

## Working for Healthy Personalities

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MENTAL HYGIENE has been identified with the diagnosis and treatment of individuals, usually in clinics. For the most part it has been presented as a specialized activity conducted chiefly by psychiatrists with the aid of psychologists and social workers, who are trained to understand and to treat individuals with personality problems and mental disorders.

While teachers read many articles on mental hygiene and hear many lectures, they are often perplexed, indeed baffled, by the contradictory ideas they often carry away. Must one be a classroom teacher with a large group of children or adolescents and be an amateur psychiatrist as well—making a study of individual children, getting life histories and family backgrounds?

Obviously there is confusion over the role of the teachers, arising in part from the difficulty of the psychiatrists in understanding what classroom teachers can and must do (few psychiatrists have any firsthand acquaintance with operation of schools) as well as from the natural professional concern of the psychiatrists with their own clinical procedures.

If there is a mental *hygiene*, as distinct from diagnosis and treatment of individual cases, it will differ, just as public-health work differs from the practice of medicine. Public-health hygiene aims at the protection of people and the conservation of their health and welfare against the hazards of the environment, in the attempt to prevent the in-

fections, the illnesses, and the breakdowns which the physician must treat.

Public-health hygiene, therefore, is not in opposition to clinical medicine—it derives from the same basic medical sciences and seeks the same ultimate goals of human welfare. It does so by translating the knowledge and skills of medicine into the direction, and, where necessary, the control, of the environment and the living habits (beliefs and practices) which are hazardous or injurious to people. This indicates how mental hygiene may be better understood as an effort to translate the findings of psychiatry, psychology, and other social studies into daily classroom living, especially as it bears upon the relation of the teacher to pupils.

### Reactions Condition Behavior

From psychiatric studies it is becoming clear that what is called mental health, or wholesome, well-balanced personality development, depends in largest measure upon how the individual, from birth onward, meets the unavoidable tasks of life. These include the regulation and control of his own functional processes of eating, elimination, and emotional reactions; how he learns the variety of prohibitions that are the basis of private property and the integrity of the person upon which our legal rights and social order are built; how he accepts the many requirements of prescribed actions such as keeping clean, being mannerly, following the rules of conduct or responding to and using language.

These may involve many frustrations, deprivations, and often coercions which the naive impulsive growing child finds difficult to accept. Yet he must learn to transform his organic functions and impulsive behavior into the orderly, patterned conduct of social living. He must learn to think, to see, to believe, and to act toward every object, situation, person and relationship in terms of its meaning and symbolic significance, as indicated by its name and by the many, complicated beliefs taught him by parents and others, according to their interpretation of

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*The application of mental hygiene is not necessarily confined to the field of psychiatry. It has a place in the classroom in aiding pupils to overcome frustrations or inhibitions which may have resulted from unfortunate living experience during the period from cradle to desk. Lawrence K. Frank, director of the Caroline Zachry Institute of Human Development, N. Y., outlines the value of teachers recognizing the youngsters' difficulties in adjusting to the complexities of life, and suggests ways in which they may be helped to a happy and healthy maturity.*

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religion, philosophy, law, custom, and sometimes science.

Before the child comes to school he has undergone an extraordinary educational process, amazing in extent and severity, which has changed him from a helpless dependent infant into a participating member of social life. This whole orientation, with resultant ways of thinking, speaking, acting, and feeling have been patterned, often warped and distorted, by the way his family have treated him, loving or rejecting him. Out of these early experiences, what they have meant for him, and how he has felt about such teachings and such treatments, his personality has emerged as his individualized way of accepting our traditions, of conducting his life and of reacting with feelings to every situation.

### Achieving Maturity Needs Help

Now it is *not* the responsibility of the classroom teacher to make a detailed history of each child in the class. But the teacher should be aware of this previous experience of the child, realizing that each one in the class has passed through this sequence of parental training and treatment, the meaning of which will be expressed in the child's classroom activities. The teacher as a responsible professional in daily contact with children has the major opportunity to further the mental health of children by recognizing each child as a personality with a life history and his or her peculiar, individualized way of thinking, believing, acting, feeling, and especially of meeting the many demands and prohibitions of social life.

