EGO DEVELOPMENT AND AFFECTIVE DEVIANCE:

IMPLICATIONS FOR STAGE-SEQUENTIAL MEASURES

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This investigation sought to develop measures of ego and moral development able to be used by staff, with little theoretical knowledge of stage-sequential development, who work with disturbed and delinquent youngsters. -

Cognitive-developmental theorists such as Loevinger, (1975) and Kohlberg, (1971) have empirically defined methods and measures but these are too complex for everyday use.

Such youngsters, as above, are often identified by their inappropriate, immature or amoral actions, thus revealing a lack of psychological maturity. Smith, (1975) found such youngsters to have marked developmental lag and a secondary aim of this study was to investigate the relationship of such immaturity to established deviance.

A number of studies concerned with ego, moral and ideal-self development, maladjustment, delinquency and treatment are discussed in the text.

Simplification of an amalgam of such theorists as Loevinger (ibid.), Kohlberg (ibid.), Bull (1969a), H. S. Sullivan (1953), Piaget (1932), C. Sullivan, Grant and Grant (1957), Peck and Havighurst (1960), etc., (listed in order of influence on this study) could not be at the expense of accurate comparability and newly developed measures needed to closely correlate with those of established theorists.

Psychological immaturity has been shown in this study to be related to <u>degree</u> of deviance and also the developed measures of ego and moral development, S.O.A.E.D. and S.O.A.M.D., respectively, highly correlate with established measures.

KEY WORDS

Stage-hierarchical development Deviant youngsters Measures

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Hypothesis

The general hypothesis under investigation in this thesis is that deviant youngsters suffer from maturational lag related to degree of deviancy, this being measurable.

More specific hypotheses are:-

- I. That the correlation between developed measures of ego, moral and ideal-self and previously empirically established measures will be substantial and positive.
- That degree of deviance will correlate with degree of developmental lag.

Definition of Terms

Throughout this study, unless stated otherwise, the following terms have the prescribed meaning:-

- Ego the core of psychological functioning, more particularly at conscious levels.
- Ego development greater differentiation of psychological reasoning and a maturity of stances in the affective domain.
- Moral development greater recognition and relatability of the self to others in daily commerce.
- Stage-sequential development psychological

 maturation is taken to procede in invariant

 stages from little to greater sophistication and
 differentiation.
- Developmental lag where psychological development is less than expected when compared with an individuals age and level of intelligence.
- Deviance where for psychological or sociological reasons the youngster does not conform to broad societal expectations.
- Maladjustment where psychological adjustment is inappropriate or insufficient for an individual to cope adequately with daily expectations.
- Delinquency where an individual breaks the moral code with sufficient regularity or degree to invite condemnation.

CHAPTER I

INTRODUCTION

- I: I The need for an assessment and treatment profile; background to this study.
- I: 2 Existing profiles of maladjustment and delinquency.
- I: 3 Stage-sequential treatment.

I

I: 4 Ego-development as the treatment core.

INTRODUCTION

I : I The need for an assessment and treatment profile

During the last ten years the writer has been variously employed in treatment-settings for children, that employ a stage-sequential approach to the primary task. First of all as Head of a school for maladjusted boys (described as School 6, p. I20, Wilson and Evans, I980); as Head of a school for maladjusted girls; and more recently as a Head within a regional treatment and assessment facility for problem youngsters, (see Hoghughi, I977, I978 a & b; Groom, I980). In each establishment the "deviant" youngster was exposed to treatment and milieu considered appropriate to his level of conceptualisation, but which was designed to facilitate greater maturity of response and lead to consolidation at each stage of maturation.

In order to place the child at the most appropriate level of stage-sequential treatment, objective measures of his performance, easily understood by care-workers, are vital. To date such measures do not appear to be available, (apart from batteries of tests available only to psychologists and needing re-interpretation) whereby the child's level of moral, ego and self-image development can be found by lay observation. In tern these procedures could provide a base-line or starting point for treatment.

Hoghughi, et al (I980) propose a problem-centred approach as such a baseline but the writer has successfully used a problem-centred approach with a developmental core to treatment (Wilson and Evans, I980).

Treatment of the maladjusted or delinquent child, necessarily implies future goals and a baseline from which sequential treatment stages start. Whilst prescriptive treatment will often need to be "geared" to the individual child by writing a specific programme, the characteristics of treatment needed and child management techniques can be formed into clustered groups, even in a small assessment or treatment unit.

The baseline of a child's abilities needs to be established so that treatment goals are both realistic and non-time-wasting. If, perhaps because of an inadequate baseline, treatment strategies are unrealistic and/or pitched at an inappropriate level, then the worker and client can be frustrated by subsequent failure. Subsequently modified treatment strategies may not then benefit from as much commitment by either client or worker.

Baselines of cognitive and perceptual abilities are invariably established by psychologists and baselines of mental stability and contact with reality by psychiatrists. In addition, paediatricians or neurologists will sometimes be needed to set their own respective disciplines baselines for treatment of the child. These four specialists spend comparatively little contact time with the child during treatment, compared with teachers, residential workers or nurses. It is imperative therefore that their specialist assessment and treatment opinions are easily and usefully translated for the contact treatment workers.

As three out of the four of these assessment and treatment specialists are medically orientated, further unnecessary problems can be created by private "jargonese" and seeming secrecy. This leaves the psychologist as mediator and translator, though often he or she can suffer similar privations of information. However, the psychologist enjoys a flexibility free from medical orientation, which is valuable when the majority of problems of deviant children include behavioural, educational, social or emotional malfunctioning, not directly related to any medical condition.

It follows, therefore, that the more the treatment workers themselves are able to establish treatment baselines, the greater can be the commitment to the task. This is often because baselines will be seen to vary for the individual, thus establishing the necessary emphasis on differential treatment. Also, treatment plans can benefit from acceptance across a greater number and type of worker. In the event, if team treatment is more consistent and realistic, then success will be realised more often and earlier, thus leading to an enhanced professional selfimage and job satisfaction. This is of paramount importance, as the assessment and treatment workers are continually under stress, being "bombarded" by deviance, negativism, attention-seeking behaviour, etc..

Whilst satisfactory treatment can usually only result from having first established adequate baselines and subsequentlythe attainment of treatment goals, the recognition of future goal attainment has to be objectively related to a re-located baseline. Future treatment must start from current base-lines, not redundant ones.

Objectivity and simplification can be realised by utilising the original assessment profile-instrument to record treatment progress: so now the need can be seen for an assessment and treatment profile-instrument (chart or index) capable of fulfilling the following requirements:-

- (I) Sufficiently general and/or specific to suit the assessment and treatment needs of maladjusted and/or delinquent children.
- (2) Suitable for multidisciplinary interpretation and use.
- (3) Flexible enough for use in assessment and treatment units varying in purpose and régime.
- (4) Comprehensive in coverage of wide ranges and areas of deviancy.
- (5) Encouragement of consistent treatment across disciplines.
- (6) Closer focus by the assessment and treatment workers
 during assessment and treatment toward the individual
 child's treatment needs.
- (7) Sufficiently objective and simple (relatively) to achieve wide enough use to take advantage of, and further encourage, the index of assessment and treatment on a broad base.
- (8) If objective (7) is realised, experiments and treatment evaluation could be compared on a common, relatively objective scale.
- (9) To serve as a progress report on a child to referral agencies.

^{*} hereafter referred to as A.T.U.'s

It will come as no great surprise to the reader that no one simple profile or index, at present, satisfies all these requirements. However, it is the objective of this particular research to attempt to construct such a profile.

The treatment profile to be considered will, at this stage, be broadly a profile for the deviant child; and this general profile may lend itself to adaptation and also serve as the overlay profile of ATU treatment specialities so long as the original demands of the instrument remain fulfilled in terms of assessing the individual client.

A general psychological bias could readily be presented, there being no shortage of theoretical models within the numerous branches of psychology. (ref. (b) p. 44)

Sociological interests could be justified, deviants being represented as an exclusive, though extreme, societal group.

That is, deviant to the general norms of society.

Pure behavioural or symptomatic representation <u>outside</u> of any major academic discipline might reflect the needs of para-professionals, lay people and parents. Indeed maladjustment and delinquency, particularly the latter, are often represented in terms of foul deeds committed, or clear overt symptoms, with simplistic remedies.

It would be as well to establish here that the writer does not comfortably accommodate to the idea of a child being labelled 'delinquent' or 'maladjusted' but only uses the terms because they are in such common use. The terms have some

value for administrative purposes, but little value in illuminating treatment requirements.

There is, of course, considerable overlap between these two groups with so-called 'delinquents' to be found in schools for the maladjusted and vice-versa. One also has disturbed delinquents, often in special treatment units.

Whilst the proposed assessment and treatment profile may take the greater part of a day to present and score (and this will no doubt mitigate against its use) the writer, as a practitioner, regards the time needed of little consequence when proposing to re-structure the life-style of a deviant child or spend many thousands of pounds on the child during residential treatment.

A survey of some of the main measures of maladjustment and delinquency are detailed in the next sub-section.

I : 2 PROFILES OF MALADJUSTMENT AND DELINQUENCY

Survey and critique of some existing "Profiles".

There appears to be no specific profile instrument available in the U.K. or U.S.A. that focuses upon the cognitive development, more particularly ego and moral development, of maladjusted and delinquent children.

The Jesness Inventory (Jesness, 1963) has been used with delinquents (Mott, 1969) and probationers (Davis, 1967) in the U.K. and U.S.A. but does not show sufficient test, retest consistency for use in recurrent treatment reviews (Mott, 1971).

Two widely used measures to assess the levels and areas of maladjustment are the Bristol Social Adjustment Guides (Stott, 1963) and 'A Childrens' Behaviour Questionnaire' (Rutter 1970) the latter being developed for use in the 'Isle of Wight Survey' (Rutter, et al, 1970a).

Stott's guides have sub-scores within well described areas of maladjustment and also yields a total score of which a score of twenty or more points is indicative of maladjustment. These guides are prone to subjective scoring, the total score cannot objectively show the degree of maladjustment and they are not designed to indicate a child's level of stage-sequential treatment.

Rutter's Questionnaire is mainly intended for research surveys and gives an indication of the tendency toward antisocial behaviour or neuroticism. A total score of nine or more is indicative of maladjustment. The scoring is minimally subjective and is not intended to indicate levels of cognitive development.

Quay (1972) compared measures of maturity with measures of maladjustment and found

... this pattern of immaturity occurs in all settings where deviant children are found. It seems particularly prominent in public school classes for the emotionally disturbed (Quay, Morse and Cutler, I966: McCarthy and Paraskevopoulos, I969) and the learning disabled (Paraskevopoulos and McCarthy, I970)...

A number of measures associated with the assessment of emotional-disturbance, and its sub-areas have originated from the U.S.A.. These include the Behaviour Problem Checklist (Quay and Peterson, 1975; Quay, 1977), Devereaux Elementary School Behaviour Scale (Spirack and Swift, 1967), the Conner's Teacher Questionnaire (Conners, 1969). Isser, et al, (1980) in a study using the above measures, suggested the presence of three independent dimensions of psychopathology, viz., conduct disorder, anxiety-withdrawal, and immaturity. These areas are discussed in terms of egodevelopment later in this study.

Symptomatic groupings are listed in Appendix B of the 'Underwood' Report of the Committee on Maladjusted Children (HMSO, 1955) provide a useful grouping of symptoms. Another

major study was the Isle of Wight survey (Rutter et al, 1970) but for the purposes of that particular study, symptomatic responses were shown in a different manner. The third and remaining major study was by the Schools Council; 'The Education of Disturbed Pupils' (Schools Council, 1978) and lists 'predominant patterns of behaviour', these being adapted from Rutter's study (personal communication, 1978).

These three examples of adjustment profiles are shown below:-

A GROUPING OF SYMPTOMS WHICH MAY BE INDICATIVE OF MALADJUSTMENT

- N.B. (i) This follows, except at a few points, the lines of a classification in use in child guidance clinics in this country.
 - (ii) For many of the symptoms listed, any and every manifestation does not indicate maladjustment, but only manifestations that are excessive or abnormal.

I. NERVOUS DISORDERS

Fears - anxiety, phobias, timidity, over-sensitivity. Withdrawal - unsociability, solitariness.

Depression - brooding, melancholy periods.

Excitability - over activity.

Apathy - lethargy, unresponsiveness, no interests.

Obsessions - rituals and compulsions.

Hysterical fits, loss of memory.

2. HABIT DISORDERS

Speech - stammering, speech defects.

Sleep - night terrors, sleep-walking or talking.

Movement - twitching, rocking, head-banging, nail-biting.

Feeding - food fads, nervous vomiting, indiscriminate eating.

Excretion - incontinence of urine and faeces.

Nervous pains and paralysis - headaches, deafness, etc.

Physical symptoms - asthma and other allergic conditions.

3. BEHAVIOUR DISORDERS

Unmanageableness - defiance, disobedience, refusal to go to school or work.

Temper.

Aggressiveness - bullying, destructiveness, cruelty.

Jealous behaviour.

Demands for attention.

Stealing and begging.

Lying and romancing.

Truancy - wandering, staying out late.

Sex difficulties - masturbation, sex play, homosexuality.

4. ORGANIC DISORDERS

Conditions following head injuries, encephalitis or cerebral tumours, epilepsy, chorea.

5. PSYCHOTIC BEHAVIOUR

Hallucinations, delusions, extreme withdrawal, bizarre symptoms, violence.

6. EDUCATIONAL AND VOCATIONAL DIFFICULTIES

Backwardness not accounted for by dullness
Dislikes connected with subjects or people.
Unusual response to school discipline.
Inability to concentrate.
Inability to keep jobs.

7. UNCLASSIFIED

В

Schools Council (1976)

TABLE 2

PREDOMINANT PATTERNS OF BEHAVIOUR

CONDUCT DISORDERS

(socially unacceptable behaviour such as aggression, destructiveness, stealing, lying, truanting etc..)

NEUROTIC DISORDERS

(excessive anxiety, depression, isolation, phobia, tics etc.)

MIXED CONDUCT AND NEUROTIC DISORDERS

(both present, neither predominant).

DEVELOPMENTAL DISORDERS

(general immaturity, enuresis, encopresis, language disorder not secondary to other disturbances, etc..)

PSYCHOSIS

(severe disintegration of behaviour involving loss of contact with reality).

PERSONALITY DISORDERS

(fixed abnormalities of personality that cannot be included in any other category).

NEUROLOGICAL ABNORMALITIES

(disturbance of learning or behaviour associated with brain injury, epilepsy, minimal cerebral dysfunction, etc..)

EDUCATIONAL DIFFICULTIES

(not secondary to subnormality nor maladjustment).

PREVALENCE OF PSYCHIATRIC DISORDER BY DIAGNOSTIC GROUPS				
DISORDER	ВО	YS	GIR	LS
Neurotic disorder	17		26	
Obsessional anxiety disorder		I		3
Anxiety disorder		13]	17
Depressive disorder		0		3
Tics (with or without anxiety)		0		3
Hysteria		0		0
Hypochondriasis		0		0
Conduct disorder	34		9	
Mixed conduct and neurotic disorder	22		3	
Antisocial but not delinquent		17		3
Trivial delinquency		6		2
Delinquency confined to home		I		4
Socialised delinquency		18		2
Non-socialised delinquency		14		3
Developmental disorders (enuresis)	7		I	
Hyperkinetic syndrome	I		I	
Child psychosis	I		I	
Personality disorder	0		I	
TOTAL	82		44	

Any psychological groupings used in this study will be consistent with above strategies. Further, any psychometric tests or assessment measures used in the profiles within this study will, for the sake of objectivity, acceptance and clarity of function, be either a result of direct observation or part of established test procedures. The Aston Index (1976, Newton and Thomson) has achieved ready acceptance because parts or the whole of well proven tests have been

used in a systematic and selective manner for the assessment and to monitor the treatment of children with language difficulties.

Aston Index may be used in the assessment and treatment of language difficulties as a secondary handicap or to assess specific difficulties of the otherwise normal child.

The profile proposed in this study may be used in a similar context to highlight developmental difficulties with regard to behavioural or emotional aspects.

A final comment on profile areas refers to one hope of the Warnock Committee (H.M.S.O.1978) that artificial divisions under specific labels of handicap be rendered less significant. Instead, an individual child's needs are considered in terms of 'special educational treatment' in a broad context. The emotional or behavioural development of a child will be inextricably inter-related with any language difficulties, reading retardation, etc. (and vice-versa).

It is proposed to render objectivity to the proposed profile by utilising a battery of well accepted measures to supplement direct observational techniques.

Some years ago, whilst writing on 'individual prescriptive treatment of the maladjusted child (Smith, I970) the writer was first introduced to Gunzberg's Progress Assessment (PAC) Charts (Gunzberg, I960) and was immediately impressed by the comprehensive and yet simple presentation of treatment aspects. The ATU worker in completing the profile, was not only establishing a base-line but being reminded of the immediate treatment aims. Unfortunately, the PAC's are only intended for mentally sub-normal clients, not intelligent

deviant children. After using the PAC for a psychotic child and a brain-damaged epileptic child, the writer realised the enormous potential that an appropriately developed 'PAC' could have for workers with deviant children. Gunzberg's latest PAC I (1975) and PAC 2 (1976) do now incorporate a higher but necessarily restricted assessment of personality development - restricted by the cognitive ceiling of the subnormal clients for whom the 'PAC's' are intended. The deviant children encompassed in this present work are usually considered to have higher and treatable levels of cognitive functioning, so any progress assessment chart will need to be extended towards this group - the nature of malfunctioning needing to be expressed in relevant developmental terms of malfunction.

Gunzberg's charts focus largely on socialisation in terms of self-management with regard to clothing, money, self-care, basic social communication, etc., levels that the majority of deviant children easily manage. The two areas of maladjustment the writer having scored on the PAC charts, above, being exceptions, in that both children had severe problems in fulfilling normative demands, due to cognitive handicaps.

It follows that whilst Gunzberg's model is superbly useful in fulfilling its intended purpose, a completely different emphasis is needed for deviant children.

Subnormal children will often be socially maladjusted or at least socially un-sophisticated but treatment of deviant children of normal intelligence is largely undertaken because of greater potential development. Also, of course, the deviance is seen as a cause of concern to the child and others.

Gunzberg uses a circumplex model which lends itself to developmental aims and sequential treatment. Other profiles or charts, e.g. the Aston Index, also possess these desirable attributes that focus upon and lead to treatment measures being implemented.

Just as Gunzberg's P.A.C.'s concentrate on socialisation of the subnormal and the Aston Index is intended for children with language difficulties, so the profiles to be constructed as a result of this study will be highly specific to closely defined areas of disability or difficulty experienced by certain children. Many of these difficulties will be seen (overpage) to stem from atypical development and as 'ordinary' children have been shown, above, to develop through a stage-sequential process it clearly becomes necessary to provide therapeutic help towards and through these sequential-stages.

STAGE-SEQUENTIAL TREATMENT

I:3 The two most important areas of special education, numerically speaking, are educational subnormality (moderate) (E.S.N.'M') and maladjustment.

In an E.S.N. school there is always a high proportion of maladjustment, whereas in the school for maladjusted children, placement indicates maladjustment as the primary handicap but one can find E.S.N.(M) children, the educational subnormality being considered a secondary handicap.

In addition to the fore-mentioned incidence of maladjustment (and overlap) among delinquents, Wright (1971, p. 86) states that delinquents have been found, in a number of studies (to which he draws reference) to have a lower than average level of intelligence. Further, Smith (1975) in a comparison of the ego, moral and conceptual development of

delinquent, maladjusted and normal children, found significantly lower development amongst delinquents and maladjusteds when compared with normal subjects. Further comparison showed the ego, moral and conceptual development of delinquents to be clearly less than that of the maladjusted group. This is despite the inherent overlap between typologies.

It follows that a <u>suitable</u> and extended developmental profile, encompassing pertinent areas, would be of more value in the treatment situation if E.S.N.'M's were accommodated as well as the maladjusteds and delinquents. Certainly the study by Smith (op. cit.) showed very basic levels of development for some maladjusted and delinquent subjects.

No apologies are offered for underlying emphasis on developmental psychology in this study. Childhood is the main period of acquiring appropriate social norms and as they are age-related to maturity, developmental lag or age-inappropriate behaviour is seen as not normal, that is, abnormal in the broad sense of the term. In the treatment of maladjusted or other deviances, adjustment and stage-sequential development are dependent on the successful accomplishment of 'brief-stage' treatments and developmental accelerators from a variety of professional sources.

The successful accomplishment of these brief-stages has been the result, invariably, of learning or re-learning cognitive approaches to a task.

.... the person is always involved in simultaneous processes of differentiation and synthesis; that is, in the normal course of events, the person not only becomes more differentiated as newer and more complex patterns of organisation are developed, but since new stimuli tend to be assimilated in such a way as to require the least amount of cognitive reorganisation, he also tends to become relatively more simplified and

integrated. It follows, therefore, that the core of personality cannot be considered to be stable in content; however, it can reasonably be viewed as an integration, as a set of principles about which a variety of content can be organized

Sullivan, Grant & Grant (1957)

It may be fairly stated that many deviant children are where they are, developmentally speaking, due to non or maladaptive learning. The inability to master tasks and systems can further frustrate the child, leading to externalised reactions and internalised stresses. If these unacceptable reactions and stresses are cumulative, sometimes in compound terms, then further entrenchment or regression may occur, each according to the type of deviancy specific to individual personality and the influence of surrounding forces.

Indeed Havighurst (1953) defines a developmental task as one

.... which arises at or about a certain period in the life of an individual, successful achievement of which leads to his happiness and to success with later tasks, whilst failure leads to unhappiness in the individual, disapproval by society and difficulty with later tasks...

The majority of deviant children have experienced atypical child-rearing practices. This large and important aspect is fully covered by Thomas (1968), Rutter (1972), The McCords (1959), Schaefer (1959), Becker (1964), Baumrind (1971) and Danziger (1971) and is beyond the brief of this study.

Parents, and to a lesser extent schools, have the task, among others, of translating a totally dependent, primitive and hedonistic infant, into a more or less self-sufficient, sophisticated and responsible member of the community.

With the complication of genetic, physiological, environmental factors, it is little wonder that the process of socialisation varies to extremes. It is possible to view these extremes in terms of over and under-socialization. The anti-social child being under-socialized and the anti-ascetic child being over-socialized to the point of gross inhibition. Both processes can be reactive to "family control" systems, sometimes also interacting with unfavourable or 'non-facilitating' environments.

Regardless of the ATU and the treatment workers personality, treatment may only start from where the client may be related to inputs and Expectations (outputs) the more fixated or regressive the client is, then the harder the job will be of moving him on. In this case treatment goals will not have to be too ambitious and must be set in briefer stages. As an illustration to this, the writer's special school has been 'successfully' run along the lines of stage-sequential treatment through four wings and sub-areas (sub-stages) of the buildings, with emphasis on individual prescriptive treatment for the most disturbed or regressive children, especially in the earlier stages of development. The "briefer stages" (see above) may consist of highly specific behaviour-modification techniques to elicit stageprogression. In contrast, areasof the special school for the children at higher levels of ego and moral development, often have emphasis on peer group relationships, the relative absence of adult guidance and almost super-optimal expectancies (see Appendices 4 & I4).

Within this highly-structured treatment setting, over twenty sub-groups have been identified, some of which can take advantage from group therapy. More individualised treatment can come from the child psychiatrist, clinical or educational psychologist, speech therapist, etc., as well as from the usual range of helping professions.

A further example can be taken from the extensive use of general remedial education which may require the child to be individually withdrawn from class for 'brief-stage' treatment for a minor speech problem, perceptual training etc..

It almost goes without saying, that such "human engineering" must start from a base of warm empathy and caring, or some would say, from 'love'. The term 'developmental accelerators' has been used. In physical terms acceleration is a result of thrust from another body or substantial surface, in human terms, the reliability of other bodies or persons and the establishment of a firm or safe base in relation to the insecure client, needs primary consideration. Development of the client's emotional security and self-image through personal caring can provide the horse-power necessary for acceleration of psychological maturity.

I: 4 EGO-DEVELOPMENT AS THE TREATMENT CORE

I: 4 Ego Development as the Treatment Core

Because of the relative sophistication of Western society, rigid expectancies of what a child should be capable of, in relation to different chronological ages, are much discussed. Particular levels of ego and moral development are expected, though this is not expressed as such, in any academic sense. For instance, the toddler who is expedient, may raise chuckles, but not so the older child.

A certain level of conformity is expected from the older child and certainly from the adultand essentially one must "play by the rules". Those adults from whom society accepts "blanket" conformity, e.g. police, clergy, teachers, the forces, etc., may be the target of much scorn if deviance from the norms of conformity is shown. The popular press, in particular, find such occurences 'good copy'.

Clear failure of adjustment by children to normal agerelevant demands is particularly noticeable in the child who is behaviourally or emotionally incompetent, that is, compared to his peers.

Behaviourally, for example, the older child who has a temper tantrum, similar to that of an infant, when immediate gratification does not occur, will very likely be described as maladjusted. The child has not adjusted his response correctly to one of life's minor crises, resulting in maladaptive adjustment.

Emotional expressions of extreme timidity in the older child are not expected, though in the infant this is accepted as one would expect natural maturation to expel much of the timidity, i.e. "he will grow out of this", or " it is just

a stage he is going through". Such timidity in an older child, is one sign of maladjustment.

It is intended to give only these two brief examples in this section and to expand on the inter-relationship of ego-development and maladjustment in a later section of this study. However, at this point, it seems pertinent for the reader to compare hypothetical children on the Underwood Report's 'A grouping of symptoms which may be indicative of maladjustment', to the stage hierarchical theories of Freud, Erikson, Piaget, Kohlberg and Loevinger which appear in the next section. One may hypothesise on the level of fixation or regression, the child rearing practices and the prognosis for such children. (See Section 3).

Even a brief glance at the above section of the 'Underwood Report' will be sufficient to show that almost all symptoms of maladjustment can be indicative of abnormal ego-development. This may be due to non-completion of sequential stages, fixation or regression.

Treatment of malad-

justment can be more easily effective when "normal" development has not accurred because of non-facilitating parental figures or environment. Then, the child can be put in a facilitating environment such as a residential special school for maladjusted children, or even a normal boarding school and progress can usually be expected to be made. Indeed, for many years, special schools for delicate children have been used as the facilitating environment for such maladjusted children.

Fixation may be due to the above influences or due to an emotionally traumatic event or period. That is, if the child experienced good conditions before the traumatic

periods occured, he may be fixated for reasons of emotional insecurity, although regression, to varying degrees, would be more usual. Stage progression is unlikely to occur in suboptimal conditions and this leads onto the question of immature, inadequate or psychiatrically sick parents. Such identification figures will not provide models or, often, conditions for higher stages of ego-development, however, 'sick' parents may promote super-optimal conditions. The latter situation may result in excessive anxiety, inhibition and subsequent regression or fixation.

Having identified the level of ego development of the maladjusted child, then the means for facilitating development (or 'unsticking') must be identified. This aspect of 'matching models' will be explored at the end of the study,

At this point it must be restated that high levels of ego development, or intelligence, do not guarantee psychological adjustment. Or, that maladjustment is always a result of faulty ego-development. In practice, few receive significant feotal or birth injuries and therefore ego-development and adjustment will be dependent on parental figures and the environment for the majority of children. Few children are found to be physiologically disadvantaged (Rutter, et al., 1970a; 1970b).

Within the narrow and collectively extreme population

(in terms of personality range) of schools for the maladjusteds

it is, however, extremely important to have thorough medical

checks, looking for such insidious conditions as diabetes,

renal abnormalities, hormone imbalance, and minimal cerebral

dysfunctions.

In addition to the relatively small numbers of maladjusted children with physiological complaints affecting maladjustment or ego development, as reported on the previous page, a few children may be genetically maladjusted (Esson-Moller, 1965; Heston, 1966; Jacobs et al., 1965).

On the basis of current theories and empirical findings, maladjustment cannot be explained by any single cause. The general principle that complex behaviour is based on multiple causes (Anastasi, 1958) is particularly appropriate for this study and understanding of maladjustment. One inherent advantage of the multiple causality approach is that it resolves the either/or arguments of the nature vs. nurture and organic vs. psychogenic controversies that still appear and are popularised (Szasz, 1960). Positing such multiple causality or claiming that both heredity and environment contribute to psychopathology is rather stating the obvious, particularly when these factors are listed thus:-

- A. The effects of genes are mediated through:
 - I. adaptive resources: intelligence, originality, creativity, flexibility, improvising ability, resourcefulness, problem sensitivity, emotional stability;
 - general resistance to stress, both acute (catastrophic), and chronic (cumulative), and novel (e.g., through the adrenal cortex);
 - predispositions to specific organ system involvement in reactions to stress (psychomotor disorders) or physiological expressions of anxiety;
 - 4. temperamental predispositions to:
 - (a) level and distribution of energy;
 - (b) self-assertiveness, aggressiveness, perseverance, volitional independence, venturesomeness, initiative:
 - (c) ego maturation variables (hedonistic needs, executive independence, frustration tolerance);
 - (d) manner of resolving ego development crises;
 - (e) introversion-extraversion;
 - (f) preferred specific adjustive techniques or coping mechanisms (withdrawal, denial, projection,

rationalization, regression);

- (g) emotional stability (Ausubel and Sullivan, 1970).
- B. The effects of the environment are mediated through:
 - I. cultural or subcultureal sources of stress (e.g., caste class, sex, ethnic origin) and kind - whether catastrophic, cumulative, or novel;
 - choices of coping mechanisms approved by culture or subculture (e.g., resignation and stoicism or aggressive combatting of difficulties);
 - 3. familial and idiosyncratic ways of resolving egodevelopment crises (e.g., rejection, extrinsic valuatic extremes of domination and protection); demands, pressures, expectations, limits, discipline;
 - 4. available choices among values transmitted by culture and subculture (e.g., degree of achievement or amount of responsibility expected);
 - 5. approved cultural and subcultural ways of socializing satisfying drives, and expressing or repressing emotions (Ausubel & Sullivan, 1970).

With a suitably therapeutic treatment milieu, that is a facilitating environment, many of the above, if factors of a child's maladjustment, may be modifiable. It should always be remembered that the strength of manifold causality will have dictated a certain life style. Initial acceptance of the maladjusted child will have to be at the perceived level (by the child), so for the treatment environment to be facilitative of higher levels of development, a planned series of sequential facilitation will have to be available. This is the case in the writer's present school, described in the School's Council Project: Education of Disturbed Pupils (Wilson & Evans 1980). More will be said in detail of stage-hierarchical treatment towards the end of this present study.

When treating maladjustment, every therapeutic tool of likely benefit should be employed consistent with

- (a) our present state of knowledge,
- (b) the importance of lack of time available for therapy, as life-styles become more ingrained or maladaptive, and
- (c) multi-causality.

In the above school, it is not untypical for a child to be involved simultaneously with a planned treatment environment, individual psychotherapy from a child psychiatrist, behaviour therapy under the direction of a clinical psychologist, group therapy, drug therapy, special education, counselling, and psychiatric social work (and some children still fail to adjust).

is more helpful in understanding and treating patients (in clinical psychiatry) than a hodge-podge of unintegrated and often contradictory theoretical positions, we feel that therapy should be eclectic. In the first place, in the present state of the art, we cannot afford to overlook any therapeutic tool that is effective, even if there is ignorance or disagreement as to why or how it works. Second, therapeutic tools that are effective may be so for reasons quite different from those advanced by their originators

Ausubel and Kirk (1977)

The writer's views on the treatment of maladjusted children, are entirely consistent with the above statement, with ego-development providing the non-eclectic core. In particular, stage-sequential ego-development largely as described by Loevinger, but with supporting theories, primarily from Erikson, Harry Stack, Sullivan, Kohlberg, Piaget and Freud. Other theorists will also be quoted, these being subjectively described as secondary to the above authors.

Special schools for maladjusted children with their focus on education are seen as prime environments for re-learning, even if one does not subscribe to an exclusive learning theory as an effective therapeutic tool in treating such children, School not only provides a normative core of functioning, but the atmosphere of learning and expectation of achievement motivation assists both learning and development.

.... problem behaviour and it's evolution in the context of crucial events - social, emotional, cognitive and physical - taking place at different stages of development.

Many deviants emotions and behaviours can be conceptualised as the consequences of the child's failure to learn successful ways of coping with developmental tasks, or as resulting from his learning inappropriate strategies for dealing with life. This viewpoint means that the practitioner seeking to formulate causes and devise therapeutic programmes to alleviate the child's problems, can draw on experimental and developmental psychology for basic principles of learning and development to aid his task

Herbert (1974).

CHAPTER 2 STAGE-SEQUENTIAL DEVELOPMENT

2: I Historical perspective and definitions
2: 2 Freud's stage theory of psychosexual development.
2: 3 Erikson's life-span theory of psychosocial development.
2: 4 Piaget's developmental theory of cognition.
2: 5 Kohlberg's cognitive-developmental approach.
2: 6 Loevinger's theory of ego development.

STAGE-SEQUENTIAL DEVELOPMENT

(I) Historical perspective and definitions

Conception of the ego and the related conception of its development go back to the "axial age in human history" (Jaspers, 1948), the period when people became conscious of themselves as human, a period that occured in various cultures more or less independently between 800 and 200 B.C. In Plato's, "Apology", Socrates asks if there is anyone who understands what a man and a citizen ought to be and who the trainer ought to be.

John Stuart Mill, Bentham and other nineteenth century philosophers considered the whole concept of elasticity of human growth.

Darwin's theory of evolution sparked a widespread interest in looking at many topics in terms of development. Thus, although Freud's interest in psychosexual development during the early years of the twentieth century and the interest of some psychologists in ego development in the same period were partly antagonistic to each other, both drew inspiration from theory of evolution. For example, James Mark Baldwin had sophisticated ideas about ego development prior to and hence uninfluenced by knowledge of psychoanalysis.

While psychoanalysis arose in opposition to ego psychology, opposition to Freud and the drive psychology of the early years of psychoanalysis in turn, gave new impetus to ego psychology. Among Freud's followers, Adler became spokesman for the primacy of the ego over drives. (This eventually split Freud and Adler apart).

In his later years, Adler's most characteristic concept was 'style of life', a term he used more or less interchangeably with 'self' or 'ego' (Ansbacher and Ansbacher, 1956, p. 174).

George Herbert Mead made significant contributions to the theory of ego development, but they had little impact at the time.

According to Loevinger: -

sources. Both drive psychoanalysis and behaviourism, when pursued as monolithic reductionistic systems, are too simple to account for behaviour. Moreover, as therapies and ideologies for child rearing, they both have limitations. Despite the fact that psycho-analysis properly understood, never claimed to be the cure for everything, from delinquency to schizophrenia, enthusiastic disciples were ready to use it so, and the failures of this overextended psychoanalytic psychotherapy, led to renewed interest in ego development. The greatest stimulus probably comes from (two factors, from) the social importance of problems such as character defect, delinquency and psychosis, which can be construed at least in part as problems of ego development (1976 p. II)

Contempory developmental theory owes much to the work of Jean Piaget says Flavell (1963) but although Piaget has undoubtably been the principal contributor to the literature of cognitive development for the last three decades, the cognitive developmental frame of reference has a long complex history, commencing with the studies of the English associatists, this having some influence on Piaget's work (Boring, 1957).

One of the central figures in the metamorphosis of the study of cognition from associationism to a developmental frame of reference, is James Baldwin, the protege of William James.

Baldwin defines many of the basic concepts found later in "assimilation" and "accommodation" (Baldwin, I9II, p. 77), "Schemata" (Baldwin, I908, p. IIO - II7) and the "stage" concept (op. cit. pp. I8If).

Baldwin collaborated with Janet, Flourney and Binet. Piaget may have been introduced to Baldwin's work while assisting Binet's associate, Simon. (Van den Daele, 1968, pp. 201 - 202). Piaget, it is said by Kay (1968, p. 145), was also deeply dependent upon the sociological theories of Durkheim.

The 'blassical" developmental theory posited by Enunerich (1968, p. 671) consists of an invariant sequence of personality stages. The main prototypes being psycho-analytic theory (S. Freud, 1905; Rapaport, 1960; A. Freud, 1965) and Piaget's theory of cognitive development (Piaget 1932 and 1952; Tanner and Inhelder, 1956, 1960; Kohlberg, 1958, 1969, 1971; Flavell, 1963; and Bull, 1969(a)). Although they differ in some important aspects, these theories share the view that an individual, whilst progressing, passes through a series of qualitively different levels of structural organisation and the sequence of any stage progression is invariant.

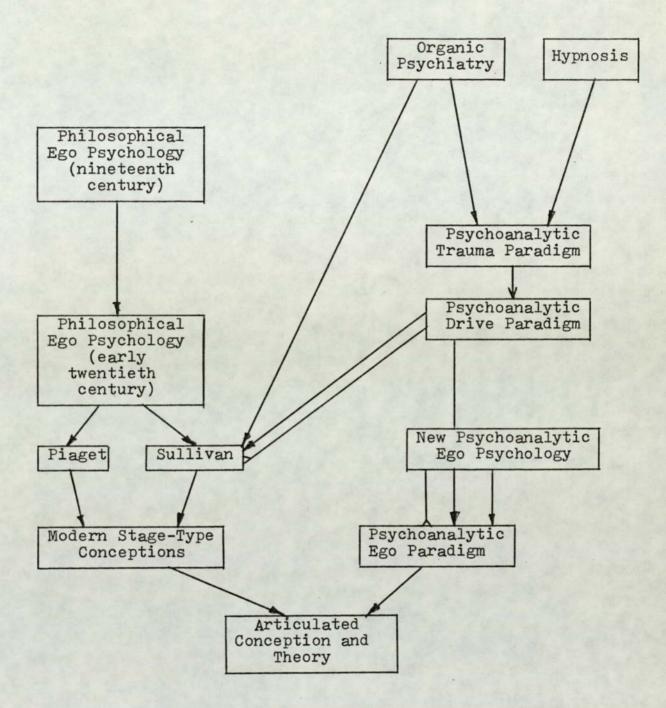
Discussions of personality related ego development stage progressions have been made by Loevinger, 1966, 1970; Van Den Daele, 1968; Sullivan, Grant and Grant, 1957; Peck and Havighurst, 1960; Isaacs, 1956.

It has not been possible for theorists to arrive at any commonly convenient definition of each stage, but each emphasise a common underlying core of cognitive development.

None state that progression will occur but rather that if progression does occur, it's course will be predictable and invariant. Consequently, investigators are interested in both the rate and extent of developmental progressions (Kohlberg, 1964).

Further, Ausubel (1952) and Ausubel and Kirk (1977) discuss the inter-relationship of faulty ego-development to psychopathology. Although deviance cannot always be viewed in terms of psychistric illness. The Rudels (1978) remind us that psychiatrically ill adults have had to begin somewhere, often in childhood.

The writer is only too aware how coarse this brief historical perspective is, but the reader is referred to Loevinger (1976) and Lerner (1976) for an extended perspective and the following schematic diagram: - - see overleaf.



Note: A -- B means B is a direct outgrowth of A

C -- D means C influences D

E -- F means F developes in opposition to E

Schematic history of conceptions and theories of ego development

from Loevinger (1976), p. 414.

An outline of a few of these theorists and their theories follows, these being chosen for their general acceptability and for their impact on the construction of a model of egodevelopment in the treatment of deviancy.

2:2 FREUD'S STAGE THEORY OF PSYCHOSEXUAL DEVELOPMENT

Freud hypothesized that humans are really just complicated energy systems (Hall, I954). Psychic or mental energy he termed 'libido' and considered that humans are born with a finite amount. Iocation of libidinal interest varies with the stage-development needs of the individual, that is, the libido being invested or centred in different bodily areas or zones, at different stages of development.

Stress is said to be induced if libidinal gratification is not satisfied, that is, over and above basic physiological requirements. Indeed Freud postulated that the effects on an individuals emotional-sexual or psychosexual development would be detrimental if appropriate stimulation to the appropriate bodily area does not occur.

To consider these effects, consideration must be given to the sequences postulated by Freud as characterising the changes in bodily location of the libido.

I. Oral Stage

The first invariant sequential stage is stated to be when the libido is focussed on the mouth. Indeed an infant up to twelve months of age will gain pleasure from sucking and biting. If excessive frustration occurs, say through the use of a nipple converter (shields) for inverted nipples or premature weaning, fixation may occur. That is, there may be an arrest of libidinal development. Some of the infant's libido will remain fixed at the oral zone and when the infant develops to the next stage, all the libidinal capacity will not be available for fuller exploitation and consolidation of that stage.

Fixation (relative) at this stage may result in an adult who is always attempting to take things in, to acquire things (Hall, 1954). Apart from the acquisition of possessions, other examples might be through excessive consumption of food, sweets, drink or tobacco.

.... a fixation in the oral biting period of the oral stage might result in an adult who continually uses orality to be aggressive. Thus, someone who constantly makes 'biting remarks' about others - for example, an extremely sarcastic or cynical person - might be seen to be fixated in the oral stage

Lerner (1976).

2. Anal Stage

From the age of one year through to the third year, libidinal focus is on the anal area. This may be further divided into two sub-phases, anal expulsive and anal retentive.

As this phase usually coincides with toilet-training, anal expulsive fixations may result from too harsh or inappropriate toilet training. Thus as an adult he may be sloppy, in-orderly and wasteful.

Fixation at the anal retentive stage may result in an adult who is parsimonious, inhibited and obsessionally neat or methodical.

3. Phallic Stage

Because of the fundamental physiological difference between the sexes with regard to the phallic regions, this stage is sub-divided into the male phallic stage and the female phallic stage.

The male phallic stage

Here stimulation of the genitals gives libidinal gratification though not so much through self masturbation but when the boy's mother bathes and dresses him. The

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boy is said to have incestuous love for his mother and hate develop s towards his father who is perceived as blocking attempts at complete gratification. This is termed the 'oedipus complex'.

Guilt of the feelings he has for his father causes fear of castration by father (because of libidinal concentration on the phallic region).

Because of these anxious identifications with father, the boy begins to form the superego. One component of this is the ego-ideal, an abstract of the identification with the father-figure. Secondly, following the pursuit of the ego-ideal, the conscience starts to be formed.

Female phallic stage

Freud postulated incestous feelings exist between the infant girl and her father and again it is the parent of the same sex who stands in the way (in imagination). Punishment is feared from the mother, but in terms of castration she may already feel punished. Thus the account is said to be 'penis envy'. In an effort to resolve her Oedipal conflict, she tries to relinquish her incestuous love for her father, and identify with her mother. The superego component of her personality is thus formed by identification with the egoideal or "mother figure".

Freud postulated because girls only felt penis envy and not castration fears proper, then incomplete identification and resolution of the Oedipal situation took place. Thus, there is a lack of complete conscience development and, in short, Freud (1930) thought females are never as morally developed as males.

It is valuable to point out that Freud himself was not satisfied with his thoughts on the female phallic stage.

4 Latency Stage

After the phallic stage, at about five years of age, comes the latency stage. Until puberty, Freud hypothesized the libido submerging and little psycho-sexual development taking place.

5. Genital Stage

At puberty the erogenous zones are again the genital areas. Adult libidinal drives being developed and maximum grat ification normally arising from sexual intercourse with a member of the opposite sex.

Fixations of early stages are said to have considerable effect on the adult's psycho-sexual outlook and practice.

Much criticism of Freud's theories have taken place since first published. The majority of even his minor theoretical viewpoints have in turn been academically dismissed by his opponents, particular reference being drawn to his method and sampling.

Adult neurotic patients, a full century ago, were asked, rather subjectively, to recall childhood experiences. From this recall, Freud hypothesized a theory of child development.

If nothing else, Freud provided developmental psychology with a provocative and influential stage theory of aspects of emotional or psychosexual development.

For a critique of Freudian psychology, the reader is referred in particular to Fromm (1941), Murphy (1944),

Erikson (1948), Orlansky (1949), Ausubel (1952), Mahler (1968), Shaw (1974) and Ausubel and Kirk (1977).

This study does not set out to be a critique of Freud's theories but merely to briefly show the stage-sequential aspects. Later in this study, the effect of Frued's psychosexual stages on later adjustment will be considered.

The development of the ego from it's primitive largely instinctual state to higher orders of problem solving and delayed and re-ordered gratification, may be described in Freud's final position on the ego, as described by Waelder (1960, p. 177):

between instinctual and purposive processes, between blind propulsion on the one hand and the choice of suitable means for particular purposes on the other hand Psychoanalysis includes in the id, everything by which man appears to be impelled to function, all the inner tendencies which influence him.

The ego, on the other hand, represents the considered direction of man, all purposeful activity Psychoanalysis, in so viewing the id and ego, thus perceives man's being both impulsively driven and his being purposefully directed The scheme of processes in the id would then be, in short: instinct - instinctual expression; those of the ego, however, are: task - task solving, or attempted solution

The ego, as Freud said, is an organisation. The id and the superego, to the extent they are unconscious, cannot be said to be organized within the ego, although they may be organized within themselves. Ego development consists, in part, in getting a meaningful balance to the organisation of 'das Ich'. To Fingarette (1963) the striving to make experience meaningful is not something the ego does; the striving for meaning is what ego is.

Gill (1963) using the term 'structure' to denote the degree of organisation, makes the useful hypothesis of the ego

and id being two extremes of a continuum. Indeed, the stability of situational organisation on such a continuum, occupies much of Freud's thinking, particularly in relation to the neuroses.

ERIKSON S STAGE AND DIFFERENTIAL THEORY OF PSYCHOSOCIAL DEVELOPMENT

Erikson broadened Freud's ideas of psychosexual development into psychosocial development. Putting emphasis on the person's, or child's ego relationship with the affective society, he worked from the ego 'end' of the ego-id continuum, described above. He postulates that emotional development involves far more than only psychosexual development.

As psychosocial development proceeds, the ego has to continually alter to meet changing demands of society. At each stage of psychosocial development, new adjustment demands are placed on the ego, and accordingly, new emotional crises emerge. Hence, the consideration by Erikson of the ego and society, led him to the formulation of stages of development different from those of Freud and to the formulation of psychosocial emotional crises, specific to each stage of development. It is these emotional crises that are conceptualized in differential terms and, accordingly, allow us to use Erikson's theory as an instance of the interrelation of stage and differential theories of development

Lerner (1976)

Because society places demands on a child, specific to his chronological age, each stage of Erikson's stage theory of psychosocial development is a <u>critical period</u>. That is, for optimal adjustment to society, the child must perceive, accommodate and adjust the demands of one stage before fresh demands of the next stage are presented.

In addition to the child's integrative capacity, the environmental or societal forces impinging on the child must be optimal in facilitation. Maladjustment can result from sub-optimal or super-optimal conditions. Broadly speaking, anti-social tendencies, delinquencies, poor school performance or cultural or economic deprivation may result from sub-optimal conditions.

Super-optimal conditions may place excessive demands on the child's ego-capacity for super-optimal development.

That is, unless a child has particularly good intelligence or cognitive facilitation, the facilitation 'afforded' by zealous parents or teachers, can, by the child's inability to meet expectations, lead to maladjustment stemming from an inadequate self-image.

A full explanation of Erikson's eight stages of psychosocial development, will show the opportunity for match and miss-match. He concludes from his work that, there are, in the course of life-long development, eight clearly discernible types of psycho-social conflict which call for resolution.

Their successful resolution 'creates at every step an accruing sense of ego-strength' (Erikson, 1963, p. 246).

These ego-qualities follow the satisfactory resolution of developmental stimuli: arising from emergent facets of the social institution. If the emergent problem is not resolved then;

- (a) the position is accepted, perhaps even passively, or
- (b) one of the ego-defences is brought into play to preserve the self-image, or
- (c) the problem is tackled afresh until a satisfactory resolution is found.

It can now be seen that if attitude (a) is frequently adopted, then ego-development cannot and therefore will not take place. This is largely why immature people are relatively inadequate, and vice versa of course.

Those using ego-defences excessively, as in (b) above, are leading a life of self-delusion and this can lead to mental ill-health or, at the most favourable, maladjustment or instability.

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If the problem is faced (and this in itself demands some stability and adjustment) and after re-trial, successfully accomplished, this will lead to extended ego-capacity and development. In life one frequently finds people of higher levels of ego-development, able or willing to attempt to use a range of skills, talents or extreme personal endeavour. Like the old saying, "if you want a job doing, ask a busy person".

Conversely people of low ego-development may appear to be unwilling to make positive efforts to basically improve themselves or resolve personal crises.

In order for the reader to draw further conclusions, a tabular comparison between Loevinger stages of ego-development and Erikson's stages of psychosocial development, is produced below. This is adapted from Loevinger (1976) who, incidentally, also shows many other tables illustrating comparisons between her theory of ego-development and those of other theorists.

Table 5 Ego Stages of Loevinger and Erikson

Loevinger Erikson

Autistic

Trust vs. Mistrust

Symbiotic

Impulsive

Self-Protective

Autonomy vs. shame and doubt

Conformist

Initiative vs. guilt Industry vs. inferiority

Conscientious-Conformist

Conscientious

Identity vs. role diffusion

Individualistic

Intimacy vs. isolation

Autonomous

Generativity vs. stagnation Ego integrity vs. despair

Erikson's stages:

The first stage : basic trust v. basic mistrust

In the first year of life, the basic learning the infant has to achieve is the ability to trust his environment.

Whether the ego develops with a basic trustfulness towards the world or not depends on this. In infancy, the mother lays down the degree of dependency satisfaction which greatly affects the infant's ratio of trust to mistrust. If the child's dependency is supported with a sameness and closeness of continuity. then this leads to a sense of personal identity in later life, which is rooted in 'a sense of being "all right", of being oneself'. As Erikson puts it:

.... There are few frustrations in either this or the following stages, which the growing child cannot endure, if the frustration leads to the ever-renewed experience of greater sameness and stronger continuity of development, towards a final integration of the individual life-cycle with some meaningful wider belongingness

(Erikson, 1963)

It goes almost without saying that in this first 'awakening' period, the child is open to many, indeed almost all, stimuli. This can be generalised into three main areas: the continuity of the world of objects, the differences between self and others, and, later, control of one's own impulses. (Loevinger, 1976).

....However, the necessity of dealing with all this stimulation evokes a stage-specific emotional crisis for the infant. If the infant experiences the sensory world as relatively pleasant or benign, one sort of emotion will result. Alternatively, if the child's sensory stimulation experiences are negative or harsh, then another type of feeling will result. Thus, if the infant has relatively pleasant sensory experiences, he will come to feel that the world is a relatively benign, supportive place, then it will not hurt or shock him. To Erikson, then, the infant will develop a sense of basic trust. If, however, the infant experiences pain and discomfort, he will feel that the world is not supportive but that there is pain and

danger in the world. Here the infant will develop a sense of mistrust

(Lerner, 1976).

Erikson regards ego-development and its stages as a life-long programme and the writer agrees with this, but some workers in the field of treatment of maladjusted children place particular emphasis on this first stage.

Integration of the ego is said to be so incomplete, if conditions within this stage are not 'good-enough', that the child may be termed 'unborn' (Docker-Drysdale, 1974). Others collude with this, Balbernie (1966, 1974) and Winnicott (1965 (a), 1965 (b)). The author, in previous research (Smith, 1975) found no evidence of this, indeed, in a large sample of both maladjusted children and delinquent children, ego-development was clearly found to reflect acceptable integration beyond no-integration, or being 'un-born'.

In practice one can recognise that certain children are 'frozen' (Docker-Drysdale, 1970), frozen in distrust. These are the older, even adolescent maladjusted children who have been, and still are, severely emotionally deprived. The important early parental contact is regarded as a primary relationship and therefore later, and usually discontinuous, contact with teachers and residential care workers, are secondary relationships. In the writer's practical experience, it is not usually possible for 'frozen' children who have not had a 'good-enough' primary relationship, to form deep or lasting secondary relationships. There is well established relationship between severe emotional deprivation and delinquency (Stott, 1964; Wright, 1971) and the writer (Smith, 1975) found developmental clustering by delinquents at the 'expedient' level (Loevinger, 1970b).

This suggests the psycho-social relationship did not extend beyond the expedient or need-satisfying level.

