

The Journal of the

CSPCC

Canadian Society for the Prevention of Cruelty to Children

The Journal of the Canadian Society for the Prevention of Cruelty to Children

Volume 1 Number 2 Spring 1978

C.S.P.C.C. CREDO

Recognizing that the capacity to give and receive trust, affection and empathy is fundamental to being human

Knowing that all of us suffer the consequences when children are raised in a way that makes them affectionless, prejudiced and violent, and,

Realizing that for the first time in History we have definite knowledge that these qualities are determined by the way a child is cared for in the very early years,

We Believe That:

- I. The necessity that every new human being develop the capacity for trust, affection and empathy dictates that potential parents re-order their priorities with this in mind.
- II. Most parents are willing and able to provide their child with the necessary loving empathic care, given support from others, appropriate understanding of the task and the conviction of its absolute importance.
- III. It is unutterably cruel to permanently main a human being by failing to provide this quality of care during the most formative three years of life.

There is an Urgency Therefore To:

- I. Re-evaluate all our institutions, traditions and beliefs from this perspective.
- II. Oppose and weaken all forces which undermine the desire or ability of parents to successfully carry out a task which ultimately affects us all.
- III. Support and strengthen all aspects of family and community life which assist parents to meet their obligation to each new member of the human race.

THE C.S.P.C.C. 'WIN-A-MILLION' CREDO CONTEST

What is needed now is to translate all the ideas contained in this CREDO into language that will stir the soul, words and phrases and sentences that leap out at you, clear and compelling — a Desiderata, a Declaration of Independence.

We need a succint statement, so understandable that a grade school student will not be puzzled by the meaning — so captivating, so poetic, that once begun, it must be read to the end — language that speaks not just in resonating tones to the believer, but stirs or startles the sceptic to question and consider.

A modest challenge!

First prize?

Knowledge that you may well have done more in hours or days than most of us can do in a lifetime for the million children of tomorrow.

E.T. Barker M.D. D. Psych C.R.C.P. (C)

Annual Membership \$10.00 Life Membership \$100.00 (includes quarterly Journal) Please send your cheque to: CSPCC, Box 700, Midland, Ont. L4R 4P4 Official Receipt for Income Tax purposes will be mailed for Membership Fees and larger donations.

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About the Cover

We have had a great many positive comments with regard to the appropriatness of this little fellow's picture as a symbol of the C.S.P.C.C.

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About the Sketches

Our thanks to Maureen Buchanan for the sensitive illustrations throughout this issue. Maureen has just finished High School and has yet to decide on a career.



Letters

Dear Dr. Barker:

Congratulations on getting it off the ground. Volume 1, Number 1 of the Journal looks promising in spite of its (purely technical) faults. I expect that response will be more than adequate to ensure continuing.

Enclosed is a cheque for Membership. Please understand that, for the past week, I've been struggling with the question of whether to become a member or arrange for a vasectomy.

The task you have selected seems difficult. Who is your audience? Are you just beginning to discover that?

Will you ever get out of Oak Ridge, perhaps injecting no more than occasional mention of those end products into the Journal? Or will you find yourself with a list of subscribers covering only two categories: casehardened professionals so removed from actualities that multiple rape / murders can't even raise their eyebrows, and, on the other hand, those who also subscribe to National Enquirer, Midnight, The Daily Scandal, etc.

Will articles like "Food for Thought ... " (pg. 7) prove too heavy for light diets or too lengthy? Are you expecting to encounter a shortage of writers who could contribute original material? Even a quarterly, I expect, should be more "newsy" - i.e. concerned with what is current. Perhaps subsequent issues will bring dialogue to your pages; you may be condemned to a respectable scholarly niche unless that happens.

I can understand why you're doing what you're doing. I am not an optimist, though I will support your optimism.

The problem is subtle and its roots well hidden (I say this not so much in support of your optimism as in explanation of my pessimism.) Physical abuse of children still continues, unchecked by massive expenditure in government programs - and if this more gross brutalizing can't be stopped ...

But a man driven is a man driven - I can't change your mind, so I'll wish you,

Good Luck,

Bob Emond Slave Lake, Alberta

Dear Dr. Barker:

You don't know me, and I have never been a prison inmate but I was struck by your comments in yesterday's Toronto Star regarding the breakdown of the family and the refusal of many parents to care for their children early in their lives.

It's been my growing belief that with the proliferation of pre-school and nursery centres, day-care centres and the like, we are already in the process of turning out a generation who in the next couple of decades will erupt on society with a violence that will make the Hippie generation, with its riots and drugs, seem like the serenity of the Edwardian era.

Letters

It's been said that it's a wise child that knows its father, but I believe that if these "baby garages" keep spreading, it will take an even wiser child to pick out even its own mother from the confusing crowd of indifferent adults in whose hands it will have spent its most formative years. I say "indifferent", for with the best will in the world no substitute can give real maternal care to twenty or thirty tots simultaneously and it is moreover likely that the substitutes themselves will be continually changing, totally bewildering the child. There are reports that this is already happening in Israel's kittubz.

Looking at the animal world, we see that with few exceptions either one or both parents remain with the young until they are old enough to fend for themselves, or there is a pack or herd with which the young can continually identify and with whom care of the young is the mutual concern of all.

Not only is the human animal far more complex, but it must cope with a far more complex existence than any animal. I find it impossible to see how an infant deprived of the care, stability and example it must have, can avoid growing up "lost" and hence probably anti-social in adulthood. What the child has never known it can hardly be expected to imitate and reproduce.

But what natural example and experience teach, seems to be ignored by the Women's Liberation Movement and politicians too vote-hungry and weak-kneed to resist the incessant screech for more places to dump children, even though as George Gilder pointed out in his book, "Sexual Suicide", Women's Liberation essentially means that the wealthier women pass off their duties as wives and mothers onto poorer women in a kind of economic slavery. The poorer women press relatives into caring for their children, and so on down the line, with the children always being the last thing considered.

I wonder how the Libbers explain the phenomenon of adopted children who upon reaching maturity spend years trying to track down the real parents they never knew? The existence of organizations across North America for exactly this purpose indicates to me, as a layman, that there must be an imperative urge in most people to know their true identity, and I cite the enormous impact of Alex Haley's book, "`Roots", has had on the colored community in the United States. I am also prepared to wager that many of the inmates you see at Penetang passed through a succession of foster homes in their early years.

Somebody, I think, has got to speak up now, so loudly and sharply against the potential and actual destruction being inflicted on children that the politicians will be forced to listen. And act. Otherwise, under a kind of Gresham's Law, we will have wave after wave of maladjusted people driving out what's left of family life today and they will produce and reproduce themselves in their own pathetic image.

I don't think a stable society is possible if even a substantial minority of such people are created and given the added push of the economic depression the economists have told us young people must face for anywhere up to the next fifteen years, it seems ruin and chaos such as Europe faced in the immediate postwar years after 1945 will become a permanent fact of life. No prisons, no mental institutions, not even the Armed Forces could cope with such a horde of social nomads as we are today deliberately but insanely creating. God knows, with the divorce rate climbing, abortions and the Pill having little or no discernible effect on unwanted pregnancy, and the growth in juvenile delinquency, we are already in enough trouble. But again I predict it's nothing to what we'll face by the year 2000. If we don't act now to curb at least those factors we can control.

Sorry to have gone on at such length, Dr. Barker, but it seems every day's newspaper brings more evidence of that's where we're heading. I am glad you recognize the problem.

Yours truly, H.W. Somerville Toronto, Ontario

Letters

Dear Sir:

My husband, Brian and I have two daughters aged eleven and seven years. When they were smaller, at times there would be a situation for which I could find no answer within myself. These inevitably were the days when I would want to scream at them in frustration or to spank them and in fact sometimes did. But , I realized a curious thing. For me, it was not effective to lash out at my children - verbally or physically - it filled me with guilt and the problems were never solved by using those methods.

