

THE NEUROTIC CHILD.

(Abridged.)

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Dangers in the Use of This Term.

The growing importance of the problem of the Neurotic Child, as a class, must leave us dissatisfied with the name when applied to an individual, as being too general and vague, since we find so many meanings included under it, and that it is used to denote widely divergent types of nervous disease. Frequently the term itself is still further softened down to the problem child, the difficult child, the maladjusted child, which leads the thoughts of those who have the responsibility of such children in their care still farther from the idea of illness, and fosters a belief that the abnormalities are manifestations of temperamental awkwardness or social incompatibility. These undoubtedly occur, but as symptoms rather than the disease in itself. Moreover, we are no longer content with similar generalisation in any other branch of medical science. Let us take, for example, that group known by the generic term *infectious diseases*. These are also known specifically as measles, chickenpox, scarlet fever, etc., and are not considered as of so little importance that a child suffering from one is called an *infectious child*. We differentiate each clearly. They present a definite picture to the mind, including causes, symptoms, treatment and sequelæ. This knowledge is not only available from the specialist but is also general among medical practitioners as well as members of the nursing profession.

Do we find that a similar state of affairs obtains where the functional nervous diseases of children are concerned? This is doubtful, and so it would seem that the prevalent use of the general name represents the inexact nature of information concerning the forms of disease included in the group.

If these are the causes of the generalisation, what are the results? One of the most harmful may be named immediately. If too widely differing varieties of nervous disease are grouped together they may never become separated at all. Their specific forms will be confused, as will also symptoms, causes, results, and it will not be realised that they require definite treatment suitable to the peculiar character of each and related to the component elements.

Secondly, we may consider briefly the damage that often arises from a too free use of the word *neurotic*. Unfortunately it has a popular use as an epithet of opprobrium, besides its medical sense. The parents, therefore, may resent the term, and we may feel influenced too thereby to dismiss the case as one for which there is nothing particular to prescribe except bromide, diet or change of air, since we are still inclined to labour under the old misconception that it seems undisciplined, uncontrolled, naughty or badly brought-up, and believe that if only this wayward infant could be brought to see the error of its ways, and the parents, through our good advice, taught to manage its education more skilfully, the situation would be adequately dealt with.

This is an idea that dies hard, but during a longer time than many realise, a belief in the existence of functional nervous diseases in childhood has been gradually winning acceptance. One of its pioneers was a London physician, John Elliotson by name, who as early as the middle of the 19th century published articles on the subject in his paper *The Zoist*, between 1842-55, pointing out that much which passed for naughtiness was indeed illness, and that many

children who showed criminal tendencies were *sick children*, whose place was a hospital rather than a reformatory.

The latter part of the last century, however, saw a revolution in knowledge concerning nervous diseases, brought about by that illustrious veteran, *Sigmund Freud*, and in due course his discoveries brought fresh light upon these nervous diseases of childhood. In the course of his research, he learned that the roots of adult nervous troubles could be traced back to early years, when definite nervous symptoms had disturbed the life of the patient, although they had usually remained unrecognised by those attending the child. In his book, *Three Contributions to the Sexual Theory*, first published in 1905, startling information appeared relating to the mental life of the child, including a description of the repression of infantile impulses, and an explanation of the function of the unconscious mind in determining human behaviour, as well as the postulation of the part played by infantile sexuality and the emotional disturbances of childhood in the formation of subsequent neuroses. These theories met with stormy opposition, because of the current belief that children were incapable of any manifestations of this impulse until the onset of puberty at the earliest, although their habit of masturbation was both admitted and deplored.

In 1909, an article appeared in the *Jahrbuch für Psychoanalyse*, on *The Analysis of the Phobia of a five-year-old Boy*, little Hans, who was seriously disturbed by a phobia, which not only set up anxiety each time he met or heard a horse, but he refused to leave the house unless accompanied by his mother. The treatment was successful, in that the child completely lost his phobia with all its attendant symptoms and remained nervously stable during a particularly trying adolescence owing to the divorce of his parents.

From 1912 onwards, until her death in 1924, Dr. Hermine von Hug-Hellmuth, of the Vienna Psycho-analytical Society, devoted her research to the nervous troubles of children and published several books and short papers on the subject. Her first, *The Study of the Mental Life of the Child*, appeared in 1913, and was translated into English, which still remains a useful handbook of information.

Meanwhile we find the Neurotic Child becoming of increasing importance in other countries. Various aspects of his problem made special appeal to the interest of different organisations that were undertaking research along the lines of education of criminality. In this connection we can never forget the brilliant work carried out by clinics and laboratories attached to the American Universities upon intellectual retardation, as well as that of the Visiting Teacher Movement organised by the Joint Committee on Methods of Preventing Criminality and Mental Deficiency. Many names spring instantly to the mind in connection with this work of the abnormalities of the child-mind, whilst other Behaviour Clinics and Child Guidance organisations still further pushed on inquiry as to ways and means of bettering the conditions of the neurotic child by remedying conscious difficulties and improving harmful environments.

Still, while reading these admirable accounts of research carried out from social aspects, one cannot help wondering whether the root causes of the abnormalities, giving rise to the symptoms described were not somewhat neglected, and that the child as a *sick child* did not fall out of the picture. He was presented as a problem child, a mentally defective child, a criminal child, but not that it was a form of nervous disease that was causing the trouble, and that the symptoms were results of conflict arising from warring elements of infantile impulses, the ego and environment because of the action of repression. Few signs are to be found of attempts to solve the riddle by pondering the child's unconscious mind in relation to his conscious mentality, working with and against the operation of repressions.

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