Because Erikson uses a continuum between trust and mistrust, mention must be made of too much trust as well as too much mis-trust. One immediately has a mental picture of the child who is over-protected by 'cocooning'adults.

Secure, simplistic, non-adventurous parents anxious only to preserve the 'niceness' of their restricted world. Classically the school phobic may come from such parents. How can a school be as protective, warm, and providing as the family. It is not unusual for severe school phobics to threaten suicide when first placed in a 'cold, harsh, unfriendly school'.

Thus resolution must come midway on the above continuum.

The second stage : autonomy v. shame and doubt

In the second year of life, Erikson states that the child's greatest need is to experience and control a growing sense of autonomy; he needs a sense of being able to stand on his own feet. Nevertheless, he is inexperienced and has to learn painfully how to use his growing powers. The child's other need, therefore, is to be spared meaningless and arbitrary experiences of shame and doubt from excessive punishment visited on him when he fails. If the child is handled with sensitivity at this stage, then the seeds for later autonomy are sown.

If excessively punished, or punished in an ambivalent or inconsistent way, he will doubt his newly found autonomy and restrict his explorations and exchanges for the sake of comfort and safety. Such a child will grow to feel excessive doubt and shame and have an impoverished self-image.

.... This stage, therefore, becomes decisive for the ratio of love and hate, co-operation and wilfulness, freedom of self-expression and it's suppression. From a sense of self-control without loss of self-esteem, comes a lasting sense of goodwill and pride; from a sense of loss of self-control and of foreign over-control comes a lasting propensity of doubt and shame (Erikson, 1963)

This stage very much characterizes Loevinger's selfprotective stage.

Many of the problems arise at this stage because of the range of psycho-social pressures presented when the infant becomes self-mobile, learns to feed himself, control his bladder and bowels, explores with growing inquisitiveness but restricted dexterity (!) and developes a language.

The richness of modelling and parental encouragement at this stage, lays the foundation of ego-boundaries and frustration thresholds.

A child's ego-boundaries will be inconsistent, if guidance and modelling is inconsistent and a lack of reliable parameters will lead to failures and frustration reactions.

This condition is very much in evidence in the maladjusted child or adolescent, who lacks persistence in trying new skills, or indeed, may destroy his work. Also, he may be an involuntary social isolate or delinquent through inappropriate social responses. Any subsequent frustration showing itself in social withdrawal, defensive aggression, destruction, etc.. These are typical symptomatic responses of the maladjusted child and as such children are frequently stuck or have regressed to immature levels, the main child-management problem is ventilated by Erikson's (1968) description of this stage;

the consequences of his yet untrained discrimination and circumspection. But his environment must also back him up in his wish to "stand on his own feet", while also protecting him against the now newly emerging pair of estrangement, namely, that sense of having exposed himself prematurely and foolishly, which we call shame or that secondary mistrust, that "double take" which we call doubt-doubt in himself and doubt in the firmness and perspicacity of his trainers

The individualised balance between control and automony in the treatment unit, has to be maintained by treatment workers and as these workers are under continual stress, then the degree of autonomy the workers themselves are then able to feel governs the degree of autonomy extended towards the clients.

In this case, the stress resulting from the collective maladjustment of the group, affects the group-members as well as treatment workers, so the balance of control-autonomy is rendered more consistent. A comparison between the beginning and the end of a school-term confirms this.

Resolution of a situation specific to this stage will be accomplished easier following satisfactory completion of stage one, trust vs. mistrust. That is, if the parent was able to be consistently 'good-enough' to invoke optimum trust, then the same parent is more than likely to be capable of exhibiting and reflecting the optimum ratio of autonomy vs. shame and doubt.

In terms of treatment of the maladjusted child, the successful workers will have avoided feelings of a synthetic and omnipotent autonomy in the child, at one extreme, and excessive shame and doubt at the other extreme. The latter could have led to an over-absorption of shame or guilt, so that the child becomes uncaring or develops a 'precocious conscience' (ibid).

The third stage : initiative v. guilt

Between the third and fifth years, Erikson believes that the basis of the later adult's capacity for initiative is laid. During this stage, the child is reaching out on his own much more, though the adult remains ready to further encourage or chastise. From the start, the ratio of the Child's ability to 'master' his environment to the degree of controlled freedom exercised by adults, will determine the degree of initiative or guilt the person will have later. Thus lack of freedom from seemingly over-caring adults will restrict the opportunity the child has for using initiative and succeeding and there-by limiting development. Indeed, if the child secretly ventures beyond the parameters set by 'powerful' parents, this will lead to inhibiting guilt.

On the other hand, uncaring, ambivalent or excessively liberal parents who fail to set consistent parameters, will allow the child to frequently over-reach themselves and fail. Sometimes the child will experience pain or fear in the process.

Parents who themselves have restricted ego-development, will be limited in long-term, or even medium term, conceptualization of developmental goals. For example, it may seem advantageous to allow the child to view the latenight horror film on television, to laugh at minor delinquencies or to materially be most generous. Similarly, if parents are economically or culturally deprived, this may severely limit long-term aspirations and goals.

A sequential stage mis-match can then lead to an adult who may feel resigned to non-accomplishment or who might feel

excessive guilt. The latter may be turned into harsh criticism of others, an over-powering self-righteousness which is the result of a severe super-ego.

The classical example of a school-phobic is the result of a lack of resolution of this stage-crisis.

.... if the child is to successfully resolve the Oedipal conflict, he must begin to independently move away from the parental figures. He must begin to employ his previously developed self-control over his muscles. take his own steps into the world, and thereby break his Oedipal ties

Lerner (1976)

The fourth stage : industry v. inferiority

During what Freudians call the latency period, Erikson sees a preoccupation with the acquisition of skills needed for future requirements of society. A satisfactory resolution of this period will lead to a 'favourable ratio' of industry over inferiority.

The child's life during this stage is taken up with the acquisition of skills and knowledge, in our culture, school in particular. The capacity to learn and be industrious has to be developed, particularly as much of modern culture appears rather pointless to the child.

Erikson makes the important point that not only is the child expected to develop these skills, he also needs them. Such a need is frustrated if the child feels unable to learn and as learning comes from peers as well as elected educators, the child may experience failure, by comparison. All children must experience areas of competence. The opportunity to experience failure is readily present.

Indeed Erikson (1968) makes the important point that expansive Western education frequently fails to generate a

strong feeling of competence in one particular area for the child.

It is because Freud thought the libido was submerged during this period, he called it the latency period, but Erikson regards it as a most important and determinant stage.

what to do and how to do it, he will develop a sense of industry. The child will feel that he knows what to do to be a capably functioning adult member of society

Lerner (1976).

As well as the acquisition of practical skills and academic learning, the child must learn further social skills though these are often learnt in relation to what is taught. In the classroom, the teacher provides a model of what adults are or might be like. In the classroom and school practical sessions, peers provide a model of what is possible - for good or otherwise.

Play is also a vehicle for learning social and motor skills.

the world shared with others. At first these others are treated as things; they are inspected, run into, or forced to "be horsie". Such learning is necessary in order to discover what potential play content, can be admitted only to fantasy or only to play by and with oneself; what content can be successfully represented only in the world of toys and small things; and what content can be shared with others and even forced upon them. It is not restricted to the technical mastery of toys and things, but also includes an infantile way of mastering social experience by experimenting, planning and sharing

Erikson (1968).

Thus, a child should accomplish this stage with the feeling there are roles he can fulfil in the wider society.

To have the beginnings of an adult self-concept which includes the belief that one can cope and make a useful work-contribution is also the beginnings of self-actualization.

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The fifth stage : identity v. role confusion

At the end of childhood comes the beginning of youth and the onset of puberty. This stage is crucial to the development of a satisfactory adult self-concept, for the task now is to relate together, in a meaningful way, a number of factors, viz. how others see one; how one sees oneself; what skills and abilities one possesses; and the role opportunities in society and their appropriateness to oneself. The encompassing need is to link together past, present and future.

Erikson believes that doubts over occupational role or sexual identity are the big problems and can precipitate delinquency or psychosis.

Though much of Western adolescent culture has become stereo-typed (largely through commercialisation and standard-ised emphasis by the mass-media) the swings of mood, morality, dress, role aspiration shown by adolescents sets up stage relevant crises. These crises are then satisfactorily resolved, or otherwise. Thus the adolescent is searching for an enduring role or identity suffers from identity - diffusion, but this can also be a defence against excessive demands. For instance, as a 'good' member of an adolescent gang or group, many aspects of his own individuality will have to be surrended to the group identity. From another aspect, the group identity may be alienated from work or heterosexual sex.

Erikson sees the adolescent leaving the gang when his own identity is more completely formed. This is not to say, however, the individual is without some sense of identity;

.... in the social jungle of human existance there is no feeling of being alive without a sense of identity

Erikson (1968).

Whether the identity the adolescents have is satisfactory to themselves is also a matter of constant internal debate. Poor resolution of this stage-crisis can result in an adult with a poor or inconsistent self-image. However, this may be bolstered by identification with a cause, group, hero, clique, 'uniform', etc., a stereotyped role. The norms for many identities are stringent and complete and adolescents have to learn these, as necessary.

Sexual identity is only one component of overall identity, indeed;

entirely, or even primarily, a sexual matter. To a considerable extent adolescent love is an attempt to arrive at a definition of one's identity by projecting one's diffused self-image on another and by seeing it thus reflected and gradually clarified. This is why so much young love is conversation

Erikson (1968).

Satisfactory resolution of this stage will come when the adolescent asks, "who am I"?, and knows the answer.

The remaining three stages are outside of the age range of the subjects in this study, but the stages will receive brief explanation in order to complete the relevance of Erikson's theories. Also, therapeutic education should not be concerned simply with the resolution of childhood conflicts, but prepare the young person for satisfactory adulthood.

The sixth stage : intimacy v. isolation

Intimacy is defined by Erikson as;

.... the capacity to commit oneself to concrete affiliations and partnerships and to develop the

ethical strength to abide by such commitments, even though they may call for significant sacrifices and compromises (p. 263, 1963)

Isolation comes from the unsatisfactory resolution of conflicts specific to this stage.

Erikson adds that isolation need not be solitary;

.... there are partnerships which amount to an isolation a deux, protecting both partners from the necessity to face the next critical development - that of generativity (ibid.)

The seventh stage : generativity v. stagnation

Erikson calls this the central stage of adulthood.

Although generativity is primarily the concern to establish and guide one's own offspring, it is often generalised into a need to be concerned with the next generation as such, and even more widely into the needs for productivity and creativity which are satisfied in the relationship with one's productive tasks as well as with one's progeny.

When the enrichment of the individual, due to the satisfaction of this need fails altogether;

....then regression to an obsessive need for pseudointimacy takes place, often with a pervading sense of
stagnation and personal impoverishment. Individuals,
then, often begin to indulge themselves as if they were
their own - or one another's - one and only child; and
where conditions favour it, early invalidism, physical
or psychological, becomes the vehicle of self-concern

Erikson (1963).

The eighth stage : ego integrity v. despair

The ego-qualities of this stage include a continuing sense that life is worthwhile and an acceptance of what one has done, has, and is.

.... Only in him who in some way has taken care of things and people and has adapted himself to the triumphs

and disappointments adherent to being, the originator of others or the generator of products and ideas only in him may gradually ripen the fruit of these seven stages. I know no better word for it than ego-integrity Rrikson (1963).

The failure to satisfy the need for ego-integrity leaves the individual in a state of despair, disgust and fear of death. The predominant feeling of despair is that one's life-axle did not lead to much and that there will not be a second chance. This despair, however, may not break surface but be represented by a thousand little disgusts.

Erikson is finally concerned with bringing the life-cycle a full circle by comparing adult integrity and infantile trust. He sums this up epigrammatically, 'healthy children will not fear life if their elders have integrity enough not to fear death' (ibid).

2:4 Piaget's Developmental Theory of Cognition

Although Piaget's contributions to developmental psychology have occupied dozens of volumes, only one is directly concerned with the phenomena of ego development, 'The Moral Judgement of the Child' (1932).

Whereas in Sullivan's work, ego growth is paralleled to adjustment and Erikson's with psycho-social development, in Piaget's exposition, ego growth is confounded with cognitive development, which has been his main interest. His growth of moral judgement as an aspect of ego development is intertwined with his theories of cognition and it is clearer to define the two separately.

Piaget sees moral judgement in terms of a polarity between cognitive simplicity and cognitive complexity.

Anomy, the stage of maximum cognitive simplicity has no real place in terms of moral judgements, as these are simply not made. However, Piaget has referred to the ego-centric stage as the second one (Piaget, 1932, p. 26) in obvious reference to his sensori-motor stage which is said to be the:

... first stage of a purely motor and individual character ..., in which each child acts at the dictation of his desires and motor habits ... (ibid, p. 16).

Thus the child is dictated by almost pure id discharges or unregulated libidinal drives. An unformed ego and the absence of super-ego control mitigates against resistance to immediate wishes for gratification. Such is the cognitive simplicity that the object grasped by the infant will dictate the nature of play. This stage corresponds with Loevinger's 'Presocial' stage as shown on the next page:-

PIAGET'S DEVELOPMENTAL SEQUENCES OF MORAL JUDGMENT

Loevinger's		Consciousness	Type of	Conception of
ego level	Practice of rules	of rules	morality	punishment
Presocial	Motor schemes	No conception of obligation		Immanent in things
Impulsive	Egocen- tric rules Imitat- ion of seniors Noncompet itive			Arbitrary revenge
Self-Protec- tive		Rules sacred, unchangeable given by adults		Expiatory
Conformist	Coopera- tive rules Interest in win- ning			
Conscien- tious- Conform- ist		Rules change- able by mutual agreement, founded on mutual respect	Autonomy	Restoring recipro-
Conscien- tious	Codifi- cation of rules	Interest in rules per se		

adapted from Loevinger (1976)

The stage of anomy is particularly important to those working with delinquents and the maladjusted but unfortunately:

... first is anomy, absence of rule, a stage in which Piaget has no interest at all ... Bull (1969)

The second stage is called egocentric by Piaget:

the child receives from outside the example of codified rules, that is to say, some time between the ages of two and five. But though the child imitates this example, he continues to play either by himself without bothering to find play-fellows, or with others, but without trying to win, and therefore without attempting to unify the different ways of playing. In other words, children of this stage, even when they are playing together, play each one "on his own" (everyone can win at once) and without regard for any codification of rules. This dual character, combining imitation of others with a purely individual use of the examples received, we have designated by the term Egocentrism ...

Piaget (1932)

For those who have worked with the deviant child, much of the above will be a reflection of the egocentrism displayed by such children. Indeed children fixated at such levels will be insulated from therapeutic responses by such powerful and peer reinforced egocentrism. Such comment also upholds a basic tenet of this study, how deviants may be described accurately in stage-sequential terms, and yet rarely are. Psychopathological labels obscure developmental routes.

Piaget states a third stage, that appears between the ages of seven and eight years, which he calls the stage of 'incipient cooperation'. During this stage the child starts to adopt some rules though these are not always specific to situational needs or other people. Neither are the rules global or generalised. Peer contact during playing will raise the need for some rules and order.

At around this age the child enters the stage of concrete operations and begins to be capable of operational thinking, an event which normally hastens the end of egocentrism.

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His thinking now begins to be free from perceptual dominance. in the sphere of interpersonal relations he can recognise that other points of view exist and he can regulate his actions in the light of this recognition.

In Piaget's words : the child

... no longer confuses his own point of view with that of others. He is able both to dissociate his point of view from others and to co-ordinate these different points of view ... True discussions are now possible in that the child shows comprehension with respect to the other's point of view and a search for justification and proof with respect to his own statements ...

Piaget (1967)

So far, growth has encompassed the stage (or state) of heteronomy. Rules and laws are sacred and fixed for most occasions, if they have been given by adults or older children. It is the letter rather than the spirit of the law that must be observed.

The second major stage is one of quality. It is permeated by the spirit of equalitarianism. Justice should be reciprocal. This stage is said to develop out of a growing mutual respect for others and this respect allows particular roles to be changed, that is, by mutual agreement.

A number of significant points are worthy of mention when relating this to the treatment and development of the deviant child.

Previous research (Smith, 1975) has shown the majority of maladjusted and delinquent children to be clustered at Loevinger's early levels of ego development, that is, at the 'impulsive' or 'self-protective' levels. This compares with Piaget's 'anomy' stage and the beginnings of heteronomy. Thus, for many of these children, mutual respect and agreement remains a developmental goal. Consistent (or perhaps

inconsistent) with this is that the achievement of desirable levels does not imply psychological adjustment or happiness with self. Children who reach and maintain the stage of heteronomy will need consistency of adjustment to maintain mutual respect and agreement. Any inconsistency will imply that the child has not reached the stage proper.

Central to all this, the treatment workers have to maintain mutual respect and agreement despite the stress imposed by the inconsistencies and generally low levels of ego development (including moral development) of the deviant children in their care. The reciprocal stage being the minimum level of worker effectiveness, though the wider implications of the therapeutic task demand higher levels of moral development.

This stage sees a change from the earlier blind dictates of externally imposed rules to socionomous ones. What is fair for society is worthy of respect, even though society is viewed in terms of self-feelings. Thus the social experience of cooperation exists in moral judgements based on equality, with a beginnings towards rationality in terms of weighing the pro's and con's of a situation before taking decisive action. Now, instead of saying "do it because I say so", a more sophisticated approach is necessary, giving weighted reasons for compliance.

Rules, indeed even laws, are seen as regulating society properly to maintain its continued functioning. Higher tenets of human experience and its laws, cannot be accommodated until abstract levels of thought are possible, enabling multiple consideration of any one topic, for this, capacity for rationalism and free thinking is necessary. This alone, illustrates the effects of intelligence and the emotions

operating on or within the personality.

The consistently proper treatment of the more deviant child, demands such levels of reasoning from the treatment worker. To confound this further, compound affects on group dynamics demand the highest levels of such reasoning.

Just as development from the heteronomous to the autonomy goes through a series of many levels, so autonomy is represented by several levels of ego development with Piaget's developmental sequences of moral judgement (above) does not show Loevinger's two further stages, autonomous and integrated, probably because of the upper age limits of Piaget's research subjects. However, the ability of those few at the higher levels of ego development to not only accommodate life's inexactitudes but to differentiate in moral reasoning leads us to the question of cognitive facilitation.

Piaget says:-

... There exist in the child certain attitudes and beliefs which intellectual development will more and more tend to eliminate; there are others which will acquire more and more importance ... The two sets of phenomena are to be met both in the child and in the adult, but one set predominates in the one, the other in the other ...

In Piaget's view there are two main reasons that regulate such interplay. The first is the transformation from egocentric thinking through to operational thinking in the child's cognitive development; the second is the change in his social relationships. The two factors interacting closely with each other. Thus, Piaget's theories usefully combine developmental, cognitive and social aspects.

Social adjustment or adaption is divided by Piaget into two complementary component processes; assimilation and accommodation.

Assimilation involves fitting fresh external subject matter into an existing cognitive structure.

Accommodation involves the altering of already existing cognitive structures in the subject to match new, external stimulus objects. Rather than changing the object to fit the subject, accommodation involves changing the subject to fit the object.

To give examples of assimilation and accommodation and later their interplay: a baby that starts to suck and feed on his mother's nipple gains an internal cognitive structure (or 'picture') from that external object. If, as the baby grows, the mother offers supplementary feed from a bottle with a teat, then the baby may assimilate the new external object because it fits in with his existing structure.

If, however, the bottle teat has a shape or size of delivery hole too inconsistent with the mother's nipple the baby is so used to, the assimilation is unlikely to be possible. The food or drink needs of the baby may be sufficient to stimulate 'accommodation'. That is, the external object achieves cognitive accommodation through an alteration of its already existing cognitive structure.

At weaning time, assimilation between teat and spoon will be weak, and the need for accommodation strong. The strength of the baby's basic needs and the strength of the emotional bonding will affect the need for graduated assimilation i.e. through a feeder bottle with a broad spout.

The unloved urchin may need to accommodate more often than the over-loved child who will be 'protected' from the need to accommodate.

In practice the complexities of environmental interplay cause assimilation and accommodation to be complementary.

... When an organism acts on its environment it incorporates the external stimulus world into its already existing structure (assimilation); alternatively, when the environment acts on the organism, the organism is altered in order to adjust to the external stimulus world (accommodation) ... Lerner (1976)

Piaget proposes:-

... cognitive adaption, like its biological counterpart, consists of an equilibrium between assimilation and accommodation. As has been shown, there is no assimilation without accommodation. But we must strongly emphasize the fact that the accommodation does not exist without simultaneous assimilation either (1970, p. 708)

Piaget proposes that this general biologically based adaptive tendency of equilibrium is the stimulus for all cognitive development.

New environmental factors will create the need for continued assimilation, accommodation and equilibrium throughout childhood and in adulthood too, to a lesser extent. This reproductive assimilation occurs at each developmental stage and indeed, Piaget says this accounts for the person's continual cognitive development.

These stages are as follows:

PIAGET'S STAGES OF COGNITIVE DEVELOPMENT

		• • • • • • • • • • • • • • • • • • • •	
0+200	Approximate	Major cognitive	Major cognitive limitations
000	age range	achievements	
Sensorimotor	Birth - two	Schema of object permanency	Egocentrism: lack of ability to differentiate between self and external stimulus world
Preoperational	Two - six	Systems of representation Symbolic functioning (e.g., language, symbolic play, delayed imitation)	Lack of conservation ability Egocentrism: lack of ability to differentiate between symbol and object
Concrete operational	Six - twelve	Ability to show experience-independent thought (reversible, internalized actions) Conservation ability	Egocentrism: lack of ability to differentiate between thoughts about reality and actual experience of reality
Formal	Twelve on	Ability to think hypothetically, counterfactually and propositionally	Egocentrism: imaginary audience, personal fable

Although Piaget is a stage theorist, he doesn't view the person as making abrupt model transitions from one stage of development to the next. Aspects of earlier or future stages may be applied according to specific circumstances and the general emotional state of the person. That is, a person may operate over several stages but with a generalised, clustering towards his 'main' level. This is also the case with other theorists, Kohlberg and Loevinger in particular. Such stage-mixture may be developmentally advantageous because of associated cognitive dis-equilibrium.

Because the beginnings of a child's world are primitively simplistic, much energy is expended by the physically and mentally healthy child in actually seeking the stimuli for cognitive expansion. To take an opposite extreme, when an elderly person's mental faculties deteriorate so there is the wish for 'sameness'.

The maladjusted and delinquent child will often have failed to come to terms with his environment, so cognitive simplicity in what has to be accommodated or assimilated is the norm. This can be where the treatment or punishments mooted by secure middle-class liberals are inconsistent with the world, as seen by deviants.

2:5 KOHLBERG'S STUDIES OF MORAL DEVELOPMENT

Lawrence Kohlberg's cognitive-developmental approach to moral development is the culmination of over twenty years of research. In 1957 he initiated a longitudinal study that used the presentation of moral dilemmas to trace the development of moral reasoning from childhood to adulthood. One of Kohlberg's lasting contributions to developmental psychology has been this data, which led to his theory that individuals acquire and refine their moral judgement through a series of invariant stages. Studies in disparate cultures, with children and adults of widely divergent socio-economic background, all appear to support this development.

Kohlberg bases his work partly on Piaget's, but has greatly elaborated and extended the latter's views in a number of ways. He freely admits that:

... both the content and method of the interviews was inspired by the work of Piaget ...

(Kohlberg, 1966 (b), p. 190)

Though he does say elsewhere (Kohlberg, I97I, p. 24) that in the last two generations, there have been no exciting or classical treatments to compare with those of Dewey (I909) and Durkheim*(I925), in which a moral philosophy and a social psychology form a single unified whole. Kohlberg claims to join these ranks, though, "somewhat embarrassed at my own presumption" (ibid).

Kohlberg has studied the moral reasoning of children over

^{*}footnote This is not to suggest that Kohlberg admits

Durkheim to the ranks of "cognitive-developmental" theorists,

instead, he is equated with Freud in terms of "irrationalemotive" theory (Kohlberg, 1971, p. 43).

a wide age range and from different cultures. He developed a series of hypothetical moral dilemmas and then studied how a subject attempted a solution to the presented dilemma.

Exhaustive analysis of these responses, yielded at least thirty different aspects of moral thought (Wright, 1971, p. 168), which in turn, corresponded to six general stages of moral development.

Kohlberg postulates three levels, each divided into two stages, thus we have the following scheme of six developmental stages. (see Kohlberg, I966 (b), I966 (a), and also Kohlberg and Kramer, I969).

- Level I. Premoral At this level, the child is responsive to cultural rules and evaluative labels, but views them in terms of pleasant or unpleasant consequences of action, or in terms of the physical power of those who impose the rules.
- Stage I. Obedience and punishment orientation. Egocentric deference to superior power or prestige, or a trouble avoiding set. Objective responsibility.
- Stage 2. Naively egoistic orientation. Right action is that instrumentally satisfying to the self's need and occasionally other's. Awareness of relativism of value to each actor's needs and perspective. Naive egalitarianism and orientation to exchange and reciprocity.
- Level 2. Conventional role conformity At this level the child is orientated towards actively maintaining the expectations of his family, peers etc., as a value in its own right, and with justifying these expectations as such.
- Stage 3. Good-boy orientation. Orientation to approval and to pleasing and helping others. Conformity to stereotypical

images of majority or natural role behaviour and judgement of intentions.

Stage 4. Authority and social-order-maintaining orientation.

Orientation to "doing one's duty" and to showing respect for authority and maintaining the given social order for its own sake. Regard for earned expectations of others.

Level 3. Self-accepted moral principles The child is concerned with defining moral values and principles away from the supporting authority.

Stage 5. Contractual legalistic orientation. Recognition of an arbitary element or starting point in rules or expectations for the sake of agreement. Duty defined in terms of contract, general avoidance of violation of the will or rights of others, and majority will and welfare.

Stage 6. Conscience or principle orientation. Orientation, not only to actually ordained social rules but to principles of choice, involving appeal to logical universality and consistency. Orientation to conscience as a directing agent and to mutual respect and trust.

Kohlberg makes the important distinction in his stage one, of recognising that the child does not have an initial respect for rules, as Piaget's scheme suggests, but that the child will only respect rules, in as much as he wishes to avoid punishment. The child cannot, as yet, distinguish hedonism from respect for authority. Further cognitive development is necessary for definite hedonism or a rejection of authority.

Some degree of reprocity and relativism is shown in stage two and stage three judgements, show further reciprocity, as greater reference is made to helping others. Stage four judgements are more concerned with respect due to authoritarian sources. Mutual obligations, connected with rights or laws

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are frequent responses in stage five subjects, whereas in stage six, working decisions are attempted in situations of conflicting rights. This compares with Piaget's notion of "equity".

Although Kohlberg treats his six stages of moral judgement or orientation as sequential, he does not imply that higher stages entirely replace lower stages. Different moral concepts will draw on differential levels of moral cognition, these being very dependant also, on the situational context at the time. An individual will have a generalised central tendency towards a position on the developmental continuum and only a limited range of stages will be used.

Regression is also recognised to occur, particularly in adolescence, and is well documented by Kohlberg, (Kohlberg and Kramer, 1969, Kohlberg, 1963).

At the age of ten years, the types of judgement used are in descending order of frequency of use; that is, stage one responses are most frequent, followed by stage two, etc..

By the age of thirteen years, the frequency of stage one and stage two responses has declined very considerably, while the frequency of stage six responses has increased a little.

Thus at age thirteen, we have the following sequence of frequency of use of the stages:- 4 - 3 - - - 5 - 2 - I - 6.

By the age of sixteen years, stage four and stage five responses have further increased with stage six further used.

Kohlberg and Kramer (1969) do report a slight continuance in development between the ages of sixteen and twenty-five years, though stage six responses remain rare.

There appear to be certain age periods during which transitions from one level of moral reasoning to the next one

are most easily made by children. The first is the preadolescent stage when the transition from preconventional to
conventional morality generally occurs. Kohmerker (I973)
states that children who do not utilise conventional moral
reasoning by age thirteen are unlikely to attain principles
reasoning or principled behaviour in adulthood. Certainly
the writer has found this with delinquent and also thoughtdisordered children and this emphasises the urgency of
effective treatment before this age. This is not to say that
ego-development cannot take place or an increase in egocapacity or ego-strength. Should the latter occur,
fixation within (sometimes to extremes) earlier stages of
moral development will occur with much (cognitive)
rationalisation for reasoning or actions viz, the reason for
industrial action, being clean, obeying God, etc..

Retrogression occured in some college students, (Kohlberg and Kramer, 1969) mainly from stages four and five, to stage two (hedonistic relativism), but return to the higher stages was made by the age of twenty-five years.

Kohlberg and Kramer regard the retrogression as "functional" rather than "structural", and occasioned by protest against authoritarian-based morality and against a world of "immoral people" who themselves do not live by the precepts they teach.

The child or adult moves from one stage of moral development to another because the strategies and rationale that have served him as behavioural guides at one stage become insufficient in the light of new experiences and new problems. When individuals lead a stable life there is relatively little incentive for them to restructure their thinking, and so many individuals remain at the moral development stage they achieve in late adolescence.

The inability of such adults to seek or identify the conditions demanding fresh coping strategies is in itself a function of several components of a person's personality structure. To take extremes, primitive levels of moral or ego development will entail simplistic comprehension of situations and simple solutions, e.g. a thump on the nose. Persons functioning at higher levels of development may well be "self-actualising", as described by Maslow and by Jung. Then, challenges will be sought and appropriate coping methods developed and learnt, and so, a range of coping methods will propagate further and higher challenges.

Maladjusted or delinquent children have frequently failed to learn appropriate coping responses, therefore treatment must provide matching models of demand consistent with the child's developmental abilities. Whilst this is blatantly obvious in terms of remedial education, it is rarely obvious in remedial socialisation and acceleration of emotional growth. The care-worker or instructor who is in the middle range of moral or ego development themselves, frequently expect the child to think as they do. This failure is then talked out with the child, again at middle levels. Subsequent failure by the child, who is at primitive stages, leads to maladaptive responses from the worker.

Sequential treatment where children of compatible levels of development are grouped makes appropriate responses from the workers more obvious. For instance, in a classroom where dull children are mixed with bright children, then educational approaches can rarely be satisfactory to them all. In a football team of mixed abilities, then only rarely are the players or trainers interactions compatible with consistency of play or approaches to the game.

Because of the variety of ways in which the environment impinges on the individual, growth in adulthood is possible however, and has been substantiated by Kohlberg in his own interviews and with his usual scoring methods, with subjects of the longitudinal study who have returned from the war or lived through other major crises. Regression in the behaviour that is typical at certain measured levels of moral development has been recorded in some instances. However, it may well be that some people's capacity to cope in the face of social and physical adversity may have caused the deterioration in their behaviour or in what they say, rather than that their actual capacity to make moral judgements has regressed. This is particularly true in cases of reactive maladjustment or delinquency due to environmental moves or pressures.

Kohlberg elicited information about his subjects' moral judgement by posing questions involving moral dilemmas. A typical question raises the issue of stealing a drug to save a dying woman. There is only one dose of medicine available, and the inventor of the drug asks an exhorbitant price for it. The anguished husband is unsuccessful in getting the druggist to lower his price, in getting him to accept an IOU, or in raising the price for the fee from other sources. What should the husband do?

A dilemma that may occur more frequently in modern man's experience deals with a captain and his company of soldiers. They have just crossed a bridge and the enemy is mostly on the other side. Someone must demolish the bridge, but that someone will probably be killed. The captain is the man best able to lead his company's retreat. He asks for volunteers, but no-one steps forward. A host of information that may or

may not influence the captain's decision is provided, but the situation remains a dilemma that requires moral judgement about the validity of alternatives.

One might think that subjects would respond most enthusiastically to realistic dilemmas; perhaps to dilemmas closest to real-life situations that they have experiences. The experience of Kohlberg and his colleagues has proved this assumption to be unfounded. As a matter of fact, even when a genuine moral dilemma is currently in the news, discussion groups have tended to respond with greater involvement - and with greater contrast of opinion - to the artificially developed dilemmas.

Deviant children will respond more openly through secondary dilemmas as real dilemmas may only provoke maladjusted coping responses. An extreme example of this is in the clinical use of doll play or art to elicit deeper feelings.

When the responses of subjects to the moral dilemmas are analised, how shall these responses be scored and rated according to levels of moral development? At the beginning, Kohlberg and his associates tended to score the responses in terms of their content. (Should the husband steal the drug for his dying wife? Should the husband not steal the drug for his dying wife?) They now feel that it is much more important to analyze the thought pattern of subjects; to look at the internal rather than the external frame of reference that shapes the responses. A subject who says that the husband should steal the drug because he needs to have a wife who takes care of him, is reasoning at a lower stage level than the husband who would let his wife die because stealing is against the law. Another subject who would want the husband to steal the drug because human life is more important than laws, regardless of whether or not the husband loves his wife,

would be showing principled judgement. So might another subject who would also value life above property, but who might argue that the husband is not in a position to decide whether his wife is the only - or most needy - recipient of the single dose of the drug.

Learning to score moral development responses is an intricate process that is not easily mastered. In recent years Kohlberg has organized annual workshops where the introduction to the learning of consistent scoring techniques takes up a goodly portion of the week's meetings. An extensive literature to the scoring system is available in mimeographed form from Professor Kohlberg's office, but is by no means a substitute for the scoring seminars.

Kohlberg's mimeographed material explains the method extremely well, but in a previous study (Smith, 1975) the author decided the scoring issues are such that objectivity would be lost in considering so many criteria. In the event, Bull's Test of Moral Judgement (1969) was used, the simple criteria lending objectivity to the testing.

That is not to deny, however, that a more complete training, at Harvard, would further objectivity in scoring according to Kohlberg's criteria.

There are three related biases that tend to lead to scoring errors. The first is that the scorer thinks of the stage as represented by the content of the responses, rather than by its form and structure. The scorer must analyze why a subject thinks as he does, not what action he advocates. The subject's motives are only one of the issues, not the primary one. At each stage, motives are cognitively structured. The subject does not develop new motives, but

new ways of ordering alternatives. A third pitfall is to think of stages as types of personalities rather than ways of reasoning.

Individuals new to scoring tend to score responses at higher levels than the Harvard team that leads the seminars. One reason for this seems to be the novice's tendency to read into a response more than it states. To give a very oversimplified example: If a subject says it would not be 'fair' to let the wife die for want of the drug, the interviewer may assume that the subject believes that all life has ultimate and equal value. If questioned further, the subject might have said that it would serve the druggist right to be robbed and even killed, because he was not a nice person.

A more basic reason for confusion about the scoring of stages is due to the fact that the kinds of judgements that are used to identify the various stages are present to some degree at every level of development. The stage six individual sees justice at the highest social good. On the other hand, concern with justice is an aspect of every level of reasoning. At stage one, justice is interpreted in terms of the power to distribute benefits or injuries. At stage two, where there is great concern with property rights, justice is interpreted in terms of the distribution of goods and services. At stage three, when affection and trust are of paramount importance, justice is interpreted in terms of mutual expectations between individuals. The stage four individual reasons in terms of society's expectations, and so often confuses rules and justice. It is only at stage five that the legal aspect of justice is first separated from authority.

While concern with justice and fairness, affection and the

need for rules may be within a child's comprehension at an early age, it is Kohlberg's contention that such concerns have a 'point of entry' into the stages of moral reasoning. Thus the pre-schooler may spend much time dealing with sharing and fairness notions, but it is only at stage two that the child first thinks of property rights within an economic system. The young child is extremely responsive to affectional ties, but it is only at stage three that he thinks of affection beyond one-to-one relationships.

At stage three the child has a high need for affiliation and thinks of how to behave in a moral dilemma in terms of the trust that others have in him. In imagining how others might respond to his needs, he now thinks not only of what would be 'fair' but of what a 'nice' person would want to do. The child who reasons at a stage three level is appealing to adults. Teachers who compare descriptions of young people's reasoning at stages three and four sometimes wonder whether stage four could not be skipped; whether children could not move around the 'law and order' stage, and skip directly to principled behaviour.

Compared to principled levels of moral reasoning, stage four thinking may look petty and limited. It is important to remember however, that at stage four morality is seen in society's perspective for the first time. This is an advance over stage three thinking which reasons just in relation to individuals. This is true despite the fact that principled persons will place the rights of individuals above the rules of society on some occasions. Not only is stage four thinking 'respectable' and well-suited to the needs of many everyday decisions, in a genuinely just society it might be unnecessary for individuals to grow beyond it.

The question has been raised about whether or not subjects can tailor their answers so that they will rate 'higher' on the moral judgement stage sequence. Interviewers at the Harvard Graduate School feel that the number of dilemmas they present, and the variety of responses they elicit when they ask subjects for opinions if the circumstances in the dilemmas are slightly altered, make this kind of 'pretence' unlikely. They also point out that no one response determines a stage placement, but that fifty per cent or more of the responses tend to cluster within one stage. This clustering is common to scored responses on Loevinger's tests of ego development.

Treatment or moral education based on stage theory frequently use Kohlberg type moral dilemmas to promote 'cognitive dissonance' as a major tool in helping individuals to re-clarify their thinking and make the transition from one stage to the next. Many workers have produced programmes aimed at enhancement of moral development and these will be briefly reviewed in a later section of this study, along with aspects of mileu therapy projecting the same purpose.

In order to clarify the differentiation between Kohlberg's stages, 'Six stages in conceptions of the moral worth of human life' and 'Motives for engaging in moral action' are reproduced from Kohlberg (1971).

Six stages in conceptions of the moral worth of human life

- Stage I No differentiation between moral values of life and its physical or social-status value.
- Tommy, age IO (III Why should the druggist give the drug to the dying woman when he husband couldn't pay for it?): "If someone important is in a plane and is allergic to heights and the stewardess won't give him medicine because she's only got enough for one and she's got a sick one, a friend, in back, they'd probably put the stewardess in a lady's jail because she didn't help the important one."
- (Is it better to save the life of one important person or a lot of unimportant people?): "All the people that aren't important because one man just has one house, maybe a lot

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- of furniture, but a whole bunch of people have an awful lot of furniture and some of these poor people might have a lot of money and it doesn't look it."
- Stage 2 The value of a human life is seen as instrumental to the satisfaction of the needs of its possessor or of other persons. Decisopn to save life is relative to, or to be made by, its possessor. (Differentiation of physical and interest value of life, differentiation of its value to self and to other.)
- Tommy, age I3 (IV Should the doctor "mercy kill" a fatally ill woman requesting death because of her pain?): "Maybe it would be good to put her out of her pain, she's be better off that way. But the husband wouldn't want it, it's not like an animal. If a pet dies you can get along without it itisn't some-thing you really need. Well, you can get a new wife, but it's not really the same."
- Jim, age I3 (same question): "If she requests it, it's really up to her. She is in such terrible pain, just the same as people are always putting animals out of their pain".
- Stage 3 The value of a human life is based on the empathy and affection of family members and others towards its possessor. (The value of human life, as based on social sharing, community, and love, is differentiated from the instrumental and hedonistic value of life applicable also to animals.)
- Tommy, age I6 (same question): "It might be best for her, but her husband it's a human life not like an animal, it just doesn't have the same relationship that a human being does to a family. You can become attached to a dog, but nothing like a human you know."
- Stage 4 Life is conceived of as sacred in terms of its place in a categorical moral or religious order of rights and duties. (The value of human life, as a categorical member of a moral order, is differentiated from its value to specific other people in the family, etc. Value of life is still partly dependent upon serving the group, the state, God, however.)
- Jim, age I6 (same question): "I don't know. In one way, it's murder, it's not a right or privilege of man to decide who shall live and should die. God put life into everybody on earth and you're taking away something from that person that came directly from God, and you're destroying something that is very sacred, it's in a way part of God and it's almost destroying a part of God when you kill a person. There's something of God in everyone."
- Stage 5 Life is valued both in terms of its relation to community welfare and in terms of being a universal human right. (Obligation to respect the basic right to life is differentiated from generalized respect for the sociomoral order. The general value of the independent human life is a primary autonomous value not dependent upon other values.)
- Jim, age 20 (same question): "Given the ethics of the doctor who has taken on responsibility to save human life from that point of view he probably shouldn't but there is another side, there are more and more people in the medical profession who are thinking it is a hardship on everyone, the person, the

family, when you know they are going to die. When a person is kept alive by an artificial lung or kidney it's more like being a vegetable than being a human who is alive. If it's her own choice I think there are certain rights and privileges that go along with being a human being. I am a human being and have certain desires for life and I think everybody else does too. You have a world of which you are the centre, and everybody else does too and in that sense we're all equal."

- Stage 6 Belief in the sacredness of human life as representing a universal human value of respect for the individual. (The moral value of a human being, as an object of moral principle, is differentiated from a formal recognition of his rights.)
- Jim, age 24 (III Should the husband steal the drug to save his wife? How about for someone he just knows?): "Yes. A human life takes precedence over any other moral or legal value, whoever it is. A human life has inherent value whether or not it is valued by a particular individual."
- (Why is that?): "The inherent worth of the individual human being is the central value in a set of values where the principles of justice and love are normative for all human relationships."

Motives for engaging in moral action

- Stage I Action is motivated by avoidance of punishment and "conscience" is irrational fear of punishment.
- Pro If you let your wife die, you will get in trouble. You'll be blamed for not spending the money to save her and there'll be an investigation of you and the druggist for your wife's death.
- Con You shouldn't steal the drug because you'll be caught and sent to jail if you do. If you do get away, your conscience would bother you thinking how the police would catch up with you at any minute.
- Stage 2 Action motivated by desire for reward or benefit.
 Possible guilt reactions are ignored and punishment viewed
 in a pragmatic manner. (Differentiates own fear, pleasure,
 or pain from punishment-consequences.)
- Pro If you do happen to get caught you could give the drug back and you wouldn't get much of a sentence. It wouldn't bother you much to serve a little jail term, if you have your wife when you get out.
- Con He may not get much of a jail term if he steals the drug, but his wife will probably die before he gets out so it won't do him much good. If his wife dies, he shouldn't blame himself, it wasn't his fault she has cancer.
- Stage 3 Action motivated by anticipation of disapproval of others, actual or imagined-hypothetical (e.g., guilt). (Differentiation of disapproval from punishment, fear, and pain.)
- Pro No one will think you're bad if you steal the drug but your family will think you're an inhuman husband if you don't. If you let your wife die, you'll never be able to look anybody in the face again.

- Con It isn't just the druggist who will think you're a criminal, everyone elso will too. After you steal it, you'll feel bad thinking how you've brought dishonor on your family and yourself; you won't be able to face anyone again.
- Stage 4 Action motivated by anticipation of dishonor, i.e., institutionalized blame for failure of duty, and by guilt over concrete harm done to others. (Differentiates formal dishonor from informal disapproval. Differentiates guilt for bad consequences from disapproval.)
- Pro If you have any sense of honor, you won't let your wife die because you're afraid to do the only thing that will save her. You'll always feel guilty that you caused her death if you don't do your duty to her.
- Con You're desperate and you may not know you're doing wrong when you steal the drug. But you'll know you did wrong after you're punished and sent to jail. You'll always feel guilty for your dishonesty and law-breaking.
- Stage 5 Concern about maintaining respect of equals and of the community (assuming their respect is based on reason rather than emotions). Concern about own self-respect, i.e., to avoid judging self as irrational, inconsistent, nonpurposive. (Discriminates between institutionalized blame and community disrespect or self-disrespect.)
- Pro You'd lose other people's respect, not gain it, if you don't steal. If you let your wife die, it would be out of fear, not out of reasoning it out. So you'd just lose self-respect and probably the respect of others too.
- Con You would lose your standing and respect in the community and violate the law. You'd lose respect for yourself if you're carried away by emotion and forget the long-range point of view.
- Stage 6 Concern about self-condemnation for violating one's own principles. (Differentiates between community respect and self-respect. Differentiates between self-respect for general achieving rationality and self-respect for maintaining moral principles.)
- Pro If you don't steal the drug and you let your wife die, you'd always condemn yourself for it afterward. You wouldn't be blamed and you would have lived up to the outside rule of the law but you wouldn't have lived up to your own standards of conscience.
- Con If you stole the drug, you wouldn't be blamed by other people but you'd condemn yourself because you wouldn't have lived up to your own conscience and standards of honesty.

2:6 LOEVINGER'S EGO DEVELOPMENT THEORY

'das Ich', literally, the I. Indeed the I, the me, self and ego have been used interchangeably for many decades, depending on the theories and consistencies of particular psychologists and philosophers. However, few would deny the centrality of the ego and neither does anything less than the ego encompass so wide a scope. Loevinger (1976) describes in detail how ego development encompasses moral development, the self and self-image, personality determinants and ego components, such as ego-strength and ego-capacity.

It would not be possible to encompass so much in a simplistic or generalised theory and Loevinger has explained her theories and researches in a most logical and impressive manner.

'Some Milestones of Ego Development' (Loevinger, 1966), which is reproduced overleaf, offers a clear, introductory outline to the scheme of ego development.

Loevinger and Wessler (I970) discuss the details of each developmental stage and the construction of a test of ego development. Loevinger, Wessler and Redmore (I970) have produced a scoring manual, giving thorough examples of responses consistent with various stages of ego-development. Examples for scoring practice and assessment are provided.

Loevinger, in a later volume (1976) explores the relationship of all the well-known ego theories, and also the more obscure ones, to her theory of ego development.

After being attracted by Loevinger's scheme and minor pilot studies, the author (Smith, 1975) applied Loevinger's

methods in the study of maladjusted, delinquent and normal children and gained considerable respect for, and faith in, her theories.

Reproduced overleaf, is an essential description of Loevinger's stages of ego development, further emphasis on specific aspects will be discussed in later sections.

	-			SOME MILESTONGS	
Stage	Codo	Impulse Control Character Development	Interpersonal Style	Conscious Pre- occupations	Cognitive Style
Presocial			Autistic		
	I-1			Self vs.non self	
Symbiotic			Symbiotic		
Inpulsive	I-2	Impulsive, fear of retaliation	Receiving dependent exploitive	Bodily feel- ings, especially sexual and aggressive	Stereotype conceptual confusion
Sclf-pro- tective		Fear of being caught, externalising blame, opportunistic	Wary, manipulative exploitive	Self-protect- ion, wishes, things, advantage control	
Conformist	1-3	Conformity to external rules, shame, guilt for breaking rules	Belonging, helping, superficial niceness	Appearance, social acceptability, banal feelings, behaviour	Conceptual simplicity, stereotypes, cliches
Conscient- ious	1-4	Self-evaluated standards, self- criticism, guilt for consequences, long term goals and ideals	Intensive, responsible, mutual, concern for communication	Differentiated feelings, motives for behaviour, self-respect achievements, traits, expression	Conceptual complexity, idea of patterning
Autonomous	1-5	Add: Coping with conflicting inner needs, toleration	Add:Respect for autonomy	Vividly conveyed feelings, integration of physiological and psychological, psychological causation of behaviour, development role conception, self-fulfill ment, self in social context	Increased conceptual complex patterns, toleration for ambiguity, broad scope, objectivity
Integrated	16	Add: Reconciling inner conflicts, renunciation of unattainable	Add: Cherishing of individuality	Add: Identity	
NOTE - 'Add'	neans	in addition to the	description a	onlying to the pro-	พ่อเร

NOTE - 'Add' means in addition to the description applying to the previous level. Loevinger and Wessler (1970a)

I* - I Pre-social (or autistic) and Symbiotic Stage (* I denotes ego-level)

Freud's exposition on ego development dealt with, almost wholly, this first stage.

Strands of development later quite distinct, are very much one thing at this time. Successful solution of problems in this stage, are necessary for later successful adjustment, although most cognitive developmental theorists, whilst realising it's importance, give it scant attention.

Whilst Loevinger includes this stage for reasons of theoretical completeness, it does not form part of her S.C. test.

I - 2 Impulsive Stage

As the stage-name suggests, this is the stage of impulsive action. Actions determined by the egocentric, dictates of immediate self gratification of desires.

Persons satisfying needs are good and those that don't are bad. Good and bad may be considered synonomous with clean and dirty. Thus, there is cognitive simplicity, as well as cognitive confusion, but, of course, not cognitive complexity.

Impulses are only kept in check by environmental constraints and the immediate result of impulsive action.

Answers to the S.C. test are, at this level, frequently tautological or hinged around one key-word.

Mutuality and reciprocity between people are lacking, indeed people are seen as sources of supply.

Frank dependence is frequently noted in S.C. responses at this stage. Going home or running away, is often presented

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as a solution to the crisis.

Inner barren-mess and sometimes a self-rejection are a precursor to feelings of self-destruction. Aggression, and sexual impulses are common, both, but particularly the former, are seen as abreactive to cognitive confusion.

Emotional feelings are expressed in simple, impulsive and unsocialised language, without differentiation. 'Things' are never their fault.

The stage is essentially vacuous, the occupant feeling vulnerable, somewhat confused, and (because of) having inadequate conception of the complexities of the world.

Self-protective (opportunistic)

Loevinger (ibid) originally called this the opportunistic stage, but now feels opportunistic hedonism to be secondary in prominence. This stage was included to provide the very necessary bridge between the stages of impulsivity and conformity. Peck and Havighurst (1960) used 'expedient type' between the amoral and conforming types.

Expediency is the key to much of this stage-types behavioural responses.

Impulses may be curbed if this is to the immediate benefit of the self.

Blame is recognised but is usually turned immediately outwards to others, situations or places. Even parts of the body may be blamed in a detached or exteriorised manner. For instance, a big mouth might be blamed, without thought or reference to the regulatory mechanisms.

They are much concerned with controlling or being controlled and although the existance of rules is recognised, their own main rule is, don't get caught. The practice of

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manipulation, in order to control or avoid a situation, is a sign of increasing conceptual agility.

Rules are seen as loss of freedom, an obstacle to be circumnavigated. When caught breaking rules, it is an act of fate if reasons cannot be otherwise externalised.

I - 3 Conforming Stage

This stage is normally reached by the child of schoolage, if not before school-age.

The conforming stage has been much written about by sociologists, psychologists and philosophers alike.

Loevinger's conforming stage is consistent with Kohlberg's 'conventional levels' and elements of Bull's stage of socionomy.

Peck and Havighurst have a conforming type.

During this stage, the child identifies first with his parents, then with other adults, and later with his peers.

What is generally approved is right. Simple dichotomies of right or wrong dominate.

People are described in broad dichotomies, often with emphasis on the sex gender. Individual differences are barely perceived and the majority of general topic is stated in absolutist terms.

Social 'Niceness' is paramount, and, as such, the rules of immediate groups are readily learnt in order to achieve social acceptance. Indeed, if such social dexterity is recognised in self or others, it will be perceived in terms of being socially successful or socially aware. Social group cohesiveness can ferment much sentimental idealism, a 'private;' or 'in' language and even an 'in' uniform.

The desirability of social inclusion leads to materialism, a strong concern for appearance and for reputation.

Feelings are sometimes denied, but more characteristic is a vague, evasive or noncommital response. Inner conflict, whilst not recognised by the subject, is shown in the contradictory test responses of some conformists. Denial of differentiated feelings and partial denial of such feelings, by the use of generalities and balanities, such as happy, great, fun, sad, embarrassed, 'you know' and other vacuous cliches, help to ensure social one-ness and no offence.

Unconvential social morality is feared and outside of the social group. For instance, if a 'blue' cliche is much used in the media that feeds the social masses, then social inclusion is helped along by general or sub-group use of the smutty cliche. Cliches are safe.

The norms for this group, are the norms of the masses and form the conventional social morality.

Either a majority or a large minority in almost any social group, consists of people at the conformist stage.

I - 4 Conscientious Level

This stage is characterised by a heightened consciousness of self and inner-feelings and self-other differentiation.

An awareness of multiple causation, absent at the I - 3 stage, enables psychological reasons to be explored.

The concrete acceptance of the conforming stage, is replaced by reflective study of motives, causation and consequences. Moral issues are no longer seen as rules, but as part of the human condition and as such, there is the need for exception to the rules. Ought is clearly distinctive from is.

Long term goals and objectives are considered, particularly as part of a planned pattern of self-improvement. The ideal-self now has higher temperal striving, unlike the ideal-self of the conforming type, which is centred on appearance, possessions and the social self-picture.

