5-1-1968

The emotionally disturbed and their families: a study of nine Black children

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THE EMOTIONALLY DISTURBED AND THEIR FAMILIES:
A STUDY OF NINE BLACK CHILDREN

A THESIS
SUBMITTED TO THE FACULTY OF ATLANTA UNIVERSITY
IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE
DEGREE OF MASTER
OF SOCIAL WORK

BY
ODESSA DEANNA THOMPSON

SCHOOL OF SOCIAL WORK

ATLANTA, GEORGIA
MAY 1968
DEDICATION

This thesis is dedicated to my family. My mother, in particular, who does not fully understand my motivations and drives, but supports me in all of my endeavors. Special gratitude is expressed to the following people who have persistently encouraged me to achieve: Jean Himes, Jessie P. Walker, and Ruth Williams. A personal thanks to Dr. St. Clair Drake and Sidney Poitier for everything.
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CHAPTER I

THE AREA OF INVESTIGATION AND THE PROBLEM

Orientation to the Problem.--This thesis presents a study of a group of black children undergoing therapy for emotional disturbances. The purpose of the study is to examine a small number of selected cases, analyzing them within the framework provided by available research findings on the personality consequences of prejudice and discrimination for persons of minority status as experienced in family, neighborhood, school, and peer group relations. A secondary and more peripheral consideration is with how a society that subjects black children to the consequences of racial segregation and discrimination affects their relation with therapists, particularly those who are white. Because the study seeks more to raise questions than it does to answer them, its nature is, in that sense, only exploratory.

There is, everywhere, evidence of the prevalence in America today of unfounded racial myths and unproved racial beliefs that have resulted in a social structure that handicaps blacks. These myths and these unproved beliefs are based on the assumption that inherent or biologically
determined differences exist between persons of different races. The more common and the more frequently encountered of these myths and unproved beliefs include the doctrine of mentally superior and mentally inferior races, the belief that races are temperamentally different by heredity, the notion of biologically superior and biologically inferior races, the myth of biologically determined racial cultures, and the dogma of inherent differences in racial "morality." ¹

There is a vast and still growing literature on this subject, and this will be discussed in considerable detail later. It can be said, at this point, however, that the best evidence from that part of the literature which is scientifically based stands in direct refutation of the aforementioned myths and beliefs.

From this array of data, the overwhelming opinion of modern psychology concludes that the mean differences often observed between black and white children are largely the result of environmental, rather than genetic, factors. In view of the widely publicized contention of H. E. Garrett and F. McGurk that intelligence tests prove that "Negroes are below whites in capacity for education" and that

"improvement of Negroes' social and economic status does not reduce this difference," the statements of four groups of scientists are cited:

The Society for the Psychological Study of Social Issues and the American Psychological Association, concluded in 1961:

There are differences in intelligence test scores when one compares a random sample of whites and Negroes. What is equally clear is that no evidence exists that leads to the conclusion that such differences are innate. Quite to the contrary, the evidence points overwhelmingly to the fact that when one compares Negroes and white of comparable cultural and educational background, differences in intelligence diminish markedly; the more comparable the background, the less the difference. There is no direct evidence that supports the view that there is an innate difference between members of different racial groups.*

The Society for the Study of Social Problems, a section of the American Sociological Association, concurred in the same year:

The great preponderance of scientific opinion has favored the conclusion that there is little or no ground on which to assume that the racial groups in question are innately different in any important human capacity . . . the conclusion of scientists is that the differences in test performance by members of so-called racial groups are due not to environmental factors. This is the operating assumption today of the vast majority of the competent scientists in the field.3

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3Ibid., 134.
The American Anthropological Association passed a resolution by an unanimous vote (192 to 0) in 1961:

The American Anthropological Association repudiates statements now appearing in the United States that Negroes are biologically and in innate mental ability inferior to whites, and reaffirms the fact that there is no scientifically established evidence to justify the exclusion of any race from the rights guaranteed by the Constitution of the United States. The basic principles of equality of opportunity and equality before the law are compatible with all that is known about human biology. All races possess the abilities needed to participate fully in the democratic way of life and in modern technological civilization.1

In 1952, a statement submitted by thirty-five social scientists to the Supreme Court as an appendix to appellants' briefs in the school segregation cases contained this passage:

The available scientific evidence indicates that much, perhaps all, of the observable differences among various racial and national groups may be adequately explained in terms of environmental differences . . . . It seems clear, therefore, that fears based on the assumption of innate racial differences in intelligence are not well founded.2

This evidence suggests that there are no inherent or biologically determined behavioral differences between the races. But this is not to say that minority-group members cannot be viewed as somewhat different from majority-group members, for we do observe behavioral differences between the two. The point is that these behavioral differences are other

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than biologically determined. Actually, they are to be seen as resulting from the different experiences to which members of the majority-group and members of the minority-group are exposed. The prejudiced person, on observing these differences, tends not only to exaggerate them, but also to use them as "proof" for his contention that the minority-group is inferior. What the prejudiced person fails to accept is the fact that some of these differences actually result from the prejudice and discrimination directed towards the minority.

It must be underscored, however, that all minority-group members do not respond in the same way. There are individual differences within groups. Many different responses are possible, and the likelihood that any particular

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1 Pettigrew, op. cit., p. 159, relates "... racial differences do exist, but they are not a matter of innate group "superiority" or "inferiority"; persistent patterns of segregation and discrimination help to create and perpetuate these racial disparities; and even if discrimination were totally abolished tomorrow, the impoverished economic and social resources of the majority of Negroes would act to maintain these racial disparities." For an integrated body of psychodynamic theory on how a "basic" or "modal" personality is formed within ethnic or racial groups see, Abram Kardiner, The Individual and His Society (New York: Columbia University Press, 1945); Cora A. DuBois reports on the testing of the theory on a South Sea island group and provides data on how deviants from the "modal" personality arise in The Peoples of Alor (Minneapolis: University of Minnesota Press, 1944); see Gordon W. Allport, The Nature of Prejudice (Reading, Mass.: Addison-Wesley Publishing Co., 1954); Stanley Elkins, Slavery (Chicago: University of Chicago Press, 1959); Gunnar Myrdal, An American Dilemma (New York: Harper and Row, 1944).
one will occur is determined by the factors involved in particular social situations. It must also be emphasized that the minority-group responses are not necessarily unique to the minority.

According to Bingham Dai the problems of personality development among black children are found to be of two major kinds.

One kind consists of problems that seem to be inherent in the primary group situation in this culture, and, therefore, they are shared in common by both Negroes and whites. . . .

The other kind consists of personality problems that are more or less peculiar to Negro children and are closely associated with the peculiar social status that their elders are socially and legally compelled to occupy in this society and the peculiar evaluations of skin color, hair texture, and other physical features that are imposed upon them by the white majority. . . . So far as the personality development of Negro children is concerned, the most important conditions resulting from living under caste restrictions seem to be the preponderance of lower-class families with their special codes of conduct, broken homes, accompanied by the dominance of maternal authority, the special importance attached to skin color . . . and the extraordinary stress on matters of social status. Each of these cultural situations is apt to leave its indelible imprint on the personality of the Negro child.¹

Some of the personality tendencies to be discussed in this study are often characteristic of majority-group members as well as those members in the minority groups, but the point being made is that given the different experiences to

which members of the minority are exposed, and especially those resulting from prejudice and discrimination, the likelihood that these particular personality tendencies will appear is increased. In other words, the incidence of them -- given the differences in experiences related to minority status -- can be expected to be greater among the minority.

One of the basic assumptions of this study is that black children face special problems of psychological importance in the process of growing up that affects their later development and social personalities. The psychogenic notion of emotional illness, that early pernicious home experiences have a deep and lasting effect on the individual's psychological adjustment, postulates that there are family patterns of roles and behavior which, presented by the parents, and assimilated by the child, predispose him to one or another type of psychological disturbance. ¹

The black child experiences an added social dimension to his existence that whites do not for the black child is

socialized within families that are in the subordinate sector of a caste-class system based upon race. Also, within the black caste are social classes with a subculture that differs from those of the class structure within the white society. Consequently, some of the personality problems of black children are closely associated with the social status their families have in a system of racial-caste. The view of the psychologist, Robert Coles, after working many years with black youth, is that most of the "usual" problems and struggles of growing up are complicated by this racial dimension. He states:

... being Negro serves to organize and render coherent, in a special way, many of the experiences, warnings, punishments, and prohibitions that Negro children face. Yet, the feelings of inferiority or worthlessness that they are likely to acquire, and the longing to be white that they often harbor and conceal ... do not fully account for the range of emotions in many Negro children as they come to terms with the meaning of their skin color. Some of these emotions may reflect deep-seated personality disturbances related only indirectly to race or caste.

