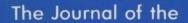


# WINTER '81

•	Culture and Neurosis	Inside Covers
•	About the CSPCC	1
•	Letters	2
•	The CSPCC: A Brief History Auditors' Report Objectives	5 10 14
•	Teenage Suicide	15
•	Removable Centrefold	-
•	How Neurotic Are You?	19
•	How Can Neurotic Parents Raise Less Neurotic Children?	22
•	What would happen to our Economy if we were to get well?	26
•	The Aquarian Conspiracy — Reason for Hope	27
•	What can you offer the children of Hanna?	30
•	Childhood Experiences as Causes of Criminal Behaviour — A Senate Report	34



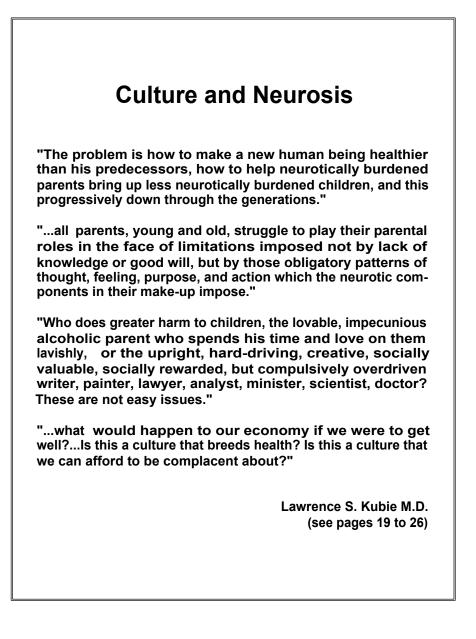


# The Journal of the Canadian Society for the Prevention of Cruelty to Children

Volume 4

Number 1

Winter 1981



# THE CSPCC

# The Canadian Society for the Prevention of Cruelty to Children

#### "TO PREVENT THE PERMANENT EMOTIONAL DAMAGE CAUSED BY INADEQUATE CHILD CARE"

- The basic premise of the CSPCC is that the worst of all possible cruelties is to inflict permanent emotional damage on another human being.
- Given the evidence that such permanent damage can be relatively easily inflicted during the very early years of life, our concern is with ignorance of, or indifference to, the emotional needs of very young children.
- By emotional damage we mean not only neurotic, psychosomatic, and psychopathic illness, but an inability to form trusting, empathic, and affectionate relationships with others.
- The objective of the CSPCC is to work for the implementation of preventive measures before the damage is done.
- Better preparation for parenthood, greater concern for proper care during pregnancy, obstetrical practises which facilitate bonding, higher priority for the empathic care of infants, higher status for homemakers, and stronger community support for parents with young children, are examples of such preventive measures.
- Increasing the number of members in the Society and the readership of the Journal are at present the principal means by which the CSPCC is working to unite those who share a concern for the importance of the Society's objectives.

Annual Membership - \$10.00 Three Year Membership - \$25.00 Life Membership - \$100.00

The Journal of the CSPCC, which is published four times a year (February, May, August, and November) is mailed without charge to all CSPCC members.

Cheques or money orders should be made out to CSPCC and mailed to CSPCC, Box 700, 298 First Street, Midland, Ontario, L4R 4P4. All membership Fees and Donations are income tax deductible.

On receipt of your membership fee, your Membership Certificate, Official Receipt for income tax purposes and first copy of the Journal, beginning with the current issue, will be sent to you.

The CSPCC Is a non-profit corporation established July 21, 1975 by grant of a charter by letters patent under provisions of Part II of the Canada Corporations Act. Head Office: 298 First St., Midland, Ont. L4R 4P4. Registered as a Canadian Charitable organization Dec. 9, 1975. Auditors: Hook and Carruthers, Chartered Accountants, 361 King St., Midland, Ont. Directors of the Corporation: Elliott T. Barker- Psychiatrist, Wyevale, Ont., Michael Mason - Lawyer, Toronto, Ont., Jeanne Marie Hurd - Public Health Nurse, Winnipeg, Man. Officers of the Corporation: President - Elliott T. Barker, Vice-President - William Crawley Jr., Secretary-Treasurer - Marjorie F. Buck, Media Consultant - Barbara F. Graham, Membership Secretary - June Jenkinson.

# THE JOURNAL OF THE CSPCC

Vol. 4

#### No. 1

Winter 1981

Editor: E.T. Barker, M.D., D. Psych., F.R.C.P. Layout: John Maxim French Translation: Keith McNally

Printing: Bayweb Limited, Elmvale and Midland Printers Limited, Midland

The Journal, official publication of the Canadian Society for the Prevention of Cruelty to Children, is published four times a year (February, May, August and November) and is mailed without charge to all CSPCC members.

Journal subscriptions are available as part of Membership in the CSPCC.

Annual Membership for individuals, schools, libraries and other organizations is \$10.00. Three year Membership - \$25.00. Life Membership - \$100.00.

Membership fees are income tax deductible.

A subsidized bulk subscription rate of \$2.00 per volume (four issues) is available to Secondary Schools in Canada ordering 10 or more copies.

The Editor welcomes letters, suggestions for content, articles, photos, drawings, etc. for consideration. Opinions expressed in the Journal are not necessarily those of the CSPCC or the Editor.

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### Letters

#### OUR MOST VALUED OCCUPATION

Dear Sirs,

I saw Dr. Elliot Barker on Take 30 on Monday and was impressed. I too believe that most of the problems people have stem from infancy and that mothering should be our most valued occupation in our society. I am the mother of a one-year-old and refuse to return to work unless absolutely necessary. I would like to help change society's attitude towards mothering.

Enclosed is a cheque for \$10 for membership in CSPCC and quarterly journal.

Yours truly, Pat Arey Whitehorse, Y.T.

#### ABORTION - THE LESSER OF TWO EVILS

Dear Editor,

...| am sure all would agree that in an ideal world and where conception occurs as the result of a loving desire to create and care for new life a miscarriage would be a great tragedy and an abortion would be an outrage. But we do not live in an ideal world.

Society today is a mixture of good and evil. Alongside those who wish to create and care for life, who see conception as a gift from God and who anticipate parenthood with joy although it may involve much effort and sacrifice there are many others who see pregnancy in a different light.

Women who already have several children may see pregnancy not as a gift from God but as a failure of imperfect birth control methods, a drain upon already inadequate resources and a burden that will have to be paid in part by children already born who will enjoy less of their mothers' li mited time and resources. Single women may see pregnancy with shame, guilt and uncertainty and a burden which if it is born at all will be regarded as a punishment rather than as a blessing from God. And it will be a punishment they will bear alone since male members of society are not involved in the process of child bearing. Some single women who bring children into the world may receive help from a strong and supportive family to help them through their difficulties. Most will not. Unless they immediately give up their children for adoption they will have a long, lonely and hard struggle ahead.

I have met many single mothers living with their children in small, impoverished apartments. They lived in conditions no parent would wish for a daughter and grandchild. Many of these mothers were inadequate for the responsibilities they had. The children grew up stunted physically, emotionally and spiritually. Some of them became wards of the state and were put in the hard to adopt category. In the care of the Children's Aid Society they reached adulthood without ever having known love or emotional security. There are thousands of such children in each province, a sad commentary on society's failure to face up to the facts of life. Invariably we learn that young people who crowd our courts and fill our costly prisons were the products of unwanted pregnancies in inadeguate homes.

As a Christian I feel that an abortion would be wrong for my wife but then I am willing to share with her in the responsibility for caring for new life we create. But I think it would be wrong for me to try and force my views, religious or otherwise, on all women unless it can be shown that the practice of abortions is having an adverse effect on the majority of the population. Who am I as a man, and even as a leader in the Christian community, to say that a woman has no right to decide whether or not she will continue alone with a pregnancy or to deny her the right as a free and responsible person to decide what is the right thing to do with her body?

Until society is willing to provide homes for the many thousands of unwanted children who presently are wards of the state, until sexual behaviour becomes chiefly an expression of mature love and until all lives are treated as sacred then compassion will require abortion as the lesser of two evils...

Rev. Vernon Kimball Buckingham, Quebec

#### CONCERN WHEN IT MATTERS MOST

Dear Sirs,

After seeing "Take 30" on TV, I became interested in joining your Society. Enclosed is a \$10.00 cheque for subscription to your magazine. Could you please send me some information about the Society? I am soon to be married and I am concerned about giving my future children the best advantages for mental health. Thank you for your co-operation.

Yours truly, Peter Weadick Hamilton, Ont.

Dear Dr. Barker,

For very many people, I think, the death of John Lennon meant the loss of an almost personal friend who gave voice to many ideas that we share in our own minds and that tended to make us feel close to him and his wife. Dominant among these ideas had been hopes for a non-violent world and it is particularly painful to many, I think, that John Lennon's death was brought about through the use of what has come to be the symbol of violence in our society, the handgun.

JOHN LENNON

I wanted to write this letter to the Journal because the future of our society and hence the possibility for a non-violent future lies in the way in which children who live today are allowed to see the world. Also, because the central theme of the Society is the primary prevention of abuse of children and the resulting social pathologies, we who read the Journal can see the need for the primary control of firearms. That is, the prevention of the attitude that leads to the desire to use and possess firearms.

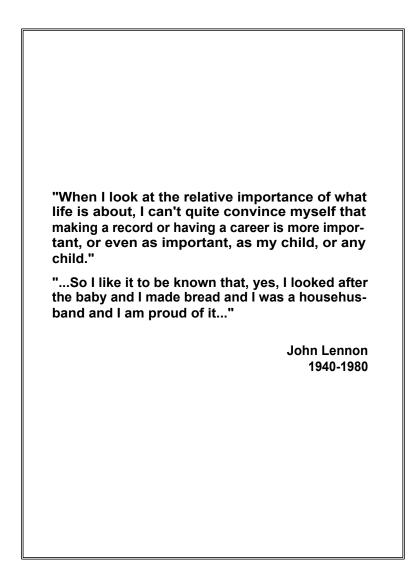
There is a serious need for parents and all people to speak loudly against those who would poison the environment that their children are formed in, I mean the psychic and emotional environment. One of these poisons is the attitude that leads to the use of the handgun as a mode of expression in our society. Its sources are spread everywhere but two clear ones are television (specifically the programming that is characteristic of Hollywood) and the manufacturers of toys designed to imitate weapons. The mentality behind firearm use is tied intimately to Hollywood, we can see it in the pervasiveness of the good guy/bad guy theme and in the folk heroes we endorse; Clint Eastwood, James Bond, John Wayne, Humphrey Bogart and even Billy Jack.