The self-image is more rational and, although critical of self, it isn't the harsh, self-rejecting criticism of former stages.

The self and ideal-self are closely related and goals are self-set, not so much through external fears. Realisation of self in terms of self, ideal-self congruence are soon as higher strivings.

Greater knowledge of the self and of self's relation to other's, allows greater emotional commitments to be made to others. Physical love can be contrasted with spiritual love.

Increased interpersonal commitment allows a development, away from the I - 3 level of concern with behaviour, to a search for better expression and communication, about generalities of the human condition, not just its concrete referents.

I - 4 - 5 Transition from conscientious to autonomous

Typical of this stage is the heightened sense of unique individuality, though not as powerfully as the next stage, I - 5.

There is a keen desire for independence towards achievement of life-goals but the increased mutual emotional dependence is seen as antagonistic.

Antagonism as a result of the excessive moralism and excessive sense of responsibility for self and others at the conscientious level.

Inner conflict is no longer a cause for concern, but accepted as part of the human condition.

There the person st the conscientious level often sees polar, incompatible opposites, the I - 4/5 person is more likely to see paradox, a quasi-contradiction in nature rather than a forced choice. Causations are viewed in greater complexity, for instance, psychological and sociological inter-relationship may be seen in terms of dynamic interplay.

A distinction between physical or physiological and psychological will be attempted in the resolution of a conflict.

This higher level of ego-development allows glimpses of relativism to emerge. These glimpses are often a stimulus to good natured humour, not the callous humour of earlier stages, nor the conventional humour of the conforming and conscientious levels, but with a philosophical base.

The humour may reflect a sense of toleration, joy of life, self-fulfillment or the resolution of self conflict.

I - 5 The autonomous stage

Responses at this stage are more greatly elaborated than formerly. A richness of experience shows through, as does spontaneity and communicated sensuality. Humour is existential if not thetoric.

Aspirations be objective, realistic and unprejudiced are revealed in a matrix of possibilities, but, paradoxically, there is a high tolerance for ambiguity in others.

Others are also seen to have important individual rights, even those that are individually threatened, or are part of a minority group, may be apathetically accepting of the

situation. Higher motives may force martyrdom.

Loevinger says one will find no more than one per cent of any social group belonging to this or the highest level, integration.

The highest level postulated by Peck and Havighurst (1960) in the rational-altruistic type, a term that well-describe many of the traits described.

I - 6 Integrated

Few, according to Loevinger, reach the stage of transcending conflict and reconciling polarities.

Transcending conflict and yet without projection away from self.

Self-awareness is such that a richness of differentiated inner perceptions can be conveyed in often vivid, touching, even poetic vehicles of expression. (A rational form of schizophenia:

Cognitive complexity is such that many higher stage responses are combined.

It must not be imagined that these stages form an inevitable continuum. Many adults will be observed to be on middle and earlier stages. That people at these stages are content and/or adjusted is an indication that higher levels are not absolutely necessary for adjustment to life. Higher levels enable deeper problems to be realised and some of them to be resolved.

Indeed, it is a conformist's world, and the conscientious person, who is shown as only one stage higher, suffers through his judgement of others and invidious self-comparisons.

Higher levels are not acceptable to those of lower levels,
who do not comprehend stances taken. The study of psychology
is a case in point. Persons at the forming or conscientious lev
may. conversely, fail to see the limits of psychology. IOI

The student of psychology, at an integrated or autonomous level, will be strongly aware of these limitations, but will be equipped to resolve inner conflict.

Fingarette (1963) states that the search for meaning is not something the ego does but what the ego is.

Loevinger's Test of Ego Development

As in the majority of ego, moral and other sequential development tests, Loevinger uses a projective test.

... only a projective technique, a technique that requires the subject to project his own frame of reference, will suffice to measure ego development ... (Loevinger, 1970, P. 8).

Granted a notion of ego development, given the responses of a subject to a sentence completion (S.C.) form, how then is the placing of a subject made on the scale of ego development?

It might seem that the whole idea of measurement is inapplicable to a test where every response in principle, if not actually, is different from every other.

The basic measurement strategy is to identify qualitative differences in the successive stages of ego development.

Each response is then equated with the sequence of qualitative stages and assigned to the level it most closely matches.

From the ensuing collection of responses, it is possible to discern a core-functioning for each subject. (Sullivan, Grant and Grant, 1957).

The core-functioning of a subject will be shown by a generalised clustering of responses typical of one stage of ego development and only very rarely will a subject's responses score at one level through the whole of the test.

Thirty-six S.C. items are presented, this being a compromise between the impoverished information from too few items and that of the subject 'not standing still long enough'.

Loevinger insists on scoring or attempting to score every response and this has forced the development of the test and enabled fresh insights in ego-functioning and development.

(Loevinger, 1970, p. 16f).

At first the S.C. responses were classified on a fourpoint scale, corresponding from the second through to the fifth levels of Sullivan, Grant and Grant (1957) and these corresponded to the present levels of impulsive (I - 2), conformist (I - 3), conscientious (I - 4), and autonomous (I - 5). In the Sullivan, Grant and Grant scheme, the opportunistic and manipulative person is a species of conformist. Loevinger found that the opportunisticmanipulative protocol resembled the impulsive ones more than did the conformist. Loevinger reports that subsequent information from others, has led to confirmation that the opportunistic orientation represents an earlier developmental level than the conformist orientation. One gets atypical clustering around these above stages, with maladjusted and delinquent children and from the author's working experience, Loevinger's assumption appears to be both valid and important.

Isaacs (1956) gives a PARTICULARLY GOOD description of the opportunistic level. He refers to the level as the Delta level, since his typology is denoted by the first six letters of the Greek alphabet.

Whilst Loevinger retains the referential constructs of Isaacs and also Sullivan, Grant and Grant, these do not necessarily retain the meaning intended by their originators.

Subsequent development of Loevinger's test of ego development has, in fact, led to the adoption of a nine point scale, as research has identified clear transitional stages.

The test may be presented individually or to a group.

Seven S.C. tests are available, three for men, two for women, one for girls and one for boys.

The instructions to the S's are:-

... Now I would like you to fill out this sentence completion form. You see that these are incomplete sentences. Please finish each one. Notice that there are two pages; please make sure you have completed each one ...

Responses to be used by the experimentor if subjects request further help in completing the form:

... Please finish the sentence in any way you wish.

(or) There are no right or wrong answers.

(In answer to the question 'Who is 'she'?')

It can mean anyone (or)

Just think of it as anyone you wish ...

Subjects usually take between thirty and fourty-five minutes to complete the test, which is then ready for scoring.

Raters can be self-trained form a programme in Loevinger's two manuals (1970), which according to Loevinger normally takes one or two months of study.

Individual practice protocols are included, so that the inexperienced rater may check his scores against those of Loevinger. Similarly practice is given in deriving Total Protocol Ratings (T.P.R.).

The T.P.R. is found by reference to two sets of ogive rules, which are used with the cumulative frequency distribution of item ratings for a given protocol.

CHAPTER 3

EGO DEVELOPMENT

- 3. I. Loevinger's model and its ego components.
- 3. 2. Ego development and mental health.
- Ego development and delinquency (including moral development).
- 3. 4. Ego development and self-image.

EGO DEVELOPMENT

3: ILoevinger's model and its ego components

The organismic approach to psychological development, by Piaget and many others, has been so successful as to revolutionize child psychology. Its search for the structures that underlie developmental phases has led to the acquisition of knowledge developed from theories of logical-cognitive development. These issues are central to the theory of ego development. Ego development is presented as the "master trait" in personality, as the frame that provides more specific traits with their meaning and around which the whole edifice of personality is constructed (Loevinger, 1976).

In this study the term 'ego development' implies a broader set of components (as Isaacs, I956). The choice of representative components, expanded below, is based on subjective experience of the relativety and completeness of various ego theories to the description and treatment of deviant children. Subjectivity implies certain assumptions, that deviant children have failed to adjust to everyday demands and by virtue of treatment, maladaptive responses will be lessened or no longer used. Or, conversely, ego-development will lead to an increased ego-capacity (Polsky, I968) in dealing with everyday tasks and with stressful situations.

In the former context, the child's symptomatic behaviour leading to ascertainment as being maladjusted or delinquent, may well be seemingly a sound measure for keeping the ego intact. In the face of severe stresses, the absence of such coping behaviour can lead to ego fragmentation. Indeed, the dilution of such defences whilst the child is in the emotional security of a treatment unit, may promote the inability of the child to survive sufficiently when at home on holiday or when

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relating to 'normal' teachers or a whole range of environmental stresses.

What is a stressor for one person may receive little significance from another.

If one takes the example of a deviant child at Loevinger's 'self-protective' stage (delta), it is a stage typically representative of the pre-adolescent delinquent or anti-social maladjusted child (Smith, 1975). Such a child is described as being wary and exploitive and whilst in residential treatment the staff will be aware of the possibility of primitive manipulation from this child. Thus, conflict situations can be avoided or therapeutically engineered. Ordinary teachers or shopkeepers will not expect this trait and may react in a non-therapeutic way when situations present realisation. The ensuing confrontation will be stressful for the child (perhaps subconsciously for similar situations may not be uncommon) and with only a developmentally limited range of cognitive skills, he will probably resort to a restricted range of coping methods. Further lying, denial or projection, may present as 'good' options for this particular situation.

If this method of coping fails, the stress level will then be somewhat higher and in the absence of other methods due to the lack of cognitive flexibility, a regression to former and more primitive levels might be the only option, this perhaps being 'fight' or 'flight'.

Thus, the type of coping behaviour is dependent on the level of ego development. Indeed, a person at higher or adequate levels of ego development, will not easily put themselves in uncomfortable or undesired stressful conditions. If such a situation does arise, then the range of coping methods is wider and the cognitive choice of coping will

depend on the specific situation and even on the long-term consequences of one's action. For example, being polite to a traffic warden who lacks ladylike qualities.

People with an extreme inability to cope can be found in prisons and psychiatric hospitals but such profound inability to cope is only found in a minor proportion of the population, the remainder being at various levels of coping. The state of mental health called adjustment is at one end of a continuum and the other end is an ultimate state of ego-disintegration or extreme mental ill-health.

The ego as a homeostatic organism strives to maintain optimal states of tension, productivity, and ego (self) development, minor stresses being handled with little thought. Extreme stresses or prolonged stress will excite the ego to increasingly wide-ranging and expensive activity in an effort to maintain 'equilibrium'. Symptomatic behaviour considered to indicate maladjustment is usually a result of such stresses.

Menninger in 'The Ego under Major Stress', (1977) presents five levels of coping and these will be discussed in a later section of this work in relation to ego development, but it may be accepted how satisfactory levels of ego development yield an increased range of option for coping. In terms of coping, the main ego-components include differentiation, the ability to cognitively differentiate; integration, that is, a one-ness with the immediate environment; ego-capacity and ego-strength.

DIFFERENTIATION

Differentiation as a concept has been widely used in the natural sciences, and in psychology it is extensively found in the work of Lewin (1935), Werner (1948) and Witken, et al (1962).

In general terms, the degree of differentiation of any system refers to its structural complexity and sophistication.

Psychologically, differentiation is the degree of selective open-ness to stimuli and the systems sophistication of stimulus adaption. A non-differentiated self-system will perceive a few autonomic stimuli and react to stimuli offering immediate sensory gratification. The strong egocentricity found in deviant children, with attendant low levels of egodevelopment, is well representative of such sensory gratification.

Later, the poorly differentiated self-system will perceive a greater range of stimuli but will react indiscriminantly or inappropriately in terms of what the stimuli can offer.

Low differentiation means close field dependancy whereas it is a function of the rational-autonomous character (the upper reference point) to have a segregated structured self. Thus providing internal frames of reference for viewing, interpreting and dealing with the world from the position of an autonomous agent, enjoying an existence apart from the field, rather than fused with it.

It is necessary at this point to stress that just as high levels of ego development in no way guarantee mental health and adjustment, neither does a high level of ego-differentiation.

The fragmented or disintegrated ego may be too field-independent. Alternatively, socialised delinquents exercise field dependence in subtle and expedient ways.

Witken (1962, p. 263) describes poorly differentiated children as displaying the acceptance of infantile, externally imposed standards, being unable to accept responsibility and

normal standards consistent with their chronological age.

These descriptions apply to many maladjusted and delinquent children, found by Smith (1975) to have below average levels of ego and moral development. Witkin (ibid) describes the highly differentiated children in his study in terms compatible with high levels of ego development thus stressing the importance of differentiation as an ego component. The problems accounted by the highly differentiated group included a number of specific and localised fears, further evidence of the need for a certain level of ego development for neurosis. This point is further expanded later in this study.

INTEGRATION

Integration has been used to describe the ability of the "I" or self to trade realistically and consistently with life processes. That is, a well integrated ego allows a balance and adjustment to other people, everyday tasks and stresses. Thus, integration is part of the ego and its development.

Workers with maladjusted and delinquent children have variously described the mental health of their charges or differentiated treatment consistent with levels of integration. Winnicott (1965a, 1965b) mainly initiated this movement, with later developments by Docker-Drysdale 1968, 1970, 1973, 1974) and Balbernie (1966, 1974).

Balbernie (1974), after relating that treatment must follow close assessment of the client's needs and personal damage, focuses treatment on the level of integration achieved by his clients. This too, is the main tenet of this study, but attempts to show that levels of integration can be related more accurately in terms of ego-development but mindful of its components. Indeed, significant developmental differences

are shown between maladjusted and delinquent children by Smith (1975) and for sub-groups treated quite globally by Balbernie and Docker-Drysdale.

Balbernie (ibid) equated levels of integration with egodevelopment:

... In jargon terms this is now, all over the world, increasingly called the "I level" - and all sorts of rating scales are being used to measure it. But many (children) have by no means reached the advanced stage of being an "I" at all. They are not yet a person ...

It is pertinent to note that Smith (ibid) always 'found' an I - level even with eleven year old extremely disturbed delinquents and maladjusted children. Indeed only one child, a dull borderline psychotic was rated lower than I - 2, he being I - I.

However, such was the clustering on 'I' levels two, delta and three that sub-scores and sub-stages were facilitated.

Problems of clinical differentiation occur with these lower levels of ego-development, as the delinquent or maladjusted child may be either unintegrated, integrated to primitive levels only in the absence of a facilitating environment (Winnicott's terminology), or thirdly, regressed to previously "good-enough" levels of nurturance. The latter being seen as an ego-defence, as the result of an experience sufficiently traumatic to destroy the normal sense of "well-being". A lack of well-being can lead to levels of relative non-being, disintegration.

... Man is always between being and non-being, but notbeing is not necessarily experienced as personal disintegration. The insecurity attendant upon a precariously established personal unity, is one form of ontological insecurity ... Laing (1969)

Because of the complexity of the integrative process, ontological insecurity, part of maladjustment, is never distant.

Integration starts by balancing the ego, id and superego in the service of the self and integrative ability varies with situational demands. The functioning of self depends on the integrative qualities which themselves are so dependent on the primary splitting process.

Integration of the self follows after differentiation of self from (m) other. Non integrative primary experiences raise the extended need for externally applied integration in the form of controls or extended nurture, or an "alter-ego".

Limited integrative abilities will limit differentiation and ego development. This may be more easily understood by tentatively comparing differentiation and integration with Piaget's assimilation and accommodation, respectively.

Inter-relationship between Integration and Differentiation with REGARD TO Ego Development and Adjustment

Any psychological system is both integrated and differentiated to some degree though necessarily less so in the early stages of development.

As integration develops the child will operate harmoniously within the environment, however;

... the integration of ideas and feelings, a function performed by mechanisms of control and defense, necessarily becomes more complex as ideas and feelings become more discrete, that is as differentiation develops ...

(Witken et al, 1962)

Simple patterns of integration imply simple differentiation.

Maturity, as it is commonly conceived, connotes both developed differentiation and effective integration (Witken, ibid). It is among those who have sufficient cognitive flexibility and development to be highly differentiated, that we are likely to

find mature persons, but because highly differentiated persons vary in effectiveness of integration, not all of the latter are mature or adjusted. For example, vocalisation of a field experience does not guarantee its integration.

Conversely, good integration at low levels of differentiation frequently results in adjustment and a form of maturity.

A mis-match at higher levels may result in neurosis, that is, where integration is not quite as high as differentiation.

Sullivan, Grant and Grant (1957) suggests that psychological development in general can be meaningfully described in terms of seven successive stages of integration. It is not, of course, suggested that all people will achieve the highest levels of integration. In this paper the authors, in describing level - I of integration, state:

.... although a number of level-I personalities are properly diagnosed as psychotic, this diagnostic label is not appropriate for the entire group. Further, psychotics may be found at other integration levels

The inter-relationship between integration and differentiation determines ego-capacity because of the increased capacity to accommodate extra stressors and commitments.

EGO-CAPACITY

Polsky (1968) refers to the delinquents in his study as having severely restricted ego-capacities and this makes it a useful working term to use in the context of this study.

Poor judgement, little self-awareness and an in-ability to control their impulses were seen by Polsky as restricted ego-capacities.

Restricted ego-capacities will, of course, restrict ego-development.

Polsky notes the increasing ego and moral development of

his delinquents by stating "a minority of senior boys show neurotic guilt and anxiety symptoms". The unintegrated or poorly integrated child is preneurotic, unable to experience guilt or anxiety (or such), and functioning at various primitive stages of development. (Docker-Drysdale, 1968)

Neurotic guilt and anxiety need all the four processes of (i) experience, (ii) realisation, (iii) symbolisation and (iv) conceptualisation, where-as primitive acting-out is "blind" symbolisation only. Sublimation (as opposed to acting out) requires integrative abilities of conceptualisation.

Neurotics have sufficient ego-capacity to maintain secondary relationships (e.g. treatment staff) having received "good-enough" primary care. "Good-enough" residential provision will frequently provide the unintegrated with a "false-self" able to operate (just) at secondary levels of interpersonal contact, leaving unresolved primary conflicts just under the surface. This false-self has been referred to as a "mask of sanity" by Cleckley (1964) and a "sense of well-being" by Docker-Drysdale, (ibid.)

Exposure to "good-enough" residential care is seen by Balbernie (ibid) as one of the few methods of integration level assessment available, when after a few months of residential care the (ego) capacity for change of the child is assessed. If differentiation of the "good-enough" aspects is made and integrated then there is an indication of a potential for change and the development of sufficient ego-capacity for alternative ways of coping with stressors. Sometimes the terms 'ego-capacity' and 'ego-strength' are used to describe similar functions, therefore an explanation of the differences between these two areas would appear to be in order.

EGO-STRENGTH

Barron (1950) developed a scale designed to measure a general capacity for personality integration which he termed 'ego-strength'.

.... the scale appears to measure various aspects of effective personal functioning which are usually considered descriptive of ego-strength

Barron (1953)

More recently, Martin (et al, 1978) stated:

.... the Ego Strength Scale may serve as a predictor in any situation in which an estimate of personal adaptability and resourcefulness is indicated

Lawrence (1976) discusses the concept of ego-strength in providing energy to the child in psychiatric treatment and goes on to cite the use of ego-strength training and an evaluation checklist which measures the amount of ego-strength as perceived by the child.

In a longitudinal study using independent set of data on characteristics of children's families and characteristics of the children themselves, Peck (1958) found that ego-strength (defined by a cluster of highly intercorrelated items measuring the individuals capacity to react to events) was associated with measures made several years earlier, of stable consistency and warmth in family life, etc..

Peck and Havighurst (I960) found ego-strength correlated well (r = .69) with total moral character scores. The ability to anticipate future events (particularly consequences) or delay gratification was found to be associated with ego-strength by Kohlberg (I964).

Section 3

EGO DEVELOPMENT

Sub-section 2

Ego-development and mental health

3: 2EGO DEVELOPMENT AND MENTAL HEALTH

Parameters of one main model

In this section mental health will be compared mainly with the child's ego development but much will be common to, or pre-cursors of, adult experience.

Ego development may, on occasions, proceed well despite precarious mental health and, conversely, mental ill health can occur at any level of ego development. The former exception will mainly occur if the person is operating in a relatively stress-free environment, thus the capacity to cope is sufficient and a state of equilibrium is maintained

Conversely, Mittleman, et al (1978) states the manner in which primary states affect ego functioning and therefore its development:

.... psychiatric unfitness from whatever cause and of whatever diagnostic type is one factor that can depress cognitive performance

Rutter (1977) has examined the impact of brain damage syndromes in childhood psychiatric illness and its effect on cognition. The importance of mental ill-health on a child's psychological development was stressed in the W.H.O. Technical Report No. 38I (1968) in which it was recommended that very high priority be given to

- (a) the study of critical periods of development, to examine the environmental factors on subsequent mental health, and
- (b) longitudinal neurophysiological studies of high risk subjects.

It is the child's ongoing development that dictates the

timing, degree of severity and area of psychiatric illness and conversely, the rigour of mental illness affects the equilibrium of adjustment during development.

psychopathology in children differs from adult psychopathology because of the overwhelming significance of developmental processes for all aspects of child behaviour, normal or pathological

Achenbach (1974)

Toolan (1978) reminds us "that stages of ego-development at different ages will produce varying clinical pictures".

The functional effectiveness of the ego will dictate the extent of a subject's ego-capacity and higher levels of ego development demand equitable ego-capacity. In turn the inter-modal effects of differentiation and integration depend on cognitive abilities. Thus, subjects at low levels of ego-development, having poor differentiation and integration, restricted ego capacity and limited cognitive flexibility, will find a greater range of potential stressors. potential stressors will not even be perceived or their existence may be denied, as a simplified life-pattern will help to maintain effective equilibrium. Conversely, subjects at higher levels of ego-development may reject a simplified existence and actively seek greater stimulation and stress through inviting higher challenges.

Studies of social causation theory, which have been reviewed by Dohrewend and Dohrewend (1969), have also emphasized intracultural class differences. A consistent finding has been that behavioural disorders (particularly schizophrenia) occur more often and are more severe among the lowest socio-economic group as compared with the higher socio-economic classes (Hollongshead and Redlich, 1958; The sociologocal explanation for the Srole, et al., 1962). inverse relationship between the incidence of psychological

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disorders and social-class status is added to by the excessive stress inherent in the struggle of day-to-day existence.

Evans (1975) implies that the time has come for a developmental-interactionist viewpoint because there is:

.... (I) an agreement that active interaction with the physical and social environment is the primary source of childrens' learning, and (2) a consensus that development involves a stage-based reorganisation of cognitive structures (p. 72).

A life of conformity, or at the worst a life of expediency, in order to survive will promote a blinkered approach to daily existence. It is these people who are least likely to appreciate the range of helping professions or afford to use them.

When demands exceed the coping resources of the person, then stress arises. However, what is stressful for one person may not be so for the next person and how an individual or group perceives or copes with stress will differ.

.... the adequacy of the effort to master stressful commerce with the environment bears the chief responsibility for the adequacy of adjustment

Lazarus (1976)

Maladjusted children have shown an inability to cope with the commerce of life. Because a baby starts life with little ego-development (some theorists would say none), early childhood remains the period for the majority of ego-development and learning. Thus, the child, having little ego-development will possess restricted ranges of coping method and therefore remain particularly vulnerable to stress or harm. For

.... as both Lewin and Piaget point out, the young child at first confuses the subjective and objective features of the environment and as a result can experience frustration, or even bodily harm, as he attempts the physically impossible

Bronfenbreuner (1979)

If the child is able to cope with any excess of stress and maintains equilibrium then he will remain adjusted to his environment. The inability to cope or the over use of defence mechanisms will lead to a maladjusted or deviant life-style.

then, is often the result of attempts to regulate distressing emotions by means of avoidance or defense mechanisms such as denial; these mechanisms are motivated in part by the wish to prevent confrontation with a harmful or threatening event and to regulate the distress produced by thinking about it. The behaviour is maladjusted because it prevents the individual from taking effective steps to master the problem. The more stressful an event is, the more likely that the person will resort to solutions that at best are temporary palliatives, rather than taking rational and effective steps to cope. Desparate situations seduce the person into desparate actions that fail to help resolve the situation. Thus, stress is an important factor in maladjustment, though not the only one

Lazarus (ibid).

Many maladjusted children and the majority of delinquent children have particularly low levels of ego development (Smith, I975) and thus the methods of coping, in a defensive sense, are essentially primitive. Physical and verbal aggression, running away, withdrawal, destructiveness, phantasising, etc. are common maladaptive coping processes. An inability in everyday commerce with modern society is compared to primitive thought by the anthropologist C. R. Hallpike (I980) and suggests 'lack of early differentiation as an early anthropological state'. Thus underlining the primitiveness of earlier levels of development. Many ordinary children and adults will use such coping methods from time to time, but their continued and excessive use is a sign of maladjustment or deviancy.

If inappropriate coping methods are used for a period

sufficient to justify labelling the child as 'maladjusted' or 'delinquent' then these coping methods will have become a way of life, a habit. Stimuli will be perceived through this distorted frame of reference and selectivity of such stimuli able to be fitted easily into the self-system, will depend on its malleability to the usually chosen reaction. For instance, a child who over-uses verbal hostility will be selective in his commerce with the environment in order to be able to reply with verbal hostility.

It has been suggested (Anthony; I970) in applying the notion of Piaget that "under pathological condition such development might fail to occur"

.... with the result that the child remains an undifferentiated, heteronomous individual, highly dependent on external authority for his attitudes and behaviour

These include the children referred to elsewhere in this study as needing a 'caretaker'. Loevinger (1976) states her Stage I and also sometimes Stage 2 children and adults need a 'caretaker'.

Whilst employing various defensive techniques the person is not able to relate objectively to the reality of the stress and to develop appropriate techniques of adjustment to the stressor. Methods of changing this mode of behaviour arediscussed in the section on treatment strategies though it will, by now, be readily appreciated how therapeutic measures to encourage ego-development will increase the ability to cope and therefore to adjust. The removal of the child from atypical parents and atypical child-rearing practices, the simplification of the child's immediate environment, a change of environment (e.g. from inner city stress), etc., are primary vehicles for change and adjustment.

If as Brofenbrenner (1979) suggests:

.... Development is defined as the person's evolving conception of the ecological environment, and his relation to it, as well as the person's growing capacity to discover, sustain, or alter its properties

then it will be realised that a complex (super-optimal) or stressful environment will not enable an emotionally-disturbed child in his daily commerce with life. Such children remain extremely vulnerable and as Wyne and O'Connor (1979) state:

.... It would be difficult to design a better example to show the importance of maintaining a balance among the developmental domains - cognitive, affective, and psychomotor - than that provided by the area of emotional disturbance

Whilst faulty child-rearing practices are common in the history of maladjusted and delinquent children, other such children appear to have little cause for maladjustment.

However, Rosenthal, et al (1975) found that genetic variables are more potent in causing psychological disorders than unfavourable childhood experiences. Bleuler (1975) found childhood neglect and deprivation, even of a dire type, apparently to have no bearing on the development of behaviour.

On the basis of current theories and empirical findings, adjustive disorders cannot be explained in a singular or simplistic way. The general principle that complex behaviour is based on multiple causes (Anastasi, 1958) avoids many sterile arguments.

Ausubel and Sullivan (1970) list the following determinants:-

- The effects of genes are mediated through:
- I. adaptive resources: intelligence, originality, creativity, flexibility, improvising ability, resourcefulness, problem sensitivity, emotional stability;
- general resistance to stress, both acute (catastrophic), and chronic (cumulative), and novel (e.g. through the adrenal cortex);

- predispositions to specific organ system involvement in reactions to stress (psychomotor disorders) or physiological expressions of anxiety;
- 4. temperamental predispositions to:
 - a. level and distribution of energy;
 - self-assertiveness, aggressiveness, perseverance, volitional independence, venturesomeness, initiative:
 - c. ego maturation variables (hedonistic needs, executive independence, frustration tolerance);
 - d. manner of resolving ego development crises;
 - e. introversion-extraversion;
 - f. preferred specific adjustive techniques or coping mechanisms (withdrawal, denial, projection, rationalization, regression);
 - g. emotional stability (Ausubel and Sullivan, 1970)
- The effects of the environment are mediated through:
- I. cultural or subcultural sources of stress (e.g., caste, class, sex, ethnic origin) and kind whether catastrophic, cumulative, or novel;
- choices of coping mechanisms approved by culture or subculture (e.g., resignation and stoicism or aggressive combatting of difficulties);
- 3. familial and idiosyncratic ways of resolving egodevelopment (e.g., rejection, extrinsic valuation, extremes of domination and protection); demands, pressures, expectations, limits, discipline;
- 4. available choices among values transmitted by culture and subculture (e.g., degree of achievement or amount of responsibility expected);
- 5. approved cultural and subcultural ways of socializing, satisfying drives, and expressing or repressing emotions (Ausubel & Sullivan, 1970)....

The range of coping or defensive reactions to stress appear limited compared with the range of stressor or compound conditions funding the maladjustment. Thus a restricted and somewhat common range of symptomatic responses may mask the real pathological content. This range is restricted in and by the lower ranges of ego development associated with maladjustment (Loevinger, 1976, p. 186). If the situation stressing the child is identified then the child must be taught appropriate coping strategies, if they cannot be removed

from the stressful source. Indeed, Disturbance is considered pathological when unresolved crises weaken the ego to a point where the child cannot deal with the normal demands in the environment....

123 Wyne & O'Connor (1979)

In place of adaption to a too complex situation or environment a child may regress as a method of coping. That is, instead of coping at an age-appropriate level with situations, the child regresses to a former level, a level of simplistic coping. This may show as babyish talk, temper tantrums, enuresis, etc.. Regression may occur at any point in life, adolescence, adulthood and old age, as a coping mechanism, e.g. "regression in the service of the ego" (Kris, 1952).

Complete regression can lead to psychotic states where the patient is removed from reality. Assuming the patient had once reached an optimum level of integration and differentiation then this will be gradually eroded until non-integration or disintegration of the ego.

Loevinger's earliest stage, the 'Presocial Stage (I - I) is descriptive of this regression.

.... The baby at birth cannot be said to have an ego. His first task is to learn to differentiate himself from his surroundings, which becomes the "construction of reality", the realization that there is a stable world of objects In the process, the baby constructs a self differentiated from the outer world. The child who remains at the stage where self is undifferentiated from the world of inanimate objects long past its appropriate time is referred to as 'autistic'....

Loevinger, (1976, p.15).

Thus a similar condition can result from non-development or from gross regression. Rosen and Gregory (1965) find that early infantile autism is so similar to childhood schizophrenia in its manifestations that sometimes the two disorders cannot be differentiated except on the basis of historical data. Herbert (1974) refers to the view held by some clinicians that the childhood type of schizophrenic reaction represents a regression from some higher stage of development, while the

infantile autism involves grossly atypical development from birth. Rimland (1964) regards infantile autism as a unique psychosis which is part of a brain damage syndrome and believes the basic defect is a cognitive one i.e. differentiation very difficult or impossible.

Tinbergen, in his I974 Nobel Prize acceptance speech, described the efforts of himself and his wife to evaluate the possible causes and treatment of autism. Tinbergen firmly believes many normal children also exhibit autisticlike behaviours on occasions (e.g., in approach-avoidance situations) and argues that autism is caused by environmental stresses.

Donnelly (1979) describes the process of recovery in some psychotic patients as "the bridge from fragmentation to primitive cohesiveness". This process may be equated with the earliest levels of ego-development.

Finally and in summary;

pathology because it is the central organising value in personality structure. Our relationship to the environment is ordered on a hierarchical gradient of ego involvement. Most motivations bear some relationships to ego needs (e.g., security, adequacy, prestige, status, power) how compelling the need for ego enhancement is, how important we think we are or ought to become Ausubel & Kirk (1977)

3:3 EGO DEVELOPMENT AND DELINQUENCY

... It appears to us that claims that moral immaturity is a basic cause of delinquency or a view of delinquents as representing a specific type of moral character are misconceived. In our view, efforts to isolate a basic cause for types of delinquency are bound to be unsatisfactory.

Pre-conventional moral reasoning is not a cause of delinquency, since the majority of pre-conventional children and adolescents do not engage in severely delinquent actions (or at least are not incarcerated). These include pre-conventional children, pre-conventional adolescents and adults in some village cultures. While most pre-conventional adolescents are not delinquent, most delinquents are pre-conventional.

While pre-conventional moral judgment is not a cause of delinquency, conventional moral judgment is a major condition for avoidance of delinquent action when personal-need or situational forces provide strong incentives for delinquent action. When delinquent or antisocial behaviour is engaged in by conventional adolescents, more specific and intense "causes" of delinquency are more likely to be isolated than when adolescents are pre-conventional...

... Our finding of retardation of development of moral cognition in delinquents is a factor ignored by most current theories of delinquency. It indicates features of personal development ignored by sociological theories...

Serban (1978)

disturbance is primarily individual (i.e. neurotic or psychopathic) or socially conditioned (by identification with an undesirable sub-culture) is useful up to a point but does not help much in the cases whereby anti-social attitudes arise from a mixture of personal difficulties and social circumstances. In assessing delinquents for treatment purposes, one needs some measure of the depths or severity of personal handicap. A possible yardstick for this purpose is the stage of emotional maturity the delinquent has reached ... Wright (p.178, 1967)

If the ego is central to the individual's personality, then it follows measures of ego development should encompass many factors of emotional development. Certainly Smith (I975) found delinquents to be considerably lower in terms of ego development than a control group of non-delinquent children. Further to this, low ego development was found with children deemed maladjusted thus underpinning the reference to similarly low levels of emotional maturity. However, the delinquents

scored much lower than either the non-delinquent or maladjusted in moral development and development was on a plateau.

Writers such as Peck and Havighurst (1980) and Loevinger (1976) consider moral development to be part of more general stages of ego or character development. If ego development is seen as the successive restructuring of the relationship between the self and others and of norms, it is natural for ego development theorists to use changes in the moral domain just as under-pinning. Kohlberg (1976) considers moral development to be different from ego development in both form and pace;

... This unity is perhaps better conceived as a matter of levels than of structural stages, since the unity of ego levels is not that of structural stages, since the unity of ego levels is not that of logical or moral stage structures. The requirements for consistency in logic and morals are much tighter than those for consistency in personality, which is a psychological, not a logical, unity ...

Kohlberg (ibid.)

The writer considers it unfortunate that such suggested clarity of logic is not realised by either Loevinger or Kohlberg. Indeed if moral development in its day-to-day commerce is more logical then where are the logical cures for delinquents? Is (a) morality outside of the delinquent's psyche?

Studies by Sullivan, et al (1970), Smith (1975) and this present study suggest considerable overlap and relationship between ego development and moral development in terms of both similarities and differences, indeed current observations have valued moral criteria as a useful warp in the weaving of overall ego development.

It has been stated previously, moral development differentiates delinquents from non-delinquents and so delinquents have, at the very least, been illogical in daily moral commerce. Higher levels of moral development would equip the delinquent with a greater range of responses though this would not guarantee non-delinquent activities. As Kohlberg (1969b) states:

to act in a morally high way requires a high stage of moral reasoning. One cannot follow moral principles (Stages 5 and 6) if one does not understand or believe in them. A variety of factors determines whether a particular person will live up to his stage of moral reasoning in a particular situation, though moral stage is a good predictor of action in various experimental and naturalistic settings ...

Kohlberg groups his six moral stages into three major levels;

Pre-conventional (Stages I and 2)

Conventional (Stages 3 and 4) and

Post-conventional (Stages 5 and 6)

In previous research Smith (1975) found all of his delinquents sample except one adolescent were operating at the pre-conventional level. Kohlberg (1976) writes that most children under nine years of age, some adolescents and many adolescent and adult criminal offenders as operating at the pre-conventional level.

Piaget (1950) defines the essential core of morality as the tendency to accept and follow a system of rules which regulate interpersonal behaviour. It would seem delinquents are unable or unwilling to operate at this 'conventional' level. If one includes the factor of (un)willingness it recognises the central role the partially developed child has in the formation of their own development (a la McGurk, 1978).

The motivation or will of the delinquent to take decisions or choices outside of a well-rehearsed and compact framework of development will depend on facilitative conditions of treatment. Indeed this may involve forcefully coercive tactics in the short-term (Seligman, 1975). The facilitative conditions for healthy personality in young people are well documented elsewhere (see Herbertson, 1974; Hoghughi, 1978b and Herbert, 1978). Such developmental steps must, of necessity, be small steps as when planning learning experiences for the educationally retarded child. The socially retarded child who is operating at the pre-conventional level will also need self-development to proceed at a pace and level consistent with his cognitive processing and have time for concomitant practice toward internalisation of new behaviours.

As detailed earlier in this work ego and moral development proceeds through well-documented hierarchical stages and treatment for change should be consistent with long-term goals and growth. However,

... the rate at which a child adapts to his environment will depend on constitutional factors largely determined by hereditary and partly by environmental factors and experience ...

Graham, (1972)

Such sequential development may be nurtured by sequential treatment. That is, by starting from where the child is and exposing the child to a series of treatments consistent with the child's developmental needs. Such methods are detailed in Section Six of this study and also elsewhere by Hoghughi (1977, 1980); Groom (1980), with delinquents and Wilson and Evans (1980) with maladjusted children. The latter study pays just attention to the virtues of attempting sequential treatment in a non-eclectic manner. Indeed developmental

aspects are only part of the personality dynamics of the delinquent child and in turn the personality is but one factor in delinquency. Other factors can include opportunity for offending, culture, need, societal norms and laws, familial influences, emotional interplay, etc..

If a non-eclectic approach involving a variety of treatment ploys is adopted then a matching set of measures needs to be employed to gauge the child's baseline performance before treatment and after the effects of treatment. Measures of moral and ego development provide an indicator of cognitive development in those two domains and may test the efficacy of treatment. The experimental measures developed for this study provide a useful starting point.

The successful treatment of delinquents is, however, notoriously difficult and full of pitfalls, one of the main problems being in changing the deviant self-identity toward wider life-options from a basis of carefully and positively developed self-esteem.

Delinquent children tend to be poorly motivated for achievement and this may arise from a number of psycho-social causations, failure at school, perceived low social standing, the self-fulfilling prophecy resulting from the labels ascribed to them by significant others, or deviant models. Each one of these factors could be the root of anti-social or delinquent behaviour, a composite number of such factors not rendering pro-social behaviour as likely.

The desire for an acceptable self-image appears to be one of the most critical and significant motivating factors in regular childhood (and adulthood?) behaviour. From a very tender age children discover and make use of complex defensive

strategies designed to protect and enhance their gradually evolving self-image (Herbert, 1966).

Delinquent children have deep-seated defences that are a major obstacle to treatment approaches, the ego defence mechanisms acting as a too fine a filter to alternative life-approaches.

Delinquent children tend to be poorly motivated for achievement, often because achievement involves commitment and exposing oneself to possibly harsh criticism. A fragile self-identity cannot easily withstand such knocks. Such is the global personality of the delinquent that the filtration prevents substantive disequilibrium, compensatory integration and adaption toward fostering ego-development.

Whilst Smith (1975) found delinquent children to have distinctively low levels of ego (and moral) development, few investigations have been directed at examining potential parallel stage development between ego and identity status formation. Knowledge of such formation would lead to methods of reformation, 'un-sticking' and enhanced development of the developmentally deviant.

Work in the mid-sixties to early seventies by several researchers, but particularly by Kohlberg and Loevinger, in elaborating the structure of hierarchical stage development, inspired initial minor studies into the intra-individual developmental aspects of personality formation. Only quite recently has the relationship of ego development to identity formation been looked at in depth (Rothman, 1978; Adams and Shea, 1979; Adams and Fitch, 1981). For a detailed examination of this literature, comprehensive reviews on

related issues dealing with ego and identity development have been prepared by Hauser (1976) and Bourne, (1978a, b).

Adams and Shea (1979) suggest ego stage development may be accompanied by a parallel development in identity formation, whilst advanced stages in identity status formation are associated with parallel increases in internal locus of control (ibid), the latter having particular implications in the study of delinquency in that levels of control are linked to both ego (or more specifically, moral) development and identity.

Similarly identity status development has been found to parallel impulse expression (Matteson, 1977), moral development (Podd, 1972) and mature intimacy styles (Orlofsky, Marcia and Lesser, 1973; Marcia, 1976; Kacerguis and Adams, 1980). It follows that groups, such as delinquents (Smith, 1975) having low levels of ego-development have correspondingly low identity status, immature impulse expression, moral development and restricted intimacy style.

It has been recently argued by Adams and Shea (ibid) that identity and ego statuses are interrelated personality constructs which function as the main psychological screening and evaluation mechanisms associated with personal causality. That is, identity status, delinquent or otherwise, is thought to be a personal screening of various alternatives within one's life options and a self-imposed evaluated direction. Thus, to develop an integrated and mature sense of identity, it is assumed that adolescents must explore and experience their environment and make a personal commitment toward a specific direction to life (Marcia, 1966; Matteson, 1977).

It follows that a restricted conceptual view will limit the options available to explore and to remove this restriction involves dismantling the defences otherwise all fresh options will be viewed with similar disclarity.

The answer to who or what am I to a confirmed delinquent merely confirms the delinquent psychological set.

3: 4 DEVELOPMENTAL ASPECTS OF TREATMENT SETTINGS

The difficulty in raising the developmental standards of delinquents has been mentioned above but the dynamic effects of a youngster being alloted to an institution containing peers of a similar ilk and developmental level are both powerful and complex.

The shared acceptance of microcosmic standards further distances the expectations of treatment unless the treatment system is more overwhelming than the peer or gang effect.

... Whatever the stated theories or harsh expediences behind the rationale for herding offenders together in an institution, the power and influence of the deviant subculture thereby created are depressing obstacles to overcome ...

Herbert (1978)

The entering delinquent can readily understand and identify with the norms of such a concentrated delinquent group and can regard them as a ready made gang, albeit without a complete choice as to its composition and meeting.

As with a community gang any decrease in toleration of deviance can lead to negative feed-back. The negativist reaction can steer toward degrees of selected institutionally unconventional behaviour by the delinquents with the 'system' in turn producing a retaliation, the effect of which is to

aggravate still further the deviant's status frustration, and provoke more hostility. And so round and round again.

(See also Wilkins, 1964).

A survey of aggressive gangs in New York by Lewis Yablonsky two decades ago describes the delinquent situation much as it is in the United Kingdom. He writes that the modern gang is less well organised and socially purposeful than those of previous generations described by Whyte (1943) and Thrasher (1927).

... The modern gangs indulge in brutality for no logical purpose except to boost a sinking morale. Youths embittered by personal inadequacies and social failures fulfil their fantasies of power and success by terrorising others. Unlike the old gangs, which at least provided some elements of friendship, camaraderie and leadership, these groups lacked stability of membership, or any spirit of cohesion, acting in a mob-like fashion to relieve themselves in spontaneous bursts of irrational violence. In other words, these gangs had sunk to the level of loose collections of handicapped or inadequate individuals ...

Further to this, fringe individuals are involuntarily co-opted into these mobs because free-rangers not visually ascribing to the locally dominant cult, football team, 'oppressed' minority or whatever, are considered fair game and open to physical and verbal assault. These conditions of membership plus social, economic, cultural and conceptual constraints on youngsters considerably weakens Cranes (1958) tenet, who in studying the influence of pre-adolescent gangs on the moral development of children, reached this conclusion.

... The important fact is that the child enters the gang voluntarily and the rules, norms and codes of behaviour have either been freely determined by the gang members themselves, or, at the very least, have been fully accepted by the members. In voluntarily accepting restrictions the child begins to become a truly moral being ...

An alternative argument to this and a concluding comment on peer effect, the most powerful reinforcer of delinquency is that the conceptual channels open to the prospective gang member are limited by his own conceptual framework. Further, the gang is only the sum of the lowest average level of conceptual ability radiated by its members and therefore the role and performance of the gang is similarly limited. How often do such gangs blossom forth into fresh scientific discovery, unled community enhancement or fully-fledged artistic productions (West Side Story apart)?

The individual and group effects of retarded and abnormal moral and ego development have been discussed but to relate developmental deviances to the whole range of problems associated with deviant youngsters would double the length of this present thesis and, interesting though it may be, renders such lengthy discussion beyond the remit of this study. In an effort to not neglect this important relationship and yet remain both comprehensive and brief one can turn to the Aycliffe Problem Profile (A.P.P.) as developed by Hoghughi et al (1980b) as a development 'Assessing Problem Children' (Hoghughi et al; 1980a).

The A.P.P. is completed when adequate relevant information about the child is available or alternatively it may be used as a preliminary checklist of possible problems. The problem areas correspond to those expounded in 'Assessing Problem Children' (ibid), the definitions of the attributes being provided in that book.

The major attributes in each of the six problems are, Physical; Intellectual, educational and vocational; Home

and Family; Social Skills; Anti-Social Behaviour; and Personal, respectively. Each major attribute is represented by ten to eighteen sub-areas, making eighty-three sub-areas in all. Four hundred and fifty one specific problem areas constituting the latter sub-areas.

Provision is allowed on the A.P.P. for highly specific problems otherwise not referred to, but in practice it will come of little surprise that 45I sub-headings invariably cover the problems of deviant youngsters. This being so, the instrument can be used most appropriately, because of its problem-centred approach, to compare the effects of atypical development upon problems, or vice versa. Simple statistical comparison would be an aid to brevity, particularly if the comparison was limited to the six major attributes.

(I) The effect of developmental disorder in terms of maintaining or worsening existing problems is as follows:-

Problem Areas Physical	Moral Developm	ment	Ego Developme 68.75		TABLE 9
Intell, Educ. & Voc.	80	%	100	%	
Home & Family	100	%	100	%	
Social Skills	100	%	100	%	
Anti-Social Behaviour	100	%	100	%	
Personal	100	%	100	%	
	86.2	5%	93.85	%	(overall)

Thus, it may be observed existing problems are to a highly significant degree negatively effected by developmental lag. Conversely it could be assumed that sufficiently mature development will effect curtailment or resolution of problems.

(2) The effect of problems in terms of delaying or regressing moral or ego development is as follows:-

Inhibiting	Moral	Ego TABLE IO		
Problems	Development	Development		
Physical	25 %	75 %		
Intell., educ. & voc.	30 %	80 %		
Home and Family	100 %	100 %		
Social Skills	81.81%	100 %		
Anti-Social Behaviour	100 %	100 %		
Personal	68.75%	100 %		
	67.59%	92.50 % (overall)		

The effect of existing problems can adversely affect the rate of maturation of youngsters. For example, it may be seen from the above how any of the problems listed under 'home and family' are likely to retard development. Conversely physical problems do not generally affect moral development, viz. a blind or sick youngster need not be particularly amoral or immoral.

The implications for treatment of delinquency are that the removal of problems allow development to proceed provided the treatment unit offers a facilitative environment. Unfortunately the institutional factors of many treatment units are counter-productive to a child's development even when the child has been removed from the original problem source.

- A facilitative environment is required in terms of
- (a) assessment of the individual youngsters level of psychological functioning and development,
- (b) accommodating the youngster at his 'found' level of functioning,
- (c) offering a range of milieu components able to be internalised (perhaps only at a subconscious level) and used by individuals to not only maintain current psychological growth, avoid recourse to regression, but to accelerate maturation.

Anything less could result in lower or no maturation of the deviant youngsters being treated, indeed, particularly diverse, extended and technically matched treatment resources are demanded for those who by virtue of their very condition have failed to mature elsewhere. Fortunately, the majority of the ('normal') child population mature, to a greater or lesser degree, without such artificial aids and prompting.

(a) Assessment requires appropriate assessment measures, some of which might usefully include those developed in this present study.

It is not uncommon to find the maladjusted or delinquent youngster is developmentally retarded in a generalised manner or at least in several not immediately related areas, e.g. physical stature, sexual development, life-skills and coping skills or academically (Smith, 1975). Because of the relative futility of tackling singular developmental deficits to the exclusion of other, probably equally important, areas, appropriate methods of measurement are needed in order to establish treatment base-lines and

re-assessments as necessary. A global profile might be suitable for most of the population in a specialised setting but blanks or partial blanks of circumplex charts could be used for a more individualised approach. Such an approach may be necessary with early childhood autism, childhood psychosis, minimal neurological dysfunction, massive emotion deprivation, etc..

A sample circumplex chart is shown in Appendix I.

It is recommended the co-operation necessary within treatment is enhanced by explaining to the youngster his present level of functioning and a sharing of aims.

Subject, of course, to the usual warnings of unnecessarily raising a youngster's anxiety level it might be beneficial to some conditions where the majority of areas of development are acceptable, such as with some dyslexics, to focus on areas of strength as well as deficits.

In order to assist comparison at times of case-review, developmental attainments need to be clearly recorded and preferably next to past levels.

(b) Developmental accommodation is needed in order to offer a 'good-enough' and safe-enough environment to those with shakey ego-defences. Maladjusted or delinquent children who are unable to cope effectively within alternative, non-facilitating environments frequently construct an elaborate labyrinth of ego-defences. Such defences may be inappropriate in a (new) treatment setting and thus render the youngster too psychologically vulnerable.

'Accommodation' extends to as many environmental factors that impinge on the youngster as can be usefully

managed. These are listed in (c), below.

(c) Milieu components include physical attributes of the building, treatment philosophies, roles and nature of staff, choice of comestibles, etc..

Buildings that are foreboding, plainly institutional or generally unwelcoming will bring ego-defences into play thus reducing the malleability of the deviant youngster to treatment. Domestic scale in buildings and their fittings should be aimed for though some institutional compromise will invariably and unfortunately be necessary if the population extends to large-group size.

The layout should preferably be conductive to stagesequent treatment by having stage-continuity in bedrooms,
living areas and educational provision that is each in
turn self-contained. Accommodation of relatively mature
and stable youngsters within restrictive, unenriched areas
would result in sub-optimal conditions and is likely to
lead to regression or at best, non-development. Alternatively, immature youngsters exposed to a liberal, highly
stimulating environment would only internally accommodate
parts of this area and only at a personally restricted level
of perception and differentiation. Other middle-ranges
of youngsters would be accommodated between these two
extremes.

Perhaps it would, at this point, be useful to describe such a treatment setting that has been operational for a number of years (see Appendix I4 and Wilson and Evans, 1980).

For the grossly immature maladjusted child, who might well be psychologically operating at the toddler stage, a wing of Caldwell Hall was set aside, with three bedrooms. In the 'most accommodating' bedroom two, two-bedded bunkhouses were built in. These were constructed in natural timber stained a honey-colour (Georgian Oak) on the outside and painted a warm terra-cotta colour on the inside, with matching brown bedcover and curtains. The latter to encapsulate the defensible territory. These units were referred to by psychologists as 'bed-wombs'.

In the next bedroom, at the next stage, similar units were built in but with more outgoing colours (a warm orange) and one unit was without curtains. The third bedroom had two open type bunk-beds that were physically (and psychologically) sturdy doubling up as play apparatus, e.g. climbing frame, fort, etc..

At the other extreme, disregarding the Adjustment for Leaving Unit hostel, the Milligan Room was luxuriously furnished with a rich plum coloured carpet, elegant wall-lights, individual study desks, vanitory unit, expensively framed art-prints, own T.V., brass curtain-rails etc., etc.. The youngsters in this facility needed a comparitively high level of adjustment and maturity to use the facilities effectively as a springboard to further maturation, autonomy and some altruism (was expected!). Such guided altruism took place in the Clock Wing, as referred to above, where the helpers from the Milligan Room could readily perceive the differently contrasting needs and facilities of the others. One group requiring

extra 'caretakers' and the other group learning to be caretakers.

Many other aspects were planned on this continuum including; operating criteria of staff, role and use of the school's small farm, personal freedom and expectancies (see Appendix 4), behavioural goals, pace of treatment, home/residential commitments, clothing, access, activities, etc., etc..

Numerically, provision was for twelve children in the first treatment wing, six in the Milligan Room and five in the hostel with the other thirty-eight children within a range of sequential-treatment provision in between. This is because;

- (a) Those children 'fixated' at early levels often take a long time to grow, and move from the first treatment unit,
- (b) Just over half of all new children needed the initial Clock Wing provision,
- (c) Schools for maladjusted children receive many who are irretrievably damaged - e.g., psychiatrically sick, brain-damaged, gross emotional deprivation, etc., and therefore tending to remain at the lower stages of ego and/or moral development,
- (d) At the other end, most children leave the school at the higher levels of psychological development.

