

SEARCHING FOR COHERENCE

Volume III

Jerome R. Gardner

Dear fellow employee,

To maximize productivity and make us more efficient, we are going to modify work areas as shown in the attached file. It is expected that this change will increase productivity by approximately 4.35 percent.



Seeking Coherence¹

Volume III: Theory, Technology & Methodology

An exploration into the efficacy of present performance and the new technologies that may enable positive social outcome from a new social policy.

VOLUME THREE

THEORY, TECHNOLOGY & METHODOLOGY

An exploration into the efficacy of present performance and the technologies and implementation methods which may enable a positive social outcome from a new social policy.

¹

Coherence: Systematic or methodical connectedness or interrelatedness especially when governed by principles; integration of social or cultural elements base on a consistent pattern of values and a congruous set of ideological principles.

PREFACE

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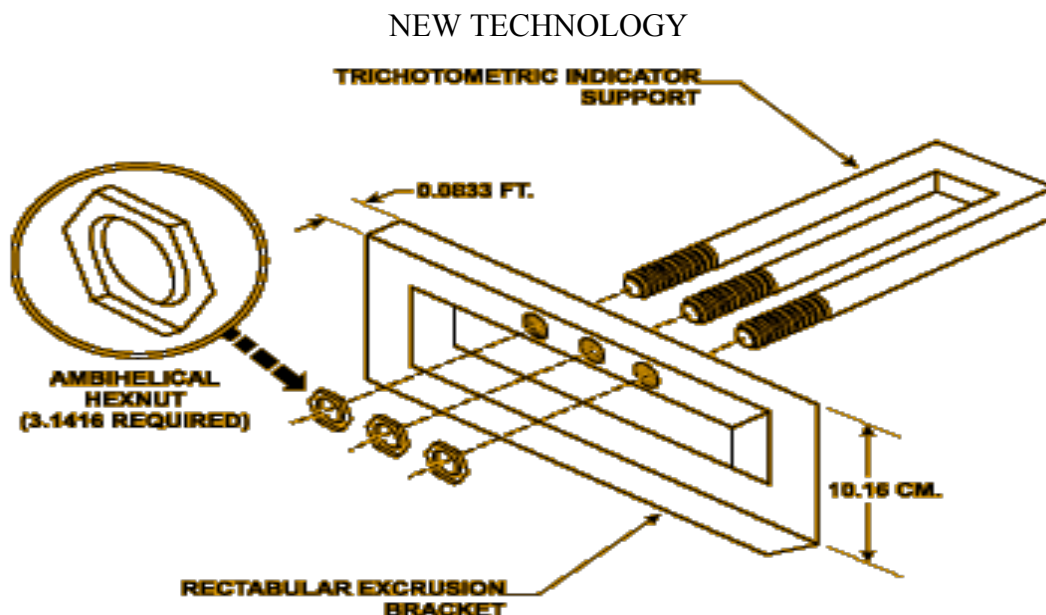
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Bibliography



SEEKING COHERENCE

ORIGINS

In the beginning was neither existence nor nonexistence:
Neither the world nor the sky beyond....
That one breathed, without breath, by its own impulse;
Other than that was nothing at all....

In the beginning was love,
Which was the primal germ of the mind.
The seers, searching in their hearts with wisdom,
Discovered the connection between existence and nonexistence.

They were divided by a crosswise line.
What was below and what was above?
There were bearers of seed and mighty forces,
Impulse from below and forward movement from above.

Who really knows? Who here can say?
When it was born and where it came - this creation?
The gods are later than this world's creation -
Therefore who knows where it came from?

That out of which creation came,
Whether it held it together or did not,
He who sees it in the highest heaven,
Only He knows - or perhaps even He does not know!

RIG VEDA

“I don’t think education is basically a technological problem. It is a problem of drawing out of each youngster the best he has to give and of helping him to see the world he is involved in clearly enough to become himself - among other people - in it, while teaching him the skills he will need in the process.” Edgar Z. Friedenberg *The Dignity of Youth and Other Atavisms*.

Preface

“In the beginning was love.” It is here that existence must start. It is from this love that children must *create* their own universe through a process of learning about themselves and their environment [relationships and experiences]. It is from the feeling of being loved, that children begin to form their beliefs about themselves, themselves in relation to others, and their prospects for the future. As one feels loved, one feels accepted; gains a sense of belonging, a place, a security to risk. These spontaneous concepts grow out of the sense of life. While they may be conveyed in words, they are not words.

From the intimate nurture of the family, the child develops a *frame of reference*, a perspective of the world and his or her place in it. Such a perspective predisposes the child to certain expectation about how people treat him/her and how s/he should act towards others. Perhaps the first test of this reality is when the child is placed into school. Suddenly, the child is faced with the need to discover whether the perspectives about self, others and future have relevance outside of the family. This critical test of coping and relational skills begins to shape the way the child will respond to the school and the people in it. If the child does not have ‘school survival skills’, s/he is likely to have more difficulty than if s/he does have learning skills. This is because ‘school survival skills’ are developmental skills which the school expects each child to have; spontaneous concepts, which the school personnel has little or no experience in teaching. The school is a place where systematic or scientific skills are taught.

The Soviet psychologist Lev Vygotsky has helped to convey the special features of school in his discussion of the difference between ‘spontaneous’ concepts, on the one hand, and ‘scientific’, ‘non-spontaneous’, or ‘systematically learned concepts’ on the other. Spontaneous concepts [like *brother* or *animal*] are picked up in everyday life, whereas scientific concepts [like *gravity* or *mammal*] are learned primarily in a school setting.” [H. Gardner - 1991] While the school is organized for the purposes of propagating ‘scientific’ concepts, it has a profound impact on ‘spontaneous’ concept building as well. Since the school is often the first place other than the home in which the child needs to find a way to fit in; to *belong*. The school’s capacity to support or challenge the frame of reference brought by the child from home is quite profound.

More importantly, perhaps, is that the scientific concepts, partially because of the formalization of their teaching “belong to a system of concepts whose interrelations can be explored. Thus, even though his intuitions about family matters might be quite well developed, a child may well have an easier time defining Archimedes’ principles than in explaining what a family is” [H. Gardner - 1991]. Thus, the child does not explore rigorously the values and principles which define self, relationship to others and circumstances and future through *conscious* processes, but rather struggles to find coherence in some coping manner; something that works. One of the tenets of the transformational methodology is to make spontaneous mental activity systematic. This process enables ‘teaching’ to occur.

To discover the connection between existence and nonexistence which is the ‘impulse from below’, to create oneself and to hold one’s universe together in a coherent fashion requires awareness [*enlightenment*] of one’s own experiences and the standards that they have created for measuring the self, others and the future. In short, these constructs need the same *exploration* we reserve for scientific constructs.

Beliefs systems regarding self and others and the behaviors that they predispose are the subject of this volume. We are particularly concerned with children who have a frame of reference or belief system which predisposes them to act in ways which are not typical. In an attempt to examine the complexities of atypical behavior, we seek to develop within the culture of the home, school and community a coherent belief system that supports prosocial behaviors. This coherence is the reality in which sociocultural entities and the individuals that make them up influence each other. The culture supplies cues that are apparent to all as to what behaviors are acceptable and which are not.

If we accept this fact as true, the evidence of violent, antisocial behavior, would indicate that the culture of many schools is either incoherently influencing inappropriate behavior on a regular basis or a large segment of the children who attend the school are assertive enough to reject the sociocultural cultural norms of the school to bring their maladaptive beliefs to the fore. While many people in education would support the latter construct and indicate that children are poorly prepared by their families and bring these behaviors into the school environment, we would suggest that this is highly unlikely. Few individuals, particularly children with low self-appreciation, are powerful enough in their self-confidence to assert such individualism. Paradoxically, these same educators will indicate that the very children they insist are so assertive are suffering from a lack of self-esteem; this incoherence must be addressed.

In the process of seeking coherence, we will examine the role of school both as a sociocultural entity and as a place for systematic individual and group intervention. The expected outcome of this examination is regarded as critical to the development of typical children and the diminishment of atypical ones. It is predicated upon an hypothesis that both typical and atypical behaviors are *learned* and that one appropriate place to develop a deep knowledge and understanding of oneself and the world around you is in school. Human beings and their organizations are by nature *learning entities*, which are prone to apathy. All systems deteriorate without sufficient maintenance energy. Just as discussed an earlier volume about an organization which does not precisely determine its intentions and maintain awareness of how well it is doing in achieving its goals; so too, individuals are prone to being satisfied with naive, but workable solutions to their own reality. Part of the process of helping children learn to take control over their own lives is simply to make them *aware* [mindful] of their own mental structures and processes. Once having reached a state of consciousness regarding their own thinking, the child can then begin to correct errors of cognition and develop *rigorous* compensating mechanisms. The individual process, however, is not isolated from the sociocultural environment [collective consciousness] which confirms or denies the individual child’s meaning structure.

We start from a recognition that the parents are the major significant influence upon the child in the critical years from one to eight when the child develops his/her basic understanding of the self and of others. We equally identify the impact of peers and environment as influences that can erode familial coherence. We focus as well on *communication* as a major element in the support or erosion of coherence and recommend increased awareness of the way we communicate to children; recognizing that the messages we send create images in the mind of the child; and the attributions or explanations that children might attach to those messages may not be exactly what we intended. It is not enough to place high expectations; one must place *positive expectations*, which are supported, by a belief in the child's ability to achieve and place them in a manner that conveys our support and encouragement to the child.

The material will include research evidence regarding the ways society does and might intervene as well as theoretical outlines of potential improvements. Since it posits that reality and truth do not exist [at least as absolutes], it does not suggest that these approaches are the *right* way to improve the awareness and competence of children; but it does suggest that they are an eminently *better* way. The approach does not tell children or society *what to think*, but it does focus on *how to think* and, we are persuaded, helps both the individual and the collective understand the implications of how their thought and communication affects the reality they perceive and receive.

We will further suggest that all change is predicated upon a cognitive dissonance created by an incoherence which is demonstrably 'true'. Such dissonance creates the potential for decision making and hence, change, and therefore, suggests that 'happy people' may not even be an appropriate goal. Our premise suggests that all human behavior is goal seeking and used for the benefit of the individual. This suggests both that the individual is the primary force for change *and* that such change can only be guided by helping that individual rigorously examine the evidence supporting the benefits of change.

It further indicates that all behaviors are performed within a context. That context is composed of both the environment and the people in it and the individual's *perceptions* of the environment and the people in it; which may or may not be the same. This emphasizes the need to shape the individual's perceptions as a major focus in promoting prosocial behaviors.

We spoke earlier of Hofstadter's construct of *figure* and *ground*, and the *recursive* nature of human environments. The school provides an important 'ground' for the child. Typical children tend to fit into the ground, like pieces in a puzzle. Atypical children *redraw* the ground, causing it to reform in some manner. To some extent, the question that needs to be explored is whether the ground will redraw the child, or the child the ground. When the ground [school], presents a rigid and impermeable boundary, atypical children become as the proverbial 'thorn' to which the school often reacts in hostile fashion. If the school has a boundary that is thin and vulnerable, its own self-sustaining structure is threatened and it reacts from panic or capitulation. Both the child and the school need to be able to absorb, analyze and evaluate and make use of the stimuli from the other. If we are to develop an Escher drawing of figure-figure, we will need to be *aware* of our inter-

relationships. Humans are prone to moments of doubt. Whether we plummet to the earth or not will be contingent upon whether we have developed a strong interrelatedness to others through our values and beliefs. This is the coherence we seek.

The construct of our fundamental assumption makes the we/they concept of interpersonal relations with atypical people no longer valid. We, like them, are the sum total of our thoughts, have maladaptive thoughts and make cognitive errors resulting in problems in living. To the extent that our thoughts *suffice* in making life worthwhile, we are functioning individuals. When our thoughts no longer suffice, we may need help.

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CHAPTER 1 INTRODUCTION

Fundamental issues

School is the valued place for children and, paradoxically, an institutional setting. School is usually the first place that a child collides on a regular basis with a sociocultural entity which may be incoherent from his/her own. School is the place that all children with emotional and behavioral difficulties must be each day unless the severity of their difficulties lands them in jail or a psychiatric facility. School continues to be responsible for offering services to children even when they are in these facilities. School is an opportunity and a challenge.

While the primary function of the school is to educate, the school also provides a common and important social environment for all children. When the school's primary function of education is inhibited by the behavioral issues of the student, the school has both the opportunity and the obligation to ameliorate those issues. Unfortunately, observations of the present methods of seeking help for children who are often more troublesome than troubled, lead the observer to the conclusion that such systems are just inadequate to the task. Mental health services are usually the option of choice for 'controlling' the behavior of children who seem unable to control their own behavior. Therapeutic interventions, medication and hospitalizations seem to have the potential for short term 'control' and long term escalation of the problems which they are designed to address. This results from what management guru, Peter Senge calls *shifting the burden*.

An underlying problem generates symptoms that demand attention. But the underlying problem is difficult for people to address, either because it is obscure or costly to confront. So people 'shift the burden' of their problem to other solutions - well intentioned, easy fixes which seem extremely efficient. Unfortunately, the easier 'solutions' only ameliorate the symptoms; they leave the underlying problems unaltered. [Senge - 1990]

The fundamental issues of children without 'school survival skills' is unlikely to be the behavioral symptoms which demand attention. Therefore the reduction of such symptoms is not the appropriate focus for intervention. In the search for fundamental concerns, there have been two basic perspectives. The most powerful perspective to date has been the focus on *defect* or *pathology*. This worldview presumes that the person with *aberrant* behavior is the result of a 'breakdown' in the physical or psychological functioning and can therefore be 'fixed' if only the components of the broken part can be identified. The fact that the person is broken presumably reduces the *stigma* attached to the symptomatic results since they have no control over such behavior. Unfortunately, this view has resulted in years of intrusive, but unsuccessful attempts to restore or *cure* the unfortunate person so afflicted. In addition, it has allowed such people to be isolated and controlled 'for their own good'. Even if such pathology is true, and there is no significant research evidence to support such a contention, the fundamental issue is so vague as to be

unapproachable; requiring the ‘bandaid’ approach of symptom reduction and control as the only potential intervention.

Senge makes further comments that sound very much like the present human service [and particularly the mental health] system. “Solutions that address only the symptoms of the problem, not fundamental causes, tend to have short term benefits at best. In the long term, the problem resurfaces and there is increased pressure for symptomatic response. Meanwhile the capability for fundamental solutions can atrophy.” “Insidiously, the shifting the burden structure, if not interrupted, generates forces that are all-too-familiar.... these are the dynamics of avoidance, the result of which is increasing dependency, and ultimately addiction.” The ‘patient’ learns *helplessness* and becomes addicted to non-responsibility, lack of mental control, and excessive self and social deprecation and ‘well-intended solutions’ actually make matters worse over the long term”.

If this sounds familiar to the reader in regards to humans service delivery systems as well, it would seem to imply that some things needs to be done differently. The perspective which we would suggest as a replacement is, we believe, not only more scientifically supportable, it is eminently more optimistic. It suggests that most abnormal behavior is a question of *competence*; a failure of learning. It posits that in most situations, people with aberrant behaviors are utilizing those behaviors to attain goals within their own reality. Since they are active, goal seeking entities with strengths as well as weaknesses, fully responsible for their own behavior, there is the expectation that with the proper ‘sorting out’, learning and support, they will be able to function more effectively within their chosen environment. This perspective suggests that the *fundamental* issue relates to the individual’s *awareness* of their own *frame of reference* and the *availability* and *ability to use* competent behaviors to attain their preferred goals.

In earlier volumes we have raised the issue of a fundamental assumption which Aristotle tells us is a necessary building block for any body of knowledge, and which can be neither proven nor disproved. We posit here the fundamental assumption upon which we will build a transformational system is that **“People are the sum total of what they think”**. This is a dramatically different assumption than that made by traditional systems. This assumption leads to the development of a theory of change which is delineated by the manner in which intervention is thought to be related to intended outcomes for a particular population. Our theory of change is that **“Change occurs only when they think differently”**. If the fundamental issue of atypical behavior is how people think - it is imperative that we teach them how to think more effectively.

By addressing the fundamental issue of how, when and in what context to perform specific behaviors the intervention does far more than simply meet a ‘dead man test’. Such a test, which requires simply that behaviors stop, is inadequate to the requirement that people be able to live with and contribute to sociocultural environments. If the issue is to help children meet a higher test of social performance, we believe that the world perspective of *competence* is far superior to that of *pathology*.

Target Population

This volume will attempt to identify the fundamental issues underlying behavior and to suggest ways to address those fundamental issues through *learning theory* and implementation of educational *processes*. This is not, however, a text book on these interventions, but rather, a philosophical discussion of the ways that these interventions can be provided in preventative, developmental and remediating ways; building sociocultural competence instead of simply attempting to reduce or ‘control’ symptoms. Development over adaptation.

Our predominant focus is toward the use of these interventions in educational settings. This does not preclude the extension of the technology in other valued environments. In regard to atypical behavior in school, “Professionals generally concur that children’s emotional and behavioral disorders may be described through acting out (externalizing) or social withdrawal (internalizing) [Quay, 1986; Walker & Fabre, 1987]. Furthermore, as Walker and Bullis [1991] have observed, school children must make two primary adjustments in school. One involves adjusting to the behavioral expectations and demands of the teachers in the classroom, and includes obedience to classroom rules, attending to tasks, completing assigned work, and exhibiting other skills valued by teachers. These behaviors have been termed ‘school survival skills’ and appear consistently in studies of teacher behavioral standards and expectations [Cobb, 1972; Kerr & Zigmond, 1984; Kerr, Zigmond, Schaeffer, & Brown, 1986; McConnell et al., 1984; Walker & Rankin, 1983]. Children also must adjust to the expectations and behaviors of peers in settings where social interactions occur (e.g., free play settings). Here, children must learn appropriate play behaviors and develop friendship patterns [Walker & Bullis, 1991].” [Nelson & Pearson, 1991]

It should be noted that the development and use of ‘school survival skills’ with teachers and peers may be the first occasion for the individual child to test the personal belief system regarding self, others and future prospects in a new environment. Until the entry into school, many children have developed their personal beliefs, and the behaviors, in regard only to those significant adults [usually family] and have not had to deal with developing a flexibility to deal with marginally contrary perspectives. If the basic tenets of the expectations from family abut incongruently with the expectations of school and peers, a critical re-evaluation experience must take place. How the child, peers and teachers deal with this critical event will often determine the future perspective that the child will have of him/herself, peers, school and family.

Students who exhibit chronic patterns of hostile, aggressive, and defiant behaviors frequently are characterized as having *oppositional disorders* or *conduct disorders* [Kazdin, 1987; Horne & Sayger, 1990], and their behaviors are increasingly identified as *antisocial* [Walker, Colvin, & Ramsey, 1995]. Antisocial behavior has been defined as a “recurrent violations of socially prescribed patterns of behavior” [Simcha-Fagan, Langer, Gersten, & Eisenberg, 1975], and antisocial patterns of behavior have been described as the polar opposite of prosocial patterns, which are composed of cooperative, positive, and

mutually reciprocal behaviors [Walker et al., 1995] [As reported by Rutherford & Nelson, 1995]

It must be emphasized that *antisocial* behaviors are violations of prescribed behaviors and that the prescribed behaviors demanded by this new sociocultural entity called the school may be quite different from the prescribed behaviors demanded by the family. The difficulty of cultural family positions which suggest that a child is required to ‘defend himself like a man’ or ‘boys will be boys’ are often significantly found to be not politically correct by the school. Thus, the child from such a culture is found to be ‘antisocial’ for carrying out prescribed social roles.

It should be clear to most observers that children with external or antisocial behaviors exhibit high levels of conflict with adults and peers which leads to a disproportionate identification of acting out children as *emotionally and behaviorally disturbed* and further that “Youths with chronic patterns of antisocial and delinquent behaviors are *less likely to remain in community settings*” (emphasis ours) [Nelson & Pearson, 1991]. This leads to chaos for the family, who sees the child in constant difficulty with the school for behaviors which seem acceptable, which sets in motion a questioning that the child must be hiding something from the family and that they can no longer be trusted. The difficulty of dealing with a powerful entity like the school disrupts family life and causes the family to seek to rid itself of the problem child as well.

Causal Factors

Rutherford & Nelson [1995] report that Wehby [1994] identified four overlapping hypotheses which suggest that aggressive behavior may be the result of (a) a social skills deficit; (b) positive or negative reinforcement; (c) environmental deficits²; or (d) deficits in the cognitive processing of social stimuli and that while not inclusive of all the possible causes of aggressive behavior, each has been supported by research. Within such hypotheses, the implication for a cognitive behavior management approach that includes comprehensive individual, class and school interventions in interpsychic, interpersonal and utilitarian skills should be apparent.

Mary M. Wagner [1995] in reviewing data from the national Longitudinal Transition Study of Special Education Students points out some additionally interesting facts. Among students with Serious Emotional Disturbance, “externalizing behaviors [that is, conduct or oppositional disorders, ‘acting out’ behaviors] are *significantly more prevalent* [emphasis added] than internalizing behaviors [that is, withdrawal, depression]. This study also suggests that “students who qualify as having a serious emotional disabled label [SED] for special education purposes are only a subset of children who have ‘mental illness’”. To qualify for special education, not only must a child have an emotional disturbance or behavioral disorder, but also the disorder must 1) be exhibited over a long period of time, 2) be considered ‘severe’ by those evaluating it, and 3)

² Rutherford & Nelson [1995] report that the environmental-deficit hypothesis is supported by research demonstrating that aggressive children are more likely to display higher rates of aggression in settings characterized by low densities of positive reinforcement for desired behaviors or low levels of structure.

adversely affect the student's educational performance. Thus, although epidemiological studies suggest that 8% to 12% of all children and adolescents have emotional disturbances that could benefit from intervention, students who are identified as having prolonged, severe, and educationally debilitating disorders that qualify them to receive special education are fewer than 1% of school-age children."

The implications are several; first, the school through special or regular education is the primary locus for mental health support since it is unlikely that the children with lesser difficulties are those treated elsewhere and the most severe are given extensive support through emotional support and other special education services. Second, the significance of acting out behavior as an indicator of severity is magnified. In addition such children were "significantly more likely than students as a whole to be male, African American, and to experience a constellation of factors associated with economic disadvantage." In fact, the study suggests that "poverty - rather than school policy or practice - may be the reason African-American students appear disproportionately in all categories of disability. Poverty was pervasive among students with SED. In 1987, more than one-third of students with SED came from households with an annual income of less than \$12,000; only 18% of students in the general population did so. Forty-four percent of students with SED came from single-parent households, compared with about one-fourth of the general population of students. Other studies indicate that family stressors were common [Silver, et al. - 1987], as was child abuse" [Trurpin, et al - 1988]. [Wagner - 1995]. Wagner ends this discussion by citing Knitzer, Steinberg & Fleisch [1990] "It is becoming clear that the more high-risk factors in a child's life, the greater the likelihood that emotional and behavioral disorders will result."

The linkage of these causal factors is significant as the argument for biomedical etiology tend to diminish and learning experiences increase in salience with their expression and documentation. Further, such research analysis would support the difficulty of such children of poverty, neglect and/or abuse [and we do not mean to imply that children of poverty are the only ones who suffer neglect and abuse] would have difficulty *seeking coherence* with the school system. Social skill deficits and deficits of cognitive processing require training as well as environmental support for the new thoughts and behaviors that result. The individual cannot be expected to learn *and then use* new behaviors unless they are at least as effective as the old, familiar ones. Further, in time of stress, it is likely that they will return to the familiar unless there is significant support for the new behavior and related consequences for the old.

The generalization strategies for the new behaviors must reinforce both *transfer* of the behaviors to the appropriate environment, as well as *maintenance* of the new behaviors over time. Thus, maximizing the support and where needed, the reciprocity of the environment is vital to the success of the skill training and cognitive processing. And such skill training must become an *a priori assumption* of the school for every child. For those children who arrive at school with school survival skills, such an assumption would not create difficulties, but for those who arrive without such skills, it is a critical factor in future growth and development.

Precipitating Events

While this book presents evidence of the cause and effect of antisocial behaviors, the author stipulates that emotional and behavioral difficulties occur when *goal seeking behaviors* are *frustrated* by *mental impediment*, *interpersonal encumbrance*, and/or *incompetence*. The individual must be *willing* to participate in change, and when the child's goals are frustrated by the school, that institution diminishes its ability to be helpful either academically or otherwise.

Incompetence can be defined as the lack of sociocultural competencies, skill or capacity to act effectively. Such incompetence can exist because of a lack of physical or mental capacity or because of the lack of an appropriate repertoire of behaviors to adequately address the available environment. However, the overriding lack of competence that most concerns us has to do with *interpersonal* skills and the *interpsychic* skills required to implement them. It is proposed that the skill training is a competence that can be effectively developed.

Interpersonal encumbrances occur regularly when other people interfere with the ability of the child to achieve his/her goals and result in responsive behavior, which is often negative. Simply stopping goal seeking behavior may not necessarily result in emotional and/or behavioral problem since questions of affirmation and confirmation enter the picture, but such occurrences are salient events which have emotional and behavioral potential. When interventions operating against the will of the child additionally *separate* the child physically from family and peers or depreciate the child, they are doubly powerful.

Mental impediments can be physical or cognitive. Certain cognitive structures may need to be rebuilt in order to allow the individual to 'feel' sufficiently confident to deal with either the goal seeking or the interference or to change the '*inner logic*' with which the child selects the appropriate behavior to be used. Children with mental retardation are, as a group, extremely docile, cooperative, loyal and enthusiastic. Those who develop behaviors which are troublesome are invariably within the 'mildly' retarded group. One can surmise that they are sufficiently aware of their lack of capacity that frustrates goals to react to this frustration. The capacity to identify the barriers and feel the frustration optimally indicates a capacity to learn new thoughts, feelings and behaviors to deal with such frustration.

Frustration Pragmatics in Schools

In regard to the concern with frustrated goal seeking behaviors, Howard Gardner [1991] has developed an interesting context in which *neurobiological constraints* [mental structures] on the one hand, and the school systems *historical* and *institutional* constraints on the other hand, frustrate children's goal seeking intent.

Gardner defines three characteristic learners:

[1] The *intuitive learner*: reflects *neurobiological* and *developmental constraints* [we have earlier referred to these as *epigenetic rules*] owing to species membership and to principles of human development that operate predictably in physical and social environments. These constraints, the result of hundreds of thousands of years of evolution, are very powerful, and prove very difficult to dissolve. The kinds of materials and skills that we master easily seem to be those to which the species is especially attuned. Potent evolutionary reasons allow certain realms [like language] to be mastered in a natural way; by the same token, otherwise adaptive factors may give rise to the misconceptions and stereotypes that emerge as so troublesome in a school setting. The young child masters a great deal of information and appears highly competent in his or her circumscribed world being able to use and comprehend symbol systems fluently and offer workaday theories and explanations of the worlds of mind, matter, life and self. Because of the ease with which these performances are expressed, Gardner terms them *performances of intuitive [naive or natural] understanding*. It should be emphasized that these understandings are often *immature, misleading, or fundamentally misconceived*. This is certainly the case with many of the self-concept and interpersonal understandings even though in many instances they prove serviceable enough.

Children come to master many apparently complex domains easily, but apparently not those matters for which schools have been designed. There is a gap between the intuitive [*spontaneous*] learner and the traditional student dealing with *systematically learned concepts*. Students who have perfectly adequate intuitive understandings often exhibit great difficulty in mastering the lessons of school. It is these students who exhibit ‘learning problems’ or ‘learning disorders’. Yet even those who prove successful in school typically fail to appreciate the gaps between their intuitive understandings and those that are embodied in the notations and concepts of schools.

[2] The *traditional student* has profound constraints that operate on him or her which are of an extrinsic sort: the *historical* and *institutional* constraints that are embedded in schools which have evolved over centuries to serve certain societal purpose in certain ways. The relative absence in schools of a concern with deep understanding reflects the fact that, for the most part, the goal of engendering that kind of understanding has not been a high priority for educational bureaucracies.

In the school context, educators have ordinarily sought and accepted *rote, ritualistic, or conventional performance*. There exists a gap between the traditional student and the disciplinary expert revealed by recent cognitively, oriented research. Even esteemed students typically do not successfully transfer their knowledge to new settings, and, worse, they typically do not appreciate that they have fallen back on the powerful but naive understandings of early childhood; those molecular concepts, constructs and steps with which they first learned of the world. Hence the traditional student emerges as at least as remote from the disciplinary expert as the younger, intuitive learner since even those students who apparently succeed in schools often have not understood in a deep sense the very concepts and principles around which their educational program has been designed.

[3] The *disciplinary expert* cannot begin to master a domain, or to understand it, unless s/he is willing to enter into its world and to accept the *disciplinary* and *epistemological* constraints that have come to operate within it over the years. Performances of disciplinary or *genuine understanding* are always changing and never complete; expertise is manifest when an individual embodies his culture's current understanding of the domain.

The gap between the intuitive learner and the disciplinary expert requires an awareness that the two understandings are of a *fundamentally different order*. One is the natural but naive understanding that has evolved over centuries to yield a reasonably serviceable first-order grasp of the world; while the other provides the best possible account of the world - even when that account flies in the face of long-standing institutions, received wisdom, or unwitting but well-entrenched stupidity. This understanding of the disciplines represents the most important cognitive achievements of human beings.

The framework which Gardner has provided, in which the performance of intuitive, naive or natural understanding rises in use regardless of the conventional performance learned in school, has meaning for us in regard to the interpsychic processes which enable the child to appreciate [value] themselves, clearing the way for the acceptance, confirmation and appreciation of others. This context is similar to one in which the child develops understandings about self and others which predispose them to relate in anti or prosocial ways. If the naive theory of self and others dominates at times of stress and that intuitive understanding is distorted or depreciating, one can expect that the child's affect and behaviors will be problematic. If the child is operating on a naive understanding of self and others **and** is finding such understandings problematic, one obvious response is to teach the child *systematically* to develop a **deep understanding** of their own thinking patterns as a method of helping them to rigorously analyze evidence, even that which contradicts the naive frame of reference.

Gardner goes on to define at least seven different ways of knowing the world [*human intelligences*] which include language, logical-mathematical analysis, spatial representation, musical thinking, the use of the body to solve problems, an understanding of other individuals, and an understanding of ourselves. Gardner suggests that the educational system is heavily biased toward linguistic modes of instruction and assessment and, to a somewhat lesser degree, toward logical-quantitative modes as well. He points out that the educational bias frustrates learners who are not language or at least logical-mathematical oriented.

In short, there are sufficient frustrations for the developing child in regards to goal seeking interference, ranging from issues arising out of poverty, neglect and abuse to those of intuitive understandings of the way the world works. This volume will suggest that a corrective technology will be required to help the student develop a deep understanding not only of educational content, but of how they themselves and others around them function.

Purpose

Hypothesis

The purpose of this volume is to suggest that the school is an appropriate place for the development and restoration of a child's mental wellbeing. This proposition rests on the hypothesis that the child's mental and behavioral development is predicated upon *learning principles* and that educators are the most appropriate people to provide these needed services. It is further conjectured, that the school is a sociocultural environment which through its ethical constructs and artifacts affects the way children perceive the world and respond to it and that therefore the school can provide *prevention* as well as *intervention* in regard to the psychological fitness of children.

In fact, as we have already suggested, the school presently is the primary provider of mental health services to children. In support of that proposition, one could consider that the Commonwealth of Pennsylvania through its Department of Public Welfare, Office of Mental Health³ projects that 192, 273 children in the state are in need of mental health services. Indeed they state that 54, 935 of these children will be *seriously emotionally disturbed* and an additional 27,468 will be *at risk of serious emotional disturbance*. At the same time, the Commonwealth expects to serve approximately 51,000 [28%] of the total and only 14,614 of those with serious emotional disturbance. The question that becomes apparent is, "where are the other children?" The education requirements of state law indicate that they must be in school. Since we know that with rare exceptions, children who have severe difficulties are likely to be in public schools, it is a reasonable inference that the public school system is serving the majority of children with mental health problems. There is no reason to think that Pennsylvania differs dramatically from other states in this regard.

This is not to imply that schools presently provide adequate environments for enhancing emotional and behavioral growth and development. In developing our hope for enhancing that situation we, perhaps somewhat incongruently, align ourselves with Howard Gardner and suggest that the school's emphasis upon 'mimetic' educational approaches, while perhaps inappropriate to develop disciplinary experts, are highly competent to teach basic cognitive/behavioral skills⁴. Unfortunately, the present perspective being modeled in such 'mimetic' ways is one which is incompetent to support the needs of a child in prosocial environments. Thus, it is the *message*, not the media which we hope to change.

Critical Determinants

³ From the *Community MH Services Block Grant Application, FY 1996*. It is interesting to note that in the Bureau of Special Education, *Statistical Summary for 1993-94*, the Department of Education notes 16,236 children in special education with *serious emotional disturbance*. It is difficult to draw conclusions from such data. Either the OMH dramatically, and perhaps in a self-serving manner, over estimates the numbers of children with problems, or the school districts find that they are able to serve such children within the general school population [perhaps considering them more *behavioral* problems, than mental health problems. In either case, school districts seem to specifically serve more seriously emotionally disturbed children than does mental health [16,236/14,614], although there may also be overlapping populations.

⁴ It is perhaps true that the mimetic approach is best able to teach the interpersonal skills, which equate more readily to the intuitive aspects of learning. Interpsychic learning may require a different order of learning and require more sophisticated learning methods.

It will be argued that for the any intervention to be effective, the child must feel **appreciated** and **secure**. Interventions that *remove* the child from family and/or peers have a contrary effect and should be avoided. More important, the intrusion of adults on the child without the child's sanction reduces the potential effectiveness and therefore every effort to *engage* the child in *authorizing* the intervention should be pursued since the child's participation in the change is essential. Good intentions, with or without professional credentials, are not enough. Interventions intended to change behaviors demand techniques that focus on key problem areas.

We propose that those key areas include:

- How the child the child thinks about him/herself, his/her situation and his/her future prospects.
- How the child analyzes new propositions about self, situation and prospects.
- How much energy the child has available for such analysis.
- How extensive and effective is the child's behavioral repertoire.
- How supportive are the social cues reinforcing the child's thinking and behavior.

If schools are to effectively begin to intervene on behalf of the child regarding the development of appropriate behaviors, several other assumptions will need to be considered. Providing services is not enough. For too long, systems of intervention have concentrated on the *process* of intervention with little or no regard for the *outcome* or impact of the intervention. The school, like other humans service organizations, must become not just a teaching organization, but a *learning* entity as well. Definable and acceptable outcome must be obtained within a reasonable period of time. What is more, *failure to reach acceptable outcome expectations must be recognized as a failure of the intervention process*, not a failure of the child.

Ethical Considerations

Because of the immense failure of human service interventions in the past and to help develop the parameters around which the school, as a learning organization, might properly function, each individual intervention with a child needs to identify and abide by ethical principles. Such a focus will help to avoid such practices as destructive and on-going intervention in the future that we have experienced in the past. Through a direct movement towards education and learning theory interventions combined with a perspective of *experimentation*, which abides, as much as possible, to the ethical principles and guidelines designed for research involving human subjects, the new interventions should have a context for learning and rigorous analysis. At the risk of redundancy, we will reiterate some of the ethical considerations we covered in Volume II

in this implementation context, starting with these guidelines, which articulate three basic ethical principles generally, accepted by our cultural tradition as particularly relevant:

- *Respect for Persons* - incorporates at least two ethical convictions: 1) that individuals should be treated as *autonomous agents*, and 2) that persons with diminished autonomy are entitled to protection. The principle of respect for persons thus divides into two separate moral requirements: the requirement to acknowledge autonomy and the requirement to protect.

An autonomous person is an individual capable of deliberation about personal goals and of acting under the direction of such deliberation. To respect autonomy is to give weight to autonomous persons' considered opinions and choices while refraining from obstructing their actions unless they are clearly detrimental to others. To show lack of respect for an autonomous agent is to repudiate that person's considered judgements, to deny an individual the freedom to act on those considered judgements, or to withhold information necessary to make a considered judgement.

Person centered planning which includes the deliberation and considerations of the child/family regarding ultimate decision-making in the development of the individual education plan are included in federal law and state education regulation.

- *Beneficence* - Persons are treated in an ethical manner not only by respecting their decisions and protecting them from harm, but also by making efforts to secure their well-being. In this context, beneficence is understood as an *obligation*. Two general rules apply: 1) do no harm and 2) maximize possible benefits and minimize possible harms. The question of harm through lack of self-determination, failure of inclusion or focus on disability rather than competence are issues of concern to the educational process.
- *Justice* - An injustice occurs when some benefit to which a person is entitled is denied without good reason or when some burden is imposed unduly. The concept of justice regarding "free and appropriate education" are vital components of federal law regarding education and the question of justice arises whenever a child is separated from a mainstream environment.

One final consideration is both ethical and practical, and that is the *informed consent* of the child. Because we believe so strongly in the need for the child to participate proactively in the solution in order for it to be effective, an effective intervention will require that the child is engaged in a significant trust relationship in which the child *authorizes* both the outcome expectation [end, goal] and the intervention [means, process]. Such authorization avoids the coercion of models that "do things for the child's own good" and ultimately help the child decide what is good. The inclusion of the child as a proactive participant does not simply reduce coercion, but in fact, improves the expectation of successful intervention through a salient 'you're OK' message. The

measure of quality is that the child is able to function significantly better in a specific area of his/her life.

Individual Duties & Responsibilities

A principle, which has both ethical and legal implications, is the concept of a *fiduciary relationship*. Black's Law Dictionary defines a fiduciary as "a person [or entity] having the duty created by his undertaking, to act primarily for another's benefit in matters connected with such undertaking.... One is said to act in a fiduciary capacity when the business s/he transacts, or the money s/he handles, is not for his/her own benefit, but for the benefit of another person..." While normally a term used in financial circles, the conceptual basis is applicable and appropriate for human services including education. The responsibility to act on behalf of the student and for no other purpose has salient implications.

The person providing services to children, particularly through the use of public funds, assumes a different relationship to the child and a higher standard of *legal duty*. The affirmative duty to *least restrictive alternative* is one that is quite familiar to most who are involved in education. The implications of this duty are that government must pursue its ends in a manner that *least intrudes* or infringes upon individual rights. Since some of the methods of 'medical necessity' are in fact intrusive and since the traditional response to children with problems in living is to remove them from the school situation, this duty is said more often than done. In fact, through the leadership of the medical and psychodynamic *expert* models, the implementation of the least restrictive environment concept has led to cognitive *errors* which have allowed just the opposite to happen. Steven Taylor [1988], as we have indicated in Volume II, indicates seven specific pitfalls which such errors have allowed to develop under the guise of 'doing good'. As implemented, Taylor suggests and we concur and reiterate, the principle:

- *legitimizes restrictive environments.*
- *confuses segregation and integration on the one hand with intensity of services on the other.*
- *is based on a "readiness model".*
- *supports the primacy of professional decision making.*
- *sanctions infringements on people's rights.*
- *implies that people must move as they develop and change.*
- *directs attention to physical settings rather than the services and supports people need to be integrated into the community.*

None of these constructs is consistent with either the way human services *say* they operate nor with the way we would desire that they operate. Hence the duty to least restrictive alternative is one which needs *rigorous* analysis and monitoring.

Another duty which is often ignored in the present model is the *duty to act on the acts of others*. This requires that individuals who see an individual acting contrary to the best interest of the child must take immediate steps to abate that action. If such a duty is to be

implementable, it will require that schools think clearly about the parameters of such involvement and provide corrective policies which support such actions. Not only must teachers have a clear understanding of what is expected [and what constitutes failure of duty], but they will need guidelines for remedial action.

Teachers and other staff members are usually held to a standard of diligence, skill and care of an *ordinary man* in a like situation. This is a vague enough standard to make it necessary to decide practically every event on its own merits. Despite the fact that staff may be paid or voluntary, or that they are adequately or inadequately trained, this does not justify actions which are careless or of gross stupidity. Incompetence is, in and of itself, no cause for him/her to be held personally liable for any losses caused by this inadequacy. If however, s/he omits the reasonable precautions established by the fiduciary test or by ordinary common sense, s/he may be grossly negligent and may be held *personally* liable for resulting injuries or loss to the child and his/her family.

So long as the person exercises reasonable diligence and care s/he is free from personal liability -- when poor judgement causes loss or injury. *Good faith* is the principle [but not the sole test] of the adequacy of the person's diligence and care. However, common law recognizes the principle that a person rendering an affirmative duty cannot leave the person in a *worse position* or state after being rendered aid. And yet, we are aware that children often perform better before 'special intervention' than after. It is incumbent upon the administration to assure that these outcomes are identified and resolved.

But remediation is not ultimately satisfactory. The development of training that identifies the duties and responsibilities and provides procedural protocol concerning behavioral expectations of staff can enable the individual staff member to rethink their belief system in regard to self determination, community membership and competence. The 'mystical' aspects of a failed service will have much less appeal in light of a clear understanding and accountability to appropriate duties and responsibilities. The only protection for the individual providing services in an arena which truly promotes and exacts the duties and responsibilities of ethics and law, will come from the ability to identify and enhance positive quality outcome. The requirements for the development of such protection will require an investigative attitude which tests interventions and documents impact upon the child's quality of life.

Organizational Duties & Responsibilities

"We have met the enemy and he is us.:"- Pogo

The human services organization [health, education & welfare] has duties and responsibilities as well, not the least of which is to make policy, train and develop methods of identifying and measuring the accountability of individual staff to the ethical and legal principles which shape their practice. However, on a larger scale, human service organizations have a need and responsibility to identify their own 'reason for being' and to closely question whether or not they should continue to exist, or at least exist in their present form.

All living entities have two purposes: one is to achieve and the other to survive. With lower organisms, these may appear to, and in fact, be identical. But certainly higher organisms have other purposes than mere survival. Whether one accepts Frankl's position on the need to *decide* on a meaning for life, or whether the meaning comes from other philosophies, human beings sense a meaning other than survival. Living has a purpose. This is even more apparent in human organizations. People band together for a purpose. For some, it is simply to make money; in human services, it is presumably to address some identified social deficit or evil.

But once formed, the organization, like all other living entities develops a strong need to survive. As long as these two overarching purposes are kept in proper order; mission first, the organization has some ability to carry out its functions in a proper manner. When survival become the first purpose; the organization strangles on its "bureaucracy" and become moot. Thus the only real test of purpose is the willingness to go out of business.

The entanglement of purpose and patchwork development of human service systems has created confusion for many who pride themselves as having highly professional, competent, and quality organizations. Part of the problem, which we will only touch on here because of constraints of our purpose, is the lack of a true organizational performance test. The performance test of most human service organizations is growth. Larger budgets, more services, more staff, high profile; these are how we judge the performance of these organizations. The human service organization grows through the creation of 'waiting lists', which are developed by the creation of program 'boxes' through which people rarely, if ever move. The reason is that if people successfully moved through, there would be no waiting lists [no identification of more need]. In fact, there could be a reduction in the size of the organization, since funding sources look for more service, not more outcome. Positive outcome means that people no longer need the service, thus reducing identifiable need for the organization.

There are of course other factors which skew the "reality of the organizational performance such as who is the "customer". In almost every case it is the funding source, not the client. This should be sufficient to give the reader an idea of the problems. John McKnight, goes even further in identifying the confusion about human services. McKnight suggest that the limits on the public purse result in 'trade offs' in regard to who actually gets funded. While this is a reasonable process in most areas of government, the process between major expenditures in human services is highly confused.

"The same process occurs within the human service budget. Here, however, it is less well understood because the basic competition for the limited funds available for the 'disadvantaged' is between the *human service system* and *cash income for labeled people* [emphasis added]. Service system lobbyists and advocates see the competition for limited public resources as a jockeying between various service providers and systems. They rarely recognize or acknowledge, however, that the net effect of their lobbying is to *limit cash income for those they call 'needy'*

[emphasis added] and increase the budget incomes of service programs and providers [McKnight - 1989].

McKnight goes on to point out that as federal and state cash assistance programs grew 105% over a twenty-five year period, service programs grew by 1,760%. This despite the fact that “we have no effective measures that allow legislators or policymakers to assess whether public investments for services would be more enabling as cash income” [McKnight - 1989]. This is not the full extent of McKnight's concern as he points out four structurally negative effects of human services.

1. Human services emphasize deficiencies -> which undermine the sense of capacity and self worth of a client.
2. Human services create a demand on -> which reduces the cash income and public market choices of the client. budgets .
3. Human services focus on problem -> which decreases participation in community solving by experts and systems. life by the client.
4. A dense environment of services -> which intensifies dependency, surrounds individuals and stimulates deviance and neutralizes the positive communities. potential of individual programs of service intervention.

Regardless of whether you accept McKnight conclusions, he has raised important questions about the style, scope and purposes of the human service system which each organization has a responsibility to examine in light of its own existence and a duty to restructure its performance to ameliorate these kinds of problems. Unless the organization is willing to go out of business, it has no ethical position to stay in business.

McKnight suggests specific responsibilities for protecting against the impact of the *interactive iatrogenic* effect of a multitude of service interventions, and while we have strong reservations that doctors, particularly psychiatrists, follow their own admonitions, the construct is a good one..

“Just as the ethical medical professional recognizes and protects against the negative effects of the interaction among many drugs, the human service professional should be *required to identify the negative effects of aggregating programs around a person's life and define the safeguards that will be used to protect against the dependency and deviance that so frequently results from a “forest” of services*” [McKnight].

We would suggest, however, that this is not just, a *primary* responsibility of the individual professional, but is, more importantly, a responsibility of the organizations individually and collectively.

A critical question is inherent in this discussion: “*Is this a system?*”. In other papers the author has pointed out that human services has none of the components of a feedback system and is excessively skewed in fitness between its avowed purposes and its actual implementation. “The critical relationship [covenant] of the present system is between the provider and the funding source. The failure of this equation is the lack of a place for the client. At least in theory, a provider agency can please the funding source through activities that have little to do with pleasing [and helping] the client. There is not a focus on substantive achievement which is, or should be, the “driving force” of the public/not-for-profit system” - [Gardner, J.R. - 1987].

“At its core, business...[profit]...is a feedback system, capital owners, employees and consumers are members of the same system. They coproduce its output. In the ideal, each member contributes value to the system’s processes and requires in return a share of the system’s output... [Sherwin, 1983 as reported in Gardner, J.R. - 1987].

It must be recognized that this feedback system does not exist in the human service system. The characteristics of *ownership* are fragmented between the community-at-large, the fiduciary board, the funding source, and the management, each of which at times plays an ownership role. At the same time the *consumer* is split between the buyer [funding source] and the user [recipient of services]. Perhaps the final irony is that the use of our services is the buyer’s product, in that “improved” clients are the funder’s outcome of choice [although measurements of this improvement, and therefore effectiveness of intervention have never been implemented]. [Gardner, J.R. - 1987]

At a time when business is re-evaluating its reason for being and restructuring itself for quality, there is a great resistance regarding the same transformational process in human service systems. While conservatives attempt to ‘end welfare as we know it’, the human service system continues to compete with their constituents for limited public dollars without even basing such competition on valid, measurable criteria. The incongruence between intent and outcome requires major renovation. Effective organizational behavior must be defined as behavior which leads to higher levels of goal attainment, utilization of resources and adaptation.

O’Brian [1989] has suggested that “the fundamental question for those concerned with high quality services for people with severe disabilities is, **How can we use our resources to assist the people who rely on us to live better lives?** An outcome such as a ‘better life’ is, of course, a moving target as the person living the life is always striving to achieve more. More importantly, most consumers would define a ‘better life’ in terms of fewer, not more services. Such fundamental issues make us uneasy. “But responsible policy makers and practitioners won’t try to dodge the question by reducing the pursuit of service quality to conformity with external standards and regulations or by retreating into arguments about the impossibility of doing anything until science produces objective measures of ‘better lives’” [O’Brian - 1989].

And finally, we must address the medicalization of social problems in living, which along with the criminalization of addictions comprise the two most horrendous mistakes of American society. Many psychiatrists and physicians have pointed out that there is no scientific basis for 'biopsychiatric' interventions, but Baughman might have said it best - "Biological psychiatry has 'no clothes!' ADHD has 'no clothes!' There being no scientific explanations, we must look elsewhere for answers to the epidemic drugging of US schoolchildren in the name of ADHD and every other invented, fraudulent psychiatric 'disease', those whose only intent is to make 'patients' of every mis-educated, mis-parented, troubled, pained, biologically normal, child."

The literature is replete with such exclamations, but the pharmaceutical companies and the American Psychiatric Association continue with the fraud. Thus, medical necessity, determines whether services can even be offered, despite the fact that there is no medical necessity. The federal government feeds the fraud through Medicaid [medical assistance] which requires psychiatric supervision and medical necessity in order to acquire funds. In one action we have created a drug generation and ignored the problems in living of several generations.

Baughman goes on to indicate that 'not one psychiatric entity having a confirmatory physical abnormality or marker or any prospect that any technology will validate one as a disease' and "because psychiatric disorders are biologically/physically indistinct, biological/physical research, no matter how long pursued, or how sophisticated the technology, is doomed to prove nothing".

We will not go further with these arguments in this book. The evidence is so clear and so well documented to anyone willing or interested in taking the time to explore that we will spend no more time here. [See Szasz, Breggin, Mosher, Breeding, Greening, or Siebert.] But what may not be as apparent is that the resources that could be used to address the issues of problems in living are held hostage to the ravages of a mental structure that is self defeating. To tell a child that s/he is chemically imbalanced and not responsible for his/her own behavior is directly confrontational to the proposed method of helping child become personally responsible. The National Institute of Health/National Institute of Mental Health budgets are absurdly oriented towards demonstrating a 'nontruth'. Very little of that budget, supported by 'advocacy groups' such as the National Alliance for the Mentally Ill [NAMI] or Children and Adults with Attention Deficit disorder [CHADD] is oriented towards cognitive behavior management despite the fact that this is the only resource available to help. For those who are interested in conspiracies - this is fertile ground.

Outcome Orientation

The idea of treating each human service intervention as an experiment and of rethinking organization performance and survival goes beyond simply taking precautions to protect the children we serve; it demands attention to outcome. Evans and Myers [1985] introduce the issue of evaluation: "Special education teachers will generally have been

trained in single-subject experimental methodology and taught important principles of research design in order to evaluate the effectiveness of an intervention. While having this background is critical for the special educator as a consumer of research, we doubt that the most feasible way for practicing professionals to evaluate their behavioral interventions is by carrying out experiments that rigorously control for extraneous variables - even if these studies were clinically practical. There are more informative and valuable methods for evaluating one's activities in this critical area." "...objective improvement must be accompanied by recognition of improvement from people who really matter in the child's life: parents, neighbors, employers."

For many years the standard accepted method of evaluating interventions within the context of 'mental health' interventions has included the reduction or control of symptoms and the continuation of services. People with mental health problems who dropped out of service were considered to be resistive to services and/or too 'sick' to benefit from them. Even if peoples' symptoms were reduced and they left services, they are generally expected to fail; the fact that many of them never resurface in the mental health system notwithstanding. The philosophy of the service delivery system is highly pessimistic and this persists despite the fact that even in the most severe and persistent cases [chronic schizophrenia] recent research has indicated that people tend to get better. One study, the Vermont Longitudinal Study of Chronic Mental Patients⁵, followed such patients for over thirty years and found that with or without medication and with no services at all over 60% of them showed NO continuing signs of mental illness. The critical factor which changed the lives of these people was not service, but the lack of it; they had been released from the State Mental Hospital into the community.

By contrast to this general human services perspective, the standard accepted method for evaluating interventions with severely disabled students in educational settings has been the individual baseline, derived from periodic observations of the frequency of a given behavior. "Teachers of severely handicapped students are expected to have the competencies of the applied scientist, in much the same way as practicing psychologist are admonished to be 'empirical clinicians' [Barlow, 1981 as cited by Evans and Myers - 1985]. Systematic data gathering is a prerequisite for carrying out a formal functional analysis of excess behavior. Such a scientific heritage has been the hallmark of behavioral interventions.

Evans and Myers suggest [and we agree] that there are limitations to this approach. First, it is a singular measure of a singular behavior in a singular situation; while what is needed is a repertoire of behaviors available for a variety of situations. "As an *evaluative* approach, the charting of individual responses leaves much to be desired. It will not answer the question of whether the change documented is clinically or educationally significant; it will not answer the question of whether the intervention strategy itself was

⁵ This study is not alone in its optimism. Others include Manfred Beuler's study in Zurich; Huber's study in Bonn, Germany; Ciompi's study in Lausanne, Switzerland; the Iowa 500 Study; the World Health Organizations International Pilot Study of Schizophrenia; the Rochester First Admission Study; The Alberta Hospital Study in Canada; and the Boston State Hospital 12 year follow-up. "All these studies found that the outcome for schizophrenia, over the long term can be very positive.

appropriate, humane, and in keeping with philosophical or legal assumptions regarding the handicapped child's rights." [Evans & Myers - 1985]

Edward Deming in his thesis on *quality* suggests that there must be a *material* impact on the consumer's life. By this standard, until the child's quality of life improves; until the child is able to perform appropriate behaviors in normal and valued settings; the interventions, no matter how well intended, have failed. "For children with severe handicaps... it is important to take seriously any evidence that some skills are more powerful or useful than others and should thus be given priority as educational goals. Guess and Noonan's [1982] *critical skill* and Wahler's [1975] *keystone behavior* concept reflect the idea that there are certain target behavior that are particularly crucial to maximum participation in everyday life. Such behaviors are said to produce multiple benefits in return for instructional planning, either because they are somehow pivotal skills needed for the development of other important skills or because they are associated with multiple uses in a variety of current situations." [Evans & Myers]

Evans & Myers suggest other evaluative criterion including *educational validity*, which is contingent upon meaningfulness of the behavior change and the specifications of the educational plan. We are talking about a learning process which must be tied closely to the child's skill acquisition goals. Monitoring of skill acquisition must be accomplished with consideration of impact on other areas of the child's educational intent. *Social validity* refers to the relative value that different persons would place on the behavior. The social validity of a goal can be established by evidence that *significant* people in the child's life see the goal as one that is meaningful to them. This emphasizes the role of the child/parents in designing the educational goals of the individual education plan. *Empirical validity* can be established by the immediate effects of learning a skill and is additionally supported by evidence that the goal's attainment produces an exponential effect that demonstrates long term outcome. Changes of behavior that lead to employment after graduation demonstrate long-term *material* impact which can be empirically determined. Mastery criteria include evidence of generalization and maintenance of behaviors over time.

The quest is not for pristine research conditions, but rather for practical and defined *intention* against which generalized *outcome* can be determined. "While we strongly share the value of science as a model for thinking, we ...feel that a slightly more liberalized view of basic research should be adopted if we are to make the most of research findings." We have argued that traditional evaluation strategies are inadequate. "Decision making by clinicians is simply not *summative*. The clinician must observe and respond to nearly moment-to-moment information on each pupil's performance in a *formative* way [Evans & Myers - 1984]."

Summative data which judges whether the intervention has worked is clinically appropriate to *cumulative* data across many students and many interventions, while interactive evaluation is necessary for 'fine tuning' the intervention to assure outcome with this particular student, at this particular time.

The question then of therapeutic, medical interventions and their effectiveness with behavioral disorders, despite failure to keep *cumulative* or *summative* data regarding outcomes has been significantly tested. The question of failure can be determined from two perspectives:

1) specific *summative* outcome data from pristine, controlled tests and 2) from generalized cumulative data drawn from years of *formative* practice. As we shall see in later sections, the medical model has failed from both perspectives as defined by its own supporters.

Two other areas of interest are pointed out by Evans and Myers. The first they call *educational integrity*. “Almost all traditional and behavioral assessments used in educational programs focus on student performance and behavior. However, many of the intervention procedures described in the behavioral literature **really refer to changes in the clinician’s behavior**. Adoption of any specific educational program plan alters the existing ecological system in the classroom.” This is a very powerful point and is one of the cornerstones of the propositions that will be developed later in this volume. Second, “the strongest evidence of the effectiveness of any skill training program would still probably be *replications of those effects* across children”. Just as the traditional medical and therapeutic models have consistently failed to demonstrate cumulative effectiveness across the whole spectrum of population and time; so any new intervention system that claims to be effective must meet this challenge through long term demonstration and documentation. It is not significant to demonstrate that this child was helped, or these children learned these skills. It is necessary to demonstrate that this method:

- a) *prevents* social interpersonal deterioration, and/or
- b) enhances the ability of most children who demonstrate problems in living to function adequately in valued settings.

*Our purpose is to identify an approach which is congruent to other educational processes and which shows potential for the development of interventions which can be done within the context of the school and which will support **measurable outcomes**.*

These outcomes must realistically be connected to the intention of the intervention, thus requiring the intervention to be outcome specific. Intervention without explicit goals and targeted time limits are much less likely to be helpful. This requirement of specific outcome orientation should focus the practitioner on defining specifically what s/he feels can and cannot be accomplished through the intervention, which in and of itself can improve the process of helping.

The Other Side Of Crisis

“A semantic analysis of the word *crisis* reveals concepts that are rich in psychological meaning. The Chinese term for crisis [weiji] is composed of two characters which signify danger and opportunity occurring at the same

time [Wilhelm - 1967]. The English word is based on the Greek *krinein* meaning to decide. Derivations of the Greek word indicate that crisis is a time of decision, judgement, as well as a turning point during which there will be a change for better or worse” [Lindell & Scott - 1968]. [Slaikau - 1990]

Slaikau goes on to suggest that crisis is an essential building block in any structured understanding of human growth and development. Far too often people think of crises as the unusual, mostly negative events that bring disruption to ‘normal’ life. The implication is that an ideal world would be one without crisis, with things moving along pretty much on an even keel. In real life, very few people avoid crises altogether. Adult life, whether neurotic or normal, healthy or ill, optimistic or pessimistic in outlook, is a function of how we have weathered earlier crises, whether changing schools, surviving the divorce of one’s parents, dealing with life-threatening illness, or surviving the loss of a first love.

Crisis is a time when “everything is on the line”. Previous means of coping and managing problems break down in the face of new threats and challenges. Clinical data suggests that some form of reorganization will begin in a matter of weeks after the onset of crisis. But whether that reorganization is toward growth and positive development or toward psychological impairment *depends on the way in which the individual perceives and uses the disorganization and disequilibrium of the crisis*. If the perception is one of a temporary loss of control from which one can learn new skills in coping and problem solving for the future, then the process of reorganization is a strengthening one. “That which does not kill me makes me strong” -[Nietzsche]. On the other hand if one perceives the crisis to be something over which they do not have, nor never will have control, the outcome is likely to be quite different.

Anyone intervening in a crisis on behalf of another person is required therefore to begin immediately to do things in a manner which conveys the potential for regained self-control. Such methods unfortunately are not the normal form of intervention with children in crises. The considerations of a crisis are not just negative despite how they may feel to the people involved in the heat of the situation. When the stakes are high, the people required to respond must find a way to make their intervention one which will support the opportunity and not enhance the danger. Yet the interventions into emotional and behavioral difficulties often support the notion that the person is “out of control” and unlikely to be able to make positive use of the experience. Part of this impact may come about because the people immediately available are not properly prepared to intervene appropriately. But unfortunately, it seems that those professionals charged with the responsibility of crisis resolution are equally prepared to dramatize and traumatize. The persistent use of medication and removal seem to give very powerful *negative* messages about the situation.

At its core this Volume raises the question whether teachers will be prepared to help children protect themselves against the dangerous outcomes of crisis and mobilize resources to take advantage of the opportunities for constructive change. The potential for a first order intervention - psychological first aid or PFA, which in function is similar to

cardio pulmonary resuscitation [CPR] in that it maintains the most positive “life signs” until the professional is able to take charge, should be a required skill of all teachers and other adults. From a sociocultural aspect, crisis services should be integrated into a wide range of community systems.

Several factors are involved in whether the crisis results in growth or harm. An initial consideration is the severity of the event touching off the crisis. But despite our personal views of this precipitating event, the severity may be viewed differently by the individual child based upon their own *personal resources*. Whether born that way, or seasoned through life experience, some children are better equipped than others to cope with life’s stresses.

A third set of variables include the *social resources* present at the time of crisis. For a child in the classroom, the list can be reasonably long and includes other students, teachers, school nurse, administrative personnel, friends, etc. The fact that most of these people are at least aware of CPR and not at all aware of psychological first aid [PFA] is not surprising given the “mystification” given to psychological processes by the professionals involved with them. It is however, a major failure which needs correction. Each of these people is capable of providing a first-order crisis intervention. In fact, many of them will. They will attempt to “console” or “control” the child in crisis and whether that intervention is helpful or harmful is purely determined by the “luck of the draw”.

This first-order crisis intervention is described by Salikeu as a helping process aimed at assisting a person or family to survive an unsettling event so that the probability of effects [e.g., emotional scars, physical harm] is minimized, and the probability of growth [e.g., new skills, new outlook on life, more options in living] is maximized. Crisis intervention is something that takes place *after* an unsettling event has occurred, though *before* its ultimate resolution, whether positive or negative.

“An examination of the history of psychiatric patients shows that, during certain of these crisis periods, the individual seems to have dealt with his problem in a maladjusted manner and to have emerged less healthy than he had been before the crisis” [Caplan - 1965]. If an examination of adult psychiatric patients concluded that a poorly handled crisis or transition led to subsequent disorganization and mental illness, then it follows that prevention should look closely at developmental transitions of childhood and early adulthood [Slaikeu -1990].

As we will note later cognitive growth is a result of dissonance caused by the failure of cognitive structures to predict and control events. Put more strongly “(g)rowth can only occur after previous patterns have been destroyed and the rebuilding process takes place” [Slaikeu - 1990]. If crisis can result in either negative or positive outcomes, the goal of intervention is not to prevent crisis, but rather to *enhance* or *enrich* a child’s abilities to deal constructively with those events.

Primary prevention aims to reduce the incidence of disorders, and we will delineate a means of developing a more prosocial environment as well as increasing an individual

child's cognitive skills, which may be able to reduce both the frequency and the severity of unsettling incidents. Secondary prevention aims to minimize the harmful effects of events that have already occurred, which is what PFA as a first order intervention would provide. Tertiary prevention aims to repair damage long after its original onset. To a substantial degree this is seen as the provision of a one-on-one cognitive behavioral management to provide the child with *in situ* opportunities to review *alternative* responses; develop *rigorous* analytical rules of evidence; and finally teach interpersonal and utilitarian skills which can help to re-establish the child within the mainstream of school life.

The purpose of this volume is to suggest that both the opportunity and the means exist to provide children with an optimistic milieu for growth and development.

Ethical Decision Making

"The medical profession has long understood that its interventions have the potential to hurt as well as to help. The Hippocratic oath ... concludes with the primary mandate "This above all, do no harm." The harmful capacity of medicine is recognized in what current medical language calls iatrogenic disease - doctor created maladies" [McKnight - 1989]. The other human service professions according to McKnight have "no tradition of routinely analyzing [if] possible negative side-effects exist."

If as McKnight suggests "it is critical that we begin to understand the iatrogenic aspects of the major agent of public policy - the human service professional", we must begin to examine how these professionals make decisions within the context of funding and organizational policies with regard to human impact.

When people are providing help to others they are in a position of great decision making flexibility. In human services the individual direct service worker is faced with what appear to be indeterminate decisions every day with regard, at least, to the direct interactions with clients. Clearly the argument could be made that human behavior, particularly that of a severely disorganized and depreciated child, can not be accurately assessed and defined in a manner which indicates that there is a significant probability of a single actions producing expected results with a given individual. However, for individual behavior *all* is probability.

The process of *responsible* decision-making involves recognition of those to whom we are responsible, and the sorting out of the things for which we are responsible. To choose to be responsible for one thing often excludes the possibility of being responsible for another [Gustafson & Laney - 1968]. Developing the answers to the questions of to whom and for what the helping professional is responsible has requisites for both the organization in which the helper functions and for the helper as an individual. The expectation of a *professional* dialogue between the two in which a *rational* determination is made prevails upon the *ethics* of both.

Within the parameters of organizational principles and individual client complexity, the human service worker needs to find some comfort that they are making the right decisions. Part of this responsibility adheres to the human service administrator, who must narrow the decision field to make it more deterministic. We cannot [or at least should stop] allowing individual direct service workers to make salient decisions about clients purely on their own initiative. While anyone who has ever received help can tell stories about “wonderful” helpers, this is all too often outweighed by the “awful” ones.

We define several *states* of decision making which are developed from three basic decision making factors: 1) the *state of the problem*, 2) the *state of the decision maker* and, 3) the *intention* of the decision maker. In regard to the state of the problem we range from the simple, deterministic problem to the highly stochastic, indeterminant problem. Sutherland - [1977] groups the range as follows:

- **Deterministic:** Where for any given set of starting-state conditions, there is one and only one event which may be assigned a significant probability of occurrence.
- **Moderately stochastic:** Where for any given set of starting-state conditions, a limited number of qualitatively similar events must be assigned significant probability of occurrence.
- **Severely stochastic:** Where, for any given set of starting-state conditions, some number of qualitatively different events must be assigned significantly high probability of occurrence.
- **Indeterminate:** Where, for any given set of starting-state conditions, there is **no** event which can be assigned a significant probability of occurrence; thus the high probability that some outcome we have not been able to pre-specify will occur.

The question of complexity is an important issue in regard to human service interventions, for part of the *creative* process is to *increase the number of alternatives* through overcoming the hierarchy of ideas that keeps traditional [and therefore less novel] ideas at the forefront of thought. Thus, part of the *professional* process is to increase the complexity of the decision by increasing the probable options.

Regarding the *state of the decision maker*, we are interested in the psychological state, ranging from instinctive, to emotional, to rational. The more *aware* the decision maker is with regard to *goals, objectives and outcomes; values and principles, antecedents and consequences, and sequences and linkages* of decision making, the more rational their decision making is likely to be. Clearly, the professional decision maker is, or should be rational. The professional should have a clear set of principles and values upon which client decisions are made. They should understand the outcomes that are desired and weigh outcomes *before* decisions are made, not simply rationalize afterwards. They must identify the sequence of events and the linkages of this event to future goals if they are to enhance their professionalism.

All is lost however, if their motivation is suspect. The final factor, the *intentionality*, is a critical one. The volition or motives of the professional decision maker in regards to the *personal* or *fiduciary* benefit of the decision are critical to meeting professional criteria. Increasing complexity through multiple alternatives and making rational decisions about goals which are *not the client's*, are not professional decisions.

The highest order of professional decision making would then be defined as complex, rational and fiduciary and the lowest order would be the simple, emotional and personal. The orders could be expanded and prioritized by placing the highest value on the principle of fiduciary; the next on rationality; and the next on complexity. We cannot afford to allow individual helping person's to simply make any order decision they like when the helping is with a highly vulnerable child/family who has turned to the helper in trust.

The first step in the process of honing the decision field is for the administration to articulate a clear *mission* and the underlying *philosophy*. Many feel as though such abstract thought is not pragmatic nor appropriate to "getting the job done", but we suggest that it is critical. If one is to *test* effectiveness and to promote *best practices*, one must have a way of assuring [within practical reason] that the people directly relating to the child with problems in living are "*doing the right things*" and "*doing them right*". These two distinct dimensions are part of training and of supervision.

Every art and every inquiry and similarly every action and pursuit, is thought to aim at some good; we act toward an end or are purposive. We are, however, by no means unanimous in the choice of ideals to be realized nor in the estimate of the potentialities of the material that is to be given the desired or desirable form [Niebuhr - 1968]. It is essential, therefore that the organization and it's helping professionals enter into a conscious *dialogue* about the ideals, goals, values and a conceptual understanding about the people they are serving; the client's capacities for growth and development and the preferred means to achieve those goals and ends. There must be accord regarding what we are about.

Once having achieved such accord [and failure to do so should explicitly mean a change of employment for any responsible professional]; *policies* must be developed which will provide guidelines for action within the organization. We come under the rules of family, neighborhood, and nation, subject to the regulation of our action by others. Against these rules we can and do rebel, yet find it necessary ... to consent to some laws to give ourselves rules, or to administer our lives in accordance with some discipline [Niebuhr - 1968]. The organizational life must be considered as both consenting to rules and policies and as taking part in their development. The freedom to accept the policies as the rules of organization are part of finding guidance in the making of complex decisions.

Because we inherently see the value of *individualized* services and the indeterminacy of decision-making, we tend to think that *standardization* is taboo. What happens, of course, is that the services become individualized based upon the belief system of the individual direct service worker, not on the individualized expectations of the child and his or her

family. Thus the root of an individualized system is paradoxically to insist that certain thing be done the same way [with the same principles and values] all the time and every time. The basis of standardization should be the principles and values which the administration [after rigorous analysis] believes are significant to the attitudes and actions which are helpful.

We further suggest that these values that the administration has stated as principles of methodological intervention must be held as *commitments*, not simply as *ideals* or *goals*. The administration must articulate these principles with the intention that they will be implemented and have the means to identify when they are or are not. In this way, these principle values become more than abstract ideas, but become the fabric of the intervention process. Had the medical model agencies clearly articulated their intentionality, rather than allowing each worker to “eclectically” intervene in their own pattern, the failure of the system would have been much more quickly apparent.

While we at once admonish human service administrators to develop standardized methods of acting for their staff and for developing the philosophical principles and values upon which the helping person must act, we equally recognize the *situational* aspect of decision making of the helping relationship and equally encourage helping people to break the rules.

In the history of theoretical ethics, as well as in practical decision-making, two great symbols for understanding have led to many disputes as well as to many efforts at compromise and adjustment. Those who consistently think of *man-as-idealist* [goal seeker] subordinate the giving of laws to the ends. For them the *right* is to be defined by reference to the *good*; rules are utilitarian in character; they are means to ends. All laws must justify themselves by the contribution they make to the attainment of a desired or desirable end. Those, however, who think of man’s existence primarily with the aid of the *law-abider* image seek equally to subordinate the *good* to the *right*; only right life is good and right life is no future ideal but always a present demand [Niebuhr - 1968].

The consequentialist, or goal seeker will therefore break rules in order to achieve ends, while the legalist ignores ends to justify the means. As with most dilemmas, the answer is rarely *either* or *or*, but is somehow a creative interlude between the two. The rock-bottom issue in all ethics is “value”. Where is it, what is it’s locus? Is the worthiness or worthlessness of a thing, action or belief inherent in itself? Or is it contingent, *relative* to other things? Is the good or evil of a thing, and the right or wrong of an action, intrinsic or extrinsic?

Martin Buber says plainly: that “value is always value for the *person* rather than something absolute, independent existence.” Nothing is worth anything in and of itself. It gains or acquires its value only because it happens to *help* persons [thus being *good*] or to *harm* persons [thus being *bad*]. People determine value, and they determine something to be of value for some person’s sake. In the context of health, education and welfare, it is the person being served for whom we make decisions, and they and *they alone who*

determine value. Value can only be determined by *outcome*. Either the outcome was helpful to the client, or it was not.

The first element in a theory of responsibility is the idea of a *response*. If we use value terms, then the difference among the three approaches may be indicated by the terms, the *good*, the *right*, and the *fitting*; for teleology is concerned always with the highest good which subordinates it to the right; legalism is concerned with the right, no matter what may happen to our good; but for the ethics of responsibility the *fitting* action, the one that fits into a total interaction as response and as anticipation of further response, is alone conducive to good *and* right for it strives to act in the most *appropriate* manner to achieve the most *preferred outcome* as defined by the individual being served..

The rightness of an act depends on the way in which the act is related to the circumstances impacting upon the child with whom we work. Caring is not something we have or are; it is something we do. It is a normative expectation in all human services. Our task is to act so that more appropriate outcome will occur than any other possibility. It is an *attitude*, a *disposition*, a leaning, a preference, a purpose.

The enhancement of the child's self-actualization is the *regulating principle*. In order to be self-actualizing, the child must first determine what to be. The child must then understand the steps that must be taken to become. Then the child must try out this new skill, attitude, belief, behavior and test the validity of the experience. Then the child becomes.

The helping person must do what s/he can, where s/he is; the true opposite of caring is indifference - you turn the child into an it, a thing, a *label*. The helping person enters into every decision-making situation fully armed with the ethical maximums of his or her agency, profession, community and heritage and s/he treats them with respect as *illuminators* of the problem. However, s/he must be prepared in any situation to compromise them or set them aside if a *caring* attitude seems better served by doing so.

Thus *reason* becomes the instrument of judgement; not law, or policy or rules. This reason is honed by the universal principle of the child as the *primary driving force* in the decision making process and the corollary obligations to the most *appropriate* result as judged by the child/family's stated preferred outcome.