Only by obtaining books on child behaviour to learn what was considered normal and abnormal, and to deal with my anger and that of my children, in a constructive way, could I begin to help them and myself.

I think that most parents are concerned for the welfare of their children and want the very best home environment for them.

But , I also think that there are many factors that aggravate and work against the reality of effective parenting. One of these factors is the case of the family uprooted from hometown security with its friends and relatives near by to lend support, to a strange, town, where it may take many years to establish warm lasting ties again.

I am personally grateful to the physicians who have written helpful books for mothers such as Dr. Spock, Ginott and Berne to name a few, when there was nowhere to turn for advice.

Dr. Barker suggests introducing programs on parenting to the primary grades. I, for one, heartily applaud the idea.

Sincerely, M. Elizabeth Tarr Barrie, Ontario



Dear Dr. Barker:

I have recently been reading a book called "Exploring The Crack in the Cosmic Egg" by J.C. Pearce. He says (Chapter 7) "Most `training' of children depends on a wilful, specific employment of anxiety inducement" which he calls "Guilting", and although I have a lot of trouble understanding exactly what he means, I think he's really on to something.

I am writing to you because he says in the same chapter that;

"The psychologically battered child is observable only in the irrational behaviour of each next generation", something which the C.S.P.C.C. seems most concerned about. I d like to see something about 'Guilting' in the next issue of the Journal.

Yours very truly, Michael Sullivan Hillsdale, Ontario



Rev. Al Farthing

A favourite game in our home is "Social Security", in which the players draw cards requiring comments, statements and interpretations from the players. During a recent game my eight year old drew this card: "Children should be allowed to spank their parents" - Do you agree or disagree? Why? Both the eight year old and his ten year old brother expressed their agreement with great whoops of delight! Obviously they would both get much delight laying a spanking on Mom & Dad!

How many parents would agree that children should be allowed to reverse the spanking procedure? Not too many of us I would suspect, and yet we seldom stop to question the "right of parents to spank their children"! Is it not time that we began to question that parental right? I think it is.

Let me confess with regret, that I have at numerous points in my parenting career resorted to a slap as a means of discipline. Sometimes that slap has been much harder than I intended it to be, and in a rush of shame I have wondered if physical harm had been done.

As I reflect on this "means of discipline", I still feel shame and a deep sense of pain. An inner sense tells me that I have no "right" to physically or

even verbally, strike the two little people that I love the most - just because I am their father. (Father = "Bigger than child"=right to strike?) This "cultural logic" must now be questioned.

I want to declare that I have no "right" to lay angry hands on my children. Spanking and slapping is an expression of my own frustration and lack of imagination - not to mention patience.

A while later in that same game, my eight year old drew another card reading: "Parents are right in spanking their children to control them." Agree or disagree - Why? This time his response was:

"No way - cause then they would spank their kids, and those kids would spank their kids - bad education!"

I can't question my son's logic at this point. As with so much of our child raising, we have perpetuated a style of discipline that has been handed down to us from ages past. This is one inheritance from the past that our children could well do without!

If I were to strike my fully grown neighbour just because he made me angry, I would be in serious trouble. Yet we assume the "right to strike" little children who are less able to defend themselves than our average neighbour! I believe that it is time for us to question this assumption. Surely our children should have at least as many "rights" as our neighbours!



No job is more important than raising a child in the first three years of life

excerpt from Burton L.White's book
`The First Three Years of Life'

I have devoted my whole professional career to pursuing the question of how competent people get that way. On the basis of years of research, I am totally convinced that the first priority with respect to helping each child to reach his maximum level of competence is to do the best possible job in structuring his experience and opportunities during the first three years of life. Now, if I am totally convinced of that concept then it becomes painfully obvious that to me, at least, any other kind of job, be it formal or informal, working as an engineer somewhere, working as the president of a bank, working as a career professional in designing, or in the arts, cannot really compete (in humanistic terms) with the job of helping a child make the most of his potential for a rich life.

Burton White

Burton L. White is both Project Director and Principal Investigator for Pre-School Project of Harvard Graduate University's School Education. He is the author of two major textbooks in the field of early childhood development and has written innumerable scholarly papers and contributions to symposia. His work has been the subject of many magazine articles and eight TV documentary films. White lives in West Newton, Massachusetts, with his wife Jacqueline and their four children.

THE FIRST THREE YEARS OF LIFE is nothing less than a detailed guide to the intellectual and emotional development of the very young child (as one prepublication reader put it, `a Dr. Spock of the mind'). Dr. White divides the first thirty-six months into seven successive developmental phases, paying special attention to the critical Fifth and Sixth Phases (8-14 months and 14-24 months. respectively). For each phase he provides both comprehensive а description ofthe characteristic physical, emotional and mental developments of which parents must be aware and a detailed list of instructions concerning childrearing practices, parental strategies, and even toys and equipment.

The implications of Dr. White's researches are far-reaching. Although of primary benefit to parents, they are bound to give many child psychiatrists

and early childhood educators (to name only two categories of concerned professionals) much food for thought. But above all, the significance of THE FIRST THREE YEARS OF LIFE lies in its promise of the dawn of a new era of childhood - a time of happier, brighter, higher achieving children.

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Spacing Children

excerpt from Burton L. White's book `The First Three Years of Life'

Over the last three or four years I have become especially interested in and concerned with the topic of spacing children. On the basis of recent, extensive work with young families, I have come to certain conclusions.

Let me begin by repeating the advice that I have given so frequently throughout this book. Try not to have your children closer than three years apart. In earlier chapters we discussed the dramatic difference siblings or their absence make in the life of the infant. We have found over and over again that a first child has a particular kind of family environment, which differs radically from that of a second child with a sibling less than three years older than he, and differs yet again (although not as much) from that of a child with one or more siblings more than three years older. Let us review these three alternative situations.

Situation of a first (only) child under three years of age

The first child of less than three years of age is surrounded in his day-to-day activities by an environment that is predominantly adult. predominantly adult because it is a rare child, even if he is a first child, who has no exposure whatsoever to children his own age or slightly older children. There are, after all, visitors to the home. There are related family members. The child does move out of the home at times. accompanying his parents on shopping trips and other visits, perhaps to the beach or the playground. But certainly for well over ninety percent of his waking experience the infant who is a first child has a social environment consisting predominantly of his nuclear family. (I am setting aside for the moment the infant who is in day care or some other special arrangement.)

A first child living as he does is very likely to be treated extraordinarily well in most of his social interchanges. Since the figure he interacts with most commonly is his own mother, he is very likely to be surrounded by love, support, and encouragement, particularly if he is under fifteen or sixteen months of age. Of course he will also be exposed to occasional disciplinary action, to the setting of limits, and to an occasional cross word. But by and large he lives in a benign, warm, supportive social environment.

Another significant factor in the life of a first child is tied in with the fact that he lives in an environment where the models are adults. The child spends a good deal of time watching adults in operation, particularly his mother. As she goes about her tasks, she provides a model of a wide variety of adult behaviors. We do not know how much a child learns from this exposure, but we do know he spends a great deal of time closely observing maternal behavior.

Another important factor in the development of a first child is that when there is interaction between mother and child involving language, the language that the child hears is adult language.

Hence he will profit from a variety, range, and richness of ideas, words, and grammatical structures. This can have profound consequences in terms of daily experience.

