This book will appeal directly to clinicians from all disciplines and to educators, but many readers will feel concern that in a study of this kind no mention has been made of Stott's valuable and timetested rating scales: a most eccentric if not perverse omission.

JOSEPH NEVILLE.

Troublesome Children. By D. H. STOTT. London: Tavistock Publications. 1966. Pp. 208. Price 32s.

Psychological studies in such diverse fields as education, juvenile crime, emotional maladjustment and sociology all owe a good deal to Professor Stott's lively and enquiring mind. In the early post-war years, when there was a dearth of "hard" objective research into juvenile crime, Stott sprang into the breach with his intriguing observations on psychodynamisms and social attitudes displayed by boys in Approved Schools. In his Bristol days he provided educators and clinicians with sensible and useful methods for detecting, rating and classifying emotional disorders in school children. His work on long-term ill effects in those children whose mothers had undergone stormy pregnancies was the target for a good deal of harsh criticism, both his method and his somewhat alarming conclusions being singled out for particularly bitter attacks; the present climate of informed opinion is much less inclined to treat Stott's views in such a way. He has helped, above all, to focus attention on the child who appears to be predisposed from his earliest years towards maladaptive behaviour, and in his present book Professor Stott is able to extend and develop this very important theme, that beneath a welter of environmental adverse stresses there may often exist a fundamental vulnerability of personality towards behaving in a manner which society finds intolerable: a basic inferiority which is significantly associated (contends the author) with organic or maturational handicaps. Although Stott officially disdains such an approach, the first part of his book, an anecdotal and retrospective study of 33 wayward Scottish school children, reveals him as an empiricist, commonsensical if prone at times to a somewhat blithe disregard for the significance of socio-economic "presses" acting upon children who are poor, illhoused, live in a squalid and criminogenic city, and are exposed to the rigours of the Scottish primary school system. Despite his avowed rejection of the "widespread belief in the relationship between behaviour disorders and unfavourable environment", Stott's band of School Welfare Officers seem to have provided him with an embarrassingly heavy load of evidence that such is the case, but, with his characteristic polemic skill, Stott argues that it is still possible to incriminate primary neuroticism, "unconditionability", and "neural and somatic impairment". Few medical workers will feel completely at one with Stott as to the nature of this sort of organic inferiority; to declare that bed-wetting, asthma and an awkward gait are, almost by definition, signs of physical defect seems to be in advance of what is known. Stott is at his most convincing when he demonstrates that many "disturbed" children are in truth really "disturbing" and pathoplastic, and that they set up a damaging and self-perpetuating interaction between themselves and others: a state of affairs too easily regarded as the root cause of their difficulties.

Three hundred school truants are described in the book's second section, and again it is demonstrated that "sagging" is generally only one aspect of a larger personal defect which transcends intelligence and social class. The final part of the book deals with the theoretical and practical implications of this concept of biological liability to waywardness, and provides a thoroughly practical classification of major patterns of disordered behaviour, including the "inconsequential" syndrome which is the common hall-mark of so many difficult children. Stott defends his concept of innate temperamental defect from the accusation that it leads to nihilistic pessimism on the part of the community. "No type of disturbed child is more in need of oversight and guidance, or responds more thereto, than the congenitally damaged", he insists, and points to the range of services which even now exists for prophylaxis and treatment, and to the potent effect of psycho-physiological maturation.

Professor Stott's main achievement may possibly lie in his having arrived, by his own efforts, at a point of view regarding the myriad causation of emotional disorders in childhood which has been held by clinical workers for the past four decades, but it is nice to know that he is now with us. His book will appeal most to educators, sociologists and family welfare workers who require to be reminded of the complexity and interaction of disturbances in the individual and society. The book is well produced and modestly priced.

JOSEPH NEVILLE.

Emotionally Handicapped Children and the Elementary School. By ELI Z. RUBIN, CLYDE B. SIMSON and MARCUS C. BETWEE. Detroit: Wayne State University Press. 1966. Pp. 286. \$12.50.