Perhaps most important though, because the effect of action can be more pronounced, is the need to speak to our children. Teach them that the handgun is not the way to resolve con-

flict, have them fight by hand if they will fight and don't deny the conflict that exists between individuals but react with the emotion you felt on learning of John Lennon's death to their mock gunfights and backyard battles. Tell them that a close friend of yours, many friends, died because someone acted the *way* they are acting. When they say it is only a toy know and try to convince them that the attitudes of the handgun are what kill and that it's no toy, it exists fully each time they feel the excitement of telling another person 'he is dead'. Teach them to avoid the feelings of excitement that come from manipulation of others and the swashbuckling bravado and masochism of the mock battlefield and the battlefield of the television. Because it is these feelings that are to blame for the firearm mortality in North America, not the existance of the handgun itself.

was too young to hurt for John Kennedy or Martin Luther King, but John Lennon hit deep and hard and I believe it is time to act against these things.

Sincerely, David Montgomery, Kingston, Ont.



### The Globe and Mail April 27, 1976

# New group seeks to prevent cruelty to children

#### **By Arnold Bruner**

The slaughter was so grisly the judge refused to admit as evidence colour pictures of the three dead infants in their bloodied home because they would inflame the jury.

The killer was 16 when he beat the children to death in a drunken frenzy. When he was found guilty, among those who solemnly left the courtroom was the psychiatrist from Penetanguishene who had been called in on the case.

Dr. Elliott Barker, who calls at least 100 murderers by their first names and knows the darkest thoughts of dozens of rapists, assaulters and other violent men, was deeply convinced that there were four victims; the three dead children — and the boy who murdered them.

The killer was the victim of

his parents, Dr. Barker felt a psychologically battered child whose mind had been brutalized before he could speak or understand words.

"What to do and not to do," Dr. Barker scribbled on hotel stationery. "...Link between child-rearing and mental health..."

This month, five years after his first "jottings", Dr. Barker announced the incorporation of a charitable foundation to protect the right of children to grow to adulthood with unscarred minds.

It is the Canadian Society for the Prevention of Cruelty to Children — and the similarity in name to the body that shields animals from harm is no accident.

"Animals are protected by this society. They have rights. But children have no rights," the lean, six-foot, 42-year-old psychiatrist said while explaining his decision to make the society his life's work.

"A child can't run away. It can't fight back. It is totally dependent on its parents. It can't hire a lawyer. Children are accepted by society as their parents' chattels. You can kick a kid in the head if you want to, or you can screw his mind in other ways.

"Physical abuse — the battered baby — is only the tip of the iceberg. For every kid who has had his head kicked in there are thousands who have had their minds damaged — who are rendered less effective as adult human beings."

The bigger horror in this, Dr. Barker said, is that child victims of mental violence become violent adults who in turn abuse their children and this violence usually masquerades as love...

The newspaper article from which the foregoing is a brief excerpt stimulated a surprisingly large response and subsequent communication with a large number of individuals and organizations.

In February 1978 the first issue of the Journal was published, and the response to it was so encouraging that subsequent issues increased to 16, then 24, and finally 32 pages by the beginning of the second year of publication. With the Spring '80 issue that number was increased to 40, and the present front cover design was introduced.

Paid Membership in the Society as of April 1979 stood at 726, rising to 954 in April 1980 and at the present time is just over 1100. It is gratifying that our membership is spread so evenly from one end of the country to the other in proportion to the population. We are also pleased that approximately 450 secondary schools across Canada have joined and are receiving the Journal regularly.

Vol. 1, No. 1 Winter '78 Editorial Emotional Abuse - by a Criminally Insane Murderer New Group Seeks to Prevent Cruelty to Children - Globe and Mail Founding Officers of the CSPCC Excerpts from letters About the Journal Food for Thought	Vol. 1, No. 2 Spring '78 Letters The Right to Spank No Job is More Important Burton L. White and 'The First Three Years of Life' Spacing Children Childhood Experiences as Causes of Criminal Behaviour - Senate Subcom- mittee A grade 12 student looks at Child Maitreatment 1979 - International Year of the Child Preventive Perspectives on Child Cruelty	Vol. 1, No. 3 Summer '78 Letters Guilting and The Magical Child Things or People A Chancellor Talks about TV Discrediting The Aggressive Instinct Hypothesis Parenting Education - Why? Speak to us of Children My Friend	Vol. 1, No. 4 Autumn '78 Letters The La Leche League: Child Abuse has many faces Benevolent parental nurturing: Environmental Quality (EQ) Levels: Supermarket Mom Long Term Emotional Consequences of Neglect Parenting Education - 'a new and major direction for the public education system' Eric Balkind A Friendship Centre for mothers and their pre-school children:
Vol. 2, No. 1 Winter '79 Letters Dramatic Initiative in Prevention A Canadian Senator Indicts T.V. Putting Down Kids Parent Preschool Resource Centre Maternal-Infant Bonding The Real Danger of Permissiveness A CSPCC Member Speaks Out	Vol. 2, No. 2 Spring '79 Letters The Battered Parent Despair That Breeds Despair From the Press Some Determinants of Maternal Attach- ment The Difference Between Normality and Neurosis Parenting Education in School The First Five Years Giving Up Television	Vol. 2, No. 3 Summer '79 Letters Married But No Kids? Unsocialized neurotic - unfeminine? A Mother's Working Day Television - The plug-in drug Direct Service and Prevention - an editorial and reply Prevention Through Political Action and Social Change Prevention in Manitoba - An integrated and comprehensive approach When A Grown Man Weeps - by Paul Ar- bour - grade 11	Vol. 2, No. 4 Autumn '79 Letters Book Review The Poor Rich: The Children of the Super- Rich Therefore, Parents: Living Poor With Style Sweden Bans Spanking The Modern Housewife: Job Description Results of a Media Campaign for Preven- tion "And I'm Immature" Contraceptives for the young? A grade 13 student looks at Charles Man- son
Vol. 3, No. 1 Winter '80 Letters The Perils of Substitute Management Feminists Tackle Own Bias Against Wife- Mother Role Every Child's Birthright: In Defence of Mothering The Case Against Universal Day Care Child-Abuse - by Eric Nicol The United States Versus Child Abuse The Nature of Human Nature Fathering Personal and Social Psychopathology Want a Baby? Then Get a License	Vol. 3, No. 2 Spring '80 Letters The Myths and Realities of Motherhood Male Housewife Wins Alimony Familial Economics From Sweden with Love Spanking High School Students on Child Abuse Mental Cruelty Motherhood, The Wonder of Life What Every Grade 10 Student Should Know Fathering: Two Book Reviews Prevention: 'Corraling a Cloud' The Heart of Prevention	Vol. 3, No. 3 Summer '80 About the CSPCC Letters Try Your Hand at LOGO Design To work or Not to Work After the Baby Comes Licensing Parents - Reply to a Rebuttal From the Press The Subtleties of Mental Cruelty Drinking and Smoking for Two - Pregnan- cy and Soft Drugs What is T.V. Doing To Children? Are We Raising Our Children For The Future?	Vol. 3, No. 4 Autumn '80 Letters A Classroom Project The Causes and Consequences of Hostility You Don't Go Round Hitting Your Friends, Do you? Who's Rights are Righter? A More Effective Way of Doing Harm T.V. Parents' Academy How to Grow a Parents Group How Parents and Babies Fall in Love Emotional Availability: Emotional Child Abuse The Cornerstone of Society

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CSPCC Journal Winter 1981





Cindy Guidolin - Research Reader

Maurice Marion - Research Reader

Heather Tilson - Research Reader



John Powell - Project Manager



Pat Mount - Clerk-Typist



Elizabeth Squires - Research Reader



**Catherine Merkley - Research Reader** 

In the summer of 1979, the CSPCC was awarded a Young Canada Works Program grant to hire 11 students to locate and carefully review research material related to the objectives of the Society - The Study Guide Project. Happily, Maureen Buchanan, one of the students who has remarkably artistic talent left us with the sketches above. Missing are Maureen, Prima-Jeanne Forget, Brenda Therrien and Paul Arbour.

## Without Whose Help...

As one can readily see from the size of our operating budget, (page 10) the CSPCC would not have been able to achieve its present level of activity without an enormous amount of voluntary assistance from individuals, businesses, and other organizations. Given the number of people involved, and the length of time over which so many helping hands have been given, we are regrettably confident that the list is not complete. Our thanks for the assistance, large or small of all who have helped, and our apologies to those not listed.

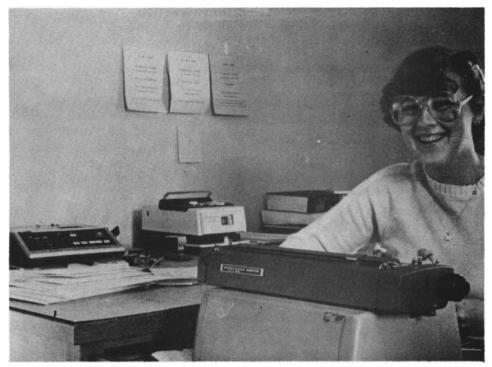
We have not attempted to list those who have supported the CSPCC financially by donations in addition to Membership. Without your help the CSPCC would not have survived.