Because of the dynamic population, fixed provision can interrupt the flow of stage-sequential treatment, so overlap of groups has to be catered for in terms of physical accommodation and treatment philosophy.

3 : 5 EGO DEVELOPMENT AND SELF-IMAGE

3:5 Ego development and self-image

The Self-Concept

Much of the understanding we have of ego-development, differentiation and integration has grown from studies of the "self", particularly where psychologists have used the terms "ego" and "self" somewhat interchangably. The self is the "I" or "I am" and as such will represent the cognitive core of the individual.

For a thorough clarification of terms, the reader is referred to Combs and Soper (1957) and Wells (1978). Manaster, Saddler and Wukash (1977) compare ideal-self with cognitive development.

Just as the terms "ego" and "self" are frequently given common usage, so are "self-image" and "ego-identity". (Herbert, 1966). In practice "self-image" and "ego-identity" overlap and are interdependent. Clarification of the distinction may be made by quoting Fingarette (1963) in that:

... The ego is formed, albeit in primite stages, before the self achieves differentiation as a separate "I" or self-system, therefore what the ego already is, will shape the nature and strength of the newly differentiated self ...

Sound integration of differentiated field experiences will create ego-boundaries thus encouraging further differentiation, particularly interpersonal discriminations of self-other. Only further successful differentiation and subsequent integration into the self-system, will allow normal ego-development and maturity.

Successful differentiation and subsequent failure of integration, produces only inconsistent ego-boundaries between

self-other and self-non-self until a process of depersonalization exists such is seen in schizophrenia. This process is also referred to as ego-fragmentation or ego-splitting. Successful differentiation followed by failures of integration can also occur in brain-damaged individuals and this is seen most readily in children displaying specific learning disorders.

The duller or environmentally dulled individual will display weak differentiation, although the self-system will have relative accommodation for assimillation and integration. The hat of remedial education is hung on such a peg.

The environmental conditions for development of the integrated self are well documented:— Allport, (1955); Erikson, (1960); Sullivan, H. S., (1947); Thomas, (1971); Mistry, (1960); Carlson, (1958); Jersild, (1959); Kagan, (1967); Hosken and Watson, (1961), but it is interesting to note the part anxiety plays as crucial determinant in the development of the self-image and ego-identity. Empathic trading and the resolution of interpersonal conflict are established as pre-cursors of otheracceptance and recognition. This field force develops initially from mother and extends through childhood and its interpersonal experience, to the spouse and work-colleagues.

Poor differentiation or integration within this empathy trading, will be accompanied by an unsureness of self, a lack of ego-boundary.

Guntrip (1966) provides distinction between self-image and ego-identity:

^{....} A different self-image is present in, say, a studious schizoid person who avoids involvement in close human relationships and thinks of himself as an "intellectual". A self-image like this, which can be developed into a consolidated defence against unconscious emotional stress, is often mistaken for a real ego. Thus the self-image of a compulsively self-sacrificing but basically conformist individual, who really believes and insists that this is

his true self, is usually accompanied by so much tension, strain and minor illness, that it becomes apparent that it is more of a "false self" than a really healthy ego

The failure in development of a basic, stable sense of ego-identity, is the result of insecure relationships, very often basic primary relationships. The period between the birth of a child complete with its own psyche and psychical differentiation from his mother, is of even more critical importance as the child is still in a state of dependence and helplessness at the time. Mistry (1960) particularly elaborates the suggestion that emotional security with parents is essential for the development of positive self-concepts.

The fulcrum point of adolescence as it lies between childhood and adulthood is seen as a critical life-stage by Ausubel and Kirk (I977);

... There are a number of reasons for believing that the concept of self occupies a more prominent place in the individual's psychological field during adolescence, and that considerable upward revision of self-estimate and a heightened level of ego aspiration take place ...

Developmental aspects of self-concept are found in the models of Jersild (1952), Strang (1957) and Washburn (1961).

Jersild described the developing child's self-structure in relationship to physical characteristics, health, material possessions, personal relationships, school, intellectual status, social attitudes and other traits.

Strang (1957) identifies these constituents of self: the basic self, the person he thinks he is; the transitory self at the present time; the social self as others see him; and the ideal self he hopes to be. Strang relates these constituents of self to development of the person.

Washburn (1961) from the viewpoint of psycho-analysis, postulates the following six levels of self, in order of

increasing maturity: -

- (i) The Somatic-Primitive Self, concerned with the immediate gratification of needs; (Loevinger, stage I and 2)
- (ii) The Submissive-Dependent Self, involving avoidance of disapproval by submitting to others; (Loevinger, stage 2 and delta)
- (iii) Detached-Independent Self, fearing emotional involvement with others; (Loevinger's delta stage)
- (v) Inner-Controlled Self, involving acceptance of oneself and others and orientation towards self-fulfilment. (Loevinger's conscientious stage 4 and above)

Emmet (1959) found the main categories of self distinguished by children within the age-range of this study, eleven to fifteen years old to be personality, life goals, social attitudes, physical aspects, school, home and family, and material possessions. Thomas (1971) found his ten and eleven years-old subjects emphasized physical, moral, social and academic aspects of their self development. These simple self-concepts related to the child's unsophisticated world, are further elaborated as successful integration exposes a greater range of self-other situations. Thus the self-system, is continually changing, mainly as a result of environmental influences. The person is always involved in simultaneous processes of differentiation and synthesis; that is, in the normal course of events, the person not only becomes more differentiated as newer and more complex patterns of organisation are developed, but since new stimuli tend to be assimilated in such a way as to require the least amount of cognitive

reorganisation, he also tends to become relatively more simplified and integrated.

Whilst this section attempts to examine the hierarchical developmental components of ego-development, Van den Daele (1968) has extensively studied both the components and development of the ego-ideal, and as Wylie (1961) observes there appears to be little concern with the development, structure, or contents of the ego-ideal. Freud (1933, p. 87), in turn, views the ego-ideal as a component of the super-ego.

In subsuming the concept of super-ego, it is both interesting and relevant to contrast the determinism of Freud to the teleology of Adler.

... Causes, powers, instincts, impulses, and the like cannot serve as explanatory principles. The final goal alone can explain man's behaviour. Experiences, traumata, sexual development mechanisms cannot yield an explanation, but the perspective in which these are regarded, the individual way of seeing them, which subordinates all life to the final goal, can do so. (1930, 2, p. 400) ...

This is part of Adler's notion of upward striving, "the impetus from minus to plus never ends" (ibid., p. 398) and has important and obvious relevance both to the ego-ideal concept and that of ego-development.

... The ego-ideal, even when developed into norms, ethics and social ideals ... supports the ego in dealing with the inevitable disappointments and frustrations inherent in human life. In a way, it is still an ego function. However, just because it has its own contents and because it sometimes puts a distance between itself and the other organized ego functions, we can speak of an established substructure within the ego ... (Lample-de-Groot, 1962, p. 98)

The ego-ideal, as a striving substructure within the ego, is implicitly bound up with moral developmental aspects of ego-development:

... In the Loevinger (1966, 1968, 1970) and Kohlberg (1958, 1964, 1970) schemes, each ego-developmental and moral stage is characterized by certain decision rules for action or evaluation. If the ego-ideal is

understood as the goal-directing agency for the ego, Loevinger's concept of the ego encompasses, the ego-ideal, and thus the transformations characteristic of egodevelopment and moral development should characterize ego-ideal development ... (Van den Daele, 1968, p. 206)

The Kellmer-Pringle and Gooch (1965) synthesis of "stages", provides further support for an ego-development view of ego-ideal development. No studies were available for children younger than eight years of age, so the above authors adopted Havighurst's (1946) results as the basis for defining the early stages of ideal person development.

... Stage I - up to approximately eight years: parent surrogate chosen as Ideal Person.

Stage 2 - a transitional phase.

Stage 3 - up to approximately thirteen years: a fantasy, wish fulfillment, or otherwise glamorized choice ...

Stage 4 - a transitional stage.

Stage 5 - from approximately thirteen years on: ideal person is appraised realistically. Often a moral choice and in this sence it may be idealistic ... (Kellmer-Pringle and Gooch, 1965)

The ideal-person studies by Van den Daele (1968) show similarly in the results of the analysis of variance for moral judgement to the results for ego-ideal level.

... The average child progressed from Kohlberg's Level 2, naive egocentric orientation, to his Level 4, social order maintaining orientation. The similarity of Kohlberg's Level 2 to the ego-ideal Level 3, ego-ideal as conflict avoidant, and Kohlberg's Level 4 to Level 6, ego-ideal as a social agent is evident ...

This development ordering of moral judgement and ego-ideal principles parallels Loevinger's synthesis of ego transformations:-

... Loevinger's Stage 2, "impulse ridden", relates to ego-ideal Level I, "orientation to the quick and agile"; Loevinger's Stage 4 "conformist", to Kohlberg's Stage 3, "good boy morality", and ego-ideal Level 5, "one of the group"; and Loevinger's Stage 7, "integrated", to Kohlberg's Stage 6, "individual principles of conscience", and ego-ideal Level 9, "person striving for personal-social good", this general agreement concerning the nature and operational procedures, renders the ego-developmental view highly tenable (ibid.)

To summarise the important component of ego-development that ego-ideal is, can be achieved best by remembering that throughout the stage-hierarchical system of Van den Daele's is a cognitive core that increasingly differentiates by a series of logical-classificatory achievements. These approximate closely, not only with the schemes of Loevinger and Kohlberg, but also to the levels of "interpersonal maturity" of Sullivan, Grant and Grant (1957), psychological differentiation development of Witkins (1962), the integration theories of Winnicott (1965a, 1965b), Docker-Drysdale, (1968, 1970, 1974) and Balbernie (1966, 1974). The conceptual-systems viewpoint of Harvey (1961), Hunt, (1964, 1966) and Schroder (1967) also shares the cognitive ordering of such sequential development. Piaget's description of developmental cognitive acquisitions (Flavell, 1965) approximates to Van den Daele's system: -

... ego-ideal Levels I and 2 correspond to the preoperational, intuitive stage; Levels 3 through 6, the concrete operational stage; and Levels 7 through IO, the formal operational stage ...

The ten stages of ego-ideal development (Van den Daele, ibid.) are:-

Stage I : Undifferentiated incorporation of powerful or glamorous figures.

Level I : Ego-ideal as the "quick and agile". (Speed, motion, physical prowess or agility)

Level 2 : Ego-ideal as a "good little boy or girl.

Stage 2 : Naive identification with parental role.

Level3 : Ego-ideal as conflict avoidance.

Level 4: Ego-ideal as a "little-man or little-woman".

Stage 3: Social conformity to expectations and evaluations by others.

Level 5: Ego-ideal as one of the group.

Level 6 : Ego-ideal as a social conformist.

Stage 4 : Self-affirmation through internalized values and beliefs.

Level 7 : Ego-ideal as a social agent.

Level 8 : Ego-ideal as independent agent.

Stage 5: Integrated world view through reflective consideration of personal or human situation.

Level 9 : Ego-ideal as person striving for personal-social good.

Level IO: Ego-ideal as person striving for transcendent good.

Rejoices in differences.

In each of these stages, environmental impingements are recognised as being cognitively processed at the representative stage level of ego-ideal and subject to vertical decalage.

Whilst much has been said of the psychological components and affect of the self or ego, the developmental body changes, during adolescence particularly, become an important factor as an object of self-feeling and as a variation in self-concept. (see particularly, Fisher and Cleveland, 1958: Fisher, 1970: Thomas, 1971) The considerable inter-relationship of ego-development components elaborated above, emphasise the importance of body-image, as a sub-system of self-image and ego-ideal, on ego-development and its correlates of measurement.

Each stage of ego-development, according to Sullivan, Grant and Grant (1957), is defined by a crucial interpersonal problem which must be solved before progress towards maturity can occur. If the self-other problem is adequately differentiated into prime constituent parts, synthesised perspectively as a whole, it can then be integrated into the self system. The degree of field differentiation and the ability of the cognitive core of the self-system to integrate and accomodate, will determine the level of interpersonal maturity of the individual.

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Super-optimal environmental impingements can cause the utilisation of a range of protective self-system or ego-defences. The individual may resort to rationalization, fantasy, regression, etc., in order to maintain a stable state of equilibrium. These defenses are structural components of the self-concept or self-identity and serve to protect the ego, and its cognitive core of ego-identity.

Personal extremes of traumatic experience can lead to the adoption of a defensive self-cover or false-self and subsequent ego-splitting or instability.

Normally acceptable levels of anxiety promote change and development through disequilibrium until optimally "comfortable" levels of integration are achieved.

In this chapter the writer has described the centrality of ego and moral development to the deviant child's condition. In the next section the exposure of this centrality and an estimation of its importance is attempted through experimental methods.

CHAPTER 4

EXPERIMENTAL METHOD

4 : I Hypotheses

4:2 Design

4:3 Subjects

4: 4 Measures used

4 : 5 Procedures (including pilot study)

4 : I RESEARCH HYPOTHESES

Essentially this study sets out to examine:

- (I) the relationship between psychological adjustment and moral and ego development, and
- (2) the relationship between newly developed measures of ego and moral development with those of classical theorists.
- (I) In order to carry out (I), a profile attempting to evaluate depth of maladjustment had to be constructed. Well established measures of adjustment such as Rutter's (1968) and Stott's Bristol Social Adjustment Guides (1963) give cumulative scores but these are not intended to reflect depth of maladjustment. Scores of 9+ with Rutter's Questionnaire and 20+ with the B.S.A.G. are considered indicative of maladjustment.
 - The profile of maladjustment developed for this study is compared with Rutter's Questionnaire and objective recording measures used in two schools for maladjusted children.
- (2) Existing measures of moral development by Bull (1969a) and ego development by Loevinger (1970 a & b) are statistically compared with newly developed simplified measures.

Therefore, the hypotheses will be in two main groups.

4:5: I For the first of the two main hypotheses, that there will be a series of confirming correlations between personal adjustment and higher levels of moral and ego development, a working through of several minor contributory hypotheses is necessary.

Previous research by the writer (Smith, 1975) indicated a marked difference in levels of moral and ego development between maladjusted, delinquent and 'normal' children of equivalent ages. From this information the above hypothesis was formulated.

Substantiation of this hypothesis needed a viable sample of maladjusted children to be rated for moral and ego development and for these ratings to be statistically compared to ratings of adjustment. Objective numerical ratings of adjustment were simply not available so a series of rating measures intended originally to determine progress within treatment and/or as a means of flexible external control were used alongside other empirically tested methods. These measures were markedly different in method and content so if statistically compared, a measure of sameness of method was not the simple result.

In short the minor hypotheses forwarded to test the above main hypothesis fell into three sub-groups:-

- (a) hypotheses suggesting a positive inter-relationship between selected measures of a child's adjustment,
- (b) these measures of adjustment being statistically compared with methods of rating levels of moral development to test the hypothesis of a positive correlation between adjustment and moral maturity,
- (c) those same measures being statistically compared with methods of rating levels of ego development to test the hypothesis of a positive correlation between adjustment and level of ego development.

Secondary hypotheses related to the content validity and inter-rater reliability of adjustment ratings were also formulated in order to test the confidence in using such measures.

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4: I: 2 The second of the two main hypotheses was of a

positive correlation between established rating

methods of moral and ego development with measures

formulated by the writer also demanded a positive

work-through of several secondary hypothesis

leading to the main one.

The measures of moral and ego development need of necessity to be treated completely separately so the following two groups of secondary hypotheses are duplicated;

- (a) the hypothesis there will be a positive correlation between a subject's level of moral development on the writer's rating scale and on Bull's Test of Moral Development, and
- (b) the hypothesis of internal validity and inter-rater reliability of the writer's rating scale of moral development.

Likewise for the ego development ratings;

- (c) the hypothesis there will be a positive correlation between

 a subject's level of ego development on the writer's

 rating scale and on Loevinger's S.C. Test of Ego Development, and
- (d) the hypothesis of internal validity and inter-rater reliability of the writer's rating scale of ego development.

Section 4. EXPERIMENTAL METHOD

4. 2. Design

This study used a basically exploratory field study design in an attempt to test several hypotheses and to examine additional significant relationships between variables in the field situation.

4. 3. Subjects

IO5 subjects were tested but incorrectly completed tests and prolonged absence from school precluded 6 subjects from final analysis. Thus the total number of subjects was 99; 60 boys and 39 girls.

The subjects had all been ascertained as maladjusted and in need of special education in a boarding school for maladjusted children.

As the hypotheses demanded an amalgam of varied psychological adjustment, maturity and ego development, the wide age range of the subjects, from seven to seventeen years was desirable.

The length of time spent in the special school by each subject was not a constant and therefore neither ego development or adjustment was necessarily dependent on period of treatment.

The level of intelligence of the subjects was comparable to that of the general population with few subjects at the lower and higher ranges, 70 and I25 respectively, and the majority in the average ranges of intelligence. 95 subjects were tested on the W.I.S.C. and 4 by Terman-Merrill.

Using criteria established by Moser and Hall (1954), the subjects were shown to be drawn from various socio-economic

groups. This is consistent with the findings of Asuni, (1963).

During the period of research both special schools had a common philosophy, hierarchy, Director, therapeutic approach and headmaster (the writer), thus holding many situational factors uniquely constant.

4. 4. Measures

The study used the following measures:

Five measures of psychological adjustment:

- I. Rutter's Behaviour Questionnaire (Appendix 2)
- 2. Maladjustment Rating (Appendix 3)
- 3. Supervision List (Appendix 4)
- 4. Report Slips (Appendix 5 and 6)
- 5. Bolman's Index of Aggression (Appendix 7)

Three measures of stage-sequential development

- 6. Loevinger's Test of Ego Development (Appendix 8&9)
- 7. Bull's Test of Moral Development (Appendix I2)
- 8. Van Den Daele's test of Self-Image Development (the results are not included in the final study).

Three observational assessments of stage-sequential development

- 9. Smith's Observational Assessment of Ego Development(AppendixIO)
- IO. Smith's Observational Assessment of Moral Development
 (Appendix II
- II. Smith's Observational Assessment of Self-Image Development.

 (the latter was not used in the final study). (Appendix16)

4. 4. I. Rutter's Behaviour Questionnaire for completion by Teachers

The Childrens' Behaviour Questionnaire for completion by teachers was devised and developed by Rutter (1970a) in response to the need to develop an instrument

.... which could be used to discriminate between different types of behavioural or emotional disorder, as well as discriminating between children who show disorder and those who do not (ibid).

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Rutter found that similar tests in this area whilst possessing many advantages, lacked diagnostic distinction within the overall concept of maladjustment, recent validation, and were unsuitably long for use by teachers testing large groups of children. On the first point, that of diagnostic distinction, Rutter's test differentiates only between anti-social and neurotic types, albeit particularly well with 90% and 80% agreement with clinical studies, respectively.

As noted in Rutter's research the questionnaire cannot be used to pick out children with monosymptomatic disorders or indeed, certain less common disorders of a circumscribed kind such as anorexia nervosa, obtuse sexuality, conversion hysteria, some obsessional disorders, some types of depression and other situation specific maladjustments. These limitations are also common to the Bristol Social Adjustment Guides by Stott (1963) and only be overcome by using highly definitive situational or disorder specific measures and these are invariably collaborated only by clinical intuition.

There are twenty-six brief statements concerning the child's behaviour (see Appendix 2) to which the teacher has to record whether the statement "certainly applies", "applies somewhat" or "doesn't apply" to the child in question. These are given a weighting of "2", "I", and "0" respectively. This produces a range score of 0 - 52 when the teacher's scores are totalled.

Children with a score of 9 or more are designated as showing some disorder and it is this score used in the present study as one indicator of degree of adjustment.

This can only be one measure of adjustment because of the above mentioned problems of differentiation. The Bristol Social Adjustment Guides (Stott, ibid) were not used for

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parallel validation for those reasons.

Summing of particular response scores to elicit sub-scores of neurotic or anti-social was not relevant to this study.

Re-test reliability with a two-month interval between ratings showed a product-moment correlation between the total scores on the two occasions of +0.89 by Rutter (ibid).

Richman (1964) using a slightly modified version found the retest reliability over a 13 week period was +0.85.

Inter-rater reliability of four teachers testing seventy children and then four different teachers rating the same children 2 - 3 months later produced a product-moment correlation of +0.72. Richman (ibid) found a correlation of +0.70 between the ratings of a class teacher and a special subject teacher.

The discriminative power of the scale was tested by comparing the scores of children in the general population with the scores of children attending psychiatric clinics for emotional or behavioural disorders. Using a base-line discriminatory cut-off of 9 about II% of boys and $3\frac{1}{2}\%$ of girls in the general population exceeded this base-line compared with about 80% of boys and 60% of girls in the clinic samples.

ADJUSTMENT RATING 4.4.2. (Appendix 3)

The scales were devised by the writer in order to accommodate multitudinal factors not found in any other single test, to the writer's knowledge; one primary factor being that the majority of tests are intended for clinical use by psychologists and with children or subjects comparatively unknown to them.

For the purposes of this study the 'Adjustment Ratings' were scored by a "committee" consisting of a Clinical Psychologist,

Head of Care, Deputy Headteacher and Headmaster of each school. The Psychologist and Headmaster both had knowledge of all children in both schools and were conversant with case-details. The respective deputy headteachers and heads of care also had deep knowledge of the children and were able to reflect the views of their immediate colleagues. It is intended this Maladjustment Rating can only be rated by those having extended knowledge of the child. No apology is offered for this, or is necessary, as the measures resulting from this research are for use by staff in residential treatment or assessment units.

If individual treatment workers score this particular adjustment scale in isolation then a rating comparable to that worker alone is the result. This is consistent with Rutter's Questionnaire (ibid) and the Bristol Social Adjustment Guides (Stott, ibid). Should the same individual score all of the tests then these will be useful in providing a comparative guide within the particular group of children. For the Smith Maladjustment Rating a manual was not initially constructed because the writer was present during rating sessions.

However, the parameters of judgment are better linked to the constructional method and explained individually statement by statement (see below).

The Adjustment Scale (see Appendix 3) has twelve statements only because of the need to contain the period of time

of staff (committee) judgements. Twelve statements were found to
be sufficient for the measures intended purpose.

Each of the statements can yield a positive adjustment score of 0 and a maximum score of maladjustment of 4. Thus, the total score range 0 - 48 for the complete test.

Pilot studies involving a small number of children attending an ordinary comprehensive school were rated by the Head of Music, at that particular school, on the adjustment

scale. These children were subjectively considered to display "all-round adjustment" and were well known to this particular teacher. This way, nil scores and very low scores were obtained on the adjustment scale thus establishing tenability at the lowest range of scoring.

Pilot studies using eleven maladjusted children, on the point of leaving school were of value as the majority of leavers had low scores indicating good adjustment (by virtue of treatment and/or natural maturation). Two of these individuals were considered grossly maladjusted and scored high on the scale but did not reach the 'ceiling'. One child was being readmitted to a psychiatric hospital and the other child was withdrawn from the school by his parents, albeit at the child's command. Thus the scoring range appeared satisfactory, at least at pilot study level.

A cut-off point or base-line indicative of maladjustment as in the Rutter (1970a) or Stott (1963) instrument was not established as this was beyond the needs of this study.

The arrangement of the statements was randomly staggered to reduce acquiescent response set (Fisher, 1967), considered a risk, particularly when treatment workers score children who might be grossly "wearing" or conversely loveable.

As the writer took part in every rating session, interpretation and continuity was not a problem. Should the scale ever be used again and over wider usage then a manual of instruction to raters would be necessary. Though this usage is not intended at this stage. A brief guide to its definition and use follows.

Statement I General level of deviance or disturbance

This is ranked, very high (4) to nil (0). Ranking is made on a comparison with other children within the unit as it is anticipated that at any one time there will be children rangeing from those treated or recovered and no longer maladjusted to those who are beyond, or almost beyond, the resources of the unit such is the degree of overt maladjustment. Balbernie (1974) describes this particularly well.

Statement 2 Degree of disturbance experienced by the child:

as a result of own attitudes or behaviour e.g.

rejection, injuries, sadness, punishment, etc..

If the quality of the child's life is affected by his attitude or behaviour then this is rated on a continuum between a normal life of positive growth, achievement and relationships and the other extreme of a poor quality of life. The Likert scale is rated 0 (negligible) to 4 (very high). For a maladjusted child a significently lowered quality of life can be experienced in many ways; social isolation, sedation by drugs, secure treatment, very close structure and supervision, injuries sustained in fights or inconsequential acts, being scapegoated, etc..

It is clear that compound factors affecting quality of life are directly related to situational adjustment.

(Bronfenbrenner (1979), page 163).

Balbernie (1974) suggests placement of a disturbed child in a "good enough" environment and the use he makes of this (highly specialised treatment) environment provides an assessment of that child's level of ego-integration by observing what use he can make of that specialist environment.

Statement 3 Does child realise own degree of deviance or maladjustment.

If the treatment workers as a stable and mature group of adults see that the particular maladjustment of a child has an effect on the quality of that child's life then is this likewise perceived by the child? Except in certain neurotic conditions, such perceived effect is a prerequisite motivational factor to psychological re-adjustment, with or without help.

This viewpoint is described by Mischel (1973) as a "cognitive social learning reconceptualization of personality" and Achenbach described behavioural changes and adjustment as follows:

way in which people's cognitive characteristics lead them to construe and react to particular inputs ... Five cognitive social learning variables that may produce individual differences in behaviour are: The ability to construct particular cognitions and behaviours, as roughly indexed by measures of cognitive and social maturity; individual encoding strategies for categorizing events and for construing oneself and others; expectancies associated with particular stimuli and responses in particular situations; the subjective values placed on the outcomes expected; and self-regulatory systems, including plans, rules, and self-imposed standards for performance ...

Achenbach (1978)

Perceived conflict with the immediate environment <u>normally</u> causes resolution of disequilibrium through structural reorganisation (Turiel, 1977).

If the maladjusted child does not have insight (or an objective self-image) into what could be frequent and/or gross disequilibrium then the degree of maladjustment (to life) is clearly high.

If the child is well adjusted and has reasonable insight then he 'knows' the true degree of his deviance and adjustment, probably in abstract situational contexts. Particularly the effect of his attitude and behaviour on others. The range on the Likert scale is from 4 (very well) to 0 (not at all).

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Statement 4 As a treatment worker do you feel the child's condition is amenable to treatment or change

The writer has experienced a number of wholly unintegrated children referred by psychiatrists with chillingly pessimistic prognosis but within a facilitating environment (special school) and/or discontinuence, reduction or modification of medication the prognosis becomes encouraging. It must be emphasised that occasionally the disturbed child will not show clear signs of enhanced adjustment or maturity for one or two years and this must be recognised when scoring this particular stem.

Question 4 should be asked at case-reviews and if the child is not making progress, could another type of treatment unit facilitate treatment more fitting to that child? If the answer to both questions is negative then the child is likely to score high (4 is the highest) and low if the child's condition is amenable to change or no longer requires specialist intervention.

Statement 5 Length of existence of child's problem in relation to age

Normal development follows a pattern of adjustment to one style of life or level of operations until a lessening of adjustment is perceived, this disequilibrium produces the stimulus for change, growth and fresh adjustment. Thus, at varying points in a child's life they are frequently but very temporarily non-adjusted. If the non-adjustment or maladjustment to life is of more than a temporary nature then this worsens the prognosis for recovery according to the length of this period (usually in years) the problem has been with the child'. As

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^{... &}quot;the duration of disturbance must be taken into account when any behavioural item is being judged as symptomatic of a serious condition ..."

Hutt and Gibby (1959) describe childhood emotional difficulties within a developmental framework, and in terms of four main categories of adjustment problem. The first category is called 'transient adaptive problems', and includes the temporary disturbances referred to above. The second category is called 'persistent non-adaptive problems (or persistent maladjustment) brought upon by a more or less permanent incapacity of the child's ego in everyday commerce, akin to a mild personality disorder. The third category is called 'extreme persistent non-adaptive problems' and here anxiety is so severe and conflict so great that the ego loses its capacity for harmonious and integrated action resulting in a state of extreme maladjustment. The fourth category of problems is called 'constitutional' problems, and this includes behaviours that are primarily due to physical factors present at birth, or occuring after birth; particularly neurophysiological defects. It is the latter categories that represent the more intransigent forms of maladjustment.

An important finding by Langner and Michael (1963) is that no single stress or specific combination of stresses is nearly so great a statistical risk to adult mental health as in an accumulation of stressful factors in childhood, the risk being directly proportional to the number of such factors. Therefore, with regard to the length of existence of the child's problem, his problems must also be compared with continuance, or otherwise, of stressors.

Studies (see Escalona and Heider, 1959; Kagan and Moss, 1962; Robins, 1966; Rutter, 1970(b)) that show up the development of children over long periods of time, suggest that there is only a modest correspondence between many specific traits seen during infancy and early childhood and adult life, although overall trends enable one to identify some stabilities or continuities of personality traits.

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Statement 6 Dependency on others (for support, care, control, protection, etc..)

A degree of personal autonomy is one criterion of adjustment when it refers to the extent the individual is capable of independent or self-directed behaviour, consistent with chronological age. (see Rheingold and Eckerman (1970). The child can become independent only after he has learned that he can depend on his parents' acceptance, approval and support. If his dependency needs are frustrated, he may lack sufficient support and nurturance to progress successfully through the experiences culminating in development of independence. Many maladjusted children (Herbert, 1974 and 1978; Ausubel and Kirk, 1977) and delinquent children (West and Farrington, 1977) have not had this level of nurturance and consequently remain dependent, in varying degrees and styles.

The anti-social, aggressive type of child is covertly dependent on adult control to avoid harm to others and the full consequences of his own actions. Children who are inconsequential or are self-damaging are dependent on the safe restraints by others. At the other extreme of child behaviour (and here it is advantageous to refer to Becker and Krug's circumplex model of child behaviour(1964)), with the child who is fearful or withdrawn or excessively compliant, sensitive support is needed and here the child may well perceive his independance on others.

Children suffering from gross psychiatric or organic disorders will require proportionally greater support from other people.

Statement 7 Degree of problem to parents

(even though parents may not be able to perceive the problem).

A child is recognised as maladjusted or delinquent if
his attitude or behaviour seriously affects his own life
or that of others. The 'others' are often, though not always,
the parents.

Sometimes the complexity of the child's attitude is beyond the comprehension of the parents, or parent, and thus the child is without appropriate guidance. Parents may not accept or perceive the child is not well-adjusted if they are not so themselves, or that the child is delinquent or anti-social if they are themselves and they form part of an amoral sub-culture.

Because the problems some parents experience with all of their own children have long been experienced these may be regarded by them as typical for all families.

In scoring this statement, the scorer must take an external and objective view of the family dynamics in play.

Where a child has a devastating and profound effect on the parent/s or family functioning, this may be scored as 4 (very great) on the Likert scale. Conversely where the child's adjustment is such the parents are able to operate conventionally the score will be toward the zero end of the scale.

Statement 8 Degree of problem to staff

(in terms of managerial difficulties, skills training, socialisation, frequency of crises, manipulation, degree of supervision, etc..)

The Likert scale scoring is based on a range between 0 (negligible) for the child who is well adjusted, reliable, sensible and reasonably self-directive, again, in terms of chronological age. A child scoring high (maximum 4, very great) is likely to demand close supervision because of the child's gross need for control or support.

It will be appreciated that among residential establishments for children, public boarding schools will have minimal staff ratios whereas at the opposite extreme clients of secure and semi-secure treatment may have a staff-child ratio twenty (or more) times more concentrated thus reflecting the need for highly skilled and structured management with the more troubled and troublesome type of child.

Statement 9 Rate of maturation

There is much evidence that where maturation is normal or super-optimal the child has successfully mastered everyday commerce with life. Children lagging in maturation are much more frequently maladjusted. See particularly Herbert (1974), Levi (1975), Smith (1975), Serban (1978) and Wyne and O'Connor (1979).

At one extreme of the continuum (scored as 4, ...) on the Likert scale will be undifferentiated and unintegrated children who may be psychotic, autistic, brain-damaged, etc.. The child showing healthy psychosocial development to the point where this facet is not considered a problem will be zero rated.

At this point in describing the construction of the 'Adjustment Rating' it will be realised how the rating score can be affected by successful treatment strategies.

Statement IO Is the child physically or mentally handicapped (permanently and in terms of day to day demands)

By definition, a handicapped child is one who suffers from a disability which, because of its nature or degree, places him at a disadvantage as compared with normal children in the same circumstances. This disability must be accepted as a fact and therefore it leaves the handicapped child open to the influence of a greater range of potential stressors. Each

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developmental milestone, each life-stage such as entry to primary and secondary school, puberty, leaving school, dating, etc., will be critically more difficult in adjusting to because of the child's handicap.

Chazan (1964) and Yule (1970) found a high proportion of maladjustment in slow-learning children, Williams (1973) found substantial adjustment problems in blind children, and Reynell (1973) with physically-handicapped children. Kendall (1957) lists many examples of maldevelopment and maladjustment amongst deaf children, Kell (1973) with partially-sighted children and thus it is suggested physically or mentally handicapped children are more disposed toward problems of adjustment (Wyne and O'Connor, 1979).

Statement II Is child liked by staff

Workers directly involved with the treatment of deviant children might be expected to be kindly disposed to children in general and conversely, those adults who are not so disposed toward children will not remain associated with deviant children for an extended period. Thus the majority of treatment workers remaining will be tolerant toward a wider range of atypical behaviours and not allow this to mar liking for all but a few children.

A child displaying warm, honest, helpful characteristics who is socially well-balanced will invariably be unanimously liked by staff (thus scoring 0 on the Likert scale). Children who by virtue of their continuously acid aggression, dishonesty and non-malleability are sometimes thought by staff to be beyond their coping capacity and would prefer the child to be (usually incarcerated) elsewhere. Such a child would achieve a maximum score of 4.

Statement I2 Delinquency outside of parental or staff supervision

... The parents whose children become conscientious are likely to be those with the greatest warmth of affection and the greatest firmness or consistency - not severity - of discipline ... (Getzel, 1969)

However, as we see from Wright (I97I) and West and Farrington (I977) deviant children are such because of the lack of such adequate patterns of parenting and thus have little conscience or self-regulating behaviour. The acquisition of a conscience proceeds from the state of anomy through heteronomy (Bull, I969a) and those children without a properly formed conscience functioning within the stage of heteronomy will invariably be guided by adults. In the absence of adults the framework of heteronomy is absent and children will use their most accomplished stage, that is a stage lower than heteronomy.

A conscientious or self-regulating child will be able to conform comfortably within the mores of society thus displaying adjustive patterns to everyday life. Similarly, such a child will invariably not be termed delinquent.

4:4:3 SUPERVISION LIST

The Supervision List is a form of social control, incentive for pupils and a continuing rating used in both schools.

A copy of a handout issued during the induction training course for new staff is shown overleaf. (In appendix 4)

4 : 4 : 4 REPORT SLIPS

Report Slips are used by all teachers and care-workers in both schools in order to record all particularly significant aspects of the child's treatment.

These are also used in a behavioural context being rated daily with the cumulative evaluations individually shown on a 'behavioural targets' board. In the mechanics of evaluating and displaying these evaluations senior staff are informed of individual and group occurences and trends.

Particulary significant reports are marked for transferance to the child's file.

Copies of handouts issued during the induction training course for new staff are shown overleaf. (In appendix 546)

4:4:5 Bolman's Index of Aggression

Bolman (1974) provides a framework and perspective for viewing aggressive and violent behaviour. The table (Appendix7) provides a rough outline of the main developmental modifications encountered, for example, in the stage-transitions in anger between a howling newborn and a sarcastic adult. As is generally true in development, the major changes occur early in life and involve progressive differentiation and integration of relatively primitive emotional states.

The overlap in age periods is not intended to be exact since this is not possible. Rather, it reflects the co-existence of developmental stages, with more mature patterns gradually replacing the less mature. As in other conditions, illness or stress may cause regression to earlier stages.

Bolman (ibid) notes:

there are a number of resemblances between the schematic outline of the table and those of other authors who are concerned with other aspects of development such as reality testing, coping mechanisms and psychosocial and psychosexual development. Indeed, accurate understanding of the meaning of a given aggressive action in a child must include all of these areas ...

The main tenets of stage-sequential cognitive development as outlined in this study, ego and moral development, rely upon the extent of differentiation and integration to implement stage representative attitudes and behaviour. In the context of aggressional development the lack of differentiation and integration would only leave primitive methods of coping. Alternatively, highly situation-specific differentiation and integration could avoid the need for aggressive responses, sublimate the aggression or direct it with more devastation.

In evaluating the children in this study the evaluators first of all noted the range of aggressive response for each

child and finally the usual level of responding. With grossly disturbed children the range was considerable but it was always possible to get a consensus of opinion as to the usual level of response. Indeed, perhaps it is only with maladjusted children one can see such inconsistency with normative expectations related to chronological age.

4: 4: 6 Loevinger's Test of Ego Development

The Ego Development Test (Loevinger and Wessler, I968, I970 a and b) consisted of thirty-six items to be completed by finishing off a sentence. Each sentence response was assigned to one of the qualitative stages, already fully described earlier in this study, according to the manual (Loevinger and Wessler, I970 a and b). From these thirty-six responses a single total protocol rating (TPR) was assigned, according to a set of "ogive rules" which take account of the total configuration of the distribution of item ratings. The TPR scores assigned subjects to one of seven stages of ego development, which included transitional levels. (e.g. "Stage" \(\Delta / \)3 would be between Stage Delta and Stage 3:Stage Delta being itself a transitional stage).

The metric range was used for the span of the theory, which in the case of ego development includes ten stages and sub-stages up to Loevinger's Level 6, although the uppermost developmental levels were not expected to be encountered with children. Indeed Loevinger (I970a) suggests that Level 6 is rarely, if ever, encountered in adults. Similarly Hunt (I971, p. 36) in working with persons in the twelve to eighteen years age range, expressed reservations about the usefulness and occurrence of patterns abovehis Stage 2 for this age group.

4:4; 7 Bull's Test of Moral Development

Bull's Test of Moral Development (1969a) was scored over four moral domains, value of life, cheating, stealing and lying. Each of these areas elicited a varying number of responses, in practice until the examiner was satisfied at the level of response, having elicited responses from a number of directions in a projective manner. These responses being

averaged to produce a sub-area score. The four sub-area scores were then added and averaged to give a moral development score. Initial test scoring was in accordance with Bull's (1970a) instructions. The averaging process can effectively place S's in transit between stages, thus few pure types were shown, unless one grouped the scores.

Adaption of the test-scores for statistical comparison was achieved by allocating the averaged raw scores into divisions on the continuum between the lowest and highest scores obtainable on the test.

4: 4: 8 Van Den Daele's Scheme of Ego-Ideal Development

The Ego-Ideal development level of a child is elicited from a rated, open-ended discussion with the child according to a schedule devised by Leland Van Den Daele (1968, p. 247). The schedule views ego-ideal as conceived as a set of goals (ibid, p. 194) classed into five domains: the occupational, material, social, community and body content areas (ibid, Appendix A, p. 247).

The occupational goals deal with productivity, material goals with physical environment, social goals with interpersonal relations, community goals with society, and body goals with personal appearance.

In James's scheme (James, 1890), the material and body content areas would be subsumed by the material self-ideal and the social and community content areas by the social self-ideal.

These domains sample areas to which the society expects or will expect the child to make some adaptation or response, creatively ${\bf r}$ otherwise.

These three instruments were developed in an attempt to supply treatment workers with a simple, straightforward tool for assessing development in the domains of ego, moral and self-image development. Whilst Loevinger, Kohlberg, Bull, Piaget and Van Den Daele have presented well-researched theories and concepts of quantification, these invariably presume a prior knowledge of child development theory and a thorough immersion in their own respective theories. Unfortunately it is not realistic to expect this facility from the greater majority of workers involved in assessment and treatment of deviant children and therefore the real need to distil methodology into a more readily palatable form is essential.

The majority of troubled and troublesome children are referred because of an inability to function normally. Normally, that is, in age-appropriate terms according to society's expectations.

A secondary but nevertheless important requirement is that any instruments to be used provides both an introduction to and some knowledge of developmental domains for the user.

In order to provide a more globally functional developmental description of the deviant child three instruments were considered to be necessary, these being as follows:

4: 4: 9 Smith's Observational Assessment of Ego Development

It was found in previous research (Smith, 1975) that maladjusted children experience ego dysfunction and diminished ego development, thus, some measurement of the deviant child's level of ego development is deemed desirable.

Delinquent children too were found to have low levels of ego development (Smith, 1975).

Having complied with society's differential model of certain children being labelled maladjusted and others delinquent the writer wishes to mention his disagreement with these arbitary distinctions particularly in view of the considerable f actors both "typologies" have in common (Asuni, 1963) and that such labelling serves little in effectively treating the child's basic problems (Hoghughi, 1978).

The instrument itself is extended over ten levels of ego-development inclusive of 'pure' stages and sub-stages of stage transition. At each level ten characteristics consistent with the particular stage under consideration are listed.

Scorers are instructed to "tick only those characteristics markedly in evidence". The ticks are expected to form a 'cluster' of developmental bias except in the most disturbed subjects (e.g. psychotic types) when a scattered response may be evidenced. The 'clustering' is more readily observed when the ticked responses are transferred to the master score sheet, 'Index of Development'. This is a IO x IO matrix, that is, ten statements for each of ten levels.

The statements themselves are formed from

- (i) the writer's previous research (Smith, 1975);
- (ii) various developmental theorists (the majority of which are listed in the bibliography but include Loevinger, Kohlberg, H. S. Sullivan, Piaget and Erickson in particular);
- (iii) practical observation and experience gained by the writer in working with deviant children over a number of years.

Thus, rigo rous statistical evaluation of these statements in relation to various other measures, is essential to this research.

A lengthy exposition of the one hundred statements is beyond the parameters of the study and would each of necessity be lengthy in view of the varied source of statements. The reader is referred to earlier definitions contained in this study and also to the bibliography.

An example of the test instrument and the master score sheet is included in the appendices. (Appendix IO)

4: 4: IO Smith's Observational Assessment of Moral Development

A good proportion of deviant children are referred for assessment and treatment because of the affect of their conduct or attitude on others. Morality is essentially concerned with the extent of harmony and well-being between people and therefore if a child is a frequent source of disharmony the child's level of moral development is open to question. This is particularly true of the child classified as delinquent and Smith (1975) found the level of moral development amongst delinquents to be particularly low (and frequently at a plateau of development) when compared with that of 'normal' and maladjusted children. Poor parenting, parental models and life-style are consistent with the delinquents low level of moral development (Stott, 1960; Deutsch, 1967; Wright, 1971; Graham, 1972; Mays, 1972; West & Farrington, 1973 & 1977).

The instrument is ranged over seven levels of moral development inclusive of 'pure' stages and stages in transition. At each level ten characteristics consistent with the stage under consideration are listed. Again, as in the ego development instrument, the scorers are instructed to tick only those characteristics <u>markedly</u> in evidence. Likewise, the ticked statements are expected to form a cluster indicating the main or central stage of moral development of the child being assessed.

With regard to the pattern of clustering or of stage representation it is worth considering the frequency of stage responses as reported by Kohlberg and Kramer (1969). At the age of ten years, the types of judgement used are in descending order of frequency of use; that is, stage one responses are most frequent, followed by stage two, etc.. By the age of thirteen years, the frequency of stage one and two responses has declined very considerably, while the frequency of stage six responses has increased a little. Thus at age thirteen, we have the following sequence of frequency of use of stages:

- 4 - 3 - - - 5 - 2 - I - 6. By the age of sixteen years, stage four and five responses have further increased with stage six further used.

The compilation of the statements (seventy) is consistent with the comments made in section 4:3:9, above, and for those reasons a rigourous statistical examination of these statements is demanded.

An example of the test instrument and the master score sheet is included in the appendices. (Appendix II)

4:3: II Smith's Observational Assessment of Self Image Development

An individual self-image is considered by the writer (and many other theorists) to be central to a person's psychological functioning and mental health. Thus, as a cornerstone of psychological development the deviant child's self-image calls for developmental assessment as an indicator of developmental deviance and subsequent treatment needs. However, although the test instrument was constructed with ten statements for each of ten stages (see appendices) the instrument was not used and consequently not statistically validated. The

intention was to statistically compare the scores (or levels) from this instrument with scores (or levels) obtained from using Van Den Daele's schedule of ego-ideal development but during practice use with Van Den Daele's schedule in pilot studies the method was considered by the writer to be too open-ended and subjective. As the main emphasis was to have been to compare the observational instruments scores to an empirically derived test the inherent subjectivity experienced mitigated against continuance toward rigourous statistical comparison.

A secondary reason was that the overlap of concepts with ego development was too great. Some overlap, as with moral development, is desirable to facilitate global coverage, too much overlapping of concepts between domains would render statistical interpretation suspect and the need for a separate test instrument sterile. (Appendix I2)

4 : 5 : I EXPERIMENTAL PROCEDURES

As the research primarily attempted to compare an untried method of observed developmental assessment with empirically derived and well tested methods of ego and moral development, tests had to be carried out simultaneously in order to centre on one brief period of the child's life and development.

A second aim was to compare five indicators of degree of maladjustment with a child's developmental levels in order to investigate the relationship between these two domains.

Thirdly, the previously untried measures of ego development, moral development and adjustment had to be scored simultaneously (for reasons of a child's ongoing development) by treatment workers and the writer in order to investigate inter-rater reliability.

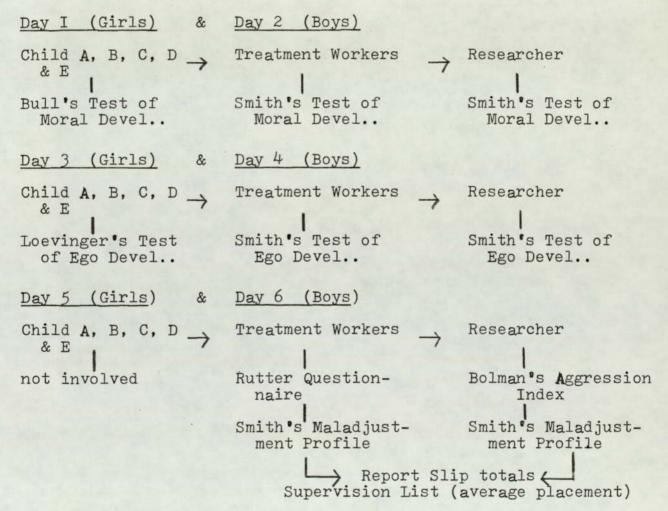
However, although the childrens' ongoing development dictated that all evaluations were conducted within the briefest period of time, other factors mitigated against this. The 4 - 6 hours needed for evaluating the adjustment and development of each of the IOO+ subjects precluded testing in one swoop. Also as the time and willingness of other treatment workers was needed one could not expect and therefore plan for instantaneous and complete co-operation. In order to overcome these problems, the children were evaluated, starting with the more disturbed and/or immature maladjusted children in order to discourage cheating or possible practice by other children.

The writer rearranged his own duties so that staff at the school for maladjusted girls and those at the school for maladjusted boys were worked with simultaneously. In addition, testing was also able to be undertaken for extended periods by the researcher although the length of time spent with each child

was limited in order to maximise the child's interest and concentration.

It was extremely fortunate that both schools had a pair of temporary classrooms that were absolutely identical thus restricting situation-specific subjectivity in the child's responses. Both classrooms were Portakabins with identical outside and inside decor and fitted with "Cruickshank's" booths. The walls were temporarily cleared of educational display material in order to render them stimulus-free.

The testing was carried out in the following order:-



After the writer had caught up with his duty rota (this allowed time for 'slower' staff to complete material) the above cycle was repeated with 5 - 7 more girls and a similar number of boys i.e. approx. twenty days of testing.

The results were then evaluated (blind) and tabulated for

each group of children as they were tested thus further saving time.

4:5:2 Pilot Studies

A practice run by the Treatment Workers to be involved in the main investigation was necessary in order to effect an introduction to evaluation of the writer's tests of ego and moral development. As a clear half-term was needed for the main investigation in order to average the childrens' "supervision list' placings over a period common to all subjects and to total the report-slip evaluations over such a period, pilot-studies were carried out in the second half of one half-term before the main investigation. This also allowed any modifications to be made, if necessary, to the tests during the intervening holiday period. A further reason for this precise timing was to allow staff to pilot-study children coming up to leaving, their replacements forming part of the final sample.

Pilot studies involving Loevinger's Test of Ego Development and Bull's Test of Moral Development were not necessary because of their extended use in the writer's previous studies.

4:5:3 The Main Study

Application of specific measures and scoring method

Bull's Test of Moral Development

Administration of the moral development test

This test consists of four areas of moral importance, the value of life, cheating, stealing and lying. In Bull's book (1969a), each of these moral areas has a series of pictoral scenes intended to elicit a moral response from the subject. For instance, structured comment on what the subject would do with regard to value of life is invited after showing the

subject a pictoral depicting a person splashing about in a lake in bleak countryside, with the word "help" written near to the unfortunate person's head.

Structured questions include reasons why the person should or should not be rescued and the reasons of an animal instead of a person is also compared.

Such semi-projective questioning is continued until the tester is confident that the responses are scored at an appropriate level.

A specimen test record form is shown overleaf. Scores on the basis of I point for anomic responses, 2 for heteronomous responses, 3 for socionomous responses and 4 for autonomous responses were noted during the course of interviewing and averaged later for each of the four sub-areas. Later the average sub-area scores were averaged to give a composite level of moral development.

Half-scores were given when a subject's responses were indicative of two overlapping levels of judgement. Thus heteronomy (2) might be overlapping with socionomy (3) and so a score of $2\frac{1}{2}$ would provide a more accurate assessment. There is also the strong tendency when using half-scores to be less subjective in interpreting responses.

The practice gained during previous studies enabled a satisfactory standard of marking to be accomplished fairly readily and from then on marking was carried out as the interview took place. Confidence in marking also needs to be the result of acquired knowledge of conceptual and moral development in general as the responses are not stereotyped.

The cheating situation elicited a response from a pictoral depicting two school children sitting next to each other at

a desk in a classroom. One pupil appears to be looking towards the other. Is he looking at the other pupil or his neighbour's work?

The stealing pictoral depicts a pupil standing near a brief-case and some coats in a cloakroom. He is all alone. What is he doing or likely to do?

The lying pictoral depicts a paternal and a maternal person who may be interpreted as inquiring parents, teachers or others. Questions concerning "acceptable" reasons for lying probe this area.

Open-ness and co-operation invariably experienced, assisted no doubt be the anonymity the code system offered plus the tester's assurance that answers would not be revealed to their teachers or parents and did not affect their present placement. Indeed, the frankness and novelty of the answers seemed a sad reflection of the binding heteronomous situation for most of them.

The average length of interview was thirty to fo rty-five minutes, as with Bull, but the disturbed, defensive or backward, or children with speech or vocabulary limitations, took about an hour sometimes.

Loevinger's Test of Ego Development

Loevinger's Ego Development Test is administered according to her test manuals (1970 a and b). The manuals themselves provide a comprehensive background to the concept of egodevelopment indeed:

... studies with the scoring manual have shown it to be quite reliable regardless of amount of previous training of the raters above a certain self-taught minimum ... (p. 55)

Loevinger regards the manual as a self-teaching course which

requires one or two month's study (p. IIO).

The instructions to the subject are not on the specimen test papers in the appendices so these are reproduced below:-

Now I would like you to fill out this sentence completion form. You will see that these are incomplete sentences. Please finish each one. Notice that there are two pages; please make sure you have completed each one.

Responses to be used by the experimenter if subjects request further help in completing the form:-

Please finish the sentence in any way you wish (or)
There are no right or wrong answers.

(In answer to the question, "Who is 'he'?"):
It can mean anyone (or)
Just think of it as anyone you wish.

The scoring of test responses was more efficiently carried out if one question only was scored at any one time, through a batch of test papers. Thus one could become particularly conversant with the topic in question and with various levels and type of response.

