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Comparison of the Behavior of Eleven-Year Old Socialized Aggressive and Unsocialized Aggressive Boys in a Play Therapy Situation

Mary Donoho Browder
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To the Graduate Council:

I am submitting herewith a thesis written by Mary Donoho Browder entitled "Comparison of the Behavior of Eleven-Year Old Socialized Aggressive and Unsocialized Aggressive Boys in a Play Therapy Situation." I have examined the final electronic copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Master of Science, with a major in Education.

Andrew W. Halpin, Major Professor

We have read this thesis and recommend its acceptance:

Beverley E. Holaday, Emmett O. Milton

Accepted for the Council:

Carolyn R. Hodges

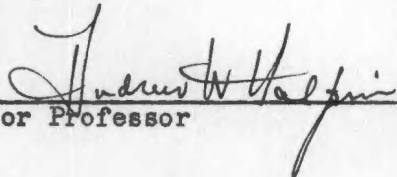
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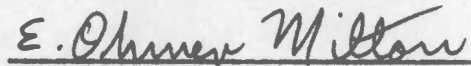
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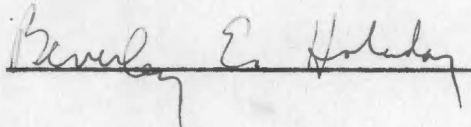
To the Graduate Council:

I am submitting herewith a thesis written by Mary Donoho Browder entitled "Comparison of the Behavior of Eleven-Year Old Socialized Aggressive and Unsocialized Aggressive Boys in a Play Therapy Situation." I recommend that it be accepted for nine quarter hours of credit in partial fulfillment of the requirements for the degree of Master of Science, with a major in Education.

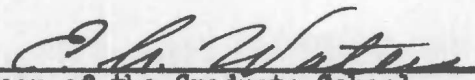

Major Professor

We have read this thesis
and recommend its acceptance:


E. Oliver Milton


Beverly E. Holaday

Accepted for the Council:


Dean of the Graduate School

COMPARISON OF THE BEHAVIOR OF ELEVEN-YEAR OLD SOCIALIZED
AGGRESSIVE AND UNSOCIALIZED AGGRESSIVE BOYS IN A PLAY THERAPY SITUATION

A THESIS

Submitted to
The Committee on Graduate Study
of
The University of Tennessee
in
Partial Fulfillment of the Requirements
for the degree of
Master of Science

By
Mary Donoho Browder

August 1950

To the memory of my parents

ETHEL OMEAZO DONOHO

ALONZO AUGUSTUS DONOHO



ACKNOWLEDGMENTS

Many persons have had a share in contributing to this study. By far the greatest debt is to Dr. Andrew W. Halpin, Associate Professor of Educational Psychology, under whose direction this study has been made, for his constant backing in practical details. His keen insight has been an inspiration. Sincere appreciation is also expressed to Dr. Beverley E. Holaday, Professor of Educational Psychology, and Dr. Emmett O. Milton, Associate Professor of Psychology, for their interest and encouragement, and for their help in analyzing the data.

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Particular mention should be made of the teachers, who so willingly co-operated with me by making the ratings for each child before and after therapy, and by arranging for a scheduled time for the therapy sessions. The names of these teachers are omitted to avoid the identity of the subjects. Mention also should be made of the help given me by Miss Naomi Redding, Librarian, in securing materials not available in the library.

To my husband Milton E. Browder, for his patience and encouragement throughout the study, I owe my deepest gratitude.

Mary D. Browder

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CHAPTER I

HISTORICAL BACKGROUND

Research and clinical studies with children indicate that aggressive patterns of behavior do not constitute an unitary behavior characteristic, except at a superficial and phenotypic level of description. Nor is the genesis of aggressiveness the same in all cases.

Hewitt and Jenkins (12) have delineated three major behavior patterns in children: the unsocialized aggressive child, the socialized delinquent and the over inhibited child. This study, however, is concerned with only the two aggressive behavior classifications: the unsocialized aggressive and the socialized delinquent.

The syndrome pattern of unsocialized aggressive behavior implies the behavior of a child who is defiantly aggressive toward others, who shows no regard for their rights as fellow-persons, and who feels no responsibility for their well being. He seems to have a complete lack of feelings of shame or guilt for any of his behavior.

The six items included as "symptoms" of this fundamental maladjustment pattern are:

1. assaultive tendencies - deliberate acts of violence against other persons. When thwarted, uses physical force to attain desired goal.
2. initiatory fighting - inclined to bully and boss others, is seldom able to get along with others but manages to throw the blame on some one else.
3. cruelty - his treatment to others is "mean." He deliberately hurts others.

4. open defiance of authority - rude and openly antagonistic toward any person in authority, frequent outbursts of temper when crossed.
5. malicious mischief - deliberately destroys property of others.
6. inadequate guilt feelings - he readily deceives others to avoid discomfort and refuses to accept any blame for his own misbehavior.

The behavioral difficulties of the socialized delinquent boy bear certain resemblances to those of the unsocialized aggressive boy, he too is deceptive and defiant toward authority. He may blame others for his acts and bully those weaker than himself; but in none of these does he approach the aggressiveness of the unsocialized aggressive boy.

His pattern of behavior differs in two major aspects from the unsocialized aggressive behavior syndrome.

First, the child described by this concept is "socialized" in the sense that he gets along well with other children of his own in-group. Compared to other children, he may hold a slight edge in popularity among his classmates. He is a willing group participant within his own gang.

Second, his aggressive behavior is directed more against formal rules of society than against another person, as in the case of the unsocialized boy.

The qualifying adjective "socialized" is coupled with "delinquency" in a peculiar sense. In common parlance, any behavior which is delinquent is assumed to be "anti-social." The use of the term here is concerned, however, not so much with moral implications of behavior as with the psychological implications. The boy who is

a member of a well organized delinquent gang is "socialized" in that he is a capable and willing participant of this particular group, even though he may feel no allegiance or obligations to persons outside of this group. The unsocialized aggressive child is characterized precisely by his inability to make such an adjustment.

Actually, Hewitt and Jenkins use the terms "socialized delinquent" and "socialized aggressive" interchangeably. This involves a certain admixture of both legal and psychological terminology. "Delinquency" is basically a legal term which implies a form of moral judgment. "Aggressive" is a descriptive term with no necessary moral implications. Consequently, for purposes of the present study, the writer will use the term "socialized aggressive" instead of the term "socialized delinquent."

To make sure that the cases selected to represent this syndrome would meet both these criteria, first - that he gets along well with other children of his own in-group, and is a willing group participant within his own gang, and second - that his aggressive behavior is directed more against formal rules of society than against another person, Hewitt and Jenkins delineated seven traits as symptomatic manifestations of the implied behavior:

1. gang activities membership in a fairly well organized group indulging in socially unapproved activities.
2. association with undesirable companions - persons who deviate from standards of organized society.
3. co-operative stealing - stealing in company of others.

4. furtive stealing
5. habitual school truancy
6. running away from home overnight
7. staying out late nights

In addition to requiring that at least three of these seven items be present, at least one of the first three items was required to assure evidence of the child's "companionability." The last four items may be common to both the unsocialized aggressive boy and the socialized aggressive boy, but the first three items describe situations in which the unsocialized aggressive boy cannot make an adjustment.

The study by Hewitt and Jenkins was based on the hypothesis;

Children who differ from each other in expressing fundamentally different patterns of behavior maladjustment (which for them, however, are rational patterns of adjustment to the situations which they have experienced) must have experienced fundamentally different patterns of environmental circumstances; and conversely, children who are exposed to such fundamentally different patterns of situations will exhibit fundamentally different patterns of maladjustment. (12, p. 1)

A major shortcoming of many studies conducted prior to the Hewitt and Jenkins study was that the behavior in question was defined merely by describing the antecedent provocative circumstances. Either the behavioral classifications were so broad that behavioral items with essentially different meanings and implications to the child were thrown together, or single items of behavior were so narrowly defined that other slight variations of behavior having the same essential meaning were excluded from the classification.

Hewitt and Jenkins selected, from the data accumulated for their study, a group of behavioral items which were sufficiently alike in their implications to be considered as symptoms of the same fundamental pattern of maladjustment-reaction.

Relatively few previous studies had attempted any intensive comparisons between differences in types of behavioral maladjustment and types of situational backgrounds. There had been some pioneer work done in the developing of patterns of either behavior traits or situational elements but with limited effort at combining the two types.

These earlier studies pointed to a way for this delineation by Hewitt and Jenkins. Work done by Levy (15) a decade ago, proposed a group of symptomatic manifestations of a pattern which he called "maternal overprotection." Students working under his guidance explored the concepts and origins of "maternal overprotection" and "maternal rejection" but did not attempt to analyze the implications for the behavior of children exposed to them. Later, Newell (20) made a study of the nature (but not the results) of parental rejection. In 1935 Fitz-Simons (9) reported a group of thirteen "rejected children" to have a higher average of entries on a list of aggressive behavior traits than did the non-rejected children among a selected clinical sample of "problem children." Those same "rejected" children, however, exhibited fewer than the clinical average number of withdrawing behavior traits. On the other hand, nine children designated as "overprotected" by their mothers exhibited few symptoms of aggressive

behavior, and more than the average of withdrawing symptoms. In 1938 Symonds (23) reported a paired comparison study of thirty-two "rejected" children with an equal number of "accepted" children, in which he reported:

The rejected child is destined, on the average, to show those strong aggressive traits, to be hostile and antagonistic toward those with whom he must have dealings, and to develop tendencies which may lead to delinquency.

More recently Bonny (5), Coghill (8), and Roseheim (24) have expressed the same conclusions. Roseheim in discussing children whose rejection has existed since infancy, states:

In general, the nature of the disturbance produced is well known. These individuals have never been loved and have never learned to love. They lack ability to establish relationships with people; and there is a real lack of responsiveness and affection, in an essential sense, they are unapproachable. (24, pp. 486-494)

Topping clearly outlines a definite picture of "Delinquent boys who, as a frequently repeated pattern of behavior, make violent and dangerous attacks." She concludes:

Clinical impressions, in some instances supported by statistical analysis and in no instance contradicted by such evidence, lead me to list the following characteristics as typical or, at least, as disproportionately frequent in this group:

1. Early rejection by parent or guardians.
2. An evident and verbalized sense that "nobody cares."
3. A masked but acute desire for acceptance and affection.
4. Pronounced ambivalence.
5. Childhood experiences in neighborhoods of low standards.
6. Aggressive speech with much talk of killing.
7. A sense of the pressure of living being too great
8. A sense of having a hard life, of being faced with unequal odds.
9. Easy resort to dangerous weapons.
10. Indifference to consequences, even to death as a penalty.

11. Lack of humor.
12. Lack of insight.
13. Frequently overpronounced sex drives. (25, pp. 485-492)

In a similar, but more extensive study, Bennett and Rogers analyzed a wider range of behavior syndromes, and concluded:

The child who is aggressively hostile toward his fellows, the hyperactive youngster, and the child who shows a variety of coincident behavior disorders, appears especially difficult to treat. Despite intensive remedial efforts, prognosis proved relatively unfavorable when such problems were observed. Study of these particular syndromes might be of real benefit to the clinical field.