Situation of a nine-month-old with a twenty-one-month-old sibling

Move now to the child at the other extreme, the infant who is nine months of age and has a sibling one year older. The day-to-day environment of such an infant



will be dramatically different from the previously described situation of a firstborn child. First of all, in terms of the quality of the social environment, the twenty-one-month-old child inevitably resent and dislike the ninemonth-old baby at times. What this means concretely is that he will occasionally act toward the nine-month-old in a hostile and aggressive fashion. The baby will be exposed to a quality of behavior on the part of the twenty-onemonth-old that has virtually no parallel in the experience of a firstborn child. Let

me enlarge on this point. We have seen twenty-one-month-olds striking their nine-month-old sibling, throwing objects picking them up and them, deliberately dropping them, or pushing them about. We have seen repeated snatching of toys, food, and other materials from the nine-month-old. Think for a minute about what these experiences mean to an infant. maintain that anger, even hatred, from a two-year-old toward his younger sibling is normal. This does not mean that such ugliness is not counterbalanced at times by genuinely pleasant interchanges between the two. It does not mean that in every case closely spaced children behave this way. What it does mean is that such behavior is the rule rather than the exception.

It is difficult to believe that exposure to hostile behavior does not affect the shaping of a nine-month-old. Indeed, as we have watched these situations evolve,



we have found that the social behaviors and attitudes of the nine-month-old toward the twenty-one-month-old, toward his mother, and toward other children begin to resemble those of his sibling toward him. What seems to happen is that once the child of nine months learns how to cope with abuses, he begins to adopt some of the behaviors himself. This kind of antisocial behavior tends to emerge toward the middle of the second year of life.

There are those who say that all of these negative factors are counterbalanced by the fact that closely spaced children can be companions for each other, both at an early age and as they get older. You may, in fact, be fortunate and pay a relatively small price for such potential companionship. I find it hard to see, however, how an abusive early social experience can be helpful to a nine-month-old developing human, and it seems relatively easy to see how it can be harmful.

Situation of a nine-month-old with a sibling more than three years older

In this case, we are dealing with a forty-five-month-old sibling at the very least, a child who is nearly four years of age. As pointed out in earlier sections of this book devoted to the development of intelligence and to emotional control, what we are talking about here is a rather advanced human being. Not only is the four-year-old much more able than a younger child to cope with emotions of resentment that emerge when he has to share his parents with a newcomer, but in addition, he has spent at least a year in developing interests outside of the home. He is well on his way with respect to peer interest and general outside-the-home activities. The cost to him of displacement within the home is considerably less than the cost to the twentyone-month-old whose whole life still revolves around the home situation and the primary caretaker. For the fouryear-old, the problem posed by an infant sibling is smaller and his capacity to deal with the problem is greater.

In conclusion, it is very difficult on both young children when they are spaced closely. The closer the spacing the greater the difficulty. Correspondingly, the wider the gap the more delightful the experience. The five-or six-year-old is much more inclined to genuinely enjoy the new baby. Bear in mind that grief or delight between young children plays a large role in determining how much pleasure a mother gets each day. In turn, how happy or distressed a mother is plays a large role in determining how rewarding a marriage will be. again, take my advice and space your children.

Senate Subcommittee on Childhood

Experiences as Causes of Criminal Behaviour

On May 14, 1975 the Honorable Fred A. McGrand proposed a special Senate Subcommittee to inquire into and report upon crime and violence in contemporary Canadian society.'

Dec. 18, 1975 the Senate voted that the Standing Senate Committee on Health, Welfare and Science be instructed to look into and report upon the feasibility of a Senate Committee's inquiring into and reporting upon crime and violence in contemporary Canadian society and that if the Committee decides that such a study is feasible and warranted, it be further instructed to set down clearly how, by whom, and under what precise terms of reference such a study should be undertaken.

On April 28, 1977, the Standing Senate Committee on Health, Welfare and Science established a Subcommittee to be called the Subcommittee on Childhood Experiences as Causes of Criminal Behaviour. This Subcommittee was empowered to 'inquire into and report upon such experiences in prenatal life and early childhood as may cause personality disorders or criminal behaviour in later life and to consider and recommend such remedial and preventative measures relating thereto as may be reasonably expected to lead to a reduction in the incidence of crime and violence in society'.

Since that time the Subcommittee has been hearing testimony from a wide range of witnesses, and the complete transcript of their evidence is published and available from Printing and Publishing, Supply and Services Canada, Hull, Quebec, K1A 0S9.

What follows are brief extracts from the testimony of a few of these witnesses.

Ms. Mary Van Stolk, President, The Tree Foundation of Canada, 3508 Durocher. Montreal, Quebec.

'Because there is no scientific evidence to support the Judeo-Christian concept that children are born bad, victims of original sin, imps of Satan or evil, the inborn tendency-to-aggression theory, as put forth either in religious or quasiscientific form by Lorenz, Ardrey, et cetera, has not been able to withstand the last ten years of interdisciplinary findings in anthropology, psychology and neuropsychology.

A new field theory on aggression is emerging. Quite simply stated, it would appear that violence is man-made. Where culture stands between the child and its biological needs, a high degree of illness, mental impairment, aggression and crime result.

Babies born with are not predisposition to violence or crime. They will, however, soon adopt all kinds of ways and means of surviving and coping in a violent and destructive environment. As soon as capable, they will push, shove, hit, poke, attack and kill. They will also lie and steal. 'Monkey see, monkey do' is a firm principle. The human child learns from example. If the home does not expose the child to a violent atmosphere, then the schoolground and television do. The child in the home and school sees the Fathers. mothers, sisters. brothers, aunts, uncles, cousins, teachers and babysitters impose a lawlessness of multiple dimensions upon children. In observing these crimes the child notes, not without bitterness, that there are few laws in society and no laws in the family to protect the child.'

Dr. E.T. Barker, Consultant in Psychiatry, Mental Health Centre, Penetanguishene, Ont.

'It is not uncommon for many of the patients I have been involved with in court work, usually as a result of murder, to have come from 'nice homes' and to have never had any previous problems. They have been boy scouts, and so on, and the community has been shocked that they should have committed such a crime. To me, the explanation for that is that in the case of the middle class, or better, 'nice home,' one is not looking at the emotional atmosphere of that home with sufficiently high magnification, and when you do, you see that the quality of the relationship between the parents and that child is decidedly deficient in the factors we are speaking of. This leads me to say again that we need better

measures and better indices of the emotional quality of life for a young child. We need better means of measuring it. It does not follow that the family who is outstanding in the community, has not been in obvious difficulty and is (financially) successful, has necessarily provided adequately, from the emotional point of view, for their children.'

Dr. David R. Offord, Director of Research and Education, Children's Psychiatric Services, Royal Ottawa Hospital, and Professor of Psychiatry, Faculty of Medicine, University of Ottawa.

If you take a group of children who have been raised in institutions where bonding has not occurred in the first three years of life, where the child has never had a relationship with one adult where the child's care was paramount in that adult's life, you will find that these children have a tendency to have the following characteristics: they tend to be superficial; they do not trust anyone; they find it difficult to give or receive affection. Maybe you have met some of these people. They sort of put you on, but you get the impression that there is no feeling under the surface. They engage in antisocial acts off and on, sometimes Where bonding has not persistently. occurred early on, it is difficult, or maybe impossible, to do anything over the lifespan of that individual to make up for it.

So, if you want to talk about the critical or sensitive period in human beings, it would seem as though the bonding has to take form, has to take shape, certainly by the age of three. If it has not occurred by then, the children do very poorly. They tend to be not so much loners in the sense that you spoke of, Mr. Chairman, but superficially extroverts-charming, but with no depth.

There is a group of children such as you speak of, and they may arise in particular because of the same difficulties in bonding. They are a group of children who are extremely withdrawn. I agree with you that it is not merely a matter of being shy and sensitive, pathologically withdrawn. That is why I say that these withdrawn children may have the worst prognosis. They are It may have extremely withdrawn. resulted from a disorder in bonding, or it



may be a defect in the child itself, or it may be that the family atmosphere is such that the child cannot make up for any of the deficiencies that occurred in bonding earlier on.

