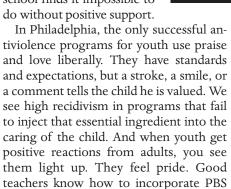
FINK! STILL AT LARGE

Some schools are integrating positive psychology into their curricula in an effort to foster a sense of optimism. What might be the impact of such efforts on students' psychological development?

Positive psychology is at the core of a program in Philadelphia called Positive Behavioral Support, or PBS, and I think it has tremendous value for the psychological health of our young people. I'd like to see positive psychology used in every classroom in America.

The concept is based on the idea that children thrive with love and praise. Schools across the country have specialized

in punishment—suspensions, expulsions, detentions—and very little praise. Typically, the belief that the child is capable of doing the work, and more, is not conveyed to the child. This is a serious omission, because many children never get a word of praise. Instead, they receive warnings, threats, or punishments. The child who might want to succeed in school finds it impossible to do without positive support.



into the educational process.

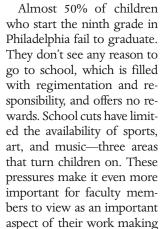
I know of a case several years ago in which an elementary school tried an experiment. At the end of the year, the faculty and administration decided to work over the summer, repaint the classrooms, hang posters, and make the classrooms cheerful. Everyone agreed that they would tell the children that "they would succeed."

The grades went up three levels, and the children were surprised by the extent of their improvement. This experiment worked because it involved everyone in PBS and created a level of encouragement that led to extraordinary results. It is the best example of PBS that I know of.

The lives of many children are filled with trauma and abuse. These children come to

school with images of the father beating the mother the night before or memories of being beaten by a parent for some minor infraction. They couldn't care less about reading or math. They need someone, such as a teacher, to be a loving guide.

Too often, children find school to be another place that is painful with no rewards and with a reminder that they are worthless.



school an interesting place to be for children.

FINK, M.D.

Recently, I visited a classroom of fourthand fifth-graders who were too behaviorally problematic to remain in their regular classrooms. It was sad, because only 8 out of 15 children were present, so I knew that something was wrong. When children are engaged, they are not truant!

As it turns out, the teacher was lecturing the children about the Civil War in a very boring way. Every time she asked a question, a child sitting near me would eagerly raise his hand and then call out the answer before he was recognized. I concluded that the child was an attention seeker. The teacher was angry and refused to call on him.

After calling out the answer for the sixth or seventh time, the student put his head down on the desk. I whispered to the person whom I was with that the child had just "checked out."

Next, the teacher distributed a sheet of paper with questions and a list of words to fill in blanks. The child I am describing called out three times that he did not understand the instructions. The teacher continued to ignore him. I went over and told him how to do the task and was rewarded

with a grateful smile that lifted me up.

Why couldn't the teacher understand the child's need? I don't know, but too often, there is a battleground in the classroom that for the child is no different from the situation at home or on the streets. Why bother?

This example is common. What makes this worse is that the child was sent out of his regular classroom into this "special" classroom, which had fewer children and was designed to help the child get mainstreamed back into a regular classroom. But instead of being treated positively by the teacher, he felt further rejected. I am sure on subsequent days he would be one of the children who would not show up.

This is a big problem in the Philadelphia public schools: Each day, 30,000 children in the district do not come to school. Children who like school or feel able to participate don't cut; they come to school and work, but they feel good about what happens in school. Our wish to punish, control, and dominate children is long-standing.

For those of us who work in these environments, it's important to remember that children respond well to structure. They complain about it, but they thrive on it, and are not offended by rules—unless they are harsh and unrealistic.

In a visit to an alternative school (which used to be called a reform school), I was given a tour by two children who had risen in the hierarchy of students in a highly structured institution. When we finished the tour, I asked them how they were doing and they both got sad looks on their faces.