The study failed to identify any treatment procedure applicable to one problem syndrome and to no other. Nor could we associate any symptom complex with one pattern of experience which did not obtain in other cases. The differences reported are differences in emphasis, in proportion. Rarely did they approach an all or none differentiation of problem groups. Certainly the process of diagnosis has not been reduced to a formula. (3, pp. 222-229)

On a whole, with older children and adolescents, treatment efforts with the unsocialized aggressive child have been less successful than efforts with the socialized aggressive child. Newell (21), in commenting on a study made by Symonds, states:

Those of us who have tried to treat these cases will agree with Dr. Symonds' findings that of all clinic cases, they are the hardest to help. Two factors, it seems to me, tend to interfere with successful treatment. Frequently rejecting parents resent any one who can win the love of their child and they oppose the therapist, either openly or subtly. The other factor lies in the child himself. These children have been hurt so frequently that it is almost impossible for them to accept a close therapeutic relationship. (23, pp. 679-686)

Hewitt and Jenkins have described the unsocialized aggressive child in therapy. They have shown that the method of therapy successful with

the overinhibited child is not adapted to the unsocialized aggressive child. They state:

. . . Older children and adolescents who are of the unsocialized aggressive makeup usually cannot be effectively treated outside of an institution because adequate control is impossible in the open democratically organized community. . . . It must be recognized that the unsocialized aggressive individual will frequently seek to protect himself from developing an attachment for anyone, and may respond negatively when he begins to feel himself becoming attached, this must be accepted as one of the problems of treatment. (12, p. 87)

Without intending to become enmeshed in the problem of the psychopath, there can be noted similarities between the unsocialized aggressive child and the psychopath described in the clinical profile delineated by Cleckley (7). The seventeen points listed by Cleckley have been reduced by Halpin (11), to five fundamental criteria for recognizing the psychopath:

1. Impulsivity - erratic and bizarre behavior; planlessness of life pattern; activation by short-term goals.
2. High degree of egocentricity
3. Poverty of affect, with specific incapacity for object-love, and conspicuous lack of guilt-feelings.
4. Lack of consistent moral and ethical standards; opportunism.
5. Inability to learn or profit from experience; this in spite of adequate intelligence.

He describes the psychopath as a person who has never allowed himself to suffer or enjoy the integrated emotional consequences of experience and who is literally not able to learn from such an experience. The psychopath does not see himself as different from others and thus

does not gain insight into his behavior. He cannot tolerate the pain of insight. Whitaker, in speaking of the "Junior Psychopath" states:

One of the things that is most frustrating in any institution for delinquents is the arrival of the junior psychopath. His pattern of smoothness, pseudo-affect, irresponsibility, persistent trouble-making, and adroitness in campus intrigue is disturbing; the more so since it is almost impossible to pin responsibility on him. Everyone knows that he causes most of the trouble, and yet the only thing which can be really proven is his attitude. He is connivingly belligerent, dependent, bluffing, whining, affectionate, or blustering by turns. He can deliver as expediency demands in the gratification of his need of the moment. (27, pp. 239-250)

Topping (26) has described the socialized delinquent boy as "pseudo-social" or a boy who may be said to be socialized within a delinquent group. He is at the opposite extreme from the unsocialized "lone wolf" boy. His attitude toward society is similar to the asocial or unsocialized boy, but he differs in that he adheres to a well defined code which gives him loyalty to a well chosen few. His virtues are: loyalty, generosity, daring, self-reliance, initiative and resourcefulness. He loves independence and wishes to live his own life. She states specifically:

Even with these pseudo-social boys, therefore, rapport can be achieved through the usual "accepting" techniques, friendly comment, expression of interest, appeal to love of fair play, sense of humor and a flair for logic. . . . It is important above all to accept this type of boy on terms of equality as an adult well entitled to his viewpoint. Some "don'ts" in treatment of these boys would seem to be: don't shoot too high; don't attempt deep level therapy unless there are exceptional facilities in the number of skilled personnel; don't focus on seeking to develop insight. On the other hand, under suitable conditions, treatment at a deeper level would be interesting from an experimental point of view.

In conclusion it may be said that the fundamental socialization of the pseudo-social boy and capacity for

loyalty provide the ace cards for wider adjustment. The maturing process, the treatment the boy receives, and the influence of other persons upon him may largely determine whether he will swell the ranks of crime, find himself in the ranks of labor, or enrolled in such groups as the C. C. C. or the Armed Forces of the Country.

With the pseudo-social boy the effort must be not to wean him from his code, but to win him to its wider application. His capacity for loyalty, his other good qualities and his fundamental socialization here become important assets in treatment. The effort should be to divert his drive into socially acceptable channels rather than to uncover deep-seated conflicts. (26, pp. 353-360)

The similarity in the outward manifestations of anti-social behavior on the part of both groups of these children sometimes deceives teachers and lay workers, with the result that insufficient attention is paid to the need for adequate differential diagnosis, as a basis for appropriate "treatment." Both the socialized aggressive and the unsocialized aggressive boy show their aggression, by word or act, as a feeling of hostility. Such behavior as lying, stealing, defiance of authority, running away from home or school truancy might be common to both the socialized and the unsocialized boy. Hostility is expressed by both groups toward authority and adult society. Burt has classified a child as delinquent: "When his anti-social tendencies appear so grave that he becomes, or ought to become, the subject of official action." (6, p. 15) Recognizing that all delinquent behavior is symptomatic, it becomes the duty of those persons who deal with the delinquent boy to look for and recognize the underlying causes for the anti-social behavior. If the family is to be considered as the instrument for preparing the child to live as a member of a larger society, then we must examine the factors in the family life to

determine whether he has never been loved or if conditions in later childhood have caused the hostility which is reflected in his aggression.

The aggressive child, whether he is socialized or unsocialized, presents a problem in the class room. He is a tense, unhappy youngster who often is a threat and a very disturbing element to the classroom teacher. His behavior sometimes causes chaos in a well ordered group. When his anti-social behavior is exhibited, the conscientious teacher regards him with genuine concern and looks for a way to help him.

In the Oak Ridge Schools, children who display both types of aggressive behavior patterns are sometimes referred for play therapy. The referrals for children showing the unsocialized aggressive behavior patterns outnumber the referrals for children showing socialized aggressive behavior patterns. This may be due to the fact that at the elementary school age, some of the behavior patterns of the socialized aggressive in many instances are hidden from the observation of the teacher. Murphey, Shirley, and Witmer (19) report a study of hidden delinquency in which they cite instances of delinquent acts, hidden from public view, that could have brought the cases into court at a much younger age if they had been apprehended.

Implicit in referrals for play therapy, though often un verbalized, is the assumption that play therapy will prove equally efficacious with both types of cases. There appears to be insufficient evidence to justify this assumption. Little has been reported

concerning controlled studies of play therapy with aggressive children. Bodman (4) cites the case of a ten year old boy who was violently aggressive, particularly to the staff, and who seemed to feel all adults were savage. Yet after twenty sessions of play therapy he proved to be a charming, friendly, responsible boy. In discussing other cases, he states:

At a latter stage, the boy's problem is a problem of self-control. He finds difficulty in managing his hostility and is preoccupied with measures of controlling it. It is difficult to persuade these older boys to play -- they are afraid of being thought babyish -- but when given sufficient encouragement, their play is typically the construction of an elaborate system of defense . . . aggression against other children is more easily expressed than hostility to parents. (4, p. 183-187)

Whitaker (27) cites the case of an eighteen year old boy who was aggressive to the extent of tearing furnishings from the room when placed in "solitary." During therapy the patient resolved his deep hatred for his father. A year later, he was more successful both in his job and personal relationships. Andriola (1) describes the play therapy sessions with a ten year old aggressive boy. After ten sessions, the presenting symptoms: tics, extreme timidity, poor school work, and nail biting (partially) disappeared. Axline (2) reports the case of a twelve year old aggressive boy who was referred for play therapy because he was anti-social, aggressive and insisted that everyone blamed him unfairly for the trouble in which he usually found himself. Treatment of the case was a combination of individual and group contacts. Concerning this case Axline states:

While one supplemented the other, the therapy was successful on several counts because of group experience. Tom had never

before been accepted as a member of a group. At the conclusion of the therapy, he had found his place in the group; he understood himself better; he became a leader. Although he still has occasional difficulties, he seems to have achieved the necessary insight to maintain a place in the group and to have overcome the need to retain defensive, anti-social behavior. (2, p. 52)

Due to the almost universal agreement among psychiatrists, psychologists, and other professional workers in child guidance work that the psychopath is "untouchable" by the most accepted methods of psychotherapy, and recognizing that the unsocialized aggressive boy has behavior patterns similar to the psychopath, there seems to be a need for a controlled study using play therapy with both the unsocialized aggressive boy and the socialized aggressive boy.

It has been assumed by Topping (26) that the socialized aggressive boy, who has a capacity for companionability, and has a well defined code of loyalty, will respond to relationship therapy, while the unsocialized aggressive boy lacks this ability for forming a relationship.

Data from studies by Merrill (18), Kvaraceus (14), Murphy, Shirley, and Witmer (19), show that the average age of referral for treatment of both the unsocialized aggressive and the socialized aggressive boy has usually been during adolescence. Therefore to be of help in identifying and treating these children, there is an advantage in focusing attention upon subjects at an age prior to adolescence.

The Problem

This study seeks to determine whether there is a difference in the behavior of these two groups of aggressive boys in a play therapy

situation, and whether there is a definable difference in the way in which they respond to play therapy.

Specifically will children who exemplify unsocialized aggressive behavior and those who show socialized aggressive behavior display different behavior in a play therapy situation?

CHAPTER II

PROCEDURE

Selection of Cases

This study is based on six cases. These cases were selected from referrals in the guidance files at the Oak Ridge Schools, Oak Ridge, Tennessee. Because of various manifestations of "aggressive" behavior these children had been referred to the visiting teacher by their teachers or by members of the Guidance Department. Three of the cases were chosen as representative of the unsocialized aggressive child and three as representative of the socialized aggressive child.

Age. All six children had chronological ages between 11-0 and 11-11. Age eleven was chosen for this study because, as shown by Kvaraceus:

It has been conclusively demonstrated in other cities that many of the most difficult offenders are those who start their criminal careers at an early age, usually age 12 or younger. (14, p. 36)

He cites a study of 761 cases referred to the Passaic Children's Bureau, Middlesex County, New Jersey, showing a sharp break between the 11 and 12 as the initial age for referral. Only 52 cases were referred at the age of 11 in comparison to 100 cases referred at the age of 12. Children of this age who show forms of aggressive delinquent behavior can be treated while they are still non-delinquent from a legal point of view, though maladjusted. This is preferable to delaying treatment until after an overt delinquent act occurs.

Sex. All six cases were boys. Studies of aggressive and delinquent children show that aggressive patterns of behavior are more common in boys than in girls. Kvaraceus (14, p. 35) found that the age and sex of children at first referral shows a ratio of one girl to three boys. Similarly, Merrill (18, p. 332) cites data concerning the age and sex of 300 delinquents, in which the ratio is one girl to four boys. Apropos of this viewpoint, Hewitt and Jenkins remark:

Either the problems for which children are referred to a guidance center occur somewhat one sidedly among the sexes than do acts which merit a court appearance; or the cultural norms which tend to protect girls from court appearances do not operate with the same intensity in preventing such girls from referred for clinical examination and treatment.

Support for this later explanation is found in Professor A. E. Wood's comment regarding the incident of court appearances among boys and girls, based upon similar series of statistics reported by the Children's Bureau. "Girl delinquents contribute from one-seventh to one-ninth of the total number, as measured by the statistics of the twenty-eight reporting courts. It would not be safe to assume, however, that the relatively small number of court appearances of delinquent girls indicates a corresponding absence of misbehavior. It is usually the policy of both the police and the agencies to treat unofficially all minor offenses of young girls to spare them the stigma of a court appearance. When girls are apprehended and brought to court, it is in most cases for some serious offense." (12, p. 20)

Intelligence. Each boy chosen had a Stanford-Binet I.Q. score "within normal limits," --i.e., within the range of I. Q. 90 to 110.