Universal obligation attaches not to particular judgements or conscience, but to *conscientiousness*. What acts are right may depend on circumstances...but there is an absolute obligation to do whatever may on each occasion be right. Our obligation is relative to the situation, but obligation in the situation is absolute. [Fletcher - 196?⁶]

Helpful decision-making aims at the contextual appropriateness - not the "good" or the "right" but the *fitting*. Circumstances [preferences] alter cases, rules and principles providing reason is honed by the child's self-actualization. The creative tension between the administration's clear intentionality and the resultant rigorous attention to the

outcome of that intention and the *ethical posture* of individual workers has a tendency to hone apparently positive principles into ever improving policy. But this can only happen, if the attention to the questions of validity are rigorously pursued.

Working Suppositions

Personalism

The helping process deals with human relations. We put *people*, not things at the center of concern. Obligation is to the child and his/her family, not to laws, security, or property. True existence lies in personal relationships. Only free persons, capable of being the *responsible self* can sustain relationship and thereby enter the field of obligation. Children become capable of true existence within personal relationships and need to make choices and be responsible for them in order to *be*.

“Treat persons as ends, never means.” - Kant

Pragmatism

Outcome is the focus of our activities. Good is what works and gives satisfaction; having a material impact on the quality of life. To be correct or right a thing - a thought or action - must **work**. The very first question must be measured by the universal principle of what maximizes the child's self-actualization, which can be modified only by a standard of caring. We must turn our backs on abstractions and verbal solutions, from fixed principles and pretended absolutes and origins. We must turn toward concreteness and adequacy, towards facts, toward actions and toward power.

Relativism

As the strategy is pragmatic, the tactics are relativistic. Perhaps the most pervasive cultural trait of the scientific era and of contemporary man is the relativism with which everything is seen and understood. We have become fully and irreversibly *contingent*. The helper avoids words like *never*, *perfect*, *always*, and *complete*. However, there must be an absolute or norm of some kind if there is to be any true relativity; to be *absolutely relative* is an uneasy combination of terms which implies random, unpredictable and meaningless.

Our ultimate criterion remains the *preferred self-actualization* of the child. In this context, all issues are of relative importance. We are always expected to act caringly, but how we do it depends on our own *responsible* estimate of the situation's impact on the child's self-actualization. There can be no prescriptions or law. Only caring and self-actualization are constant; all else is relative. Every moral law is abstract in relation to the unique and totally concrete situation.

Positivism

Any moral or value judgement is a *decision* - not a *conclusion*. It is a choice, not a result reached by force of logic. One cannot *prove* that we have chosen the highest good or right. Reason can note facts and infer relations, but it cannot find values [goodness]. A “leap of affirmation” is essential. Value choices are made and normative standards embraced in a fashion every bit as arbitrary and absurd as the leap of faith. Ethical decisions seek justification through appropriate results, whereas cognitive conclusions seek *verification*. We cannot verify moral choices. They may be vindicated, but not validated.

Thus we posit the position that a *preferred self-actualization* is the honing force of the professional decision making process and it must be accepted as a matter of faith.

If we put these suppositions together [personalism, pragmatism, relativism, and positivism] their shape is obviously one of action, existence and eventfulness. Helpful people make decisions instead of “looking them up” in a manual of prefabricated rules. “It’s our policy” is an irrelevant and irresponsible remark. If the policy is appropriate use it and stand by the *value* of it not the words. If it is invalid, *break it*.⁷ The helper must be prepared to justify this breach of policy, but it should be easily done if the purpose was a fitting one.

Another focus of the ethical decision making professional is his/her concern with the antecedent rather than consequent conscience, i.e., with prospective decision-making rather than retrospective judgement passing. **Remedy, not blame** is the appropriate issue. The rationale for the decision needs to be explicit in the helping person’s mind *before* the decision is made.

Every individual is unique; every concrete situation is unique. There are no easy solutions. After thorough consideration of all the values involved, the helper chooses what s/he believes to be the demands of preferred self-actualization in the present situation.

Only one thing is intrinsically acceptable: preferred self-actualization. The helper seeks the child’s best interest with a careful eye to all the factors in the situation. The principle is non reciprocal. It is will, disposition; it is an *attitude*, not a feeling. Implementation calls for more critical intelligence and more self-starting commitment than most people can bear.

Most people do not want freedom, they want security. Freedom is danger, openness. They want law, not *responsibility*. The helping professional is called upon to be mature, to respond to life, to be responsible. S/he seeks the most fitting response possible in *every* situation. This maximizes obligation. You are responsible for what you have done or what you could have done. Not only must the professional helper accept this, but they

⁷ Certainly, if the opportunity to identify problems with a policy exist *before* the need to implement occurs, the professional has a responsibility to work to change the policy. However, policies are guidelines, which have been honed over time, and unless outdated, are usually good principles. This statement implies a situation where the policy, good as it is, interferes with a fitting posture.

must enable the child/family to accept this. Legalist and idealists are safe, whereas the professional helper is always vulnerable to error in any decision making situation. Laws and ideals cut down our range of free initiative and personal responsibility by doing our thinking for us. This makes us much less as persons and professionals. We seek more and more *fitting response*, not merely obey the law or live up to the ideal. We are in the business of loving the unlovable in a nonreciprocal way.

Decision, will, is the key; we shall will another's good only if the self takes second place. Four factors are at stake in every decision situation, all of which must be balanced.

First there is the *end*, the **outcome expectation**. What is it that is wanted? What is the result aimed at? Without a clear goal, decision-making is moot. With a clear goal, the measure of actualization is available.

Second, by what *means*. What method should we employ? With the measure, actualization comes demonstrable *best practices*. With best practices and continued tests, comes improved services; a new standard.

Third is *motive*. What is the *wanting dynamic* behind this desire? Who's problem is it? Have we made the decision because it makes it easier for us, or is most caring and helpful for the child? Know thyself.

Finally, a fourth factor. What are the foreseeable *consequences*? There are more results entailed than just the end wanted and they must all be weighed and weighted. Human behavior is complex and requires great thought.

Decisions are made situationally, not prescriptively. For real decision-making, freedom is required, an open-ended approach to situations. The helping professional affirms the basis of three of the seven questions that must always be asked. S/he knows the what; *preferred self-actualization*, the why: for the *child's* sake, and the who; the child. Only the situation can answer the other four questions when, where, which and how?

The decision making process takes into as full account as possible the context [environment] of every decision looking at the full play of ends, means, motives and results.

Once the relative course is chosen, the obligation to pursue it is absolute. McKnight has challenged the helping professionals. "Regressive policymakers and human service professionals have made unintended common cause because the profession is unable to analyze the negative effects its interventions have had as the potential cause of failed policy." The author would contend that such failure is potentially correctable, but requires that professionals be prepared to both commit to the development of appropriate policy and to the rejection of it when necessary. This includes, physicians, since our review of medical involvement with people with atypical behaviors is the most harmful of all, with the iatrogenic disease being schizophrenia.

The disapproving views of Eysenck, Mårtensson and other individuals and organizations as will be articulated regarding systematic and methodological failure, are all too apparent to the man on the street. Policy makers fail to understand the nuances of necessary change, as they continue to “mouth” platitudes, while pouring more and more money into systemic failure. But even if the systems changed in the most positive form, until individual staff people begin to take *ethical responsibility* for their decisions and actions, the initiatives meant to help will continue to fail. This is because clients are people, and people and situations vary. No approach other than responsible decision making within policy context provides for both the good and the right; ultimately leading to the fitting.

Need

Systematic Failure

As far back as 1953, the Southern Regional Education Board [1954] sponsored a study of mental health resources. “The study made clear that a national mental health program for children could not be based on traditional psychotherapeutic methods because of their high cost, their *uncertain effectiveness* [emphasis added] and their demand for highly skilled professional people -....” [Hobbs - 1983] Despite this finding and continued documentation of the failure of both the school and the mental health system to effectively serve such children [the latest - All Systems Failure - 1993], both the schools and the mental health professionals continue to operate with old and ineffective models.

“Over the past twenty years, numerous reports⁸ have chronicled the lack of appropriate services to meet the needs of children and adolescents with serious emotional disturbances. These previous studies report that children in need of mental health care often do not receive it or receive care that is inappropriate or inadequate.”[Koyanagi & Gaines - 1993]

Evidence of Methodological Incoherence

Therapies

Part of this failure has been the continued use of therapeutic interventions for which there is no demonstrable proof of value. Eysenck [1994] bemoans the fact that “[n]umerous studies since the 1950s have in essence failed to disconfirm the view that various forms of psychotherapy do not show greater effectiveness than spontaneous remission or placebo treatment”. Even though demonstrated to be considerably ineffective, psychotherapeutic and biomedical interventions continue to be used. Part of the reason Eysenck thinks that this is true is that “the very existence of a large professional group is at stake...” In his view psychotherapy is essentially a technology without any scientific

⁸ “The Joint Commission on the Mental Health of Children [1969], the President’s Commission on Mental Health [1978], the Office of Technology Assessment [1986], The Institute of Medicine [1989] and the House Select Committee on Children, Youth and Families [1990] all concur that there are too few resources and that too many of the services that do exist are uncoordinated, inefficient and ultimately ineffective.” [Koyanagi & Gaines, 1993]

basis, and that our major concern should be with the creation and working out of a *scientifically valid* theory underlying our efforts.”

To a large extent *scientific validity* is built upon the development and falsification of hypothesis based upon experiment and measurement. Grawe [1993] a psychotherapist responding to Eysenck states, “I am not concerned with the truth or falseness of any particularly theory. My concern is primarily with as complete and unbiased a determination of the facts as possible.” But as Poincare said: ...-“the facts don’t speak”. As most scientist now realize, facts are theory-laden: a failure to understand this elemental truth lies at the basis of all our misunderstandings. ...(P)sychology, on the way to becoming a proper science, has to slough off the quackery of Freudianism. Psychoanalysis is a pseudoscience just as alchemy and astrology were pseudosciences [Popper, 1959], and while its influence prevails, it will prevent psychology from emerging from its chrysalis. [Eysenck - 1994]

In summary, Eysenck reviews the findings of Smith et al [1980] who found that “Psychotherapy is beneficial, consistently so and in many different ways. Its benefits are on a par with other expensive and ambitious interactions, such as schooling and medicine.” Smith and group further suggest that “Different types of psychotherapy (verbal or behavioral, psychodynamic, client-centered, or systematic desensitization) do not produce different types or degrees of benefit.” The review, however, indicates that neither the high nor the low values belong to typical psychotherapies as cognitive therapies, [2.38], systematic desensitization [1.05] and cognitive-behavioral therapy [1.13] are all well above the average. But these are all cognitive-behavioral therapies. In fact if these are eliminated the average effect size of psychotherapies is 0.65 which is only higher than the lowest rated “therapy”, placebo, which has an effect size of .56. Thus, psychotherapy has an effect size of 0.09 more than no therapy at all.

This is a curious result to Eysenck as he considers the very poor quality of the placebo treatments used, and the fact that the persons administering the placebo treatments would not have *believed* in their effectiveness, while strongly believing in the effectiveness of the therapy proper being administered. One could conclude that the .09 advantage to psychotherapy is the result of such self fulfilling belief, rather than any inherent benefit of the intervention itself. In fact, in this research, the only way that psychotherapies can be considered valid at all, is by using the term psychotherapy as both a super-ordinate and a subordinate classification; there are two kinds of psychotherapy - cognitive-behavior therapy and psychotherapy. Such tactics are not unusual for the proponents of medical model techniques since integration strategies have been used before to co-opt new and more useful interventions. Eysenck’s conclusion is similar to that of other studies of the effectiveness of psychotherapy. Wittman and Matt [1986] state “therapies with behavioral orientation show the highest effects”. And a meta analysis work with children [Petermann & Beckmann, 1993] also give evidence of the effectiveness of cognitive-behavioral therapies.

Medication

The use of drugs with people with emotional problems is extremely problematic on two fronts: first, the salient attribution of drug use is one that eliminates hope: *The Harvard Guide to Modern Psychiatry* [Day & Semrad -1978] warned: “Quickly resorting to drugs convinces the patient that his needs will not be met”. “If the psychosis is overcome without drugs, the patient’s belief in himself and other persons will have been increased. These things - self-confidence, a feeling of self-worth and a belief in other people - are in fact what he needs to definitively overcome with time his [emotional problems]. Thus the use of drugs sends exactly the wrong message.”

Second; “Experience tells that when a neuroleptic drug is given for the first time to a young person in a ...crisis, he will almost always continue to receive the drug for long periods or for life. If the drug had not been given in the first place, the fate of permanent drug dependence could have been avoided” [Mårtensson - 1983]. The use of drugs to solve life’s problems is not limited to medication given by physicians. Our society’s propensity for drug use and abuse is directly correlated to the ease at which the physicians see them as a “miracle cure”. The fact that neuroleptic drugs are effective is not at issue. Numerous studies show that psychotic symptoms are reduced by such drugs, and also that the risk of relapse into psychosis is reduced by maintenance drug treatment.

“A simple thought experiment shows why the drugs, even though they are effective against symptoms, may be bad for the patient: give neuroleptic drugs to infants. The result will be that crying and troublesome behavior is reduced or abolished. If maintenance drugs are given, the risk of relapse into crying and trouble making will also be reduced. The infants are thus “improved” or “cured” by the drugs” [Mårtensson - 1983].

One does not need scientific evidence to understand that although ‘effective’ such drug use is not good for children. Mårtensson goes on to state that he is “convinced that after a few years children in drug-free programs will be better by all criteria.” The reason for this is that these drugs are extremely toxic. They attack the brain’s systems for motor coordination, hormonal control and the limbic system. They have outcomes of Tardive dyskinesia, Parkinsons, Akathisia and Akinesia. “The neuroleptic drugs induce specific changes in the limbic system that makes a person *more psychosis prone* [emphasis added]” [Mårtensson - 1983].⁹

To suggest that other drugs are less toxic misses the point, the drugs have promoted a false definition of emotional problems as a medical problems without a medical solution. They have prevented the helping professions from taking responsibility to deal with the *fundamental issues* regarding “mental imbalance” and have abandoned the young to their fate.

Despite the “chemical lobotomy” aspect of drug usage, this is probably the *least* intrusive of the medical applications. Medical intervention depreciate the individual, deteriorate

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For further information regarding the toxic effects of neuroleptic drugs, see: Bierer, J. *Medicine or “Manslaughter”*, *International Journal of Social Psychiatry*, 29:247-248, 1983, and Breggin, P.R. *Psychiatric Drugs: Hazards to the Brain*, Springer Publishing Company, New York, 1983.

the brain, evoke continued reliance on both prescription and street drugs and generally turn professionals away from their responsibilities to deal with fundamental issues.

"Psychiatry is probably the single most destructive force that has affected American society within the last fifty years," stated Thomas Szasz, Professor Emeritus of Psychiatry at the University of New York and Lifetime Fellow of the American Psychiatric Association (APA).

The Need for Change

Why then, does the "medical model [psychotherapy and medication] in one guise or another remain the intervention [along with incarceration] of choice. "The outcome of many hundreds of studies raises important problems and questions, relating respectively, to (a) the ethics of teaching, advocating and employing methods of therapy that are clearly no more effective than placebo treatments, or no treatment at all, and that are time-consuming and expensive; and (b) the cost-effectiveness of such methods, as compared with shorter and significantly more effective methods, available at lower costs." [Eysenck - 1994]. The ethics of medication are even more suspect.

Loren R. Mosher, a psychiatrist, in an emotional letter of resignation after nearly three decades as a member of the American Psychiatric Association suggested that the major reason for his action was his belief that he was actually resigning from the American Psychopharmacological Association.

Unfortunately, APA reflects, and reinforces, in word and deed, our drug dependent society. Yet it helps wage war on "drugs". "Dual diagnosis" clients are a major problem for the field but not because of the "good" drugs we prescribe. "Bad" ones are those that are obtained mostly without a prescription. A Marxist would observe that being a good capitalist organization, APA likes only those drugs from which it can derive a profit -- directly or indirectly. This is not a group for me. At this point in history, in my view, psychiatry has been almost completely bought out by the drug companies. The APA could not continue without the pharmaceutical company support of meetings, symposia, workshops, journal advertising, grand rounds luncheons, unrestricted educational grants etc. etc. Psychiatrists have become the minions of drug company promotions. APA, of course, maintains that its independence and autonomy are not compromised in this enmeshed situation. Anyone with the least bit of common sense attending the annual meeting would observe how the drug company exhibits and "industry sponsored symposia" draw crowds with their various enticements, while the serious scientific sessions are barely attended. Psychiatric training reflects their influence as well: the most important part of a resident's curriculum is the art and quasi-science of dealing drugs, i.e., prescription writing. [Mosher, 1998]

The U.S. Drug Enforcement Administration [DEA] [1996] issued a report in 1996 in which it stated that it “has become alarmed by the tremendous increase in the prescribing of these drugs in recent years. Since 1990, prescriptions for methylphenidate have increased by 500 percent, while prescriptions for amphetamine for the same purpose have increased 400 percent. Now we see a situation in which from seven to ten percent of the nation's boys are on these drugs at some point as well as a rising percentage of girls. When so many children are involved in the daily use of such a powerful psychoactive drugs, it is important for all of us to understand what is going on and why. The DEA has a responsibility to the nation to control such abusable legal drugs and to insure that their use is confined to legitimate medical need. Certain things have become clear from our deliberations of the last several days, and the public, parents and decision-makers need to hear them.”

But we apparently have not heard them or refuse to believe. Why do we accept this methodology so deeply, that we alter our constitutional law through involuntary commitment, which is the only predictive incarceration available in this society, to respond to its failures? Since there can be no justification on ethical grounds, can greed be the only motivation? Benjamin [1981] seems to believe so.

*The new psychiatry holds that major mental illnesses such as schizophrenia and the primary affective disorder have strong genetic input manifest in defective biochemical functioning, which must necessarily be treated pharmacologically. The heat of this dispute about underlying models of mental illness with their differing implications for etiology and treatment has been intensified by **economic considerations** [emphasis ours]. At issue is third-party payments, with some physicians arguing that they must preside over treatments of disturbances in behavior because of the presumed biochemical causes and treatments.*

Thus, *brazen men*, in this case psychiatrists, have a great deal to lose if the public decides that the pathological idea is a false one. We must also not overlook the vested interest of the pharmaceutical companies who make a great deal of money with their toxic waste. The fact that it took twenty years of patient suits against these firms and practitioners to gain an admission of the existence of *tardive dyskinesia* should not go without mention. Peter Breggin [1983] describes the syndrome as permanent, disfiguring and disabling. In fact, much of what the public might think of as mental illness is the outcome of taking these toxins. Breggin also cites the American College of Neuropsychopharmacology - Food and Drug Administration [1973] which described the *tardive dyskinesia* syndrome in a special report:

The syndrome is characterized by rhythmical involuntary movements of the tongue, face, mouth, or jaw [e.g., protrusion of tongue, puffing of cheeks, puckering of mouth, chewing movements]. Sometimes these may be accompanied by involuntary movements.

In what may be the most positive description of how these drugs work, Seligman [1994] states -

In my image, drugs are themselves foreign invaders, just like diseases. Your body regards the drug as a toxin, and your natural defenses are mobilized to fight it off. A side effect is that these mobilized defenses happen to kill off the disease.

This, of course, is the *spontaneous healing* concept. The problem occurs, however, when a) the outcome of the introduction of such toxins overwhelms the body's immune system and destroys parts of the organism, b) when the presence of a disease is, in the first place, speculative, and c) when there are other less intrusive technologies that seem to have significant impact in helping the individual create a higher quality of life.

Perhaps our continued support for these pseudomedical options is some societal yearning for the mysticism once provided by magic and religion? Or is it simply as Mark Twain has reminded us that "If your only tool is a hammer, all problems look like nails". Certainly the predominant service tool in use resembles a hammer; but clients are not nails. They are goal-seeking entities who respond to our interventions through their own measure of coherence.

The shift from medical [or therapeutic] models to behavioral models and then to cognitive models of intervention is indicative of a potential change in tools; an evolution towards *teaching* modalities as a preferred intervention in emotional and behavioral disorders.. Medical or expert models make decisions about and for people in an attempt to control the way they behave through constraint or restraint. Behavioral models attempt to manipulate the punishments and/or rewards to help the individual *decide* to do the "right thing". The movement away from adverse contracts to positive contracts made the manipulation more powerful. The cognitive and skill training approaches, however, attempt to enable the *person* to think differently for the purpose of deciding to act differently and then providing him/her with an appropriate repertoire of behaviors to fit the new expectations.

Seeing these person's in terms of their *needs*, negates not only their *capacities*, but their *active, goal seeking* behaviors as well. Defining the needs of a person, *without asking that person*, fails to understand the power of desire. "Denying opportunities to express capacities is often the structurally iatrogenic effect of the use of ineffective therapeutic tools. [McKnight - 1989]. But failing to understand the person's goals, desires, thoughts, fears and fantasies is to misunderstand their *intent*. People are *intentional* animals. They *will* become what they want to become. We can only skew their efforts.

If we plant a seed, it will grow towards the sun to become what it is to become. If we place a rock over that plant, it will grow around that rock. If we tie the limbs of a tree whose branches grow up, they will continue to grow up around the bind. Both the plant and the tree will be distorted, but continue on their teleological path. The question we must ask is whether our good intentions *distort* the people we serve, or support their

natural desires through clarification and awareness? The need for change is so powerful because we have failed to understand the reality we face. We continue to treat people like cars; we are mechanics who tinker with people based on our expert knowledge, while failing to use theirs.

The need for change is not simply to focus on outcomes; it is to focus on *the client's outcomes*. It is not simply to *individualize* based on individual need; it is to individualize based on *individual desire*. It is not person focused; it is *person directed*. It is not just to provide community-based services; it is to have the *community provide natural supports*. It is not just to provide *accessible* services; it is to provide services where people are, in *valued, normal* settings. The need for change is based on the fact that we don't now operate with an understanding about how people operate. We assume that they lack something inherent; when what they lack is the *skill* to function in an inadequate world.

Three major fundamental shifts must take place: first, we need to *prevent* serious emotional problems through a process of *teaching* children a deep understanding about how to think about themselves and others. This process will enable the child to determine how best to develop significant relationships and respond to people around him or her. Such natural supports are the best prophylactic to coping breakdown. Second, we need to teach the average person how to respond effectively to crisis; how to intervene in a way that provides attributions of regained responsibility to the individual in crisis. Third, we need to understand that when a person is "distorted" by obstacles strewn in their path; they control the direction of the assistance. In other words, they get assistance with *their* desired concerns, not society's as expressed through professionals.

McKnight raise another interesting point when he talks about the "trade-offs" that occur in the limited public purse. "The...process occurs within the human service budget. Here, however, it is less well understood because the *basic competition for the limited funds available for the "disadvantaged" is between the human service system and cash income for the labeled people*. [Emphasis ours] Service system lobbyist and advocates see the competition for limited public resources as a jockeying between various providers and systems. They rarely recognize or acknowledge, however, that the net effect of their lobbying is to limit cash income for those they call "needy" and increase the budget and income of service programs and providers."

And they don't even need to stand a market test of their services and products. They are paid, not to perform well, but to perform. The test of organizational effectiveness is to provide more and more service and has little relevance to helping people. When a person truly needs to seek out service supports, why shouldn't they do so at their own preferences. A simple voucher system adds a market test to the human service system. Instead of funding programs, fund people who will then decide whether the service is beneficial to them by voting with their feet and dollars.

Power Shift

In the process of change, there must be a continuous power shift away from the institution and the “expert” to the individual, and the presence of some level of power is beneficial in itself since it affects how one feels about oneself. However, empowerment is not simply the gaining of power, but must include the competence to utilize the power available. If the power is available, but not usable, this becomes debilitating to the individual, often reinforcing their most self-deprecating thoughts. Knowledge and skill are the tools for creating competence. It is a professional responsibility of the “expert” to provide sufficient *usable* knowledge to enable the person to make an *informed* and *appropriate* choice about self-remediation. One of the skills that is most essential to enable the individual to overcome the “pathology infection” of the last fifty years, is the skill to think positively about one’s self. Two significant influences on this process have been identified: 1) a process of conveying positive [balanced and rational] information about the person to the person, and 2) a “how to think” process which helps the individual examine the outside stimuli in a cogent, objective manner in order to seek to identify for themselves a more gratifying self concept.

Part of the exchange is to provide to the individual, different social cues and expect that through a more rigorous examination of the evidence, they will begin to identify more positive outcomes. Changing the environmental cues to a person who attracts attention for maladaptive behaviors can be quite difficult. It demands the ability to tell the person that what s/he is doing is unacceptable while at the same time telling her that s/he is acceptable. The separation of these two constructs is not always easy for the general public to understand and probably the most successful “metaphor” describing this phenomenon has been the concept of “tough love”. The construct must be hinged on a *directive communication*, which paradoxically makes the child feel *competent*. Non-pejorative, non-moralizing authoritative directives can convey a belief that the person *is* capable and competent and if done in a manner which also conveys an acceptance of the person, such mandates can be quite empowering. This is quite contrary to conveying to the child that the reason s/he behaves in ways that are unacceptable is that s/he is *incapable* of behaving any differently because of a defect of emotional, cognitive or physical quality and therefore s/he needs someone else to control her for her own good.

While it will take some time to provide the general public with the skills to implement such positive notions [particularly since we have spent many years, energy and dollars convincing them otherwise], it is becoming apparent that such concepts are entering the “common knowledge” domain. What is needed is to ensure that the most significant adults in the child’s life learn to improve their own communication. To accomplish this will require the involvement and cooperation of the child’s parents and siblings. Both *directive* and *transactional* communication have reasonably good potential of being incorporated by parents and teachers, if a comprehensive effort is made to incorporate cognitive/behavioral skill training perspectives within the school environment.

Resistance

It is clear that these new constructs will cause conflict with the old constructs and that people relating in the old methods will hardly become the experts of the new. To believe

that they will either change or give up their power positions ignores the potential mutations of the present idea. Historically the expert model has defeated new ideas through a “join them and destroy them” behavior. Medication **and** social rehabilitation are better than social rehabilitation alone. Such mutations have now become acceptable and the psychosocial rehabilitation movement is dead. Since “Moral Treatment” is the treatment of choice [most effective] and since the doctors are in charge of treatment; the **doctors** should be in charge of Moral Treatment. And Moral Treatment disappeared. It was suggested by Thomas Kuhn, the creator of the concept of “paradigms”, that a new paradigm must wait for the old experts to “die out”.

A change or leave directive to the “experts” in dealing with atypical people is difficult, if not impossible, since they hold the reins to the entire system of relationship to the affected population. Destruction of the system, does not seem prudent because of the personal perspectives of the disabled population learned over many years [however, one gets the impression that the political attitude of the country may just decide to eliminate human service systems altogether in their frustration at their combined failure]. The creation of a new expert group is difficult because of the potential “contamination” or abuse by the present expert leadership. *One strategic approach to replacement is to create a cognitive behavior management component in the school system which is provided by school personnel.*

Self/Social Concept

When talking to lay people and experts alike, we find that one overriding description is used when talking about “troublesome” children; lack of self-esteem. According to Fukuyama [1992], Hegel’s non-materialistic account of history is based on his concept of the “struggle for recognition”.

Human beings, like animals have natural needs and desires for objects outside themselves such as food, drink, shelter and above all the preservation of their own bodies. Humans differ fundamentally from the animals, however, because in addition s/he desires the desire of other human beings, that is, s/he wants to be “recognized”. In particular, s/he wants to be recognized as a *human being*, that is, as a being with a certain worth or dignity. This worth is demonstrated by his/her willingness to risk life in a struggle over pure prestige [for the sake of higher, abstract principles and goals].

According to Fukuyama, the desire for recognition was “first described by Plato in the *Republic* when he noted that there were three parts to the soul, a desiring part, a reasoning part, and a part that he called *thymos*, or spiritedness. Much of human behavior can be explained as a combination of the first two parts, desire and reason: desire induces men to seek things outside themselves, while reason or calculation shows them the best way to get them. But in addition, human beings seek recognition of their own worth. The propensity to invest the self with certain value, and to demand recognition for that value, is what in today’s popular language we would call ‘self esteem’. The propensity to feel self-esteem arises out of the part of the soul called *thymos*. It is like an innate human sense of justice. People believe that they have a certain worth, and when other people

treat them as though they are worth less than that, they experience the emotion of *anger*. Conversely, when people fail to live up to their own sense of worth, they feel *shame*, and when they are evaluated correctly in proportion to their worth, they feel *pride*. The desire for recognition, and the accompanying emotions of anger, shame and pride, are parts of the human personality critical to ... life” [Fukuyama - 1992].

One can almost imagine the desire for recognition, belonging and affection to be part of an innate psychological mechanism that predisposes the individual to learn social interplay and organizes the learning process. When the emotional outcomes of anger or shame occur, there is a need to modify the cognitive construct regarding one’s self worth or to strive to improve one’s image or achievement. These are powerful motivational forces towards growth and development, if they are not distorted.

When we commonly refer to self-esteem, we are usually talking about a high degree of self-appreciation. Appreciation is used here because of the meaning both to like and to *increase* in value. Thus, when we appreciate ourselves we not only like who we are, we can expect to appreciate or improve. If we dislike ourselves we can expect to depreciate, or decrease in value over time. The process of self-appreciation requires both an *internal* and an *external* aspect. We must both *affirm* ourselves and be *confirmed* by others. While dictionaries tend to use affirm and confirm as synonyms one is an active process the other reactive. Affirm - to certify or authorize; confirm - to corroborate or authenticate. The implications are that one must affirm him/her self in order to be confirmed by others.

Affirmation is **not** appreciation. Affirmation is the process of certifying oneself as being appreciated OR depreciated and the confirmation often becomes a *self-fulfilling prophecy* of the affirmation assumed. However, the development of this affirmation/confirmation process for the child is an *interactive* one. Thus incremental affirmation of self-appreciation is confirmed by the appreciation of others as that confirmation supports the affirmation; a cascade effect. A similar, but negative focused cascade effect happens through a depreciation process.

It is doubtful that the infant ever makes firm either appreciation or depreciation before an outside instigation by an adult. And yet, it is difficult to perceive of a high percentage of adults not appreciating infants. The difficulty seems to be contained in the nuances of language, in which **moral imperatives** replace corrective statements and in the operation of the mind, which accepts all propositions as *true* until proved otherwise. When the significant adult states that the child is *bad* for performing a certain behavior, rather than that the behavior is *bad*, or better yet, *wrong*, or inappropriate, the child is being told that they are depreciating in value. Even when the behavior is identified as bad, the child by implication of having performed the behavior may deduce that s/he is morally devalued. Statements that suggest that the behavior is inappropriate for the context, inefficient, ineffective or even dangerous, even when authoritative and directive, avoids the depreciation quality. Unfortunately, not many parents, teachers and other adults are cognizant of the moralizing aspects of how they use the language and use it without conscious thought.

However, the development of a child is an interactive thing and children code even these moralizing signals differently. Some, who feel well loved for other reasons, may be able to recode the words to a more appropriate understanding. Thus each appreciative confirmation becomes a prophylactic for each depreciation. However, it also works the other way around. Children who are depreciated in other ways, subtle [i.e. overhearing how they were an expensive “accident”] or otherwise [psychological or physical abuse], will code in the most negative rather than the most positive manner. Each depreciation confirmation becoming a prophylactic for any appreciation that might be given.

Michelle Borba in her *Esteem Builders* series has defined five components of self-appreciation which she suggests are generally acquired in a hierarchical fashion.

The first is **security**. Children must feel safe physically and emotionally if they are to feel good about themselves, others and their future prospects. They must develop a capacity to trust their environments and the people around them so that they can be open to risk new experiences, handle change or spontaneity without undue personal comfort, feel self assured and maintain a posture of confidence instead of stress, anxiety and fear. Feeling emotionally safe, children can open up to others and share their ideas and feelings. Lack of such security makes forming trusting relationships quite difficult; and yet, it is the creation of such relationships that will provide the security necessary to go on.

The second building block is **selfhood**. Children who know who they are and what they believe in are children with healthy feelings of individuality. They can attach descriptions to themselves that are accurate and clear. They can handle constructive criticism because they recognize their unique qualities and special contributions. The Security that comes from Selfhood allows them to praise and compliment others. When children do not have a sense of who they are or if that sense is so distorted as to be harmful to their ability to predict the events of the world effectively, cognitive restructuring becomes an important part of self affirmation.

The third is **affiliation**. Children with a strong sense of affiliation feel appreciated and accepted by people who are important to them. They feel good about their social experiences and generally feel connected to others. Past successes with others allows them to seek out new relationships and maintain present friendships. Because they possess these qualities of affiliation, they are generally sought out by others in return. They are confirmed by their sociocultural environment.

The fourth building block is **mission** or *intentionality*. Children with a sense of mission have purpose in their lives. They know where they are headed. There is an aim and direction to their existence. The arrow of time points toward the future. Such children are not only able to set realistic and achievable goals but are able to follow through on them. Problems and obstacles don't get them down. They meet them head-on knowing there are choices in life. They seek alternatives and plan options so that problems can be minimized and goals reached.

Finally, there is the building block of **competence**. Children with a sense of competence are aware of their strengths and able to accept their weaknesses. Failure is rarely an issue for these children; they perceive mistakes as valuable learning tools. Competence [capacity to expectation] allows children to validate themselves as ‘successes’. They have confidence in approaching the next step of development in an on-going process of growth.

The key words for helpers are trust, positive regard, positive reinforcement, inclusion, problem solving, opportunities and support. Additional impact of the appreciation/depreciation perspective focuses on the people from which it is derived. People of *significance* [parents, teacher, siblings, intimate peers] give the confirmation that counts. Incidental confirmation of appreciation may cumulatively help, but these can be devastated by one depreciation from someone who *counts*! Thus significant adults have a responsibility to identify, confront and eliminate moralizing distortions whenever and wherever they can. They can also help directly by encouraging the child to begin to develop rational methods of checking for evidence, rather than simply accepting the implication of generalizations and labels.

The child needs to be *positively confirmed* as the ‘best that s/he can be’. The importance of this cannot be underestimated. The shaping of the child by the reflection of others is like the shaping of the world by wind and rain. It is slow, but extremely potent. Toxic input can erode the best of self-affirmation. The author suggests that *all change* happens only in the context of cognitive dissonance caused by dichotomous experiences. If I think I am OK and the world does not; one of us is wrong! The struggle to deal with this dissonance is often less than rigorous, and few children have the strength of conviction to continue to believe what their world says is wrong. Therefore, they *must* be wrong. While we have already indicated that such messages are most potent from significant adults, more subtle messages can also erode¹⁰.

What do we say to children in general when we place guards and cameras in the environment, bars on the windows and seal off stairwells? One of two messages come to mind: 1) this is an unsafe environment; the adults are not in control, I should be afraid; and/or 2) I am not trusted; the adults are placing these ‘security’ measures to control me. Either of these messages can be devastating. The first sows the environment with fear, separating children from each other and teachers in a most insecure way. If the adults are not in control, I must either fight, join or flee from the “rough element”. The second message erodes the child’s feeling about him/herself. Maybe I’m not OK. Looks of fear by other children or teachers affected by the environment suggest that maybe I am out of control.

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It is important to note that nonverbal communication is especially potent to the child. We will see later that stimuli is perceived as a sensation which then is comprehended as an intuition or hunch. Unable to articulate our feelings at this level in words, we may develop metaphors to convey some sense of the issue. Finally, as we are able to verbalize or put into words our feelings, we reach a point of understanding. It is often the comprehension level in which the child “decides” that the implications of their sensation are depreciating. Since such comprehensions are difficult to rigorously analyze, they become powerful influencers of our feelings about self, others, and prospects.

Prison environments contribute to prison behavior. Teachers are afraid of the children. The children are afraid of each other. And those who have no prosocial skills find intermittent rewards for antisocial skills. And yet, this is the very environment that many “experts” are creating in our schools and other public buildings. The antisocials are winning and creating antisocial environments where they can thrive. When we add media exaggeration and hyperbole, role models who flaunt antisocial or amoral behavior, and degradation of prosocial role models we have created the environment capable of creating monsters.

Each contrary confirmation, either individually or collectively erodes the child's self-concept. The individual and social struggle to provide positive confirmation for children demands our awareness. After age five, the school is the child's major environment. As the child matures, their peers become the major *significant* source of confirmation. If adults and peers alike are providing negative confirmation to an increasingly self-depreciating child; what can we expect? We can expect more children to be antisocial. We can expect more children to attempt to escape through abuse of substance and attempts at suicide. We can expect more children to be more and more violent. All of this is part of our present heritage.

The astonishing fact is that our children are generally so prosocial. Most children are just kids. They are open, friendly, caring and ready for the challenges of life. We need desperately to find the means to provide these children and their teachers with the tactics to sow the environment with positive expectation and unconditional caring. Now, all parents are concerned about who their kids ‘hang out’ with because of a fear that their child will be negatively influenced. The ‘message’ is that the child is incapable of leadership, influence or power over his/her peers. We need to develop a culture in which the ‘good kid’ is a powerful influence over the other kids.

Parameters for Change.

The problem for the depreciated child is that s/he has incorporated the criticism into his/her own coding system and therefore uses the same moralizing generalizations and labels on him/herself; s/he becomes his/her own mental critic. For children who have incorporated self depreciative concepts of themselves, six specific areas of help can be offered by adult family members and school personnel to help change this perspective:

- Separate the child from the behavior. Children with self depreciating attitudes often behave in ways that are disruptive and unlikable. The significant adult must remind himself that it is the *behavior* that is disruptive and unlikable. The behavior is not the child. The child is affirmatively acceptable because s/he is a child; if for no other reason.
- Give unconditional positive regard. An *attitude*, not an emotion or feeling, of a constructive nature must emanate from every significant adult to every child. This attitude acknowledges the dignity of the child as a responsible human being capable of making decisions about his or her own life with appropriate support.

- Provide a pervading climate of positive expectation. While it is important to determine that the desired performance is reachable by the child; an overall belief that the child can achieve is critical to their success. Henry Ford once said “Whether you think you can or you can’t, you are probably right.” This essential *belief* in the potential can only improve the possibility of its manifestation.
- Provide a climate of positive support: This requires, at minimum, an environment with a positive to negative feedback ratio of 5:1. Since feedback comes from everyone in the environment, this will require a concerted effort to design the environment and provide the cultural artifacts and icons necessary to support positive elements.
- Support the child in quitting his/her critic. The child must be helped to externalize the self-accusing voice, question overgeneralizations and labeling, and develop a rigorous method to evaluate evidence. These are not easy processes for the child and the younger the child, the more difficult it is. The offset is that the younger the child, the less established is the critical voice.¹¹
- Communicate transactionally adult to adult. Helping the child stay adult to adult in communication is supportive in and of itself since moralizing, generalizing, personalization and anger are child/parent attitudes [in a transactional sense]. Adult communication provides regard and supports positive expectations; it helps the child keep focused on rational rather than emotional views. While it may be *directive*, it remains informational and objective.

CHAPTER 2 THEORETICAL CONSTRUCTS

Development

Goal Seeking

¹¹ Howard Gardner’s contention is that children form very specific attitudes about the world and their relationship to it by six or seven. This seems to support Bullis and Walker, as well as other behavioral researchers, that antisocial behavior, if not addressed by the time children reach the age of eight, is increasingly durable and resistant to change.

The zoologist E.S. Russell writes: The directiveness of vital processes is shown equally well in the development of the embryo as in our own conscious behavior. It is this *directive activity*, shown by living organisms that distinguishes living things from inanimate objects. The fact is that the common ground of both organic and psychological activity lies in the directiveness or “drive” which is characteristic of both. We must regard directiveness as an attribute not of mind, but of life...purposive activity, as seen in its highly developed form in the intelligent behavior of man, is a specialized and elaborated kind of directive activity, concerned mainly with the mastery of his environment.”

A feeling for the power of the thrust that inheres in each fertilized ovum is strikingly conveyed in the writing of George W. Corner, embryologist. The growth of the embryo from 1 cell to 200 billion cells, during a period of nine months; from 15 ten-millionths of a single gram to 3,250 grams staggers the imagination. The orderly course of embryonic development and the capacity of the embryo to deal, within its own limits, with unfavorable environmental circumstances in its inexorable move toward realization of its purpose of growth suggests an inner direction, force and flexibility which can be assumed not to cease at birth but to continue to characterize man’s biological and psychological capacity for coping and creating throughout his life.

Corner’s feeling for the purpose and struggle which characterize growth is conveyed by “The spirit, with the body, must grow and differentiate, organizing it’s inner self as it grows, strengthening itself by contact with the world, earning its title to glory by struggle and achievement.”

Corner refers to the power of *choice* and *decision* and the exercise of the will as rooted in man’s biology: “We are led ... by the evidence of comparative anatomy to ponder the freedom of the will, or at least freedom of action, which we have because our bodies are versatile, untrammelled by specialization for extreme but particular skill, and capable of any task the mind may imagine.... The scope of the human mind, the freedom of human decision, are bound up inextricably with the generalization of the body.”

Edmund Sinnot, biologist, writing of the biology of purpose, speaks of living things as “seekers and creators” and of striving for goals as the *essence* of all life, adding that in man these goals have risen to heights before undreamed of, and suggesting that man can set them even higher at his will. He refers to the organizing, goal-seeking qualities in life, of life as regulating, purposeful, ascending, of each human being as “an organized and organizing center, a vortex pulling in matter and energy and knitting them into precise patterns,” and as capable of creating new patterns never known before. Sinnot does not deny or minimize the effect of the environment on the life of the organism. Indeed, he writes that the exact character of the organism will depend in some measure on the environment within which it develops. “In all these cases the genetic constitution of the organism is not changed, but the way in which it expresses itself in development is *very different* depending on the conditions under which development takes place.”

Sinnot's essential thesis , "The insistent tendency among living things for bodily development is to reach and maintain, as a means or *goal*, an organized living system of a definite kind, and the equally persistent directiveness or goal seeking that is the essential feature of behavior, and thus finally the basis of all mental activity, are fundamentally the same thing - merely two aspects of the basic regulatory character all living stuff displays. Regulation implies something to regulated *to*, a norm or a goal, The goal in embryonic life may be regarded as a series of stages that lead to a mature and properly functioning individual, and the goal in psychic life as a purpose or series of purposes, simple and unconscious in primitive instinct, but rising in the mind of man to far higher levels."

Sinnot's hypothesis that living organisms move toward definite goals in both their bodily development and their behavior provides a unified conception not only of man's nature, but also of his relations to others and to the universe.

Ambivalence

This "life force", this drive to achieve proper functioning and maturity of purpose and behavior must overcome a series of obstacles, beginning with a differentiation from others. In the "Dilemma of Growth, Allen identifies the slow period of development in which the infant is provided with the essentials of existence without the stress of independent living as it occurs in the symbiotic period. At birth, a physiological differentiation makes separate living possible, but the reality of conscious separation is relatively undifferentiated. The infant's awareness of self does not exist as a separate individual. Growth as a psychobiological phenomenon takes on reality as the directive energy generates the process of discovery.

But it is the contribution of Otto Rank that makes the understanding of the "life force" clear, for it is in the conception of the ambivalence of the will that the complexity of human response is best understood. If the "will" as Rank defined the life force, continued *only* towards predefined goals or norms, then the choices available to us would be limited simply by the obstacles which life presents. However, human behavior often is beset by paradox, almost going in two directions at once.

Rank's definition of the person is rooted in his perception of the experience of birth. Within the womb, the embryo functions as a unit in symbiosis with its surroundings. Birth means the death of this union. It is the archetypical problem of the struggle of relinquishing the old integration in adopting the new one; i.e., dying in order to be born. On the one hand, the individual strives to reinstate a unity between himself and his environment; that same individual experiences every advance toward independence as a threat. On the other hand, the emergent *will* is assertive and potentially creative. Thus from this perspective, the symbiotic union is seen as a sort of death, a regression, a loss of individuality and "life". Thus union also becomes a threat, something to be feared.

The essential point in all of this is the polarity between separation [individuation] and union [loss of individuality]. This necessary and inherent human conflict leads to both the

essential life ambivalence of the *will* or “life force” and the potential for creative responses to the conflict.

The self-willing creative response can be positive or negative in the perception of society, but it is ultimately an attempt to find the way to be a part of and separate from the other. The need to “have our cake and eat it too” provides the paradoxical nature of human existence. All things can be seen from this dual perspective. And each individual must *choose* his/her own existence.

Life & Meaning

This life choice has been epitomized by Frankl. He suggests that “life ultimately means taking responsibility to find the right answer to its problems and to fulfill the tasks which it constantly sets for each individual.” “Those tasks, and therefore the meaning of life, differ from man to man, and from moment to moment.” Since each task is unique, each must decide for him/herself what s/he will live for; what has meaning. “We cannot always control the circumstances in which we find ourselves, but we must always choose how we will behave in these circumstances.” “When we are no longer able to change a situation -...- we are challenged to change ourselves.” “Rational man adapts to the world.”

Thus the “life force” is free to choose between union and separation; or for Frankl, conformism and totalitarianism. The individual willfully chooses what the optimum level of development will be within the constraints of the environment. This is substantially different than the “life force” of the embryo, but it is also rooted in the biological nature of life itself.

Because the choice exists for each of us to *give* meaning to life, we cannot find it. “S/he who searches for herself is lost, but s/he who gives herself to another, will find herself and the meaning of life”; the paradoxical nature of our existence. Life is meaningless, we are born, we die. Unless we *choose* to give it meaning, by creatively and willfully setting a *future goal*.

Security & Significance

A second paradox exists, however, in that we cannot find ourselves capable of choosing a meaning for our lives unless we find ourselves as worth such meaning. If we are not worthy of living, life cannot have a meaning; but if we are worthwhile, we can give meaning to life. While every human being has the freedom to change at any instant, and therefore can choose to be worthy or unworthy, the major honing influence upon this *belief in self* is based upon *our* perception of how other view us.

The enormous complexity of attributions placed upon us by the roles we are assigned, the *words* used to describe us, and the tones used in conveying the words cannot be underestimated. While the *will* can choose to accept those attributions [seek union] or reject them [seek individuation], the cumulative impact can be eroding to any individual.

Nor can the cognitive aspects be underestimated since the individual must codify and conceptualize what is being assigned to him. We learn best not by words, but by experience. We experience rejection or degradation and the words may support or deny that circumstance.

Difference

Despite the worst of experiences, the will can choose a more positive meaning; “suffering ceases to be suffering at the moment it finds a meaning, such as the meaning of sacrifice [Frankl].” But too often the individual will search for meaning outside of self and fail, for there is no meaning to life. The individual must find him/herself to be different and find the difference to be *acceptable*. Since we tend to reject differences in others, we tend to attribute to difference unworthiness.

What is needed is a different experience; a new and fortifying relationship; one which will engage the individual’s positive will and affirm his/her right to be different from others. Having had this difference accepted by others, the individual can now accept him/herself. Self-acceptance becomes possible through the *love experience* [Rank] of being accepted by another person. The valid love relationship requires acceptance of the *self-willing* in another, bestowing worthiness in preparation for choosing meaning. Thus worthiness is not in ourselves and our behavior, but in the acceptance of that behavior by someone significant to us.

Belonging

The love experience can be significant if one to one, but has greater meaning if one to many. Human beings are social animals. S/he grows in a family and learns the activities of life from peers. It is the group that supplies the final validation of *belonging*. A positive group experience demands a great deal of us. Each of us must find a place within the group and choose to give up some of ourselves [conform] for the need to belong. Lewin has suggested that belonging is second only to love as a human need. A deterioration of this need caused by rejection will lead us to accept roles and functions that are negative, rather than to be ignored.

This need to belong focuses on a desire for union; but the group offers yet another paradox. For within the group, one can belong *and* be different. The group demands both conformity to norms and differentiation of roles. Thus, within the group a creative response to the union/differentiation conflict can most easily be found.

While society is a group and a feeling of belonging to this larger whole is important, the major impact comes from acceptance by those who we believe are significant. Thus, it stands to reason that those closest to us are the most important individuals for us to find compatibility with. Each of us needs a *thou*, a significant individual with whom we find love, acceptance and worthiness. Lacking that we seek to belong to small, significant groups. The most important, the family, followed closely by peers. Failing that, we seek

acceptance in the larger social arena. We cannot choose our circumstances, only how we will act within those circumstances.

Decision Making

To choose a meaning for life, one must first understand the need for the choice. When individuals engage in such an activity as making a choice, they attribute the outcomes to either *personal forces* such as ability and effort, or to *impersonal forces* over which they have little control such as the situation or bad luck. Having made a choice and having evaluated the outcome, those who externalize the attribution often decide that they “can’t win”. Life is out of their hands. In the extreme, they learn helplessness, and it becomes a way of survival.

For an individual to choose to do something different they must believe that they are capable of accomplishing the task; believe that the achievement will have a positive reward; and believe that the reward is sufficient to merit the effort. Individuals who have identified no meaning to life and feel unworthy of living rarely feel that achieving tasks is within their potential. Thus, the love experience is a prerequisite to worthiness and worthiness is a prerequisite to meaning and meaning is a prerequisite to achievement.

Even this is not as easy as it sounds, for meaning is a *dynamic*, not a static state. Achievement of goals can obliterate meaning. Each achievement is a stepping-stone to a redefinition of the meaning. Hegel’s dialectic develops achievement as a thesis creating an antithesis and thus, ultimately a synthesis, or new meaning. Growth and development is based on a certain degree of tension between what one has already achieved and what one still ought to accomplish; the gap between what one is and what one might become.

What human beings “need is the striving and struggling for a worthwhile goal, a freely chosen task.” The achievement of the task demands another task of a higher level. We must “experience” achievement to qualify ourselves for the next level of growth. But such growth is not contingent upon a mechanistic or deterministic series of steps; the will can choose to skip over the past and experience the future. What is important is the *future*, for it is only there that goals and meaning can be placed.

The Helping Relationship

“An essential task of helping is conceived as freeing the other to claim and use his will positively toward his own self-chosen ends, within the social purpose of the particular ... Relationship [Smalley].” This supports the life task of the other as a *process*. Peter Drucker [1957], in another context, captures with great clarity the dynamic, futuristic and paradoxical nature of human growth and development and the *helping process*: “We need a discipline ... that explains events and phenomena in terms of their direction and future state, rather than in terms of cause, a “calculus of potential”, rather than one of probability.” “We need a dialectic of polarity, one in which unity and diversity are defined as simultaneous and necessary poles of the same essence.”

Ruth Smalley [1967] states: “An understanding of process leaves room for the emergent, the unknown, the unpredictable, for continuous creation from a center within rather than susceptibility to or reliance on control from without for essential change.” Process is not a mechanistic stepscale from one level to another, but a change experience in which the individual moves in many directions at the same time.”

“The self of another cannot be known through intellectual assessment alone. Within a human, compassionate and caring relationship, selves “open up”, dare to become what they may be, so that the self that is known by the worker at once human, caring and skillful is a different self from that diagnosed by one who removes himself in feeling from the relationship in an attempt to be a dispassionate observer and problem solver.”

In summarizing, we can turn to the physical sciences to help us place this perspective. The science of Newton was largely responsible for the development of a mechanistic view of the universe. Newton’s science was based upon the clarity of cause and effect and the mechanics of that process. Present day physics does not view the universe in quite the same way. Reality is observer created. Light is neither a particle nor a wave. These are not properties of light, but rather are properties of our interaction with light.

In that same manner, we must put away the deterministic and mechanistic perceptions of man and his development as propounded by Freud and his followers. Like Newton, Freud’s contribution was enormous. It was his brilliant insight which opened the door for it’s repudiation; his thesis which demanded antithesis, and a new (syn)thesis. Aggression is not a property of an individual, but is the property of the interaction of that individual with others. It is contextual and situational. Likewise, hallucinations may or may not exist, but what the individual chooses to do with them is what is relevant to others.

This transformational perspective shares with democracy and the situational ethic, the demand for an individual’s decision based on rigorous rational thought and awareness. While the judgements in any given circumstance might be inappropriate, if they are rooted in the best possible information available at the time and made from the most accepting aspect, they will be significantly, if not absolutely, correct.

Intelligences

Definition

In *Frames of Mind*, Howard Gardner challenges two basic assumptions: 1) that human cognition is basically unitary, and 2) that individuals can be adequately described and evaluated along a single dimension called “intelligence”. He is persuaded that there exist a much wider family of human intelligences. He reiterates in “*The Unschooled Mind*”, that to qualify as an intelligence, a capacity has to satisfy for him a number of requirements:

- It must feature a clear developmental trajectory,

- be observable in isolated forms in populations like prodigies or autistic children, and
- it must exhibit at least some evidence of location in the brain.

Our species, he states, evolved to 1) think in language, 2) to conceptualize in spatial terms, 3) to analyze in musical ways, 4) to compute with logical and mathematical tools, 5) to solve problems using our whole body and parts of our body, 6) to understand other individuals and, 7) to understand ourselves.

These seven factors become for Gardner seven different types of intelligences which are developed to varying levels within each of use; giving us each a different kind of mind. The period from age two to six or seven holds fascination for Gardner because he believes that it harbors more of the secrets and power of human growth than any other comparable phase of growth. For example, the first instances of symbolic competencies are managed. Habits of the body and mind are set, with powerful biases and constraints which are mobilized and oriented in one direction or another. The child is attempting to make overall sense of the world; s/he is seeking to integrate her own complex of intelligences into a comprehensive version of human life that encompasses the behavior of objects, interactions with other human beings, and an incipient view of herself. S/he is strongly constrained to carry out this integration, for survival and it could not take place in the absence of some coherent version of the world. But not only must s/he have a coherency of inner perception of the world, but s/he must additionally find some manner to make this perspective congruent with the cultural world perspective in which s/he lives.

By the age of six or seven, Gardner suggests that each of the human intelligences has already developed to a high degree in any normal child¹², and the child has absorbed the culture's prototypes of the intelligent individual. The child's integration of his/her *intuitive understandings* has developed into a robust sense of three overlapping realms. In the world of physical objects, s/he has developed a theory of matter; in the world of living organisms, s/he has developed a theory of life; and in the world of human beings, s/he has developed a theory of the mind that incorporates a theory of the self.

Gardner's mission is to seek "deep understanding" or *discipline expertise* through these seven intelligences through an improved educational process. Our mission is similar, though more narrow. We are specifically concerned with the ability of the child to develop a ***deep understanding of themselves and their environment***. This mission, addressed as an educational process, would be introduced to the learning process through intervention in the school culture, the class and with the individual.

The cultural intervention would be through a process of enhancing the school's capacity to provide a *socially responsible culture* in which both faculty and students can function differently. A culture which can vie with the "Me" generations perspective that all problems are generated outside the self, whose distorted value base leaves each child

¹² We would suggest that the same is generally true of atypical children although the timing and the coherence may not be as definitive.

without dignity and respect, while it supports each person as a “victim” of society. The present “mental health mission” is a part of this “Me” culture of irresponsibility and suggests immediately that the mentally “ill” [a metaphor] child is incapable of taking responsibility for his/her own actions and that the teacher, parent, doctor will have to do it for him/her. This places the adult in the unenviable position of needing to “control” the behavior of the child; a *coercive* and ultimately invalid and improbable potential. A social responsibility culture with a positive expectation holds that each person is responsible for his/her own behavior and that children as everyone else, make decisions about themselves, their situation and their prospects, and act upon those decisions. In fact, the child’s decision making can never be taken away, only suppressed. If we decide to *train*, rather than suppress this capacity, we have the potential for the development of responsible individuals who make higher quality decisions, instead of creating individuals who fight those who control their lives. Such individual responsibility demands an interdependence, a *cooperative* milieu. Decision making, problem solving, rigorous analysis, are all skills that can be learned and for which educators have both a responsibility and the capacity to address.

This perspective will need to overcome the reductionist view which suggest that individuals have no control over their own actions and are controlled by genes, chemistry and illness and recognize that people must learn to control their mental and physical processes and can learn to make *good decisions* about how to live in their environment. This perspective suggest that “mental illness” is largely a metaphor for “unacceptable thinking, emotion and/or behavior” and that each of these can be *learned* with the same models used to teach other subjects. If we were to “order” the intelligences defined by Howard Gardner in regard to our mission, [and we do so without *deep* understanding] we would order them as follows:

- Language: critical to thinking, which drives feeling and behaving and the focal point of interpsychic and interpersonal messages - sent and received.
- Self conceptualization: as part of the thinking process, the self needs affirmation from self and confirmation from others. Full appreciation of self leads to a level of serenity from which one can effectively relate to others.
- Understanding of others: requiring compassion and empathy which grows from an appreciation of self.
- Spatial relations: from the initial separation of self from others, leads to two and three dimensional understanding.
- Kinetic/tactile: a firm feel and control of self; small motor skills, eye-hand coordination, and large motor skills.
- Musical: An extension of body in dance and singing, functionally mathematical in structure.

- Logical/Mathematical: The development of rigorous formal sets and analytical templates.

This organizational structure attempts to *relate* the aspects of intelligence in a priority order in regard to our own purposes. A truer representation, however, would require a circle, since the logical aspects of this intelligence is required for the analysis of intuitive theories of self, situation and prospects. These intelligences and their integration in the child may produce a child who is “culturally competent” and in tune with the world around it, or “*culturally conflicted*” and require remediation or re-education.¹³ It is in the integration of the realms of language, self concept, and understanding of others that we have the most concern. If these intelligences are, in fact, *learned behaviors* in the same sense of logic, mathematics, reading, and writing, based on the child’s monitoring and absorption of the inner and outer streams of awareness; they truly fit into an educational model.

It is this model of interpsychic, interpersonal and utilitarian domains which concern the ‘behavioral health’ [another metaphor] specialist and it is these three domains that are the predominant concern of our understanding of the syntax, semantics and pragmatics.¹⁴ The syntax of the interpsychic [cognitive] skill building has to do primarily with the basic rules such as those used to build a coherent belief system and/or the analytic rules covering how children evaluate evidence regarding incoherent propositions. The semantics consider such issues as words, ideas and intuitions and define the operational world of the individual child. The pragmatics are concerned with the environment in which the child is operating.

Reality

Observer Created

The classical ideal of objectivity - the idea that the world has a definite state of existence independent of our observing it, has been effectively ravaged by quantum physics. “The actual state of existence depends in part on how we observe it and what we choose to see. Objective reality must be replaced by observer created reality.” [Pagels - 1982] The conceptual framework of observer created reality is carried into the macroworld through the functioning of the mind. What we will examine is how the mental structure of each person, developed over years of interactive involvements with the environment, particularly the *significant* people in that environment, determines to a large extent not only what the individual thinks, but what s/he perceives and experiences, and to a large extent how s/he reacts [specific reactions, however, may require a repertoire of skills, which is a second level of intervention to be discussed later].

¹³ Note that either party in a conflict can reduce tension by changing their posture. This book suggests remediation and re-education of the school culture as well as the individual student.

¹⁴ *Syntax* can be thought of as the rules that govern the ordering and organization of the symbol system; *semantics* as the explicit meanings or denotations of the symbols; and, the *pragmatics* as the context in which the system functions.

The observer, in the way s/he *chooses* to observe, encode, retain and react to the *perceptions* of life around him/her, *defines* that reality in a manner which is coherent only to her, based upon her interpretation and understanding of the perceptions and understanding of those around her. "The problem is that when we say a person seeks true information we really mean that the person seeks information that [s/he] *considers* true. ... subjective truth is largely a matter of coherence; statements that complement (rather than contradict) what one already believes are likely to be seen as true." [Gilbert - 1993]

Ludwig [1988] put it another way:

The mind is much less an organ of rationality than of rationalization. Because the individual has to live with himself, his mind tries to legitimize his intentions and behaviors so that he need not feel guilty, so that he can convince himself that he is making the right choice.

Meichenbaum and Fong [1993] suggest that people create explanatory stories with which to explain the world and their participation in it. "These schemas may take the form of 1) personal metaphors [e.g., "I have always *built a wall* around myself"], 2) historical accounts where we cast ourselves as hero, victim, or bystander, or 3) implicit beliefs and adapted ideologies. The schematic processes influence and help to determine the realities we construct, the mind control efforts we engage in, the blueprints for how we generate narratives."

This is a theory of correlation of experience. We cannot assume objective reality apart from our own experience as access to the physical world is through experience. The common denominator of all experience is the "I" that does the experiencing. In short, what we are experiencing is not external reality, but our interaction with it. This interaction is mediated by the *personal* interpretation of experiences through analytical work, which may or may not be rigorous. Since our behaviors are contingent upon our beliefs, we respond according to our understanding, not necessarily the stimuli; and our response is equally analyzed and interpreted. We impact and change our environment, even as our environment molds us.

It follows therefore, that behaviors such as aggression or caring are not properties or characteristics of the individual; but rather properties of the individual's interaction with the environment. Al Capone, after all, was said to be very caring for his mother. All of us have basic characteristics regarding the decision to fight or flee, but which of these responses are evoked is a product of interactional relationships and the interpretation of events and experiences. The fight/flee characteristics are mutually exclusive, or complimentary aspects of the individual. One of them always excludes the other because people cannot both fight and flee at the same time. Although the conversion from one to the other can seemingly be instantaneous and blends of these characteristics emanate as strange mixtures of behavior such as the oxymoron passive aggressive implies.

We have discussed previously the impact of *self-fulfilling prophecy* as a phenomenon concerning the manner in which one's belief concerning the occurrence of some future

even makes one behave in a manner that increases the likelihood that the expected event *will* occur. The narrative “stories” that we tell about ourselves are equally as “self-fulfilling, as the high expectation placed upon us by others. In fact, it is the dichotomy between these expectations that allows for change. The imposed reality of outside expectation has major impact in the classroom. Rosenthal & Jacobson [1968], after testing children from kindergarten through fifth grade, designated at random 20 percent of each teacher’s new pupils as “late bloomers”. Since the designation was random there was no way that these children differed from the remaining 80 percent, except in the achievement expectation planted in the teacher’s mind. While they did not tell the teachers how to treat the students in any way, the results confirmed the expectancy hypothesis as the “late bloomers” on retest gain four points more in IQ than had their control classmates. “Raising teachers’ expectations regarding pupil performance had initiated an SFP process in which teachers unwittingly acted different toward different pupils and thereby fulfilled their prophecies.” In imposing this reality “...one person, inspired by a vision, desire, prophecy, or expectation, persists in his relationship with another person, ultimately transforming that person in accord with the vision.” [Eden - 1990]

“Recall that prophecies do not fulfill themselves. It is the *prophet* who, acting under the influence of his/her own prophecy, behaves in a manner that molds someone else’s behavior to conform with the prophet’s expectations” Rosenthal summarized these activities into four mediating behaviors:

Socioemotional climate, which is defined teacher behaviors that are nonverbal, and mostly subconscious, that convey positive or negative feelings towards pupils.

Feedback is an indispensable ingredient to any learning process. Teachers give more feedback and more varied feedback to pupils of whom they expect more.

Input, in the form of teaching more material and harder material, is provided more to those expected to do well. This mediating factor may serve to challenge these pupils and spur them on to greater achievement. It may also be a means of communicating high expectations to pupils [reinforcing a confidence in their ability to achieve].

Output is defined as producing a learning result as in answering questions in class. Teachers give pupils opportunities for producing output by assigning them challenging projects or by calling upon them to do something extra, beyond the minimal requirements.

This combination of behaviors makes teachers more effective instructors for those they expect to do well. [Eden - 1990] This *interpersonal expectancy effect* takes place within the professional community of teachers, social workers, psychologists, psychiatrists and others in the helping professions. When we understand this effect and combine it with the

pathology approaches utilized in human service we begin to gain awareness as to how these approaches *create* helpless, atypical people.

Human service workers have created a reality based on a belief system which *expects* people with problems in living to be violent, resistive and unable to improve their functioning and quality of life. This suggests, that *even if it is not true*, it would help to adopt new beliefs and technologies which are more positive in their outlook. As long as the helper *believed* them to be true, they would behave in a manner of positive expectation.

Networks

In quantum mechanics the particle/wave¹⁵ crisis led to observer created reality and uncertainty. We suggest, that individuals as both a part of systems and as apart from them creates the same observer created reality and uncertainty. Each individual is not just an independently existing unanalyzable entity [particle]. S/he is, in essence, a set of relationships [wave] that reaches outward to other beings. There exists a web of relationships between individuals, each developing as a personality contingent from their relationship to the whole. The implications are that there is no behavior that is isolated from this web of relationships [field] and the behavior only has meaning within the context of this system. The social context provides cues as to what behaviors are acceptable and/or encouraged. The question of a “troublesome” child cannot be extracted totally from the pragmatics that *support* such behavior.

Of further interest is the forces that operate on the individual. Just as our analogy of quantum mechanics has strong, weak, electromagnetic and gravitational forces¹⁶, there are forces that work on the individual. Certainly, there is a force which constitutes the impact of the family which is quite powerful, particularly in the early years.. However, continuing our analogy to quantum mechanics, we would liken this force more to gravity. The closer you are to the family the greater the impact. As we grow older, we tend to move psychologically and physically away from the family and, while the presence is *always* there, it often becomes less obvious. Another force becomes even stronger as time goes on, and this is the *peer* group. This is force field which potently shapes the individual although the field may change over time from a group of best friends, to the in-group at the office, to the Joneses next door. But we find it necessary to live up to the expectations of our peers throughout our lives.

Another obvious force, is that of the socioculture in which we live. This may be a weak force, in that there is again some ability to move from field to field. Some people may break the bonds to the culture in which they were born to live a different life style.

¹⁵ After Neils Bohr had effectively demonstrated that light is a particle [lepton], Einstein followed with proof that light was a wave - without disproving Bohr. Light is either [or both] a particle and/or a wave depending on how you choose to observe it.

¹⁶ The strong force holds the nucleus of the atom together and its power is responsible for the strength of the atomic bomb. The weak force is that which holds the outer electrons in place. Electromagnetic and gravitational forces should be familiar to the reader.

Finally, we would suggest that the strongest force that works on the individual is their own willful self-determination. While the *will* is shaped, molded or eroded by the other forces which impact on it, the individual ultimately *decides* on their own best interest and, usually without fail, will act upon that decision. We cannot often change a person's mind, only their perceptions.

H. Gardner [1991] in reflecting on a paper by Paul Rozin [1976] entitled "*the Evolution of Intelligence and Access to the Cognitive Unconscious*" suggests that human beings differ from lower organisms in two crucial respects, and these can be said to characterize our peculiar form of intelligence. First, we humans have the capacity to join together two or more of those originally separate biological mechanisms or systems in order to perform a new task. This linking capacity has radically increased the intellectual growth of the species. Second, it is possible for human beings to become aware of the operation of such mechanisms and to use that knowledge productively...we can gain access to our systems information processing.

H. Gardner indicates that *the development of intelligence of our species consists of ever-greater access to elements of our cognitive repertory*. This is a profound statement in light of our thesis of interpsychic [cognitive] skill building. He goes on to state that human beings are not simply at the mercy of their senses; we have the potential to become aware of the operations carried out by these analytic mechanisms, to go "meta". Through the elaboration of higher-order cognitive mechanisms, we can understand and perhaps even control the manner of operations in our brains; we are not merely a reflection [or a reflex] of elementary neural mechanisms. The expectation of mental control and its implications for growth and development of the mind in relation to the self/other conceptualizations are of particular importance for this project.

However, a perhaps even more important implication of Rozin's paper is that it straddles the usually disparate realms of biology and culture. Humans, Gardner reports, are creatures of the brain, but not solely so. Unlike all other organisms, we participate in a rich culture, one that has had its own evolution over many thousands of years. He quotes anthropologist Clifford Geertz as saying "A cultureless human being ... would probably turn out to be not an intrinsically talented though unfulfilled ape, but a wholly mindless and consequently unworkable monstrosity."

This seems at first an exaggeration to even one who recognizes the influence of others on the developing individual. However, when you consider the contribution of *cultural artifacts* and *inventions* well as the contributions of other live human beings, you begin to appreciate the impact. An individual restricted to his own devices is unthinking, if not unthinkable. Along with physical and psychological satisfactions, the culture contributes language, technology, knowledge, prejudice, ideology, systems of morality and even wisdom. According to our new and expanded understanding, "*mind*" exists equally within the skull, in the objects strewn about in the culture, and in the behaviors of other individuals with whom one interacts and from whom one learns.

We should begin to glimpse a conceptual framework in which each of us shares an ownership in the creation of physical reality which has critical importance to our expectation of ourselves during the *helping* process. The image of ourselves as an impotent bystander, one who sees, but does not affect, must dissolve. Observer and observed are interrelated in a real and fundamental sense. We cannot observe something without changing it. What we perceive to be physical reality is actually our individual and collective cognitive construction of it. If we truly wish to intervene in a positive way, we must begin to validate the cognitive reality of the individual in need, sorting through to identify how this reality extends to the system of relationships. Only from this wholistic context can we begin to understand what the behavior is responding to¹⁷. As we shall examine the idea of intrapsychic skill building we shall need to understand that a change in mental construction must change intimately the child's perception of reality and in that alteration, offer new opportunities for changed relationships.

Dimensions of Relative Objectivity

Cultural anthropologists [Harris - 1979] have defined four objective operationally definable domains in the sociocultural field of enquiry. Along with the *mental* and *behavioral* aspects, they define the *etic* and *emic* perspectives. Anthropological linguist, Kenneth Pike formed the words 'etic' and 'emic' from the suffixes of the words *phonetic* and *phonemic*. In the anthropological scheme of things, in carrying out the emic mode the observer attempts to acquire knowledge of the categories and rules one must know in order to think and act as a native. Thus the emic mode would be the pragmatics of the school as understood by the student who is a native to the environment. The emic mode might describe what it is like to deal with peer violations and autocratic coercion and how the student can defend herself by nonparticipation, avoidance and withdrawal.

The test of the adequacy of the etic accounts is simply their ability to generate productive theories about the causes of sociocultural differences and similarities. Frequently etic operations involve the measurements and juxtapositions of activities and events that the native informants may find inappropriate or meaningless. Thus, teachers may see certain behaviors as destructive, while students find them as protective. Thus the "natives" and the observers see reality quite differently. Part of the difficulty of this example, of course, is that the teachers and the students are both emic to the school culture¹⁸ although from different emic perspectives. If "objectivity" is the epistemological status that distinguishes the community of observers from communities that are observed, teachers probably cannot qualify. While it is possible for those who are observed to be objective, this can only mean that they have temporarily or permanently joined the community of

¹⁷ We would postulate that *all* behavior is logical, rational, and goal seeking if the context can be understood. This is not to imply that all behavior is right, or even effective.

¹⁸ Part of the cognitive science effort has begun to focus on and discuss the self in the context of the environment and the potential "selves" that might exist. This construct is developed from the *identification* of the person as part of a group. Thus the teacher is part of a teacher group and so identifies him/herself, but is also part of the school group and may on other occasions identify him/herself this way. More importantly, there may be different expectations placed upon the teacher in each of these identifications and therefore differing behavior or *selves*. When we talk about emic experiences, therefore, we must be clear about who are the natives and who are the observers.

observers by relying on an operationalized scientific epistemology.” Objectivity is established by the distinctive logical and empirical discipline to which members of the scientific community agree to submit. [Harris - 1979]

Individual Probability

But objectivity is not reality. Even the most objective of analysis cannot predict individual events. There is no way to predict individual events. Prediction can only concern itself with group behavior. We must intentionally leave vague the relationship between group behavior and individual events because the individual’s relationship within the system is constantly changing. While there are certain *probabilities* that certain behavior might take place; it either happens or it does not. Human probabilities have no classical analogue, because they are simply not linearly additive; they are non-linear. They are self-reflective and involve the classic “strange loops” of any self-reflective system. This *uncertainty principle* makes it difficult for positive intervention to take place without ascertaining where the individual is in relationship to both outer and inner events. Thus, the only way to intervene is to deal with the here and now, real life issues that are creating the cognitive reality of the individual. To garner information on this strange uncertainty, *we must ask*¹⁹.

We should not assume that the individual is only the product of the system of relationships. The “I” who does the experiencing is also the “I” who has the ability to “choose one’s attitude in a given set of circumstances [Frankel - 1959]”, to do the analytic work and to decide what is true, and to decide how to act in response to that “*truth*”. Human behavior is not a simple cause and effect. It is this ability to choose which makes the predication of individual events so uncertain. While we cannot presume how the individual will act under any given circumstances, we know that that action will be fundamentally related to their perception of their environment, and to our method of intervention.

“The most important questions of life are, for the most part, really only problems of probability” - *Marquis De La Place*

Percepts & Concepts

“One of the deepest problems in cognitive science is that of understanding how people make sense of the vast amount of raw data constantly bombarding them from the environment” [Hofstadter, 1995]. How do perceptions occur and formulate conceptions? The lowest perception occurs, of course with the reception of raw sensory information through the various sense organs described as sensations. Out of the many sensations the mind seeks to find an orderly process by which to make sense of the world. Perceptions, however, may be influenced by belief, goals, and external context. This implies that there is a top-down process along with the bottom-up process of the senses. In order for raw data to be shaped into a coherent whole, such data must go through a process of filtering

¹⁹ Although later we may discuss ‘leakage’ from self talk as a means of inferring certain clues, asking is still primary.

and organization, yielding a structured representation that can be used by the mind for any number of purposes. Representations then are the conclusions drawn from sensations.

