
UNIT 2 EMOTIONAL PROBLEMS (WITHDRAWAL)- I

Structure

- 2.1 Introduction
- 2.2 Objectives
- 2.3 Understanding Children's Symptoms
- 2.4 Causes of Childhood Disturbances
 - 2.4.1 A Quiet and Withdrawn Child
 - 2.4.2 School Refusal
 - 2.4.3 Conversion Syndromes
 - 2.4.4 Bed-wetting/Wetting during the Day
 - 2.4.5 Depression
 - 2.4.6 Neglected and Abused Child
 - 2.4.7 Emotional Problems Associated with Physical Illness
 - 2.4.8 Nail Biting, Thumb Sucking, Masturbation and Restlessness
- 2.5 Let Us Sum Up
- 2.6 Unit-end Exercises

2.1 INTRODUCTION

Most children exhibit problematic behaviour at some time or the other. This does not mean that they all have mental problems and need serious professional help. It is necessary for us to understand as to when does one decide that the child is mentally or emotionally disturbed and requires help. In addition, one also needs to know what are the causes of these problems and the ways in which a parent, a teacher or a doctor can help.

2.2 OBJECTIVES

After going through this unit, you will be able to:

- identify the causes of emotional disturbances;
- identify the symptoms of emotional disturbances; and
- help the child with emotional disturbances.

2.3 UNDERSTANDING CHILDREN'S SYMPTOMS

The Case of Gita

Gita is a 7 year old girl studying in II standard. Just before going to school, she frequently complains of headache. If she is allowed to stay at home, her headache disappears within a short time. Gita's mother became worried about her daughter's behaviour and paid a visit to the school to find out the matter. There she found that Gita had problems in learning arithmetic and she was often punished by a particular teacher.

Whatever complaint a child makes, it indicates that there is a problem in the child's life, which warrants attention. In the above example, the headache allows Gita to stay at home and she can avoid having an encounter with the arithmetic teacher. In many cases children develop such symptoms and thus avoid painful experiences.

The symptoms are manifested in different ways by different children. Some children, when faced with stress become anxious, withdrawn, fearful, cry easily and develop physical problems like stomach pain, and headache. When they manifest such problems and internalise the symptoms, these are known as **emotional disorders**. The children may act out their problems by being aggressive, fighting, stealing and telling lies. These are known as **conduct disorders**. The core of all problems, whether it is conduct problems, physical constraints or emotional disturbances, lies in the fact that the child is disturbed and cannot cope with the problems that bother him or her.

2.4 CAUSES OF CHILDHOOD DISTURBANCES

The child may be disturbed due to reason that lie within the child, in the family, school or neighbourhood.

The Case of Suma

Suma, from a very young age, is timid and gets anxious easily. She is very sensitive and gets upset over trivial reasons. Once she is upset, it takes a long time for her to become normal again. She is, by temperament, a difficult child to deal with. In such cases the problem lie within the child, when she interacts with a difficult environment she exhibits emotional disturbances.

As above, the causes for emotional disturbances may lie within the child in many cases. The child may be timid or anxious by nature or may have low potential for intelligence, may have some kind of brain damage at birth or later due to illness or injury. But these kinds of problems in children may not cause disturbances unless the environment also becomes stressful.

The causes may also lie outside the child in many cases. For example

- i) extreme poverty
- ii) parental disharmony
- iii) jealousy between siblings

List below some more factors.

.....

.....

.....

The school environment also can be traumatic and can cause emotional disturbances in some children.

Add some more factors to the list given below in a school set-up that can cause emotional disturbances in the child.

- i) a punitive teacher (one who inflicts punishment)

- ii) a rigid routine
 - iii) unfriendly peers
-
-
-

As can be seen there are many causes which can upset the child. But the question is, whether it is possible to predict what causes produce what problems. It is not possible to explain the causes and symptoms as having one to one relation. For example, in a poor family with an alcoholic father and a working mother, the children are subjected to a lot of hardships such as neglect, beating, lack of affection and so on. Children coming from such a family may exhibit a variety of symptoms. One may be shy, fearful and withdrawn and another may be very aggressive, stubborn and truant from the school. Yet another child may not exhibit any symptom and be normal. It should also be noted here that some children are emotionally healthy and can cope with problems while others develop emotional problems in such a situation. Another interesting aspect is that a child who is disciplined too harshly and punished too often may remain quiet and withdrawn while a child from another home who is pampered and protected a lot may also remain quiet and withdrawn.

So, the conclusion is that the same cause may produce different symptoms in different children or the same symptom may have different causes in different children. What is important is that problems and complaints which children present have one or more causes. The causes may be within the child, home, neighbourhood or school.