The 36 stems each to be completed as a single sentence had each response assigned to one of the qualitative stages already described, according to a manual developed by Loevinger and her co-workers (ibid). From these 36 responses a single total protocol rating (TPR) is assigned, according to a set of "ogive rules" which take account of the total configuration of the distribution of item ratings.

Both above measures were administered to all subjects by the writer. Scored examples of these measures are included overlead

SMITH OBSERVATIONAL ASSESSMENT OF MORAL DEVELOPMENT

These measures were intended to take the place of measures similar to those of Bull (ibid) and Kohlberg (1963, 1964) for treatment workers not conversant with classical theories and stages of moral development. In addition, because of educational, coping and concentration problems often experienced amongst deviant children, an observational framework was considered to be more objective particularly in view of the number of statements under consideration, i.e. ten statements for seven levels.

It is suggested that ten statements at each level of development increases definition of each stage.

The rater simply ticks the statements that are <u>markedly</u> true for the child under observation with these scores transferred to the master score sheet "Smith Index of Development".

The number of ticks per level is marked in the right-hand column (B) and the column totalled at the bottom.

Column A is ticked when a level is used, the number of levels used being totalled at the bottom.

B divided by A gives the MD score, preferably expressed as a decimal (or percentage).

This computational method accommodates raters who may be too parsimonious with ticks or alternatively, too generous.

All children were scored by teachers and separately by the writer to test inter-rater reliability.

SMITH OBSERVATIONAL ASSESSMENT OF EGO DEVELOPMENT

Loevinger's sentence-completion test of ego-development has been tried with maladjusted, delinquent and normal children by the writer (Smith, 1975) but the method requires considerable

study (Loevinger and Wesler, 1970 a, page xii), indeed far more than could be expected from the greater majority of workers involved in child assessment and treatment. This method was, as the above test of moral development, intended for use by any professional adult who has known the child for at least a few weeks. Thus a residential setting would elicit fuller observation of the child.

Administration and scoring of the test is the same as for the moral development test (above) except there are ten levels or stages for this test, i.e. ten statements for each of ten levels, totally one hundred statements.

All children were scored on this test by teachers and by the writer in order to test inter-rater reliability.

RUTTER'S CHILDRENS' BEHAVIOUR QUESTIONNAIRE

This was rated by the senior teacher of the school for maladjusted girls on all pupils and the maladjusted boys were rated on this questionnaire by the senior teacher of the school for maladjusted boys.

Completed questionnaires were scored by the writer using a home-made stencil which ensured blind scoring and greater scoring speed.

Scores were left in their original form.

SMITH'S ADJUSTMENT PROFILE

The twelve statements contained in this instrument were scored 0 - 4 on a Likart scale by the Head of both schools (the writer), and the senior teacher from each school.

When totalled, by the writer, the scores were left in their original form, i.e. 0 - 4 for each statement over twelve statements gives a range of 0 - 48.

BOLMAN'S AGGRESSION INDEX

The research by Bolman (1974) and the resultant index were discussed by two committees of four people, that is the head of both schools (the writer), a clinical psychologist to both schools and the respective deputy-heads and heads of care at each school. Each child was then rated, by agreeing an average, on the index.

The child's final score being quoted as a numerically graded level of aggression.

REPORT SLIPS

The total evaluation of report-slips for each child over a six-week period was provided by the deputy-head of each school. In both schools the most badly behaved children accumulated a much higher number of incident reports and the resulting evaluation (see overleaf) was invariably high.

Well adjusted, but also withdrawn, children scored low over this period.

SUPERVISION LIST

The level on each school's 'Supervision List' for children included in this study was noted at the half-way point of the half-term.

The supervision list is graded I - IO with more disturbed or disturbing children at the lower range I - 3 and the more adjusted children at the upper range 8 - IO.

CHAPTER 5 RESULTS AND CONCLUSIONS

5 : I Results

5:2 Conclusions

5:3 Indications for Further Research

5 : I RESULTS

The results will be elaborated according to the two main hypotheses.

5: I: I Before examining the resultant relationship between either moral or ego development and adjustment, the strength of the adjustment ratings adopted needs to be critically examined.

The Rutter Children's Behaviour Questionnaire as detailed in section 4:3 of this study was never intended by its constructor to be an objective rating scale of depth of maladjustment but a score of nine or more is <u>indicative</u> of maladjustment. The sample of children rated thus:-

TABLE II	N	Mean	S.D.
Rutter Children's			
Behaviour	99	19.34	7.48
Questionnaire			

In terms of Rutter's norms (1970a) the sample was clearly maladjusted with a sufficiently wide standard deviation of scores to suggest some children were substantially more and also less maladjusted than the mean score.

Having used this one externally and empirically validated "measure" of adjustment to the limits of its intended use it remains to examine the rating scale constructed by the author in relationship to Rutter's Questionnaire and other adopted measures. The Smith Adjustment Profile (SAP) was found to have similar mean scores and standard deviation to the Rutter Questionnaire ratings, though admittedly this was not by design.

TABLE I2	N	Mean	S.D.
Rutter Children's Behaviour Questionnaire	99	19.34	7.48
S.A.P. rated by teachers	42	21.64	6.65
S.A.P. rated by the writer	97	20.86	7.62

The strength or loading factor of each of the twelve statements within the S.A.P. was statistically examined by extracting them one by one for <u>all</u> subjects rated and measuring the numerical difference between the subjects final rating over twelve statements with the remaining eleven statements. The resultant correlations were as follows.

TABLE 13		r	<u>s</u>
Statement	I	0.7572	0.001
"	2	-0.0434	0.397
	3	0.6313	0.001
"	4	0.7134	0.001
"	5	0.3074	0.028
	6	0.5373	0.001
"	7	0.6019	0.001
. "	8	0.7785	0.001
**	9	0.7868	0.001
"	IO	0.4466	0.002
10	II	0.1971	0.115
"	12	0.4087	0.005

This computer analysis was the first to be carried out and the wisdom of this was shown by the immediate exclusion of statement 2 because of its negative correlation and poor significance. Thus its discriminatory value was nil and did not warrent inclusion. Statement II suffered an unacceptably low correlation particularly when significance was also considered. After the exclusion of this statement also, all

remaining statistical analysis used the revised scores calculated over ten statements.

The resultant S.A.P. correlated with other measures as follows:-

	S.A.P.					
TABLE 14	Rated by teachers	Rated by the writer				
	<u>r</u>	<u>r</u>				
Rutter Children's Behaviour	0.5574*	0.4060 [*]				
Questionnaire						
Supervision List	-0.4598*	-0.7115*				
Report Slip totals	0.3000	0.2329				
	s 0.027	s 0.0II				
Bolman's Index of Aggression	-0.5254*	-0.5457*				

* significant at 0.00I level

The strong positive correlation between Rutter's Questionnaire and the S.A.P. is probably as high as one can reasonably
expect between two such tests. This confirmed relationship
substantiates the efficacy of the S.A.P. particularly as the
S.A.P. ratings by teachers were higher than by its constructor,
the writer.

Healthy correlations between the 'Supervision List' gradings and the S.A.P. also strengthens the validity of the S.A.P. This demonstrates the higher a child is on the Supervision List, (see appendices for fuller details) and thus showing the need for lower structured supervision, then his level of adjustment is commensurably higher. The correlation obtained between S.A.P. rated by teachers could have approached those of the writer if the Supervision List in the school for maladjusted girls had been operational for longer than two terms thus establishing tighter operational norms.

Similar operational difficulties occured with report slips but even so the results suggest more rigourous completion of report-slips would not necessarily yield more acceptable correlations because of the very nature of what is recorded.

Bolman's Index of Aggression shows an interesting connection, via the strong correlation and close scoring, between developmental abilities in dealing with an individual's aggression and adjustment. That is, the results confirm the adjusted person's abilities to contain or divert aggressive arousal whereas the maladjusted person reflects aggression in immature or more primitive ways.

In summary, the measures of adjustment constructed and/or adopted were found to be valid, with the possible exception of report-slips, and thus are capable of being statistically compared with measures of moral and ego development.

Moral Development

Two measures of moral development were compared to a child's level of adjustment, Bull's Test of Moral Development (1969a) and Smith's Observational Assessment of Moral Development (S.O.A.M.D.).

The validity of S.O.A.M.D. (and S.O.A.E.D.) forms the second main hypothesis. The following table shows resultant correlations between measures of moral development and measures of adjustment (or maladjustment).

N	Bull's Test of loral Development	S.O.A.M.D.	S.O.A.M.D.
	lorar beveropment	rated by teachers	rated by the writer
S.A.P. rated by teachers	-0.2II3 s 0.090	-0.4196 s 0.003	-0.3649 s 0.009
S.A.P. rated by writer	-0.3632*	-0.4512**	-0.6543*
Super- vision List	0.5299* N-99	0.5467* N-95	0.6357* N-60
Report Slips	-0.0893 s 0.190 N-99	-0.3874** N-95	-0.4453**
Rutter Children's Behaviour Question- naire	-0.1486 s 0.071	-0.1341 s 0.097	-0.2917 s 0.012
Bolman's Index of Aggression	0.3172*	0.4836 [*]	0.7632*

Those measures of adjustment having a definite developmental component in them, as detailed earlier when discussing the Supervision List and Bolman's Index of Aggression, correlate strongly with the measures of moral development. However, straight measures of maladjustment (S.A.P.) and behaviour (Rutter's Questionnaire) correlate much more weakly, thus the first main hypothesis that there will be a series of confirming correlations between personal adjustment and higher levels of moral development was only tentatively established.

The other half of the main hypothesis, comparing ego development with levels of adjustment produced the following results in evidence:-

TABLE 16			
	Loevinger's S.C.	S.O.A.E.D.	S.O.A.E.D.
	Test of Ego	Rated	Rated
	Development	by teachers	by writer
S.A.P.	-0.3675	-0.4548**	-0.4143
Rated by	s0.008		s 0.003
teachers	N 42	N 42	N 42
S.A.P.	-0.5425*	-0.4896*	-0.6887*
Rated by	N 97	N 95	N 60
writer			
Super-	0.7499*	0.5881*	0.5978*
vision	N 99	N 60	N 95
List			
Report	-0.4453**	-0.3011	-0.2632
Slips	N 60	s 0.002	s 0.02I
		N 95	N 60
Rutter			
Children .	s -0.3485*	-0.0741	-0.2297
Behaviour	N 99	s 0.039	s 0.039
Question-		N 95	N 60
naire			
Bolman's	**************************************	a lead ¥	0 (00!X
Index of	0.5816*	0.4794*	0.6924*
Aggression	N 99	N 95	N 60
WEET COSTO	The second secon		

* significant at 0.00I level

Unlike measures of moral development, measures of ego development correlated more substantially across measures of adjustment thus suggesting a clear difference in content between the two developmental measures.

S.A.P. was strongly negatively correlated with ego development and the Supervision List ratings and Bolman's Index of Aggression were both strongly positively correlated with ego development. Thus with S.A.P. the higher the rating of maladjustment the lower the level of ego development.

Conversely the higher the level of ego development the higher the child is on the Supervision List (greater freedom) and better in terms of handling aggression.

The lower correlations between Rutter's Questionnaire and measures of ego development can only question the practical utility of Rutter's Questionnaire.

Report-slips show a higher negative correlation than with those found against moral development and this suggests reportslip totals are a better indicator of how well a child might manage than how he actually manages.

In consequence, the second half of the first main hypothesis, that there will be a series of confirming correlations between personal adjustment and higher levels of ego development was soundly established.

The <u>first main hypothesis that there will be a series of</u>

confirming correlations between personal adjustment and higher

levels of moral and ego development was found to be substantially
validated.

5: I: 2 The second of the two main hypotheses was concerned with comparisons between empirically established, neo-classic measures of moral development and ego development and those formulated by the writer.

The utility of the writer's own measures, S.O.A.M.D. and S.M.O.A.E.D. were both to be separately compared with,

- (a) established measures,
- (b) measures of internal or structural validity and inter-rater reliability,
- (c) established measures for consistency against other test ratings.

(b) and (c) will be considered after the main hypothesis has been dealt with.

Moral Development

The S.O.A.M.D. was directly compared with Bull's Test of Moral Development for reasons expanded upon in Section 4.3.

TABLE 17

S.O.A.M.D.

(rated by teachers) (rated by the writer)

r

Bull's Test of

Moral

Development

S.O.A.M.D.

rated by teachers)

(rated by the writer)

r

0.4239*

0.3768*

* significant at 0.00I level

When one considers Bull's Test is semi-projective whereas S.O.A.M.D. relies on long-term observation the correlation is possibly as positive as can be expected.

Ego Development

The S.O.A.E.D. was directly compared with Loevinger's S.C. Test of Ego Development for reasons explained in Section 4.3.

TABLE 18

S.O.A.E.D.

(rated by teachers) (rated by the writer)

E

Loevinger's

S.O.A.E.D.

r

Loevinger's

S.O.A.E.D.

0.5598*

0.5598*

Ego

N 96

Development

* significant at 0.00I level

The strong positive correlations found indicate a strong relationship between these two measures of level of ego development.

Thus the second main hypothesis of a positive correlation between established rating methods of moral and ego development

5: I: 3 Having substantiated the validity of S.O.A.M.D. and S.O.A.E.D. in two main areas it remains to establish further validity regarding content and relationship to other measures.

S.O.A.M.D.

Content

The correlations between Bull's Test and S.O.A.M.D.

when rated by teachers and the writer were

acceptably close and also the inter-rater reliability

was agreeably high at 0.6928 (significant at 0.00I

level) thus establishing the utility of the S.O.A.M.D.

in a treatment setting. In addition, the following

mean (level) scores and standard deviations were

found:-

TABLE 19	N	Mean	S.D.
Bull's Test of Moral Development	99	2.32	0.5863
S.O.A.M.D. rated by teachers	96	3.19	I.0467
S.O.A.M.D. rated by the writer	61	2.81	1.1413

These results indicate how close the mean scores are on S.O.A.M.D. with the deviation of scores (M.D. level) across raters. One is tempted to criticise the lack of deviation using Bull's Test with the possibility of yielding lower, bunched scores.

In order to estimate internal reliability and strength of each of the S.O.A.M.D. 's seventy statements, seven stages

with ten statements for each stage, each statement was extracted and the difference to the final score was computed for each subject. As a result the following correlations were found: -

SMITH OBSERVATIONAL ASSESSMENT OF MORAL DEVELOPMENT (S.O.A.M.D.)

	Develop	mental	stage			
I	2	3	4	5	6	7

Pearson correlations

TABLE 20

Statement number	
I	0.8327 0.7708 0.6560 0.4717 0.4686 0.3743 0.6741
2	0.4356 0.7364 0.5539 0.2913 0.5558 0.4792 -
3	0.7942 0.6684 0.5659 0.1505 0.3331 0.5139 0.5238
4	(s0.121)(s0.004) 0.7349 0.7439 0.6616 0.5474 0.4589 0.4992 0.6741
5	0.6071 0.6938 0.1301 0.5139 0.3619 0.7894 0.9471
6	0.572I 0.8356 0.62I2 0.43II 0.1099 0.6570 0.674I (s0.198)
7	0.7724 0.5509 0.6316 0.2391 0.6053 0.5453 0.4673 (s0.031)
8	0.7818 0.5277 0.1281 0.5798 0.6239 0.8185 0.9703 (s0.161)
9	0.7769 0.4547 0.2157 0.6012 0.5414 0.8701 0.8862 (s0.046)
IO	0.2632 0.487I 0.39I2 0.3889 0.7I88 0.5034 - (s0.0I9)

Significant at 0.00I level unless otherwise shown

Level 7, statements 2 and IO are not shown correlated N 62 because of the shortage of subjects fitting these statements at this level.

All correlations are shown to be positive with 94% at the 0.00I level of significance. Of the remaining 6%, four statements (out of seventy) were found to be near redundant. These results are particularly encouraging in terms of being developmentally discriminatory. Some correlations were very high indeed.

The raters' ticks on the composite score-sheet (see appendices) should cluster about the level the child is developmentally operating at and scored sheets were observed to generally fall into this pattern. Marked exceptions to this rule were considered, by virtue of other criteria, to be particularly psychologically unstable.

Thus the content of the S.O.A.M.D. was found to be particularly applicable to its task.

With regard to comparing the S.O.A.M.D. with other tests the following table is presented:-

TABLE 21	Bull's Test of oral Development	S.O.A.M.D. rated by teachers	S.O.A.M.D. srated by writer
S.A.P. rated	-0.2113	-0.4196	-0.3649
by teachers	s 0.090	s 0.003	s 0.009
S.A.P. rated	-0.3632*	-0.45I2*	-0.6543*
by writer			
Supervision	0.5299*	0.5467*	0.6357*
List	N-99	N-95	N-60
Report	-0.0893	-0.3874*	-0.4453*
Slips	s 0.190		
	N-99	N-95	
Rutter			
Children's	-0.1486	-0.1341	-0.2917
Behaviour	s 0.07I	s 0.097	s 0.0I2
Questionnaire			
Bolman's			
Index of	0.3172*	0.4836*	0.7632*
Aggression			

This table is repeated, for convenience, to show the applicability or otherwise of S.O.A.M.D. in relation to Bull's Test of Moral Development.

Both S.O.A.M.D. correlations with S.A.P. are almost twice as strong as are S.A.P. correlations with Bull's Test. This can only suggest the practical utility of observational ratings of moral development when compared with measures of children who are overtly maladjusted.

The strong positive correlations with the Supervision List are common to both measures of moral development. The grossly substantiated differences of correlation and levels of significance between Bull's Test and S.O.A.M.D. again demonstrate the utilitarian connection between reported behaviour (bad and good) and observational ratings of moral development.

Measures of moral development do not correlate particularly well with the Rutter Children's Behaviour Questionnaire and this can only highlight the theoretical "underbelly" of Rutter's technique.

Bolman's Index of Aggression compares better with S.O.A.M.D. than with Bull's Test but the high correlation of 0.7632 is perhaps indicative of academic incest on the part of the writer.

S.O.A.E.D.

Content

The correlations between Loevinger's S.C. Test of Ego Development and S.O.A.E.D. when rated (a) by teachers (b) by the writer were extremely close at 0.5403 and 0.5598 respectively. Inter-rater reliability at 0.8350 was gratifyingly high and augers well for the use of S.O.A.E.D. in the treatment setting.

In addition the following mean (level) scores and standard deviations were found:-

TABLE 22	N	Mean	<u>S.D.</u>
Loevinger's S.C. Test of Ego Development	99	4.31	1.68
S.O.A.E.D. rated by teachers	96	4.07	I.40
S.O.A.E.D. rated by the writer	61	3.54	I.24

These are remarkably close both in indicating the mean (stage of development) rating and the deviation of development. The lower mean is derived mainly by omission of 35 - 38 girls from this sample leaving the 6I to consist of boys only. At around the point of puberty girls are commonly acknowledged to be more mature than boys. Other minor contributory factors could be in skeletal differences in the S.C. Test or slightly more rigid scoring by the writer.

In order to estimate internal reliability and the strength of each of the S.M.O.A.E.D. so one hundred statements, ten stages with ten statements for each stage, each statement was extracted and the difference to the final score was computed for each subject (99 x 100 + 96 x 100 + 61 x 100 = 25600 calculations). As a result the following correlations were found:-

	IO		1		1	1	1	ı	1	1	ı	62
	6	1	•	0.4231	0.2559 (s 0.022)	,	1	1	1	0.4231	0.6355	I Z
SLATIONS	ω	0.6721	0.5433	0.8874	0.5777	0.700I	4788.0	0.5204	0.8264	1	0.9322	otherwise
PEARSON CORRELATIONS	2	0.5355	0.326I (s 0.005)	0.6807	-0.0053 (s 0.454)	0.6200	0.5909	4884.0	0.8137	0.4831	0.7600	at 0.001 level unless shown otherwise
,	9	0.5607	0.7025	4509.0	0.1902 -0.0053 (s 0.069)(s 0.454)	0.7025	0.3184 s 0.006)	6489.0	0.5905	0.3987	0.5048	level ur
OF Level	20	0.2990 (s 0.009)	0.1007 (s 0.218)	0.I420 (s 0.135)	0.5108	0.3940	0.1262 0.3184 (s 0.164)(s 0.006)	6714.0	0.7786	0.4282	0.5840	
SMITH S OBSERVATIONAL ASSESSMENT OF EGO D	4	-0.1305 (s 0.156)	0.1471 (s 0.127)	0.4809	0.3077 (s 0.007)	0.1399 (s 0.139)	0.0503 (s 0.349)	0.3079 (s 0.007)	0.4740	0.1793 (s 0.082)	0.II2I (s 0.193)	significant
ONAL ASSES	m	0.5216	0.4622	0.4459	0.4329	0.2724 (s 0.016)	0.3629 (s 0.002)	0.4627	0.6291	0.2158 (s 0.046)	0.0746 (s 0.282)	All correlations sign
S OBSERVATI	N	7707.0	0.3512 (s 0.003)	0.6378	0.5228	0.4207	0.3992	0.5668	0.2602 (s 0.02I)	0.6815	0.7447	A 11 cc
SMITH	I	0.6442	0.3773	0.5206	0.6223	0.3423	0.5985	0.6557	0.5012	0.6332	0.4574	
State-	ment	Н	2	m	4	بر 206	9	7	ω.	6	OI	

Of the correlation shown three-quarters were positively correlated at the 0.00I level of significance, with two negatively correlated (and therefore redundant) statements and ten statements (IO%) were found to have unacceptably low correlations and were therefore partially redundant. No correlations of any sort were computed for stage IO and only 4 for stage 9 and 9 computed for stage 8, so demonstrating the paucity of subjects found at this level (Loevinger, I970a, p. 6 and I2). This paucity would be more marked amongst samples of children, particularly if also maladjusted (Smith, 1975).

The results of the above correlations indicate the S.O.A.G.D. to be at least as good as existing measures, for example Loevinger S.C. Test of Ego Development, though its simplicity of presentation and rating is markedly advantageous.

The raters ticks clustered around a child s particular level of ego-development as shown on the composite score sheet (see appendices for scored example), other dispersed ticks being critically indicative of pathological ego disturbances.

With regard to comparing the S.O.A.E.D. with other tests the following table is presented:-

TABLE 24	Loevinger's S.C. Test of Ego Development	S.O.A.E.D. Rated by teachers	S.O.A.E.D. Rated by the writer
S.A.P. Rated by teachers	-0.3675 s 0.008 N 42	-0.4548** N 42	-0.4I43 s 0.003 N 42
S.A.P. Rated by the writer	-0.5425** N 97	-0.4896* N 95	-0.6887* N 60
Supervision List	0.7499* N 99	0.5881 [*] N 60	0.5978* N 95
Report Slips	-0.4453** N 60	-0.30II s 0.002 N 95	-0.2632 s 0.02I N 60
Rutter Children's Behaviour Questionn- aire	-0.3485 [*] N 99	-0.074I s 0.039 N 95	-0.2297 s 0.039 N 60
Bolman's Index of Aggression	0.5816* N 99	0.4794 [*] N 95	0.6924* N 60

* significant at 0.00I level

The utility of comparing the S.M.O.A.E.D. with other measures is particularly interesting in relation to Loevinger's Test as the latter is sentence-completion by the (maladjusted) children and therefore open to charges of being out of keeping with the deviant child's own overt behaviour, as reflected in his daily commerce.

S.O.A.E.D. negatively correlates slightly more strongly (and with greater significance) with S.M.P. measures than

Loevinger's Test but the differences are such that comment is hardly called for.

Strong negative correlations between both measures of ego development are shown with slightly 'better' results for the S.O.A.E.D.

The Supervision List correlates particularly strongly with both measures of ego development, as with measures of moral development. The correlation with Loevinger's S.C. Test is high at 0.7499 and suggests a more applicable content of the S.C. Test. The two S.O.A.E.D. correlations were highly consistent with each other this probably being indicative of a ceiling to such correlations.

Structural differences between the S.O.A.M.D. and the S.O.A.E.D. are revealed in the correlations with Report Slip totals. The S.O.A.M.D. correlated well and much more highly than did Bull's Test, whereas the S.O.A.E.D. did not correlate particularly well at all but Loevinger's S.C. Test did. Indeed, the correlations between Report Slip totals and Loevinger's Test are positively acceptable whereas the S.O.A.E.D. results are not.

A similar pattern is shown in the correlations between Rutter's Questionnaire and ego development measures.

Bolman's Index of Aggression has strong developmental components and thus correlated highly with all measures of ego development.

5:2 RESEARCH CONCLUSIONS

If one is to discuss conclusions from this research, it has to be alongside the original aims of (a) developing stage-sequential measures of moral, ego and self-image development and (b) comparing such measures with childrens levels of adjustment and deviance. Thus the conclusions will, for the sake of logical convenience be arranged as follows:

- (I) developmental measures, (a) moral development
 - (b) ego development
 - (c) self-image development
- (2) measures of deviance, (a) derived
 - (b) practical
- (3) relationship between moral and ego development and deviance.

5 : 2 : I (a) Moral Development

For a measure of moral development to be employed in initial and ongoing assessment as part of the treatment of delinquent or maladjusted children the following criteria have to be satisfied:

- (I) useable by untrained staff (viz. majority of residential social-workers):
- (2) the need for simplicity outlined above should not be at the expense of not being sufficiently developmentally discriminative when compared with other similar measures;
- (3) individual statements used for assessment purposes should be valid and not add to any internal weaknesses

or redundancy within the instrument:

- (4) be capable of scoring and conversion to a stage score without artificial aids such as ogive rules or conversion factors;
- (5) to be quick in administration, scoring and recording in order to facilitate its maintained usage;
- (6) not open to deviant responses from deviant children as in the case of story interpretation (Kohlberg), oneoff semi-projective tests (Bull) or sentence completion (Loevinger), the latter with literacy problems as well as interpretive ones;
- (7) useful as an introduction to sequential aspects of development by untrained staff;
- (8) have high inter-rater reliability;
- (9) pattern, as well as stage level, to be useful as one of the tools of clinical psychological assessment.

Exacting though these requirements are, the Smith Observational Assessment of Moral Development (S.O.A.M.D.) fulfilled these criteria to a gratifying degree.

A range of staff were able to use the test instruments with little or no guidance and yet the inter-rater reliability was high at 0.6928 (significant at 0.00I level), in terms of similar mean scores and standard deviations, and in all comparisons with other measures. A manual or pre-training might be expected to yield even greater closeness.

The ability to discriminate a child's level of moral development was statistically significant in comparison with Bull's Test of Moral Judgement to the highest level one might expect as the style and content of both tests are somewhat

different. The general trend in terms of mean stage score was similar though with the S.O.A.M.D. being more discriminative in terms of standard deviation and in comparison with other measures such as deviance and ego-development.

Internal validity of the test was surprisingly high with 94% of statements positive at the 0.00I level of significance. Also, scores were usually sufficiently clustered at or about one particular level thus further under-pinning the efficacy of individual stage evaluation.

The scores themselves were converted into stage levels by simply multiplying the number of statements ticked by the particular level these were at and dividing by the number of stages represented; viz.

Level of moral development = total responses ticked x level sum of levels represented

Further, in terms of absolute developmental purity a person scoring all (ten) statements at the highest level only (7) would be calculated, 10 x 7 = 7, the highest stage on S.O.A.M.D. Conversely an extremely amoral individual being represented on one statement of stage one would be calculated,

1 x 1 = 1, the lowest stage on S.O.A.M.D.. With this I method of scoring both over-inclusive and under-scoring can be accomodated without losing final accuracy.

Invariably there was stage-mix with responses from above and below the mean level and if one regards moral development as a continuum these impure stages are the norm if a youngster is involved in stage transition. Further to this, the S.O.A.M.D. may be scored in a specific observational context so tolerating the specifity of an individuals reaction within a particular setting.

As the S.O.A.M.D. relies on observable behaviour and attitudes, as opposed to singular moral dilemmas, semiprojective interviews or sentence-completion, individuals who are markedly disturbed or intellectually subnormal may be realistically assessed. So the dull individual who is optimally morally mature will not be blighted by limited and covert cognitive function. Likewise the intelligent or specious or manipulative will be assessed on actual moral performance and not on smart responses to an artificial situation.

Clinical interpretation of score patterns looked promising but without sufficient empirical verification it is more apt to include this aspect as a topic for 'Further Research', in the next section.

It would appear that a highly satisfactory test of moral development has been developed which fulfills rigo rous criteria and lends itself for use in the assessment and treatment of deviant children.

5 : 2 : I (b) Ego Development

Similar criteria existed for ego development as it did for moral development (in 5 : 2 : I(a), above), with addition qualities of discrimination required in connection with emotional development and projected emotional responses. This is important not only because maladjusted children are sometimes referred to collectively as 'emotionally-disturbed' but because emotional states are more transitory and open to short-term influence.

The ability of the Smith Observational Assessment of Ego Development (S.O.A.E.D.) to statistically compare to 'live'

or operational measures of deviance adopted for this study would differentiate the shorter-term emotional status of the individual from his longer-term moral commerce stance.

The S.O.A.E.D. was able to be used by professionaly untrained staff with minimal information on the particular measures.

The correlations between Loevinger's S.C. Test of Ego Development and S.O.A.E.D. when rated (a) by teachers and (b) by the writer were extremely close at 0.5403 and 0.5598 respectively. The closeness of these two correlations may suggest a ceiling to this particular comparison.

An inter-rater reliability of 0.8350 was gratifyingly high and suggests confident usage in a treatment setting.

The internal validity was high with three-quarters of the statements being positively correlated at the 0.00I level of significance. Two statements were negatively correlated and therefore redundant and ten others needed strengthening by changing the statements to put the meaning in a different way or substituting an alternative stage-related statement. Some statements at the highest levels need further testing out but one would need an exceptional sample, however the fact some of these statements have not been used (reached) indicates their relative unattainability. The corporate strength of the S.O.A.E.D. was sufficient for use of the instrument but some further development is needed. Indeed, the correlations with Loevinger's S.C. Test were high and S.O.A.E.D. proved equal to Loevinger's S.C. Test in finding the individuals level of Ego Development with the added advantages of simplicity and speed.

5:2: I (c) Self-Image Development

Because the damaged self-image is a prime area for remediation in the deviant youngster, Van den Daele's (1968) detailed exposition lent sufficient credibility to his stage-heirarchical concepts and the possibility of linking these with sequential treatment. However, in the pilot research it soon became obvious it was not going to be possible to objectively replicate his studies and thereby elicit yardstick scores. Secondly the components of Van den Daele's theory too much overlapped ego components, so being insufficiently discriminative. Though ego-development is viewed by the writer as a central core of personality and moral development 'only' a component, the self is in Van den Daele's study also very central.

In the event, Van den Daele's study was not replicated.

5:2:2 Measures of Deviance

5:2:2 (a) Derived measures

Existing measures of maladjustment or social deviance are invariably screening devices singularly lacking in ability to show depth of maladjustment, though showing range.

The Bristol Social Adjustment Guides (Stott, 1963) and Rutter's Childrens' Behaviour Questionnaire (Rutter, 1970a) both yield an accumulative score which is indicative of maladjustment being present but not its depth. In consequence a measure designed to gauge the depth of maladjustment was constructed.

Preliminary trials indicated its sensitivity to children having mild transitory problems but otherwise normal who scored

children, subjectively rated at well adjusted by the head of music at a comprehensive school, scored nil or very low. Thus, an instrument with projected scale and depth was used with all children of this study. The internal validity of the statements was very high all except for two statements and these were deleted. Fortunately this computation was carried out first of all and therefore all remaining calculations were done with the two offending statements deleted. The possibility of redundant statements was considered because the Index of Mal/Adjustment was a mixture of academic stances and the writer's practical experience with maladjusted children. It was the latter in particular that had to be scrupulously examined.

First of all the research sample was found to be maladjusted, as Rutter Questionnaires yielded a mean score of 19.34, over twice the threshold of 9 taken to be indicative of maladjustment. These high scores were hardly surprising as the populations of two special schools for the maladjusted were used. Further, these populations will also, at any one time, contain a few children who have become well adjusted and others at the other end of the range who are extremely psychiatrically sick. The standard deviation of scores would be expectedly high and the Smith Adjustment Profiles (S.A.P.) and the Rutter Questionnaire scores reflected this, being 7.14 (average) and 7.48 respectively.

The mean scores happened to be surprisingly similar with 2I.25 for the S.A.P. and I9.34 for Rutter Questionnaires. Comparison of scores for individual children often revealed

marked differences between the two tests because of disparity in attributes forwarded. The S.A.P. had the advantage of plumbing depths of knowledge of children as the statements quite clearly require the assessor to 'know' the child and his background in depth. Conversely the Rutter Questionnaire and the B.S.A.G. offer a more contemporary score based on immediate behaviour and attitudes.

Bolman's Index of Aggression produced high and positive correlations with the S.A.P., - 0.5254 when the S.A.P. was scored by teachers, and - 0.5457 when scored by the writer. Both correlations were significant at the 0.00I level. This double-edged result underlined the connexion between maladjustment and aggression, and also, the relationship between developmental ability in handling aggressive feelings and psychological adjustment.

The S.A.P. showed prognostic value in identifying those likely to experience problems of adjustment in the medium and long term future. Youngsters leaving the special school for maladjusted children and for whom one felt confidence scored lightly on the S.A.P.. Those who in the limited time available had managed to cope merely within the sheltered and artificial setting of the residential school had a significant score on the S.A.P.. Some professional workers might well regard the child as fairly well adjusted but the S.A.P. was able to show the disparity. This difference between low Rutter Questionnaire and B.S.A.G. scores, indicative of adjustment, and S.A.P. scores revealing the presence of remaining maladjustment highlights a youngster's requirement of a final sequential stage beyond the final institutional one which invariably is still too structured compared with society in general.

5: 2: 2 (b) Practical measures of deviance

Two measures adopted by both schools as part of their treatment method were,

- (I) report-slips, and
- (2) supervision list.

Report-slips briefly describe positive and negative aspects as part of behavioural goal setting and to evaluate an individuals position on the supervision list. The report-slips were not returned with sufficient rigour to statistically describe a child in terms of depth of maladjust-ment and merely reflected particular modes of behaviour.

As such, the report-slips provided a measure of deviance, but a poor one that consistently correlated too weakly.

The supervision list was a major under-pinning to the stage of sequential treatment offered to children in both Sometimes there was an upward or downward mismatch schools. for an individual child as part of the sequential treatment, usually to encourage a cognitive shift. This therapeutic mismatch was never more than a single developmental stage removed in order to not discourage assimilation and therefore may still be considered reflective of both maturation and adjustment. More often than not the individual child's position on the supervision list reflected his general level of behaviour and maturity, (see appendices) and as such one could justifiably expect healthy correlations with measures of both adjustment and sequential development. Indeed, the negative correlation of - 0.5856 between S.A.P. and the supervision list clearly reflects a higher position on the supervision list and demands more psychological adjustment than a lower position does.

5:2:3 The relationship between moral and ego development and deviance

The relative viability of the developmental measures and measures of deviance used in this study have received substantiation in sections 5:2:I and 5:2:2, respectively. However, a prime reason for this study was to seek to establish a utilitarian link between development, particularly in the moral domain, and deviance. The word 'deviance' suggesting, in this case, a useful admixture of moral, social and psychological malfunction. Moral deviance being more redolent of delinquents, psychological deviance more representative of maladjusteds and social deviance a likely aspect of either group.

Smith (1975) showed the comparatively low moral and ego development of maladjusteds and delinquents but if lowest development was shown to be closely related to greater degrees of deviance then the utilitarian link would be established and useful in treatment, particularly in sequential treatment.

Correlations between moral development and S.A.P. were higher and more statistically significant when the S.A.P. was rated by the writer. This underlines the previously stated need for training or a manual for using the S.A.P.. When this initial demand was satisfied then S.O.A.M.D. proved a useful tool alongside S.A.P..

All measures of moral development correlated highly and significantly with the Supervision List, substantiating the relationship between a child's level of moral development and sequential treatment level. Therefore, both S.O.A.M.D. and the Supervision List could be used as instruments in establishing the treatment intervention level when sequential

treatment is the adopted approach.

Report-slip evaluations correlated strongly and significantly with S.O.A.M.D. but not with Bull's Test, so highlighting the more practically disposed content of S.O.A.M.D. These same comments apply to the relationship between Rutter's Questionnaire and all measures of moral development where a link was not established.

Bolman's Index of Aggression correlated highly and significantly with all measures of moral development but this was not surprising because of the developmental bias of both measures.

S.A.P. correlated more highly and significantly with measures of ego development measures than with moral development, pointing to the psychological adjustment bias of the S.A.P..

A most interesting difference emerged when the S.O.A.E.D. was compared with report-slips as the correlations, whilst in the expected direction, were too low and insignificant whereas comparison with Loevinger's S.C. Test produced a high and significant correlation. This was similar to the S.O.A.M.D. results so suggesting a strong moral development component to Loevinger's measure. Loevinger (1976) clearly regards moral development as a component of ego development and whilst totally agreeing with her academic standpoint the writer has attempted to separate and split off these two entities. Comparisons with measures of deviance has revealed this separation to have been achieved.

In practical terms it further suggests the S.O.A.E.D. provides a useful initial and in-treatment assessment where

the deviance is in the psychological adjustment mode, more usually with maladjusted children.

A significant correlation between Loevinger's S.C. Test and Rutter's Questionnaire and not for the S.O.A.E.D. further suggests the behavioural moral content of Loevinger's approach.

Similar high correlations between all tests of ego development and Bolman's schemata, as with the moral development indices, were consistant with the joint developmental bias.

In summary;

- (a) The S.A.P. was soundly established as a utilitarian tool.
- (b) S.O.A.M.D. differentiated the psychological adjustment and represented a sequential measure of moral development particularly suited to delinquents.
- (c) S.O.A.E.D. with less emphasis on moral aspects was able to provide a stage-sequential measure related to the sequential treatment of psychological deviants such as the maladjusted.

Whilst the measures developed in this study instil sufficient confidence to carry out further research with them as they are, it is suggested further distillation could only add to their discriminatory values. In recognition of this, "further research" concentrates on factors for internal development of themselves and secondly on their further experimental usage within the field of treatment for deviant children.

Enrichment of existing measures

First of all the S.O.A.M.D., with 94% of the total of seventy statements inter-correlating at the 0.00I level of significance, it might well be an arduous and delicate task to set about increasing the internal strength and validity of these measures. However at least six statements need substituting or re-wording and this would not be an insuperable task except a lengthy and rigourous paring down process would be necessary to elicit the most discriminatory alternative statements for the particular stage under review.

The S.O.A.E.D., it has been shown in this research, is able to differentiate between ego-components and clearer moral entities, unlike Loevinger's measures of ego-development, and whilst this in itself is praiseworthy it does raise further side issues. Moral development can frequently rely on concretist elements of daily interpersonal commerce as a conceptual anchorage whereas S.O.A.E.D. taps into the less tangible arena of emotional perception, stance and outlook, and also levels of cognitive dexterity. Intellectual and

social determinants need further critical examination to make sure the less usual admixtures of a fairly healthy personality are not allocated to insufficiently justified levels of ego development that are too low or too high. For instance, a reasonably bright but socio-culturally retarded child must not be inaccurately shown to be retarded in ego-development. Indeed much the same sort of parameters would apply as in tests of reading ability and comprehension, particularly where remedial programmes must start at an appropriate level. Cognitive disparity could also be reflected in other ways. Scatter as shown on the scored responses has elsewhere been described as indicative of a maladjustment but the disparity of stage scores could also indicate poor assimilation due to an insufficiently facilitative environment. Intelligence only solves some of the problems and opens up many others.

part of an environment that has maximised his potential may have sound ego development but is unable to express sufficient positive aspects of this. Therefore the S.O.A.M.D. and S.O.A.E.D. need empirical comparison with children of a range of intelligence and of cultural background. Results from those same children if further involved in longitudinal studies would add to the knowledge of such specific measures.

Training Manual

Both the S.O.A.M.D. and S.O.A.E.D. were designed to be used by 'lay-staff' without particular training, and certainly if such a manual was used before the experimental testing in this study the results might well have been biased according to the mode of the pre-training. In the post-experimental state of these measures a manual would encourage

greater inter-reliability, although without a manual the scores correlation was 0.6928 at the 0.00I level of significance. In addition the previously mentioned secondary aim of using the completion of moral and ego development measures as a form of in-service training could be further satisfied by use of a suitably tailored manual.

Measures of self-image development

Further research is needed to rationalise measures of self-image development and a useful direction would be to use Van den Daeles (1968) method as the referential core.

These measures would need to be structurally rationalised in order to gain inter-rater and inter-subject reliabilities.

If structural objectivity was achieved then definitive issues related only or mainly to the entity of self-image itself need to be tested by statistical analysis. During pilot-studies the writer quite strongly, albeit somewhat subjectivily, considered an excessive overlap existed with ego-development. Whilst the 'ego'encompasses the self-image and therefore one expects a sharing of components, a successfully utilitarian measure of self-image would confine itself largely to that particular area of assessment.

The perceived lack of differentiation was largely the reason for abandonment of measures of self-image development, following pilot-studies.

Further research using S.O.A.M.D.

As outlined earlier in this study, sequential treatment is a promising approach to the treatment of deviant children whose stage-sequential development requires unsticking and

accelerating through the required stages. Such treatment requires skilful technical matching between the sequential stages of treatment and the sequential levels of development of the children.

Groom's comment is worthy of complete presentation:-

available on children insufficient attention is given to their developmental needs. At present priority is given largely to problems which they present and establishing priority in relation to their treatment. In dealing with disturbed children it is natural that this should occur but many children in long-term care present problems which though not critical are important in the process of adaptation to the wider community. Where priority can be given to developmental needs rather than problems, children could be phased into a sequential system at an appropriate stage rather than being admitted to the initial stage even though in developmental terms this may be inappropriate.

Similarly the sophistication of monitoring devices it also worthy of comment as these determine the quality of the feed back which the children receive and the rate at which they progress through the system. At present attention is addressed to physical, intellectual, behavioural, social and personal problems but assessment of progress relies essentially on subjective judgement. Although a degree of subjectivity can be introduced by the use of ratings and sampling opinion from various sources such as the staff, the peer group and the child, standardised objective material could be used more extensively at critical periods when decisions are made to transfer the child from one stage of the system to another. Tests which relate to the child's cognitive and moral development are particularly important at this stage to determine whether the child is intellectually capable of coping with the next phase of treatment or morally ready to benefit from it ... Groom (1980a, p.71)

The application of sequential measures over an extended period of individual treatments would yield recorded data capable of being used in comparison with adopted sequential treatment measures. The very efficacy of those measures adopted demands such critical appraisal.

- (I) Are the treatment measures consistent with the child's input stage?
- (2) Is the treatment sufficient to prepare the child for the

next (or open) stage of treatment?

- (3) With or without overlap and consolidation.
- (4) Are the measures adopted the best ones available for developmental acceleration of deviant children?
- (5) Is the acceleration sufficient to provide adequate short and medium-term feedback to the child?
- (6) Is the acceleration too rapid to allow for consolidation?
- (7) How is the depth of consolidation assessed?
- (8) Does the sequential stage (and consolidation) allow for ego and moral regression found in adolescence?

The questions demanding answers are almost endless.

The answers are almost worthless unless they are objective and objectivity is more likely to result from such questions as are built into developmental measures as the S.O.A.M.D.

Groom (ibid) does not allude to questions of ego, conceptual or self-image development but confines himself to moral development. The children Trevor Groom discusses are invariably deviant and the seeking of moral maturity a widely sought treatment goal.

The problems of children in treatment will frequently frustrate moral development just as amoral or immoral development will fuel problems, so problems and development cannot be dealt with in isolation. Indeed, the effect of moral development on problematic behaviour is best tested within a sequential treatment system and only that way can the parameters of effective treatment models be adequately established.

It is suggested much sequential treatment fails because the treatment stages are too few in number and consequently too disparate in level, approach and lack overlap. Only refinement of these coarse stages can lead to more definitive treatment stages, or sub-stages. Such refinement is dependent upon objective measures applied to those children in treatment and the measurement of subsequent development, if any.

Further research using the S.O.A.E.D.

A child ascertained as 'maladjusted' may have quite normal-levels of moral development, dependent on the problematic areas of adjustment. Poor psychological or emotional adjustment may not be the result of, or result in, poor moral development and the two entities can be quite independent of each other. Thus a delinquent child will invariably have low moral development but this will not always be matched by low ego development. Some writers choose to describe the delinquent child as being 'socially' maladjusted. In practice the delinquency may be equitable adjustment to the micro-society the child finds itself living in. It is suggested that the S.O.A.E.D. may be of less use in assessment and monitoring treatment of delinquents than the S.O.A.M.D. at this stage of research.

Further research involving the use of both these measures may be of paramount value in at least two extremely important areas:-

- (I) In establishing the relationship between ego and moral development stage scores for individuals. For instance, if the level of moral development was found to be significantly lower than an individuals level of ego development, is such underfunctioning suggestive of a psychopathic or sociopathic personality?
 - Or, conversely, is the reverse relationship conducive of an organic or thought-disorder or merely the result of a non-facilitative or sub-optimal environment?
- (2) What combination of relationship between S.O.A.M.D. and S.O.A.E.D. suggests an alternation of treatment response.

Because of the preponderence of problems of maladjusted children emanating from disturbed ego-functioning (Balbernie, 1966: Rapaport, 1960: Redl, 1966: Winnicott, 1965a & 1965b), measures of ego-development will be of particular value with maladjusted children. The greater the developed ego-strength (Barron, 1953), ego-capacity (Polsky & Claster, 1968) and ego-development (Loevinger, 1970a), the greater facilitation there will be for personal adjustment through the resolution of problems. Such development suggests the elicitation of further and extended questions but the relative inability to solve all such questions is open to self reconciliation. Thus, in terms of ego development the more maturity one has along the developmental continuum the greater the ability to maintain personal adjustment (Fingarette, 1963: Smith 1975). In this respect the S.O.A.E.D. presents as a useful medium to assess the impact of treatment upon maladjusted or emotionallydisturbed children.

CHAPTER 6

APPLICATION TO ASSESSMENT AND

TREATMENT

6 APPLICATION TO ASSESSMENT AND TREATMENT

The broader relevance of the present study to assessment and treatment is two-fold; (I) when related to generalised problems of delinquency and maladjustment, and (2) specifically related to the operation of sequential treatment.

Not all, but certainly a crucial majority of problems that bring deviant children to the attention of the treatment agencies are related to atypical development.

The most comprehensive group under this heading will be those children with problems of social development, including, by the very definition, delinquents, and also the majority, but not all, maladjusted children (Smith, 1975).

An individuals level of moral development is directly related to the quality of the commerce between themselves and others. Problematic children have a fairly common feature of unhappiness because this commerce is unsatisfactory or has completely broken-down. Any psychological maladjustment will have degrees of impingement upon social development and it is the inhibitory effects of this upon longer-term emotional and moral development that causes concern. Most if not all children have relatively short periods of not coping satisfactorily, real or imagined, but equilibrium is invariably restored and usually by the child alone.

It is, however, to the child with more intransigent problems that this study is addressed and emphasis in this section is on settings where the extremes of troubled and troublesome youngsters are assessed and attempts made at treatment.

On the continuum between transient problems sorted out

by the child without outside help and those youngsters who need protecting from themselves and/or from harming others, it is the latter types treated by Youth Treatment Centres (Y.T.C.'s) and Special Units. Slightly less extreme youngsters are treated in Community Homes (C.H.(E.)'s) and schools for the maladjusted.

When these youngsters maintain an urgent need for *treatment* later referral is usually to an adolescent hostel, borstal institution or psychiatric unit.

There are two Y.T.C.'s, St. Charles, Brentwood, opened in I971 and Glenthorne, Birmingham, opened in I978 (see Youth Treatment Centres, H.M.S.O., I972). Four Special (Secure) Units are in existence at; Kingwood Schools, Bristol; Red Bank, Newton-le-Willows; Redhill, Surrey and Aycliffe, Durham; these coming into operation in I964, I966, I965 and I978 respectively.

Both Y.T.C.'s use a form of sequential treatment (H.M.S.O., ibid.) as does Aycliffe School Special Unit (Hoghughi et al 1980). Of non-secure establishments the most explicit descriptions are of Aycliffe Training School (Hoghughi, 1977; Groom, 1980b) a C.H.(E.), and Caldwell Hall School for maladjusted boys, (Smith, 1975; Wilson and Evans, 1980; Otway, 1981).

Whilst there is a myriad of operational differences
between the above treatment schemes, all the treatment units
have a series of house units in which a treatment system
exclusive to that house is in operation. A youngster will
usually start in the primary house where an effort is made
to put the youngster under highly structured external controls.

Effective treatment enables the youngster to progress through the houses where upon he is expected to achieve sufficient internal (self) control and direction. These units also, to a greater or lesser degree, take a problem-centred approach, the overwhelming proportion of problematic behaviour being anti-social activity.

At Caldwell Hall the primary emphasis is on personal development with problematic behaviour the secondary consideration.

On an operational basis considerable overlap occurs between both systems with problematic behaviour slowing down, halting or regressing an individuals development and, conversely, atypical development confounding the resolution of problematic behaviour.

Specific treatment of individual problems is the exception when they are criminological in nature. For example, there is no highly specific treatment plan usually made for fire-raising, burglary, stealing vehicles, solvent abuse, etc.. Psychological disorders are more frequently treated, no doubt because of the established and informed treatment by psychologists. With the majority of those who work professionaly with delinquent children the emphasis has hitherto been on care, craft-instruction or teaching.

The therapeutic approach established in special schools places the emphasis on treatment with control being assumed largely by the therapeutic system itself. De-emphasis on control being one reason for making development of the child assume priority at Caldwell Hall. Also, symptomatic behaviour, whilst lending itself to typologies of labelling is not so important as the underlying inability of the youngster

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to cope satisfactorily with operations other age-related youngsters take in their developmental stride. However, any inability to cope is relative and youngsters referred for help may be at any point on the continuums of development. Further, competence in one area of development, say physical or emotional development, may contrast with deficiencies in moral or educational development. Marked lag in any one area will affect overall progress.

It is only the situation of the majority of delinquents sharing a low level of moral development (Smith, 1975; Kohlberg, 1978) that commonly allows intake to the first sequential treatment house. A not unusual weakness of sequential treatment is simply that the treatment is not sequential (D.H.S.S., 1979).

If the treatment is effectively sequential then intake of fresh youngsters can be at the appropriate level. Groom (1980) states:

... Ideally, if a sequential treatment situation is functioning efficiently and assessment techniques are available to establish the level and intensity of a child's problems which take account of developmental needs, a child should be able to be phased into the system at any stage. Although this has occasionally occurred in the Training School there has been a tendency in most cases for children to be admitted to the first house and for the system to operate on 'sausage machine' principles ...

It would be possible to assess youngsters on three main criteria only and effectively integrate at the optimum treatment level;

- (I) Potential.
- (2) Adjustment,
- (3) Level of moral development (for delinquents)
 Level of ego development (for maladjusteds).

The assessment battery to include:-

- Problem Profile score, Personal Potential score,
 I.Q., and parental disposition.
- (2) Smith Adjustment Profile.
- (3) Smith Observational Assessment of Moral Development.

A treatment mismatch would be a developmental mismatch and an opportunity lost for effective treatment. An example of this is illustrated by Pervin (1968):

... A 'match' or 'best-fit' of individual to environment is viewed as expressing itself in high performance, satisfaction, and little stress in the system whereas a 'lack of fit' is viewed as resulting in decreased performance, dissatisfaction, and stress in the system. (p. 56)

The fit of the environment is taken to include the attitude and method of the treatment workers. Grant, Warren and Turner (1963) in the Community Treatment Project with delinquents matched the youngsters maturity level and prescribed treatment worker characteristics as follows;

Maturity Level Treatment Worker Characteristics

Low Type I - Tolerant, supportive, protective.

Medium Type 2 - Firm, conwise, alert, willing to punish.

High Type 3 - Wise, understanding, warm.

The failure rate for the closely matched group was 19 percent after fifteen months as compared to the 43 percent for the group who had not been so closely matched, a highly significant difference. However, the above treatment worker characteristics are theoretically mismatched to the Moral Maturity Matching Model. (Kohlberg, 1963, 1966; Turiel, 1966).