High-level perception begins at that level of processing where concepts begin to play an important role. Processes of high-level perception may be divided again into a spectrum from the concrete to the abstract. At the most concrete end of the spectrum, we have *object recognition*, exemplified by the ability to recognize an apple or a table. Then there is the ability to grasp *relations*. This allows us to determine the relationship between an airplane and the ground [“above”], or a swimmer and a swimming pool [“in”]. Object recognition and relations concepts may be thought of as the *knowledge base* of the mental domain. As one moves further up the spectrum towards more abstract relations the issues become distant from particular sensory modalities and become the creative substance of thought. The distinguishing marks of high-level perception is that it is semantic: it involves drawing *meaning* out of situations. The more semantic the processing involved, the greater the role played by *concepts* in this processing, and thus the greater the scope for top-down influences, since it taps either the knowledge base or the *theories, ideologies* and/or *belief systems* of the individual. [Bateson]

The formation of appropriate representation lies at the heart of human high-level cognitive abilities. But it seems that developing representations is even more complex. William James indicates that we have different representations of an object or situation at different times. David Mar [1977] goes even further in suggesting that the perception of an event or object must include the simultaneous computation of several different descriptions of it, that capture the diverse aspects of the issue, purpose or circumstances. Each representation thus becomes a vector in a multidimensional space, whose position is not anchored but can adjust flexibly to change in differing environmental stimuli.

The way we learn, according to Hofstadter is contingent on pattern perception, extrapolation and generalization. These activities are descriptive of analogical thought. The quality of an analogy between two situations depends almost entirely on one’s perception of the situation. Analogical thought provides one of the clearest illustrations of the flexible nature of our perceptual abilities. Making an analogy requires high-lighting various different aspects of a situation, and the aspects that are high-lighted are often not the most obvious features. The perception of a situation can change radically, depending on the analogy we are making²⁰. Furthermore, not only is analogy-making dependent on high-level perception, but the reverse holds true as well: perception is often dependent on analogy-making itself. To better understand this, Hofstadter divides analogical thought into two basic components. First, there is the process of *situation-perception*, which involves taking the data involved with a given situation and filtering and organizing them in various ways to provide an appropriate representation for a given context. Second, there is the process of *mapping*. This involves taking the representation of two situations and finding appropriate correspondences between components of one representation with components of the other to produce the match-up we call an analogy.

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This is the equivalent of ‘reframing’ - a technique of cognitive behavior management.

It is by no means apparent, says Hofstadter, that these processes are cleanly separable: they seem to interact in a deep way. Given the fact that perception underlies analogy, one might be tempted to divide the process of analogy-making sequentially: first, situation-perception, then mapping. But analogy also plays a large role in perception; thus mapping may be deeply involved in the situation-perception stage. Both situation-perception and mapping processes are essential to analogy-making, but of the two the former is more fundamental, for the simple reason that the mapping process requires representations to work on, and representations are the product of high-level perceptions. The perceptual processes that produce these representations may in turn deeply involve analogical mapping; but each mapping process requires a perceptual process to precede it. Therefore the perceptual process is conceptually prior, although perception and mapping processes are often temporally interwoven.

People are constantly interpreting new situations in terms of old ones. It is this process that allows for the enlargement of our understanding of the world. Analogy making is going on constantly in the background of the mind, helping to shape our perceptions of everyday situations. One could suggest that it is the breakdown of analogy-making and the onslaught of *automatic thoughts* that constitute most of the difficulties that people have in using cognition effectively in personal and interpersonal domains. Hofstadter feels that it is implausible that when a person makes an analogy, their working memory is holding all the information from an all-encompassing representation of a situation. Instead, according to George Miller, it seems that people hold in working memory only a certain amount [5 to 9 bits] of relevant information. The *choice* of what is relevant is often part of the difficulty. Helping a person become aware of other possible representation that they may have for a situation might evoke the ability for them to change both perception and perspective.

“One might thus envisage a system in which representations are gradually built up as the various pressures evoked by a given context manifest themselves. In such a system, not only would the mapping be determined by perceptual processes, but the perceptual processes would in turn be influenced by the mapping process. Representation would be built up gradually by means of this continual interaction between perception and mapping. If a particular representation seemed appropriate for a given mapping, then that representation would continue to be developed while the mapping continued to be fleshed out. If the representation seemed less promising, then alternative directions would be explored by the perceptual process. It would be of the essence that the processes of perception and mapping be *interleaved* at all stages. Gradually, an appropriate analogy would emerge, based on structured representations that dovetail with the final mapping” [Hofstadter, 1995].

Thus, creating change might mean constantly *disputing* the mapping and representations, while providing alternatives. The map, after all, is not the reality. The pressure of the context could be maximized by *in vivo* involvement. And a renewed look at the lowest level perceptions opens new avenues for new analogies to be drawn and changes in *ideology* to be developed.

Language & Thinking

Having developed a consciousness through the use of language symbols, humans are capable of an *awareness* of their own mental processes and through that event become amenable to modification and adaptation of the very schemata that creates their reality. The result is that each individual, within some limitations, has the capacity to modify his/her own reality to make it more satisfying.

Mental processing [thinking] is activated through symbols that have been developed to identify and describe the *sensations* caused by the integration of various stimuli impacting upon the senses. Such sensations help the individual to organize these various sense perceptions into a single comprehension [intuition, hunch]. These comprehensions are then subject to the development or adoption of symbolic representations [language] which not only allow us to consciously comprehend the idea caused by the sensation, but to communicate it as well. In modern society, as we become less aware of nonverbal or intuitive sensations, we increasingly use *words* or symbolic language in our thought processes. This is not to underestimate the importance of physical modalities that might be described as style, tone, affect or demeanor which are apparent in living things. Such “feelings” have substantial impact on our reactions to the world and in fact, intuitive comprehension give us considerably more information than we are able to codify into language. The salient power of intuition can be easily demonstrated by discerning our ability to recognize a person whom we know from very little perceptual information, while at the same time being unable to verbally *describe* that individual sufficiently to allow a stranger to pick them out of a crowd.

Steven Pinker [1994] in discussing how people think, points out that language is not adequate to account for all of our thoughts. He indicates problems of *ambiguity*, *lack of logical explicitness*, *co-reference*, *dexis*, and *synonymy* as examples. Ambiguity, which leads to such unexpected humor as in “Iraqi Head Seeks Arms” as an actual headline, clearly holds for difficulty in interpretation. As Pinker indicates “...if there can be two thoughts corresponding to one word [consider 'spring' for example], thoughts can't be words.” Lack of logical explicitness requires that the reader [or listener] make logical inferences to deduce what is meant and co-reference [occasions where we identify a male person explicitly, then refer to the man, and perhaps finally, just to *him*], requires the recipient to use “common sense” to deduce the details of language. “Dexis”, which is a linguist's word, considers articles like *a* or *the*. The difference between “*killed a policeman*” and “*killed the policeman*” requires a context specific to enable the recipient to determine exactly what was meant. Synonymy references the various ways in which language can be arranged to refer to the same event. All of these problems allow for *misinterpretation*.

“Any particular thought in our head embraces a vast amount of information. But when it comes to communicating a thought to someone else, attention spans are short and mouths are slow. To get information into a listener's head in a reasonable amount of time, a speaker can encode only a fraction of the message into words and must count on the listener to

fill in the rest. But *inside a single head*, the demands are different. Air time is not a limited resource: different parts of the brain are connected to one another directly with thick cables that can transfer huge amounts of information quickly. Nothing can be left to the imagination, though, because the internal representations *are* the imagination” [Pinker - 1994].

Thus, we speak often in a kind of *shorthand*, with ambiguity and lack of explicitness which requires that the individual *interpret* what we mean. For people who have a coding system that negates or denigrates themselves in relation to others, this leaves a great deal of room to translate such statements into derogatory perspectives. Such people *imagine* that they are being “put down” in cases where “common sense” would indicate otherwise.

But the internal or mental narratives, those “stories” that we tell ourselves are also subject to shorthand. Meichenbaum and Fong [1993] suggest that such stories fall into three levels and that they are arranged hierarchically. Level I focuses on *evidence-based reasons* whereby the individual supports or questions the validity of the evidence. Level II focuses on *self-relevant reasons*, in that they describe the individual’s attempt to appraise the merits of a decision in terms of cost/benefit to themselves. Level III explores the *affective schema-related reasons* that reflect the more self-involving, often highly affectively charged, schema related beliefs that influence the individual’s perspective of reality.

Each of these “reasons” can be used to deny what is an apparent truth [such as the hazards of smoking], but the schematic-related reasons are connected to relatively enduring characteristics of the person’s cognitive organization that allow the person to screen, code, and assess information. As such, they are much more embedded in the explanatory style of the individual and operate like a “perceptual readiness hypothesis” that help to preclude all doubt, question or delays, admitting no refusal and being truly imperative. In short, such schemas influence the perception, interpretation, transformation, and organization of information [Meichenbaum & Fong - 1993]. The importance, then of the helper’s ability to *listen* to the client’s narrative stories not only is to focus on the client’s *will*, through identification of preferences, but to *interpret* what is actually meant.

However, as we attempt to “sort out” these feelings, hunches or intuitions, we do so by *putting them into words*. The assignment of organized symbols to such “feelings” enables us to *understand* how we feel [our emotional state] and therefore to find the ways and means to cope with these emotions. Often when we cannot quite grasp the quality of the intuition, we develop a metaphor to describe our intent. The development of a way of stating sensations through words is an attempt to understand it.

Thus *WORDS*, and their **conscious** formulation are an important part of helping each of us find our place in the world. While we might *know* something on an unconscious level, we will tend not to be comfortable with it until we can understand it through common language symbols. This loss of ability to accept things that we cannot understand is epitomized through verbal attempts to delineate our faith; which is inherently

unknowable. Faith can be defined as a belief which has no provable, logical, systematic basis; one believes or one does not. Despite this, in many religions it is the WORD that is important. The allegorical Word of God through which we come to understand. Levels of civilization might be identified as the degree to which commonly held beliefs are conscious and able to be symbolized or unconscious and without symbolic [at least language symbols] explanation.

The concern, of course, is that the *translation* of the important words from significant people becomes first a sensation, intuition or hunch that we are being denigrated which we find hard to put into words, but which we *feel* strongly. Later, we may find that we can articulate these feelings *metaphorically*, in broad generalized statements about the unfairness of the world, or our own martyred state. Finally, we begin to articulate specifically how other people do not like us and develop the counter position that therefore, we do not like them. Such thoughts, fears and fantasies lead to atypical and often antisocial behaviors, which to others have no apparent context.

One could suggest that such “errors” in translation or *misunderstandings* are hardly sufficient to lead to such dramatic and bizarre behaviors as are seen in the human species, but this disregards the *figure/ground* aspects of human interrelatedness. As the individual listener begins to *act* based on their interpretation of the perspectives of those around them, they develop self-fulfilling circumstances. Their behavior becomes less and less acceptable and therefore leads to responses which are likely to reinforce the flawed premise. It ignores as well the self-fulfilling aspects of the attitudes which leads the conveyer of the word labels to act in ways that enhance the potential that such a performance will occur.

Emotions

Anyone can become angry - that is easy. But to be angry with the right person, to the right degree, at the right time, for the right purpose, and in the right way - that is not easy.

Aristotle, *The Nichomachean Ethics*

The question of emotions is one that is critical to cognitive/behavioral skill development. “...our deepest feelings, our passions and longings, are essential guides, and that our species owes much of its existence to their power in human affairs” [Goleman - 1995]. That emotions have evolutionary importance goes without saying. The basic emotion of fear provides the species with the self survival mechanisms which enable it to escape danger. The next level of emotion is anger, rooted in trespass and territory allows the person to gear up to protect him/herself. Another emotional construct, attraction, leads from lust, to love, to friendship, to altruism, to sadness [or the loss of attachment of an attractive object/other] each of which has been a necessary element to our survival. But we no longer live in such a primitive state and these emotions have become quite complex to control at the next level of evolutionary development.

Each emotion offers a distinctive readiness to act, but the actions that were originally designed may not only be nonproductive in present society, but actually destructive. Seligman [1993] puts the specific emotional content into modern context when he defines the goad for specific action:

- Anxiety warns us that danger lurks. It fuels planning and replanning, searching for alternative ways out, rehearsing action.
- Depression marks the loss of something dear to us. Depression urges us to divest, “decathect”, fall out of love, mourn, and ultimately resign ourselves to absence.
- Anger, highly opinionated, warns that something evil is trespassing against us. It tells us to get rid of the object, to strike out against it.

“...the more intense the feeling, the more dominant the emotional mind becomes - and the more ineffectual the rational” [Goleman - 1995]. In evolutionary terms, pausing to think over what to do could cost us our lives, thus the dominance of immediate reaction. Yet the only moderator of these impulses, the need to stop and *think*, becomes imperative in a social order. Our genetic heritage endows each of us with a series of emotional set points that determines our temperament. But the brain circuitry involved is extraordinarily malleable; temperament is not destiny. The emotional lessons we learn at home and at school shape the emotional circuits, making us more adept - or inept- at the basics of emotional intelligence. Thus, the option to become “civilized” is based on the development of a *culture* of social order and the learning of specific cognitive skills with which to moderate the impulsive actions demanded by our emotions.

Cognitive behavior management is constructed around mental representations, symbols and the language [words] used to understand and communicate. Emotion, on the other hand is an instinctive response. “The very root of the word *emotion* is *motere*, the Latin verb “to move”, plus the prefix “e” to connote “move away ...”. “The emotional/rational dichotomy approximates the folk distinction between “heart” and “head”; knowing something is right “in your heart” is a different order of conviction - somehow a deeper kind of certainty - than thinking so with your rational mind. These two minds, the emotional and the rational, operate in harmony for most people, intertwining their very different ways of knowing to guide us through the world” [Goleman - 1995]. These minds learned how to identify [create mental representations] for varying degrees of intensity for each of the emotional aspects. They use these cognitions to interrupt the impulse to act and find more reasonable ways to express these emotions than just the “raw” response. Emotional intelligence includes self-control, zeal and persistence, and the ability to motivate oneself.

The ability to control impulse is the base of will and character, which is required in the creation of a social order. The whole question of “deferred gratification” is one of the paramount aspects of a person who is able to “succeed” in the process of a *social* life; comparable in power to the creative ability to find multiple solutions or alternative interpretations on the cognitive side. This deferral process, however, is unlikely to occur without the cognitive ability to interject thinking between the stimulus perception and the

action. Thus, the linkage between self and other, behavior, must be modified away from the evolutionary instinctive response and towards a prosocial response is a social order is to survive. It is the absence of *social behavior* that defines “mental disorders” and this is allowed by the absence of cognitions required to mediate the behavior. The ability to behave in ways that are found acceptable by others then combines an ability to “think” about how one behaves and to have the “skills” to choose and perform behaviors in a manner that is both efficient in meeting one’s goals and, at the same time, recognizes and cares about the other.

The root of altruism [epitomizing the highest standard of social order] lies in empathy, the ability to read emotions in others. Without a sense of another’s need or despair, there can be no caring. Empathy is a *learned* process. Its learning is normally developmental, occurring in the relationship between the care giver and the infant. But two things can go wrong with such learning. The first, is based on the fact that all behaviors are biomedically dependent. We are structurally electrochemical entities after all, and occasionally there is a structural error or neurological damage which interferes with the proper functioning of our cognitive interludes. Such difficulties may appear in the form of *autism*, for example, although much is still unknown about this difficulty. The occurrence of such neurological breakdowns is far less prevalent than mental health professionals would have you believe. Since the second form of malfunction, *distorted cognitive learning*, produces many of the same effects. Thus, the biomedical reductionist are able to imply that such behavior is the result of some, *as yet unidentified*, illness.

Of course, the literature is quite coherent about improvement, if not etiology. Whether the difficulty is neurological or cognitive, the *only effective interventions* are cognitive. Even people with biomedical difficulties appear to improve functioning [if they are to improve at all] through cognitive behavior management. Drug or other biomedical intrusions can, at best, reduce the negative behaviors, and the way these behaviors affect other people. While this may have some marginal value to the social order, it is largely overcome by the *toxic* effect that the intrusive procedures have on the person²¹. While deficiencies in emotional intelligence heighten a spectrum of risks, from depression or a life of violence to eating disorders and drug abuse, some of these are because of the difficulty of effective performance itself and others are the result of intrusive measures taken to *control* the individual from without.

“There are many compromise positions that refer to the ‘interaction’ of biology and environment, genetic ‘contribution’, ‘preparedness’, and genetic ‘predispositions’. Some of these compromises are just anesthetics, numbing us into thinking that the fundamental dispute between nature and nurture has somehow been solved or is a pseudoquestion” [Seligman - 1993]. These compromises, put forth by the biomedical reductionist will increase as they gain more “grist for their mill”, through genetic and brain exploration. But as Seligman suggests “Molecular biology has it backwards. The claim that mood and emotion are just brain chemistry and that to change you merely need the right drug must

²¹ Not to mention the *toxic* effect that the use of such coercive interventions has on the fabric of *ethical* social orders.

be viewed with skepticism.” Yet these efforts ignore not only the learning experience, but the *will* of the individual person as it interacts upon the world.

While cognition mediates emotions, emotions matter for rationality. Goleman maintains, and rightly so, the counter-intuitive position that feelings are typically *indispensable* for rational decisions since they point us in the proper direction, where logic can then be of best use. Providing “signals that streamline the decision by eliminating some options and highlighting others at the outset.” Without emotion, we have difficulty placing *value* on people, places, events, experiences and things. It is the emotional context that makes a thing important or incidental. Lacking emotional weight, encounters lose their hold. Thus, emotions are a “double edged sword”, providing, on the one hand, the directionality of life, and on the other, the propensity for exaggeration. Seligman suggests that “most of us, much of the time”, are “astonishingly attracted to catastrophic interpretation of things”. He calls this “common irrationality, *conservation of dysphoria*”.

The Russian psychologist Blyuma Zeigarnik discovered early in this century that we remember unsolved problems, frustrations, failures, and rejections much better than we remember successes and completions. “When fear triggers the emotional brain, part of the resulting anxiety fixates attention on the threat at hand, forcing the mind to obsess about how to handle it and ignore anything else for the time being. The task of worrying is to come up with positive solutions.” [Goleman - 1995] Seligman suggests that each emotion of the dysphoric triad [anxiety, depression and anger] is a message goading us to change our lives. “With our daily dysphoria, we are in touch with the very state that makes civilization possible”.

But only if we can find the ways to *change*; if we can develop what Goleman has called an “emotional intelligence”; the cognitive ability to mediate the emotion/behavior connection. “*Emotional intelligence*: abilities such as being able to motivate oneself and persist in the face of frustrations; to control impulse and delay gratification; to regulate one’s moods and keep distress from swamping the ability to think; to empathize and to hope.” These crucial emotional competencies can indeed be learned and improved. Emotional aptitude is a *meta-ability*, determining how well we can use whatever other skills we have, including raw intellect.

People with well-developed emotional skills are also more likely to be content and effective in their lives, mastering the habits of mind that foster their own productivity; people who cannot marshal some control over their emotional life fight inner battles that sabotage their ability for focused work and clear thought. People who know and manage their own feelings well and read and deal effectively with other people’s feelings.

Howard Gardner has outlined emotional control as part of the intrapersonal and interpersonal intelligence.

“*Interpersonal intelligence* is the ability to understand other people: what motivates them, how they work, how to work cooperatively with them. *Intrapersonal intelligence* ...is a correlative ability, turned inward. It is a

capacity to form an accurate, veridical model of oneself and to be able to use that model to operate effectively in life.”

This intelligence requires the capacities to discern and respond appropriately to the moods, temperaments, motivations and desires of other people, as well as the ability to access to one’s own feelings and the ability to discriminate among them. He suggests that it is “the visceral-feeling signals you get that are essential for interpersonal intelligence.” Gardner goes on to identify five main domains:

- *Knowing one’s emotions.* Self awareness - recognizing a feeling *as it happens* and being able to label the emotion appropriately in type and intensity - is the keystone of emotional intelligence.
- *Managing emotions.* . Handling feelings so they are appropriate is an ability that builds on self-awareness.
- *Motivating oneself.* Emotional self-control - delaying gratification and stifling impulsiveness - underlies accomplishment of every sort.
- *Recognizing emotions in others.* Empathy is a fundamental people skill. People who are more attuned to the subtle social signals that indicate what others need or want.
- *Handling relationships.* The art of relationships is, in large part, skill in managing the emotions in others.

Each of these authors seems to agree that it is self-awareness that is the predecessor to cognitive mediation of emotional content and expression. *Self-awareness* [mindfulness] is an on-going attention to one’s own internal states. It is being so attuned as to be able to cognitively identify and name the emotions being aroused. Self-awareness is not an attention that gets carried away by emotions, rather it maintains *mindful* self-reflectiveness even amidst turbulent emotions; a parallel stream of consciousness that is *meta*. Self-awareness can be a nonreactive, nonjudgmental attention to inner states. The realization “This is anger I’m feeling” offers a greater degree of freedom - not just the option not to act on it, but the added option to let go of it.

Goleman points out a danger in self-awareness, however. The “double edged sword” seems to be identified around the favored attentional stance that the person assumes under duress. Those who tune in under stress can, by the very act of attending so carefully, unwittingly amplify the magnitude of their own reactions. On the other hand, he suggests that those who tune out, who distract themselves, notice less about their own reactions, and so minimize the experience of their emotional response, if not the size of the response itself. Maintaining an emotional balance, accepting the emotions, but containing the response seems to be the ideal course.

Alexithymia - a lack of emotions, seems to limit a person's ability to react effectively with people, places and things, leaving the individual utterly lacking in the fundamental skill of emotional intelligence. Discriminating among emotions as well as between emotion and bodily sensation is reliant upon the ability to develop a mental representation which adequately contains these differentiations. Goleman cites Henry Roth's novel *Call It Sleep* in regard to the power of language. "If you could put words to what you felt, it was yours."

While strong feelings can create havoc in reasoning, the *lack* of awareness of feelings can also be ruinous. The intuitive signals that guide us come in the form of what Antonio Damasio, a neurologist, calls "somatic markers" - literally, gut feelings. More often than not these markers steer us *away* from some choice that experience warns us against, though they can also alert us to a golden opportunity. Emotions that simmer beneath the threshold of awareness or are misperceived can have a powerful impact on how we perceive and act, even though we have no idea they are at work.

The goal is balance, not emotional suppression: every feeling has its value and significance; feeling proportionate to circumstances. Maintaining a reflective posture during a *reflexive* incident takes energy and skill. We may have little or no control over *when* we are swept by emotion, nor over *what* emotion it will be, but we can have some say in *how long* an emotion will last and how we will act under its onslaught.

Chogyam Trungpa, a Tibetan teacher, perhaps has best summarized the difficult balancing act that must be learned for emotional control - "***Don't suppress it. But don't act on it.***" The difficulty of overcoming the physical structures which have evolved to allow human beings to survive in a threatening world are emphasized by Goleman as he describes the shorter pathway which "allows the amygdala to receive some direct inputs from the senses and start a response *before* they are fully registered by the neocortex. The amygdala [the seat of emotional response] can have us spring to action while the slightly slower - but more fully informed - neocortex unfolds its more refined plan for reaction. Goleman goes on to indicate that anatomically the emotional system can act independently of the neocortex. "Some emotional reaction and emotional memories can be formed without any conscious, cognitive participation at all." He additionally cites other research which has shown that in the first few milliseconds of our perceiving something we not only unconsciously comprehend what it is, but decide whether we like it or not; the "***cognitive unconscious***" presents our awareness with not just the identity of what we see, but an opinion about it.

But like all involuntary, reflex actions, such as blinking and breathing, emotions can be contained for a civilized social order. Such containment is structured within the individual mind by awareness and monitoring of the process, delaying gratification and developing empathy for others. It is structured with civilized cultures by admonitions to "stop and think", sympathy, sharing and support. Atypical behaviors are often the result of a failure of learning, unfortunately reinforced by coercive response by the others around us. Changes in perspective and behavior will need to occur at both individual and sociocultural levels to overcome emotion flooding and its resultant outcome.

Coherence

Belief Systems

What people believe to be true is that which is coherent to their already established set of truisms. This set of truisms is developed over time and is significantly shaped by the significant people in the environment. Its development is monitored by the rigor with which each new proposition is analyzed in relationship to what already exists. For scientist, the coherent belief system is developed through a continual examination of nature. Theories which are incongruent to such natural aspects are suspect. When incoherence is met with physical evidence of truth [the new theory proves capable of answering questions and predicting outcomes not able to be done earlier], the belief system is found to be potentially flawed and a decision to change becomes possible. In fact, it can be theorized that **all** change requires sufficient dichotomy with the known in order for new development to occur.

Douglas Hofstadter [1995], a physicist and mathematician about whom we will have more later, has developed a computer program which has a set of overall tendencies which characterize how the human mind might take random elements and formulate a degree of perceived order.

- There is a general tendency for the initially activated concepts to be *conceptually shallow*, and for concepts that get activated later to be increasingly *deep*. There is also a tendency to move from *no themes* to *themes* [i.e., clusters of highly activated closely related, high-conceptual-depth concepts].
- There is a general tendency to move from a state of *no structure*, to a state with *much structure*, and from a state having *many local, unrelated objects*, to a state characterized by *few global, coherent structure*.
- As far as processing is concerned, it generally exhibits, over time, a gradual transition from *parallel* style toward a *serial style*, from *bottom-up* mode to *top-down* mode, and from an initially *nondeterministic* style toward a *deterministic* style.

In such a manner, do human beings create beliefs from random facets of situations. If you feel uneasy about a proposition in which greater intelligence can result from making *random* decisions rather than using *systematic* ones, Hofstadter suggests this is an illusion caused by a confusion of levels. As sensory information is gathered there is a drive towards global coherence and deep concepts. As the person acquires more and more information, s/he starts creating a coherent viewpoint and focusing in on organizing themes converting from the initial largely bottom-up, open-minded mode to a largely top-down, close minded one. This movement toward coherent pathways results in the macro decisions will be make *non-randomly*. “Thus, randomness is used *in the service of*, and not in opposition to, intelligent nonrandom choice.”

Hofstadter metaphorically suggests that this is the equivalent of the fluidity of water.

*...It is interesting to note that non-metaphorical fluidity - that is, the physical fluidity of liquids like water - is inextricably tied to random microscopic actions. A liquid could not flow in the soft, gentle, **fluid** way it does, were it not composed of tiny components whose micro-actions are completely random to one another. This does not, of course imply that the top-level action of the fluid **as a whole** takes on any appearance of randomness; quite to the contrary! The flow of liquid is one of the most nonrandom phenomena of nature that we are familiar with. This does not mean that it is by any means **simple**; it is simply familiar and natural-seeming. Fluidity is an emergent quality, and to simulate it accurately requires and underlying randomness.*

It is critical, it seems, that people be allowed the *potential* to follow risky pathways in order to have the flexibility to follow *insightful* pathways, and in order to do so they must have random, not directed influences. In this complex world we are unlikely to know in advance what concepts may turn out to be relevant in a given situation and examination of a limited number, but randomly selected variables is most likely to enable us to consider nonconforming solutions. We want to avoid dogmatically open-minded search strategies that entertain all possibilities equally, while at the same time, avoiding dogmatically close-minded strategies, which in an irrational way rule out certain possibilities *a priori*. It might be argued that people with problems in living have a tendency to be too dogmatic in regard to close-minded strategies and develop automatic thoughts that quickly move toward limited [and often ineffective] ends.

Many people, even in civilized societies operate with beliefs that are unexplainable. Many others have explained their beliefs in nonlogical and inconsistent patterns which fluctuate between the conscious [able to be understood in symbolic terms] and the unconscious [without common symbols]. Where the understanding breaks down, the faith comes in. What is difficult to define is why people believe what they believe. We are aware that people absorb knowledge [used here to define understanding through common language symbols (systematic, scientific)] and lore [used here to define understanding through subconscious characteristics such as style, tone, affect, demeanor, etc. (spontaneous)] through their senses, but we are not able to delineate why they *know what they know*. This is of course, because the very existence of what we are calling lore is predicated upon our inability to define symbolically these experiences, thus we know more than we can say. Even belief systems which appear to be formed based on logical, rational data often rely on unsayable mental constructs.

Gilbert [1993], in writing about Spinozian theories, suggests that all we mean when we say that a person has a belief is that there exists in a person's mind a coherent mental representation which contributes to that person's behavioral propensities. He further suggests that these beliefs are what bind us to the reality outside. What we believe creates our reality and we believe that which is coherent with our prior beliefs. In this process,

each person creates his or her own comprehensive perspective of the world based on an attempt to make all experiences congruent to former experience.

Gilbert further cites Spinoza's speculation and later research evidence, that all propositions [mental representations using symbolic language] are considered by the person to be *true* unless the person has the energy and desire to do the analytic work to determine the proposition's coherence. This analytic work must implement the set of rules [syntax] that the system has available and the truths or meanings [semantics] which that system already accommodates. This suggests that a system [child] needs energy, logic [syntax] and information generated by emotional context of utility [semantics] to create belief system which provides an *independent* view of the reality of the world. Thus the capacity of an individual to arrive at a more or less *objective* sense of the reality around us is contingent upon an *energetic* desire to learn the "truth", a finely honed set of *logical* skills and a willingness to expose each "truth" to stringent tests of empirical evidence, and finally a large and growing set of beliefs which have stood the test of time; been shielded from personal feelings which cannot be supported through evidence, and exposure to critical thinking.

But the child who has a poorly developed set of logical skills; whose information cache is *personalized* and *moralized*; and has little energy to deal with noncoherent propositions, will develop a *reality* which very likely depreciates his/her self concept which is likely to result in antisocial behaviors which set in motion a reality [pragmatic] which reinforces this perspective.

The important impact of words, both internally [thinking] and externally [communicating] upon people is of concern if we are to develop a society [school culture] that is capable of creating a more or less objective reality. Of particular importance to the development of competent children are *metaphorical words*, which convey large generalizations of concept. [i.e., bad, lazy, stupid, etc²².] Such words, when used pejoratively, without consistent data to support them, become euphemisms for who we are. While the logical [conscious] part of our brain may be significantly less powerful than the instinctive part, it is nonetheless important. We must be able to help people process the use of symbols *consciously* and *correctly*, if we hope to find a way to have significant impact on how people perform [communication and other overt behavior] in day to day life. The hope is, from the perspective of the individual child, to strengthen analytic work through motivating [energizing] children to make **conscious** [be aware and attentive] of their present *schemata* [coherent belief systems] and to teach them the skills to develop **logical** analytical processes; in order to defuse metaphorical generalizations through an investigative process; and to enable people to make conscious those aspects of their thought which prove to be toxic.

Culture

Emile Durkheim, the patriarch of modern sociology, referred to human nature as "merely the indeterminate material that the social factor molds

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Now being replaced by such metaphorical words as mental illness, depression, schizophrenia, etc.

and transforms." He argued that even such deeply felt emotions as sexual jealousy, a father's love of his child, or the child's love of the father are "far from being inherent in human nature".

Human Behavior Stream

The scientific study of human social life must concern itself with two different kinds of phenomena. On one hand, there are the thoughts and feelings that humans experience within their minds; on the other, there are the activities that constitute the human behavior stream. The relationship between mental and behavioral events are significant. If beliefs are mental representations which predispose towards action, then the mental activities and context have some relationship to the behavioral outcomes. This process monitors and attempts to make sense of relationship of the *semantics* [understanding] of the individual in the interactivity, and the *pragmatics* [context] of the interactivity,

Dubin [1973] suggests that culture is best seen as a set of control mechanisms - plans, recipes, rules, instructions, which are the principal bases for the specificity of behavior and an essential condition for governing it. The ability to devise a system which provides for plans, recipes, rules, and instructions for prosocial skill performance shows promise of provoking a cultural evolution from present behaviors and their management to a new level of self control.

Evolutionary psychologists Tooby and Cosmides [1992] put it another way”.

The hominid occupation of the cognitive niche is characterized by a constellation of interrelated behaviors that depend on intensive information manipulation and that are supported by a series of novel or greatly elaborated cognitive adaptations. This zoologically unique constellation of behaviors includes locally improvised subsistence practices; extensive context-sensitive manipulation of the physical and social environment; "culture", defined as the serial reconstruction and adoption of representations and regulatory variables found in others' minds through inferential specializations evolved for the task; language as a system for dramatically lowering the cost of communicating propositional information; tool use adapted to a diverse range of local problems; context-specific skill acquisition; multi-individual coordinated action; and other information-intensive and information-dependent activities

The mental construction of beliefs, the degree of intensity in which they are held, and the conviction with which they are conveyed are all a part of how we impact others. Each part of this trilogy is important and each can be enhanced. To the degree to which human beings use others to shape their own beliefs, they develop a culture [which can be defined as a group reality]. The “common sense” or “common knowledge” of which we refer is a common mental process in which a group of people have influenced each other to believe in certain ways of looking at the world and have defined from that perspective appropriate ways of behaving. This process shapes the “reality” in which that group and

the individuals in it live. To create a new reality demands a new and persuasive idea which can be conveyed to many people in a manner which can be believed. Whether it is true or not is relevant only to those who are persistent in a personal, systematic search for incongruence.

From at least one cultural anthropological perspective [cultural materialism - Harris, 1994], the structure of sociocultural systems rests on five basic requirements: 1) the problems of *production*, 2) the mode of *reproduction*, 3) *domestic* or *intragroup* behaviors, 4) *political* or *intergroup* behaviors, and finally, given the prominence of human speech acts and the importance of symbolic processes, 5) the occurrence of aesthetic products, recreation, sport, ideology, religions, and the like. For our purposes and with apologies to Harris and other cultural anthropologists, these behavioral categories are used in a most *laissez-faire* manner as points for discussion.

Sociocultural Nesting

If one considers a society as a maximal social group consisting of both sexes and all ages and exhibiting a wide range of interactive behavior, one can speak of the American [meaning people from the United States] society or identify specific populations within that society which meet these criteria in more specific ways. While all Americans have, because of their governmental imperatives, a wide range of interactive behavior, this is even more true of the smaller entity of Pennsylvanians, or smaller yet, Philadelphians. Thus, it is somewhat arbitrary how we choose to define the society which has sufficient interactive behavior to influence the actions of individuals. In fact, we can speak of the culture as narrowing to the neighborhood, group, family and to the individual who manifest his/her interpretation of the culture through his/her mental schema usually called a personality.

One can almost describe a “*nesting*” of sociocultural entities, one within the other like slavik dolls, all containing some aspects of the largest specimen. Thus, we speak of the school and its inhabitants as a sociocultural entity which contains some basic concern with the five behavioral categories²³. Culture, represents the learned repertory of thoughts and actions exhibited by the members of social groups. Such cultural repertories contribute to the continuation of the population’s social life. While students are certainly influenced to a greater or lesser degree by other cultural influences, it is suggested that the culture as it has evolved within a school has a major and potent influence upon its population.²⁴

Effecting Sociocultural Changes

²³ It would be interesting to discuss just what the behavioral concerns might be in a school. Production, you would think would concern academic excellence and reproduction in the general sense would be unacceptable, but the discussion of these variables and the arrival at a *conscious* understanding of the group sense would be interesting, and as is noted throughout, a method at arriving at an agreed social policy and a competence culture.

²⁴ As identified in the discussion of emics, there are differing social entities and “*selves*” which identify with those social entities. The basic responsibilities of sociocultural entities include production, reproduction, domestic behavior, political behavior, and esthetics [religion, taboos, magic, lore, philosophies and ideologies as well as the arts]. It should be apparent that parts of these sociocultural functions are carried out on different levels by smaller social entities.

The question that needs to be addressed by human service planners is how a change in a sociocultural system might impact overall, and whether we can identify the best possible ways to implement change. The goal is to create a social *ethos* that negates antisocial and violent behavior and supports the individuals within it - to engender "social disapproval" and bring informal sanctions on the individual behaving in certain ways. A capacity to recognize certain habits as unacceptable should be perceptible by all within the sociocultural unit and each person should have the skills to indicate such derision.

As a paradigm example Andrew Lock²⁵ delineated Norbert Elias' study (1978) of European etiquette manuals dating back over the last 700 years which revealed that *the processes of social interaction have unintended consequences, that they 'create' 'things' that are only subsequently articulatable (or discoverable) as 'things'; and that the 'things' that result from this 'social construction' have an intrinsic ordering to them that constrains the order in which we come to 'apprehend' them.*

Lock reports that Elias' rationale for interpreting the material this way rests on two points. First, if a manual explicitly proscribes a form of behavior, then we may assume that those people to whom the advice is targeted would otherwise do what they are being told not to. Second, if over the course of centuries particular advice drops out of these manuals, this does not reflect a change in fashion, but that people no longer need to be told such niceties of behavior, for they have been 'socialized' not to perform in these ways.

Again, as reported by Lock, Elias establishes the historical course of elaborating western practices for dealing with the assorted accumulations of material that periodically inhabit the human nasal passages. At the root of the changes Elias documents what is considered polite is a hierarchy of actions: blowing the nose; hiding the blowing of it by using a handkerchief; hiding the blowing of it into a handkerchief. But, most importantly, embarrassment is being invented. *Embarrassment is a (metacognitive) emotional state created by the explication into discourse of this hierarchy: for it to be realized, a self-censorious ability has to be established.* People have to become able to reflect on their own behavior - that is, on how they act in company - where previously they had not done so.

Over all the activities he considers, there emerges from Elias's study the strong implication that this ability was not just lacking in the area of nose-blowing, but that it was unavailable for any activity: People generally did not reflect on what they were doing. Hence, they did not provide the necessary conditions that would enable them to feel embarrassed. In Elias's view, the kind of change in interpersonal behavior that such advice reflects is not one of fashion; further, it does not involve solely changes of 'knowledge' transformations of 'ideologies', in short, alterations of the content of consciousness, but changes in the whole human make-up, within which ideas and habits of thought are only a single sector (Elias, 1982).

²⁵ Andrew Lock of Massey University in an article *Against cognitivism: the discursive construction of cognitive mechanisms* as published on the internet.

These changes reflect a reorganization and transformation of the whole personality throughout all its zones, from the steering of the individual by himself at the more flexible level of consciousness and reflection to that at the more automatic and rigid level of drives and affects. (Elias, 1982)

Elias predicates these changes in personality structure on structural changes in society brought about by the expansion of trade, the diffusion of money, the monopolization of power and physical force by a central 'state', and the growing stabilization of the central organs of society. In sum, 'as the social fabric grows more intricate, the sociogenic apparatus of individual self-control also becomes more differentiated, more all-round and more stable' (Elias, 1982/ Lock). He offers the following explanation as to why there is this relationship:

From the earliest period of the history of the Occident to the present, social functions have become more and more differentiated under the pressure of competition. The more differentiated they become, the larger grows the number of functions and thus of people on whom the individual constantly depends in all his actions, from the simplest and most commonplace to the more complex and uncommon. As more and more people must attune their conduct to that of others, the web of actions must be organized more and more strictly and accurately, if each individual action is to fulfill its social function. The individual is compelled to regulate his conduct in an increasingly differentiated, more even and more stable manner. (Elias, 1982)

Elias considers that it is the relationship between the psychological functions controlling an individual's actions that changes during historical time; that it is these relationships within man between the drives and affects controlled and the built-in controlling agencies, whose structure changes in the course of a civilizing process, in accordance with the changing structure of the relationships between individual human beings, in society at large (Elias, 1982).

The first striking notion that occurs to this author is almost, but not quite, irrelevant: "what every happened to etiquette?". The whole issue of embarrassment for personal behavior has been rejected by many in today's society. These are the messages that are lost with the loss of God as replaced by a scientific materialism. It is not necessary for a nonbeliever to *invent* God, simply to restore order to the world, but it is necessary to *consciously* develop new guides to etiquette if we expect embarrassment to return. As Ellis suggests ***human beings and their conceptual systems are explicated renderings into mental form of their social discourses..*** And Lock adds: This process of explication is contributed to by the potentialities of the various symbol systems that humans use, as well as the nature and structure of the human practices within which these are sustained. It is becoming clearer that (1) the properties of particular symbol systems and (2) the conditions under which they are employed affect the ease with which humans can use them for particular purposes. ***Cross-cultural psychology is providing compelling evidence that human abilities are not solely the properties of individuals, but are***

embedded within socio-cultural practices, and that those practices are integral to the construction and maintenance of the abilities found. The study of human discourse practices is moved from the fringe of psychological science to its centre, for *the processes fundamental to the project of the cognitive revolution are no longer encapsulated within the head of an individual, but distributed in the symbolically-mediated practices that comprise human cultures; distributed between the individual and the social* (see also Bruner, 1990).

In the preface to his *Dictionary*, Samuel Johnson wrote:

It is the fate of those who dwell at the lower employments of life to be rather driven by the fear of evil, than attracted by the prospect of good; to be exposed to censure, without hope of praise, to be disgraced by miscarriage, or punished for neglect, where success would have been without applause, and diligence without reward' [as reported by Pinker - 1994].

Johnson could have been describing the sociocultural environment of many of our schools. Our society is much too quick to respond to the negative and much too reluctant to offer reward. Our fear of “spoiling” is perhaps a misplaced concern which has lead us to place emphasis upon defect instead of upon competence.

According to Harris the most likely outcome of any innovation is system-maintaining negative feedback. Thus the attempts at direct intervention tend to create a “backlash” which dampens the expected change resulting either in the extinction of the innovation or in only slight compensatory changes in the other sectors. These are the kind of modifications which preserve the fundamental characteristics of the whole system²⁶. However, some innovations, certain kinds of infrastructural [having to do with production and/or reproduction] changes (for example, those which increase the energy flow and/or reduce wastage) are more likely to be propagated and amplified, resulting in positive feedback throughout the system.

As an example, the change from medical/therapeutic models to cognitive behavior management or competence models in the sociocultural subsystem of mental health services has been met with very strong system-maintaining negative feedback which has distorted and subsumed these new technologies almost to the point of extinction despite the demonstrated efficiency and effectiveness of the interventions. One might, therefore question, why should we expect amplification of these technologies within the school? We would suggest that the two systems identify the innovation from differing perspectives. From the mental health socioculture, the innovation is an *ideology* which does not increase energy flow or reduce wastage, but interferes with the method of production by reducing the market. Thus the negative feedback process occurs. Slight modifications [social skill building **and** medication will make everything all right] have

²⁶ The similarities to how individuals manage to sustain their own personal integrity should not go unmentioned. Human schemas, whether they be individual organisms, sociocultural entities or social systems strive to maintain a coherence between what they believe to be true and how they perform. This attempt at integrity is seen as highly selective when it is coherent to others, but *resistive* , when it is disagreed with.

occurred within the system, but only to the extent of protecting the major components of the system.

For the educator on the other hand, cognitive behavior management is directly related to the technologies used in production and has a major and immediate impact on the energy, effectiveness and productivity of the teacher. There is a greater coherency in the change to cognitive behavior management for the teachers because of its congruence with mimetic teaching methods²⁷ and therefore the change can become a continuation or enhancement of known truth. For the medical model expert, cognitive behavior management is “incoherent” and without sufficient evidence to produce a dichotomy crisis. The continued identification and dissemination of research evidence may bring about sufficient disruption to cause the belief system to change, but until that time, it will be resisted. This is one more reason why it is so important that each individual intervention be treated as though it were a research experiment in which measurement and documentation of outcome is a prerequisite. A focus away from the higher representation of a theory or ideology and toward the molecular.

Viral Ideas

Ideas, like viruses, grow and evolve; infect, mutate or are purged by the ideological environment that they meet.²⁸ In our opinion, the American society has been struggling with a virus of despondency and self-depreciation or debasement which has infected our ability to grow and develop. In abandoning the belief that a force [supreme being] outside ourselves which looks out for us, we have failed to develop a sufficiently powerful idea, that we are capable of looking out for ourselves. Without religious belief in the *inherent goodness and salvation* to immunize us against such viral attack as moralization and personalization, we spiral down into a world perspective of pathology and defect which becomes its own self fulfilling prophecy; since the identification [label] of failure become the reason for failure.

Individual schools have also provided coherence to a culture of failure through the idea that the teacher is responsible for the decisions made by the child and the indiscretions of the family. Such a perspective has lead to a *coercive* [police state] environment in which the teachers and students are thrust into a pitched battle in which no one can win.²⁹ Even students who have the *critical school survival skills* are thrown into a difficult performance crisis as they find themselves either sided with the students or the teachers.

²⁷ It is interesting to compare the innovation of education in its acceptance of the *transformative approaches* as replacement for the mimetic education. Here, the negative feedback response identified by Harris, tends to dampen the innovation and maintain stasis on the fundamental approach.

²⁸ Harris also insists upon the pre-eminence of behavior over thought - “the conclusion seems inescapable that when the infrastructural conditions are ripe, the appropriate thoughts will occur, not once but again and again.” We would argue that thoughts and behaviors are interactive; impacting upon each other. However, only when the idea creates an *incoherence* within the infrastructure and analysis demonstrates the innovations superiority, does the idea become potentially acceptable. From this argument, the ideas occur over and over, but become vital [or virulent] only when they become utile [enhance pleasure/avoid pain].

²⁹ The virility of the idea of fearing our children is so potent that people like Goldstein are advocating the idea of developing protective school environments [i.e. cameras, bars, covering stairwells, etc.] as beneficial methods of reducing violence. Such activities are, of course, salient cues as to the fearfulness of the environment and lead to increased reason to reduce involvement [even positive] with others since our expectations of their behaviors is so negative.

Without *appropriate alternative* responses which are culturally accepted, students are open to ridicule or potential violence if they attempt to chastise their peers for unacceptable behaviors.

Social Learning

Part of the issue of our concern is to teach children to be *responsible* citizens. Gustafson & Laney [1968] indicate that structures of mutual responsibility appear to be built into human experience and that they provide a framework within which orderly interaction between persons and groups of persons take place. In some instances the order of responsibility is stipulated in explicit form; in laws or rules.

In other instances we anticipate that others will be where they are supposed to be, do what they are supposed to do, say what they are supposed to say without the formulation of these obligations in clear and explicit ways. The question that must be asked is, "how do children learn these expectations?" Is the expectation that other will behave in certain ways instinctual or is the acquisition of such knowledge acquired through a cultural process; and if so, why is that process seemingly failing? It should be clear that a process of habituation takes place in the *experience* of growing up, relating to family and peers. These mutual expectations are part of the fabric of interrelations and interactions between persons and are not defined by signed agreements - there is no external authority that has power of sanction. We expect spontaneous learning.

The reason for the breakdown of expectations is more complex, but might also be identified as being part of this society's sociocultural shift that has changed the expectations of the sexes as well as authority - subordination and other formerly standardized operations. The world has become a place of greater individual freedom and fewer restrictions upon individual daily decision making. Information of all kinds is immediately and easily available which contradicts much of the "common knowledge" view of the world so easily held by children growing up isolated in small rural environments.

More than ever, it is not self-evident under all circumstances what we should or ought to do. Moral reflection about different responsibilities is a process of decision-making which involves the recognition of those to whom we are responsible and the sorting out of the things for which we are responsible. The loss of traditional expectations has increased the requisite of *moral reasoning*, while at the same time reducing the probability that children will developmentally or spontaneously learn it.

What may be even more concerning is the increase in *negative* expectations. It is not unusual today to expect the *worst* from our children and adults are often rewarded by having their expectations met. The student's social environment greatly influences the level and intensity of his or her aggressive and violent behaviors in the school and classroom. Social learning may be the *most important determinant* [emphasis ours] of both aggressive and prosocial behavior. According to Bandura [1973] aggression is learned through the observation of aggression and its consequences and through

experiencing the direct consequences of aggressive and nonaggressive behaviors. [Rutherford & Nelson, 1995]

We are concerned not only with the way responsibility itself may be understood as a primary aspect of moral life, but how it may express itself [Gustafson & Laney - 1968]. Behavioral repertoires vary in conformity with each individual's learning history. The behavioral performance of specific social groups necessarily include learned responses. These learned responses play an important role in the evolution of social life. Harris [1979] in refuting the sociobiological construct of gene superiority in behavioral domination, indicates that socially assisted learning is a process by which learned responses that have been found useful by one organism can be preserved and propagated within a social group.

The social response repertoires acquired by means of socially assisted learning constitute a group's tradition, *mythos* or culture. In this case, students learn from students and teachers from teachers and each group learns from the other. When there are absentee parents, social group learning constitutes a major part of the child's development. Evidence has shown that children reared apart from their parents invariably acquire the cultural [cognitive and behavioral] repertoire of the people among whom they are reared. The child's social learning will come in this case, either from the peer group or the school. This is particularly disturbing since the peer group seems to be unable to provide sufficient prosocial cultural impact of their own to have salient impact upon those children who do not have these skills. The *ethos* of the peer group, which is supported by the responses of the adults [through guards in the halls, bars on the windows, enclosed stairwells, etc.] makes it *ut in pluribus* [perceptible by all] that school is a dangerous place and the societal disapproval is upon those who cannot cope with a dangerous ethos. The response is to heighten the *macho* qualities of each individual, students and adults alike, to respond appropriately with the "muscle" to be acceptable.

Responsibility is not a *thing*; it is a relationship between the person and others or a relationship to certain situations. There is an implicit assumption in this discussion to accept responsibility as a good thing, that responsibility is more than a given experience it is an *ought* which persons need to be aware of. One acts in response to others and to situations; one responds to the actions of others. Action involves the exertion of energy, the innovation of purposes into events of which one is a part, the taking of risks - since one cannot fully control the consequences of his or her responses.

Responsibility is not mere compliance with rigid sets of patterns in life on every occasion; in many situations one can and ought to respond creatively, altering the course of events, reforming the institutional patterns within which one lives, elevating a relationship to a different plane, transforming the modes and qualities of life which one is a part [Gustafson & Laney - 1968]. Yet parents and teachers seem to demand that children obey laws and rules as the *only* requirement of responsibility. This flies in the face of the sociocultural openness of expectations which requires *creative* responses. To choose to be responsible for one thing often excludes the possibility of being responsible for another: to whom do I owe duty?

The failure of the family, school and culture to teach the child responsibility and the skills necessary to be responsible which include information collecting, comparative evidence, problem solving, and moral reasoning, leaves the child abandoned to a world of changing standards of expected behavior. To be responsible is to accept obligations that one has by virtue of his or her commitment, role, power and authority. Every child must learn to obey laws not because they exist, but as a freely and consciously chosen responsibility to society. And this can only be learned in the context of social intercourse.

Pragmatic [Contextual] Considerations

Kerr and Nelson [1989] suggested three functional explanations for aggression in the classroom:

- students may lack the ability to discriminate the environmental cues or prompts that set the occasion for prosocial rather than antisocial behaviors. [inappropriate or ineffective stimulus control].
- aggressive behaviors are reinforced by tangible reward or personal gain, by the reaction of others, or by the avoidance of aversive, unpleasant situations or consequences. [direct or indirect reinforcement.]
- aggressive behavior may be imitated. [modeling of aggression]

When one deliberates on the environments that may provide the optimal advantages for prosocial development, several related issues come to mind. One issue involves the sheer size of the environment. Anthropological evidence suggests that there are several primary units that have been used by human beings to evolve over time. The first is the family. Whether this is the *nuclear* family of mother, father and children or the *extended* family, which may include grandparents and other relations, or the *tribal* family; the family is an integral part of the development of the child. It is significant that the family in prehistoric or primitive peoples tends to not exceed twenty five [25] people. This seems to be the normal size of the human equivalent of the “herd”. But like other species who operate socially in small groups, there is another level that occasionally operates and that is when family groups of interrelated peoples come together in *clan* meetings of about five hundred [500] people. While these larger groups may reach as many as one thousand [1,000], a grouping of about five hundred is more usual.

These numbers are significant cognitively as well. It seems that most people are capable of “knowing” about five hundred people. This means that they can be familiar enough with five hundred individual to speak to them by name and know something about their lives. In addition, the upper limit seems to be somewhere around one thousand. Whether the cognitive or pragmatic aspects of these numbers came first is not relevant to our concerns here. What is important is that there seems to be a natural limit to the size of an environment, which can have a unified impact upon the child. A classroom size of twenty-five and a school size of five hundred may be the “ideal” size limit for the

promotion of growth and development. These sizes would, of course, include school staff as well as children. This would provide an environment where everyone knows everyone else in some more or less intimate way and the norms of the group can be conveyed and supported throughout.

The question of size is related to a variety of other issues. The first, is the question of *intimacy* and *privacy*. While on the one hand human beings seek closeness and intimacy in another's company, they alternately also seek privacy. With very small groups, privacy is diminished. With very large groups, intimacy is limited [this in the sense that one cannot be intimate with the group; only a faction of it]. Factionalization versus frustration. Each has its own disadvantage. One seeks, therefore, a group sufficiently large to provide some private moments, while still being able to know how the others intimately think and feel about issues of importance.

Schools of more than five hundred total people lose this ability. The pejoratives about *institutions* come to mind: they are cold, impersonal, and over regulated. Is not this a reaction to the very size of the entity of concern? But the issues go even further; smaller groupings provide an expansion of prosocial *roles* for children. There is a limit to the number of "best athletes" in a school. On a baseball team, nine people play most often with substitutes making up a team of about twenty five. If a school of five hundred has a team, twenty five of five hundred [or 5%] of the kids have an opportunity to be "baseball players". In a school of one thousand, that percentage is cut in half.

From the perspective of *financial* cost savings, the larger school is clearly superior even on this one example alone. But from the perspective of growth and development of children [effective outcome expectations of schools], this example points to the deficiencies of large size. If you count up the prosocial roles of a school [class government, valedictorian, student messenger, etc.] and realize that by increasing size in order to diminish costs, we have also diminished the number of prosocial roles available to our children, we begin to have an outline of pragmatic concern³⁰. Economies of size can diminish quality of environment.

Costs cannot be truly separated from quality. If the cost of educating a child poorly results in added costs of incarceration or "treatment"; we have missed the point. A prosocial environment has certain size requirements that provide for the ability of children to be close to the teachers and students and make available as many prosocial roles as possible. Within this framework there is some possibility to identify and correct inappropriate or ineffective stimulus control and to influence aggression modeling as well as direct and indirect reinforcement. Environments which exceed evolutionary limits diminish this potential.

Prosocial Environments

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This concern has been escalated by the reduction in work opportunities for young people caused by the inflation of the minimum wage - again reducing the potential of a productive, prosocial role.

From a social learning perspective, student aggression may occur as a result of complex interactions of these issues requiring interventions at the environmental as well as the individual level and that both the *context* and the *function* of aggressive behavior must be considered when developing interventions. [Rutherford & Nelson, 1995]. A cultural evolution within the school which enables individuals and groups within the environment to provide *acceptable alternatives* to antisocial behavior becomes a significant initiative. The creation of such a social ethos will be based upon creating positive energy flow from the *fundamental* strength of the present system; the development of positive *high expectations* which create a Pygmalion effect not only from leadership, but from peers as well; and finally by teaching of the necessary repertoire of behaviors which are necessary for the individual in the situation to have the capacity to carry out the sociocultural functions.

The expectation that teachers can play the role of teachers [instead of policemen] and that students can be responsible decision makers who are reinforced by other students for making ‘good choices’ is enhanced by the fact that we are returning teachers to their own skill and knowledge base.³¹ The fact that prosocial skills of both interpsychic and interpersonal focus require modeling, role playing, performance feedback, and transfer training sequence just as in math and reading, make it an educational role and function. The evolutionary process is directed at providing teachers with content and dialogue which will enable them to reduce personal, moralistic and pejorative dialogue while increasing prosocial skill training as part of the educational content. Along with the direct teaching, themes and artifacts provide continued awareness of prosocial values.

Along with the attempts to develop more prosocial and less pathological personal approaches in all children, Gilbert has indicated at least two variables which can also potentially help improve the disabled child’s self depreciating perspective. The first is that a de-energized system [person] finds it difficult to perform the analytic work necessary to deal with incoherent propositions and therefore will tend to accept them as true without analysis. The second is that human beings prefer their beliefs to be *gratifying* as well as true. Thus several intervention strategies become available to the practitioner:

- the teacher can bombard the child with incoherent propositions [in this case - you’re OK statements to overcome the belief that s/he is bad, stupid, etc.]; fill the environment with propositions which, if they are believed, provide a schemata which supports *prosocial* behaviors.³²
- the teacher can use techniques to de-energize the child while the incoherent [you’re OK] propositions are being made; i.e., during *self-instruction* the child is

³¹ Actually, one of two alternative routes to teaching prevail. The “mimetic” education requires the aspects required here and is the major process used in American schools. The “transformative” approach described by Howard Gardner has the teacher serving as coach or facilitator rather than model. Even teachers using the transformative approach probably can use mimetic processes which align more closely to learning basic skills.

³² Rutherford & Nelson [1995] have reported that Walker et al. [1995] noted that although students who behave antisocially initially may not be responsive to adult praise because of a history of negative adult interactions, social reinforcement paired with other behavior enhancements procedures eventually will increase the positive valence of praise.

telling him/herself that s/he is OK and the telling de-energizes the system sufficiently to avoid analytic work.³³

- finally, since the “you’re OK” message is much more likely to be *gratifying* than a “you’re not OK” messages, there is an enhanced acceptance of the belief.

Behavioral-ecological assessment involves the evaluation of observable student behaviors over the range of environmental settings in which they occur [Kerr & Nelson, 1989]. The goals are to (a) identify the specific interpersonal and environmental variables within each setting that influence behavior; (b) analyze the behavioral expectations for various settings; and (c) compare those expectations with the student’s behavior across the settings [Polsgrove, 1987]. This assessment strategy has yielded a rich supply of information about the environmental factors that influence aggressive behavior. [Rutherford & Nelson, 1995]

William F. Buckley [1985] suggests that “[t]he three generic sanctions that cause societies to cohere are social, legal, and divine.” Neither the school nor the community in general can innovate the icons of spiritual belief or develop the specific initiatives of law. The school can, however, and does without conscious awareness, influence the social sanctions which implicate our sociocultural behavior. And indirectly, as that social ethos changes, the legal and moral efforts of the other constructs will begin to reflect such changes. The insistence on punishment over rehabilitation is a legal response to the need to be more “macho” than the criminal in an ethos where “might makes right”. In fact, failure to respond in such a manner is ludicrous, since the society disapproves of “bleeding heart” responses, thereby changing the character of individual response. Even religious responses are modified as the church becomes ‘less relevant’ to the general public in an amoral ethos and some spiritual leaders even modify the *word* to meet the needs of the time.

Affirmation/Confirmation

Happiness is not an emotion that can be separated from what we do. Happiness is like grace in a dance, not something the dancer feels at the end of a good dance, but an inalienable accompaniment of a dance well done. Happiness is not a separable feeling -state that can be obtained in any other way save as part and parcel of right action.

Aristotle [as cited by Seligman - 1995]

As we have seen from Fukuyama [1992], the *thymos*: that is, the desire for recognition, is a major characteristic of human beings. In the process of achieving recognition from

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Perhaps even more important than that, Jones, et al., [1981] suggests that “We may come to believe what we say about ourselves... Or even believe something just because we expect to hear it” [McFarland, et al., - 1984] since the operation of tactical mental control makes our minds reflect our outward social performance.” The implications are a “form follows function” model of Confucian philosophy - “If you want a polite man, first have him act polite.” If we extrapolate and have children *say* they are OK, and teach them prosocial behaviors with which to *act* OK, there is every likelihood that they will become OK.

others, there is a valuation [or re-evaluation] of oneself. Of utmost importance in the developing individual is the development of self-recognition, self-respect, or as it is traditionally called self-esteem. When we use such terms, we shall simply mean that the individual places a value on him/herself that is at least equal to those valued people around him. S/he considers herself worthy, not necessarily better than others, but s/he also does not consider herself worse. S/he does not feel that s/he is the ultimate in perfection, but on the contrary, recognizes her limitations and expects to grow and improve. Thus, self-appreciation is a positive, though realistic, value placed on oneself in relation to others.

Seligman [1995] has rightfully cautioned us about self-esteem as a “feel good” construct. Citing William James formula for self-esteem, he indicates that such a construct bridges “two levels of psychological function: Self-esteem is a *feeling state*: defined by mortification, contentment, satisfaction, and the like. Second, such good feeling is rooted in the world in *the success of our commerce with the world*. Seligman further suggests that there is no effective technology for teaching feeling good which does not first teach doing well. Feelings of self-esteem develop as side effect of mastering challenges. These good feelings are a byproduct of doing well. “We can feel better about ourselves either by succeeding more in the world or by downsizing our hopes³⁴.”

Like other mental schema, there are a number of scenarios in which one’s self-respect is judged, and it may be that one feels better about his/her performance, and therefore oneself, more in some scenarios than in others. However, on the whole, if one feels that one fares relatively well in comparison to others, they are considered to have self-esteem. The “feeling” is an affirmation. As one *affirms* a positive evaluation, one has reached a level of comfort with oneself. This does not mean that there is not a desire to improve, and in fact, to be psychologically fit, one should always be somewhat dissatisfied with what one has achieved and be striving to improve. Nor does affirmation mean that one does not seek to have the good will of others, although the psychologically fit person can take an occasional put down and still continue to feel good about him/herself.

The problem with affirmation/confirmation is that it is so fragile and so ambiguous. In our society, we believe that all men are created equal. In fact, this is a Christian heritage which has been incorporated into our democratic law. The problem is that human beings are equal only in their ability to make moral decisions. They are *inherently* unequal and to treat them as equal is not to affirm, but to deny their humanity. Children, in particular, can be confused by these abstract concepts of equality as they struggle to define *who they are* in relation to others. Children are also often confused by effusive praise for mediocre performance.

“Social equality falls into two categories, the sort that is traceable to human convention, and that attributable to nature or natural necessity” [Fukuyama - 1992]. In the first category are legal barriers to equality - the division of society into closed estates, apartheid, Jim Crow laws, property qualifications for voting, and the like. While many of

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It should be apparent that the traditional mental health systems is much more interested in downsizing hope than seeking success.

these legal aspects have been addressed in this society by law, there are still conventional inequalities due to culture, such as the attitudes of different ethnic and religious groups, to economic status, etc. These lead to experiences for the child in which s/he sees others or is him/herself treated unequally, despite assurances that all are equal.

“Natural barriers to equality begin with the unequal distribution of natural abilities or attributes within a population” [Fukuyama - 1992]. Beauty, talent, athleticism, and intelligence are only the most obvious of such inequalities. In addition there are inequalities created out of the working place through division of labor and the ultimate distribution of income and wealth. “Capitalism is a dynamic force which constantly attacks purely conventional social relationships, replacing inherited privilege with new stratifications based on skill and education” [Fukuyama - 1992]. This implies both that each individual has the opportunity to reach higher levels of economic [and the concomitant social] status; but also sends out a clear signal about the inequality of individuals in any given population. People differ in status both because of movement up and down the economic scale: that is, a young person may be moving up the scale while an older worker is moving down, as well as in their basic capacity to achieve economic heights.

These ambiguities are not lost on children and neither are the excuses that adults use to help children understand why they have not achieved the level that they would like to have achieved or at which they believe is a *dignified* level. Most often the reason espoused is that it is not their fault, but that their failure had to do with bad luck, circumstance or someone oppressing them. Each of these excuses is not only an indication of the lack of contentment in the adult, but sends subliminal messages to the child about their own opportunities, and the failure of equality. Each also espouses the mental construct of *victim*.

“Middle-class societies will remain highly inegalitarian in certain respects, but the sources of inequality will increasingly be attributable to the natural inequality of talents, the economically necessary division of labor, and to culture” [Fukuyama - 1992]. The inequality of talent is something that each of must accept with serenity. This does not mean that one does not seek always to grow and to develop one’s talents to higher levels, but it does accept that in some things, other will be better than we are. Fukuyama is particularly interested in *megalothymia*, or the desire to be *better* than everyone else. His concern is that such a desire may not be in the best interest of a liberal democracy. For our purposes, however, the separation between *megalothymia* and *isothymia* [the passion for equal recognition] needs to be placed into a different context. Each person must be given equal recognition for being an *autonomous*, goal seeking, decision making human being. This is the recognition that gives *dignity* and helps to support self-respect. This recognition is not concerned with an *earned* status that one has achieved through hard work or greater capacity, but is a basic right. All men are equally autonomous, goal seeking and decision-making³⁵.

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Again, the traditional mental health system changes this equation as people with ‘mental illness’ are not considered to be autonomous or goal seeking, and certainly are not capable of making appropriate decisions.

On the other hand, the desire to exceed other men, to become the best, is a competitive effort, which demands discipline and self sacrifice. This is psychologically paradoxical. If the competition is only with others, the potential for psychological fitness is dramatically reduced. While the “test” may be external, the competition is internal. The individual must challenge him/herself to be the best that s/he can be. If s/he has executed at the very best level possible [or at least at the highest optimal level] and *failed* the external test, the individual must obtain *satisfaction*, not frustration. This is accomplished by separating out the effort and the results, by a clear valuation of self that is both realistic and demanding. Few psychologically fit people become distraught when “losing” to a person of clear superiority. It is the *shame* of feeling that one has not achieved at their best level that drives the desire for perfection.

We can reduce, if not eradicate the discrepancies caused by the division of labor by preparing ourselves to reach our highest levels of productivity and to find pride in our ability to achieve at these levels. Optimal capacity to perform is the best that we can ask and given our social structure, it is unlikely that inadequacy that is ineradicable [disability] will not find support.

“Of inequalities due to convention rather than nature or necessity, the hardest to eradicate are those arising from culture. In a society where status is determined almost entirely by education such an individual is likely to be crippled even before he or she reaches school age. Lacking a home environment capable of transmitting cultural values needed to take advantage of opportunity, such a youngster will feel the constant pull of the ‘street’ that offers a life more familiar and glamorous than that of middle-class America” [Fukuyama - 1992]. Under these circumstances, the child not only starts with a cognitive structure which is hostile to the educational environment in which s/he finds him/herself, but additionally finds the ‘self’ demeaned on a regular basis because of the incoherence created by his/her culture differences with that of the school.

If we are to find a way for children with such cultural deficits to achieve, it will be necessary to find ways to overcome this natural barrier through rigorous examination of the evidence regarding self and others, rather than simply attempting to impose the will [culture] of the school on the child. Many of these children come to the school with values which are quite contrary to the socioculture adaptations they are required to make. It has been suggested by Miller [1950] that lower class children carry a value of “mutual and implicit aid”: that is, achievement is of the group, not the individual. While this is a value worth consideration by any society, it is quite conflictual with the school requirement of individual success. In fact, the imposition of the need for individual success often attempts to negate the values that the child has learned in the first five years of life. We do not need to debate which of the values is better, only to understand that what has been called “cultural competence” is not a simple professional expectation, but a requirement that demands rigorous exploration on the part of the helper.

In order to help a child with different cultural expectations to achieve in a modern world, the school will need to develop *cultural enlargement* programs which take the values of the child and expand upon them in ways that help the child achieve in main stream

society. Such an approach respects the dignity of the child and his/her culture while at the same time seeking change for specific purposes. The process of accepting a belief that I'm OK is a *self-affirming* process; the process of accepting a belief that the person telling you that you are OK is a process of *confirmation*; both are necessary if the child is to develop a schemata [set of truths] which will support prosocial behavior. These mental structures, can be conceived of as similar to computer software or programming. As with that structure, human beings have mentally programmed themselves to respond in certain ways given the stimuli: "when this happens go there or do that". The programming happens over time through interaction with the environment and the significant people in that environment.

However, we must remember Seligman's caution. "People guided by the popular 'feeling-good' viewpoint are ready to intervene to make the child feel better. People guided by the 'doing-well' approach are ready to intervene to change the child's thinking about failure, to encourage frustration-tolerance, and to reward persistence rather than mere success." "The doing-well advocates have two new technologies: one for changing pessimism into optimism, and one for changing helplessness into mastery" [Seligman - 1995].

Fukuyama [1992] states that "[t]oday, everybody *talks* about human dignity, but there is no consensus as to why people possess it." We have suggested through terms like autonomous, goal seeking and decision making, that each individual is capable of taking responsibility for his/her own life and that there is dignity in this human process. But the individual still needs to learn how to make maximum use of these attributes. Through *directive communication*, we learn what our culture considers to be right and wrong. Through *moral labels* and *personalization*, we become right or wrong. Through *play* we become socialized [learn social behaviors] with peers³⁶. This is not to imply that the individual does not participate in this programming. From the very beginning the child must interpret the nuances of both the conscious [language symbols] and unconscious [intuitive sensations] meaning of these relationships.

One does not affirm the child by labeling him/her; nor is s/he affirmed by not asking for his/her best effort. The child needs *rigorous* training in the ability to examine him/herself in relation with others. For a child to become an effective member of our society, s/he must be able to respect him/herself in relation to others and sometimes, in order for that to happen, a cognitive restructuring will be required. If the child is not able to *affirm* a positive self-image, if necessary for his/her persistence and effort, his/her capacity to achieve is unlikely. We shall later suggest a *formal dialogue* as a means of achieving this status with those children whose cognitive structure is most incoherent to the school. This approach is simply a means of focusing the helper on the important conflictual issues of

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As an aside, one difficulty of much of American society is the fact that many children are rarely able to be in situations where they must rely on their own abilities to conform to the norms of the peer group, since so much of child interaction these days is supervised by adults. It used to be that you learned to deal with bullies in the same manner as wolves learn to deal with dominance - at a very young age you found your place in the dominance system and made the best of it. Now that place is may not be found and the constant interjection of adults increases the notion of insult, so the child brings a gun to school.

the child's life and helping the child to think *consciously* through the ramifications of such events.

But there is need also for a cultural restructuring of the school as well, and we will suggest some positive sociocultural involvement as preventative measures to assure that the "battle lines" are not drawn by the frustration of school personnel, but that they are able to both confirm *dignity* upon the child as an autonomous decision maker and provide opportunities for positive reinforcement of *good* decisions. But the passion for recognition cannot be achieved by the present process the lowering of standards through the proliferation of new *excuses* [pathological labels]. Such lowering of standards, is not only distinctly a "put down", it can only lead to mediocrity. If we are to provide children with opportunity for success as well as *dignity*, it seems that we are required to find ways to, on the one hand, help them achieve at their optimal level, and on the other, help them accept their best as adequate, while finally, helping each child to have the desire to continue to strive to grow and develop.

Interrelatedness

The cognitive sciences have helped us understand that *how a person thinks* is important to what they ultimately perceive and how they behave. While Freud suggested that "Thought is action in rehearsal", it is not clear that he fully understood the mental structures developed which support thought. Nor perhaps did he understand the social interrelatedness of people and their thinking. The Reverend Martin Luther King, Jr. intuitively understood this interconnection:

"In a real sense all life is inter-related. All men are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly affect all indirectly. I can never be what I ought to be until you are what you ought to be, and you can never be what you ought to be until I am what I ought to be. This is the inter-related structure of reality."

Such interrelatedness has already been described in terms constructivist theory and with use of the analogy of figure/ground. To carry our analogy further, the importance of congruity between the figure and ground needs to be significant enough to be developed as figure/figure [a relationship which accepts all other people both as distinct individuals, but also as a part of ourselves and therefore accommodates the nature and individuality of each as congruent to ourselves. The relationships of all humankind have certain levels of intensity which vary from individual to individual. These have been conceived as concentric zones in which the individual at issue is surrounded by persons of varying relatedness. Of particular concern is that level of connectedness with a *personal support network* - that group of people whose closeness and interdependence is apparent. This grouping might be described as an *intimate sociocultural entity*, which is *nested* within larger [and often diverse] sociocultural entities. In an otherwise disconcerting article, Cutler & Tatum [1983] provide an important outline of the research regarding such

intimate social networks. The research defined major relationship variables which creates certain assumptions for helpers.

Network size is the most obvious and perhaps the most commonly discussed variable in the literature. Several researchers have reported a variety of interesting findings with a variety of age groups and cultures. The data suggested that healthy individuals live in functional psychosocial relationships with between twenty and twenty-five [20/25]³⁷ persons with whom they are mutually interdependent for affective and instrumental support. In contrast, people with “thought disorders” had networks averaging about thirteen [13] and people labeled with “schizophrenia” averaged slightly over ten [10.2].

One of the most obvious questions is “What came first, the chicken or the egg?” or in other words - is the reduced personal network the cause or the result of the disability. Or for even further consideration, is the reduced size of the personal network the result of the “help” and the way it was offered. Obviously, if the service delivery system is designed to take people away from home, family, school and peers as traditional methodologies tend to do, the reduction of personal network is hardly surprising.

Whether we can make the assumption that a large network is, in fact, *therapeutic* is less clear. However, it is an assumption that is worth consideration since, along with its anthropological basis, it has a certain sense of “elegance” to it. The development of personal networks [as mitigated by the other dimensions which follow] should probably be a major focus of the helping professions, yet there is very little evidence that this is so.