Community. All cases were selected from Oak Ridge elementary schools. Two of these cases were from the same school. The remaining four cases were from different schools.

The actual selection of the cases used in this study was made by the School Psychologist, Mr. Allen Hodges. The following steps were taken in determining the cases to be used:

1. Guidance personnel selected aggressive eleven year old boys to whom their attention had been called in the past and referred these children to the psychologist.
2. Teachers were asked to refer cases in which aggressiveness had been observed as well as cases where bad influences in the home and school might possibly contribute to the child's behavior.
3. Each case was examined and discarded when the age, sex, and I.Q. factor did not conform to the experimental design.
4. Case histories were obtained on the subjects satisfying the age, sex and I.Q. criteria, by a visiting teacher or guidance staff member who knew very little of the study design. The case history form used may be found in Appendix A.

The behavioral traits, as reported in the school, the home and the community were entered in the case history form and on the basis of this information, the selections were made.

Three of these cases were chosen because they showed the "situational" pattern and syndrome statistically found to be most indicative of the unsocialized aggressive:

- a. Assaultive tendencies.
- b. Initiatory fighting.
- c. Cruelty.
- d. Defiance of authority.
- e. Malicious mischief.
- f. Inadequate guilt feelings.

Three or more of the above symptoms were present before the subject was placed in the unsocialized category.

The other three cases were chosen because they showed the "situational" pattern characteristic of the socialized delinquent:

- a. Bad companions.
- b. Gang activities.
- c. Co-operative stealing.
- d. Furtive stealing.

- e. Truancy from home.
- f. Habitual school truancy.
- g. Staying out late at night.

At least three of these traits were required to be present before a classification of "socialized aggressive" could be made. Furthermore it was stipulated that one of the first three items must also be observed.

A third group, the "overinhibited," were differentiated statistically by Hewitt and Jenkins with the following traits given as symptomatic:

- a. Seclusiveness
- b. Shyness
- c. Apathy
- d. Worrying
- e. sensitiveness
- f. submissiveness

While not directly related to the present study, the symptoms of "overinhibited behavior" must be kept in mind so as to eliminate, as far as possible, individuals with symptoms of the overinhibited. The purpose was to isolate relatively "pure" cases of socialized and unsocialized aggressiveness.

Subjects Selected *

Name	Birthdate	Chronological Age	I.Q.
1. Brody	9/22/39	11-5	100

* The names of all subjects have been disguised to prevent identification.

Diagnostic Signs

Unsocialized aggressive		Socialized		Overinhibited	
a. Assaultive tendencies	/	a. Bad companions	-	a. Seclusiveness	-
b. Initiatory fighting	/	b. Gang activities	-	b. Shyness	-
c. Cruelty	/	c. Cooperative stealing	-	c. Worrying	?
d. Defiance of authority	/	d. Furtive stealing	?		
e. Malicious mischief	?	e. Truancy from home	-		
f. Inadequate guilt feelings	-	f. Habitual school truancy	-		
		g. Staying out late at night	-		
	4		0		0

Diagnosis: Unsocialized aggressive.

Name	Birthdate	Chronological Age	I.Q.
2. Bobby	10/10/38	11-10	104
Unsocialized aggressive	Socialized	Overinhibited	
a. Assaultive tendencies /	a. Bad companions -	a. Seclusiveness -	
b. Initiatory fighting /	b. Gang activities /	b. Shyness -	
c. Cruelty /	c. Co-operative stealing -	c. Worrying -	
d. Defiance of authority /	d. Furtive stealing -		
e. Malicious mischief -	e. Truancy from home -		
f. Inadequate guilt feelings /	f. Habitual school truancy -		
	g. Staying out late nights /		
5	2		0

Diagnosis: Predominately unsocialized

Name	Birthdate	Chronological Age	I.Q.
3. Johnny	8/30/38	11-5	91
Unsocialized aggressive	Socialized	Overinhibited	
a. Assaultive tendencies /	a. Bad companions -	a. Seclusiveness /	
b. Initiatory fighting /	b. Gang activities -	b. Shyness -	
c. Cruelty /	c. Co-operative stealing -	c. Worrying -	
d. Defiance of authority /	d. Furtive stealing -		
e. Malicious mischief ?	e. Truancy from home -		
f. Inadequate guilt feelings /	f. Habitual school truancy -		
	g. Staying out late nights -		
5	0		1

Diagnosis: Unsocalized.

4. Buster	10-10-38	11-4	93
Unsocialized aggressive	Socialized	Overinhibited	
a. Assaultive tendencies ?	a. Bad companions /	a. Seclusiveness -	
b. Initiatory fighting ?	b. Gang activities /	b. Shyness -	
c. Cruelty -	c. Co-operative stealing -	c. Worrying -	
d. Defiance of authority -	d. Furtive stealing -		
e. Malicious mischief ?	e. Truancy from home -		
f. Inadequate guilt feelings -	f. Habitual school truancy 1/		
	g. Staying out late nights -		
0	3		0

Not habitual school truancy, but will skip school whenever an opportunity is given.

Diagnosis: Socialized aggressive.

Name	Birthdate	Chronological Age	I.Q.
5. Basil	4/13/38	11-10	103

Unsocialized aggressive	Socialized	Overinhibited
a. Assaultive tendencies -	a. Bad companions /	a. Seclusiveness -
b. Initiatory fighting -	b. Gang activities /	b. Shyness -
c. Cruelty -	c. Co-operative stealing /	c. Worrying -
d. Defiance of authority /	d. Furtive stealing /	
e. Malicious mischief ?	e. Truancy from home -	
f. Inadequate guilt feelings -	f. Habitual school truancy -	
	g. Staying out late nights /	
1	5	0

Diagnosis: Socialized aggressive

6. Cyril	2/29/39	11-2	91
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Unsocialized aggressive	Socialized	Overinhibited
a. Assaultive tendencies -	a. Bad companions /	a. Seclusiveness -
b. Initiatory fighting /	b. Gang activities /	b. Shyness -
c. Cruelty -	c. Co-operative stealing /	c. Worrying -
d. Defiance of authority -	d. Furtive stealing /	
e. Malicious mischief -	e. Truancy from home -	
f. Inadequate guilt feelings -	f. Habitual school truancy -	
	g. Staying out late nights -	
1	4	0

Diagnosis: Socialized aggressive

TABLE I

SOCIALIZED AND UNSOCIALIZED AGGRESSIVE PAIRS MATCHED
IN RESPECT TO CHRONOLOGICAL AGE AND I.Q.

Pair No.	C.A.		I.Q.	
	Soc.	Unsoc.	Soc.	Unsoc.
1	11-4	11-5	10-6	11-5
2	11-10	11-10	12-2	12-10
3	11-8	11-5	10-8	10-4

Testing

At the beginning of the study each child was rated on a Haggerty-Olson-Wickman Behavior Rating Schedule. (10) This particular rating scale was used because it tends to focus attention upon behavior of an aggressive type. Also each teacher made a brief, informal essay type behavior rating on each child.

A final rating was made by the teacher on the behavior of each child at the end of the ten week period. Again, the Haggerty-Olson-Wickman Behavior Rating Schedule was used. The teacher also made a brief informal statement regarding any changes in the child's behavior in the classroom.

The Play Therapy Procedure

Each child was seen in individual play therapy sessions of thirty minutes duration twice a week for a period of ten weeks. The term play therapy is used in the sense as defined by Axline:

Non-directive play therapy may be described as an opportunity that is offered to the child to experience growth under the most favorable conditions. Since play is his natural medium for self expression, the child is given opportunity to play out his accumulated feelings of tension, frustration, fear, bewilderment, confusion.

By playing out these feelings he brings them to the surface, gets them out in the open, faces them, learns to control them, or abandons them. When he has achieved emotional relaxation, he begins to realize the power within himself to be an individual in his own right, to think for himself, to make his own decisions, to become psychologically more mature, and by so doing, to realize selfhood. (2, p. 16)

The room set aside as a play room could not be the same for all the cases due to the fact that the six cases were located in five

different schools. In one school the Health Clinic was used, in two of the schools there was a regular conference room which was used, and in the other two schools a temporary building apart from the school building was used. In all the situations, however, an effort was made to remove the "school atmosphere" by having an informal arrangement of low tables and chairs.

The play room was a room in which the child was the most important person, where no one told him what to do, no one criticized him for what he did, and no one pried into his private world. In this room his rights were treated with respect and dignity. He was accepted completely regardless of what he said, what he did, or how he felt.

The play materials, consisting of: clay, crayons, paper, bubbles, finger paints, building blocks, gun, rubber knife, dolls (both plastic and wooden wedgies) anagrams, chinese checkers, peg hammer board, a map puzzle of the United States, were placed on the tables before the child came into the room. The finger paints and drawing material were on one table, the dolls, clay, knife, gun, car and bubbles were on another table and the other materials were on the third table. Round tables were used wherever available. There was a low chair near each table, and the therapist sat in another low chair slightly apart so as not to be identified with either table of material.

The therapist attempted to be as relaxed as possible in order to promote a warm friendly atmosphere. She was permissive and accepting at all times, respecting the child and treating him with dignity. No attempt was made to pass moral judgment on the child, to treat

symptoms, to change his behavior by exhortation, or to hurry him. Strict adherence was maintained to the principle that what he said or did during the hour was confidential. The therapist attempted to convey to the child that his well being was important to her.

Observation And Record Procedures

During the time the child was in the room, the therapist took no written notes. The speech and actions were carefully observed, and recording was made immediately after the child left the room. An effort was made to reproduce on paper as nearly as possible exactly what had taken place while the child was in the play room.

CHAPTER III

FINDINGS

Quantitative Findings

Protocols were prepared for each of the 20 play interviews for each of the six children. There were 119 protocols, rather than 120 because one child, Bobby, missed one of his interviews. The statistical analysis of data was based upon these protocols. Four primary aspects of these data were analyzed.

1. The frequency with which different play objects were manipulated by the children.
2. The frequency and specific targets of "hostile" acts displayed in manipulating the material.
3. The degree of verbal output during the play sessions.
4. The frequency and specific targets of "hostile" remarks made during the interviews.

Table II shows the frequency with which different play objects were "manipulated" by each child during the course of 20 play interviews. For example, Brody, an unsocialized aggressive boy, did something with a play object 29 times. Of these 29 manipulations, 12 were with clay. On the other hand, Buster, a socialized aggressive boy did something with objects 55 times, only 7 of which involved clay, whereas 14 manipulations were with checkers. The unsocialized aggressive group as a whole showed a total of 110 object manipulations; the socialized aggressive group showed a total of 192 such behaviors. In general, in all therapy sessions clay was the most commonly chosen play object. This holds true for both socialized aggressive and

TABLE II

FREQUENCY WITH WHICH DIFFERENT PLAY OBJECTS WERE
 "MANIPULATED"* DURING THE COURSE OF 20 PLAY INTERVIEWS

	Anagrams	Blocks	Bubbles	Car	Clay	Checkers	Dolls	Drawing	Finger Paint	Gun	Knife	Map puzzle	Ring Toss	
Brody	2	2	1	0	12	4	0	2	0	1	0	5	0	29
Bobby	1	0	2	1	10	1	2	1	0	6	3	3	4	34
Johnny	0	1	7	2	9	1	5	1	2	4	0	11	4	47
Unsoc. Total	3	3	10	3	31	6	7	4	2	11	3	19	8	110
Buster	2	5	8	1	7	14	4	0	3	5	1	3	2	55
Basil	12	3	5	4	11	3	10	5	4	6	1	11	6	31
Cyril	2	2	2	1	4	9	5	9	2	7	4	4	5	57
Soc. Total	16	10	15	6	22	26	19	14	9	18	6	18	13	192
Total	19	13	25	9	53	32	26	18	11	29	9	37	21	302

* By "manipulation" is meant object was picked up and something was done with it.

unsocialized aggressive groups. On the other hand, for the combined groups the car and knife were the least used objects. This infrequency of use, however, is not consistent for the separate groups.