.....

Dr. Offord: One of the firm findings in 'delinquent literature' for boys is that they are more likely to come from large families. I did not present the data, but we have statistics showing that that is so in Canada.

Senator McElman: You mean the child feels rejected?

Dr. Offord: That is right, because in the big family there is less to go around.

The Chairman: You say it is more common in the big families.

Dr. Offord: It is a consistent finding in Great Britain and in Canada that large families are more likely to produce delinquents than small families.

Dr. Donna K. Kontos, Consultant Psychologist to Viking Houses (group homes for adolescents) and Browndale, Toronto, Ontario.

I would like to thank the chairman and members of the committee for inviting me to present some of the views and empirical findings on the subject of bonding, which has also come to be called `attachment.' I thought it would be useful to present first a brief summary of one of the leading theories of attachment as postulated by John Bowlby, Mary Ainsworth, and others.

Ainsworth, a leading theoretician and researcher in the field, draws a number

of inferences for practitioners working with children and mothers. They are:

1. Interaction with a mother figure, with resulting attachment, is essential for healthy development.



- 2. Although there is a `sensitive period' for the development of infant-mother attachment, under appropriate conditions an attachment may develop beyond this phase.
- 3. There is at present no known substitute for a family environment for child rearing.
- 4. Major prolonged maternal separations cause distress to the child.
- 5. Upon reunion after a major separation, attachment behaviour is likely to be heightened.
- 6. Minor, every-day separations may also produce effects.
- 7. Exploratory behaviour is dependent upon a secure infant-mother attachment.
- 8. Attachments are formed to more than one person.
- 9. Fostering attachment behaviour does not spoil a child.
- 10. A highly desirable maternal trait is sensitivity to an infant's signals.
- 11. There is a need for a new kind of child-development counsellor.

Dr. J.D. Atcheson, Senior Psychiatrist in Charge of Forensic Outpatient Service, Clarke Institute of Psychiatry, Toronto,

Ontario, and Professor, Department of Psychiatry, University of Toronto.

It would not be within the scope of my presentation and time to define this work of the Gluecks beyond stating it is demonstrated, by one of the most carefully controlled comparative studies of the children the fact that juvenile delinquency could be predicted. There are many social factors which could be scored by careful examination, such as the nature of the discipline of a boy by his father, the supervision of the child by a mother, the affection of the father, the affection of the mother and the cohesiveness of family. These matters can be described and can be examined. When these factors were overstrict. unsuitable, indifferent, hostile or unintegrated, the score for the prediction of future delinquency was very high. rating system was created by which they could score the predictability of future delinquent acts. They also made use of a projective psychological technique, the Rorschach test, and again found a capacity to predict future delinquent acts by interpretation of these scores. There were also aspects of the psychiatric interview which would contribute.

Making use of this predictive instrument in a controlled study in New York City in the late 50s and early 60s, it was determined that by applying these predictive tables to children at the age of 6 and 7, one could with 90 per cent accuracy predict those children who would follow a pattern of juvenile delinquent behaviour.

If in medicine we had something which would predict a disorder 90 per cent accurately, we would be shouting it from the rooftops. We know this information to be valid, and one wonders why it is not used. It is not used because it is difficult to dictate or legislate a system of child rearing. That is a transgression of civil rights, so we have a matter here in which the parameters go far beyond the dimensions of pure science and come into the humanities, the body politic and our understanding of how humans equate and relate to a culture.

The reason that these accurate predictions which substantiate scientific opinion that early environment and the interaction of parents and child contribute to antisocial behaviour cannot be used as a preventative device, is because it would necessitate some intervention in the privacy of the individual parenting patterns in a given family.

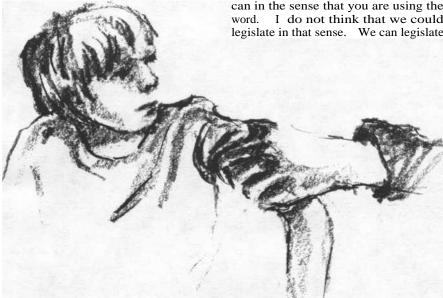
In my opinion, whatever forces can be brought to bear to underwrite conditions which will allow for predictable parenting and security of the child will be an eventual contribution to limiting the incidence of criminal behaviour.

If the child is treated aggressively, if it is treated in anger, if it is punished with viciousness, it is reasonable to assume that it will learn to behave that way and independent and mature adult, who can make decisions.

I find it difficult to assist you in suggesting how to have a society commit itself to love and affection and elements of this sort, which sound humanistic but which, in fact, have a great influence on the development of this human being. This is where the difficulty arises.

Senator Thompson: Do you think that this body, which is a law-making body, could by law prescribe and enforce love for the child?

Dr. Atcheson: No, I do not believe we can in the sense that you are using the word. I do not think that we could legislate in that sense. We can legislate



that that will be a component of its future behaviour as well.

It is my opinion that the majority of antisocial behaviour, personality disorders of an antisocial type, as classified in psychiatric nomenclature, are a product of emotional deprivation and of inappropriate parenting.

If you pose the question to any parent at the time of birth of the first born, What would you like your child to be?' there is an interesting group responses: a lawyer, prime minister of the country, a physician, or certain other honourable professions. It rarely is, `an for physical protection and, indeed, we have done so. It is my duty as a physician, if I see a child who I feel has been battered, or badly treated, or has received punishment which has violated his body, to report it to the appropriate agency and to the law. If while I am examining a child I hear the parents screaming and shouting and making all sorts of angry noises at each other, I have no responsibility to report it at all. Yet that is the environment in which the child will learn anger and will act anger out We legislate against physical trauma, but we cannot legislate against emotional deprivation. That can only come from a society which has some firm and convincing beliefs as to what is appropriate in terms of child rearing.

Child Maltreatment

In this essay I will outline the seriousness of the problem of child maltreatment, causes of the problem, some solutions to the problem and some things we as individuals can do to help.

This major problem is virtually unknown to many people, yet it is estimated by many authorities to be the largest cause of infant mortality. Estimates of the number of maltreated children in the United States range as high as 2,000,000. Many of the criminally insane in our detention centres were maltreated as children. Other maltreated children grow up with serious psychological handicaps which won't allow them to function as normal, rational human beings.

Maltreatment is made up of child abuse In general terms, and child neglect. abuse is the harming of a child by such things as battering it or strangling it. Neglect is failing to provide the needs of the child, such as food or clothing. Neglect and abuse can also be psychological. It is suspected that the lack of love and communication (neglect) or the verbal battering (abuse) of children by their parents yelling at them are as dangerous, and possibly even more widespread, as physical maltreatment. In many cases children are affected by a combination of physical or psychological abuse or neglect. For the purpose of this essay they will all be referred to under the heading of child maltreatment.

'Parents bash, lash, beat, flay, stomp, suffocate, strangle,They use fists, belt buckles, straps, hairbrushes, lamp cords, sticks, baseball bats, ...' Parents stop showing love towards their kids; won't allow them to talk, or make any noise at all, impress upon them that they're failures, or terrible brats; expect far too much from them for their age; or let them know they are hated or unwanted. Parents fail to feed their children; give them proper clothes; give proper medical attention for injuries; or provide a clean living area for them. Parents allow their children to perform

 Vincent J. Fontana, Somewhere a Child is Crying, pg. 16. sexual acts in pornographic movies or pose naked for pictures, just for the extra money it will bring them.