Another interesting dimension is that of *kin* versus non-kin. Apparently the networks of psychiatric patients were found to contain twice as many kin members as the networks of purely medical patients. Generally, the smaller the network, the larger the portion of kin present. This fact has bearing on other dimensions as well, since more kin usually means higher density and troubled or ambivalent relationships. We might note here that this expectation might be a result of our more mobile modern society as it is somewhat in contrast to the family, tribe, clan experience where most people are related. We might also note, that, while it was not documented, it would not be surprising to find that the personal networks of psychiatric patients was composed entirely of kin and *helpers and/or other clients*.

Kin relationships are marked by an unusually high index of expressed emotion; that is, by a tendency to share or to take the feelings of others too seriously. Life becomes a kind of emotional roller coaster; family members literally experiencing each other's feelings. In addition, family members tended to have a high degree of social isolation, as they invested much of their personal energy into the relationship with the person diagnosed with schizophrenia.

One can see how a family with a child who is identified as having any serious disability might become isolated and intense. It is one of the paradoxes of human relationships that

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It is interesting to note the close approximation of the anthropological evidence regarding primary units of primitive people that we noted earlier.

often we *care too much* and vest so much into the individual with disabilities that we have little of importance to give. When families support [or even demand] the movement of a child out of the home into some service setting they may be responding appropriately to a recognition that they are losing themselves in the process of helping their child. On the other hand, it would seem that the best of all worlds would clearly be to enable the family keep close personal contact with their child without “going under”. The development of technologies which would increase the child’s functioning instead of simply cycling symptoms would do a great deal to relieve some of the intensity and enable families to continue positive functioning. Further the use of technology to provides the family members skills in relationship can help to diminish the intensity as well.

Finally, the ability of the family to get *respite* from their children is valid whether or not the child is disabled. The development and use of natural supports in the community would be enhanced if a sociology of acceptance were developed. Families with children with disabilities not only isolate themselves, they are isolated by a community who does not know, understand and accept the child. Such are the results of a sociology of deviance, which labels and isolates people with disabilities rather than to accept them as members of the community. “Individuals with a wide range of physical, mental, and behavioral differences - people with disabilities or unusual sexual preferences, criminals, substance abusers - regularly form close relationships with typical people. No attribute of a person, no matter how atypical, precludes accepting relations” [Bogdan & Taylor - 1987]. The critical variable in such relationships is that typical people have the opportunity to meet and get to know atypical people.

In regard to *clustering* and *density*, research found that those people who were involved with multisegmented networks of normal size tended to work through the grief of trauma more quickly and that they ran less risk of developing depression than those who were involved with dense networks made up primarily of family. In Hirsch’s [1980] study, density was *negatively* related to mental health. The overwhelming empathy felt by those closely connected who are either affected by the same trauma; or are overwhelmed by the traumas affect on their loved one, leaves no distance to work out the complexities of the emotions. There is a tendency to reinforce the despondency.

The presence of multidimensional friendships are significantly related to higher self esteem and more satisfying social interaction. These results seem to indicate that broader based perspectives are helpful in providing the flexibility to frame traumatic issues in acceptable ways. [“Watzlawick and others [1975] provide a clear definition: ‘ To reframe...means to change the conceptual and/or emotional setting and viewpoint in relation to which a situation is experienced and to place it in another frame which fits the ‘facts’ of the same concrete situation equally well or even better and thereby changes its entire meaning.”] Families tend to fall into standard ways of framing events and thus have the potential to leave little opportunity for finding more positive perspectives when most needed. The presence of a peer group, which is separated from the family segment of the personal network, adds a potentially balancing perspective. Overly supportive families often leave no room for growth. On the other hand, traditional mental health

approaches proved a quite negative frame of reference and render both the person and his/her family helpless to address the issue. Helpers must also be concerned with *negative networks* that place “a set of expectations or beliefs that it is inadvisable, impossible, useless, or potentially dangerous to draw on...” whether they be families, peer groups or other network segments.

In summary, the research shows that people with serious and persistent problems in living tend to live in smaller personal networks, to have a greater proportion of their energies involved in kin relations, to have fewer clusters and higher density in their networks, and to have few long-term relationships except with kin. Further there is very little dimension and reciprocity to their relationships [the disabled person tends to identify him/herself as not doing much for other people]. [Cutler & Tatum -1983]

The implications of these findings are not clear since they give no clear guidelines as to whether these experiences are outcome or cause. They suggest, however, that an expansion of a child's personal support network beyond the family, continued maintenance of peer relations, identification of support from other natural relations in the community [teachers, shopkeepers, etc.] can go a long way towards ameliorating the difficulties experienced by children with problems in living. It seems that interrelatedness needs breadth as much as, if not more than depth. Within this breadth develops a commonality or likeness of people to each other. The regenerative qualities of community as describe by McKnight [1987] underline the potential of such breadth.

Intuitively, men of spirituality have grasped at a sense of *oneness*. Only now is science beginning to confirm its reality. Wegner and Erber [1993] in discussing *mental control* or the ability to suppress a thought, concentrate on a sensation, inhibit an emotion, maintain a mood, stir up a desire, squelch a craving, or otherwise exert influence on one's own mental states, suggest that all mental control is **an internalized form of social control**. “...even when thought regulation persists in private...it should be traceable to prior or anticipated social pressures. Thus, the individual develops a process of thinking through others and then attempts to impose that process on others. The broader the set of relationships, the more it is likely that divergent thought will create a *flexibility* of thinking and acting. Thought and behavior is shaped in a socializing process by others which is driven by a need to belong.

Belonging has a requisite responsibility to conform. Thus, belonging becomes a socialization process. The child is first socialized by adult family members and then begins to “test out” the socialization constructs with others. For the child, the peer group supplies both pressure to conform and skill training. While peer pressure is often evoked in the negative, it is actually a potentially positive force most appropriately developed in *play*. “In play, the child copies, imitates and finally identifies with those adults in the environment that are of crucial importance to him” [Lovinger - 1979]. But while the child tests out adult roles, s/he also is being *socialized* in appropriate behaviors through interaction with peers. Each child attempts to play the role as defined by the significant adults in his/her life and is met with other examples through other children's' experiences. The group behavior helps to seek out useful common ground, which is

flexible enough to deal with a broad range of societal perspectives. “The group reinforces appropriate behavior, and helps children conform to rules and regulations” [Ibid].

Play

Belonging is an important human instinct for which the individual is willing to give up personal desires for the good of and acceptance of the group. Through belonging, children learn the routines of behavior; antecedents and consequences. These routines become scripts which give indication of how the interpersonal process will play out. During the early years of life, much of the script knowledge is manifest in the kinds of symbolic or “pretend” or “pretense play” sequences in which children engage. Scripts reveal the child’s determination of important familiar sequences of events in the environment. A description of recurrent events, scripts serve as an entry point to storytelling and story understanding. As a generic set of sequences of events against which newly encountered events are judged, they are extremely powerful cognitive screens. They are a convenient aid to memory, but can often cause an individual to misperceive events or to misremember them later. At least part of wisdom may involve a rich stock of scripts that the individual is able to invoke and deploy appropriately, just as entrenched scripts may prevent people from making fresh and uncontaminated judgements about individuals and events they encounter. [Gardner - 1991]³⁸

When a child engages in pretense, s/he becomes involved in a kind of mental activity different from straight “first-order” representation. Treating one object as if it were another is a cardinal form of “metarepresentation”. One can treat nothing as if it were something. One can treat something as if it were nothing. Operating in each of these cases of metarepresentation is a recognition that what is apparently the state of affairs can be intentionally bracketed, so as to bring about another state of affairs that the player wants to evoke. Even as the child must be aware that s/he is doing this [one cannot pretend unless one is aware of this pretense], s/he must also acquire the awareness that others can pretend [otherwise s/he would be constantly fooled] and that pretense can be appreciated by others as well as by oneself [or the behavior of the pretender would strike an audience member as bizarre]. [Gardner - 1991]

Childhood play is important in developing scripts, roles, functions, skills and social relations to others. It is a place to test one’s self and one’s skills with others without the consequences of “real” situations. One can play at being a thief without the severity of consequences most cultures place on such roles. But not only has our society failed to keep childhood play alive, turning instead to the use of noninteractive activities in a technical world such as television³⁹, walkman and computers, children who are started upon a road of “troublesomeness” are, as a point of preference, *removed* from normal peer groups and peer situations. Little wonder that the proposition that you’re bad, stupid,

³⁸ Part of the Zen training is to maintain a “beginner’s” mind. “The mind of a beginner is empty, free of the habits of the expert, ready to accept, to doubt, and open to all the possibilities.” [Suzuki - 1970/90] This is one of the many paradoxical events of the mind.

³⁹ George Batsche makes an interesting observation that on television, heroes are the ones who have weapons and use violence to achieve their goals; quite the opposite to what we would hope most children would script.

lazy, etc. takes solid hold. The environment has *confirmed* the belief system⁴⁰ often to the point of using the labeling process to exonerate the child from appropriate behaviors, which is by definition beyond his/her ability. [If the child is actually not in control of her own behavior because of attention deficit hyperactive disorder or some other similar label, it is unlikely that s/he can change her behavior when asked.]

Lovinger suggests that the whole process of thinking is reliant upon appropriate and sufficient peer play. She supports Howard Gardner's suggestion that play requires and develops perceptual skills. Perception, she defines as a process a process of organizing and interpreting sensations that arise in the body and that come through the various sense organs. Perception is the beginning of thinking and the raw material of thinking and perceptions are sensations [or awareness of some stimuli without interpretation]. The peer group engaged in traditional games provides opportunity for stimulation of all of the senses, the development of thought, ideas and beliefs about those stimuli which are propositions which build internal belief states upon which the child will behave. This social environment additionally provides the opportunity for the child to observe and try out new behavioral skills which other children have found effective in interpersonal relations. In short, we could probably improve present strategies for dealing with atypical children by placing them into play groups and teaching them old fashioned traditional games. Along with providing stimulating socialization and skill building opportunities, we would be sending a you're OK message.

This suggests that traditional play should be an important part of any attempt to help children with emotional and behavioral problems learn to control these difficulties. While it is probably difficult at the point that these children have already displayed maladaptive performances to simply allow peer groups to play alone, adults can certainly provide support at least in the beginning of re-play efforts without overwhelming the experience.

This does not negate *directive communication* technologies. Children often need to be told what to do. Such directives do not need to be pejorative, personalizing or moralizing; they need to be informative. The directive communication must specify what the adult expects and how the behavior is to be performed. The message must clearly indicate the acceptance of the child, but not of inappropriate behavior. In order to implement such communication, the adult will need to be very specific about their own belief systems, since if they really do not believe that the child can perform; s/he will not.

Words have the effect of *force* because all propositions are beliefs until analytic work reveals them to be incoherent. De-energized systems fail to do the work. Self instruction and other well formulated tactics, de-energizes the system thus allowing the child to believe the propositions being stated. If a belief is gratifying as well as true, its acceptance is enhanced. Since the child is predisposed to act upon his or her beliefs, the more self-affirmative the belief system is, the more prosocial the behaviors can be expected to be, and the more reinforcing [confirming] the response from the human environment.

⁴⁰ The process of confirmation is incorporated in the contingent reward aspects of behavior management and as such, can play a powerful supportive role in the cognitive, skill training effort.

But along with the self affirmative image and socially accepted beliefs, the child may also need to learn the specific behavioral skills necessary to gain the positive social reinforcement. As an extension of the educational process, a cognitive behavior skill training set of interventions holds significant promise for the school. Unlike traditional methods, the development or replacement of skills goes beyond simple reduction of unwanted symptoms [asocial behavior] and provides alternative ways of functioning [thinking and behaving]. Further, these interventions have proven useful when applied at the school, class and individual level. Since the basis of these interventions is the learning of both cognitive and behavioral skills, the methodology fits well within the formal mission of the school.

Discussion

Douglas Hofstadter [1995], in his book *Fluid Concepts & Creative Analogies* has a great deal to say about the cognitive process. Hofstadter, who works in the arena of artificial intelligence, has explored cognition in some depth in hopes of recreating such processes in computer programs. While much of the following is developed by him in regard to a program dealing in word development and recognition and using mathematical knowledge domains, it seems likely that it is applicable or at least analogous to the cognitive processes that the individual goes through in exploring intrapsychic and interpersonal domains which include attributions, concepts and other mental representations regarding self, others and prospects. I therefore have interposed the cognitive/behavioral constructs into the overall analysis of Hofstadter's model of how people think. Errors in application or understanding, of course, are mine.

Hofstadter strongly supports the notion that the ability to develop patterns is the keystone of human intelligence. He suggests that pattern perception, extrapolation, and generalization are the true crux of creativity, and that one can come to an understanding of these fundamental cognitive processes *only* by modeling them in the most carefully designed and restricted microdomains. This concentration on basics building blocks instead of higher order generalizations, seems to be analogous to Vallacher's [1985] position regarding the need to re-explore the molecular aspects of mental experiences in order to re-evaluate and effect change in larger generalizations. Both seem to suggest that we should address issues at the lowest order and to use these low order building blocks to build or rebuild our generalizations or ideologies.

Hofstadter gives us some criteria for what he calls *pattern sensitivity*:

- *noticing sameness* [e.g., group events and experiences by the likeness (people, places, processes, etc.)in them];
- *noticing simple relationships* [e.g., even for very different events or experiences, we may identify people and propositions which have connection];
- *noticing analogies* [e.g., identify a pattern-fragment(s) which look like or is comparable to others - or which have correspondences, similarity or ratios or properties which can be inferred];

- *imposing consistency* [e.g., alter parts of the event or experience so it looks more like another one for purposes of comparison];
- *building abstractions* [e.g., this shared pattern-fragment of a series of events or experiences can be summarized in a template which might be applicable to all or many such events or experiences];
- *sighting boundaries* [e.g., this might better be grouped with this rather than that]; and
- *driving towards beauty* [e.g., alter this pattern-fragment because it would be more balanced (usable, effective) this way].

These and other mental constructs are combined with some level of knowledge of the domain [e.g., for interpersonal skills this might include manners, *display rules* or other norms regarding behaviors] to develop into a global or world view regarding the individual's relations to the world. The activity of building up a coherent stream of packets from an unpunctuated, structured sequence of events and experiences and comparing in order to understand their interrelations, is thus a nontrivial task. It is a matter of some creativity and the more able individual is flexible in the interpretations until an effective one is developed.

The process involves *segmentation* - that is, *figuring out where the boundaries of packets ought to lie*. and, *unification* - that is, *figuring out how the packets are related to one another*. The individual may need to put several mental constructs together and pull them apart again, until one that is both satisfying and gratifying is found. This requires a drive toward an *internal logic*, a *coherence* of mental representations with both internal and external experiences.

What one wants is to find types of structures that are echoed throughout the experience, and hopefully at regular intervals. Thus it makes more sense to let different types of mental representations "bubble up" independently here and there in the experience, and then see if there are correlations. The stronger the correlations, the more one will feel on the right track. Thus, for the sake of efficient picking-up of ideas, one wants to encourage diversity in the types of experiences being built up, rather than uniformity. On the other hand, too much diversity will simply turn the experience into a jumble of random, uncorrelated events of order, thus completely blocking the discovery of patterns, which, after all involve uniformity, by definition. So there has to be a balance between the overly chaotic strategy of encouraging different kinds of experiences to bubble up completely randomly and the overly rigid strategy of always trying one type first throughout, then another type, and so on.

This kind of subtle balance can be struck by employing *parallel processing with probabilistic bias*. The way this works is to let perceptual glue of various sorts bubble up in parallel in different regions of the experience, with a *tendency* but not a rule for sameness glue to emerge the fastest. By "sameness glue", we would mean that if two events happened to a person which displayed a lot of similarities, there is an *attractiveness* to combining these events to begin to establish a pattern. Each dab of glue then acts as a small local pressure towards building a particular type of island of order in

a particular location. This way, natural perceptual biases can be respected but not slavishly so, and diverse ideas - “hunches” - can arise independently and be explored simultaneously in different regions of the experience.

A subtle point must be made here. Glue alone does not make a mental representation come into existence; it merely serves as a hint or suggestion to build a representation of a certain sort in a certain region. Mental representations, being of a higher order ⁴¹and therefore, larger and more global, are the next stage of perception beyond dabs of glue, and any actually-built representation depicts much more commitment to a particularly theory of what is going on. However, even a fully-built mental representation can be sacrificed, under pressure, for the greater good - destroyed, that is, releasing its constituents so that they can be perceptually reinterpreted and incorporated into different attributions that hopeful will fit more coherently into the emerging global order. This requires, however, that the person be re-opened to evaluating the building blocks.

There is a problem here in that there is an attractiveness for people to seek the first generalization that seems to work and *satisfices* [a business word which indicates that while not quite satisfying, it will suffice] them. After six or seven year of age, children tend to harden their mental constructs [generalizations] into ideologies [schema] or meaning [belief] systems and resist change. The helper, therefore, will often need to *dispute* attributions [valuation] of particle events and experiences in order to keep the individual's options open. This is not unlike psychodynamic therapy except that the psychodynamic therapist tends to help the individual review and re-codify full representations of events and experiences of the past, while the cognitive trainer is interested in exploring events and experiences as they happen, when the emotional valuation is at it highest peak which allows for the exploration of new options making them subject to the stress of coping utility. If the old belief is effective, change is not warranted, but if it is not, change may be welcomed.

A *second tier* of exploratory process can be going on as well - namely, perception of regularities among the representations themselves, leading to multi-level packets and ultimately to templates, generalizations [higher order representations] and mental schema. However, this level of perception is considerably trickier because a representation of a higher order is a more complex entity than a mere attribution.

A higher order representation is a structure that can be characterized by a *name* and one or more *parameters*, with the parameters themselves having different degrees of interest to people and therefore different probabilities of being perceived. The interest can be based upon cognitive, affective or behavioral attractions which draw the person's attention. Thus, experiences which are connected to a significant person are likely to have much more intense emotional valuation and therefore lead to more permanent and personal beliefs.

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It is difficult to develop a discrete ordering of perceptions/cognitions since they are quite slippery. However, one could propose that the lowest levels of perception are syntactic sensations, leading to intuitions, to comprehensions, to attributional valuations, to partial, then full mental representations, to generalizations, to the highest order ideologies or theories.

Searching on the second tier of abstraction therefore involves two intertwined activities; perceiving each attribution on its own, and perceiving relationships between different attributions. Each activity necessitates the other. It is very important to understand that these two intertwined activities on the second tier of abstraction are also intertwined with the perceptual activities on the first tier of abstraction [the search for glue and attributions] - the two tiers of perception are not serially separated. Many things are going on at once and affecting each other.

The act of connecting up two different attributions in one's mind is a very simple instance of analogy-making.. Analogies vary not only in their degree of salience [i.e., obviousness] but also their degree of strength. What would it mean for some perception to exert influence on the perceptual process? The only reasonable idea would be for it to enhance the likelihood of similar perceptions to be made, and simultaneously to weaken the commitment to dissimilar perceptual structures.. This means that the probabilistic biases guiding the search for regularities should be altered on the basis of discoveries already made. More simplistically, if I already believe that "I am X", I am more likely to perceive propositions which support "X", than I am to be attracted to those which dispute this experience. More importantly, perhaps, if I find supportive evidence, I will stop looking, whereas if I find disconfirming evidence, I will continue to look for supportive evidence.

What we are describing, then, is a perceptual process that begins in a pure bottom-up manner but that is gradually invaded by increasing amounts of top-down influence. "Bottom-up" here describes perceptual acts that are made very locally and without any context-dependent expectations; "top-down" pertains to perceptual acts that attempt to bring in concepts, and to extend patterns, that have been noticed in the experience [and are ipso facto presumed to be relevant to its underlying rule]. Another term for "bottom-up" is thus "data-driven"; "top-down" corresponds to "theory-driven". It is the requirement of the helper when a person is having problems in living to 'return to the fundamentals' and place emphasis upon the "data-driven" or "bottom-up" approach and tend to dispute or minimize the "theory-driven" aspects of the experience. The hope being that through such reexamination of the data, the theory can be modified. The helper may, in fact, even be required to offer alternative theories for consideration.

Progress comes from repeated acts of generalization. The art of choosing the most elegant⁴² generalization for some abstract pattern. Inventing, creating, discovering new concepts by discovering patterns in known concepts. There has to be a tacitly shared sense of worthwhile pathways to follow in the development [via generalization] of a concept; otherwise there would be no coherence. These generalizations can be described as mental schema. Bartlett (1932, 1958) is credited with first proposing the concept of

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The term elegant is related to the term quality and one might pursue the book *Zen and the Art of Motorcycle Maintenance* to understand the concept. The main thrust of this Chautauqua is Quality. In the book, Phaedrus asks students in a college class to read each other's papers and then to rank them for quality. As might be expected, the rankings are very similar not only among students, but to Phaedrus's rankings as well. The idea was to demonstrate that we all know what quality is and do not need to learn it.

schema (plural: schemata). He arrived at the concept from studies of memory he conducted in which subjects recalled details of stories that were not actually there. He suggested that memory takes the form of 'chunking' information in a manner which covers a set of information - a schema which provide a mental framework for understanding and remembering information. In this manner, we are able to make statements such as ' I was angry when the waiter sneered at my tip', and expect that the auditor is able to determine a) we were in a restaurant, b) that the waiter was someone who took the order and served the food, and c) that I left an amount of money as gratuity which the waiter considered to be too little for the services rendered, and probably much more that was never said. Without such structures, we would never be able to communicate.

Along with this 'chunking' of knowledge is the idea of underlying hierarchal network and cognitive consistency - that we all actively strive to be consistent in our attitudes, beliefs and behaviors. Any inconsistency acts as a stimulus to change them so as to bring them back into a coherent whole. It seems likely that peoples' attitudes all cohere, in other words they all fit together without contradicting one another. They do not contradict one another, because they derive from some underlying core system of values [emotionally charged beliefs].

But the idea that we can 'shorthand' our communication and that the auditor can understand what we are talking about suggest that not only must the individual find coherence within his/her own psyche, s/he must also find it among others of his/her sociocultural set. This is why a negative cognitive triad [beliefs about the self, others and future] is so problematic. While it may show internal coherence, the emotions and resultant behaviors from such a triad invariably violate the cohesive nature of interpersonal relationships.

Metaphorically speaking, the ever-growing family of concepts centered on some primary concept [mental schema] is an expanding sphere in a conceptual space shared by many individuals. This kind of communal expanding sphere is an incredibly central aspect of everyday thought, and constitutes the essence of common sense.

In addition to slowly building up richly layered spheres around *concepts* [a process that stretches out over years], we also quickly build spheres [or scenarios] around *events* or *situations* that we experience or hear about [this can happen in a second or two, even a fraction of a second]. A *Commonsense halo* or an *implicit counterfactual sphere*, so called by Hofstadter because it consists of many related, usually counterfactual, variants of the event, develop the *reality* of the group. Failure to share in the development of a coherent *commonsense* is the equivalent of having problems in living. Fortunately, such generalization outward from a conceptual center is an automatic, unconscious process that pervades thought - indeed, it *defines* thought. But our experience shows us that not everyone thinks alike or as effectively as everyone else.

Hofstadter helps us formalize this expectation by developing parameters for generalization involving the ability to internally reconfigure an idea, by:

- moving internal boundaries back and forth;
- swapping components or shifting substructures from one level to another;
- merging two substructures into one or breaking one substructure into two;
- lengthening or shortening a given component;
- adding new components or new levels of structure;
- replacing one concept by a closely related one;
- trying out the effect of reversals on various conceptual levels;
- etc.

Generalization requires the ability to perceive a theme in all sorts of novel ways by bringing in unexpected concepts and “trying them on” to see how they fit. Lastly, it requires a sense of naturalness versus forcedness, and a sense of elegance versus clunkiness. Such sense and abilities, which taken together, certainly deserve the label *intuition*, are subtle and elusive.

However, it might be worth a sidebar exploration of the creation of interpersonal sensations which seem to most of us to be ‘natural’ outcomes of individual experiences, but are really constructs of our interdependence as we noted in Lock’s explanation of Elias’s work.. The processes of social interaction have unintended consequences in that they ‘create’ ‘things’ that are only subsequently articulable (or discoverable) as ‘things’; and that the ‘things’ that result from this ‘social construction’ have an intrinsic ordering to them that constrains the order in which we come to ‘apprehend’ them.

These changes reflect a reorganization and transformation of the whole personality throughout all its zones, from the steering of the individual by himself at the more flexible level of consciousness and reflection to that at the more automatic and rigid level of drives and affects. (Elias, reported by Lock)

‘[A]s the social fabric grows more intricate, the sociogenic apparatus of individual self-control also becomes more differentiated, more all-round and more stable’ (Elias, reported by Lock).

Ellis offers the following explanation as to why there is this relationship:

From the earliest period of the history ... to the present, social functions have become more and more differentiated under the pressure of competition. The more differentiated they become, the larger grows the number of functions and thus of people on whom the individual constantly depends in all his actions, from the simplest and most commonplace to the more complex and uncommon. As more and more people must attune their conduct to that of others, the web of actions must be organized more and more strictly and accurately, if each individual action is to fulfill its social function. The individual is compelled to regulate his conduct in an increasingly differentiated, more even and more stable manner. (Elias, reported by Lock)

The advent of political correctness is a case in point. While the nature of the American society has been to ‘speak one’s mind’ or ‘tell it like it is’; that position is no longer acceptable and people who ignore the political correctness direction are likely to find themselves ostracized and often without means of employment.

Returning to the issue in question, Hofstadter points out some of the important themes that crop up over and over again in the development of cognitive and communal beliefs are the following:

- 1) the *inseparability of perception and high-level cognition*, leading to the idea of a perceptual architecture being at the heart of cognition;
- 2) the fruits of high-level perceptions being *easily reconfigurable multi-level cognitive representations* held loosely together by bonds of different types and different strengths;
- 3) the idea of *subcognitive pressures* - namely, that the more “important” a concept or a representation is, the greater an influence it should be allowed to exert, in a probabilistic sense, on the direction of the processing;
- 4) the *commingling of many pressures*, both context-dependent and context-independent, leading to a nondeterministic parallel architecture in which bottom-up and top-down processing co-exists gracefully;
- 5) the *simultaneous feeling-out of many potential pathways* at differential rates governed by quickly-made estimates of degree of promise;
- 6) *the centrality of the making of analogies and variations on a theme* in high-level cognition;
- 7) the possession, by cognitive representation, of *deeper and shallower aspects*, with the former remaining relatively immune to contextual pressures; and the later being more likely to yield under pressure [to “slip”];
- 8) the crucial role played by the *inner structure of concepts and conceptual neighborhoods* in all these goals, particularly context-dependent conceptual overlap and proximity, and context-independent conceptual depth.

These themes are the tools of the helper and his/her bane. At worst, in the information age, ‘political correctness’ contrasts with total disruption of emotional contexts such as ‘embarrassment’ and the individual personality is able to select from a variety of analogies which would have been considered in the recent past as unthinkable. Consider for example, the defense of an action being based upon the ‘meaning’ of the word ‘is’. In the best of circumstances, these themes represent the creative thinking pathways for reconsideration of even strongly held ideologies, at least if they are examined in the most basic levels. Our valuation of the building blocks [thought, emotion, schema, etc.] in regard to the building of personalities is somewhat different than that of the system being constructed by Hofstadter. In that arena such patterns as counting connections make attractions. The sequence 1,2,3 would naturally tend to make 4 an attractive expectation. While such objective valuations are also available in the intra-interpersonal world of personality development, there is another much more potent method of valuation, and this is emotion, which uses the ‘cutting edge’ of utility [pleasure/pain] as its key determinant.

“Lacking emotional weight, encounters lose their hold” [Goleman - 1995]. However, it is sometimes hard to view this apparently hedonistic valuation as helpful in supporting a movement toward coherence as the more objective ones used by Hofstadter. Emotion, it seems, often blinds us to analogies or options which might make more useful schema. Nonetheless, the power of emotion is something with which the helper must work, and s/he must keep in mind that thought mediates emotion. Events and experiences with high emotional content are highly contagious to the process of generalization. Part of the process, therefore will require that the helper contribute to the individual’s ability to contain emotion through cognition.

“Concepts without percepts are empty; percepts without concepts are blind.” Kant

While Hofstadter and his group are concerned with the development of computer models within microdomains of what has traditionally been called “intelligence”; that is, language and logical/mathematical domains, we are concerned with the broader spectrum of intelligences as defined by Howard Gardner, focusing on those which are “emotionally laden” such as self conceptualization and understanding of others. Nonetheless, much of the theoretical framework developed by Hofstadter and his group is relevant to the design of human service technologies.

Even if the borderline between perception [i.e., the activation of appropriate semantic categories by syntactic sensations] and cognition [e.g., reasoning, problem-solving, and generalization] is far from well-defined, the two processes are worth comparing. Perception is generally considered to be parallel, unconscious, and goal-independent. Reasoning, on the other hand, is usually conceived of as serial, conscious, and goal driven.
Daniel Defays

*One of the deepest problems in cognitive science is that of understanding how people make sense of the vast amount of raw data constantly bombarding them from their environment. The study of highest-level perception leads us directly to the problem of representation. In order for raw data to be shaped into a coherent whole, they must go through a process of filtering and organization, yielding a structured representation that can be used by the mind for any number of purposes. The lowest level of perception occurs with the reception of raw sensor information by the various sense organs. The gap between the lowest level of perception [cells on the retina, pixels on the screen, waveforms of sound] and the highest level [conceptual processes operation on complex structured representations] is a gap, which the individual person must bridge. The difficulty, as we shall see, is not that these processes are not normal and go on without necessary conscious awareness on the part of the individual, but rather, that this lack of awareness can potentially interfere with the way the individual **creates** a reality for themselves.*

High-level perception begins at that level of processing where concepts begin to play an important role. Processes of high-level perception may be subdivided into a spectrum from the concrete to the abstract. At the most concrete end of the spectrum, we have

object recognition. Then there is the ability to grasp relations. The most abstract kind of perception is the processing of entire complex situations. One of the most important properties of high-level perception is that it is extremely flexible - depending on context and the state of the perceiver. As we have noted, the condition of the people with problems in living is often one of rigidity rather than flexibility due to the development of powerful automatic thoughts. Part of the helping process, therefore, is to help the individual reestablish this flexibility. It is a mistake to regard perception as a process that associates a fixed representation with a particular situation. Perceptions may be influenced by belief, goals, external context and can be radically reshaped where necessary.

*The distinguishing mark of a high-level perception is that it is semantic: it involves drawing meaning out of situations. The more semantic the processing involved, the greater the role played by concepts in this processing, and thus the greater the scope for top-down influence. The most abstract of all types of perception, the understanding of complete situations, should also be the most flexible. We have noted the lack of flexibility for people, but there is another problem which deserves our attention, and that is the role of the individual **providing** meaning to situations rather than just finding meaning. As Frankl has indicated, the development of meaning is/**or at least can be**, a decision process. Hofstadter indicates the “muddling” of these perceptual/conceptual processes and such understanding is very helpful, but, we would posit, is not sufficient from the service delivery aspect. The helper must focus the individual on this “decision” aspect as an **empowering** process; the purposeful creation of one’s own reality. Thus, the **goal** set by the individual becomes a major influence upon how that individual will develop an emerging **generalization** of the world and their role in it.*

*The end product of the process of perception, when a set of raw data has been organized into a coherent and structured whole, is a representation. Long term knowledge representations [We conceive these as generalizations - higher order- representations. This is a matter of semantically segregating orders of conceptualization.] that are stored passively somewhere in the system, and short-term representations that are active at a given moment in a particular mental or computational process. [We tend to refer to these as **attributions** - or lower order representations of individual objects, events or experiences.] This corresponds to the distinction between long-term memory and working memory.*

Another analogy that may be useful is the difference between thought and thinking. Thought is something we have; thinking is something we do. Obviously, out thinking is closely related to our thought, but is not thought itself. However, if out thought is that **A** is awesome, we are likely to think highly of **A** when it is encountered.

The formation of appropriate representation lies at the heart of human high-level cognitive abilities. Each person faces the task of understanding how to draw meaning out of the world. On the other hand, there is the Frankl perspective that each person must determine how to give meaning to the world.

It is important that we recognize that *we have different representations of an object or situation at different times. Each representation is a vector in a multidimensional space, whose position is not anchored but can adjust flexibly to changes in environmental stimuli.* This can be demonstrated by the complex equivalent, ‘love’. We do not tend to mean the same thing by ‘love’ at eight, sixteen, twenty-eight and sixty. Out construct ‘love’ takes on different representations from different age and experience perspectives, although the vector remains. *Analogical thought is dependent on high-level perception in a very direct way. When people make analogies, they are perceiving some aspect of the structures of two situations - the essences of those situations, in some sense is identical.* The ability to become **aware** of this analogy creation and to improve the quality of such analogy making is the role of the cognitive helper. *The quality of an analogy between two situations depends almost entirely on one’s perception of the situation.* Thus, the disputing of the generalization, ideology or theory of the individual as they apply it to perceptions of themselves and others is of critical importance to opening up the person to the potential for alternative interpretations.

Analogical thought further provides one of the clearest illustrations of the flexible nature of our perceptual abilities. Making an analogy requires high-lighting various different aspects of a situation, and the aspects that are highlighted are often not the most obvious features. The perception of a situation can change radically, depending on the analogy we are making. The worker needs to high-light different aspects of the situation, provide metaphorically different potential understandings and dispute the automatic thoughts that make the person with problems in living so inflexible.

“You people just don’t understand what it is like to be blind.”

“Gee, we must be missing a lot.”

Furthermore, not only is analogy-making dependent on high-level perception, but the reverse holds true as well: perception is often dependent on analogy-making itself. As we have said elsewhere, teaching/learning is a process of building on concepts that are understood in other contexts through the use of metaphor. Analogical thought provides a powerful mechanism for the enrichment of a representation of a given situation.

The grasping of one situation in terms of another - is so common that we tend to forget that what is going on is, in fact, analogy. Analogy and perception are tightly bound together. It is useful to divide analogical thought into two basic components. First, there is the process of situation-perception, which involves taking the data involved with a given situation, and filtering and organizing them in various ways to provide an appropriate representation for a given context. This involves taking the representations of two situations and finding appropriate correspondences between components of one representation with components of the other to produce the match-up that we call an analogy. It is by no means apparent that these processes are cleanly separable; they seem to interact in a deep way. Given the fact that perception underlies analogy, one

might be tempted to divide the process of analogy-making sequentially: first situation-perception, then mapping. But we have seen that analogy also plays a large role in perception; thus mapping may be deeply involved in the situation-perception stage, and such a clean division of the processes involved could be misleading.

Both the situation-perception and mapping processes are essential to analogy-making, but of the two the former is more fundamental, for the simple reason that the mapping process requires representations to work on, and representations are the product of high-level perception. The perceptual processes that produce these representations may in turn deeply involve analogical mapping; but each mapping process requires a perceptual process to precede it, whereas it is not the case that each perceptual process necessarily depends upon mapping. Therefore the perceptual process is conceptually prior, although perception and mapping processes are often temporally interwoven.

Perception produces a particular structure for the representation of a situation, and the mapping process emphasizes certain aspects of this structure. As we shall see, it is imperative that for the sake of changing the highest order theories of the individual, the attention to the re-interpretation of the molecular process of perception is imperative. The study of which situations people view as analogous can tell us much about how people represent those situations. Thus, the helper must enable the person with problems in living to become aware of their representations, help them consider alternative structures, and help them to find ways to evaluate the effectiveness of the representation in predicting and controlling events and experiences.

People are constantly interpreting new situations in terms of old ones. Analogy-making is going on constantly in the background of the mind, helping to shape our perceptions of everyday situations. It seems psychologically implausible that when a person makes an analogy, their working memory is holding all the information from an all-encompassing representation of a situation. Instead, it seems that people hold in working memory only a certain amount of relevant information with the rest remaining latent in long-term storage. However, the process of exploring the awareness of one's own mental processes in regard to the information stored as it impacts upon perception and conceptualization, allows for people to change the generalizations upon which their whole world view is predicated. The processes of perception and mapping be interleaved at all stages. It is this factor that makes the development of mental schema complicated, but it also allows for intervention that holds potential for change. If the perception and mapping were more highly separated, one could be expected to find greater rigidity and less ability for change.

Hofstadter adds *five important problems in perception and analogy*:

- *the gradual building-up of representations;*
- *the role of top-down and contextual influences;*
- *the integration of perception and mapping;*
- *the exploration of many possible paths toward a representation;*
- *the radical restructuring of perceptions, when necessary.*

While these may be problems for the AI specialist attempting to model programs, they are actually opportunities for the worker with people with problems in living. The fourth and fifth help to lead to the capacity for change which is our goal. We are still left with *the problem of relevance - how is it decided what gets used in the representational structure?* Much of what is considered relevant is decided in the context of the highest order generalization of the individual. In regards to self/other concerns, this often leads to negative ideology about self, other and future prospects. Part of the role of the worker is to enhance the relevance of building blocks other than those most salient to the person with problems in living in order to require modification of the ideology.

There is also the problem of *organization: How will the elements be put into the correct frame-based representation?* Again, the re-evaluation of the building blocks is expected to provide for the reconstruction of the representation [and ultimately modification of the ideology]. It is required of the worker, that the individual be helped to “keep their options open” in regard to the **framing** of the representation in order to discover one that is more elegant [effective, satisfying and gratifying].

Despite the relevance of this theoretical framework which Hofstadter has provided, the final theoretical basis for our purposes will need to go beyond this construct. For example, two traditional principles have repeatedly been identified - First, that people are motivated to seek rewarding states of affairs and to avoid those that are negatively valued. The second is that people’s thoughts direct their behavior. Both of these principles it seems are open to some modification. While it is true that people are goal seeking entities and that their objectives tend to be oriented towards self satisfying outcomes, this is not always true, at least not in the commonly held fashion. In addition, there is considerable debate about whether thoughts have precedence over behavior.

In regard to these issues, Vallacher [1993], puts forth the argument that thoughts [mental representations] develop as a means of coordinating the conduct of time-consuming behavioral actions. Since human beings are capable of complex activities which are required to take place over time, the attainment of effective coordination - the *calibration of mind and action* - are required to complement and sometimes to supplant simple hedonism as the driving force in thought and behavior. Consciousness, it would seem, serves merely to permit [or prevent] the motoric implementation of an intent to act; but that intent arises unconsciously.

At present, there seems to be no clear victor in the debate regarding whether action causes cognition or vice versus. Vallacher’s position, however, posits that mental control develops because a person can’t do everything at once. This means that for complex, time consuming behaviors there must be some mechanism for holding the yet-to-be discharged action components in queue, inhibiting their enactment until the appropriate time. The backlog of undischarged action components- the action queue - sets the stage for mental control by creating a need for representation in the mental system. The ability to delay action through these queued representations opens the mind to the ability to control the delayed implementation of behavior.

Because the elements making up a complex action queue must become coordinated to ensure that they are executed in the appropriate combination and in the right temporal order, the resultant mental representation must function as more than a simple holding tank. Complex behaviors require that these mental representations contain more information than a simple visual “picture”, and such complexity give clear advantage to meaning based verbal representations which can represent the essence of virtually any action, no matter how complex or lengthy. The attempt to achieve salient rewards and/or avoid punishment does not necessarily work at cross purposes with mental control or a sense of volition. It is only when hedonic inducements to action operate independent of queued representations of the action that they seem to command our sense of volition and self-determination. That is, when rewards occur regardless of the congruity between mind and action, leaving the individual in a state of self-consciousness.

In response to observations that a reinforcer cannot be *a priori* determined, a number of theorists have advanced conceptions of reinforcement that are not linked to the hedonic value of a specific goal representation, but rather pertain to the functioning of the action system as a whole, centering on the issue of *effectiveness*, or competence. Vallacher reports that in an early statement of this idea, White [1959] summarized a number of puzzling findings concerning behavior in the absence of obvious rewards by concluding that organisms are motivated to achieve *competence* in their behavior.

It is this demand for competence or efficacy of behavior which provides human beings with their developmental propensity. As an activity becomes mastered and competence achieved, people adjust their aspirations upward so as to maintain an optimal level of difficulty in what they do, evidencing an on-going growth and development teleology. This line of research shows that forging a reliable contingency between one’s actions and outcomes is more important to one’s motivation and mood state than is the nature of the outcome per se. That is, the mental representation of a behavior is congruent with the actual performance of that behavior and that the person’s mental state is coherent with their behavioral endeavors.

Trope [1986], has suggested that people seek out information about themselves that is maximally diagnostic, or self-assessing, rather than accept complementary information which is without self reflective aspects. This pressure for assessment between internal and external provides the basis upon which the desire for growth and development exists; the need for competence is played out through increased learning. Swann [1990], meanwhile, has shown that once people develop a stable image of themselves, they attempt to maintain that image, even if it is decidedly uncomplimentary. Presumably, the overall track record of one’s self-system in anticipating and preparing for everyday events is a more important concern than the outcomes experienced in any one event. Thus, the initial self-representation of the child is enormously important to shaping the competence [and perhaps, the learning readiness] of the adult.

While on the one hand, there is a need for self-assessment in regard to performance; such performance when assessed over time becomes persistent. As a result, habits can go

unchecked for years even if they are clearly undesirable. When the child forms a naive, but workable understanding of the world and his/her place in it, and that status is negatively valued, there is a tendency for this image to be maintained despite the unflattering self-appraisal and the behavioral performance that goes with it.

If we are to help people change, then the helping process must entail some form of change in personal mental representation and/or an enhancement of the competence in behaviors. In consideration of this helping process expectation, it is important to note that while people move toward progressively higher levels of action representation with increments in experience and mastery, this movement does not erase the past level of representation. The implications of this are that an individual may have a higher [more generalized] representation such as “I’m bad”, but that the lower [more molecular] mental representations are available for analysis.

At any point in time the person’s conscious representation for action reflects the dynamic interplay of two potentially conflicting goals: 1) a desire for comprehensive understanding and 2) a concern with acting effectively. People will adopt more molecular [or lower level] representations when a behavior is new or particularly difficult, but then create higher representations as they master such behaviors. Like the concept of the forest and the trees, the forest would represent a higher representation, but the trees do not disappear; they are simply not the level of focus. At any given time, the individual can refocus on the trees and this process is able to help reconsider the construct of “forest”. As in many things in life, we find it necessary to go back to the basics in order to improve our functioning. For cognitive events, this often means going all the way back to the submodalities [qualities of the senses] as the Neurolinguistic Programming practitioners have demonstrated.

It is suggested that people adopt lower-level identities primarily out of necessity, preferring instead to think about the larger meanings of what they are doing. What is being referenced are levels of abstraction. At the lowest level of abstraction, one would represent the experience in sensory terms - I see, hear, feel, taste or smell. As we generalize we move to a higher abstraction. That smells like [analogy] a lemon. Or we could generalize the generalization - all lemon smells make me sick. Each level of abstraction takes the person further and further away from the molecular sensory base of the perception. The implication being made here is that the low-level, or molecular state is inherently unstable and therefore, opens to new higher-level configurations. This means that whenever people are induced to think about their actions in low-level terms, they become especially sensitive to and likely to embrace any higher-level identity that is made available to them, even if the identity provides a new direction for behavior. It is this tendency to embrace new high-level identities when one is in a low-level state that defines what Vallacher calls the *emergence* process.

Because there appears to be a high tendency for this emergence process that is not tied to any particular domain of behavior, it seems to provide an optimistic opportunity for behavior change. To overcome the inertia associated with an existing course of action and/or the resistance associated with a new course of action, it may be necessary first to

induce a relatively low-level understanding of the action on the person's part. Thus, the automatic or reflexive determination of thought must be made concrete. The person must begin to identify with the specific steps of perception, codification, behavior choice and performance outcome. Successful change necessitates the temporary avoidance of high-level or generalized meaning, which is taken for granted and operated on reflectively, and focus on an *awareness* of the molecules of action through a process Derrida [1976] described as "deconstruction" of the action. From a deconstructed vantage point, the person might be inclined to embrace new and more functional ways of thinking about the implications of his or her behavior [Wegner, Vallacher, & Disadji, 1989].

People, as we have indicated, are goal seeking entities, and it seems that they will embrace new goals when their old goals are put on hold in favor of monitoring the more molecular features of an action queue. Such monitoring [awareness] of the molecular steps offers the opportunity to examine and take corrective action on routinely unnecessary errors that apparently take place in both exotic and mundane realms of behavior. To a certain extent, of course, ineffective action might be traced to the performer's lack of a skill or experience with respect to the action in question. If such lack of competence is identified in the process of such monitoring, then the helper can participate in teaching needed skills. It should be clear though, that conscious representations are not always in perfect resonance with what one is doing. Partially, this may also be because the appropriateness of an act are somewhat constrained by the context in which they occur. The ability to rigorously analyze these discrepancies at the molecular seems to offer opportunity for change.

The more overlearned the action is, the greater the performance impairment generated by a conscious concern with molecular awareness of how to perform the act [Kimble & Perlmuter - 1970]. Thus, when an experienced driver is asked to think about molecular actions such as a) push in the clutch, b) shift the gears, and c) press on the gas - these steps can become cumbersome and uncoordinated. In effect Vallacher tells us, "consciousness is trying to micro-manage a problem that is best left to lower-level [nonconscious] echelons to work out among themselves". On the other hand, such micro-management is necessary in *learning* a new behavior. It is this learning requirement which the new cognitive learning technologies reflect.

But helpers need to be concerned also with the person's emotion, and emotion also may play a very prominent and unique role in calibrating the action queuing system. Emotion, it seems, serves this function by signaling when mind and action are not well balanced, suggesting that negative emotion commonly results from the interruption of goal-directed action [cf. Berkowitz, 1988; Carver & Scheier, 1990; Mandler, 1975]. From the perspective of mental calibration, attempting to control one's action at either too low or too high a level can also be looked upon as a source of interruption, in that it disrupts the successful implementation [discharge] of elements in an action queue. The flow of coordination is lost.

The emotional arousal associated with poorly calibrated action can be said to alert one to the possible reasons for one's ineffective action implementation. In essence, the

ineffective performer is then directed to examine his or her mental content with respect to the actions, with an eye toward finding another way to think about what one is doing. Thus, emotional response is a signal for self scrutiny of the cognitive behavioral process in the same manner that pain warns us to scrutinize the body to identify pathology. From this aspect, learned helplessness has the same deteriorating capacity as leprosy. Neither allows the person to 'feel' sufficiently to respond effectively.

Csikszentmihalyi [1978] has observed that people experiencing the "flow" - that is, a congruence between their mental representations and the capabilities and demands of the task - report a loss of self-awareness. Athletes call this being in the "zone"; a place where everything goes right. They do not need to "think" about their behavior and the behavior is carried out without flaw. Vallacher describes the experience as representing the ideal condition midway between boredom and anxiety.

Emotion is nature's way of signaling distress. When this occurs, it sets into motion self-corrective tendencies. When emotions get out of hand, it is probably indicative of difficulty in reaching a level of congruence which is acceptable. One could suggest that it is here that explanatory stories surface as *defense mechanisms* which provide some degree of protection for the self in this stress situation. Help in identifying, analyzing and comparing representations and teaching skills can effectively provide support to the corrective process.

The driving force behind behavior is not the desire to attain stimuli with *a priori* reward value, but rather the desire to achieve effective mental control of the action. To reach a level of competence in the behavior which can be represented by high level representations. A concern with achieving competence can work independently of, or even override, a concern with tangible reward. In fact, reward in some situations of incoherence, can provide additional stress.

When equilibrium between the mental representation and the action is regained, or achieved for the first time, emotion comes into the picture again, this time signaling that all is well with the coordination that has developed between mind and action. Simply put, when mind and action are working together harmoniously, a level of *serenity* is reached and it feels good. Thus, this harmony is a strong mediator [and reinforcer] of change. If, as Seligman [1993] tells us the three major criteria of abnormality are irrationality, suffering and maladaptiveness; these seem inherent in the context of mind - action incoherence.

Mental representations achieved through experience can be reversed in an instant by any number of factors that reinstate lower-level representations of the action. One of the factors can be the change in context. Behaviors that are assessed as 'competent' in one situation may not be so in another. People in the environment may begin to evaluate the competence differently and raise the image of incoherence between the person and their environmental compatriots. Such incidents cause emotional arousal and self-scrutiny. Self-consciousness arises when self-evaluation is heightened by situations involving competition, audience evaluation or other pressures to do well, and it is in this context

that reward may add to, not reduce stress. Continued inability to perform competently causes incoherence between mental representations and performance demanding continued shifts in the way the person thinks about the behavior and increasing emotional stress. Continued incoherence results in irrationality, suffering and maladaptiveness. This can be modified, of course, by a transition to mastery - which is predicated upon competition only with one's own past performance and can gain rewards, regardless of what other people are doing, by continuous improvement.

Children need to learn both cognitive skills [how to think] and behavioral skills [how to act] in order to meet social requirements in a positive proactive manner. The fact that thinking and behaving are so closely connected make the coordination of these activities important. The more the child is able to master the "mental control" necessary to achieve serenity, the greater the likelihood that s/he will need and learn the appropriate behaviors to perform adequately to society's needs.

In 1988 Bernard J. Baars published *A Cognitive Theory of Consciousness*, which provides the final piece of our theoretical puzzle. The book is concerned with conscious and nonconscious⁴³ processes. Consciousness is not something we can observe directly, other than in ourselves, and then only in retrospect. However, Baar suggests that the fact that we can predict with considerable confidence indicates that conscious experience is something knowable.

Conscious experience is hard to study because we cannot easily stand *outside* of it, to observe the effects of its presence and absence. To recognize the existence of the phenomenon of consciousness is not the same as insisting upon its basic, logical, priority. Instead of furnishing a means for the solution of problems, Hull [1937] commented that consciousness appears to be itself a problem needing solution. Baar attempts to provide this solution with a *coherent* theory of consciousness, not just with the facts of consciousness. In the process, he delineates conscious and nonconscious mental activities in a way that is conceptually very useful to complete our theoretical frame.

Conscious and unconscious events, he tells us reside in the same domain of inferred psychological events. Nonconscious processes can only be inferred, based on our own experience and on observation of others. The conscious criteria for consciousness is that one can say immediately afterwards that they were conscious [aware] of it *and* we can independently verify the accuracy of their report.

Information processing, representation, adaption, transformation, storage, retrieval, activation are necessarily conscious events. Perception is surely the most richly detailed domain of conscious experience. However, as we have already indicated, such perceptions are not necessarily *reality*. There is much evidence that people sometimes

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Baar refers to unconsciousness, Freud to subconsciousness, but I prefer nonconsciousness to describe the mental experiences of which we are not usually conscious, except as will be described. Unconscious indicates that experiences are occurring of which we cannot have knowledge - such as when one is 'knocked out'. But nonconscious cognitive processes and structures can largely be made conscious under certain circumstances. The brain is working, simply not consciously.

manufacture memories, images, perceptual experiences, and intentions that are demonstrably false. However, the fact that if someone were to claim an utterly bizarre illusory experience that was not shared by other observers, that fact would be instantly recognized gives clear evidence to suggest that the reality development process defined by Hofstadter, creates a reality not only in individual minds, but in group, sociocultural minds as well. It may be disconcerting to some to recognize that the creation of the reality of the world is based on a random process and the fluidity of theory building which is then honed by public commentary. But this appears to be the case.

One plausible meaning of “self” as the *dominant enduring context of many conscious experiences*, we may also say that conscious experience provides information to the self-as-context. Mental contexts are relatively enduring structures that are nonconscious, but can evoke and be evoked by conscious events. Conscious contents and nonconscious contents interweave to create a “stream of consciousness”. There is some evidence that perceptual events are processed for some time before they become conscious. It is thought that this allows for nonconscious input representations which filter the perception as already indicated. Then there are numerous ambiguities in perception, which might involve two ways of structuring the same stimulus. This is apparent in an optical illusion. Of these two interpretations, only one is conscious at a time, though there is evidence that the other is also represented.

Baar tells us that action seems even less conscious, reporting that observers have argued that the most obviously conscious components of action consist of feedback from actions performed, and anticipatory images of actions planned. Understand what we mean by this. When you walk across a room, most of what your body does is not conscious to you. You don’t think about taking a step, balancing yourself on one foot, etc. To do so would be cumbersome and wasteful. It has been estimated that 95% of all we do, we do nonconsciously. Once something has become habitual, it recedes from consciousness. However, such activities can be brought into consciousness either just as a suggestion and a volition; or as a ‘debugging’ process - if you trip, you immediately become conscious of the process of walking and take steps to avoid what made you trip.

The most obvious component of thinking and memory involves imagery or inner speech - when we compare input events [perception and imagery] with output [action] and mediating events [thought and memory], it is the input that seems most clearly conscious. Inner speech is one of the most important modes of experience. Most of us go around the world talking to ourselves, though we may be reluctant to do so out loud. We may be so accustomed to the inner voice that we are no longer aware of its existence’. The inner voice maintains a running commentary, making judgements about our experiences, feelings and relationships with others; it attributes cause, comments on past events and helps to make plans for the future. There is considerable speculation that inner speech becomes automatic with practice and such habituation is both a maintenance factor for distressing thoughts and maladaptive schema, and a potential for change.

Redundancy Effects show that we generally lose consciousness of repeated and predictable events. There is no question, says Baar, that the operant conditioning of

Central Nervous System activity occurs and is in fact, so ubiquitous a phenomenon that there seems to be no form of CNS activity [single-unit, evoked potential, or EEG] or part of the brain that is immune to it. We lose consciousness of the details of riding a bicycle even as we gain efficiency and availability of the skill. The more predictable, automatic, and unconscious a task becomes, the less it will degrade, and the less it will interfere with the other task as well. There are reasons to believe that conscious access to concepts becomes less conscious with practice and predictability. The idea is that at any moment much more is going on that we can know.

The remarkable accuracy of recognition memory indicates that human beings have a prodigious capacity for storing the things we experience, without effort. The fact that people become nonconscious of a repetitive or predictable stimulus does not mean that the stimulus has disappeared; it continues to be processed in the appropriate input system. One may say that the loss of consciousness of a predictable event 'is' the signal that the event has been *learned completely*.

Any highly practiced and automatic skill tends to become nonconscious, separate from other skills, and free from voluntary control. Any complex skill seems to combine many semi-autonomous specialized units. Nonconsciousness and proficiency tend to go together. Almost everything we do, we do better unconsciously than consciously. However, error detection becomes quite poor when some skill becomes automatic: the less conscious it is, the more difficult it is to monitor.

Consciousness is focused on mismatch, novelty, or 'anti-habit'. Automatized skills can become conscious again when they encounter some unpredictable obstacle. Thus release from habituation is not dependent upon the energy of the stimulus: it is dependent upon a change in 'information', not a change in 'energy' as such. Or as Gregory Bateson has defined it, information is "the difference that makes a difference" - any stimuli which arouses the consciousness to attend is informative. The existence of de-automatization is one reason to believe that consciousness may be involved in *debugging* automatic processes that run into difficulties.

We are conscious of only one 'thing' at a time and do not hold that thought very long, unless we attend to it. Attendance requires energy. Think, for example of attendance to blinking or breathing. These automatic systems soon lose their appeal to consciousness, unless we make a special effort.

Every conscious event is shaped by a number of enduring nonconscious systems which Baar calls '*contexts*' and cognitive behavior management might call *schemata*. He treats such context as a relatively enduring systems that shape conscious experience, access and control, without itself becoming conscious. Additionally, he suggests that we treat contexts as coalitions of unconscious specialized processors that are 'already committed' to a certain way of processing their information. Contexts can be thoughts of as information that the nervous system has [already] adapted to; it is the ground against which new events are defined. Consciousness always seems to favor novel and

informative messages. But recognizing novelty requires an implicit comparison to the status quo, the old knowledge that is represented contextually.

Thus, much of what happens to us is nonconscious, but influential. After we follow the process delineated by Hofstadter to develop a theory of meaning - e.g., an attitude towards the world formed into mental representations housed in memory. A 'representation' is a theoretical object that bears an abstract resemblance to something outside of itself. Thus, we create a representation [actually a multiplicity of representations that make up a hierarchy of interconnected schema] of the world, our 'reality' on data and inferences, almost all of which becomes nonconscious. The trouble with this is that such organization tends to commit us to a particular way of doing and viewing things. Organization often creates rigidity.

If we are to use this information in a proactive way to help people with problems in living learn how to think differently, we will need to find a way to bring novelty, unpredictability or "the difference that makes a difference", into the system causing it to bring nonconscious information into consciousness. We will then need to help the client to attend to this information and seek to reconstruct the mental representations in a manner that evokes action that is more coherent with life. When we interfere with an automatic skill so that it become 'de-automatized', it will be more conscious and, in the process become slower and more serial as well.

Once a task has been practiced to the point of being automatic and unconscious, a person can no longer accurately estimate the number of steps in the task. Slowing the task and making it more subject to serial orientation allows the person to examine each step directly. Since they previously performed the task nonconsciously, people are much more willing than before to accept the false inference that they have performed poorly on the task, even when they have performed quite well. Obviously automaticity has its drawbacks. However, this drawback works to the advantage of the helper, in that it strengthens the suggestion that the process should be analyzed, and perhaps, replaced. Once one has a well worked-out algorithm for solving a particular problem, even if the solution is not particularly gratifying, it tends to remain. This means that people are willing to live less than satisfactory lives without examination, simply because the process of problem solving is well known. The main drawback, however, is the loss of flexibility in dealing with new situations.

'It seems that the human mind has first to construct forms independently before we can find them in things ...knowledge cannot spring from experience alone, but only from a comparison of the inventions of the intellect with observed facts.' --Albert Einstein [1949]

Nonconscious context helps to shape the novel, conscious information. Our ability to learn any new information is critically dependent on prior, largely nonconscious knowledge, since we use knowledge to build knowledge through analogy. Since our mental representation of the world is generally nonconscious, and since we have formed mental representations, which *suffice*, but do not provide a basis upon which to

effectively live in the world, it is unlikely that we will be able to construct new forms independently. Part of the helping process will be to help the client *see* the world differently. This is similar in process to what happens with an optical illusion. Since we can only hold one conscious perspective at time, we are unable to *see* the two images in the illusion at the same time. Once we have found one, we may find it difficult to see the other, unless or until, another person provides the construct that enables us to see.

If you view the picture below, what do you see? Most readers will see a picture of a man with a beard and leaves in his hair. Very few will see the other picture. In fact, until you are given a construct to look for, most will not even be able to understand that there is another picture.



However, just telling you that there is a young man and a young woman kissing, may not even be enough. Grasping a new way of looking at the world is difficult. You may need to know that the eyes and nose are the faces, and the beard is the draping cape and dress, and that the caps are represented by the eyebrow areas.

Conscious processes have limited capacity, but nonconscious processors, taken together, have very great capacity. Conscious processes are computationally inefficient; they are relatively slow, awkward and prone to error. But they involve an unlimited range of possible contents; any two conscious contents can be related to each other; and conscious contents are also profoundly shaped by nonconscious contextual factors. Conscious experiences appear to be internally consistent; different ones appear serially; and there are rather narrow limits on our capacity to perform tasks that have conscious components.

Consciousness is reserved for just those problems that cannot be solved by any expert context processor acting alone. Once the mind has comprehended both the man with leaves in his hair and the young lovers, it is able to perceive either at will. But until the images are both nonconsciously coded, you must work consciously to find the one that is hidden. This is true of client change as well. Unless you can find a way to directly influence the nonconscious [e.g., as in crossmapping submodalities], consciousness provides a method of ‘debugging’ only by specifying the generalization - returning to the fundamental sensory experience.

There is good evidence, Baar points out, that we can gain a degree of conscious control over virtually any population of neurons, provided that we receive immediate conscious feedback from the neural activity. Conscious feedback can be used to gain a degree of voluntary control over essentially any neural event as demonstrated with biofeedback and meditation. With conscious feedback people can gain at least temporary control over an extremely wide range of physiological activities. Consciousness, according to Baar, is characterized by at least two primary properties -- conscious contents are *coherent* and *globally distributed*.

To summarize, conscious processes are computationally inefficient, but to have great range, relational capacity and context-sensitivity. Further, conscious events have apparent internal consistency, seriality and limited capacity. In contrast to all these aspects of conscious functioning, nonconscious processors are highly efficient in their specialized tasks, have relatively limited domains, are relatively isolated and autonomous, highly diverse and capable of contradicting each other; they can operate in parallel and taken together, unconscious processors have very great capacity.

There is a remarkable match between these contrasts and a system architecture used in some artificial intelligence applications, called a ‘global workspace in a distributed system of specialized processors’. This organization can be compared to a very large committee of experts, each speaking in his or her specialized jargon, who can communicate with each other through some ‘global broadcasting’ device.

In the final analysis, not only do we create reality from a random process, we rely heavily on a ‘vote’ from neurons and specialized processors to help us make decisions about how to react to that reality. Attitudes may last a lifetime, and attitudes surely must affect one’s conscious thoughts, images and feelings. Little wonder that some of us fail to find serenity in living. However, there is solace in the fact that reality is created by a ‘vote’ of all other human beings as well. If someone were to claim an utterly bizarre illusory experience that was not shared by other observers, that fact would be instantly recognized. It is the shaping of individuals through a process of socialization, which creates the reality in which we live. And the uncertainty of ambiguity is increased as the culture [local reality] breaks down.

We will explore the meaning of these theoretical principles as they apply to practice as we move forward. However, if the reader wants to explore further the theoretical

underpinnings, particularly those connecting to the biological status of cognition and learned behavior, two further works might be suggested. The first is concerned with the holographic brain and is outlined in a book by Paul Pietsch called *Shufflebrain*. The second, I found in Oliver Sacks' article "*A New Vision of the Mind*". In it he suggested that new theories arise from a crisis in scientific understanding, which virtually excludes the concepts of 'mind' and 'consciousness'. The new vision that he reports on is a theory developed by Gerald Edelman with his colleagues at the Neurosciences Institute at Rockefeller University. This biological theory of the mind, which he calls Neural Darwinism, or the Theory of Neuronal Group Selection [TNGS], serves quite well as the underpinnings for the management of cognitive behavior.

A companion article by Gerald M. Edelman and Giulio Tononi called '*Neural Darwinism; the brain as a selectional system*' is available to outline the scientific details of the theory and the biological bases of psychological phenomena, which is not necessary for the average reader. Both articles, however, can be found in NATURE'S IMAGINATION, edited by John Cornwell and published by the Oxford University Press in 1955.

CHAPTER 3 TECHNOLOGY

Shifts in Perspective

The manner in which intervention is thought to be related to intended outcomes for a particular population is considered a "theory of change".

Any approach to providing human services is required to start from a perspective of planning since intentionality of outcome is a critical part of the experience. However, planning itself must start somewhere, with some basic *fundamental assumption* regarding the intention. The fundamental assumption in human services must of necessity connect to the reason why people with severe and persistent problems in living have these difficulties while other people do not. Why does that child lie, cheat and steal; act aggressively or bizarrely? Traditional assumptions are built on the metaphor of illness. Both the biomedical and the psychodynamic approaches assume a pathology is the cause for such behavior; a gene, a disease or a chemical imbalance must be at the core of the problems. From this basic assumption they then develop a *theory of change* that suggests that a *cure* must be found. However, since a cure has not been found, the professional is required to *control* the behavior, in order to protect the person and others. The theory makes perfect sense if the fundamental assumption is correct. The problem, however, is that there has been to date, no credible evidence that such an assumption is correct. Despite this fact, the assumption and its theory of change has been extrapolated to all human services, including education. Command and control methods are the method of choice when someone acts in atypical ways.

This book challenges both the fundamental assumption and the resulting theory of change, if for no other reason, than it has failed. All records of substance indicate that the

imposition of control on children with behavior which *is* the problem continue to have the same problems despite [or because of] the input of human service. We will not reiterate them here, but will simply refer the to *All Systems Failure* which has already been discussed and is in the bibliography.

A man is literally what he thinks, his character being the complete sum of all his thoughts. James Allen [1864-1912]

The fundamental assumption we make is *‘people are the sum total of their thoughts’*. A person cannot act different than the way s/he thinks [unless, of course they are ‘acting’!] Therefore, it follows clearly that the theory of change is: *change can only occur when they think differently*. Interventions that help people think about how they think have the most impact on change.

Thoughts occur in two major frameworks. First, there is a mental construct that creates a ‘theory of meaning’ for each individual. The major mental contexts [schemata] give a meaning for self, others, future prospects, and causes of success and failure. These theories develop over long periods of time with the most naive theory construction occurring around four [to seven] years of age. Up to that point the process is bottom-up data driven: each new experience providing more information about the world. After that point, the experience becomes more top-down and theory driven. Thus new experiences get measured by a theory of meaning or a personal ‘meaning system’. The theory of meaning gets more and more entrenched over time, unless dramatic new information causes reassessment.

The other framework is the ‘leakage’ of meaning contexts that occur through internal dialogue or self talk. As we experience events we comment on them using our theory of meaning. Thus we see a couple kissing and are appalled at the behavior because kissing implies sex and sex is ‘bad’ in our meaning theory - then comment either to our self or to others is “look at that tramp”, or something similar. We may then be met by looks of incredulity by others who have a very different meaning for this event. The theory of meaning of each individual person filters the ‘reality’ of the world and how we perceive it. Therefore, if it is our perception that the world is hostile, we will act in ways that reflect that thought. When our thoughts are such that they lead us through an ‘inner logic’ to act in ways that seem bizarre to others, it causes severe and persistent problems in living.

It is the ‘leakage’ of our automatic thoughts [“look at that tramp”] which provides the potential of inferring the individual client’s theory of meaning and provides an aspect with which to work. As we are able to help the person identify cognitive errors in the leakage, and to weigh the results of these thoughts, we open the potential for cognitive restructuring and change.

Such a theory of change requires an autonomous person, who is capable of freely entering into an analysis of their thoughts and make changes. We remind you that Myrna Shure has demonstrated that children as young as four are capable of such thinking.

Therefore, to assume that people with information processing problems such as occur in autism or retardation, cannot benefit from some thinking interventions may be open to question.

The nature of the new theory of change requires some other shifts in perspective. Three basic shifts in perspective are helpful in carrying out new technology planning.

- 1) The planning is predicated upon the *vision* of a preferred adult life style as defined by the child/family. *Need*, is defined by the client, not by the ‘expert’. Need, in this sense, become a **goal**. The vision is developed through a full discussion of life domains and identification of all areas of support that might be necessary to assure that the child can function in a preferred adult life style when they come of age. The predominant importance of the life plan is to encourage the child/family to focus on a *positive* future [the arrow of time points to the future, not the past] and away from a problematic past. But in addition, there is a shift away from planning for the child to be **in** the service system in the future to an expectation that the child will be served predominantly through *natural supports* systems as an adult and the supports are oriented towards assurance of a *reduction* of professional human service supports
- 2) There is a perspective of services that changes the *role* of the human service professional from *expert decision maker* to *enabler*. The human service professional [including educational] does not assess the child and make decisions about his or her future. The child/family make the decisions that define their outcome expectations and the experts are then required to provide the means to achieve these outcomes. The role change does not diminish the expertise of the human service professional, but does redirect its focus. The expertise comes to the fore is the design of the solution to meet the sovereign goals of the client.
- 3) There is a shift in perspective towards maintenance of the child as a valued member of the community and family. This demands a movement to “whatever it takes” to keep children out of programs which dislocate them from family, friends and community. Thus supports are intended to be delivered where the child is [or would be if they had no disability] thus maintaining the child’s role qualification in valued settings. In addition, the services and supports may be expanded to include community supports in place of, or in conjunction with professional supports as a further means of entrenching the child/family in the community.

Planning

All effective change starts first with the identification of a goal and then with the process of thinking about the most effective strategies to reach the goal. This is different than starting from a *diagnosis* or *assessment*. This is not the identification of *needs*, in the sense of *deficits*. It is a matter of identifying what the individual desires to accomplish, what obstacles stand in the way of reaching that intention, and then devising strategies and tactics to overcome these barriers. Such an approach does not assume that the

obstacles are *pathologies* or *defects*, merely that they exist and must be overcome. The plan is to build competence: capacity equal to expectation. While it may be necessary to develop social “prosthetics” to help the individual achieve his or her expectations, this is not unlike any other person might need.

“Competence” has been defined as “positive characteristics, particularly the capacity for coping with life situations”. [Sundberg, Snowden & Reynolds - 1978]. When one becomes unable to cope with life situations, one is, according to this definition, incompetent, and the probability of becoming a psychiatric patient increases dramatically. It is natural then, that psychiatric diagnostic systems are focused on inadequacies, breakdowns and symptoms such as anxiety, depression, fear, disordered thinking, hallucinations, and so on. Such an emphasis on symptoms is the *modus operandi* of the medical establishment and so when it turned its attention to social behavior, medicine hardly could do anything other than look at symptoms and pathology [Benjamin - 1981].

Part of the difficulty of defining the person’s inadequacies as ‘problems’, is the identification of “whose problem it is”. If one does not understand the desires of the person, what might be identified as a problem by others may not be a problems at all. If my goal is to isolate myself from other people, poor interpersonal skills ought to be considered a plus, rather than a minus. In all probability, however, other people might feel offended by these apparent social ‘gaffes’ and therefore get angry and leave in a huff. But if I want to get rid of them - “Whose problem is it?”. The whole idea that one might identify behavior as disordered implies that there is a standard being used, and if that standard has no relationship to the individual and his or her desires, the use of it becomes questionable and probably coercive.

This is the equivalent of suggesting that men or women, blacks or whites, elders or children are inferior because of something they cannot attain; whether they want to attain it or not. One cannot rationally problem solve, without a clear understanding of the problem. The fact that public social policy leaves unresolved the question of development or protection, allows for a ‘*few respected men*’ to create a cliché that becomes ‘*self evident*’; and they will support this brazen claim with some horrible examples. The assumption that society knows what is best for the individual opens the question of “Who represents society?”. It is doubtful that the public *will* desires that a few people trained in psychodynamic theory and medicine should be empowered to decide what a society finds acceptable and unacceptable, when for all other purposes we leave this to the courts.

The alternative is to allow each person and their family and friends to decide what they would like to achieve and to use our expertise to help them achieve these self preferences [assuming they are legal; they must be legal]. A major part of the difficulty with old technology planning has been in the manner of defining goals. Traditionally the *experts* have decided what the most *likely* outcome of the individual’s *pathology* and decide, based upon that prognosis, what the target outcome should be. This negates the individual will and must be rejected by the new methodology. It must be rejected even if it is ‘right’, since the method of formation is flawed and the likely result is self-defeating responses.

Therefore, part of the new technology is to develop new understandings of how to effectively plan.

All planning revolves around three essential elements: 1) there must be a goal, 2) there must be alternative methods to reach the goal, and 3) there must be criterion established that will let us know when the goal has been reached. In the transformational system, the goal is the responsibility of the client. S/he alone knows what s/he wants, although a great deal of discussion may be necessary to flush out specifically what is required. Without knowledge of the client's intentions, no alternatives can be created, and it will be impossible to know whether the goal has been met. The alternatives are the responsibility of the 'experts'. If the alternatives cannot meet the goal, they are not alternatives. The selection of the alternative which most meets the preferred intentions is the right of the client. If no alternatives meet the client's requirements, it is a failure of the experts. The experts must exhaust all remedies to provide an alternative which meets the preference of the client. The criterion of outcome also resides with the client. Only they can determine whether the intervention has met their own goals.

Planning a life is a serious and pains-taking endeavor. It cannot and will not happen at a single time, in a single place or with a specific group of people and the attempts of the present technology to make it so is one of the major fallacies of its approach. Planning can only happen over time and the plan will change on a regular basis as the child and his or her family identify new preferences and interests. The transition to adult life will require a *plan*. But the plan, by nature of growth and development is more directional than specific, and it will be modified regularly.

Creating the Vision

The future is not a result of choices among alternative paths offered by the present, but a place that is created - created first in mind and will, created next in activity. The future is not some place we are going to, but one we are creating. The paths to it are not found but made, and the activity of making them changes both the maker and the destination.
John Schaar

The most important part of planning is the fact that it begins the process of looking toward the future. As part of the channeling of positive energy towards a **preferred** future, some of the concepts and techniques of *creative visualization* might prove to be helpful in that they focus the participants on the most positive potential outcomes.

The arrow of time must point to the future.

The family of a child with problems in living must be helped to find meaning in future events and prospects. Such child/families often have a difficult time with this direction as

they view it more with despair, than hope. The development of a vision for the future is the beginning of a process of hoping. Whenever we create something, we always create it first in thought form before manifestation. Thus this *vision* component of the **life plan**; this *vision* of the future, is the creation of a blueprint of hope and must be treated with respect and reverence. “The goal should be to pull reality toward the dream, not to pull the dream down to reality” [Knoster - 1994]. This requires the use of positive energy, which does not ignore the ‘reality’ of the child’s difficulties, but frames those difficulties in the most energizing light. The child/family and supporting cast cannot hold themselves back, blocking themselves from achieving fulfillment for the child because of fears and negative concepts.