Some children show problems only in particular contexts. Rama is defiant, disobedient and aggressive only at home and not in school. Bela is fearful, anxious and uncommunicative only in the English class and not in other classes. In such instances the problems seem to originate from a specific source.

As it is already stated, all children show problematic behaviour at some time or other. In such a case, when do we decide whether a particular child needs help or not? We can compare this problematic behaviour of children to common fever. If the child has slight fever for a few hours, we usually don't worry about it. When the fever continues for many days or if the temperature is very high then a doctor is consulted. Similarly, if the emotional problem persists over a long time or it is severe, then it has to be taken care of. Occasional fears, headache, or bed-wetting need not be considered as signs of emotional disturbance. But if these symptoms persist and handicap the child in any way, then there is reason to be concerned and the child may require help. Similarly, any severe disturbance needs to be taken notice of sudden fears, sudden spells of unconsciousness, sudden changes in behaviour of any kind.

There are many children who suffer silently. A child who externalises his or her problems with aggressive behaviour gets everybody's attention. A child who internalises his or her problem and remains anxious, quiet and withdrawn is not normally recognized as a disturbed child. Particularly in schools if a child is very quiet and obedient, the teachers tend to ignore her. She is not seen as a problem child. As no one pays attention to this child, she suffers quietly and does not get any help from anyone. So it is important that as a teacher/parent, we should learn to detect signs of emotional problems in children, particularly in the classroom set up, and also help them in whatever way possible.

List out the common problems exhibited by children:

- i) aggressive behaviour
- ii) bed-wetting
- iii) stealing
- iv)
- v)
- vi)
- vii)

All these problems can broadly be classified into two groups - disorders of emotion and disorders of conduct.

Let us take some of the problems of emotional disorder and discuss how to help such children with emotional problems.

Check Your Progress

- Notes:** a) Write your answers in the space given below.
b) Compare your answers with those given at the end of the Block.

1. What purpose does a symptom serve for parents/teachers?

.....
.....
.....

2. When does a problematic behaviour symptom become serious?

.....
.....
.....

2.4.1 A Quiet and Withdrawn Child

The Case of Rubina

Rubina is a six years old girl. She is very quiet and withdrawn in the class. She doesn't answer questions or play with other children. At home she has very strict parents who always tell her to study and do well. They also compare her constantly to her brother who is friendly and bright.

How do you want to help Rubina ? Write your answer below.

.....
.....
.....



Rubina's class teacher took interest in her. She talked more often to her after the class hours. She advised other children not to tease Rubina but to include her in their games. She encouraged her to take active part in the class activities and praised her whenever she did well. The teacher also found that Rubina also appreciated by her classmates for her drawings. The teacher also advised the parents not to compare her with her brother and to appreciate Rubina whenever she did good things. Within the next six months there was a dramatic change in her behaviour.

2.4.2. School Refusal

Some children who are emotionally dependent on their mothers often have difficulty in adjusting to the school set-up. They are fearful, anxious and they cry a lot in the first few days at school. Normally in course of time they get used to it, in case crying persists over a period of time, it has to be handled tactfully by the teacher.

The Case of Jude

Jude is a 5 year old boy who doesn't want to go to school. Every day he cries before going to school. The mother has a tough time taking the child to school.

How will you help Jude? Write your answer below.

.....

.....

.....
.....
The class teacher helped Jude in the following way:

The teacher allowed the mother to bring the child to the class and stay near the classroom. The child was encouraged to play with other children while the mother was present in the classroom. Gradually the child started feeling at home in the classroom with the other children. The mother then moved away from the classroom and stayed in a place where the child could see the mother. Slowly the mother reduced the time of her stay in the school. Then the mother accompanied the child only up to the gate.

Finally, Jude could go to school along with other children without his mother. All these months the teacher was extremely good to the child, and encouraged him to mix and play with other children. Now, Jude has also made a few friends in the class. He enjoys playing with them.

Enlist factors that can produce excessive fear or anxiety about school.

- i) New school
- ii) Punishment from the teacher
- iii) Bullying by classmates
- iv)
- v)
- vi)
- vii)
- viii).....

2.4.3 Conversion Syndromes

At times when children are extremely frightened of something in the school or of the teacher or about a threat of any kind, they may develop severe symptoms such as fits or paralysis of limbs out of fear which are known as **conversion syndromes**.

The Case of Rita

Rita was a 10 year-old girl, studying in the Vth standard. She was quite intelligent. She usually got good marks. Her parents, however, wanted her to get first rank. In spite of her best efforts, Rita could not get the first rank and her parents were disappointed. Gradually she became anxious whenever she took examinations. At a certain point, her anxiety became so severe that she started complaining of pain in the hand and a day before the examination she could not even move her fingers. She, therefore, could not appear for her examination.