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That there are stresses and strains in any family is taken for granted, but the stresses in a black family are qualitatively different from those in a white family because all black families are affected by the system of racial-caste and the distortions it generates in the class subcultures of the black community. For instance, there are proportionally more black families than white in the lower socio-economic level. More black children have parents with limited education; more live in inadequate and overcrowded housing; more live in the lower-class subculture.

The case studies reported by Dollard and Davis, and Bertha Riese provide vivid accounts of generation after generation of appalling defeat in black families. Economic security for most black families in non-existent. Slum living, unemployment, inadequate education and economic instability all victimize blacks to a greater degree than whites.

The necessity for both parents to work, the high incidence of broken families, and the heightened interpersonal


tensions within black families often result in a situation where neither mother nor father is able to provide the minimum of affection and attention that the child needs to grow into a person capable of liking himself and others, frequently because his parents do not like themselves. The children have few experiences with stability, warmth and attention.

The female head in an unusually high percentage of black families is typically aggressive and hostile, and the male, if present at all, hostile and dependent.¹ The home life in many case studies of black youth is revealed as one of constant bickering and fighting. Often one father leaves; a stepfather or father substitute appears. Where marital discord prevails the child cannot identify without coming into conflict with one or the other of the male models. This situation is aggravated for many black children because of the predominantly feminine influence in the home and in the school.²


In connection with the severity in the ambivalent identifications the child is forced to make the best that he can with his parents or role models. Studies show that some black children are reluctant to identify with their own color which has negative meaning for high social status in America.

The identity that the child forms early in life depends to a great extent upon how his needs are satisfied and how he is thought of by his parents and other significant people in his environment. Although this situation applies to all social groups, it is especially true for the black child because the patterns of behavior in his primary group environment are in turn determined to a great extent by the larger social and cultural setting that deforms and disrupts them.

What techniques are available to the black child in adapting himself to his underprivileged position? A considerable number of black children are able to react to the social pressures they experience in a more or less healthy manner. Some children, however, develop exaggerated character defenses, while others show a variety of completely neurotic reactions.

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The earliest clinical study of black children is that of Lauretta Bender, who reports that racial conflicts find expression in blocking, mutism, catalepsy, negativism and sleepiness. ¹ Festinger's study show that black children, even when their behavior is not so extreme, are often more emotionally disturbed, more poorly adjusted to teachers, and more socially maladjusted than other children. ² Kardiner and Ovesey studied 25 nonpsychotic adult blacks of both lower-class and middle-class status in New York City and found that subjects had a higher than average degree of repressed and suppressed hostility, a tendency toward exaggerated self-hatred, and as a consequence of emulating the white culture in which they live, a white ego-ideal. ³ Studies of doll preferences by Clark and Clark dramatically show the extent to which black children interiorize a white ego-ideal and negative self-feelings at a very early age.

Cultural and social factors are of crucial importance in the treatment of minority-group members and with the increasing stress on militancy, revolution, and social and economic power in black communities psychoanalytic theories of hostility and aggression, transference and counter-transference as applied to blacks may require a new approach in the future.


³ Kardiner and Ovesey, op. cit., pp. 315-16.
Problem Focus and Formulations.--While there are many facets to the study of character formation, one basic concern, from the point of view of this thesis, is the fact that conflicts in the cultural and family milieu distort the child's development and that such conflicts are unusually damaging for children who families are part of a system of racial-caste. Case histories are used to illustrate the distorting influence of social factors upon family relationships and upon the processes of character formation.

The impetus for undertaking this study was both practical, stemming from concern for many disturbed youth the researcher worked with in a Northern state hospital, and theoretical arising from interest in the concepts of culture and personality development, and in the emerging vital role of psychotherapy in the field of mental health, especially as it applies to black people.

Since the psychiatric setting of this project is one in which black patients are treated primarily by white therapists, the research is seen as having value for those persons who find themselves confronted, as therapists, by any or all those aspects of familial, social and economic life serving to distort and stunt the psychological growth of blacks.

August B. Hollingshead, Frank Rieseman, and William Haase have found that the selection of patients for psycho-
therapy has evidenced a consistent bias against lower-class individuals.¹ This has been observed in studies looking at an entire community, at an outpatient clinic, or at a voluntary private hospital.² In their studies of the relationships between social class and the duration of psychotherapy, Imber and Nash concluded that therapists who have no control over the selection of their patient and, because of it, no opportunity to bias the selection, show a tendency to shorten the period of therapy for those lower-class patients assigned to them.

These observations are pertinent because the system of racial-caste keeps an unusually high percentage of blacks in a lower-class position. This problem, however, is acknowledged in the literature as a communication gap between the professionally educated person and the uneducated individual and between the rich who can afford treatment and the poor who usually cannot afford it.

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This thesis, hopefully, will stimulate additional interest in developing new ways of fostering emotional well-being among those low in income, of minority-group status, and "poor" in the intellectual and communication skills.

The basic assumptions in this thesis about the diagnosis of and the therapy for disturbed black children are as follow:

1. That some black children, like some white children, acquire behavior patterns making it difficult, if not impossible, for them to adequately function within the social groups of which they are a part, and particularly those groups involving family, peers, and the school.

2. That some black children, like some white children, lack the personal stability, the personal organization, so necessary for any paper and pencil measurement of a child's full intellectual potential.

3. That full realization of a child's potential to function adequately in group situations and to realize his intellectual capabilities demands an increase in ego strength irrespective of whatever physical or psychological mechanisms are underlying the maladaptation.

4. That within any social class there will be certain things experienced by children both black and white, but, given the caste system in which the black is expected to be subordinate, certain behaviors and certain values will be unique to the black child.
5. That for black children the therapist must understand not only the black subculture, but must also understand the punishment accorded black children in America because they are black. And they must understand the responses of these black children to being black.

6. That in addition to a basic Freudian analysis of the underlying trouble, social and cultural factors must be considered in both the diagnosis and in the treatment.

Four therapeutic approaches are almost always indicated for the treatment of emotionally disturbed children: (1) to strengthen the ego so the child can better cope with the situation in which he finds himself; (2) to try to move the child into a more favorable socio-cultural setting during the course of treatment; (3) to strengthen the child so he can function adequately immediately after treatment; and (4) to develop insight and autonomy so that the child can cope with changes in his socio-cultural environment and can initiate action that will assist him in moving into the kind of adult socio-cultural environment he feels is best for him.

In 1963, David Ausubel and Pearl Ausubel tried to formulate a definitive statement on "Ego Development Among Segregated Negro Children" in which they synthesized all available research data.¹

The theoretical orientation provides useful guidelines for the analysis of the empirical data used in this thesis. The therapeutic practices at Eastern Pennsylvania Psychiatric Institute, where the children studied were undergoing treatment, seek to increase the ego strength of the children. For the purposes of this study, the Ausubels' basic definition of "ego development" will be used.

Ego development refers to the orderly series of changes in an individual's self-concept, self-attitudes, motives, aspirations, sources of self-esteem, and key personality traits affecting the realization of his aspirations as he advances in age in a particular cultural setting.¹

These normal and "orderly changes" mentioned by the Ausubels do not characterize the 9 cases selected for analysis. Disruptions of ego development may occur among children of any socio-cultural background, but the weight of the evidence supports the general theory of the neo-Freudians that specific cultural and social influences are related to the individual severity and group incidence of abnormal growth, and must be considered during treatment. The literature reviewed in Chapter II of this thesis refers to that discussed by the Ausubels as well as additional sources, all which serve to reinforce this general theoretical position. Also reviewed is the available literature that focuses specifically on the special proposition of concern of this investigation, that "the ego development of black children in America manifests certain distinctive properties."

¹Ibid., p. 34.
This thesis accepts as demonstrated fact and not as a mere hypothesis the Ausubels' statement that:

Negro children live in a predominantly lower-class subculture that is further characterized by a unique type of family structure, by specially circumscribed opportunities for acquiring status, by varying degrees of segregation from the dominant white majority, and above all, by a fixed, apparently immutable, denigration of their social values.¹

This is not to say that all black children live in lower-class neighborhoods or participate in the lower-class subculture, but that all of them are affected by the fact that their sub-group is predominantly lower-class in both an economic and social sense. Not all black families are unique, but the fact that so many are affects all black children, if only indirectly. Black family life is stereotyped as lower-class by the white majority. Middle-class Negroes so often internalize the white stereotype of black family life, and these middle-class Negroes in rejecting and in criticizing the life styles of lower-socio-economic blacks, make clear -- to their children -- their agreement with the white stereotype.

Two specific stages in the ego development of children are discussed by the Ausubels. Their conclusions regarding these stages, as they relate specifically to lower-class blacks, are presented in Table 1.