Characteristics

- Stage I Punishment and obedience orientation.
- Stage 2 Naive instrumental hedonism.
- Stage 3 Good boy morality of maintaining good relations.
- Stage 4 Authority maintaining morality.
- Stage 5 Morality of contract and democratically accepted law.
- Stage 6 Morality of individual principles of conscience.

(Kohlberg, 1964, p. 400)

Unless, the C.T.P. Maturity Levels correspond with Kohlberg's stages I, 2 and 3. Incidentally, at this point, see stage 5, one can understand the weakness of treatment contracts with delinquents, unless very strongly linked with hedonistic rewards. This also serves to illustrate one is working with the delinquents low levels of cognitive development, as does the scheme of conceptual level development by Hunt (1971) where a schemata covering the whole of childhood to maturity is covered in three general stages. It is telling comment that Hunt (ibid) found it necessary to add an extra lower category, sub I. (see over)

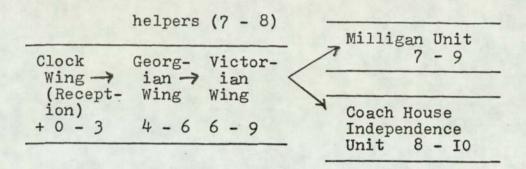
The two Youth Treatment Centres, Aycliffe Special Unit and Aycliffe Training School each offer three levels of sequential treatment whereas Caldwell Hall uses three levels across an eclectic set of ten units. The latterhas two major advantages, (I) the treatment is in finer graded steps, and (2) the log-jam effect of waiting for sequential moves is avoided.

Aycliffe Special Unit and the two Y.T.C. s flexibly operate a system whereby the first house-unit is secure, the second one semi-secure and the final one comparitively open.

Present Stage	Environment	Match/Mismatch	Expected Outcome
	Clearly organized within normative structure	Optimal	Open I
Sub I	Normatively unclear or inconsistent	Sub-optimal	Closed Sub I
	Emphasis on autonomy	Super-optimal	Closed Sub I
	Emphasis on autonomy within normative structure	Optimal	Trans- ition to II
Open I	Clearly organized within normative structure	Sub-optimal	Closed I
	Highly autonomous	Super-optimal	Transit- ional arres- tation
	Highly autonomous with low normative pressure	Optimal	Open II
Stage II	Clearly organized within normative structure	Sub-optimal	Closed II
	Emphasis on mutuality	Super-optimal	Closed II

These units and Aycliffe Training School have the use of a small hostel but this is not part of the structured treatment system.

Caldwell Hall operates the following system with the ten levels overlapping in order to provide eclectic environmental matching.



The utilisation of ten levels of sequential treatment involves rigourous continuous assessment of developmental level along with behavioural goal planning in order to facilitate individual development. As Groom (1980a) points out, even three levels of sequential treatment demands exacting assessment of the individual and correct sequencing into the appropriate treatment level;

- ... where sophisticated assessment reports are available on children insufficient attention is given to their developmental needs ...
- ... where priority can be given to developmental needs rather than problems, children could be phased into a sequential system at an appropriate stage rather than being admitted to the initial stage ...

Smith (1975) and Kohlberg (1978) have both respectively shown that delinquents usually operate at the lowest levels of moral maturity.

A set of five character types was defined by Peck and Havighurst (1960), each conceived as the representative of a successive stage in the psycho-social development of the individual. These are amoral, expedient, conforming, irrational-conscientious and rational-altruistic.

The amoral person corresponds with the unsophisticated delinquent and is described as follows; his conduct results from gross egocentricity in a life of self-gratification and impulsivity. They have weak ego-strength, cannot perceive

the structure of social situations and are hostile in a non-specific way. This results in a rejection of any social restraints. In short they are disorganised, impulsive, antisocial and unhappy people. For this reason, it is more accurate to describe them as amoral rather than immoral.

The expedient person is described as still being egocentric and conduct may now appear to be moral, since his behaviour is the means towards self-gratification. In this sense they are hedonists. They subscribe to clearly authoritarian sanctions but this produces not active morality, but merely the absence of immorality.

What is rarely studied is the interplay between the perceived adolescent self and infantile morality. Limited conceptualisation of what they feel they ought to be is confounded by commercial and media pressures on an egocentric or hedonistic moral set. Allied to this one has the physical emergents of adolescence conceptually perceived at a 'concretist' level. The physical and the concrete will be mutually reinforcing thus under pinning stage-fixation.

To undo this reinforcement fine transitional stages are needed, hence the provision of ten stages in the Caldwell Hall system. Many more stages than this would provide still smaller transitional steps if the youngsters and treatment staff could comprehend such complex treatment criteria.

The strong correlation between the Supervision List (see append.), as used at Caldwell Hall, and measures of moral and ego development, indicate clearly the range of development of youngsters undergoing treatment and consequently the need to use applicable assessment and monitoring techniques.

- ... Although some attempt has been made to establish criteria in existing sequential systems, this remains a largely undeveloped area and judgements are made mainly on the basis of subjective evidence ...
- ... Tests which relate to the child's cognitive and moral development are particularly important at this stage to determine whether the child is intellectually capable of coping with the next phase of treatment or morally ready to benefit from it ...

 Groom (1980a)

In order to offer a practical illustration of stagesequential development matched to sequential treatment, four brief case-studies of youngsters at four different stages are presented.

- (I) A delinquent at the anomic/amoral stage.
- (2) A conforming/conscientious type.
- (3) A youngster with brain damage, and
- (4) A highly developed girl, mismatched to treatment.

(I) The Unsophisticated Delinquent

Alec came from the South Midlands and was aged fifteen years at the time of testing. Both parents rejected him seemingly from birth, his mother being convicted of viciously assaulting him when he was an infant. Father's passivity in this unhappy situation added weight to the suggestion Alec was the product of an irregular union and jointly rejected.

Early referral to the Schools Psychological Service for sustained destruction in the home, hyper-activity, aggressive behaviour to other children, defiance and educational problems led Alec to be placed in a day maladjusted school. This placement broke down because of continued problems in the home from both Alec and his parents, referral then being made to a residential maladjusted school.

Stormy behaviour ensued for first year or so of treatment with the school being criticised ferociously for being unable

to effect a quick adjustment to Alec's personality.

Unfortunately this served further to unsettle Alec who surprisingly, but not uncommonly, wanted to be at home. At the same time the parents refused to buy Alec clothes or footwear and also refused the Local Authority permission to supply these articles. The boy always returned eagerly to school after holiday breaks because of the family friction centred around him. The parents did not want Alec to return home whilst a place existed at the residential special school though the boy was never completely settled at the school.

Many of Alec's problems were reduced either in quantity or intensity during treatment, but he remained an insecure and unstable young man.

Alec's condition is reflected in the test scores of this study as follows:

On the Smith's Observational Assessment of Ego Development he was rated at 2.78 when scored by the writer and 3.26 when scored by the teachers, the average of 3 resulting from testing on Loevinger's S.C. Test of Ego Development. Both measures range over ten stages. A score of 3 is equivalent to Loevinger's 'delta' level, termed 'Self-Protective and Opportunistic', being described as

... vulnerable, somewhat confused and having inadequate conceptions of the world ... Presumably they are those who have experienced what H. S. Sullivan referred to as "malevolent transformation" ... (Loevinger, 1970a).

Alec's I.Q. on the W.I.S.C. averaged in the mid-nineties with a profile of score scatter indicative of m.c.d.. In addition he was hyperactive, had a squint, unstable and accident-prone, all indicators of m.c.d..

On the Smith's Observational Assessment of Moral
Development Alec was rated at 2.00 by both the teachers and
the writer (out of 7 stages) and I.46 on Bull's Test of
Moral Judgment. On both measures this produced an identical
indication of Alec being 'stuck' or in transition between the
basic stage of anomy and the second main stage of heteronomy.
The writer, in the S.O.A.M.D. terms this level, Anomy/
Heteronomy (Expedient).

Why didn't or couldn't Alec, by the age of fifteen years, conform? A stage usually reached early in primary school.

Was it poor modelling with significant adults, emotional insecurity or instability, poor conceptualisation because of m.c.d., or a combination of all of these reasons.

A score of nine or more on the Rutter Childrens'
Behaviour Questionnaire is <u>indicative</u> of maladjustment, Alec's rating was 26. On the Adjustment Profile developed for this study Alec rated at 27 and whilst norms have bot been developed for this test it correlates very significantly with Rutter's Test and the range of scoring happens to be similar.

On the Supervision List he was prescribed to stage 2

(out of ten stages) because of II8 report points on the behavioural management scheme (the norm being less than IO points). The Supervision List rating was found to very highly correlate with other measures of ego and moral development used in this study.

A Supervision List rating of 2 prescribed a treatment environment that was quietly orderly, with limited options, diluted environmental pressures and stimulation through finely matched B - M programmes. This treatment allowed Alec to be comparitively happy with an optinum number of 'blow-ups',

a role to play and steady encouragement to gentle development. This was fine and worked well but at school leaving age his Local Authority withdrew their financial responsibility for him, a hostel place was not available and he returned home.

Alec is unlikely to manage wider society and will probably be incarcerated for continued petty offending. His level of ego and moral development rendering him a fine candidate for ineffectual recidivism and a mantle of external controls.

6:2 A Conforming/Conscientious Type

Tony was a fourteen-year old boy from a small town near Birmingham. He was of average intelligence and initially being referred to residential special school because of persistent and 'mindless' delinquency, by a concerned Social Services social worker.

The boy was born illegitimately to his young mother who passed him on to the care of the Social Services Department.

After two unsuccessful attempts at fostering, punctuated by two spells in a childrens' home Tony was placed with a Mr. and Mrs. W.

Everything went fairly well for over ten years until Tony started stealing from shops, damaging property and truanting from school at the age of thirteen years. Mr. and Mrs. W. appeared to care for the boy very well and set good standards, so why, thought everyone, the delinquency?

Scores obtained on the S.O.A.M.D. during the course of this study were 3.00 when scored by the writer and 3.25 when scored by 'the teachers'. A rating on Bull's Test of 2.50 indicated healthy moral development between the stages of

heteronomy and socionomy, this being termed Heteronomy/
Socionomy (Towards Internalisation) on S.O.A.M.D.. The moral
development scores were, atypically higher than his egodevelopment stage, so why the delinquency in such an
atypically moralistic boy?

The same concerned social-worker (an E.W.O.) went to the trouble of paying several extended visits to the home, sometimes when Tony was there, and eventually finding the root of Tony's problem. Mr. W. was physically weak with a heart-condition and gastric ulcers, though maintaining employment as a store-keeper, resulting in him being inneffective as an involved father-figure for Tony. More critically, Mrs. W. was considered by the social-worker to be an absolute tyrant, setting impossible standards and expectations for her family (and the social-worker).

The possibility of Tony being unnaturally pressurised through the moral development stages by the powerful expectancies of his foster-mother is postulated as by his 'artificial' scores of moral development as compared to ego-development and his delinquency.

The boy was co-operative in treatment once he'd worked through the comparative lack of controls at his school and developed naturally well with little trace of his former depression. Whether Tony was able to explain the logic of his ambition to join the Services or spend two years at a residential agricultural college in terms of preferring to live within the parameter of normative expectancies is not known, but nevertheless the prognosis looked healthy.

6:3 A youngster with brain-damage

David was withdrawn by his Child Guidance Clinic from a residential special school for delicate children in the south of England (run by nuns) because he was desperately unhappy and highly drugged, ostensibly because of his excitable behaviour. When first admitted to his fresh school he was extremely lethargic and always put himself to bed straight after tea-time. As the medication was decreased he was found to be excitable and quite emotional, ranging from being tearful to foot-stamping and verbal aggression.

David was very poorly co-ordinated with a shambling walk, poor articulation of speech, poor saliva control and wire-framed spectacles that had always slid to the lower end of his tiny nose. His tempers were mainly aroused when some of his inconsiderate peers referred to him as "Spas" or spastic.

The boy's family lived in a N.E. Midlands industrial city and were particularly warm and sensible with their son. Indeed, the way to make friends with David was to make friends with his parents first of all. Thus he was from a very caring and normal background.

Results from the present study show three ratings for moral development to be consistent in placing him in transition between heteronomy and socionomy; a normal stage of development for his age, if slightly retarded because of his limited conceptual abilities and development.

viz. S.O.A.M.D. (scored by teachers) 3.75
S.O.A.M.D. (scored by writer) 3.00
Bull's Test of Moral Judgment 3.63

The disparity in rating is largely due to the conceptual scatter in David's approach, this being well illustrated, as for other m.b.d. children in this study, by the level of response scatter. Responses ranging over seven levels with many developmental gaps due to indiscriminate responses and a patchy foundation of ego-development. David's m.b.d. has created problems for him in remembering, cross-modal perception, symbolic identification and recall and conceptual matching.

So, in day-to-day commerce David has to re-learn or reconceptualise previously rehearsed problems and actions with conceptual apparatus likely to take a differing response on each occasion. Without the foundation of learning he cannot differentiate new instances to consolidate onto previously established schemata.

The Smith Index of Development is shown below to indicate the scatter.

In terms of adjustment David scores thus:

Smith Adjustment Profile (Scored by teachers) 26

Smith " " (" " writer) 24

Rutter Childrens' Behaviour Questionnaire I4

indicating fairly optimal adjustment considering his psychoneurological impairment.

As for the future David needs a protected environment but as optimally normal as one can engineer, so that his willingness, striving and warmth may be usefully harnessed.

6: 4 A highly-developed girl, mismatched to treatment

Mary was a fifteen years old girl who was referred to a residential special school for maladjusted girls by a

child guidance clinic because she was unhappy and out of control at home and excessively demanding and under-achieving at school.

The arrival of step-father into the home <u>appeared</u> to be the pivotal point when Mary's problems gave particular cause for concern, with an ensuing bitter rejection of father and a highly critical attitude to mother.

Within the special school Mary was not popular amongst her peers, being described as bossy, bad-tempered and moody, Teaching staff generally found her difficult to handle, except one teacher who set out to work Mary hard. Most of the carestaff found Mary 'bristley' and not always compliant following requests.

Mary was physically mature and reasonably good looking (except for particularly dry skin on her face) and had a good average level of intelligence with acceptable academic standards.

Of the thirty-nine girls and sixty-two boys studied, Mary had the highest recorded level of ego development, stage 8 Conscientious/Autonomy on the S.O.A.E.D. and level 7 on the Loevinger S.C. Test of Ego Development.

Moral development was similarly high with a stage rating of 5.34 on S.O.A.M.D., Socionomy/Autonomy, and 3.5 on Bull's Test of Moral Judgment, likewise in transition between socionomy and autonomy.

Mary had developed and stabilized reasonably well in the twenty months she had been in the school, but dilute indicators of the reasons for her referral were presented daily. But why, considering her high levels of ego and moral development?

First of all, high levels of such development do not

automatically imply psychological adjustment, particularly emotional adjustment. Conversely, low levels of development do not always indicate maladjustment. Mary was one such exception, having the foundations of ego development from an early facilitative environment. Much of Mary's emotional maladjustment was 'simply' reactive to the break-up of her parents' marriage as she loved both parents dearly. By the same criteria it was inevitable no step-father was likely to be equated with her real father.

As the maladjustment was largely reactive and there was a solid core of mature development it may be expected Mary will slowly resolve her emotional problems. At the time of research Mary had an older boy-friend (father substitute?) but the relationship was very sensible and mature, particularly in sexual matters.

Mary was mis-matched in treatment as many of the staff were not at similar levels of development. Those that were, could relate to Mary but this did not help Mary cope fully with the greater norm of immaturity amongst her peers. She usually coped but became exasperated by the evergreen attitudes and behaviours, accepted within a psycho-social climate geared to the majority.

Summary

Sequential treatment is the most logical and consistently adopted approach to extremely problematic youngsters and is particularly appropriate to the developmental disorders of such youngsters when allied to stage-sequential moral and ego development.

Assessment of the individual is necessary to expose the full range of problems and potentials and the youngsters current levels of development. Treatment input levels and realistic goals may then be prescribed. Ongoing assessment is, or should be, part of any treatment plan and in this respect indicators of developmental levels have no small part to play.

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APPENDIX I

KEY to abrev	riations when tabulating RAW SCORES	
MS E MS	The rating scale developed by M. Smith	(MS)
	of ego development	(E)
	rated by M. Smith	(MS)
MS E T	The rating scale developed by M. Smith	(MS)
	of ego development	(E)
	rated by (6) teachers	(T)
LLE	Loevinger's scale of	(L)
	ego development	(E)
MS M MS	The rating scale developed by M. Smith	(MS)
	of moral development	(M)
	rated by M. Smith	(MS)
MS M T	The rating scale developed by M. Smith	(MS)
	of moral development	(M)
	rated by teachers	(T)
BM	Bull's Test of Moral Development	
RQ	Rutter Questionnaire	
RS	Report Slips (on pupils)	
BAI	Bolman's Aggression Index	
AP/MS	Adjustment Profile scored by M. Smith	
AP/T	" " teachers	
SL	Supervision List (school placement)	

⁽LE on its own is a reserved computer word)

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	A P (MS)	77	15	26	II	61	20	21	20	56	17	18	12	19	20	
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	m v	80	71	71	25	36	II	7	98	18	IO	32	18	83	2	
I	43	28	ηI	ħΙ	13	20	ηI	II	21	25	20	0I	18	77	19	
Appendix I	MB	1.92	2.65	2.13	3.00	1.75	2.00	2.00	2.13	2.13	2.88	1.50	3.00	2.16	2.04	
RES A	ME	2.33	4.95	3.05	4.20	I.80	3.66	3.00	4.20	1.71	4.12	2.33	2.66	2.13	4.12	2.40
RAW SCOR	MS MS	2.35	4.50	1.92	91.4	1.72	4.15	3.07	4.50	1.80	00.4	1.77	4.67	1.59	3.31	3.60
-1		2	9	6.	20	9	6	4	9	3	9	4	2	4	2	
	MS T	3.80	5.43	3.25	5.62	2.88	4.63	4.20	5:10	1.76	3.47	2.75	6.4	5.69	4.58	3.80
	MS MS	2.55	1.9	2.33	5.77	2.57	04.4	4.18	5.09	2.11	3.40	3.00	5.45	2.61	94.4	4.70
	Initials	M.A.	J.A.	K.B.	D.B.	N.B.	C.B.	I.B.	V.B.	T.B.	R.C.	A.C.	R.C.	G.C.	G.C.	M.C.

	HAB	3	4	2	2	4	3	2	4	4	3	5	2	2	2	4
	A P (MS)	II	17	22	29	22	91	17	13	28	37	17	13	18	9	91
	A (T)	26	19	31	18				17	27		54	18		6	20
	ΝH	2	9	2	2	4	2	2	9	4	2	2	7	4	2	ω
	ĸν	01	2	32	61	OI	121	691	20	17	139	18	2	4	10	2
	K G.	23	ω	77	7 I	ħΙ	13	ηI	18	32	61	25	21	15	77	53
(pen	MB	1.87	1.50	2.63	2.54	1.75	2.17	2.67	2.33	1.79	1.63	2.00	2.75	2.79	2.92	3.25
(Continued)	ME	2.66	41.4	2.17	I.88	2.00	1.90	2.72	3.42	3.40	2.54	2.40	4.19	3.81	5.44	3.66
SCORES	MS MS	2.36	3.44	2.07	1.83	1.94	1.44	2.35	3.38	2.40	1.57	2.74	3.31	3.25	6.21	2.21
RAW	니田	3	9	.9	2	3	2	9	7	2	3	2	9	4	7	2
	MS E L	3.66	5.52	2.62	2.04	2.83	2.72	4.23	5.29	4.30	2.08	3.66	5.18	2.16	6.81	44.4
	MS MS	3.69	4.11	2.39	1.43	2.61	2.64	3.36	00.4	3.33	2.52	3.40	4.29	2.07	7.23	2.89
	Initials	J.K.	D.C.	R.C.	い. 円.	S.Н.	Е.Н.	Л.Н.	р.н.	M.H.	Р.Н.	A.H.	G.K.	G.K.	J.L.	A.L.

	HAB	7	9	2	9	4	4	2	4	3	9	4	4	2	2	9
	A P (MS)	7	25	23	91	23	80	27	15	31	10	17	22	56	7	2
	A T (T)	17		35	19	25	II	37	17		61	25	II			12
	БΗ	6	2	47	9	77	9	2	4	Н	2	4	77	I	2	6
	K W	3	62	179	Н	25	6	118	80	7.1	4	56	22	35	18	3
	att Q.	114	61	29	10	25	17	26	21	17	1 ¹ / ₁	34	80	II	23	91
71	Z B	3.46	1.92	3.08	3.50	2.25	2.50	1.46	2.13	2.50	2.50	2.36	2.75	1.42	3.00	3.00
(Continued)	MS	5.25	1.55	2.44	4.38	2.65	2.41	2.00	3.94	3.04	00.4	2.94	3.07	3.00	94.4	3.71
SCORES	MS M MS	3.85	1.89	2.38	04.4	2.23	1.53	2.00	3.09	1.40	4.58	2.00	1.67	1.18	4.83	3.83
RAW S	러엄	9	٣.	3	2	3	3	3	7	3	9	4	3	2	9	~
	MS	91.9	2.03	3.00	5.00	2.52	3.27	3.26	94.4	3.70	4.36	00.4	3.65	3.00	5.64	5.45
	MS MS	40.4	2.64	2.94	18.4	2.81	2.85	2.78	4.00	2.41	6.29	3.25	2.95	2.23	6.26	5.05
,	Initials	P.L.	A.L.	G.M.	K.M.	M.M.	P.N.	A.0.	R.O.	P.P.	G.P.	W.R.	C.M.	J.S.	N.S.	D.S.

	HAB	2	4	2	77	2	2	3	2	2	4	77	4	5	4	н
	A P (MS)	23	22	II	35	33	91	25	17	23	23	23	II	17	24	32
	(T)	21		17	77		21		22		22	22			56	33
	νН	7	2	2	Н	2	9	2	7	2	2	2	2	4	2	н
	N N	20	941	80	39	124	Н	041	3	125	9	9	33	32	2	ω
	KG	19	18	61	56	18	II	15	12	13	15	II	9	IO	171	12
(pen)	MM	I.86	2.75	2.08	1.75	2.10	2.33	3.00	1.75	2.50	2.50	2.00	2.13	2.35	3.63	2.00
(Continued)	ME	1.83	1.5	4.20	1.44	1.86	4.37	16.1	3.50	4.05	3.25	2.25	2.20	2.11	3.75	I.33
SCORES	MS MS		1.14		1.36	1.70	3.45	2.24	3.00	1.42	3.00	3.91	3.95	3.17	3.00	1.50
RAW	니티	2	4	4	3	2	9	9	7	9	4	7	4	7	7	2
	ME	3.91	3.08	4.30	I.80	2.67	3.92	2.95	3.18	4.30	2.38	2.13	3.53	2.72	4.32	1.50
	MS MS	4.03	2.66	84.4	2.28	2.62	3.52	3.14	3.29	2.78	2.57	2.69	4.59	3.33	4.39	1.47
	Initials	M.T.	S.w.	K.W.	G.W.	D.W.	J.W.	A.W.	G.W.	M.W.	A.W.	N.W.	J.W.	L.Z.	D.W.	K.W.

	ПВВ	9	4	3	2	2	9	3	7	9	4	9	4	3	2	9
	A P (MS)	19	25	37	17	32	61	24	27	25	25	21	23	27	34	25
	A P (T)															
	пΗ	2	3	Н	7	2	9	2	4	4	2	80	7	2	2	2
	K W	н	77	47	4	19	80	27	61	22	59	II	OI	18	33	17
	c™ Q.	80	56	33	18	18	15	77	28	28	56	13	32	91	31	24
(pen)	ME	1.75	2.05	3.00	2.37	1.5	2.25	1.87	2.75	2.12	1.75	3.75	2.18	2.37	2.12	1.25
(Continued)	ME	3.38	3.30	2.58	4.00	3.11	3.83	3.05	3.28	4.21	I.8I	5.25	3.82	3.94	2.46	16.1
SCORES	MS MS															
RAW	日田	2	7	7	9	2	9	2	3	4	3	80	2	9	2	2
	M H H	5.33	3.65	2.80	2.00	3.83	5.95	3.80	5.83	5.77	2.66	7.45	4.74	4.78	3.41	2.12
	MS MS															
	Initials	D.B.	J.B.	B.B.	C.B.	M.B.	R.B.	D.B.	L.B.	A.B.	J.C.	R.C.	C.D.	L.F.	T.G.	M.H.

	H B	9	9	3	9	2	9	9	3	4	2	2	3	4	2	2
	A P (MS)	56		17	20	77	25	12	37	14		22	28	30	13	28
	A (T)															
	БΗ	3	6	9	2	9	4	80	2	2	10	77	2	I	3	2
	m vs	II	2	10	I	36	II	3	37	20	2	13	21	2	4	80
	K O.	32	2	17	23	27	18	17	33	13	80	25	22	23	61	21
	M M	2.62	2.6	2.12	2.12	2.00	1.75	2.75	I.5	2.00	3.6	2.05	3.75	1.12	2.62	2.12
inued)	MS M	4.38		4.52	4.52	3.40	4.27	4.90	2.39	5.75		2.75	3.43	1.77	3.30	4.15
RAW SCORES (Continued)	MIS MIS															
RAW SCOR	日田	3	80	4	2	3	3	2	3	4	6	3	9	2	3	6
	MEL	96.4		6.26	00.9	4.07	6.35	96.9	3.53	6.78		3.90	5.05	2.09	5.16	5.69
	MS MS															
	Initials	R.H.	А.Н.	н.н.	M.K.	D.MF	M.MG	C.M.	K.M.	3.0.	G.P.	K.Q.	Y.R.	A.R.	J.R.	D.S.

	нъв	4	2	3	7	3	3	3	9	9
	A P (MS)	91	28	10	22	27	32	23	33	2
	A (T)									
	Гα	5	9	2	4	4	9	2	2	6
	M W	25	8	3	91	23	15	2	4	7
	K G	5/7	61	35	27	77	35	27	29	9
nued)	M M	I.87	3.00	3.5	2.37	2.37	2.37	1.5	I.8I	3.5
SCORES (Continued)	MS M T		3.31	5.34	3.75	2.27	3.37	2.25	2.96	
RAW	日田				8	_	77	2	~	8
	нщ	6.7	9			7	7	"		w
	MS		41.4	8.00	5.07	2.92	3.02	3.20	3.65	
	MS MS									
	Initials	D.S.	V.S.	M.T.	D.V.	J.v.	M.W.	J.W.	L.W.	D.W.

(100.0	Level 2 Autonomy	0.6741*	NIT	0.5238*	0.6741*	¥I246.0	0.6741*	0.4673*	0.9703*	0.8862*	NIL
(* significant at 0.00I)	Level 6 Socionomy/ Autonomy	0.3743*	0.4792*	0.5139**	0.4992*	×4687.0	0.6570*	0.5453*	0.8185*	0.8701*	0.5034*
(* sie	Socionomy	0.4686*	0.5558*	0.333I S=0.004	0.4589*	0.36I9 S=0.002	0.1099 S=0.198	0.6053*	0.6239*	0.5414*	0.7188*
	Level 4 Heteronomy Socionomy	0.4717*	0.2193	0.1505 S=0.12I	0.5474*	0.5139*	0.4311*	0.239I S=0.03I	0.5798*	0.6012*	0.3889*
DEVELOPMENT	Level 3 Heteronomy	0.6560*	0.5539*	0.5659*	€9199.0	0.1301	0.6212*	0.6316*	0.1281 S=0.161	0.2157	0.3912*
MORAL	Level 2 Anomy/	0.7708**	0.7364*	₹4899.0	0.7439*	0.6938*	0.8356*	0.5509*	0.5277**	0.4547*	0.4871*
Statement	Pre-social Stage	0.8327*	0.4356*	0.7942*	0.7349*	0.6071*	0.572I*	0.7724*	0.7818*	0.7769*	0.2632 S=0.019
St		St.I	54:2	St.3	St.4	st.5	84.6	St.7	84.8	84.9	St.IO

(100.0	Level IO Autonomous/ Integrated	NIL	NIT	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
(* significant at 0.001)	Level 9 Conscientious/Autonomous	NIL	NIL	0.4231*	0.2559 S=0.002	NIL	NIL	NIL	NIL	0.4231*	0.6355*
	Level 8 Conscientious	0.672I*	0.5433*	0.8874*	0.5777*	0.7001*	· 48870	0.5204*	0.8264*	NIL	0.9322*
EGO DEVELOPMENT	Conformist-Conscientious	0.5355*	0.3261	0.6807**	-0.053	0.6200*	0.5909*	0.4884*	0.8137*	0.4831*	0.7600*
	Conformist	0.5607*	0.7025*	0.6054*	0.I902 S=0.069	0.7025*	0.3184	0.6849*	0.5905₩	0.3987*	0.5048*
Continuation sheet											
tion		t I	14 2	9	4	2	9	2	80	6	OI
ntinua		Statement	Statement								
GOJ		St	34			260					

	Level 5	Protoconformist	1	0.2990 S=0.009	0.1007 S=0.218	0.1420 S=0.135	0.5108*	0.3940*	0.1262 S=0.146	0.4I49*	0.7786*	0.4282*	0.5840*
(* significant at 0.001)	Level 4	Self/Protective Opportunistic		0.1305 S=0.156	0.146 S=0.127	0.4809*	0.3077	0.1399 S=0.139	0.0503	0.3079	0.4740*	0.I793 S=0.082	0.1121 S=0.193
* sig	Level 3	Action self		0.5216*	0.4622*	0.4459*	0.432I*	0.2724 S=0.016	0.3629	0.4627*	0.6291*	0.2158 S=0.046	0.0746
EGO DEVELOPMENT	Level 2	Impulsive / Infantile		* 4404.0	0.3512 S=0.003	0.6378*	0.5288*	0.4207*	0.3992*	0.5668*	0.2602 S=0.02I	0.6815*	0.7447*
	Level I	Pre-social / Symbiotic/ Undifferentiated		0.6442*	0.3773*	0.5206*	0.6223**	0.3423* S=0.003	0.5985*	0.6557*	0.5012*	0.6332**	0.4574*
				Statement I	2	E .	1	: 70	9	. 2	ω .	6	01
				Sta			2	61					

SMITH'S ADD	0-4	5-9	10-14	15-19	20-24	-5 - 29	30-34	35 - 39	240-44	45-4
D. B	I				1					1
J. B	i					. /		1		
B. B.		-							1	
C. B(i				1					
M. B	1					!	~			
R. B		i	!		1			1		
D. B.	1					. /				
L. BL.							1			
A. Bl	1						1			
J. C.	1		-			1				
R. C(1			, ,				1
	1	 	i	<u> </u>		1				1
C. D.	1		1				1	1	-	1
L. F.			-					1		1
T. GC	1	-	1	-		1		1		1
M. H.		1-	-		-	1		1		1
R. HC.	-	-	10					-		-
A. H	-	-	10	-	,			-	-	+-
Н. Н.	+	+	-	-	/			-	-	+
M. K.	-	-			/			-	-	-
D. McF.	-	-	-			1			-	+
M. McG.		-	-			1		1		+
C. M	-	-	-	V		-		-	1	+
K. MC	-	-	-			-		-	1	-
J. OL				1						-
G. P.	0							-		-
K. QU.	-	<u> </u>				1				-
Y. R.							/			-
A. RC							/			1_
J. RC			1			1		1		
D. S.							/			
D. SC					/					
V. S.							/			
М. Т.			1							
D. V.						/				
J. VI							1			
M. W.								/		
J. W						V				
L. W.	1		1			0				
L. W.								1		
D. IK.	1	0	-	262						

LOGVINGERS SC TEST OF EGO DEVELOPMENT - CUMULATIVE FREQUENCY

LUCVINGERS	SC 16							10011	100	- Cac
Stage	I-2	Δ	Δ -3	I-3	3-4	I-4	415	I-5		
D. B	1	7	14	34	36					
J. B	1	4	П	26	35	36				-
В. В.	3	4	13	29	35	36				
C. BC.	1		2	22	30	36				1
M. B.	6	11	21	33	36					-
R. Bi	1	5	16	23	29	35	36	•		-
D. B	7	16	31	36		:				-
L. B.	2	6	15	32	35	136				
A. B.		3	10	27	33	36				-
J. C.	2	7	20	34	36					-
R. C.			2	6	16	130	35	136		-
C. D.	6	15	24	36	19					-
L. F.						1				-
T. G.	6	14	7.8	35	36					-
M. F	II									-
R. H	1	7	13	33	35	136				
A. H.						1				-
н. н.	1	5	13	29	33	36				
M. K				7	18	33	36			
D. McF		8	19	35	36					-
M. McGL	1	7	18	31	35	136				-
C. M		1	3	12	19	36				-
K. M'	14	111	17	30	34	36				-
J. 0	1	5	14	34	35	36				-
G. F										
K. Q.	4	9	14	31	33	136				_
Y. F.		2	6	21	30	36				
A. R.	6	20	23	36						
J. R	1	8	17	35						
D. S	5	21	27	36						
D. £										1_
V. S	1	14	10	22	33	36				
М. Т								1		
D. V.	14	8	22	36						-
J. V.	11	7	111	30	34	36				
M. W.										
J. W.	5	9	20	34	36					
L. W										
	16	17	27	36						
L. W	1 4	1 . 1	1	1	1	A Company of the Comp	1		-	

	I-2	Δ	Δ -3	I-3	3/4	工-4	4/5	I-5	
D. B	1	6	7	120					
J. B	1	3	13	9	9	1			1
В. В.	3	١ ١	9	116	6	1			
C. B			2	20	8	6			
M. BI	6	5	10	12	3				
R. Bl	1	14	5	13	6	6	1		
D. BL	7	9	15	5					
L. B ^T	2	4	9	17	3	١			
A. Bt		3	7	17	6	3			
J. C.	2	5	13	14	2				
R. C			2	14	10	14	5	1	
C. D :	6	9	9	12					
L. F. III		1	6	12	14				
T. Gt	6	8	14	7	1				
м. н			1						
R. H	1	6	16	20	2	1			
A. H									
н. н	1	4	8	116	4	3			
М. К				7	11	15	3		
D. McF.		8	11	16	1				
M. McGi_	1	6	111	13	4	1			
C. M(_		1	2	9	٦	17			
K. Mc.	4	7	6	13	4	2			
J. O.	1	4	9	20	1	1			
G. P.									
K. Qt	4	5	5	17	2	3		200	
Y . F		2	4	15	9	6	1117		
A. R	6	14	3	13					
J. R	1	٦	9	18					
D. S	5	16	6	9					1
D. S									
V. £		4	6	12	11	3			
M. T			1	13	9	13		100	
D. V.	4	4	14	14	3				
J. V.	1	6	4	19	4	2			
M. W	2	6	3	20	4	1			
J. W.	5	4	11	14	2		1		
L. W_									
L. W	6	11	10	9					
0. 1/									

BULLS	TEST	OF	MORAL	JUDG	ENENT	:	SUB-SC	ORE S	5.

BULLS 169						
VALVE OF	LIFE		CHEATING		,	AVERAGE
D. E	12	2	1.5	. 2	7	1.75
J. B/.	2.25		2	, 2	8.25	
B. B.	3.5	3.5	2	3	12	3
C. BC_	13	2.5	2	2	9.5	2.32
M. B	1.5	1.5	1-5	1.5	6	1.5
R. B	3	2	2	2	9	2.25
D. BL	1.5	3	1.5	1-5	7.5	1.75
L. B.	2.5	3	3	2.5	11	2.75
A. B	3	1.5	2	2	8.5	2.12
J. C	2	1-5	1.5	2	7	1.75
R. C	4	4	4	3	15	
C. D	3	1.5	2.75	1.5	8.75	2.12
L. F	3	1.5	3.5	2.5	9.5	2.37
T. G	2.5	1.5	2.5	2	8-5	5-12
M. H	1.25	11.25	1.25	1.5	5-25	1.31
R. HC	3	13	2.5	2	10.5	2.62
А. Н.						
Н. Н.	2	2-5	1-5	2.5	8.5	2.12
M. K.	2.5	12	2.5	1.5	8.5	2.12
D. McF.	2.5	1.5	1.5	22	8	2
M. McGl	3	1-37	1.33	1-33	7	1.75
C. MC	3	3	3	2	l II	2.75
K. M.	3	1	1.5	1.5	7	1.75
J. 00	2.5	2	2	2	8.5	2.12
G. Ph						
K. Qi	2	2	2	2	8	2
Y. R	4	. 4	4	3	15	3.75
A. Ri	0	2	1	1.5	4.5	1.12
J. R	3	3	2.5	2	10.5	2.62
D. S.	2	2.5	2	2	8.5	2.12
D. S _						
V. S.	3.5	3	3	2.5	12	3
M. T.	3.5	3.5	3.5	3.5	14	13.5
D. V.	2	2.3	3	2.3	9.5	2.25
J. V.	3	2	3 2:	2	9.5	2.25
M. W.	3	2	2.3	2	9.3	2.2
J. W_	1.5	1.5	1.5	1.5	6	1.5
L. W.						1.5
L. W	2.5	1.75	1.5	2	7.25	1.75
D. W		i	245			3.75

Initial	Value of Life	Cheating	Stealing	Lying	Average Total
M.A.	2323232323132314323332223322343333333333	2 2.6 2 3 1 2 3 2.25 2	I.66	2	I.92
J.A.	3	2.6	3 2.5 2.5 2 1 1 1 2.5 3 3 3 2.66 1.5 2.66 1.66 3 2 1.33	2	2.65 2.13 3.00
K.B. D.B. N.B.	2	2	2.5	2	2.13
D.B.	3	3	2.5	3.5	3.00
N.B.	2	I	2	2	I.75
C.B.	3	2	I	2	1.75 2.00 2.13 2.88 1.50 3.16 2.04 1.50 2.54 1.75 2.67 2.67 2.67 2.75 2.75
I.B. V.B. T.B. R.C. A.C. R.C. G.C.	2	3	I	2	2.00
V.B.	3	2.25	I	2	2.13
T.B.	2	2	2.5	2	2.13
R.C.	3.5	2	3	3	2.88
A.C.	I	I	. 3	I	I.50
R.C.	3	3	3	3	3.00
G.C.	2.66	I.33	2.33	2.33	2.16
G.C.	3	1.5	I.66	2	2.04
D.C.	I	I.5	I.5	2	I.50
R.C.	4	I.5	2	3	2.63
D.C. R.C. S.F. S.H. E.H.	3	2.5	2.66	2	2.54
S.H.	2.5	I	I.5	2	I.75
E.H.	3	2	I.66	2	2.17
J.H.	3	I.66	3	3	2.67
D.H.	3	2.33	2	2	2.33
M.H.	2.5	I.33	I.33	2	I.79
P.H.	2	I.5	I I.5 3	2	I.63
A.H.	3	2.5	I.5	I	2.00
C.K.	3	3 1.33 1.5 1.5 1.5 2.5 1 2.66 2.33 1.5 2.5	3	2	2.75
G.K.	2.5	4	I.66 I.5	3	2.79
J.K.	2	2.66	I.5	I.33	I.87
J.L.	3	2.66 2.66 4	3	3	2.92
A.L.	4	4	3 2 1.33 3 2.33	3	2.79 I.87 2.92 3.25
A.L.	3	I.33	I.33	2	1.92
P.L.	3.33	4	3	3.5	3.46
G.M.	3	4	2.33	3	3.46 3.08 2.75
C.M.	3	3	3	2	2.75
K.M.	3	3	4	4	3.50
M.M.	3	2	2	2	2.25
P.N.	3	2	2	3	2.50
A.O.	2	I.5	I	1.33	I.46
R.O.	3	1.5	2	2	2.13
P.P.	2.5	2.5	3	2	2.50
G.P.	4	2	2	2	2.50
W.R.	3	2	2	2.5	2.36
J.S.	2	1.33	1	1.33	1.42
N.S.	3	4	2	3	3.00
D.S.	3	3	2	4	3.00
M.T.	2	2	2	1.5	1.86
S.W.	3	3	2	3	2.75
K.W.	3	1.33	2	2	2.08
G.W.	2	I	2	2	1.75
D.W.	2.75	2.66	1	2	2.10
K.M. M.M. P.O. R.O. P.P. G.R. J.S. N.S. M.T. S.W. K.W. D.W. A.W. A.W. A.W. J.W. J.W.	3	4 3 3 2 2 1.5 2 2 1.3 3 3 1.6 6 4 1.3 3 1.5 3	3 4 2 2 1 2 3 2 2 1 2 2 2 2 2 2 2 3 2 3 1 5 3 1 5 3 1 5 3 1 2 3 1 3 1 5 3 1 5 3 1 5 3 1 5 3 1 2 3 1 3 1 3 1 3 1 3 1 2 3 1 3 1 3 1	22232222313222322232221231332332423122221341322213332222 3	3.50 2.50 2.50 1.40 2.50 1.30 2.50 1.30 2.50 1.30 2.30 1.30 2.50 2.30 2.30 3.00 2.30 3.00 2.30 3.00 3.0
D.W.	3.5	4	3.5	3.5	3.63
J.W.	3	1.33	2	3	2.33
A.W.	3	3	3	3	3.00
G.W.	2	1.5	1.5	2	1.75
M.W.	3	3	2	2	2.50
K.W.	Eller Branch St. Dr		-	2	2.00
A.W.	3	3	2	2	2.50
N.W.	3 2.8	3 I.5 2.6	2 2 2 2	2	2.00
9 : W :	200	1.5	. 2	2	2.1)
L.Z.	2.8	2.6	2	2	2.35

266

ADJUSTMENT PROFILE,

Ch.h.	1	×	- 3	1.		6	7	0	9	10
statement r		E		4	5			8	-	10
D. B.	2		-	0	-	3	12	1 5	3	13
J. 3(3	10	3		4	13	3	2	3	12
B. B.	4	12	3_	4	14	14	4	3	3	14
С. В	-	1 9	11	11	3	12	1	1	2	13
M. B	3	: 0	1 4-	2	2	3	14	3	3	14
R. B	1	1		10	1-1-	12	14	2	2	14
D. Bt	3	. 2	3	11	3	11	3	3	3	11
L. B.	3	3	3	3	2	3	4	2	2	
A. B	9	4-		2	4	4	1(54)		3	13
J. C	2	0	14	2	2	1.1	4	2	3	1 4
R. C	1	3	1 3	2	1.	13	3	12	2	1
C. Di	3	2	3	1	1	2	4	11	2	1 3
L. F.	2	2.	3	11	3	14	4	3	3	1
T. GC.	3	2	4	4	4	3	3	3	3	1
M. H	2	0	14	0	4	2	4-	12	2	
R. HC.	2	1	14	2	4	12	3	2	13	
A. He. J	Done	(-/-/	19).							
н. н	2	X 3	2	2	1	2	2	2	2	
M. K		2	2	1	4	14	1	1	2	1
D. McF	2	2	3	2	4	2	3	3	2	
M. McGi	3	1	13	2	1	3	4-	3	2	
C. M		5.	2	1	1	:)	0	1	2	1 2
K. Mc	4	2	3	4	4	4	4+	4	4	100
J. O.	1	0	11		3	1	3	1	1	1
G. P.	Done	2/-/-	1/79)	1						
K. QI	9	9	13	2	1	0	3	3	2	1
Y. R.	4	1	14	3	0	2	4	3	3	
A. R	3	0	4	4	4	1 BF	3	3	3	
J. R	5		3	0		11	1	2	1	
D. S.	3	1	14	3	2	3	4	3	3	1
D. S.	2	1	13	1		2	3	1	1	1
V. S.	3	10	1/3	4	4	3	3	3	3	
M. T.	1	3			,	1	0	1	2	+
D. V	3	2	3	2	9	3	2	2	2	1
J. V.	3	3	3	3	3	4	3	2	3	
M. W.	4	3	14	2	1+	4	4	4	3	1
J. W.	1	0	4	-	4-	4	3	1	2	
L. W										1
716 MY	3		7	3	11	4	3	3	3	13

BOTMAN de							
Initial	I	2	STAGE 3	4	5	6	7
Iniviai	-	2				0	,
C A	3 11 11	1					
G.A.		1					
M.A.			1				
J.A.			1				
К.В.			1		,		
D.B.					/		
C.B.					1		
T.B.		/					
R.C.		✓		/	/	1	
A.C.					,	1	
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G.C.	/						
D.C.			/				
P.C.			4,				
R.C.			~	/			
S.F.				V.			
D.H.			,	/			
M.H.			/	7			
A.H.				/	,		
M.J.					/	1	
C.K.						~	
J.K.			/				
J.L.						./	
A.L.				-/		~	
P.L.						./	
тт						1	
J.L.			1			~	
G.M.			1				
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J.M.			V		,		
W.M.					~		
P.M.				/			
M.M.			1		1		
K.M.			,		~		
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N.N.			•	1			
P.N.			1	~			
A.O.		1					
R.O.		1	1				
R.O.			1				
G.O. G.P.			V	/			
G.P.				~			
W.R.			1				
S.R.			1	1			
P.S.			,	~			
A.S.			/				
D.S.					1		
D.S.					~		
M.T.		/					
W M				./			
K.W.		./		~			
G.W.		~	1				
S.W.			>>				
D.W.			V				
M.W.			V.				
G.W.	,		V				
K.W.	\						
A.W.			/	/			
N.W.				V			
			2.7		-		
	2	6	23	11	7	6	
			S. Sent				

	ADJU	STMEN	I PI	ROFII	JE_								
Initial	1			Si	PATEN	TENT				8411		-	
	I	2	3	4	5	6	7	8	9	IO	II	12	T
M.A.	3	2	3	2	3	3	3	2	3	2	2	0	28
J.A.	313231323221222342221342132113133	212322333222232344221343133133132	3131323232322243232443132134133	2 I 2 0	333224323222223332212332222123232	323131323222233231212341130123033	333332233232223344221343311113033	21312113201132223222341110	32312331322133223211234	0 2	212113132232222323231333222234233	011012031010200203211333103022031	21701522556 3123635518 35909544 36363518 36363518 36363518
K.B.	3	2	3	2	3	3	3	3	3	2	2	I	30
D.B.	2	3	I		2	I	3	I	I	0	I	0	15
N.B.	3	2	3	0	2	3	3	2	2	0	I	I	22
J.A. B.B.B.B.B.B.C.C.C.C.C.C.C.C.C.C.C.C.C.	I	2	2	01223221121232110232121001021	4	I	2	I	3	03202100010120000120110010	3	2	25
1.B.	3	3	3	2	3	3	2	I	3	2	I	0	25
V.B.	2	3	2	2	2	2	3	3	1	0	3	3	26
T.B.	3.	2	2	2	3	3	2	2	3	7	2	1	31
A.C.	2	2	3	2	2	2	3	T	2	0	2	T	23
R.C.	Ī	2	2	Ī	2	2	2	Ť	T	0	2	0	TA
G.C.	2	2	2	Ī	2	2	2	3	3	0	2	2	23
G.C.	2	3	3	2	2	3	2	2	3	I	2	0	25
D.C.	2	2	2	I	2	3	3	2	2	0	2	0	21
R.C.	3	3	2	2	3	2	3	2	2	I	3	2	28
S.F.	4	4	4	3	3	3	4	3	3	2	2	0	35
S.H.	2	4	3	2	3	I	4	2	2	0	3	3	29
E.H.	2	2	2	1	2	2	2	2	1	0	2	2	20
J.H.	7	7	2	1	7	7	7	2	1	0	3	1	19
D.П.	3	3	Ĩ.	2	3	3	7	3	2	T	7	7	7
P. H.	4	4	4	3	3	4	4	4	4	2	3	3	44
A.H.	2	3	3	2	2	I	3	Ī		0	3	3	2:
C.K.	I	Ī	Í	Ī	2	Ī	3	Ī	0 I 2 0 I 2 3 0 2 3	I	2	Ī	Ié
G.K.	3	3	3	2	2	3	Í	I	2	I	2	0	23
J.K.	2	3	2	I	2	0	I		0	0	2	3	16
J.L.	I	I	I	0	I	I	I	0 2 3 0 2 2	I	0 .	2	0	9
A.L.	I	3	3	0	2	2	I	2	2	I	3	2	22 32 27 27 27
A.L.	3	3	4	I	3	3	3	3	3		4	2	32
P.L.	1	1	1	0	2	0	0	0	0	0	2	0	20
C.M.	2)	2	T	2	2	2	2	2	0	2	7	25
C.M.													
M M	3	2	2	2	3	7	3	2	3	T	3	T	28
P.N.	T	2	ī	0	Ī	2	Ī	Ī	0	0	0	Ī	I
A.O.	3	3	2	3	4	2	2	3	3	2	3	3	33
R.O.	I	2	2	I	2	2	I	3	0	0	2	3	IS
P.P.	4	4	3	3	3	3	4	4	3	I	3	3	38
G.P.	I	2	I	0	3	I	I	0	2	0	2	I	I
W.R.	2	3 .	2	2	2	1	2	1	2	0	3	3	2
J.S.	3	3	3	2	2	3	4	7	2	1	2		١
N.S.		T	T	0	T	T	2	0	0	0	T	T	
м т	3	3	3	T	2	3	3	3	2	T	3	2	20
S.W.	2	2	3	Ī	3	3	2	2	3	ō	3	3	2
K.W.	2	2	Ĭ	Ī	2	2	I	0	2	0	2	Ó	I
G.W.	4	4	4	3	4	4	3	4	4	2	3	2	4]
D.W.	4	4	4	2	3	3	4	4	3	2	3	4	40
S.W.	I	I	I	0	3	I	I	0	I	I	I	0	I
D.W.	3	3	2	2	4	3	3	I	3	3	2	0	29
K.M. M.M. P.N. A.O. R.O. P.P. G.P. W.R. J.S. D.W. K.W. G.W. D.W. J.W. A.W. M.W. N.W.	231314123113224413232343323	122324233113224413332343312	221223123113314412233343323	1203130220011132022212422	3314233232123243342322333	332223113113324313233343313	2312141241232134132323322	1213340131032044011313422	2303032230023243132222333	0102010010010022131201211	2303232320133233122313433	01133313111230240001111111	221313143144122322422
A.W.	3	3	3	2	3	3	3	3	2	2	3	I	3
G.W.	2	2	3	1	2	3	2	7	2	U	1	1	20
W.W.	3	11	1	1	2	3	2	1	2	2	1	T	110
V.M.	3	3	3	2	7	3	2	2	7	T	3	T	20
N W	3	7	7	2	77	7	2	2	3	T	3	T	20
T W	2	T	2	T	T	T					T		T
J.W. L.Z.	3	2	3	I I 269	I 2	7	2 2	I	0	0	I 2	T	13
)	~	1	-	~)	-	-	-	0	~		

RUTTER CHILDRENS' BEHAVIOUR QUESTIONNAIRES

KUITER C	HILDRENS. BEHAV.	TOUR GUESTIO	NNAIRES
Initial	TOTAL	NEUROTIC SUB-SCORE	ANTI-SOCIAL SUB-SCORE
D.B.	8	3	2
J.B.	29	3	IO
В.В.	33	5	9
C.B.	18	3	2
M.B.	18	0	IO
R.B.	15	2	2
D.B.	24	2	9
L.B.	28	3	I2
A.B.	28	5	8
J.C.	26	3	5
R.C.	13	4	2
C.D.	32	5	9
K.E.			
L.F.	16	3	5
R.H.	32	5	6
T.G.	31	6	7
M.H.	24	3	4
A.H.			
н.н.	17	6	3
C.K.			
M.K.	23	5	2
D.M.	27	3	II
M.M.	18	2	6
C.M.	17	5	3
K.M.	33	5	12
J.O.	13	0	5
K.Q.	25	2	10
A.R.	. 23	6	3
J.R.	19	4	6
D.S.	21	4	5
Y.R.	22	2	IO
V.S.	19	3	8
L.S.			
M.T.	35	6	7
D.V.	27	4	8
J.V.	24	5	5
J.W.	27	4	8
L.W.	29	2	IO
M.W.	35	5	9
D.S.	28	4	II

