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Article cites increase in kids' bad behavior

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They hit, they bite, they whine, they scream. They won't sit still. They won't put away their toys. They won't go to bed. They won't, they won't, they won't. And you can't make them.

There appears to be an epidemic of "disgraceful behavior" among children in America, Lexington psychologist Jacob Azerrad writes in the September-October issue of *Psychology Today*, and the causes can't be cornered among the usual suspects.

Too much sugar? Too much television? Allergies? Toxins? Psychiatric disorders? The problem is that parents "are reading the wrong books," Azerrad said in an interview. He identifies drug problems and delinquency among adolescents and road rage and office rage in adults as legacies of disruptive behavior in children and jabs at some child-development heavyweights for leading parents astray.

"The parents are reading all these parenting books that teach them to nurture negative behaviors," said Azerrad, a clinical behavioral psychologist for more than 30 years and author of "Anyone Can Have A Happy Child" (Evans, 1997).



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JACOB AZERRAD
psychologist

Citing research on the effects of adult attention on children whose disruptive behavior included frequent crying spells, lying, and wandering in elementary school classrooms, Azerrad writes: "Parents who have fallen into the habit of offering attention for disagreeable behavior often have a hard time shifting their focus to agreeable behavior."

In his article, written with Paul Chance, the book review editor of *Psychology Today*, he is critical of the approaches employed by the late Dr. Benjamin Spock and renowned Cambridge pediatrician and author T. Berry Brazelton, founder of the Child Development Unit at Children's Hospital in Boston and creator of the widely embraced Touchpoints model for understanding the behavior and development of babies and toddlers.

Dr. Spock's bible for parents in the baby boom, first published in 1946 and now titled, "Dr. Spock's Baby and Child Care," has sold close to 50 million copies and has been translated into 42 languages. He died at the age of 94 in March 1998.

Adult attention is powerful, Azerrad writes, and by paying "special attention to troublesome behavior, to offer sympathy, understanding, and reassurance when children behave in outrageous ways," parents are inadvertently encouraging the very behavior that they find worrisome.

He also targets Ross W. Greene, a clinical psychologist at Massachusetts General Hospital and Harvard Medical School, who wrote "The Explosive Child" (Harper Collins, 1998), and Stanley Turecki, author of "The Difficult Child" (Bantam Books, 2000).

Azerrad writes that "Americans attend more to bad behavior than to good behavior because

they have come under the spell of self-described child-rearing authorities. These kiddie gurus ... repeatedly urge parents to give special attention to children when they behave badly."

Brazelton, who turned 83 in May, absorbed the broadside without a ripple. "I've been open to a lot of criticism," he said.

Brazelton and others, in their books, "repeatedly urge parents to hold, soothe, comfort, and talk to a child who bites, hits, screams, throws or breaks things, ignores or refuses parental requests, or otherwise behaves in obnoxious, infantile ways. . . . And the more faithfully [parents] follow the advice, the worse their children become," Azerrad writes.

Brazelton said he doesn't think American children behave any worse today than they ever have, but he agreed with Azerrad that discipline is important. "You have to stop them if they can't stop themselves," Brazelton said. However, Brazelton added, "It's not as simple as sending them for a time out or whatever."

The discussion highlights some fundamental differences among the approaches that child experts use.

Behavioral therapies — as opposed to Freud's psychoanalytic therapy — are based upon the belief that behavior is the product of learning. "It's basically saying that human behavior is learned, as opposed to the result of deep-rooted unconscious conflicts within the psyche [which] lead to some symptoms that cause those behaviors," Azerrad said.

According to Azerrad, Spock was "a deeply committed Freudian" and Brazelton is a "disciple of Spock."

"Freud is alive and well and he lives in Massachusetts, unfortu-

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psychologist

Psychologist's article challenges peers

nately," Azerrad said.

But Brazelton, who has written a new book, "Touchpoints Three To Six" (Perseus Publishing) with child psychiatrist Joshua D. Sparrow, said he employs a mix of ideas and that discipline must involve the children themselves. "I think it has to be the child who eventually controls himself," Brazelton said.

"Behaviorists are working on the surface," Brazelton said. "They say 'If you do this, you change the behavior.' I'm a pediatrician, and Joshua Sparrow is a child psychiatrist. We are coming at it with a much more internal look at the child. Tough love can create more anger hidden within the child."

Azerrad says the behavior is the problem. "When a kid hits, bites, has tantrums, he has no deep-rooted problems that need to be uncovered. There is no deep-rooted anger problem other than the anger because he did not get his way. Rather than a parent playing therapist he needs a parent as a teacher to help him learn not to hit or throw things and to learn to handle things not going his way calmly."

Brazelton credits Spock for launching "the whole concept of understanding what was going on in children's minds, and how they were developing. Before that, [the approach] was very disciplinarian. We've gone a good deal farther than that; now we know a hell of a lot."

Sparrow points out that Brazelton has encompassed a wide variety of influences in his work, and that Brazelton's approach differs in many ways from Spock's. For example, where Spock tended to give advice to parents, Sparrow said, Brazelton is more likely to guide the parents along, helping them find their own way.

"The bottom line is we need to be respectful of each other's approaches," Greene said. "We're all trying to help kids here. In [Azerrad's] article, him referring to other approaches as 'nonsense' to me is not a healthy direction to go in. We all have data suggesting that our approach is helpful. Debate is healthy, but if it's a debate saying whose team is better or who's right and who's wrong, I don't think of that as a particularly healthy debate."

The best approach depends on the problem, and the solution can involve a number of ideas and approaches, said Sparrow, associate director of training at the Brazelton Touchpoints Center at Children's Hospital.

The question is not what approach is best in general, but rather what is best in a particular case, Sparrow said. Referring to Azerrad's article, he said, "This kind of polarizing is a real disservice to people who need professional advice about children's behavioral problems."

On the other hand, Azerrad sees selfishness as the root of the problem, and adds that the behavioral approach can work for all children. "These children, not only are they out of control but they're self-centered," he said. "They think the sun rises and sets on them. They have tantrums when things don't go their way."

Self-centered children become self-centered adults, he added. "When you see this road rage and airplane rage, it's the same thing," Azerrad said. "They don't get what they want, and they're out of control."

Attention should not be awarded for biting and hitting, losing control, and the tantrums, in Azerrad's view, but rather for the opposite of being self-centered. "It should be given for caring and thoughtful behaviors," he said.

The reward? "A vivid reminder of the behavior, 100 percent praise. You don't say 'It's nice to see you weren't selfish as usual' — no half-praise, half-criticism. Labeling it as grown-up. It's grown-up to act like Mother Teresa. It's grown-up to take disappointment calmly rather than having a tantrum when you don't get what you want."

Greene said Azerrad's approach might not be right for everyone.

"You have somebody presenting a certain point of view, and it's a legitimate point of view," said Greene. "It's just that my experience is that point of view isn't going to be helpful to all difficult kids, and so we need other approaches for kids who may not respond to that approach."

"A withdrawal of attention certainly would make sense for some kids. It's only going to be well-matched to a child's needs if attention-seeking is the explanation for why the child is behaving in a maladaptive manner in the first place."