ABSTRACT: Preventing, healing, and educating in various forms have always been major ingredients of clinical services for troubled children. Traditional services involving healing or prevention have been emphasized. Current times mandate a closer look at the value of an educationally oriented model to provide direction for clinical intervention. Case illustrations of such a model are presented.

The more things change, the more they remain the same. As with many proverbs, this ancient French one is only partially true, especially as it relates to the practice of clinical services for troubled children. Preventing, healing, and educating in various forms have always been major ingredients of the helping process. However, each of these has spawned different services during the development of the children's psychiatric movement [1].

Historically, child guidance clinics emerged as a means of providing services to children whose behavior suggested they would grow into disturbed adults. Much of the early emphasis was on juvenile delinquents. However, clinics were quick to incorporate the principles of dynamic psychiatry as they looked upon disturbed behaviors as a reflection of internal psychic conflict that took place unconsciously. Early psychoanalytic theory as applied to the delivery of clinical services to troubled children and their parents has been modified significantly (e.g., [2-4]) and complemented by behavior modifications [5] and nondirective approaches [6]. However, they all have in common a help-oriented model whose major aim is to heal the child. This model implies that children and/or their parents are laboring under debilitating handicaps rooted in a functional etiology as a result of intra-
psychic or interpersonal conflicts. The core of the conflict is believed to be repressed or not in understandable awareness. As a result, some form of relationship-based intervention is required. While the tactics of such interventions can vary depending on the specificity of symptoms, organization of ego resources, and persuasion of the therapist, they all share the idea that the clients are in need of rehabilitative services to repair or correct some form of psychic or interpersonal imbalance. Whether it is making that which was repressed conscious, providing an emotionally new experience, helping to alleviate symptoms via behavioral exercises, or using medication to slow down physiological activity, intervention is geared at ameliorating some form of maladaptive behavior or faulty attitude that interferes with a child’s growth and, if unattended, would lead to a nonproductive adulthood.

Soon after society recognized that the child is father of the man, the importance of educating children to take their place in the next generation was quick to follow. Industrialization placed an even greater premium on education as a means of teaching learning and communication. Along with these changes, psychiatry began to differentiate itself from religion as well as from traditional medicine, with the result that even greater emphasis was placed on childhood as the repository of trauma and conflict that, if unchecked or unattended, would result in psychopathology in adulthood. Treatment, that is, psychotherapy, was destined to mushroom and branch into a number of related intervention tactics aimed at healing troubled children [1]. Placement out of the home, either temporarily or permanently, into foster homes, group homes, or institutions; family therapy, group therapy, and chemotherapy; behavior modification, parent counseling, and marriage therapy are among the major methods, all in one way or another, focusing on healing a troubled or troubling child.

An unprecedented interest in children and their development has come to dominate the twentieth century. Many factors have converged to give the child a new status in society: urbanization, longevity, increased technology, and leisure are certainly among the many factors. While we have shown interest in children, it was some time after the end of World War II that we began to see a change in our values that placed children and their needs in the center of our society. Childhood was recognized, not only as a stage of development toward adulthood, but as a sphere for influence. Rock groups, record companies, and clothing specialists could be made or broken overnight on the whims of youth and the merchandising skills of public relations experts. Some manufacturers of remedial learning equipment couldn’t manufacture enough balance boards, geometric cut-