Susan and Larry Arnold Julie and Nina Barker Marion Barnett Denise Baronet-Lacroix **Dominique Baronet** Les Bell Loretta Bennett Doug Billings Agnes Boucher Jim Bowie Dora and Barry Boyd Marvlysbeth and Doug Brown Ron Buttineau Jean Buxton Mike Bysco Mary Carrier Carol Chaput William Chenier Doris Chomko Paul Copeland John Desroches Betty and Jim Donald Sandv Donald Gloria Dubeau Svlvia Elias Marguerite Evans Donald Everingham Al Farthing Russell Fleming Roger Flint Paul Forde John Gammell Ken Girotti Julie and Jessie Gleben Molly Golden Frank Gower Peter Graham Airdrie Guppy Kay Hawkins Pat Heatlev Ann Hesketh Pearl and Earl Hesketh Rosallie Holmes Ingela Hermoddson Ann Johnstone Leslie Kina

Jennifer and Mark Klemensowicz Michael Knowles Allen Laurin Gerry Ledger Jim Lunnie Therese Maheu Gary Maier **Dick Maloney** Marg and Joyce Marchant John Maxim Katherine McDonald Marv and Jim McFadden Wayne McKerrow Jim McKillip Keith McNally Craig McNaughton

Lawrence Oakley Jim Park Janet Phillips John Powell Lynda and Ronnie Pownall Lori Prentice Linda Rainsberry Noella Redditt Allan and Ellie Rimmer Marv Robertson Marian and Robert Robinson Rita Robinson Doris and Kay Routliffe John Runion Earl K. St. Jean Toots Sawyer Warren Sharpe Sharon Schneider Bert and Lily Somers H.W. Somerville Doug Stone Gisela Straeche Mike Sullivan Don Tickle Peggy Tracey Winnie Weatherstone Shirley Whittington Shirley Wiggins Jeff Woolnough Elanor Zummach





Shirley Wiggens the latest of three Ontario Career Action Program Trainees assigned to the CSPCC office for on the job experience.

Advertiser Press Atkinson Film-Arts Ltd. Bayweb Ltd. Beaver Press Ltd. Doubleday Canada Limited Elliott, Warne, Carter Gignac and Rice Huronia Office Services Ltd. The McBee Co. Miller Services Ltd. Midland Printers Co. Ltd. Office Overload Scott Printing Service Van Nostrand Reinhold Co. The Arthritis Society Boys and Girls Clubs of Canada

The Canada Jaycees Canadian Mental Health Association Canadian Cancer Society Canadian Red Cross The Association of Kinsmen Clubs The Muscular Dystrophy Association of Canada Planned Parenthood Federation of Canada Rotary International Young Men's Christian Associations of Canada



#### CANADIAN SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN BALANCE SHEET AS OF APRIL 30, 1980 ASSETS

CURRENT ASSETS			
Cash	\$	25.00	
Bank - Current Account Bank - Savings Account		278.93 933.94	\$ 1,237.87
,			
FIXED ASSETS - at cost Office Equipment	\$	490.00	
Library	•	235.00	
Less: Accumulated Depreciation	\$	725.00 194.00	531.00
			4 700 07
TOTAL ASSETS			\$ 1,768.87
LIABILITIES			
CURRENT LIABILITIES Accounts Payable and Accrued Charge			\$ 400.00
ACCUMULATED SURPLUS			
OPERATING Balance May 1, 1979	\$	19.98	
Excess of Receipts Over Disbursements		817.89	
Balance April 30, 1980	\$	837.87	
CAPITAL	•		
Balance May 1, 1979 Less: Depreciation Provision	\$	628.00 (97.00)	
Balance April 30, 1980	\$	531.00	
TOTAL ACCUMULATED SURPLUS			1,368.87
TOTAL LIABILITIES AND ACCUMULATED SURPLUS			\$ 1,768.87

#### STATEMENT OF RECEIPTS AND DISBURSEMENTS FOR THE YEAR ENDED APRIL 30, 1980

<b>RECEIPTS</b> Donations Ottawa Chapter Subsidy	\$ 14,465.09 300.00	\$ 14,765.09
DISBURSEMENTS Staff Salaries and Benefits Office Rent Telephone Publishing Costs - Quarterly Journal Mailing Costs	\$ 537.50 835.48 419.61 5,760.22 1,963.25	
Marketing Service Office Supplies and Printing Equipment Rentals and Maintenance Travel and Conventions Legal and Accounting Preparation of Manuscript Study Guide Project - net	187.51 1,397.16 320.26 145.53 600.00 1,773.41 7.27	13,947.20
		¢ 047.00

#### EXCESS OF RECEIPTS OVER DISBURSEMENTS

\$ 817.89

#### SUMMARY STUDY GUIDE PROJECT

Staff Salaries and Benefits Office, Postage and Sundries Travel Interest and Bank Charges	1	73.23 25.70 186.09 27.25
Less: Federal Employment Grant	\$ 11,2 (11,20	12.27 05.00)
EXCESS OF DISBURSEMENTS OVER RECEIPTS	\$	7.27

#### AUDITORS' REPORT

#### TO THE DIRECTORS OF

#### CANADIAN SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

We have examined the Balance Sheet of the Canadian Society for the Prevention of Cruelty to Children as at April 30, 1980 and the Statement of Receipts and Disbursements for the year then ended. Our examination was made in accordance with generally accepted auditing. standards and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the Society as at April 30, 1980 and the results of its recorded cash transactions for the year then ended in accordance with generally accepted accounting principles for non-profit organizations applied on a basis consistent with that of the preceding year.

MIDLAND, Ontario July 21, 1980.

thick of

HOOK & CARRUTHERS, Chartered Accountants.

"Having enough advance financing for your organization is about the worst possible thing you can do and is almost certain to scuttle the whole thing.

"A glib but accurate reason is that if you have the money, you are only going to spend it. And spend it on things that are totally unnecessary and in ways that will commit you down the road to even higher future costs. For your organization to work, you have to start out scared, lean and hungry....It's really difficult for any beginner to increase the amount of money he is handling by more than 20% or so a year without starting to do stupid things with it or worrying too much about it."

Adapted from Don Lancaster's no-nonsense book about starting a small business.

# **Directors and Officers**



Elliott Barker Director and President

**Dr. Barker** graduated in medicine from the University of Toronto in 1958, and completed his training as a specialist in Psychiatry in 1963. He and his wife travelled extensively in the Far East, Middle East, and Europe before joining the staff at the Mental Health Centre Penetanguishene in 1965. There he developed specialized treatment programs for certain types of dangerous mentally ill offenders in a 150-bed section of the Maximum Security Division (Oak Ridge). In 1967 he was appointed Assistant Superintendent of the hospital and work-ed closely with the Superintendent Dr. B.A. Boyd. As the hospital gained a world-wide reputation, he spoke at international conferences and published technical papers on his work at the hospital. From 1972 to the present Dr. Barker has been a part-time consultant in Psychiatry at the hospital while devoting an increasing amount of time to Primary Prevention.

Jeanne Hurd received her M.A. in Education and Theology from Columbia University, New York, and Master of Nursing Degree from Yale University in 1956. Her practical nursing experience has been in education at the elementary, secondary and college level as well as both general and mental hospitals. Her academic experience has been as an Assistant Professor in the School of Nursing at the University of Wyoming. From 1975 to 1978 she was the Senior Program Consultant, Community Services Division, Department of Health and Community Services of the Government of Manitoba. She has published over a dozen articles related to nursing, child abuse prevention, and maternal-infant bonding. At the present time she is the coordinator of the Research Project on Child Abuse Prevention at the Children's Hospital Health Services Centre in Winnipeg.

**Michael Mason**, a Barrister, is a partner in the downtown Toronto legal firm of Elliott, Warne, Carter. He practises Civil Litigation and a large proportion of his cases involve marriage breakdown and therefore questions of the custody of children. His interest in the Society arises in part from the observation that successful, compassionate, and mature spouses in a state of marital crisis will deal with one another, and their children, in cruel, unusual and irrational ways which are quite at variance with their expressed intentions. This has led him to a concern for the psychological harm that parents can unwittingly inflict in the early years of a child's life, either in a state of crisis or not.



Jeanne Marie Hurd Director



Michael Mason Director



William Crawley Jr. Vice-President



Marjorie F. Buck Secretary-Treasurer

**Bill Crawley** joined the security staff of the Maximum Security Division of the Mental Health Centre at Penetanguishene in 1946 as an Attendant. In those early pre-tranquillizer years, when physical fitness was as much a prerequisite for the work as anything else, he rose in the Attendant ranks to be supervisor in charge of a ward of 38 patients. From this position he led his co-workers into a new era of intensive group therapy programming - an initially unpopular role for attendant staff where comfortable custody had been the rule for 30 years. Later, as Chief Attendant, he directed a staff of 165 in their dual responsibilities of security and treatment before his retirement in 1979.

**Peggy Buck** joined the staff of the Mental Health Centre to work in the Medical Records Department at Oak Ridge. For a number of years her responsibility was to compile extensive histories on each new patient admitted, piecing together information obtained from interviews with the patient, his parents, and any other sources available. For the last seven years she has been the Administrative Assistant to the Medical Director. In this capacity, her duties involve the preparation of special summaries of the history and progress reports on each patient who has been found not guilty by reason of insanity. In addition, she is responsible for screening applications for admission to Oak Ridge - work that brings her into contact with Judges, Crown Attorneys, Defense lawyers, and Police throughout Ontario.

**Barbara Graham** received her BA from Barnard College (Columbia University) in 1956 and taught English at the Secondary School level before devoting her full attention to a writing career. Her work has appeared on CBC radio, in Chatelaine, Homemakers Magazine, most large Canadian daily papers and the Chicago Tribune. She is presently the Entertainment columnist for the What's on/Ottawa Magazine and feature writer for the Sunday Post of Canada. A member of the National Press Club, Periodicals Writers Association, Canadian Authors Association, and National Writers Club, Barbara has had a long time interest in child abuse and neglect, and has devoted her time and talent unstintingly to the CSPCC.

**June Jenkinson** was in charge of the Medical Records Department at the Mental Health Centre Penetanguishene before she began her career as a homemaker when her first child was born. Now with her youngest age 6 she is shifting from the informal economy back to the formal economy on a part-time basis. Her quiet competence has done much to keep the rapidly expanding and complex membership records of the Society in order.



Barbara Florio Graham Media Consultant



June Jenkinson Membership Secretary

#### "TO PREVENT THE PERMANENT EMOTIONAL DAMAGE CAUSED BY INADEQUATE CHILD CARE"

#### GENERAL LONG TERM OBJECTIVES:

- 1. To unite those who already understand the crucial importance of the early years, and the enormous costs to both the individual and society of child rearing practises which inflict permanent emotional damage on children.
- 2. To keep abreast of relevant research.
- 3. To provide an organizational focus to effectively articulate the concerns of the Society.
- 4. To catalyze action to improve the quality of child care in Canada from the perspective of emotional health.