Since this is a positive creation, it is not a planning process that is oriented towards assuring that the child can get adult services. This is not a projection of what services the child will need as an adult and putting in a reservation to assure their delivery. This is a preferred vision which expects the child to live without adult services. It is a vision of independence from social service systems, not a self-fulfilling prophecy of failure. It is the expectation of this planning process that services and supports will be given to the child over the next four to seven years which will enable the emerging adult to achieve this vision of independence. This is a default system which identifies failure of independence only through the process of living. It is expected that the child will leave school to a productive life and only the failure to achieve that goal will define the need for adult services.

“This process of change does not occur on superficial levels, through mere ‘positive thinking’. It involves exploring, discovering, and changing our deepest, most basic attitudes toward life” [Gawain - 1978]. In order to pull reality towards the dream, human service personnel will need to be prepared to develop strategies and tactics to help the child develop the skills and attitudes necessary for such achievement. The *vision* part of the *life plan* may now need the expertise of professional educators and related child serving experts to develop the action steps which, upon implementation, will optimize the potential for the child achieving the dream. These action steps need timelines and accountable implementation responsibilities as well as to identify, articulate and gain commitment from the child/parent on their contribution to the actions to be taken. Thus, the life plan has four major parts: the **vision statement**, the **implementation plan**, the **responsibility and time chart**, and the **contract**.

In order to develop a clear transition to adult life, it is important to develop strategies which support the *preferred adult life style* of the child. The goal of the transition planning process is to provide the opportunity for the emerging adult to live as *independent* of human service systems and, as much as possible, in a manner of their own choosing. Planning for adult life is an ongoing process. Parents of children with problems in living must make considerable progress early in defining their child’s interests, expectation, capacities and support requirements if they expect to participate in a quality planning project.

The first official step in that transitional planning process is for the emerging adult [with the support of the family] to begin to think about the future in regard to important life values and life domains; to create a *life plan* regarding what they wish to become. The thinking about these domains is likely to be shaped by cultural, spiritual and family values and these are important considerations in thinking about future life styles.

For purposes of helping the child, and others think about these domains, a matrix tool might be used which would provide guidance. For example, some domains to be considered and questions posed might include:

Family: What is the expected relationship to members of the present family and how does it coincide with desires for a future family? Is it likely, hoped, expected that the child will marry and have children, and if so, how will that family relate to the present family of parents and siblings? What competencies and/or supports would be necessary to make this work?

If the child is unlikely to marry and/or have children, what are the potential continuing relationships to siblings? If parents are the present primary caretaker, will siblings take over; a personal support group [“circle of friends”] or will professional support be required?

Is the child prepared for parenthood? What are the child management and monitoring strategies that are likely to be used [what is s/he learning at the parents knee?] and how might these strategies be improved?

Social: What is the present personal support group and how might it expand? The assurance of a ‘circle of friends’ is an important aspect of adult life particularly for people who need considerable support to participate in social events?

An important social concern is the emerging adult’s right to intimacy, dating and sexuality. While this is a difficult area for family members, school officials and human service staff to address, the right to privacy and protection of procreation, marriage and family as well as access to contraceptives are rights protected by the U.S. Constitution and other Federal Law and Regulation - “In any federally funded program, rights may not be denied if the handicapped individual is “otherwise qualified” per se or with added efforts at reasonable accommodation. “Preparing the child for *appropriate* sexuality [as defined by the family and the emerging adult, within the parameters of social and legal norms] in their emerging adulthood is a major responsibility of the family with appropriate supports.

Educational: What are the educational goals of the child? Will there be academic or technical learning beyond high school? What special preparation will be needed to make this involvement have satisfactory outcome?

- Employment:** What is the likelihood of work and what type of work is preferred? What training is necessary? Has a full vocational evaluation been done or is it planned? Has the child had the opportunity to use computer programming to help identify areas of work interest? What technical training is necessary to ensure that the child is prepared for employment within the area of preferred choice?
- Health:** Are there medical issues that can be predicted? How can these best be addressed? Is the child capable of learning health, nutrition and hygiene adequately enough to be self sufficient? If not, what insurance coverage is necessary to maximize freedom from onerous health costs? How can the family be helped to prepare for this coverage through insurance or trust?
- Psychology:** What emotional supports are necessary for the emerging adult as s/he and the family age? If the child is reliant on family for emotional support, what happens when the family is no longer capable of such support? How can we plan to provide such support in the future? [See circle of friends]
- Legal:** Are there legal issues that need to be addressed? Does the child have now or the potential of criminal behavior? What supports can be built in to help the child take responsibility for these issues? Are there other legal issues to be addressed [trusts, suits, etc]?
- Safety:** If the child has medical, physical or emotional limitations which place them in potential danger, what supports are necessary to ameliorate such hazards?
- Home:** Are there physical requirements to future living arrangements? Who would the child prefer to live with now and in the future? What kinds of locations, homes are preferred [urban, suburban, rural]? Is the child capable of learning how to care for a home and be self sufficient within their own personal environment?
- Mobility:** Many of the above domains demand the ability to get to and from places. What requirements need to be fulfilled to assure that the child will be able to be adequately mobile to participate in the community, work, worship and play?
- Personal:** The ability to care for oneself, handle financial matters, schedule and use time effectively, relate interpersonally, use time alone effectively, etc. are significant contributors to a quality life style. What are the child's strengths and weakness and how should s/he plan to adequately deal with these issues as an adult.

Community: Independent people use community resources such as libraries, shopping centers, recreational facilities, voting areas and the like as everyday events. Emerging adults need to learn how to use the community resources effectively.

Having developed these targets sufficiently, the support team [family, friends, health, education and welfare staff] are then ready to begin to create a specific plan for transition to adult living. The plan may be quite extensive, including several components for each domain each with its own variables. For example: the Personal domain might include consideration of the following:

I. Personal Development

A. Personal Health Management

1. Hygiene
2. Nutrition & diet
3. Physical exercise
4. Grooming [affect, style, etc.]

B. Personal Financial Management

1. Financial Planning: Budgeting
2. Purchasing
3. Income Maintenance
 - a. Understanding money
 - b. Understanding taxes
 - c. Savings & Investments
 - d. Accounting: [balancing a checkbook, keeping records, etc.]

C. Personal Time Management

1. Productive time
2. Leisure time
 - a. Social
 - b. Self
3. Sleep

D. Personal Esthetics

1. Spiritual development
2. Music
3. Art
4. Drama

E. Managing Personal Property

1. Care & Maintenance of Clothing
2. Care & Maintenance of other personal items.

The above example should indicate precisely how extensive such planning can, and probably should be. It is important to note that all of the areas are *infinitely* expandable and that this planning support material could not possibly cover every aspect that the child/family may desire to entertain. In normal conditions of growth and development these issues tend to take care of themselves [although there is sufficient evidence to suggest that this is not always so even for children without problems in living], but for a child with problems in living reaching adulthood, such development cannot be taken for granted. This is not to assume that the emerging adult will not have strengths to handle such areas, but rather that such strengths can be better supported with thoughtful planning; that conscious *awareness* of the developmental process will help to **ensure** that it takes place - and that a future oriented perspective is an important focus that is not always easy for people with problems in living, their families and the professionals who work with them to achieve.

The planning, however, is only the beginning of the process. In order to ensure that the child will have the maximum opportunity to attain the adult life style that they desire, there is a requirement that a planned process of learning be developed to support such growth and development.

It is important also to understand that such planning is only that: a plan. Plans change. The movement from adolescence to adulthood is a time of significant change in attitude and thinking and therefore the life plan will need to be adapted as we go along. However, the changes are the responsibility of the emerging adult; not the professionals.

As the child/family and helpers focus on the goals, they must think about it in a positive, encouraging way. Each should make strong positive statements to him/herself: that it exists, that it is now coming to fruition. Each should see the child achieving it. These positive statements are called 'affirmations'. Affirmation is one of the most important elements of creative planning. To affirm means to "make firm". An affirmation is a strong, positive statement that something is *already so*. It is a way of 'making firm' that which you are imaging. While using affirmations, try to temporarily suspend any doubt or disbelief you may have, at least for the moment, and practice getting the feeling that what is planned is very real and possible. [Gawain - 1978]

Remember that goals often change before they are realized which is a perfectly natural part of the human process of change and growth. Don't try to prolong it any longer than the child/family have energy for - if they lose interest it may mean that it's time for a new look at what they want. If a goal has changed, it should be acknowledged. Clarity that the goal is no longer a focus will help avoid getting confused, or feeling that you have 'failed' when the expectations have simply changed. In the same manner, when a goal is achieved it should be acknowledged consciously. [Gawain - 1978]

While such planning is probably helpful for any child emerging into adulthood, it is proposed that such planning become a regular part of the educational process for children who are at particular risk. All special education children who reach the age of sixteen [16] are presently required to have plans developed in terms of the Life Domain matrix so that both the educational system and the family can begin to measure the dimensions of support necessary to attain a quality adult life. The process is initiated within a special individual education plan [IEP] process which is extended to include the matrix fulfillment. What is suggested here, is that this process be started much earlier for select children with severe and persistent problems in living [where behavior IS the disability⁴⁴] and that the process be used, not to prepare the child for the adult service system, but rather to develop the means to preclude the use of those adult systems through a process of a) implementation of a professionally designed set of activities to develop necessary competencies, b) developing a *natural community supports*, and c) developing a personal support network [circle of friends] who will enhance the emerging adult's capacity to live independently of professional supports in preferred life styles and, d) generating as much positive energy toward achievement of preferred goals as possible. Finally, it is to create a *habit* of thinking about the future in positive terms. Dreaming about emerging into a perfect world is a tremendous asset toward attaining a perfect world.

Children so selected would be offered a special degree of service through participation in an intensified program of planning which includes child serving agencies other than education, as well as family and community. Specific strategies would be developed to identify resources to provide additional supports geared towards helping to attain the outcomes necessary to provide the opportunity for the child to reach optimal levels of independence in their chosen adult life. Experts in various fields should be approached to seek the most likely methods of achieving the preferred outcome. If any expert does not believe the child can achieve the preferred outcome - get another expert. One does not go to a dentist who does not believe s/he can fix your teeth.

In essence, the child/family has come to the expert architect [account executive] to design a dream house. They have identified their expected needs and preferences and have asked the architect to take the responsibility for a) designing the house, b) having subsidiary systems [plumbing, electrical, heat, etc. developed, c) developing the specifications necessary for implementation, d) negotiating with the general and sub-contractor(s), e) maintaining a monitoring of supplies and materials, f) discussing with the owner [child/family] any recommendations for change whether they come from the child/family or from others, g) following the orders for change authorized by the owners, and h) assuring completion to the satisfaction of the owner.

Nothing in this process diminishes the expertise of the architect or contractors. But it is clear, that the control over the development of the house [or even the decision to build], lies in the hands of the potential owner. This is true even recognizing that the owner may know nothing about land usage, house and interior design, technical systems, construction and the like. The potential owner does not need to know these things, only to

⁴⁴ This is usually defined by the labels mentally ill, substance abuser or delinquent.

know where to get the expertise regarding them. That they are competent to accept or reject the expertise is accepted as a fact of life, not as an area for discussion and brazen claims. The skill of the ‘experts’ is both in their ability to do the work requested and their ability to negotiate effectively. Failure to negotiate may leave the architect in the position of either not building the house or in building one which is not utile.

It must be emphasized that the Life Plan is a product of the child’s preferences. No plan for the future which does not take into account those preferences can be successful. That there are opportunities to influence the child’s understanding of adult issues and therefore affect his/her choices should be apparent, but this is different than deciding these goals for them. Since Life Planning is an on-going process, it is incumbent upon the system to identify an on-going *facilitator* who can help with this process. This does not mean that the School District or other child serving agencies must supply such an individual although they may. A family member, adult friend, siblings, Big Brother or Sister, or other significant person may provide quite adequate support with minimal direction as long as they have accepted the principle of *creative visualization*.

Since the goal of the life planning is to maximize the emerging adult’s involvement in the community, the use of natural community support is an important ingredient. Seeking volunteers from civic groups or churches can expand dramatically the number of people available. Given the proper tools and direction, there is no reason that they cannot be as effective, or more so, than the professionals.

A “circle of friends” representing lay people in the major life domains, who live in the community of choice should be developed either to participate in developing the life plan or as an outcome of that process. The circle can meet between formal planning meetings to review, enhance and monitor the development and implementation of the life plan. The circle should be selected with the expectation that they will provide much of the natural community support for the emerging adult in the future. Therefore, the emerging adult’s sanction of circle participation is mandated.

A **service facilitator** [plan manager, account executive] must be identified for each qualified *child* and will be responsible for:

- Facilitating the child/family creation of a *vision* of the future regarding a preferred quality of adult life.
- Developing and certifying the Action Plan/Responsibility Chart
- Negotiating with and contracting for services with both educational and other responsible entities.
- Monitoring the implementation of services and supports; suggesting and gaining approval [from child/family] for change orders.
- Reconvening formal or informal meeting in between all or part of the Planning Team⁴⁵ with regard to enhancement or adjustment of the plan.

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One recommended construct is to develop a Home, School & Community Council made up of representatives of all child serving agencies [educational, protective, corrective & clinical] as well as community representatives who meet to support the children in their community.

- Maintaining a positive trust relationship with the child/family in regard to the transition to adult life.
- Documenting and reporting on the activities of the Plan.

Such a facilitator need not be a professional although the demands may be beyond that of a single volunteer. If a professional help is used in this role, it must **not** be provided by an organization which provides services of any kind to the child. Such involvement is a clear *conflict of interest* in that the ability to hold provider agencies responsible for optimal performance would conflict with the employment responsibility.

Speculation

Human beings always do what they perceive to be in their best interest. We can presently identify four methods of decision making about what is their *best interest*.

- People decide *rationally* what is their best interest based on a systematic, logical mental schema.
- People decide what is in their best interest based on *authoritative direction*.
- People decide what is in their best interest based on perceived or actual *reward*.
- People decide what is in their best interest based on perceived or actual *punishment*.

It is incumbent upon the service facilitator to assure that to the greatest extent possible, the plan and its implementation is designed around decision making which is the most rationally oriented possible. This will require that the service facilitator become informed about all aspects of the development and impart this information in a manner which can be understood by the child/family.

Contrary to our metaphor, the service facilitator need not be the prime architect of the plan, but they must be competent to understand and explain the plan to ensure that it meets the child/family needs.

Plan Outline

All planning meetings require the use of a meeting facilitator who has skills in group process, use of group management tools, and a specific planning protocol which will assure that all points are covered. All planning meetings also require the pre-meeting exercise of a Vision Statement, which should be given to the planning participants before the meeting and which sets the purpose of the meeting(s).

The planning process is one of developing the specifications of the helping process and culminates in the *authorization* by the child/family to proceed to implementation. All change orders must be signed by the child/family.

1. The planning process must begin by establishing the **goal** that states the conditions to be met in order for the child to achieve a preferred life of independence. Discussion can then be around “pulling reality towards the dream”.
2. Once the goal has been established and the information from the Vision Statement explored and absorbed, the team then institutes objectives by stating the *competencies* that are necessary to meet the goal.

As a ‘decision support’ mechanism, the team should address each of the following elements:

- educational competencies
- cognitive competencies
- social competencies
 - peer relations
 - authoritative relations
 - familial relations
 - intimate relations
- utilitarian competencies
 - daily living skills
 - employment skills

Each competency expectation should be written in **one** sentence. Subordinate descriptors can be included in a separate paragraph if they clarify the expectancy.

3. The team should specify the protocol of services and/or supports that will address each competency expectation and develop a measurable indicator with which to evaluate such achievement.
4. Each indicator will have subindicators which will mark the expected development of the competency over time.

Each subindicator will have a timeline marking the point at which it is expected that the child will have attained that level of competency.

Each indicator should have a menu of vendors who could provide the services &/or supports required by the child to attain the competency.

5. The team should then develop a responsibility chart indicating the responsibilities of the child, family, facilitator, service provider, etc. The agreement of the participants to acceptance of their responsibilities [note that the service provider responsibilities should be spelled out by the team and made part of a service contract].
6. The team should produce an Action Plan/Responsibility Chart which identifies both short term [3/6/12 months] expectations and a long term [3/5 years] expectations. The AP/RC should define the process for amendment or change. No change can take place without the specific sanction of the child/family. Professionals in the service delivery or in the planning team may identify unsuspected deficits in the plan, but these must be brought to the child/family for consideration. A change order process can be developed and included as part of the plan.
7. In the ideal, a **budget** should be developed and funds set aside to implement the plan. The funds should be identified by each of the agencies involved. A 'venture' capital fund could be developed to provide for those services for which there are no identifiable resources.
8. A service facilitator must be identified and engaged by the child/family. This individual will provide support to the family through negotiation of contracts with the service provider, continued monitoring of the service rendition and ongoing evaluation with the child/parent, and reconvening of the Team, if it seems necessary. Under no circumstances should this person have a conflict of interest relationship with the vendors of services and supports.
9. With the help of the service facilitator, the child/family should contract with a preferred provider for the services and supports identified. The service facilitator has a 'set aside' budget available for supporting the contracts. Service providers should be in a competitive market test situation to ensure that they are focused on meeting the needs of the child/family.

The Planning Process

Definition: A plan for future life is something that most people do as part of a developmental process. For some of us, however, future options seem to be limited to an extent which is untenable. Creating a personal plan for the future of a child with problems in living is an organized, collaborative process which attempts to identify barriers and develop supports to enhance the person's potential for a full and fruitful life.

Creating a personal plan for the future entails an orderly process for describing a desirable future **with** a child with severe and persistent problems in living and deciding on a schedule of activities and supports that will organize resources toward that future.

Planning a future for someone other than yourself takes greater responsibility and a different kind of effort than typical group planning meetings. It requires:

- delineating potential futures in which the child may participate,
- enhancing preference selections regarding those potential futures,
- identifying prerequisites for enabling the child to achieve the preferred future,
- and, making plans to prepare the child to meet the requisites.

The plan must be wholistic in approach. Personal futures planning experts suggest five related constructs, which indicate a way of looking at a persons quality of life.

- **Community presence** is the experience of sharing the ordinary places that define community life.
- **Choice** is the experience of growing autonomy. Personal choice defines and expresses individual identity.
- **Respect** is the experience of having a valued place among a network of people and valued roles in community life.
- **Community Membership** is the experience of being part of a growing network of personal relationship which includes close friends.

Each of these constructs is closely linked with the other four and each accomplishment can facilitate or impair every other. A person will develop greater competence if the necessary assistance and instruction are anchored in ordinary community settings and if a number of typical people become personally involved.

Increasing positive experiences in a person's life means organizing three kinds of change: 1) change in the person. 2) change in the supports, and 3) changes in the opportunities. Since changes in the person are most effectively implemented through positive changes in our concept of supports and enhance the performance when opportunities are presented, identifying at minimum, educational, cognitive, behavioral, social and utilitarian competencies which will be necessary to attain independence as an adult and to maintain an adequate quality of life as defined by the preferred future is a must. The plan must not ignore the full aspects of life, friends and the pursuit of happiness. Life is not focused only on achievement &/or failure.

The process is not expected to be accomplished in one meeting. The team members must make a commitment of time and energy to meet as many times as necessary to accomplish the tasks assigned and may meet anew as changes occur over time. Good skills in facilitating and recording are essential to the success of any planning process.

Child/family System

The child/family is considered to be a single entity - an interactive system with its own coherence. Adult family members [parents, older siblings, relatives, step parents, paramours, guardians, etc.] need to be qualified to speak for the child. Adult Family Members [AFM] are to be considered to be qualified, until they are formally disqualified.

Such disqualification can occur because of an action of the court **or** an action of the maturing child.

Emancipation

The child should be considered able to question the qualifications of an AFM as soon as s/he shows signs of an ability to emancipate him/herself from that family member. Emancipation in this context is emancipation of thought, not emancipation of parental authority. It is the beginning of the child's freedom of opinion and has its roots in Rank's *love experience*. Such a circumstance can occur at varied ages, but should be actively supported in its most positive form after the age of fourteen. Most children must be considered fully emancipated after eighteen. **All** children are fully emancipated after twenty-one, unless they have been found incompetent by the court.

Qualification

The concept of qualification is equally applicable to other adults in the helping process. While it is acceptable for a qualified AFM to sanction members of the planning team, **only the child** can sanction [or qualify] a direct service worker. The question of qualification then is to determine whether the AFM member speaks for the child. Since young children are often unable or unwilling to speak for themselves, the qualification is granted on the basis of capitulation. As the child begins to develop opinions of his/her own, s/he sometimes comes into conflict with the AFM. When this conflict occurs, the child will often bow to the wisdom of the parent after having had her say. If s/he does not, it is the responsibility of the facilitator and other helpers to try to help the child and AFM find some accord. If the child refuses to accept the direction of the AFM, she is emancipating his/her opinions from that family member. Such emancipation unfortunately often happens through defiance. This is because emancipation is only achieved when the child is able to enforce his/her own decisions. If the AFM chooses to hold on to their power, there is conflict. Child/adult relations are seen in many stages ranging from an AFM who capitulates to a very young child to AFMs who tyrannize adult children.

Planning team members and providers of services must remember that emancipation is a natural and important step for the child and must support all reasonable attempts for the child to differentiate him/herself from AFMs. This position should not be used to negate the AFM's opinions, but it should put them into a different perspective, which requires negotiation, rather than dismissal. The emancipated child has become a qualified member of the planning group and one that should be accorded substantial authority since if they do not sanction the final plan, the plan is useless.

It should be noted, that such power shifts in a system cause a disturbance in equilibrium. Thus the child/family system needs to readjust. Depending on the intensity of the disruption, professional support to the family may be a necessary outcome.

Hierarchy of Opinions

The issues of qualification and emancipation raises the question of how to value opinions.

Child

When a six year old child refuses to accept the opinion of an adult family member, how should their opinion be considered? This is not an easy issue, for while the adult family member can certainly mandate a position, the effectiveness of the implementation of that position can be negated through the child's refusal to participate, or worse, displaced expressions of their anger on the helper. If one accepts the axiom that no one can be helped until they authorize the helper to help them, this is a potentially no win situation. Again, if the child is reasonably young, their opinions are often easy to sway, but this advantage diminishes as they mature. Based on the mentioned axiom, the child's opinion must be given some weight even though they may not be able to enforce it or may be able to be swayed later.

AFM

The adult family member is usually the adult who best knows the child and assuming that they are qualified by the child and the court, the adult family member's opinions must be given substantial weight. This opinion is the predominant opinion at least until the child questions it. It is recognized that the adult family member's opinion can be colored by guilt, overprotectiveness or "fantasies of normality" for the child, but while the apparent activation of these issues might be recognized, the opinion does not lose its stature until questioned by the child [or the court]. The adult family member cannot be 'disqualified' by professionals without due process.

Professional Experts

While it is likely that the professional expert is able to be more detached from the emotions that the child/family system internally evoke, the professional is prone to opinion entropy. Having dealt with so many intractable problems over the years, certain rote 'answers' jump to mind. Professionals often are unable to see strengths. Further, objectivity is not the end all and be all of the human activity. Emotionality on the part of the child with problems in living expressed as an overwhelming desire to achieve against all odds is often the factor that carries the day. Hope and rationale optimism are strengths. While identifying obstacles is an appropriate role for the professional, the most salient responsibility is to find ways to overcome them. Thus, professional opinion, while valued, is of a lower echelon than the opinion of the child &/or family.

In summary, all opinions are important, but the critical opinion is that of the child. Professional expertise is necessary to provide the information upon which decisions are made, but except in unusually circumstances are not weighted equally. Clearly, if the direct service provider is not able to attain sanction from the child to help - the help is useless.

Barriers

Principles

- The government must pursue its ends in a manner that least intrudes or infringes upon individual rights. [Biklen - 1982]
- The only purpose for which power can be rightfully exercised over any member of a civilized community against his will, is to prevent harm to other. His own good, either physical or moral, is not a sufficient warrant. [Mill - 1912]
- To respect autonomy is to give weight to autonomous persons' considered opinions and choices while refraining from obstructing their actions unless they are clearly detrimental to others. To show lack of respect for an autonomous agent is to repudiate that person's considered judgements, to deny an individual the freedom to act on those considered judgements, or to withhold information necessary to make a considered judgement. [The Belmont Report - 1979]

The issue of resolving barriers, which interfere with the ability to provide supports and services to enable children to participate effectively in educational processes in their regular school, is a critical issue that has been supported by the federal court. Such obstacles include, but are not limited to: tradition, skill, motivation, attitude and structure. Therefore, it is likely that nothing less than a dramatic change in the method of doing business, both within individual systems and among collaborative systems, is required to make the *ideal* a reality. One could argue, in fact, that collaboration is inconsistent with the intentions of a unified system, since the very word implies separation of roles, responsibilities and a sense of territory.

In order to problem solve from the *most optimal perspective*, one would be required to review the individual situation from a format which would assure that the barriers are identified and resolved both within and among systems. But one cannot develop the most optimal perspective without first changing the focus of the planning and the roles of the participants in the planning.

- What is the *vision* for this child for participation in a preferred adult life style and who delineates that vision?

While it has traditionally been the responsibility of the 'experts' to define such a vision, this responsibility is unsupportable and indicates the *subordinate* status of the child/family in the traditional process of receiving help. A vision is not easily defined and is impossible without the input of the child/family. Family and cultural values are critical to the development of preference considerations. The idea of the vision is to focus the services and supports to achieve the preferred outcome. Where the child/family express preferences that are contrary to the expectations of the professional or social policy expectations, there is the opportunity to negotiate. This is far better than proceeding in a contrary fashion where continued resistance makes the 'help' improbable.

It is the responsibility of each individual to take responsibility for his or her own growth and development. No professional can take this responsibility for them and it is the traditional attempt to do so that has caused stress and coercion in the system. By gaining a clear understanding of the personal preferences, the professional is in a position to help the individual understand the ramifications of that decision. For example, if a child/family envision a medical profession [doctor] as the goal for a child who is of limited intellectual capacity, the professionals can begin by laying out the step by step expectations to test whether such expectations have been considered in the decision making or by using the Personal Construct Theory of Kelly, develop a cognitive map to help define just what the child family really know about the medical profession and upon what construct they made that selection. In the example, there would not only be intellectual challenges, but time and financial challenges as well. To simply state that the goal is unattainable is not only likely to generate resistance, but is wrong as well. Professional helpers have no better ability to predict the future for an individual than anyone else.

Perhaps a negotiation into some lesser level of participation in the medical profession will be a result of the discussion or identification of an alternate expectation based upon the reasons for the original selection will arise. But without some understanding of the **outcome expectations** of the child/family, the child serving systems are unlikely to be successful in providing satisfactory solutions. And a failure to *trust the process* of helping the child/family shape their own destiny results in labels such as 'incurable', 'hard core', etc., as the child and/or family resist attempts to help.

The fact that the child/family sets the goals of service is coherent with people being autonomous entities and contrary to the operational modes of present systems. Many of the barriers to appropriate services and supports exist in the apparent resistance to such services that is caused more by the inappropriateness of vision development than by actual failure of the person with problems in living to want help. Helping an elderly person across the street when s/he is waiting for the bus is a humorous example of help misdirected. However, it is unlikely that the elderly person will see it as humorous

The experts or professionals have the responsibility to *enable* the child to reach for the vision through the development of action steps which indicates to the child/family exactly what it will take to reach the outcome desired and to extract from the child/family their **commitment** to the goal and the implementation of their responsibilities and activities which are required to reach the goal.

For too long, consumers have been 'outside' the loop of responsibility, yet without their active direction, service and support is unlikely to work. The system must seek not only *consent*, but sanction. The consumer must feel that s/he is being helped to achieve his/her own goals. As part of the respect for the consumers as autonomous people, their active participation and commitment is required.

The child serving agencies must offer suggestions as to how they will least intrude or infringe upon the child/family in providing their services and supports and must do so in a *valued environment*. Traditionally, child-serving agencies have had the child/family come to them. They must now go to the child/family in the places where the child would normally be living, learning or working if s/he had no problems in living. In addition, the providers must seek to provide their services and supports at *times* that are convenient to the child/family, not ask the child/family to inconvenience themselves for the professionals. Why is it that so few services are provided on weekends or in the evenings? Is this convenient for the client or the staff?

The role of the 'experts' as enablers is not limited to enabling the child/family to achieve *within* the context of what is deliverable [meaning that the funds, skills and volition exist to provide what is necessary]. This type of planning is truncated; it limits thinking only to what is, not to what might be. To continue to think in these terms is to continue the status quo. In fact, if a life plan does not contain something that cannot be delivered under the present organization of systems, this should be an indication that it is not well thought out. It is only after this *open ended* planning is done that the issue of barriers can even be considered. Such consideration provides to the combined systems and their policy makers indices for necessary change.

The traditional human service systems are *not* effective. To simply *resolve* individual cases without system change inherently implies that there will always be failure. It is system change that is sought. That change and its merit can never be identified with simply solutions of individual cases. It is necessary, therefore, that such life plans present perplexing problems which are not easily resolved. It is important that human service experts are required to expand their creative thinking to solve at least 'improbable', if not impossible cases. It is the ability to progress toward solving more and more complex problems that identifies a 'learning organization' and continuous quality improvement.

To achieve the goal of best possible life plans regardless of resources available, it might be wise to recognize that those responsible for allocation of funds on a local level *should not participate*. This is contrary to current thinking that demands that such authority be at the table. Yet the very presence of those responsible for the difficult task of allocating limited funds is a clear inhibition to any truly extensive planning. Even the best of administrators must continually be mentally processing the consequences of such planning while presumably open to the development of the best plan.

Once the life planning has been accomplished and an action plan of step-by-step supports has been developed, a performance contract which specifies the commitment of both the child/family and provider agency must be developed. An integral part of that contract is the process of *change orders*. Only the child/family can authorize changes in the contract. The professionals can and should recommend changes as the *formative* information feedback indicates that such change would be beneficial; but they cannot unilaterally implement such changes.

- What barriers exist to this vision implementation?

If the planners have been able to plan the best possible method for meeting the goals of the vision, they have ignored the barriers that are inherent in the traditional system. It is only now the “piper must be paid”. The local administrator should have the first option of defining how to overcome the barriers identified. This may result in local action or a request of the state authority to act. Only failure of the local administration to overcome barriers should implement movement up to a state level. To usurp such local authority is to assume that the state knows the best way to redesign local programs; such presumptions are contrary to total quality management guidelines.

Rule or policy barriers: Generally the Secretary of a Health, Education or Welfare agency, or a designee has the authority to waive any regulation or policy which *significantly interferes with the effective delivery of services*. Although this is not normally extended to the delivery of services to a specific individual, there appears to be no prohibitions to such a decision. Of more importance, perhaps, is the ability to identify regulation or policy barriers and waive them as a preliminary to rule and ultimately system change.

In reality, however, it is often the local rules or interpretations of rules and policies which prohibit the extension of the system to a new way of doing business. Often the local county officials have gotten used to business in a usual way and to avoid increasing the potential costs of doing business, place limits beyond what the state regulations demand. Sometimes even to the extent that changing administrations no longer remember that it was a locally based decision and do not understand the regulations sufficiently to realize the error. The following tradition of Base Service Units is an example.

Capacity barriers: Traditionally a Base Service Unit⁴⁶ refers almost exclusively to the Community Mental Health Center [CMHC] to which it is attached, if that Center provides the particular set of services. Employees often do not even know that referral outside of the CMHC is possible. Therefore, the lack of capacity or availability [waiting list] may be more apparent than real. Philadelphia for example has sixteen [16] licensed providers of one on one staff support, yet there was rarely a polling of all of these providers before the determination was made that the capacity or availability does not exist.

Additionally, the Base Service Unit can refer out of county if such a referral is feasible. County Administrators often resist such referrals since it can create political ramifications for them as the local system is seen as inferior to a competing neighbor. One solution is

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The Base Service Unit is actually an arm of the County Mental Health/Mental Retardation Program. Designed by the 1966 Mental Health Act to provide for service utilization responsibilities within a managed care construct. By tradition, in Pennsylvania at least, the CMHCs, through federal grants to were able to get started sooner than the county infrastructure. Since most CMHCs were connected to hospitals and hospitals had great political and social power, the county governments followed their lead and never recovered the mechanism or the authority necessary to govern the programs.

to have the state [regional] official ‘order’ such a referral thus taking the onus off the County Administrator.

What is also rarely realized is that there are often *community responses* to the needed services beyond the boundaries of the system. For example, some portions of one on one support may be supplied by Big Brother/Sister agencies, settlement houses or neighborhood community centers, or good neighbors. The practices that imply that only professionals can provide these supports negates the fact that untrained, caring people are usually the exact type of people employed by the provider agencies. The ability to connect with such community or natural supports and provide support to them as they support the child is an approach that not only resolves capacity problems, but additionally builds the community’s capacity to respond.

Policy makers must understand, however, that the new focus on planning [i.e., to provide services and supports to children in valued settings which they would inhabit if they had no disabilities] **creates** a capacity problem. There are few, if any staff, professional or otherwise, who have the capability to operate without the support of supervisors and peers, in often foreign contexts where they must establish their integrity, and at the same time, be at risk of being terminated from their involvement by the people they are serving. This is not how they have been educated or trained, nor how they have practiced over time. Restructuring of systems requires re-education of staff.

Financial barriers: The traditional view is that there is not enough money to support the numbers and intensity of services that are necessary. This is one way of looking at the world. Another way is to suggest that there is money to do anything you want to do if there is sufficient creativity and justification. Since local public administrators have rarely been responsible for generating revenue [except from the state], many fail to exploit the opportunities available. Community funds and foundations, civic group support, as well as grant opportunities abound [although one must acknowledge that their capacity goes up and down].

The difficulty with the view of funds as limited is that this perspective is inextricably bound to the decisions regarding allocation. Each County has a large fund of money available. This fund is constricted by two decision-making processes: 1) the categorical requirements and 2) local decision making. Both of these can be changed. Each locality can request categorical waivers and some are preparing a full collapse of such restrictions in order to accept Medicaid funding to compete with managed care organizations. The state has encouraged such initiatives in the past [the Medicaid issue is a primary example and the failure of local administrators to respond appropriately to the limitations of public funds, which has resulted in the state contracting with private managed care organizations in hopes of controlling funds], and specific barrier circumstance can be used to recommend such changes.

But more importantly, perhaps, is the quantity and quality of local decision making. In most counties there is no local decision making. Decisions made year ago are still being implemented leaving no money available to make decisions about. However, each of

these historic decisions needs to be revisited in light of new technologies, values and outcome expectations. While most local administrators will complain about the limitations placed on them by financial resources and categorical funding patterns, few can articulate how they would operate if such limitations did not exist. In fact, most administrators rely on these limitations as the alibi for failure of the systems they operate.

Information barriers: A severe handicap for local administrators is the fact that they do not have enough information to plan effectively. Since most BSUs are connected to CMHCs instead of the local government authority, they tend to collect data and analyze it only for the CMHC and not the county. Further, their collection tends to include only *custodial data*, meaning that it does not document **outcome**. Changes in both the locus and nature of data collection should be supported as a means of obtaining better information to make decisions. A local administrator is much more likely to ‘take a risk’ on a funding need, if s/he can reasonably predict the potential for other emergencies”. By collecting data on the total population rather than only those presently served in the system, such predictability becomes more obtainable.

- What are the obstacles to implementing the solutions?

State authorities have limited ability to **require** county programs to operate in a specific manner even when regulated. The problem is that the only sanction [withdrawal of funds] is self-defeating since it would require the state to run the local program. However, the state does have *influence* on localities and many local administrators operate as though that influence were force [again, it becomes easier to preside over failure, if one can blame the state]. The state needs to negotiate a method of conveying responsive decisions to the localities. Many times these solution responses will be welcomed by the locality, but where they are not, there is potential for breakdown. It would be recommended that the state first - strongly recommend to its local counterparts that they have not only the right, but the responsibility to restructure services to be more user friendly and outcome oriented. Second, that the state is prepared to offer assistance in that process. Third, that there are sanctions for failure to transition.

It should be noted that there are **two** functions that must be implemented by government, if the local administrator is to ‘steer, not row’. The first is the service facilitator or plan manager, whom we have compared in some ways to the architect/general contractor asked to build a house. This SF must first gain a very clear understanding of what is being asked. Then, s/he is required to seek out the ‘experts’ to help put together the plan, and other ‘experts’ who are prepared to carry the plan out.

The second role is that of a *meeting facilitator*. This person has a responsibility to meet with the various ‘experts’ and focus them on the design specifications and away from their individual innovations. These roles could be played by the same person, although they require slightly different skills. What is vital is the recognition that these are **steering roles** and therefore cannot be played by providers. Government must control the direction of services individually and collectively if it expects to be able to provide a safety net for those whom providers do not want to serve.

Team process

The involvement of a child with problems in living in a human service system invariable leads to team decision making. While the use of such teams is understandable and offers opportunities for creative seeking of solutions, often using a group method to solve problems or plan solutions is not productive. Awareness of potential difficulties should help to arm team members against failure.

Cognitive Errors

More heads are not always better than one, although they should be. There are three major ways in which groups fail to fully appreciate and deal with a problem.

- First, groups often move too rapidly toward a solution. Someone introduces a good idea and everyone “jumps on the bandwagon”. Other possibilities are not explored and the group often has not analyzed fully the problem.
- Second, members polarize around competing strategies. People may come to the group with a preconceived strategy. Coalitions form around competing ideas. The energy of the group is spent in arguing and group politics, rather than analysis of the problem.
- Third, the group fails to identify some significant causal factors behind the group problem, increasing the risk that the strategy may be inappropriate to the problem.

Role Negotiation

Often there will be a need for *role negotiation* before the meetings even begin to identify the parameters of the problem. Too often the issues of power and personal disposition are ignored by those attempting to alter the behavior of the group’s members or build working relationships in a new setting. Role negotiation faces these issues explicitly by surfacing aspects of an individual’s behavior, discussing these aspects openly, and then negotiating a settlement among the parties involved that is mutually satisfying. Such a process is time consuming [1.2 to 4 hours], but may be necessary to develop the coherence in a group of diverse people who might have preconceived notions about how others are likely to treat them.

The name of the technique describes the process, of changing through negotiation with other interested parties the role which the individual performs in the group. Role includes not only the formal, but also the informal understandings, agreements, expectations and arrangement with others which determine the way one person affects or fits with another. The technique makes the basic assumption that most people prefer a fair, negotiated settlement to a state of unresolved conflict, and they are willing to invest some time and make some modest concessions in order to achieve a solution. A small, but significant risk is called for from the participants: they must be open about what changes in

behavior, authority or responsibility they wish to obtain from others in the situation. If the participants take the risk asked of them and specify concretely the changes desired on the part of others, then significant changes in work effectiveness can often be obtained.

Since there is a substantive role change expectation in *life plan* meetings; with regard to the adult family members and the professionals, such a process may well be worthwhile. However, it should be undertaken only with a meeting facilitator since the power shift is from the expert to the child/parents, who are often the most vulnerable of the participants at the table. These problems are often escalated when the group is made up of individuals who represent organizations with a long history of failure to successfully implement actions which ameliorate the problem. It is also compressed by the idea that such solutions are going to take place in a single meeting when the development of the problem has occurred over a significant period of time.

Strategic problems

All of these factors are quite prevalent in interagency and individual service/education plan meetings. The problems represented by a child having problems in living and learning are *strategic problems* which tend to be long-term. Their time frame for detection, analysis and solution is extended, ranging from two to seven [or more] years. Strategic problems are problems between related social elements and do not develop within one isolated, closed system. Therefore, it is not just the child, but the related systems of home, school and community and *the child serving agencies* which must be addressed if one is to find satisfactory solutions. The discussion is not just to change the behavior of the child, but perhaps, to change the behaviors of *all* of the participants in the child's environment. While it is uncomfortable for the participants to allow the group to examine individual behavior in relation to the child, they must seek ways to allow this to happen in the most positive way; seeking remedy, not blame.

Strategic problems tend to involve social dysfunctions. They do not simply involve technical breakdowns that can be quickly fixed. Often they comprise a requirement for slow changes in thought [schemata], as well as covert [thinking] and overt behavior, not simply the replacement of a broken component. They tend to be complex and include many interlocking factors and demonstrate a myriad of symptoms. To remedy a real strategic problem, you must change *more* than one thing at a time; incremental response often has no lasting effect.

To believe that such problems can be solved in a single meeting of one to three hours even without the added burden of the involvement of a cadre of people with differing values and needs, is ludicrous. It takes persistence, reflection, interactive responsiveness, socially constructive events and systemic change. The discussion is not about a child, it is about a child in context and the relationships to that child. It is not just the development of a normative planning phase which defines what *ought* to be done; it includes a Pygmalion plan of what the group *believes* can be done. This demands a review of the values and expectations not only of the people planning the strategies, but the values and expectations of the tactical implementer [service providers] as well, since differing

perceptions of the problem can lead to drastically different solutions and differing expectations of outcomes can dramatically alter performance.

In most organizations, particularly those delivering human services, the multiplicity of goals and values which combine to form the organization's world view create problematic situations which are too complex to be identified with a single cause or consequence. Collaboration then requires some clarification of values and goals *before* one can expect to achieve an individual plan. It is therefore imperative that we design ways of recognizing the total web of causes and effects which combine to create these problematic situations which are too complex to be identified with a single cause or solution.

Problem framing

To do this we must recognize at least three things.

- First, problematic situations are experienced as being 'out of sync' with the individual members' perspectives.
- Second, that because this image is created by the combination of cognitive maps which its members may or may not share, there may be at least as many perceived causes to the problems as there are members.
- Third, the recognition of the problem will depend on how the group *reorganizes* its individual and/or collective maps.

Before any initial effort is made to solve the problem, therefore, we must *frame* the problem. We frequently make the following five errors in trying to develop a problem statement.

- We frequently state the problem in terms of preferred solutions.

“The problem is that I need a larger budget.”

“The problem is that I need more staff.”

These are *not* problems. They are the speaker's belief about what would constitute a preferred solution.

- We frequently state problems in such a way as to make it impossible for us to resolve them, thereby paralyzing ourselves while at the same time providing an explanation [excuse] for our failure.

“Johnny is incorrigible.”

“The problem is that the family won't support the school.”

These might end up being consequences of the problem, but they are not the problem.

- The statement of a problem often includes unwarranted and untested assumptions.

“The problem is that I need more authority.”

This assumes that the speaker already accurately knows the extent of his/her authority and that it is inadequate. It also assumes that more authority will enable him/her to deal effectively with whatever the actual problem is.

We also often limit by self-imposed, untested assumptions.

“My boss would never let me try that.”

If one acts and is rebuffed, at least one learns what the real limits are, whereas failure to act because of one’s perceptions is self-sealing.

- Our concept of a problem is often based on inadequate evidence, guesses, hunches, intuitions, biases, rumors and personal value perspectives. We often do not sort out and weigh our knowledge of a problem, identifying areas in which more information would potentially make a difference.
- Frequently, we optimistically overstate the consequences of ‘solving the problem’ we have identified, forgetting that people are difficult to change and often absorb new initiatives in such a way as to minimize consequences.

With these *cognitive errors* in mind, the development of a life plan to resolve a problem or group of problems that are inhibiting a child’s ability to live and learn effectively requires a *rigorous* analysis of the person *in context*, a recognition that the context, not just the child may need to change, and a clarity of goal and outcome. In attempting to do so, we want to also keep in mind the concepts involved in continuous quality improvement.

The starting point in developing the problem statement is, perhaps, not to start with the problem, but to start with the conditions that would indicate the resolution of the problem. This is not just a statement of what we would like to see the child *not* do, but a statement of what the child might or ought to do as well. The task of defining this expectation belongs to the child/family. First, because the client always must define quality [preferred expectation], but also because the responsibility for growth and development is ultimately the child’s and failure to take into account that child’s thoughts and dreams is a failure to understand what factors will motivate the child to participate in the solution. Finally, the framing of outcome is with the child/family because they understand best of all the child and his/her cultural norms.

The meetings must start with a clear articulation of the parameters of a *vision* of the child/family regarding living, learning, and working. If not a view of what the child might desire as an adult life style, at least a view of three to five years down the road. This is the time for the child/family to *create* the future, from which the combined

expertise of the rest of the group will design supports and services to make it happen. The group wants to be assured that it is solving the *right* problem and that can only be articulated by the child/family. It is important to note that this is not an attempt by the child/family to design a solution; this is a statement of expected outcome criterion, which would show that the solutions worked.

Force Field Analysis

The group in responding to the goal [outcome] of the vision statement must accept the goals as reasonable until they prove unattainable. This does not mean that they may not point out to the child/family the *restraining* forces which push against any possible solutions and if unopposed would eventually cause the situation to become worse. The fact that a child can not read is a restraining force for an academic career and needs to be articulated. However, this does not mean that the child cannot learn to read even though to date all attempts have been futile. The potential has been shifted slightly since the child/family have now articulated a reason for reading that may not have been readily apparent to them before. This may be a new *driving* force that makes the attempts to teach reading more successful. The process of self preferred vision places the responsibility of the child/parent squarely in line with the expected solutions.

It may be important for the group to begin to define other restraining/driving forces. If the persons responsible for teaching the child reading do not believe that s/he can ever learn, they are probably right. Not necessarily because the child cannot learn to read, but because their self-fulfilling prophecy will constantly remind the child of their disbelief. Thus, in order to increase the driving force, it will be necessary to identify a teacher who believes that s/he can teach the child to read. If both the child and teacher believe that the child can learn to read, the driving force has been exponentially increased.

It is also true that the child/family may have been unrealistic in their vision development. It is not the groups responsibility to *decide* that the vision is unrealistic, it is the responsibility of the process to *demonstrate* it. In other words, as the process continues the child/family should begin to see that they have “bitten off more than they can chew” merely by the commitments of time and energy that they must make in order to attain the goals. Mother and father may have to commit to reading with and to the child on a regular schedule if the reading is to be attained. They may decide that this charge is too much, and lower their sights. But the expert role is to move the reality as close to the dream as possible.

In responding to the vision expectations, the group is going to find the need to *partialize* the overall expectation into action steps or phases. This process should help them determine the timelines necessary for accomplishment. This also may cause the child/parent to re-evaluate. If the timelines are too long, they may feel that it is better to lower the goals to more reasonably attainable levels. But this is not just an attempt to manipulate the goals through setting up barriers. The experts must be prepared to make the best effort possible to attain the original goal. This must be a *default* system. It is only failure which causes re-evaluation. Whether the failure is that of the system or the child is

unlikely to be assessable, but it is preferred that failure always be framed as a failure of the system of support rather than of the child. The child will know the truth if s/he has not given his/her best, but doesn't need to be burdened with the reinforcement from an 'expert' who may also have not given his/her best. The system can always improve beyond its present capacity and therefore should take failure more as a learning experience.

Responsibility Charting & Stakeholder Mapping

For each restraining/driving force which is subject to influence, the group should develop and Action/Responsibility chart indicating who will do what, what will exactly be done, where and when it will be carried out and how it will be monitored and measured. Each Action Plan must become a learning process. What worked, what did not work, why did it not work, and what can be done to improve it? If we have not learned from failure, we have failed. If we have learned, we have moved the process forward one step. The planning group must understand the influence of groups and individuals who function within the domains which are providing the supports and services to the child and recognize the stakes they may hold in the situation. The teacher who has been frustrated and threatened by a child whose behavior seems uncontrollable is unlikely to quickly buy into a tactic which brings that child back to his/her classroom⁴⁷. Stakeholders may enhance or inhibit performance; support or oppose objectives; aid in promoting the process of change or attempt to block it. They are the primary *human* factors in the planning and management of the plan.

An effective strategy must be designed to *anticipate* the possible reactions of stakeholders. This is best done by brainstorming all of the possible stakeholders that the group can think of. They should be identified as specifically as possible, by name or title or groups. People who populate the child's *life domains* are those who are likely to hold stakes in the change process. For example, a sibling might be a major family stakeholder in the change of a child's behavior if s/he feels that her own position in the family might be threatened. The personal values of security, power, survival, status, achievement and the like will be key elements in determining attitudes of stakeholders. It is important to construct a realistic assessment of stakeholder motivations. If there is no information, the group should attempt to collect it informally through discussions with stakeholders or more formally with research techniques. The group must identify the power of a particular stakeholder with respect to the achievement and/or blocking of the goals and implementation strategies designed for the child. They must also understand who they influence. Finally, after a summary of the stakeholders, their positions, power and coalitions are identified; the group must find ways to maximize the potential for successful implementation of the child's plan. The best strategies will be those that induce the most cooperative behavior from the most powerful stakeholder groups. A *marketing* strategy that has an *exchange* of positives for both stakeholder and the child is most likely to succeed. If opposition seems inevitable, the stakeholder list provides important information regarding potential supporters, opponents and coalitions that may

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While we certainly can understand such a teacher's concern, we must remember that we are not in business to solve the teacher's personal issues, but rather to serve the child.

be modified by changing some of the settings in which the services and supports are provided.

Creative Problem Solving

Finally, any group might need to use tools to help it think creatively. Many problems are encountered by groups trying to generate ideas, encourage high member involvement, and maintain agendas and time lines. Very often some members are excluded from active participation for a number of good, and frequently not so good, reasons. In other situations, discussion is monopolized by a few group members with meeting outcomes not accurately reflecting the group's opinion. As the meeting progresses everyone either talks or listens. There is not time for people to think through the issues at hand. As a result the group often solves the wrong problem or tries to get agreement on the solution before there is even agreement on the problem.

Ideas tend to be hierarchical with those most used and most mundane, most available. If the group is going to be able to get past the *usual* solutions, they may need to use some tools such as *lateral thinking*, *nominal group techniques*, or *creative problem solving techniques*.. Other techniques are available and the group should explore which might be most successful.

Reflection & Inquiry

Most people in human services are trained to be *advocates*. We assume positions and believe them to be substantially unassailable. Advocacy without reflection can be quite misdirected and often advocates have trouble listening to other positions; even from other advocates. If there is an expectation of collaboration, the first step in any advocacy position must be based upon a *reflective* position. As we shall see, such reflection will examine the basis for your own position. However, even reflective advocacy without inquiry begets more advocacy....this can be called escalation. In entering into the group decision making process one must keep in mind the spirit of balancing inquiry and reflective advocacy. Generative learning requires reflection and inquiry *skills*, not just advocacy.

Skills of *reflection* concern slowing down our own thinking processes so that we can become more aware of how we form our mental models and the ways they influence our actions. Many of our cognitive models involve focusing on the motives of behavior rather than the behavior itself. Such a focus is not only of questionable value since there may be many motives behind a given behavior, but it tends to *personalize* the quality of the thinking. To assume that a person is lying, covering-up, being manipulative, etc. generates a negative consequence to the discussion that may or may not be correct.

Human information processing is prone to error. The problem appears to be one of continual overload. Simon, a dominant pioneer in cognitive science suggests that human beings do not have the cognitive capacity to seek optimal answers to real questions.

Instead humans artificially simplify the question to a level that is comprehensible; accept the first answer that is good enough to satisfy recognized demands, or use a shortcut that has been acceptable in similar contexts. [Carlson - 1985] The group approach to such problem solving can not be helpful without full cognizance of these human errors and an acceptance of the need to monitor closely positions that we formulate.

Leaps of abstraction occur when we move from direct observation [concrete ‘data’] to generalizations so quickly that we never think to test them. In so doing, we substitute generalization for specific behaviors and begin to treat the generalization as fact. Such ‘leaps’ often slow learning since most of us are not disciplined in distinguishing what we observe directly from generalizations we infer from our observations and we become *stuck* on the personal aspects of the general thought. Nothing undermines openness more surely than certainty. You must develop the mind of a beginner; “The mind of the beginner is empty, free of the habits of the expert, ready to accept, to doubt, and open to all the possibilities.” [Suzuki - 1970]

To undertake reflective attitudes in order to monitor your own thinking, you need to ask yourself what you believe about the way the world works - the nature of the business you are undertaking, people in general and specific individuals. Ask, “What is the ‘data’ upon which these generalizations are based?” Then ask yourself if you are willing to consider that your generalization may be inaccurate or misleading. If the answer is no, there is no point in proceeding. But if you are truly prepared to change your position with new information [to be wrong], you are prepared for the next step.

If you are still not convinced that you might be wrong, other researchers assure us that there are a variety of human information processing problems that you may want to consider. These include haphazard detail, the influence of experience, ignoring complexity, the need for closure, and inadequate self-correction [Carlson - 1993].

“In our ... life we are usually trying to do something, trying to change something into something else, or trying to attain something. Just this trying is already in itself an expression of our true nature. The meaning lies in the effort itself. We should find out the meaning of our effort before we attain something.” “We should not be concerned about the result of our effort before we know its origin. If the origin is not clear and pure, our effort will not be pure, and its result will not satisfy us.” [Suzuki - 1970]

Part of your inquiry might be to test the generalization...**ASK.** *Inquiry* skills concern how we operate in face-to-face interaction with others. *Reciprocal inquiry* means that everyone will make his thinking explicit and subject to public examination. This creates an atmosphere of genuine vulnerability...the goal is no longer to ‘win the argument’, but to find the best argument. This can be especially difficult in a highly political environment that is not open to genuine inquiry, but is essential to finding consensus among participants who have their own worldviews of the issues at hand. The willingness to risk is essential to the collaborative process.

“When you listen to someone, you should give up all your preconceived ideas and your subjective opinions; you should just listen..., just observe what his way is...put very little emphasis on right and wrong or good or bad. Usually when you listen to some statement, you hear it as a kind of echo of yourself. You are actually listening to your own opinion. If it agrees with your opinion, you may accept it, but if it does not, you will reject it or you may not even really hear it.... understand the spirit behind the words.” “You should not have your own idea when you listen to someone.” [Suzuki - 1970]

“When you say something to someone, he may not accept it, but do not try to make him understand it intellectually. Do not argue with him; just listen to his objections...” [Suzuki - 1970]

Guidelines for Inquiry

- Make your own reasoning explicit [i.e. say how you arrived at your view and the ‘data’ upon which it is based].
- Encourage others to explore your view [e.g. “Do you see any gaps in my reasoning?”]
- Encourage others to provide different views [i.e., “Do you have either different data or different conclusions, or both?”].
- Actively inquire into others’ views that differ from your own [i.e., “What are your views?” “How did you arrive at your view?” “Are you taking into account data that are different from what I have considered?”].

When inquiring into others’ views:

- If you are making assumptions about others’ views, state your assumptions clearly and acknowledge that they are assumptions.
- State the ‘data’ upon which your assumptions are based.
- Don’t bother asking questions if you are not genuinely interested in the other’s response.

When you arrive at an impasse [others no longer appear to be open to inquiring into their own views]:

- Ask what data or logic might change their views.
- Ask if there is any way you might together design an experiment [or some other inquiry] that might provide new information.

When you or others are hesitant to express your views or to experiment with alternative ideas:

- Encourage them [or you] to think out loud about what might be making it difficult i.e., “What is it about this situation, and about me or others, that is making open exchange difficult?”].

- If there is mutual desire to do so, design with others ways of overcoming these barriers.

Practicing inquiry and advocacy means being willing to expose limitations in your own thinking - the willingness to be wrong.

Recognize the gap between our espoused theories [what we say] and our “theories-in-use” [the theories that lay behind our actions].

Because it’s so hard to see [even your own] theories-in-use, you may need the help of another person - a “**ruthlessly compassionate**” partner. Ruthless compassion brooks no compromise in both sharing one’s feelings and views and being open to having those views change.

“The eye cannot see itself.”

The collaborative process is geared towards ruthlessly compassionate involvement. The ability to sanction others to assail your positions is built on the knowledge that such intrusion is not personal. It is your position that is being addressed, not you. Your position is neither right nor wrong; although it might be better or worse. The better position is usually based on the most information. If the goal of the team is to really seek the best possible position, then debate is essential. You cannot win; nor lose, in such debate provided the team is focused.

Participative openness leads to people speaking out, *reflective openness* leads to people looking inward. *reflective openness* starts with the willingness to challenge our own thinking, to recognize that any certainty we have is, at best, a hypotheses about the world.

Reflective openness is based on skills, not just good intentions.

Any solution is at best an approximation - always subject to improvement. Continuous improvement occurs as we seek better solutions.

Openness is a characteristic of relationships, not individuals. Openness is based on agape [love] which has little to do with emotion, but has everything to do with intentions.

Impasse is, on occasion, to be assumed. People interpret data differently even when all have the same data. But impasse does not get to the best solution, nor to creative responses. If you believe that your solution is **right**, you cannot proceed. If you believe that your solution is **best**, it can be improved. Two processes can be developed: negotiation and/or “brainstorming”.

The negotiation process is an attempt to ‘get to yes’; to get agreement. It is a win/win process which seeks the **next best alternative** as a way to achieve consensus. The ‘brainstorming’ process is one that uses a variety of techniques to abate strongly held positions and to open up creative thinking in different avenues. Human beings tend to

think in patterned ways and after many occasions of trying to deal with similar situations we lose the ability to think as a beginner. Techniques such as “Lateral Thinking”, “Nominal Group Technique”, etc. help us to overcome this patterned response.

Another factor that each team member must focus on is the *goal* of the meeting. The goal is not to find a way to get this issue off your back. This is not a self-serving meeting even though a good solution may relieve a lot of problems for you. Nor is the goal to do what you think is best for the child. The assumption that we know what is best is fraught with problems. The goal is to meet the expectations of the child/family. Those expectations, dreams, visions, goals are articulated by the child/family and we need to keep them in mind.

Other Techniques

Other than planning technologies, there are a series of technologies built upon cognitive and behavioral skill building which dominate the present approaches. We have separated the exploration of these technologies into interpsychic, interpersonal, and utilitarian segments. In the methodology, we will also use these techniques in the sociocultural context. We have additionally spent some time outlining the essentials of behavior modification because of its related support potential and on communication as an essential force in relating. The behavioral aspects are not simply reinforcement, although this is a component that can be helpful, but are focused on skill building. If certain behavioral mechanics can be used to support the growth and development of cognitive and physical skills, they are important parts of the transformation. On the other hand, the major thrust of the technology is in the realm of cognition; how people think and what are the technical methods to enable them to examine this process and to change it where it would be helpful.

Intrapsychic Skill Building

Over the last decade, a startling number of researchers within social, personality, cognitive, developmental, and clinical psychology have shifted their research foci to understanding the ways individuals attempt to influence their own thoughts, emotions, and behaviors. [Wegner & Pennebaker - 1993] The topic of *mental control* is new for psychology. The term has been used before in everyday language, but only imprecisely and with several meanings. These range from the control *of* the mind, to control *by* the mind, even to the control of *others'* minds. Its intended meaning here is the first of these lay definitions [control of the mind] with a little help from the second [control by the mind]. These types of mind-changing activities have in common the idea that people have preferences about their own thoughts, emotions, and motives, and that there are things they can do to influence these states. The following will attempt to explore some general strategies which may provide helpful interventions with children. Obviously, this book is not intended to be a text on the subject of cognitive behavioral management and interested practitioners might review the bibliography as a place to start their own training.

Attention

The development of cognitive or interpsychic skills is a process of learning to control one's own mental events - thoughts and thought processes. Such mental control can be viewed as a function of attention. People can attend toward things or ideas [and away as well] and this apparently voluntary flexibility in how consciousness is linked to its contents can be taken as definitive of mental control.

Attention is consciousness voluntarily applied. Hamilton suggested that there were different kinds of attention and conceived of each as degrees. First, purely involuntary attention as occurs when visual images strike our eyes. Second, attention governed by desire, as happens presumably when images of desired objects catch hold in the mind. Finally, the aspect that concerns us here - purely voluntary attention.

It is important to note that the amount of attentional energy is limited. It cannot be sustained voluntarily for an indefinite period of time. Therefore, the development of cognitive or interpsychic skills require a time of attentiveness and then a return to an ongoing involuntary process with occasional attention checks.

Mental processes are largely involuntary and go on without conscious effort. However, just as with the reflexive acts of breathing or blinking, a voluntary attention effort can interfere with and change the cycle of production, so attention to our mental processes can have the effect of taking some level of control. What is projected differently here is that certain mental processes can be *altered* during the attentive period and that in the return to the involuntary process the structural alteration allows a different process to take place.

Structure

Such interventions can be used to help people begin to change their internal mental workings and to *improve* their mental status in the process. When determining what mental states could be addressed in such a manner, we find that any mental state a person can initiate or inhibit as a result of instruction would seem to be a potential target of mental control." "Although important exceptions may exist...those mental states for which people are commonly held responsible may be the one that are open to mental control."

Some of the mental states that are most likely to be considered as options for skill development might include improving self concept though affecting attitudes about self, situation and prospects for the future; controlling the 'stream of consciousness' through mediation of the internal and external environment; reducing 'worry' and panic to name a few.

Memory

The interest in memory is somewhat peripheral. While improving memory itself may be a cognitive skill, which might bring empowerment through competence, it is not a major focus in regard to the development of amplifying the enhancement of troubled children. The mental process of memory, however, includes *encoding* which may be described as the creation of a memory trace of an event or experience; *storage* which is the retention of that memory trace which provides the body of knowledge from which a belief system [schematic set of truisms] is organized; and *retrieval* is through recall or recognition of the stored information. Both the encoding and the retrieval processes are important to the development of several cognitive skills.

Encoding

The encoding of propositions [mental representations] are apparently always believed at face value. This should not be surprising. The mind does not reject sensations, even when it is being fooled. Touching an icy cold object may feel like burning and the mind immediately orders the muscles to withdraw. Only afterwards does the mind evaluate the sensation in light of other information to find it was cold, rather than hot. This same process appears to be true of the impact of words. Statements are automatically believed until analytic work compares the new statements with the store of previous statements [schemata] to check for coherence. If the analytic work is not done, the memory trace is coded as a truism; if the analytic work is done, the memory trace may be true or false based not on *reality*, but upon coherence with prior beliefs.

When a schema of truisms [beliefs] is constructed, it becomes the basis upon which the person decides what is reality. Obviously, some schemata [and their contingent set of logical analytical rules] support a more *objective* reality than others. Other schemata are more interested in supporting a more *gratifying* reality. The schemata which is most like that of other people in the cultural environment and, in addition, makes the individual feel good about themselves and the world they live in, is one which is most likely to provide prosocial behaviors and social reward. There is merit therefore, in a society supporting the development of culturally congruent schemata in individual children. These culturally congruent belief systems enable people to act more compatibly with others [more socially acceptable behavior]; feel better about themselves and others [more open to difference and new ideas]; and, probably enhance their ability to perform creatively in their personal, social and vocational endeavors since they will be able to use their mental energies in initiating solutions, rather than responding in defensive ways.

Retrieval

The process of retrieval has similar impact upon people and the way that they act. Adler has pointed out that memory is a creative process and that we remember what has significance for our 'style' of life. In this context, the future determines the past. Whether or not an individual can even recall the significant events of the past depends upon his or her *decision* with regard to the future. The problem is not at all that an individual happens to have endured an impoverished past; it is rather that s/he cannot or does not commit him/herself to the present and the future. S/he seems specifically, to have lost the ability

to abstract, to think in terms of ‘the possible’. Individuals who persevere on what they consider to be a deprived childhood and see it as a barrier to achievement in the future act much differently than those who remember their deprived childhood as strengthening their character in Nietzschean fashion - “that which does not kill me makes me strong”. Others may simply choose to not remember the difficult times of their childhood at all and to live in the present. Each of these remembrances provides the rationale for one to act in certain ways in regard to their future.

Bartlett [1932] saw memory as schema driven and also suggested that post-event misinformation can overwrite and replaces event information. Such overwriting changes the whole context of the memory to suit the needs that are required in the present. This is probably particularly true of memories that are used to justify present and future actions. Thus the childhood deprivation becomes ever more evil as it reasonably accounts for the individual’s failure to achieve. For Bartlett, reasons are created to make recalled events more *sensible*, for Freud, to make them more *palatable*. In either case, the memory becomes a crutch that enables the person to avoid dealing with their real potential.

This is not to suggest that the memory trace itself disappears. Rather as Herbert [1816/1891] states: Ideas compete for entry into consciousness and the stronger or dominant ideas inhibit, that is, repress, weaker ideas, which however, are not destroyed but remain in a ‘state of tendency’. Attention [consciousness voluntarily applied] is again apparent. “My experience is what I agree to attend to.” [James - 1890] And what I attend is MY decision.

The whole question of what is remembered and how it is remembered and its relationship to the schemata of previously encoded information is significant to how one participates in personal and social life. Helping an individual attend to these processes is the first step in helping them recreate the inner structure which so impacts on their perception of the outside world.

Self-Schema

Another way of working with mental structures concerns itself with *self-schema*.⁴⁸ Self-schemas are defined as domains of knowledge about the self that are derived from past interpersonal experiences which organize the processing of self-related information contained in one’s social experiences and include the idea of ‘possible selves’; that is, what the individual might become, would like to become and is afraid of becoming.⁴⁹ [Markus, 1973,1983,1990] Researchers have used *self-scenarios*, some constructed by an observer according to a standardized procedures and clinically relevant, and other self-

48 Self-schema differs from self-concept in that the former refers to an enduring view of the self that nonconsciously persists in organizing cognitive processes and directing behavior, and the latter refers to a view of oneself that can be and has been consciously accessed at a particular time in a specific situation [Horowitz, 1991]

49 Additionally, the self is always a part of a larger context; it cannot be understood as an isolate, but as embedded in an environment. It would be meaningless and misleading to represent some aspect of schematic activity without establishing the appropriate context in which it occurs. [Muran et al, 1994]

scenarios which are not relevant, which are used to help individuals identify and deal with cognitive errors.

Each scenario consisted of four components and was structured by the observer according to the format of 1) stimulus situation, 2) affective response, 3) motor response and, 4) cognitive response. Stimulus situations included representations of emotionally evocative circumstances or conditions such as “When I am in a social situation...” Affective responses involved statements that reflected the person’s affective lexicon and statements such as “I become very anxious and nervous”. Motor responses included descriptions of instrumental predispositions that typically reflected security operations, such as “I tend to act in a quiet and inhibited manner”. Cognitive responses consisted of statement regarding automatic thinking, such as “I’m always wondering what people think of me”, and a conditional statement of self-worth or self-protection, such as “I need the approval of others in order to be worthwhile” or “I must take great precautions in order to feel safe and secure”. [Muran et al, 1994]

The use of these self-representations serves to prime the person’s recognition of schematic material making them aware of their view of themselves within certain contexts that are contained in schematic memory. Considering that each person holds multiple self-representations or experiences multiple states of mind this exercise gives the ability to track changes in self-schemas, which is a vital component of any intervention that proclaims itself capable of altering not only how subjects behave, but what they think of themselves. The method also could aid efforts in formulating tailor-made, individualized plans for each level of affective, motor and cognitive responses for each concerning stimuli situation. Such plans can include using self-schemas in which one feels confident and secure as a bridge to feeling confident and secure in more demanding situations.

Balance

Another area for exploration is mental balance. The mind is in constant mediation as to inner and outer stimulation. As William James [1890/1952] long ago pointed out, a fundamental influence upon human experience and behavior is our awareness of an ongoing stream of thought. Humans must constantly adapt to shifting their attention between the external environment and an ongoing thought stream. It is the ability to control this constant stream that was earlier referred to as the serenity of self acceptance. The reason for its importance and for the language used to delineate it is that “the basic activity of the conscious organism is to make sense of the world, to assign meaning, labels, and to form organized meaningful structures such as schemas and scripts that permit effective storage and retrieval of the information necessary for adaptive functioning [Bonanno, 1990; Kreitler & Kreitler, 1976,1990; Singer & Salovey, 1991; and Tomkins, 1962-1963].”

The motivating properties of positive and negative emotions may be aroused by the rate, novelty, and difficulty of assimilation of new information into established schemas. This cognitive-affective link becomes an overarching motivational principle of existence... “

[Bonanno & Singer - 1993]. Two crucial needs that determine well-being, first articulated by Otto Rank, are concerned with security and opportunity; which can be thought of as a persisting existential dilemma in which we seek *affiliation* and intimacy or belongingness on the one hand and *autonomy*, individuality, and uniqueness on the other.

The monitoring of the internal-external stream of consciousness and the way in which the individual ‘controls’ his own mental state in such affairs has major impact on how they relate to the social environment in which they interact. “Learning to attend to and, then gradually to direct one’s reflective cognitive processes may be ultimately a key feature of all human adaption. Such activities may include the benefits for development evident in children who learn to play at make-believe and to develop ways of miniaturizing the complexities of the adult world or of establishing a metarepresentational dimension that greatly enhances their cognitive capacities [Leslie, 1987; D.G.Singer & J.L. Singer, 1990].”

Since being ‘in control’ describes the adaptive shaping of internal and environmental events to one’s goals, thus, checking against one’s personal standard or goal; someone who is ‘in control’ is accepting of their own and (perhaps) others’ goals while responding to both internal spontaneous desires and external novelty. Some one ‘in control’ is accepting and directing of internal events, but also accepting of external influences. Being mentally ‘in control’ suggests a person comfortably integrated within self and so able to deal with others.

In a contrary fashion we speak of a person who is ‘out of control’ or ‘unbalanced’; perhaps indicating a person who is unable to feel serene enough with themselves to be able to deal with the novelty of others. People seem to have a core motivation to feel in control of themselves and to influence their environment; a motive to predict and control events. People experience anxiety if events are outside the predictive capabilities of their construct system. The more secure they feel in their ability to predict, the more able they are to accept challenge and novelty in their construct system.

Attributions

People anxious about the predictability of others tend to assign reasons, causes and connections [attributions] to events and people that may or may not be logically connected. Attributions constitute the causal reasoning of the person seeking congruence with their own internal predictive schema. Such attributions of motivation projected on to other people often leads the individual then to be able to rationalize or justify why it is okay to treat them badly or to try to control the way they behave. Teachers who see Johnny as being ‘mean’ are justified in not wanting Johnny in class. Someone who asks Johnny why he behaves the way he does, may find that there is a different motivation entirely.

Helping an individual develop a highly skilled logical, scientific process to examine the evidence outside their present personal schema is one of the goals of building cognitive skills. For most people “control motivation varies from time to time, functioning in a

homeostatic manner so that deprivation of control leads to increase in control-directed behaviors” such as the generation of attributional explanation of events. Others, however, have a great deal of anxiety and either spend a great deal of emotional energy ‘controlling’ themselves since they are afraid of the emotions that they feel. Such fear is generated through their inability to either be satisfied with themselves or able to predict the actions of others. The alternative course of action is to spend a great deal of energy attempting to control other people in their environment at all times. These people, whose behavior is incongruent with their social context and culture, are the ones who experience problems in living, and need to learn these intrapsychic skills.

Coherency Systems

Another changeable structure is an individual person’s *coherency*. This is a schema of coherent truisms that the individual uses to determine whether new propositions are true or not. This is done in the same manner that a body of scientific knowledge is used to determine the coherence of a new finding. And like that science, the individual will be greatly inclined to disregard incoherent statements, rather than change the schemata. Occasionally, however, a statement is obviously incoherent with the template, but also inherently so true, useful and/or gratifying, that it deteriorates the structure of [or restructures] the body of knowledge, belief system or schemata. If this new statement is true, all other truisms must be examined in relationship to it. In this manner, the mental structure is altered and the process of checking against the standard is changed because the standard is changed.

Analytical Syntax

Another structure which could be addressed for change would be the logical syntax [rules] used for analytical work. Following our previous analogy, the scientific community would have a rather rigorous logic set to analyze data. In contrast most people allow the analytical work to go on automatically or “*involuntarily*”, in such a nonconscious manner and with so little energy that their ‘body of knowledge’ or schemata is more or less chaotic to begin with. Training someone with such a laissez-faire system to understand, use and *attend* to more rigorous analytical rules, logic and evidence in their work, is also a structural change that would be likely to dramatically affect the outcome of the process.

Personal Constructs

Each of us tries to make sense of the world as we experience it by constantly forming and testing hypotheses about the world. We will have developed a very complex model of the world and our place in it. The attitudes and behaviors that emanate from this model equates to our personality. In the process of such development, we must make *judgements* about objects and events. Personal Construct Theory suggests that we use our own personal *constructs* to describe our judgements about things, events and people. Because constructs represent some form of judgement or evaluation, by definition they are scalar: that is, the concept *good* can only exist in contrast to the construct *bad*. Any

evaluation we make - could reasonably be answered with the question “Compared with what?”. So when a teacher evaluates a child’s behavior as unacceptable, s/he may compare it in ways that other in the school would disagree. Since these personal constructs can be even internally inconsistent - it may be important to discover what the a person believe is inappropriate behavior.

This process is done with a structured interview that allows the person to identify his/her constructs for a particular domain. These can then be *laddered* or expanded/contracted to identify more specifically what the beliefs are that cause the choice of constructs. As with other cognitive processes, these can then be changed.

