Mildred, 1954. Some observations on the psychological education of teachers. *Ment. Hyg.*, 38:374.
- Falick, M. L., Rubenstein, B., and Levitt, M., 1955. A critical evaluation of the therapeutic use of a club in a school-based mental health program. *Ment. Hyg.*, 39:63.
- Faris, R. E. L., 1959. Dementia at the bottom rung. *Contemp. Psychol.*, 4:33.
- Farnsworth, D. L., 1955. Emotions and the curriculum. *Harvard Alumni Bull.*, 58:119.
- Fenichel, O., 1945. *The Psychoanalytic Theory of Neurosis*. Norton, New York.
- Fisher, Mildred L., 1955. The cumulative record as a tool. In *Guidance in the*

- Curriculum*. Yearbook, Association for Supervision and Curriculum Development, National Education Association.
- Flügel, J. C., 1945. *Man, Morals and Society*. International Universities Press, New York.
- Fraiberg, Selma, 1954. Counseling for the parents of the very young child. *Social Casework*, 35:47.
- , 1957. Professional responsibility in casework treatment of children. In Regensburg, Jeannette, and Fraiberg, Selma, *Direct Casework With Children*. Family Service Association of America, New York.
- , 1959. *The Magic Years*. Scribner, New York.
- , n. d. *Psychoanalytic Principles in Casework with Children*. Family Service Association of America, New York.
- Frank, L. K., 1938. The fundamental needs of the child. In W. A. Fullager, H. G. Lewis, and C. F. Cumbee (eds.), *Readings for Educational Psychology*. Crowell, New York.
- , 1955. Introductory remarks to a panel discussion on ideals and realities in modern education. Bank Street College of Education, New York.
- , 1958. The school as agent for cultural renewal. Burton Lecture on Elementary Education, Harvard Graduate School of Education, December 2.
- Freud, Anna, 1946. *The Psychoanalytical Treatment of Children*. Doubleday, New York.
- , 1949. Nursery school education: its uses and dangers. *Child Study*, 26:35.
- , 1952. The role of the teacher. *Harvard Educ. Rev.*, 22:229.
- Fry, C. C., and Rostow, E. G., 1942. *Mental Health in College*. Commonwealth Fund.
- Gardner, G. E., 1953. American child psychiatric clinics. *Annals Amer. Acad. Pol. and Social Sci.*, 286: 126.
- Goethals, G. W., 1958a. A framework for educational research. *Harvard Educ. Rev.*, 28:29.
- , 1958b. Request to the William F. Milton Fund, Harvard University, for financial support to continue work relating to development of a theoretical framework bearing upon teacher personnel research (mimeographed.)
- Goldin, G. J., 1955. Self-referral of rural elementary school children. *Understanding the Child*, 24:22.
- Goldman, Rose, 1954. Mental Hygiene looks at education. *J. Nat. Assoc. Deans of Women*, 17:119.
- , 1956. Factors influencing learning in the emotional climate of today's classroom. Paper delivered at the 33rd Annual Meeting, American Orthopsychiatric Association, March 17.

- Goodlad, J. I., and Anderson, R. H., 1959. *The Nongraded Elementary School*. Harcourt, New York.
- Gray, W. S., 1955. Summary of reading investigations, July 1, 1953 to June 30, 1954. *J. Educ. Research*, 48:401.
- , 1956. Summary of reading investigations, July 1, 1954 to June 30, 1955. *J. Educ. Research*, 49:401.
- Gray, Susan W., 1959. Psychologists for the public schools: a training program. *Amer. Psychol.*, 14:701.
- Green, S. L., and Rothenberg, A. B., 1953. *A Manual of First Aid for Mental Health*. Julian Press, New York.
- Grimes, J. W., and Allinsmith, W., 1961. Compulsivity, anxiety, and school achievement. *Merrill-Palmer Quart. Behavior and Development*, 7:247.
- Gross, N., 1958. *Who Runs Our Schools?* Wiley, New York.
- , Mason, W. S., and McEachern, A. W., 1958. *Explorations in Role Analysis: Studies of the School Superintendency Role*. Wiley, New York.
- Groves, E. R., 1929. Mental hygiene in the college and university. *Soc. Forces*, 8:37.
- Harrington, M. A., 1927. The problem of mental hygiene courses for the college student. *Ment. Hyg.*, 11:536.
- Havighurst, R. J., 1948. *Development Tasks and Education*. University of Chicago Press.
- Hay, L., 1953. The education of emotionally disturbed children, 3. A new school channel for helping the troubled child. *Amer. J. Orthopsychiat.*, 23:676.
- Hebb, D. O., 1949. *The Organization of Behavior: A Neuropsychological Theory*. Wiley, New York.
- Henry, N. B. (ed.), 1955. *Mental Health in Modern Education*. Yearbook of Nat. Society for Study of Education.
- Hertzman, J., and Mueller, Margaret, 1958. The adolescent in the school group. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Heyl, J. T., Holder, R., and Miller, L. C., 1956. A psychiatric program in a boys' school. Paper delivered at 33rd annual meeting, American Orthopsychiatric Association, March 15.
- Hollingshead, A. B., and Redlich, F. C., 1958. *Social Class and Mental Illness*. Wiley, New York.
- Isaacs, Susan, 1952. The nursery as a community. In J. Richman (ed.), *On the Bringing Up of Children*. Brunner, New York.
- Jacob, P. E., 1957. *Changing Values in College*. Harper, New York.
- Jahoda, Marie, 1958. *Current Concepts of Positive Mental Health*. Basic Books, New York.
- Jones, H. M., Keppel, F., and Ulich, R., 1954. On the conflict between the "liberal arts" and the "schools of education." *Amer. Assoc. of Arts &*