Each child, according to this conception, with his or her strengths and weaknesses, susceptibilities and immunities, capacities or deficiencies, can, if aided and reinforced by understanding adults, achieve maturity and become a full participant in maintaining social order. This indicates the meaning of mental health in the classroom as essentially the way the classroom teacher helps each child, as a member of a group, to meet life, with its many demands and restrictions, effectively and courageously. Such a point of view calls for a number of modifications from the former almost exclusive preoccupation with teaching subject-matter and skills and maintaining order.

### New Methods Evolve

In various ways teachers are making these modifications. Evidence lies in the development of many new programs and procedures and the shift in emphasis from the more purely academic goals and objectives to the more individual, personal and social development of children. How these are moving in the direction of mental health in schools may become clearer by contrasting the older classroom situations with the more recent programs and practices.

A generation or so ago the prevailing pattern was a classroom with rows of fixed desks and seats at which children were expected to sit quietly, without talking or moving, except when specifically called upon by the teacher to speak and then only to the teacher. This classroom was a tightly, almost rigidly organized situation, with the teacher at the front, representing authority and the children passively waiting to be told what to do, when and how.

It is not unwarranted to describe this classroom set-up and operation in the following terms, expressive of its meaning for mental health. The children-pupils were in a situation of dominance-submission—of an adult teacher exercising authority over a group of children submitting to such control usually under threat of various penalties, often of corporal punishment for any failure to obey. In a very real sense, the child, sitting at his desk, physically close to other children but cut off and isolated by the ban on talking, or moving or even working together (considered to be cheating), was in a "psychological straight-jacket."

So long as children came from relatively stable family backgrounds and were reared in the religious traditions and the customs of their neighborhood, they came to school more or less prepared for this situation. They expected the teacher to issue orders which they would strive to obey because their earlier rearing had also been in terms of dominance and submission, with occasionally rebellion or lapses for which they were soundly punished.

### Some Are Misfits

But today with so many children coming to school from unstable families, from homes and neighborhoods in which they have

learned little of orderly conduct and have often developed strong feelings of resentment against maltreatment and neglect, they are unable to fit into the older classroom situation. When the school tries to compel them, they react with all kinds of disorderly behavior—with emotional disturbances, with failure to learn expected skills (reading problems), with sulky withdrawal—and otherwise express their inability to “take it.”

It is being realized from studies of child growth and development that young children need to move about, keep active and busy, talk with their classmates and others, as a very condition of learning to live in a group. Moreover, it is being shown by numerous studies that children need opportunities to express their feelings in ways that are not destructive to others or to themselves, so that feelings of hostility or anxiety will not become fixated in their personality to the detriment of their mental health and maturation as personalities.

It is worth remembering that while a child may be quietly in his seat, silent and outwardly irreproachable, he may be engaged in all manner of day dreams and fantasies—sometimes of escape from feelings of boredom and loneliness, sometimes of compensation for his feelings of being unfairly treated, or often rehearsals of what he would like to be doing, especially against parents, brothers and sisters, playmates or even teachers. So long as the child broods in silence, inwardly sulking or seething, but bottling up his feelings and fantasies, it is as if he were carrying around a subtle but devastating infection, a corrosive poison in his emerging personality. He may be outwardly obedient, conforming to the prescribed rules but inwardly rebellious. Therefore, as soon as adult supervision is lacking, he becomes disorderly and even destructive as a release for his pent-up feelings.

Here it should be recognized that “social adjustment” means not passive, obedient conformity to authority but accepting the prohibitions and requirements of social living as self-administered inhibitions and self-directed performances. Social adjustment therefore is expressive of the individual personality, that which has been called his “private world”, and which has emerged from the prolonged teachings and treatment in infancy and early childhood.

### Teachers Encourage Socializing

For the teachers this awareness and these insights become operational in the classroom when the teacher sees the class as a group of children, acting, reacting and interacting to each other and to the teacher, according to the personality of each one, as expressed within the group situation. The role of the teacher therefore is changed from an impersonal dominating authority to that of a grownup who can help children achieve some order and find some stability in their own personality and can help them learn to live in a group. This role becomes easier to play and more effective when children are released from their “psychological straight-jackets” in fixed seats and permitted to work together on common tasks, talking freely, moving about, learning to get along with each other in a truly social situation. By encouraging children to select projects and activities, they learn to accept responsibility for achievement and for orderly conduct instead of performing and obeying because they fear punishment or the humiliation of being scolded and ridiculed before their peers.