Interpersonal Skill Training

In the early 1970s an important new intervention approach began to emerge in the interface between psychology and education. The aggressive, withdrawn or otherwise interpersonally skill deficit youngster came to be viewed more in educational, pedagogic terms than as a client in need of counseling or psychotherapy, and the helper assumed s/he was dealing with an individual lacking, or at best weak in, the abilities necessary for effective and satisfying personal and interpersonal functioning rather than suffering from mental disorder or emotional disturbance. The task becomes, therefore, not interpretation, reflection, or reinforcement - as, respectively in psychodynamic, client-centered, and behavioral modification interventions with such youth - but the active and deliberate teaching of desirable behaviors. Rather than an intervention called *psychotherapy*, between patient and psychotherapist, or *counseling* between client and counselor, what emerged was an intervention called *training*, between trainee and interpersonal skills trainer. [Goldstein - 1988]

Learning Process

It has been convincingly demonstrated during the past decade that much social behavior is *learned* behavior. Thus manipulativeness, cheating, teasing and bullying, as well as altruism, cooperation, sharing and empathy appear to be learned largely by means of either observational, vicarious experiences [e.g., seeing others perform the behavior and receive reward for doing so] or direct experience [e.g., enacting the behavior oneself and receiving reward for doing so]. In addition, it has been shown that “aggressive youngsters display widespread interpersonal, planning, aggression management, and other prosocial skill deficits.” [Goldstein - 1988]

“The method that has yielded the most impressive results with diverse problems contains three major components. First, alternative modes of response are repeatedly modeled, preferably by several people who demonstrate how the new style of behavior can be used with a variety of ...situations. Second, the learners are provided with necessary guidance and ample opportunity to practice the modeled behavior under favorable conditions until they perform it skillfully and spontaneously. The latter procedures are ideally suited for developing new social skills, but they are

unlikely to be adopted unless they produce rewarding consequences. Arrangement of success experiences particularly for initial efforts at behaving differently, constitute the third component in this powerful composite method.... Given adequate demonstration, guided practice, and success experiences, this method is almost certain to produce favorable results.” [Bandura - 1973 as quoted by Goldstein - 1988]

The instructional techniques that constitute each of the skill training efforts⁵⁰ derive from social learning theory and typically consist of instructions, modeling, role playing [behavioral rehearsal], and performance feedback - with ancillary use in some instances of contingent reinforcement.

Generalization

Skill acquisition is a reliable outcome, but the social validity of this consistent result is tempered substantially by the frequent failure - or at least indeterminacy - of transfer and maintenance. Four main generalization strategies have been developed to support the skill building efforts.

1. Incorporate transfer and maintenance enhancers in the skill training.
 - *provision of general principles*. Transfer training is facilitated by providing trainees with general mediating principles governing successful or competent performance. General principles or rationales of skill selection and utilization are provided to trainees verbally and in written form.
 - *overlearning*. This involves training in a skill beyond what is necessary to produce initial changes in behavior. The practice of perfect.
 - identical elements. The greater the similarity of physical and interpersonal stimuli in the skill training and the home, community or others settings in which the skill is to be applied, the greater the likelihood of transfer.
 - *stimulus variability*. Positive transfer is greater when a variety of training stimuli are used, thus rotating teachers and groups is an effective support.
 - *mediated generalization*. Includes self-recording and self- instruction.
2. Maximize the support and reciprocity.
 - *real-life reinforcement*. This becomes available with a sensitized and prosocial school culture, but can be implemented as well through the use of *homework* assignments, which demand that the skill be implemented outside the environment, but in favorable circumstances.
3. Construct multidimensional interventions.
 - *aggression replacement training*
 - = skills building - teaches what to do
 - = anger control - teaches what not to do.
 - . triggers [external/internal]

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This would include *utilitarian* skill training in life and employment skills. Because of this congruence, such skill training is not included as a specific technology.

- . cues - psychological [for aggressive often tied to attributions of hostile intent so that the cues become instantly offensive]
- . reducers - deep breathing, counting backwards, peaceful imagery, long-term consequences.
- . reminders - used to dispute internal triggers.
- . self-evaluation

4 Incorporate *values*

- Moral reasoning - teaches why to use the skill. [Aggressive children tend to be self-centered with attributions of hostile intent, mislabeling activities around them, always assuming the worst and blaming others.

Children will not grow in moral reasoning, however, beyond the people significant to them. Also, after thirty years of age, moral reasoning is unlikely to change.

It is very important to teach children new behaviors and the principles and values underpinning them while they are young. The school environment provides the opportunity to develop significant adult relationships to support growth and development in moral reasoning and after eight, established antisocial behaviors become increasingly more difficult to change.

Utilitarian Skill Building

Utilitarian skill building is based upon the same modeling, rehearsal, performance feedback and transfer that academic [mimetic] and interpersonal skill building utilize. The focus of the training is on life and employment skills. *Personal skills* such as hygiene, dress selection, and budgeting; *residential skills* such as housecleaning, menu planning and furnishing selection; *mobility skills*; which include use of available transportation; *leisure skills* which help to make productive use of leisure time; and *employment skills*, including personal work adjustment, job research and application as well as market skills are some of the types included. These use of these skills are critical if the child is to move appropriately into an adult world. Children who have challenging behaviors often have these as the **last** skills to receive attention; therefore assuring that their adult life will be chaotic.

The curriculum for these skills is available over a wide range of school and rehabilitation organizations. Schools need to codify such curriculum and modify it for the local areas in which children live and develop.

Behavior Modification

Behavior modification can be an important supportive technique to skill training. Along with its demonstrated effectiveness,⁵¹ such techniques are relatively easy to learn and use;

⁵¹

“In sum, the result of a decade or so of research have documented the effectiveness of the behavior modification approach in a wide variety of settings with very diverse child populations.... The

may be teacher-, peer-, parent-, and/or self-administered; are generally cost effective; yield typically unambiguous behavior-change results; [and] have a long history of successful application with aggressive youngsters. [Goldstein - 1994]

These techniques, like those above are derived from formal learning theory and derive from the premise developed by Skinner and his followers: **behavior is largely determined by its consequences**. In an operational sense, this premise has found expression in techniques that by one means or another contingently present or withdraw reward or punishments [e.g., environmental consequences] in order to alter the behavior that precedes these consequences. Specifically, if one's goal is to *increase* the likelihood that a given [e.g., prosocial] behavior will occur, one follows instances of its occurrence with positive consequences, that is, by means of some technique for presenting a reward or removing an aversive event. If one's goal is to *decrease* the likelihood that a given [e.g., antisocial] behavior will occur, one follows instances of its occurrence with negative consequences, that is, by means of some techniques for presenting an aversive event or removing a rewarding event. [adapted from Goldstein - 1994]. The first approach could be called a *positive* contract, and the second a *negative* contract. Most behaviorist believe that the positive contract is the most effective and avoid the negative contract.

A *reinforcer* is an event that increases the subsequent frequency of any behavior it follows. When the presentation of an event following a behavior increases its frequency, the event is referred to as a *positive reinforcer*. Praise, special privileges, tokens or points exchangeable for desired items are a few examples of positive reinforcers. These reinforcers can be used to support the child's use of desired skills and behaviors.

As an adjunct support for cognitive/behavioral skill training, **positive** reinforcers are a salient support mechanism for helping to increase and maintain new prosocial skills. In the environmental approaches, it is additionally important to determine why the child continues to behave in ways that are *negatively* reinforced when such incidents are supposed to diminish such behavior. Three possible areas for exploration are potential for consideration: 1) negative reinforcements do not work, 2) the child is receiving positive reinforcement that outweighs the negative, or 3) that the child lacks the appropriate skill competencies to do what is required.

We speculate that all three ideas may be true. It is believed that negative reinforcers are much less effective than positive reinforcers. It is also felt that the child is often receiving positive reinforcement from somewhere else for the behavior [the slang "baad" meaning good might be an outcropping of the idea that such behaviors are well supported in the subcultures of some children]. It may be beneficial to explore with the child what these positive reinforcers might be for him. Finally, children with problems in living are often lacking in the necessary skills to be able to successfully attain prosocial goals. If we want

behavior of children in classroom settings has been repeatedly altered by a variety of different procedures used by a number of different investigators. In contrast to a host of other approaches applied to educational problems, most behavioral principles...were first documented in laboratory settings, and thus, there is evidence from both basic and applied research of the efficacy of such principles." [O'Leary, O'Leary - 1980, reported by Goldstein - 1994]

to enhance the ability to learn and use prosocial skills, it will be important not only to individually reinforce such behavior, but to “seed” the environment with positive expectation and positive reinforcement as well.

Communication

It should be apparent that both verbal and nonverbal modes of communication are salient methods of shaping other peoples thoughts and behaviors. Unfortunately communication has not been an imperative discipline for parents and professionals who work with children.⁵² As a result, miscommunication, mislabeling, and misunderstanding are major contributors to the cognitive/behavioral deficits which children develop. From the perspective of creating a coherent set of truisms from which to determine concepts of self, situation and future on the one hand, to the perspective of “seeding” of the environment with pejorative and malignant personalized and moralized metaphors on the other; communication has supported the very deficits which we hope to overcome.

If we expect to change this inadvertent imposition, we will need to address the development of a more positive discipline of communication as well as a conscious awareness of it's use. While there does not appear to be sufficient literature regarding verbal and nonverbal communication to build a competent communication repertoire for parents and professional, some beginning focus can be made.

Transactional communication

Based on the general principles of transactional analysis, we can develop a principle of respectful communication. Three fundamental constructs are indicated:

- **child attitude:** I want what I want when I want it!
- **parent attitude:**⁵³ You will do it because I told you so!
- **adult attitude:** Can we talk?

While the description of each of these attitudes is brief, they convey fairly accurately the focus of and attitude which leads to behavior. It is important to note that *each of the attitudes is held by all people*. Each of us has an ability to act as a child, a parent or an adult. Children can often be seen a ‘acting like a parent’ when they scold other children and tell them how they should be behaving. The Parent/Child relationship in this model is **not** the good child/parent relationship, and from that standpoint alone, perhaps the labels

⁵² It is interesting to note that mental disability attorneys have an affirmative responsibility to understand the desires of a profoundly disabled client regardless of the communication difficulties. In contrast, human service professionals have no such duty. If the client fails to effectively communicate his/her needs, or to misunderstand the professional's communication; it is the client's problem.

⁵³ We would suggest that when working with children, the terminology be changed. What is defined in Transactional Analysis as the parent attitude, is seen by children and adolescents as an **adult** attitude. Therefore, We would suggest a child, adult and mature terminology be used.

are misleading. In addition, it might be more appropriate to label the adult attitude the responsible, rational or *mature* attitude to avoid the incongruence of the adult to the child. Nonetheless, the labeling is of a type that is reasonably easy to understand and becomes useful for that, if for no other reason.

It should be apparent, that the expectation for parents and professionals is to talk adult to adult all of the time. This is of course, difficult. When the child threatens a tantrum, the adult attempts to ‘control’ the behavior and thus becomes the parent. Significant energy is expended by teachers trying to get the child to do what they want them to do through ‘parental attitude’ communication. Once the teacher falls into that trap, a *will struggle* takes place to see who is going to win the tug of war. Such struggles require a great deal of energy which might be better expended in a different *will struggle*; that is continuing to focus the child on the mature self. If the child continues to “want what I want when I want it”, and the teacher continues to suggest rationale ways of behaving, the same energy may be expended, but the potential outcome is well rewarded. Obviously, the outcome is also quite measurable. If the child is able to break down the teacher into a parent role, the teacher will become threatening, pejorative and personal.

If the teacher can maintain the adult [mature] position, the child will learn greater and greater control in using their own adult. The will struggle is also likely to become less intense over time as the child begins to cope with the new behaviors that are being modeled. One of the environmentally sound prosocial aspects is simply to give teachers preferred “adult” responses to use when children make ‘bad’ choices.

Directive Communication

Some children exhibit behaviors that cause negative attention from peers and the community, but do not pose a threat to the child or others. For these situations, general transactional communication is enough. Some children, however, exhibit behaviors that are far more extreme and demand immediate attention. These behaviors are considered by the teacher as **non-negotiable** and immediate change is expected. Efforts on the part of adults to “control” such behaviors are often fruitless since the adult has accepted the very premise that has made such behaviors so prevalent. If the teacher believes that the child is ‘out of control’ because of an ‘illness’ which controls the child’s behavior, the teacher’s communication to the child is unlikely to indicate anything else. In essence the teacher is then asking the child to do something that the teacher does not believe the child can do. Through verbal or body language, this negative expectation is likely to be conveyed and therefore the communication is likely to be garbled at best, and pejorative at worst.

Even if the teacher believes that the child can change the behavior, the message is often ill conceived. Suggestions such as “I hope you know what you are doing”, do not convey the real expectation nor does it provide information that may be necessary to meet the unspoken goal. If the teacher is clear about the behavior that must be performed and believes that the child **can** perform the behavior, s/he should tell the child to do so in

clear, specific and authoritative⁵⁴ [not authoritarian] language. The teacher, once making the decision that such a directive is non-negotiable should be prepared to expend whatever energy is necessary to ensure that the child performs the behavior once having directed it. If the teacher is not prepared to expend the energy, s/he should not give the directive.

Such directives are not appropriate for every area of the child's performance. For preferred and 'who cares?' behaviors, other motivational techniques might be performed. Continual directive communication becomes negative and overly confrontational. Non-negotiable behaviors are those that the school or the family determine to be harmful or dangerous. Most adults use directive communication only when their *personal* limit has been reached, and then they often become parental [pejorative, personal and moralizing] in their directive. It is important to decide consciously that certain behaviors are necessary if the child is going to be able to maintain him/herself in full community membership and then place a positive expectation that enables that behavior to happen.

To be *successful* with directive communication, an adult must convey *two basic beliefs*: 1) that it is reasonable to take over and be in an *authoritative* position, and 2) that the child is capable of doing what is requested. The second belief is one that *builds* self-esteem and credibility as opposed to supporting a rationale for failure. Where there is a conflict of wills the adult must be more specific, concrete and assertive in order to get results. The adult must *guarantee* that the child does what is expected by backing up the directive in non-hostile, non-punishing ways. When supported through 'good choice'/'bad choice' prosocial environments, such authoritative positions can become culturally appropriate.

This is not an authoritarian position; it is a position, which is used only with absolutely non-negotiable behaviors. The goal is to make children successful, skilled, independent people who use good judgement and make appropriate, life-enhancing decisions. All children need direction, guidance and structure so that they know where they fit. If they have a sense of where they fit in, they feel better about themselves, are less anxious, feel more comfortable in the world and can get on in a more positive way with the business of learning, growing and developing. If the child has learned to take appropriate direction, they are more capable of dealing with authority throughout their lives and probably more capable of being authoritative when they need to be.

Demanding too much of the child is often believed to have a deleterious effect. The problem with attaining mastery is that no one knows what a child can do until they spend time on task to find out. Many adults no longer expect and demand excellence of children. The problem with lowering standards is that once a child starts to believe that s/he can't control him/herself, it is unreasonable to expect that s/he will act in inappropriate ways. The problem is no longer just the behavior, but the fact that adults label the child who exhibits the behavior, and see him/her as if the label were true, and

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This may be another way to conceptually show the difference between parent and adult. The parent communication in TC is authoritarian, the adult communication is authoritative.

then act accordingly. The label provides a ways of seeing and understanding the behavior.

Directive communication, which emanates from the work of Valentine, [1994] provides the child with a clear assertive and informative expectation. If done transactionally, without recrimination, moralizing or personalizing, it sets a standard of behavior for the child to attain. It indicates clearly that the child is capable and in control. It supports growth, dignity and respect. Clearly, it is not *parental* [authoritarian] communication as defined in transactional communication. It is not a threat nor a pejorative remark. It is an informative expectation of behavior that the child needs to learn to respond to affirmatively.

Reflective Communication

One other form of verbal communication seems to have some relevance. This is to provide ‘mirror’ images of what the child might be thinking or feeling. To say to a child “I like what you did”, may have little meaning if the child does not feel good about you. In fact, it may lead the child to change his/her behavior in order to upset you. On the other hand, a statement that says “you must feel good about what you did”, both conveys the positive supportive cue, while diminishing the personal context.

While it may seem that we are semantically “splitting hairs”, it is important to underline that what we say has real and potent meaning to children. Becoming more aware of that fact is an salient step in improving our communication with children.

Cognitive Qualifiers

Finally, Steve Andreas⁵⁵ gives a picture another aspect of communication that can have meaning.

Happily, John McWhirter has described a fascinating and subtle linguistic example of how the mind can be preset to respond in a particular way that, sadly, others have not previously noticed. A ‘cognitive qualifier’ is a ‘commentary’ adverb appearing at the beginning of a sentence or phrase that refers to an emotional or cognitive state, such as ‘happily’ or ‘sadly’ in the previous sentence. A cognitive qualifier prepares the mind to respond in a specified way to whatever words follow.

To experience this effect, think of an ordinary descriptive sentence like, “The green tree is standing in the sunlight”, or “I am sitting at the desk”, and imagine saying this sentence to yourself...

⁵⁵

Steve Andreas, with his wife Connirae, has been learning, teaching, and developing patterns in NeuroLinguistic Programming since 1977. Steve is the author of a number of NLP articles and books, including *Heart of the Mind*, and has produced many videotapes and audiotaped demonstrations of specific NLP patterns for personal change. This short article is included in its entirety.

Now imagine saying the exact same sentence, but preceded by the word ‘sadly’, and notice how this changes your experience...

Then say the same sentence, but preceded by the word ‘happily’, and again pay attention to your experience...

Cognitive qualifiers direct your mind to think of aspects of an experience that are specified by the kind of qualifier used.

Imagine what your life would be like if you began every sentence, and every thought, with the word ‘sadly’ or ‘regrettably’. That is a very effective way to be depressed, and some people actually do this! In contrast, imagine what your life would be like if every sentence and thought were preceded by the word ‘happily’ or ‘fortunately’. This would be a much better choice, and again, some people actually do this.

Understandably, you might feel incongruent about using the qualifier ‘happily’ for some unpleasant events, but luckily there is an alternative resource. Both ‘sadly’ and ‘happily’ refer to emotional states, and most emotions are evaluative, dealing with pleasant or unpleasant, positive or negative. These evaluative qualifiers will sometimes seem inappropriate for the content of a particular thought or sentence.

Interestingly, there is a set of cognitive/emotional states that is quite different, and that do not have negative or unpleasant aspects. Curiously, they all center around a state of interest, curiosity, attention, or understanding: ‘interestingly’, ‘curiously’, ‘surprisingly’, ‘understandably’, etc. Something unpleasant can be just as interesting as something pleasant - the state of interest or fascination itself is always positive and enjoyable. You probably never heard anyone complain about being curious. “Oh! I had this awful curiosity last night - it was terrible!”

Since these cognitive qualifiers miraculously never have negative states associated with them, they are truly universal resources, which can be used with any experience. And since a state of curiosity or interest is an excellent resource state for learning and change, this kind of cognitive qualifier is a wonderful state to use in beginning to understand and process a difficulty. For example, think of some experience in your life that you might describe as a problem or difficulty, and make up a simple sentence that describes it, such as, “I hate it when people don't follow through on their promises”. Say this sentence to yourself, and notice how you represent this internally... Now say the same sentence to yourself, but preceded by the word ‘interestingly’, or ‘curiously’, or ‘understandably’, and pay attention to how this word changes your experience... Most people experience subtle but profound changes as attention is drawn away from how unpleasant the problem event is and toward interest and curiosity about how it happens, or how it can be understood-a state of readiness and eagerness for learning. Imagine what your life would be like if every sentence and thought you had began with ‘Interestingly’ or ‘Understandably’.

This can be very useful when used as a ‘backtrack’ with a client. When a client describes a problem, you can feed back their statement, beginning with ‘understandably’, or some other qualifier that has to do with curiosity and learning, and watch for the nonverbal shifts that indicate that they are thinking about it in a more relaxed and useful way.

John McWhirter has also pointed out that a very important aspect of these cognitive qualifiers is that they create a shared and universal world, a frame that embraces us both. It is quite different to say I find that interesting, or “Do you find that interesting?” in which there is an apparent separation or difference between us. When I say ‘Interestingly’, this sets up a frame that simply exists and is taken for granted, and that we both experience together, without the separation between self and other that many people often feel. This transcends rapport, because rapport presupposes the difference that the rapport bridges.

Surprisingly, with a powerful state of interest and curiosity, many ‘problems’ simply vanish as my attention turns from how unpleasant they are to simply learning how they exist and function, and what I can do to change them. Even when they don't vanish, it is a much more useful place to begin to work toward understanding and a solution.

Interestingly, the idea that all of life is a school in which we have lessons to learn is a very old idea, and one that is particularly central in certain spiritual traditions, Buddhism in particular. I have no idea if it is true or not, but it is a very powerful reorientation for your life as a whole, one that makes life much easier and more enjoyable, both for yourself and for others.

It should be obvious from this article that cognitive qualifiers can be used both individually and in cultural restructuring.

Body language

Valentine spends a great deal of time discussing the adult [teacher, parent] belief system regarding the potential of the child in regards to the expected behaviors. If the adult does not believe what they are saying, their body language is likely to give them away. It is important that the teacher be *aware* of his/her own feelings and attitudes in regard to the children's' behavior in order to construct the communication necessary to effectively convey important information and positive expectation.

A British research team led by Christopher Brannigan and David Humphries isolated and catalogued 135 distinct gestures and expression of face, head and body. Nierenberg & Calero [1993] suggest that the art of thoroughly understanding nonverbal communication is a learning process almost as difficult as acquiring fluency in a foreign language. Yet its importance as a mechanism for feedback in supplying information towards full communication is vital. The ambiguity of words is further constrained by the context, the tonality and the gesture-clusters which endorse or deny what is conveyed verbally. The alternative verification of body language and the congruency of verbal and nonverbal messages are important to getting one's point across. If teachers or other helping adults

give double messages by saying one thing and conveying another through body language, the child is likely to be confused.

Just as we often 'tune out' verbal communication through concentration on our own mental stream, so too, we tune in and out on nonverbal monitoring. The gestures of the speaker are often taken in unconsciously and then become untested 'facts' to which we respond. When the child takes in a message that is incongruent, and does not take the time to subject these messages to examination and verification, s/he is often prepared to react in a manner that is different than one would expect. "Every gesture is like a word in a language, one must structure his words into units, or 'sentences', that express complete thoughts" [Nierenberg & Calero - 1993], in similar manner, one must be aware of the message of the gesture-clusters which accompany talk. Thus, if we seek awareness we must accept that we can unconsciously convey our 'real' thoughts and feelings to the unconscious of the child; to which s/he [consciously or unconsciously] responds. It is difficult to hide negative feeling about children from them. They may not be able to identify where and how they get the feeling that you don't 'like' them, but they intuitively know. Helpers would vastly improve their relationships by understanding this reality and dealing with these feeling directly and honestly, albeit in a manner which the child can handle.

Communication, thus takes place on many different levels. The more aware the helper is in understanding and interpreting these levels, the more likely they are to be able to help. In addition, the child needs to be able to sort out these differing messages and to find some way to do so which helps them function competently in difficult circumstance. Helping the child be aware of incongruence on the part of the adults to whom s/he relates and to sort out how to deal with those incongruities help to prepare the child for competent functioning in the real world.

INCONGRUENCE INDEED



CHAPTER 4 **METHODOLOGY**

“And yet, there’s a basic insanity here. You take a seven- or eight-year-old child who has not signed a contract, who does not want to be in school, who isn’t there voluntarily, who may have no prior preparation to be there. He’s required by law to be there. He gets matched up against a person who has spent years preparing to be there, who has volunteered to be there. And then, when the communication breaks down, you automatically blame the kid and put a label on him?”

Robert Prouty, Department of Special Education
George Washington University, May 1975

LANGUAGE & CONCEPTS

Changing a system is a process of developing clarity between beginning points and outcomes and developing new problem solving solutions to bridge the gap between the two. The intent here is not to develop a text in regard to all of the specific steps of that solution process, but rather to identify some of the salient components of a transformational system. As might be expected, both language and concepts and staffing arrangements are in the fore front of the transformation. Language and concepts because it is the *messages* that are being sent and received that is the critical factor in the delivery of human services. Staffing, because it is the people, the ‘rubber that meets the road’ to use an analogy, who send and receive messages and their personal attitudes are shaped by the roles they are asked to play. The impact of words on people is modified only by the attitudes of those conveying the messages.

It seems that a new method of providing services would benefit from a new and functional identification that reflects the language and concepts of social learning rather than the biomedical/psychodynamic intent. Until now, we have been referring to the technology itself as social learning or cognitive behavior management, but this does not seem to be an appropriate name for the transformational system itself, since it does not cover the various humanistic/existentialist principles and values regarding self determination and full community membership that are an important part of the methodology [although it does emphasize the value of *competence*], nor does it provide the intentional focus on preferred goals and outcomes, that are a vital part of the total system.

One consideration would be to use the term *psychosocial rehabilitation*, which, as a client developed services, has a history of nonmedical, client, skill building involvement. The term psyche, while originally meaning breath, soul or spirit, has come to mean simply **self**. Since the self plays such a major part as the *figure* in our play, this seems an appropriate enough term. Social comes from the Latin *socius* meaning companion or partner which provides the *ground* to our figure. Habilitate means *to qualify*, and thus rehabilitate would mean to requalify. Thus, our atypical children need to requalify in regard to self/other relationships. While this terminology has some merit, the psychosocial rehabilitation movement itself has consistently been moving toward

‘medicalization’, apparently as a means of increasing the movement’s stature. The newest variation of its own labeling as *psychiatric rehabilitation* is indicative of such status seeking. As much as we might be interested in ‘rehabilitating psychiatrists’, adoption of such a name seems to be identifying with a step backwards. In addition, clients have often expressed unhappiness with the use of the term *psycho*, instead of *psyche*, which while it rolls more easily off the tongue, carries attributions that they would rather not have related to them. Finally, even at its best, the term has been used for a service to a specifically mental health [‘chronically mentally ill’] population, which, in itself, is a medicalized label that could have carry over. So even though the movement seems to have generally abandoned the psychosocial rehabilitation name, it seems as though the time for this terminology has passed.

We probably could do worse than to use **social education** as a rather plain, but functional description of the methodology, whether it is applied within the school, a clinic or a correction facility. It has little ‘medical’ fanciness and therefore will not fit well within the ‘medical necessity’ farce of present mental health scenarios. We could enhance it to psychosocial education, but this causes us to readdress the ‘psycho’ issue. Another term, which may have some merit, is *cognitive rehabilitation*. As stated, rehabilitation means to requalify, and thus cognitive rehabilitation would mean to change the ways you think in order to requalify. Of course, some people may need to qualify in the first place which would be cognitive habilitation. For the clinical aspects, cognitive rehabilitation covers the various labels of cognitive therapy - which is usually applied to the process of identification and alteration of cognitive errors; and cognitive restructuring which covers the process of change the core beliefs about self, others and future prospects; without applying a medical terminology.

Finally, an appropriate name might be to take the current standard of **behavioral health rehabilitation** and drop the inappropriate ‘health’ term, resulting in *behavioral rehabilitation*. While any of these three might be useful, there is an inclination to stay away from the terms of the traditional system. So while *social education* has no catchy ring to it and *cognitive rehabilitation* has no precedent in the literature, both are functional labeling, which are quite separate from the common usage of the traditional system and will be used here to describe the methodology until some labeling genius comes up with a name more likely to catch the fancy of those committed to the methodology. Social education will be most applied when talking about prevention and development and the cognitive rehabilitation in remedial or clinical aspects. For consistency in the material, however, we will follow the lead of our focus on the school as a pivotal change environment, and use social education as the predominant term.

Other terms such as mental illness, therapist, doctor, treatment, etc., will also need to be changed. If we want to send a message that indicates that this problem, no matter how severe it is, is within the ability of the client to influence and even change, we must use language such as competence, training and plans of change or other similar functional terminology. While it may seem strange, spending time thinking this through the words of the profession can have a profound effect on the impact of the services to be rendered.

STAFFING

As indicated earlier, the single most salient characteristic of a human service delivery system is the quality of its personnel. Social education will require a new and different kind of helper who would probably benefit from a new, more descriptive name as well. Traditional human service professionals, particularly those with ‘mental health’ expertise are probably not qualified to carry out the new roles and functions that will be required in the transformational system. Not only will this new worker need to have new technological skills, but s/he will need to be able to carry out those skills in the client’s valued environments, *in situ*. The helper will need to be able to work not only with the child, but in and with the people and situations in the child’s environment. It is within the child’s sociosphere that the messages that reinforce his/her maladaptive triad of core beliefs are initiated and sustained. While it is possible to change the child without changing this environment, it is much more difficult to sustain. Whether that environment be the family, the school, the job or a social event, the helper will need to be seen as an *asset* to the child and the environment. Failure to achieve that status will potentially increase *stigma* and overcome whatever gains the actual work with the child may have had.

Labels

In keeping with our educational focus, we may think of these helpers as *mentors* [a close trusted and experienced counselor or guide] or *tutors* [one having guardianship; a private teacher], although one might also want to consider the use of the terminology of coach, as the role is described in the employment field [Job Coach]. As an arbitrary separation of the terms, we might consider the most highly skilled staff person who is to provide the one on one remedial support as a Mentor, the classroom staff person as the Tutor, and the vocational support person as the Coach, but regardless of the terminology, these helpers will require much of the same kind of training. For expedience, we will use the term *mentor* generically throughout this discussion to describe the person who deliver direct services to a client. We will also introduce the term *facilitator* as a secondary person who functions in the role traditionally called case manager. This person will have a specific separation from the deliver of service and provide supports to the child and family.

Function

These labels have the clear message of trainers - *enablers* who are authoritative sources of *social wisdom* who are prepared to share this body of knowledge with their clients and their families. This is quite different from the titles doctor or therapist, which connotes a treatment relationship to a largely helpless recipient. The labels, of course, are ultimately shaped by the deeds of the title holder. What we do is as important as what we say, and what we do must be placed in a *context* which provides meaning. One can use the analogy of the child having an *apprenticeship* with a master of social relations regarding how to perceive, analyze, judge and act in everyday situations and valued settings. This

apprenticeship is a learning process and the ‘master’ takes on the role of teacher and task master. The relationship to the adult family members and school personnel would simply be that of trainer. Adults cannot often be held to a task, but are offered opportunities for change.

PROFESSIONAL EXPECTATIONS⁵⁶

Choice & Response

A profession may be identified by the *selective nature of what it chooses to do* in response to specific needs, requirements, and sanction of society. This choice of response is based upon the fundamental assumption and the theory of change. Just as the profession of psychiatry chooses to respond with biomedical and psychodynamic responses, so too the profession of social education chooses to use the technology of cognitive behavior management and to do so in a manner which enhances the status and dignity of the person with problems in living instead of the status of the helper. The concept of selective action serves to delineate the specific characteristics of the profession since action is the expression of certain preconditions that influence the nature, timing, and purpose of forms of behavior. When these actions are viewed as the outcomes of *professional intent*, they are indicative of the helper’s authority of knowledge, his or her values and ethics, specific objectives and the manner in which these factors will be translated into technical expertise.

This does not underestimate the *human element* in these actions nor the attributes of those who assume the responsibility for carrying out this professional intent. Knowledge, values and techniques are lodged in the person. The expression in performance of the Mentor is mediated by his/her personality and characteristics; and this personality is mediated by the Mentor’s own thoughts and feelings. It is the **artistic** use of these *scientific cognitive behavioral* tools that sets the expert apart from the layman. In fact, some lay people may also become quite *artistic* in the use of some of the technology so that the recognition of expertise will be based more on the *productivity* of the relationships than on the *credentialing* of the helper. Because of the nature of art, the choice of which artist is most adequate is ultimately⁵⁷ left with the client. Quality, like beauty, is in the eye of the beholder.

The methodology embodies a form of *social intervention*, which enhances, conserves and augments the means by which children⁵⁸ can resolve disruptions in their social existence.

⁵⁶ I am deeply indebted to Howard Goldstein for his book on Social Work Practice for many of the constructs and most of the words within this section. Where I have changed the words in order to reform the meaning around my own interest and issues, I take responsibility for misconstruing his original meaning. For those interested in further consideration of the values and constructs of practice, I would strongly recommend his book.

⁵⁷ This does not diminish the organizational requirement to collect data on staff goal achievement ratios. This merely means that within the context of people who have demonstrated the ability to enable the people they serve to reach goals.

⁵⁸ While the methodology is applicable to adults as well, we will identify it with children to be consistent with the use of educational terminology and analogy.

It is governed by the combined recognition of the individual as a unique and active organism, the social environment as a dynamic force and the effects of their reciprocal and recursive interaction. While the methodology recognizes the importance of nature [genetic heritage] and nurture [cultural impact] on the development of the individual, it recognizes also the importance of the individual's basic impact through the use of personal will upon the way in which these influences are played out.

The **objective** of social education is the *management of social learning*, a process which develops within the context and as a consequence of a *purposeful human relationship*. The process is guided towards explicit goals and social change by the *influence* of the helper that evolves from his or her cognitive, affective and personal resources derived from a system of knowledge, belief and value. The Mentor must provide a context in which the possibilities of improved and *mindful* social learning may be maximized. Thus the dialogue between the Mentor and the client is a *formal dialogue*, focused always in intent, if not in content, upon the social experience. One can discuss last night's ball game, while maintaining a clear understanding of the intent of the relationship and the dialogue. It is the *learning of new knowledge and new patterns of behavior* that disposes the child toward more effective means of functioning. Within any dialogue there are opportunities to provide new knowledge about human interaction. Compare with the child the way in which five average basketball players, who are well trained and coordinated in their efforts, may defeat more highly skilled players. Compare how individuals accept defeat or handle success. Compare the thoughts about losing and winning. These are learning experiences.

The **purpose** of social education is to provide the *means* and *opportunity* by which children can work out, find alternatives for, contend with, or in other self-directed ways, deal with conditions [interpsychic, interpersonal, or environmental] which interfere with productive social living. The means will include the child's growing awareness of his/her own personal beliefs and how these beliefs affect the perceptions and understandings of reality, training in appropriate techniques for rigorous analysis of the evidence to support or refute their own belief systems, and training in the *skills* necessary to carry out certain behaviors in certain situations, including support for generalization over time and space. The opportunities will be supplied with unconditional positive regard and high positive expectation in the valued settings of the child's life.

Although interim purposes may be directed toward emotional, attitudinal and perceptual factors, the methodology is essentially concerned with how children *actively* deal with their relationships and their environment within their social existence. The methodology provides a way, an access, a **bridge** that the child may use to find a solution to or alternative for disruptive conditions. Whether the child will use the access bridge is up to the child, but the engagement of the child in a trust relationship of significance will enhance the potential for a positive outcome to this choice.

The actions of the helper are not, in the final sense, unilateral. The practice of social education requires a significant degree of involvement and active participation by persons related to the objectives [parents, siblings, teachers, peers, etc]. The practice is an

interactional process, with or on behalf of persons relevant to the purposes and it is carried out with the implicit or explicit sanction of those persons. There is no coercion here; no doing something for some person's 'own good'. The extent to which the child is likely to change corresponds to the extent to which the presence of the helper is recognized, experienced and authorized.

Social Interventions

Social interventions may take many forms and may be expressed within various types of human associations. However, all interventions are guided by four interrelated factors. These are:

- ***intentionality*** - the immediate or long-range plan and aim related to **specific outcomes**;

No Mentor can entertain serving a child without a clear understanding of the child's preferred future goals and some strategies to enable the child to reach those goals. Any Mentor who does not believe the child is capable of continuous improvement towards such goals should disengage themselves or be dismissed. The intentions of social education are improved social performance and this cannot be enabled by someone who does not believe that such improved performance is possible.

- ***knowledge***: the body of information needed for implementation of the intentions;

Each Mentor must incorporate into his/her own personality an optimism based on the values of dynamic growth and development in all people. The Mentor must be prepared to supply the child with information that is relevant to the tasks at hand. How the child uses information is up to the child, but the Mentor must always be prepared to assure that the child is *informed* regarding the decisions that s/he makes.

- ***strategy & tactics*** - the means by which the intentions are carried out; and

Each personal goal demands an individual strategy and specific tactics which are shared with the clients, so that this unique child can best optimize his or her unique personal goals. Neither strategies nor tactics are mystical incantations, but are readily available for discussion and sanction by the child and his or her significant others. Strategies arise out of the situation regarding child and context and cannot be specifically *prescribed* with any precision to another person [e.g., clinical supervisor to worker] - for the selection of strategy is contingent on how one relates to the child.. No academic knowledge will enable the Mentor to help develop the right strategy. Only the instinctive understanding of another human being in need will enable strategies to be effectively designed.

- ***interpersonal relationships*** - the abiding awareness of the immediate and anticipated meaning of the human association.

The ideal social experience is when each individual in the experience is the *figure* and not the *ground*. This experience starts one person at a time, and the Mentor/child relationship is the beginning. When the Mentor/child fit as two figures in an Escher drawing, they create a powerful force for continuous improvement. The Mentor is neither a foil for the child's whims nor a force to corral the child; rather the Mentor seeks to be a catalyst to the child's own desire to grow and develop. The Mentor assumes an authoritative [e.g., knowledgeable trainer] role in relationship to the child. The helping relationship differs from most other human relationships in that it **intentionally and selectively** provides those conditions which can facilitate the most productive forms of learning on the part of the student. There is conscious and deliberate, thought and planning which is selected to accomplish these ends, which is why the dialogue is considered to be formal. Even casual dialogues serves a formal purpose.

The participants in the *learning experience may achieve*:

- *substantive knowledge* - concrete information about objects, events, and situations;
- *psychological knowledge* - information about the self, motivations, needs and past-present-future connections; and
- *social knowledge* - understanding of self in relation to others and the meaning and implications of the behavioral **patterns** involved.

Social Context

The importance of *belonging* as a psychological construct is supported by its importance as a social construct. The helping relationship is a socializing force which impels its members toward order and change. Persons in relation tend to move toward some measure of congruence as they increasingly commit themselves to the worth and meaning of the association. It is this congruence that creates a cultural context in which appropriate behavior is proscribed. The psychological desire to belong is the motivation to improve performance at least to the extent of acceptance. The Mentor must view the child in his/her *social context* and attempt to understand the child in the social and physical setting and the interaction between them. The Mentor is not simply there to observe and monitor the actions of the child in this environment, but to model or *demonstrate* the appropriate behaviors as well. This may require that the Mentor involve him/herself in direct relations with teachers, adult family members, other children, including the child's preferred peer group.

Social Education operates on the **principle of autonomous action**; a principle which complements a practice of action and choice. The child is seen as a unique being who shares common human characteristics, but who translates them into his/her own style and manner. S/he can only be known in this **wholistic** sense - the pattern of living - rather than a **molecular** sense that fragments mind and body, thought and action, and past and present. As a consequence of his/her autonomy, s/he is capable of spontaneous expression and can actively integrate and deal with stimuli coming from internal and external sources.

The significance of these conditions lies in the resultant ability to continue to advance to higher orders of performance, to perceive the self differently, and to strive toward objective goals. Behavior is neither fixed nor permanent. It is subject to unlearning, relearning and new learning. Behavior is purposefully and directionally based on what is deemed valuable, and it is influenced by what is interpreted and what is known.

The social tendencies of the child come from both **survival** and **affiliative** needs. S/he seeks interaction to attain a response that has meaning for his/her being. Affiliation with a group is contingent upon the ability to change, put aside, or exchange certain personal values and goals for the benefits accruing from interdependence with the group. It is this ability to diversify behavior that makes it possible for the child to enter in and become an active, contributing and responsive member of various social groups. The absence of social belonging is a major concern for social education. The use of sociometric measures to identify social belonging and the development of responses to address these issues is a significant, although often overlooked, contribution.

Social education is distinguished by its basic concern with the social well-being of persons perceived simultaneously as unique individuals and as active, responsible members of various social systems. Although the child may be regarded as a distinct unit from an objective point of view and for objective purposes, in the actuality of the human experience, s/he is not encountered as an entity, but as an affiliate of a series of social systems [a figure within a ground]. This is true whether the affiliation is constructive or destructive; voluntary or involuntary; willed or not. It is the interactive quality of this affiliation that we hope to influence. An awareness that the field [group] applies a force for change and an appreciation that behavior is *purposive, adaptive*, and, at times, *survival-oriented* assures the presence of regard for individual need.

Social education is most frequently practiced in circumstance which are critical and which reflect the vicissitudes and complexities of human behavior. The Mentor brings to these encounters the ability to bring order to or to reorder the situation, to give meaning or purpose to and make viable what was formerly discontinuous, diffuse or conflicted. The Mentor's competence includes the ability to develop new relationships, to become a pivotal and significant member of an existing relationship, to manage distinctive courses of human conduct and interactions, and to direct these relationships towards the **attainment of explicit goals**. The ability to form salient relationships is contingent upon the messages that are sent and received. Communication between two people occurs at the language, emotional and gestural level. One cannot say one thing and mean another without giving 'signals' of dissonance. The ability of the Mentor to understand and acknowledge his/her own actual thoughts and feelings and, if necessary, to put them aside is critical to the helping process. Too many professionals carry negative thoughts and feeling about their clients and do not acknowledge nor deal with them - while still expecting an appropriate response from the client. When a child attacks [verbally or physically] a Mentor with clear control of his/her own thoughts and feeling has '***no points to defend***', and is able to address the issues raised by the child in an objective and

intentional manner. A ‘personal’ response to an attack may be ‘human’, but is not professional.

The Mentor facilitates and sustains a relationship or a network of relationships [groups] as a medium for change. The Mentor is **not** limited in scope of working relationships and must take responsibility to model, role play, and dialogue with those people who populate the child’s social experience. The competence to meet the diverse and differential requirements of practice with an array of persons, social situations, and social problems encountered, requires the availability of a *repertoire of systems and social interventions*. The practice is not governed by constraints of rule or regulation, but requires that the helper enter into the social experience in a purposeful manner to accomplish preset goals. Social education is an **art** that utilizes the knowledge and techniques within a specific context and belief, toward explicit ends, in a highly **personal** way.

Characteristics & Roles

If we were to try to identify what was desirable in the helping person we might cite the ability to identify with clients; to feel appropriately; to express warmth; to be objective, analytical, responsive, self-aware and optimistic. The conclusion of research indicates the importance of **personal style**; of the *person* exerting *personal influence* in the impact of helping. This is the significant variable. The three other variables normally identified [**method used, phases of intervention, and assessment**] have considerably less impact on the substantive differences in outcome. Although it must be considered that the traditional methods used have been substantively lacking, the helper is not merely a manipulator of techniques, but a composite of the characteristics, both personal and technical, in responsive interaction.

- **The observing self:** This concept includes an understanding of the individual child in terms of how s/he views the world and constructs his/her reality. It is based on constitutional and intellectual factors combined with life experience and learning.
- **Personal philosophy:** This concept includes the moral, ethical and metaphysical factors embedded in the person of the Mentor that ultimately shape his/her practice. These basic beliefs are usually unstructured, unquestioned, and unarticulated, yet they are the very core of behavior. Just as the child needs to become aware, so too must the Mentor.
- **Responsive characteristics:** This concept includes:
 - 1) **sensitivity** - the ability to know and therefore to predict what another individual will feel, say or do; differentiated from projection, identification or sympathy which are processes which relate the state of oneself onto another.
 - 2) **empathy** - the perceiving of the internal frame of reference of the child with reasonable accuracy, and with the emotional components which pertain - as if one

were the other person *without losing the “as if” condition*. A process of incorporation - the taking of the other person’s experience into one’s self in some nonrational way.

- 3) **intuition** - thinking that involves stratagem based on an implicit perception of the total problem. The perception of possibilities, of implications, and of objects as a totality.

- **Interpersonal characteristics:** This concept includes:

- 1) **Acceptance and Individualization** - Acceptance is a differentiating process that demands a profound awareness of values, needs and purposes of the other person. The equivalents of acceptance are “knowing” and “individualization”. One cannot accept another unless s/he knows that other as a distinct individual and not simply as a label or as an example of the species. The offer of acceptance, given without requirement for repayment of reward, creates a new learning experience that can be fraught with ambiguity and fear producing anxiety and apprehension which may need attention.
- 2) **Commitment and concern** - The consequence of knowing - as differentiated from having knowledge about - is an emerging acceptance of the other. Acceptance provides accessibility, a precondition for the emergence of relationships that are free from constraining obligation and conformity. “I am here and available without risk to you”. It is only in our commitment to the other that we intrude and make known our involvement. Commitment may be defined as an involvement with another that is unqualified by conditions of personal security or safety, and as a volition to help without the need for recompense or reward. Manifestations of commitment include constancy, follow-through, and preservation of the other’s dignity and individuality. It is the paradox of intrusion upon the other without forsaking unconditional positive regard.

The helper experiences the same cognitive social dimensions as the child client. Behavior is an active state because it has two dimensions: **intention** - what is meant, its purpose and objectives; and **action** - the manifest performance of what was intended. To some extent, both intent and action are perceived and responded to by the other sentient beings whose response might validate or denigrate all or some part of the behavior.

Action, then is based on what is intended, is met with reaction, and some form of information is channeled back to the actor, where it minutely and gravely alters the original perception, role and feeling. This interrelationship is the reactor’s perception and codification by the original actor. Thus, *observer created reality*. Our behaviors are modified by what we *think* exists, not necessarily what is.

This feedback, while necessary to regulate the stability, the steady state of organisms in relation, is often predicated upon the **preconceived** notions of what is expected of both the actor and the reactor. Whether the actor misreads the state of being, chose the wrong

words, or whether the action was untimely is thus predicated upon how s/he perceives the event, how s/he understands what is taking place, and how s/he believes s/he should now act. The concepts of attribution [what connotation is attached to the words, actions and/or intent] and expectation [what *should* happen next or what role I am playing] are significant to understanding the feedback process. NeuroLinguistic Programmers make several presuppositions about communication and feedback which merit consideration. The first and most powerful is that:

The Meaning of Your Communication is the Response it Elicits.

You cannot assume that the message you intended to send was the message received. The only indication you have is the response [feedback]. If you pay a compliment to someone and they slap you, it is more intelligent to remember that's the way to insult them, and try something else if you want to make them feel good.

Resistance is a Comment about the Communicator

It's up to the communicator [Mentor] to be flexible enough to get the message across that they intend, and be sensitive enough in their observation to notice if their communication is having the desired response. It is not a failure of the child as receiver of the message, even though we recognize that the child 'filters' the information through his/her own 'inner logic'. But if we intend to ensure that the child receives the proper message, we should not respond to an unexpected response, but rather:

If what you're doing isn't working, Do Something Else.

If you try one key in a lock and it doesn't fit, you wouldn't continue to just try harder. You'd get another key. People often to just try the same thing over and over, harder, louder, and meaner. It's easier to just calmly get another key, and another, until you find the one that fits the lock, smoothly unlocking what you're seeking.

While the Mentor is specifically charged with helping in a purposive way, the child must become aware of this process and begin to rigorously analyze evidence to support or diminish his or her codification. It is incumbent upon the Mentor that s/he be extremely cognizant [*mindful*] of her own processes. S/he [the Mentor] must maintain the *beginner's mind* without preconceived notions and use *formal dialogue* to determine to what extent the action supported the child's intentions and how the intentions were formed. The Mentor must maintain a professional state of consciousness which maximizes the opportunity to meet the needs [expressed and unexpressed] of the child.

PERSPECTIVE

A large number of the children that will be served will be labeled Emotionally and Behaviorally Disturbed [EBD] or Seriously Emotionally Disturbed [SED]. These are often children who exhibit high levels of behavior which conflict with the teacher's &/or the principal's expectations and standards. Others are children not able to adjust to the

expectations and behaviors of peers in socially interactive settings leading to a pattern of aggressiveness. Either the child is described as acting out [externalizing] or socially withdrawn [internalizing]. Regardless of the pattern, there are two primary adjustments that the child must make to 'succeed' in the common social involvement of the school. One involves adjusting to the behavioral expectations and demands of the teacher in the classroom and exhibiting skills valued by teachers. The other is adjusting to the expectations and behaviors of peers; demonstrating appropriate play behaviors and developing friendship patterns. Failure to adjust in a manner that avoids conflict with adults and peers leads to likely removal from community settings, although those children who are external are usually considered more problematic.

Chronically aggressive youngsters are often markedly deficient in alternative social behaviors. Antisocial and prosocial behaviors alike are learned behaviors. Manipulativeness, teasing, cheating and bullying, as well as altruism, cooperation, sharing and empathy appear to be learned largely by means of either observational, vicarious experiences (e.g., seeing others perform the behavior and receive reward for doing so) or direct experiences (e.g., enacting the behavior oneself and receiving reward for doing so).

But simply learning social skills is probably not enough to make adjustment workable for children who have experienced high levels of rejection. "Far too often parents are indifferent or unavailable; peers are the original tutors of antisocial, not prosocial behavior; and teachers have written the youngsters off years ago. In addition, such youngsters are typically exposed to highly aggressive role models. At the same time there tend to be relatively few, countervailing prosocial models available to be observed and imitated. When they are, however, such prosocial models can apparently make a tremendous difference in the daily lives and development of such youngsters." Werner & Smith [1982] clearly demonstrated that many youngsters growing up in communities characterized by such aggressive models were indeed able to develop into effective, satisfied, prosocially oriented individuals if they had had sustained exposure to at least one significant prosocial model. Similar results have been reported by Ellis & Lane [1978], Hawkins & Fraser [1983], Kauffman, Gruenbaum, Cohler, and Gamer [1979] and Pines [1979]. (Adapted from Goldstein - 1994). The development of Mentors capable of providing such sustained interest, knowledge, trust and skill building techniques is a requisite of transforming the child serving systems.

Since such models are scarce in the real world environments of these children, this becomes a coveted role of the Mentor. As a **significantly trusted** individual and a sustained source of support, the Mentor can provide the stimulus for the child to seek to adjust prosocially, which provides a self-directed basis for change. Too often, adults attempt to impose change on children with the expectation [or hope] of achieving positive results. Since some of the interventions have benefit, in and of themselves, such change occurs often enough to provide random reward for a poorly oriented strategy. The strategy of social education is quite different. It is to allow the child to direct the change effort.

Engagement in a Plan of Change

“Which skills shall be taught, and who will select them? This is as much a motivational as a tactical question, for to the degree the youngster can expect to learn skill competencies that s/he thinks are presently deficient, but can be very useful in real world relationships, his or her motivation is correspondingly enhanced.” [Goldstein - 1994]

This leads to an ongoing negotiation between the Mentor and the child to determine what areas are most affected by cognitive or behavioral skill deficits and what training might the child **authorize**. The process is developed through what we have called a **formal dialogue**, which simply put is an *intentional* process of Socratic questioning which opens the child up to consider what is problematic, what might be the conceptual basis of needed skills, and whether they are interested in pursuit. The formal dialogue also provides the Mentor with purposeful things to talk about as stimulated by the ‘action in the arena’. The formal dialogue is directed toward the discussions of the issues that the child determines are the problems and helps the child to formulate alternative solutions: ‘good choices’ and ‘bad choices’ regarding response to these problematic areas. The child may choose the context of the dialogue, the Mentor molds the intention of the conversation. This is often done through analogies or social stories and not directly through ‘*addressing*’ a problem.

The Mentor and/or the formal dialogue must be able to capture and hold the interest of the child, if any training is to take place. The authorization for training will most often be behavioral, not verbal. The child allows the Mentor to continue discussion regarding the identification of the problems or mental constructs concerning the skill, and participates in role playing past or expected scenarios. The literature is clear that the child’s degree of involvement is the best predictor of gains. This, we suggest, is because when the child participates fully, they have fully authorized the Mentor to help.

The first skill taught should be the one likely to yield immediate, real world rewards and should be identified by the situation. The Mentor will need to be able to handle situational approaches and to develop “formal dialogue” appropriate to the skill deficit identified. The skills themselves are divided into three separate [although overlapping] categories: **interpsychic**, **interpersonal** and **utilitarian**.

Interpsychic skills are involved with helping the child determine how s/he thinks and how to adjust that thinking over time. Since thought is the mother of action, how the child thinks about self, situation and prospects is a significant predictor of generalized behavior. It is important to note that the focus is on **how** the child thinks, not **what** s/he thinks. The determination of content of thought is always the child’s. The role of the Mentor is to help the child become aware of those thoughts, attend to them, learn to analyze them for utility [pleasure/pain], and to consider alternatives to those which produce more pain than pleasure. Finally, to teach the child methods to change the

distressing thought into the alternative. Interpersonal skills are those skills involved in relating to other people and include a long list dealing with communication, feelings, aggression, stress and planning. Utilitarian skills [often called life skills] deal with personal care, finances, homemaking and employment skills.

Significance

There is tentative suggestion in the literature that subject-Mentor racial similarity would affect improvement on self appraisal and self concept measures more than it would in other areas, so for purposes of children with these special needs, such congruity is encouraged wherever possible. When it is not possible, the understanding of the nature of the child's culture, is important - this may require a lot of listening and asking. This does not require that the Mentor have personal relations with the culture, but is predicated on the Mentor's ability to put aside his/her own cultural perspectives [have a beginner's mind], identify apparent anomalies and ASK.

Once having understood a different cultural perspective, it is required that the Mentor respect the perspective. This is not simply a matter of accepting it as right, for it may be respected and also not be useful. Respect for ideas does not mean that they cannot be questioned; only that they be treated as important considerations. In some cultures, it is important for both boys and girls to demonstrate that they can produce offspring, *before* they become eligible for marriage. This is a very important consideration which varies considerably from mainstream American social thought. One can respect the cultural value while still helping the child/family to consider the consequences of its implementation in this time and this place. Whether they choose to continue to support their old cultural values or to adopt a new one, is not the issue. The conscious consideration of a new set of consequences, however, is.

It is additionally important from the research that the Mentor follow the child's pace, not his/her own. This is not to say that slower children cannot be helped through these techniques, only that the child needs time to absorb the conceptual basis for the skill. Less intellectually developed children may need more explicit direction, at least in the beginning. Specificity-generalizability of the self instruction interacts with the age of the subject. Bender [1976] found that explicit rather than general strategies were more successful with first graders, while Kendall and Wilcox [1980] found conceptual rather than concrete self-instructions most effective with eight to twelve year olds. [as reported by Kendall & Braswell - 1985]

The Mentor is there for the child, but must deal with family and school personnel. The development of clarity in such roles is mandatory to success. It is not sufficient for the child to 'adapt' to the standard expectations of the school, the school must accept and sustain that adaptation. Since the school [and often the family] has or is very close to writing the child off as 'incurable' [which often is the precipitating factor that requires the involvement of the Mentor in the first place], such acceptance is not likely to come very easily. Thus the Mentor must assume some responsibility for preparing the family and school to accept and reward the child's changed behavior. Developing a concordance

with the family and/or school regarding the factors involved with the helping process is probably a necessary anticipation of such expectations.

To suggest that the Mentor role is difficult is to understate the situation. The Mentor is involved at a time of crisis, when the child is considered 'out of control' and the next step to be considered is usually to remove the child from community environments. The Mentor is not a part of the environments in which the child is participating, but will often be expected to be an 'ally' by the adults populating that arena. The Mentor must often deal with a child hostile to adults in an environment hostile to the child. It is important to not attach 'blame' to these difficulties. People behave the way they behave because that is what is expected. It is difficult for adults to behave differently when their 'complaints' about the child receive so much secondary support. In the long run, changing the culture to one which does not tolerate 'blaming' at all would be a most successful outcome.

Opportunity is the other side of challenge. The opportunity for success is significant. The Mentor may be the first adult to take a personal, sustained interest in the child. The child does not need to share the Mentor, although such sharing will become a part of the developmental process. The Mentor can be a catalyst for change where failure is the norm.

Knowledge & Skills

Cognitive and behavioral approaches have been used throughout the history of man. As natural components of life, they have occurred naturally for good or evil and have been extensively honed by spiritual leaders from the oldest known records of the Vedic teaching to Buddha and Jesus. Recent works by Bandura, Seligman, Ellis, Beck, A. Goldstein and many others have not only documented the effects of such interventions, but have keenly focused on shaping positive effects which result in enabling persons to improve their ability to develop mutually satisfying and gratifying relationships.

It is almost universally recognized that how a person thinks about themselves, others and future events determines their selection of functional behaviors. It is also securely documented that at some level all behavior is (or at one time was) "***positively intended***". It is or was perceived as appropriate given the context in which it was established, from the "***inner logic***" point of view of the person whose behavior it is. It is easier and more productive for the helper to respond to the intention rather than the expression of a problematic behavior.

- Consider the positive intention(s) behind the behavior(s) associated with the issue or situation.
- What could be the positive intentions (protection, attention, establishing boundaries, etc.) behind the behaviors of the other person and/or your reactions?

People make the best choices available to them given possibilities and the capabilities that they perceive available to them from their model of the world.

Additionally, it is recognized that the selection of appropriate behavior can be dramatically reduced if requisite social skills are not available. It is only now becoming clear as to how these factors interrelate in a cycle of action/reinforcement which leads either to socialization or distortion and deficit. A distorted picture of the world makes one less likely to choose appropriate behaviors, even if s/he has the skills; and if a lack [deficit] of skill results in inappropriate behavior, it is likely to result feedback which impacts one's perspective of the world.

Finally, the status of ritual becomes apparent as the process of telling oneself [self verbalization] and others balanced and rational things [e.g., belief in God, belief in one's self as a good person] help to create a serenity, which is reciprocated by social reinforcement. It is, perhaps, a process of 'survival of the fittest' that our gods have gradually evolved from many to one; and from fear provoking to loving. The serenity that occurs from a belief in a loving god is apparent and the term 'enlightenment' evokes the cognitive qualities that bring it about.

Moreover, since these cognitive activities are a normal part of everyday functioning in process, if not in content, they are non-intrusive interventions. No one can *make* you think anything; that is an *internal* decision. For most of us that *decision* is unconscious and based on a history of experiences and interpretations of which we are not aware. Cognitive Behavior Management provides ways to help people make *informed* decisions in regard to self, others and future prospects and provides the skills for doing that. The person, however, decides what is best for him/herself. One may choose to be a criminal regardless of the problems in living that such a choice creates. The fact that most people, given the option won't make such a choice is a positive statement about human beings.

There are three practical basic conventions in Cognitive Behavior Management and social education:

1) ***Cognitive Restructuring***: This is an intervention process usually done with individuals, although it can be done in groups. The process is predicated on the assumption that when core beliefs about self, others and future prospects are maladaptive, they must be changed in order for the person to find serenity in living. The process has two levels, and usually starts with *cognitive error correction*.

a. Cognitive error correction is based on the assumption that irrational thoughts create irrational behaviors and can be moderated by changing the underlying thoughts.. Cognitive error correction addresses 'errors' which occur in automatic or reflexive thoughts leaked by 'self talk'. Such errors are grouped such as personalization, generalization, 'shoulds', etc. By making the client aware of his/her nonconscious thoughts, and attending to these thoughts by documenting in journals or counting, the client is then helped to analyze the thoughts for utility [pleasure/pain]. When through are found to produce through their own

emotional value and/or through the behaviors the engender, to be more painful than productive, the client is then helped to find or create alternative solutions. Once an alternative is selected, habituation is used to make this alternative thought a part of the nonconscious operation of the person.

b. While for many, cognitive error correction will be sufficient, for some it is important to address the core beliefs regarding self, others and future prospects and with the mental schema and scenarios which supports these core beliefs.. This requires a process of helping the individual 'ladder' down from the automatic thoughts to the core mental schema. As the person is able to identify his/her core beliefs, the same process of awareness, attendance, analysis, alternative exploration and adaptation. In addition, such broader restructuring addresses *attributions* of success and failure and the *expectancies* this engenders.

Such correction or restructuring is a self help process as only the client decides what thoughts [beliefs] are distressing, which need to be changed and what alternatives are acceptable. The Mentor provides the process through which change can occur - which is a skill which can be used in the future - and provides support through the process.

2) ***Cognitive Behavior Social Skills Development:*** This is a direct approach to improving a person's interpersonal relationships. Critical elements in the approach are:

- definition of the problem or target behavior for improvement
- assessment of the extent to which the problem or behavior occurs, and
- development and implementation of systematic intervention plan.

Goals associated with general affective growth, such as enhancement of self appraisal or the development of a personal set of values, are not a primary focus. Instead, friendship skills, such as greeting, asking for and returning information, inviting participation in activities and leave taking are taught. Other programs target social maintenance skills [such as giving positive attention, helping or cooperating], or conflict resolution skills [such as nonaggressive, compromising or persuasive behaviors]. Any behaviors believed to contribute to successful interpersonal functioning may be the focus.

3) ***Culture Restructuring:*** A culture is a many faceted perspective, perhaps best seen as a set of control mechanisms - plans, recipes, rules, instructions, which are the principal bases for the specificity of behavior and an essential condition for governing it. Since these variables have generally become repetitious and habitual, they have become nonconscious mental contexts, which for people who are committed to it, there becomes an inability to consciously think consistently of the alternatives to their own, stable presuppositions. If someone asked us to

write down the basic assumptions of our cultural paradigms, few of us could do it. And yet we could not operate without them.

These conventions seek to correct problem in living which occur out of two different paradigms or perspectives as indicated below.

| <u>DISTORTION PARADIGM</u> | <u>DEFICIT PARADIGM</u> |
|---|--|
| Beliefs, attitudes and thoughts lead to overt behaviors which define quality of life. | Lack of “thinking skills” [e.g., awareness and attendance to inner dialogue, empirical analysis, empathy, situational perception, etc.] and “interpersonal skills” [e.g., problem-solving, sharing, reciprocation, etc.] :a lack of social competence causes problems in living. |

These two circumstances are always interactive. Additionally, both paradigms assume that natural social learning through personal experience has resulted in behavior patterns which are ineffective in developing mutually satisfying and gratifying relationships which is the arch requirement of a quality life. The outcome is *problems in living* which the person usually would like to resolve. Thus the motivation for involvement is enhanced. The sequences of modeling, behavior rehearsal, feedback and reinforcement are essentially the techniques of both paradigms as they mimic natural social learning constructs. The child learns first what parents and significant adults model and reinforce and then learns what peers model and reinforce.

Each of these conventions has it’s own *protocols*, *techniques* and *procedures*. However, once the principles of the conventions are understood, the Mentor will be able to create techniques which suit the specific needs of the child. The use of individual technical structures will allow for the ability to construct specific methods to address the issues that the child is presenting. In addition, by understanding fully the principles, the Mentor will also be able to see the more clearly interlinkage between the conventions.

The restructuring of a culture is a process which includes ‘seeded’ content [e.g., prosocial words, icons, etc.] and teaching rituals [e.g., modeling, behavior rehearsal, feedback, and reinforcement] in order to shape the nature of the thoughts and behaviors in prosocial ways. This cultural approach is usually used preventatively, but is worth consideration in all environments that children inhabit. For a child who is receiving remedial service of cognitive error correction or cognitive restructuring, work with the family to change the messages being sent is imperative.

The process followed in developing a prosocial culture [e.g., a culture which emphasizes positive reinforcement of prosocial behaviors rather than punishment of antisocial behaviors] has elements which *appear* to be quite different than the other conventions

since the intervention itself is with a socio-cultural entity [school, family], rather than with an individual or the members of a group.

The word culture has in it roots a concept of ‘inhabiting a place’ - however, perhaps the best way to understand culture and its influence is to understand it in terms of *fields* and *force*. Just as a magnetic field exerts a force; so to do certain relationships in the human behavior stream. As a social unit the family probably has a stronger force on the child than the school; but both have a force of control. Dubin [1973] suggests that culture is best seen as a set of control mechanisms - plans, recipes, rules, instructions, which are the principle basis for the specificity of behavior and an essential condition for governing it. The ability to provide such controls which are ‘prosocial variables provokes a cultural evolution from present behaviors and their management to a new level of control.

Another way of discussing culture is to suggest that the human niche is characterized by a constellation of interrelated behaviors that depend on intensive information manipulation and that are supported by a series of novel or greatly elaborated cognitive adaptations. This zoologically unique constellation of behaviors includes locally improvised subsistence practices; extensive context-sensitive manipulation of the physical and social environment; *"culture", defined as the serial reconstruction and adoption of representations and regulatory variables found in others' minds through inferential specializations evolved for the task; language as a system for dramatically lowering the cost of communicating propositional information; tool use adapted to a diverse range of local problems; context-specific skill acquisition; multi-individual coordinated action; and other information-intensive and information-dependent activities* (Tooby and Cosmides 1992).

This suggests that by altering the representations and regulatory variables, one is able to influence the minds of the people who communicate propositional information with the local group. Interestingly this culture, as it is ‘seeded’ with the cognitive variables as shown on the chart below, can compare the processes with cognitive restructuring so that we can see the similarities of both. By using a ritual which is based on skill building as a means of ‘seeding’ the culture, the variables are shown as a process of cognitive restructuring, while the *in situ* or *actual* use provides the opportunity for social skill building direction.

Process Comparison

| Culture Restructuring | Cognitive Restructuring |
|--------------------------|------------------------------------|
| Stop & Think | Awareness |
| Good Choice - Bad Choice | Evaluate |
| Steps/Choices | Alternative Solutions/Consequences |
| Just Do It! | Choose |
| How did I do? | Reinforcement |

Outside of the behavior action aspect as opposed to the cognitive action [decision] of step four, the steps are identical to the cognitive restructuring phases used in counseling. In

addition, for the person in the culture who is reinforcing the prosocial culture by raising the ‘stop and think’ question, the process is one of *skill building*. The helping person may need to model the behavior, allow a behavior rehearsal, offer feedback and reinforce. So the prosocial culture is providing both a cognitive restructuring and skill building environment.

The change to a prosocial culture places a positive high *expectation* which in turn becomes a ‘self fulfilling prophecy’ and that is very important. Such prophecies are said to occur when belief concerning the occurrence of some future event makes one behave in a manner that increases the likelihood that the expected event will occur. These *interpersonal expectancy effects* demonstrate how much individual human beings are interrelated. There are two meanings to expectancy - *likelihood of occurrence* and *ought to*; and it is the former which creates the phenomenon. Thus the more the people in the culture comes to believe that the members *will* act prosocially, the greater the likelihood that it will happen. The process of building a prosocial culture subtly creates a different belief system in the members through the implanting of the ‘seeds’ of language and providing them with actions that support the likelihood of occurrence.

The determination of the context of these interventions varies widely depending on whether one is serving children or adults and by the descriptors of the problems in living. Offenders and psychotics have the same essential needs for the interventions.

Technical Structures

Three other ubiquitous technical structures are important for the Mentor to know and understand as basic to the use of all interventions.

Self-Verbalization:

This technique is about improving the human thought stream through self instruction to alter the constant monologue that goes on mentally as we name events, judge experiences, compare ourselves with others, and comment on just about everything. The focus of this meta technique is to teach children to ‘stop and think’; how to slow themselves down and examine thinking alternatives. The study of the functional relationship between language and behavior that occurred within the field of child development has a major influence on “self-instruction”. The most frequently cited are the theories of Luria and Vygotsky. Vygotsky proposed that internalization of verbal commands is the crucial step in a child’s establishment of voluntary control over behavior. Luria, Vygotsky’s student, elaborated a developmental theory of verbal control that focuses on two interrelated developmental shifts. One shift concerns the origin and nature of the speech that does the controlling. Luria suggested a sequence in which the child’s behavior is initially controlled by the verbalization of others, usually adults [other-external]. In the next stage, the child’s own overt verbalizations direct his/her behavior [self-external] and finally, by age 5 or 6, the child’s behavior is controlled by his/her own covert self-verbalization [self-internal]. The second type of shift or change concerns the type of control provided by these verbalizations. Luria theorized that during

the other-external and self-external phases verbal control is primarily impulsive rather than semantic. Impulsive control refers to speech as a physical stimulus that can inhibit or disinhibit responses. As the child develops, the type of control shifts to semantic, with the child learning to respond to speech as a carrier of specific symbolic meaning. As a result of these two shifts, by approximately age 6, the normally developing child acquires self-internal regulating speech and is responsive to the content of verbalizations. [adapted from Kendall & Braswell - 1985] This theoretical establishment of the importance of the role of private speech in self-initiated regulation and direction of ongoing motor behavior provides the basis for self-instructional interventions.

There is research which indicates that self-generated strategies, such as self-instructions and self-praise, have helped children reduce frustration during delay of gratification tasks. When provided with a specific cognitive plan the children were able to work longer in distracting situations. Similar strategies have also been utilized in rule-following behavior with results suggesting verbalization of simple self-instructions can reduce rule breaking in children.

Two styles or methods of training in self-instruction have been developed. **Noninteractive** training involves the Mentor merely telling the child what to do or say. Inclusion of greater child-Mentor exchange would provide the **interactive** alternative. The interactive method has at least three levels of training complexity ranging from self-instruction as self-directed verbal commands where the process is still relatively simple and unelaborated training is provided in a context of more operant behavioral formulations to a final version that employs modeling, self-instruction and reinforcement. The third group is more like the skill training procedures discussed earlier.

The fact that children can be helped to control their own behavior by simply telling themselves to do so provides a simple, subtle, but potentially effective beginning to enhancing the child-Mentor helping relationship. It is a shame that the only use of such self instruction for children seems to occur in the arena of sports.

Metaperception:

The process of using metaperceptions [visualization, imagining] for the purposes of helping people change is not new. Cognitive clinicians have been doing this for years. However, over time, research and practice have expanded the dimensions considerably. We can, for example perceive ourselves in regard to time as 1) in the present, 2) in the past, or 3) in the future. We can also change not only the time, but the place and the circumstances in which we find ourselves.

In addition, we can perceive ourselves in what are called *positions*, we can view ourselves in the *first* position as actually the one experiencing the event, in the *second* position, as the other person in the experience, or the *third* position, as a by-stander watching the event occur from the outside. The movement to these different positions changes the emotional content of the experience. Thus we can view as a movie, ourselves experiencing a phobic reaction to a stimulus, without feeling the emotional fear in the

process. Or, conversely, we can view that same experience from the first position, as a process of desensitizing ourselves to the emotional feelings caused by the stimulus through imagined exposure.

We can even perceive ourselves in a different time and place. How many different perceptions of ourselves perceiving ourselves that can occur in a single person is open to question. With practice, such metaperceptions can probably be expanded.

Cognitive clinicians and NeuroLinguistic Programmers have extended metaperception beyond thoughts to images, smells, tastes, distances, brightness, etc. And the switching of these submodalities has apparent effect upon our thinking. These inner states are filled with variables, some of which are hard to label, which affect our affect. For better or worse, we can group these into four types:

- mental representations of the world: including symbolic mind states such as ideas, words, and the abstractions about sensations [images, smells, sounds, touch and taste].
- instincts: are another set of inner state variables such as curiosity, anticipation, etc. which have mind/body connections, but are sometimes included as emotional states.
- sensations: include actual body feelings such as ‘goose bumps’, hair raising, etc. One can actually feel these sensation in our minds/body rather than just talk about the abstractions of them.
- emotions: while including instincts and sensations, emotions are evolutionary developed components which have developed over time into an early warning system. The emotion of fear warns us to prepare to fight or flee, and we begin to have bodily sensations, which indicate that the preparations are proceeding.

Of course these groupings are arbitrary and the various sub-components can be grouped in various ways. We can mentally group an instinct [curiosity] with an emotion [fear] or an idea with a sensation. These *in-depth* perceptions are generally nonconscious and are combined into mental contexts or filters which help us to preconceive the way in which we experience the world. By consciously changing these submodalities, we change the mental content of the experience.

This ability to metaperceive ourselves and the reality of the experience also allows us to alter our present mental contexts and create new ones. It is this process which allows us to change. But change is not always easy. Just wanting to change doesn't mean that we're willing to do it. We are all coherency-seeking systems. Our personalities are a coherent set of mental contexts, we are the sum of our thoughts. We are set up at every level to try and maintain coherency, that is, to maintain ourselves as we are. We are operating out of a set of mental contexts, which include all of our beliefs and our strategies, etc. That's what keeps you *you* and me *me*; everything that comes into a person's world goes through their own particular filters and gets distorted, generalized, and deleted. If it weren't for that, you would not be you, but simply a reflection of whatever environment you are in at the time.

So we are inherently organized to maintain who we are. But because we are human beings, we can represent in our subjective experience what it's like to be other than who we are: somebody who doesn't handle criticism well can imagine handling criticism well and say, "I want to be like that". But the person who wants to handle criticism well is still that same person who doesn't, and who is also set up to stay who s/he is.

This is the fundamental clinical conundrum. The client is saying, "I want to change. But you have to change me through the set of filters [thoughts, ideas, beliefs, scenarios and schemas] that I am." And anything you try to introduce will be generalized, deleted and distorted through these filters in such a way as to keep me the same".

The clinical challenge is: How to get through these filters and make it possible for the client to reorganize his/her filters in a new way - in a way that supports the outcome that s/he wants?

That is the purpose of all the metaperception. You set up a ritual context through metaperception, that allows it to be possible for the client to open up his/her set of filters and to allow a new experience to come in long enough for them to have that experience and then re-form their filters around it.

And if the client does re-form his or her filters around this new experience, that's when the client changes.