- Sciences, Comm. on Teaching Preparation. Amer. Council of Learned Societies, *Newsletter*, 5 (No. 2):17.
- Kandel, I. L., 1957. *American Education in the Twentieth Century*. Harvard University Press, Cambridge, Mass.
- Kasius, Cora (ed.), 1950. A comparison of diagnostic and functional case-work concepts. Family Service Association of America.
- Kearney, N. C., 1953. *Elementary School Objectives*. A report prepared for the Midcentury Committee on Outcome in Elementary Education. Russell Sage Foundation, New York.
- Keats, J., 1958. *Schools Without Scholars*. Houghton Mifflin, Boston.
- Keppel, F., 1956. Report of conference on the preparation of secondary school teachers. American Council on Education.
- Kerns, H. N., 1923. Cadet problems. *Ment. Hyg.*, 7:688.
- , 1925. Management of acute mental hygiene problems found among college men. *Ment. Hyg.*, 9:273.
- Kilpatrick, W. H., 1957. Changes in moral values. In L. J. Stiles (ed.), *The Teacher's Role in American Society*. Harper, New York.
- Klein, D. C., and Ross, Ann, 1958. Kindergarten entry: a study of role transition. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Kluckhohn, C., 1951. Student-teacher. In Margaret Hughes (ed.), *The People in Your Life*. Knopf, New York.
- Knight, R. P., 1954. A critique of the present status of the psychotherapies. In R. P. Knight (ed.), *Psychoanalytic Psychiatry and Psychology*. International Universities Press, New York.
- Kotinsky, Ruth, and Coleman, J. V., 1955. Mental health as an educational goal. *Teachers College Record*, 56:267.
- Kubie, L., 1955. The psychiatrist considers curriculum development. In A. P. Coladarci (ed.), *Educational Psychology: A Book of Readings*. Dryden, New York.
- Laserte, R. C., 1955. A one-day "empathy workshop." *Understanding the Child*, 24:25.
- Lieberman, M., 1956. *Education as a Profession*. Prentice-Hall, New York.
- Lindemann, Elizabeth, and Ross, Ann, 1955. A follow-up study of a predictive test of social adaptation in preschool children. In G. Caplan (ed.), *Emotional Problems of Early Childhood*. Basic Books, New York.
- Lindemann, E., Vaughan, W. T., and McGinnis, M., 1955. Preventive intervention in a four-year-old child whose father committed suicide. In G. Caplan (ed.), *Emotional Problems of Early Childhood*. Basic Books, New York.
- Lippitt, R., 1957. Diagnosing and helping the socially ineffective child. Paper read at the annual meetings of American Orthopsychiatric Association (mimeographed).