It should not be forgotten that today many children are coming to school from families and neighborhoods, especially in our big cities, where they have rarely or never experienced orderly living. Many, as the records plainly show, have been neglected and maltreated, pushed or knocked around, often brutally punished and even terrorized by adults, older brothers and sisters and other children in the neighborhoods. They may rarely or never have experienced being with a friendly, orderly adult.

### Playing Is Learning

Frequently they have never had an opportunity to play constructively, without being interfered with or otherwise disturbed and so they have not been able to learn how to play or work on any sustained activity. Play, as we are discovering, is not just idle activity; it is the child's way of learning, of rehearsing, of mastering the environment on a scale suited to his limited powers and strength. He develops in his play the capacity for sustained attention and purposive activity, for shared activities and fair play as well as exercise of imagination. If given time and encouraged by appropriate transitional

experiences, the child can and will, often gladly, accept tasks calling for persistence and skills as an extension of his play life.

Thus upon entering school the young child needs a period of "play" activities before he is confronted with demands for achievement of prescribed tasks which may be thrust upon him prematurely, especially such highly symbolic processes as those of reading and writing. If the child has not had opportunity to play constructively and peacefully, he will need even a longer period of "play" in school, of individual and group activities, in which he explores, tries out, spontaneously improvises, and thereby learns what he has been deprived of before school. His introduction to academic tasks should be graduated according to his psychological readiness as contrasted with chronological age or mental age, both of which may ignore his readiness or lack of readiness and his personal reactions to such requirements.

It is being found that if children are given opportunity to utilize materials, blocks and toys, arts, especially painting and drawing, musical experiences, performing and listening, spontaneous dramatizations of what is in their own experience, listening to stories and similar activities, they can often find outlets for their feelings that otherwise would be disturbing and even destructive.

#### Inner Confusions Cause Errors

It may be said that the individual child is continually revealing his personality in everything he says and does. His mistakes and errors in schoolwork are often expressive of his own inner confusion and conflicts, his inability to assimilate what he has been taught because it cannot be fitted into his private world of meanings and expectations or because his feelings prevent him from accepting it. Indeed in all his activities he reveals so much of his private world, of how he interprets events, how he regards people, or how he feels about himself and others.

It takes great skill and prolonged training to diagnose and treat a problem child, to be able to interpret clearly and accurately all these different expressions and symptoms. But the classroom teacher is not required to diagnose and treat problem children. The task is to become aware of and to recognize the *problems* of children as they struggle to grow up and meet the requirements of our society.

The teacher must recognize that her ability to help or hinder the child in meeting those problems is conditioned by items of classroom organization and her own treatment of individual children, as well as their feelings toward her.

#### Biased Attitudes Slowly Change

The teacher represents, indeed symbolizes, the social world of adults, the world in which the child must learn to live and help to maintain by his own personal conduct as an adult. What he learns as a personality and as a participant in social order is not primarily what he is taught according to the curriculum. He learns most from the relationships with classmates and especially from the teacher and how he or she treats him as a personality. When the child comes to school already strongly biased against adults, as domineering and unfair, as his enemies to be outwitted or fought whenever possible, he will not immediately change his attitudes and modify his behavior toward even the most friendly, solicitous teacher.

Here we see how so often a teacher, with every desire and intent to be helpful and understanding, meets sullen or rebellious children and becomes quickly discouraged and falls back upon strong authoritative controls which are not very effective and often bring the teacher only weariness and defeat. It is often forgotten that children have frequently become distrustful of adults, for good and sufficient reasons, and have developed such strong defenses or retaliatory patterns, that they cannot immediately change even if they so wish. Children become wary and resourceful; they test out adults, trying to find their weaknesses, their peculiar blind spots and especially their own personal emotional reactions. Then they mercilessly exploit their discoveries and so continue to play their customary roles in life.

#### Psychological Convalescence Is Slow

We have recognized that after a prolonged illness, an individual may require a long period of convalescence, of recovering his strength and his normal functional processes. But we have not yet recognized that psychological convalescence, of recovering from early distortions and stunting, from maltreatment and neglect, also takes a long time and the individual child must be helped to give up his

former defenses and evasions and to accept the more wholesome patterns of living.

So long as we are inclined to think of human nature and conduct, of personality, in the former terms of reason and will and consider everything the child does as deliberate choice, we may fail to realize that the child must be helped over the years of childhood and of adolescence to learn the practice of what we call reason, to develop the capacity for self-discipline that we call will, and to accept and live by the values we cherish in our moral, ethical traditions.