A score of 9+ is indicative of maladjustment 270

RUTTER CHILDRENS' BEHAVIOUR QUESTIONNAIRE

RUTTE	CK CHILDR	END. E	EHAVI	OUR QUEST	TONNAL	<u>RE</u>	
Initial		TOTAL	1	NEUROTIC SUB-SCOR		I-SOCIAL B-SCORE	
M.A.		28					
J.A.		14		3		3	
K.B.		14		Í		Ť	
D.B.		13		4		T	
N.B.		20		6		Ō	
C B		14		T		6	
T B		II		1 Li		0	
V P		21		5		2	
K.B. D.B. N.B. C.B. I.B. V.B. T.B. R.C.		25		2		+	
D. C.		25 20		2		<u>+</u>	
R.C.		7.0		2		1	
A.C.		IO		4		4	
R.C.		18 24		7)	
G.C.		24		4		9	
G.C.		19 8		4		4	
D.C.		0		3		0	
R.C.		24		5		6	
S.F.		14		5		1	
S.H.		14		I		5	
A.C. R.C. G.C. D.C. R.C. S.F. S.H. E.H.		13		4		I	
J.H.		13 14 18 32		2		23110607114394061514202	
D.H.		18		7		2	
M.H.		32		2		IO	
J.H. D.H. M.H. P.H.		19		4		2	
A.H.		25		5		IO	
C.K.		21		6		6	
G.K.		15		5		0	
J.K.		23		3		IO	
A.H. C.K. G.K. J.K. J.L. A.L. A.L. P.L. G.M.		19 25 21 15 23 4 29		6314614555454435514272456531524614		0	
A.L.		29		5		IO	
A.L.		I9 I4		2		6	
P.L.		14		4		2	
G.M.		29		6		9	
C.M.		29		I		6 2 9 2	
K.M.		IO		4		0	
M.M.		25					
P.N.		25 17 26 21 17 14		Í		6	
A.O.		26		6		.6	
R O		21		5		7	
P.P.		17		3		6	
G.P.		14		3		3	
W.R.		34		8		IO	
J.S.		11 23 16		2		2	
N.S.		23		5		6	
D.S.		16		4		5	
M.T.		19		4		3	
S W		I9 I8		3		5	
K W		TO		6		Ť	
G W		19 26 18 16		4		8	
D.W.		T8		3		5	
S W		T6		5		3	
D.W.		14		7		Ó	
T W		TT		5		0	
P.N. A.O. R.O. R.O. P.P. G.P. W.R. J.S. N.S. D.S. M.T. S.W. K.W. G.W. D.W. D.W. S.W. G.W.		II 15 12 13 12		516533825443643535444		2	
C W		12		Ži.		Ť	
DI TH		12		11		T	
M.W.		1)		1,		2	
N.W.		Tr		-		T	
K.W. A.W. N.W.		15		2		0	
N.W.		15 11 6)		0	
J.W.		TO		4 5 3 3		66676302653518530021121000	
L.Z.		IO					
	A score	of 9+	15 1r	ndicative	of mal	adjustmen	ľ

A score of 9+ is indicative of maladjustment

		ADJ	USTM	ENT	PRO	FILE						
Score Range	0-	5-8	9- 12	13- 16	17- 20	2I- 24	25- 28	29-	33- 36	37- 40	4I- 44	45- 48
M.A.							V					
J.A.					V			V				
K.B.				,				V				
D.B.				V		V						
N.B.						V	.1					
C.B. I.B.							V					
V.B.							٧,					
T.B.							V	1				
R.C.						1		~				
A.C.						1						
R.C.				,								
G.C.				V								
G.C.						V	1					
D.C.						1	V					
R.C.							/		,			
S.F.								,	/			
S.H.					/			~				
E.H.					1							
J.H. D.H.				1	/							
M.H.									1			
P.H.											1	
A.H.						1						
C.K.				V	'	,						
G.K.					,	V						
J.K.			1	~	T to							
J.L.			~			./						
A.L.		1				*		V				
A.L. P.L.		~										
G.M.								/				
C.M.							1					
K.M.					1							
M.M.							/					
P.N.			1									
A.O.									V			
R.O.					/					,		
P.P.					,					V		
G.P.				V		1						
W.R.						V		,				
N S		1						V				
D.S.		40.00	1									
J.S. N.S. D.S. M.T.								/				
S.W.				,			1	~				
K.W.				~			V					,
G.W.												/
D.W.			1							/	1	
S.W.			V					1				
D.W.						1		~				
J.W.						~						
A.W.					,			/				
G.W. M.W.					/			1				
K.W.								V		1		
A.W.								1,		V		
N.W.				- /				1				
J.W.				~		1						
Max: Adj		2	4	8	6	II	9	I2	3	3	2	Max.Mal
		~		8 27	Ž		1		,		2	Adj.

	d.c.b.	I.Q.	M.A.	R.A.	
D. B	12.12.67	V.93:P.106:FS.98	12.3+	10.2	
J. B _	25.8.67	V. 100	10.3	8.1	
B. Bi	5.5.65	V. 101:P.89:FS.95	9-11	9.6	
С. Б.	6.4.65	V.77:P.73:FS.73	9.5	10.3	
M. B	10.10.68	Average	10.1	10.7	
R. B	12.3.65	V.87:P.94:FS.90	10.6	10.1	
D. B	18.3.70	V.99:P.91:FS.94	7.4	8.6	
L. B	100 10 15	V83:P.92:FS.85	11.6	9.0	
A. B'_	11.2.66	V.87:P.99:FS.92	10.10	12.6+	
J. C.	18.2.69	V.84:P.85FS.83	6.3	6.6	
R. CC	10.12.63	V.87:P. 104:FS.95	10.9	12.6+	
C. D	15.8.66	Border line ESN	10.3	10.7	
L. F	26.7.66	Average	10.7	9.3	
T. G	22.11.67	V.87:P.83:FS.88	7.4	7.2	
M. H. "	14.7.71	FS 79	5.3	6.0	
R. E	28.7.68	V. 113:P. 100:FS. 107	10.10	11.10	
A. H	4.5.63	V.89:P.93:FS.90	10.5	12.1	
н. н.	9.3.65	V.84:P.100:FS.90	13.0	11.1	
м. к	4.1.64	Low average	9.5	11.5	
D. McF	10.12.68	V.90:P.74:FS.81	6.4	7.4	
M. McG.	27.3.67	Good average	11.6	10.3	
C. M	26.3.64	V.91:P.113:FS.101	11.6	12.6+	
K. N.	9.12.65	V.79:P.92:FS.84	12.3	10.4	
J. 0	22.3.67	V.82:P.88:FS.84	11.6	9.6	
G. P.	11.3.62	V.119:P.128:F5.125	15.9		
K. Q	24.2.68	Average	10.5	9.5	
Y. R.	19.6.66	F.S. 114	8.9	12.6+	
A. R.	15.4.66	F.72:FS.62	7.7	9.10	
J. R.	2.6.69	V.75:P.93:FS.83	8.3	8.0	
D. S.	7.6.66	84	8.3	8.1	
D. S	8.10.65	81	11.10	9.2	
V. S.	12.9.64	V.81:P.93:FS.85	11.10	10.1	
M. T	10.5.64	V.94:P.99:FS.96	13.6	12.1	
D. V	14.1.66	V.85 - 94	8.0	8.7	
J. V.	6.5.67	70	9.9	9.3	
M. W.	30.4.66	V.80:P.83:FS.80			
J. W.	21.8.70	77	6.9	7.2	
L. W.	10.8.67	V.79:P.92:FS.83	6.9	7.2	
L. W	13.2.69	V.91:P.94	7.7	8.9	
D. 17	6.1.68	V.75:P.Average	10.10	9.11	273

To be completed by teachers Deloral Sc

Below are a series of descriptions of behaviour often shown by children. After each statement are three columns: "Doesn't Apply", "Applies Somewhat", and "Certainly Applies". If the child definitely shows the behaviour described by the statement place a cross in the box under "Certainly Applies". If the child shows the behaviour described by the statement but to a lesser degree or less often place a cross in the box under "Applies Somewhat". If, as far as you are aware, the child does not show the behaviour place a cross in the box under "Doesn't Apply".

I.	Please put ONE cross against EACH st	atement	Thank	you.
STA	PEMENT	oesn't Apply	Applies Somewhat	Certainly Applies
I.	Very restless. Often running about or jumping up and down. Hardly ever still	\boxtimes		
2.	Truants from school	\boxtimes		
3.	Squirmy, fidgety child		E	
4.	Often destroys own or others' belongings	\boxtimes		
5.	Frequently fights with other children			
6.	Not much liked by other children		X	
7.	Often worried, worries about many things		\boxtimes	
8.	Tends to do things on his own - rathe solitary	r 🔀		
9.	Irritable. Is quick to "fly off the handle"			区
IO.	Often appears miserable, unhappy, tearful or distressed			図
II.	Has twitches, mannerisms or tics of the face or body	\square		
12.	Frequently sucks thumb or finger			
13.	Frequently bites nails or fingers		区	
14.	Tends to be absent from school for trivial reasons			
15.	Is often disobedient		M	
16.	Has poor concentration or short attention span			
17.	Tends to be fearful or afraid of new things or new situations			
				Cont.

STATEMENT	Doesn't Apply	Applies Somewhat	Certain Applies
18. Fussy or over-particular child19. Often tells lies			
20. Has stolen things on one or more occasions			N N
2I. Has wet or soiled self at school this year	図		
22. Often complains of pains or aches	X		
23. Has had tears on arrival at school or has refused to come into the building this year		. 🗆	П
24. Has a stutter or stammer			
25. Has other speech difficulty	Image: Control of the		
26. Bullies other children		口	
Are there any other problems of Moody:			
Sugnature: Mr/Mrs/Niss .			
How well do you know this child? V	ery well	1	
Moderately well N	ot very w	ell _	
Neuroti Anti-soci	ic scort		+
Total sc	ore 13	5	

Adjustment Profile Mk. II Diane B. Research code Ring appropriate box in pencil. NOTE This profile can only be completed by someone who knows child extremely we 1. GENERAL LEVEL OF DEVIANCE OR nil very high DISTURBANCE. 2. DEGREE OF DISTURBANCE FELT BY SUBJECT 434 high as a result of own attitudes or nil .397 behaviour e.g. injuries, rejection, punishment, sadness, teasing etc. 313** 3. DOES CHILD REALISE AND ACCEPT TRUE fully no DEGREE OF DEVIANCE OR MALADJUSTMENT. 134** 4. IS CHILD'S CONDITION AMENABLE TO TREATMENT OR RE-EDUCATION yes 074 5. LENGTH OF EXISTENCE OF CHILD'S PROBLEM .028 (see case file or parents) very recent all of 1: or reactive 6. DEGREE OF DEPENDANCY ON OTHERS high nil (incitement of anger, pity, helplessness etc.) 019** 7. DEGREE OF PROBLEM TO PARENTS nil (even though parents may not high recognise same) 785** 8. DEGREE OF PROBLEM TO STAFF nil high (in terms of child management) 868** 9. RATE OF SOCIAL MATURATION fast (Is the development rate normal in nil pace and level) 10. IS CHILD PHTSICALLY OR MENTALLY 466* grossly no HANDICAPPED (permanently) .002 11. IS CHILD LIKED BY STAFF (Generally 97I fully no

TOTAL SCORE

or staff supervision.

12. DELINQUENCY - outside of parental

speaking)

.II5

087*

.005

** Sig. at p> .00I level

nil

high

Appendix 4

SUPERVISION LIST or PERSONAL RELATIONSHIP TRAINING

SCHEME

In this scheme a maladjusted child is placed at a level consistent with the attitude and behaviour currently displayed.

The aims include:-

- I. The provision of a visual display showing the social and emotional progress individual pupils are making,
- a means of promoting a more consistent approach from all staff,
- 3. a stimulus for positive development by pupils,
- 4. a suitable level of freedom for those pupils not likely to abuse the situation,
- 5. control of those needing close supervision,
- 6. an opportunity for shared decision between staff and pupils.
- We have been operating this scheme for several years and during this time new staff have posed various critical questions and this is probably the most suitable way of describing the scheme.
- Q. It is just another means of punishing?
- A. The position of a child on the scheme is dependant on their performance over a period of time, not on a single incident.
- Q. What if, during this defined assessment period the child absconds, steals or commits some other relatively serious action?
- A. If for the child's sake additional supervision is deemed necessary then this can be effected outside of or as part of the scheme.
- Q. Are the more disturbed children penalised for being so disturbed?

- A. These children will usually need closer supervision but should not be unnecessarily deprived, though the scope of their world may warrant restriction.
- Q. What if a child 'sticks' at one level and gets despondent as a result?
- A. Staff will then be alerted to finding other, hopefully more successful, treatment approaches.
- Q. Isn't a simple distinction between those needing close supervision and those needing loose supervision too big a step?
- A. Yes, the scale is a compromise between few such large steps and too large a number of finer steps. Though the latter is easier for pupils to ascend, it becomes more unworkable due to its inherent complexity. Ten stages are a workable compromise.
- Q. Why two titles for the same thing?
- A. Children at lower levels of conceptual ability (flexibility of thought) will understand and learn from the term supervision list. Indeed, the accent may very well be on supervision. Later, the degree of supervision needed will be seen to be related to the level of success in personal relationships.
- Q. The worst behaved children often think only in the shortterm so will review occur soon enough for them?
- A. A weekly review has been found to be reasonable whilst still relating to normal expectations. Some children need a sessional or daily breakdown (continuous assessment), based on the award of points, tokens or 'stars', being totalled over seven days.
- Q. Normal children would be expected to go for much longer periods without doing anything too diabolical.

- A. We don't expect our own sons or daughters to be very diabolical at all. However, progress and movement must be the aim, so a review every three weeks works out O.K. for more able children.
- Q. Is everyone critical of the child in a large group?
- A. Yes, for those on loose supervision who should be able to stand it. Nothing too diabolical should be needed to be said. The more maladjusted children who could invoke an enormous amount of criticism are reviewed by staff only, with the accent on external control and decision.
- Q. Don't the children need the chance for discussion?
- A. Yes, this starts with the middle group, those on moderate supervision.
- Q. Three groups, ten stages? How is this calculated?
- A. Close I Moderate 4 Loose 7

 " 2 " 5 " 8

 " 3 " 6 " 9
 - 'Off-the-list' (IO), for if a child is well adjusted there is little point in having them on the list or scheme.
 - Once a child is 'off-the-list' one must expect them not to need to re-enter the scheme.
- Q. One can see the educational aspects, re training but what about psychological aspects?
- A. The scheme can be related to many of the many psychological theories but can be more usefully related to enhancement of the self-image, ego development and emotional development (these being considerably interdependent).
- Q. Any scheme that depends on a framework can be too restrictive in some situations.

279

- A. True, if the child's needs are such, then go outside of the scheme. This decision should not be made other than be the Head or team-leader.
- Q. What does the visual layout look like?
- A. Like this: -

		CLOSE			MODER	ATE		1009	E	OFF- LIST
Name of pupil	I Exam. of limits	2 ditt	3	4	5	6	7	8	9	10
A. Able	0	drawin	g pi	ns						
	el at show d			nge	dit	to		dit	0	

- Q. What does 'example of limits' mean?
- A. This is a guide for staff on the limits for each group.

 For example, Close I might say: Confined to area X at break-times and lunch-times. Staff directed activities. Clear and simple expectations. Short term aims. Not allowed to borrow keys etc..
 - At the other end, a Loose 8 might be: allowed into house and their dormitories at break-times and lunch-times. Allowed to miss one meal out (in the local town) etc..
- Q. Do any of these restrictions or freedoms affect bedtimes?
- A. Yes, bed-times are a combination of the position on this list and chronological age. Viz:-

Age	IO - II	12 - 13	14 - 15	16+
Close	8.45	9.00	9.15	9.30
Moderate	9.00	9.15	9.30	9.45
Loose	9.15	9.30	280 9.45	10.00

- Alternative times may be arranged for much younger or older children.
- Q. What relationship does the scheme have in 'training for life'?
- A. Certainly we have found in practice that if a pupil leaves the school as a 'close' he is more likely to fail. The reverse has also been shown to apply for those at levels 8, 9 and IO.
- Q. Do parents, social workers and others understand when the child talks of being a 'mod six'?
- A. Usually, and if not it helps in discussion of the child as one explains their relativity to the scheme. This interest from outside of the school often stimulates the child's progress.
- Q. How does the scheme enable a prescriptive approach to be made?
- A. Here are examples, across the board: Examples of levels of supervision -

Close I Closest of supervision. Under constant superDirected activities with staff only Probably confined to one small area.

- Close 2 Has to earn all extras. Within easy range of staff members.
- Close 3 Free time highly struct- Within sight of staff.
 ured.
 Supervised shopping
- Mod. 4 Trips out only if of value Playing, talking etc.
 to pupils adjustment (not within easy range of
 to fill a bus) school unit.
- Mod. 5 Can play freely as or in a group. Can walk to village shop.
- Mod. 6 Usually eligible for trips out.
- Loose 7

 Helps others when asked.

 O.K. to Youth Clubs.

 Can walk into nearest town.

Can stay in group rooms regardless of weather if desired.

Loose 8	Helps others sometimes. Can miss one meal (in t	
Loose 9	Able to supervise M.4 in Takes initiative in hele staff with tasks.	n town. O.K. to dorms.
OFF LIST	Maximum freedom 'as a g parent would'.	Dorms or group room Able to make coffee etc
Geo	graphically A	Geographically B
Close	- tendency to be Clo	ose - confined to a small area under staff supervision.
Loose	- focus outside of Mod the school	derate -within call of a whistle or hand bell.
Modera	te -a controlled Loc progression between the above.	ose - out of sight and available range.
Q. What	sort of behaviour or attitu	ade will relate to the
var	ious positions on the super	cvision list/social
rel	ationship training scheme?	
A. Gener	ally like this:-	
LEVEL	Interpersonal style	Attitude or behaviour.
Close	Very difficult to relate to by staff or other pupils. Uncaring.	Wild or odd behaviour. Rarely conforms. Uncaring.
2	Unreliable. Seems to avoid relationships	Often badly behaved. Doesn't try. Expedient.
Close 3	Unstable relationships. Destructive of relation- ships.	Unrealiable. Verbally aggressive, foul language.
Mod 4	Longer periods of friend- ship. Can often manage in a group.	Usually conforms. Starting to be trusted by staff.
Mod 5	Fairly relaxed with staff. A few friends for activities.	Rarely a behaviour problem. Reliable in tasks.
Mod 6	Has a good friend. Relates well to staff. Tries to please.	Conscientious. Stable temperament. Avoids trouble.
Loose 7	Rarely selfish or self- centred. Likes being trusted by staff. 282	Positive attitude. Can carry out a regular responsibility well.

Loose 8	Communicates feelings. Regarded as reliable by staff and pupils.	Strong, all round motiva- tion. Managing outside difficulties well.
Loose 9	Warm and friendly to most people.	Can be responsible for other pupils even if they are awkward.
Off list	Can be independent. Relates well to majority of staff and pupils.	Stable, insightful. Completely trustworthy.

Examples of Behaviour Evaluation

Evaluation

- O For information only. These report slips may be later destroyed. Score sometimes awarded when staff member has misjudged situation or acted unwisely.
- Trivial offences often attributable to forgetfulness or lack of simple forethought.

 Many normal childish acts are scored thus.

 Breaking school rules such as running along corridors etc.

 Cheekiness to staff.

 Messing about at the meal table.

 Negligence resulting in damage to fittings, tools etc.
- Causing fights through aggravation. Provocative name-calling.

 Refusing to settle after being told (at least twice) to be quiet in dormitory at night.

 Refusing to do homework.

 Mild vandalism.

 Verbally offensive to staff.

 Spoiling a group game continuously.
- 3 Slamming out of class and not returning.
 Careless cruelty to animals.
 Obvious bullying.
 Destroying own clothes, exercise books etc.
 Dyadic masturbation.
 Vandalism (moderate).
 Obscene language and defiance to staff.
- Shop-lifting. Pre-meditated stealing (and keeping) articles from peers or staff.

 Running away in a bad temper and staying away from school.

 Rages requiring restraint by staff.

 Vulgar sexual display.

 Leaving water taps on in house, deliberately.

 (Smoking in dormitory.)
- Causing actual physical harm to peers, non-accidentally.

 Extreme cruelty to animals.

 Physical attacking of staff.

 Wanton destruction of furniture, fittings etc.

 Lighting fires in dormitories, waste-bins etc.

 Calmly planned absconding.

 Breaking and entering staff-rooms, cars etc.

 Grosser sexual offences like soliciting, sexual sadism etc.

The following points need to be taken into consideration when evaluating report slips.

- 1. The reasons for committing the act, the situation the child found himself in and the child's state of mind at the time affect evaluation.
- 2. Many events demand further investigation.
- 3. Sometimes when trouble occurs within a group, the member of staff writes a report slip on the 'worst' child only. Other associates may need report slips and evaluation.
- 4. A severely maladjusted child can be evaluated by many low-scored trivial items due to him not being with it' or another child by occasional major outbursts.

Report-slips are used by all professional members of staff to record information on pupils during day-to-day treatment. The slips are stapled together and of cheque-book size with the following layout:-

Child's Name:	Date: Time Hrs.
	: lasid a our emoit book evous out serv a
Action Taken:-	Completed?
Staff Initials:	Evaluation: Graphed.

Date and time is particularly important because of the possibility of a train of events or of manipulation of situations.

Details need to be recorded of instances such as aggression, manipulation, bullying, stealing, withdrawal from situations etc., in short, abnormal responses to normal situations. Positive effort or achievement from a child who is usually negative is also recorded.

Action should follow for both negative and positive acts by the pupils in order to encourage appropriate conduct, though behaviour modification programmes as such will usually be outside of this system of recording.

Reports should be brief and concise, indeed, capable of being read by a staff-member needing to act on the basis of the report alone. The actual act should be recorded objectively and inferential terms such as "bad", "naughty", etc. avoided.

The adjustment and development of the individuals concerned should be taken into account in any estimate of urgency, seriousness, etc. For example, stealing by a fairly normal older child is qualitatively different to the stealing (or using) by a young (emotionally) child.

Each slip is evaluated on a scale 0 - 5; any outside of this range are not used.

Examples of evaluation:-

- for information only. Such as a change of address etc.
- Mild offences. Breaches of minor school rules. 'Borrowing' without asking, running inside building etc.
- Verbal praise from one (say) staff-member. +1
- Mild bullying. Extremely bad behaviour at meal-table. 2 Noise after being in bed for half-an-hour.
- +2 - half-an-hours later bed.
- 3 - physical agression to peers. Extreme rage with staff. Deliberate damage to property.
- +3 - special certificate, series of later beds, cakes or biscuits, or other treat.
- definite manipulation of school with outside agency. Physical assault of staff. Attempting to persuade others to steal, abscond, etc.

/over

- alteration to position on supervision list or other privilege or treat.
- 5 - actual physical harm to others. Planned crime. Sexual offences. (Possible expulsion from school).
- privilege or reward probably related to outside agencies, +5 staff-members "private" time, etc.

Only when the above conditions are satisfied can report-slips fulfill their main function of reducing further and surplus problems for both pupils and staff. The co-ordinators also need to ensure that a suitable treatment approach is carried through and that individual pupils are not further handicapped by excessive sanctions and variety of approached from the range of staff he or she contacts.

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Some developmental aspects of violence (From Bolman, 1974))

			•
Туре	Object	Aim	Other qualities (Leve
Undifferenti- ated unpleasure	None	Relief or reduction of tension	Involves whole organism with no differentiation between self and outside object
Semidifferen- tiated rage	Any frustrating object, animate or inanimate	Elimination of frustrating object	Self versus outside gradually achieved but still variable; presumed (2 stage for some instances of murder, suicide, arson etc. in children and adults
Directed rage, tantrums, anger	Specific object, usually the mother or a sibling	Control or domination of frustrating object; Sadistic aims - hurt torture, etc	Talion principle ('eye for an eye') applies; control g and domination of love object important, power struggles normal; gross motor discharge preferred; presumed stage for some delinquency, sadistic acts et
Modified rage and tantrums, ambivalence, jealousy,	Admired or feared object, usually the parents or staff	Resolution of conflicting mixtures of love and hate, maintenance of parental love, getting even	Attempts to imitate and identify with parents, hence denial and displacement of anger is common; aggressive (fantasy becomes important
Anger, jellousy, envy	As above	As above	Internalization of rules and morals begins; fantasy and verbal expression preferred; displacement common, as onto a sibling, a scapegoat, or aggressive games
Anger, annoyance, dislike, envy covetousness, desire, jealousy, criticism	Peers, siblings, self	Winning, competing, Assuring 'fairness' mastery of feelings	Rationality and self-control become increasingly effective boys fight physically, girls fight verbally; substitution, sublimation, competition are typical
Full range of modified nggressive feelings, experienced mostly in relation to activity, work, sports	Self-attitudes become dominant	Maintenance of of emetional equilibrium especially re self-esteen	f Capacity for empathy with others appears, as does ability for abstract thought
1	Undifferentiated unpleasure Semidifferentiated rage Directed rage, tantrums, anger Modified rage and tantrums, ambivalence, jealousy, envy Anger, jealousy, envy covetousness, desire, jealousy, criticism Full range of modified aggressive feelings, experienced mostly in relation to activity, work,	Undifferentiated ated unpleasure Semidifferentiated rage Semidifferentiated rage Semidifferentiated rage Fustrating object, animate or inanimate Directed Specific object, usually the mother or a sibling Modified rage and tantrums, ambivalence, jealousy, envy Anger, As above Anger, As above Anger, Siblings, self Anger, Siblings, self Full range of modified negressive feelings, experienced mostly in relation to activity, work,	Undifferentiated unpleasure Semidifferentiated rage Semidifferentiated rage Directed rage, object, animate or inanimate Directed rage, object, demination of frustrating object, animate or inanimate Directed rage, object, demination of frustrating object, animate or inanimate Directed rage, object, demination of frustrating object; Sadistic aims - hurt torture, etc Modified Admired or rage and feared of feared of confliction of confliction of confliction of confliction of staff of love and hate, maintenance of parental love, getting even Anger, annoyance, dislike, envy covetousness, desire, jealousy, envy Anger, annoyance, dislike, envy covetousness, desire, jealousy, criticism Full range of modified magressive facilings, experienced mostly in relation to activity, work,

W. M. Bolman, (1974)
'Aggression and violence in children'.

Current Problems in Padiatrics,4 (9), 1-32.

Measuring Ego Development(I) (bays) Kelvin W——
Instructions: Complete the following sentences.
1. Raising a family
2. When a child will not join in group activities . This hest
3. When they avoided me . 1. am alright
4. A man's job is best
5. Being with other people is good
6. The thing I like about myself is I am good when like.
7. If my mother is well
8. If I can't get what I want I am going to do what $\Delta/3$
9. When I was younger was good
10. Education is good
11. When people are helpless they are usitess 2
12. Women are lucky because they are good and
graph Cont'd Cont'd

••	Cont'd	
13	Mat gets me into trouble is an not big as people	/
14	A good father is good	2
15.	If I were king . I whood not be bad.	1
16.	A wife should be good	
17.	I feel sorry when I am not happy	7
18.		
. 19.	Rules are 2000	\ \
20.	He felt proud that he was being the best person	
21.	Men are lucky because they are good men	2
	My father and I are very good	<u>ر</u> ح
3.	A man feels good when he is not being bad.	2
4.	When I get mad I am not very good at all	2
	•••••••••••••••••••••••	5

.... Cont'd

••••	. Cont'd	
25.	At times he worried about thing? That he thought were. not very good	3
26.	When his wife asked him to help with the housework he just stayed there ad did not work a bit	13
27.	My main problem is . I am not good at al	3.
28.	When I am criticised lam being talked too.	
29.	Sometimes he wished that I could not be bad whe	-3
30.	A husband has a right to be very good when he is working hard.	3
31.	When he thought of his mother, he was very good:	3
32.	at all.	3
33.	If I had more money to Make	3
34.	I just can't stand people who are not very good:	3
35•	My conscience bothers me if I am not very good when I should &.	3
	Crime and delinquency could be halted if it was helped and people worked art what to do.	4

Appendix 9

SENTENCE COMPLETION FOR GIRLS (Form AB 10-68)

Name	ne School		
Age	Date Teacher	••••••	
Insti	structions: Complete the following sentences in any	y way that you wish.	
	Raising a family		
2.	Most men think that women		
3.	When they avoided me		
4.	If my mother		
5.	Being with other people		
6.	The thing I like about myself is		•
7.			
8.	When I get mad		
9.	My mother and I		
10.	• What gets me into trouble is •••••••••		•
11.	Education		
12.	2. When people are helpless		
			•

Sentence Completion for Girls (Continued)
13. Women are lucky because
14. When I am criticized
14. When I am criticized
15. My father
16. Rules are
17. If I had more money
17. If I had more money
18. When my mother spanked me, I
19. A wife should
20. I feel sorry
21. When I am nervous, I
21. When I am nervous, I
22. When a child will not join in group activities
23. Men are lucky because
••••••
24. At times she worried about
•••••
25. I am
26. A woman feels good when
26. A woman feels good when
27. My main problem is
Z/ Fy main production

Sente	ence Completion for GIPIS (Continued)
	Whenever she was with her mother, she
29.	Sometimes she wished that
30.	A good mother
31.	The worst thing about being a woman
32.	When she thought of her mother, she
33.	If I can't get what I want
34.	For a woman a career is
35.	My conscience bothers me if
	A woman should always

Level 1 (I-1)

PRESOCIAL/SYMBIOTIC/UNDIFFERENTIATED

Name	e or research code	
Date	e of Birth Date	
Ticl	k only those characteristics <u>markedly</u> in evidence.	
1)	Seems out of touch with reality most of the time.	_ 0.6442**
2)	Needs considerable support and/or control.	_0.3773**
3)	Blatant and unashamed sexuality.	_0.5206**
4)	Cannot shop in the town-centre without some danger to self or others.	0.6223** 0.3423*
5)	Lack of normal leisure interests.	S=0.003
6)	Odd facial or bodily postures.	-0.5985**
7)	Verbal communication limited, stunted or odd.	_0.6557**
8)	An emphasis on touch and tactile experience.	_0.5012**
9)	Phantasies. Laughs or makes noises for no apparent reason.	_0.6332**
10)	Lack of regular eating and/or elimination patterns and behaviour.	0.4574**

ж× Sig. at p .00I level x " p .01 "

Level2 (I-2)

IMPULSIVE/INFANTILE

Nai	me or research code	
Dat	te of Birth Date	
Tio	ck only if the following characteristics are markedly in	
ev.	idence.	
1)	Gives simple stereo-typed and unsophisticated answers.	0.4044**
2)	Frequently dichotomizes the world into good or	0.3512*
	bad, nice or nasty, dirty or clean, etc.	S=0.003
3)	Conceptual confusion causing illogical responses.	0.6378**
4)	Demanding; people seem as sources of supply	YY
	and control.	0.5228**
5)	Self-centeredness. Tasks for others are a burden.	0.4207**
6)	Getting away or going home is a desired escape	VV
	from immediate expectancies. Sometimes runs away.	0.3992**
7)	Utters empty threats. Self-harm. Mumbles	0.5668**
	angrily.	0.5000
8)	Sexual and aggressive impulsivity is described in blatant and unsocialised language.	0.2602 S=0.02I
	braces and minocraftsed ranguage.	
9)	Vacuous or bland responses to situations. Easily confused.	0.6815**
10)	Nada art 2 22 to 1	
10)	Needs external direction in everyday tasks.	0.7447**
	** Sig. at p .00I level	
	* " p .0I "	

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Level 3 (2/<u>A</u>)

ACTION SELF

Name or research code	
Date of Birth Date	
Tick only those characteristics markedly in evidence.	
1) Gets into frequent trouble, usually in a naive manner. Often caught.	0.5216**
2) Gives simple replies to queries. Lack of other empathy.	0.4622**
3) Excuses and ego-defences are ill-formed.	0.4459**
4) Ego-centric. Often appear extremely selfish.	0.4321**
5) Vague discontent with present position but no real alternatives in mind.	0.2724 S=0.016
6) Favours physical retaliation (but may not always take action)	0.3629* S=0.002
7) Gross motor discharge as a direct expression of emotional confusion.	0.4627**
8) Delinquent acts, stealing, vandalism, bullying etc.	0.6291**
9) Attitude vary between extreme helpfulness and irresponsibility.	0.2158 S=0.046
10) Starting to temper rages with some self-control.	0.0746 S=0.282

x " " p .01 level

Level 4 (A)

SELF-PROTECTIVE/OPPORTUNISTIC

Name	e or research code	
Date	e of Birth Date	
Tic	k only those characteristics <u>markedly</u> in evidence.	
1)	Takes considerable effort to keep self out of trouble.	0.1305 S=0.156
2)	Expresses concern in physical ways, e.g. feeling sick, giving a stated physical condition as a reason or excuse.	0.146 S=0.127
3)	Exploits situations, somewhat naively. Manipulates.	0.4809**
4)	Dependant complaining towards adult figures.	0.3077* S=0.007
5)	Easily led into trouble by others. Blames others for misfortunes or bad luck.	0.1399 S=0.139
6)	Works well for adults.on a one-to-one basis.	0.0503 s=0.349
7)	Attaches causation for trouble to parts of his/her anatomy e.g. mouth, nose, fingers etc.	0.3079* S=0.007
8)	Can be shamed but does not show true remorse nor assume real responsibility for own actions or attitude.	0.4740
9)	Sexuality pronounced for age and situation.	0.1793* S=0.082
10)	Evasive or hostile attitudes, often unprovoked.	0.II2I S=0.I93
	xx Sig. at p .00I level	

* " p .01 "

Level 5 (4/3)

PROTOCONFORMIST

Name or research code			
Dat	Date of Birth Date		
Tic	k only those characteristics <u>markedly</u> in evidence.		
1)	Conforms to rules blindly and without understanding.	0.2990* S=0.009	
2)	Physical feelings expressed at times of emotional change.	0.1007 S=0.218	
3)	Cleanliness and physical appearance important but without appreciating why.	0.1420 S=0.135	
4)	Very responsive to criticism from adults.	0.5108**	
5)	Superficial, concrete prerogatives and excuses.	_0.3940**	
6)	Blind admiration of chosen adult figures, sports people, stars, etc.	0.1262 S=0.146	
7)	External labels to problems, e.g. names school, peer, staff-member, etc. by name. Wishes often negativistic in tone.	0.4I49**	
8)	Indications of self-consciousness about behaviour, whether good or bad: "puts on" Pro to conscience.	0.7786**	
9)	Good adults, workers, defined by concrete, visible actions.	0.4282**	
10)	Tries hard to conform. Wishes to be spoken of as a "good" or "nice" child.	0.5840**	
	** Sig. at p .00I level		
	x " " p .0I "		

Level6 (I-3)

CONFORMIST

Nar	me or research code	
Dat	te of Birth Date	
Tic	ck only those characteristics markedly in evidence.	
1)	Concerned with niceness, appearance and social acceptability.	0.5607**
2)	Conforms to external rules. Feels shame when rules are broken. Prefers to operate with rules.	0.7025**
3)	Likes a neat straightforward life (world)	0.6054**
4)	Uses cliches, banal statements, superlatives.	0.1902 S=0.069
5)	Conventionality, Moralistic.	0.7025**
6)	Disapproval of hostility and aggression. Usually ignores hostile provocations.	0.3184 [*] S=0.006
7)	Emphasis on concrete things, on outcomes rather than processes. What is right is right for most people.	0.6849**
8)	Will work well in class though not necessarily with understanding. Makes an effort to be neat.	0.5905**
9)	Sexuality is below the surface and not often expressed.	0.3987**
0)	Guarded in approach to authority figures. Avoids criticism or reproach whenever possible.	0.5048**

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Level 7 (3/4)

CONFORMIST - CONSCIENTIOUS

Nam	e or research code	
Dat	Date of Birth	
Tic	k only those characteristics <u>markedly</u> in evidence.	
1)	A consideration of what is appropriate according to place, time and company. Though, contingencies exceptions and comparisons are often global and banal.	0.5355**
2)	Feelings of loneliness, being aware of being alone, or even a desire to be left alone.	0.3261 [*] S=0.005
3)	Concerned with being generally helpful.	0.6807**
4)	Emotional feelings may be expressed. Deeper regard for emotional experience.	0.053 S=0.484
5)	Behaviour has a motive or reason but with rather global explanations.	0.6200**
6)	Annoyance with self-expressed following failure in a task or responsibility.	0.5909**
7)	Beginnings of expressed or displayed individuality though tempered with caution to avoid social rejection.	0.4884**
8)	Will see the need to perform tasks (unsolicited) within the organisation.	0.8I37**
9)	Can delay comments or self-wishes until later.	0.4831 ^{**}
0)	Role conception within the family or organisation acquiring rudimentary recognition.	0.7600**

** Sig. at p .00I level

* " p .0I 2

Levels (4)

CONSCIENTIOUS

Na	me or research code	
	te of Birth Date	
Ti	ck only those characteristics markedly in evidence.	
1)	DOTT CITOTOTIA	. (**
	guilt for consequences of own actions.	0.672I**
2)	Long term goals for future. Realistic wishes.	_ 0.5433**
3)	Considered to be a sensible and responsible	- 00-1 **
	person. Reliable.	0.8874**
4)	Differentiated feelings and motives of	0.5777**
	behaviour.	- 0.5///
5)	Expresses point of view with some conceptual	0.7001 ^{**}
	complexity.	- 0.7001
6)	of our comments on of other	0.8874**
	compares opposites.	
7)	Some excessive feeling of controlling, shaping, thinking for, or care of others. Puts things	V.V.
	in broad social or temporal context.	0.5204**
8)	A capacity for ordered sequence in tasks.	
	Accommodates difficulties with resolution as solution is worked for.	0.8264**
	bolusion is worked for.	
9)	Can appreciate the more abstract composition, organisation and differentiated approaches	
	within an organisation, though seeks simplification through classification.	NIL
		XX
0)	Adult/child relationships become spontaneous.	0.9322**
	** Sig. at p .00I level	
	" p .0I "	

Level9 (4/5)

CONSCIENTIOUS TO AUTONOMOUS

Nam	e or research code	
Dat	e of Birth Date	
Tic	k only those characteristics <u>markedly</u> in evidence.	
1)	Integrates a number of possibilities.	NIL
2)	Psychological causality has become more complex.	NIL
3)	Appreciates need for emotional independance and individuality.	0.4231**
4)	Greater interest in development and change in self and others. Also process and change.	0.2559* S=0.002
5)	Presents vivid and personal versions of ideas, varied roles, self-fulfillment and the joy of life.	NIL
6)	Distinguishes between inner self and outer self and psychological responses and order from physiological ones,	NIL
7)	Some conflict within self with regard to one's own and societal expectations and obligations.	NIL
8)	Distinguishes reality from appearances. Sees beyond the obvious and conventional.	NIL
9)	Brings richness to team-work without strain over compromises. Differentiated tolerance. Good ideas.	0.4231**
10)	Good natured humour though somewhat artificial and directed.	0.6355**
	xx Sig. at p .00I level	
	* " p .0I "	

Level 10 (5 - 6)

AUTONOMOUS/INTEGRATED

Nai	ne or research code	
Dat	te of Birth Date Date	
Tic	ck only those characteristics markedly in evidence.	
1)	Reconciling inner conflicts, renunciation of unattainable.	_ NIL
2)	Self derived richness and variety in life.	NIL
3)	High tolerance for ambiguity in self and others.	NIL
4)	Composite considerations and responses in abstracting actualising agencies and consequences.	NIL
5)	Aspires to be objective, realistic and unprejudiced.	NIL
6)	Cherishes individuality and uniqueness in self and others.	NIL
7)	Concerned with self-realisation, which partly supplants the achievement motive and merges with enjoyment of life.	NIL
8)	Displays creativity in some form, spontaneity, genuinoness and intensity. Sensitivity to life's paradoxes. Sometimes this shows in a non-hostile existential humour.	NIL
9)	Unification of the specific with the general. Vivid, touching, almost poetic expositions.	NIL
10)	Scoks identity and self-fulfillment at high aesthetic and/or spiritual levels.	NIL

Level I

ANO	OMY (Pre-Social Stage)	
	se of Birth	
Tic	ek only those characteristics <u>markedly</u> in evidence.	
1)	Blames others readily, often in a simplistic and naive manner.	0.8327** —
2)	Borrows belongings from others. Hoards possessions.	0.4356** —
3)	Has temper tantrums or rages when corrected.	_0.7942**
4)	Repeats "offence" despite warning.	_0.7349**
5)	Little respect for privacy of others, goes into cupboards, briefcases, etc.	0.6071**
6)	Shouts down others to get a point across.	_0.5721**
7)	General disrespect for adults. Sometimes out of control.	0.7724**
8)	Primitive, inappropriate behaviour.	0.7818**
9)	Frequently and blatantly interrupts adults conversation.	0.7769**
10)	Inappropriate sexual behaviour. Exposure. Frequent touching of others.	0.2632 S=0.019
	** Sig. at .00I level	

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* " .0I

ANOMY/HETERONOMY (Expedient Stage) Name or research code..... Tick only those characteristics markedly in evidence. 0.7708** Lies somewhat unconvincingly. 1) 0.7364** Untrustworthy in complying with 2) moral norms. 0.6684** Wary of "stronger" adults. Out of control with "weaker" or inconsistent adults. 0.7439** Will conform if strong sanctions are in 4) evidence. 0.6938** Steals, particularly in shops. 5) 0.8356** 6) Peer group are delinquent. 0.5509** Physical bullying. The quick, strong 7) and agile 'are supreme'. 0.5277** 8) Can be most stubborn. 0.4547** 9) Regularly uses foul and obscene language. 0.4871** 10) Doesn't seem to trust adults sufficiently ** Sig. at .00I level n n .OI

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HETERONOMY (Authorative guidance stage)

Name	or research code	
Date	of Birth Date	
Tick	only those characteristics <u>markedly</u> in evidence.	
1)	Obeys rules to avoid punishments.	0.6560**
A STATE OF THE STA	Child seeks clear instructions to avoid disapproval.	0.5539**
3)	God-fearing. Highly conforming.	0.5659**
4)	Cheating, stealing or lying is wrong because parent, teacher, etc. says so.	0.6616**
5)	A move away from physical bullying to verbal bullying, usually in absence of adults.	0.1301 S=0.157
6)	Good boy-girl orientation to carry adult favour	0.62I2**
7)	Accepts adult guidance with regard to food, clothes, etc.	0.6316**
8)	Shows concern for animals, though not as a regular responsibility.	0.1281 S=0.161
9)	In an argument with peers an adult will be sought to sort out the problem.	0.2I57 S=0.046
10)	Sexual aspects are seen as being "private", "dirty", "rude".	0.3912**
	XX Sig. at .00I level	

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* " " .0I "

HETERONOMY/SOCIONOMY (Towards internalisation)

Nam	e or research code	
Dat	e of Birth Date	
Tic	k only those characteristics markedly in evidence.	
1)	Sometimes protests to adults on behalf of self or friends about certain rules	- 0.4717 ^{**}
2)	Can be readily embarrassed.	S=0.043
3)	Enjoys being in a small group when an adult is organising the group.	0.1505 S=0.12i
4)	Very torn between "losing face" with friends or receiving disapproval from adults over issues.	0.5474***
5)	Will steal by finding if no-one else about.	_ 0.5I39 ^{NN}
6)	Will steal (say from shops) only with some encouragement from friend/s.	0.43II** - 0.239I
7)	Name-calling.	S=0.03I
8)	Sometimes rude or disobedient to adults in an attempt to gain peer group favour (or amusement).	0.5798 ^{XX}
9)	Generally more relaxed with adults. Shares humour but may sometimes carry this on too far.	0.60I2 ^{%%}
10)	Obey rules almost naturally.	_0.3889**
	xx Sig. at .00I level	
	* " " .0I "	

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SOCIONOMY	(Social	Stage)
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Nan	ne or research code	
Dat	ce of Birth Date	
Tic	k only those characteristics markedly in evidence.	
1)	Clothing, hairstyle, etc. must conform to what is socially acceptable.	0.4686**
2)	The sanction of shame inhibits wrong-doing.	0.5558**
3)	Child adjusts attitude and behaviour downwards or upwards to suit situational expectations of peers.	0.3331 [*] S=0.004
4)	Mild subversion against adult moves.	0.4589**
5)	Expects similar bed-times, pocket money, privileges to peers, as suits the case.	0.3619 [*] S=0.002
6)	Sustained allegiance to popular cult, person's in the pop-music, sporting fields etc.	0.1099 S=0.198
7)	Peer group-mindedness in leisure pursuits, e.g. games, collecting, etc.	0.6053**
8)	Sex is often a vehicle for humour, group giggles, etc.	0.6239**
9)	Group based pranks and campaigns to the fore	0.54I4**
0)	Parents, adults needed less in terms of guidance, emotional support and control.	0.7188**
	** Sig. at .00I level	
	* " .OI "	

SOCIONOMY/AUTONOMY (Towards independence)

Name	or research code	
Date	e of Birth Date	
Tick	only those characteristics markedly in evidence.	
1)	Stands strongly by principles.	0.3743**
2)	Much concern with rules and norms of everyday life. Concerned with repeating those no longer applying to self but enforcing other rules more rigidly.	0.4792**
3)	Often the moral conscience of others.	0.5139**
4)	Rarely steals or lies.	0.4992**
5)	A very hard worker. Aiming hard to better self.	0.7894 ^{**}
6)	Can recognise elements of political manipulation, group effects, emotional climate, etc. May not be able to effect changes.	0.6570**
7)	Shows strong leadership qualities, e.g. in organisations, committees, religion, etc. Feels the need to lead others.	0.5453**
8)	Displays considered and "weighted" altruism.	0.8185**
9)	Much sympathy and empathy for <u>deserving</u> others.	0.8701**
10)	Chooses companions with discrimination with regard to high personal qualities and competence in shared interests.	0.5034**

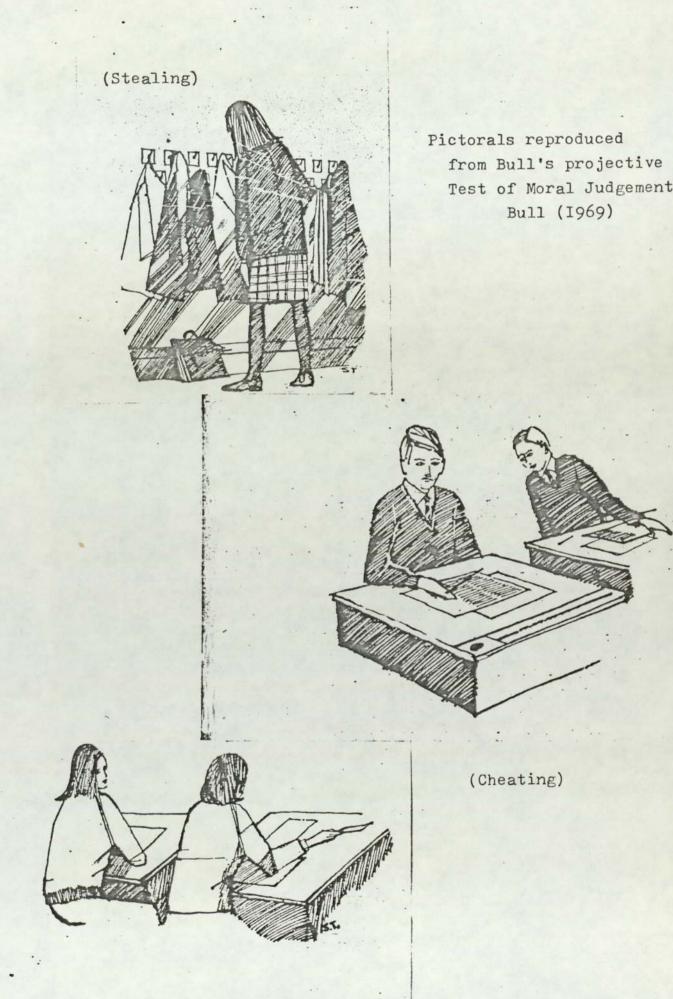
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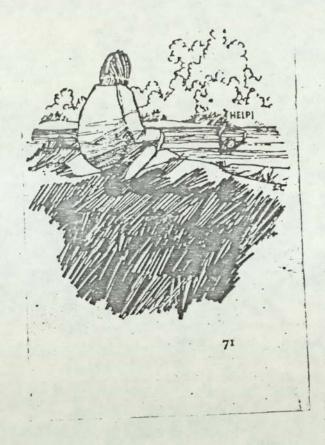
AUTONOMY (Internal morality)

Name or research code		
e of Birth Date		
k only those characteristics <u>markedly</u> in evidence.		
No longer dependent upon fear of authority or public opinion as sanctions are his own inner-blame or opinions.	0.6741**	
Questions publically held rules and ideals.	NIL	
Defends his own actions and attitudes and those of other individuals, against the group, as thought necessary.	0.5238**	
Can fit in with the group but often has individualistic yardsticks and thoughts.	0.6741**	
Able to consider the wider implications of his actions on others. Would break the law for common good.	0.947I**	
Enotional autonomy. Is 'his own man'. Sometimes voluntarily seeks isolation from other people.	0.674I**	
Lies if motivated by altruism, i.e. friendship, love, concern for the greater good, etc.	0.4673**	
'It all depends' is the moral watchword. (May rationalise reasons).	0.9703**	
Accepts and accommodates personal blame when it is justified.	0.8862**	
Sexual activities intertwined with love and respect for partner.	NIL	
	k only those characteristics markedly in evidence. No longer dependent upon fear of authority or public opinion as sanctions are his own inner-blame or opinions. Questions publically held rules and ideals. Defends his own actions and attitudes and those of other individuals, against the group, as thought necessary. Can fit in with the group but often has individualistic yardsticks and thoughts. Able to consider the wider implications of his actions on others. Would break the law for common good. Emotional autonomy. Is 'his own man'. Sometimes voluntarily seeks isolation from other people. Lies if motivated by altruism, i.e. friendship, love, concern for the greater good, etc. 'It all depends' is the moral watchword. (May rationalise reasons). Accepts and accommodates personal blame when it is justified. Sexual activities intertwined with love and	

XX Sig. at .00I level

* " " .0I "





(Value of life)

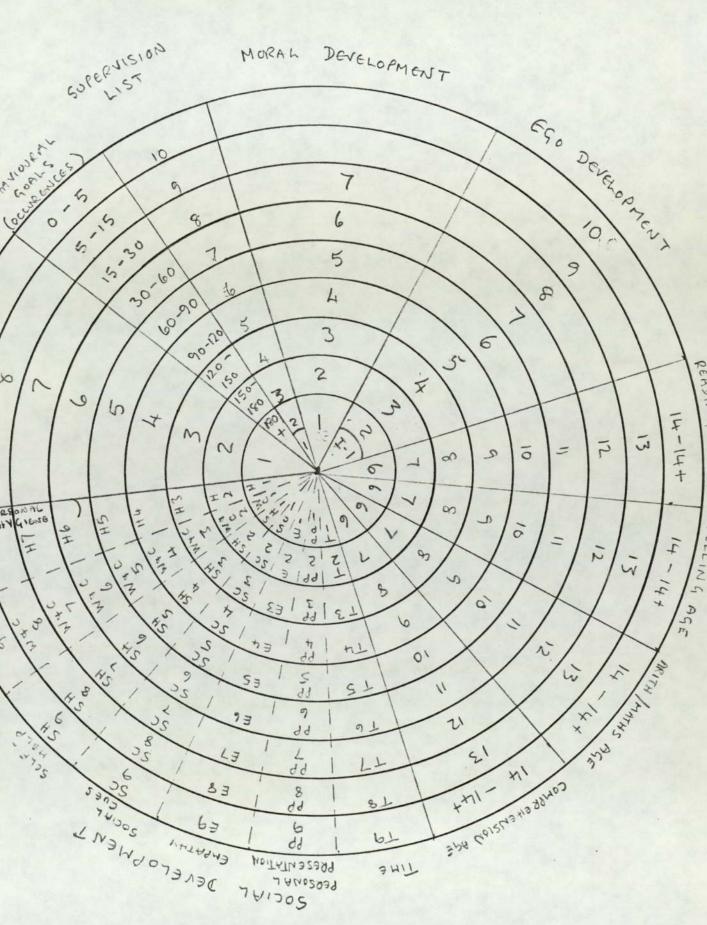
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from Bull's projective
Test of Moral Judgement
Bull (1969)



70



(Stealing)



Extract from Wilson and Evans (1980) p. APPENDIX 14

SCHOOL SEVEN

INDEPENDENT BOARDING SCHOOL

50 boys, aged 11-16 yrs.