- and Gold, M. 1959. Classroom social structure as a mental health problem. *J. Soc. Issues*, 15:40.
- Liss, E., 1955. Motivations in learning. *The Psychoanalytic Study of the Child*, 10:100.
- Low, Barbara, 1928. *The Unconscious in Action, Its Influence on Education*. University of London Press.
- Lynd, A., 1950. *Quackery in the Public Schools*. Little, Brown, Boston.
- MacCracken, H. N., 1925. Mental Health in the college curriculum. *Ment. Hyg.*, 9:469.
- MacKinnon, A. R., 1957. An experimental investigation of children's early growth in awareness of the meanings of printed symbols. Unpublished doctoral dissertation, University of Edinburgh.
- Mahan, T., 1955. Human judgment: can the classroom improve it? *J. Educ. Research*, 49:161.
- Malinowski, B., 1944. *A Scientific Theory of Culture and Other Essays*. University of North Carolina Press.
- Margolin, R. J., and Williamson, A. C., 1957. Case conferences in education (unpublished manuscript).
- Marsh, E. J., 1952. When to call in a specialist. *Childhood Educ.*, 28:345.
- Martin, W. E., 1957. An armchair assessment of nursery education. Paper delivered at 1957 Biennial Conference. Nat. Assoc. for Nursery Education, October 10.
- McClelland, D. C., Atkinson, J. W., Clark, R. A., and Lowell, E. L., 1953. *The Achievement Motive*. Appleton-Century-Crofts, New York.
- McClusky, H. Y., 1949. Mental health in schools and colleges. *Rev. of Educ. Research*, 19:405.
- McGuire, C., and White, G. D., 1957. Social origins of teachers in Texas. In L. J. Stiles (ed.), *The Teacher's Role in American Society*. Harper, New York.
- McKeachie, W. J., 1958. Students, groups, and teaching methods. *Amer. Psychol.*, 13:580.
- Menninger, K. A., 1927. Adaptation difficulties in college students. *Ment. Hyg.*, 11:519.
- Merton, R. K., Reader, G. G., and Kendall, Patricia (eds.), 1957. *The Student-Physician*. Harvard University Press, Cambridge, Mass.
- Miller, D. R., and Swanson, G. E., 1958. *The Changing American Parent*. Wiley, New York.
- Miller, H. M., 1956. Family life education in schools and colleges with special reference to Tennessee. *J. Educ. Sociol.*, 30:173.
- Mosteller, F., and Bush, R. R., 1954. Selected quantitative techniques. In G. Lindzey (ed.), *Handbook of Social Psychology*, vol. 1. Addison-Wesley, Reading, Mass.
- Moustakas, C. E., 1956. *The Teacher and the Child*. McGraw-Hill, New York.

- Mok, P. P., 1959. Descriptive syndrome screening: an exploratory study of teacher identification of emotional disturbances of elementary school pupils. Unpublished doctoral dissertation, Harvard University.
- Mowrer, O. H., 1950. *Learning Theory and Personality Dynamics*. Ronald Press, New York.
- Mullen, Frances A., 1959. The school as a psychological laboratory. *Amer. Psychol.*, 14:53.
- Naegele, C. D., 1955. A mental health project in a Boston suburb. In B. D. Paul (ed.), *Health, Culture and Community*. Russel Sage Foundation, New York.
- Nieman Reports, 1956. The newspaper as a forum of school issues. Report of a panel discussion before the New England Society of Newspaper Editors, December 7.
- Ojemann, R., 1951. Promotion of mental health in the primary and secondary schools: an evaluation of four projects. Committee on preventive psychiatry. *Report No. 18*, January, Group for the Advancement of Psychiatry.
- , 1956. Changing attitudes in the classroom. *Children*, 3:130.
- , 1959. The human relations program in the State University of Iowa. In *Basic Approaches to Mental Health in the Schools*. American Personnel and Guidance Association.
- , Levitt, E. E., Lyle, W. H., and Whiteside, Maxine F., 1955. The effects of a "causal" teacher-training program and certain curricular changes on grade school children. *J. Experimental Educ.*, 24:95.
- Parsons, T., 1949. In P. Mullahy (ed.), *A Study of Interpersonal Relations*. Hermitage Press, New York.
- , 1957. Comments made in a seminar on education. Harvard University Summer School.
- Paton, S., 1920. The essentials of an education. *Ment. Hyg.*, 4:268.
- Paul, J. R., 1950. Preventive medicine. *Sci. Monthly*, 70:195.
- Pearson, G. H. J., 1954. *Psychoanalysis and the Education of the Child*. Norton, New York.
- , 1956. Some general considerations of the most effective help the psychiatrist can give to the teacher. Paper delivered at 33rd annual meeting, American Orthopsychiatric Association, March 17.
- Peller, Lili E., 1956. The school's role in promoting sublimation. *Psychoanalytic Study of the Child*, 11:437.
- Pennock, Mary E., and Weyker, Grace, 1953. Some developments in the integration of casework and group work in a child guidance clinic. *J. Psychiat. Soc. Work*, 22:75.
- Poucher, G. E., Sharpiro, D. S., and Phillips, Margaret, 1956. Providing orthopsychiatric services by contract with the city and rural public schools. Paper read at 33rd annual meeting, American Orthopsychiatric Association, March 16.