Table III shows the "t" values (17, p. 59) for differences in frequency of manipulation of specific play objects by socialized and unsocialized members of pairs. Inspection of Table II would superficially seem to indicate that there might be a significant difference between the two groups in their choice of different play objects. For example checkers were chosen only 6 times by the unsocialized aggressive group and 26 times by the socialized aggressive group. One might also have assumed that there would be some significance in the fact that the socialized aggressive group manipulated objects in play sessions almost twice as frequently as did the unsocialized aggressive groups. "T" values, however, as shown in Table III indicate that these differences are not significant at either the 1 or 5 per cent levels.

Table IV shows the number and targets of "hostile" acts displayed in manipulation of materials. The term "hostile act" is used in the sense as in the article of this title by David Levy (16). This term includes such acts as: hammering the clay, wrecking the car, throwing the clay, twisting the legs of the dolls, shooting the dolls, making a human symbol of clay and destroying it, drawing or painting a caricature of the teacher, turning his back to the therapist, throwing the marbles, knocking over the blocks, kicking the bubbles, stabbing at self or object with the knife, and other similar

TABLE III

"t" VALUES FOR DIFFERENCES IN FREQUENCY OF MANIPULATION OF SPECIFIC
PLAY OBJECTS BY SOCIALIZED AND UNSOCIALIZED MEMBERS OF PAIRS

Objects	"t"
Checkers	2.792
Car	2.602
Finger paint	1.840
Dolls	1.731
Blocks	1.540
Clay	1.500
Anagrams	1.270
Drawing	1.134
Gun	1.078
Map puzzle	.680
Knife	.577
Ring toss	.564
Bubbles	.482
Total	2.579

With d.f.2 require 9.925 at the 1 per cent level,
and 4.303 at the 5 per cent level.

TABLE IV

NUMBER AND TARGETS OF "HOSTILE" ACTS
DISPLAYED IN MANIPULATION OF MATERIALS

	Therapist	Self	Human Symbols	Inanimate Objects	Total	
Brody	0	0	0	16	16	
Bobby	1	2	6	6	15	<u>Unsocialized</u> <u>Aggressive</u>
Johnny	2	0	14	15	31	
Unsoc. Total	3	2	20	37	62	
Buster	0	0	3	15	18	
Basil	0	0	7	16	23	<u>Socialized</u> <u>Aggressive</u>
Cyril	0	1	14	11	26	
Soc. Total	0	1	24	42	67	
	3	3	44	79	129	

activities. "Target" refers to the object against which this hostility is directed. Naturally there can be a variety of such targets. For the purpose of this study, however, the targets were classified into the following categories: therapist, self, human symbols, and inanimate objects. Table IV shows that Johnny, an unsocialized aggressive boy showed 31 hostile acts in the course of his 20 play sessions. In general there seems to be little difference between the two groups in terms of the targets against which the hostility was directed. This is substantiated by the "t" values given in Table V, none of which is significant at either the 1 or 5 per cent level.

Table VI shows the number of play interviews sorted perforce with respect to 5 levels of verbal output. In order to objectify the rating of verbal output, 5 arbitrary categories of verbal output ranging from extremely low to extremely high were prepared. This was done in such fashion as to force the sorting of the protocols into 5 categories, each with an equal number of cases. It will be noted from the bottom of Table VI that with the exception of 23 cases in one interval, the other 4 intervals have an equal number of 24 protocols. Inspection of the data in this table indicates, however, that the frequency within each category differs markedly between the socialized aggressive and the unsocialized aggressive cases. For example, none of the unsocialized aggressive cases was classified as "extremely low" in verbal output and only one as "moderately low." On the other hand, all 24 protocols classified as "low" were those of the socialized aggressives

and 23 out of 24 protocols classified as "moderately low" were from socialized aggressive cases. Note, however, that at the "extremely high" category all 24 protocols were those of the unsocialized aggressives, and that 20 out of 23 of those classified as moderately high were unsocialized aggressive cases. In order to provide a simple quantitative measure of verbal output for each child, a single index was computed by adding for each child the products of category values and the frequency of interviews classified under each category. For example, the verbal output index of 79 for Brody was computed by adding 1 times 0 plus 2 times 1 plus 3 times 8 plus 4 times 2 plus 5 times 9. The sum of the verbal output of the unsocialized aggressive group is 244, more than twice that of the socialized aggressive group, which is 112. The significance of these data is shown in Table VII where a "t" test on differences between paired cases yields a value of 17.34. This is highly significant because with d.f.2, only 9.925 is required for significance at the 1 per cent level. From this we can conclude that within the framework of the observations made here, the unsocialized aggressive boys tend to be significantly more verbal than the socialized aggressive boys.

Table VIII shows the number and targets of "hostile" remarks. The hostile verbalization of the two groups in the play sessions could be described as: complaining about the weather, the school rules, their siblings getting the "favors," others "picking" on them, their mothers not allowing them to play or go places, and somatic ailments. During the 20 play sessions Brody, an unsocialized aggressive boy

TABLE V

"t" VALUES FOR DIFFERENCES IN FREQUENCY OF "HOSTILE" ACTS
BETWEEN SOCIALIZED AND UNSOCIALIZED MEMBERS OF PAIRS

Target	"t"
Therapist	1.745
Human symbols	1.095
Inanimate objects	.397
Self	.364
Total	.414

With d.f.2 require 9.925 at the 1 per cent level,
and 4.303 at the 5 per cent level.

TABLE VI

NUMBER OF PLAY INTERVIEWS SORTED PERFORCE
WITH RESPECT TO 5 LEVELS OF VERBAL OUTPUT

VERBAL OUTPUT RATING*							
Subjects	Extremely Low(1)	Moderately Low(2)	Average (3)	Moderately High(4)	Extremely High(5)	Total Number of Play Interviews	Verbal Output Index**
Brody	0	1	8	2	9	20	79
Bobby	0	0	2	8	9	19	83
Johnny Unses.	0	0	4	10	6	20	82
Total	0	1	14	20	24	59	244
Buster	9	6	4	1	0	20	37
Basil	8	10	2	0	0	20	34
Cyril See.	7	7	4	2	0	20	41
Total	24	23	10	3	0	60	112
Total	24	24	24	23	24	119	356

* In order to make objective the rating of verbal output, the following procedure was devised. The 119 protocols were shuffled in random order. The writer then read each protocol, and rated it on a five-point rating scale with respect to degree of verbal output. Category "1" indicates little or no talking during the interview; whereas category "5" indicates a high amount of talking during the interview. Categories 2, 3, and 4 define intermediate steps on this same continuum.

** Index computed by adding for each child the products of the category values (i.e. 1, 2, 3, 4 or 5) and the frequency of interviews classified under each category.

showed 24 instances of "hostile" remarks of which 11 were directed against peers. On the other hand, Buster, a socialized aggressive boy, showed only 5 hostile remarks, of which 2 were directed against peers. The total number of hostile remarks for all the targets was higher for the unsocialized aggressive group than for the socialized aggressive group. The largest difference in scores was for peers and inanimate objects. It would seem on cursory examination of the data in this table that there would be a significant difference. Table IX, however, gives "t" values for these scores and shows no significant differences between the groups at either the 1 or 5 per cent level.

In order to obtain some estimate of changes in behavior of the cases before and after therapy, two kinds of data were collected. First, the children were rated by the teachers on both parts A and B of the Haggerty-Olson-Wickman Behavior Rating Schedules. Second, the teachers made a brief informal report of each child's behavior in January and again in June. These informal ratings may be found in Appendix B.

Schedule A, of the Haggerty-Olson-Wickman Behavior Rating Schedule, is designed to locate problem children through a record of overt behavior problems, while Schedule B, covers personal observations on a variety of traits regardless of whether or not the behavior described would be called a behavior problem. The amount of each trait in Schedule B has been assigned a weighting in terms of its relationship to Schedule A. An analysis of results of the use of the scales reveals a tendency to emphasize behavior of an aggressive type. The

TABLE VII

VERBAL OUTPUT INDEX OF PAIRED CASES

Pair No.	Unsocialized	Socialized	Difference
1	79	37	-42
2	83	34	-49
3	82	41	-41

$$t = 17.34$$

With d.f.2, require 9.925 at the 1 per cent level

TABLE VIII

NUMBER AND TARGETS OF "HOSTILE" REMARKS

	Therapist	Self	Mother	Father	Siblings	Peers	Teachers	Other Adults	Inanimate Objects	Total
Brody	2	0	0	0	4	11	0	3	4	24
Bobby	2	5	7	4	0	14	9	10	20	71
Johnny	3	4	6	0	2	4	2	1	10	32
Unsoc. Total	7	9	13	4	6	29	11	14	34	127
Buster	2	0	0	0	0	2	0	0	1	5
Basil	0	2	0	0	0	0	1	0	2	5
Cyril	1	0	2	1	5	1	1	6	2	19
Soc. Total	3	2	2	1	5	3	2	6	5	29
Total	10	11	15	5	11	32	13	20	39	156

TABLE IX

"t" VALUES FOR DIFFERENCES IN FREQUENCY OF "HOSTILE" REMARKS
DIRECTED AGAINST SPECIFIC TARGETS, FOR SOCIALIZED AND UN-
SOCIALIZED MEMBERS OF PAIRS

Target	"t"
Peers	2.725
Therapist	2.003
Mother	1.313
Teacher	1.192
Self	1.167
Father	.621
Other adults	.614
Siblings	.189
Total	3.303

With d.f.2, require 9.925 at the 1 per cent level,
and 4.303 at the 5 per cent level.

significance of a score is not clearly revealed by its actual size. Its interpretation is relative to the mean score of the group studied. For this reason it is not easy to use the individual scores to measure improvement unless their relative character is recognized. A sample Behavior Rating Schedule form may be found in Appendix C.

For each child, the total Haggerty-Olson-Wickman score for Part A and Part B taken separately was calculated for the before-therapy and after-therapy ratings. In each case, a high score suggests a higher degree of behavior problems. Table X compares the scores of the matched pairs on Rating Schedule A for before and after therapy. Table XI provides a similar comparison for the scores on Rating Schedule B. Table XII shows the "t" values for the differences on the scores of the Haggerty-Olson-Wickman Behavior Rating Schedules, A and B Schedules taken separately, for both the socialized aggressive and unsocialized aggressive groups.

None of these "t" values is significant at the 5 per cent level. It therefore cannot be stated with assurance that in terms of rating schedule scores, any of these six children benefited materially from the play therapy. It is possible, of course, that a ten week period is insufficient to produce changes of a magnitude which can be measured with an instrument as gross as this particular scale. It is also possible that the effects of such treatment may not become clearly evident until some time after the immediate completion of therapy. The possible equivocal character of these rating schedule scores is suggested by the fact that the informal anecdotal reports show benefits from the play therapy in five cases out of six.