In addition to a headmaster, this school has a Director who is a psychologist and who takes an active part in the running of the school. The philosophy of the school is based upon a well defined theoretical viewpoint which the head refers to as the sequential development of children. By this he means that every child has to go through a sequence of developmental stages, such as those proposed by Loevinger and Erikson, each appropriate to his chronological age and the demands of society, in order to develop into the mature, stable and secure adult. He views maladjustment, therefore, from the standpoint of development more than pathology, maladjustment often being seen as either a disruption in the normal sequence of development or as a fixation at some earlier developmental stage. The primary aim of the school consequently is to help the child attain his appropriate developmental stage, in the emotional, cognitive, and motor demains. The task of the school is to pinpoint each child's developmental stage, or the stage where disruption occurred, and then to provide the appropriate environment to facilitate his progress through the subsequent stages. In practical terms, within the school progress through the stages means a greater degree of personal autonomy and, to a certain extent, an extended living space comelexity and responsibility for the child. The developmentally young or small child, for example, is generally always under some supervision, his activities structured and his 'moving about' space small. As the head puts it, "a little child needs a ittle world". At the other end of the scale, the developmentally advanced child is allowed considerable freedom and personal autonomy, although a degree of adult direction remains with even the most advanced children.

ramme for each boy. Each aspect of the child's problem is stated in concise terms, areatments prescribed and subsequent progress recorded for each area. (Copies of the come of the documents evolved by the school appear in the appendix). A comprehensive set of instruments is available to aid and direct insight and understanding on the part of staff in such areas as general behaviour, educational attainments, social relationships, motor development and physical characteristics. There is also guidance in report writing and observation. This use of quasi-scientifica measures, however, ones not result in a cold, uninvolved, unspontaneous, non-intuitive approach - the reasures are used as aids and guides rather than as masters, and the staff set out o provide the "good-enough" warm and secure emotional base which is seen as a pre-equisite for achievement motivation.

All the staff accept the school's philosophy, possibly as a result of the staff selection process and the in-service training at the school, and because of the school's undoubted effectiveness. The staff are selected by the director and the school head, the main criterion usually being "Will he/she fit in?" rather than prior special training or subject specialisation, although at the time of our last visit the most recent appointment was specifically for a teacher of domestic science. Certainly, the staff appeared to work well together, having friendly relationships and mutual respect. Although for staff selection prior to specialist training is not the main criterion, in-service training at the school is considered to be essential, particularly as most new staff come to the school without any real knowledge of the work. The head is primarily responsible for the training programme, which is largely unobtrusive and non-patronising. For example, knowledge of tests, testing and test interpretation, which is particularly emphasised, is taught by rotating the responsibility for the basic testing of pupils through the staff. The staff have regular meetings to discuss and assess the work of the school and the progress of individual pupils, both of these being assisted by a well organised system of communication.

The school has developed its ethos primarily to meet the needs of withdrawn, neurotic children, but admits some acting-out conduct disordered children who are thought to provide a spur to the neurotic children without detriment to their own progress. The school feels, however, that it fails with severely aggressive children and tries not to accept these, along with - for more obvious reasons - "fire raisers". The pupils are regarded as very important peop'e at this school, a fact which is underlined as early as the selection interview when the prospective pupil is interviewed before anyone else. Pupil relationships appeared to be very good, pupils recognised wach other's problems and talked freely and easily about them. They appeared relaxed and freely admitted to liking both the school and the staff. Older pupils are expected to help the younger ones and there are, indeed, practical ways in which they are enabled to do so. Each of the dormitory rooms for the less mature boys, for example, has an older boy attached to it (and often sleeping in it), as a "dorn. helper", his job being to ensure the smooth running of the dormitory. A boy will only have this responsibility for six months and it is seen by all as a privilege. The headmaster's wife, who is also the school matron, says that "the boys see it as a chance to do something in return for what the school has done for them". The system is also used as a therapeutic tool for some boys - for example, one older boy who was not mixing with the other older boys was made a dorm. helper, which unobtrusively demanded that he mixed with other boys, albeit younter ones,

which eventually helped him to mix with his peer group. (No abuse of the system, for example, by bullying, was reported by the smaller boys for whom it operates).

There are clear and well defined rules, although these are not generally written down, and for both staff and children they are transmitted by word and osmosis. Bound in with the rules is a well-structured privilego system. This has ten graded stages from a first stage of close control, on which a boy has to earn all privileges, is not allowed to take part in mon-staff directed activities or to be beyond staff supervision, to a final stage when he is taken off the privilege list, that is he is entitled to all privileges and moves into the "flat". The flat is a self-contained unit for some six or more boys who, outside school hours, are almost entirely selfsufficient. They are given a weekly sum of money with which they have to provide and cook all their own food (except the mid-day meal), they have to do their own washing, cleaning and so on, according to a prescribed schedule. A member of staff checks occasionally to see that this schedule. is followed and to ensure that a reasonable living standard is maintained. Privileges include such things as being able to go to bed later than the basic times, able to visit the local village or town, and so on. A large chart system in a central part of the school shows where each boy is on the privilege system, and this can be consulted by both staff and boys in reference to requests for privileges. There is also a twice-daily meeting of the whole school at which misdemeanours, examples of good behaviour, and issues raised by boys are discussed. Also, to keep staff more fully informed about the ongoing situation, there is a blackboard in the staffroom on which is written all incoming information regarding incidents in and around the school, a boy's home or family situation, and any extra individual privileges or sanctions observed. In addition to this, staff complete brief report slips recording misdemeanours, which are collected by the head and enable him to be kept fully informed of the current situation and to ensure that sanctions are not being continually applied to any particular boy or applied for the same thing twice. These report slips are also used for outstanding work or attitude. The reports are graded and each child is on a half-termly graph.

Education is seen as a means of providing a normal core of behaviour, and expectations, - and consequently school work - are kept as close as possible to the pattern of main stream education. Emotional development, however, always takes priority, over educational development, although the education may sometimes be used as a vehicle to promote emotional development. As the head puts it, "The out-going type of child needs an element of anxiety introduced, and the in-going child needs a measured element of real anxiety introduced; educational pressures can do this".

Education nevertheless is viewed as very i portant. Examination work has been introduced (and some mode 3 C.S.2. courses developed), and passes of good standards achieved. One boy left shortly before our final visit with 7 C.S.E. passes and 6 '0' level passes to his credit. Work in the classroom is expected and achieved. To set a pattern of work for the rest of the day, the first ten minutes of the first lesson for every group is usually spent writing. Teaching styles and methods are basically traditional, class teaching being the general rule with an increasing degree of individual work as one moves down the age range, and real attempts are made to get pupil participation in lessons. There is some subject specialisation by the teachers, each teacher has one or more areas of educational responsibility, and they each teach all the boys for at least one period during a week, although they each have overall responsibility for, and spend most of their time with, one group. Neatness and accuracy are emphasized by all teachers, pupil motivation being maintained by regualar marking and praise for good work (there is no false praise). Of regular marking and recording, one teacher pointed out "Recording is of more importance to the pupils than the teacher and so any progress should be made available to a boy and, if possible, complete by him".

In order to promote concentration, some rooms are equipped with study booths. They are not used exclusively with any boy, however, and careful consideration is given to which boys can benefit from them. They tend to be used with the younger boys and newcomers. The teacher responsible for the youngest group said that the basic i idea at first was simply to minimise distractions in order to get a boy to sit quietly at his desk, and when he was able to do that one could increase the work demand. There is generalised remedial provision within the school as many of the children are in need of remedial education. Indeed, some have pre-learning activities or perceptual motor training.

The teachers are also the main source of care in out-of-school hours, but the relationships between the teaching and care staffs are particularly good and harmonious, although the boys perceive a distinct hierarchy among the staff. Affection is shown to the boys by all staff, the hand on the shoulder or head, the informed chat, and so on in an atmosphere of mutual respect and comradeship. Staff eat all meals (which are ample and well presented) with the boys, and use these periods as time for informed and friendly chats. Bestimes vary according to a boy's privilege level, which has the advantage of enabling maximum individual attention at this important time, but everyone gets up at the same time.

Much of the material provision within the school underline the attention to detail that pervades this school. Dormitories are painted and furnished in colours thought to suit the type and developmental stages boys allocated to them - for example, pastel shades are used for those who need a calming influence, and warm, earthy colours for the most immature. The spatial location of dormitories in relation to other rooms in the school is considered when selecting rooms for boys of different age levels. For example, the dormitories for the youngest boys are those closest to essential room such as the dining room, for cognitive simplicity. The younter boys' dormitories are provided with den-like two tier berths, with fitted curtains, for the boys to sleep in, offering privacy and security. (They are described by the school's psychologist director as offering a "return to the uterus" and by the head as "bedwombs" ! The sitting and games rooms are provided with some very solid self-made double seats which are strong enough to stand rough and tumble play and are capable of being turned over to make dens. The dining room is equipped with short, but high-sided and backed benches which effectively divide the dining room into small, intimate, family-type eating groups. This over -riding feel of attention to detail throughout the school does not go un-noticed by the boys, for as one boy told one of us, "even little things matter in this school".

Perhaps the principles about which the head feels most sure in this work provides a useful conclusion to this brief report on this school:-

Firstly there is a need to think in developmental rather than pathological terms; secondly that strong controls are essential initially and then can be eased off; thirdly that the child must feel wanted; and finally that staff training is a necessity.

Hall School opened in January 1977 in a converted country house which was formerly occupied and used as a country school by the King Edward VI Foundation, Birmingham. It is situated approximately 4 miles from Lichfield, Staffordshire, on the Stone road. The School is under the same direction as Alderwasley Hall, Bladon House, Caldwell Hall and Pipewood Schools (Honormead Group of Special Schools).

Admissions to this school are carefully controlled, with accommodation for 40 girls.

The school is set in a pleasant country estate of some 14 to 15 acres. The administrative, teaching and living areas are contained in the large house, and its associated out-buildings. The house is in excellent condition and most adequate for the purposes intended. The accommodation, which is of a high standard, currently includes comfortably furnished sitting and dining rooms. Living accommodation is arranged in cubicles of two with each child having her own bed, cupboards and desk. The girls are under the direct supervision of resident house-parents. Ample washing, bathing, and toilet accommodation is suitably distributed throughout the building. In addition there are cloakrooms, changing rooms, and showers in the out-buildings, to be used for games and rural pursuits. We are at present making an integrated practical work area, where there will be bays for pottery, screen printing, weaving, carpentry, wood carving and science. There is also provision for training in domestic science where the girls can obtain City and Guilds Examinations. This is adjacent to the classrooms and games room.

Outdoors, there are excellent facilities for recreation and also for rural science. We are fortunate in having suitable greenhouses and workshops where the practical aspects of rural science can be taught.

We accommodate girls within the age range of 7 to 16 years, with average ability. Types of maladjustment for which we cater include neurotic tendencies, depression, anxiety states, phobias, anorexia, withdrawal, habit disorders, a small number of hysterics, children from adverse social backgrounds who are emotionally deprived. Additionally, we are prepared to consider girls who have some minor physical handicap which is associated with the problem of maladjustment, and autistics who are at the stage where selective socialisation is considered necessary.



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REGIME AND WORK

The aim is to provide a therapeutic environment within which individualised treatment programmes can be provided. These are designed to promote the educational, emotional and social growth of the pupils against a background of warm, supportive relationships. Prescriptive strategies are backed up by evaluative procedures. Cases are conferenced twice yearly to reinforce this described procedure, and to ensure that all people concerned with the child's case are kept fully informed, and therefore, able to co-operate actively for the child's good.

A properly structured educational programme is made available whereby each child's learning problems are individually diagnosed and catered for. The crucial relationship between successful educational achievement and healthy emotional development is something of which we are very much aware. Our educational procedures reflect this basic need through graded, small group experiences designed to reduce feelings of anxiety and incompetence and gradually build up new enthusiasm for achievement and for success. A wide range of materials suitable for remedial work in the basic subjects is available and the emphasis is placed upon improving competence in basic skills as well as providing a wide curriculum designed to stimulate the practical interests of girls. Close observation is made of individual progress in all areas, psychological, emotional and social, through a system of objective testing and recording. Comparative evaluation will reveal, through our six monthly conference procedure whether adequate individual progress is being maintained.



Preparing for a party.

EXTRA-CURRICULAR ACTIVITIES AND CHILD CARE PROCEDURES are carefully planned.

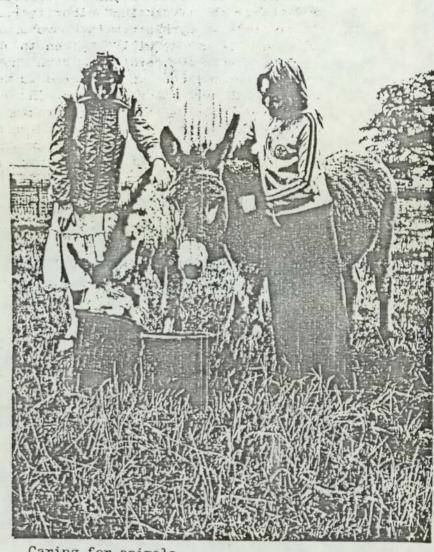
There is a balance between organised and free activity and supervision is given with sensible caring control. We feel that, with maladjusted girls,

a very definite effort should be made to channel the instinctual urges which cause many of the problems. We intend, therefore, that the emphasis should be on nurturing the growth of living things. We have a very active rural seience department. There is ample scope for the development of horticulture and the care of animals, e.g. dog breeding, pig breeding, goats hens, donkeys, sheep etc.

T. 1. Sto House Con V

The ratio of staff to children enables us to provide high standards both in care and education. It also ensures a stimulating, properly structured quality of life within the school generally. We hope to develop genuine feelings of group living, giving a close awareness of, and concern for, people within the group.

Our general aim is to help, out pupils to become more adequate and responsible, to enable them to cope more easily with the stresses of living, which have contributed towards their problems. The eventual aim, of course. is to enable girls to reintegrate into society.



Caring for animals

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ALMISSIONS FOLICY

Referrals, admissions and general queries regarding children should be sent to Mrs. Director.

The aim will be to take children whose homes are within a radius of approximat 100 miles from the school itself, but consideration will be given to more distant authorities. If there are suitable vacancies, interviews will be arranged and children should be accompanied if possible by parents and a worker from the presenting authority who is familiar with the case. Informati should include psychiatrist's, psychologist's, school and home surroundings reports. Preferance will be given to authorities who indicate that they are willing to work co-operatively with the school in the education, care and treatment of pupils. When a child is accepted, the place will be offered and arrangements for admission made. The school makes every endeavour to ensure that working links with parents and local authority staff are maintained. Links with careers officers, both locally and in the boy's/girl's home areas, are made and a programme of careers education planned for pupils who will, eventually, be school leavers.

MEDICAL AND SUPPORTING SERVICES

Medical care, including immunisations, is supervised by the local G.P., who pays weekly routine visits, and the pupils are seen, if necessary, at other times by visits to the surgery. B.C.G. vaccinations, routine dental and optical examinations may be arranged. Minor ailments are dealt with within the school, and more serious conditions are referred to local hospitals where the advice of local consultants is available. Psychiatric oversight is maintained by the Consultant Psychiatrist to the Group, Dr. M.D., B.Sc., F.R.C. Psych., D.P.M. Psychological oversight and direction are provided by Mrs. Director, who is also a qualified and experienced psychologist. There is also in the team, a clinical psychologist, Mr. D. B.A. (Hons) Psychology, M.Sc. in Clinical Psychology, who is experienced in behaviour modification programming. Speech Therapy is available under the direction of Mr. Chief Speech Therapist to the Group.

Name	e or research coded.o.b. date of ev.
Tick	only those characteristics <u>markedly</u> in evidence.
I.	Objects chosen for their "feel", speed, motion,
	glamour or exciting colour. Subjects immediate
	self-value consistent with this.
2.	Means defined in terms of desired end state.
	Self need one of immediate fratification.
3.	Delight in excitation and mild chase. Capricious
4.	Magical thinking. Delight in fantasy. Non-
	differentiation of self from object or subject
	of fantasy or magic.
5.	Accidental or incidental properties of an object
	often primary in thought
6.	Others to be dominated, over-ridden or ignored
	because of object striving or self-gratificat-
	ion
7.	Cannot (or barely so) differentiate his feelings
	or actions on a time basis. Little concept of
	differences between short, medium and long-term;
	past, present and future.
8.	Emulates "big people" and strives to incorporate
	behaviours of persons who control, dominate, or
	manipulate the environment, usually in a naive,
	clumsy or unsuccessful way.
9.	
IO.	
self-value consistent with this. 2. Means defined in terms of desired end state.	
	of inviting attention to the self.

Name	or reaearch code d.o.b. date of ev.
Tick	only those characteristics markedly in evidence.
I.	Reasons for self-action and actions of self dependant
	on admonitions of "controller". If he acts like
	the "controller", he is good.
2.	Compares self in terms of simplistic comparisons
3.	Emulates "big-people" fairly successfully. Often
	encouraged by humoured reactions.
4.	Identifies self with objects for play
5.	Seeks to manipulate or operate objects or peers as
	an extension of self. May become "motorised"
6.	Little understanding of the function of behaviour
	(good or bad) with which he identifies.
7.	Decisions applying to self are usually dichofamous,
	"good-bad", "clean-dirty". Thus restrictive
	self-image
8.	Self-choice limited to immediate reward or consequen-
	ces. Little sense of long-term purpose, i.e. why
	he is made to do what he's doing.
9.	Feels he can, and will, continue to act as he acts
	now.
IO.	Sometimes in difficulties because a real "self" has
	not yet emerged and he still needs others for
	direction.

Name or research code d.o.b. Date of ev.
Tick only those characteristics markedly in evidence.
I. The parent or adult as one who can avoid trouble or pain
2. Objects defined as "fun".
3. Looks to parental demands. Obeys parents to avoid
trouble. Conflict free self-image is the good one
4. Little differentiation of self-role.
5. Occasional conflict of choice when choice requires
renunciation of immediate gains
6. Distinguishes behaviour and immediate product. Do as
caretakers do to attain goal. "Grow big" and "work
hard".
7. Elementary pragmatism. Places self in terms of con-
crete means and ends. Argues from part to whole.
Reasons by exclusion.
8. Keen to experience before and after effects of his
actions, though expects bad behaviour to be followed
by punishment.
9. Can alter attitude of self according to change of
caretaker.
IO. Close identification of self to controllers may draw
comments such as "creep", "conformer", "snitch",
etc This comment will usually not be understood
as the real situation. —

Name	or research code d.o.b. date of ev.
Tick	only those characteristics markedly in evidence.
I.	Conforms to externalised aspects of sex role behaviour
2.	Utility of self-role judged in terms of immediate
	function or product.
3.	Little sense of long-term purpose.
4.	Few conflicts, but little understanding of functional
	relations among choices.
5.	Uses institutionalised methods of goal achievement.
6.	Goal orientated thinking. Regulates attitude and
	behaviour of self to concrete ends.
7.	Ego-ideal as "little man or little woman".
8.	"Uses" adult to confirm actions and therefore bolster
	self-image.
9.	Has ideas of making and doing things that are beyond
	present skills, strength or knowledge.
IO.	Considered to be "nosey". Likes to be in on things
	or to know what's "going-on".

Name or research code d.o.b. date of ev.	
Mark only those characteristics <u>markedly</u> in evidence.	
I. Feels if ine likes others they will like him.	
2. Objects chosen to satisfy personal needs (in the	
material, not the psychological sense) or to	
Mark only those characteristics markedly in evidence. I. Feels if ine likes others they will like him. 2. Objects chosen to satisfy personal needs (in the material, not the psychological sense) or to satisfy interest. 3. Keen to be liked by others. 4. Limited general conflict. 5. Peer group minded. Steers toward group activities. 6. Notion that goal achievement may take time. The time requirement may be specified with some accuracy. 7. Cliche orientated. Stereotyped responses. 8. Often rigid in discussion of rules and role behaviour. 9. Object choice may be motivated by interest derived from experience or exposure. 10. Some simple self-satisfaction gained from collecting	
3. Keen to be liked by others.	
4. Limited general conflict.	
5. Peer group minded. Steers toward group activities	
6. Notion that goal achievement may take time. The	
time requirement may be specified with some	
accuracy.	
7. Cliche orientated. Stereotyped responses.	
8. Often rigid in discussion of rules and role behav-	
iour.	
9. Object choice may be motivated by interest derived	
from experience or exposure.	
IO. Some simple self-satisfaction gained from collecting	
sets, or, in having complete equipment or range.	

Name or research code d.o.b. date of ev.
Mark only those characteristics <u>markedly</u> in evidence.
I. Object chosen by self chosen as functional to
performance of role.
2. Self orientated towards fairness and mutuality.
3. Others perceived as possessing differentiated
emotional feelings like the self.
4. To conform to adult social expectations and group
opinions.
5. Understands long term requirements to reach a desired
goal, i.e. subject examination, occupation, etc
Some may be "hearsay" in nature.
6. Actions which evoke negative feelings, such as envy,
jealousy, etc., are to be avoided.
7. Willing to compromise.
8. Orientation to cues indicating reflected opinions
of others.
9. Reliant on responses of others towards him.
IO. Starting to evaluate the varying attitudes and
approaches to a job or task by different adults.

Name or research code d.o.b. date of ev.	
Mark only those characteristics <u>markedly</u> in evidence.	
I. Acknowledges duties and responsibilities as defined	
by society. Fulfill one's responsibility.	-
2. Recognition of personal limitation.	_
3. Tolerates differences.	-
4. Morality or integrity of 'agent' discussed.	-
5. Delineates relation between choices and personal	
values, responsibility, etc Long-term choices.	_
6. Self-interest and socially defined good coincide.	_
7. Evaluates situations carefully. Tries to be	
objective. Ethical principles.	-
8. Orientation to internalised principles.	_
9. Sometimes misinterpreted owing to shifting base-self	-
In Wide base of interests actively followed.	

Name	or research code d.o.b. date of ev.
Mark	only those characteristics markedly in evidence.
I.	Seeks to realise personal preference and value.
	Others may or may not agree.
2.	When personal and social values clash, likely to
	make negative evaluation of social values.
3.	The abilities, preferences, and values of the self
	as known from experience.
4.	Specific statement of plan of action or route to
	reach goal with particular institutions and places
	and course of study as dictated by preference and
	value.
5.	Analogous thinking. Specifies logical ramificat-
	ions and alternatives of behaviour or choice.
6.	Differentiates between necessary and accidental
	characteristics. Takes value from and relates to
	both.
7.	Ego-ideal as an independent agent.
8.	Orientation to unique values, beliefs, and preferen-
	ces of the self.
9.	Recognition of individuality of others and their
	right to their own beliefs and life style
IO.	Recognition of own self worth and a style of life.

Name or research code d.o.b. date of ev.
Mark only those characteristics <u>markedly</u> in evidence.
I. The reflective consideration of the self-society
relation in immediate and historical perspective
2. Oriented to self-realization of others as well as
self.
3. Welcomes differences.
4. Always attempts to use experiences positively.
5. Aware of conflicts with the society but seeks to
accomodate or reconcile them.
6. Integrated according to philosophy of self in
relation to the society.
7. May modify goal and 'end to means' in order to
actually realize.
8. Ego-ideal as person striving for personal-social
good.
9. A synthesis knowledge, often academic but also a
blending of practical and experiental gains.
IO. May be unable to resolve a situation when too many
relevant aspects deserve objectively liberal
interpretation.

Name or research code d.o.b. date of ev.	
Mark only those characteristics <u>markedly</u> in evidence.	
I. Philosophy or world view subordinate to self-interest.	
2. Conflict, sorrow, even tragedy, conceived as	
conconitants of human self-realization and richness	
3. Rejoices in differences. Preserves and restores	
differences and individuality.	
4. Achieve the realization of self, man and nature	
according to transcendent principles of good.	
Becoming.	
5. Means and ends viewed abstractly. Means construed	
as coequal in importance with ends. Means to	
means discussed.	-
6. Dialectic, poetic thinking.	-
7. Synthesises multiple levels of abstraction and	
diverse content.	
8. Ego-ideal as person striving for transcendent good	
9. Creative synthesis of personal experience.	
TO May be an isolate, at times, by choice.	

Child's name Jasond.o.b. 10 y. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

	Statement number												
	LEVEI	,	I	2	3	4	5	6	7	8	9	IO	
EG0	I	9	~	V	V	V	1	1	1	F. "	1/	7	9
DEVELOPMENT	2	7	1	1	1	1				1	V	V	14
	3	5	1	~	1	/		1					15
•	4	5			1	/	/			/	1		20
B - 58	5		ļ										
$\frac{1}{A} = \frac{36}{26}$	6								-				
	7												
Score 2.23	8												
	9												
	IO											1	
	A	26										В	58

				Sta	teme	nt r	numbe	er					
	LEVEL		I	2	3	4	5	6	7	8	9	IO	
MORAL	I	9	1	1	1	1	1		1	1	1	1	9
DEVELOPMENT	2	2		1							/		4
	3											1	
	4												-
$\frac{B}{A} = \frac{13}{11}$	5												
Ā 11	6												
	7												
1.10	8												
Score 1-18	9									- 1			
	IO									-			
	A	11										В	13
5 . 210 .	1011		1										

ason's mother is folly schizophrenic who has parted from is father, and established criminal. The child's moral development as not kept pace with his ego-development, the latter tself being low.

333

Child's name Alec.....d.o.b. research code ...

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Stat	emer	nt n	umbe	r					
	LEVEL	,	I	2,	3	4	5	6	7	8	9	IO	
EGO	I	2		V			1	1					121
DEVELOPMENT	2	7	/		/	1			V	1	1	1	14
	3	9	V	/	/	1	1	1	V	V	1		27
	4	4			/	V	/					/	16
D //	5					1							5
$\frac{B}{A} = \frac{64}{23}$	6												
~~	7												
Score 2.78	8												
	9												
	IO												
	A	23										В	64

				Sta	teme	nt r	numbe	er					
	LEVEI		I	2	,3	4	5	6	7	8	9	IO	
MORAL	I	9	1	V	1	1	J	1	V	1	1		91
DEVELOPMENT	2	10	1	1	1	/	1	1	V	1	V	/	20
	3	121					/			J.			6
	4	3	1						1	1			12
B = 48	5												
Ā 24	6												
	7												1
Soone 2.00	8												
Score	9												
	IO												
	A	24.							. 14			В	48
Δ!-	11		1	- 1	1	1					1		1-0-1

Alec was almost of school-leaving age when this index was completed, thus he is shown to be immature despite much specialist help. He has consistently been rejected by both parents, so affecting his nurturence.

334

Child's name Anthonyd.o.b. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Sta	teme	nt r	numbe	er						
	LEVEI	J	I	2	3	4	5	6	7	8	9	IO		
MORAL	I	8	/		1	1	1	/	1	1	1		8	-
DEVELOPMENT	2	5		/	V	1			-	V		1	10	
	3	4	1/			/				1	V		12	
	4	3	/						V		\checkmark		12	
B = 47	5	1			V								5	
$\frac{B}{A} = \frac{47}{21}$	6													-
-1	7													
221	8													
Score 2.24	9													
	IO													
	A	21										В	47	The state of the s
This lador					1		Α	D					11	

This index was recorded as Anthony was responding to treatment and shows a regression particularly in moral development. This regression led to a reforming and reintegration of learning, leading to a more wholesome foundation for further growth

Child's name Davidd.o.b. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

Statement number 4 5 Ι 3 9 IO LEVEL I EGO DEVELOPMENT 8 Score 4 .39 9 IO 28 A

				Stat	teme	nt r	numbe	er					
	LEVEL		I	2	3	4	5	6	7	8	9	IO	
MORAL	I	3	1					1		,	1		3
DEVELOPMENT	2												
DEVISION PRINT	3	9	V	/	V	V	/	V	1		1	/	27
	4	4	V	V							V	1	16
B = 51	5						/						5
Ā 17	6												-
	7	1										j	
3.00	8												
Score 3.00	9									1.			
	IO				i								
	A	17:										В	51
1/	. /	1		,			0					1,	

David is brain-damaged and therefore cognitive development is hampered. He comes from a facilitive family and is probably corrently developed to optiming levels.

Child's name Schol.d.o.b. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Stat	emer	nt n	umbe	r					
	LEVEI	,	· I	2	3	4	5	6	7	8	9	IO	
EGO 10 2	I							1					
DEVELOPMENT	2	2					1				V		4
	3	3		1		/					V		9
	4	2						1		1			8
77	5	14		V			/		/		V		20
$\frac{B}{A} = \frac{75}{16}$	6	12			1							V	12
10	7	2					/		/				14
score 4.69	8			V									8
	9												
	IO											-	
	A	16										В	75

			Sta	teme	nt r	numbe	er					
	LEVEL	I	2	3	4	5	6	7	8	9	IO	
MORAL 2022	III									1		1
DEVELOPMENT	2 13				V				1	-	1	6
	3 3	11/	/				V					9
	4 6	111			V			V	V	V	V	24
B = 82	5 6			1	V	V		V	V		1	30
Ā. 71	6 2		V		V							121
	7											
Score 3.90	8											
Score 5.90	9								2			
	10											1
	A 21										В	82
Sed		1-	0	1			1-	1	(1

Saul was a particularly emotionally-disturbed boy from immature parents who, despite critical martal disharmany stayed together until recently. His chronological age of 16½ years has enabled higher levels of development but these lack consistency and consolidation.

	(F-T-T-T
Child's name	Corune	d.o.b. 26 3 4 Research code

INDEX OF DEVELOPMENT

(original test-blank)

After studying the statement on the shortened indices, tick only those characteristics markedly in evidence on the tables below.

					St	ateme				~	,	- 1-
	Level	1	1	2	3	4	5	6	7	8	9	10
	11	2										
	11	3			1				39/2			
000 = 6-96	11	43	/		/			/				
EVELOPMENT	11	52							/			V
	11	65			/				/			/
	11	78	-	/		/	/	/	/		/	~
	11	88		/	/	1	1	~	/	~		1
	"	93			/	9			/			~
	11	10								V		
		30										
	Level			i								
	11	2										
	11	33					/		1	/		
ORAL - 1.90	- 11	44	1	1							1	/
MORAL = 4.90 DEVELOPMENT = 4.90	11	58	1		/		/	/	/	1	1	1
Corinne was	f "	64		/		~	/	/				
coloned leading	' 11	72				/						
sanoor racein) "										-	1
school leaving age and her pattern of	11	821										-
pallernot	11	10		101		10		1	1	1	1	h
development	she	NS.	con	Sid	esa	isto	Tie	c ct	re	Spa	250	3
ill-wanted ea	Level	512	13,	1	1	1		P	1			
in the higher	11	2		1	1							
stages undespir	15,11	3	1	1								
development ill-wanted ea in the higher stages undespiration The optimistic EGO_IDEAL prognosion DEVELOPMENT prognosion	- 11	4	-	+		1						
DEVELOPMENT Prognosi	>. "	5	-	1-	1	1	-	1				
	11	6	-	+-	-			1				
	11	7	-	1	1	1					1	
	11	8	1	1	1	1				T		
	11	9	-		1							
	11	10	-	1	1	1						

Date of test

Tester's initials

Child's name Kelvin d.o.b. research code

After studying the statements in the handbook, tick only those characteristics markedly in evidence in the tables below.

			1	stat	emer	it n	umbe	r					
	LEVEL		I	2	3	4	5	6	7	8	9	IO	
EGO	I	10	V	V	V	1	V	1	V	V	V	V	10
DEVELOPMENT	2	6	V		V	V	V				V	/	12
	3	1				✓							3
	4												
	5												
$\frac{B}{A} = \frac{25}{15}$	6												
A 17	7												
Score 1-47	8												
	9												
	IO												
	A	17										В	25

Statement number MORAL

DEVELOPMENT $\frac{B}{A} = \frac{6}{4}$

Score 1.50

LEVEI	,	I	2	3	4	5	6	7	8	9	IO	
I	2			1	$\sqrt{}$				/			2
2	2								/		1	4
3												
4												
5												
6												-
7												
8				1			1					
9												
10					1		1		1			
А	4.								File		В	6
	0	C			1		0	(1	

Kelvin was an elective-mote who had not spoke for seven years footside of his home. Intensive treatme encarraged sofficient verbal communication to displace a cluster of psychotic symptoms. The poor relationshi of E.D to M.D. itsustrates a generalised social learning problem. 339

Child's name Gori,d.o.b. Dyears research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

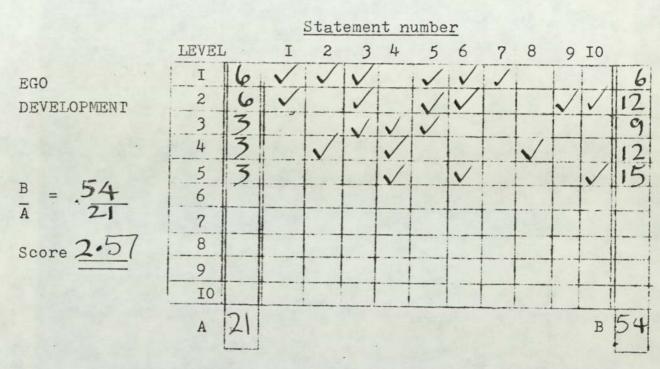
				Stat	emei	nt n	umbe	r					
	LEVEI		I	2	3	4	5	6	7	8	9	IO	
EGO	I	8	V	V		V	1	V	V		1	1	8
DEVELOPMENT	2	9	/	V	V	1	1	V	V		V	1	18
	3	8	V	V	1		V	1	V	V			24
***	4	4			1	/	/					/	16
- "	5												
$\frac{B}{A} = \frac{66}{29}$	6												
	7												
Score 2:28	8												1
	9												
	IO												1
	A	29										В	66

				Sta	teme	nt i	numbe	er					
	LEVEL	,	I	2	3	4	5	6	7	8	9	IO	
MORAL	I	10	V	1	1	1	1	V	1	1	/	V	10
DEVELOPMENT	2	3	1	/						1			6
	3	1					V						3
	4												
B = 19	5												
Ā 14	6												
	7												
Score 1.36	8												
Score 1.86	9									7			
· me	10												
	A	14		L L								В	19
Gary has	1	P-1		1	1	-		1.		,	-		L
you has	-l mo	100	pho	no	1>	21	mp	19.	NO	1 11	1/4	res	STEC

your has a mother who is simply not interested in him and a father who is printive and intolerant This pattern of northwance has forced a package of sorvival skills at the Street-wise level! hack of affiliation could account for the low moral development. This boy was immature in all respects including thysique, academic learning etc

Child's name Authoryd.o.b. ...3. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.



		Sta	tement	number		
	LEVEL	I 2	3 4	5 6	7 8	9 10
MORAL	I		1			1
DEVELOPMENT	2 3	VV			1	6
	3 2				V	1 6
	4)_	1				14
B = 2/	5 12			11		1 10
Ā . 9	6					
	7					
3.00	8					
Score 5.00	9				1	
	10					
Afrailia	A 9		- 0			в 27

Anthony has a schizophrenic father (an air-traffic controller!) and a severley depressed mother. He himself has a mixtore of psychotic and autistic features. The praiseworthy, and partially successful attempt at social conformity is revealed by an artificially high level of moral development compared to ego-development.

Child's nameStephend.o.b. M. research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Stat	emer	it ni	umbe	r					
	LEVEI	,	·I	2	3	4	5	6	7	8	9	IO	
EGO	I	8	V	/		/		V	V	1	1	1	18
DEVELOPMENT	2	6	/	/	/		/				1	1	12
	3												
	4												
. 0.	5												
$\frac{B}{A} = \frac{20}{14}$	6												
A 14	7												
Score 1.43	8												
	9												
	IO.												
	A	14									•	В	20

			State	ement	numbe	er				
	LEVEL	I,	2	3 4	5	6	7	8	9 10	
MORAL	1 3	1			T -		1	1	1	131
DEVELOPMENT	2 12							V		14
	3.	4-1								
	4 11	-					/			14
B =	5	11 1								
A (a	6	# 4	j		1					
V	7									
Score 1.83	8	11-1								
500Te 1.03	9 1									
	IO:	1 1	1							
	A 1/0								В	111
Steal	172	1	(,	. 7.	1-04	_ (1	1 (111
Stephen elderly p Cansegven	was a	- MS	cni	or I	· EU	200	m	01 1	som	04
energy p	aren's	inol	mas	sive	70	VE	pro	Tec	red.	
Carseguen	thy he	wa	5 0	lepri	red	of	NE	w I	nate	sial
to assimi	late a	d Si	Tose	guen	thy	int	egs	we	as	post
of the to	sks of	mati	witn)	*	0			,
	al refe				as	a	1~ 1	n-	nati	ioit
					-1 1			P	1	
ha	psychi	an	c h	105 p	ita	1.				
		74	~	1						

Child's name Stephend.o.b. 12418 research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Stat	emer	nt n	umbe	r					
	LEVEL	1	I	2	3	4	5	6	7	8	9	IO	
EG0	I	5		1		/		1	V	V	Ī		5
DEVELOPMENT	2	7	1	İ	1	/			/	1	/	V	14
	3	10	1	V	1	1	V	~	V	V	V	1	30
	4	17!		1	V.	~	V	/	/			V.	28
B - 77	5		-										
	6												
~)	7									-			
Score 2-66	8												
	.9					- !							
	10				!				!			!	!
	A	29										В	77
	421												

			5		emer	1000							
	LEVEI	,	I	2	3	4	5	6	7	8	9	IO	
MORAL	I	6	V		1			1	1	/	1		61
DEVELOPMENT	2									V			21
	3												
	4												
B = 8	5												
Ā 7	6												
	7												
Score 1.14	8												
Score 114	9												
	IO												
	A	7										В	8
Stephen Liverpool mini archt	C Ch	05	1				610		1-				1
1:10000	. No is	6	101	~ (a f	000	014	ma	ruc	α	rea	a o	7

mini archtypal criminal. High moral development would not fit him for membership of his famile or neighbourhood sub-culture.

The comp. high eD to MD might indicate sociopathic (or psychopathic) transfersion.

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

of a second	7 1	7-7	9 :	Stat	emen	t n	umbe	r			13	19-21
101	LEVEI	,	I	2	3	4	5	6	7	8	9 10	
EG0	1	3		1				/	1		I	3.1
DEVELOPMENT	2	7	/	1	/		/		/		11	14
	3	5		/		/		/			1	115
	4	1				/						14
- 1,	5	2	/									10
$\frac{B}{A} = \frac{46}{A}$	6											
A 18	7											
Score 2.55	8											
-	9											
	IO											
	A	18					- 4				В	46

				7777			umbe							
1	LEVEI	ı	I	2	3	4	5	6	7	8	9	IO		
MORAL	I	4	/		/			/			/		4	
DEVELOPMENT	2	1	. ,							/			2	
	3	9	/	/	/	/	/	/	/		/	/	27	
	4													0
B = 33	5													
$\overline{A} = \frac{33}{14}$	6								,					
	7					-								
Score 2.35	B	/		/					/					
PC016 = -	P	/		/		/1		/		/				
	1/0/			/	i	/ 1		/			/			
	_ A	14.										В	33	
Both &	1	17	n		1			1		4 7	1		1	
being mo	4/041	K S	Po	26	-1	> 0	W.C	4	ca	114	2 N	iot	ther	
both of being mo familie. fortheir	Both	1/2	and	2	100	5-0	m/	211	11	EX/	Loc	18	tia	,
Brtheir	son i	Sho	is	CM	1.	do	1	to	10	0.6	0	17	cis.	1
1)	,	1.	1 1-	4	1	L'U	01	10	(4	LI V	100	101	

damage or constitutional psychiatric illness.
The artificiat level of M.D. shows an interesting pattern. Perhaps development has not been sequential

After studying the statements in the handbook, tick only those characteristics markedly in evidence in the tables below.

					Stat	emer	nt n	umbe	r					
	100 2	LEVEL		I	2	3	4	5	6	7	8	9	IO	
EGO		I						!			,			
DEVELO	PMENT	2							-					
23,220		3												
		4												
	.00	5	2		V								V	10
B =	188	6	5	V		1		1	1				/	30
Ā	26	7	8	1		1		V	1	1	1	V	1	56
Score	7.23	8	8	V	V	V	V	/	/		V		/	64
		9	2									1	V	18
		IO	1			/			1					10
		A	26										В	188
														1

	Statement number LEVEL I 2 3 4 5 6 7 8 9 10										
MORAL - DEVELOPMENT	I 2 1 3										
$\frac{B}{A} = \frac{14}{14}$	5 3 6 5	V					V	V		1	15
Score <u>621</u>	7 6	V		\ <u>\</u>	V	V		/	/		42
	10 A 1	F, -			1					В	87
John u	525 0	ر دا	iass	ic'	sch	001	P	hot	oic C	N	he

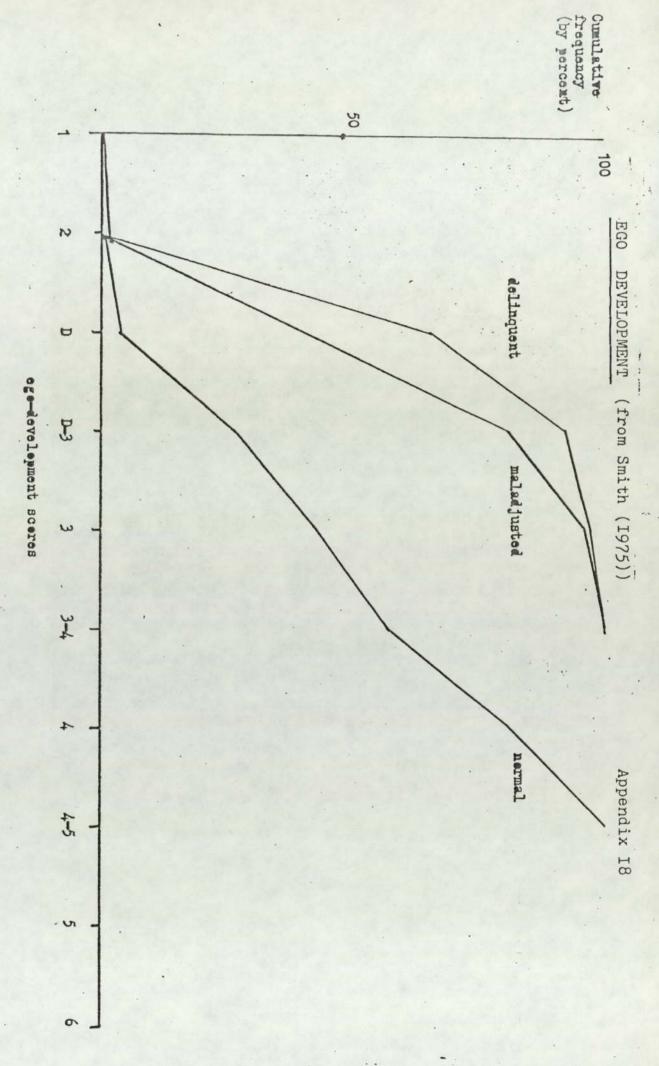
first referred. He now displays a healthy pattern of E.D. and M.D. If he gains an engineering apprenticeship, as expected, one can be optimistic with regard to his fiture.

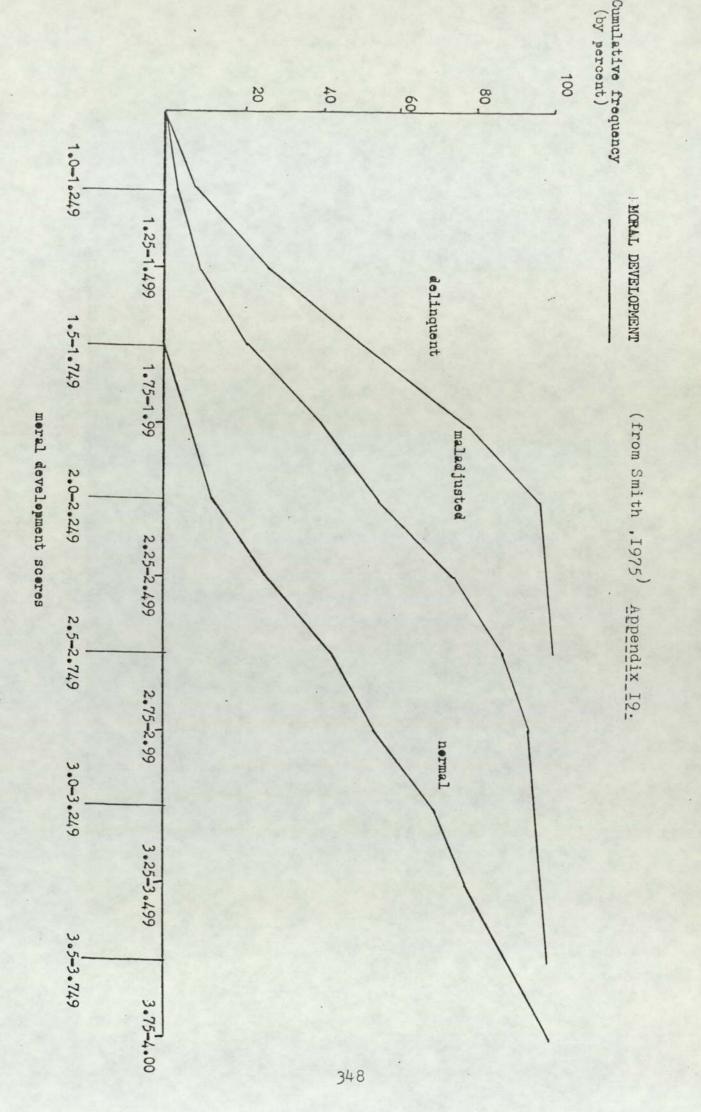
Child's name Norman.....d.o.b. 1447 research code

After studying the statements in the handbook, tick only those characteristics <u>markedly</u> in evidence in the tables below.

				Stat	emer	nt n	umbe	er					
	LEVEI	,	I	2	3	4	5	6	7	8	9	IO	
EGO 1013	I						Ī.	1	!				
DEVELOPMENT	2			i									
	3	2						/				/	6
	4	2	V	~									8
D 0.0	5	8			/	V	1	V	1	1	1	1	40
$\frac{B}{A} = \frac{219}{25}$	6	18	/	1	1		1		V	V	V	1	48
A 35	7	7	V		/		/	V	1	1		1	491
score 6.26	8	5	V		/		/	1				1	40
	9	2			1						1		18
	IO				~								16
	A	35				,						В	29

1				Sta	teme	nt r	numbe	er					
	LEVEI	J	I	2	3	4	5	6	7	8	9	IO	
MORAL -003	I										1		
DEVELOPMENT	2	1								V			2
	3	111	1	V	V	1		V	1			V	21
. /: 0	4	7	V	V	1	~	1				V.	V	28
$\frac{B}{A} = \frac{169}{35}$	5	7		V			/	1	1	/	1	/	35
A 35	6	8		V		/	V	1	/	V	V	1	48.
	7	5			~		~		1	1	1		35
Score 4.83	8												
Deore 1 9	9												
	IO				i	1							
	A	35										В	1169
Norman,	as.	110	011:0	0	F (1~1	100		6	28.	. ,	2	1
a mother	Con	a.	8	dia	1	10)	1.	£+	Per	ure	nte.	Sh	ift
a mother and has be	80.01	n	275	0	TI	2	co.	المرا	017	el c	f	20.	1000
and responsil	= 114	- 1	2.5	h.	90	4	Con	sice.	M	2	70		2
early age IT	acc	91	er't	2	di	ipl		. 0	E.	ic	1111	T	ist a
occasione !	recour	20	to	10	200	ct	copi	me	-1	110	7.	011	withou
early age .The occasional the scoring of	alter	n.	This	101	cVo	56	use	on f	1 111	alc	di c	al	en in





MORAL DEVELOPMENT

	MS/M/MS	MS/M/T	Bull's M.D.
MS/M/MS	-	0.6928*	0.3768*
		61	60
		S 0.00I	S 0.00I
MS/M/T			0.4239
			95
			S 0.00I
Rutter	-0.2917	-0.1341	-0.1486
Question- naire	60	95	99
	S 0.012	S 0.097	S 0.07I
Report Slips	-0.4453*	-0.3874*	-0.0893
	60	95	99
	S 0.00I	S 0.00I	S 0.190
Supervision	0.6357*	0.5467*	0.5299*
List	60	95	99
	S 0.00I	S 0.00I	S 0.00I
Bolman's Aggression	0.7632*	0.4836*	0.3712*
Index	60	95	99
	S 0.00I	S 0.00I	S 0.00I
Adjustment	-0.6543*	-0.4512*	-0.3632*
Profile (MS)	60	95	.97
	S 0.00I	S 0.00I	S 0.00I
Adjustment	-0.3649	-0.4196	-0.2113
Profile (Teachers)	42	42	42
	S 0.009	\$ 0.003	S 0.090
	* significant at	t 0.00I level	

EGO DEVELOPMENT

		MS/E/MS	MS/E/T	<u>L/E</u>
(3)	Rutter Ques- tionnaire	-0.2297	-0.0741	-0.3485**
		60	95	99
		S 0.039	S 0.039	S 0.00I
(6)	Report Slips	-0.2632	-0.3011	4453*
		60	95	60
		S 0.02I	S 0.002	S 0.00I
(4)	Supervision List	0.5881*	0.5978*	0.7499*
		60	95	99
		S 0.00I	S 0.00I	S 0.00I
(5)	Bolman's Aggression Index	0.6924*	0.4794*	0.5816*
		60	95	99
		S 0.00I	S 0.00I	S 0.00I
(I)	MS/E/MS		0.8350*	0.5598*
			61	60
			S 0.00I	S 0.00I
(2)	MS/E/T			0.5403*
				95
				S 0.00I
(7)	Adjust- ment Profile (MS)	-0.6887*	-0.4896*	-0.5425*
		60	95	97
		S 0.00I	S 0.00I	S 0.00I
(8)	Adjust- ment Profile (teachers)	-0.4143	-0.4548*	-0.3675
		42	42	42
		s 0.003	S 0.00I	S 0.008

* significant at 0.00I level

ADJUSTMENT PROFILE

(* significant at 0.00I)

		r	<u>s</u>
Statement	I	0.7572*	
	2* I	-0.0434 S=0.397	0.397
n	3	0.6313*	×
	4	0.7134*	×
"	5	0.3074 S=0.028	0.028
"	6	0.5373*	ж
"	7	0.6019*	ж
п	8	0.7785*	ж
"	9	0.7868*	ж
n	10	0.4466 S=0.002	0.002
"	II* 2	0.1971 S=0.115	0.115
"	I2	0.4087 S=0.005	0.005

^{*} I Statement 2 scores omitted from final raw scores, re negative r.

^{* 2} Statement IO scores omitted from final raw scores, re low r.

Means and Standard Deviations of Measures Used

<u>VARIABLE</u>	N	<u>M</u>	S.D.
MS/Ego/MS	61	3.5490	1.2455
MS/Ego/Teachers	96	4.0755	1.4002
Loevinger Ego	99	4.3131	1.6882
MS/Moral/MS	61	2.8102	1.1413
MS/Moral/Teachers	96	3.1936	1.0467
Bull's Test of Moral Development	99	2.3299	0.5863
Rutter's Questionnaire	99	19.3434	7.4876
Supervision List	99	4.4141	2.2178
Bolman's Aggression Index	99	4.2727	1.3463
Adjustment Profile (rated by MS)	97	20.8660	7.6276
Adjustment Profile (rated by teachers)	42	21.6429	6.6510
Report Slips	99	28.0808	37.5281

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