

## Suggestive Data Concerning the Etiology of Behavior Problems

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The Laboratory began the investigation into the etiology of behavior problems in 1932 by selecting twenty-five of the most maladjusted boys at Mooseheart and matching this group for age and sex with a selected group of the twenty-five most perfectly adjusted individuals in the community. These same children were re-investigated in 1936.

Very recently sixteen of the most maladjusted boys having been referred to the clinic for rather gross behavior difficulties, such as temper tantrums, pilfering, quarrelsomeness, exhibitionism, etc., were matched for age and sex with sixteen individuals considered as exemplary by teachers, matrons and supervisory officers. The age range is from 11 through 17 years for this group. While our group, as may be seen, was relatively small in number, it was carefully selected and matched. With the additional fact that the investigation stretches over a period of five years, we hope that we have arrived at some rather reliable and suggestive data.

The environmental factors surrounding the child during his residence at Mooseheart are the same for all children. The population may be considered as a typical cross-section of American children. They are of middle class parentage and by actual measurements are mentally and physically on par with the average American child. They are admitted to Mooseheart upon the death of the father, when pressing economic need is evident, and stay until high school graduation at an age of 18½.

Our two previous investigations disclosed that problem boys enter our community at a much earlier age than do the non-problem group. While 44% of the problem group had entered before 4 years of age, only 12% of the non-problem group had done so. We now find 69% of the problem group have entered Mooseheart before the age of 4, while this is not true for any in our non-problem group.

It has been the conclusion of many field investigations that the loss of the mother was a more serious factor in the production of behavior difficulties than was that of the father. At Mooseheart, all children have lost the father. While the mother in many cases resides at Mooseheart as an employee, she has no jurisdiction whatsoever over the school and home training of her own children.

The two previous Mooseheart investigations have indicated that while only 12% of the problem boys have their mothers living at Mooseheart, 28% of the non-problem group have their mothers in residence. The present study bears out this finding; it is to be noted that approximately the same ratios are found. While 19% of the problem boys' mothers reside at Mooseheart, 50% of the non-problem children's mothers are at Mooseheart. It would then appear that in this situation some other factor than direct maternal care and supervision appears to be influencing the result.

The occupational status of the fathers and the cause of the father's death do not serve to distinguish between the groups.<sup>1</sup> The nationality of the parents does not appear to be important in this connection with the exception of the fact that while 32% of the problem group is of mixed national parentage, only 8% of the non-problem group can be so considered. In a random sample of 300 children only 20.3% were of mixed national parentage.

Intelligence appears to be an all-important factor in adjusting the child to his environment. Using Terman's<sup>2</sup> classifications, we find that while only 25% of the behavior problem group is of average or above average intelligence, 62% of the non-problem group are inside this classification. Furthermore, 37% of the behavior problem group possess I. Q.'s of 79 or below, while none of the control group is as low as this. Seventy-five per cent of the problem group have I. Q.'s of 89 or below, as contrasted with 38% of the control group.

There does not appear to be any difference between the groups as regards the number of siblings. This may have a possible explanation in our situation, in the fact that children do not live in family groups after entrance to the institution, but rather in age and sex groups averaging about 16 to 20 in each individual hall.

Thurstone and Jenkins<sup>3</sup> found with a group of 101 children that the first-born were problem cases in a disproportionately high frequency. The two previous investigations as well as the present study indicate that there is actually a larger proportion of first-born non-problem children than of problem children. There are 13% first-born problem children and 31% first-born non-problem children. In an environment such as Mooseheart, where the child enters at an early age and remains for a number of years under similar home, educational and social conditions, the factor of order of birth appears to play a small rôle in the development of behavior disorders.

Since the child's school placement is of paramount importance in his ability to adjust, the Metropolitan Achievement Examination test scores were examined for possible differences in this regard between the groups. The actual school placement was checked against the Metropolitan general level of achievement. Each individual was then placed in one of three categories: at correct grade level, above grade level, below grade level. While 8% of the non-problem group are above grade level, 50% of the problem group fall within this category. Thirty per cent of the problem group are at correct level, as against 72% of the non-problem group. There are 20% in each group below grade level.

In checking the possible bearing of enuresis\* upon the problem of behavior disorders, no significant differences were found as regards the amount of behavior disorders as found in all children and that found among 33 actively enuretic boys and 10 actively enuretic girls. This is in agreement with the low correlations found by Ackerson and Highlander<sup>4</sup> between enuresis and the number of conduct and personality difficulties. There is no significant difference between the average ages of problem and non-problem male and female enuresis. It is perhaps interesting to note that both boy and girl non-problem enuretics spend more time at the hospital than do the problem cases, and that there is a significantly greater percentage of problem boys in the group who have ceased being enuretic, as contrasted with no such significant difference for the female cessation cases. It is

\* We find 8.71% of the total boy population enuretic, as contrasted with only 3.48% of the girls. Blatz<sup>5</sup> and others are of the opinion that sex differences are unreliable, since parents are reticent about reporting girls for treatment. In the present study, material is gathered by daily objective telephone solicitation and mothers do not reside in halls with their children.

possible that the explanation resides in the sympathetic attention afforded the enuretic girl, and possibly not given to the same extent to the male.

It is possible that the enuretic boy through social pressure, or some other factor, stops being enuretic, but adopts some other form of aggressive behavior capable of restoring his social prestige, such as lying, bullying, stealing, etc. Since the enuretic girl might not be subjected to these social pressures and ridicule to the same degree, she may not experience the need for developing these aggressive forms of behavior.

As regards hearing and speech difficulties in the growing child, Dr. Carrell of this Laboratory<sup>6</sup>, in his partly published Ph. D. thesis, found indications that such difficulties at times were associated with general behavior disorders.

It is popularly acceded that the time of menarche produces serious trauma in certain instances which are reflected in the subsequent behavior of the girl. The median menarcheal ages of 19 behavior problem girls does not differ significantly from the median menarcheal age found for the entire group of 68 cases. The behavior problem girls, too, did not differ significantly in the number of months they were removed from the time of the first menstruation when contrasted with the entire group.

### SUMMARY

Through investigation over a five-year period in the Mooseheart Laboratory on the same behavior problem child matched in age and sex with control groups, the following was found:

The father's occupation, cause of death, number of siblings, and order of birth did not serve to distinguish between the behavior problem and the non-behavior problem child.

Age on admission, the status of the mother, nationality of the parents, intelligence, placement in the school system were differentiating criteria for the two groups.

No significant differences are apparent as regards the amount of the behavior problems found in the general population and those found among actively enuretic children.

There is a significantly greater percentage of problem boys in the group who have ceased being enuretic, after having suffered from this ailment for a number of years.

There are no differences as regards age at menarche and the behavior disorders in girls.

The above summary conclusions are based upon a mass of hitherto unpublished data; specific investigations are now being prepared for publication.

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