TABLE X

COMPARISON OF SCORES ON HAGGERTY-OLSON-WICKMAN BEHAVIOR
RATING SCHEDULE A* FOR PAIRS BEFORE AND AFTER THERAPY

Pair No.	Unsocialized		Socialized	
	Before	After	Before	After
1	102	88	54	50
2	71	50	85	41
3	156	79	82	44

* A high score suggests a higher degree of "behavior problems."

TABLE XI

COMPARISON OF SCORES ON HAGGERTY OLSON-WICKMAN-BEHAVIOR
RATING SCHEDULE B* FOR PAIRS BEFORE AND AFTER THERAPY

Pair No.	Unsocialized		Socialized	
	Before	After	Before	After
1	101	88	86	79
2	93	108	120	89
3	101	75	101	92

* A high score suggests a higher degree of "behavior problems."

TABLE XII

"t" VALUES FOR DIFFERENCES ON HAGGERTY-OLSON-WICKMAN
BEHAVIOR RATING SCHEDULES, A AND B SCORES SEPARATELY

	"t"
Unsocialized vs Socialized <u>before</u> therapy Schedule A	.053
Unsocialized vs Socialized <u>before</u> therapy Schedule B	.325
Unsocialized vs Socialized <u>after</u> therapy Schedule A	2.968
Unsocialized vs Socialized <u>after</u> therapy Schedule B	.153
Unsocialized <u>before</u> and <u>after</u> therapy Schedule A	1.873
Unsocialized <u>before</u> and <u>after</u> therapy Schedule B	.751
Socialized <u>before</u> and <u>after</u> therapy Schedule A	2.300
Socialized <u>before</u> and <u>after</u> therapy Schedule B	2.032

With d.f.2, require 9.925 at the 1 per cent level,
and 4.303 at the 5 per cent level.

It is recognized that a "t" value is or is not significant at the level of confidence prescribed, (i.e. 5 or 1 per cent) and that comparisons of values below that which is required for such significance can be misleading. Nevertheless a comparison of certain values in Table XII is highly suggestive. First, it is evident that no significant difference is present between the two groups before therapy. Second, such changes as take place in the unsocialized aggressive group are revealed more on the A Schedule than on the B Schedule. On the other hand, such changes as take place in the socialized aggressive group are manifested with approximately equal force on both Schedule A and B.

Supplemental Qualitative Observations

The major quantitative finding was the significant difference in the amount of verbal output between the two groups. The unsocialized aggressive group showed a significantly higher degree of verbalization than the socialized aggressive group. The "t" value for this verbal output is 17.34 which is significant at the 1 per cent level. In addition to this quantitative finding, however, certain additional qualitative differences between the groups were noted.

The outstanding differences displayed by the two groups, with the exception of the amount of verbalization, were differences in attitudes. They differed in their attitude toward the therapist, the play materials and the whole therapeutic process.

The behavior of the unsocialized aggressive group, characterized by much aggressive talking, an effort to "manipulate" the

situation or "use" the therapist, a masked desire for acceptance, a sense of having a hard life, and of being faced with unequal odds, coincides with some characteristics listed by Topping:

-
- 2. An evident and verbalized sense that "nobody cares."
- 3. A masked but acute desire for acceptance and affection.
.....
- 6. Aggressive speech with much talk of killing.
- 7. A sense of having a hard life, of being faced with unequal odds. (25, pp. 485-492)

As pointed out by Hewitt and Jenkins (12) there was an evident need for strict enforcement of limits in the "treatment" of these boys.

With the socialized aggressive group, there was a noticeable absence of "tattling" or reporting acts by their peers. They were also able to enter into the play situation with less suspicion, and to respond to being treated as an individual capable of making decisions affecting them. In this loyalty to their in-group and their ability to establish a relationship, they responded in a way similar to cases cited by Topping:

Even with these pseudo-social boys, therefore, rapport can be achieved through the usual "accepting" techniques, friendly comment, expression of interest, appeal to love of fair play, sense of humor and a flair for logic. It is important above all to accept this type of boy on terms of equality as an adult well entitled to his viewpoint.

.....
In conclusion it may be said that the fundamental socialization of the pseudo-social boy and capacity for loyalty provide the ace cards for wider adjustment.
(26, pp. 353-360)

There was a difference in the way the two groups used such creative materials as clay, finger paint and blocks. Typical of the play with clay by the unsocialized aggressive boys was: Modeling guns and

Indian warriors, using the clay to throw at objects, and smashing, hammering or twisting the clay with no attempt at construction. The socialized aggressive boys spent more time in creating human symbols and inanimate objects. Only one of the unsocialized aggressive boys did any finger painting. Johnny, an unsocialized aggressive case, on one occasion made a quick smear of red paint on the paper and hurriedly put the paper in the waste basket. During another session, he made a painting which he called a cyclone. He also threw this away quickly. On the other hand, all three of the socialized aggressive boys painted such things as flowers, people, animals, and similar objects. The unsocialized aggressive boys piled the blocks and threw objects at them to make them fall down, or else kept piling them so high that they fell down. The socialized aggressive boys, however, did more building of low sturdy buildings. This difference in the use of "creative" materials is shown in Appendix D in the cases of Bobby and Basil, a matched pair.

In the play with dolls, there were differences both in the kind and amount of play. Of the unsocialized aggressive group, Brody didn't play with the dolls at all, Bobby picked them up and talked of their resemblance to teachers he knew, and Johnny allowed the dolls to be killed in a traffic accident. With the socialized aggressive group, all three boys played more aggressively, twisting the doll's legs, and frequently killing them. The socialized aggressive boys assumed the responsibility for the killing, whereas the unsocialized aggressive boy tended to let it be accidental. An illustration of this difference is shown in Appendix E, in the cases of Johnny and Cyril, a matched pair.

Some of the differences shown between the two groups in acts of "hostility" were described in the way the two groups played with the dolls and the clay. The outstanding difference it would seem was in the way the socialized aggressive boys were able to assume responsibility for the overt action, whereas the unsocialized aggressive boys let the act happen. During the last few minutes of the last session all three of the socialized aggressive boys turned their back to the therapist, whereas the unsocialized aggressive boys "filled up" the time by talking hurriedly until the last minute.

There was a great amount of difference in the two groups from the first session in both the kind and amount of verbal output. There tended to be, on the part of the unsocialized aggressive boys, an urgency to "fill up" all the time with talk. It was almost as if they couldn't bear a period of silence. On the other hand, with the socialized aggressive boys, there were times when as much as fifteen minutes passed without any words spoken. More frequently, the socialized aggressive boys acted out a scene, whereas the unsocialized aggressive boys talked about a situation. The unsocialized aggressive boy often talked about the personal possessions of his family and about the acts of his peers. He frequently blamed his peers for the situation in which he found himself. All three of the unsocialized aggressive boys asked numerous questions, seemingly in an attempt to "try out" or "use" the therapist. The unsocialized aggressive boys also had numerous somatic complaints. An illustration of this

difference in verbal output is shown in Appendix F, in the cases of Brody and Buster, a matched pair.

The verbal hostility expressed by the unsocialized aggressive group could be described as complaining about their lot. This was true particularly in their blaming others for the situations in which they found themselves. Their boasting of personal possessions, and of their "good deeds" seemed to be an effort to impress the therapist of their "worth" in comparison to their peers. There was much less verbal hostility expressed by the socialized aggressive group, and this was chiefly directed against the formal rules of the school. There was some implied hostility toward siblings and mother, but not to the extent expressed by the unsocialized aggressive group.

The ratings by the teachers, both on the Haggerty-Olson-Wickman Behavior Rating Schedules and the essay report, showed some improvement in five of the six cases. Bobby, an unsocialized aggressive boy, and the only boy of the six not showing improvement on the ratings by the teacher, moved and changed schools just before the therapy sessions started. There is a possibility that if the ratings had been made by the same teacher the results reported would have been different. The essay reports made by the teachers for the six children before and after therapy may be found in Appendix B. The teachers were asked to describe the behavior of the child as she saw it at the time of rating. The before-therapy ratings included such behavior as: picks up whatever he happens to need or wants, usually chooses younger children and goads them to fight each other, he is happy as long as he gets his way,

has little regard for school property, when corrected he becomes defiant and wants others punished. Some of the reported changes in the after-therapy ratings were: more relaxed attitude, less defiant, less clowning for attention, more self controlled, more interest in socially accepted group activity, more courteous, and gets along better with others in the group.

It is recognized that any reported change in the behavior may have resulted from numerous factors. It is also recognized that any behavior changes may be temporary, since it will take a much longer period of observation of these children to determine their future adjustment. It would seem to the writer, however, that such evidence of changed behavior as reported by the teachers, - a more relaxed attitude, better social adjustment, less open defiance, and more group activities of a more socially accepted nature - would tend to change the child's self concept thus enabling him to "inherit" himself. A statement by Snygg and Combs emphasizes this point: "If threat can be removed for even a short period of time, positive changes are possible to the client." (22, p. 303) This is the very essence of the play therapy situation - that the child is placed in a social situation in which he may feel relatively free of threat.

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APPENDICES

LAVERGNE (S-2)

APPENDIX A

FORM USED IN SECURING CASE HISTORY

Name _____ Grade _____

School _____ Date of birth _____

Place of birth _____

Parent's name _____

Address _____ Phone _____

I. Family background

1. Father: age _____ Nationality _____

health _____ Occupation _____

education _____ Language spoken _____

2. Mother: Age _____ Nationality _____

Health _____ Occupation _____

Education _____ Language spoken _____

3. Strained relationships or insecurity in the home.

4. Do parents agree on methods of training the children?

5. Attitude of parents toward community.

6. Attitude toward school.

7. Kind of home _____

8. Number of rooms _____ No. in family _____

9. Names and ages of children.

10. Reading materials, games, and musical instruments in the home.

11. Other pertinent information about the home.

II. Health

1. Children's diseases (history and dates)

measles _____ tonsillitis _____

whooping cough _____ others _____

mumps _____

scarlet fever _____

2. Any ill effects?

3. Vision (a) Right eye _____ (b) Left eye _____

(c) Wears glasses _____ Corrected to what

R. _____ L. _____

4. Hearing: Right ear _____ Left ear _____

5. Nutrition (if noticeably low)

Muscle tone _____ Color _____

Buoyancy _____ Physique _____
6. Posture _____
7. Teeth (general condition) _____
8. Physical defect which may cause emotional disturbance.
9. Tonsils and throat condition _____
10. Other factors:

III. School history

1. Age when entering school _____
2. Attended nursery school _____ Kindergarten _____

Where _____
3. Schools attended _____ Where _____ Date _____

4. Grades failed _____ Grades skipped _____
5. Record of long absences or any irregularity in attendance.
6. Attitudes toward his school.

(a) Strong likes or dislikes _____

(b) Indifferent _____

11. Furtive stealing _____
12. Malicious mischief _____
13. Habitual school truancy _____
14. Inadequate guilt feelings _____
15. Staying out late at night _____

VII. Scholastic adjustment

Achievement Test Results _____

VIII. Learning Problems

Characterize

- | | |
|------------------|-------|
| 1. Speech _____ | _____ |
| 2. Reading _____ | _____ |
| 3. Others _____ | _____ |

IX. Summary of Problem

Evidence

1. Major difficulties

2. Minor difficulties

X. Proposed Procedures:



APPENDIX B

ESSAY RATINGS BY TEACHERS BEFORE AND AFTER THERAPY

Brody, An Unsocialized Aggressive Boy

Before. In the class room Brody continually bids for attention. He bothers other people and their belongings. When a child misplaces a book, his first thought is to go see if Brody has "borrowed" it. It doesn't seem to be that he steals, but that he casually picks up whatever he happens to need to use, whether he owns it or not. Perhaps this too is a bid for attention. He brought much trouble on himself recently by telling a little girl he had taken the ball he was playing with from her boy friend's desk. Whether he really did or not is very doubtful.