¹ Ibid., p. 35.
<table>
<thead>
<tr>
<th>Class Levels</th>
<th>In Early Childhood</th>
<th>In Middle Childhood and Adolescence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower-class factors present</td>
<td>more casual, inconsistent, violent and authoritarian controls in family</td>
<td>peer group tends to reduce respect for teachers and parents</td>
</tr>
<tr>
<td>among both black and white</td>
<td>father's chief role is to impose constraints and administer punishment</td>
<td>academic training devalued</td>
</tr>
<tr>
<td>Americans</td>
<td>early relaxation of care and close supervision by family with peer group controls increasing</td>
<td>upward mobile children are not trained in techniques for striving</td>
</tr>
<tr>
<td></td>
<td>early volitional and executive independence outside the home</td>
<td>conflicts arise from contrasting own lower-class status with status of middle-class children</td>
</tr>
<tr>
<td></td>
<td>less emphasis upon abstract than upon concrete perceptual learning</td>
<td>exposure to wide range of &quot;escapes&quot; drugs, sex, delinquency, etc.</td>
</tr>
<tr>
<td>Factors present in black</td>
<td>learning begins more frequently in families where the union is &quot;illegal&quot; and loosely connected</td>
<td>awareness of place in a caste system creates hostility and frustration</td>
</tr>
<tr>
<td>subculture</td>
<td>children are in context where illegitimacy is not frowned upon</td>
<td>awareness that features of hair, skin color, body image are considered a stigma which creates an identity problem</td>
</tr>
<tr>
<td></td>
<td>likely to be in a matriarchal family climate where girls are highly valued</td>
<td>realization of punishment for resisting the caste system, creates hostility</td>
</tr>
<tr>
<td></td>
<td></td>
<td>realization about black values and white values intensifies identity problem and results in ambivalence and self rejection</td>
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</tbody>
</table>

According to the Ausubels', ambivalence associated with conflicting values and with the problem of identity confronts black children during both developmental stages. This ambivalence is intensified among lower-class children, and especially at this class level, is a matter of crucial importance. They also conclude that:

One of the most striking features of ego development in the segregated Negro community is the relatively more favored position enjoyed by girls. Negro girls are less traumatized than boys by the impact of racial discrimination.¹

Adjustment is attempted by boys and girls both by "moving toward" and "moving away" from goals -- a universal dynamism -- but their way of doing it reflects a cultural pattern peculiar to the black subculture.

Omiting any discussion of the severely disturbed or maladjusted child, the Ausubels do not discuss individual therapy. They do, however, suggest that proportionately more black than white children are likely to experience severe behavior problems within our caste-class society. Some eventually find their way to institutions such as that from which the cases for this study were selected. If normal ego development for all black children is thwarted by the American caste system, and if lower-class blacks have an even more difficult time of it, it logically follows that therapy for severely maladjusted black children demands

¹ Ibid., p. 39.
special consideration. Except for the most orthodox of Freudians this is a generally accepted proposition. By intensively examining the nine children selected for this study the findings might highlight the nature of some of the special problems experienced by black children and provide a better assessment of what the prognosis is for restoring these children to a state of mental health within an "unhealthy society."

**Methods and Procedure.** This thesis proposes to examine the earlier mentioned propositions by the method of structural analysis. A purposive sample of nine children undergoing treatment for aberrant behavior at the Eastern Pennsylvania Psychiatric Institute was selected.\(^1\) The socio-cultural context in which their personalities are evolving is analyzed with special reference to the three most important institutions affecting their lives to date: (1) the family, (2) EPPI, and (3) the public school.

The analysis describes the structure of EPPI in terms of roles and the kind of subculture they reflect in their norms and values. Since EPPI exists within the context of a social system where race and color are sociologically important, attitudes and practices at EPPI regarding these factors are made explicit. The specific part of

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\(^{1}\) The basic assumption behind purposive sampling is that with good judgment and an appropriate strategy one can hand-pick the cases to be included in the sample and thus develop samples that are satisfactory in relation to one's needs and are judged to be typical of the population in which one is interested. See Marie Jahoda, *et al.*, *Research Methods in Social Relations* (New York: Holt, Rinehart and Winston, 1967), pp. 520-21.
the EPPI structure within which the nine children are interacting will be described in detail, that is, the Children’s Unit.

The second step in the analysis of the data was to indicate how the child happened to come to EPPI and how the disorder had been diagnosed. As a part of the case analysis each child was studied in relation to other institutions and groups with special reference to his family, since treatment was predicated upon the assumption that socio-cultural factors were important in personality development. The approach in this analysis was a generic one in which the stages of ego development as defined by Erikson were used in the assessment of the extent to which relations in the family and in other institutions have contributed toward the child’s disordered ego development and lack of adjustment. The basic frame of reference was neo-Freudian.

Both Freudian and neo-Freudian theory accept family relationships as crucial personality determinants during the first five years of the child’s life. The rest of a life history is a reshaping of the first formed personality constellations. The cases were selected with reference to a specific family type. All of the children are from low-income, matrifocal families where some disorganization exist. Theoretical considerations lead us to expect certain kinds of personality development within this family.
type and the researcher examined the cases in relation to some of the characteristics of the lower-class black family. Not all children of such families become "disturbed enough" to require treatment; the concern here is with those variables most likely to have precipitated personality disorders among these specific children. Two atypical cases were selected. In one of these the child is the son of a black father and a white mother and has spent his earliest years in institutions. In the other case, the mother has had some college education and is a school teacher.

Most literature on the black family stresses the disastrous effect of the matrifocal family on the personality of black males. Research investigators have given less attention to the harmful effects on girls reared in the matrifocal family. According to Freudian and neo-Freudian theory, it is to be expected that girls from such families experience definite consequences.

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1 Moynihan refers to the matrifocal family as the "typical" in The Negro Family: The Case for National Action (Washington, D. C.: Office of Policy Planning and Research, United States Department of Labor, March, 1965), p. 29. Great caution should be used in writing of the "typical" or average black family. J. H. Rohrer and M. S. Edmonson, The Eighth Generation (New York: Harper, 1960) demonstrate conclusively that the matrifocal family was only one of the types of families even among very low income groups in New Orleans; see Hylan Lewis, "Culture, Class and the Behavior of Low-Income Families," (paper presented at the Conference on Lower-Class Culture, Barbizan Plaza Hotel, New York City, June 27-29, 1963), p. 38. Census data for 1960 indicate about one-fourth of all black families for that given year had female heads.
CHAPTER II

REVIEW OF THE LITERATURE

Introduction.—The concept of "minority status" implies membership in a group that has deprivations and disabilities imposed upon it by some other group. There is an extensive amount of literature on such groups, ethnic, religious, national and racial in various parts of the world. All varieties of psychological theory, clinical data, and empirical research support the generalization that members of minority-groups develop patterns of response to their deprivation and the invidious distinctions inflicted by the majority culture. The mental health of the group and of individuals within it is affected by minority status. Insofar as emotional disorders appear, whatever their incidence, it is reasonable to expect that minority status will play some part in their development.

This thesis is concerned with social and cultural factors that contribute to emotional disorders in black American children. It is assumed that the social and cultural context of a child's life is crucial to his growth of consciousness and the role he perceives himself playing in the world. This chapter presents a survey of the literature
on this subject. Since much of the literature on the mental health of black people is not confined to discussions of the pathology of black people, the researcher would have been limited in the survey, if the review had focused on research concerned with pathology exclusively. Therefore, the following discussion covers literature relevant to the mental health of black people, including social and psychological variables, as well as discussions of emotional disorders and psychotherapy.

Minority Status and Emotional Disturbances.--Two psychiatrists, Kardiner and Ovesey, state that:

We cannot avoid the conclusion that the dominant conflicts of the Negro are created by the caste situation and that those of class are secondary.¹

In 1957 Martin M. Grossack studied personality characteristics of 107 southern black students, and concurred with Kardiner and Ovesey's findings. However, Grossack's results showed that:

...deference, exhibition, autonomy, affiliation, succorance, dominance, abasement, nurturance, and heterosexuality reflect caste determinants; while those of endurance, achievement, order, intraception, and aggression are better considered classwise.²

Other psychiatrists, though they do not use the terms "caste" and "class" are keenly sensitive to the importance of these factors in dealing with mental health problems among black

¹ Kardiner and Ovesey, op. cit., p. 302.

people.

