SOMETHING FOR EVERYONE?

'One Little Girl', 'The Man of the House', 'All Alone with Daddy'. By JOAN FASSLER. Behavioural Publications, Inc. New York. 1969. Price $3.95 each, or $10.00 for the set.

These books are the first three of a new series. The publisher's press release describes them as, 'A significant breakthrough in child development and guidance . . . stories which probe feelings, emotions and perceptions of children from their point of view . . . . written by a child psychologist . . . . This series has a sound psychological basis for helping young children cope with developmental issues at an age when their anxieties about themselves first occur . . . The books are meant for parents, teachers, physicians, counselors, clergymen and all others who have contact with children.' Something for everyone?

The dust covers state that the series is unique in expressing a mental health approach in writing for the very young child. As there is no author's preface, it is not clear what aims she had in mind.

No age is given for Ellen in 'All Alone with Daddy', she looks 3–4 years; David, in the 'Man of the House', is 4 years old; and Laurie, 'One Little Girl'—a 'somewhat retarded child', is by the illustrations somewhere in the latency period. Hence, it would be a very rare child, of an age to identify himself with a character in the book, who could read it for himself. The reader market is therefore not explicit. Implicit is the aim that these books are (a) to enlighten adults who read to children, (b) to help the children become aware that adults have some idea of their fantasies and fears.

But for what market? The contents of the books are elementary to professional workers with children.

The books are 9 in. by 9½ in. of slender size and light weight, in clear type and with bold illustrations. The facial characteristics are rather indefinite, presumably to allow for 'projection' in the psychological sense. They are 'small-child-size' books.

With this reviewer's mixed feelings on them, she discussed them with three P.S.W.'s, an intelligent 13 year old boy, a sister and a staff nurse in a child psychiatric unit, and two teachers one of handicapped children and one the mother of a 7 year old handicapped boy. None of these individuals was impressed. Perhaps this is the British reaction to an American project. The object of these books is to make a direct impact of mental health concepts as they affect young children. A child is not aware of how he is handling his fears and there is considerable doubt as to the wisdom in making him fully conscious of this. Very little interpretative work is done in play therapy sessions with disturbed children and considerable success is claimed. The British seem more comfortable in 'letting sleeping dogs lie' and seeking help only when anxieties impede progress.

In conclusion, as a preventive measure, I do not see a market for these books in Britain, whatever their price. As a remedial measure, I feel that it is preferable to make people aware of Mental Health concepts on a personal basis. If one is going to verbalize feelings, one has to have reasonable belief that the owner of the feelings has the capacity to cope with them in explicit form, and one cannot know this about one's readers.

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INNOVATION

Remaking an Organization. By JAY SCHULMAN. Albany, State University of New York Press. 1969. Pp. 255. Price $10.00

For five years, the author, an assistant professor of sociology, was attached to the New York State Psychiatric Institute and Columbia Presbyterian Medical Centre, which are adjacent research and teaching psychiatric units in New York City. His purpose in observing and describing their 'innovative process' is indicated in his final chapter, where he says 'The contemporary crisis in the United States and the world, whatever else it is, is a crisis of organizational life . . . . It is because organization or structural innovation is a key to institutional change that this case study of innovation (i.e. his book) has some general currency.'

Innovation, the focus of this study, is any proposed 'intentional alteration of rules, roles, social activities or relationships of a qualitative character.' During a ten-year period in which restrictive patient management was steadily eased, 131 such innovations occurred in the two institutions; unlocking ward doors, initiation of an evening out-patient clinic and a new ward round are examples. The fate of each proposed innovation was traced and related to characteristics of its source, such as the professional status of the originator and conditions relating to its outcome such as the resources required for its realization. Unsurprisingly the number and success of innovations are proportional to the prestige and authority of their proposers.