#### SPECIFIC SHORT TERM OBJECTIVES:

1. Improve the Journal

- selection of a broader range of articles from individuals, journals, and international sources.

- more current and detailed reporting of relevant events in Canada.

- a stronger visual presence.
- increased frequency of publication.
- 2. Increase membership

With the present format, the printing cost per Journal decreases until there is a printing run of 5,000. A membership of 5,000 would provide a stable annual budget independent of specialized fund raising which would permit significant improvement in the Journal.

What is so striking is that we, with justification, are now showing great concern about the dangers of environmental pollution, while pollution of the hearts and minds of our children is still viewed in the same unseeing way that dangers to our physical environment were twenty-five years ago, when it did not occur to us that change was necessary.

## Youth, Fifteen, Hangs Himself in Training School Closet

This was the headline of an article in The Toronto Globe and Mail following the tragic death of a teenager in one of Ontario's training schools.

Several months later, a five day inquest into the boy's death was held with witnesses called to give testimony about every aspect of the patient's background and his treatment in the training school.

What is of particular interest is that the Crown Attorney, Mr. Douglas Drinkwalter, also called expert evidence dealing with early prevention programs. Subpoenaed to testify was Dr. Barrie Evans, a Psychologist who has worked with the Children's Psychiatric Research Institute in London, Ontario since 1974 and is now involved full-time with a team of co-workers in the Institute's Home Visiting Program for Infants. The following account gives some idea of the type of work being done.

The Children's Psychiatric Research Institute's infant programme is a home visiting programme which uses a variety of approaches to deal with the wide variety of cases seen. An illustration of our approach is given in the following description of two cases, one who was referred initially because of significantly delayed development and his brother who was 'at risk'.

#### **TWO CASES**

Jason' at 16 months was referred by the Family & Children's Services worker. A developmental assessment found him to be functioning at an average of 10 months. Subsequent investigations at the Children's Psychiatric Research Institute did not reveal an organic cause and contributing factors appeared to be inadequacies of interaction, poor parenting, understimulation from a depressed single, low intelligence mother. The parent-infant therapist visited the mother, Betty, weekly. Initial goals were simply to develop any kind of positive interaction between parent and infant. Appropriate interactions were modelled and rewarded. Specific objectives were then introduced to develop all aspects of behaviour: cognitive, communicative, fine and gross motor, and personal-social. Disorganized daily schedules were a feature of this child's inadequate environment and specific goals were set up to improve these. The parent-infant therapist rewarded Betty's keeping to schedules by social reinforcement and bus tickets. Progress towards the goals was made and in 8 months, when Jason was reassessed at the age of 2 years, he had gained 8 months of development. Readministration of the H.O.M.E. Inventory' showed marked improvement in the areas of 1) provision of appropriate play materials, 2) maternal involvement with the infant, 3) opportunities for variety in daily routine.

Unfortunately, Jason was still in the borderline intelligence range and he was referred to a developmental preschool. Follow-up assessment at 33 months shows that he continues to score in this range of intelligence. While it was possible to improve Jason's functioning while he was in the programme, we were not able to make up the early delays that he showed and he continues to have some significant developmental delays.

We were coming to the end of our programme with Jason when the second child was born, Allan was born several weeks premature but fortunately did not have any severe complications such as Respiratory Distress Syndrome. We felt he was nonetheless 'at risk' and he continued with us as a client. Early behavioural assessment on the Brazelton Scale showed him to be a fairly adaptable infant, but with slight hypertonicity that was exacerbated by mother's rough handling. He was an active infant and definitely not a "cuddler".

1. Names and identifying details have been changed to protect anonymity.

2. H.O.M.E. (Home Observation for the Measurement of the Environment), (Bradley & Caldwell, 1977).

Shortly after Allan's birth, stress in Betty's personal life above having to care for two demanding young children led to a crisis. This was heralded by a symbolic dream where she dreamt that her apartment was on fire. Sometimes both children would be burned, sometimes both children would be burned, sometimes only Allan and sometimes they would both be saved. We recognized the ambivalence towards Allan contained in this. The crisis took the form of a systemic illness in Betty which necessitated both children being removed to temporary care. As she began to feel better, Betty began to make visits to the foster home where some teaching of parenting was done with the parent-infant therapist present. Betty's physical and mental health improved as she began to live again with her common-law partner. Soon Allan was able to go back home following some successful visits. Everything appeared to be going well. At this point in time, Allan's development at 5 months of age was entirely normal on the Bayley Scales, and we discharged him with continued follow-up from the community agencies. While we might need to become reinvolved, we are hoping not to and are hoping that Allan might never need to come to the Children's Psychiatric Research Institute. ■

Following Dr. Evans' testimony, Dr. Russell Fleming was sworn to give evidence based on his experiences with teenage patients in the maximum security facility at Penetanguishene, Ontario. Having just heard Dr. Evans' testimony, Dr. Fleming volunteered a number of opinions of his own related to prevention.

"I think that what Dr. Evans is doing is exactly the kind of thing that we ought to be putting our money on in terms of what's going to have an effect in the long term. It's not by accident that psychiatrists don't get into preventive programs very much, because psychiatrists are trained in medicine and medical doctors treat problems. They react to illnesses and spend a lot of time focusing on how you can cure the problem after it has happened rather than trying to prevent, in a sort of broad way, the development of problems at the beginning. At any rate, I think that what Dr. Evans is doing is exactly the kind of thing that ought to be done. If for example he has been able to influence one mother to become a competent, effective parent, rather than an inadequate poor parent, the results in her one or two or however many children, the long term results of that one interaction will pay for his salary several times over. Because if that mother turns out to be a good mother, having had this input at this early stage, you can see the impact of that if her children grow up to be competent, mature, fun-loving, average members of society as opposed to severely disabled, emotionally disturbed people who go through their lives costing this system, purely economically from one stand-point, in terms of psychiatric hospitalization and penal institutions and all the rest of it. So that's exactly the kind of program that could have a very wide reaching effect in terms of dealing in the long range with the kind of problem that we are talking about.

The difficulties are of course that you can't measure results for fifteen years or so and it's a very difficult thing to reach the people that you ought to be reaching because in a basic sort of way you are often preaching to the people who are already converted. The one thing I would say about Dr. Evans' particular approach is that what he is doing is not really quite primary. He really is dealing with problems that are already in existence, which makes it technically Secondary Prevention. Primary Prevention for this kind of problem would really be identifying in advance the people who are at risk in terms of not being capable of carrying out proper and competent, warm and empathic child rearing practises

### I think that what Dr. Evans is doing is exactly the kind of thing that ought to be done.

...if you look at the very most severely disordered personalities...you'll find that the disturbance in the first three years of their life was absolutely unbelievable.

Exactly how you do it, exactly how you identify those people even before conception of the children is a real problem. I am not sure it couldn't be done if everyone believed it was important to do it. It is a matter of how much you are going to impose on people or infringe on people's personal privacy and civil rights and so on. I really do like the idea of giving people incentives, even simple monetary incentives, for example, to show up for educative programs or examination that could identify problems before they develop. For example, if you could give somebody an incentive either in the baby bonus cheque or a break on their OHIP premium, if you could give somebody an incentive, somebody who is planning to have children, to show up at a clinic or accept a visit into the home, and you could persuade that person to return for this monetary reward to accept some helpful input, then in advance that parent might be prepared for example for the fact that having a baby is going to change his whole life. He is going to be up at night, he is going to lose sleep, he is going to feel like belting the kid, it's going to interfere with his social life because you suddenly need a babysitter if you want to go anywhere. If people are prepared in advance for all of these problems, they'd be a little less likely to get into difficulty because they'd at least have some preparation in advance for the problems that arise.

#### PREPARATION FOR PARENTHOOD

It's like having a fire drill. If the building catches on fire and you don't know which exit to go out, you may run somebody down getting out, but if you had a fire drill, as boring and as mundane as all that seems to be, then when the fire does happen you may know which exit to go out, and it may be as simple as that. So if you have some warning in advance of the problems that can arise in this very difficult problem of rearing children then you may recognize in yourself the difficulty, the interactional difficulty that's coming up between you and your baby in the first few weeks or few months or few years of life.

#### MOST CRUCIAL TIME

And as Dr. Evans pointed out, he's working back at that stage of things because that is indeed the very most crucial time. He's pointed out that babies and small children are highly adaptive, they're in a stage of rapid development, and therefore at a time when intervention can have a great effect. They are also at a time when the worst and most serious damage, and I'm talking about psychological damage, can be done in terms of long term development.

If you work in a place like Penetang and you examine histories of hundreds of people who have a diagnosis of personality disorder, you find (and this is nothing new, this is in lots of text books, and it has been for years), but if you look at the very most severely disordered personalities, the socalled psychopaths, the absolutely remorseless criminal misfits, you'll find that the disturbance in the first three years of their life was absolutely unbelievable. You'll always find the most intense kind of psychological disturbance in the family situation, you'll always see it, and that is indeed where the problem begins. So it may not be very valuable to be talking about what you are going to do at age fifteen for a kid who's had a very severe difficulty early on.

There's still a very strong traditional belief that kids are parents' personal property and they can do with them as they please. The problem is that by the time the kid's fifteen all you can do is gaze into your retrospectroscope and see that the parents really did a bad job before the child was three years old. They didn't know they were doing a bad job and neither did anyone else, but in fact something very serious happened in those early stages. So that's where the focus of prevention ought to be.

It's very easy sometimes for the mental health professional to look back over the history and say yes it went wrong here, and here, and here, and here, and all these things are wrong with this family and all need to be changed and so on. Well, I tend to shy away from blaming parents or even pointing out to parents where I think they may have made mistakes, unless I feel there is something constructive they can do with it. If you are just going to talk to a parent to...well, to dump on him a bit because he's doing a bad job, because you've got some feelings about how he screwed up his kid, forget it, he'll be angry with you for telling him because you'll be angry, and in the interaction you'll let him know that you think he is off base and there'll be no benefit from it because the parent will go away simply feeling criticized and put down.

So Primary Prevention has to go back to that very early stage, to the point of identifying the potential problem parent even before the children arrive on the scene.