Until recently the juvenile delinquent was considered as a maliciously inclined, deliberate offender against law and order, to be caught, tried and punished like an adult criminal. The rise of juvenile courts and of child guidance clinics has marked the growing realization of how much of the delinquent misbehavior is a symptom of the individual's failure to be socialized or of his persistent anxiety and resentment established by his childhood experiences.

#### Opportunity in Classroom Contacts

Gradually the law is changing; medicine is changing; social work is changing; as the more recent insights and understandings about personality development and expressions are being accepted and translated into various professional practices. Already the nursing profession, recreational leaders, and some of the ministers, are beginning to modify their work, to incorporate this mental health approach into their activities and into their professional schools. The development of mental health in schools is part of this larger movement to re-orient our many organizations and professions so that each, in its own specialized way and in its established areas, can contribute to this larger task of protecting and conserving the mental health of all individuals they touch in any way.

The schools have a unique opportunity and a major responsibility because, outside the home, they are the only agency having daily contacts with children during the period when their emerging personalities are being shaped by their life experiences, especially their relationships with teachers. While this discussion has stressed the beginning years of school, what has been said applies to all grades where the child, at each stage in his development, is faced with the restrictions

and the requirements of social living. At each level of maturity, if he is not handicapped by his previous experiences, he will find expanding opportunities and enlarging privileges offered to the maturing individual for social living.

#### Enlist Teacher-Interest

Thus it is not a question of providing teachers of each grade with a set of activities and practices labeled, *For Mental Health*. Teachers are personalities with their life experiences, their forgotten childhoods, their individual likes and dislikes, their feelings and values. The most carefully described program designed for mental health can be utilized in such a way as to be inimical to mental health if a teacher does not accept the underlying purposes and the new conceptions of personality development and expression.

Moreover, it is evident that some teachers having been trained to teach in certain ways, to conduct the classroom in a prescribed, almost rigid manner, will feel very anxious and insecure if asked to change. This has happened, for example, when a school system has formally adopted an "activity program" and ordered all teachers to follow prescribed new practices. A teacher who feels insecure and perhaps rebellious or resentful at a new program will not be able to provide much of value to the mental health of children in the classroom.

Instead, therefore, of trying to legislate these changes, however desirable they may seem, it may be wiser to enlist the interest of teachers in considering what each one, in his or her own way, can and will do for the mental health of children. To avoid a frequent misconception, it must be re-emphasized that children need help in achieving orderly conduct, they need the guidance of adults to curb their own impulsive behavior and emotional reactions which often overwhelm them. Thus mental health does not, as some seem to believe, imply disorderly, unpatterned activity in which the child may feel even more unhappy and defeated.

#### Group Activities Emphasized

The essential task is to provide opportunities and situations in and through which individual children can and will work out their perplexities of human relations and can find

situations or materials they can learn to master and thereby achieve some confidence in themselves. Thus the emphasis is placed upon more and more group activities, self-selected, shared projects and common goals, as contrasted with the stress upon individual achievement and competitive rivalry for marks.

Likewise the emphasis is placed upon the need of each child to find something he can do successfully and so establish himself among his peers. Thus group activities and projects provide many diversified tasks and permit the teacher to contrive for each pupil some "planned success" which may unlock an otherwise withdrawn and sulky personality for group living.

Moreover the importance of arts and similar creative activities becomes clear as a way in which each child can find release for his feelings through manipulation of materials, through expressive activities and the like. Thereby he releases, instead of bottling up, his

feelings or reacting in disorderly conduct. Through such activities he expresses himself in ways that are neither socially destructive nor individually self-defeating.

In his or her own way, therefore, each teacher can contribute to the mental health of the class to the extent that he or she will establish the confidence of pupils in the fairness and the friendly understanding of the teacher as representative of social order. The more each teacher in his or her own way can help the pupils to accept the tasks of life by giving them a feeling of self-respect and self-confidence the more each one will advance the mental health of children.

Mental hygiene is therefore not a new subject matter to be added to the curriculum nor is it a new set of tricks for teachers to use on children. Mental hygiene is to be viewed as a concerted effort to conserve the mental health of children, for which teachers are the most important individuals outside of the home.

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