As a teacher or a parent how will you help Rita? Write your answer below.

.....
.....
.....

When the child faces a problem and is unable to find a solution, the body responds to the stresses. These complaints disappear once the cause is found and the child is helped to solve the problem.

The Case of Rani

Look at another case. Rani was brought to a child guidance clinic with complaints of getting fits. First she was seen by a neurologist and on examination he found that the fits had no organic cause. He then referred her to a psychologist. When the psychologist explored into the details, he found that there was a severe discord between the parents. They used to quarrel in front of the children and frequently the father used to beat the mother. Rani was worried and was feeling sad about this. Later, whenever Rani was feared that a fight going to break out between the parents she would get fits.

In such cases some of the following may help:

- Allow the child to talk about her problems.
- Try to remove the cause. In the above case, the parents may be counselled about their relationship.
- Do not pay undue attention to the illness behaviour of the child. The child may learn a wrong lesson that whenever she wants something, she can develop the illness behaviour and manifest some symptoms.
- Teach better strategies to solve problems. For example, in the case of Rita who is unable to get the first rank as desired by the parent's she can be helped to realize that even though she has not fulfilled her parents' wish, she is a good student. Her parents need to be counselled so that they do not push Rita so much.

2.4.4 Bed-Wetting/Wetting during the Day

Most children stop wetting at night by 3-4 years. Some continue much longer than this. If the child has pain when he/she empties the bladder or dribbles urine between proper emptying, he/she probably has a physical problem. In such cases he/she has to be referred to a doctor. If there is no physical cause, then the child has to be trained in bladder control.

How do we train a child in bladder control?

- Advise the parents not to give any liquid food later than 6 p.m. in the evening.
- Advise the mother to wake the child up at midnight so that the child can go to toilet and then come and sleep again. An alarm can be used to wake the child at a particular time.
- During holidays, encourage the child to drink a lot of water and then control emptying of bladder as long as possible.
- Avoid punishment and the child can be praised when he or she has not wet the bed.
- Tell the parents and the child that the problem is not uncommon and will eventually improve.

Sometimes, timid children pass urine in their clothes while in school. When this happens, the teacher or the other students should not make fun of them. Some children by nature have poor bladder control. Such children should be allowed to go to the toilet more frequently. If the teachers treat them with consideration, they may get over the problems gradually.

2.4.5 Depression

Very rarely children can become very depressed. They may cry a lot, cry easily at the smallest pretext or not talk to anyone, not take interest in usual activities or may appear to be day-dreaming. These kinds of moods may be seen in children who have lost one or both parents, are left in orphanages or are not taken care of at home. If the teacher approaches the child with concern and affection, the child may start talking about what is bothering him or her. Depressed children often do not approach others for help. But, if they are given a chance by caring adults to talk, they make an attempt to talk about what is bothering them.

The Case of Mohan

Mohan is an eight year old child studying in 2nd standard in a municipality school situated in an urban slum in Calcutta. He is a depressed child and had a history of his father being murdered a few months earlier. The mother was depressed and found it difficult to earn their livelihood. Mohan's brother often talked of revenge by killing the murderer. The child became quiet, dull, and uncommunicative and day-dreamed a lot about his father's return. The class teacher took active interest in the boy. He made the child and the mother talk about the event and discussed with the mother their future plans. He also showed active interest in the studies and other activities of the child. He frequently called Mohan after the class hours and spent some time talking to him about his problems, family, interests and so on. The teacher also encouraged him to take active part in school activities. Eventually over a few months, Mohan got over his depression and became adjusted in the class.

2.4.6 Neglected and Abused Child

Children who are neglected or abused may not have learnt how to form a trusting relationship with other people. This will also affect how they interact with other children. They may find it difficult to learn. They will probably not be able to attend school regularly. They normally appear dirty, look miserable, malnourished and may have unexplained injuries. The neighbours might also report that the child is ill-treated. Neglected children are likely to be encountered in rural schools and in urban slum schools.

How can you help such children? Write your answer below.

.....

.....

.....

Compare your answer with the suggestions given below:

- i) Express concern to the family about the child's condition and try to find out how the child is treated at home.
- ii) Discuss with the mother what she feels or she could do about improving the conditions.
- iii) Ask her if you could help in providing some additional/alternative care, and whether there are any special problems associated with this particular child.
- iv) If you are worried that the child may come to serious harm, you can discuss the matter with your school authorities or refer the family to a social welfare agency or you can discuss the matter with the village headman or community leaders.