He is naturally rather funny, and will do anything to get a laugh from the crowd.

He threatens to beat up smaller boys. Several times a guard (small mob) has formed outside the school door to escort one of his announced victims home and prevent Brody from harming the child, though he might not do much real harm.

He seems to desire the teacher's approval but does not know how to ask for it in acceptable ways.

After. Brody has settled down a great deal since the first of the year. His desire for attention manifests itself more often by bringing completed papers to the teacher's desk to be praised, and much less often by clowning.

He is especially eager to succeed in Arithmetic, and has worked very hard. His progress is discouraging at times but he is so thrilled over any small success that it is pleasant to work with him.

He still is very voluble, but does show more self control than he did the first of the year. He is very easily influenced either to be good or to disturb. On the whole, he is an enjoyable pupil now.

Buster, A Socialized Aggressive Boy

Before. Buster is an accepted leader of the group, possible due to his size and ability to persuade. He is happy as long as things are going to his liking, but he loses his temper quickly and is apt to break out in very unbecoming language if the teacher is not present. He curses fluently (I have been told.) He doesn't like to wait his turn and occasionally pushes and shoves to get where and what he wants. He does good school work; reads especially well and uses the library extensively.

After. Buster has made a complete right-about-face in his behavior pattern. The change was very gradual but it has been noticeably improved for the past three weeks. There was a period, before the improvement started, when "impossible" was the only way to describe his attitude toward me, his classmates and his work.

The greatest change has come in his seeming so much more relaxed in every way. He takes correction with a grin and there has been more interest in group activity. Earlier in the year he didn't

work so well with a group; he chose to work alone or with a buddy and do something entirely foreign to the activity.

He has shown definite traits toward a keen sense of humor. He doesn't act like a seething mass of something about to explode, but will calm down with a word and not take violent offense. He is still full of mischief but his energies seem to be directed in less "harmful" channels. (By harmful I mean having no regard for anyone else's feelings) Truly he has become more satisfactory and a cooperative member of the group.

Bobby, An Unsocialized Aggressive Boy

Before. Bobby has caused a great deal of disturbance in my room. It is not the fights he participates in but the little things, such as making a noise with his mouth or hitting the floor or desk. He tries to look innocent when I look his way.

He is a thin boy and has had a cold for a good part of the past two months. He was in school some days when he should have been in bed.

He goes in cycles of good and bad behavior. I spend a great deal of my time talking with him. After I have paid a great deal of attention to him, he is alright for a while, but he soon goes back to his troublesome ways.

He is a likeable child and really wants to be liked. In some things, he doesn't show much intelligence, while at times he surprises me and picks up a lot of information. His information doesn't come much from books but from experience.

I have heard that Bobby may move to another school on the area after Christmas.

After. Bobby is unpredictable. Some days he goes ahead and conforms to all activities of school just fine, but on others he has to be called down quite frequently. At these times he is a very disturbing element.

Since he has come to this school, he has grown worse than at first. His work has shown a decline. He isn't interested in sticking to any job until it is completed - often hurries through to completion without any care as to correctness or appearance.

If he is carefully supervised in every activity, he seems to get along nicely. In a conference recently, he remarked that he became nervous and did not like to stick to things too long. Sometimes he will do nothing but read and gets along nicely. He enjoys doing things to get the children to laugh or notice him.

Basil, A Socialized Aggressive Boy

Before. Basil continually talks aloud and creates disturbances in the room. When he is corrected, he becomes defiant and wants others to be punished. He shows practically no interest in school work. He enjoys playing with knives, any kind of toys, and puzzles. He tries to stay out of Music and Gym. classes. Several times he has slipped back to the classroom while the others were in Music or Gym. He has little regard for school property. Other children do not like to sit by him because he talks to them too much. Several have objected

to his obscenity. He has been suspected of stealing in the school, but we do not know if he is really guilty. He has admitted stealing outside of school.

When I have tried to talk to him about those problems he has been insolent. He always talks back if he is corrected.

Basil enjoys reading stories and has made some good book reports. Once he brought a frog to school and at another time he brought a potato plant. Once he played records for the class.

He likes parties but is loud and aggressive and pays little attention to rules of games when we have parties.

After. Basil's behavior has certainly improved. He is much less antagonistic, much more cooperative and courteous, and he is seldom saucy or defiant. He seems to be happier generally. For about a month he has been concerned with passing to the next grade and has made quite a show of studying.

Of course his conduct is not perfect. He has recently hidden in the boy's room to keep from going to Gym., has pretended to have to stay at home with his little sister in the afternoon, and has instead gone to the riding academy, and has brought a note he had written and signed with his mother's name. He is not so disturbing in the room however, and generally his attitude and behavior are much better.

Johnny, An Unsocialized Aggressive Boy

Before. In the classroom Johnny showed few signs of overt aggressive behavior, however he did little things to get attention. His behavior is very babyish at times. He has made very little

progress this year in his academic work, and has to be reminded constantly to finish his work.

He is pretty much a lone wolf with few friends. He usually chooses younger children and goads them to fight each other. About two weeks ago, he tied up a younger child, and holding a knife over him, threatened to kill him. It was thought by some of the neighbors that Johnny was responsible for some aggressive sex play in the community. A worker in the Family Service Bureau attempted to counsel with the mother but got very little response. The mother is defensive and becomes angry at any suggestion that Johnny may have done anything wrong.

After. Johnny's progress during the calendar months of this academic year (January to June, inclusive) has been very gratifying. His relationships with other children in the community, including his peers, has grown almost remarkably. He no longer is engaged in numerous fights that was once his pattern of behavior. I have seen him acting in a rude fashion only once and that was with the housekeeper of one of the families in the neighborhood.

He still plays cowboy games with some of the six to eight-year old children in the neighborhood. Generally speaking, he is the "General" and the leader of the group. The younger children like to be his horse, and so long as he can direct the activities he probably enjoys playing with this group of children.

He also has been playing baseball and softball with a group of boys his own age, and in this he can excel. He does have some ability

in this sport. Generally speaking, his attitude toward the children and his peers in the group is good. He is, however, sometimes inclined to petulant. This interferes with effective leadership.

Although he still behaves in a somewhat immature fashion, he is capable of using very good judgment. His childish pranks are not as frequent as they once were. There is a great need of careful watching of Johnny yet on the part of both the school and the home lest he show a reversal to his old behavior patterns. In many respects his mother still treats him as a small child. She does, however, keep him neatly dressed and his clothes clean. This may be the reason for his usually neat appearance. Johnny has a bicycle and usually spends a great deal of time on his bicycle riding to and from the playground and to and from the swimmingpool, I suppose as well as other places. At the playground in ball games he is with a group more nearly his own age and as far as I know he gets along very well with this particular group.

Cyril, A Socialized Aggressive Boy

Before. Cyril is a very immature child for his age. He can always find something to giggle about when the other children see nothing funny.

He behaves very nicely when the teacher is in the room but has a tendency to misbehave when left alone with other children. Jealousy may account for part of this, then too he doesn't have too many friends except his cousin. Since they are not allowed to visit each other's homes, they are very "chummy" at school.

Cyril does satisfactory work in all his studies. His speech defect slows down his rate of reading (oral reading). He seems to have a clear understanding of what he reads when he reads silently. He is accepted much better by the group than at the beginning of the year.

After. Cyril is still rather immature in some of his actions, but has shown much improvement socially. He gets along much nicer with the other boys and girls in the class. At times he is critical of other people and the things they say and do. He seems to want to improve himself and tries hard. His language seems to have improved too. He still requires much attention and individual help.

APPENDIX C

HAGGERTY-OLSON-WICKMAN BEHAVIOR RATING SCHEDULE

HAGGERTY-OLSON-WICKMAN BEHAVIOR RATING SCHEDULES

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SCHEDULE A: BEHAVIOR PROBLEM RECORD

Score_____

Name_____School_____

Rating by_____Date_____, 19____Grade_____

DIRECTIONS FOR USING

Schedule A

Below is a list of behavior problems sometimes found in children. Put a cross (X) in the appropriate column after each item to designate how frequently such behavior has occurred *in your experience* with this child. A cross should appear in some column after each item. The numbers are to be disregarded in making your record. They are for use in scoring.

BEHAVIOR PROBLEM	FREQUENCY OF OCCURRENCE				SCORE
	Has never occurred	Has occurred once or twice but no more	Occasional occurrence	Frequent occurrence	
Disinterest in School Work	0	4	6	7	
Cheating	0	4	6	7	
Unnecessary Tardiness	0	4	6	7	
Lying	0	4	6	7	
Defiance to Discipline	0	4	6	7	
Marked Overactivity	0	8	12	14	
Unpopular with Children	0	8	12	14	
Temper Outbursts	0	8	12	14	
Bullying	0	8	12	14	
Speech Difficulties	0	8	12	14	
Imaginative Lying	0	12	18	21	
Sex Offenses	0	12	18	21	
Stealing	0	12	18	21	
Truancy	0	12	18	21	
Obscene Notes, Talk, or Pictures	0	12	18	21	

Directions for scoring. Transfer the numbers you have marked for the different items to the right-hand column, headed "Score." Add the numbers to secure the total score, and record the total in the upper right-hand corner of this sheet.

SCHEDULE B: BEHAVIOR RATING SCALE

Name _____	Score _____
School _____	Division I _____
Grade _____	Division II _____
Rating by _____	Division III _____
Date _____, 19____	Division IV _____
	Total _____

DIRECTIONS FOR USING

Schedule B

1. Do not consult anyone in making your judgments.
2. In rating a person on a particular trait, disregard every other trait but that one. Many ratings are rendered valueless because the rater allows himself to be influenced by a general favorable or unfavorable impression that he has formed of the person.
3. When you have satisfied yourself as to the standing of this person in the trait on which you are rating him, indicate your rating by placing a cross (X) immediately above the most appropriate descriptive phrase.
4. If you are rating a child, try to make your ratings by comparing him with children of his own age.
5. The masculine pronoun (he) has been used throughout for convenience. It applies whether the person whom you are rating is male or female.
6. In making your ratings, disregard the small numbers which appear below the descriptive phrases. They are for use in scoring.