There are other technical structures that could be addressed. We have elsewhere identified eight such structures which including *metaperception* and *self-verbalization*, also add *psychoeducation*, *goal development*, *reframing*, *anchoring*, *relaxation*, and *problem solving*. We struggle to order these and have essentially have decided that reframing is the essence of all of the structures - since all seek to change either the meaning or the content of the experience. Behavior modification is used to support cognitive techniques through the use of consequence [reinforcement], but otherwise is considered to be of lesser impact, except for those incapable of processing cognitive concepts. It should be noted that Myrna Shure has demonstrated that four year olds can learn problem solving, so the cognitive structures have meaning beyond the usual expectations. In fact, it is interesting to note that people with mild or moderate mental retardation are substantially more likely to end up in the mental health system than those with severe mental retardation. They are able to think about their thoughts and their comparisons to other and their judgements about themselves are prone to maladaptation without significant social input.

Each of the technical skills can be combined with others and all can be used with or without the participation of the other people in the environment. We will explore their use in more detail in future volumes. The Mentor must have a basic ability to use these skill as part of the relationship with the child. Many of the skills are equally applicable to peers, family and school personnel. These skills are the baseline skills necessary to set the tone for the accomplishment of the more specific skills which will be defined. While each

of these techniques should be useful in and of themselves and especially in strategic combinations suited to the individual child's needs and authorization; the true focal point for change continues to be the significance of the Mentor's relationship to the child.

Behavior Modification

Behavior rules provide the underpinnings of the cognitive implementation. Behavior modification techniques are relatively easy to learn and use and have a long history of successful application. These techniques, like those above are derived from formal learning theory and derive from a premise developed by Skinner and his followers: **behavior is largely determined by its consequences**. In an operational sense, this premise has found expression in techniques that by one means or another contingently present or withdraw reward or punishments [e.g., environmental consequences] in order to alter the behavior that precedes these consequences. Specifically, if one's goal is to *increase* the likelihood that a given [e.g., prosocial] behavior will occur, one follows instances of its occurrence with positive consequences, that is, by means of some technique for presenting a reward or removing an aversive event. If one's goal is to *decrease* the likelihood that a given [e.g., antisocial] behavior will occur, one follows instances of its occurrence with negative consequences, that is, by means of some techniques for presenting an aversive event or removing a rewarding event. [Adapted from Goldstein - 1994]. The first approach could be called a *positive* contract, and the second a *negative* contract. Most behaviorist believe that the positive contract is the most effective and avoid the negative contract.

A *reinforcer* is an event that increases the subsequent frequency of any behavior it follows. When the presentation of an event following a behavior increases its frequency, the event is referred to as a *positive reinforcer*. Praise, special privileges, tokens or points exchangeable for desired items are a few examples of positive reinforcers. Such reinforcements can be used by the helper to support the child's use of desired skills and behaviors. Such actions, however, should be considered thoroughly and planned. Too often, positive reinforcements are given at times and for behaviors that are not truly positive and conflict, not with the external context of the situation, but with the internal or mental context of the child in the situation. If the child believes that the helper is merely trying to manipulate him/her s/he may respond with anger; if, the child believes that the reinforcement was unearned, s/he may reflect on the trust relationship and find it wanting; and if the child is used to punishment, rather than positive reward, s/he may simply not believe him/her self worthy. On the other hand, most adults are aware of children who continue to behave in unacceptable ways despite continued negative reinforcement.

In trying to determine why a child continues to behave in ways that are negatively reinforced, despite these positive reinforcements, three possible rationale are suggested: 1) such reinforcements do not work, 2) the child is receiving positive reinforcement that outweighs the negative, or 3) that the child lacks the appropriate skill competencies to do what is required.

We speculate that all three ideas may be true. It is believed that negative reinforcers are much less effective than positive reinforcers. It is also felt that the child is often receiving positive reinforcement from somewhere else for the behavior [the slang “baad” meaning good might be an outcropping of the idea that such behaviors are well supported in the subcultures of some children]. The helper may find it beneficial to explore with the child what these positive reinforcers might be for him.

In the final analysis these principles are used to maximize the gains made in cognitive techniques.

Conscious use of self:

Finally, the Mentor must be able to engage the child in a trust relationship; to become significant to the child in order to be authorized to help. Once this significance is established, it provides a tool that can be used with the child. The Mentor must understand that people change because they desire to change. By using the relationship, the Mentor places a dichotomy decision on the child: e.g., if I want this relationship, I must modify my behavior. The child assumes that the Mentor will withdraw the relationship if the behavior does not conform. This however, is not the case. The Mentor will never withdraw from the relationship while still in the employ of the child. However, the Mentor, by articulating specifically and clearly his/her difference in perceiving the world and the child’s responses to that world, clearly states a target for behavioral change. The Mentor continues to expect that the child will achieve the target behavior and “trusts” them to do so. The child must seek ways to conform or “trash” the relationship. Even if the child chooses to “trash” the relationship, the Mentor, by responding with continued support changes the reality for the child and creates a new level of trust.

DUTIES:

- A. The Mentor must establish him/herself as a **significant individual** in whom the child can trust to act in the right and proper way as a **condition of the relationship**.

This commitment means that the Mentor will do exactly and consistently what s/he says s/he will do; although not necessarily what the child would desire that s/he will do. This trust is not based upon a **personal** commitment, but upon the professional commitment of the Mentor to respond on **behalf** of the child. In order to actualize this commitment, s/he also needs to recognize his/her responsibility to the greater society and articulate to the child **exactly** how and when s/he would invoke this commitment and how it is responsible to the child’s needs.

This requirement is a difficult one that demands a great deal of human relations skill. Several characteristics are required.

The Mentor:

- must be **caring**; empathetic to the child's fears, thoughts and fantasies. Bettelheim is correct that 'love is not enough'; however, it is the very best place to start. It is not expected that the Mentor 'love' the child, which is an emotional perspective over which none of us has control. It is expected that s/he 'care' which is an **attitude**, not an emotion. The attitude of caring opens us up for affection, but does not demand it.
- is an **enabler** - s/he empowers the child to act. S/he recognizes that empowerment is not merely the delegation of the authority to act, but requires also the confidence of expectation of achievement. This can only come through acquisition of the skill to accomplish the task and the belief in themselves that comes through the belief that others have in them.
- is **accepting** - s/he assumes an accepting **attitude** in regard to the child's thoughts, fears and fantasies. S/he is effectively amoral in his/her perceptions of the acts of the child; listening without judgement and accepting without condemnation at least until s/he has "walked a mile" in the other's shoes. Children most often do "bad" things in reaction to "bad" things that they perceive having been done to them. Judgements and condemnation reinforce the "righteousness" of their acts. Acceptance offers the potential of remorse. Otto Rank describes the "love experience" as the acceptance of the other person's "willfulness". This does not necessarily condone behavior, but allows for the separation of behavior from the person. Accept the child even in the process of rejecting the behavior.
- **has no points to defend** - defense mechanisms are normal and inherent; they are not professional. They justify our self importance over others. In the significant relationship, such defense is inexcusable. It denies the right of the child to have perceptions, judgements and views which differ from our own and since we are in the status position, defense **automatically gives offense**.
- **sees his/her status as a responsibility** - rather than as a rank and privilege: it is a duty that demands that s/he give of herself to exhaustion without expectation of receipt. Friendly, but not a friend, which requires recompense.
- **believes in the inherent need of every child to reach for success, happiness, power and status** and recognizes the need to offer new opportunities for such achievement.
- **keep his/her own beliefs and actions at least compatible, if not congruent**. S/he need not be clever, only consistent.
- **is a fiduciary** - Black's Law Dictionary defines a fiduciary as "a person having the duty created by his undertaking, to act primarily for another's benefit in matters connected with such an undertaking". Mentors act only on the behalf of

the child, never for the interest of themselves. The Mentor's professional life is not for themselves; personal satisfactions are acquired in personal areas. The implications of this are that **no act** can be taken which is not for the benefit of the child. The Mentor is allowed errors in judgement, providing only that it can be established that s/he believed that the best interest of the child was being addressed by her actions.

B. The Mentor must establish a positive context for change. This requires a service delivery method which is based upon a fundamental philosophical belief in the active developmental qualities of human beings; an **organismic** worldview. The basic metaphor for the organismic model is the living organism such as a plant, and the metaphor for the mechanistic model is a simple machine such as a windup watch. The first is an **active** organism, seeking teleologic goals, unlike the watch, which is deterministic and requires the presence of an "expert" to make it work.

This fundamental position must be accepted as an act of faith. Without it that which is unacceptable, becomes amenable. With it, we can screen theoretical conceptions, service delivery designs, roles and interventions and set the parameters of what we are about. This fundamental truth leads to several salient principles:

- **Change initiative** lies with the child, not the Mentor.

The wish, power and ability to begin and follow through with a process of change is **solely** within the purview of the child being served and neither the responsibility nor the authority can be usurped by the Mentor.

- **Unconditional positive regard** is attributed to the child.

An attitude, not a feeling, of a constructive nature toward the person being served must emanate from the Mentor. This attitude acknowledges the dignity of the child as a person capable of making decisions about his/her own life. This regard is unrelated to the individual Mentor's "feelings" about whether or not the child is "capable" of making decisions; it **assumes** that the child can and does make decisions.

- The Mentor must provide **a pervading climate of positive expectation**.

While it is important to determine that the desired performance is attainable; an overall belief that the child can change and achieve if s/he desires to do so is critical to the change environment. Behavior is determined by a combination of forces in the environment and in the individual. Different environments tend to produce different behaviors. Children have "psychological baggage" from past experiences and a developmental history which has given them a unique set of needs, ways of looking at the world, and expectations about how people will treat them. Each behavior has associated with it, in the child's mind, certain outcomes [rewards and punishments]; and each outcome has a value. The decision to try a new or difficult behavior will be associated with the child's expectation regarding the probability of success.

Part of the personal decision is based on whether others of significance view the potential of success positively. Belief in oneself is highly contingent upon how one perceives other's belief in them. Adults have a tendency to underrate or undervalue what children can achieve.

Some things must be believed to be seen! The Mentor must believe in the strength and dignity of the child if s/he expects to see it. You must believe that skill acquisition can change the world; if you wish it to happen. You must help the child overcome his/her own accepted perceptions. You must become a believer. Children are neither inherently motivated nor unmotivated; motivation depends on the situation they are in. Since much of the expectation in the environment is negatively charged, the Mentor must continue to provide a positive, but not artificial, climate of positive regard.

- **The arrow of time points to the future.**

The child must be helped to find meaning in future events and prospects using the 'here and now' as the means to reach future goals. Interventions that dwell on the past are of far more benefit to the interest and knowledge of clinicians than they are to the changing child. All too often the future is framed in the past.

Adler pointed out that memory is a creative process, that we remember what has significance for our 'style' of life. The Mentor cannot support the child's 'wallowing in the past', but must help them to determine what they want to be in the future. The 'emergence' into becoming 'something different' in the future must be the focus, unless we are dealing with a "here and now" crisis. In the words of Victor Frankl, we must help the child **decide** on a 'meaning to life'.

- **The support process deals with interactions, not insights.**

How a child functions with others is both the process and the outcome issue. This does not preclude some concern with how the child thinks or feels about the interaction, but it emphasizes a focus on the interaction.

- **Each child must be helped to establish an altruistic responsibility.**

The egocentric orientation of clients on themselves continues to support a focus on the problems, not the solution. Each of us must feel that we are capable of contributing to the enhancement of others.

ROLE & RESPONSIBILITY:

The Mentor must establish a role with child, the family and the school. S/he must be seen in a helpful way by each person in these contexts or fail in the mission of change. While the primary focus of change is on the child, the child cannot change alone. The Mentor must understand the child as part of a system whose aspects remain in equilibrium, in

part, through the child's present behavior. The child's behavior, good or bad, does not take place in a vacuum. It requires the reinforcement of the environment in which it takes place. Very few egos are strong enough to sustain a behavior which is not so supported. If the child is behaving in a manner which s/he perceives to be in her best interest and such behavior is seen by others as antisocial, then either the perception must change through clarification of the child's way of looking at the situation or the situation needs to change. The Mentor, however, cannot take responsibility for the situation, only with helping the child evaluate the ways and means of dealing with it.

The Mentor's role has similarities in all situations. S/he hopes to be perceived by the child, the family and the school staff as helpful. S/he can best hope to accomplish this perception by providing a consistent, nonjudgmental response to all concerned. The Mentor cannot be expected to develop a trust relationship with the child if s/he agrees with family or school that the child is "bad" or "incorrigible". S/he can certainly accept that this is the perspective of the other, while maintaining and articulating a more positive perspective.

The Mentor must specify his/her intentions. This process involves the deliberate and intentional activities that represent his/her function, tasks and aims. S/he implicitly provides a model of interaction that instructs the child about the ways that s/he may interact with others in order to accomplish the stated purpose. The Mentor helps the child maintain a focus on what s/he wants to accomplish, rather than "cutting off his/her nose to spite his/her face". Although these actions are part of the socialization role in that they provide order and direction, they are also educational. Here the worker performs a **teaching** role as the means to implement purpose and intent.

The Mentor is **not responsible for the child's behavior**; but s/he is responsible to intervene when requested by school or family in a "trouble shooting" fashion. The Mentor should openly discuss with the family and the school the method of intervention which might be described as **transactional communication**. Based on Transactional Analysis theory, the intervention is a consistent appeal to the "adult" schema [Can we talk this out?] in the child. By continued insistence on talking to the "adult", the child manager avoids getting into "parental" ["You do it because I said to do it!"] roles and responsibilities and helps the child avoid the "child" schema. {I want what I want when I want it!"] and the potential of tantrums and angry outbursts.

The Mentor is not responsible for touching the child and given the distrustful society we live in at the moment, should not do so unless avoidance would clearly lead to possible injury to the child or others and there is the expectation through touching to prevent that from happening. There **is** a responsibility for the Mentor to be with the child; thus if the child runs, the Mentor does not chase, but does follow. This is a subtle, but distinct conceptual differentiation that is very important. The Mentor's role is to help the child and if a child runs, one can presume s/he needs the help. Always, the intervention is embodied in transactional communication principles: adult-to-adult. Friendly touching, such as a tousling of the hair, in a natural supportive way is not prohibited.

The Mentor is responsible for relating to **all** of the children in the child's environment. The Mentor **should take on the responsibility of responding to taunts or ridicule** of the child for having a Mentor and do so within a 'transactional' and Socratic inquiry. Asking other children to articulate what the Mentor is all about and even what difficulties of the client child brought on the Mentor relationship may sound punishing for the client child. However, the child's behavior is not a 'well kept secret' and how other children perceive that behavior is an important aspect in the Mentor/child interaction. The Mentor may need to clarify the perceptions of other children **or** may find these children quite perceptive in their thoughts and feelings and find these useful in helping the client child recodify and reorganize his/her thoughts about the environment. This is not a breach of confidentiality as the dialogue is about what the other children already know and the only response is to clarify where distortion occurs. The Mentor seeks ways to elicit help from the environment and enabling siblings to be helpful to the child with problems in living is a powerful tool.

In similar ways, the Mentor might ask school personnel or family members to clarify the way they think/feel about the client child either in front of the child or in private. The Mentor must recognize that s/he is there for the child and must not allow other adults to simply 'cut up' the child, but s/he should allow each adult his/her own perspective. The Mentor then must try to put forth a more rational and balanced perspective based on the strengths and potentials of the child with an understanding of how negative projections on the child have the ability to rebound into just the behavior which disturbs the child manager. The Mentor tries to insert a 'climate of positive expectation' when talking to any participant about another participant. Thinking the worst is symptomatic. Positive expectation does not require artificial 'rosy' projections and in fact, might be quite a somber analysis of why people might do what they do. But it must always hold open the potential for positive change.

The Mentor has a specific responsibility to discuss with family and school, how to support positive movement by the child. Again, this does not necessarily take place in secret. It is no secret that if we try to do better, we expect some positive reinforcement. It may be that a discussion of what that reinforcement might be and how it would be implemented would be helpful to the child. If, in the worst case scenario, the adult indicates that s/he will never provide such reinforcement; this is an important fact for the Mentor and the child to know. It is the Mentor's job to help the child deal with **reality**, not an artificially created environment. The Mentor's ability to *model* appropriate behavior in difficult situations is an imperative. When a mother said, at the prodding of a meeting facilitator - "I will never reconcile with that girl!" - when speaking of her twelve year old daughter, it was traumatic, but mostly for the observers, the child had heard it many times before. Now the child was hearing with confirmation by a potential support group. No longer was the girl considered 'crazy' and in need of incarceration. Now, while there were still efforts to place her out of the home, the context was for protection of her, not of her mother.

In essence, the Mentor's role in relationship to the child, family and school personnel is that of trainer and technical assistant. S/he is not a replacement for family or teacher, nor

an ally of any one party against the other. S/he attempts always to help each person understand the mechanics of the other and to *bring them together* in goal, if not actuality.

Function

The technical assistance provided to adult family members and teachers may include knowledge of what is taking place with the child, liaison between child and peers, child and adults, as well as increased awareness of, and potential for training child managers in cognitive behavior management approaches.. The technical assistance provided to peers may be liaison and increased awareness.

The training and technical assistance provided to the child consists, along with specific skill training, positive role modeling, interpreter [explaining to the child and others what is taking place (including performance feedback) and exploring with each how they might communicate better]. The Mentor needs to be a catalyst for the child/family/school system. This responsibility will not be enhanced by taking one side against another. Each of the components of the system will have a tendency to blame one or more of the other parts for the results. Part of the role function is to find ways to help each take responsibility for their own involvement.

Authority

Power and authority can be defined as similar phenomena except for the matter of consent. Power is the capacity to control the behavior of another either directly by fiat or indirectly by manipulative means. Authority is differentiated as an established right to determine policies or pronounce judgement on pertinent issues, but includes the committed consent of the other who is responsive or subject to that power. Under this definition, for authority to be effective it must be sanctioned for the promotion of collective goals. Authority for the Mentor then is derived from two sources: the institutional, in which authority is granted or delegated by some sanctioning body; and the psychological, in which it is ascribed by the one who recognizes and accepts that authority. [Goldstein - 1973]

No value judgement is attached to the presence of power and authority in the helper's role performance. They are neither good nor bad, desirable nor undesirable. Instead, these conditions need to be understood as natural phenomena, as the products of the imbalanced, unequal relationship that is typical of practice. The Mentor's awareness of his/her own status in the relationship must effect a less capricious and more judicious and timely use of these assets. The child and his/her family must ultimately consent to the Mentor's authority to help.

Socialization

The Mentor must be concerned with the *socialization of the socializing institution* in terms of helping the organization clarify motives, efficacy, intent and practices that presume to represent the social order of society for the child. This demands the

continuous examination of existing policies, programs and services of the organization and its impact on special populations in functional, ethical and value terms. The Mentor is no more responsible for *changing* the institution [school or family] than s/he is for changing the child. However, s/he has a similar role to play with both. The Mentor's practice has a responsibility for the resolution of value conflicts. They, by definition, serve people who are struggling with value dilemmas. Some complex of opposing values is always in operation and even the contemplation of a change in presenting condition stirs a value conflict about whether one should give up what is painful but predictable for what is uncertain and untested.

If the Mentor has come to terms with his/her own values sufficiently to test their validity, they can become the *translator of community values* and, not infrequently, the regulator to assure adherence. The helper's ability to respond with *genuine and positive regard* for the other as a valued person in his/her own right creates a climate that eases strain and tension. The undisguised interest of the Mentor, magnified by his/her ability to accept behavior without condemnation, places the child in an ambiguous plight. Unable to call upon either his/her typical patterns, s/he is thereby forced to deal with the ambivalence and learn more honest and functional ways of relating.

Teaching

The Mentor manages a learning process that is primarily directed toward the acquisition of knowledge and skills that will aid in the completion of certain tasks or in the resolution of problems related to social living. John Dewey postulated that man is basically an acting being who engages in thinking mainly in the presence of problematic situations. Thus, each new problem situation requires both the construction of new principles and the reformation of desired goals. Principles, goals and intentions then, need to be thought of in terms of their social and interactional purposes. The Mentor manages the opportunities and processes by which the child can learn to resolve his/her own problems.

Providing information - the extent to which one can maximize the positive outcomes of problems solving is in proportion to the adequacy of knowledge about conditions related to the problem and to the steps that need to be taken to solve it.

Providing opportunity for trial-and-error learning - Optimal social conditions within the change environment offer the time, the support and the feedback that permit the child to try out and evaluate new attempts to resolve their problems. Within this context, the Mentor provides and guides the opportunity to rehearse and test out previously unconsidered, risky or disorder problem solving techniques.

Providing instruction and guidance - In the course of problem solving, the Mentor serves to highlight and disclose the effectiveness of one alternative over another, unblock confusion and make possible the most reasonable choice.

Encouraging self-initiated behavior - It is assumed that in-depth learning, growth and change take place only when they are consequences of personal commitment and

conduct, when they are one's own responsible actions. The Mentor's task is to assist in discriminating between behavior that is reactive and self-limiting and behavior that is active and self-initiated.

Reducing dissonance - Any movement toward change and the attempts to devise new principles for action stirs some measure of apprehension and anxiety that impedes or disables the problem-solving process.

Promoting value learning - Any form of learning and change is consonant with a shift in values, a rearrangement of priorities or an assimilation of new values.

Promoting transfer of learning - How persons are able to apply newfound problem-solving skills to other problems or conditions in their lives is indicative of more pervasive growth and maturation. The Mentor should see potentialities beyond the immediate venture and encourage transfer to other pertinent conditions and events.

In contrast with traditional teaching modes that are based on preconceived content and predetermined goals, the teaching role of the Mentor needs to be somewhat more creative and ingenious. The desired outcomes of the change experience are predicted on such imponderable factors as the goals, potentialities, and existential elements not only in the child, but in the related systems.

This basic orientation is essentially the same for all of the helpers in the new system be they Managers, Supervisors, Mentors, Tutors, Coaches or the one other major role: **Facilitator**.

Facilitator

The role traditionally entitled 'Case Manager' is more appropriately focused on the facilitation of the child/family through the various bureaucratic systems of care. The child and the family need to be helped to negotiate the bureaucracy within which the services are rendered. Entry into services either voluntarily or because some institution feels that you need such help requires an understanding of how to best make use of the helping system. The first process that must be undertaken is that of *planning*. No family can make ideal use of a system of help without providing to that system a **vision** of their preferences for outcome and an indication of their own measures of quality. A service facilitator, who is neither a part of the referring institution, the funding institution nor the helping institution, but who has an inherent status which is capable of influencing these institutions, is a required part of making the helping system effective.

The basic constructs of the planning have been delineated previously and do not need to be revisited here. However, the facilitator must be very clear about the *nature* of the planning process in regard to an individual child/family and be able to separate this *individual preferred outcome* focus from organizational and/or system outcome focus. As a representative of organizations and systems, the facilitator will often feel pressure to achieve organizational results, which may differ from the individual preferences. For

example, it has been a basic value articulated by this methodology that the children with problems in living should be *included* in neighborhood schools and regular classrooms. One can assume that the system or organization which supports such outcomes would expect to see individual children included. The child/family, however, for reasons of their own, may choose to be *segregated* with other disabled children. The facilitator must understand that the first priority is to enable the child/family to plan an effective service delivery design which meets their expectations [exclusion], even though this is precisely contrary to the needs of the organization. Only, with this process effectively proceeding can the secondary responsibility of providing information which may help the child/family make a different decision [inclusion] be carried out. The fact that these processes may occur simultaneously should not detract from the child/family feeling confident that their directives are being followed.

Goal: To assure that all children, regardless of disability, are served within their local school, are with their families, and have enduring relationships with significant adults.

Objectives:

- To provide the information and supports necessary to maintain children at home and in their local school and community.
- To build on existing social networks and natural sources of support.
- To maximize the family's control over the services and supports that they and their child receive.
- To provide support for the whole family.
- To encourage the integration of children with disabilities in the community.
- To focus out-of home and/or school as a temporary arrangement with efforts directed at reuniting the child with family and local school.
- To assure that children who cannot be reunited with their family have every possibility at family and community permanency.

Process: Achievement of these goals and objectives is through the assurance of a process, which is child/family directed and which entails a creative involvement of various community and institutional entities towards an implementation of supports that will enable a child with exceptionalities to partake of '**everyday life**'⁵⁹.

Family Context

*When government becomes involved with families because of a child's disability, it is important that it be recognized as a **family enterprise**, in which the family is seen as the*

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Everyday Lives is a vision of the future developed by the Pennsylvania Office of Mental Retardation in 1991 based on the John McKnight quote "Our goal should be clear. We are seeking nothing less than a life surrounded by the richness and diversity of community. A collective life. A common life. **An Everyday Life**. A powerful life that gains its joy from the creativity and connectedness that comes when we join in association as citizens to create and inclusive world."

major component⁶⁰ of the interactive relationships and the major resource for problem resolution. This recognition is predicated upon the premise that the adult family members have the authority and responsibility to direct the growth and development of their child at least until either a) the child reaches his or her majority and is then considered autonomous or, b) the adult family members have been found by the courts to be either negligent or abusive and the responsibility for the growth and development of the child is removed by a court of law. Competence to provide for the child is therefore an **assumed** attitude unless and until legal action indicates otherwise. As a philosophy, the Facilitator endorses the child's right to a nurturing home and consistent relationship with significant adults.⁶¹ This requires a focus on the responsibility of the parents to cope with family discord and **learn** the skills necessary to help the child grow and develop; and it creates an equally significant responsibility on the part of the intervening system to provide the training and support to allow the parents to achieve this purpose.

Parental effectiveness is a function of the adult family member's *awareness* of and *capacity* to apply certain fundamental axioms and ground rules regarding the achievement of desired outcomes within a specific environment. Therefore, awareness and application skill are two factors that can be used to describe one's style of parenting children⁶². Assuming the adult family member(s) want to be parents, If they are both competent in application skills and conscious of the fundamental issues of concern, they are likely to be quite successful in their parenting. The professional intrusion which operates in a manner which takes the responsibility for decision making in regard to the child, takes the child out of the family environment, or otherwise indicates that the parent is *incompetent*, not only diminishes the self esteem of the adult family member, but sends a message to the child in regard to the parent's competence.

This is a critically powerful issues which cannot be underestimated in regard to the relationship between professionals and parents. One can imagine the *creation* of bad parenting through the very process of intervention with the intention to help. Since government has a responsibility to intrude in the *least restrictive manner*, the local government system of human services must find a way to assure that adult family members are protected from such intrusion without just cause. Part of that process is to develop a facilitator role for a person who is neither part of the government administrative process nor of the provider system, who can help the adult family members a) understand their rights and responsibilities, b) provide information for

60 Unless or until a family is reported and found negligent or abusive, the family has the responsibility and the authority to act on behalf of the child and must be supported in doing so. If the family has difficulty finding appropriate solutions, the CPM is responsible for helping the family work through this issue. The child plays an increasing self-determining role in the process. The CPM must enable the child's position to be heard in the family/school decision making process throughout, recognizing that the child does not have final determination. At age 14, the child has autonomy regarding mental health services and at 18 the child has autonomy for all else **unless they have been found incompetent in a court of law.**

61 This assumption of competence should create a tension within the service facilitator and other school personnel to realize that unless they are prepared to report the parent as either negligent or abusive, they *a priori* accept that parent's right to decide. School personnel and other professional child serving agencies cannot continue to treat parents as incompetent without reporting them as so.

62 This concept is adapted from the Four Operating Styles When Managing Change of O.D. Resources - 1995.

informed choices, c) act, when appropriate and sanctioned, as *Mentors* for adult family members, and d) help to negotiate the system of service.

Services must be flexible, individualized and designed to meet the diverse needs of the child/family, as defined by them. Natural supports, including extended family, friends, neighbors and community associations should be preferred over provider agency programs and professional services whenever possible. This is predicated upon the premise that the **community** has the potential to provide supports and acceptance to the child/family in a manner that is less intrusive to the intrinsic parental role than professional services can⁶³. The Facilitator seeks to support and enhance existing social networks, strengthen natural sources of support and help build connections to existing community resources. This is a critical responsibility since the provision of natural supports in the community are the major buffer against increased professional services and increased potential for removal from valued settings. When natural sources of support cannot be found or cannot meet the needs of the family, professional support services should be available to provide services *in valued settings*, maintaining the focus of family direction.

Since the new system of services to children is likely to be set up in a *temporary services* model and be based on planning contingent on an individualized set of preferences, the additional role of a **broker** will need to be available to facilitate the ability of the child/family to make *informed* choices about what services might be available and to facilitate the child/family's ability to engage these new services successfully. The Facilitator must *not be connected with the service provider*. The Facilitator must be in a position to provide checks and balances to both the **third party payer** [usually some form of government] *and* the service provider. The Facilitator has the same *fiduciary* requirements as other participants, but plays a separate, and different role. The Facilitator is an advocate, a negotiator, a contractor, a monitor, and a mediator; but always aware of, and supportive of the child/family preferences in regard to outcome and through that role a *quality assurance* participant. S/he is the 'keeper of the dream'.

When, due to family crisis or other circumstances, children must leave their schools and/or families, efforts should be directed at encouraging and enabling the school/families to be reunited with the child. There is an inherent premise that the school is a natural and valued setting in the society and *all things being equal*, involvement in the local school and the regular classroom is second only to maintenance of the family unit to the overall growth and development of the child⁶⁴. To enable school and family to

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"These associations of community represent unique social tools that are unlike the social tool represented by managed institutions. For example, the structure of institutions is a design established to create *control* of people. On the other hand, the structure of associations is the result of people acting through *consent*. It is critical that we distinguish between these two motive forces because there are many goals that can only be fulfilled through consent, and these are often goals that will be impossible to achieve through a production system designed to control" [McKnight - "Regenerating Community", Social Policy, 1987].

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Along with the school's developmental role, it additionally houses the child's peer group which is second only to the family in its impact on the child's growth and development. Since the school is in a position to influence both the peer group and the child, it has powerful impact on the growth and development of the child.

reunite effectively will require substantial work with school personnel and family members to help each acquire the skills necessary to feel competent to deal with the child. In fulfillment of each child's right to a stable family and an enduring relationship with one or more adults, respite interventions should be pursued with extended relatives for children whose ties with their families have been broken. Relatives or, failing this, surrogates within the local community of the child's home should be encouraged to maintain as much normal contact with the child's natural community as possible⁶⁵.

*The projection of professional services into the family life should be viewed as an intrusion and therefore, all efforts should be made to limit the negative impact*⁶⁶. The *iatrogenic disease* implications of human services can be seen when such maladies as loss of parental control are caused by the practices of the helper. As much as possible, the facilitator seeks a seamless, comprehensive, and universal system which provides supports to parents to strengthen and sustain their roles as teachers and role models for their children. This goal can be accomplished most effectively when parents feel empowered to act on behalf of their children. Empowerment is not only the delegation of authority to parents to exercise their parental role; it is the acquisition of both the skills and the confidence to assure that they can adequately perform this role.

Such confidence can only be built as a relational concept where parents are perceived as powerful and in control. The individual parent's performance outcomes are contingent on what other do and how they respond. Power rises when the relative power of others is mitigated by constructs of dignity. One may reject the choice, but never the chooser; nor may one diminish the right to choose, except in the most severe of situations whereupon the Facilitator has mandated reporting responsibilities in regard to suspected or alleged child abuse. This focus leads to a strategy which increases the power of less powerful parties and reduces the power of the more powerful. Thus, the power distance between the professional intruder and the parent must be diminished and, in the same manner, it may be necessary also to help the parents diminish the power discrepancy between themselves and their growing children.

The purpose of service facilitation then is to empower families to empower their children and in that process develop a personal belief in self-efficacy. The Oxford English dictionary defines the verb **empower** as **to enable**. The process of service facilitation then is an enabling process in which the family is the primary focus and through which children achieve a nurturing environment of significant, empowered and effective adults.

The Facilitator is assigned responsibility to serve the child/family and to empower them to negotiate effectively with educators and other professionals. While advocates for

⁶⁵ Service Facilitators, along with other school personnel can play a major role in helping protective agencies identify and contact positive potential surrogates within the immediate community.

⁶⁶ This is not meant to be pejorative. It is a simple recognition of the difficulty for anyone to enter into a professional helping situation and the limitations of present institutional responses which are bound up in social policy that is conflicted between the growth and development of the person being served and the protection of society from people with problems in living. Since institutions supported by the government have as an inherent part of their initial formation a requirement of *common good*, the birth sets in motion the potential for conflict between the person being served and the institution providing the service.

parents and parent rights, they are not adversaries to those professionals who provide services and supports. The facilitator role is to help the professionals who provide the services to the child couch their own expertise in a manner which enables the parents to most effectively participate in helping their children. When the responsibility for the child is removed from the parents through professional intervention without court action, through the style and manner of providing the service, the professional has assumed a responsibility that they have neither the authority nor the ability to fulfill. The only outcome of such intrusion is to weaken the parent's authority with the child. If the child/family are to remain a system of integrity, the professionals must provide supports to the growth and development of both the child and family and not attempt take on the responsibility of the parents. The **highest quality** service that can be offered to the child/family is the enhancement of their own ability to self determine.

Finally, we need to reiterate the coherence of the methodology. *O.D. Resources* has developed a slightly different descriptive model for comprehending reality which helps to support the constructs we have visited: "I'll believe it when I see it, I'll see it when I believe it". Through the individual's *frame of reference*, they nicely describe how a compatible set of ideas, theories, beliefs, actions, feelings, values, assumptions, motivations, relationships, control mechanisms, predictions or anticipated consequences allow meaning to be applied to our experiences through a process for determining what is relevant and irrelevant. Adult family members have a certain *frame of reference* which *determines what they perceive*, which *determines how they process information*, which *determines what they think*, which *determines the **alternatives** available for decision making*, which *determines what is believed, expected*, which *determines their understanding of reality*, which, of course, *affects their frame of reference*. This circular process is the context in which we intervene and our intervention can either affect the frame of reference in a positive manner [increase the adult family member's self appreciation] or negative manner [increase the adult family member's self depreciation] as well as affect the way the child feels about the adult family member's ability to protect and nurture him.

The ability of the professional intrusion to diminish the adult family member/child relationship should be **always** a part of the awareness of those who would offer help. The Mentor must be mindful of their own power and authority and determine to restore the power and authority to the child and the family.

THE HELPING LINKAGE - Formal Dialogue⁶⁷

One of the needs of this new professional is to have an organized method of engaging with the person with problems in living in an *intentional* way.. One methodology that seems to have merit we have called the Formal Dialogue.

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When starting the development of the concept of formal dialogue, I had not realized that I probably got the seeds for this notion from Myrna Shure, the propagator of Interpersonal Cognitive Problem Solving. In re-reading some of her literature, it became obvious that her *dialogue* in regard to children learning problem solving *in vivo* is probably the source of my inspiration. Additionally, I have and indebtedness to the Seligman [Penn Prevention Program] and use some of his group's material as part of the framework.

Formal Dialogue is a Socratic dialogue, which is directed toward the specific issues in the client's life. The Socratic dialogue is a conversation between two human beings on some important subject like the nature of the good or the meaning of justice. Such discussions are resolved on the principle of contradiction: that is, the less self-contradictory side wins, or, if both are found in the course of conversation to be self-contradictory, then a third position emerges free of the contradictions of the initial two. But this third position may itself contain new, unforeseen contradictions, thereby giving rise to yet another conversation and another resolution.

The purpose of this dialogue is to help the client to critically and rigorously examine his/her own thought processes about events and beliefs [codification] of those events. For some, it may also be the opportunity for the helper to introduce mental constructs with which the client [for example, a young child] is unfamiliar and to offer analogies, which help the client, absorb new, abstract notions. The important subjects are concerned with the issues facing the client on a regular basis. Many helpful techniques lend themselves to Formal Dialogue, and can be incorporated *situationally*, or in a planned manner. Some *examples* might include:

Anger Expression

The helper might find that the client either has difficulty expressing anger, or expresses anger inappropriately. The helper can facilitate appropriate anger expression by self-disclosing statements ["If this had happened to me, I would be very angry"], by probing statements [Didn't that make you angry?], or by role reversal with the helper playing the client and openly expressing anger.

Anticipatory Guidance

The helper supports the client in anticipating external or internal events and preparing them for the potential difficulties of these events by helping to identify personal, social, short and long-term consequences and identifying coping strategies.

Decision Making

The helper aids the client in evaluating various alternatives and making wise choices among them. The evaluation focuses the consequences identified above. Decision making is also concerned with WANTS and NEEDS, which are often confused.

Feedback

The helper provides the client with information about himself/herself on certain aspects of behavior in situations observed or reported. Such feed back can take forms such as praise or verbal instructions.

Guided Self-verbalization

The helper first helps the client to focus on his/her internal dialogue, or on self-statements the client thinks in problem situations. The helper and client then discuss and identify irrational, faulty and self defeating self reference [I can never solve this problem] and task enhancing [reframing] statements are generated to replace the negative self dialogue. When preparing for a problem situation, the client asks and answers questions that help to analyze the situation more rationally [What do I have to do here?]. When dealing with the problem, the client covertly generates coping self-statements such as “take one step at a time”, “you can do it, you have managed similar problems before”; or develops self praise for a job well done.

Imagery

The client is asked to fantasize about being able to cope with a specific problem situation. In other words, to picture him/her self performing an activity that is very difficult or highly anxiety producing and reports this imagery to the helper. The helper and client can discuss how this image is most effectively carried out.

Induced Affect

The client is asked about a past traumatic event and encouraged to describe every detail about it. The helper encourages the free expression of emotions, and supports the client in clarifying the feelings associated with the event. This procedure helps the client to get into touch with the various emotions present at the time of the event, including those which have been forgotten or blocked out, and to accept and work through the feelings.

Networking

The helper can use the presence of a friendship support group to help in a collaborative effort to solve a problem. By inviting the participation and querying the network, the helper involves the group in supporting the client in positive, problem solving ways.

Problem solving

During the discussion, attitudes towards a specific or generalized problem are explored and the client is helped to recognize that problematic situations are a normal aspect of living, that there are many ways to cope with problems, and that it is important to refrain from responding impulsively. Various aspects of a given problem are delineated in concrete and specific terms. Once the problem is appropriately framed alternative solutions are generated by brainstorming [the network may be helpful here]. The generated alternatives are then evaluated regarding their utility, weighing gains against costs. Finally, the client is encouraged to act on his/her decision and to evaluate the extent to which the problem was resolved.

Reframing

The helper disputes irrational beliefs and helps the client to reframe these propositions in more positive terms. Emphasis is placed on helping the client discriminate between rational and irrational statements.

The primary ***intention*** of any human service practice is to provide a context in which the possibilities of improved social learning may be maximized. It is the learning of new knowledge about self, others and prospects and the development of new patterns of behavior, which disposes the client toward more effective means of functioning. *Effective* is measured by what is more useful in being able to predict and control events and what is more satisfying to the individual. Since each individual has unique preferences in regard to satisfaction and control, each *effective* solutions varies by that preference.

Four specific objectives are anticipated:

- Collect data: growth and development is based on information. The helper and the client need to understand and collect data in regard to what competencies are mature and which need development.
- Develop the rules of engagement: define the scope of the helper's involvement and gain authorization.
- Teach mental constructs, scientific process and content.
- Gain authorization to continue helping with problem areas.

The professional relationship differs from most other relationships in that it *selectively* provides those conditions which can facilitate the most productive forms of learning on the part of the client. There is a conscious and deliberate behavior, thought and planning which is selected to accomplish these ends [Goldstein - 1973]. The Formal Dialogue is part of this conscious and deliberate process.

Seligman [1994] suggests that the three major criteria of abnormality are *irrationality*, *suffering* and *maladaptiveness*. Thus the professional relationship needs to focus on the child's thoughts about ideas and events in their life and to make determinations as to whether the child is coherent, comfortable and competent. The professional relationship is ***intentional*** in its goal, objectives and processes, and the formalization of this intentionality in conversation - whatever the topic, is what is meant by Formal Dialogue.

Engagement:

Any helping relationship requires *legitimacy*. The extent to which the person is subject to change corresponds to the extent to which the presence of the helper is recognized, experienced and authorized by the person in need. The actions of the helper, are not, in

the final sense, unilateral. Professional practice requires a significant degree of involvement and active participation by the person in need; an *interactional* process that is carried out with the explicit sanction of the client. A major measure of the depth and meaning of the relationship is the extent to which it authenticates those who are a part of it.

Establishing legitimacy is not simply a matter of being pleasant and friendly. The responsibility of the helper is to help, and this requires a “contract” with the client about what help is acceptable. The Formal Dialogue give the opportunity to explore what these areas of involvement will be, while establishing the credentials and legitimacy of the helper, as a helper for this person.

The concept of Roger’s unconditional positive regard is vital to the professional relationship. An *attitude*, not a feeling, it replaces the worker’s likes and dislikes and promotes the dignity of the individual being served and the respect for his/her ability to actively participate in the change process. Separation of the individual from the behavior is an important construct in this positive regard as the helper may indicate concern about the client’s behavior while continuing to support the individual.

Process: Relationships are predicated upon communication between the participants. Such communication can be verbal or non-verbal, but the Formal Dialogue process is clearly a verbal one. Verbal communication of any kind is first couched in the principle of *transactional communication*. Based on the principles of transactional analysis, such communication is the maintenance of dialogue between the adult of the helper with the adult of the person in need of help. The *will* of the helper in avoiding being the child to the client’s parent, or the parent, to the client’s child, is one of the most acceptable areas of struggle between the two participants in the helping relationship.

The person is seen as a unique being who can only be known in an wholistic sense - the pattern of living - rather than a molecular sense which fragments mind and body, thought and action, and past and present. As a consequence of his/her autonomy, s/he is capable of spontaneous expression and can actively integrate and deal with stimuli coming from internal and external sources.

Both internal and external stimuli and the *interpretation* or *explanation* of these stimuli are important elements of the dialogue. The helper, therefore, is constantly scanning the environment for cues which may be important to the client and consciously drawing attention and awareness to these stimuli and questioning the internal codification, schema or explanatory style of the child. After significant exploration, which requires good *listening* skills and a *beginner’s mind*, the helper helps to identify a *thesis* or problem statement for the client. This is an articulation of the client’s proposition, not that of the helper. The helper may then choose to help the individual explore the *evidence* that supports or contradicts the thesis; offer an alternate proposition [antithesis]; offer alternative “solutions” to the problem and discuss antecedents or consequences.

The helper seeks to identify and understand the child's concerns with anxiety, depression and anger; looks for catastrophic interpretations of events and memories of frustration, failures and rejections. The helper is seeking to understand the child's individual attributions and the implications of these attributions for the child's self affirmation, maladaptive schema and cognitive errors, automatic thoughts and other 'grist' for discussion regarding the client's ability to realistically absorb stimulus information, analyze, evaluate and explain it, and generally identify how the client tries to 'make sense of' events. The Formal Dialogue attempts to make conscious those *default* modes of thinking, which interfere with developing the most realistic sense of the world. Where the client does not understand the mental constructs necessary for cognitive development, such constructs can be defined, used and reused in various metaphorical forms to help develop this abstract capacity.

Formal Dialogue takes place within real time and situations. Having the individual describe his/her perceptions, coding and feelings about events *in situ*, offers real opportunity for testing different experiences for effectiveness. The Dialogue consistently establishes the nature of the helping relationship and the extent to which authorization is given at any given time. It is a process of assessment, which helps to set the agenda for personal reorganization.

Formal Dialogue presents the opportunity to use the scientific process in evaluating everyday life and offering new evidence regarding new responses. It is not a process of "telling" the client how to think or feel. The responsibility for change is always with the client. The Formal Dialogue may offer opportunities for contribution; these contributions are not directives, but rather alternatives among which the client may select.

While the Dialogue is formal in intent and content, it is not formal in process. Any conversation includes nonverbal cues and responses. It is likely that opportunities for role playing and modeling will also abound, when the dialogue is focused on issues that are important to the client and the helping relationship is authorized. There are, in addition, some content areas that may help the helper get started.

Selecting Topics:

Identification about why you are there. How does the client interpret the events leading up to the helper's engagement? What feels good and what feels bad about that process? How much control was felt? What does the client identify as the problems which face them? How does the client see solutions to these problems? How does the client feel about self, others and prospects for the future? What would make such feelings better? How does s/he explain these feelings? In the best of all worlds, what would the client like to see happen to themselves, others, future prospects?

The failure of people to talk about the very problems which are most important to children, particularly as those problems are emotionally charged, results in children developing their own problems solving methods. Often such attempts are naive in structure and while somewhat adaptive are not ultimately satisfying. Entering into a

Formal Dialogue with a child who has been identified as having suffered from irrational thoughts and maladaptive behaviors is not intrusive, as the invasion of privacy will go only as far as the child allows.

“Habits of pessimism lead to depression, wither achievement, and undermine physical health. The good news is that pessimism can be unlearned, and that with its removal depression, underachievement, and poor health can be alleviated” [Seligman - 1994]. Seligman goes on to suggest that “The pessimist sees the causes of failure and rejection as permanent [“It’s going to last forever”], pervasive [“It’s going to ruin everything”], and personal [“It’s my fault”]. Such habitual beliefs lead to many of the problems which cause the suffering of these children. “The main skill of optimistic thinking is disputing”. This is a skill, Seligman tells us that everyone has, but that we normally use only when *others* accuse us wrongly. The Mentor seeks through Formal Dialogue to enable the child to begin to question, and then *dispute* the pessimistic and maladaptive thoughts which defeat them.

Making connection:

Identify events which seem to stimulate some of the problems which the client has identified as problems. Discuss the events as they happen, ask about what is going on internally. Ask for interpretations of what is happening externally. Try to get client to identify *why*; what are the interpreted underlying motives for the situation. DEVELOP A PROBLEM STATEMENT. Encourage analysis of evidence to support/negate apparent motives. Encourage the creation of alternative motives, responses, etc. Develop lists of alternatives and suggest weighing such alternatives. Discuss perceptions of outcome consequences. Evaluate accuracy of expectations.

Ask the child what the ‘appropriate’ emotional state is for a given traumatic incident. By this we mean to explore what the culture will allow or accept. Certainly if your mother died, you are expected to feel mournful, not happy. The child may not ‘feel’ mournful which complicates matter abnormally. Often children will seek clues as to how the *should feel* in such circumstances. Often the ‘*appropriate*’ emotional state receives a lot of secondary benefit through social reinforcement. A child who reports being in agony, sobs, cries and can’t get over the loss of a parent may receive a lot of cuddling, lowered expectations, and other advantages, thus supporting the emotional state. Helping the child understand these social pressures to perform and the pressures to stay sad is introducing a new construct into the way the child thinks about his/her own behavior.

Increasing capacity:

Build on strengths. Identify past *positive* responses, experiences, and events and use them as examples when new problems or crises arise. Remembering when an outcome was better than expected or very positive can help to reduce pessimistic expectations. Analyze past success.

Show faith. Place *high positive expectations*, which acknowledge a belief that the individual is capable. Self-fulfilling prophecies should be positive ones.

Acknowledge difficult tasks and make mistakes acceptable. Talk about mistakes from a *learning* experience perspective. Failure is not pathological; but is, in fact, part of learning and growing. Failure is feedback. Talk about what might have been different and which of those differences might have been under the client's control. Focus on continuous improvement. Each experience gives the opportunity for learning and growing.

Make learning tangible. Develop Accomplishment Albums; Checklists of Skills; Flowcharts of Concepts. Talk about yesterday, today and tomorrow. Have the client develop time limits on tasks. Reorient 'I can't' into a decision - 'I won't', wherever appropriate. Teach specific skills where requested and required.

Acceptance: Recognize achievement. Your OK; I'm OK. Discuss opinion versus facts. Acknowledge differences of opinions and support such differences when they are based on acceptable evidence. Understand client preferences. When in doubt ask/listen. Separate the doer from the deed. Show appreciation. Affirm.

Process: Formal Dialogue presents both the opportunity for immediate "mentoring" within the emotion of the situation and for developing unique interventions which the individual may authorize. Decisions about greater individual cognitive restructuring opportunities, behavioral skill building or others supportive interventions may result. The participants in the learning experience may achieve: *substantive knowledge* - concrete information about objects, events and situations; *psychological knowledge* - information about self motivations, needs and past-present-future connections; and *social knowledge* - understanding of self in relation to others and the meaning and implications of the behavioral *patterns* involved.

Ultimately the client will need to *decide* whether to undertake the change process based on the information available. This may be authorized informally in the data collection process as the client allows the helper to intervene in thoughts, fears and fantasies in significant ways during the emotional context of the event; or formally through a request for specific help after the fact.

FRAMEWORK FOR IMPLEMENTATION OF SOCIAL EDUCATION SERVICES

Implementation begins with formal dialogue around the issues of why is the Mentor here and what does the child hope to accomplish. The Mentor starts by making the child aware of his/her own internal thought stream in regard to events and experiences in his/her life. As the child is able to identify and understand this mental process, s/he becomes increasingly ready to understand conceptually how these mental representations affect the perception of reality and predispose the behavior in response to that reality. The Mentor will also need to be concerned about the child's *conceptual* readiness to work on this

thought stream. Much of the teaching will be done through the use of metaphor. In learning we change context by transforming the strange into the familiar, as when we describe an abstract concept like gravity by the familiar human experience of attraction. Providing novel metaphors which attract the child's attention and provide a basis for understanding is a continual intention of mentoring.

The dialogue can not be fully scripted since much of it will be carried out *in vivo*; in the social context in which it is needed; although the Mentor may also be assigning *homework* as the child engages in the process. The Mentor can actually start with any of the segments which the child sanctions and the situation allows. While it might be preferable for the Mentor to use the ordered approach outlined; it is most important that the Mentor be spontaneously able to hook into whatever area is situationally correct. Thus, the following outline is merely a guideline of the many topic segments that are important for the child to learn, and provides the grist for a Socratic dialogue which asks open ended questions requiring thoughtful answers; creates a dialect [thesis/antithesis] to generate new ideas; and supports the child in a process of discovery and reconstruction of their own cognitive architecture.

I. INTERNAL MONOLOGUE: the process of thinking/talking to yourself regarding what has happened, why it has happened, what we are going to do about it, etc. While this internalization goes on all the time, we are not always aware of it. The development of *awareness* is an important step in helping the child understand the coherence of these monologues with their general mental schema [attitudes about self, others and prospects].

- NEGATIVE COGNITIVE TRIAD: thinking negatively about self, others and prospects.
- AUTOMATIC THOUGHTS: predominantly negative cognitions resulting from the impact of stimuli upon maladaptive schemas which occur rapidly while the person is in a situation and are not subjected to systematic, logical analysis. This 'leakage' of self talk is an important clue as to what the major mental schema are.
- COGNITIVE ERRORS: errors in reasoning manifested within automatic thoughts.
- *Selective abstractions*:: coming to a conclusion based on a small detail of the situation without looking at the entire picture.
- *Arbitrary inference*: drawing a conclusion without ample supportive evidence or in the face of information that contradicts the conclusion.
- *Absolutistic thinking*: categorizing experiences into rigid dichotomies such as all good or all bad.
- *Magnification and minimization*: overvaluing or undervaluing the significance of an event.
- *Personalization*: relating external events to oneself when there is little or no basis for making the connection.
- NEGATIVE COGNITIVE SET: difficulty in believing that one's responses matter; a sense of helplessness.

IMPLEMENTATION - The Mentor must begin by talking to the child about experiences and events, drawing the child's attention to his/her internal monologue and working to get the

child's monologue articulated. As the child's awareness of his/her mental thought stream is developed, the Mentor can begin to help him/her identify negative triad, automatic thoughts and cognitive errors. The Mentor might ask the child to hypothesize [offer data to validate] why what they are thinking is true, and then offering an antitheses [alternate data to validate or invalidate], which may also be true. This process offers opportunity to teach:

- **ALTERNATIVE THINKING:** The child needs to develop the capacity to think of alternatives to their interpretations and actions. Several techniques such as "lateral thinking⁶⁸" can be used to help the child in this process.
- **CONSEQUENTIAL THINKING:** The child will need to begin to think consciously about the consequences of his/her actions on self, others and prospects; short term and long term.
- **DECISION MAKING:** As the child begins to weigh the consequences of behavior, s/he will need to make some decision between alternative solutions and potential outcomes. Decision makers must be learn on their objectives, separate musts and *wants*, and assess risks.

Mentors can use prompts to help the child address alternatives and/or consequences.

- **SELF-INSTRUCTION:** The Mentor can help the child to develop scenarios [stylized situations] and scripts [specific outlines of what steps they should take] which begin to address the negative thinking. The child starts by articulating what they are going to do out loud. As it is learned it is faded into whispers, and then finally incorporated as a new internal monologue for given scenarios which have proven problematic in the past.

The Mentor should monitor the self-instruction to assure that the child is following each step of the script and to correct errors. The Mentor should provide positive reinforcement to the child as they perform correctly.

II. **FEELINGS:** It is important that the child have a language for talking about his/her feelings. Some may find this easy, but others are likely to find it difficult to express their internal experiences.

The Mentor will want to help the child build a vocabulary and a rating system for talking about the type and intensity of their feelings.

KEY POINTS:

- Different people feel different ways in the same situations.
- Our thoughts [the things we say to ourselves] affect how we feel.

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This is a term invented in 1967 by the Creative Thinking guru Edward de Bono to describe the process of reframing the context as a means of thinking differently about a proposition.

IMPLEMENTATION

After having negotiated a 'contract' or agreement about what you are there for and having achieved some degree of sanction to continue, the Mentor might begin by asking the child to talk about the typical experience of several emotions or by asking what emotions are felt when a situation arises. Often children are unable to place their emotionally feelings into words and a language of emotion needs to be developed. Being able to 'label' an emotion helps the individual to 'make sense' of it; to contain it within the parameters of the mental representation. Finding a mental representation that is not as severe as anger or rage, but indicates a lower level of discontent helps to create the idea that such angry feelings can be channeled into different behaviors. It can be speculated that simply to have such mental representations available makes 'talk' a potential action.

It is important, therefore, for each the child to learn about each emotion. S/he should be asked to describe the bodily sensations, the thoughts and the actions associated with the feeling. The Mentor should then discuss feelings as related to the problems that arise in everyday experience. The child might be asked to rate the intensity of the feelings about there real life situations, on a scale from one [01] to ten [10], with ten [10] representing the most intensity and then be helped to find discrete language to identify each of these levels. If the 'magic' of language as identified by Pinker is that we can place an idea in someone else's mind with words; these enlargements of a child's vocabulary are intended to help the child develop the idea that emotions are acceptable and containable. Just as athletes learn to avoid the highs and lows of emotion as a means of using emotional energy positively in their performance; so children can learn to avoid the highs and lows of life to enhance their lives.

It may be important for the Mentor to involve other children in the dialogue about emotions and sharing the way people feel about situations. The use of scenarios [descriptions of situations or events] or visual aids [cartoon drawings of situations or expressions] might offer opportunity for children to differ as to how they might feel about a given event. As one child may get angry over teacher discipline another may be fearful or sad. The Mentor should first elicit descriptions from several children concerning the basic emotions of anger, fear, sadness, etc. Once these baselines are established, discussion of more complex emotions such as shame, guilt, disgust, and/or pride can be considered.

The Mentor uses his/her formal dialogue to elicit responses and discuss alternative ways of interpreting the world. When the Mentor offers alternative notions, they do so as equal, not superior thoughts. The Mentor must avoid the assumption that their knowledge and understanding of human emotions is significantly different or superior to that of the child. The dialogue is a sharing of information and may expand each persons understanding of the emotional content of situations and events.

III. THOUGHT/FEELING LINKAGE

IDENTIFY THE LINKAGE: through a discussion of the scenarios, the Mentor should point out that the situation stimuli evoke a thought and the thought evokes an emotion. Most people think the feelings come directly from the situation, but contrary to this, there is a crucial middle step. It may be beneficial to use prepared pictures of an incident or situation.

BEGINNING AWARENESS: Through the use of the cartoons, have the child begin to practice filling in the thought bubbles for the situations. [Its alright to share this with other children as appropriate.]

EXPANDING AWARENESS: Next have the child[ren] begin to develop some blank cartoons identifying situations that s/he/they are familiar with and identifying the thoughts and feelings that have or might occur. Having the child identify his/her own situations begins to give insight into the reality in which they are involved. The Mentor may posit different thought options or different feeling options for these situations; or compare the thoughts feelings of different children to similar situations. The Mentor must keep in mind that reality is observer created and listen attentively to understand the reality of the child's creation without imposing his/her own reality. Only as the reality of the child is understood can the Mentor effectively help the child analyze and potentially modify it.

If the child begins to describe parental conflict or other experiences in a manner which strikes the Mentor as a misinterpretation of reality, it is not helpful for the Mentor to simply 'tell' the child his/her opinion. The child must 'work through' their own perception of these events through consideration of alternative explanation and comparative evidence. If the alternatives are of their own making, they become more potentially useful. Thus, while the Mentor may posit alternatives, these are prods to instigate a process of alternative thinking rather than as substitutes that the child should use.

SUGGESTED DEVELOPMENT:

- SITUATIONAL PERCEPTION TRAINING: These discussions may lead to an opportunity to explore *situational perception training* which focuses on understanding the *phenomenal field*; a social diagnostic task which enhances the child's ability to select the preferred skill.
- EMPATHY TRAINING: These discussion may alternatively lead to the opportunity for *empathy training* which focuses on understanding how others might feel in a situations.

KEY POINTS:

- People have different feelings, even when the same situation happens.
- People have different thoughts, even when the same situation happens.

- Our thoughts cause us to feel a certain way.

IV. CHANGING FEELINGS: It is important that the Mentor consistently point out that we can change negative feelings by changing the way we think about situations. Talk about times that the child recorded feeling above a seven [7] in intensity when sad, angry, scared or embarrassed. [See Homework & Journals] Ask if s/he could get this score below three [3], would s/he want to? Indicate that this is one purpose for your presence. You need sanction to go forward and this is one opportunity to get it.

The purpose of this tactic is to introduce the child to different types of thoughts and thinking styles that lead to negative feelings. The Mentor wants to help the child understand that people can have different styles of thinking, just as they have different styles of talking or dressing.

EXPLANATORY STYLES: a pessimistic explanatory style is personal [I'm a loser], permanent [things will *never* change] and pervasive [things are *always* going wrong]. Pessimistic explanatory styles lead to sadness and depression. Focus the child on the words that create difficulties and sensitize them to their use. Point out that generalizations are always wrong [including this one] and that ever, never, always, and the like are words that simply make us feel inadequate. Since they are unlikely to be correct, s/he should find other words to replace them. [Often, sometimes, etc.] Terms like *I can't* are clear clues to the child's sense of permanency and personalization. Help the child focus on the fact that I can't really means I won't. I won't is both changeable and decidable.

ATTRIBUTION STYLES: People try to make sense of the world by *attributing* qualities to it. Personal, permanent, and pervasive attributions to negative events are not helpful. Equally problematic are *hostile* attributions. Identifying events and experiences to hostile motives on a regular basis leads to anger and defiance. These attributions to events, people and situations help to define the child's cognitive architecture and close attention should be paid to them.

EXPECTANCIES: People often perceive what they expect to perceive. Thus, if I am prone to hostile attribution, I am likely to perceive environments as hostile. If I am pessimistic, I am probably right. Helping the child explore their own expectancy style and to become aware about how they make decisions about the degree of effort to commit to a goal is an important part of helping children understand and alter their own mental and physical events.

Changes in attributions, expectancies and explanatory styles can change the way people feel and therefore, behave. Changes can take place after exploring evidence and identifying alternative formats that 'make sense' of the data. Reframing the child's pessimistic or hostile styles into more optimistic, amicable styles and identifying cognitive errors in a way that is potentially more effective and useful in living, is one way to help the child restructure a maladaptive schema.

Part of the role of the Mentor is to *dispute* automatic thoughts and cognitive errors. Such dispute is done by offering possible alternatives, not by taking stances. Only the child can make a stance regarding the value or inappropriateness of an optional way of viewing the world. The Mentor *enables*, does not decide. Another part of the Mentor's formal dialogue is to create a dialectic through *suggestions* of alternative interpretations. A third is to *generate alternative thoughts* in the child. A fourth is to *reinforce* new and positive attributions and explanatory style.

V. EVALUATING THOUGHTS

The Mentor will need to introduce the concepts of looking for alternatives and valuing the evidence for and against negative thoughts. We have discussed generating alternatives and the child should practice with and without the Mentor the generating of alternatives for real and imaginary situations. Alternative thinking may be one of the most effective skills in developing appropriate habits for living.

KEY POINT: the first reason in your mind is unlikely to be the right one.

REVIEWING THE EVIDENCE: evidence is an idea, attribution, thought [mental representation] which through comparison explains the facts most plausibly. Since there are likely to be several reasonable explanations for the facts, the child will need to learn to generate sufficient alternatives and spend sufficient time identifying examples that support or deny the supposition made in the explanation. Some factors will be easy to deny, such as 'this always happens', simply because it is unlikely that anything always happens, but it may be harder to explain why it happens so often. The fact that this may be a Pygmalion self fulfilling prophecy might be explored. Denying that negative things often happen to children with problems in living is unlikely to be an effective tactic. Helping them to understand their *responsibility* in these occurrences may prove much more valuable. Creative thinking is often not a strength of children with problems in living and therefore use of other children, the Mentor's own thinking, samples and metaphors are helpful in generating new ideas.

DECIDING ON THE TRUTH: One important area of logic is concerned with the test of truth - the criteria used to distinguish truth from error. A criterion of truth is a standard, or rule, by which to judge the accuracy of statements and opinions; thus it is a standard of verification. For purposes of social education the truth is not an absolute, but a pragmatic. We can probably think of many types of instances to show that contradictory judgements can be true provided we acknowledge that there can be different viewpoints. The individual client, therefore, must decide upon the criteria that can enable him/her to distinguish what is true from what is not true. The Mentor, however, can help the client by indicating material fallacies of reasoning. Since we are dealing with an arena of action and behavior, a test of practical efficiency confirms truth. This is a kind of pragmatism, but it does not mean that all that is useful is true, but rather that all that is true is useful. Useful means practical efficacy.

The decisions regarding usefulness are always from the viewpoint of the client. Since any judgement, must measure against a standard of verification, the standard of usefulness must be the client's. However, the standard, as with other parts of the process must become conscious to become coherent. The Mentor must help the client articulate and then objective goals. Clients, including children, want what everyone else wants: success, happiness and power. If the Mentor can help the client clarify what success, happiness and power mean to them, they can begin to help frame the standards of measure. As the client becomes more aware of these standards, they are better able to make judgements about whether the thoughts/actions presently held/performed are true/useful in moving them towards success, happiness and power. The Mentor helps by a rigorous process of indicating areas of material fallacies of reasoning and a focus on consistency and coherence.

RESPONSIBILITY FOR THE TRUTH: Only the client can be responsible for finding the truth. The Mentor does not make decisions for the client and if the client chooses to believe or act in a manner which is incompatible with the Mentor's point of view, that is his/her right. This does not mean, however that the Mentor has no further responsibilities. The worker continues to have the responsibility of seeking coherence in the client's thinking, provoking new ways of looking at the question of truth and new means of interpretation; always seeking to add new information. In addition, the Mentor has a responsibility to help the client analyze the risk/consequences of the thought/action.

By focusing on the decision making process and helping the client to weigh the risk/benefit of each alternative thought/action in regards to self, others and future, the Mentor helps the client to explore and weigh consequences. The Mentor does not dispute *decisions*, only the data or information upon which the decisions are made. It is helpful if the Mentor him/herself holds the belief that all people want the same things and that given sufficient information all people will decide to believe the right thoughts and take the right actions. From this point of view, negative actions are taken because sufficient information is not available or the information is not rigorously processed. This is the kernel of truth about the whole cognitive/behavioral process - it is a belief that people always act in their own best interest; but often fail to examine whether such actions are useful.

VI. NORMALIZING: The purpose of this effort is to introduce the concept of catastrophizing [imagining that the worst is going to happen] and to teach the child how to normalize instead of dramatize such experiences.

- **FUTURE:** begin with a dialogue about the way the child thinks about the future and what will happen next.
- **GENERATING CONSEQUENCES:** help the child generate 'worst', 'best' and 'most likely' consequences to broaden thinking about outcome. Emphasize that even the 'worst' case is usually not permanent; indicate the temporary nature of things and demonstrate possible ways in which the situation could improve over time. Indicate the *learning* available in the worst case scenario. [*That which does not kill me, makes me strong.*] The child must begin to see situations as learning

- opportunities and him/herself as a learning entity. Failure is not pathological. Success cannot be achieved without failure.
- PROPHECY: Discuss the self-fulfilling aspects of our perspective of the future. [Pygmalion]

NORMALIZING CONFLICT - Children need to learn that conflict is normal, but that the behaviors used in response to these conflicts are not always effective. Effective behavioral responses are those which lead to positive outcome. The child's interpretation of discord can be explored and compared with other examples given by other children, observed in the environment or the news.

VII. ASSERTIVENESS: The purpose of dialogue in this effort is to demonstrate the advantages of acting assertively and to teach the child how to act assertively. The dialogue will need to help the child understand such concepts as passive, aggressive and assertive. Again metaphors and examples will be helpful tools for teaching. As the child is able to develop a mental representation of assertiveness as different from passive or aggressive, s/he will be enabled to begin developing assertive skills.

ADJUNCT DEVELOPMENT:

ANGER CONTROL TRAINING: It should be apparent that the child will be unlikely to be assertive if his/her anger is not under control. While many of the areas of discussion already mentioned provide the potential for the child to consider and control their anger; the fact is that most children who fall into the category of having problems in living have a great deal of anger. Direct anger control technologies are available and can be implemented any time the child sanctions their use.

ANGER REPLACEMENT SKILLS: One of the more obvious skills in anger control is to find replacement behaviors. While assertiveness may be one such replacement, other specific skills can be formally developed through the Goldstein Prepare curriculum.

MORAL REASONING: The ability of being assertive not only means to find a way to control one's anger, but to be able to understand a new way of behaving towards people in general. Research evidence suggests that a relationship might exist between moral judgement and antisocial behavior. Constructs such as honesty, altruism, nonviolence and conformity are in search of a language and incorporation in children with problems in living. Assertiveness is effective when such characteristics are involved.

VIII. NEGOTIATION

Perhaps only problem solving is a more salient skill than negotiation. The fact that both rely on alternative and consequential thinking may indicate that these underlying constructs are vital to getting along in the world. Negotiation demands an understanding of at least two concepts, compromise and next best alternative. If the Mentor has helped the child develop alternative thinking and through decision making skills helped him/her

develop methods of valuing such alternatives, they are then ready to prioritize alternatives and by exploring what the next best alternative is, learn to compromise.

Compromise should also be cast within the construct of win/win. If there is a loser, either yourself or others, there is not true compromise. The construct of win/win offers another frame of reference as to how conflict can be resolved in a manner other than “might makes right”. The skill of negotiation is also one that can provide overt social reinforcement rewards.

IX. COPING TECHNIQUES

The Mentor may also need to help to find ways for the fearful or angry child to relax. Stress reduction can be developed and modeled naturally within the context of formal dialogue and the beginning elements of it taught without much ado. Two such techniques recommended by Seligman [1993] are Progressive Relaxation and Meditation.

- Progressive Relaxation - tighten and then turn off each major muscle group of your body. *The Relaxation Response* - Herbert Benson]
- Meditation - close your eyes and repeat a *mantra* [a syllable whose “sonic properties are known”.]

PSYCHOLOGICAL FIRST AID⁶⁹

The methods of dealing with a person in crisis are too important not to be included as a specific process in regard to new system methodology. The attributional attachments made by the individual in crisis to the interventions of professionals profoundly affect the manner in which they recover and reconstitute their lives. One of the most damaging aspects of the present approach to people with problems in living is the negative attributions which attach to it. The new methodology therefore must include *psychological first aid* as an integral part of its activity.

“People, by and large, are astonishingly attracted to the catastrophic interpretation of things”. “The Russian psychologist Blyuma Zeigarnik discovered early in this century that we remember unsolved problems, frustrations, failures, and rejections much better than we remember our successes and completions” [Seligman - 1994]. Humorously stated as Murphy’s Law - “That which can go wrong, will go wrong”, our pessimism is seemingly irrepressible. Feelings of *dysphoria* [bad feelings] of anxiety, depression and anger are experienced, at least momentarily, every day. For those who are psychologically fit, these feelings are incorporated into an optimistic, or at least a ‘realistic’ framework, which allows them to continue coping with the events of life. For those least psychologically fit, these common emotions, when out of control, cause most of what is labeled as ‘mental illness’ [Seligman - 1994].

Seligman indicates that each emotion of the dysphoric triad is a message goading us to change our lives. “With our daily dysphoria, we are in touch with the very state that

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See Karl A. Slaikeu “*crisis Intervention: A Handbook for Practice and Research*

makes civilization possible,...” Like pain, which indicates a problem with our bodies, dysphoria indicates something wrong with our souls. And if we fail to act to find coherence between these insistent, uncomfortable and hurting goads to change, grow and develop our capacity, we are likely to find ourselves in a situation in which our ability to cope comes up short; we feel ourselves in crisis.

Since teachers and other school personnel, because of their extended time with children, are often the ones who will find themselves dealing with such crises that occur for children, it is important to provide a methodology for dealing with such crises into our new system. The helper in using this intervention will need problem solving and negotiation skills, and will use the crisis intervention process to teach these skill to the person in crisis. While it is true that the limits of concentration caused by the crises may diminish the impact, it is also true that emotional crisis is a time of potential personal reorganization and that the process, even intuitively understood, supports the notion that ‘your OK’.

It can be expected that the person in the midst of the crisis will exacerbate the common pitfalls that interfere in the best of times with good decision making. These pitfalls include:

- 1) *Considering possible choices before clarifying what it is we hope to achieve with the decision.* The person in crisis will often begin by weighing the pros and cons of alternatives without developing a clear picture of the problem that they seek to solve.
- 2) *Focusing on favorite alternatives*, particularly those that form what has been called the ‘*intimate dance*’. This constitutes one of those self-fulfilling processes which usually lead to well defined negative outcomes.
- 3) *Ignoring the consequences of a choice.* This will probably be the most common error as people in crisis will ‘do anything’ to get out of the situation, often without consideration of what next.
- 4) *Basing the decision on inadequate information.* This is also a very prevalent issue, as people in crisis may not even understand fully the circumstances that have caused their crises.

These pitfalls are, of course, available also to the helper, particularly since there often seems to be pressure to make the decision quickly. To overcome these difficulties, the helper will need a framework of decision making that allows for efficient and effective gathering of relevant information, alternative solutions, analysis and evaluation of options.

Slaikeu [1990] in listing some Do’s and Don’ts of Psychological First Aid gives us a five-step framework for problem solving.

| | Do | Don't |
|--|--|---|
| 1. Contact | Listen carefully. Reflect feelings & facts. Communicate acceptance. | Tell your 'own story' yet. Ignore either facts or feelings Judge or take sides. |
| 2. Dimensions of Problems | Ask open ended questions. Ask person to be concrete. Assess lethality. | Rely on yes/no answers. Allow continued abstractions. Ignore 'danger' signs". |
| 3. Possible Solutions | Encourage brainstorming. Deal directly with blocks. Set priorities. | Allow tunnel vision. Leave obstacles unexplored. Tolerate a jumble of needs. |
| 4. Concrete Action decision s. responsibility | Take one step at a time. Set specific short-term goals. Confront when necessary. Be directive, if and only if, you must. | Attempt to solve it all now. Make binding long-term Be timid. Retreat from taking when necessary. |
| 5. Follow-up | Make a contract for recontact. Evaluate action steps. | Leave details up in the air, or assume that client will follow through on plan. Leave evaluation to someone else. |

In short, these do's and don'ts seem to reflect a process which starts from empathetic listening with an open *beginner's mind* that proceeds to data collection through asking questions to reach specificity of the person's thoughts, feelings and fantasies. It moves then to helping the individual develop alternative interpretations and solutions, evaluate such options and finally, to make decisions regarding the best possible options. Some time might also be spent in regard to evaluation of potential consequences of each of the possible solutions. As in all planning, it is important not only that an overall goal be identified [restoration], but that the concrete actions be *partialized*; that is, developed into specific, do-able steps rather than grandiose actions.

The chief goal of psychological first aid is to re-establish immediate coping. For the person in crisis, the crux of the matter is that s/he simply feels unable to deal with the overwhelming circumstances confronted at that time. The helper's primary aim is to assist the person in taking concrete steps toward coping with the situation, which includes

managing the feelings or subjective components of the situation, and beginning the problem solving process [Lazarus - 1980].