2.4.7 Emotional Problems Associated with Physical Illness

Some illnesses though physical, have a very strong relationship to emotional problems. For example, an attack of asthma may start when the child is emotionally disturbed or anxious about something such as teacher who punishes the child or when a child is being separated from parents. In addition when the child is unhappy, the illness lasts longer. An emotionally upset child is likely to be more sickly than a happy child. A sick child recovers faster and stays healthy if his/her emotional problems are taken care of.

Some children with physical handicaps such as blindness, deafness or deformed limbs due to polio or such disabilities may be very sensitive and ashamed of their physical handicaps. Often in a classroom, teachers and other children may knowingly or unknowingly hurt them by making fun of them. They can also make other children understand how they would feel if they were made fun of or bullied because of something they can not change in themselves.

Epilepsy (or fits) is one illness, requires special mention. Epilepsy is caused by abnormal electrical activities of the brain. Each time the child gets fits, the brain gets affected in its ability to learn and memorise. If the child has several fits, then the child is likely to have difficulty in coping with studies. He or she is also open to the dangers of falls and injuries. Due to this, the teachers may not want the child in the school, parents may not allow him to play and lead a normal life. People even have a false belief that fits are contagious. A child who gets fits must be taken to a doctor for treatment. Fits can be controlled with drugs which are called anti-epileptic drugs. The child can lead a normal life if his or her fits are controlled by medication.

2.4.8 Nail Biting, Thumb Sucking, Masturbation and Restlessness

In addition to the above problems, there are other problems which tend to disappear as the child grows older.

- i) **Nail biting and thumb sucking:** This is fairly common in young children. But these do not indicate serious disturbance. Children who suck thumb or bite nails often do it when they are bored and have nothing to do or when they are slightly anxious. They find it soothing to suck their thumb or fingers. Under such circumstances, we can divert the attention of the child by making the child do some interesting activities. Some children do thumb-sucking just before they sleep.

An age old practice is to apply bitter solution to the child so that he/she finds it unpleasant when he/she puts the thumb in the mouth. In some cases it has worked and in many cases this method has failed.

- ii) **Masturbation:** Young children sometimes play with their genitals. This could happen if the child has an infection or the child's genital organs have not been cleaned properly. At times one child may play with another child's genitals just as innocently as the child would indulge in thumb sucking. A teacher can advise the parents to take the child for a medical check up. Parents need not worry unduly and treat this as a moral problem indicating low morals in child. It is advisable to divert the attention of the child by offering him/her other kinds of stimulating activities. This problem normally disappears in course of time as the child grows. It is important that parents and teachers should not be overly concerned and get angry or make the child feel guilty about it.

- iii) **Restlessness:** Many children often are physically more active and restless than

others. They do a lot of running around and show interest in all new things. This kind of restlessness decreases as the child grows older. It is therefore, advisable not to force the child to sit quietly or study for long periods. It is to be remembered that too strict or too lenient handling of the child can produce restlessness.

However, a few children may be so restless that they are unable to sit even for a short time for watching TV, playing a game or eating. Thus, when a child is too restless and frequently hurts himself, then the help of a children's doctor or psychologist may be taken.

What do you do with a restless child?

1. Make realistic demands on the restless child. Don't expect them to sit for long and study.
2. Encourage any possible talent of the restless child. He or she may be good at playing a game, encourage him/her to spend sometime everyday in the game.
3. Help the restless child to have a regular routine and reduce distractions. Let him or her do the same activities at the same time every day such as getting up, going to school, playing and studying. This will give the restless child a sense of security and will calm him.
4. Advise parents not to give in whenever such a child makes unreasonable demands. They should reward him/her for good behaviours and ignore the undesirable behaviours.

Check Your Progress

- Notes:**
- a) Write your answers in the space given below.
 - b) Compare your answers with those given at the end of the Block.

3. List the factors that can cause emotional disturbance in the child.

.....
.....
.....

4. How are emotional disorders different from conduct disorders?

.....
.....
.....

5. How will you help the child who has a habit of bed-wetting?

.....
.....
.....

6. How will you identify a neglected or an abused child?

.....
.....
.....

2.5 LET US SUM UP

Children who have problems at home or school require help. The first task of the teacher is to understand why the child has problems. The teacher has to look for causes at school, home or within the child. To understand the child the teacher needs to be friendly with the child, so that he can talk freely about his problems. The teacher needs to talk to the family too, to find out whether there is any problem at home. It is important to note that when a child is emotionally disturbed, it is not always possible to know the reasons. Still the teacher can use simple methods to resolve the problems and help the child. If these methods do not work, the child can be referred to a place where child mental health services are provided.

2.6 UNIT-END EXERCISES

1. Identify a disturbed child in your class/ neighbourhood and try to collect the causes - within the child, family and environment for the problems arising.
2. Assuming you have found out the causes (in 1), prepare a list of activities you can take to help the child.