DIVISION I

1. How intelligent is he?					Score _____
Feeble-minded (5)	Dull (4)	Equal of average child on street (3)	Bright (2)	Brilliant (1)	
2. Is he abstracted or wide awake?					
Continually absorbed in himself (5)	Frequently becomes abstracted (4)	Usually present- minded (3)	Wide- awake (2)	Keenly alive and alert (1)	
3. Is his attention sustained?					
Distracted: Jumps rapidly from one thing to another (5)	Difficult to keep at task until completed (4)	Attends adequately (3)	Is absorbed in what he does (2)	Able to hold attention for long periods (1)	
4. Is he slow or quick in thinking?					
Extremely slow (5)	Sluggish, Plodding (4)	Thinks with ordinary speed (3)	Agile- minded (2)	Exceedingly rapid (1)	
5. Is he slovenly or careful in his thinking?					
Very slovenly and illogical (5)	Inexact, A dabbler (4)	Moderately careful (3)	Consistent and logical (2)	Precise (1)	
6. Is he mentally lazy or active?					
Interests lazy and inert (5)	Lethargic, Idles along (4)	Is ordinarily active (3)	Eager (2)	Shows hyper- activity (1)	
7. Is he indifferent or does he take interest in things?					
Is indifferent, Unconcerned (5)	Uninquisitive, Rarely interested (4)	Displays usual curiosity and interest (3)	Interests are easily aroused (2)	Has consuming interest in almost everything (1)	
Total, Division I _____					

DIVISION II

8. Is he slovenly or neat in personal appearance?

Score _____

Unkempt,
Very slovenly
(5)Rather
negligent
(4)Inconspicuous
(2)Is concerned
about dress
(1)Fastidious,
Foppish
(3)

9. How does he impress people with his physique and bearing?

Repulsive
(5)Makes an
unfavorable
impression
(4)Generally un-
noticed physique
and bearing
(3)Makes a
favorable
impression
(2)Excites
admiration
(1)

10. Can he compete with others on a physical basis?

Weak and
handicapped
(5)Has some physical
difficulties
(3)Can hold
his own
(2)Is stronger
than most
(1)Has excep-
tional strength
(4)

11. What is his physical output of energy?

Extremely
sluggish
(5)Slow in
action
(3)Moves with
required speed
(2)Energetic,
Vivacious
(1)Over-active,
Hyperkinetic,
Meddling
(4)

12. Is he easily fatigued?

Shows quick
exhaustion
(4)Does not have
ordinary
endurance
(3)Endures
satisfactorily
(1)Rarely shows
fatigue
(2)Unusually
vigorous
and robust
(5)

13. How does he impress you with regard to masculine or feminine traits?

(NOTE. If subject is male, rate on first line; if female, use second line.)

Is a "sissy"
(5)Slightly
effeminate
(3)Has average
boy qualities
(1)Very
masculine
(2)Entirely masculine,
A "buck"
(4)A "tomboy"
(5)Somewhat
boyish
(4)Has average
girl qualities
(2)Quite
feminine
(1)A "coquette,"
"Clinging vine"
(3)

14. Does he lack nerve, or is he courageous?

White-livered,
Fearful
(4)Gets
"cold feet"
(3)Will take reason-
able chances
(1)Resolute
(2)Daredevil
(5)

Total, Division II _____

DIVISION III

15. Is he quiet or talkative ?

Score _____

Speaks very rarely (3)	Usually quiet (1)	Upholds his end of talk (2)	Talks more than his share (4)	Jabbers (5)
---------------------------	----------------------	--------------------------------	----------------------------------	----------------

16. Is his behavior (honesty, morals, etc.) generally acceptable to ordinary social standards ?

Unacceptable, Extreme violations (5)	Occasional violations (4)	Ordinarily acceptable (3)	Always acceptable (1)	Bends backward, Very rigid standards (2)
---	------------------------------	------------------------------	--------------------------	---

17. What are his social habits ?

Lives almost entirely to himself (4)	Follows few social activities (3)	Pursues usual social activities and customs (1)	Actively seeks social pleasures (2)	Prefers social activities to all else (5)
---	--------------------------------------	--	--	--

18. Is he shy or bold in social relationships ?

Painfully self-conscious (4)	Timid, Frequently embarrassed (2)	Self-conscious on occasions (1)	Confident in himself (3)	Bold, Insensitive to social feelings (5)
---------------------------------	--------------------------------------	------------------------------------	-----------------------------	---

19. Is his personality attractive ?

Repulsive (5)	Disagreeable (4)	Unnoticed, Colorless (3)	Colorful (2)	Magnetic (1)
------------------	---------------------	-----------------------------	-----------------	-----------------

20. How does he accept authority ?

Defiant (5)	Critical of authority (4)	Ordinarily obedient (3)	Respectful, Complies by habit (1)	Entirely resigned, Accepts all authority (2)
----------------	------------------------------	----------------------------	--------------------------------------	---

21. How flexible is he ?

Stubborn, Hidebound, Nonconformist (5)	Slow to accept new customs and methods (3)	Conforms willingly as necessity arises (2)	Quick to accept new customs and methods (1)	Easily persuaded, Flaccid, Unstable (4)
---	---	---	--	--

22. Is he rude or courteous ?

Rude, Insulting, Insolent (5)	Sometimes unmannerly, Saucy (4)	Observes general conventions of civility and respect (3)	Courteous, Gracious (1)	Elegant (2)
----------------------------------	------------------------------------	---	----------------------------	----------------

23. Does he give in to others or does he assert himself ?

Never asserts self, Servile (5)	Generally yields (4)	Holds his own, Yields when necessary (1)	Assertive (2)	Insistent, Obdurate (3)
------------------------------------	-------------------------	---	------------------	----------------------------

24. What tendency has he to criticize others ?

Never criticizes (3)	Rarely criticizes (1)	Comments on outstanding weaknesses or faults (2)	Has a critical attitude (4)	Extremely critical, Rarely approves (5)
-------------------------	--------------------------	---	--------------------------------	--

Total, Division III _____

DIVISION IV

25. Is he even-tempered or moody?

Score _____

Stolid,
Rare changes
of mood
(3)

Generally
very even-
tempered
(1)

Is happy or
depressed as
conditions warrant
(2)

Strong and
frequent changes
of mood
(4)

Has periods of
extreme elations
or depressions
(5)

26. Is he easily discouraged or is he persistent?

Melts before
slight obstacles
or objections
(5)

Gives up before
adequate
trial
(3)

Gives
everything
a fair trial
(1)

Persists until
convinced of
mistake
(2)

Never
gives in,
Obstinate
(4)

27. Is he generally depressed or cheerful?

Dejected,
Melancholic,
In the dumps
(3)

Generally
dispirited
(4)

Usually in
good humor
(1)

Cheerful,
Animated,
Chirping
(2)

Hilarious
(5)

28. Is he sympathetic?

Inimical,
Aggravating,
Cruel
(5)

Unsympathetic,
Disobliging,
Cold
(4)

Ordinarily
friendly and
cordial
(2)

Sympathetic,
Warm-hearted
(1)

Very
affectionate
(3)

29. How does he react to frustrations or to unpleasant situations?

Very submissive,
Long-suffering
(3)

Tolerant,
Rarely
blows up
(2)

Generally
self-controlled
(1)

Impatient
(4)

Easily irritated,
Hot-headed,
Explosive
(5)

30. Does he worry or is he easy-going?

Constantly worrying
about something,
Has many anxieties
(4)

Apprehensive,
Often worries
unduly
(2)

Does not
worry without
cause
(1)

Easy-going
(3)

Entirely care free,
Never worries,
Light-hearted
(5)

31. How does he react to examination or to discussion of himself or his problems?

Refuses flatly
to cooperate
(5)

Volunteers
nothing,
Must be pumped
(3)

Conservatively
cooperative
(2)

Quite willing
to cooperate
(1)

Entirely uninhibited,
Tells everything,
Enjoys it
(4)

32. Is he suspicious or trustful?

Very suspicious,
Distrustful
(5)

Has to be
assured
(3)

Generally
unsuspicious
and trustful
(1)

Somewhat
gullible
(2)

Accepts every-
thing without
question
(4)

33. Is he emotionally calm or excitable?

No emotional re-
sponses, Apathetic,
Stuporous
(4)

Emotions
are slowly
aroused
(2)

Responds
quite
normally
(1)

Is easily
aroused
(3)

Extreme reactions,
Hysterical,
High-strung
(5)

34. Is he negativistic or suggestible?

Negativistic,
Contrary
(5)

Complies
slowly
(4)

Is generally
open-minded
(1)

Rather easily
persuaded
(2)

Follows any
suggestion
(3)

35. Does he act impulsively or cautiously?

Impulsive, Bolts,
Acts on the spur
of the moment
(5)

Frequently
unreflective
and imprudent
(4)

Acts with
reasonable
care
(2)

Deliberate
(1)

Very cautious
and calculating
(3)

Total, Division IV _____

APPENDIX D

AN ILLUSTRATION OF DIFFERENCES IN PLAY WITH "CREATIVE" MATERIALS

Bobby, Unsocialized Aggressive

Play Session XVIII

Therapist: "Hello Bobby."

Bobby: "Hello," (looked around room) "I read three books last night."

Therapist: "You really read a lot last night."

Bobby: "Yes I read until one o'clock. One of the books was just a short one though. I didn't even go out to play. I just read."

Therapist: "You didn't even go play."

Bobby: "I had rather read than play - at home - but not at school."

Therapist: "You would rather play at school."

Bobby: "Uh huh, there's more people to play with. Look! here is that old Indian head I carved."

Therapist: "It is still here."

Bobby: "It won't be long!" (Began tearing it to bits.)

Therapist: "You will destroy it."

Bobby: (Sat smiling, then began moulding clay with his hands. He worked slowly, but steadily, without a comment. Occasionally he looked up smiling. He modeled a very elaborate Indian Chief's head.) "See?"

Therapist: "You made a big Chief."

Bobby: "I'll put more on to it." (Added war paint, yellow head. Put dots of red clay on the face) "His war colors."

Therapist: "You made his war colors."

Bobby: "Wait." (Made head dress of feathers out of red clay)
"Now I wish I could make a body, but I can't."

Therapist: "You feel you can't make a body."

Bobby: "I know I can't good. Wait, I'll make a stand." (He shaped a stand and set the head on it. He added two hooks on the stand then made a bow and arrow and hung them on the hooks.) "That's some Indian Chief!"

Therapist: "That's some Indian Chief!" (We both looked at it and admired it) "That's all your time for today, see you Thursday."

Bobby: "OK. Goodbye."

Basil, Socialized Aggressive

Play Session XI

Therapist: "Hello Basil."

Basil: "Hello, I was just waiting for time to come." (Walked by wedgie dolls, straightened them. Moved on to checkers, arranged all the marbles in their positions, straightened paper and crayons, then picked up the anagrams. Very carefully spelled out his full name. He lingered over this, standing with knees close together. When the name was spread out, he picked it up carefully and dropped it into the box so it could still be read. He then pounded the peg board viciously for seven minutes. He got up and smiled.) "I guess I'll paint, how much more time do I have?"

Therapist: "You have fifteen minutes."

Basil: "He spread out the paper, dampened it and using red paint, almost covered the paper. He then used a little blue to make a red violet color. He made designs with his fingers, palm and side of his hand, then smoothing out the paint, he quickly outlined with one finger a woman's head. It was a crude head that looked almost like a person seen in jungle pictures. He put a bone through the knot of hair. Looked at me grinning.) "I just made that and it looks like a head."

Therapist: "It looks like a hard boiled person's head."

Basil: "I can't draw so good."

Therapist: "Sometimes its fun to draw people ugly."

Basil: (He began adding to the picture. Added a cigarette, then made quite a nose. He erased these additions and added curls. He then wrote "Miss (Teacher)" under the picture). "Some of the boys say we aren't supposed to take these out of the room."

Therapist: "Thats true Basil, what happens in here doesn't belong outside. In here, during your thirty minutes, you may make anything you want to and do or say anything you wish. The door is locked so no one will disturb us, but we don't take the things out of the room." (He showed no change of expression but slowly folded the picture and dropped it in the waste basket. Looked at me and smiled.) "Good bye Basil, see you Friday."

Basil: "OK. Goodbye."

APPENDIX E

AN ILLUSTRATION OF DIFFERENCES IN PLAY WITH DOLLS

Johnny, Unsocialized Aggressive

Play Session XVII

Therapist: "Hello Johnny"

Johnny: "Hello" (Puffing as if out of breath) "Whew! I was not here this morning."

Therapist: "I believe you went to Junior High School this morning."