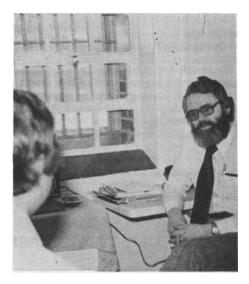
#### LICENSING PARENTS

It's surprising that we can't do something more to approach the problem on that kind

of comprehensive basis. After all if you recognize that driving a car requires some intelligence, some skill and some knowledge of the rules of the road, you train people, you give them the test and if they pass you give them a license, and if they don't pass you don't give them a license. They may or may not become good drivers but certainly you identify the ones that won't be good drivers and they don't get a license. But when it comes to something as important as looking after our kids and helping them develop into reasonably productive and warm empathic human beings, we're bound up by a lot of constrictions on approaching the problem in that kind of direct way. Certainly the main complaint about the kind of thing I'm advocating would be that it's an infringement on people's personal privacy and personal rights. There's still a very strong traditional belief that kids are parents' personal property and they can do with them as they please.

The whole thing has to do, psychodynamically, with the baby developing a warm and close and genuinely human relationship with another human being. And when somebody turns out to be a personality disorder at age 15, that's the process that failed. That very important establishment of the ability to relate on a warm and human level has been missed. And if you examine the very severe psychopathic personality disorders you'll find that that's the core ingredient the personality is missing. They don't have the ability to relate in anything more than a superficial way, and by the time they get to be fifteen there probably is nothing you can do about it."

Dr. Fleming graduated in Medicine from the University of Western Ontario in 1969. On completion of his specialist training in Psychiatry, he became the first Director of the Forensic Assessment Unit at the Maximum Security Division of the Mental Health Centre at Penetanguishene. For the past six years Dr. Fleming has headed this specialized team examining approximately 175 cases a year and providing reports to the courts. Each patient qualifies for assessment in this Unit either because of the seriousness of the charges or the fact that they represent a special danger to others. Since 1975 Dr. Fleming has testified in the courts of Ontario at all levels on close to 200 occasions presenting, to the scrutiny of cross-examination, evidence on insanity, dangerousness, and treatability of patients examined.





THE CANADIAN SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

#### CSPCC 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 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 children 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 maim a human being by failing to provide this quality of care during the first 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.

"Some day, maybe there will exist a well considered and yet fervent public conviction that the most deadly of all possible sins is the mutilation of a child's spirit . . ."

Erik H. Erikson

### If Our Credo Makes Sense To You ...

JOIN THE CSPCC TO:	Strengthen an organization that is dedicated to a renewed emphasis on the values of Trust, Empathy and Affection.
JOIN THE CSPCC TO:	Learn more about the Prevention of Emotional Damage. Better preparation for parenthood, greater concern for proper care during pregnancy, obstetrical practices which facilitate bonding, a higher priority for the empathic care of infants, higher status for homemakers, and stronger community support for parents with young children are examples of such preventive measures.

JOIN THE CSPCC TO:

Keep in touch with others who share these concerns by receiving the CSPCC Journal regularly.

Child battering and other forms of bodily assault have this enormous advantage:

The attacker and the victim both know who is doing what to whom. The results are observable at the time the crime is committed, and the damage can therefore be treated.

In contrast to this kind of identifiability, the brutalizing of innocent minds often appears as **virtue** to the assaulter, as care to the victim, and as a strong sense of **duty** to any witnesses. No one sees a crime; the consequences appear years later as murder, rape, theft, alcoholism, chronic failure, or most often, plain and costly unhappiness.

A public bewildered by the social cost of these problems looks around for someone to blame, and can find only a victim who has long since forgotten how he was crippled.

Heart disease, alcoholism and smoking are now well known as social problems. Being known, and being visible, they are a small threat in comparison with the systematic mental crippling of children. Surely, also, the sum of human misery arising from disease can be no more than the frustration, self defeat and sadness passed on by one blinded generation of children to the next.

Morality has nothing to do with the urgent need to prevent psychological abuse. In a world menaced by its own need for self destruction, it is a matter of survival.

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Tis unto children most respect is due. Juvenal

The child should spend a substantial amount of time with somebody who's crazy about him. Bronfenbrenner

Infancy is the perpetual Messiah, which comes into the arms of fallen men, and pleads with them to return to paradise.

Emerson

# The Difference Between Normality and Neurosis

Neurotic mechanisms may drive activities that are useful and creative, and these mechanisms may be as neurotic as those that produce alcoholism, stealing, and other patterns of socially useless or destructive behaviour. Man can be neurotically good as well as evil, neurotically constructive as well as destructive, neurotically industrious as well as neurotically lazy, neurotically gregarious as well as neurotically misanthropic, neurotically generous as well as neurotically selfish, neurotically brave as well as neurotically cowardly. If we hope ever to solve the problem of the neurotic component in human nature, we dare not overlook the fact that activities that are intrinsically wholesome and productive may serve two masters within one individual - the one healthy and the other neurotic - and that even a slight change in the configuration of external situation or the mere passage of the years can shift the controlling influence from one group to the other, thereby tumbling what has seemed to be a well-adapted life into profound illness.

#### DEFINITIONS

These observable clinical facts of human life challenge us to ask whether human behaviour can be explained in terms that will make this seeming paradox understandable. Any attempt to answer this question demands a precise definition of what we mean by normality and by the neurotic component in human life. I will attempt to give such a definition.

This definition will be in terms solely of the balance between conscious and unconscious psychological processes in the determination of conduct. Such a contrast between normal and neurotic can have nothing to do with the statistical frequency on any act. The fact that 99 per cent of the population has dental caries does not make cavities in the teeth normal. Nor has it to do with the legality of an act or its conformity to social mores or its divergence from them, since one can be good or bad, conformist or rebel, for healthy or for neurotic reasons. Even the apparent sensibleness or foolishness, the usefulness or uselessness. an act is not the mark which of distinguishes health from neurosis: since one may do foolish things for sensible reasons (for instance, as an initiation stunt), and one may do sensible things for very foolish reasons indeed, as for instance out of phobic anxiety. All of this will seem strange only to those who think of neurotic as synonymous with queer or eccentric or foolish or weak or immoral or rare or useless. We must learn instead that there is literally no single thing that a human being can think or feel or do which may not be either normal or neurotic or, and more often, a mixture of the two; and the degree to which it is the one or the other will depend not upon the nature of the act, but upon the nature of the psychological forces that produce it. This is true of work and play, of selfishness or generosity, cleanliness or dirtiness, of courage or fear, of a sense of guilt or a sense of virtue, of activity or indolence, of extravagance or penuriousness, of ambition or indifference. of ruthlessness or gentleness, of conformity or rebellion, of playing poker or writing poetry, and even of fidelity or infidelity. Determining all of these there is a continuous, unstable, dynamic equilibrium of psychological forces; and in this flux it is the balance of power between conscious

...it is the balance of power between conscious and unconscious forces which determines the degree of normality or the degree of neuroticism... ...consciously and unconsciously organized levels of the personality have different characteristics and exert quite opposite influences on behaviour.

and unconscious forces which determines the degree of normality or the degree of neuroticism of the act or feeling or trait.

We start with the fact that in every moment of human life our conduct, our behaviour, our thoughts and our feelings, our decisions and plans, our hopes and purposes, and our reactions to one another are determined by a complex group of psychological processes. Of some of these psychological processes we are fully conscious, while of others we are wholly unconscious. (The presence of the buried layers can be determined only by special methods of investigation and evaluation of which psychoanalysis is the pioneer and still the most important.) This basic fact, namely, that man operates psychologically on at least two levels, is of more than academic interest. It has a quite practical importance in human affairs; because the consciously and unconsciously organized levels of the personality have different characteristics and exert guite opposite influences on behaviour.

#### **CONSCIOUS PROCESSES**

The conduct which is determined by conscious processes is flexible and realistic. Because its motivations are conscious, they can be influenced by conscious appeals to reason and feeling, by argument and exhortation, by success and failure, by rewards and punishments. In short, it has the capacity to learn from experience. Therefore normal behaviour is in the truest sense of the word free - free, that is, to learn and to grow in wisdom and understanding.

#### UNCONSCIOUS PROCESSES

In contrast to this, that behaviour which is determined by unconscious processes is

rigid and inflexible. It never learns from experience. It cannot be altered by argument or reason or persuasion or exhortation or rewards or punishment, and not even by its own successes and failures. Since by its very nature it can never reach its unacknowledged and unrecognized goals, it is insatiable and endlessly repetitive, repeating its errors as often as and perhaps even more often than its successes, and marching ahead on blindly stereotyped paths. This happens whether the pattern of behaviour has brought success or failure, and whether it has been a source of happiness or of unhappiness either to itself or to others. Thus neurotic behaviour can learn nothing. It cannot change or develop or grow. It is enslaved.

It would be a mistake to assume from this that any act or thought or feeling is determined exclusively by conscious or exclusively by unconscious forces. Instead a mixture is always at work; and the modern concept of the neurotic process derives from this fact. Whenever most of the determining psychological forces are conscious, the resulting conduct will merit being called normal, because it will be free to learn and capable of adapting flexibly to changing external realities. On the other hand, where unconscious forces dominate, or where conscious and unconscious forces pursue incompatible goals, then the behaviour which results will deserve to be called "neurotic", precisely because it will be a rigid, repetitive, unadaptive, ineffectual compromise, serving the needs of neither the conscious nor the unconsciouc aspirations and motivations.

If these statements are valid, then we may state categorically that if there were no such thing as unconscious psychological processes there would be no neuroses. There would be no neuroses

# ...if there were no such thing as unconscious psychological processes there would be no neuroses.

...if the psychological conflicts of infancy and childhood could take place in the full light of consciousness, then the neurotic process would never be launched in human life.

which manifest themselves in obvious symptoms and which we encounter in daily practice as the symptomatic psychoneuroses. Nor would there be those masked neuroses which express themselves insidiously in distortions and exaggerations of the customary patterns of living, and in the guirks which we look upon as the eccentricities of normal people, and in the neurotic processes which result in delinquency. From this we may conclude further that if the psychological conflicts of infancy and childhood could take place in the full light of consciousness, then the neurotic process would never be launched in human life.