When we hear these things about parents who maltreat their children, we are immediately disgusted at those monsters' who must be subhuman to act in this way. Our first reaction is that they should be locked up, and upon meeting them we would be openly hostile and act superior. Yet the only difference between us and them is that we've been much luckier in life. A great majority of these parents cannot stop themselves from doing these acts and the rest, a very small minority, don't at all realize that what they're doing is wrong. First we'll take a look at the type of parents who do maltreat their children, and then at the reasons they do it. Parents may be a number of these types.

Most of the parents, because of past experience with others harming them, stay away from, and mistrust, other people. They shun contact with others, and will often actively avoid help because of what has happened before when they needed it.

A large number of parents are emotionally immature. Because of problems in their childhood, usually consisting of them being maltreated as children, they have been unable to grow up past a child state. The child is looked at by these parents as an unneeded responsibility; a threat to their security, the mother figure that they lacked (a role the child can't fill), or a reminder of their own bad past.

Some parents suffer from psychological problems (neurotic or psychotic parents), inflicted on them during childhood. They are unable to be parents because they didn't have any parents themselves. Often they see adult motives in the child, directed against them, that a child of this age can't possibly possess.

Parents of limited intelligence are sometimes so limited that they can't possibly look after a child. Others may consider one child as being `bad' for a number of different reasons, which will trigger maltreatment on that child. Some parents are so uninformed about

parenting that they expect behaviour from the child that may be inconsistent by many years with the child's age, or they don't have the slightest idea of how to react to the child.

Severe disciplinarians think they own their children and can treat them however they wish. A normal way of bringing up their kids is to batter them, just as they were brought up. They know no better. A small number of parents beat their children solely for the pleasure it brings. These are the criminally sadistic, who don't even think about bringing their children up.

Among the saddest cases are the addicts of either alcohol or hard drugs. When they're `high', violent behaviour can be triggered that otherwise would be repressed. Often when they're on extended highs the parents forget about the children for long periods of. time. The money that comes into the house goes towards drugs or alcohol, not the children. Who among them wants to live in the world of demanding children and poverty, when they can get high and leave behind that world?

The stresses of poverty that build up to cause addicts to maltreat their children may also precipitate acts of violence in other types of parents described earlier. In fact, all stresses of life can build up and finally cause the parents to snap under the pressure, harming their children. Non-white and lower income parents are slightly more prone to abuse or neglect their children because of the greater economic and social stresses they must face ². But stresses occur in all other groups of society as well, so maltreatment occurs in all groups (economic or racial).

The underlying cause of the whole problem is the belief still held by many North Americans that children are the property of the parents, and that the best way to bring up children is by the use of corporal punishment. In some earlier times parents were allowed to kill children, sell them into slavery, or treat

2. David G. Gil, `Violence Against Children', Journal of Marriage and the Family, Volume 37, Number 4 -- entire article -- Note -- The statistics used by Gil indicate an increased number of cases in lower income and non-white groups, even taking into account Fontana's conclusion of over-reporting of these groups.

them in whatever manner they chose. Through the ages this belief has been toned down, but many parents still believe they own their children to some extent. This justifies to themselves, punishing and treating children in their chosen way.

For the parents who believe they own their children, and an added amount of other parents, a favorite way to punish their children is by the use of beatings when they misbehave, or otherwise. Many still believe in the old saying 'Spare the rod, spoil the child'. With this basic attitude, is it any wonder that a normal beating can turn to a serious battering harmful to the child when life's stresses build up? Or is it any wonder that a parent uses his child in any horrible manner to satisfy his aggressive urges, when these parents think they own the child anyway?

The removal from society of these two ideas would eventually go a fair way towards stopping the total problem of mistreatment. In this line of thought, all our public institutions should stop using corporal punishment so that the rest of us will know corporal punishment is wrong. A Bill of Rights for Children should be set up stating, among other things, that children are not the property of their parents. It should state the right of children to proper parental care and love, and the right of children not to be physically punished. This, at the very least, would inform maltreating parents that what they are doing is wrong and against the law.

Another step towards solving the total problem of maltreatment would be the education of all prospective parents in methods of childrearing. They should understand their responsibilities to the children and what to expect of the child at each age as well. Otherwise, their misconceptions or ignorance of the child can lead to abuse.

A number of measures could reduce the magnitude of the problem. Alleviation of economic stresses is one of these measures. A guaranteed annual income, or at least raising the bottom economic level of society to humane economic conditions, would decrease financial worries (stresses) of many parents. Better housing and government medical care would also help.

Government and police should concentrate their efforts on stopping the use of heroin, methadone and other hard drugs. To release funds for their effort they could possibly lay off a bit on their efforts to stop victimless crimes such as prostitution or the possession of small amounts of marihuana. The problems of hard drug addiction are many times more serious.

Unwanted babies might not be a very large part of the problem, but there has to be some cases where children of unwanted pregnancies are treated as such when born, and therefore are maltreated. For women feeling this way, abortion can't be a bad solution, especially considering the state of our overcrowded world.

should be reported to the local agency looking after child maltreatment. All communities should have a coordinated, well-financed, and properly motivated team of psychiatrists, social workers, and psychologists working towards helping the parents. If the situation is dangerous enough, they should be able to quickly secure the child from the parents through the courts until such time as the parents are rehabilitated beyond the point of harming their children again.

The major problem with the idea of demanding that the courts take away all maltreated children is that there aren't enough foster homes for them. The maltreatment will often have made these children hostile, aggressive, or uncontrolable so that not many foster



There are many ways every one of us can help, on an individual basis, to solve the problem. But, to be able to help maltreated children and their parents, we must know the symptoms of a maltreated child. If we recognize a maltreated child we should try to reach out to the parents as friends. More than likely our help will be rejected, but otherwise, the help of a friend may be all that is needed to help the parent over a difficult time of stress. This could stop further maltreatment.

Because a minority don't want to be helped in their problem at all, and because so many mistrust any type of help, friendship may be rejected. Keep trying to be friends, but if it appears the child is in danger, then the situation

parents would want to adopt these children. The institutions these children are put into are often no better than the ones they came from. There is no one to constantly love them, and all the children tend to pick up the behaviour of the worst children. Some children are moved from one foster home to another so many times that they lose the ability to love. There is nothing to say these children aren't again abused in the institutions or foster homes.

Therefore, instead of taking away the children who aren't in danger, they must be helped in their own community. We as citizens should help, in any way possible, the establishment of self-help groups of battering parents to help each other,

services in the community which help out both parents and child, and research facilities to study the problem as a whole so that it can be understood and solved. The services and research facilities should be connected to a regional, or even national centre to study the problem more thoroughly. Of course, for the children who are in danger of being killed, we should insure that the local legal wheels will turn fast enough to remove the children before harm can be done. Severely battered children taken to hospitals almost always return unless intervention takes place; and half of Professionals in the these are killed. community must be able to recognize and report the signs of a child in danger or the legal system won't have a chance to save the children. Professionals must be made aware of the problem, and our prodding will surely help.

It can be seen that there is no easy, complete solution to the problem. There are only small solutions with which we can pick away at the major problem at the present time. The problem must be recognized as a major problem because it is already out of hand. One generation is maltreated and grows up to maltreat the next generation for the same reasons as their parents maltreated them. It is very hard to stop the cycle. The whole thing is like hepatitis or other similar diseases. The bug (a disfunction of society) is present for everyone, but only the worn down members of society (emotionally immature, uninformed, or unintelligent) are susceptible enough to catch the disease. We must work to get rid of the bug, as well as help the worn down, because we, as a part of society, have to live with the parents and their maltreated children, no matter how badly they are affected.

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International Year of the Child (I.Y.C.)

On November 20th 1959 the General Assembly of the United Nations unanimously adopted the Declaration of the Rights of the Child. The spirit of the document was reflected in the preamble, which said, in part, `Mankind owes the child the best it has to give'.

What is the International Year of the Child?