- Powers, E., and Witmer, Helen, 1951. *An Experiment in the Prevention of Delinquency*. Columbia University Press, New York.
- Prescott, D. A. (ed.), 1945. Helping teachers understand children. American Council on Education.
- , 1957. *The Child in the Educative Process*. McGraw-Hill, New York.
- Prosser, C. A., 1945. In *Vocational education in the years ahead*. *Vocat. Bull.* No. 234. U.S. Office of Education.
- Pusey, N. M., 1959. Quoted in the *New York Times*, March 22.
- Rankin, P. T., and Dorsey, J. M., 1953. The Detroit school mental health project. *Ment. Hyg.*, 37:228.
- Read, Katherine H., 1950. *The Nursery School*. Saunders, Philadelphia.
- Redl, F., 1955. What do children expect of teachers? In conference speeches, 1954. Bank Street College of Education, New York.
- , and Wattenberg, W. W., 1951. *Mental Hygiene in Teaching*. Harcourt, New York.
- Rennie, T. A. C., and Woodward, L. E., 1948. *Mental Health in Modern Society*. Commonwealth Fund.
- Richards, E. A. (ed.), 1951. *Proceedings of the Midcentury White House Conference on Children and Youth, 1950*. Health Publications Institute.
- Riesman, D., 1950. *The Lonely Crowd*. Yale University Press, New Haven, Conn.
- , 1954. Teachers amid changing expectations. *Harvard Educ. Rev.*, 24:106.
- , 1958. *Constraint and Variety in American Education*. Doubleday Anchor, Garden City, New York.
- Riggs, A. F., and Terhune, W. B., 1928. The mental health of college women. *Ment. Hyg.*, 12:559.
- Roe, Anne, 1956. *The Psychology of Occupations*. Wiley, New York.
- Rogers, C. R., 1951. *Client-Centered Therapy*. Houghton Mifflin, Boston.
- Rothman, Esther, and Berkowitz, Pearl, 1953. The language arts program as personality projection. *Understanding the Child*, 22:11.
- Rugg, H., 1947. *Foundations for American Education*. World Book, New York.
- Ruggles, A. H., 1925. College mental hygiene problems. *Ment. Hyg.*, 9:261.
- Ruskin, J., 1885. *Fors Clavigera*. Letters to the workmen and labourers of Great Britain. Vol. IV, Letter XCIV (Letter X, New Series). Alden, New York.
- Ryan, W. C., 1938. *Mental Health Through Education*. Commonwealth Fund.
- Sapirstein, M. R., and Soloff, Alis D., 1955. *Paradoxes of Everyday Life*. Random House, New York.
- Sarason, S. B., Davidson, K. S., Lighthall, F. F., Waite, R. R., and Rue-

- bush, B. K., 1960. *Anxiety in Elementary School Children*. Wiley, New York.
- Schachtel, E. G., 1947. On memory and childhood amnesia. *Psychiatry*, 10:1.
- Scheidlinger, S., 1952. Group factors in promoting school children's mental health. *Amer. J. Orthopsychiat.*, 22:394.
- Schiffer, M., 1958. The therapeutic group in the public elementary school. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Schoellkopf, Judith, 1959. The nursery school as a study center. Paper read at conference on nursery education, Sarah Lawrence College (mimeographed).
- Seeley, J. R., 1953. Social values, the mental health movement, and mental health. *Ann. Amer. Acad. Pol. Sci.*, 286:15.
- , 1954. The Forest Hill Village project. *Understanding the Child*, 23:104.
- , 1959. The Forest Hill Village human relations classes. In *Basic Approaches to Mental Health in the Schools*. Amer. Personnel & Guidance Assoc.
- , Sim, R. A., and Loosley, Elizabeth W., 1956. *Crestwood Heights*. Basic Books, New York.
- Segel, D., 1951. Frustration in adolescent youth; its development and implications for the school program. *Bull. No. 1*. U.S. Dept. Health, Education, and Welfare.
- Sherman, M., 1934. *Mental Hygiene and Education*. Longmans, Green, New York.
- Smith, M. B., 1959. Research strategies toward a conception of positive mental health. *Am. Psychologist*, 14:673.
- Snyder, W. U., 1947. Do teachers cause maladjustment? *J. Exceptional Children*, 14:40.
- Spindler, G. D., 1955. Education in a transforming American culture. *Harvard Educ. Rev.*, 25:145.
- Stark, W., and Bentzen, Frances, 1958. The integration of the emotionally disturbed child in the normal school setting. In M. Krugman (ed.), *Orthopsychiatry and the School*. American Orthopsychiatric Association.
- Stone, L. J., and Church, J., 1957. *Childhood and Adolescence*. Random House, New York.
- Stringer, Lorene A., 1959. Academic progress as an index of mental health. *J. Soc. Issues*. 15:16.
- Tallmadge, Lydia F., and Tallmadge, W. H., 1957. *Sing Trouble Away: Guidance Through Music for Primary Grades*. Teachers Library, New York.
- Taylor, H., 1952. The philosophical foundations of general education. In