The authors were the chief participants in a psychological team of the Lafayette Clinic, Wayne

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State University, Michigan, who worked together for a period of four years in order to try and substantiate the hypothesis that special classes in elementary schools are generally beneficial to emotionally handicapped children. Elaborate studies, physiological, intellectual and social, were made of the children. A group of 56 were finally selected and were divided into two sub-groups, half of these sevenyear-olds being taught in special classes, the remainder continuing in their ordinary classes. If a child progressed well in his small group, which never exceeded ten, he might be returned to his "ordinary" class. The maximum length of time in the special class was three years. At the time the experimental child left his special class, the pair, experimental and control children, were reassessed, and the pair were again assessed "after they had been involved in regular class performance for one semester or more".

The book describes in detail the problems which confront the teachers of special classes, and suggests some solutions. One interesting fact that was shown was that in the special class the actual time of a one-to-one relationship between teacher and child was no greater than in the ordinary class.

At the follow-up, while there was an impression of greater improvement on most points by the experimental group, this could not be substantiated statistically, with the exception of the scores for "Changes in Classroom Adjustment". Particularly disappointing was the relatively small improvement found in educational attainment.

Twelve months later, there was a further follow-up of selected cases, and here the experimental group, on the whole, was shown to have maintained their improvement, although more of the controls had relapsed. Needless to say, there was individual variation between the children in both groups.

This rather disappointing outcome led to a second phase of research. The various items on the many check lists were fed into computers and there emerged correlations of variables which illustrated that there seemed to be three rather differing types of children, all of whom had previously been grouped together as "emotionally handicapped children". There were those who had cognitive and motor disabilities with greater or lesser superimposed feelings of frustration and inferiority—they were seen as needing "retraining". There was a second group who had some gaps in their academic work but showed fair motivation—they were placed in what is described as a "retraining and learning group". The third group consisted of children who had no major disruption or disability in their school work, but whose difficulties were primarily in their social adjustment or interpersonal relationships. These were children who were unable to adapt to either the group of children or to the form of structure found in the ordinary classes. Time and money did not permit of these three groups being followed up, although the authors hope that this may be possible at a later date.

These findings are not particularly novel, but it is reassuring to have them proved statistically. This book would be of interest chiefly to teachers or educational psychologists who have had little experience in dealing with children who are backward in school. It demonstrates many of the pitfalls to be avoided. The check list and the appendix would provide useful data for anyone attempting to set up a similar piece of research in this country.

R. F. BARBOUR.

Psychopathological Disorders in Childhood: Theoretical Considerations and a Proposed Classification. By the Committee on Child Psychiatry, Group for the Advancement of Psychiatry. June 1966. Pp. 332. \$3.50.

Inanimate objects seem to lend themselves to precise identification and classification. At the animal level the commoner features of the species are usually sufficient to describe a single example, unless possibly it is our own pet animal, when the individual characteristics often seem to outweigh the distinctive features of the species. In classifying people and their problems, the "I"-ness of the person usually seems to escape through any scientific mesh. Nevertheless, if we are to compare cases and to construct satisfactory hypotheses, objective observation, description and classification is essential, and for this there must be an agreed use of terms. This monograph is a praiseworthy attempt by the Committee of Child Psychiatry of the Group for the Advancement of Psychiatry to take another step forward in this direction. This is a classification of health as well as of disorder and disease. Disease is seen as a failure to adapt or a breakdown in the attempt to maintain "a dynamic state".

The Committee saw as its first task the formulation of a conceptual framework that would be acceptable to psychiatrists of varying schools of thought, and the first chapter sets out the three basic concepts, the psychosomatic, the developmental dimension and the psycho-social aspects of the child's existence. The analytical approach which is the background of most members of the Committee is not unduly predominant.

The Committee felt the need to attempt to classify health as well as disease in order to avoid the too common diagnosis, "N.A.D." i.e. no abnormality discovered. This they do by adding Healthy Re-