The I.Y.C. was first proposed in 1974 by a representative of the non-governmental organizations (NGOs) at a UNICEF executive board meeting `To spur leaders and citizens in each country to take permanent, practical measures that will benefit children everywhere.'

On December 21, 1976, the General Assembly of the United Nations proclaimed 1979 the International Year of the Child.

Since 1979 is the 20th anniversary of the Declaration of the Rights of the Child, the IYC is an opportunity for each country to increase its efforts to implement those rights.

Canada's Response to I Y C

Canada has made a financial contribution to the international celebration of the Year. But, since the focus of each country's activity is intended to be primarily on the improvement of conditions for children within that country, it is appropriate that Canadians demonstrate their concern for their own children.

Governmental Response

On the Federal level, Health and Welfare Canada is the lead Department for coordinating activities relating to IYC. At the provincial level, provincial governments are themselves responsible for celebrating the Year. At the same time, governments at both levels are having continuing discussions on how they might collaborate.

Role of Canadian Non-Governmental Organizations

On September 8, 1977, in Ottawa, UNICEF Canada hosted a meeting of representatives of more than one hundred organizations whose focus is children, from birth to age eighteen. That meeting established the Canadian Committee for the International Year of the Child - empowered to co-ordinate planning and action relating to the nongovernmental sector.

With Andrew Cohen of the Canadian Council of Children and Youth serving as co-ordinator, and with the financial support of the Toronto Hospital for Sick Children Fund, the Committee set up a small secretariat to act as a resource centre for exchange of materials and encouragement of action (Co-ordinator, 1979 IYC, 323 Chapel St., Ottawa, Ont. KIN 7Z2 (613) 238-6520), published a brochure outlining the objectives of the IYC, and organized a second national meeting of N.G.O.'s March 8-9, 1978. At this meeting the C.S.P.C.C., represented by Dr. Barker and two Advisors, addressed themselves particularly to the importance of the emotional needs of very young children.

At the conclusion of the Conference the delegates voted unanimous support for the Committee's proposal to establish a Canadian Commission - 1979 International Year of the Child, comprised of thirty-five to forty members, with a leading Canadian at its head.

Its mandate? To:

- Promote observance in Canada of 1979 as International Year of the Child;
- Encourage the widespread involvement of people and organizations, in all regions and in all segments of

Canadian society such as the nongovernmental business and labour sectors, in activities designed to advance the rights and interests of children.

· Provide support for programs, activities and projects to be undertaken in 1979 which focus on the problems, needs, conditions and opportunities of all

Canadian children with emphasis upon those in particular need.

A newsletter, The I Y C Report, is available from the Secretariat of the International Year of the Child, 866 United Nations Plaza, New York, New York, 10017, U.S.A.

Preventive Perspectives on Child Cruelty

Violence is a fact of life in growing societies. It has very powerful social value when used properly. Dr. Anthony Storr opening a conference on Violence in the Family and the Law in June 1977 at Montreal described the positive uses of violence in the general development of Humanity. He was more specific on the usefulness of violence in encouraging the growth of the individual. He was, however, careful to discriminate between violence which is useful and that which is destructive.

Domestic violence, be it physical, verbal, sexual or emotional, directed towards the end of creating fear in another is destructive and obscene. It has been used by the generations of Humanity, hallowed by antiquity, praised and propogated by its own victims. It is a never ending circle of agony, guilt, fear and misery. This circle has to be penetrated, straightened and reworked into an improved model of human relations.

Where to break the circle? Anywhere will do but wherever this is done is primary prevention of child abuse.

High school students are the parents of the future. They require information in what it means to be a parent and what long term emotional, physical, financial and self-sacrificing responsibilities they must accept. Young adults deserve the most accurate, honest appraisals of the results of behaviour which their elders can give them. The choice of what they do is then theirs but they should not have ignorance as an excuse. First class family life education, unfettered by political or religious ideologies, must be a number one objective in every home and school.

However, the young learn by watching their elders. "Actions speak louder than words." Parents, teachers and employers must be given alternate methods of dealing with a challenge than a violent response. It is through seeing a mature adult handle confrontation that the youngster learns. Since violence is a method of last hope when all negotiation has failed, efforts must be directed towards improved contracting with children and to more positive methods of parenting.

Positive parenting is being taught in study groups, family focussed work and in all kinds of setting. The same techniques are used in schools with teachers as Teacher Effectiveness (Gordon) and Dreikur's techniques. It has taken many years since Alfred Adler first proposed these methods for them to gain wide acceptance. The additional control given to parents is much more satisfying than the pure self-determined methods advocated by Spock a decade ago. Children certainly need clear consistent guidelines within which to grow.

Positive parenting teaches parents to look for and reward good qualities in their children. It teaches a variety of alternatives to fear as methods of handling problem behaviours. It cannot, however, deal entirely with those personality traits or illnesses which create friction in adults or children. The recognition of these special categories of 'risk' is essential to the preventative approach.

Helfer and Kempe have been expressing concern over the `risk' element for the past three or four years. Helfer has developed a questionnaire which can be used in the antenatal period to identify those families at risk for abuse (physical violence and neglect). Unfortunately the families of 1 in 5 newborns can be considered in this category. It includes almost all the potential serious abuse cases subsequently detected and needing treatment.

Some of the danger signals the questionnaire detects are:

- (1) inexperience in child rearing
- (2) lack of support in the family for parent(s)
- (3) family under severe stresses
- (4) serious differences between parents over future baby
- (5) immaturity in the baby
- (6) parents' own families use of violence
- (7) heavy use of alcohol by parents There are others.

Fortunately, because most of us have had a surfeit of forms, an alternative way of detecting `risk' exists. Concerned, alert nurses in the maternity ward can spot danger before it happens. They observe the interaction of the child, mother and father and their predictions based on these observations are as good as, or better, than the questionnaire. They are also more precise because they can reduce the percentage `risk' to 5 to 10% rather than 20%. However, these nurses require good note-keeping techniques and to know exactly what they are looking for.

Nursing education and antenatal classes as well as postnatal assistance in child handling, feeding and leaving alone, must concentrate on these issues. Along with detecting those parents who are potentially at risk, a positive supporting attitude must be used to encourage these inexperienced youngsters to permit others to assist them . A sense of their being able to handle things on their own often makes setting up useful supporting services difficult.

Special among the various mechanisms which protect the child is the mother-child bond. Much research is being carried out on this phenomenon and more is badly needed. It is protective between the child and its mother and, if used, between child and father. It will also apply to any other adult encountering the child in an intimate fashion in the first few months of its life.

Bonding may be better established by improved postnatal care of mothers and babies. Babies need to be very close to their mothers as soon after birth as possible. Mothers need to explore their babies and be reassured they are healthy. Rooming in, visits by father, support, encouragement and demonstration by more experienced mothers are all helpful in developing confident competent parents.

The various professional personnel involved in the whole support system of antenatal care, assistance with birth and postnatal education and care, need to know about the psychology of family violence. In particular, in the postnatal period there should be specific responsibility on one individual — doctor, nurse, or other professional — to ensure that necessary supports are in place. With many people involved, the danger is to assume someone else is doing the job.

One of the tasks of the professional attendants is to ensure that adequate other supports are in place. Some help from the mother's or father's parents, adequate knowledge of baby care by both



parents are examples. Further support in the postnatal period includes adequate opportunity for mother and father to meet and discuss their growing child with other young parents and possibly a public health nurse. Much learning of what to expect and how to cope is transmitted in such sessions. Additionally, most young parents need a regular break from the business of child care and should be assisted to have this. Crisis support from other young parents of older parent substitutes are extremely valuable. A programme such as the Grannies" of British "Sparkling Columbia offers an attractive model. Church groups, too, have an excellent opportunity for community involvement in these growing years, but the critical factor is the ability of the young parent and another less burdened adult to form a positive helpful relationship. A motheryoung parent concept is useful but not absolutely essential since even the opportunity to turn to another when frustrated is of importance.