- N. B. Henry (ed.), *The Fifty-First Yearbook, Part I, General Education*. National Society for the Study of Education.
- Templeton, R. G., 1958. Review of I. L. Kandel, *American Education in the Twentieth Century*. *Harvard Educ. Rev.*, 28:81.
- Thompson, C. Mildred, 1927. The value of mental hygiene in the college. *Ment. Hyg.*, 11:225.
- Thompson, G. G., 1952. *Child Psychology: Growth Trends in Psychological Adjustment*. Houghton Mifflin, Boston.
- Time Magazine*, October 12, 1959, p. 59.
- Trow, W. C., Zander, A. E., Morse, W. C., and Jenkins, D. H., 1950. Psychology of group behavior: the class as a group. *J. Educ. Psychol.*, 41:322. Reprinted in A. P. Coladarci (ed.), 1955. *Educational Psychology: A Book of Readings*. Dryden, New York.
- Ulich, R., 1951. *Crisis and Hope in American Education*. Beacon Press, Boston.
- U.S. Dept. Health, Education, and Welfare, 1953. Mental health implications in civilian emergencies. Public Health Service Publication No. 310.
- Van Til, W., 1953. Research affecting education. In *Forces Affecting American Education*. Yearbook of Association for Supervision and Curriculum Development. National Education Association.
- Vaughan, W. T., Jr., 1955. Mental health for school children. *Children*, 2:203.
- Waldfogel, S., Hahn, Pauline B., and Landy, E., 1955. School phobia: causes and management. *School Counselor*, 3:19.
- Weinreb, J., 1953. Report of an experience in the application of dynamic psychiatry in education. *Ment. Hyg.*, 37:283.
- Weisskopf, Edith A., 1951. Intellectual malfunctioning and personality. *J. Abn. Soc. Psychol.*, 46:410.
- Wickman, E. K., 1928. *Children's Behavior and Teachers' Attitudes*. Commonwealth Fund, New York.
- Williams, F. E., 1925. Mental hygiene and the college student. *Ment. Hyg.*, 9:225.
- , 1931. Mental hygiene and the college. *Ment. Hyg.*, 15:532.
- Witmer, Helen L., and Kotinsky, Ruth (eds.), 1952. *Personality in the Making: The Fact-Finding Report of the Midcentury White House Conference on Children and Youth*. Harper, New York.
- , and ———, 1955. With E. Erikson, R. Merton, et al. *New Perspectives for Research on Juvenile Delinquency*. U.S. Dept. of Health, Education, and Welfare.
- Wittenberg, R. M., 1944. Rethinking the clinic function in a public school setting. *Am. J. Orthopsychiat.*, 14:722.
- Wolberg, L. R., 1954. *The Technique of Psychotherapy*. Grune & Stratton, New York.

- Woodring, P., 1957. *A Fourth of a Nation*. McGraw-Hill, New York.
- Wright, H. F., Baker, R. G., Nall, J., and Schoggen, P., 1951. Toward a psychological ecology of the classroom. *J. Educ. Research*, 45:187.
- Young, R. J., 1953. Life adjustment education after five years. *Bull. Nat. Assoc. Secondary School Principals*, 37:64.
- Zander, A. F., Cohen, A. R., and Stotland, E., 1957. *Role Relations in the Mental Health Professions*. University of Michigan Institute for Social Research, Ann Arbor, Michigan.

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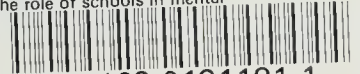
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