The psychiatric literature on the black American is not extensive. Because of their lower economic position, blacks as compared to whites, have been less able to afford psychoanalysis or psychotherapy. Psychoanalysts have not been numerous among those who have made attempts to deal with the mental health of minorities. The emphasis has been on concepts of culture and personality, used by a few neo-Freudians such as Sullivan, Kardiner, Horney and Fromm.¹

The question of whether there is something in the experience of growing up as a black, in contrast to growing up as another type of social personality, is not, however, a new one. The earlier studies were those of sociologists and anthropologists attempting to answer the question: "How does the fact of being born black affect

the developing personality of a boy or girl?" Attempted answers have been included in major volumes published as early as the 1940's such as E. Franklin Frazier's, *Negro Youth at the Crossways*; Charles S. Johnson, *Growing Up in the Black Belt*; John Dollard and Allison Davis's classic, *Children of Bondage*; John Dollard's *Caste and Class in a Southern Town*; and St. Clair Drake and Horace Cayton's *Black Metropolis*. ¹

Abram Kardiner and Ralph Linton were the first scholars, functioning as an interdisciplinary team, to develop a theory of how the basic or modal personality arises within a specific culture or subculture. ² Kardiner and Ovesey applied this body of neo-Freudian theory to the black American subculture in a study of 25 blacks in New York City. *The Mark of Oppression* is a kind of milestone in the literature. Some of the cases were patients in psychotherapy and some were subjects who were paid for interviews. The major focus was on the impact upon the black child of a family structure determined by social and economic as well as caste factors. The authors generalized

that frequently in the black family a central figure is the mother who has no respect for her spouse because he cannot act according to white ideals or prototypes. Forced into the dominant role, both psychologically and economically, she is sporadically punitive and affectionate toward her children. They in turn see her as a frustrating person rather than as one upon whom they can depend. The father, when present at all, oscillates between submissiveness to the mother and disinterest in the children, and makes occasional violent attempts at punishment. The result of continuous frustration in childhood is to create a personality devoid of confidence in human relations with an eternal vigilance and distrust of others.¹

Psychiatrist J. H. Rohrer and sociologist Edmonson Thompson examined data from New Orleans with reference to the Kardiner and Ovesey work, and concluded that it oversimplified the situation by not recognizing the variety of family types that exist within each of the black social classes, including the lower-class. They were inclined to reject the conclusion that all black personalities display evidence of self-hatred.² Hyman Lewis, a black sociologist

¹ Kardiner and Ovesey, op. cit., p. 308.

working with lower-class families in Washington, D. C., brings convincing evidence to support Bohrer and Edmonson. The Kardiner and Ovesey thesis seems to be essentially correct, but variations in the basic personality of blacks may be found due to regional differences and differences in family type.

Family and social class determinants of behavior may be related to the degree that a family unit may belong to a single class and have a class-determined "typical" pattern of family life. The basic influence of caste on black American life is that economic discrimination and residential segregation produce a much higher proportion of low income families with lower-class traits than in the white society. Because social problems arise more frequently at this class level, more literature is available on lower-class families than for those at other class levels. The structure of the lower-class black family has been described as matriarchal or matrifocal with the most frequently encountered theme that of a passive or absent father and a dominant mother or mother-surrogate.


3 Dai, op. cit., 552.
Other references to the black family note the working mother's neglect of her children, and the intermittently absent father's competition with his children for dependency gratification from the mother. A tendency to emphasize somatic complaints has also been related to an ambivalent dependence upon the mother.

Asocial or neurotic behavior problems, indicated in Bender's research, arise from special family situations which result from inferior social and economic background and from a combination of warm, interhuman relationships and poor crystallized family constellations.

Davis, Mass, and Maccoby found that many of the etiological features in the environment that impinge on personality development are not specific to blacks as such, but are characteristic of a caste system. They found that lower-class parents are generally more casual, inconsistent, and authoritarian, and resort to more harsh, corporal forms of punishment.

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2 Bender, op. cit., p. 226.

Dai, studying problems of personality development in black children, and Deutsch, in a study of the contributions of social, personality, and racial factors to school retardation in minority-group children, confirmed their findings that lower-class black families are more apt to be broken, fathers are more frequently absent, and a matriarchal and negative family atmosphere more commonly prevails.\(^1\) Sclare reports that mother or mother-surrogate tends to be infantilizing and overprotective towards the children. While the child receives maximal gratification at the oral phase of development, he is usually subjected to prohibitive, demanding or threatening attitudes at the anal and phallic levels of development.\(^2\)

Directly related to family structure is the problem of masculine identification. The black man, according to evidence presented by Kardiner and Ovesey, and also by Frazier, has a significant problem in securing and maintaining a masculine identification, not only because of the structure of his family, but also because of the emasculating pressure of the white society, against which effective retaliation is impossible.\(^3\) This emasculation may begin with

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\(^3\) Kardiner and Ovesey, op. cit., p. 204.
the little boy's awareness that his father and father-
surrogates are vulnerable in relation to white males.
Recognition of discrimination on the basis of color and
of the differences in power and prestige between the black
and white groups has been found in children at four or five
years old.

The individual problem arising around masculinity
has been stressed by a white psychoanalyst, Helen McLean,
who states:

The dilemma for the Negro male is as follows:
If he accepts his second class position, he is
filled with self-hate, because of the insult
to his deepest feeling of masculine strength;
if he identifies with white men and becomes
the hated and powerful man, he must renounce
his ties with his own people. . . and the
majority of white men will punish him for his
presumption in acting as if he were like them.

A color-caste system allocates more privileges and
prestige to white people than to black people. It is under-
standable why many non-whites would prefer to be white.
The unattainable wish to be white, which to an important
degree is a response to environmental reality, can be a
source of almost insoluble conflict. This wish has been
conceptualized by Kennedy as "hostile ego ideal."

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According to Kennedy, it is vital for the child to see his parents as capable of his delegated omnipotence; from birth, the black child is unable to do this. He states:

On the one hand, the child reared in the Negro neighborhood develops the abstract, unrealistic, unattainable white ego ideal. On the other hand, in our culture the Negro child reared in a white community suffers the concrete development of the hostile, white ego ideal. How a healthy Negro ego ideal can be engendered from childhood in these circumstances is the unanswered psychoanalytic question.¹

Erik Erikson has postulated an early disruption of the continuity of the black child's identity as he becomes aware of his black identity. This entails a split identification with the dominant, superior, white group and the deprived, inferior black group.²

Walter Adams has made a significant observation about the way in which a caste-system may affect parent-child relations with serious consequences for the child's personality development. He finds the black child's identification with his parents to be "anxiety-laden," particularly in situations where there are heightened tensions in regard to race relations on the part of the parents resulting in insecurity and impotence in the face


of social reality. He concludes:

. . . the child might turn to the white group for identification as a defense against this anxiety. . . at some point he would inevitably encounter a final rejection. . .

The theory of personality development among blacks has been built up by social psychologists and by psychiatrists using a few cases studied clinically. Projective techniques have been used to test these theories and there is a fairly extensive body of literature in this field.

Using the Rorschach, Kardiner and Ovesey found that their subjects' main concern seemed to be handling the aggressive impulses they dare not express because of the realistic fear of retaliation from a hostile environment. Fear of retaliation was suggested by the prevalence of mutilation fantasies and also by the extraordinary frequency of "blood" responses. Seward explored the personalities of blacks from Southern and Northern backgrounds, and discovered that hostility and deep anxieties again appear in mutilated fantasies concerning various anatomical structures. Of these, he found the most interesting was the neck, in view of the lynching terror that must be a conscious element in every black American.

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The personality patterns and defense mechanisms reflected on the Rorschach in the Kardiner and Ovesey study showed that black subjects tended to rely on denial for the control of anxiety. On projection of conflict over social sex roles, the male subjects tended to see the female figures as masculine and authoritative, and they expressed attitudes of mistrust, hostility, and resentful dependency on them. The women in their turn perceived men as irresponsible and exploitative.¹

Mussen studied differences between the TAT responses of black and white boys and found that black children's TAT fantasies point to a stronger mother role and revealed less feeling of maternal rejection. Difficulties with interpersonal relationships were indicated by the comparatively few expressions of friendly, respectful, and kindly attitudes toward others. Despite the hostile attacks from the environment, the aggression on the part of blacks found milder forms of expression than in the case of comparable white children.²

Powdermaker, in an article entitled, "The Channeling of Negro Aggression by the Cultural Process," analyzes the method by which the seemingly passive blacks express their aggressive hostilities.³ The black man's problem in

¹ Kardiner and Ovesey, op. cit., p. 337.
² P. H. Mussen, "Differences Between the TAT Responses of Negro and White Boys," in Mental Health and Segregation, ed. by Martin M. Grossack (New York: Springer, 1963), p. 120.
expressing hostile wishes particularly against whites, has been regarded by Kardiner and Ovesey and later by Bertram Karon as the basis of self-hatred. Kardiner and Ovesey interpreted much of the behavior of their subjects as reflecting efforts to deny low self-esteem and reactive aggressive impulses against their own fellows as well as against the white population. Dollard, in contrast, related this hypothesis to identification with the powerful white group: introjected white attitudes result in self-hatred; reality prohibits the achievement of the state of being white, and the black's reactive aim-inhibited hostility, utilizing the introjected attitudes, is then directed against himself. 2

Summary.--The weight of the research evidence supports the neo-Freudian position as ably stated by Opler and Singer in an article on, "Ethnic Differences in Behavior and Psychopathology." They conclude:

There are definite cultural differences in psychogenic and psychodynamic patterns. A given culture favors certain stress systems and sanctions given styles of emotional expressions. 3


2 Dollard has regarded the violence within black groups, directed against each other, as a consequence of their inability to be freely aggressive against a white majority. John Dollard, et al., Frustration and Aggression (New Haven, Conn.: Yale University Press, 1939), p. 23.