There are three sub goals of psychological first aid:

- 1) *Providing support* rests on the premise that it is better for people not to be alone with crisis and listening, provides the opportunity for extending warmth and concern while at the same time providing an opportunity to vent fear and anger. It also gives opportunity for us to reinforce their strengths at a time when they are feeling only weakness.
- 2) *Reducing lethality* aims at saving lives and preventing physical injury. This means that we must take measures to minimize destructive possibilities and to defuse the situation. This may mean moving the person from the situation or asking the object of anger to leave. It certainly means not leaving the person alone. "While the research literature does not provide us with hard and fast guidelines to predict all suicides or homicides, we do know the steps to be taken to reduce the probability of lethal outcome. Lethality is reduced if lethal means to complete a violent act are removed; an individual makes a commitment to postpone a lethal act; and/or the dangerous individual is under constant observation" Slaikeu - 1990]. Coercion and control are acceptable only if and when the individual moves to act upon such lethal notions and every verbal negotiation has been unable to divert this action.
- 3) *providing linkage to helping resources* is the third sub-goal. It is not expected that the initial helper can solve the whole problem, it is expected that this individual will help to pinpoint critical needs and the make appropriate referral. Many times, the initial helper will be in the situation because they were sought out as the significant person with whom the individual in crisis feels comfortable sharing their distraught state. This is a powerful relationship, which can be used to help the individual sort out the difficulties and decide what supports are necessary in the future. The bottom line is to provide an appropriate context in which the individual will be able to work through the crises. It directs the helping process and also puts limits on what can be expected by the primary helper.

The most difficult part for anyone providing psychological first aid is to have the energy to stay with the person and to continue to place the responsibility for behavior and decision-making back on them. It is certainly easier to simply decide to 'pass the buck' onto someone else, particularly when the person in crises appears at an 'inconvenient' time. Many people will not want to get involved. The price for this convenience is that the person in need may develop attributions that are quite harmful in the future. Similar to the CPR approach, this is a 'life and death' situation even though the person may not actually *expire* in front of you, nor be threatening in a lethal manner. But even small crises can escalate into major life difficulties if inappropriate actions are taken which erode the coping mechanisms and self-appreciation. Toxic side effects to drug interventions further deteriorate the condition.

The five components provide the conceptualization of a process of psychological first aid. The common element in all of these is a basic *problem-solving* model amended in light of the intense emotions of the situation. *Empathic listening* is a precondition for any helping activity. Listening for both facts and feelings and using reflective statements so the person will know that we have heard what has been said. Inviting the person to talk, helps to identify the feelings or *affective by-products* of the crisis [usually anxiety, anger or depression]. The helper's task is not only to recognize, but also to respond to these feelings in a calm, controlled manner. Sometimes nonverbal, physical contact [touching or holding] is the most effective. The person must feel heard, accepted, understood and supported, which leads to a reduction of the intensity of the emotions that frees energy to be redirected toward doing something about the situation.

Despite the feelings of catastrophe of the crisis event, the probability that the individual in crisis has suffered some truly catastrophic event is very small. "Tragedy used to be part of everyone's life - the human condition. Until this century in the West, more than half the population thought life was a vale of tears. Not so now. It is not unusual to go through an entire life without tragedy. Bad things still happen to us.... but we are usually prepared for many of these losses, or at least we know ways to soften the blow. Once in a while, however, the ancient human condition intrudes, and something irredeemably awful, something beyond ordinary human loss, occurs" [Seligman - 1994]. When such an occurrence takes place *post-traumatic stress disorder* [PTSD] is a likely occurrence. While there are no easy answers to avoiding or diminishing such an occurrence, two factors seem to be important. First is that "people who are psychologically most healthy before trauma are at least risk for PTSD" [Seligman - 1994]. The second is that victims who do not talk to anyone afterward suffer worse physical health than those who do confide in somebody. Seligman points out, however, that simple *catharsis*, is not enough. While it has some immediate 'afterglow' effect, it has no lasting value. In fact, "If we do anything to magnify the trauma in the child's mind, we will amplify the symptoms; if we do things to mute the trauma, we will reduce the symptoms" [Seligman - 1994]. **Normalize, don't dramatize!** Natural healing occurs, but well-meaning people can slow down such healing by acting out or verbalizing their own catastrophic notions of the event. When the human condition was a 'vale of tears' such traumas were a normal part of everyday life; it is our very civilization that makes us prone to traumatic reactions.

One can speculate that the process of empathic listening provides both the potential catharsis which can have emphatic meaning for immediate comfort of the individuals, as well as the opportunity to collect information which can be helpful to future health in helping the individual reconstruct their thoughts and emotions in regard to the incident and to make decision regarding future action. The difficulty for the helper in true catastrophe is to maintain their own balance and coherence in light of the power of the tragedy; the difficulty when the crisis is based predominantly on the valuation added by the person in crisis, is to remain empathetic and not disregard the event's impact on them mentally. It may sound callous to emphasize not dramatizing powerful events, but placing them as much as possible in a normal guise has significant meaning to the ability of the

person in crisis to recover their self attributions of being in control and to diminish a 'victim' mentality about the event in the future.

Inquiry for the purpose of collecting information, focuses on three areas: 1) immediate events leading up to the crisis state which may have triggered or precipitates the crisis. Such information can help the person begin to learn to build 'fences' around such events to avoid trauma in the future. The helper can also determine the persons BASIC functioning prior to the crisis, listening for or inquiring about the person's behavior, affective, somatic, interpersonal and cognitive life prior to the crisis. This information will help identify strengths that can be built upon to restabilize the situation. 2) Inquiry about the "who, what, where, when, and how" will aid in establishing the BASIC standing in the present. How does the person feel right now [affective]? What is the impact of the crisis on family and friends [interpersonal]? Attention is given to both strengths and weaknesses. Finally, 3) what are the likely *future* difficulties for the person and his or her family? This gives the opportunity to develop a rank ordering of the person's need within two categories: 1) those that can be addressed immediately; and 2) issues that can be postponed. The information gathering aspect of first aid can have an immediate therapeutic aspect for the client, while assisting both the helper and the person in planning next steps. As in any problem solving process, there is a need to define the problem and this is the final outcome of this stage.

In looking for solutions, it is important to avoid the obvious, top of the head solutions, which are likely to be the stock answers, which have been rejected [or have failed in usefulness] in the past. This will require identifying a range of alternative solutions to both immediate and long-term needs. The helper should take a step-by-step approach asking first about what has already been tried, then getting the person in crisis to generate alternatives, followed by the helper adding other possibilities. It is important that the helper encourage the person in crisis to offer alternatives both as a diversion from thinking about the problems and focusing on the solutions and because it underlines the notion that the person him/herself is in control. "The premise is that helplessness can be checked by encouraging the client to generate ideas about what to do next, that is, helping the client operate from a position of strength rather than weakness" [Slaikeu - 1990].

As with all problem solving, the solution strategies need to be separated into MUSTS and WANTS, and the latter must be weighed for relative importance and in regard to potential consequences so that appropriate decisions regarding priorities can be made. Slaikeu recommends two other process issues. The first is the importance of coaching some clients to even consider the idea that possible solutions exist and a second is the importance of examining obstacles to implementation of a particular plan. Helpers must urge the client to think ahead to possible obstacles and make it their responsibility to see that these are addressed *before* an action plan is set in motion.

There should be agreement between the helper and the client on the acceptability of solutions. If this has not been accomplished, then some 'obstacle' has likely gone unexplored, indicating the need to talk further about the parameters of the problem, solutions, and/or a match between the two. Thus, negotiating skills as well as problem

solving skills come into play. The helper may need to convince the person in crisis that what they WANT, is not as necessary at the moment as what they MUST do. Again, each of these discussion points uses energy which can be diffused from the crises and attuned to the solution.

When agreement has been reached, it is important that the client take immediate steps to restore order. Depending upon the factors of lethality and capability of the person in crisis to act on his or her own behalf, the helper takes either a facilitative or directive stance. In the facilitative stance the helper and client talk about the process, but the client takes responsibility for any action. Under the directive stance the action may include the helper as well as the client.

No crisis situation is resolved without follow-up. In the best of all circumstances this would give the client and opportunity to evaluate and affirm their own ability to retake responsibility and to problem solve difficult situations. There is an opportunity to analyze in a rigorous manner what has happened and what was learned in the process. There is affirmation by the client and confirmation by the helper. If conditions of resolution have not been met, follow-up gives the opportunity for review and re-evaluate solution options and perhaps to revisit the decision making process. The process continues until possible solutions, concrete actions, and follow up result in a re-stabilization of the person in the situation.

It is important to recognize the axiom that each solution is someone else's problems, when weighing adverse consequences. Part of the question, therefore, may be tied up in willingness to *risk*, and the helper and client may disagree on the degree of risk that is acceptable. Solutions may need alteration over time or may impinge on someone else life. Such self assertion on the part of the client may be necessary for her own self actualization, but this must not be done callously. The helper has a responsibility to be concerned for other people even as s/he understands the needs of the person in crisis.

It should be obvious that persons well trained in problem solving and decision making are less likely to find themselves in a state of crises as they will have been able to use these devices as self-actualized mechanisms to work through many situations of difficulty.

THE CHANGE ENVIRONMENT

Prevention

The school is a special environment which is both '*normal*' because it is the place that all children of certain ages are required to spend a major portion of their time, and yet artificial, since it is not necessarily the place that these children would choose to be. The more that the school is capable of providing an environment which attracts the children, the more likely it is to be a place of change, growth and development. The conundrum for educators is that they would like to make the school appear as a formal place for a

studious academic experience, and yet still be appealing. For children who come with a 'hostility' to academia⁷⁰, there is little in the environment which is attractive.

The characteristics of the change environment, including the physical setting should not be overlooked, as they give *cues* to the children about what is and is not acceptable. The question is not that one should not give such cues, but rather that one should be *aware* of exactly what cues are being given and take steps to understand [based on evidence] how different children with different belief systems are likely to react. Finally, the educator must then consider what is the best way to make the school acceptable to those who find difficulty with its ambiance.

We have pointed out elsewhere how bars on windows, boarded stairwells, and guards in the halls gives a message to the children that this is an unsafe environment, which predisposes them to certain expectations and behaviors. The question of what message to send and how to use that message in its most effective manner with children who have many differing perspectives is not an easy one to manage. In general, schools will differ dramatically in light of the culture of the school personnel, community and make up of the student body about what message should be sent. It is probably easy to understand how a church run school would want to have the school endowed with religious icons. Both the staff and students are coming from families who have *chosen* such a religious/academic experience and the icons reinforce the nature of the school. A large urban public school, with its diverse cultural membership in both staff and student body, will probably find it much more difficult to develop the appropriate message. But they have a responsibility to do so.

One of the messages that must be inherent in **all** schools is in regards to *positive interpersonal relations*. While the emphasis might be more important in a school with a diverse population, it probably has merit in even highly homogeneous schools. Just as the religious school defines its message with icons, so too can the school promote its nature as a prosocial school be promoted with icons. The icons of prosocial skill training promote good choices, stop & think attitudes, positive feedback, and choices and steps to make choices. These send a message to children of all ages that in this school it is expected that the child will make decisions about his/her own life and that given the proper information, each child is expected to make good decisions. They also suggest that praise for such good decisions is immediate and universal. The icons suggest that the skill in making such good decision can be learned and that the school will take some responsibility in teaching each child the steps to good decision-making. In other words, the icons indicate a place where good behavior is expected and rewarded.

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Some families place their values on pragmatic, physical expertise and abhor [and perhaps fear] those who deal with abstract ideas. Children from these families often come to school with a predisposition to dislike *education* and to see it as irrelevant to the requirements of future life. The fact is that most educational systems are designed toward *cultural imposition*, to make individual success and abstract ideas the values of the child regardless of the family culture. This denigrates the family values and sets the child/family in conflict with the school. A design of cultural *enlargement*, which expands upon the values such as mutual aid and pragmatism might be much more attractive and user friendly, but this is another book at another time.

These icons might be supported by thematic material about such things as spirit, positivism, uniqueness, creativity, effort, improvement, etc. These themes may be less well understood by the new students [particularly since they change regularly, and are often wordier], but will gradually add depth to the general atmosphere of prosocial attitudes. This does not mean that icons and artifacts are enough. To set the tone of positive expectations for prosocial behavior is only the beginning. The change environment must follow up this presentation with policies, regulations and protocol which set the boundaries and norms. What can be done, through what means, for whom and under what conditions are some salient parameters governing participation. What one child may consider a 'good' decision, may not be considered so by another. Therefore, the guiding theories of the environment including implicit and explicit responses by *everyone* in the environment on a consistent basis is required, if the original expectations are to be carried out.

It is through these actions that the teachers and older students teach new students how to deal with 'bad' choices; their own and from others. This requires that each school building have a consistent discipline code which deals with identifying what are inappropriate or unacceptable actions and how to help the child who is displaying such actions begins to identify and select appropriate alternative behaviors. Other students must understand and utilize the protocol as effectively as teachers and administrators. Focusing on the desired replacement skills, offering alternatives when the child in stress cannot find one, helping the child learn the skill, providing and opportunity for the child to utilize the skill, and offering positive reinforcement for 'good' choices, and new decision making levels for students who are unable to make use of this support.

The intervention and training must take place wherever the difficulty occurs and when it occurs. Prosocial skill building is a *situational* intervention which occurs when the situation demands it. The school will need to use these 'teachable moments' effectively. Teachers and perhaps even other students should be prepared to model, role play, give performance feedback, and transfer the training sequence just as they would if they were teaching math. Training must utilize 'real life' situations that occur on a daily basis and must be reinforced across the school culture.

The change environment must demonstrate on a daily basis the philosophical principles of *unconditional positive regard* [separation of the behavior from the child; you may reject the behavior, never the child] and *high positive expectation* [a continual belief that each child is capable of high achievement in the good choice selection]. This will require consistent and positive response. The school culture should be at least 5:1 positive to negative feedback ratio. The peer group should be skilled in the use of ignoring, supportive reinforcing and modeling. Every child is everyone's responsibility.

Finally, the prosocial environment will need to be very concerned with words, language and communication. Words which promote internal attributions can be scripted into everyday usage. Cognitive qualifiers and other 'memes' can be used. The language used in conflict and every day life are important aspects for they send 'messages' and the

messages must be rational and balanced = positive messages which state that you are OK and so am I.

The understanding of the child as a member of a system, even within the context of the school will require that there be some formal method to establish the child's social status within that arena through the use of sociometric models. Children can be found to be popular, liked more than disliked, disliked more than liked, controversial [relatively equal number of 'positive' and 'negative' nominations], rejected and neglected [children who do not receive any nominations], Those of the lower four categories will need developmental support in order to meet the criteria for acceptance established by peers.

Development

Despite the preventative measures of a positive, prosocial environment, some children may find the expectations so new, intimidating or incoherent, that they need special support in learning the skills necessary to act out good choices. These children may need to be formally taught all or parts of the Prepare Curriculum of Arnold P. Goldstein. Goldstein has extensively written about this training and we do not need to reiterate the detail here.

The children can be taught in either a heterogeneous or homogeneous grouping, but should follow the formal protocol established.

- 1) The teacher will show the students how to go through the problem solving steps and how to select another, more appropriate behavior saying all of the steps and prompts out loud so that the students can prompt themselves silently.
- 2) The teacher will select students to role play the same or similar scenario as the teacher modeled. The role play always uses appropriate alternatives. The role play is always voluntary and uses students who were actually involved in a problem when the teacher is doing a re-creation.
- 3) Following role play or the re-creation of an actual behavior problem, the teacher encourages the student's peers to provide feedback first. This is an opportunity to help students learn the problem-solving model for selecting appropriate alternatives.

These interpersonal skills are taught in precisely the manner of academic skills, can have homework, and other accouterments of the regular curriculum. While it is important to begin the training on skills that are relevant to the needs of the children as they perceive them as important, the entire curriculum may be appropriate to address over time. Other students who have learned and can use the skills can often co-facilitate these classes although most primary 'tutors' are likely to be educators.

Skills that will access multiple sources of reinforcement and replace behaviors that are particularly aversive or bothersome are important to address early in the process. This

will reinforce the positive feedback ratio that is so important to the development of the child's self-appreciation. Teachers of other academic subjects should be aware of the skills that individual children are working on and be particularly prepared to reinforce positive use of these skills within their own classrooms.

Such students may also require a level of cognitive error correction or even a full cognitive restructuring opportunity.

Remediation

Every school is aware of students whose personal belief system is so askew that their behavior is severely atypical. While it is expected that such children would have such incoherence modified with preventive and developmental experiences, other children may come into the school with different educational experiences at an older age and find that they are not able to perform as expected. Based on the severity of the discontinuity with the school culture, the school may find the need to address such a child individually. The suggested remedy is to provide such children with a 'Mentor'. The Mentor may enter the child's day at the home or later at the school, but in each case the role expectations will have been specifically articulated by planning led by a *service facilitator* and involves direction by the child/family and other involved participants.

The Mentor must first engage the child in a significant trust relationship. Through this relationship s/he will start a formal dialogue regarding the child's identification of problems and their solutions. For example, if the child's difficulty is violence, the first question might be to ask the child whether such violence is a problem. If it is not, the questions would probably pursue the rationale, which begins to identify the child's belief systems in regard to self and others. If the child believes that his father will not accept him if he does not fight when confronted, it is difficult to argue with the child's behavior. However, it opens up several potentials. The first may be discussions with the father. Another is cognitive restructuring. A pursuit and analysis of the evidence to determine whether this belief is, in fact, true; and if true, what alternative behaviors may be acceptable. Another potential may be to involve the father in determining whether the message his son has received is correct and whether if correct, the father is aware of the difficulties that this belief is causing. Other alternative potentials may also arise which can productively be used to address the primary issue of helping the child to achieve and use prosocial skills.

The formal dialogue is an on-going process of helping the child to be continually aware of his/her thinking process and identifying and evaluating the consequences of the behaviors that are predisposed. At no time is the formal dialogue focused on ridicule or depreciation of the child for his/her thinking. As the Mentor recognizes that the child's thinking determines his/her reality, many of the behavioral response will likely become more coherent. The alternatives are to change the child's cognitive structure [belief system about self, others, and the future; change the environment which is causing the discrepancy with the child's belief system; or finding alternative responses which are coherent with both the child's belief system and the sociocultural expectations.

As we have indicated earlier the Mentor is responsible to the child and charged with finding methods to make effective change in one of the three mentioned areas. The assumption that only the child needs to change should be recognized as false on its merit.

Extending the Change Environment

While the school is only responsible for the school, it has the potential to influence families and the community in which the child resides. Both have a capacity to support and enhance the social education of the child. Parents can be taught to model, role play and provide performance feedback to their children in all of the Goldstein curriculum as well as providing the ‘good choice/bad choice’ reinforcement. The community has the capacity to expand the change environment by taking the philosophy and methodology beyond the school walls. Crossing guards, shop keepers, church elders and many other can display icons and artifacts of prosocial behavior and provide ‘good choice/bad choice’ reinforcement. It would be hoped that as the school implements the social education methodology, these extensions become a potential for a change environment involvement.

Cultural Restructuring

Restructuring a culture for the purpose of helping children learn to deal more effectively with each other in meaningfully satisfying and gratifying relationships requires a process in which the people in charge of the facility or organization must first make clear this intent. Managing people in an organization has certain congruence with managing people with problems in living. In both cases, there is a requirement to provide a way for the personal preferences of the individuals involved to become compatible with a specific, defined set of assumptions which the manager believes will be beneficial to both the individual and the organization or society. And in both cases, the critical assumption underlying the need for change is that the learning environment [culture] has somehow created and maintained thoughts, which are now considered to be incompatible with the desired outcome expectations.

The need for change requires a ‘theory of change’, which can be described as “the manner in which a given intervention is thought to be related to intended outcomes for a particular population”. Thus an expectation of change must examine closely the ‘theory’ that underlies the way the change from the status quo to the outcome expectation is going to occur. One sees innumerable incidents of change interventions, which are based on apparently unknowable theories [and often unstated outcome expectations]. Metal detectors in schools might be a good example. One could assume that the change [outcome expectation] that is desired is that students will no longer bring weapons to school. What is the theory behind the metal detector? Is it simply to allow the culture of carrying weapons to continue, but to ‘catch’ those who participate in it? There must be a reason why students bring guns to school, but it doesn’t seem likely that the metal detector will affect these fundamental reasons.

Perhaps we assume that the students will be 'afraid' of getting caught, and therefore no longer bring guns. Perhaps we assume that 'fear' causes change. While this is, in a superficial way, a supportable notion, it is not fundamental change. As an alternative, we assume that once students accept that no one will be able to get a gun into school, there will be no need for them to have a gun. But if you are the smallest student in the school and have a concern about the largest student in school, you may not care whether s/he has a weapon, you might feel the need for a weapon regardless of whether anyone else has one: it's the great equalizer. This seems to make the theory that 'if no one has a weapon, no one needs a weapon', seem somewhat faulty as a theory of change.

In fact, one can make an argument that the presence of a metal detector makes it necessary to have a weapon. After all, if there was not a need to have a weapon, there would be no need for a metal detector. The very presence of a metal detector may in this way make the school less safe. Each person recognizes the need to be 'on guard' and ready to protect him/herself because of the acknowledged expectation that there will be weapons in the school.

We remind you that cognitive behavior management operates on a theory of change that states: **People are the sum total of what they think. Change occurs only when they think differently.**

Based upon this theory, the idea of a metal detector entirely misses the point. There is a reason that students of a given school think that they must bring weapons to school, and that thought must change for the behavior of bringing weapons to school to change. As we have already noted, the presence of the metal detector may, in fact, reinforce the thought of needing a weapon.

But for the culture of this school to change, the thoughts of the faculty must change. Particularly those thoughts concerned with expectations. Webster's New Universal Unabridged Dictionary [1983] defines *expect* as 'to look for as likely to occur or appear.' According to Eden [1990], it is this likelihood-of-occurrence sense that triggers *self-fulfilling prophecy* in the individual. Webster's also defines *expect* as 'to look for as due, proper, or necessary; as your bill is due and immediate payment is expected'. This is a normative definition of expectancy. This object of normative expectancy is what *ought* to occur in the future. This is not the type of expectancy that produces a self-fulfilling prophecy; it is the stuff of which role expectations and other normative concepts are made. While it is important that individuals understand how they ought to perform in the roles that they inhabit, it is more important that they feel from others that they *can* perform those roles.

"These two meanings of expectancy - likelihood of occurrence and normative - are sufficiently different that they can be contradictory. If the manager tells a subordinate that s/he *is expected* [in the normative sense] to report in on time, but in his/her heart the manager actually *expects* [in the probability sense] the subordinate to be late, it is the latter expectation, not the normative one, that will be unwittingly communicated and initiate an self-fulfilling prophecy that may result in tardy behavior on the part of the

subordinate. Thus it is expectancy in the sense of that which the expecter *believes is likely to occur*, rather than that which a person believes *ought* to occur, that leads to the behavior that fulfills the prophecy. In particular the use of “performance expectation” refers to the level at which the manager believes the subordinate is likely to perform” [Eden - 1990].

Teachers who work in schools with the metal detector are likely to expect [normatively] that the kids ought not be violent, but expect [in a probability sense] that they will be violent. The metal detector is likely to reinforce this probability expectation. Thus teachers are likely to act protectively or even aggressively towards students in order to maintain their own safety. If the faculty *expects* [in the probability sense] there to be violence in the school, there *will* be violence in the school, which of course *justifies* the thought that we need metal detectors.

Changing a culture is therefore, not a trivial thing. For our purposes, we will explore the potential for restructuring a culture from two perspectives: 1) the management focus on helping staff change, and then 2) the strategies [protocols, techniques and procedures] that the staff might use to reflect their new perspectives onto the users of the service. It is, to some extent, artificial to make this separation as it will often prove most beneficial to change staff thinking by providing them with tools which effectively change the clients they work with.

Language & Concepts

There are several concepts that the staff people should become familiar with. The first is the concept of the *meme*, which we have discussed earlier.

“Just as genes propagate themselves in the gene pool by leaping from body to body via sperms or eggs, so memes propagate themselves in the meme pool by leaping from brain to brain via a process which, in the broad sense, can be called imitation” [1976].

Richard Dawkins in *The Selfish Gene*

Such memes can be perceived as the carriers of culture and it is important for us to identify memes in order to see how all of us are influenced by this process.

Seeding

Memes can be ‘seeded’ into the environment. The method is fundamentally based on the premise that *describing a particular state to a person evokes that state (and, additionally, that once evoked, it can be anchored, linked, directed, intensified, combined with embedded commands, etc).*

What is referred to above as ‘*describing*’ is known in the scientific literature as ‘*priming*’ or ‘*seeding*’. Priming refers to ‘*the activation or change in the accessibility of a concept by the earlier presentation of the same or a closely related concept*’ (Sherman, 1988, p.

65). Kihlstrom (1987) and *relates it to preconscious processing*: “..Preconscious processing can influence the ease with which certain ideas are brought to mind, and the manner in which objects and events are perceived and interpreted. Finally, in order for preconscious processing to affect action it is necessary that relevant goal structures be activated in procedural memory.”

We would suggest that seeding an environment with memes, icons and rituals which are habitually experienced over and over helps to make the conscious process of such experiences nonconscious. Repeating a mantra which includes an internal attribution [explanation] such as “This school has the most responsible students” over and over has an impact of [*describing a particular state to a person and evokes that state*] making students responsible. Using a ritual such as “Stop & Think” not only provides a mantra/meme, but has a conscious process of behavioral steps, which causes both the adult and the child to act out the experience according to a specific set of rules. The meme made up of the words, “Stop & Think”, can be used on various icons as conscious/nonconscious reminders of the expected ritual. Other rituals, based on metaperception can be utilized [such as ritualizing the staff exercise], so that a ‘beginner’s mind’ can be attained each day by ritually ‘changing history’ first thing in the morning.

Cognitive Qualifiers

‘Cognitive qualifiers’ are another type of meme we have discussed, which can be ‘scripted’ for teachers to have maximum ‘seeding’ benefit. As you remember, a ‘cognitive qualifier’ is a meme made up of a ‘commentary’ adverb appearing at the beginning of a sentence or phrase that refers to an *emotional* or *cognitive* state, such as ‘happily’ or ‘sadly’ in the previous sentence. A cognitive qualifier [*describing a particular state to a person evokes that state*] prepares the mind to respond in a specified way to whatever words follow.

Cognitive qualifiers direct your mind to think of aspects of an experience that are specified by the kind of qualifier used. Understandably, teachers might feel incongruent about using the qualifier ‘happily’ for some unpleasant events, but luckily there is an alternative resource. Both ‘sadly’ and ‘happily’ refer to emotional states, and most emotions are evaluative, dealing with pleasant or unpleasant, positive or negative. These evaluative qualifiers will sometimes seem inappropriate for the content of a particular thought or sentence.

The universal set of cognitive qualifiers are quite different, and that do not have negative or unpleasant aspects, since they all center around a state of interest, curiosity, attention, or understanding: ‘interestingly’, ‘curiously’, ‘surprisingly’, ‘understandably’, etc. Since these cognitive qualifiers never have negative states associated with them, they are *universal resources*, which can be used with any experience. And since a state of curiosity or interest is an excellent resource state for learning and change, this kind of cognitive qualifier is a wonderful state to use in beginning to understand and process a difficulty.

This can be very useful when used as a ‘backtrack’ with a student. When a student describes a problem, you can feed back their statement, beginning with ‘understandably’, or some other qualifier that has to do with curiosity and learning, and watch for the nonverbal shifts that indicate that they are thinking about it in a more relaxed and useful way.

Creating a shared world

John McWhirter has also pointed out that a very important aspect of these cognitive qualifiers is that they create a shared and universal world, a frame that embraces both the speaker and the listener.

Attributions

Attributions are concerned with the way people try to ‘make sense of the world’ by providing explanations for why events happen by setting them into a causal framework. When individuals engage in an activity, they may attribute their outcomes to the operation of one or more causal factors - the tendency to ascribe responsibility to personal forces [e.g., ability and effort], or to impersonal forces over which the individual has little control [e.g., situation and bad luck]. The nature of the causal attribution is the internal-external control.

Possibly the most important attributions are those that explain why we have succeeded or failed in a given situation. Generally, it is the person who takes internal responsibility for success/failure who is most competent in living. Certainly, we can ‘seed’ the environment with internal attributions, which prime the individual to accept responsibility and to achieve through self-effort.

Attribution training happens through interpersonal communication either formally or informally. While it would be nice to have a culture in which everyone understood and used internal attributions at the appropriate times, this is generally not the case. In fact, research indicates just the opposite. Partially this is because of the fundamental cognitive attribution error in which there is a tendency for the *actor* [or person behaving] to attribute the cause of their success/failure to situational or *external* factors, whereas the *observers* of the behavior, tend to attribute the same action to disposition or *internal* factors. Thus adults in the environment are more likely to ‘blame’ the child for outcomes, particularly negative outcomes, over which the child has no control, while the child is much more likely to place the ‘blame’ on external forces [including perhaps the adults]. Does this sound like ‘oppositional’ behavior, in which the child is disputing authority, to you?

In order to ensure that positive internal attributions occur on a regular basis from the significant adults in the culture, it is important to install a procedure which ‘seeds’ the culture with positive internal attributions. One such method, to enhance the performance

of an individual child, is to *script* the environment. Scripting is simply the writing out of specific words to be used in specific situations as appropriate.

For example, management can explore and identify specific areas of attribution difficulty of an individual child through a ***Functional Cognitive Behavior Assessment*** process in which all significant people in the child's life as well as the child are interviewed [preferably together] in regard to their observations as to the events & experiences, and the thoughts [leakage] stated at a time regarding judgement of success and/or failure and attributions of that outcome, for example, after the giving of a test.

It is important to gather information not only on the child's attributions, but on the attributions of the others who relate to the child as well. This is because the adults, through the fundamental cognitive attribution error, may be promoting negative attributions on a regular basis in these difficult areas. Management can ensure that the appropriate scripts are used by these people at these times.

While some students will have negative attribution traits [external locus of control, stability and uncontrollability] which are pervasive, most will have more or less specific areas of special concern either because it bothers them more than other areas or because it is more debilitating to their functioning. The area can be academic [math or reading], social ["people don't like me"] or any of an infinite variety of areas.

When the data collection is done, whether collected for an individual or for the class as a whole, management can develop scripts for the significant adults to use with the child(ren) during identified problem events. Based on the information that has been gathered, the development and implementation of scripts, enable the staff to support the positive internal attributions for the child. Additionally, their use may also diminish and perhaps replace the negative attributions of these teachers, and provides a 'seed' of different thinking and communicating within the culture, which can have a significant impact upon the child.

Changing our own communication is difficult. More than 95% of what we do is done nonconsciously, and it cannot be otherwise. Thus, it will be important that there be a *schedule* for use of the scripts which does not limit their use at other times, but ensures that they are said at the appropriate times. This schedule is unlikely to be temporal, and more likely to be situational. Thus, it is not in the schedule to state the script at a certain time during the day, but rather that it must be used every time a specific situation comes up [e.g., before a math test].

The scripts will obviously need to be revised occasionally, simply so that they maintain a freshness to the child and the significant adults. On the other hand, through continued inquiry, evidence of more successful scripts can be accumulated and strengthened and weaker scripts abandoned.

Interpersonal options

There is a study about using internal attributions in relation to math and comparing this technique of *antecedent attributions* with the technique of *persuasion* and the technique of *reinforcement*. The question is how to explain the math performance. The following scripts were used with individual kids. The teacher would write or say:

Antecedent Attribution Strategy

- You seem to know your math assignments very well.
- You really work hard in math.
- You're trying more, keep at it.

Persuasion Strategy

- You should be good at math.
- You should be getting better math grades.
- You should be doing well in math.

Reinforcement Strategy

- I am proud of your work.
- I am pleased with your progress.
- Excellent work!

The technique of *reinforcement* should be familiar to all of us as it is generally seen as the “state of the art” in school technology for behavior intervention. Consequences can influence whether or not a behavior will continue. If a behavior is followed by a consequence that is pleasant, the behavior will most likely happen more often. Another word for a consequence is reinforcer. Reinforcers can be positive or negative - which will determine the likelihood of increasing or decreasing the behavior. A *positive reinforcer* is any pleasant object or activity that is given to a person following a behavior which increases that behavior. The script offers positive social reinforcers to the child.

Persuasion is the simple procedure of *telling* a person that s/he should or ought to be able to do something and expecting that they will acknowledge the telling. The persuasion strategy seems generally to be the strategy that parents and teachers use as a “normal or default standard”. It is the strategy of choice in our personal lives. However, it is the least effective of the three and, therefore, should not be considered a professional strategy.

If we treat people as they are, we make them worse. If we treat people as they ought to be, we help them become what they are capable of becoming.

Johann Wolfgang von Goethe [1749 - 1832]

Antecedent attribution involves treating a person as we would want them to be.

The outcome of this study helps to delineate the anomalies of our system. The baseline for everyone was 15. Over two tests, the kids with persuasion scripts averaged 15.5 & 15. The reinforcement kids averaged 16 & 16, while the antecedent attribution kids averaged 17.5 & 17.8. The attribution kids averaged one to two points more and held this improvement over the next two weeks. “This is the kind of person I am, one who can do math.”

Self-Appraisal

This comparison to persuasion and/or behavioral reinforcement is significant. The issue of self-appraisal is also of concern and the use of reinforcement is a major focus of many “feeling good” programs. The issue of self-esteem is a powerful one in our society, and we often use positive reinforcement, even when it is not merited, to support the child. The quotes below, selected from Martin Seligman’s book *The Optimistic Child*, suggest that perhaps our present method of operation is a dangerous one.

By emphasizing how a child feels, at the expense of what the child does - mastery, persistence, overcoming frustration and boredom, and meeting challenges - parents and teachers are making this generation of children more vulnerable to depression.

People guided by the popular “feeling good” viewpoint are ready to intervene to make the child feel better. People guided by the “doing well” approach are ready to intervene to change the child’s thinking about failure, to encourage frustration-tolerance, and to reward persistence rather than mere success.

[Seligman - 1995]

As teachers and parents reinforce non-existent achievement, they undermine self esteem, which is an *effect* of doing good, not a cause of doing good. When parents and teachers praise children in pre-planned ways which do not take into account the child’s effort or the outcome of the child’s effort, this may, in fact, be damaging to the child. This is not to imply that reinforcement of *doing good* is not appropriate.

The reinforcement strategy, when used properly has positive impact and it should be noted that we are not suggesting that it be abandoned. However, we should be concerned that we only use reinforcement when it is **earned** and we should increase the use of antecedent attributions.

Rewards & Punishment

This leads to the whole question of rewards and punishment, which Marvin Marshall has considered in depth. Since both rewards and punishment are **external reinforcements**, they are not as helpful as internal attributions on two counts: 1) they are external and 2)

they are reinforcements, not antecedent attributions. They do not cue a child how to act, but merely attempt to respond to how the child acted.

Marshall reports having received a letter with the following story.

My eleven-year-old daughter had done something terrific and I launched into my usual, “oh, honey, mommy’s so proud of you. . . .” Well, she stopped me mid-gush, put her hand on her hips and implored, “Mom, please stop! Whenever you do that, you make me feel like you’re surprised that I can do things—like I’m not capable!”

The mother was using praise in an attempt to reward her daughter. Although the mother’s intentions were honorable, they were counterproductive. In large part, it is apparent that the mother used such positive reinforcement *ad nauseam*. The message was not the positive one intended, but rather the falseness or exaggeration of the reinforcement which actually sent a different message - ‘Boy! Am I surprised.’

The mother has since started to *acknowledge* her daughter’s actions without reference to her own motherly pride. Acknowledgments refrain from implying the action was taken to please someone else. *Acknowledgments [I saw that], recognition [you did well], and validation [that was good] are more universal and satisfying rewards.*

Incentives can also serve as rewards. Grades are incentives for many students. However, schools have great numbers of students who are not motivated by such incentives. The point is important: *Rewards can serve as effective incentives only if the person is interested in that reward and believe that they have earned it.* Giving incentive rewards for failure to achieve is possibly the worst of all worlds: e.g., getting good grades without doing the work.

Although rewards such as acknowledgments and incentives can have salutary effects, *rewards for expected standards of behavior are often counterproductive.* Schools and parents often give young people the message that society will somehow immediately reward them if they act appropriately.

On the other hand, *when students are not afraid, punishment loses its efficacy.* Yet, we often resort to punishment as a strategy for motivation. The literature on punishment suggests that it not only does not work, but that it *leads to increasing violence.* Kauffman (1993) for example states that “The punishment of children by adults may result in aggression when it causes pain, when there are no positive alternatives to the punished behavior, when punishment is delayed or inconsistent, or when punishment provides a model of aggressive behavior.” For example, students who are assigned detention and who fail to show up are punished with more detention. But in the hundreds of seminars conducted around the country, teachers who use detention rarely suggest that it is effective in changing behavior.

Reward also can actually reduce the desired behavior.

A group of researchers observed young kids [3 to 5] at play. They noticed that most of the kids loved playing with the magic marker type crayons and would use them with great concentration and apparent pleasure. According to attribution theory, we would claim that these kids used the crayons for internal reasons. There was no external force causing this behavior.

Then the researchers promised, then gave, one randomly group of children ‘Good Player Awards’ as a reward for their playing efforts with the crayons. For one week these children knew they would get a ‘prize’ at the end of the week for their drawing behavior. For the remainder of the children, no such promises were made.

The results were dramatic. The children given the rewards reduced how often they played with the crayons and reduced how much time they spent with the crayons because the process changed an internal attribution to an external one. The control group maintained their normal frequency and duration of use since their intrinsic motivation to use the crayons was not affected.

The key issue around using rewards is to focus on *how they are used*. If the reward is *earned*, it is appropriate and has some impact upon motivating the child. However, if it is used when there is no performance OR for behavior that is already taking place, it can have a negative impact.

- when there is no ‘doing good’ [the child has not achieved, persisted or given special effort] - the reward can only be regarded as oriented toward helping the child ‘feel good’ and may have the opposite effect, leading to depression.
- when the behaviors are already being performed because of intrinsic satisfactions, the reward may move the motivation for performance from internal satisfaction to the desire for the external reward and thereby eliminate the behavior when no reward is available.

The idea that rewards and punishments are effective means of changing the culture is probably unfounded. However, the use of ‘seeding’ the environment with positive memes, mantras, scripting, rituals, icons, cognitive qualifiers and positive internal attributions can have a major impact.

These ‘tools’ for ‘seeding’ can be developed and implemented without changing the ‘mind’ of the educational or clinical staff [although they may influence the staff to change their minds]. Thus, management can take the initiative of supplying these tools and implementing these strategies even before the management culture is fully prepared. While they use the same method as cognitive restructuring, which is the remedial process, they do not; in fact require extensive training and belief. In fact, using these strategies can help to create the anomalies, which Osborne & Plastrick [See Volume II] indicate are so necessary for change. In addition, they provide a framework for the future to which staff can relate.

Synopsis

The basic activity of the conscious organism is to make sense of the world for the purpose of *prediction* and *control*. The greater the ability to predict and control; the greater the comfort level. This process of making sense is *constant* and avails itself of *infinite orders* of self-representation; each new order capable of *evaluating* the prior order. This is the “me” who watches “me”, the critic or supporter, who indicates the degree to which I am meeting my own expectations. Such evaluation is generally *reflexive* and occurs without conscious effort and/or awareness. However, evaluation can be done *voluntarily* for short periods of time. Like any voluntary implementation of a reflexive behavior, the effort requires an increased expenditure of *energy*.

The decision to expend extra energy has several requirements. One major requirement is *motivation* [desire, volition], which in turn requires an expected outcome. People become motivated to make special effort when there is a definable outcome of interest or *value*. The greater the interest and the greater the potential of achieving the outcome, the more energy they are likely to expend. People make decisions about their own behavior using just these variables. Evaluation, as well all other mental processes, goes on without the individual knowing about it. In fact, they can’t usually stop it without a great deal of work.

A decision to make an effort in a given situation is honed by past experiences and the individual’s developmental history. Different environments tend to produce different behavior. This is because the individual’s experiences in those environments vary; they feel more confident in those arenas where they have had past success. Self-identity varies over time, environment and circumstances.

Generally, people make decisions among alternative plans [*scenarios*] based on their perceptions [*expectancies*] of the degree to which their decision will lead to desired outcomes; the *valance* of the desired outcome; their evaluation of their *skill* at performing the behavior and the *amount* of energy required. Scenarios or scripts which recall expected sequences of events are reviewed which lead to success or failure. Each of these scripts includes 1) a stimulus situation 2) an affective motor and 3) cognitive responses. “1) When I am in this social situation, 2) I become anxious and nervous and tend to get quiet and inhibited because I’m wondering what people think of me; 3) I need the approval of others.” Such a thought process is not likely to lead to a decision to expend extra energy to achieve an expected outcome.

There is, after all, a limit to the *availability* of energy and most people will only use such energy when the prize seems both worth the effort and winnable. Persons can be de-energized through attention to other stimuli.

Changing the traditional scripts requires an improvement of the *evaluative rules* [syntax]; the logical rules required for analytical work. The present scripts, schemas and structures

are at least *satisfactory* or they would not continue. Unless new evidence can be brought to bear that the ability to predict and control can be improved, the individual is not likely to change. For people with low self appreciation and a mental imbalance who cannot feel comfortable with the inner and outer stream of consciousness and their ability to predict and *control* events, it is the standards [*criterion*] against which new propositions are measured that require change.

Such criterion are organized hierarchically and in modules. Over time these modules are filled with *truisms*: mental representations, which *satisfactorily* predict and control events. These truisms are learned from other people and experiences of the individual. They help to answer questions such as who am I, what power or weaknesses do I have, what am I good at, what can't I do? Since all people live in relationship to others, questions about these others are also answered particularly as we compare ourselves to those others. Gradually, we develop set of truisms about ourselves, or others, or circumstances and create a module called a *schema*, **which** is an *enduring perspective* about the issue at hand. Major schema then combine to create cognitive *structures* or ways of thinking. Sets of structures become operational *systems*. A belief system might include cognitive structures concerning self, others, circumstances and future prospects.

We can start even earlier in the creation of systems with a process which starts with basic instincts responding to *stimuli*. There is a loud noise and the baby cries in fear. In humans, multiple stimuli response can be integrated to create *sensations* which are then organized into single *comprehensions* which may first become conscious as a *hunch* or *intuition*. The baby hears a loud noise and sees the mother's face and another face and is picked up and comforted. Perhaps the loud noise is not dangerous when these other stimuli exist. The conscious organism then identifies a *pattern* and assigns a label. Loud noises occur whenever brother is around; perhaps brother is *noisy*. A *metaphor*⁷¹ may be used if the comprehension is subtle. The use of metaphors is a substitute for a deep understanding, but allows the experience to be communicated to some degree to others. A robust comprehension might take the form of a *proposition* [a full mental representation defined in language].

Evidence has shown that human beings find all *propositions to be true*, at least until analytical work compares them for coherence against the established standard. When this comparison is done, five basic outcomes can take place:

- 1) The proposition is not analyzed and therefore is true.
- 2) The proposition is analyzed and found coherent; and is therefore true.
- 3) The proposition is analyzed and found incoherent; and is therefore false.
- 4) The proposition is analyzed and found to be incoherent [false] but is so gratifying that the standard is modified to accept the proposition as true.
- 5) The proposition is analyzed and found to be incoherent [false] but is so useful in predicting and controlling that the standard is considered to be non-utile and therefore is modified.

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Analogies - The heart is *like* a pump, and metaphors - The heart *is* a pump ,are use similarly to help us move from what is known to what is unknown.

It should be evident that the individual is constantly comparing him/herself with, and attempting to predict and control events and others in his/her environment. It is from others that we define ourselves and with others that we define them. No coherence is possible without a sociocultural involvement. We are the products of our environment; even as we create it.

No change in belief takes place unless there is *dissonance*: a proposition is found to be both incoherent *and* utile [useful and/or gratifying]. In these conditions the conscious organism must make a decision as to whether to disregard the value or modify the standard. This brings us full circle. If the individual is to learn to be better able to predict and control events, they must develop not only strong positive beliefs about themselves, others, circumstances and prospects, their beliefs must be *flexible* enough to allow for novelty and innovation. This requires a wide repertoire of skills and scripts. If the person can review alternative scenarios and discover optional ways of behaving and then has the skills to behave in those alternate ways, they are likely to be comfortable in many situations. Beliefs contribute to a person's behavioral propensities. Changes in beliefs change propensities and therefore behaviors. If I now believe that this social situation is something in which I am proficient, I am no longer likely to be anxious and behave in an inhibited manner.

Ideas, which might be described as the molecules of cognitive processes are grouped in structures and schema in a hierarchal pattern. The most utile [satisfying] are the first available. Even if the traditional ways of behaving are only marginally successful, they are unlikely to be changed. Two extremes of system modification can be identified. Truisms of a lower order can be changed without immediate impact on the overall system but providing gradual erosion of belief structures, or the truisms can be traumatized causing turmoil and potential for massive change. Trauma produces helplessness. Finding that our traditional beliefs and ways of behaving are no longer successful at making sense of the world is described as mental imbalance. When people are so traumatized, the most important response is to put them back into control through the use of their own analytical and evaluative skills. While great opportunity exists to provide significant change at these times of emotional collapse, the gradual erosion of truisms is the most likely and practical process by which to facilitate change. Once the individual becomes *dissatisfied* that their cognitive processes are capable of providing the level of prediction and control they would like, they are prepared to entertain changes.

Enhancement of this process can take place by encouraging *attention* to the process and providing skill training on the analytic process. The individual is a goal seeking, decision maker who can and will make decisions about his/her own life. The expert is an enabler who provides alternative scenarios and helps develop the skills and logical rules which will enable the individual to make a different decision. The attributions of traditional interventions encourage the individual to feel weak, out of control, unlikely to recover and in need of potent restriction. They are highly unlikely to be effective and have demonstrated that failure over time and many people.

While the school cannot and should not be “all things to all children”, it has a significant child and family development role to play. The technology of *teaching* has now emerged to include affective, behavioral and cognitive aspects. These new ABCs provide the capacity for an enlightened society to have the opportunity to provide to every child the capacity to develop to the greatest extent possible into a citizen who will not only obey the laws of the society, but contribute to the greater good.

Two traditional types of intervention enable teachers to manage aggressive behaviors: 1) rearranging behavior enhancements and behavior reduction contingencies for aggression and, 2) teaching appropriate prosocial skills that are incompatible with antisocial acts. These two approaches are based on a social learning theory model that presumes that aggressive behaviors are learned and that prosocial skills that are incompatible with aggressive behaviors can be taught [Bandura, 1971]. [Rutherford & Nelson, 1995] We now add a third option, changing the ‘inner logic’ of the individual who selects aggressive behavior as an amenable option.

If the school is to intervene effectively in the behaviors of children with labels like oppositional disorders and conduct disorders, it can do so only on its own terms and with its own belief systems. Perhaps, at least partially because of the *medical mystique* of such labels, investigation of interactions between students with emotional and behavioral disabilities and their teachers indicate low rates of teacher reinforcement of desired student behavior, high rates of aversive interactions, and higher probabilities of teacher avoidance and escape behavior patterns [Gunter, Denny, Jack, Shores, & Nelson, 1993; Shores, Gunter, & Jack, 1993; Shores et al., 1993]. This body of research compellingly demonstrates that aggressive and other undesired student behaviors may be strengthened because they produce undesired outcomes or reduce the likelihood of desired outcomes [Rutherford & Nelson, 1995].

Part of the explanation for such failure to interact on the part of teachers must be laid to the belief system that such interaction is without value. Continual biomedical implications that such behavior is chemically or pathologically based and can only be controlled pharmaceutically leads to a systematic process of avoidance rather than involvement. Such systematic reactions are not only without merit, they are self-fulfilling in their contribution to the problem.

The basic goal of cognitive behavior management in the school is to help the student who behaves antisocially acquire the cognitive and social skills needed to avoid interpersonal rejection and gain acceptance by significant peers and adults. Aggressive students often are at a serious disadvantage with regard to both peer and teacher social interactions because of their deficits in the areas of social perceptions and social skills. Walker et al. [1995] pointed out that peer and teacher rejection is nearly an inevitable consequence of displaying antisocial behavior in school [Rutherford & Nelson, 1995]. This is further exacerbated by the removal of the child from familiar environments and significant people, pivotally supporting attributions of self-depreciation. The aggressive child is removed from the very context [significant adult & peer pressure] that supplies the pragmatics for change.

Proactive strategies

Although cognitive behavior interventions are teacher-directed at first, they are structured to ensure that control is placed eventually with the student. The student is provided with the tools to evaluate the environment, consider the alternatives, choose prosocial behaviors and strategies, monitor the effects of those behaviors, and adjust his or her behavior accordingly [Rutherford & Nelson, 1995]. **Empowerment** of students through the delegating to them of responsibility for their own behavior and providing the skills with which to make behavioral decisions is the intention. This is not a strategy to control children, but rather to help children develop controls from within.

Although antisocial behaviors often are serious, persistent, and well entrenched in students' patterns of social interaction with peers, teachers, and other adults, strong empirical evidence indicates that teacher-mediated interventions can have a significant impact on ameliorating these behaviors in the context of a *schoolwide intervention plan* [Rutherford & Nelson, 1995]. Research by Walker et al., [1995]. Simpson, Miles, Walker, Ormsbee, and Downing [1991], and Sprick, Sprick, and Garrison [1993] presents a strong case for *proactive* rather than reactive schoolwide programming that targets aggressive and violent behavior. Unlike "pull-out" models in which professionals work with students on isolated skills and provide segregated instruction, programs where school staff collaborate to design and implement an *instructional plan* for teaching expected prosocial behaviors to students and for correcting the inappropriate behaviors of students who behave antisocially, provides a structure where multiple interventions and supports can take place in valued and normalizing settings. Such a plan should develop a cultural environment which provides a system of pre-established rules and consequences, reinforcing methods for teachers and peers to support 'good' behavioral decisions and to provide individual assistance to students who do not respond to teacher-mediated or general schoolwide interventions

Rutherford & Nelson [1995] note that proactive interventions, in which new skills are taught systematically, offer an advantage over reactive strategies (e.g., punishment) because the instructional interventions are not dependent upon the occurrence of the undesired behavior. Additionally, proactive strategies that focus on early identification and prevention are less intrusive and more effective than interventions applied after the behavior has occurred. The focus on prevention is one that needs to be emphasized as abundant research supports the contention that antisocial behavior, if not addressed by the time children reach the age of eight, is extremely durable and resistant to intervention [Rutherford & Nelson, 1995]. Howard Gardner, as we have already noted, indicates that by the age of six or seven the child has already developed a theory of themselves and their environment and that this naive understanding often interferes with the ability of the older child to incorporate a deeper understanding of learning. The avoidance of early intervention does not make the task impossible, but obviously makes it more rigorous.

Social Education: A Review

Each individual is a system or organization. This organization incorporates an interactive network of the following sub-systems. These sub-systems contain physical and mental structure that effects functioning in the defined areas. It's BASIC.

- Behavioral: Patterns of work, play and leisure, exercise, diet [eating and drinking habits], sexual behavior, sleeping habits, use of drugs and tobacco.
- Affective: Presence of fundamental emotions such as anxiety, anger, and attraction and their sub-sets; appropriateness of affect to life circumstances.
- Somatic: General physical functioning, health. Presence or absence of tics, headaches, stomach difficulties, and any other body complaints; general state of relaxation/tension; sensitivity of vision, smell, touch, taste, sight, hearing.
- Interpersonal: Nature of relationships with others as individuals or part of a filed; significant and negligible; individual, group and mass. Personal supports systems, kin systems; roles [passive, independent, leader, etc]; conflict resolution style [assertive, aggressive, withdrawn]; basic interpersonal style [congenial, suspicious, manipulative, exploitive, submissive, dependent].
- Cognitive: Mental representations about past or future; self image; life goals and reasons for their validity; religious beliefs; philosophy of life; functional errors including catastrophizing, overgeneralizing, delusions, hallucinations, irrational self-talk, rationalizations, paranoid ideation; general [positive/negative] attitude toward life and explanatory style. Growth through perception, extrapolation and generalization.

Cognitive Restructuring

An individual's organizational integrity, personality or personal architecture starts with their major mental *schema*. This is a relatively pervasive and permanent set of attitudes, beliefs, ideas and thoughts which constitute the persons *worldview*. The function of this individual worldview is to enable the person to predict events and experiences in a way that will enable them to reduce uncertainty and increase control. The major organizational architecture is designed around the constructs of *self*, *others* and *prospects*. It is generally malleable when it is being constructed in the first six years of life. It then becomes relatively salient and increasingly resistive to change as the person matures. In fact the maintenance of the integrity of this organizational architecture is the equivalent of the maintenance of self and attempts to alter this architecture are met with resistance, unless there is adequate personal motivation and significant strategies for change. This schema tends to mediate the individual's perceptions of the world, the feelings they have about those perceptions and the action that they take in regard to these feelings. Thus if the schema provides a *distorted* lens, the feelings and behaviors are also likely to be distorted. Skewing to the positive side of an objective reality, is likely to be significantly less of a problem in regard to problems in living than skewing to the negative side of an objective reality, regardless of the positive/negative value of that reality.

Such schema are built with individual building blocks of *attributions*; that is, explanations given by the individual to events and experiences. If the individual has an experience, they attribute a causal effect to that experience. The responsibility for the outcomes of the experience may be attributed to *personal forces* [e.g., ability and effort] or to *impersonal forces* over which the person has little control [e.g., situation or bad luck]. Thus a powerful dimension, which would appear to play a major role in personality development, is the internal-external control of reinforcement. Generally, [although this is quite simplified] the person who attributes success to their own resources and failure to circumstance or luck, is likely to have an optimistic schema and experience satisfaction and gratification out of many aspects of life. Since people develop their worldview over time and many experiences, the *patterns* of attribution begin to solidify and become subconscious.

As these underlying molecular mental representations are accumulated, the pattern forming tendencies of the human mind causes them to be increasingly formed into *ideology*; that is, generalized patterns of cognition of a higher order representation. For example, a series of hostile attributions occurring over time are likely to attract the individual to the notion that there is a pattern such 'people are hostile'. This pattern is then might be generalized as 'People don't like me'. This in turn might be turned inward - 'I am bad'. And/or outward 'I'll get them'.

One problem is that the ambiguity of language allows for these generalizations to incorporate different shades of meaning for each individual. This process can be compared to learning any skill, such as driving a car. 'Driving' is a generalization that represents for the individual, a whole series of molecular steps. Some of these steps have important context to what the construct 'driving' means, but the steps have become automatic and take place without our conscious notice. In fact, if we are required to think of the individual steps, 'driving' becomes more cumbersome. Research has indicated that modification or change of these mental generalities requires a renewed awareness the molecular underpinnings [the automatic thoughts], a *partialization* of the generalization. This causes the individual to deal with the parts, and in doing so, develop a new generalization or at least a new meaning for the ideology. If you would want a person to develop a new generalized construct of 'driving', you would need to get them to 'go back to basics'; in a like manner if you want a different generalization for hostile attribution than 'people don't like me', you must re-address the molecular attributions of 'hostile attribution'. It seems that addressing the 'parts' is less threatening to the integrity of the 'self' and therefore makes the individual more amenable to change than to address the ideology of the schema.

Emotional Containmentment

It is difficult to separate the cognitions from the affect. Cognitions mediate emotions which mediate behaviors. The way people interpret the world in regard to self, others and future prospects mediates how they perceive, interpret and *feel* about the events and experiences of their lives. If our schema is not providing us with effective predictive

analysis, our anxiety increases. If our schema indicates that we are not competent, we are sad, and as our efforts are frustrated, we may get angry. Yet our genetic heritage starts with the basic emotion of *fear*; followed closely by what might be called *anger*. The instinctive decision to fight or flee is *emotionally* based. Impulse is the medium of emotion; the seed of all impulse is a feeling bursting to express itself in action. Cognition is a later addition that was used to queue action steps for more complex behaviors which took place over time. Such queuing required mental representations [thought] in order to store and release actions steps at appropriate times. Such cognitive processes thus played an important role in *containing* these emotions; or at least containing the action response to the emotions until they were appropriate. The very ability to articulate the emotion - 'I am feeling angry' - helps to contain response since it moves the feeling into a cognitive, not purely emotional process.

Many people with problems in living have difficulty understanding their emotions and expressing how they feel. They go right from the emotion to the action; without thought. Therefore, helping people to identify [label] what they are feeling and to articulate the *degree of intensity* is an important step in containing these feelings and the impulsive behaviors associated with them. Anger, for example, can be expressed as rage, fury, wrath, hostility, malice, spite, ire, animosity, bitterness, and resentment. In all cases the individual 'feels' angry, but the degree of anger is quite different between rage and resentment. Since *self-instruction* is an important part of helping an individual 'work through' changes in behavior, it is important that the individual have a language for talking about his/her feelings. To be able to identify that "I am feeling resentment and growing bitterness" can lead to the self-instructive position that "I must count to ten, and then *assertively* state this to the other person in a way that is effective in reaching my goals". Thus the development of mental representations for these 'feelings' is an important part of being able to effectively incorporate alternative solution and consequential thinking into the stimuli to reaction process.

It is important to recognize that each of these emotions are perfectly normal although the context in which they are raised may be maladaptive. Anxiety, anger and attraction are useful tools for placing *value* on events and experiences. Fear prepares the body to react and focuses the mind to fixate on the threat at hand. It is not fear, but *worry* which becomes the problem in living. Appropriate fear, like appropriate pain may be uncomfortable, but it alerts us to possible dangers and focuses us to take action to correct the problems. Worry, on the other hand, has little redeeming value. While short-term worry may be a process of examining alternative solutions to a vexing problem, it is rarely so, particularly when it goes beyond a reasonable period of time.

Two difficulties, therefore result from our emotional heritage: first, is the impulse to action without thought and second, is the cognitive 'mulling' over the problem without finding solution. If we mull about fear or anxiety, we worry, get phobic or panic; and in the extreme, seek escape through withdrawal or perhaps substance abuse. If we mull about anger, we develop suspicion, hostile attributions and paranoia; and in the extreme, become potentially homicidal. If we mull unrequited or restricted attraction, we grow sad or depressed and, in the extreme, become potentially suicidal. Such 'mulling' behavior is

a learned behavior which can be relearned, although teaching young children to deal with problems, make decisions and generally increase their solutions and consequence thinking is the best method of emotional containment.

Cognitive Skills

In attempting to adjust the molecular mental representations, the cognitive skill of *alternative thinking* is critical. Once the individual is able to conceive of alternatives representations for these individual events and experiences, s/he is then in a position to value and prioritize these alternatives and to make decisions about the effectiveness of the representation as a tool of prediction. When teaching abstract concepts, *allegories* and/or *metaphors* are invaluable teaching tools. In learning we change context by changing the strange into the familiar, as when we describe an abstract concept like gravity by the familiar human experience of attraction. In innovating, we change contexts by transforming the familiar into the strange, as when a bumble bee's honey comb is used as the format for prefabricated storage domes.

Effectiveness of a representation within the mental schema is measured by the ability or potential ability of the representation as a predictive device, which will lead to outcomes that satisfy and/or gratify the individual. If the evidence indicates that the feelings and behaviors that are mediated by the representation are likely to be more satisfying or gratifying than the ones presently in use, modification or change becomes possible. In order for an individual to project the potential of the representation, it is important for the person to have *consequential thinking* skills which allow them to predict the short and long term outcome of an action, as it might impact on themselves, others and prospects, *before* the action is taken. The ability to *predict* effectively allows the person to reduce uncertainty and to feel in control of events. The greater the ability to predict accurately, the more effective the mental representation is as a tool for quality living.

It is important to note that the *reality* of the event or experience is less important than the positive or optimistic expectation of that event. Thus, if the person tends to think of the event or experience as more negative or pessimistic than merited or even to see it as realistically negative and pessimistic; this is less effective in satisfying or gratifying the individual than a more optimistic or positive perspective. Thus to be *slightly* rosy in your picture of the world is vastly superior to being realistic in a negative world or viewing the world negatively. Optimistic people tend to act in a manner that 'makes the best' of a bad situation and therefore tend to gain greater satisfaction from the process.

Antecedent and Consequent Reinforcement

While the individual is a system or organization of parts, they are also a part of a system or organization of parts in the guise of society and its variable units. Thus, two other areas of social education are significant, both of which are provided by *others* through events and experiences. The first is reinforcement; most vitally *positive reinforcement*. Contrary to the traditional behavioral construct of reinforcement happening immediately *after* the act, the importance of reinforcement occurring *before* the act, is becoming

increasingly apparent. This is accomplished through the placement of *positive expectation*. The research on this *Pygmalion* effect, in which the belief of the 'other' significantly affects the performance of the self through a *self fulfilling* prophecy effect [the belief makes the 'other' behave in a manner which enables the expected performance to take place] is well documented. Thus, a teacher's belief that a child cannot learn is tantamount to prohibiting that child from learning. Positive expectation cannot be merely 'lip service', but requires some degree of belief on the part of the other that such expectations will take place. Thus the 'other' to some extent helps to create the future for the individual. Positive reinforcement after the fact, is merely 'icing on the cake'; a secondary reinforcement which acknowledges the expected outcome.

It is important also to note that these *others* vary in significance to the individual. Thus the impact of the reinforcement is proportional to the *value* of the other person in the individual's mind. Significance is suggested through intimacy and respect. In addition to the particle aspects, there is the wave or *field* aspect of reinforcement. A *force field* such as a family or peer group, or culture has power to reinforce. The individual person's response to these fields is often uncertain, but they are clearly shaped by such environmental conditions.

Intrapersonal, Interpersonal and Utilitarian Skills

Another variable to full functional capacity is the individual's need for a repertoire of appropriate skills and adequate knowledge of when to use these skills. An individual who has developed a maladaptive schema and resultant problems in living early in life, is often deprived of *developmentally* learning skills which many others would have learned naturally. Thus intrapersonal [planning, problem solving, decision making, etc.], along with interpersonal [aggression replacement skills, friendship making skills, etc.] and utilitarian skills [life and employment skills] are necessary accouterments to cognitive restructuring.

Empowerment is not merely the attainment of the *power* to act, but consists as well in having the skill and knowledge to act effectively. Individuals who are given the authority to act without the necessary skills to perform adequately, often feel 'disempowered' and humiliated. Thus, the balance of self-affirmation must come through *competence* to perform, which can only happen through the combination of power and skill.

An Unbroken Circle

Since these variables of human action are *interactive*, there is no beginning and ending point in the change cycle. All of these factors can be used as points of intervention at any time or in combination. A *change environment* would require that all of these aspects are available to all participants on a regular basis. These technological constructs are not effective only in dealing with people with problems in living. In fact, they make as much sense for the *management* of health, education and welfare as they do for the service delivery. Developing a culture of positive expectation, providing the skills and knowledge along with the power to perform, providing positive reinforcement and the

like are measures, which enhance the functioning of any group of people. Helping people become aware of their mental processes, learn the skills of alternative thinking and analogical reasoning can do much to move the social fabric towards a more positive support for all people.

Families & Values

The question of values is one that perhaps needs to be raised, for to help a person redesign the structure of their thinking is a powerful intervention, particularly so when dealing remedially with the ‘victims’ of traditional services rather than as a preventive activities. It is perhaps important to note that the interpsychic process deals only with the structure [how one thinks] and not the content [what one thinks]. While there is emphasis on a rigorous, logical examination of the evidence, the process does not rule out spiritual or metaphysical aspects of a person’s life. The only contingency is that the ‘belief’ be congruent with the conscious self; thus a spiritual belief that cannot be fully explained is fully acceptable as long as the *intent* of the spiritual direction is congruent with the basic belief system of the individual. A religious belief that supports prosocial activities would be coherent with a way of thinking about oneself, ones circumstances and ones future, which is in itself, prosocial. While an *antisocial* mystical belief [Satan worship] would be incongruent and hard to believe.

At the same time, this approach, like all personal interventions, is not without its inherent potential for misuse. For this reason, the parents must be intimately involved in any child specific interventions [as opposed to group or environmental approaches which are much less threatening]. Adult family members should not only condone the involvement, but participate in it. Part of the understanding is that as *significant* adults in the child’s life, they *control* the process and its outcome. If the adult family members are unwilling to change their own input to the child’s thinking process, it is unlikely that the impact can be anything other than marginally successful. The confirmation of school personnel for the child is likely to be overwhelmed by the family’s confirmation thus holding the values to the family norm.

Summary

“The design and implementation of effective classroom programs for students with emotional and behavioral problems has been an important topic of discussion for many years [Colvin, Kameenui, & Sugai, 1993; Hewett, 1968; Hewitt & Taylor, 1980; Jones & Jones, 1990; Kerr & Nelson; 1989]. However, two recent occurrences have resulted in a renewed interest in this area. First, Jane Knitzer and her colleagues [Knitzer, Stienberg, & Fleisch, 1990; Stienberg & Knitzer, 1992] have strongly criticized the coercive and controlling manner in which such programs are often implemented in schools across the country. Second, the Regular Education Initiative and the Inclusive School Movement, ... [Council for Children with Behavioral Disorders, 1989; Fuchs & Fuchs, 1994; Gartner & Lipsky, 1987; Lloyd, Singh, & Repp, 1991], have clearly resulted in an increased emphasis on serving students with emotional and behavioral problems in general education classrooms. Consequently, a great many more general education teachers,

administrators, and support staff have found it necessary to significantly increase their knowledge about the implementation of specialized classroom programs for this difficult population of students.” [Reitz - 1994]

The development of strong, collaborative working relationships with families, general education programs and staff and the community itself will need implementation if the focus on children is to prevail. Reitz [1994] in writing about the implementation of comprehensive classroom-based programs for students with emotional and behavioral problems has suggested a ten [10] step program which has some compatibility with the thoughts expressed in this book and are worth exploration as we conclude.

1. *Structure*

“To effectively teach new skills, regardless of the type of skills being taught, requires a consistent and structured environment.” “Unfortunately, even though the need for structure and consistency is stressed over and over again in the literature as a prerequisite for effectively teaching social and behavioral skills [Jones & Jones, 1990; Kerr & Nelson, 1989; Sulzer-Azaroff & Mayer, 1986], it is often not even remotely achieved in actual practice.”

2. *Academic Involvement*

In an area this book has not directly addressed, Reitz rightly indicates that the primary goal of all educational programs is to teach academic skills and content to the students. Unfortunately, teachers often seem so focused on addressing behavioral issues that they all but ignore the academic needs. Knitzer et al. [1990] cited significant problems with the curricula used, the repetitive nature of the assignments to be completed, and the teaching methods employed, all of which led to “...a pervasive boredom and apathy” [Stienberg & Knitzer, 1992] all of which contributes to the behavioral problems.

“...a successful learning experience is itself a major contribution to mental health” [Stienberg & Knitzer - 1992]. It should come as no surprise that students with well-targeted, challenging, and stimulating work to do, and who are taught using methods that actively involve them in the work, will have fewer behavioral problems than students who do not. No behavioral system, no matter how sophisticated or well implemented, will effectively manage the behavior of students who are not engaged in productive and meaningful work. [Reitz - 1994]

3. *Social Reinforcement*

The power of social reinforcement has been a theme throughout this book as has the fact that this important teacher behavior occurs at rates significantly lower than required for its effective use as a teaching tool. “While no ‘ideal’ rate of social reinforcement has been determined, it is clear that there is little teaching value in rates as low as those frequently found in our classrooms” [Reitz - 1994]. The fact that teachers are prone to be even less responsive to students with behavioral problems can only emphasize this point. This book

has examined not only the individual, but the collective process of increasing the ‘seeding’ of social reinforcement throughout the school and given a method to target this reinforcement to the child most in need at times of critical decision making.

4. *Tangible Reinforcement*

While this book has touched on the traditional behavioral ‘token system’ as being compatible with the prosocial skill training, it has not expanded upon it for reasons which Reitz has exposed. “While such systems are widely used, there remains important questions about both their effectiveness as practiced [Smith & Farrell, 1993] and the potential for the implementation of response cost systems to become overly coercive in nature [Knitzer et al., 1992]. It should also be remembered that, while point or token systems are an important component of an overall classroom program, they are only one component of many and, implemented in isolation from other parts of an overall system, their effectiveness is limited and their potential for abuse is increased [Reitz - 1994].”

5. *Teacher response to mild disruptive behavior*

Reitz reiterates our position that aggressive behavior generally occurs relatively late in a long chain of behaviors and that effectively dealing with the mild behaviors early on is much more productive. He also points out “that, for most teachers in most circumstances, these procedures will not occur naturally in response to student misbehavior. They will need to be taught and systematically practiced until they become an automatic part of the teacher’s repertoire”.

To a large extent, the cognitive and behavioral interventions presented in this book demand a change in *teacher behavior* as the catalyst for student behavior management.

6. *Systematic program for dealing with severe or dangerous behavior*

“For those rare occurrences when aggressive behavior becomes clearly dangerous to the students and/or staff, a comprehensive program must also include a crisis intervention component [Reitz - 1994].” We would only add that the attributions developed through that intervention are some of the most important to the life of the child. If the process is one that returns the responsibility to the child for his/her own behavior quickly and smoothly, each crisis can become a growth experience.

7. *Opportunities to interact with peers*

Not only must there be opportunities, but they must have some potential for positive social reinforcement. The prosocial environment with its focus on ‘good choices’ and the social response potential allows for this to take place even in non-structured situations. We also would not like to lose sight of the importance of play.

8. *Individualized interventions*

For the greatly depreciated child, the presence of a Mentor who will provide consistent and *intentional* focus on cognitive awareness and structuring as well as provide role modeling and advocacy for the child within the valued environment is the suggested method of providing these remedial efforts. Reitz continues on target when he suggests “designing effective individualized programs is primarily a process [of] functional analysis; that is, the “...process of identifying functional relationships between the environmental events and the occurrence and nonoccurrence of target behavior” [Dunlap et al., 1993].” We would add that identifying the function relationship between the mental environment and the occurrence and nonoccurrence of target behaviors must be considered as well. Reitz also suggests a range of cognitive behavioral interventions from behavioral contracting to anger management. The commitment to individualized intervention must also include the sanction of the child which, in turn, requires the articulation of the child’s goals.

9. *Parent & Community Involvement*

A truly ecological approach to programming for these children involves people who populate the valued settings in which children grow and develop. To enable the scout master, the recreational leader, the movie staff to participate in the development of prosocial supports is the epitome of a change environment. We have already iterated the mandatory necessity for involvement of the parents, both as value development leaders, decision makers and planning participants as well as promoters of ‘good choices’.

The tenth point in Reitz’s plan is a *systematic process for return to public school programs and classes*, which we have rejected as a condition of the inclusive, valued setting model. This does not mean that no child under any circumstances will not need a well thought out plan for return to the school. But we posit that as a matter of principle, our efforts must be focused on keeping children in their neighborhood school and their regular class in the first place.

This volume has tried to identify some basic principles that would support the idea that schools are appropriate arenas for the development of prosocial skills and attitudes and that teacher’s are ideal candidates to provide this support. It certainly is not an inclusive argument. Many areas are still open to debate and discussion. It presents, however, a persuasive point of view that has theoretical and research support for dramatic changes in the way we educate and deal with atypical children.

In summary, the following principles predominate.

- *children develop naive understandings about themselves and others by the age of eight*

These concepts are the coherent system of beliefs, which predispose subsequent behaviors. They require examination at any time that the behaviors are contrary to prosocial expectations.

- *These naive understandings are developed primarily through experiences with significant adults.*

Because of the salience of this influence, significant [adults, parents and teachers] must become aware of their own coherency systems and the messages that they deliberately and/or inadvertently convey to their children. Prosocial skill and value building takes conscious effort.

- *These understandings are supported and/or eroded by cultural influences.*

As the child matures the peer group becomes the most significant instructor of social norms. Regardless of how well the parents or other significant adults have promoted positive values and skills; these will be tested in important sociocultural environments.

- *The school is a potent sociocultural entity which can actively provide positive enhancement of the prosocial skills and values of children.*

One of the major arenas of influence on all children is their involvement in school. If the sociocultural cues are significantly negative and reinforcements are sufficiently antisocial; even the most adequate child may need to re-evaluate their coherency system.

- *Children who enter school with self-depreciating concepts need a **rigorous** learning experience to gain a deep understanding of their own truth seeking processes about self, others, circumstances and prospects.*

Prevention through sociocultural management can help support change in the child with poor prosocial skills, but some will need specific cognitive intervention to overcome such deficits.

- *All change is self-directed. Therefore, a cognitive dissonance is required to prompt a decision to change, which can then be supported.*

The prosocial environment can prompt such a decision by creating an incoherence for the child who self depreciates and yet receives positive feedback.

- *It is not the children who are dysfunctional; it is the sociocultural systems.*

We are all a part of each other. Our fear collects the fear of others to evolve into an ethos of fear. We must sow the seeds of positive high expectation, prosocial skills and values through our own performance. No longer can we treat children with difficulties as though they were at fault. The ethos of pathology and its resultant response of fear, must come to an end if we hope to reorient our society to positive goals. Coercion, separation from

friends and family, and creating boundaries between ourselves and those with problems in living can no longer be supported.