This leads us to the fact that early in the

ontogeny of every infant and child a fateful dichotomy occurs, a dichotomy between those psychological processes which develop on a conscious level and those which evolve on an unconscious level and which exert their influence on our lives without our knowing of their existence. There is no single chain of events in human affairs which has greater consequences, since it is this dichotomy that makes possible the neurotic process. ■

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Photo Courtesy David Ohashi

# How Can Neurotic Parents Raise Less Neurotic Children?

...Since the neurotic process in masked and well-disguised forms is in fact universal, then it follows that all parents, young and old, struggle to play their parental roles in the face of limitations imposed not by lack of knowledge or good will, but by those obligatory patterns of thought, feeling, purpose, and action which the neurotic components in their make-up impose, thereby limiting the freedom and flexibility with which they can apply both their acquired knowledge and their native intelligence. In subtle ways the neurotic process distorts parenthood as it distorts creativity in science and art. Furthermore, since we cannot begin by curing everybody or by undoing something universal which already exists, how then can hampered parents protect their own young from the impact of the neuroses of their elders? How can we bring up children healthier than we have been ourselves, healthier in the sense that they will develop relatively freer from domination by the dark empire of obligatory internal processes?

If we are optimistic enough to face hard facts with tough-minded realism, and to acknowledge that this is extraordinarily difficult, we can say that it is at least possible. Whether it is probable and whether it will be done is another matter.

#### CULTURAL REVOLUTION

In the first place a cultural revolution is timidly showing its head. As I have pointed out elsewhere, there was a day when parents said, "What did I do to deserve a brat like this?" Today those same parents say, "What did I do?" This is the start. The pendulum undoubtedly has swung too far, and the parent has often developed feelings of omnipotent power, omnipotent power to save, but also omnipotent power to destroy. This has generated much anxiety and guilt which sometimes has corrupted judgement and paralyzed action. Nonetheless the swing from blaming the child to the exploration of one's own contributions to his problems is a step forward. When the parent puts his own performance as a parent on the autopsy table of life-experience to examine it for his own mistakes, he is following the path which made medicine mature. The autopsy table was medicine's greatest lesson to Man, a lesson in honesty and humility. It is medicine's great spiritual contribution to human culture. Insofar as modern psychiatry puts human life on that same autopsy table, and insofar as the modern parent has the courage to do the same thing with his failures as a parent, he follows the path leading to health and maturity which was first explored at the autopsy table by modern medicine. Of this change we have some right to be proud.

But if this essential change is to be implemented, it requires many other concurrent changes; and here we encounter new difficulties. That which is rigid and unchanging in human nature tends to entrench itself in institutions which are themselves firmly entrenched. Institutions are manned and implemented by people who in turn are dominated by anxieties and compulsions. Therefore people who may not want to pay the price for outworn institutions may nonetheless be unable to bring themselves to change them either; because institutional changes bring closer those anxieties against which the institutions have been a defense. The result is that at any prospect of change, individual anxiety increases which in turn produces anger; and anger always increases the rigidity of old compulsions. Note how precisely this struggle over social change parallels the mechanism of even the simplest neurosis. For many people institutional change is like depriving a hand-washing compulsion of

How can we bring up children healthier than we have been ourselves, healthier in the sense that they will develop relatively freer from domination by the dark empire of obligatory internal processes? ... when timid adults bury in silence the highly charged inner experiences of childhood, the neurotogenic effects of these experiences are intensified...

access to soap and water. It gives rise to restless uneasiness and increasing anxiety, then to a deep surge of rage which in turn intensifies the original compulsive necessity. So we face the paradox: Progress requires change, which in turn triggers every neurotic defense which opposes change. This is why it is hard to change not only individuals, but also those institutions in which individual neuroses are invested.

#### CONSPIRACY OF SILENCE

Even to change that destructive conspiracy of silence with which we surround childhood involves enormous social consequences and requires great courage. Let me elaborate further on this conspiracy of silence because it provides a particularly clear example of how difficult is the problem of how to make a new human being healthier than his predecessors, how to help neurotically burdened parents to bring up less neurotically burdened children, and this progressively down through the generations. Let me first quard against misunderstandings by pointing out that to say that the child has the right to know what goes on inside him is not the same as saying that he has the right or the need to act everything out blindly. This was a transitory error of the first two decades of the century. My premise is that when timid adults bury in silence the highly charged inner experiences of childhood, the neurotogenic effects of these experiences are intensified, and at the same time become less accessible. This has long been known. Yet there is a persistent, insidious, and unintended social conspiracy of silence which invades every aspect of the

child's life, shrouding all of his most formative experiences in mystery. This establishes that basic pattern of fragmentation and dissociation which we call repression. The silence of the adult means to the child a silent acquiescence in the child's confused and often unexpressed misinterpretations of experience.

Furthermore, the brighter the child the greater is his confusion, because the bright child picks up many verbal symbols early, before he can relate them to precise experiences. His verbal precocity is hailed with enthusiasm; but their obscure and overlapping meanings are never corrected because the world does not deliberately seek to bring them out into the open, not to help the child to become articulate about his confusion. His bright slips are greeted with smiles instead of with serious thought. And what the adult world fails to talk about to the child becomes taboo: just as those parts of the body which the adult covers become taboo, even if nothing is ever said against them.

The tradition that you do not talk about anything to a child until the child talks about it first asks the child to have greater courage than the adult. This applies to such basic experiences as separation, death, mutilation, disfigurement, violence, murder, and rape. It is embodied in such words as "private", "privacy", and "private parts", which imply to the child that his body has nameless parts and processes and apertures and products which are special and peculiar to him, and which he must never acknowledge or explore or think about or ask about or name or compare. Any impulse to inquire becomes in itself a sinful proof of an inner evil. The baby is proud of his body

...there is a persistent, insidious, and unintended social conspiracy of silence which invades every aspect of the child's life, shrouding all of his most formative experiences in mystery, ...what the adult world fails to talk about to the child becomes taboo; just as those parts of the body which the adult covers become taboo, even if nothing is ever said against them.

functions. The toddler runs naked happily. Something tragic happens to that proud and happy self-image when the potty chair is no longer a throne in the centre of the nursery but is shut away in a room that is as shiny and scrubbed as an operating room with its compensatory aspirations for cleanliness.

#### CALLING A SPADE A SPADE

In this way, under the euphemistic term of modesty, body shame is born; shame about the body, its grooves and folds and shadowed areas, its apertures, products, and smells. And most of this is carried on without calling any spade a spade, without any names, or else with names that are imitative or figurative or allegorical or diminutive, whether for parts of the body or the body products or for the rooms in which bodily functions are carried out. Thus an unwholesome atmosphere of shame and mystery is created about every aspect of our inner body processes.

It is frustrating to the child that the body is not transparent and that so much that is interesting and exciting and challenging happens under the clothes and under the skin, where he cannot explore and where he cannot see or investigate. When in addition there are no words for any of it, when the very impulse to explore is felt as evil, we create for the child and for ourselves a hierarchy of evil. Clean and good is that which you can name and talk about and look at and touch and put in your mouth. Less clean and less good and a little dangerous are all the things that you can touch and look at and name and talk about but not put in your mouth. Next are the things that cannot be touched, but can be looked at, at least out of the corner of your eye, and named and discussed. And then in quick succession are those things which must not be looked at, which must not be talked about or named, and finally which must not even be thought or experienced emotionally. What the child must not touch or smell or taste or feel or experience or talk about or name or even think about becomes automatically dissociated. No symbol for it can be used. At the most false symbols must be substituted. The nameless loses its link to any simple direct consistent symbolic representation, or can be represented if at all only by distorted, masking, and dissociated symbols. This is the initiating step in the process of repression which isolates objects and acts and impulses and events and conflicts from those verbal symbols which are the only means by which we can sample that which goes on inside of us, the only method to inquire about it, to compare experiences, to check impressions against reality, to communicate to ourselves about it in internal rumination or to communicate about it externally to others. By our silence we make correction impossible. By our silence we sever or distort the link between the symbol and its roots. This is our conspiracy of silence.

But let us not fool ourselves. The emotions are still there, focused around the unnameable, the wordless, the unthinkable, the untouchable. Therefore they too become detached, freed from their links to ti me and place and object which were their original adequate precipitants.

Therefore it is not merely some experience or even a long sequence of stress or trauma which causes illness. It is not even the struggle among irreconcilable and

What the child must not touch or smell or taste or feel or experience or talk about or name or even think about becomes automatically dissociated.

# ...let us not fool ourselves. The emotions are still there...

unattainable impulses that determines sickness or health. It is the extent to which these experiences can be represented by usable and undistorted symbols, so that they can be reexamined and reexperienced and compared and communicated and thus corrected. When the adult surrounds all loaded experiences with silence, including, incidentally, his own mistakes, he makes it certain that neither he nor his children, nor his children's children will ever learn from past errors, whether these are his or theirs or both. Yet to learn from error, from the autopsy table of experience, is our only potential source of wisdom. And this, as I have said, is precisely what modern psychiatry is trying to introduce into human culture

But if we attempt to alter this subtle and pervasive conspiracy of silence, we find ourselves up against taboos that have been entrenched for generations in laws, traditions, religious rituals and taboos, in family life, and in our political and economic systems. Therefore the move from the struggle with individual psychopathology to the struggle with social psychopathology is closely interrelated.

Before turning to this social problem I must ask you to think back to one further aspect of the individual struggle with the neurotic process. Let us ask who does the greater harm to children, the parent with an outspoken symptomatic neurosis, such as a dirt phobia and its attendant variety of cleaning compulsions, whose symptoms are so obvious that the child can set up protective isolating defenses, or alternatively the parent who expresses his inner conflicts only in minor ways such as insistent and repetitive challenges to orderliness, to keeping everything undisturbed, always tidying up, never really tolerant of the comfortable and homey disorder of human living and who is therefore constantly in conflict with children over the impact of their lives on the mere physical setting of the home. Who does greater harm to children, the lovable, impecunious alcoholic parent who spends his time and love on them lavishly, or the upright, hard-driving, creative, socially valuable, socially rewarded, but compulsively overdriven writer, painter, lawyer, analyst, minister, scientist, doctor? These are not easy issues.

