

PART III

Childhood Disorders

Child behavior therapy has emerged as an important area within the field. The area is not merely the extension of behavioral techniques presented in previous chapters. Rather, childhood behavior problems raise their own set of issues. The behaviors to which interventions are applied may vary widely over the course of child development as the child matures, becomes more involved in activities and relationships outside the home, and so on. Also, the techniques themselves may be unique in the sense that parents, teachers, and peers may be involved in administration of treatment.

Behavior modification techniques with children have been applied to a diverse set of behaviors in the home, at school, and in the community, as well as traditional settings where treatment is provided such as outpatient clinics and institutions. The range of behaviors included in such programs has varied widely in the severity of problems they encompass. Many problems treated are those that emerge as part of normal development such as toileting and self-care skills. More frequently, behavioral techniques have been applied to address problem behaviors at home and at school that involve noncompliance, aggressive behavior, and poor academic performance. In addition, techniques have been applied to many serious problems where the child may be institutionalized because of behavioral and/or medical problems.

In the present section, we have selected chapters that represent the diversity of applications and convey the richness of the field. Different behavioral approaches are illustrated, and evidence attesting to their efficacy is reviewed. The chapters convey how child behavior therapy is conducted and the range of approaches. In Chapter 10, Sulzer-Azaroff and Pollack discuss child behavior problems that emerge in the home. Techniques are reviewed that have been applied to alter fear and anxiety, various “nervous” habits, toileting, noncompliance, social isolation, mutism, and behaviors in the community. The chapter points to the important role that parents and teachers play in altering child behavior. Special topics in this chapter include parent-management training, self-control techniques, and ethical and legal aspects of child treatment.

In Chapter 11, Ruggles and LeBlanc focus on classroom procedures that have helped children at different educational levels. Reinforcement and punishment

practices and instructional techniques with demonstrated effectiveness are evaluated. The authors discuss factors that contribute to child classroom behavior including teacher behavior, special features of the physical environment, and peers. Finally, the chapter reviews the impact of behavioral techniques on attentive child behavior and academic performance.

In Chapter 12, Neisworth and Madle examine behavioral techniques applied to the mentally retarded and adolescents. The mentally retarded represent a heterogeneous group that varies widely in age, deficits, and strengths. Neisworth and Madle review treatment approaches for many areas that have received rather extensive attention, including self-care skills, self-stimulatory behaviors, and speech and articulation problems. Applications are also discussed in novel areas such as preparing mentally retarded persons for community living, for jobs, and in developing positive social skills.

In Chapter 13, the final chapter, Doleys and Bruno examine behavioral techniques that are applied to the treatment of medical problems. Behavioral medicine, as the area is often referred, includes the use of behavioral techniques alone or in combination with medical treatments, to alter a wide range of medical problems. The chapter reviews applications in four areas, including asthma, convulsive (seizure) disorder, childhood obesity, and hyperactivity. The chapter covers many techniques including relaxation, systematic desensitization, biofeedback, reinforcement and punishment techniques, and self-instruction training. The chapter conveys the important role of behavioral techniques beyond the traditional areas that have been the focus of many psychological interventions.

Overall, this section points to several directions that go beyond the usual confines of treatment. The chapters convey the important role that behavioral techniques play in prevention, treatment, education, and rehabilitation. The areas extend well beyond the focus of traditional treatment approaches to children.