For those parents who have negative or ambivalent feelings towards their child at birth and in the first week a different approach must be taken. The child who is still unwanted is likely to produce major difficulties in demanding of feeding, cleaning and expecially loving needs it has. Intensive psychological work needs to be done with these groups - identifying personality, behavioural, physical and socio-cultural barriers to satisfactory childrearing.

If the barriers cannot be surmounted then adoption is the option of the choice offering the child a stable secure and permanent home. The really important issues relate to the speed, accuracy and honesty involved in making the decisions. Parents have the right to be fully involved in those decisions taken on their children and themselves. Their input is important. It is especially necessary to outline all the possible alternatives, the implications and the prospects for successful future child rearing. Counselling in contraception must be considered.

It is known that not only certain parent characteristics but also certain child characteristics predispose to abuse. Some of these characteristics such as premature delivery, physical deformity or special need, demanding ("difficult") personality are born with the child and likely to influence any setting where the child is placed. Others, such as acquired illnesses, nutritional deficiencies or accidents are likely to improve if the

child's environment changes. It is certainly important to recall the contribution of the child to its own damage as well as the possibility that even selected foster parents may fall in the 20%, danger list of those who may react badly to children.

Those factors which predispose to adult cruelty towards older children relate to life crises in the adults, ill informed expectations of children, poisons, damage or illnesses affecting the adults. It becomes a great deal more difficult then to exercise preventive options since these fall into political and general lifestyle categories. What is necessary for growth and success in the adult life is sufficient challenge to encourage progress but not so much that life appears meaningless To strike this medium with the immense variability of Humanity is extremely difficult.

Prospective parents may be helped by teaching in the areas of:

- (1) what to expect of growing children at different ages and stages
- (2) how to handle their own frustration at child behaviours and demands parenting classes, premarriage preparation and postnatal parent centers where ongoing information can be obtained and comparison with other parents may be undertaken.

In looking at primary prevention still, it may be profitable to look at the sources of frustration for parents. Are parents sufficiently in control of other areas of their lives that they do not need to assert control over their children? If parents are not in control - who is? Might it not be useful to explore possible alternatives in social structure to return control to the parents?

Turning to secondary techniques which involve the early detection of abuse and adequate management leading to non-recurrence; this is probably the most studied area. It is the time when medical involvement and expertise become significant and when the recognition of abuse is highly necessary.

Public awareness programmes: media presentations, talks to numerous groups, men's clubs, may be used to tell individuals how to identify child abuse and what to do about it. This facet of early detection is particularly important since registers of reported child abuse show a high rate of non-professional reporting. Parents often report themselves after one or more abuses, shocked with their own capacity for violence. Having a number of different groups to whom

reports can be made makes the task of reporting easier for these abusers. In Saskatoon, for example, reports come in from a 24-hour crisis telephone line, the Department of Social Services (a government agency), family doctors, hospitals, social workers, and teachers, all of whom have contact with the potential abusers. These reports are coordinated by the Family Protection Service of the Department of Social Services.

Professional awareness is something which the Saskatoon Society for the Prevention of Cruelty to Children felt was extremely necessary. To test the responsiveness of the professionals in 1974 a test phone call was made to such facilities as hospitals, police, Department of Social Services, schools, Public Health Department, crisis line and family doctors. At that time no one knew what to do with the situation where the caller said she had witnessed some abuse and would like someone to check it out. Each agency referred to one of the others. A survey of educational programmes for 'professionals' showed that child abuse recognition and responses was only being taught systematically in the nursing education programmes.

The Society and a group of concerned professionals (social work and medicine mainly) set out to alter this situation and by 1976 I reported the progress of this group to the First International Congress on Child Abuse and Neglect at Geneva, Switzerland. A web of informational and direct services now exists in Saskatoon to deal with child abuse.

The role of the Society has been to ask questions, to organize workshops, to advocate on behalf of the child to government and to help lay groups such as Parents Anonymous start up and operate. Each group of people who came into contact with abuse or its results was asked to look at its responses. It was asked to improve the information and responsiveness of its own people and the Society offered books, films, articles, resource people and organizational assistance. To date nurses, social workers, teachers and physicians have responded to these requests and have run workshops and prepared booklets on their professional identification and response to child abuse.

The importance of recognizing signs of abuse as early as possible cannot be overstressed. It is known that abuse leads to poor physical development, a reduction in the ability of the child to explore its environment, poor in-

tellectual development, difficulty in making comfortable relationships with other human beings and, in some instances, death. This is not a mild problem but a serious and longstanding difficulty for the affected child, its caretakers and society.

However, before responding to abuse it is very important for the professional especially to consider the effects of intervention. Each change made by the worker creates possibilities for both good and poor outcomes. To consider even the most limited intervention as simple is to misread the situation. Let us look as one of these `simple' interventions.

A child arrives at school with a bruised, blackened eye. The teacher decided to intervene' and asks the child how the eye was hurt. The child appears scared and says she ran into a pole on the way to school. The teacher remarks that this must have been painful, offers a cold compress and tells the child that the pain, swelling and coloration will disappear over the next week or so.

As far as it goes this is reasonable handling (if the child ran into a pole). The child is given direct help in reducing pain and discomfort, a future of improvement over time is held out and the child is helped to feel that the grownup is in control, able to handle situation and unworried. This would be comforting.

If the child has been hit by an adult the night before, however, the intervention then is perceived by the child in very different terms. Firstly, the child has had to lie to the teacher (for fear of further hurt from the abuser). Secondly, the child has found out that the teacher does not recognize the difference between an injury earlier (black eye) and a recent injury (red, swollen and very sore eye) and so loses some respect for the Thirdly, the treatment of cold compress will do no good on an older injury and will bring the child no relief. Fourthly, the reassurance over the longer term is not accurate since the sight of the injured child is going to provoke guilt and anger in the abuser who will likely repeat the activity.

Fundamentally, in a situation where the child might reasonably hope for sensitive perceptiveness in the teacher, a lack of trust is created which will tend to extend to other classroom activity. The teacher will be increasingly identified with the abuser because the advice was of no use and treatment too late and of the wrong kind.

This type of intervention and interaction can be seen in any of the crises which result from abuse. It is necessary that those who see children in crisis understand how the child `covers up for the abuser mostly from fear but partly from affection. The child generally does not want the person who did the abusing hurt. The immediate emotional response of those intervening in cruelty is to be cruel back to the abuser and it takes a great deal of understanding to appreciate that the child cares for the abuser no matter what that person does.

Children love their parents and to a lesser extent other adults they contact. In love much is forgiven. The children forgive and keep the feelings of affection for their abusers. Well-meaning removal of children from their caretakers must not be undertaken lightly and even if it is done, contacts should be frequent and lengthy. This prevents a second problem of depression being added to the first of abuse

A comprehensive knowledge of the physical and psychological development of children is required of all those who have occasion to deal with them. Especially important is the knowledge of how and when children relate to their parents. This is not to say all cruelty and exploitation of children is done by parents. Many adults in deliberate or unthinking ways abuse youngsters. In so doing they give children models to copy, standards to live with and at the same time deny children their fundamental right to dignity.

All professional workers involved with children should inform themselves of the signs of child abuse. **Filmstrips** distributed to branches of the National Film Board are an excellent starting All professionals should know their legal obligations to report child This will vary by province and abuse. need to be clarified. professionals witnessing cruelty or its effects have the duty to intervene on behalf of the child to minimize future peril and certainly to avoid making the situation worse.