#### THE ONIONS AND THE GARLICS

In making this point to medical students, | frequently have said that there are only two kinds of neuroses: the onions and the garlics. You will recognize the fine difference. Onions stay with you, long after they cease to offend other people. Many neuroses are like that. They cause the patient pain, but cause less pain to those around him. From these the patient wants relief. Garlic, on the other hand, offends other people long after it ceases to annoy you. Many subtler neuroses are like this unfortunately more prevalent than those which cause pain to the patient. Their impact on families and on children are more subtle and far more destructive. These are the subtle manifestations of the neurotic process which do not show up with clearly defined or bizarre symptoms. They show up as stereotypes of behaviour which when it is flexible is entirely normal. As I say, these are the garlic neuroses that cause little pain to the patient but great pain to everybody else. These are the neuroses on which people even pride themselves and with which they want no tampering...

But if we attempt to alter this subtle and pervasive conspiracy of silence, we find ourselves up against taboos that have been entrenched for generations in laws, traditions, religious rituals and taboos, in family life, and in our political and economic systems.

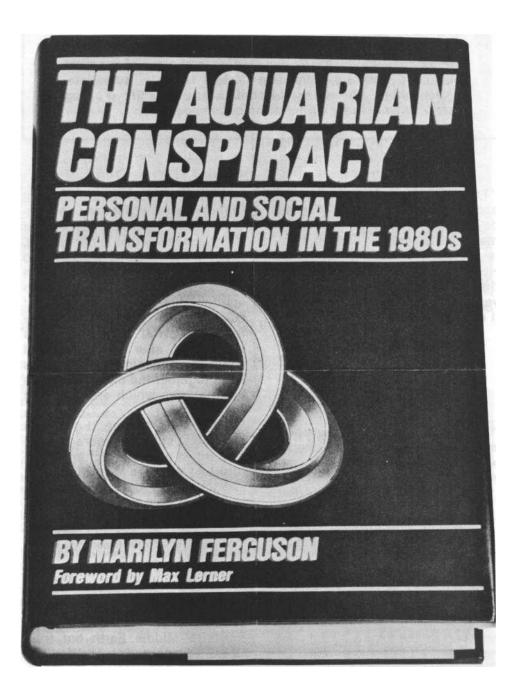
# How Cultural Values Reward Neurotic Behaviour

... Finally, we must consider our economy, increasingly gambling its success or failure on consumption by the installment plan. Has anyone since Veblen asked what would happen to such an economy if the masked neurotic ingredients in human nature were by sudden magic to be eliminated? What would happen to the fashion cults, the beauty cults, the food and drink and tobacco cults with their exploitation of orality, the excretory cult, the cleanliness cults, the size cults, the height cults, the strip-tease cults? Consider the exploitation of hypochondriasis through the drug houses and even our more elite publishing houses. Take also the endless whetting of consumer craving, the exploitation of the "gimmes" of childhood by transmuting them into the "gimmes" of adult life. Consider the ministering to neurotic needs through size and power: the knight of old replaced by Casper Milguetoast in General Motors armor, complete with chromium, unneeded size, unused seating capacity, and a pointless, illegal, and unusable capacity for speed. Or consider the search for happiness anywhere else than where one is, whether it is an adolescent with his hot-rod, or the travel industry selling vacations on the installment plan.

To repeat, what would happen to our economy if we were to get well? And what does the exploitation of neurosis by so many forces in our culture do to the neurotic process itself? Is this a culture that breeds health? Is this a culture that we can afford to be complacent about? Or have we allowed the enormous creative potential of private enterprise to be enslaved to neurotic processes in industry, exactly as the creative process in art, literature, music, even science, has become the slave of neurosis?

Lest we think that I am singling out our culture, our economy for attack, I repeat that I do not believe that human ingenuity has yet devised any political or economic system that does not exploit, intensify, and reward much that is neurotic (potentially even psychotic) in human nature. If the profit-driven economies exploit subtle manifestations of neurotic self-indulgence and short-term needs, so do totalitarian systems, whether Fascist or Communist, exploit power needs and power fantasies in an even more primitive fashion, rewarding the sadistic lusts and the paranoid components of human nature...

Excerpted with permission from an article entitled 'The Eagle and The Ostrich' by Lawrence S. Kubie, M.D. which appeared in the Archives of General Psychiatry Vol. 5, No. 2 August 1961. At the time of writing Dr. Kubie was on the faculty of the New York Psychoanalytic Institute, Clinical Professor of Psychiatry (Emeritus), Yale University School of Medicine, Director of Training, The Sheppard and Enoch Pratt Hospital, and Clinical Professor of Psychiatry, University of Maryland School of Medicine.



A great shuddering, irrevocable shift is overtaking us. It is not a new political, religious, or economic system. It is a new mind -- a turnabout in consciousness in critical numbers of individuals, a network powerful enough to bring about radical change in our culture.

This network — The Aquarian Conspiracy — has already enlisted the minds, hearts nad resources of some of our most advanced thinkers, including Nobel laureate scientists, philosophers, statesmen, celebrities and steadily growing numbers from every corner of American society.

"This exciting book offers something in short supply these days — vision. In a time when many feel a sense of despair, here is a buoyant message of hope. Here is a vision of a new society that gives meaning to our present years of turbulence and transition. It deserves wide readership."

> Will<sup>is</sup> Harman Stanford Research Institute, author of An Incomplete Guide to the Future

"This book has served humanity well....Now we can see how deeply we need each other along the way."

Hugh Prather author of Notes to Myself

"Marilyn Ferguson has etched, in unforgettable vividness, the intricate web of changes shaping the inevitable revolution in our culture. From a holographic universe to biofeedback, from holistic health to innovative education, from spiritual quests to new models of science, she covers the whole range of vital transformations which...will alter our perceptual world in unimaginable ways. She knits together the diverse persons and patterns which are changing our reality.

"It is exciting reading. It gives the pioneering spirit the courage to go forward. It paints a picture of the future which is uplifting and strange. I felt caught up in the book. I am recommending it to all my friends."

Carl Rogers author of On Becoming a Person

"Reading The Aquarian Conspiracy was an exhilarating experience....To me it is going to be taken up and become a force in the movement it talks about, much as Future Shock and The Greening of America did in the 1960s — as a blueprint, a manifesto, an intuition of where the winds are blowing."

> Dennis Jaffe co-author of TM: Discovering Inner Energy and Overcoming Stress

"Here is a map more fabulous than Tolkien's Middle Earth but truer than tomorrow's child. The Aquarian Conspiracy is the document of the Change, the antidote for cultural depression, the best news of the century, and a cracking good story."

Jean Houston author of Mind Games

... Human beings have a kind of optical illusion, Einstein once said. We think ourselves separate rather than part of the whole. This imprisons our affection to those few nearest us. "Our task must be to free ourselves from this prison by widening our circle to embrace all living creatures....Nobody achieves this completely, but the striving itself is part of the liberation."

The "transcenders" Maslow studied, Einstein included, seemed sadder than the other healthy, self-actualizing persons; they saw more clearly the gap between potential and reality in human relationships. Any one of them could have written a workable recipe for social transformation in five minutes, Maslow said.

"I have seen the truth," Dostoevski said. "It is not as though I had invented it with my mind. I have seen it, seen it, and the living image of it has filled my soul forever....In one day, one hour, everything could be arranged at once! The chief thing is to love." He said he realized that this truth had been told and retold a billion times, yet it had never transformed human life.

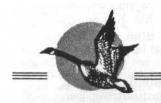
Love and fraternity, once part of an ideal, have become crucial to our survival. Jesus enjoined his followers to love one another; Teilhard added, "or you perish". Without human affection, we become sick, frightened, hostile. Lovelessness is a broken circuit, loss of order. The worldwide quest for community typified by the networks of the Aquarian Conspiracy is an attempt to boost that attenuated power. To cohere. To kindle wider consciousness. When man reclaims this energy source, the sublimation of spiritual-sensual love, Teilhard once said, "for the second time he will have discovered fire."

During the second New York City blackout, while some people were looting, others were beaming their flashlights from apartment-building windows to the sidewalks, "moving" pedestrians from one building to the next, creating a path of light and safety. In this time of uncertainty, when all our old social forms are crumbling, when we cannot easily find our way, we can be lights to each other.

page 402

This book gives heart to the tens of millions who sense the ripeness of our society for renewal and to those who despair but are willing to look at the evidence for hope.

THE AQUARIAN CONSPIRACY - Personal and Social Transformation in the 1980's by Marilyn Ferguson. Published by J.P. Tarcher, Inc., published simultaneously in Canada by Thomas Nelson & Sons Limited.



"Home of the Canada Grey"

# TOWN OF HANNA

P.O. Box 430 Phone 854-4433

HANNA, Alberta TOJ 190 November 6th, 1980

Canadian Society for the Prevention of Cruelty to Children, Box 700, 298 First Street, Midland, Ontario

Dear Sir or Madame:

Your name had been given to me by an interested citizen of Yellowknife, N.W.T.

What do you have to offer to the children of the Town of Hanna?

Yours truly,

Eugene Kush, Mayor

EK:sa

#### THE CANADIAN SOCIETY for the PREVENTION OF CRUELTY TO CHILDREN

CSPCC 298 FIRST STREET BOX 100 MIDLAND ONTARIO L4R 4P4

Mr. Eugene Kush, Mayor, P. O. Box 430, HANNA, Alberta. TOJ 1PO. December 5th, 1980.

Dear Mr. Kush:

I am most impressed that you should pose to this organization the seemingly simple question, "What do you have to offer to the children of the Town of Hanna?" I am impressed, not just because this very obvious question has not previously been asked of us by any other public official in Canada, but because the question asks us to go to the heart of the matter compared to the usual query "Could you please provide some additional information about your organization?"

Without wanting to be obtuse, I must say that our answer to your question depends very much on two other issues. The first of these is your answer to the question: "What kind of adult citizens do you want to have in the Town of Hanna twenty years from now?" If your answer to this question is that you want tomorrow's citizens to be plagued by fewer neurotic symptoms, fewer psychosomatic complaints, and fewer psychopathic personalities, (and all the personal and social carnage that ensues from these conditions), and if further you would like to see tomorrow's generation have a greater capacity to give and receive affection, a greater capacity for trust, and a greater capacity for forming lasting empathic relationships, then we believe this organization indeed has something to offer to prevent the emotional child abuse and neglect which leads to these life-long patterns.