They shared that they were being sent back to their regular schools. I said in an astonished voice, "You mean, you'd rather travel for 1 hour in the morning and afternoon on a bus and have a report of being in a reform school than go back to your regular school?" The ninth-grade girl bristled and said, "Yes. Here, I'm learning, I'm safe, and I'm respected!" I realized at that point that the children who are sent to alternative schools because of bad behavior get a great deal of PBS, and it makes them feel good no matter what it costs. Her message can help us understand. For this student, being respected meant being loved, and being cared for meant being talked to and guided. She said she was learning. Why should she be trying to please her teachers in the reform school and not in her regular school?

It takes a great deal of effort to turn a school around—to decrease punishment and increase praise. It's antithetical to all the years of experience the teachers have in a district. It's antithetical to policies such as zero tolerance, which requires punishment; such as expulsion, rather than sitting down with the child and finding out what is going on with him. Talking to and not at children is a lesson that teachers need to learn.

Sadness is a big part of our children's lives. Deaths, illnesses, trauma, abuse, violence, and fear are rampant in every school in the Philadelphia district and in schools across the country. Can the faculty put the children first? Anna Freud said we must consider what is in the "best interest of the child." Too often, we in psychiatry learn pat answers and solutions for issues rather than understanding how important it is to treat each case separately, and investigate the issues and circumstances that lead a child to act out.

I was a student in an elementary school many years ago, and I was obedient and responsive. Everyone did their homework, and I always felt that my mother was in collusion with my teachers against me. If the teacher said, "Everyone fold your hands," 100% of the students did just that.

But the world has become much more complex. Children must navigate complicated situations at home, on the streets, and frankly, online. These very difficult times require us to have fresh approaches.

Too many young boys aged 7-10 are aggressive and assaultive. If we addressed these issues early, we might stop them from ending up dead by the time they are 18 or 19.

It should be clear that I am a devotee of PBS. Getting it integrated into every classroom would take no additional money. But adopting this philosophy would require that we educate our children with lots of love and praise.

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School-Based Intervention Improves Anger Control in Black Teens

BY SHARON WORCESTER

Southeast Bureau

NEW ORLEANS — A school-based life skills training program proved feasible and was beneficial for improving anger control in African American adolescents who participated in a randomized, controlled study of the program.

Spielberger State-Trait Anger Scale scores in 52 normotensive African American adolescents who were randomized to participate in the 12-session program, which was conducted during health or physical education classes, improved significantly from a mean preintervention score of 23.0 (out of a possible 40) to a mean postintervention score of 23.9. Scores in 52 African American adolescent controls who did not participate in the program decreased significantly during the same time period from

22.1 to 20.5, Vernon A. Barnes, Ph.D., reported at a meeting sponsored by the International Society on Hypertension in Blacks.

Participants included 104 adolescents, 44% of whom were boys, with a mean age of 15.7 years. Training included 12 50-minute Williams LifeSkills Workshop sessions adapted for adolescents and conducted by teachers specifically trained to facilitate these programs. The sessions focused on stress-related coping skills, including early recognition of negative feelings, thinking before acting, deflection, problem solving, assertion, saying no, speaking clearly, listening, empathy, and building supportive relationships.

"The findings demonstrate the feasibility of conducting the Williams LifeSkills program in the school setting and its potential beneficial impact on anger control lev-

els in African American adolescents," Dr. Barnes of the Medical College of Georgia, Augusta, wrote in a poster.

Replication and verification of the results in a larger group with a longer follow-up is warranted, he noted.

The findings are important given that there is increasing evidence linking anger expression and trait anger/hostility with subclinical cardiovascular disease in youth and with coronary heart disease in adults, Dr. Barnes noted. Although the benefits of psychosocial-behavioral interventions for reducing coronary heart disease risk have been demonstrated in numerous trials in adults, few have evaluated their impact on youth, he added.

Two of the study's coauthors are the founder and president of Williams LifeSkills Inc. The study was supported in part by the National Heart, Lung, and Blood Institute.