Blacks are a racial minority who have been forced into a subordinate caste position that constitutes a special kind of "stress system." The minority subculture like that of the majority is stratified by social class and not only are certain "styles of emotional expression" sanctioned in relations between black and white people, but also within specific social classes. There is general agreement among social scientists and members of the medical profession that the impact of the caste-class "stress system," not biological inheritance, is responsible for these statistical differences. This survey of literature has attempted to integrate a wide range of research findings on certain significant problems: (1) the black basic personality; (2) the implications of caste and class in black family interaction; (3) the problem of masculine identity, and (4) general psychological reactions to the caste-class stress system.

The analysis of the nine cases in this thesis involves black children who are emotionally disturbed. A broad framework for understanding is available in the literature. Detailed research data on therapeutic work with emotionally disturbed black children is, however, sparse. In a 187-item bibliography, Grossaek presents only three such items, although many references on normal children are listed. Because there is so little published data of this type it is hoped that this thesis will make some contribution toward the widening of knowledge in this area of research.
CHAPTER III

NINE EMOTIONALLY DISTURBED BLACK CHILDREN

The Hospital Setting.—This thesis is concerned with the way in which an institution, Eastern Pennsylvania Psychiatric Institute, is attempting to deal with some of the problems in mental health in an Eastern State. The purpose of this thesis was to study the impact of this institution upon nine black children who were referred there for treatment.

The Children's Unit of Eastern Pennsylvania Psychiatric Institute is a twenty-six bed residential unit, and has outpatient facilities for treatment of emotionally disturbed children and their families. The institute was established by an act of the legislature of the Commonwealth of Pennsylvania and was dedicated on May 16, 1956, to the purpose of research, training, and treatment in the field of mental health. In addition to the children's unit, the institute has an adult residential unit, adult outpatient clinic, department of clinical research, and a department for research in the basic sciences related to mental health.
An integral part of the program is the training of personnel in many disciplines: residencies in child psychiatry, traineeships in psychology, and field placements for social work students. In addition to the above opportunities, an inservice training program is provided for child care and nursing personnel who work with the children in the residential units. Other team members include teachers and art therapists.

The staff's racial composition is mixed with a preponderance of the blacks employed as child care workers and teachers. During the researcher's fieldwork placement only one black psychiatrist and one social work student on the professional staff. Given America's racially based system of caste and class, and its general effect on the structuring of most institutions, it is to be expected that a greater percentage of the professionals and residents would be white.

The children's unit is engaged in the study of many approaches to the problems of emotional disturbances in children and their families and the methods of treatment for these difficulties. In the outpatient clinic children are seen for treatment while still living at home and attending their regular schools. Outpatient children with severe learning difficulties may attend school at the institute in the Day Treatment program.

The aim of the Day Treatment program is to teach seriously disturbed children appropriate modes of social
adjustment in hopes of sustaining them in their homes and in active community life as long as possible. There is an extensive treatment program including individual and group psychotherapy for the patients and their parents.

There is also an inpatient unit for more seriously disturbed children who require close supervision and who must be given residential treatment. The selection of patients is based on adaptability to the children already in residence and also on suitability for research and training programs that are in progress.

Children in these two programs receive individual psychotherapy, group therapy, art therapy, occupational therapy, dance and music therapy, as well as individual formal education from the Institute's schools.

Children are referred from schools, various social agencies, and from private medical practitioners. The Institute works closely with pediatricians, social agencies, and other professional groups working in this area. In general, it is the most intensive attempt made in this community to help children who are seriously disturbed, emotionally and mentally.

Subjects.---Permission to pursue this research was granted by the director of EPPI social service department. Contact was subsequently made with some of the teachers, psychiatrists, and art therapists to discuss the purpose of the study, and to seek for suggestions of possible
subjects who, insofar as they knew, had come from unstable home environments, showed striking racial and sexual identification problems, and had a poor self-image. Following this, the researcher read the case records on black youths who were or had been in treatment, and using a purposive sampling technique finally selected the nine cases.

The subjects for this exploratory study included 5 girls and 4 boys in treatment at EPPI. Two boys and 1 girl were inpatients, and 4 girls and 2 boys were outpatients. They were thoroughly evaluated and diagnosed before admittance to the Institute for treatment of their emotional disorders. The subjects were from various community areas within Philadelphia. They ranged in age from 7 to 15 years.

The criteria used for the selection of cases were:
(1) ethnicity, that is, only black children were selected;
(2) sufficiency of data available; (3) socio-economic status of parents; (4) suggestions of staff who had worked with a specific child or parent.

The study utilized two methodological strategies:
(1) the use of case records, and (2) direct observation. The case records maintained by the agency contain information regarding sex, age, educational achievement, reasons for referral, as well as a detailed account of the patient's developmental history, psychological testing, summaries of the therapists' treatment, social history of parents, and summaries of the psychiatric social workers' treatment of parents. In utilizing direct observation, the investigator
initiated contact with the patients, in a limited way, by observing their activity for five months. They were viewed in activity rooms and on the playground, and lunch was eaten with them twice each week. There was not, however, any opportunity to establish intimate contact with four of the outpatient children, although considerable rapport was established with some of their teachers and some child-care workers. Valuable data resulted from these contacts, given the wide ranging experiences most of the workers and teachers have had with these children.

**The Sample of Cases.**—The 9 cases selected for study include 5 girls and 4 boys. Three of the cases were in the latency period of development and the other 6 were in the early stages of puberty and adolescence. Two of the boys had been under treatment at EPPI for over 5 years, but none of the others had been in treatment for more than 4 years. In 1 case, treatment had been terminated at the end of a year and a half. The table on the following page presents some basic facts about the 9 cases.

The first 3 cases include 2 boys and 1 girl in the pre-adolescent stage of development. All 3 cases presented show behavior problems, the girl at school, and the 2 boys in the foster homes where they lived. Cases 1 and 3 involve children from very disorganized homes. Case 2 is from a family in which the mother is white and father black. Among the 6 adolescent cases are 2 girls and 1 boy with learning difficulties and 2 girls and 1 boy with behavior problems.
TABLE 2
PRELIMINARY DESCRIPTION OF THE CASES

<table>
<thead>
<tr>
<th>Case</th>
<th>Sex</th>
<th>Age</th>
<th>Age When Admitted</th>
<th>Years At EPPI</th>
<th>Developmental Stages</th>
<th>Reasons for Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Amazon</td>
<td>F</td>
<td>8</td>
<td>6</td>
<td>2</td>
<td>Latency</td>
<td>Sexual aggressive behavior in school and at home</td>
</tr>
<tr>
<td>2. Paul</td>
<td>M</td>
<td>8</td>
<td>6</td>
<td>2</td>
<td>Latency</td>
<td>Behavioral problem in a series of foster homes</td>
</tr>
<tr>
<td>3. John</td>
<td>M</td>
<td>11</td>
<td>9</td>
<td>2</td>
<td>Latency</td>
<td>Problem in foster home, fearful of adults, sibling rivalry, and enuresis</td>
</tr>
<tr>
<td>4. June</td>
<td>F</td>
<td>12</td>
<td>10</td>
<td>1½</td>
<td>Pre-Adolescent</td>
<td>Underachiever in school, hyperactivity, somatic complaints, enuresis</td>
</tr>
<tr>
<td>5. Tom</td>
<td>M</td>
<td>13</td>
<td>7</td>
<td>6</td>
<td>Adolescent</td>
<td>Unresponsiveness, poor speech, withdrawal behavior at home, in nursery school</td>
</tr>
<tr>
<td>6. Joe</td>
<td>M</td>
<td>13</td>
<td>5</td>
<td>8</td>
<td>Adolescent</td>
<td>Reading problem in school</td>
</tr>
<tr>
<td>7. Windy</td>
<td>F</td>
<td>15</td>
<td>13</td>
<td>2</td>
<td>Adolescent</td>
<td>Immobility of hand after slight injury, hysterical symptoms</td>
</tr>
<tr>
<td>8. Gwen</td>
<td>F</td>
<td>15</td>
<td>13</td>
<td>2</td>
<td>Adolescent</td>
<td>Learning problem in public school, depressed, unhappy and apprehensive</td>
</tr>
<tr>
<td>9. Wilma</td>
<td>F</td>
<td>15</td>
<td>11</td>
<td>4</td>
<td>Adolescent</td>
<td>Learning and discipline problems in public school</td>
</tr>
</tbody>
</table>
Summary of Findings for All Cases.—Having examined the individual cases of nine children undergoing therapy, with a body of neo-Freudian theory as a frame of reference, they are now viewed collectively with the aim of finding common factors and significant variations. Lack of an adequate functioning father is a constant in all cases, and Table 3 presents data for the discussion of the socio-economic status of the mothers.