Johnny: "Yep, I wish it could have been this afternoon instead of this morning."

Therapist: "You would like it better to go this afternoon."

Johnny: (Grinning and holding out a fountain pen) "\$51.00"

Therapist: "\$51.00"

Johnny: "See this pen? Its an eversharp."

Therapist: "That is a good looking pen."

Johnny: "I shouldn't be carrying it around."

Therapist: "You feel you should be oareful with it."

Johnny: "I just use it for writing letters and things, and for spelling. I had to quit spelling to come in here. I'd rather do it by myself though."

Therapist: "You would rather have spelling by yourself?"

Johnny: "If we miss a word we have to stay after school, and the kids might bother me."

Therapist: "You don't want to take a chance on someone bothering you and you having to stay after school."

Johnny: (During this time he was doubling the arms of two clay figures so the hands became a part of the shoulders. He looked up hesitantly and put the car on top of one of the people.) "I am making a car print on him."

Therapist: "You are making a car print on him."

Johnny: (At the acceptance from the therapist, he quickly ran the car over the doll) "He got run over" (Quickly raced the car around with the siren screaming.) "Here comes the ambulance." (Put man on top of car and raced it to other side of the table. Repeated car accident with other clay figure and repeated ambulance scene. Reached for plastic doll, glanced up with flushed face,) "This girl started across the street, she looked one way and zoom, this car ran over her. Ran over her and left her lying."
(repeated same thing, one at a time with boy doll, baby doll, mother doll and big boy doll, then had the grandmother doll start across the street, and the car missed her, she went across. The grandfather doll started across the street where grandmother stood, car missed him, grandmother and grandfather stood looking at the family, then started back across the street, arms around each other. The car hit both of them.) "Well there they are all piled up."

Therapist: "There they are all piled up and killed."

Johnny: "No, they are not all dead, just hurt. Lets see which one is dead." (Picked up the mother doll, held it quite a while then laying it down, picked up the grandmother doll.)
"The grandmother is all that got killed. The rest are in the hospital." (Looked up smiling) "Well, thats my little program of safety. Boy! I sure look both ways. One day a boy got hit on his bike on our street. It just knocked the breath out of him, but it sure messed up his bike. He was lucky."

Therapist: "You think he was lucky."

Johnny: (Picking up the gun and clicking it) "He was really lucky." (Picked up the clay and began mashing it with his hands.) "Is there a bathroom in here?"

Therapist: "Not in here Johnny."

Johnny: "I just wondered, I thought there was, (pause) do you mind if I go to the bathroom?"

Therapist: "You may go if you need to."

Johnny: "Do you mind? I'll come right back."

Therapist: "You may go."

Johnny: "I'll be back in 5 minutes." (returned in six minutes, looked at the clock) "I just about made it in five minutes." (Continued shaping the clay.) "Guess what I am making."

Therapist: "You like to make me guess."

Johnny: (Looked up smiling) "Its fun." (Continued shaping the clay. Looked around at the walls.) "Aren't those new pictures?"

Therapist: "They were made and put up by the speech class. I don't know how long they have been here."

Johnny: "Do you have some crayons and paper?"

Therapist: "Yes, there are crayons and paper."

Johnny: (Began making a picture. When finished it was two green hills with a stream between, over which a bridge reached from hill to hill. On one hill stood a large tree. There were three clouds in the sky with the sun coming from behind one of them. He finished this just as the period was over.) "Well, there it is. I'll just leave it here. I'll see you."

Therapist: "Goodbye Johnny, see you Thursday."

Johnny: "Goodbye, I'll see you."

Cyril, Socialized Aggressive

Play Session XVII

Therapist: "Hello Cyril"

Cyril: "Hello" (Sat down, pulled a comic book from his pocket) "Is it all right to read funny books in here?"

Therapist: "This time is yours." (He began spreading out the book) "When your teacher selected you to come in here, you were to come for ten weeks. This is the ninth week. You have three more times after today. You may use that time however you wish."

Cyril: "Three more times will be the end then?"

Therapist: "Three more times in here."

- Cyril: (Putting book back in pocket) "Then I will do something else. Could I use the board?"
- Therapist: "Use any of these things as you wish."
- Cyril: (Looked for chalk and couldn't find it) "May I go to the room for some chalk?"
- Therapist: "When you leave the room, you must wait until the next time to come back."
- Cyril: (Smiling) "I'll do something else." (Picked up the gun and clicked it as he looked around. Laid it down and picked up knife, stabbed at self, then unbuttoned shirt and stabbed at his heart. He let his shoulders slump and his head fall forward. He looked up and smiled) "It worked!" (laid knife down and picked up the crayons. He started drawing a horse, but before finishing it he reached for the gun, and turning the paper over, he drew a gun, very carefully filling in all the details. When the picture was finished, he pushed it across the table, picked up the gun, and pointing it at the floor, clicked it several times. During this clicking, he was looking at the therapist in a level, direct way. He laid down the gun and picked up the father doll. Beginning at the neck, he rolled it in a tight ball, then with both hands he twisted it in a wringing manner. His mouth was tense and the color was rising in his face as he straightened out the doll. He stood it up and shot it.) "Fall down!" (He shook the table, making the doll fall down. Picked up the mother doll, attempted to make it stand) "A great big old eighteen year old girl, can't stand up, aren't you ashamed!" It stood after several maneuvers to balance it) "It worked, I'll say that to all of them." (Picked up boy doll) "You great big ten year old boy, can't you stand up? You ought to be ashamed." (Picked up grandmother doll) "You big old seventy-eight year old lady, can't you stand up? You ought to be ashamed!" (Kept twisting at her legs) "Your feet are so crooked." (Stood up the girl doll) "Great big eight year old girl, stand up!" (Picked up grandfather doll) "You ninety-six year old man, no eighty-seven year old man, can't you stand up?" (Picked up father doll) "You a thirty-six year old man, I guess I'd better make you fifty-six years old, can't stand up. I'm ashamed of you!" (Picked up the gun and aimed it at the dolls) "I'll shoot all of you." (Put gun against the table edge and shook it as he shot the gun. The dolls fell. He picked up the boy doll) "You poor thing, can't you even play the French Harp? Took a harp from his pocket and placed it against the doll's mouth. Then he

blew the harp as doll's mouth was pressed against it. He repeated this with each doll, choosing a tone that would match the doll's voice. When all had taken a turn, he laid them aside, leaned back in his chair and blew the harp. The tones were soft, but no particular tune. He seemed relaxed as he played. Replaced the harp in his pocket, looked at the clock.) "Well I guess thats all my time for today." (Got up.)

Therapist: "Goodbye Cyril, see you Wednesday."

Cyril: (Went hesitantly to the door, stood there a moment.)
"Goodbye."

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APPENDIX F

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AN ILLUSTRATION OF DIFFERENCES IN VERBALIZATION

Brody, Unsocialized Aggressive

Play Session XVII.

(Brody rushed into the room, his face very red.)

Therapist: "Hello Brody, how are you today?"

Brody: "All right, I guess. I'll know at 3:30."

Therapist: "You guess you are all right, but you will know at 3:30?"

Brody: "Five patrol boys just brought me in from the playground."

Therapist: "Oh?"

Brody: "Five is all that could bring me in. I'll sure know at 3:30."

Therapist: "You will sure know at 3:30."

Brody: "We were playing ball, you know, and I was playing short stop and I caught the ball and touched him and he was supposed to be out, but he kept playing and I told him to stop and he hit me so I hit him. He started to run and I looked around. I didn't know anything had happened, and there he lay just as red as a fire engine. He said I tripped him and he said he was going to get up and hit me in the stomach and I told him to just go ahead if he wanted to get beat up. I've beat up enough people, and the patrol boys told me to come in and I said I wouldn't and five of them ganged up on me, so I knew I had to come in."

Therapist: "You felt they ganged up on you and you knew you had to come in."

Brody: "Yes. Well I have one sweet alibi."

Therapist: "You have an alibi?"

Brody: "One patrol boy saw the whole thing. He knows I didn't trip him."

Therapist: "You think he will be fair."

Brody: "One boy would just love to see me get in trouble."

Therapist: "One boy wants to see you in trouble?"

Brody: "Well I'm captain of the ball team and he doesn't like it."

Therapist: "You feel he doesn't like for you to be captain of the tea team."

Brody: "Sometimes he says 'Oh lets not go in. Lets play some more' after the bell has rung. He curses too. He cursed me on the school ground today. I could report him."

Therapist: "You could report him."

Brody: "But that wouldn't help."

Therapist: "That wouldn't help."

Brody: "I'll bet there will be twenty kids in the principal's office."

Therapist: "You really feel they will gang up on you."

Brody: "If I know Hill Top School!* When I start out of the door this afternoon there will be a gang waiting for me."

Therapist: "Your stomach must feel awful, thinking about it."

Brody: "I don't feel so good. I'm not afraid to fight one or two, but my daddy told me if people gang up on me to use a club over their head."

Therapist: "You would fight fair with one or two."

Brody: "Well they could gang up on me, but they might not."

Therapist: "They could, but they might not."

Brody: "I'm not afraid to talk to the principal because he lives by me."

Therapist: "You think living by him will protect you."

Brody: "Well no, but I think he will be fair."

Therapist: "You think your principal will be fair."

* Name of school has been disguised.

- Brody: "I'm really not afraid because I know I am right. My teacher told us this morning that Thomas Jefferson believed you should stand up for what you believe is right. Guilty people are the ones who say, Oh, excuse me please, I'll be going." (This was said in a very sarcastic voice, while he had been talking, he was fingering the map. Turning to me, he said, "I know, let's play a game.")
- Therapist: "You want me to play a game with you."
- Brody: "I'll take out one of these states and you guess which one."
- Therapist: "You want to make me guess."
- Brody: "We will take turns."
- Therapist: "What rules will we use?"
- Brody: "We will take turns, and we will give five clues. We will hold up the state from the back then we will guess." (This give and take situation lasted for the remainder of the period, twelve minutes. He relaxed and the color of his face was normal by the end of the period. He was able to abide by the rules of the game.)
- Therapist: "That's all our time for today, I'll see you Monday."
- Brody: "I hope I will be able."
- Therapist: "Goodbye, see you Monday."

Buster, Socialized Aggressive

Play Session VIII

Therapist: "Hello Buster."

(Buster came into the room with shoulders drooping, hands shoved in pockets, walked to center of room and stood with his back to me, glanced over his shoulder, sat down and picked up the clay. His back was completely to therapist as he rolled out a long roll of clay and shaped a snake. As he coiled it, he half turned to therapist. He laid it on the table, glanced at the clock, and made another small snake, also in coil. He then picked up the bubbles. He

flipped them off the ring at first instead of blowing them. He attempted to catch and hold the bubbles before they hit the floor. He carefully put the top on the jar and picked up the gun. He still had his back to the therapist and the gun was pointed at the wall. He clicked it twice, twirled it around his finger and laid it down. He picked up the plastic doll and held it in his hand looking at it.)

Therapist: "These dolls will bend any way you want them."

(He began testing to see if they would break.)

Buster: "Some one has bent this one out of shape." (He pulled at their legs and stood the male ones up, then laid them down. He then picked up the grandfather doll, looked around, then put the grandmother's arms around the grandfather's neck and made them dance. He looked around and grinned. He laid them down and began building with blocks. He built a garage and sealed it with the car inside. He tore it down and carefully put the blocks away, got up, shoved his hands in his pockets and started out the door.)

Therapist: "Goodbye Buster, see you Wednesday."

(He walked out the door without speaking or looking around.)