If in doubt about what to do, consult your local Children's Aid Society or Department of Social Services but since they, too, may not know all the answers do not stop there but check with any organization dealing with cruelty or abuse. After reporting it is rare for the reporter to hear anything about the outcome of the report. Discussions we have had with the various agencies involved indicate that followup phone calls asking what happened are welcome. So give the agency three or four days to begin investigations and call back, enquiring. This technique has the merit

of informing you, letting the agency know people are interested in what they do and acts as a check that things are happening.

Responses by professionals must be rapid, concerned, as informed and documented as possible and as far as possible based on the principles noted above:

- (1) preservation of child-parent relationships
- (2) child's immediate needs are met
- (3) child's interests are paramount
- (4) confidentiality is preserved as far as possible
- (5) feedback is given to reporters

Detailed examination of treatment techniques is inappropriate in a discussion of secondary prevention but one should outline the basic issues. These are to create environments within which the child can repair its body, restructure its relationships with its caretakers and continue its optimal development. In order of psychologically least disturbing to most disturbing, are staying at home, short stay in hospital with parents, foster home with parents visiting, hospital with parents visiting, foster home with no parents, staffed despite institution. But these psychological considerations, physical safety, adequate nutrition, consistent control of the child must also be satisfied and taken into account in placement.

If methods of ensuring safety, nutrition and parenting can be developed for home then no further steps are needed. Since the abuse is normally emergent then temporary arrangement may be undertaken while mobilizing supports to the family. Only in those instances where parental care cannot be reactivated within one year adoption should be considered. This will be, however, in a small number of cases only. Parents and others should not be frightened away from the assistance which can be given by threats of losing their child. This guilt is a terrible burden, there is no occasion to offer anything other than sincere and concerned help to them.

The way of the abuser is hard. Trust of the helper and then other people generally takes two years or more of steady intensive involvement by one or more workers. During this time, ideas of suspicion, of anger, depression and guilt recur repeatedly. A great deal of patience, understanding and concern is required. Similar considerations apply to the children though their ability to recover and improve is dramatically quicker.

recur repeatedly. A great deal of patience, understanding and concern is required. Similar considerations apply to the children though their ability to recover and improve is dramatically quicker.

Associating with people with similar problems works very well as `Parents Anonymous' is proving internationally acceptable. Play opportunities for the children, either in hospital or in school or at clinics or in individual sessions, prove immensely useful in allowing them to understand what has happened to them. More training in assisting nurses, teachers and others to do this kind of

work is needed.

Basically, as with all preventive programming, the solution to the problem of cruelty is INFORMATION, PRACTICE OF NEW METHODS, OPPORTUNITY FOR THINKING and SUPPORT OF IMPROVED WAYS OF HANDLING SITUATIONS. This is an educational process carried out under often very severe stress. Political aspects are clearly there but if human beings are given clear concise information on ways of handling life which are better for them than the older ways they will choose the better way. If they do not; look at the teaching not the students.

Peter Charles Matthews, M.B., M.R.C.Psych., F.R.C.P.(C)

Head, Division of Child Psychiatry, University Hospital Associate Professor, Dept. of Psychiatry, University of Saskatchewan

Dr. Matthews received his medical training in London Hospital, London, England in the late 1950's and proceeded to postgraduate work in Paediatrics and General Psychiatry before training as a Child Psychiatrist in England and being a consultant with the National Health Service in Plymouth, Devon until 1969.

He came to Saskatchewan at the request of Dr. Griffith McKerracher to organize and run the Child Psychiatry Programme at the University and has been in this position ever since. As a Child Psychiatrist, he has been seeing a number of youngsters who have been physically and emotionally and sexually abused throughout the years of his practice but it was in 1973 that he decided it was important to join a group of fellow workers in the area to develop some programmes which would actively intervene in this process of child abuse somewhere before the child was badly damaged. He was a founder member of the Saskatoon Society for the Prevention of Cruelty to Children in 1974. He was also a founder member of the Interdisciplinary Group which was set up between the three major hospitals in Saskatoon to coordinate hospital efforts in child abuse. Subsequently, he has been involved in public speaking workshops, on television, on radio and has been instrumental in developing a

resource library of books, papers, films, filmstrips for the Society to which interested professionals and members of the public can have access. He has personally prepared a five minute tape on the recognition of child abuse which Saskatchewan physicians can access by dialing a Continuing Medical Education telephone number and is currently involved with other members of the Society in preparing self-instructional materials for small groups in rural areas so that they may inform themselves about abuse. Further, he is involved in a project to develop materials within high schools by high school students and their teachers and is the Saskatchewan correspondent for the Newsletter on Child Abuse and Neglect.*

Additionally, he is involved in a project to evaluate the responsiveness of hospital emergency departments to child abuse situations through the use of a child abuse survey form.

We are most pleased to present the views of such an experienced, competent, concerned expert in this issue of the Journal.

* Available from: Family Resource Centre 1611—29th Street N.W. Calgary, Alberta T2N 4J8

Le Journal de la Société Canadienne pour la Prevéntion de cruauté aux Enfants

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NOTRE CREDO

Comme nous Constatons

que la capacité et de donner et de recevoir la confiance, l'affection et la sympathie est une condition essentielle pour être humain,

Comme nous Savons

que nous tous en subissons les conséquences quand les enfants sont élevés d'une façon qui les rend sans affection, préjugés et violents, et,

Comme nous Avouons

que pour la première fois dans notre histoire nous pouvons tenir pour certain que ces qualités sont determinées par les soins que recoit l'enfant pendant les années du début de sa vie.

Nous Affirmons Que:

Les parents potentiels doivent arranger de nouveau leurs priortés tout en pensant à ces principes pour que chaque nouveau-né puisse développer la capacité pour la confiance, l'affection, et la sympathie.

II La plupart des parents ont la volonté de fournir à leurs enfants des soins tendres et sympathiques qui sont nécessaires à un enfant pour vu qu'ils reçoivent du soutien moral des autres, la comprehension nécessaire de la tache, et la conviction de son importance majeure.

III On ne peut pas exprimer la cruauté d'estropier un être humain en manquant d lui fournir cette qualité de soins pendant les trois premieres anneés de sa vie.

Par conséquent il y a un besoin pressant de:

I Réévaluer nos institutions, nos traditions, et nos croyances de ce point de vue. II D'opposer et de combattre n'importe quelle force qui cherche à affaiblir le désir ou la capacité de parents de mener ci bon terme une tache qui concerne d'une manière importante tout le monde.

III D'appuyer et de renforcer tous les aspects de la vie familiale et ceux de toutes les classes de la société qui aident les parents à faire face a leurs obligations à chaque nouveau-né de la race humaine.

'Gagnez un Million' Le Concours Credo

Et qu'il nous faut à l'heure actuelle est de traduire toutes les idées contenues dans ce credo dans un langage qui fera sursauter lame. Des paroles, des mots et des phrases qui credo dans un langage qui fera sursauter lame. Des paroles, des mots et des phrases qui surgissent à vous tous en termes nets et clairs et qui nous encourageront à agir d'une manière courageuse. Un Desiderato, une Declaration D'Indépendance. Une affirmation concise si claire que même un élève au niveau élémentaire ne sera pas confus par le sens-si puissant, si politique, qu'une fois commencée, on ne pourra pas résister è la tentation de la lire jusqua la fin.

Un langage qui parle d'une voix resonnante non seulement au croyant, mais qui frappe ou éveille même le sceptique endormi à un tel point qu'il s'inquiète du sort du nouveau-né et qu il considère notre cause. Un defi modeste! Un premier prix?

Une Connaissance que cela se peut bien que vous ayez fait plus en quelques heures on en quelques jours que la plupart de nous autres pourra faire de notre vivant pour le

million d'enfants de demain.

E.T. Barker M.D., D. Psych., C.R.C.P.(C)

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