Only 2 mothers in this group finished high school, but all had some high school education. Their occupations reflect the limited opportunities for the general population of black Americans in the caste system. Most of the mothers in the sample were employed in menial jobs, factory work, or minor clerical jobs. Four of the mothers were receiving public assistance. With one exception, they had married men in similar low status, poorly paid jobs. Only one mother, however, displays those behavioral traits and values associated with the disorganized sector of the black lower-class. Not enough statistical data are available to class-type these mothers according to generally used methods. Qualitative data are adequate, however, for making a less rigorous assessment. Data on family background suggest that the most disorganized mother has been downward mobile into the lower-class from a family in which the father owned his own small business; her mother died when she was five.

### Table 3

**Occupations and Educational Levels of Parents and Maternal Grandparents**

<table>
<thead>
<tr>
<th></th>
<th>Mother Education</th>
<th>Mother Occupations</th>
<th>Father Education</th>
<th>Father Occupations</th>
<th>Maternal Grandfather Education</th>
<th>Maternal Grandfather Occupations</th>
<th>Maternal Grandmother Education</th>
<th>Maternal Grandmother Occupations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amazon</td>
<td>9</td>
<td>AIDC</td>
<td>Unk</td>
<td>odd jobs, unknown</td>
<td>Unk</td>
<td>owner of barber shop</td>
<td>Unk</td>
<td>died when mother was 5</td>
</tr>
<tr>
<td>Paul</td>
<td>12</td>
<td>clerk typist</td>
<td>Unk</td>
<td>factory work</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>died when mother was 5</td>
</tr>
<tr>
<td>John</td>
<td>11</td>
<td>hospital aide, five and dime, chambermaid APDC</td>
<td>Unk</td>
<td>&quot;drifter&quot; unemployed</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk, died when mother was young</td>
</tr>
<tr>
<td>June</td>
<td>11</td>
<td>domestic, hospital, kitchen, APDC</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk, NGA deserted daughter</td>
</tr>
<tr>
<td>Tom</td>
<td>11</td>
<td>Domestic, APDC</td>
<td>11</td>
<td>presser, unemployed</td>
<td>Unk</td>
<td>Unk, died mother was 7</td>
<td>Unk</td>
<td>died when mother was 10</td>
</tr>
<tr>
<td>Joe</td>
<td>10</td>
<td>hairdresser school crossing guard, nurses aide</td>
<td>Unk</td>
<td>contractor plastering self-employed</td>
<td>Unk</td>
<td>Railroad watchman, janitor</td>
<td>Unk</td>
<td>Unk</td>
</tr>
<tr>
<td>Windy</td>
<td>1 yr Coi</td>
<td>mail order clerk, sales domestic, practical nurse</td>
<td>Unk</td>
<td>stevedore, huckster, janitor</td>
<td>Unk</td>
<td>farmer</td>
<td>Unk</td>
<td>Unk</td>
</tr>
<tr>
<td>Gwen</td>
<td>10</td>
<td>housewife, poverty program aide</td>
<td>8</td>
<td>parking lot attendant</td>
<td>Unk</td>
<td>carpenter</td>
<td>Unk</td>
<td>Unk, separated when mother was 7</td>
</tr>
<tr>
<td>Wilma</td>
<td>3 yr Coi</td>
<td>hospital aide, school teacher</td>
<td>Unk</td>
<td>Unk</td>
<td>Unk</td>
<td>railroad worker</td>
<td>Unk</td>
<td>never worked</td>
</tr>
</tbody>
</table>

*AFDC: Aid to Families with Dependent Children*
This is one of the mothers now on public assistance. Another mother, now allegedly an alcoholic, also seems to have been downwardly mobile from a similar status level. Five of them, in behavior and aspiration, would probably meet the criteria for classification as Northern, urban, lower middle-class or upper lower-class. The two mothers with some college training came from stable lower middle-class homes and were able to raise their status slightly. That only one mother shows lower-lower traits may be due to an EPPI policy of selecting cases of parents who are well enough motivated and organized to cooperate with the agency regarding treatment for themselves. Six of the 9 mothers were socialized in families broken by death or separation before they were 10 years old, and this factor has probably influenced their subsequent adjustment. It is significant that the 3 children who present learning problems rather than emotional problems come from homes where the mothers have employment in relatively responsible jobs and came from rather stable lower middle-class families. This group of matrifocal families each has a mother at the head of it who accepts the widespread lower middle-class and lower-class norm of working to contribute toward the support of the family, but also expects the male to "do his

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1 Drake and Cayton, op. cit., p. 231.

part." Some of the mothers see a conflict between being a good mother and working while the children are very young, and express some guilt over the emotional disturbances of their children. Most of the mothers have "success values" for their children in the sense of wanting them to do well in school and to adjust well to teachers and other children, though we have no data on the aspiration goals they have for them.

It is a truism that "disturbed" parents are likely to have emotionally disturbed children. Table 4 presents a picture of the extent to which the children are in interaction with parents who themselves need psychiatric treatment. An examination of Table 4 suggests that in nearly all of the cases the children are more disturbed than their parents, but that the parents all exhibit mild personality disorders that have created "an environment of disturbed personalities" around their children. In some cases this is definitely related to their own unhappy experiences with men -- their fathers and their husbands -- as well as broken homes. Prognosis for successful therapy with children is closely related to effecting changes in parent-child interaction and this involves changes in parental attitude and behavior. EPPI tries to work with the parents where possible.

In addition to "an environment of disturbed personalities" generated by contact with their mothers, these children have also been subjected to extreme family instability. None
have had consistent and prolonged relations with a stable father figure. Table 5 presents a picture of the constant movement of these children from one socialization environment to another. In the case of June there have been 15 different placements, over half of them in foster homes or institutions. In the case of Paul there have been five foster homes and institutional situations. For three cases residence with relatives has been the rule. In only one case is continuous residence with the mother and father evident, and significantly, this child has a behavior problem related to aggression and an unresolved oedipal conflict.

The theory underlying the explanation and treatment of emotional disturbance involves, in the final analysis, some type of interpersonal psychology of a symbolic interactionist type — even orthodox Freudian formulations. It is through interaction with two adults — a mother and a father — that the child develops a personality and the development and resolution of the Oedipal and Electra situations involving cathexis toward social objects from whom certain kinds of responses are desired and expected. Toilet training, feeding procedures, and the giving and receiving of affection and rewards and punishments involve structured father-child and mother-child relations, and continuous training in the control and redirection of id impulses generally and libidinal drives in particular. It is generally agreed that continuity and consistency of interaction between mother and child provide the healthiest
<table>
<thead>
<tr>
<th>Case</th>
<th>Age</th>
<th>Sex</th>
<th>Diagnosis of Child</th>
<th>Diagnosis of Father</th>
<th>Diagnosis of Mother</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amazon</td>
<td>8</td>
<td>F</td>
<td>Adjustment Reaction of Childhood with Conduct Disturbance</td>
<td>Data not Available</td>
<td>Passive Aggressive Personality, Passive Dependent type</td>
</tr>
<tr>
<td>Paul</td>
<td>8</td>
<td>M</td>
<td>Passive Aggressive personality, Passive type with Depressive features</td>
<td>Passive Aggressive Personality</td>
<td>Inadequate Personality</td>
</tr>
<tr>
<td>John</td>
<td>11</td>
<td>M</td>
<td>Anxiety Reaction</td>
<td>Passive Aggressive Personality</td>
<td>Passive Aggressive Personality</td>
</tr>
<tr>
<td>June</td>
<td>12</td>
<td>F</td>
<td>Psychoneurotic Reaction other, with depressive obsessive features</td>
<td>Passive Aggressive Personality</td>
<td>Passive Aggressive Personality</td>
</tr>
<tr>
<td>Tom</td>
<td>13</td>
<td>M</td>
<td>Schizophrenic Reaction Childhood type, borderline Autistic Mild</td>
<td>Personality Trait Disturbance; Passive Aggressive, Passive Dependent type</td>
<td>Personality Pattern Disturbance; Inadequate Personality, Passive Aggressive type, Depressive features</td>
</tr>
<tr>
<td>Joe</td>
<td>13</td>
<td>M</td>
<td>Psychoneurotic Reaction, other, personality Disorder, Dependent</td>
<td>Passive Aggressive Personality</td>
<td>Passive Aggressive Personality, Passive Dependent type</td>
</tr>
<tr>
<td>Windy</td>
<td>15</td>
<td>F</td>
<td>Psychoneurotic Reaction, other with Hysterical depressive and Compulsive features</td>
<td>Passive Aggressive Personality, Aggressive type</td>
<td>Passive Aggressive Personality, Passive type</td>
</tr>
<tr>
<td>Gwen</td>
<td>15</td>
<td>F</td>
<td>Psychoneurotic Reaction, mixed type with Hysterical and Depressive features (Learning problem)</td>
<td>Passive Aggressive Personality</td>
<td>Personality Trait Disturbance, other</td>
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<tr>
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<td>15</td>
<td>F</td>
<td>Passive Aggressive Personality with possibility of Organicity</td>
<td>Data not Available</td>
<td>Psychoneurotic Reaction, other with Paranoid features</td>
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<tr>
<td>Case</td>
<td>Sex</td>
<td>Age When Parents Separated</td>
<td>No. of Times Child Lived With Mother Alone</td>
<td>No. of Times sent to Live With Maternal Relatives</td>
<td>No. of Times sent to Live With Paternal Relatives</td>
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<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Amazon</td>
<td>F</td>
<td>Illegitimate</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Paul</td>
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<tr>
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<td>M</td>
<td>6</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
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<td>F</td>
<td>2</td>
<td>5</td>
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</tr>
<tr>
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<td>M</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Joe</td>
<td>M</td>
<td>6 mos</td>
<td>3</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
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<td>F</td>
<td>10</td>
<td>1</td>
<td>0</td>
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<tr>
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<td>F</td>
<td>Parents Separated 10 Times</td>
<td>3</td>
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<td>1</td>
</tr>
<tr>
<td>Wilma</td>
<td>F</td>
<td>4</td>
<td>2</td>
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situation during the early years. In all societies, the presence of a male in the household with whom children can interact is necessary for adequate socialization, though in some societies it need not be the father.¹