A separate investigation was made of 'value cleavages' between individuals and groups by means of a questionnaire addressed to the staff (printed as an appendix) on contentious aspects of policy and procedure. The replies to fourteen questions (unidentified) were discarded because 'they did not work', only a proportion (unspecified) of questionnaires was returned, but conclusions are nevertheless offered about the whole staff; the responses of

'attendants' were discarded because it was apparent to the author that they had 'either lied or misunderstood' items. One has sympathy with the attendants faced with offering their opinion on, for instance, 'There is no more frustrating task in medicine than treating psychotic or near psychotic patients with intensive psychotherapy.' In addition, there was apparently no check on the validity of the answers retained by the author.

This parody of scientific method and argument is by no means alone. A study was made of the suggestion that 'the structure of deference within the psychiatrist's family may have influenced the (psychiatrist's) propensity to innovate.' The author divided the psychiatrists according to the acquiescence of their wives (without saying how this was determined), showing that insubordinate wives produce 43 per cent of the non-innovating but only 17 per cent of the innovating husbands. Translating the per centages shows that 17 per cent represents a solitary innovating husband!

The method of enquiry attempted here derives from anthropology. The 'field-worker' settles for a period among primitive people, impartially observes their alien habits, and with scientific insight makes their ways comprehensible to compatriots of his own civilization, an approach epitomized in Caudill's (1968) '*The Psychiatric Hospital as a Small Society*' which has a chapter headed 'The Possibility of a Clinical Anthropology.'

'*The Mental Hospital*' (Stanton and Schwarz, 1954) and '*The Psychiatric Professions*' (Rushing, 1964) show this method used to identify and describe tension between authority and freedom and conflicts between professional roles in psychiatric institutions.

Rushing delineates their aspiration: "The past few years have witnessed several studies demonstrating the usefulness of sociological analysis for understanding social behaviour in mental hospitals. These studies have often shown, contrary to the viewpoint of the psychiatrically orientated, that behaviour is often better explained in terms of hospital social milieu than it is by reference to personality factors." What is gained in on-the-spot, vivid immediacy by this method is offset, however, by the very insecure ground which the results provide, as Professor Schulman's book amply demonstrates.

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PIAGET

The Child's Conception of Movement and Speed. By JEAN PIAGET. Routledge and Kegan Paul, London. 1970. Pp. 305. Price £2 10*s*.

This book can be regarded as a companion volume to the one on time, which was reviewed in this *Journal* in May 1970. Piaget stated initially that young children were unable to estimate time independently of spatial order and velocity. In the present book he concludes, from many ingeniously devised experiments, that velocity in turn is judged in terms of order. The concept of order is discussed first in terms of spatial ordering, and subsequently Piaget is concerned with the order of events in time. Thus the young child may judge that, irrespective of their starting time, of two moving objects the one which arrives last has taken longer. Children may also think when one object starts its movement at the same instant as a second one, but from a position considerably behind it, that it has travelled more slowly if it arrives at the finishing line later. Thus velocity as well as duration seem at first to depend on the appearance of succession.

Movement is first defined by Piaget as displacement in space, i.e. an object is said to have moved from its initial place in an ordered series if it is subsequently found in a different position in the same series. If three differently coloured beads are placed in an opaque tube, in what order will they come out again? In what order if the tube with the beads inside it is rotated 90° or 180°? Young children cannot answer such questions correctly, and may even predict that in some instances the bead in the middle position will reappear first. Thus an operational concept of order and seriation has to be obtained before placement can be correctly predicted.

Could children under 11 years of age understand that an object rolling down an inclined plane, and thereby increasing its speed, would cover an increasingly greater distance in a given sub-unit of time? The relativistic notions which children hold of the relationships between movement, time, speed and distance are illustrated by some children who thought that because the object's speed was increasing, the actual distances covered by it in equal units of time would become increasingly shorter.

Judgement about movement and speed thus depends on what the child selects as a relevant cue in the situation. However, this implies more than incorrect attention focusing, as the cues which are selected vary in a fairly predictable manner according to development. Thus, a failure to attend to some crucial part of a problem should probably be taken as lack of understanding of the true nature of the