The second issue which must be dealt with before this organization can give an appropriate reply to your question is perhaps more difficult than the first. You see, what we have to offer has much less to do with the children presently living in the Town of Hanna, than the children that will be born there at least one year from now. We believe that this shift in emphasis to tomorrow's children is absolutely crucial. Let me illustrate by way of analogy why we think that.

If you had raised the question fifty years ago, "What do you have to offer to the people in the Town of Hanna who are suffering from typhoid fever?", an organization comparable to this one would have replied - "very little, please contact the appropriate organization". But in the meantime you must mount a massive campaign of public education regarding sanitation and you must chlorinate your water supply. You will never stem the tide of new cases of typhoid fever until these measures are taken. You can go on and on devoting all your resources to the treatment of existing cases and you will never solve the problem.

So it is, we believe, with child abuse and neglect. There are many organizations in Canada today, The Children's Aid Societies of each province principal mong them, whose mandate is to meet the needs of today's casualties - those children who are presently the victims of child abuse and neglect in its many forms. Without for a minute questioning the desperate need for assistance to those children who are already damaged, it is very clear, and the analogy of typhoid fever makes the point plain, there will be a never ending supply of new cases of damaged children who require help, until the root causes of the problem are vigorously removed.

So now we come to answer your question which, for the reasons outlined above we have rephrased: "What do you have to offer to the children in the Town of Hanna who are yet to be conceived, so that when they grow up they will be less psychologically damaged than their parents, and have a greater capacity for trust, empathy, and affection?"

In this brief letter I will raise two areas in which we believe attempts at prevention should be directed.

First, there needs to be the highest priority given within your school system to ensuring that all children, boys and girls, have a most thorough and complete understanding of the intricacies of the following three issues by the time they reach an age when they are physically able to conceive children.

- 1. All the evidence which indicates that permanent physical intellectual, and emotional damage can result from inadequate care during pregnancy, birth, and the first three years of life.
- An accurate and detailed appraisal of the enormous amount of time and energy required, and assistance needed, to raise a child properly during those earliest crucial years.
- Precise detailed knowledge of normal child development, physically, intellectually, and emotionally at least until the age of three.

Secondly, there should be an organization in the Town of Hanna called something like "The Committee for Tomorrow's Children". This organization should have at least the prestige and informal power of the Chamber of Commerce, and its sole objective should be to keep the citizens of Hanna ever mindful that the highest priority of all the townspeople should be to ensure the well-being of families with children under the age of three. Among their activities would be for example, repetitive exposure of the citizens to the hidden costs of excessive addiction to consumerism, materialism (and status based on these), and careerism, and the ways in which these addictions interfere with giving the highest priority to child care during the most crucial early years.

Obviously, the above is little more than a cryptic statement of what could be done were a town such as yours to seriously consider our answer to your question.

seriously consider our answer to your question. Much of the material in previous issues of the CSPCC Journal relates to the issues we have raised, and in particular I would draw your attention to the following articles in the enclosed Journals. "Family-Centred Maternity/Newborn and Early Childrearing in Canada", (Vol. 3, No. 4, pages 32-35); Parenting Education in Schools, (Vol. 1 No. 4, pages 20-23); and "Living Poor with Style", (Vol. 2 No. 4, pages 12-15). I might also mention two books of direct relevance "Every Child's Birthright" by Selma Fraiberg, Basic Books, Inc. 1977 and "The First Three Years of Life" by Burton L. White, Prentice-Hall, Inc. 1975. Sadly, the majority of your citizens (and voters!) are likely to be so seriously addicted to today's way of life that they will defensively deny that so much can be permanently determined so early in life, in order to rationalize their continued active or passive opposition to doing those things which will prevent tomorrow's damaged children. Recognizing this situation, the goal of the CSPCC at the present time is simply to unite those who already accept the position we have put forward in this letter.

Once again, thank you for posing this exciting and sensible question.

Yours respectfully,

E.T. Barker us.

E.T.Barker, M.D., D.Psych., F.R.C.P.(C) President, Canadian Society for the

Prevention of Cruelty to Children.

jaj

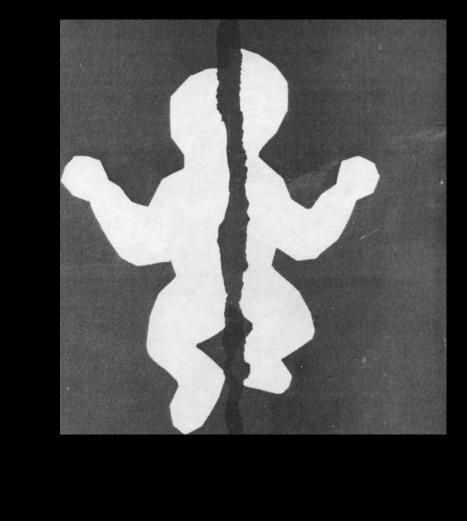
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Photo Courtesy Linda Rainsberry

CSPCC Journal Winter 1981

#### Childhood Experiences as Causes of Criminal Behaviour - A Senate Report

### A Report of the Standing Senate Committee on Health. Welfare and Science



Available in Canada through Authorized Bookstore Agents and other bookstores or by mail from Canadian Government Publishing Centre, Supply and Services Canada, Hull, Quebec, Canada K1A OS9. Catalogue No. YC17-304/2-01E ISBN 0-660-10680-9. Canada: \$2.95.

### Table of Contents

#### Acknowledgements / vii

Foreword / x

Introduction / 1

#### Part I — The Prenatal Period / 5

- A. The Genetic Factor / 8
- B. Malnutrition / 10
- C. Intra-uterine Abuse / 13
- D. Prenatal Emotional Stress / 16
- E. Summary and Recommendations / 17

#### Part II — The Perinatal Period / 19

- A. The Hazardous "Miracle of Birth" / 20
- B. Prematurity / 22
- C. Bonding / 25
- D. Summary and Recommendations / 27

#### Part III — Early Parenting: The Post-natal and Early Childhood Period / 29

- A. Emotional Privation / 33
- B. Child Abuse / 37
- C. Violence in the Home and on the Streets / 43
- D. Television / 44
- E. Minimal Brain Dysfunction, Learning Disabilities, Hyperactivity, and the Gifted Delinquent / 46
- F. Multiple Factors / 50

Poverty / 50

Alcoholic or Criminal Parents / 52

G. Summary and Recommendations / 54

#### Part IV — Conclusion and General Recommendations / 59

Afterword by the Honourable Fred A. McGrand, M.D. — Human Violence — Can It Be Contained? / 65

#### **Recommendations** / 67

Footnotes / 74

Appendix A — List of witnesses who appeared before the Committee / 87

Appendix B — List of briefs submitted to the Committee / 91

### An Afterword by the Honourable Fred A. McGrand, M.D.

#### Human Violence — Can It Be Contained?

"Man cannot understand himself unless he comprehends the cosmos."

(Rene Dubois)

We have referred to the control of communicable diseases by vaccines and anti-toxins. Unfortunately, we cannot inject such remedies into the bodies of children in order to protect them from criminal tendencies. We have, however, equally effective psychological antidotes — love, understanding, compassion, sympathy, empathy — that can rescue the embittered young child. If supplied at the proper time they restore selfesteem and confidence in others to replace the resentments, distrust, fear and hatred which so often lead to violent behaviour.

When we say that we are "our brother's keeper" we are accepting an obligation to preserve our species in good order. All living creatures have an inherited responsibility for the continuation of the species they belong to. We can prevent the spread of violence if, in the home and in the classroom we teach children that our species must be protected from violence in any form. At the same time we should teach them that, since all animal and non-sentient life is interdependent, in order to preserve our species we must respect and preserve the other species that co-inhabit the earth.

Ecologists are alarmed at the destruction of our environment. It is not only necessary to tell children about our ravaged resources, but also to impress upon them that bonding with the biosphere is as important as bonding with the human family. If we do that, human violence will not vanish nor will it be eliminated, but it may be contained so that humanity may survive the violence that threatens its continuing existence.

# Journal de la Société Canadienne pour la Prévention de la Cruauté envers les Enfants

Tome 4

Numéro 1

Hiver 1981

## La Névrose et La Culture

I'll faut faire face au défi suivant, comment créer des Humains qui auront une meilleure santé mentale que celle de leurs aïeux et comment aider les parents qui sont eux-mimes désavantagés par des problèmes neurotiques à élever des enfants qui seront moins désavantagés qu'eux, à cet égard, et une fois commencé à transmettre cette amélioration aux générations successives."

"...tous les parents, jeunes et âgés, pour agir en père et en mire ne luttent pas contre les limitations imposées par un manque de connaissance ou de bonne volonté mais plutôt contre ces façons obligatoires de penser, de sentir, de considérer leurs buts et d'agir, que les composants neurotiques de leur personnalité imposent."

"Qui fait le plus grand mal à la santé mentale des enfants, le pire qui est alcoolique et impécunieux mais sympathique, et qui leur donne libéralement son temps et son amour ou celui qui est auteur, avocat, analyste, ministre, savant, docteur et qui sur le plan social est bien estimé et bien rémunéré mais qui est surmené par contrainte? Il n'y a aucune réponse facile cette question."

"Qu'est-ce qui arriverait à notre économie si nos problèmes neurotiques disparaissaient. Est-ce que notre culture crée la bonne santé mentale? Et est-ce que notre culture nous perment d'avoir de la tranquillité d'esprit quand il s'agit de la santé mentale?"

> Traduit d'après Lawrence S. Kubie (voir pages 19 à 26)

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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 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.

# **CSPCC CREDO**

#### WE BELIEVE THAT:

- 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.
- Most parents are willing and able to provide their children with the necessary loving empathic care, given support from others, appropriate understanding of the task and the conviction of its absolute importance.
- It is unutterably cruel to permanently maim a human being by failing to provide this quality of care during the first three. years of life.

#### THERE IS AN URGENCY THEREFORE TO:

- Re-evaluate all our institutions, traditions and beliefs from this perspective.
- Oppose and weaken all forces which undermine the desire or ability of parents to successfully carry out a task which ultimately affects us all.
- 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.