Most of the cases examined involved a high degree of instability in family structure during the first six years of the life of the children who eventually needed therapy. The mothers are generally away at work during the day; fathers and mothers separating so that father becomes an occasional visitor rather than constantly accessible object of face-to-face interaction. And in some cases, no mother at all -- only mother-surrogates. All of these children, with the possible exception of one, Paul, have been forced to interact with mothers who to a greater or lesser degree, have some type of personality disturbance. For those with organic defects or perinatal traumatic experiences, such situations might be expected to precipitate emotional upsets. Even in the absence of these types of predisposing factors, an environment of disturbed personalities and unstable family relations place a severe strain on the developing child. Since the focus of this thesis is upon the color-caste factor, it might be asked, "To what extent has minority status been operative in intensifying emotional disorders in these families? To what extent is it a factor in the therapeutic situation?"

The case records do not contain any material on the extent to which members of these families have been the victims of direct, overt, racial discrimination, or what their reaction to these episodes has been. For the parental and grandparental generation, however, there is no doubt that, like all other black Americans they have had such experiences and we would be justified in assuming that they have developed those types of personality traits and psycho-dynamic mechanisms described in the literature as characteristic of the more underprivileged and not too well educated blacks -- lowered self-esteem, self-hatred, and repressed and displaced hostility and rage. The passive-aggressive personalities found among these parents very probably have a racial component among the causative factors, except for the one white mother.

The disrupted families also reflect the "victimization" that flows from the American caste-system. The types of jobs held by the fathers, the family histories of conflict, separation and desertion are vivid cases illustrative of a well documented situation of low income levels among blacks. The intervention of maternal relatives and the role of the mothers in these families are traits generally associated with the "culture of poverty" among American blacks, and is widespread among those upwardly mobile into the middle-class, especially where the mother is dissatisfied with the type of husband she has.
Thus, from the outset, and even before they ever face race prejudice directly, the "life chances" of the children with black mothers have been affected by the caste-class system. They begin life as "victims" because of what that system has done to their parents. During the preschool years, particularly, they were affected by the stresses and strains that system imposed on their parents. For the children in the sample who have been in elementary school for only one or two years their caste disabilities may have affected them in either of two ways. If they entered ghetto schools, they began life handicapped by the notoriously substandard facilities and lack of motivation found in such schools, plus exposure to peers whose influence is not conducive to high achievement. If they entered integrated schools they faced competition with white peers that accentuated their race consciousness. Six of the nine children have had public school experience, one has had parochial school experience, and two have had all their schooling at EPPI. Seven of the nine children are now in school at the Institute. All are expected to eventually find a place in some other educational institution. They will be leaving the supportive, protective, caste-free educational situation at EPPI.

The record of improvement is impressive, but only two of the cases are no longer under the care of EPPI. The goal of treatment is to strengthen the ego structure of each child so that the supportive aid of EPPI will not be
needed. Yet, problems related primarily to the "environment" of disturbed personalities and to membership in broken and unstable families will have been "worked through" just at the point when these young people will be confronting the direct impact of the caste-class system in public school, in their first employment, and in dating situations. The implications of this next stage in their adjustment to reality will be discussed in the following section.

**Interpretation of Collective Findings.**—The black child undergoing therapy poses special problems and these cases highlight some of them. Within the psychoanalytic movement specialists in the analysis and treatment of children have emerged, among whom Anna Freud and Melanie Klein have made substantial contributions to the literature in the field. They have demonstrated the possibility of curing very disturbed children of deep-seated psychological ailments. The situational factors with which they had to deal involving family, peer group and various kinds of educational institutions sometimes included complications related to social class, but the body of experience where color-caste was also a factor has been very limited. The

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closest approximation to problems arising from being black examined in the psychoanalytic literature deals with Jewish children; but dealing with a child of a white minority does not pose the kind of intractable problems faced when highly visible differences in color and hair features are involved.¹ Erikson, Kennedy, and Kardiner have been deeply concerned with this problem, but the literature is not extensive.²

The staff at EPPI were, of course, aware that the black child presents special problems. In one case a therapist himself raised the question of whether or not it would be best for a child not to identify with a white psychiatrist. The art therapists were especially sensitive to color identification problems. On the whole, however, the records show that concern for the racial factor was only implicit. Whether or not racial complications enter directly into the lives of these children, all have been indirectly affected by the caste-class system.

In the United States, situational components becomes particularly important as soon as the child can understand adult comments, and crucial when he begins to interact with peers. If a father does not perform the roles expected of


a male family head he will be subjected to criticism by his wife, his in-laws, and others in his wife's family circle. Thus, from an early age, children in such a family hear the father assailed as worthless, lazy, immoral, and cruel. Peers can also be very cruel in their remarks about another child's "old man" or the absence of "the old man" from the scene. If the mother lives with another man who is not the father of the child, overt conflict between stepfather and step-children is likely, as well as unexpressed shame and overt hostility. Within the black subculture these emotional conflicts are intensified by the widespread tendency to phrase hostility and antagonism toward delinquent males in racial terms — "that no-good nigger" or "that black rascal" — and by the close juxtaposition, often within a single family of some relatives with "Puritan" values and other with hedonistic values. The stereotype widespread in the general culture regarding black family life may be incorporated early and a child torn between affection for parents and a tendency to be critical of their behavior in either class or racial terms. The case records did not show where the therapists probe for material of this sort.

The case of Paul, who has a black father and white mother, suggests a type of problem that increasing numbers of black youth may have to face during the next decade. The identity crisis will probably be represented in the emotionally disturbed group to a greater degree than chance
expectation.  

Three of these cases were pre-pubescent children with behavior problems. In two of them, caste and class are clearly evident as factors contributing toward emotional disturbances. In the case of Amazon, the caste factor has been indirect. Her mother is a member of the disorganized black lower-class whose very existence and patterns of life are a result of victimization flowing from economic discrimination, overcrowded housing, unemployment, and the general social neglect experienced in the black ghetto. Amazon, raped early in life by a relative, overstimulated by adult sexuality everywhere around her, sexual acting out had become a pattern that eventual made it impossible for her to remain in an ordinary peer group at home and at school. The specific form of behavior that her emotional disturbance took is an exaggerated replica of behavior in the world she knows, and of her mother's behavior.

In the case of Paul, caste rather than class is the dominant factor in his social situation. His mother broke a basic caste taboo: an illegitimate child by a black man. The father has exhibited the kind of behavior that black males frequently show in such situations -- ambivalence toward the white partner and retreat from a punishing situation. Paul has lived his life so far in a succession of foster homes and institutions, some white and some black.

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As might be expected the crux of Paul's problem revolves around racial identification. Is he to be a white boy or a black boy? America, unlike some other countries, does not provide an in-between status. Paul is accepted at EPPI and has reacted positively to this new, warm, supportive environment. But the adjustment is precarious. Many of the black staff members are determined to try to see that Paul accepts himself as a black boy. But does this not mean possible conflict over a symbolic rejection of his white mother? Paul has just begun to confront the complex problems posed by a caste system for a "half caste."

John, with an absent father, but an upward mobile lower-class mother who died when he was six years old, has had a number of foster home experiences. Data are not available for analyzing the direct impact of the caste factor on John, but he is subject to personal conflicts induced by conflicts of class norms and values.

Three of the adolescent cases are behavior problems. In two of them, the problem of racial identification is apparent. In the case of Tom, the extent to which color-caste has been a factor in intensifying the emotional disturbance cannot be estimated. The therapy process itself, however, has intensified the problem for Tom, for a white man has become what he himself calls his "hero" and he has

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expressed the wish to be white.

Windy has a mother who is black, but who obviously wishes she were something else and who has persistently retained social ties with white people. Windy is moving into adolescence with two possible reference groups, lower middle-class black society toward which her mother had begun to move by going as far as one year in college and the sober, puritanical, sectarian world of the white Mennonites whose church they attend.

June has spent most of her life in an institutional environment. We can only speculate on the extent to which prolonged contact with white nuns has generated problems of racial and feminine identity.

The other three adolescents were referred to EPPI for learning problems, not behavior problems. The mother of one of the girls, Gwen, is the most highly educated mother in the group of cases and has social status in her job as a substitute school teacher. Wilma may be paying the price for her mother's ambitions in terms of being an object of rejection because she is not as "smart" as her mother wants her to be.

These girls are at critical stages in their development and are subject to whatever conflicts come from having lower middle-class mothers, but absent or inadequate fathers. As they solve their own sexual problems, will they do so while holding black males in contempt? And, if so, will their egos be strong enough to preclude emotional
breakdowns even if they do not find love and marital happiness? Many black middle-class girls face special mental health problems. Frustrated potentially upward mobile girls who have learning difficulties face even more severe problems.

Joe is a highly significant case, for he has moved to solve the emotional problem beneath his intellectual ones, in his own way. A procedure disapproved of by both his mother and the EPPI staff. Joe temporarily drifted into the ranks of the Black Muslims. Either of two things can happen to Joe. He can reject intellectual achievement as a goal using race as an excuse for his poor achievement. Or, he might follow the route of those young people who become fired up with ambition to succeed. EPPI has terminated its relations with Joe. He may not solve his learning problem, but he may solve his emotional problems by total commitment to a social movement, racial and religious in character.

These cases suggest that, despite all of the stereotypes about free, unrestrained, direct, simple and uninhibited attitudes toward sex within the black subculture, such attitudes are not always taught during the socialization process, even by parents whose own behavior is unconventional.

by middle-class standards. It suggests that the whole stereotype may be a myth, that the freer use of four-letter words, the references to sex in "soul music," the "hot" movements in dancing, do not necessarily mean an absence of conflicts regarding what is proper sexual behavior for children.

The literature stresses the "weak" position of the black male as a result of the heavy matrifocal bias in lower-middle-class and lower-class families. This is accentuated by his inability to secure adequate and regular employment. Placed, thus, on the defensive, a high proportion of males displace their anxiety and hostility upon their wives and children, become passive, or retreat into the excessive use of alcohol. Much of the data on the fathers in this sample illustrates this type of behavior.

Mention was made in the first chapter of this thesis of the myths and stereotypes about the inherent intellectual inferiority of blacks with the observation that such ideas have no scientific respectability. Yet, a controversy has been revived during the past decade over whether or not persisting differences in I.Q.'s between racial and ethnic groups can be accounted for by non-biological factors. Earlier explanations emphasized social and cultural differences that affected the learning process and insisted, on the basis of empirical evidence, that an
individual's I.Q. was not unalterably fixed. More recent research has stressed the emotional state of the individual as an additional, and often crucial factor, in performance on intelligence tests and for general academic performance. Work with these nine cases corroborates the evidence that I.Q. is affected by emotional states and that scores can be improved. Future research might give some attention to the question of whether or not emotions directly connected with race sometimes play a decisive role in intellectual retardation.

As Thomas Pettigrew has pointed out -- the neurotic, the insane, the criminal, and the seriously ill -- are an index to the degree of social disorganization resulting from the victimization of blacks in American society. High statistical rates are like the tip of an iceberg. They call attention to a much larger object down below. Our nine cases are an index to widespread emotional problems among blacks which do not ever come to the attention of therapists, either because people "learn to live with" those who have slightly aberrant behavior or do not know there are institutions available, or for various reasons cannot get help.

The therapists have a responsibility to try to prepare these nine young people to function in a caste-class society as well as they can. There are psychiatrists, however, who suggest that the solution to the emotional problems of many black youths will come another way -- by
involvement in social movements oriented toward changing the structure of black-white relations in America. One case indicates this type of adjustment, that of Joe.
CHAPTER IV

SUMMARY AND CONCLUSIONS

According to the literature, the incidence of personal and social disorganization in America is greater for blacks than it is for whites. There exists an extensive body of literature suggesting that this results from the stresses and strains experienced by black Americans within our system of caste and class and for which segregation and discrimination are distinguishing characteristics.

Blacks in America have a special mental health problem different from that shared by all people within our society. As they move from infancy to maturity, blacks face situations that place a strain upon the operation of the normal adjustment processes, e.g., sublimation, displacement and reaction formation as well as the other defense mechanisms. Blacks are often compelled to express their reactions in exaggerated form, or to utilize certain types of adjustment more frequently and more extensively than whites, and in a way that leads to personality distortion, if not to mass emotional disturbance. The concept
of "normality" itself becomes qualified, for what might be paranoia for the white might well be realistic suspicion for the black.

A certain proportion of all children in American society are emotionally disturbed and in need of therapy. It is highly probable that a greater proportion of black than white children fall into this category, at least a neo-Freudian theory would lead us to expect that this is true. Only the most severely disturbed among them, however, are referred for treatment, and it is from that group that our sample of nine cases was drawn.

In dealing with the personal disorders of very young children, only one type of social structure is relevant in studying the socio-cultural factor in the development process -- the family or its institutional substitute. For black children it is this structure that mediates the caste-situation. Directly and indirectly the black family structure has been shaped by slavery and the post-slavery caste system. Matrifocal families in massive numbers have been created among the lowest socio-economic levels, with the consequent weakening of male roles and a complicating of the problem of resolving the oedipal conflict. The case of Amazon lays bare the dynamic that characterizes thousands of such black families and which leads to disorders such as those she manifests. Hers is an extreme case that was referred for therapy. There are
others like her who never see a psychiatrist and who grow up to help maintain what Moynihan calls "the tangle of pathology" within the ghettos -- in hostile and violent relations with males, sometime settling for a life as prostitutes, and occasionally getting "saved" by joining a holiness church or a cult and repudiating sex from a sense of depression and guilt.

Some of our cases are children with upwardly mobile mothers who were reared in families of "Black Puritans," straining ever so hard to "escape" from lower-classness that they overemphasized sexual repression and male authoritarianism, thereby producing the mothers of children in our sample who "take out" the hostility related to their own domineering father on the husbands that they have chosen, usually from below themselves in status. Thus, they create new families in which tension is rampant and where the separation is high, resulting in lower middle-class matrifocal families. And they feel guilty because there is no father present and they cannot give as much time and attention to their children as they feel they should.

The pre-adolescent children in the sample have, up to this point in their lives, experienced the caste factor only indirectly in terms of the kinds of family situations they were socialized in -- these being broken homes whose malformation can be traced to the impact on them of the
caste system. Later they will face segregation and discrimination directly. Even this early, however, problems of racial identity are evident, exemplified in its most extreme form in the case of Paul, whose father was black and whose mother was white.

The adolescents have developed an awareness of what it means to be a black person in America, if not from personal experience, at least from newspapers, magazines, television, the movies, radio, and discussions by families and peers. Our data do not reveal a preoccupation with race and the therapists did not probe for repressed material of this sort. Enough came to the surface, however, in art therapy and play therapy and in interviews to corroborate the theory of Erikson and others, that black children face a racial identity crisis as well as a more generalized self-identity crisis. In the case of one girl, it was complicated by the occasional participation of herself and her family in a predominantly white church.

The question most pertinent to this thesis is: How does the caste factor enter into the process of therapy? All neo-Freudian therapists recognize the importance of this factor. There is little in the literature, however, suggesting how it might best be treated. The staff at EPHI were aware of it too, but it is significant that neither in diagnostic interviews or in therapeutic work (except in the case of the boy who became interested in the Black
Muslims) was it something that was pursued in depth. There was no pursuing of "hints" by therapists to encourage the patients to "unload" when they spoke of race to ascertain just how deeply they felt about racial matters. Does Paul resent the fact that his father is black? Do others see the delinquencies of their fathers in racial terms?

Do the slow learners associate the myth that blacks don't learn as easily as whites to their own inability to learn at appropriate age-grade levels? Do any use race as an excuse for failure? Is there evidence of lower self-esteem because of race? The therapists may have been reluctant to raise these questions for varied reasons, but they cannot be minimized if we are to deal quickly and satisfactorily with the mental health of blacks in America.

This leads to the final point. In some cases, there was a feeling that for boys a black male therapist was preferable to a white one. Is it possible that transference to a white male therapist raises more problems than it solves? Perhaps, on the frontiers of research, some controlled experimentation is needed in this area just as students of research have studied the differential responses obtained when interviewers of black are blacks than when they are whites. Theory would lead us to expect a differential response in therapy. Obviously, this is not possible until there is a greater number of black therapists available.
Our cases support the contention that both caste and class factors are dynamics in the cause and the cure of emotional disturbances among black children.
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